

Linda R. Thorpe, LCSW, 174 West St., Litchfield, CT 06759

Office Policies & General Information Agreement for Psychotherapy Services or Informed Consent for Psychotherapy

This form provides you, the client, with information that is additional to that detailed in the [Notice of Privacy Practices](#) and it is subject to HIPAA preemptive analysis.

CONFIDENTIALITY: All information disclosed within sessions and the written records pertaining to those sessions are confidential and may not be revealed to anyone without your written permission except where disclosure is required by law.

WHEN DISCLOSURE IS REQUIRED OR MAY BE REQUIRED BY LAW: Some of the circumstances where disclosure is required or may be required by law are: where there is a reasonable suspicion of child, dependent, or elder abuse or neglect; where a client presents a danger to self, to others, to property, or is gravely disabled; or when a client's family members communicate to Linda Thorpe, LCSW that the client presents a danger to others.

Disclosure may also be required pursuant to a legal proceeding by or against you. I will always do by best to seek your authorization to release requested information.

EMERGENCY: If there is an emergency during therapy, or in the future after termination, where Linda R Thorpe, LCSW becomes concerned about your personal safety, the possibility of you injuring someone else, or about you receiving proper psychiatric care, she will do whatever she can within the limits of the law, to prevent you from injuring yourself or others and to ensure that you receive the proper medical care. For this purpose, she may also contact the person whose name you have provided on the biographical sheet.

HEALTH INSURANCE & CONFIDENTIALITY OF RECORDS: Disclosure of confidential information may be required by your health insurance carrier or HMO/PPO/MCO/EAP in order to process the claims. If you so instruct Linda R Thorpe, LCSW, only the minimum necessary information will be communicated to the carrier. Linda R Thorpe, LCSW has no control over, or knowledge of, what insurance companies do with the information she submits or who has access to this information.

CONSULTATION: Linda Thorpe, LCSW consults occasionally with other professionals regarding her clients; however, each client's identity remains completely anonymous and confidentiality is fully maintained.

PAYMENTS & INSURANCE REIMBURSEMENT: As part of my practice, Linda R Thorpe is in network with numerous insurance carriers. Clients are expected to pay any co-pays, or payments toward deductible, at time of service. If a client decides to forego use of insurance, full payment is expected at the time of service. My customary rate is \$120 per 60 minute session, and \$100 for a 45 minute session. Initial intakes are \$150 per session. Linda R Thorpe, LCSW may, at her discretion offer a sliding scale fee, if the client expresses difficulty with payment. Unless otherwise agreed upon, a debit or credit card may be kept on file for session payments, copays, payments toward insurance deductibles. Linda R Thorpe, LCSW will bill your insurance carrier if you choose to use an insurance carrier with whom she is in network. A monthly statement will be provided for you if you choose to use out-of-network benefits. It is your responsibility to check on your mental health benefits with your insurance carrier. Please notify Linda R Thorpe, LCSW if any problems arise during the course of therapy regarding your ability to make timely payments.

THE PROCESS OF THERAPY/EVALUATION AND SCOPE OF PRACTICE: Participation in therapy can result in a number of benefits to you, including improving interpersonal relationships and resolution of the specific concerns that led you to seek therapy. Working toward these benefits, however, requires effort on your part. Psychotherapy requires your very active involvement, honesty, and openness in order to change your thoughts, feelings, and/or behavior. Linda R Thorpe, LCSW will ask for your feedback and views on your therapy, its progress, and other aspects of the therapy and will expect you to respond openly and honestly. Sometimes more than one approach can be helpful in dealing with a certain situation. During evaluation or therapy, remembering or talking about unpleasant events, feelings, or thoughts can result in you experiencing considerable discomfort or strong feelings of anger, sadness, worry, fear, etc., or experiencing anxiety, depression, insomnia, etc. Linda R Thorpe, LCSW may challenge some of your assumptions or perceptions or propose different ways of looking at, thinking about, or handling situations, which can cause you to feel very upset, angry, depressed, challenged, or

disappointed. Attempting to resolve issues that brought you to therapy in the first place, such as personal or interpersonal relationships, may result in changes that were not originally intended. Psychotherapy may result in decisions about changing behaviors, employment, substance use, schooling, housing, or relationships. Sometimes a decision that is positive for one family member is viewed quite negatively by another family member. Change will sometimes be easy and swift, but more often it will be slow and even frustrating. There is no guarantee that psychotherapy will yield positive or intended results. During the course of therapy, Linda R Thorpe, LCSW is likely to draw on various psychological approaches according, in part, to the problem that is being treated and her assessment of what will best benefit you. Linda R_Thorpe, LCSW **provides neither custody evaluation recommendation** nor medication or prescription recommendation nor legal advice, as these activities do not fall within her scope of practice.

INTERNET SEARCHES: In principle, Linda RThorpe does not use search engines to look up information about clients. In extreme situations that involve the wellbeing and safety of the client, such as when Linda R Thorpe has reasons to suspect that the client might be in a crisis or if the client has not shown up to sessions nor communicated about it, exceptions might be made.

SOCIAL MEDIA POLICY: Linda R Thorpe, LCSW takes issues of confidentiality and privacy, as well as healthy boundaries relating to the therapeutic relationship, very seriously. In order to protect the right of client and therapist for privacy, in order to safeguard the confidentiality of information shared between them, and in order to avoid confusion and maintain clear boundaries between client and therapist, has chosen to follow these principles concerning the use of social media:

- Linda R Thorpe, LCSW does not engage with clients in any way on social networking sites.
- The preferred method to contact Linda Thorpe LCSW between sessions is the phone. This is especially true when a client wishes to discuss therapeutic related issues.
- For brief pragmatic communications, such as rescheduling a session, clients may also use email, or text if previously agreed upon. To protect your information, please avoid using email or text to communicate matters related to the sessions. Linda R Thorpe, LCSW will not be able to see materials clients post on social media but if they wish to bring something relevant to the treatment or otherwise to the session, they are welcome to do so.

AUDIO OR VIDEO RECORDING: Unless otherwise agreed to by all parties beforehand, there shall be no audio or video recording of therapy sessions, phone calls, or any other services provided by Linda Thorpe, LCSW.

CANCELLATION: Since the scheduling of an appointment involves the reservation of time specifically for you, a minimum of 24 hour notice is required for re-scheduling or canceling an appointment. A \$50 fee will be charged for sessions missed without such notification. Most insurance companies do not reimburse for missed sessions.

I have read the above Office Policies and General Information, Agreement for Psychotherapy Services or Informed Consent for Psychotherapy carefully (a total of 2 pages); I understand them and agree to comply with them:

Client's Name (print) _____

Signature _____ Date _____

Psychotherapist's Name (print) Linda R. Thorpe, LCSW

Signature _____ Date _____

