



## INFORMED CONSENT

**Welcome to Sanctuary Christian Counseling. We appreciate the opportunity to help you.**

It is important to us that you know how we will work together. We believe our work will be most helpful to you when you have a clear idea of what we are trying to do. The purpose here is to answer questions clients often ask about therapy.

We'd like to share the following in a general way:

- About therapy
- Expectations of therapy, some risks and benefits
- Confidentiality and record keeping
- Other important areas of our relationship

After you read this document we can discuss, in person, how these issues apply to your own situation. It is lengthy; please read all of it carefully and thoroughly and mark any parts that are not clear to you. Write down any questions you think of, and we will discuss them at our next meeting. When you have read and fully understood this consent, you will be asked to sign it at the end.

### **About psychotherapy**

Because you will be putting a good deal of time, money, and energy into therapy, you should choose a therapist carefully. We strongly believe you should feel comfortable with the therapist you choose and feel hopeful about the therapy. When you feel this way, therapy is more likely to be very helpful to you.

Our theoretical approach is best described as:

*A biblical and spiritual foundation with an emphasis on relationship and family systems. Various theoretical models may be used depending on the presenting problem and clients' goals.*

The primary focus of this practice is restoring relationship through personal growth. As such, we view therapy as a relationship between you and your therapist. You define the problem areas to be worked on and we use our training and experience to help you make the changes you want to make. Psychotherapy requires your very active involvement and your honesty. It requires your best efforts to change thoughts, feelings, and behaviors. For example, we will ask you to tell us about important experiences, what they mean to you, and what strong feelings are involved. This is one of the ways you are an active partner in the therapeutic relationship.

An important part of your therapy will be practicing new skills that you will learn in our sessions. We might ask you to do exercises, to keep records, and perhaps to do other tasks to deepen your learning outside of our sessions. These are important parts of personal change.

Change can sometimes be easy and quick, but more often it will be slow and frustrating. There are no instant, painless cures and no “magic pills.” However, you *can* learn new ways of looking at your problems that will be very helpful for changing your feelings and reactions.

### **What to expect from our relationship**

As a professional, we will use our best knowledge and skills to help you. We are trained to practice psychotherapy, and each of us has areas of specialization. Should you need help or advice from areas outside our expertise (for example, with legal issues) we will refer you to an appropriate professional.

State laws require us to keep what you tell us confidential. You can trust us not to tell anyone else what you tell us, except in certain limited situations. We explain what those are in the “About Confidentiality” section below. We try not to reveal who our clients are. This is part of our effort to maintain your privacy. Should you meet your therapist on the street or socially, he/she may not say hello or talk to you very much. It will not be a personal reaction to you, but a way to maintain the confidentiality of the relationship.

The relationship between you and your therapist must remain professional in nature. This means it cannot become a business, social, romantic, or purely personal relationship. Likewise, despite the usefulness of social media, your therapist may not connect with you and will not communicate with you regarding your treatment on any social media.

### **The benefits and risks of therapy**

#### *Risks*

As with any powerful treatment, there are some risks with therapy. For example, in therapy, there is a risk that you will, for a time, have uncomfortable levels of sadness, guilt, anxiety, anger, frustration, loneliness, helplessness, or other negative feelings. You might recall unpleasant memories and those feelings associated with the memories may bother you at work, at home, or in school.

Most clients who come for therapy do so because of problems within their life or family. These problems often cause increased anxiety and clients anticipate that the therapy process will lower anxiety to more manageable levels. However, it is quite normal for clients to experience heightened anxiety at the onset and periodically throughout therapy as a result of changing thought and behavioral patterns.

Also, clients in therapy may have problems with people important to them. Family secrets may have to be told for change to occur. Therapy may disrupt a marital relationship and sometimes even lead to a divorce. Sometimes problems may temporarily worsen after the beginning of treatment. In addition, there are those who mistakenly view anyone in therapy as weak, or perhaps as seriously disturbed or even dangerous. Most of these risks are to be expected when people are making important changes in their lives. Finally, even with our best efforts, there is a risk that therapy may not work out well for you.

#### *Benefits*

While you consider these risks, you should know also that the benefits of therapy have been supported in hundreds of well-designed research studies. People who are depressed find their

mood lifting. Others may no longer feel afraid, angry, or anxious. In therapy, people have a chance to talk things out fully until their feelings are relieved or the problems are solved. Clients' relationships and coping skills may improve greatly. They may get more satisfaction out of social and family relationships. Their personal goals and values may become clearer. Ultimately, your growth can occur in many ways; as a person, in close relationships, at work or school, your relationship with God, and, ultimately, in the ability to engage in life more fully.

We do not take on clients we do not think we can help. Therefore, we will enter our therapeutic relationship with optimism about our progress.

### **Consultations/referrals**

If we believe you could benefit from a treatment we cannot provide, we will help you to find it. You have a right to ask us about such other treatments, their risks, and their benefits. Based on what we learn about your problems, we may recommend a medical exam or use of medication. If we do this, we will fully discuss our reasons with you, so that you can decide what is best. If you are treated by another professional, we will coordinate our services with them and with your own medical doctor with your permission.

Private therapy may not be your best treatment. You may best be served by an agency or other mental health professional if you:

- Are likely to require emergency or crisis intervention, extensive case management, or 24-hour coverage
- May have been hospitalized for psychiatric reasons in the last three months or may require hospitalization during therapy
- Have chronic and/or present self-destructive behaviors that are potentially life-threatening, including intensive substance abuse
- Are unable to meet the demands of active participation in therapy
- Require expertise or resources that are not available from Sanctuary Christian Counseling.

We will always keep your best interests as our top priority. It is our ethical responsibility to provide you with the best care possible, which may not be with us. If we do not feel we can provide you with the best treatment we will offer you referrals to professionals who may better fit your needs. Similarly, if you wish to obtain another professional opinion or talk to another therapist we will help you find a qualified professional and provide him or her with the information needed.

### **Confidentiality**

We will treat all the information you share with us with great care. It is your legal right, and our ethical and legal mandate, that our sessions and our records about you be kept private. If we feel it necessary to talk with another professional about your case, or you would like us to share information with another person or professional, you will be asked to sign a Release of Information form before we can talk about you or send our records. In general, we will tell no one what you tell us. We will not even reveal that you are receiving treatment from us.

However, there are situations in which your confidentiality is not protected by state law and by the rules of our profession. Here are the most common cases in which confidentiality is **not** protected:

- If you were sent to us by a court or an employer for evaluation or treatment, the court or employer will expect a report from us. If this is your situation, please talk with us before you tell us anything you do not want the court or your employer to know.
- If you are involved in a legal dispute and you tell the court that you are seeing us, we may then be ordered to show the court our records. Please consult with your lawyer about these issues.
- If you make a serious threat to harm yourself or another person, we are legally required to protect you or that other person. This usually means telling others about the threat. We cannot promise never to tell others about threats you make.
- If we believe a child or elderly person has been or will be abused or neglected and the event has not been reported, we are legally required to report this to the authorities.

The standard of confidentiality applies to those not immediately involved in therapy. For those engaged in couples' or family therapy, we hold a strict "no secrets" policy. Should a situation arise in which an individual participating in couples' or family therapy shares a secret with the therapist and the secret impacts the therapeutic process or the welfare of a participant (such as a continuing affair or substance abuse), we will work with you to share the secret with your spouse/partner/family. If you are not willing to share the secret we will terminate therapy and refer you to another therapist who does not know the secret. We cannot hold secrets and remain balanced with all persons engaged in therapy.

### **Records**

It is our office policy to destroy clients' records 7 years after the end of our therapy. Until then, we will keep your case records in a safe place.

If we must discontinue our relationship because of illness, disability, or other presently unforeseen circumstances, we will ask you to agree to my transferring your records to another therapist who will assure their confidentiality, preservation, and appropriate access.

If we do family or couple therapy (where there is more than one client), and you want to have records of this therapy sent to anyone, all persons over fourteen years old and present will have to sign a Release of Information form.

You can review your own records in our files at any time. You may add to them or correct them, and you can have copies of them. We ask you to understand and agree that you may not examine records created by anyone else and sent to us. In some very rare situations, we may temporarily remove parts of your records before you see them. This would happen if we believe that the information will be harmful to you, but we will discuss this with you.

### **Emails and texts**

We do utilize email and text as helpful tools between sessions for non-clinical aspects of treatment such as scheduling and billing. Although technology has provided greater convenience and speed in communication, emails and texts are not secure and are not recommended as forms

of communication with your therapist about your treatment. We do check our phone messages at least once on weekdays. We may not respond immediately to phone calls, texts, or emails, but we will do our best to respond within 24 hours during the week.

**If your call/text/email is an emergency and requires immediate assistance, please dial 911, go to your local emergency room, or contact Crisis at 717.264.2555.**

Currently, Sanctuary does not have a secure email server. We cannot guarantee the confidentiality of any information communicated by email. If you do send an email or text to your therapist, he/she may choose not to respond in order to protect your confidentiality. We may receive emails or text messages on a computer, laptop, tablet, or phone, any of which will be secured by a password private to your therapist. If that device is lost or stolen, we will notify you of any possible breach of your information.

Some of the risks of electronic communication include: such communications become part of your record; they may be hacked, read, altered, or forwarded by malicious third parties; they may be misaddressed to recipients; they may be kept in saved, sent, or inbox folders unknowingly and risk confidentiality and privacy.

If you are in couple's therapy and send an email or text regarding your partner or treatment, it will be considered part of couple's treatment and may be disclosed in session.

Your therapist will discuss with you their willingness to use email and text, including specific guidelines as to frequency and times of usage.

### **Social Media**

Sanctuary Christian Counseling has a professional presence on Facebook and other social media. If you choose to connect with any of those sites your information will be public and Sanctuary cannot protect your online confidentiality or privacy. We will not interact with you regarding treatment or any case specifics via social media. We will not directly connect with you (i.e. send you a friend or follow request) via social media.

### **Marketing**

We send out regular print or digital communications to current and potential clients as well as the wider community about mental health issues and upcoming events. These may include (but are not limited to) invitations and newsletters. In these general communications no personal information will be shared other than potentially your name and email address. You may unsubscribe at any time either by speaking with one of our therapists, via email, or in writing.

### **Termination**

Termination is the process of ending therapy. It can be a very valuable part of our work. Stopping therapy should not be done casually, although either of us may decide to end it if we believe it is in your best interest. If you wish to stop therapy at any time, we ask that you agree to meet for at least one additional session to review our work together. We will review our goals, the work we have done, any future work that needs to be done, and our choices. If you would like to take a "time out" from therapy to try it on your own, we should discuss this. We can often make such a "time out" more helpful.

**Situations involving legal disputes**

If you ever become involved in a divorce or custody dispute, it is important to understand and agree that we will not provide evaluations or expert testimony in court. You should hire a different mental health professional for any evaluations or testimony you require. This position is based on two reasons:

- any statements from us will be seen as biased in your favor,
- our testimony might affect our therapy relationship, and we must put this relationship first.

**Video/audio recording**

Our therapists are under supervision to enhance clinical skills in several specific areas. Supervision is a normal and regular part of the counseling experience, and video and/or audio tapes are an important part of the supervision process. Allowing videotaping of sessions will enhance therapy in several important ways:

- by enabling your therapist to provide the best help possible by reviewing our own sessions,
- enhancing the supervisory experience and enriching the feedback available from the supervising therapists.

Recordings are shared only between your therapist and supervisor or occasionally in a group supervision setting with other therapists. All information remains strictly confidential by everyone involved. Recordings are erased after being reviewed. By signing below you consent to video and/or audio recording. If you wish to be excluded from recording, please initial here. \_\_\_\_

**Interns and observers**

From time to time we help advance our profession by hosting an intern (usually a graduate student) or an observer (someone interesting in becoming a therapist). Should we have an intern in our practice, you will be asked to sign a separate release indicating your consent. The intern will also have signed a confidentiality agreement with us. You do have the right to refuse or change your mind at any time during your treatment.

**If I Need to Contact Someone about You**

If there is an emergency during our work together, or I become concerned about your personal safety, I am required by law and by the rules of my profession to contact someone close to you—perhaps a relative, spouse, or close friend. I am also required to contact this person, or the authorities, if I become concerned about your harming someone else. Please write down the name and information of your chosen contact person below:

**Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**Phone:** \_\_\_\_\_ **Relationship to you:** \_\_\_\_\_

We truly appreciate the chance you have given us to be of professional service to you, and look forward to a successful relationship with you. If you are satisfied with our services as we proceed, we (like any professional) would appreciate your referring other people to us.

Your signature below acknowledges that you have read and understood this document and agree to the following:

I/We agree to indemnify and hold harmless Sanctuary Christian Counseling LLC, its agents, servants, or employees from any claims, actions, damages, or suits arising from or relating to any psychotherapy, counseling, instruction, or advice rendered during the services provided.

I/We have read the preceding information carefully, understand its contents and agree to receive services for myself/ourselves and/or any child under the age of 14 under these conditions.

I/We agree to the communications policies outlined above, including emails, texts, and social media.

I/We give my permission to Sanctuary Christian Counseling to send me marketing materials as outlined above via email. Or, I/We wish to opt out of marketing by initialing here: \_\_\_\_\_

Client signature: \_\_\_\_\_

Date: \_\_\_\_\_

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