



Consent for Treatment

Outpatient Services Contract

Welcome to The Breakaway LLC. This document contains important information about my professional services and business policies. Please read it carefully and keep note of any questions you might have so that we can discuss them at our next meeting. When you sign this document, it will represent an agreement between us.

Our contact information is: The Breakaway LLC
434 Forest Avenue
Cincinnati, Ohio 45229
513-370-7460

Counseling Services

Counseling is not easily described in general statements. It varies depending on the personalities of the counselor and the client and the particular problems you bring forward. There are many different methods I may use to deal with the problems that you hope to address. Counseling is not like a medical doctor visit. Instead, it calls for a very active effort on your part. In order for the therapy to be most successful, you will have to work on things we talk about both during our sessions and at home.

Counseling can have benefits and risk. Since counseling often involves discussing unpleasant aspects of your life, you may experience uncomfortable feelings like sadness, guilt, anger, frustration, loneliness and helplessness. On the other hand, counseling has also been shown to have benefits for people who go through it. Counseling often leads to better relationships, solutions to specific problems, and significant reductions in feelings of distress. But there are no guarantees of what you will experience.

Our first few sessions will involve an evaluation of your needs. By the end of the evaluation, I will be able to offer you some first impressions of what our work will include and a treatment plan to follow if you decide to continue with counseling. You should evaluate this information along with your own opinions of whether you feel comfortable working with me. Counseling involves a large commitment of time, money and energy, so you should be very careful about the counselor you select. If you have any questions about my procedures, you should discuss them whenever they arise. If your doubts persist, I will be happy to give you contact information of another clinician or help you set up a meeting with another health professional for a second opinion.

Meetings

I normally conduct an evaluation that may last from 1 to 2 sessions. During this time, we can both decide whether I am the best person to provide the services you need in order to meet your treatment goals. By the end of the evaluation, I will be able to offer you some first impressions of what our work will include and a treatment plan to follow if you decide to continue with counseling. For individual sessions, sessions last 50 minutes, with 5-10 minutes for wrap up and



scheduling. For couples, session lengths are 50 minutes, with 5-10 minutes for wrap-up and scheduling. Sessions are usually scheduled one time per week at the time we agree on; although some sessions may be longer or more frequent. 24-hour notice is required to cancel any appointment. ***If you do not come to or late cancel (less than 24-hour notice) a scheduled appointment, you will be expected to pay the session fee the before the next session.***

Professional Fees

The initial session cost for individuals is \$125 and \$75 per 60-minute session thereafter. The initial session for couples is \$175 and \$125 per 60-minute session thereafter. If additional time is requested, I will bill in half-hour increments based on the per session rate. Currently, health insurance is not accepted; however, documentation will be provided to the individual for submittal of reimbursement to your health insurance provider. In addition to weekly appointments, I charge \$125 per hour for other professional services that you may need, though I will break down the hourly cost if I work for periods of less than one hour. Other services include report writing, attendance at meetings with other professionals you have authorized, preparation of records or treatment summaries, and the time spent performing any other services you may request of me. If you become involved in legal proceedings that require my participation, you will be expected to pay for my professional time even if I am called to testify by another party. Because of the difficulty of legal involvement, I charge my hourly rate for both for preparation and attendance at any legal proceeding. I also charge a retainer for any planned involvement in court.

Billing and Payments

You will be expected to pay for each session at the time it is held unless we agree otherwise. Payment schedules for other professional services will be agreed to when they are requested. In circumstances of unusual financial hardship, I may be willing to negotiate a payment installment plan. A credit card convenience fee based on the current rates will be applied to credit card payments. Checks may be used for payments; however, a \$40 return check fee will be billed to you for all returned checks.

Contacting Me

I am often not immediately available by telephone. When I am not available, my phone is directed to my confidential voicemail which I monitor frequently. I will make every effort to return your calls on the same day or the next day, with the exception of weekends, holidays, extended illness, or scheduled times off. I do not review or respond to emails, phone calls, or other methods of contact after hours, business days after 7:00 pm, holidays, weekends, and scheduled time off. Because I am not immediately available, in case of emergency, please contact 513-281-CARE (For Hamilton County), National Crisis Hotline 800-273-8255, 911, or go to your nearest emergency room. If I will be unavailable for an extended period of time, please contact my supervisor Sharon Yockey, MA, LPCC-S, CDCA at 855-553-9355 for assistance.

I prefer that contact through email and text to be limited to purposes of scheduling and canceling



of appointments. Treatment questions and conversations should be reserved for the counseling session.

Professional Records

The laws and standards of my profession require that I keep treatment records. You are entitled to receive a copy of your records unless I believe that seeing them would be emotionally damaging, in which case I would be happy to send them to a mental health professional of your choice. Because these are professional records, they can be misinterpreted and/or upsetting to the untrained readers. I recommend that you review them in my presence so that we can discuss the contents. Clients will be charged my hourly fee of \$75 for any time spent preparing information requests. Clients will be also charged for copying of material from treatment records at a rate of \$5.00 per copy for the first three copies and 10 cents per copy thereafter.

I currently use electronic record keeping and hard-copy file keeping. As part of my management of client files, I use an external device protected with hardware encryption to write progress notes and manage my caseload along with a HIPPA compliant cloud data management service. Hard-copy files are kept locked and secure at The Breakaway LLC located at 434 Forest Avenue, Cincinnati, OH 45229. All electronic records are maintained according to regulations set forth by Ohio State Law after treatment ends. Closed hard-copy files are scanned into our agency's computer, kept at The Breakaway LLC location, and all files are destroyed after seven years as required by Ohio State law. By signing this consent, this method of record keeping is accepted with your understanding of how I manage your case file. Please feel free to ask me if you have any questions or concerns.

Minors

If you are under 18 years of age, please be aware that the law may provide your parents the right to examine your treatment records. It is my policy to ask parents to give up this right. If they agree, I will provide them with only general information about our work together, unless I feel that there is high risk that you will harm yourself or someone else. In this case, I will notify them of my concern. I will also provide them with a summary of your treatment when it is complete. Before giving them any information, I will discuss this matter with you, if possible, and do my best to handle any objections you may have about what I am prepared to discuss.

Confidentiality

In general, the law protects the privacy of all communication between a client and a counselor. And I can release information about our work to others only with your written permission. But there are a few exceptions.

In most legal proceedings, you have the right to prevent me from providing any information about your treatment. In some proceedings involving child custody and those where in which your emotional condition is an important issue, a judge may order my testimony if he or she determines that the issues demand it.



There are some situations which I am legally obligated to take action to protect others from harm, even if I have to reveal some information about the client’s treatment. For example, if I believe that a child, elderly person or disabled person is being abused, I am required to file a report with the appropriate state agency.

If I believe that a client is threatening serious bodily harm to another, I am required to take protective actions. These actions may include notifying the potential victim, contacting the police, or seeking hospitalization for the client. If the client threatens to harm himself or herself, I may be obligated to seek hospitalization for him or her or to contact family members or others who can help provide protection.

These situations have rarely occurred in my practice. If a similar situation occurs, I will make every effort to fully discuss it with you before taking any action. I may occasionally find it helpful to consult other professionals about a case. During a consultation, I make every effort to avoid revealing the identity of my client. The consultant is also legally bound to keep the information confidential. If you do not object, I will not tell you about these consultations unless I feel that they are important to our work together.

Spirituality

The Breakaway LLC provides services from a Christian value base and worldview. Spiritual interventions such as prayer and Bible study may be integrated into the counseling process when and if the client desires. The Breakaway LLC staff members do not impose their values and beliefs on their clients.

Please initial if you would or would not like spirituality integrated into the counseling process.

_____ I would like spirituality integrated into the counseling process.

_____ I do not want spirituality integrated into the counseling process.

Entities

Please initial below that you have read and understand each statement.

_____ I understand that The Breakaway LLC and the Church of the Living God are separate entities. I will hold the Church of the Living God, its officers, officials, employees and volunteers harmless from any and all claims, injuries, damages, losses or suits including attorney fees, arising out of or resulting from the acts, errors or omissions of The Breakaway LLC, except for injuries and damages caused by the sole negligence of the Church of the Living God.

_____ I understand that the information shared are those of The Breakaway LLC and do not necessarily reflect the official opinion of the Church of the Living God. Neither the Church of the Living God’s institutions and bodies nor any person acting on their behalf may be held responsible for the use which may be made of the information contained therein.



Termination

Your participation in counseling is voluntary and you have the right to withdraw from services at any time. I would recommend that when termination is considered, you discuss this with me, so that we can create a plan for termination to minimize any possible negative effects. If you do not show up for 2 or more consecutive scheduled appointments and timely contact has not been made, your treatment will be considered canceled and terminated and you will be financially responsible for any remaining fees for missed sessions. I will attempt to contact you prior to termination of your case via phone and email.

Electronic Communications

Communication via email is accepted with your understanding that email is not a guarantee of privacy. If you email regarding clinical concerns, please be aware that I may not respond to these emails and that the emails become part of your mental health chart. Email communications are not encrypted, which means that email communications are not secure. Because of this, I do not send documents or emails that contain private health information (PHI). I encourage clients to contact me via phone or make an appointment if you would like to communicate about confidential information or obtain any documentation. In effort to further protect your information, I do not accept friend requests from clients on Facebook or other social media websites applications.