

Connection Point Counselling and Consulting Ltd.

Johnathan Kuipers, MSW, RSW

1510 - 1 Street SE, Calgary AB, T2G 2J5

P: 403-909-0639 E: johnathan@connectionpoint.online

Counselling Services Agreement

The purpose of this document is to provide you with an outline of the services we agree upon, which is required prior to receiving the services of a Registered Social Worker.

Please read this form carefully before signing at the bottom

This document outlines:

1. Confidentiality and limits on confidentiality
2. Release of Information
3. Informed consent for assessment and/or treatment
4. Fee disclosure
5. Contact

1. Confidentiality and Limits on Confidentiality

All communications and records relating to the provision of counselling services are confidential and cannot be disclosed without the client's (or guardian's) written consent. The law does, however, place certain limits on the confidential nature of counselling services.

Typically these limits on confidentiality may arise if a counsellor believes there is a risk of harm in situations such as the following:

Imminent danger to self or others

If a person presents an imminent danger to themselves or others, the law requires that steps be taken to prevent such harm, which can include releasing information about a person's mental state.

Abuse of children

If a child is in need of protection from abuse or maltreatment, a report must be filed with the appropriate agency or authorities, which will also be documented in the clinical file. You can ask me about the different reporting obligations that exist for the protection of children.

Abuse of vulnerable adults

If a vulnerable adult is being abused or neglected, a report may be filed with the appropriate government agency, which will also be documented in the clinical file. You can ask me about the different reporting obligations that exist for the protection of vulnerable adults.

In addition, confidentiality cannot be guaranteed under the following circumstances:

Court orders

I may be served with a court order to appear as a fact or expert witness, or to release your records to the courts or their representatives, if you are in trouble with the law or have matters involving potential litigation.

Third party payers

Individuals referred for assessment and/or treatment by a physician, psychiatrist, psychologist, or agency such as an insurance company, can assume that the referring party may want to receive some type of report and/or evaluation.

Minors

A guardian may have the right to impose a limit on confidentiality if you are a minor.

Coroner or medical examiner

If contacted, I am required to provide necessary information to a coroner or medical examiner.

Electronic communication

I will take every precaution to protect your privacy with regard to electronic and telephone communication. However, due to some communication user agreements, I cannot guarantee confidentiality if you contact me electronically.

2. Release of Information

Given the confidential nature of counselling services, I will ask you to provide written consent before speaking to or communicating with anyone about your care. A copy of the consent form can be provided and may be completed at the discretion of the client, or as needed and appropriate.

Examples could include speaking with your physician about whether the use of medication to help manage symptoms is appropriate; to help arrange for you to see another mental health professional or specialist; or to help establish medical leave from work, or financial assistance to cover the cost of therapy with a disability insurance provider.

3. Informed Consent to Assessment and/or Treatment

Benefits of Assessment and/or Treatment

Examples of problems people bring to counselling can include anxiety, depression, anger, grief, relationship concerns, and historic or ongoing abuse. Assessment is helpful in planning interventions, treatment, and support. Having a good understanding about your history can help guide our work together. Counselling can help people gain new understandings about themselves, bring relief from many different problems, teach new ways of coping with and solving these problems, and increase quality of life in numerous ways.

Risks

In working to achieve these benefits, you may address issues or make changes that you experience as distressing. The risks of counselling include but are not limited to, feelings or circumstances becoming worse before they get better, changes in your emotional state, perception or behaviour, and changes in occupational, social, or personal relationships.

Progress and effectiveness

To achieve the greatest progress in counselling, I will work to provide the best and most appropriate evidence based counselling for you. You can facilitate this process by being active in the counselling process, maintaining motivation, completing agreed upon assignments between sessions, and communicating openly and honestly.

The length and frequency of sessions, as well as the duration of treatment can vary significantly between clients, and can be discussed at the beginning and throughout the course of counselling.

Because success and/or satisfaction with counselling cannot be guaranteed, I ask that you advise me if you do not feel satisfied with progress. We may be able to work through the issues, modify treatment, or negotiate a new therapeutic contract. In some instances, this may mean making an appropriate referral or even terminating counselling. You can choose to leave counselling at any time; however, leaving counselling is best accomplished in consultation during sessions, so please discuss any issues as they arise with me directly.

Additional treatment

You are free to pursue, and may be referred to alternative options for treatment such as holistic interventions, psychotropic medications, emergency services, self-help groups, and/or the services of other mental health professionals who may offer a different range of services. The addition of complimentary services should be discussed with your counsellor to explore usefulness and effectiveness, as well as the potential risks.

4. Fee Disclosure

Counselling sessions last 50 minutes unless otherwise stated or agreed upon. I can occasionally increase the length of a session after it has started on a case-by-case basis.

Fees

Unless otherwise agreed upon, my fee is \$150 for individual, couples, and family sessions, and \$140 for telephone and online counselling.

Payment is required within 15 days after your session and can be made using e-transfer, cheque, cash, or credit card. Direct billing with some insurance provider can be arranged. Depending on your coverage, you may be responsible for paying the balance of your invoice.

Consulting, report writing, letters, photocopies, and forms completed outside of the therapy session will be billed in 15-minute increments at the rate of service being provided.

Cancellation policy

The time of your scheduled appointment has been reserved for you. I ask that you give at least two business days advance notice if you need to cancel or reschedule an appointment. If you do not do so, you may be charged the full fee for the session.

Exceptions can be made in the event of an emergency. However, please call as soon as possible. You will be provided with an email to verify your appointment time, unless you decline email communication.

5. Contact

It may be difficult to reach me directly at times because I am often in sessions and meetings. Email allows for more flexibility, however, you are welcome to call me and leave a voicemail with your name, contact information and a preferred call back time. I check my messages regularly and will return your call or email as soon as possible.

If you feel an urgent need to reach me, please call and leave a voicemail stating that the matter is urgent. If I am unable to call or see you as soon as needed, you may choose to contact an alternate source of support, including one of the 24-hour crisis centres:

- Calgary Distress Centre - 403 266 4357
- Hospital Emergency Departments

Signing below indicates that you have read and understand the content of this document and that you agree to the outlined terms and conditions.

Client 1

_____	_____
Name	Preferred Name
_____	_____
Signature	Date

Client 2

_____	_____
Name	Preferred Name
_____	_____
Signature	Date

Client 3

_____	_____
Name	Preferred Name
_____	_____
Signature	Date