fax: 720-815-0222



DISCLOSURE STATEMENT, POLICIES & INFORMED CONSENT

Welcome to psychotherapy with Dr. Valerie Stone of A Vital Life/ A Good Night's Sleep, LLC. Thanks for your patience as we go through some paperwork that is required by law in Colorado.

I got into psychology because I want to live in a world where people feel rejuvenated and restored, able to enjoy time both in- and outside of work. I want a world where people flourish instead of feeling overwhelmed.

It is possible to live a rich, meaningful life, to be productive and energized during the day and to rest well at night, if you do specific things to manage stress, mood, and daily challenges, and keep your sleep on track. That's what I work to help people do. I use an initial diagnostic evaluation and individual therapy as well as family or group therapy where appropriate.

These forms are here to protect you, let you know your rights as a client in psychotherapy, and give you some information about how psychotherapy, privacy and confidentiality work. Because a lot of people sign forms without reading, before you sign, this asks you a few questions to make sure you've understood. Feel free to ask me questions to clarify anything.

Some of the specific wording on these forms is also required by law, especially in Sections A, B, C, & D below, so my apologies if it is a bit lawyer-ly. "I" and "my" will refer to Dr. Valerie Stone of A Vital Life/ A Good Night's Sleep, LLC. I've tried to provide plain English translations for the more legalistic language in a second column.

Lawyer-ese

Section A. REGULATION OF MENTAL HEALTH PROFESSIONALS IN COLORADO

A Vital Life/A Good Night's Sleep LLC (referred to as AVL/AGNS hereafter) is located at 8241 W. Pomona Dr., Arvada, CO 80005, phone 720-414-0242. AVL/AGNS are registered business names of an LLC founded in 2006, SIQ Consulting & Research. You are entering treatment with Dr. Valerie E. Stone, PhD. Dr. Stone earned her doctorate in Psychology from Stanford University in 1990 after getting her B.A. in Astrophysics from Harvard University in 1985. She earned her Respecialization in Clinical Psychology (R.C.P) from Fielding Graduate University in 2017, did her internship training at the Alaska VA Medical Center, and postdoctoral training with Dr. Alisha Brosse, PhD, of the Boulder Center for CBT and the Sutherland Bipolar Center. Valerie Stone is a Licensed Psychologist in the State of Colorado, License No. PSY.0005195.

(Hopefully) Plain English

Section A: Legal information required to be provided to you by the State on how Colorado regulates mental health providers

- 1. This section gives you:
- my contact information,
- locations of practice,
- how my business is registered with Colorado,
- my training and education,
- my license information within Colorado.

One thing to add to "locations" is that I offer video or audio teletherapy through a secure, encrypted telehealth platform or by phone, within Colorado. More details about that are in my teletherapy consent form.

- 2. Everyone who is fifteen (15) years and older entering treatment with Dr. Stone must sign this disclosure statement before therapy begins. A parent or legal guardian with the authority to consent to mental health services for his or her minor children/ward, must sign this disclosure statement on behalf of his or her minor child under the age of fifteen (15) years old. This disclosure statement contains the policies and procedures of AVL/AGNS and is HIPAA compliant. No medical or psychotherapeutic information, or any other information related to your privacy, will be revealed without your permission unless mandated by Colorado law and Federal regulations (42 C.F.R. Part 2 and Title 25, Article 4, Part 14 and Title 25, Article 1, Part 1, CRS and the Health Insurance Portability and Accountability Act (HIPAA), 45 C.F.R. Parts 142, 160, 162 and 164).
- 3. The Colorado Department of Regulatory Agencies ("DORA"), Division of Professions and Occupations ("DOPO") has the general responsibility of regulating the practice of Licensed Psychologists, Licensed Social Workers, Licensed Professional Counselors, Licensed Marriage and Family Therapists, Certified and Licensed Addiction Counselors, and Registered Psychotherapists. The agency within DORA with specific responsibility is the Mental Health Section, 1560 Broadway, Suite #1350, Denver, CO 80202, (303) 8942291 or (303) 894-7800; DORA MentalHealthBoard@state.co.us. The State Board of Psychologist Examiners regulates Psychologist Candidates, and can be reached at the address listed above. Clients are encouraged, but
- Board of Psychologist Examiners regulates Psychologist Candidates, and can be reached at the address listed above. Clients are encouraged, but not required, to resolve any grievances through AVL/AGNS's internal process. It is often helpful to discuss such grievances with your therapist.
- 4. Levels of Psychotherapy Regulation in Colorado include Licensing (requires minimum education, experience, and examination qualifications), Certification (requires minimum training, experience, and for certain levels, examination qualifications). A Licensed Psychologist must hold a doctorate degree in psychology and have one year of post-doctoral supervision. There are also Registered Psychotherapists (does not require any minimum education, experience, or examination qualifications.) All levels of regulation require passing a jurisprudence take-home examination.

(Hopefully) Plain English

2. The state of Colorado requires mental health providers to provide the information in this form, and I include my policies and procedures here.

To make sure you have agreed to the information in this form, I ask everyone to read it, make sure they understand it, and sign it before starting treatment.

If you're younger than 15 or have a legal guardian, your parents or guardian has to sign this, and I want you to understand it and sign it too, if you can.

What you say and do in therapy is confidential, meaning I can't tell anyone or convey information to anyone unless you've said I can in writing or unless certain rare, emergency situations arise (more about that below in Section C, #3)

3. Mental health providers are licensed and regulated in Colorado, and this section explains how that works.

It also gives you contact information for the regulatory agency and how to file a complaint.

If you have a complaint about how things have gone in our therapy together, you don't have to talk to me about it first, but it's often helpful for us to discuss it so we can resolve it.

I want our therapy work together to be beneficial for you. I'm open to you telling me that something didn't feel right or that you're unhappy with how something went, so we can fix it. I'm human - I make mistakes and missteps - and sometimes we need a course correction.

4. There are different kinds of therapists who can be licensed or regulated in Colorado. I am a "Licensed Psychologist."

This section describes different kinds of regulation that therapists have in Colorado, and what's required for each.

No matter the level of licensure or certification, all mental health professionals have to pass an online, open-book exam covering the details of CO laws/regulations about mental health treatment.

Sexual Intimacy:

5. In a professional relationship (such as psychotherapy), sexual intimacy between a therapist and a client is **never** appropriate. If sexual intimacy occurs it should be reported to DORA at (303) 894-2291, Mental Health Section, 1560 Broadway, Suite 1350, Denver, Colorado 80202; State Board of Psychologist Examiners.

<u>Section B: INFORMATION ABOUT YOUR</u> <u>RIGHTS</u>

- 1. As a client you are entitled to receive information from me about my methods of therapy, the techniques I use, the duration of your therapy, if I can determine it, and my fee structure.
- 2. A good collaboration between the two of us means that we both understand your goals for therapy, and that you understand why I'm taking the approach I do to help you reach those goals. Please ask if you would like more information about my methods therapy works best when we communicate clearly.
- 3. You, as a client, may revoke your consent to treatment or your consent to the release or disclosure of confidential information at any time in writing if such revocation is given to your therapist.
- 4. You are always entitled to seek a second opinion from another therapist.
- 5. You are always entitled to end your therapy at any time. It is often helpful, but not required; to discuss the reasons you want to end therapy with Dr. Stone of AVL/AGNS before ending.
- 6. You are entitled to request restrictions on certain uses and disclosures of protected health information as provided by Colorado and Federal law. See AVL/AGNS's Notice of Privacy Policies for more details.

(Hopefully) Plain English

5. Sexual physical intimacy and romantic relationship between a therapist and client is **never** OK. If your therapist is ever sexually intimate with you, that should be reported right away to the regulatory agency listed over here ← to the left.

Section B: Your rights as a therapy client

- 1. I should be transparent with you about what approaches and methods I use in therapy, how long therapy will last if we can know that, and what I charge.
- 2. Therapy works best when we're working towards the same goals for you, and when we agree that we're using a good approach for those goals. You can always ask why we're doing what we're doing, and I should ask for your input.
- 3. You can say at any time that you don't want to continue treatment with me, and revoke this form. If you've given me consent to disclose confidential information to anyone, you can also revoke that at any time.
- 4. Ask for another opinion from a professional if you want to that's your right.
- 5. You can stop therapy any time. To have good closure when therapy ends, it's helpful to talk about it and have a chance for a wrap-up session. Though such closure is helpful, it is not required.
- 6. With rare, emergency exceptions (details below in Section C, #3), you get to say if I share your information or not. More details about sharing protected health and mental health information is in my Notice of Privacy Policies.

Section C. CONFIDENTIALITY

Lawyer-ese

1. Confidentiality of information provided during therapy sessions:

Generally speaking, the information provided by and to a client during therapy sessions is legally confidential if the psychotherapist is a Licensed Psychologist, Licensed Psychologist
Candidate, Licensed Social Worker, Licensed Professional Counselor, Licensed Marriage and Family Therapist, Certified and Licensed Addiction Counselor, or a Registered Psychotherapist.

What this means: "Legally confidential" means the therapist cannot be forced to disclose the information without your consent or in any court of competent jurisdiction in the State of Colorado without the consent of the person to whom the testimony sought relates.

2. Confidentiality in professional consultations

I, Dr. Valerie Stone, occasionally seek professional consultation from Dr. Alisha Brosse, PhD – one of the Rocky Mountain region's leading experts on mood and sleep -- or from other colleagues with expertise I believe would be of value to your treatment. I will not reveal your name to these colleagues, but may describe issues I am seeking consultation for to seek professional guidance.

Only the minimum amount of information necessary to consult will be disclosed.

Importantly, anyone I consult with will adhere to all the same policies and procedures in this Disclosure Statement, including all provisions relating to confidentiality.

3. Legal exceptions to this general rule of legal confidentiality.*

There are exceptions that Dr. Stone/AGNS/AVL will identify to you as any such situations arise. For example,

• Dr. Stone is required to report child abuse or neglect situations immediately to the relevant office of Child Protective Services, who will choose whether or not to investigate further;

(Hopefully) Plain English

1. Generally, as a Licensed Psychologist, I am obligated to keep information you tell me confidential. This obligation includes information about illegal activities. I cannot be forced in court to reveal confidential information during testimony without either your consent or a specific court order. Legal exceptions to confidentiality are detailed below in #3.

2. Confidentiality when I consult with colleagues

Sometimes, in order to give you the best treatment, I seek advice from other mental health professionals. In particular, I may rely on advice from Dr. Alisha Brosse, an expert on mood and sleep. I'm not going to tell anyone I consult with who you are, but I may describe some minimum details about your situation to get this advice.

I will not reveal any more information than is absolutely necessary to get the guidance I need.

Any mental health professional I consult with also has to respect your confidentiality rights.

3. Legal exceptions to confidentiality

In very rare cases, I am allowed to disclose confidential information without your explicit consent, mostly to protect yours and others' health and safety, or to follow certain legal orders.

• If you tell me about the abuse or neglect of a child, someone 70 or older, or a "vulnerable adult" (someone who cannot legally make decisions for themselves), I am required to report it, immediately if it's a child and within 24 hours if an adult.

- Dr. Stone is required to report the abuse or exploitation of an at-risk adult or elder or the imminent risk of abuse or exploitation within 24 hours to the relevant Office of Adult Protection, who will choose whether or not to investigate further;
- if Dr. Stone determines that you are an imminent danger to yourself or
- if you become gravely disabled, Dr. Stone is required to report this to the appropriate authorities.
- if Dr. Stone determines you are an imminent danger to others, including those identifiable by their association with a specific location or entity, Dr. Stone is required to disclose such information to the appropriate authorities or to warn the party, location, or entity you have threatened;
- if Dr. Stone/AVL/AGNS is ordered by a court of competent jurisdiction to disclose such information. * These exceptions are listed in the Colorado statutes, C.R.S. §12-43-218. Provisions concerning disclosure of confidential communications does not apply to any delinquency or criminal proceedings, except as provided in C.R.S. § 13-90-107.

Threats to your safety or that of others

If you communicate any information involving a threat to yourself or to others:

Dr. Stone's preference is to discuss and mutually agree on a way to keep you and others safe. You should be aware that if such an agreement is not possible, Dr. Stone/AVL/AGNS may be required to take immediate action to protect you or others from harm.

Other legal exceptions to confidentiality

Dr. Stone may also disclose confidential information in the investigation of a complaint or civil suit filed against Dr. Stone/AVL/AGNS. It may also be necessary to disclose information in the event of a public health emergency. In addition, there may be other exceptions to confidentiality as provided by HIPAA regulations and other Federal and/or Colorado laws and regulations that may apply.

(Hopefully) Plain English

<u>Note</u>: This doesn't mean you committing the abuse. Even if you tell me about, for example, something you saw your neighbor do, I have to report it. My preference is that we decide together a way to do this reporting, so let's talk about it if we need to.

- If I have reason to believe you're going to kill yourself immediately or soon, or if your mental state means you cannot take care of yourself in a way that threatens your life (e.g. not feeding yourself), I have an obligation to keep you safe.
- If you threaten a specific person, location, or group of people, I have a legal duty to warn that person or people and/or contact law enforcement.
- If a judge orders me to reveal confidential information, I have to do what the judge says, although I can and will appeal the order if necessary.
- ← These are the CO laws that explain exceptions.

Threats to your safety or that of others

In situations where you are a danger to yourself or others, my preference is that we figure out a way together to keep you and others safe. There are many options. Hospitalization is only one of these options if you are in danger, other options might involve family or friends or a crisis center. I want to find the best option for you that ensures safety. If I have to, I may contact law enforcement, a medical provider, an emergency contact or family member to ensure that you and others are safe.

Other situations where I may disclose info

Legally, there are a few other exceptions where I may have to disclose confidential information. If there is a complaint or civil suit filed against me or my business, I may need to release certain records to the relevant authorities. There may be other rare exceptions in Federal or Colorado law.

Lawver-ese

4. Signing a release authorization for disclosure of your confidential information.

Any other disclosure of confidential and protected health information besides those legal exceptions listed above will require you to sign a separate Authorization for Release of Information, which can be revoked at any time if the revocation is given to in writing.

To follow best practices in psychotherapy, Dr. Stone/AVL/AGNS will not treat someone who is taking psychiatric medication without a release to speak with the prescriber.

- **5.** Confidentiality in electronic communications Confidentiality extends to communications by text, email, telephone, videoconferencing and/or other electronic means.
- Dr. Stone/AVL/AGNS cannot guarantee with 100% certainty that such electronic communications will be kept confidential and/or that a third-party may not access our communications in an illegal manner.
- Even though Dr. Stone/AVL/AGNS may use state of the art encryption methods, firewalls, and backup systems to help secure our communication, there is a risk that our electronic or telephone communications may be compromised, unsecured, and/or accessed by a third-party.
- Please review and fill out AVL/AGNS's Consent for Communication of Protected Health Information by Potentially Unsecure Transmissions and Social Media Policy.
- IT staff or hardware engineers may need to have access to any electronically stored information, to maintain computer or telecommunications information systems. Federal law protecting the electronically stored information extends to these workforce members.

(Hopefully) Plain English

4. I can disclose information if you say so

If you want me to be able to talk to/share records with someone else, like your prescriber, a family member, or a sleep doctor, you have to sign a separate release form. Any time you want, you can revoke that release by telling me in writing.

I want to provide the best treatment, so that means I have to follow some rules for my profession. I can not work with you unless I have a release for me and your prescriber to communicate and an emergency contact.

5. Confidentiality in electronic communications

I still have a duty to take all reasonable measures to protect your confidentiality in texts, emails, phone calls, videoconferencing, fax, and other electronic means. Just as for paper records I use locked file cabinets in locked offices, I try my best to use HIPAA-compliant, encrypted technology and passwords that protect your electronic information.

- Electronic communications are, unfortunately, hackable, even though it is illegal, just as a paper envelope can be opened by someone it is not addressed to, even though it's illegal.
- I can never guarantee 100% that someone could not access electronic information illegally, just as I cannot guarantee 100% that a criminal will not break into my office and force open a lock.
- I have a separate form for you to sign to decide which kinds of electronic communications are OK with you, and another one about social media, internet review sites, or web searches.
- Where I use electronic platforms or apps, or need tech support for my internet or devices, IT staff who work for those companies or for me may have access to information. They are legally bound by a written agreement to keep it confidential.

Section D. MAINTENANCE OF CLIENT RECORDS

- 1. In accordance with Rules and Regulations of the State Board of Psychologist Examiners, Dr. Stone/AVL/AGNS will maintain your client record (disclosure statement, contact information, reasons for therapy, notes, etc.) for a period of seven (7) years after the termination of therapy or the date of last contact, whichever is later.
- 1. The state of Colorado requires me to keep certain records for each client I see. That includes signed copies of any agreements, your contact information, therapy goals, notes about your progress towards goals, etc. I have to hold onto these for the 7 years after either we stop therapy or I last have contact with you, whichever is later.

1. continued

- Dr. Stone/AVL/AGNS cannot guarantee that a copy of your Client Record will exist after this seven year period.
- As a client or former client, you may request a copy of your Client Record at any time and you may participate in creating it.

Electronic Records:

- 2. Dr. Stone/AVL/AGNS generally uses paper records, not electronic ones. Medicaid and other insurers require the use of electronic records.
- AVL/AGNS may keep and store client information electronically on Valerie E. Stone, PhD's laptop or desktop computers, and/or some mobile devices.
- In order to maintain security and protect the record, AVL/AGNS and Dr. Stone may employ the use of firewalls, antivirus software, changing passwords regularly, and encryption methods to protect computers and/or mobile devices from unauthorized access.
- AVL/AGNS and Dr. Stone may also remotely wipe out data on mobile devices if the mobile device is lost, stolen, or damaged.
- AVL/AGNS and Dr. Stone may also use electronic backup systems either by using external hard drives, thumb drives, or similar methods. This helps prevent the loss or damage of electronically stored information.

(Hopefully) Plain English

- After 7 years, I probably will not hold onto these records, but will destroy paper records by secure shredding, or delete completely electronic records.
- You can ask to get a copy of this record. In fact, if you want to allow for longer appointments, we can write the notes about your session together.

Electronic Records:

- 2. I prefer paper records, and use them whenever I can, because they feel more secure to me. Certain insurance plans require electronic records, so I have to keep them for clients on those plans.
- I may store information about you electronically on a laptop or desktop computer, in a n encrypted teletherapy platform online, and on mobile devices.
- I use encryption, virus/malware protection and password procedures to keep unauthorized people out of electronic records.
- If I were to lose my mobile devices, I have ways of remotely wiping out data stored on those.
- I back up data using external hard drives using encryption and passwords. Teletherapy platforms I may use back data up either in the cloud using encryption or on hard disk drives using encryption and passwords. These backup systems help prevent data loss

Section E. FINANCIAL POLICIES & WHAT I CHARGE FOR PSYCHOLOGICAL SERVICES

1. As just one person running a private practice, I can't be available for emergencies 24 hours a day or 7 days a week. I care about you and want to be available to you as I am able. Currently I provide <u>non-emergency</u> therapeutic services by scheduled appointment only.

2. Fees:

My fee structure, services, and fee policy are outlined as follows: Here are my rates:

- For individual or family psychotherapy or assessment, I will charge you \$150 an hour.
- For group psychotherapy, I will charge you \$30 per 90-minute group session.
- If you need services related to a court case, my rates are higher, see #5 below.
- The charge of \$150 is based on a 55-minute clinical hour, so I have time to go over notes from our last session and get ready for our session ahead of time.
- If we go over that amount of time, we should both agree to do so. If we agree to do so, that extra time will cost \$3/minute.
- If you have never worked with me before, our first session will be a 90-minute session to cover intake questions and will cost \$225.

- I can talk or communicate by text in between sessions briefly if that is needed. If such communication takes more than 10 minutes, I'll charge you a pro-rated fee of \$3/minute for additional time beyond 10 minutes.
- Since I do not provide emergency services, if you have to seek emergency services from another facility or clinic, you are solely responsible for paying for those services.
- You can pay by cash, check, or credit/debit card by encrypted, secure app, with details about payment by credit/debit card on a separate Credit Card Agreement form.

What gets charged if you can't/don't come to an appointment - 24 hours notice required

- If you're paying for therapy yourself or using any insurance but Medicaid, and you cancel with less than 24 hours notice or don't show up, you will still be charged your full fee for the time I have set aside to work with you.
- I can choose to waive or reduce this charge in exceptional circumstances, but I don't have to do so.

3. Timeliness of payment & late payment policy:

- Payment is due at each session, at the time of service, or when the session would have occurred for late cancel/no-shows.
- Any amounts owed that are not paid within forty-five (45) days from the date of service shall be considered past due.
- Honest communication is important around financial issues. Before your account gets to be past due, my preference is that we can work out a payment plan by talking with each other and coming to an agreement. That's also what I prefer after your account is past due. Let's talk about it so we don't have to get bureaucratic.
- If the open communication approach does not work, and I don't hear from you, please be advised that I may be obligated to turn past due accounts over to a collection agency or seek collection with a civil court action. I really don't want to do that, so let's talk.
- By signing this form on page 12, you agree that I may seek payment for unpaid amounts you owe me/AVL/AGNS with the assistance of a collections agency. Here's how that would work, including my obligation to confidentiality:
 - If I do need to use a collections agency or court, I will provide the collection agency or Court with your Name, Address, Phone Number, and any other directory information, including dates of service or any other information requested by the collection agency or Court deemed necessary to collect the past due account.
 - If a Court is required to collect fees, you will be liable for such legal charges; see #5 below.
 - **Confidentiality:** I will not disclose more information than necessary to collect the past due account. I will notify you of my intention to turn your account over to a collection agency or the Court by sending such notice to your last known address. Please, let's have a commitment not to get to such a point.

As of spring of 2020, I have never had to use such measures.

4. Health insurance coverage policies: I am not currently accepting any insurance, though I hope to.

- I am currently applying to be both a Medicaid and Medicare provider, and to be on certain insurances, such as TriCare. I cannot guarantee at this point that I will be accepted to these plans. If you have one of these types of coverage that includes mental health services, I can discuss options with you, and we can sign an amended agreement if I become able to take your insurance.
- I would be out-of-network for any insurance at this point in time. I can provide an invoice that you can submit to your insurance or health savings account for out-of-network reimbursement, which usually happens only after you've met your deductible.

5. Legal costs: (This is rare)

If you need anything that involves the legal system, my fees are higher.

• Legal Services incurred on your behalf may include but not limited to: attorney fees incurred in preparing for or complying with the requested legal services, testimony, related matters like case research, report writing, travel, depositions, actual testimony, cross examination time, and courtroom waiting time.

• The higher fee is \$450.00 per hour.

Section F: Emergencies

1. What if you are having an emergency?

My work week and business days are from Wednesdays 9am to Sunday 12 noon, and my weekend is Sunday noon through Wednesday 9am.

- If, <u>for any reason</u>, you are unable to contact me by the telephone I have given you, and you are having a <u>true emergency</u>, you agree that you will call <u>911</u>, or check yourself into the nearest hospital emergency room, or call Colorado's Crisis Hotline (844) 493-8255. I cannot provide after-hours service without an appointment.
- You understand that if you leave a voicemail for me on the phone number provided, I will return your call by the end of the next business day, excluding holidays, Mon-Tues, and times I am out of town.
- Because I might be out of town and texting does not provide an "out of town" reply option, you understand that calling me is a better option than texting.
- **2.** What if something happens to Dr. Stone? (I sometimes call this the "what if I get hit by a bus" clause.) In the case that Dr. Stone becomes disabled, dies, or is away on an extended leave of absence (legal term for these is "extraordinary event,") the following Mental Health Professional Designee will have access to Dr. Stone/AVL/AGNS' client files. If Dr. Stone is unable to contact you prior to the extraordinary event occurring, the Mental Health Professional Designee will contact you.

NAME: Alisha Brosse, Ph.D.

ADDRESS: 3020 Carbon Place, Suite200,

Boulder, CO 80301 TEL: 720-252-0611

CREDENTIALS: Licensed Psychologist (Lic. PSY.0002624)

- The purpose of having a Designee is so that you can continue therapy with the least amount of disruption as possible.
- You are not required to use Dr. Brosse for therapy services.
- Dr. Brosse can offer you referrals and transfer your client record, if requested.
- Please let me know if you are not comfortable with the listed Mental Health Professional Designee and we will discuss possible alternatives at this time.

Section G: THERAPY PROCESS & ENDING THERAPY

- 1. I want to do the best for you, <u>and</u> I cannot guarantee that psychotherapy with me will give you positive or intended results. I make every effort to provide a positive and healing experience. Every therapeutic experience is unique and varies from person to person. Results achieved in a therapeutic relationship with one person are not a guarantee of similar results with all client-therapist relationships.
- 2. If I believe the issues you bring to therapy are above my level of competence or outside of my scope of practice or expertise, I am legally required to refer, end therapy with you, or consult and get training/supervision.
- 3. Therapy relationships are different, and I have to be careful to maintain professional boundaries. Because of the nature of therapy, our therapeutic relationship has to be different from most other relationships. To protect the integrity of the therapy process, our relationship must remain solely that of therapist and client. This special relationship means that I can not
 - have social contact with you outside of therapy (unless I am practicing in a small community),
 - have any type of business relationship with you other than the counseling relationship (i.e. I can't hire you, lend to or borrow from you; or trade or barter for services in exchange for therapy),
 - have any kind of romantic or sexual relationship with a former or current client,
 - have a business or social relationship with other people close to you (unless I am practicing in a small community) (see #5 below for what I have to do in that case),
 - hold the role of psychologist for my relatives or friends under any circumstances, or hold that role with relatives of friends, people known socially, or business contacts unless I practice in a small community.

4. As noted above, you have the right to end your therapy with me at any time.

5. Reasons for ending therapy

Ideally, therapy ends when you and your therapist agree that you have met your goals for therapy. Other reasons therapy might end include (but are not limited to) the list below.

- Dr. Stone/AVL/AGNS has discovered a situation in which she knows or has a business relationship with someone you are close to, and after ethical consultation, has concluded that this situation constitutes a conflict of interest that would interfere with effective therapy.
- You need a type of therapy that Dr. Stone/AVL/AGNS does not have the training/resources to provide.
- You have a sleep problem that seems to be primarily medical, not psychological/behavioral.
- You do not feel that your needs are being met in therapy.
- You are unwilling to follow the treatment recommendations made by Dr. Stone/AVL/AGNS, and you have not been able to resolve the issue after repeated discussion in therapy sessions.
- You are not making progress towards your treatment goals even after repeated discussions and different approaches have been tried.
- You late-cancel or fail to show up for scheduled appointments repeatedly (see #7 below).
- You have an outstanding balance that has remained unpaid despite attempts to resolve the matter.
- You fall out of contact with Dr. Stone/AVL/AGNS or change your contact information without updating it with AVL/AGNS (see #7). It may not be possible to provide you with other referrals in this situation.
- Financial circumstances change so that you want to see a therapist with a lower rate than Dr. Stone/AVL/AGNS, or you want to start seeing a therapist covered by your insurance.
- Dr. Stone/AVL/AGNS is moving or re-locating to somewhere that is not convenient for you. In such situations, Dr. Stone/AVL/AGNS will provide you with an appropriate referral to another mental health or medical professional.

6. How to end therapy in a helpful way

There are some general guidelines to how and when to end therapy. You are not required to follow these guidelines, but you may find that they are useful in ending therapy in a way that is most helpful to you.

- If you are upset or disturbed by something your therapist has said or done, it can be a growth experience to discuss your concerns with your therapist before ending therapy (unless that something was sexual intimacy, in which case report it immediately). It can be a chance to practice conflict resolution with someone safe. Many clients are pleasantly surprised when a therapist responds with concern for their well-being and apologizes for mis-steps in therapy.
- It is helpful to begin to discuss ending several weeks ahead, if possible, for the end of therapy.
- If you and your therapist are going to end therapy before one of you would prefer, it works best if you and your therapist know each other's concerns.
- If the reason is financial, it can be helpful to find a mutually agreeable arrangement so that a final session can occur.
- It is often best to do a final session face-to-face, if possible, to avoid ending with a text, in an email, or with a voicemail message.
- One point of final sessions is to review your progress in therapy. Going over what has changed for you can help solidify the gains you've made.
- It can be helpful to discuss what you would like to happen if you run into your therapist in the community, and how your confidentiality will be protected in that situation.
- Another point of final sessions is to go over what are remaining challenges for you, what approaches did and didn't work for you, and what you would look for in other treatment in the future.

7. Ending therapy by losing contact with Dr. Stone/AVL/AGNS.

• If you discontinue therapy for more than sixty (60) days by not communicating with Dr. Stone/AVL/AGNS, treatment will be considered to have come to an end. The legal term is that therapy is "terminated," which, like so many legal terms, sounds worse than it is. It just means "ended."

- If you late-cancel or no-show for 5 sessions in a row, we will need to talk about what is going on for you and decide whether to continue our therapy relationship.
- You might be able to resume therapy by discussing your decision to come back to therapy with me.
- Whether you can start up therapy again will depend will depend on whether I'm available, and it's possible I might not be able or willing to resume therapy.
- This disclosure statement will remain in effect should you resume therapy if one (1) year has not elapsed since your last session.
- However, you may be asked to provide additional information to update your client record.

Questions to show that	you've understood some of the above information:	(these are not exhaustive)
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Please answer these, because showing you understand this contract is an important part of <u>informed</u> consent.

If you have a complaint about something that happens in therapy, what can you do? (p. 2, Section A.2)

If you've done something illegal or someone sues you, can Dr. Stone answer the police's or lawyer's questions without your consent? (p. 4, section C.1)

An example of a situation where Dr. Stone could reveal confidential info to someone without your consent is: (pp. 4-5, Section C.3)

Are you guaranteed to benefit from therapy with Dr. Stone?	If you're not benefitting or if Dr. Stone
doesn't have needed expertise, what does she have to do? (p. 10,	Sections G.2 and G.5)

Dr. Stone will charge you for 55 minutes of individual or family therapy and nothing for phone calls
between sessions that last up to 10 minutes. If we both agree to extend the session beyond that or have a longe
phone call, she will charge you/min for extra time beyond 55 minutes in session or beyond 10 minutes in
a phone call. That payment is due at each (pp. 7-8, Section E.2)

What do you get charged if you cancel an appointment with less than 24 hours notice or fail to attend? (p. 8, Section E.2)

What can Dr. Stone do if you don't pay what you owe within 45 days? (p. 8, Section E.3) What would both she and you prefer to do?

If you're in a crisis and in danger of killing yourself or someone else, what is the preferable thing to do? (p. 5, Section C.3)

In such a situation, what can Dr. Stone do if the two of you can't agree how to keep you or others safe? (p. 5, Section C.3)

When you end therapy, is a final wrap-up session required by law? (p. 3, Section B.3-5, & pp. 10-11, Section G.4-7)

Is Dr. Stone available for emergencies 24/7? (p. 7, Section E.1, p. 9, Section F.1) _______ If Dr. Stone isn't available, what do you agree to do? (p. 9, Section F.1)

Dr. Stone's business days go from weekend days of	to (p	, so she may not be available during he o. 9, Section F.1)
If something happens to Dr. Stone and she can	nnot provide ther	rapy, who do you contact? (p. 7, Section F.2)
What happens when you late-cancel or no-sho	ow for 5 appointn	ments in a row? (p. 11, Section G.7).
If you are being prescribed psychiatric medicate be able to do? (p. 6, Section C.4)	ations, what do be	est practice guidelines mean that Dr. Stone must
AS A CLIENT:		
By signing below, you as a Client are saying toutlined on the previous pages.	that you understar	nd and agree to the policies and procedures
	thout permission	or therapeutic information or other information unless mandated by Colorado law as described in
By signing this form, I affirm that I am fully i Stone/AVL/AGNS is providing, and grant my		
My signature below affirms that the preceding if I am unable to read or have no written languunderstand my rights as a client/patient and shape of the signature of the signatur	uage, an oral expl	
Client Name/Signature		DATE
Valerie E. Stone, PhD (Therapist Signature)		DATE
Special section for after first session: If I did questions of my own, Dr. Stone went over the	•	
Client Signature		 DATE