

# *GoodLife Journey*

INCORPORATED

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## AGREEING TO PSYCHOTHERAPY

### WELCOME

#### About Psychotherapy

Psychotherapy's purpose is to foster well-being. This well-being is experienced in many ways, perhaps most fundamentally by a sense of satisfaction in life's journey. Sessions will focus on creating the conditions that foster a good life journey.

We begin the therapy process by determining what is blocking your well-being. Then, with a variety of psychotherapeutic approaches, we resolve those obstacles. We also foster conditions which empower you to live your most satisfying life.

There are risks involved in psychotherapy. Initially you may experience increased discomfort as thoughts, feelings and behaviors are acknowledged and addressed. This is not unusual. I invite you to speak with me at any time regarding concerns you have about the psychotherapeutic process.

I am able to help many, but not all clients. If I am unable to assist you in developing the well-being you seek, I will help you find a provider or program that can. I may recommend another outpatient mental health provider or participation in an inpatient psychiatric or chemical dependency program.

#### Confidentiality and Its Limits

Information confided in psychotherapy is held in strictest confidence as required by the Ethics Code of the American Psychological Association. Information disclosed in therapy is considered privileged communication under Alaska State Statute. With the exception of specific circumstances described below, disclosures about your treatment will be made only with your written consent.

Under these serious circumstances, confidentiality and privilege may be broken:

- 1.If I have good reason to believe that you will harm another person, I may be obligated to inform that person and warn them of your intentions. I may also contact the police and ask them to protect your intended victim.
- 2.If I have good reason to believe that you are abusing or neglecting a child or vulnerable adult, or if you give me information about someone else who is doing this, I must inform the appropriate protective agencies.
- 3.If I believe that you are in imminent danger of harming yourself, I may legally break confidentiality and call the police or the mobile crisis team.

Also, under the provisions of the Health Care Information Act of 1992, in the event of an emergency, I may speak to another health care provider or a member of your family about you without your prior consent.

Finally, your confidentiality is protected under the provisions of the Federal Health Insurance Portability and Accountability Act (HIPAA). This law insures the confidentiality of any electronic transmissions involving personally identifiable information. Whenever information about you is transmitted electronically (for example, sending bills or faxing information), it will be done with special safeguards to insure your confidentiality.

Occasionally I consult with colleagues about my work. If I discuss your circumstances, I will not mention your name or provide information which could identify you.

Therapy with children and adolescents is most successful when the child's privacy is respected. I will inform you of your child's progress - which should be apparent by changes in attitude and behavior. I will also inform you if your child is engaging in behavior which places him or her at risk of harm.

#### Record-keeping

The ethics and standards of psychology require that I keep Protected Health Information about you in a clinical record of care. You have the right to receive a copy of this record at any time or to request that the file be furnished to another health care provider. There is a charge for this service: \$35 for the first hour or portion thereof, \$10 for each 15 minute increment thereafter.

Prior to releasing your record, I will ask you to review the record. This is a time for you to ask questions about anything you do not understand. Also, if you find an entry that you believe to be in error, please alert me so we can discuss and resolve the situation.

I maintain your records in a secure location that cannot be accessed by anyone else.

## **Appointments and Cancellations**

Sessions are by appointment only. I value your time and will make every effort to see you in a timely manner. If I am late due to unforeseen circumstances, I will either make up the missed time or prorate your bill. If you are late I charge the usual amount and our session will end at the usual time.

Appointments can be changed or canceled at no charge if you leave a message at least 24 hours prior to your appointment time. A full payment is due if you miss your appointment or you call to change or cancel your appointment with less than 24 hours remaining before your appointment. Insurance companies do not pay for missed or canceled appointments; you are responsible for these charges. This fee is due prior to the next scheduled appointment.

Telephone contacts of 15 minutes or less are provided at no cost to existing clients. Telephone contacts 16 minutes or more are billed according to the customary fee schedule.

## **Cost**

Regrettably, at this time I am unable to provide free psychotherapy services or to carry client balances. Your session fee or co-payment is due at the time of our session unless we have made other arrangements. My fee occasionally increases. If a price increase is approaching I will notify you well in advance.

In the unlikely event of unpaid balances, psychotherapy services may be discontinued. Bills left unpaid for more than 90 days may be referred to a collection agency.

## **Phone Calls and Emergencies**

Your call will be returned as quickly as possible during usual office hours. I often return calls mid-morning and again in the early evening.

If you are experiencing an emergency and cannot wait for my return call, please phone:

I. The National Suicide Prevention Lifeline at 1-800-784-2433 or 1-800-273-8255

OR

II. A local resource:

Anchorage: Anchorage Crisis Line at 907-563-3200

Portland: Portland Suicide LifeLine at 503-972-3456

OR

Proceed to the nearest hospital's emergency room.

If you are a veteran, please call the VA Crisis Line at 1-800-273-8255 and press 1.

## **End Note**

The process of psychotherapy has the power to transform your current troubles into the riches of a well lived life. It is my deep privilege to foster your well-being and empower you on your unique good life journey.

**Your signature below indicates that you have read this agreement and agree to its terms and also serves as an acknowledgement that you have received the HIPAA notice form titled, "Notice of Policies and Practices to Protect the Privacy of Your Health Information."**

\_\_\_\_\_  
Signature of Client

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Date