

HEALING IN MOTION THERAPY

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INFORMED CONSENT FOR PSYCHOTHERAPY

General Information: As your potential therapy provider, Healing in Motion Therapy, PLLC (HIMT) is committed to providing quality services to you and to providing the information necessary to be informed about the treatment process. The therapeutic relationship is unique in that it is a highly personal and at the same time, a contractual agreement. Given this, it is important for both client and therapist to reach a clear understanding about how the relationship will work, and what is to be expected. This consent will provide a clear framework for your work together. Feel free to discuss any of this with your therapist before or during treatment.

The Therapeutic Process: You have taken a very positive step by deciding to seek therapy. The outcome of your treatment depends largely on your willingness to engage in this process, which may, at times, result in considerable discomfort. Remembering unpleasant events and becoming aware of feelings attached to those events can bring on strong feelings of anger, depression, anxiety, etc. There are no miracle cures. HIMT cannot promise that your behavior or circumstance will change. HIMT can promise to support you and do the very best to understand you and repeating patterns, as well as to help you clarify what it is that you want for yourself.

Therapy Relationship: The relationship that exists between a therapist and a client is professional rather than social. Therefore, contact with your therapist will only take place in the context of the provision of a professional service. As part of a safe and ethical

therapeutic relationship, it is asked that you do not offer gifts to your therapist, ask your therapist to write references for you, or ask your therapist to relate to you in any way other than the professional context of the therapy sessions.

Your right to privacy and confidentiality are of the utmost importance and your therapist does not wish to jeopardize your privacy. If your therapist sees you in public, they will protect your confidentiality by acknowledging you only if you approach your therapist first. However, if you choose to acknowledge your therapist, they will be more than happy to speak briefly with you but will not to engage in any lengthy discussions in public or outside of the therapy office.

With the rise of social media platforms, the likelihood of you and your therapist crossing paths online is high. Your therapist will not seek you out online (e.g., Google search) or through any social media platforms. Your therapist will also not accept any friend or follow requests from you as a client. You may choose to follow your therapist's business profiles; however, your therapist will not interact with you online through wall postings, @replies, etc. due to potential compromise to your confidentiality. Please also be advised that any communication through social media sites messaging services are not secure.

You and your family's identifying information will not be disclosed during any outside consultation. In the case of child therapy, the parent(s)/caregiver(s) of the child play an instrumental role in the healing of the child. We encourage you to discuss with your child's therapist any approach, technique, or practice with which you have questions, concerns, or need clarification. Your child's therapist will meet with you regularly to discuss your child's progress, offer suggestions for parenting or address concerns.

Complaints: Healing in Motion Therapy, PLLC (HIMT) assures you that clinical services will be rendered in a professional manner consistent with accepted legal and ethical standards. If at any time for any reason you are dissatisfied with clinical services, please contact the Texas Behavioral Health Executive Council, 333 Guadalupe St., Suite 3-900 Austin, TX 78701, (512)-305-7700, <https://www.bhec.texas.gov/discipline-and-complaints/index.html>, to request the appropriate form or obtain more information.

Effects of Therapy: Therapy will focus on treatment goals decided on by you and your therapist. At any time, you may initiate a discussion of possible positive or negative effects of entering, not entering, continuing, or discontinuing therapy. While benefits are expected from therapy, specific results are not guaranteed. It is extremely important and helpful for you to inform your therapist, as soon as possible, of new problems or information that may have a positive or negative impact on you and/or your children. If at any time, clinical concerns in other areas become more pressing; referrals can be made to appropriate agencies or therapists with a scope of practice that more closely supports your specific needs.

Length of Therapy: The length of each therapy session will be limited to the agreed upon appointment time scheduled in advance. It is also important to note that a “therapeutic hour” will be honored each session. For example, a standard 60-minute psychotherapy session will physically run for 53 minutes.

There will be no cap placed on the number of sessions allowed. Therapy services will be provided for the length of time needed to complete treatment goals determined by you and your therapist.

Client Rights and Responsibilities: The length of time needed for healing and the amount of intervention required varies with each individual. As a client, you are in complete control of your treatment and may end your therapy relationship at any time. Participation in a termination session is highly recommended.

Confidentiality: Confidentiality is described as keeping private the information shared between a client and his/her therapist. All therapy sessions are strictly confidential. The following are possible situations that may limit confidentiality:

- a) Concerns that a client is a danger to himself/herself or someone else
- b) The disclosure of abuse, neglect, or exploitation of a child (CPS), elderly or disabled person (APS)
- c) The disclosure of sexual misconduct or unethical behavior of another mental health professional
- d) Ordered by the court to disclose information (Subpoena)
- e) The client directs the release of information
- f) Otherwise required by law to disclose information

In reference to the treatment of minors, risk-taking behavior that is considered detrimental to the safety of the minor or others will be shared with the minor’s parent(s) and/or guardian.

Occasionally I may need to consult with other professionals in their areas of expertise in order to provide the best treatment for you. Information about you may be shared in this context without using your name.

After Hours Emergency services: Therapy through Healing in Motion Therapy, PLLC is not an emergency service. If you or your family should have a clinical emergency and need

assistance, please call 911 or go to your nearest hospital. Additionally, you may contact the National Suicide Prevention Hotline at 800-273-8255.