**Brenda J. Arley, MA, RNCS, LMFT**

**499 Glen Street at True North, Glens Falls, NY 12801 Tel. 518-798-918 Fax 518-223-0567**

**INFORMED CONSENT FOR TREATMENT**

**Policies and Procedures**

Thank you for choosing to set up an appointment to meet with me, Brenda Arley, MA, RNCS, LMFT. If after your initial experience of meeting with me, you decide to engage in a course of psychotherapy, here is some information about my policies and procedures to support you in giving informed consent for treatment.

**Risks and Benefits of Psychotherapy**

An intended benefit of psychotherapy is attaining an optimal level of functioning in life with wholesome relationships, to self and to others, as the foundation.

Potential risks of psychotherapy might be transient emotional discomfort as awareness of patterns of behavior no longer serving your best interest become clear. Or, changes that you make in your behavior patterns create a shift in your relationships which others may react to with discomfort.

**Therapeutic Relationship**

Our work together is held in the container of a confidential therapeutic relationship. It is best that the integrity of this container be protected by not entering other types of relationships with one another, such as a personal friendship or a business relationship, for example. If we should meet in a public setting or social situation, it is important for you to know that I will not initiate a greeting as a means to protect your confidentiality. Should you decide to greet me and acknowledge my presence however, I would be happy to greet you.

**Appointments and Fees**

At the close of an appointment, a follow up appointment will be made with me or you can call the True North office at 798-9187 and the office staff will schedule an appointment for you. Session length is in many cases determined by the authorization given by your insurance company which manages your mental health care benefits. Therefore, session length may vary from 38-52 minutes. Together we will identify the length of session that your insurance company has authorized for you.

A scheduled appointment means time has been reserved for you and we have made a mutual commitment to one another. Should you find that you are unable to keep your appointment, you are asked to cancel that appointment by notifying the office within 24 hours of your appointment. With the exception of illness, an emergency or inclement weather, a non-cancelled appointment fee, equal to the full amount allowed by your insurance company, will be charged. In the event of therapist illness or personal emergency, the office will make every effort to contact you and notify you of the cancellation of your appointment.

For non-insured or private pay clients, payment of the fee is to be made at the time of the appointment and payable to Brenda Arley, MA, RNCS, LMFT. For insured clients, co-payments/deductible amounts are to be made at the time of the appointment and payable to Brenda Arley, MA, RNCS, LMFT. A canceled check will be your receipt of payment and a cash receipt will be given to you for cash payments.

**Insurance**

At the time of your initial session, you will be asked to show your insurance card and provide complete insurance information or have your card photocopied. It is your responsibility to notify me of any changes in your insurance coverage and billing information. Any questions you have about your insurance claims can be addressed to me as I am responsible for submitting claims to your insurance company, not the True North office staff.

**Records and Communication**

Records that I am required to keep regarding your treatment and any communications that I may need to make on your behalf will be treated with confidentiality. There are state and federal laws, however, that obligate me to report suspected abuse or neglect, domestic violence and individuals who pose a danger to themselves or to others. By law, I may disclose this information without your authorization or opportunity to object. Additionally, insurance companies require that you waive your rights to keep your therapy confidential. They require treatment reports which request information about why you are using your outpatient mental health benefit. They will not authorize and therefore will not pay for sessions without this information.

**Contacting Therapist**

Brenda J Arley, MA, RNCS, LMFT can be reached at 518-798-9187 during daytime business hours. The office staff will do their best to answer your call. However, if they are unable to do so at the time of your call, kindly leave a message on the voicemail system indicating that you would like me to contact you and along with your message kindly provide a phone number where you can be reached.

In the event of an emergency, you will need to call 911 or go to the nearest hospital emergency room.

How to contact me in the event of experiencing an urgent need for support, but not an emergency, will be discussed in session on a case by case basis.