



CULTIVATION CLIENT INFORMATION

GENERAL INFO

Processing is not easily described in general statements. It varies depending on the personalities of the guide and client, and the particular issues addressed. There are many different methods we may use to deal with the problems that you hope to address. It will call for a very active and collaborative effort on your part. In order for the therapy to be most successful, you will have to work on things we talk about both during our sessions and at home. This could include assignments, conversations, etc.

Since processing often involves discussing unpleasant aspects of your life, you may experience uncomfortable feelings like sadness, guilt, anger, frustration, loneliness, and helplessness. On the other hand, it has also been shown to have many benefits. Therapy often leads to better relationships, solutions to specific problems, and significant reductions in feelings of distress. But there are no guarantees of what you will experience.

SESSION STRUCTURE, DOCUMENTATION, AND BILLING

- Initial 30 minute Consultation: Free
- All subsequent sessions to be at a fixed rate between \$30 and \$100 to be determined upon during consultation

Each session typically lasts 60 minutes, however they can set or extended to 90 minutes upon client request. This must be determined upon session scheduling a week prior to your appointment.

We use a method of structuring our sessions equally around processing and actions. This can take many forms and will be formulated in collaboration with your needs. The processing and annotation of that processing is based on the BASIC SID model and addresses the following areas on a session to session basis: behavior, affect, biology/chemical intake/sensation,

imagination/perception, cognition, spirituality, and interpersonal relationships. We have a list of prompts to address each of these areas each week which will be turned into processing notes created securely in reverse order that will be kept with your initial assessment, intake, and informed consent forms that comprise your Cultivation Record [CR] which is available to you upon request and at least 1 week's notice [if you would like a physical copy printing fees may apply].

If you are late for a session, that time is lost from your session. Scheduling presents a special problem in private practice because once a given hour is blocked out for a particular person; it cannot be filled again on short notice. Once an appointment hour is scheduled, you will be expected to pay for it unless you provide 24 (preferably 48) hours advance notice of cancellation, under all circumstances.

All fees are due within 14 days of the session. We accept cash, checks, credit cards (Visa, MasterCard and Discover Card) and Paypal. We do not accept insurance as a form of payment for services. We do not participate with Medicare or Medical Assistance. However we can create invoices that may be used with certain insurance policies, we can discuss this during consultation.

CONFIDENTIALITY AND RECORDED INFORMATION

With the exception of certain specific exceptions described below, you have the absolute right to the confidentiality of your counseling. We cannot and will not share anything disclosed during sessions, or even that you are in processing without your prior written consent. Under the provisions of the Health Care Information Act of 1992, we may legally speak to other health care providers or a member of your family about you without your prior consent, but we will not do so unless the situation is an emergency.

We will always act so as to protect your privacy even if you release us in writing to share information. You may direct us to share information with whomever you chose, and you can change your mind and revoke that permission at any time. You may request anyone you wish to attend a processing session with you, however at least 1-week notices must be given to do so.

You are also protected under the provisions of the Federal Health Insurance Portability and Accountability Act (HIPAA). This law insures the confidentiality of all electronic transmission of information about you. Whenever we transmit

information about you electronically (for example, sending bills or faxing information if applicable), it will be done with safeguards to insure confidentiality. If you elect to communicate with us by email at some point, please be aware that email is not completely confidential. All emails are retained in the logs of your or our Internet service provider. While under normal circumstances no one looks at these logs, they are, in theory, available to be read by the system administrator(s) of the Internet service provider. Any email we receive from you, and any responses that we send to you, will be printed out and kept in your Cultivation Record [CR].

- We occasionally find it helpful to consult or refer to local naturopaths or mental health professionals. During a consultation, we make every effort to avoid revealing the identity of our clients. The other professionals are also legally bound to keep the information confidential. We will note all consultations in your CR.
- If you are involved in a court proceeding and a request is made for information concerning your diagnosis and treatment, such information is protected by the psychologist-patient privilege law. We cannot provide any information without your written authorization, or a court order. If you are involved in or contemplating litigation, you should consult with your attorney to determine whether a court would be likely to order us to disclose information.
- If a government agency is requesting the information for health oversight activities, we may be required to provide it for them.
- If we have reason to believe that a child or vulnerable adult has been subjected to abuse or neglect, or that a vulnerable adult has been subjected to self-neglect, or exploitation, the law requires that we file a report with the appropriate government agency, usually the local office of the Department of Social Services. Once such a report is filed, we may be required to provide additional information
- If we know that a patient has a propensity for violence and the patient indicates that he/she has the intention to inflict imminent physical injury upon a specified victim(s), we may be required to take protective actions. These actions may include establishing and undertaking a treatment plan that is calculated to eliminate the possibility that the patient will carry out the threat, seeking hospitalization of the patient and/or informing the potential victim or the police about the threat.
- If we believe that there is an imminent risk that a patient will inflict serious physical harm or death on him/herself, or that immediate disclosure is required to provide for the patient's emergency health care

needs, we may be required to take appropriate protective actions, including initiating hospitalization and/or notifying family members or others who can protect the patient.

While this written summary of exceptions to confidentiality should prove helpful in informing you about potential problems, it is important that we discuss any questions or concerns that you may have now or in the future. You should be aware that, pursuant to HIPAA, we keep Protected Health Information about you in two sets of professional records. One set constitutes your CR. Except in unusual circumstances that disclosure is reasonably likely to endanger the life or physical safety of you or another person, you may examine and/or receive a copy of your Cultivation Record, if you request it in writing. Because these are professional records, they can be misinterpreted and/or upsetting to untrained readers. For this reason, I recommend that you initially review them in our presence, or have them forwarded to a mental health professional so you can discuss the contents. In most circumstances, we will charge a copying fee (plus the cost of shipping and handling).

MINORS & PARENTS

Patients under 16 years of age who are not emancipated and their parents should be aware that the law may allow parents to examine their child's treatment records. While privacy is very important, particularly with teenagers, parental involvement is also essential to successful cultivation. Therefore, it is usually our policy to request an agreement from any patient under 18 and his/her parents allowing us to share general information about the progress of treatment and their child's attendance at scheduled sessions. We will also provide parents with a summary of their child's treatment when it is complete. Any other communication will require the child's authorization, unless we feel that the child is in danger or is a danger to someone else, in which case, we will notify the parents. Before giving parents any information, we will discuss the matter with the child, if possible, and address any objections he/she may have.

CLIENT RIGHTS

- *Right to Request Restrictions* – You have the right to request restrictions on certain uses and disclosures of protected health information. However, we are not required to agree to a restriction you request.
- *Right to Receive Confidential Communications by Alternative Means and at Alternative Locations* – You have the right to request and receive confidential communications of CR by alternative *locations*. (For example,

you may not want a family member to know that you are engaged in therapeutics. On your request, we will send your bills [if applicable] to another address.)

- *Right to Inspect and Copy* – You have the right to inspect or obtain a copy (or both) of CR in our billing records used to make decisions about you for as long as the CR is maintained in the record. We may deny your access to CR under certain circumstances, but in some cases you may have this decision reviewed. You have the right to inspect or obtain a copy (or both) of notes unless we believe the disclosure of the record will be injurious to your health. On your request, we will discuss with you the details of the request and denial process for both CR and Notes.
- *Right to Amend* – You have the right to request an amendment of CR for as long as the CR is maintained in the record. We may deny your request. On your request, we will discuss with you the details of the amendment process.
- *Right to an Accounting* – You generally have the right to receive an accounting of disclosures of CR. On your request, we will discuss with you the details of the accounting process.
- *Right to a Paper Copy* – You have the right to obtain a paper copy of the notice from us upon request, even if you have agreed to receive the notice electronically.

RESPONSIBILITIES OF YOUR GUIDE

- We are required by law to maintain the privacy of your CR and to provide you with a notice of our legal duties and privacy practices with respect to your CR.
- We reserve the right to change the privacy policies and practices described in this notice. Unless we notify you of such changes, however, we are required to abide by the terms currently in effect.
- If we revise our policies and procedures, we will supply you with a revised copy of this document.

COMPLAINTS

If you are concerned that we have violated your privacy rights, or you disagree with a decision we've made, you may send an email/written complaint to the Secretary of the U.S. Department of Health and Human Services. We can provide you with the appropriate address upon request.

We reserve the right to change the terms of this notice and to make the new notice provisions effective for all CR that we maintain. We will provide you with a revised notice by providing you a copy of the notice upon revision. This notice including all above is effective as of July 1, 2015.

Full Name (Please Print)_____

Date: _____

Signature_____

**I am signing this of my own violation and with sound mind and body*