

Ruth Skutezky Counselling Services

counsellorruth@gmail.com 778.886.9946 www.counsellorruth.com
Suite 200, 101 West 16th St., North Vancouver, BC

Client file name: _____

Policy & Confidentiality Agreement

RISKS OF THERAPY: Therapeutic outcomes cannot be guaranteed and will always vary from person to person. There are also potential risks associated with therapy, including stimulating memories, evoking strong feelings, and changes in awareness. Sometimes clients will feel worse before they feel better. You may continually discuss any concerns you are having with me; your safety and well-being are central to our work together.

COMPLAINTS OR QUESTIONS: If you have a complaint or question, I would encourage you to speak to me first. If you would like to talk to someone else, you can contact the BCACC at 250.595.4448.

RATES: My rates are as follows (no tax is charged on these services):

- **Individual Therapy** (50 minutes) - \$120.00
- **Couples Therapy / Pre-marital Session** (75 minutes) - \$195.00

Longer sessions are recommended for couples because it often allows for more work to be done each session, and tends to be a more efficient use of our time together. A reduced-rate may be available if you are a low-income client or student. Please inquire when you book your first appointment if you believe that you qualify.

PAYMENT: Payment for each session is requested at the end of each appointment or prior to. Payment is accepted by credit, cash, email money transfer, or cheque made out to Ruth Skutezky Counselling. A \$25 fee, plus any bank fees incurred, will be charged for any bounced cheques. Telephone consultations are charged by the same hourly rate, except for initial consultations or booking appointments under 15 minutes.

CANCELLED OR MISSED APPOINTMENTS: 48 hours' notice is expected to cancel an appointment. Within 24 hours, half of the cost will be refundable. No shows will be charged at the full rate, as your time is reserved exclusively for you. Late arrivals will not receive their full session, so it is very important to be on time.

COUPLES COUNSELLING: Please understand that my policy is to "have no secrets" between spouses if both are being seen by me, as this can be detrimental to the counselling process. As such, any paperwork you complete (such as assessments) are also "fair game" for discussion in therapy. Other guidelines for couples counselling, along with any questions that you may have, would be discussed further in session.

CORRESPONDENCE BY EMAIL: I will never intentionally share our email correspondence without your consent, however I cannot ensure the complete confidentiality of information exchanged by email. For this reason, if you have sensitive information you are encouraged to share this in person or by phone, along with all ongoing therapeutic work. Urgent matters should be addressed by phone to ensure a timely response. If you are unable to reach me, I recommend leaving a message on my confidential voicemail or calling the crisis line: **1.866.661.3311**.

COUNSELLING BY SKYPE OR PHONE: In some situations I will approve clients for counselling over phone or online. Possible reasons would be logistical constraints of coming to the office or if someone has moved but wishes to continue therapy. In these cases, for liability it is assumed the counselling is situated in the location where I am registered to practice (British Columbia). In the event of a technology failure, I would attempt to reach you by alternative method. In these cases it is also essential that we have a plan for urgent matters, such as using 9-1-1 or your local crisis line. It is important that any client engaging in this form of therapy be mindful of potential drawbacks. All fees charged would be the same rate as in-person counselling.

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LIMITS OF CONFIDENTIALITY: If I see you outside of the office, I will not say hello unless you do so first, in order to respect boundaries of privacy. Everything shared in session is confidential; details of what we discuss will not be released to anyone without your consent, unless:

- I have reason to believe a child is in danger
- There is risk of imminent harm to self or others
- Subpoena or court order
- If the counselling is being paid for by a third party (such as an EAP or ICBC case) and they require progress reports, etc. as part of ongoing funding for therapy.

RECORD KEEPING: it is standard ethical practice to take notes of topics or important issues that come up in therapy. In the case of using art in therapy, I will take photos of art produced as part of record-keeping. Files will be kept in a locked cabinet in my office when not in my possession, and digital files stored on a locked computer.

CONTACTING OTHER HEALTH PROFESSIONALS: It may be helpful or necessary for me to speak to other professionals who are involved in aspects of your physical and emotional health. Wherever possible, this will be done with your understanding the intent of such contact.

*I give permission to contact the following healthcare professionals regarding my care:

Name: _____ Contact: _____

CONSULTATION: In order to provide the best possible service, I may at times consult with another professional(s) about your case; your name and other identifying information would not be used unless unavoidable.

ADDITIONAL CLIENT RIGHTS:

- Clients have the right to withdraw this consent at any time.
- Clients have the right to refuse particular counselling interventions.
- Clients have the right to freely ask for referrals of other helping professionals in the community.

I HAVE READ, UNDERSTAND, AND AGREE WITH THE ABOVE.

Print: _____

Sign: _____ Date: _____ Client (1)

Print: _____

Sign: _____ Date: _____ Client (2)

Counsellor Signature: _____ Date: _____

Ruth Skutezky, MA, RCC