

**OFFICE POLICIES,
AGREEMENT FOR PSYCHOTHERAPY SERVICES,
GENERAL INFORMATION & RESOURCES**

This information has been prepared for you so that you can have a basic understanding of what our agreement is regarding the psychotherapy services you will be receiving.

This agreement is between:

H. Ameeta Singh, MFT #50409 (Therapist) and

_____ (Client).
Print Name

PAYMENT POLICY

Clients are expected to pay the fee for service at the end of each session, unless other arrangements have been made. The only payment methods accepted are cash or cheque. Any fees incurred by the therapist as a result of a cheque not being honored by the bank, will be your responsibility. If during the course of therapy, you experience difficulties regarding prompt payment for services, please speak directly with your therapist to discuss the situation.

The fee for your psychotherapy services is \$ _____

Initial here: _____

ATTENDANCE & CANCELLATION / MISSED APPOINTMENT POLICY

My goal is to provide clients with high quality psychotherapy services. In my experience therapy is very much a collaborative effort between therapist and client. It is most effective when it happens on a regular and consistent basis. As such, it is expected that clients will attend all regularly scheduled sessions. If you cancel your appointment I cannot fill that slot with anyone else. I require 48 hours' notice of cancellation. I am able to accommodate 1 (one) cancelled or missed session every 3 months (which equals 4 sessions a year). If I cancel your session, you will not be charged and it will be rescheduled. There is a \$50 fee for all other missed or cancelled appointments beyond the 1 per quarter (every 3 months). You will have to pay this fee to continue with your sessions or if you want me to hold the appointment slot for you in case of extended absences such as travelling. I cannot hold your slot for more than one week at a time or more than once per year. If it appears that you may be struggling to maintain consistency with your appointments, then I am happy to dialogue and problem solve around this with you. In lieu of cancelling, you might want to consider a phone appointment instead.

Initial here: _____

APPOINTMENT TIME:

Please arrive on time. I am usually available to begin promptly. If you arrive late for a session, we will still need to end within the time frame allotted for your session. The charge for these meetings will be the full amount.

Initial here: _____

INDEPENDENT PRACTICE:

While I may share office space with other mental health professionals, our professional practices are independent. I am not partners with, nor do I have any legal associations with any other licensed mental health professionals.

Initial here: _____

By signing below I acknowledge that I have read and understood the office policies outlined above and have raised any questions I might have about it with my therapist. I have received full and satisfactory response and agree to the provisions freely and without reservations.

Client Name (please print)

Signature

_____/_____/_____
Date

CONSENT FOR TREATMENT

I consent to receiving psychotherapy services from H. Ameeta Singh, MFT #50409. By signing below I acknowledge that I have read, understand and accept the information and policies outlined in this document.

Client Name (please print)

Signature

_____/_____/_____
Date

GENERAL CONSENT FOR TREATMENT OF A CHILD/MINOR

I am the parent/legal guardian of the child/ren listed below and on their behalf authorize them to engage in psychotherapeutic services with Ameeta Singh, MFT #50409. I understand that the policies set out in this document apply to all the children named below.

Child's Name (please print)

Signature of parent/legal guardian

_____/_____/_____
Date:

WHAT IS PSYCHOTHERAPY?

Often times, when we seek out the services of a therapist, it may be because we are going through some difficult situations in our lives and are looking for added support. Psychotherapy can be viewed as a process of change. It is one way we can increase understanding and awareness of our emotions/feelings and how they impact our choices, decision making and behaviors. As we increase understanding about ourselves and what motivates our behaviors we can become empowered to make changes to those behaviors or ways of being, that no longer suit us or that may be negatively impacting our quality of life.

Sitting with a therapist and sharing parts of who you are, your life experiences, emotions and dreams, can at times feel overwhelming and confronting. It can also feel really good. It is a very intimate and sacred space that is created between you and your therapist. This is why it is so important that the space and relationship that is created between therapist and client is a safe one. Without safety, the process of therapy is hindered. Part of what makes it a safe space is confidentiality, boundaries and no judgment.

CONFIDENTIALITY

Confidentiality means that whatever is discussed between you and your therapist is not discussed outside of that room. The only time this confidentiality is broken is if you share with the therapist that either your or someone else's safety is in danger. That means if you are thinking of hurting yourself or someone else or you give the therapist information that indicates there is child or elder abuse going on, then under the law therapists are required to let the appropriate authorities know. Apart from these conditions, I will maintain your right to confidentiality and privacy. Without your verbal or written consent, a therapist is not allowed to discuss information about your therapy with others.

BOUNDARIES

Boundaries are also important in developing a safe space. As you and your therapist sit together and talk about things, there is a trust that is built between you. As such it is critical that the therapist not engage in behaviors that will betray or take advantage of that trust. This would be very harmful and damaging. Therefore there are very clear guidelines within the law that therapists must follow in terms of how they interact with their clients. The reason the law is so clear on this is because it can be easy to confuse the closeness of the therapeutic relationship with other feelings. That's when things get messy. So to keep it simple and clear, the extent of the relationship between therapist and client, exists within the limits and bounds of your regular sessions, and should never include sexual or romantic involvement of any nature. These laws have been created to ensure that the relationship between therapist and client is a safe one. Unfortunately there have been many instances when the trust within that space has been abused, betrayed and/or broken. If this happens you have the right to contact the Board of Behavioral Sciences to discuss your options for addressing sexually inappropriate behavior by your therapist. (B.B.S. #: 916-574-7830)

NON-JUDGEMENT

Another part of what makes therapy a safe space is that there is no judgement on the part of the therapist about any of the information you share with them. Rather it can be viewed as an opportunity to learn about you - your struggles, triumphs, accomplishments, hopes and dreams. Over the course of your therapeutic relationship, by engaging openly and honestly you will further develop your awareness of who you are, your self-esteem, self confidence and skills that will foster a greater sense of empowerment when coping with your life circumstances and situations.

COMMUNITY MENTAL HEALTH RESOURCES AND PHONE NUMBERS

Sometimes emergencies arise between sessions. Please feel free to contact me at 415-203-3807 and leave a message. I do check messages a few times a day and will return your call as soon as I am able. If I am out of town, or you feel you are unable to wait for a return phone call, below are some mental health resources for services in the East Bay and San Francisco, and national hotlines you can call for more immediate assistance.

EAST BAY:

- Emergency: **9-1-1**
- Alameda County Crisis Line 24 hours **800-309-2131**
www.crisissupport.org
- City Of Berkeley Crisis Response Program: **510- 644-8566**
- Alameda County Behavioral Health: **800-491-9099**

SAN FRANCISCO:

- Emergency: **9-1-1**
- SF 24 hour access helpline **415-255-3737 or 888-246-3333**
- Westside Crisis and Emergency: **415-355-0311**
- San Francisco General Hospital, Psych Emergency Services: **415-206-8125**
- SF Suicide Prevention Hotline/24 hour crisis support: **415-781-0500**
- Talkline – a service for parents in crisis – **415-441-5437**
- SF Women Against Rape: **415-647-RAPE (7273)**

NATIONAL HOTLINES:

- National Suicide Prevention Hotline: **800-273-TALK (8255)**
- National Domestic Violence Hotline: **800-799-SAFE (7233)**
- GLBT National Hotline: **888-THE-GLNH (843-4564)**
- GLBT National Youth Hotline: (*up to age 25yrs*) **800-246-PRIDE (7743)**