

Disclosure Information and Terms of Treatment

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Qualifications and Approach to Therapy

I have an MA in counseling psychology and international certification in psychoanalysis from Northwestern Psychoanalytic Society. I have been a practicing therapist since 1992.

I work with individuals and couples and feel comfortable with most presenting problems. My approach to therapy is to pay close attention and observe how you relate to me and yourself. What happens between you and I as we work together gives me an insight into your experience, which I will articulate to you. My intention is to help you understand and integrate something you may be struggling with unconsciously and acting out in other relationships. The way I work necessitates a minimum of weekly contact to maintain enough continuity and progress to motivate further work and growth.

Fees, Appointments and Payment

My fee for a fifty-minute session is \$150. Unless other arrangements have been made with regard to fee and frequency of payment, I will bill you at the beginning of each month for the previous month. If you want insurance to help pay for your therapy I can provide you with a statement which you can submit to them for payment. Or I can bill your insurance if you prefer, but the payment will go to you and you are responsible for keeping track of the payments from them. My work is paid for by all insurance companies. Separate charges are made for reports or letters on your behalf and for extended phone consultations, if necessary.

Therapy can be difficult for the same reasons it is needed. After an initial period of feeling like the therapy is an island of safety, this fades some and issues of mistrust can surface. This often has to do with a fear of trusting and relying on the working relationship we develop for continued growth. This fear must be dealt with and worked through and there can

be a lot of resistance to doing this. For this reason I have found it necessary to have a strong frame for our work to keep the fear of trusting and resistance to the work in the sessions so they can be talked about and worked through. Regular ongoing sessions are important to this process. Therefore we will have an agreement in which all session times we have scheduled are committed to by both of us on an ongoing basis for the duration of our work together. I will hold these times open for you. They are your times. I will expect payment for these session times used or not unless you inform me 72 hours (3 days) in advance of a missed session. I acknowledge that things come up and sessions may have to be missed and I am willing to reschedule missed sessions whenever possible.

How often we meet each week is something we can discuss and review in terms of what is most beneficial to you. I see people up to four times each week.

Confidentiality

Confidentiality is a necessary component of our work together. I will not divulge your identity or anything we discuss to anyone without your permission. If I bill an insurance company or any other third party payer for payment I may have to provide a diagnosis along with your identity and the days we meet.

The following situations are legal exceptions to your right to confidentiality as per RCW (Revised Code of WA) 18.19.180:

1. With the written consent of that person or, in the case of disability, the person's personal representative, other person authorized to sue, or the beneficiary of an insurance policy on the person's life, health, or physical condition;
2. That a person licensed under this chapter is not required to treat as confidential a communication that reveals the contemplation or commission of a crime or harmful act;
3. If the person is a minor, and the information acquired by the person licensed under this chapter indicates that the minor was a victim or subject of a crime, the person licensed may testify fully upon any examination, trial, or other proceeding in which the commission of the crime is the subject of the inquiry;
4. If the person waives the privilege by bringing charges against the person licensed under this chapter;

5. In response to a subpoena from a court of law or the secretary. The secretary may subpoena only records related to a complaint or report under chapter 18.130 RCW (Regulation of Health Professions – Uniform Disciplinary Act).
6. As required under chapter 26.44 RCW (Abuse of Children and Adults Dependent Developmentally).

State Statutes

I am required by law to include the following:

WAC 308 -109 040: Counselors practicing counseling for a fee must be licensed with the Department of Licensing for the protection of the public health and safety. Licensing of an individual with the department does not imply the effectiveness of any treatment.

You have the right to choose a counselor who best suits your needs and purposes.

I am required by law to provide you with the address and telephone number for the Department of Health in the event you have a complaint about acts of unprofessional conduct.

Department of Health
Professional Licensing Services
1300 Quince St SE MS:EY-21
Olympia, WA 98505
360 236-4912

I have been provided a copy of this document and have read it. I have had the opportunity to ask questions and have them answered satisfactorily. I understand this document and agree to the terms of treatment and give informed consent for services.

Name

Signature

Date