

Laili McGrew, LCSW

#LCS16858

423 F Street, Suite 201

Davis, CA 95616

(530) 564-8680

lailimcgrewlcsw@gmail.com

Office Policies and Consent for Treatment

Welcome: Starting therapy may be a new experience for you. This document explains important information regarding my office policies as well as your rights and responsibilities during our work together. Please read it carefully and feel free to ask for clarification if needed.

Appointments and Availability: Sessions are typically 45-50 minutes in length, by appointment only. Clients are generally seen weekly, however, this may vary depending upon need. I am available and check messages during normal business hours, unless I am on vacation. You may contact me at 530-564-8680 or at lailimcgrewlcsw@gmail.com. My voicemail is confidential, however, email is not a secure form of communication **so please do not send any confidential information through an email.**

Cancellations and Missed Appointments: If you need to cancel an appointment, please do so as soon as possible as there may be another client waiting for an appointment who can use the time. **If you cancel your appointment less than 24 hours in advance, or do not show up for your scheduled appointment, you are responsible for paying the full fee, not just the copayment, as insurance will not pay for missed appointments.** If you are more than 10 minutes late for your appointment, and do not notify me that you will be late I may not be available to see you.

Emergencies: If you experience an emergency and are unable to reach me, please call 911, go to the local emergency room or contact the Davis crisis line at 756-5000. If there is an emergency that causes me to be concerned about your personal safety or the possibility of you injuring someone else, I will do whatever I can within the limits of the law to prevent injury and to ensure proper medical care. In case of an emergency or concern for your wellbeing, your signature on this document allows me to contact the person you have listed as the emergency contact on the intake form.

Fees: If your treatment is covered by insurance, your co-pay is payable at the beginning of each session. If you are paying privately, the fee is \$120 for a 50-minute session, payable at the beginning of the session. Sessions longer than 50 minutes and services outside of scheduled appointments (telephone conversations, email, report writing and reading, school meetings etc.) will be billed at the same

rate on a prorated basis and are not covered by insurance. There is a \$25 fee for bounced checks. A limited number of sliding scale appointments are available.

Insurance/Confidentiality of Records: If I am a provider under your plan, I will bill your insurance for the provided service. You will be responsible for the co-payment each session. It is your responsibility to notify me if there are any coverage changes with your insurance plan. You are financially responsible to me for all charges, including any unpaid charges by your insurance company or any third party payor. **Disclosure of confidential information may be required by your health insurance carrier in order to process claims or to gain authorization for continued treatment.** Only the minimum necessary information will be provided to the carrier. Unless authorized by you explicitly, psychotherapy notes will NOT be disclosed to your insurance carrier. It is important to know that I do not have control over what the insurance company does with the information submitted, and that there may be some risk to confidentiality with the submission of these claims as there are instances when data breaches do occasionally occur.

Confidentiality: What we discuss in therapy is private and confidential, and in most circumstances, I will not release information without your prior written consent. If we agree that consultation with others (health care providers, family members, teachers etc.) may be beneficial to your therapy, I will ask you to sign a written Authorization to Exchange/Release Information. As a licensed mental health provider, I am required by law to contact the appropriate authorities, but am not required to alert you in the following situations:

- If there is suspected abuse or neglect of a child, elderly or disabled person
- If you threaten serious bodily harm to another person
- If you are at risk for harming yourself or are unable to care for yourself
- If I am ordered by a court to release information

If it is clinically appropriate, I will make every effort to discuss the situation with you prior to breaking confidentiality.

Risks and Benefits of Therapy: I believe that coming to therapy takes courage and strength. At times it may feel uncomfortable because it requires trust and vulnerability. Some clients find that as they explore, they may feel worse before they feel better. Talking about unpleasant situations, feelings and thoughts may cause your symptoms to get worse before they improve. You always have the right to inform me when things feel unsafe and we will work together to establish a safe environment. No specific outcome is guaranteed and some clients may find that therapy leads to unexpected changes. While there may be some risks to therapy, there can be many benefits. Clients often find that having a safe place to share, without judgment, can help them gain insight about patterns and behaviors they would like to change. Therapy can be an opportunity to explore values and goals. It is a place to learn new coping strategies and resolve problems that may be keeping you stuck.

The Therapeutic Process: You will have the opportunity to share concerns, discuss the desired changes and develop goals for therapy. It is important that you are actively involved in your treatment and that you are honest and open. You have the right to ask me questions regarding my assessment or treatment at any time. If I feel that I am not qualified or able to help you, we will discuss this and I will provide you with a referral to qualified provider. As you make progress, we will discuss the appropriate time for termination. If you have concerns about your progress, I encourage you to discuss this with me. You have the right to terminate therapy at anytime, however, I believe it can be damaging to end therapy abruptly.

Family Therapy: If I am seeing your family for therapy, I reserve the right to use my own clinical judgment in disclosing information family members may choose to share with me individually. I will first give the individual the opportunity to make the disclosure himself or herself.

Child Custody/Litigation: I am not a child custody evaluator, therefore, I can not make recommendations or conclusions to the court regarding custody. Due to the fact that court appearances often involve making a full disclosure of confidential information, it is agreed that should there be legal proceedings (such as, but not limited to divorce, custody disputes, lawsuits etc.), neither you, nor your attorney or anyone acting on your behalf will call on me to testify in court or to release any psychotherapy records.

Minors In Therapy: For people under the age of eighteen, please be aware that the law may give your parents or guardians the right to obtain information about your treatment and to see your records. In order to ensure a safe environment in therapy, I ask that parents understand that I will not share specifics of what is discussed in therapy, but will share general updates and concerns as they are helpful to the therapeutic process. I will always try my best to inform and involve the minor about how this information will be shared. I will involve the parents or guardians if I believe there is a high risk of serious harm to the minor or others.

Records: I maintain confidential clinical records including your therapy goals, progress in treatment, notes on each session and dates and fees for sessions. These records are only released with your written consent, except under the legal exceptions described above. You are entitled to receive a copy or summary of your records and the request must be in writing. I reserve the right, under California law, to provide you with a treatment summary in lieu of a copy of the actual records, if I believe that seeing your complete record would be emotionally damaging to you. You will be charged the prorated portion of my hourly rate for the time I spend reviewing and preparing the requested information.

Ethical Standards: Davis is a small town and we may encounter one another in the community. If there is the potential for a dual relationship, we will discuss this as I am very careful to maintain clear boundaries. I will never acknowledge that we have

