

NARDINE AZAB, M.S, MFT

www.nardineazab.com

➤ THERAPIST BACKGROUND AND QUALIFICATIONS

I have a graduate degree in psychology and I am licensed by the California Board of Behavioral Sciences to practice Marriage and Family Therapy (LMFT #51418). I am experienced in working with families, individuals, adolescents and children. I use a variety of theoretical orientations to address treatment needs including: Systemic family therapy, cognitive behavioral therapy, attachment theory, and solutions focused therapy, to name a few.

➤ RISKS AND BENEFITS OF THERAPY

Psychotherapy is a process in which therapist and client work together to address a myriad of issues, events, experiences and memories for the purpose of creating positive change. The rate of progress and success of the therapeutic process varies for each individual client and often depends on the nature of the particular issues being addressed as well as other factors.

Participating in therapy may result in a number of benefits to clients, including reduced stress, improved interpersonal relationships and increased self-confidence. These benefits require substantial effort on the part of clients, including an active participation in the therapeutic process, honesty, and a willingness to challenge certain feelings, thoughts and behaviors. There is no guarantee that therapy will yield any or all of the benefits listed above.

Participating in therapy may also involve some discomfort, including unpleasant memories, evoking strong feelings and discussing uncomfortable experiences. There may be times in which a therapist will challenge client's perceptions and assumptions, and offer different perspectives. The issues presented by clients may result in unintended outcomes, including changes in personal relationships. A therapist's role is to facilitate change for clients, supporting their decisions. A therapist should never make decisions for you or tell you what to do.

➤ DUAL RELATIONSHIPS

Dual relationships in therapy refer to when multiple roles exist between therapist and client and are often considered unethical. Examples include: business ventures, friendships outside of therapy, sexual relationships and online or social media friendships. It is important to remember that therapist-client relationship is strictly professional in nature.

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➤ CONFIDENTIALITY

Information disclosed by clients is generally confidential and will not be released to any third party without your written authorization. There are; however, exceptions to confidentiality where I am required or permitted by law to disclose information.

Exceptions to confidentiality include

- Reporting suspected child, elder or dependent adult abuse
- When a client makes a serious threat of violence towards a reasonably identifiable victim
- When a client is at imminent risk of harm to him/herself
- When a client is involved in a court proceeding and there is a court order or a subpoena to disclose information

➤ BILLING, FEES AND PAYMENT PROCEDURES

1. **Fees:** The fee will be discussed and agreed upon before coming to your first appointment. Individual appointments are typically 50 minutes. Payment of fees must be made in full at the beginning of each session. You can also choose to pay for several sessions in advance. Payment can be made in cash, or credit card. A Credit card must be put on file and all payment processing services used are HIPPA compliant, ensuring your privacy and confidentiality. Therapist reserves the right to periodically adjust fees. Clients will be notified of any fee adjustment in advance.
2. **Insurance:** At this time, I am unable to accept any insurance. If you are relying on reimbursement by your insurance provider, you are expected to pay your full fee first, and then apply for reimbursement with your insurance. I will be happy to provide you with a payment receipt to help with this process. It is the client's responsibility to confirm insurance coverage for out of network providers, copays and other related charges.
3. **Cancellations:** From time to time you may not be able to keep an appointment. The policy at my office is that appointments missed without at least 24-hour notice will be billed at the full fee and will be charged at the time your session is normally scheduled. It is appreciated if you can give as much notice as possible so that another person, who may be waiting for the needed time can be scheduled. The voicemail system is operating 24 hours a day so notice of cancellation can be given at any time.
4. **"No Shows":** Failing to show up for a scheduled appointment ("No Show") is discourteous to the therapist and generally demonstrates a disregard to the therapy process. A "No Show" will be billed at the full fee. It is understood that on rare occasions an emergency may result in your inability to attend a scheduled appointment. However, two "No Shows" may result in termination of therapy.

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➤ TELEHEALTH

Telehealth refers to providing psychotherapeutic services remotely via technologies such as video conferencing or phone. Although telehealth has some benefits, it also poses some risks. Since telehealth takes place outside of the office, there is the potential for others to overhear sessions. Client should make every effort to maintain privacy during sessions. Therapist will also conduct sessions in a private space and via secure and HIPPA compliant modalities. However, use of technology carries the inherent risk of such issues as: others gaining unauthorized access to sessions, stored data being compromised, technology failing or stopping to work.

All telehealth treatment is considered confidential and limits/exception to confidentiality, as outlined in this informed consent, apply in the same manner. Both therapist and client will refrain from recording or taking screenshots of any therapy session. At the beginning of each session, therapist will verify client's full name and location to ensure that services provided comply with current laws/regulations pertaining to telehealth. In case of client experiencing a crisis during a session, therapist will attempt to utilize available emergency resources or have client call 911 or go to the nearest emergency department.

In some occasions, telehealth may not be as effective or appropriate for some clients depending on their presenting problems and unique circumstance. In such case, therapist reserves the right to recommend in-person treatment or to offer other referrals as needed.

➤ SOCIAL MEDIA AND COMMUNICATION POLICY

1. Social Media

Therapist is governed by the appropriate licensing and regulatory boards, whose current Code of Ethics considers virtual relationships as equivalent to face-to-face relationships and thus follows the same considerations in regards to dual relationships. Therefore, therapist shall not follow, like or accept friend request from client on any social networking platforms. Any professional online presence for therapist is separate from personal presence and shall be used for business purposes only such as directing potential clients to official practice website or informing the public of related topics.

2. Email

Should client need to communicate with therapist through email, it will be done through the secure email system in place which is HIPPA compliant. Communication through email is limited to administrative purposes only such as scheduling, sending paperwork/forms, general questions...etc. It should not be used as a means to provide therapeutic content, communicate sensitive/urgent details or to replace sessions.

3. Phone Calls

Generally, there is no charge for brief phone calls, unless they become unusually frequent or lengthy. You will be informed in advance if you are asked to pay for a call that is becoming extended or for future calls. Voicemail is confidential and you may leave brief, non-sensitive information on it. However, please be aware that it is not checked periodically and thus is not suitable for crisis and emergency needs (please access these resources accordingly)

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➤ **RECORDS AND RECORD KEEPING**

Therapist may take notes during sessions as part of the treatment process. These notes constitute therapist's clinical and business records. Such records are the sole property of therapist. Therapist will not alter his/her normal record keeping process at the request of any client. Should client request a copy of therapist's records, such a request must be made in writing. Therapist reserves the right, under California law, to provide client with a treatment summary in lieu of actual records. Therapist also reserves the right to refuse to produce a copy of the record if it may be detrimental to the client.

➤ **PROFESSIONAL CONSULTATION**

Professional consultation is an important component of a healthy psychotherapy practice. As such, therapist regularly participates in clinical, ethical, and legal consultation with appropriate professionals. During such consultations, therapist will not reveal any personal identifying information regarding clients.

➤ **THERAPIST AVAILABILITY**

For routine and non-urgent matters, you can reach me by phone, text or email. I try to respond to clients within 24-48 hours. In the event that I am away from the office for an extended period of time, I will let you know of coverage information. If you are in crisis or experiencing an emergency, please contact the Contra Costa Crisis hotline number at (800) 273-TALK, call 911 or go to the nearest emergency room.

➤ **TERMINATION OF THERAPY**

Therapist reserves the right to terminate therapy at his/her discretion. Reasons for termination include, but are not limited to, untimely payment of fees, failure to comply with treatment recommendations, conflict of interest, failure to participate in therapy, client's needs are outside of therapist's scope of competence or practice, or client is not making adequate progress in therapy. Client also has the right to terminate therapy at his/her discretion. Upon either party's decision to terminate therapy, Therapist will generally recommend that client participate in at least one, or possibly more, termination sessions. These sessions are intended to facilitate a positive termination experience and give both parties an opportunity to reflect on the work that has been done. Therapist will also attempt to ensure a smooth transition to another therapist, if needed, by offering referrals.

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➤ **ACKNOWLEDGMENT**

By signing below, client acknowledges that he/she has reviewed and fully understands the terms and conditions of this Agreement. Client agrees to abide by the terms and conditions of this Agreement and consents to participate in psychotherapy with Nardine Azab, MFT.

Signed: _____

Date: _____