



Client-Therapist Agreement

Limits of Confidentiality: Doornekamp and Associates therapists adhere to the highest ethical standards of the profession of psychotherapy and/or couple and family therapist. Confidentiality is thus assured for all clients, except in those circumstances in which therapists are legally mandated to limit confidentiality. Such circumstances include:

External Limits:

- Threat of harm to self or others (Mental Health Act)
- Possible abuse or neglect of a child (Child and Family Services Act)
- Sexual abuse by a registered professional (Regulated Health Professions Act)
- Information is required for legal process (subpoena / affidavit from therapist’s file)

Internal Limits:

- Your case may be discussed in a supervision setting, in which case, only details pertinent to enhancing therapist skill delivery are provided.

These limits, as well as protocol in limiting confidentiality, are discussed in the initial session with clients.

Payment of Fees: Fees are to be paid in cash or by cheque at the end of each session. At the therapist’s discretion, clients may be allowed to pay at the end of every 2nd session. However, if a client owes for 2 sessions, a 3rd session will not be scheduled until the balance owing is paid.

Length of sessions: Each session lasts approximately 45 – 50 minutes. We make every attempt to schedule regular time slots to make it easier for clients to remember appointments.

NSF cheques: For cheques that are returned from the bank due to insufficient funds, a \$25 administration fee will be charged at the time the client replaces the cheque. If another NSF cheque occurs with the same client, the client will be requested to make all future payments in cash.

Risks and Benefits: While therapy can be beneficial in relieving some of the emotional distress connected with presenting issues, painful emotions can be evoked in the process of therapy.

Client Agreement to Treatment Plan: Clinical goals and treatment plan are established with the client within the first few sessions. These can be reviewed at any time in the process of therapy.

Client Name(s)

Client Signature(s)

Therapist Signature

Date

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