Heather R. Harding, LMHC, LLC

Licensed Mental Health Counselor Independent Therapist License#: MH7804

Office Procedures Individual Therapy

I would like to welcome you to my office and thank you for coming. During the initial visit you will be asked to complete some routine forms which will include a new client information form and an informed consent for psychotherapy.

Therapy typically will last minimally for twelve months, sometimes longer. However, the number of sessions required for therapy will depend on the issues to be addressed, the recommendations made by myself, and your commitment to working through the issues. Looking at yourself is hard work sometimes and at times can be stressful. It is to be understood that participating in therapy is a way to better understand yourself. You are free at any time to terminate therapy. However, if you feel termination is necessary, it is recommended that you discuss your reasons for termination **in-person** and I recommend two to three additional sessions are scheduled for proper closure. Ending the therapeutic relationship is an important part of the process and it honors that relationship to meet in person. It is not appropriate to use texting, email, or voicemail to end therapy. Rather, it should be a conversation we have.

Individual sessions are 45 minutes in length and the fee is \$150 per session. Every January 1st I will have a fee increase that reflect the cost of living increase. You will be notified in a timely manner of the new fee. Payment is required at the time of the scheduled session. I accept cash, check, and credit cards. If a check is returned for nonsufficient funds, the client will be charged a fee \$32. Telephonic or Skype sessions can be discussed and arranged, if appropriate, and will be charged at the regular session rate. All cancellations require a **three business day** notification. When scheduling appointments you are reserving your specific time for your therapy. If such notice is not given, regardless of reason, you will be charged the regular session fee. I do not accept cancelled sessions on my voicemail. If you need to cancel a session, please call my office. Cancelled sessions should be discussed in-person or with a phone conversation.

Please be assured that all information I receive from you will be kept **strictly confidential** (as obeyed by Florida law). Absolutely no information will be released about you or your case to anyone without your written authorization and consent. Please note that there are exceptions to the law of confidentiality in the state of Florida. Such instances include the following:

- 1) If I have reason to believe that you or another individual is in physical danger, including a child or elder person and/or are participating in therapy for the purpose of committing a crime.
- 2) A court order. This might include: when your emotional or mental condition is important information for a court's decision; during a civil commitment hearing for psychiatric hospitalization; if you are seeking a court ordered evaluation; or under the provisions of the Patriot Act. Agents of Homeland Security may request information on you form me without notifying you and prohibiting me from informing you that you are under investigation.

ou have any questions or concer-	ns, please feel free to b	oring them to my attention. I will be with you short
Client's Signature	Date	Heather R. Harding, LMHC/Date

Client's Printed Name