Christine A. Volker, Ph.D. 1899 E. Roseville Pkwy., Suite 140, Roseville, CA 95661 (916) 812-3004

CONSENT TO TREATMENT Office Policies and General Information Agreement for Services

Dr. Volker is a sole practitioner operating in a shared office space. The other practitioners in the office suite have no relation to Dr. Volker's practice and share no business or legal liability with Dr. Volker. Dr. Volker holds licenses in Clinical Psychology, PSY18161, in Marriage and Family Therapy, MFT29746 and holds a master's degree in Clinical Art Therapy.

If you need to contact Dr. Volker between sessions, please leave a message on voicemail (916) 812-3004 and your call will be returned within the next business day. If an emergency situation arises, please indicate it clearly in your message. If you need to talk with someone immediately, call 911. If there is an emergency during our work together or in the future after termination where Dr. Volker becomes concerned about your personal safety, the possibility of your injuring someone else, or about your receiving proper psychiatric care, she will do whatever she can, within the limits of the law, to prevent you from injuring yourself or others and to ensure that you receive the proper medical care. For this purpose, she may also contact the person who you name as your "emergency contact" on the Intake Sheet.

CONFIDENTIALITY: All information disclosed within sessions and the written records pertaining to those sessions are confidential and may not be revealed to anyone without your written permission, except where the law requires disclosure.

Some of the circumstances where the law requires disclosure are when there is a reasonable suspicion of 1) child abuse or neglect; 2) dependent adult abuse or neglect; and 3) elder abuse or neglect. Other circumstances which require disclosure are 4) if you, the client present a danger to self, 5) or to an identifiable victim, and 6) if you, the client, are gravely disabled due to a psychiatric condition. Disclosure may also be required pursuant to a legal proceeding if you place your mental status at issue in litigation initiated by you. In such cases, the defendant may have the right to obtain the psychotherapy records and/or testimony by Dr. Volker.

In couple and family therapy, or when different family members are seen individually, confidentiality and privilege do not apply between the couple or among family members. Dr. Volker will use her clinical judgment when revealing such information. Dr. Volker will not release records to any outside party unless she is authorized to do so by all adult couple or family members who were part of the treatment.

Due to the nature of the therapeutic process and the fact that it often involves making a full disclosure with regard to many matters which may be of a confidential nature, it is agreed that should there be legal proceedings (such as, but not limited to divorce and custody disputes, injuries, lawsuits, etc.), neither you nor your attorney, nor anyone acting on your behalf will call Dr. Volker to testify in court or at any other proceeding, nor will a disclosure of the psychotherapy records be requested.

Dr. Volker consults regularly with other professionals regarding her clients; however, a client's name or other identifying information is never disclosed. The client's identity remains completely anonymous and confidentiality is fully maintained.

PAYMENT AND INSURANCE REIMBURSEMENT: Clients are expected to pay the standard fee of \$150 at the end of each session unless other arrangements have been made. Telephone conversations, site visits, report writing, release of information, longer sessions, and travel time etc. will be charged at the same rate, unless indicated and agreed otherwise. Please notify Dr. Volker if any problem arises during the course of therapy regarding your ability to make timely payments. Not all issues/conditions/problems are covered by your insurance. It is your responsibility to verify the specifics of your coverage.

MEDIATION AND ARBITRATION: All disputes arising out of or in relation to this agreement to provide psychotherapy services shall first be referred to mediation, before, and as a pre-condition of the initiation of arbitration. The mediator shall be a neutral third party chosen by agreement of Dr. Volker and the client(s). The cost of such mediation, if any, shall be split equally, unless otherwise agreed. In the event that mediation is unsuccessful, any unresolved controversy related to this agreement should be submitted to and settled by bind arbitration in Placer County, which will act in accordance with the rules of the American Arbitration Association that are in effect at the time the demand for arbitration is filed. Notwithstanding the foregoing, in the event that your account is overdue (unpaid) and there is no agreement on a payment plan, Dr. Volker can use legal means (court, collection agency, etc.) to obtain payment. The prevailing party in arbitration or collection proceeding shall be entitled to recover a reasonable sum and for attorney's fees. In the case of arbitration, the arbitrator will determine that sum.

THE PROCESS OF THERAPY/EVALUATIONS: Participating in therapy can result in a number of benefits to you, including improving interpersonal relationships and resolution of the specific concerns that led you to seek therapy. Working toward these benefits, however, requires effort on your part. Psychotherapy requires your active involvement, honesty and openness, in order to change your thoughts, feelings and/or behavior. Dr. Volker will ask for your feedback and views on your therapy, its progress and other aspects of the therapy and will expect you to respond openly and honestly.

Sometimes more than one approach can be helpful in dealing with a certain situation. During evaluation of therapy, remembering or talking about unpleasant events, feelings or thoughts can result in you experiencing considerable discomfort or strong feelings of anger, sadness, worry, fear etc. or can cause you to experience anxiety, depression, insomnia etc. Dr. Volker may challenge some of your assumptions or perceptions or propose different ways of looking at, thinking about, or handling situations which can cause you to feel very upset, angry, depressed challenged, or disappointed. Attempting to resolve issues that brought you to therapy in the first place, such as personal or interpersonal relationships may result in changes that were not originally intended. Psychotherapy may result in decisions about changing behaviors, employment, substance use, schooling, housing or relationships. Sometimes another family member may negatively view a decision that is positive for one family member. Change will sometimes be easy and swift, but more often it will be slow and even frustrating. There is no guarantee that psychotherapy will yield positive or intended results. During the course of therapy, Dr. Volker is likely to draw on various psychological approaches according, in par, to the problem that is being treated and her assessment of what will best benefit you. These approaches include behavioral, cognitive-behavioral, psychodynamic, existential, system/family, developmental or psycho-educational.

TERMINATION: As set forth above, after the first couple of meetings, Dr. Volker will assess if she can be of benefit to you. Dr. Volker does not accept clients who in her opinion she cannot help. In such a case, she will give you a number of referrals that you can contact. If at any point during psychotherapy Dr. Volker assesses that she is not effective in helping you reach the treatment goals, she is obligated to discuss it with you and, if appropriate, to terminate treatment. In such a case, she would give you a number of referrals that may be helpful to you.

If you request it and authorize it in writing, Dr. Volker will talk to the psychotherapist of your choice, in order to help with a transition. If at any time you wish to consult with another professional, with your written consent, Dr. Volker will provider her/him with the essential information needed. You have the right to terminate therapy at any time. If you choose to do so, Dr. Volker will provide you with the names of other qualified professionals whose service you might prefer.

DUAL RELATIONSHIPS: Therapy never involves a sexual or business relationship, nor any other dual relationship which impairs Dr. Volker's objectivity, clinical judgment, and therapeutic effectiveness, or which can be exploitative in nature.

CANCELLATION: Since scheduling of an appointment involves the reservation of time specifically for you, a minimum of 2 business days notice is required for re-scheduling or canceling an appointment. Saturdays, Sundays and Holidays are <u>not</u> counted as business days. Unless we reach a different agreement, the full fee will be charged for sessions missed without such notification. <u>Insurance companies do not reimburse for missed sessions.</u>

I have read the above Consent to Treatment, Office Policies and General Agreement for Psychotherapy Services carefully.

I understand them and agree to comply with them.

Client Name (print)	Date	Signature
Client Name (print)	Date	Signature
Dr. Volker		
Psychologist	Date	Signature