**Blue Buddha Counseling LLC**

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**Jaye Bahre M.S. LPC: member, CEO**

Oregon License #: C6120

360.721.4167

[www.bluebuddhacounseling@gmail.com](http://www.bluebuddhacounseling@gmail.com)

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Please fill out the following client information for your file:

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*Are these phone numbers that I may call or text PHI (personal health information)/information*

 *about appointments? Yes \_\_ No\_\_\_*

 *Which number (s) is/are ok for calling, texting, PHI? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

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 *Are these email addresses* *that I may leave PHI (personal health information)/information*

 *about appointments? Yes \_\_ No\_\_\_*

 *Which email address(es) is/are ok for emailing PHI? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_*

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Any other pertinent demographic information you want me to know?

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Client Printed Name

Practitioner Printed Name/Stamp:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Practitioner Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Public Disclosure Statement and Informed Consent Agreement**

Welcome! I appreciate the opportunity to be of service to you. The following information answers some questions clients often ask about therapy practices. It is important to me that you know how we will work together. Having a clear understanding of the end game makes the work easier!

After you read this information, we will go over it and discuss how it applies to your own situation. Please read *all of it* and mark any parts that are not clear to you. Write down any questions you have, and we will discuss them at our next meeting. When you have read and fully understood this information, please sign each portion of the document in the appropriate places. You will be given a copy of all signed documents.

***PLEASE TAKE THE TIME TO READ THE FOLLOWING DOCUMENT THOROUGHLY!***

This public disclosure statement outlines the following:

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**Section A**

**Introduction and Biographical info**

They say, “Do what you love and never work a day in your life”, well, I don’t know who “they” are, but they are right!

I knew I wanted to be a therapist after finding a book about Freud when I was 10 years old. I was a voracious reader and I was captivated! Yeah, I know I was a nutty little kid, but I held fast to my dream.

When I was 18, I took a diversion and became a hairstylist. I loved that work – the fast pace, the creativity, the mixing of chemicals in the backroom… it was FUN! The best part though, was learning about my clients through their stories and becoming a trusted part of their lives. People tell their hairdressers *everything,* right? What better training ground!

I worked as a hairdresser off and on for 18 years and spent the rest of the time raising 3 beautiful children. When my children were a bit older, I decided I wanted to go back to school and fulfill my dream of being a therapist. I went back to school in 2003 and then started working in mental health in 2005. At first, I helped co-running groups with children and then working with men diagnosed with schizophrenia within a small locked facility. While working there, I finished my undergrad in psychology in 2005 and started grad school in 2006.

In 2008, I was hired by the Washington Department of Corrections and moved into forensic mental health. I have worked in forensic mental health, at a variety of facilities in the Pacific NW, for 13 years. In 2017, I worked at a couple ‘community health’ facilities and even spent some time working at the Multnomah County Jail. Its all been a wonderful, wild ride but I am ready now for new challenges, and thusly, I have decided to leave forensics behind and move into private practice.

I love working with individuals and couples! I have many “specialties”, as in mental health topics that I like to help with, but my top specialties are anxiety/depression; identity issues; gender/gender expression concerns; LGBTQ issues, trans/transitioning concerns; sex/intimacy issues and couples’ issues (intimacy, sex, divorce – “conscious uncoupling”). My counselor ‘style’ is client-centered and solution-centered based in Mindfulness. I utilize various exercises/skills teaching and journaling as my modality of change with my clients. We will always work in collaboration together… Your therapy is all about YOU!

In my personal life I love spending time playing with my dog, growing mushrooms, writing group materials and having many outdoors adventures with my wife such as kayaking (she paddleboards, I am the kayak!), hiking, camping and foraging in the forest. We also love to do art projects and cook together.

I look forward to hearing your story and helping you meet your goals in life… I can promise your hard work will be worth it!

* **Formal Education/Coursework**

I earned my Bachelor of Science in Psychology at Washington State University in 2005. I started my post-graduate work in 2006 and finished my Master in Mental Health Counseling in 2011 from Walden University.

* **Coursework**

 Counseling theory

 Human Growth and Development

 Social/Cultural Foundations

 Helping Relationships

 Group Dynamics/Processing

 Lifestyle and Career Development

 Diagnosis of Mental Disorders

 Research and Evaluation

 Professional Ethics

 Psychopharmacology

 Cultural Competency

* **Continuing Education**

As a licensee of the State of Oregon, I am required to participate in continuing education to maintain my license. Continuing education courses are comprised of subject matter relevant to this profession such as:

 Ethics

 Cultural Competence

 Counseling/Therapy techniques

 Social/cultural foundations

 Life Transition

**Work Experience**

I have worked in mental health for 15 years. My early days in mental health consisted of co-facilitating groups with a therapist; working in a locked, 16 bed community facility with men diagnosed with schizophrenia who also had significant criminal history and most had history of long-term placement at the Oregon State Hospital. This early education prepared me well for the next 11 years of practice. I went to work for Washington State as a mental health practitioner within the prison system. For the next 11 years, I worked in that capacity, first in Washington State, then for Oregon State and then back in Washington State once again. I am now completely self-employed in my online private practice. I plan on adding group counseling to my private practice soon; to hopefully extend to in-person groups at some point in the future.

**Section B**

**Informed Consent about Telehealth Practices**

* **Risks and Benefits of Telehealth**

There are potential risks, consequences, and benefits of telemedicine. Potential benefits include, but are not limited to potential reduced costs, improved quality of life, improved access to therapy, better continuity of care, and reduction of lost work time and travel costs.

When using information technology in therapy services, potential risks include, but are not limited to the therapist’s inability to make visual and olfactory observations of clinically or therapeutically potentially relevant issues such as: your physical condition including deformities, apparent height and weight, body type, gait and motor coordination, posture, work speed, any noteworthy mannerism or gestures, physical or medical conditions including bruises or injuries, basic grooming and hygiene including appropriateness of dress, eye contact (including any changes in the previously listed issues), sex, chronological and apparent age, ethnicity, facial and body language, and congruence of language and facial or bodily expression.

* **Telehealth and Your Job**

HIPAA prohibits health care providers from sharing your personal health information with anyone else, and this includes your employer. You might need to provide your employer information about your care if you’re seeking reasonable accommodation or requesting a medical leave of absence. Otherwise, your therapist cannot disclose your treatment status, you are not obligated to tell your employer that you’re seeking therapy, and your employer cannot ask you.

There may be an exception if the computer you’re using is owned by your employer or if you talk to your therapist during work hours. Generally, what you do on a work computer can be easily and legally tracked by an employer. This means that any conversations you have with your therapist on a work computer could be discovered as well.

If you do decide to be open with your employer about a condition, there are laws that limit how your employer can use that information. In the first place, employers are required to treat any health information with confidentiality, and it’s a human resources violation to disclose it.

**Consent for Telehealth Consultation and Counseling**

1. I understand that Blue Buddha Counseling LCC and my Counselor wish me to engage in telehealth for consultation and some of my treatment.
2. I understand Blue Buddha Counseling LCC and my Counselor is not responsible for electronic security vulnerabilities, confidentiality vulnerabilities, or privacy vulnerabilities as a result of my internet connection, my electronic devices, or the location which I choose to use Telehealth services.
3. I understand that there are risks and consequences from telehealth including, but not limited to the description above. Despite reasonable efforts on the part of Blue Buddha Counseling LCC and my Counselor, the transmission of my personal information could be disrupted or distorted by technical failures; interrupted by unauthorized persons. Electronic storage of my personal information could be unintentionally lost or accessed by unauthorized persons.
4. I understand that if Blue Buddha Counseling LCC and my Counselor believes I would be better served by another form of intervention (e.g., face-to-face services), I will be referred to a mental health professional associated with any form of psychotherapy, and that despite my efforts and the efforts of Blue Buddha Counseling LCC and my Counselor, my condition may not improve, and in some cases may even get worse.
5. Blue Buddha Counseling LCC and my Counselor has explained, or will explain to me how the video conferencing technology, telephone conversation, messaging system or email messages that will be used to affect such a consultation will not be the same as a direct client/health care provider visit due to the fact that I will not be in the same room as my provider.
6. I understand that a telehealth counseling has potential benefits including easier access to care and the convenience of meeting from a location of my choosing.
7. I understand there are potential risks to this technology, including interruptions, unauthorized access, and technical difficulties. This includes family members, friends, acquaintances, and fellow employees.
8. I have had, or will have a direct conversation with my provider, during which I had, or will have the opportunity to ask questions in regard to this procedure. Direct conversation methods include 1:1 interaction, video conference or telephonic communication. My questions have been answered, or will be answered. The risks, benefits and any practical alternatives have been discussed with me.
9. I agree that I will utilize local emergency services should I experience a mental health emergency. I understand Blue Buddha Counseling LLC, nor my counselor, is an emergency clinic and cannot provide emergency level of care.
10. I understand that choosing to engage in online/Telehealth counseling services while at work, on a public internet network, using a shared device/computer, or using a device other than my own is at my own risk.
11. I agree to not hold Blue Buddha Counseling LCC and/or my Counselor, accountable or responsible for any adverse outcomes of choosing to use a non-secure device, device that is not my own, or engage in Telehealth in a location that is not private.
* **Interruption and Connection Issues**

Should the connection of your Telehealth session become disrupted, slow, or begin to present challenges that interfere with your ability to hear, see, or work effectively with your counselor, the session may be terminated, rescheduled or switched to a different method. You and your counselor will discuss the best way to move forward.

If you become disconnected during a Telehealth session, your counselor will contact you with a new link or call you on the number you have provided in your records. If we become disconnected and I cannot reach you or re-establish the connection, I will reschedule with you at no charge (for one make-up session).

If we have an in-person appointment, inclement weather hits and one of us is unable to get to the appointment, I and Blue Buddha Counseling LLC reserve the right to move the appointment from in person to a telehealth appointment.

The client (s), as evidenced by the signature below, has read, understands and agrees to all of the statements in the Informed Consent to Telehealth portion of Section B of the Public Disclosure Statement and Informed Consent Agreement of Jaye Bahre M.S. LPC, CEO of Blue Buddha Counseling LLC. A copy of signatures of the Informed Consent to Telehealth portion of Section B has been or will be provided to the client (s).

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Client Signature Date

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Client Printed Name

Practitioner Printed Name/Stamp:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Practitioner Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Philosophy of Treatment:**

Therapy and change can be quite challenging. I work from the point of belief that mindful behavior and emotional understanding can transform the trajectory of a person’s life. You might be thinking… “Whoopee, that’s great, but what kind of counselor are you?”

I tend to be supportive, "Rogerian", strength-based and solution focused. I empathize, validate and serve with compassion. I spend time making a strong therapeutic relationship and then use that rapport to support the use of Motivational Interviewing for gentle, but focused and effective confrontation. I tend to be personable, engaging and imbue others with a sense of safety and acceptance. I tailor my therapeutic process to the client, meeting them where they are, hearing their story, and making a holistic plan WITH the client to work toward their therapeutic goals/desires.

My practice tends to be "Mindfulness heavy", as in I teach DBT coping skills/interventions. I am also 'journaling heavy' as I believe self-reflection is extremely helpful in discovering behavioral patterns. Journaling is also an excellent way to get people to open up, realize their own emotional connections and grow consistently.

I have more than 15 years of experience working with all types of clients; all 'colors, creeds and sexual orientations' as they say; I have worked with just about every identified disorder, and all walks of life, economic positions and educational levels.

* **Theoretical Perspective:**

My general theoretical belief is based in a combination of several approaches: cognitive behavioral, person-centered approach, and psychodynamic with a splash of motivational interviewing. The central ideas in my work are that thoughts are the beginning of behavior and with the belief that thinking patterns are heavily influenced by relationships in early life. I believe management/resolution of difficulties experienced in life begins in thoughts about ourselves and the world around us.

* **Approach to Treatment:**

My approach to counseling is strength-based, educational and solution focused. A guiding principle in my practice is that with the right support and motivation, most people have the ability to reframe thoughts, change the relationship with their problems, learn effective coping skills, learn to effectively identify issues and learn necessary skills to engage in problem-solving behavior to work through difficulties systematically.

* **Goals of Therapy:**

General goals of treatment consist of helping resolve, or at minimum, mitigate stress and anxiety and teach you new ways of thinking. Ultimately, what YOU want to accomplish is what we will focus on because therapy is about YOU! ☺ In therapy, I draw on several modalities to help my clients accomplish their goals including:

1. *Reality Therapy*

This modality is client-centered cognitive behavioral therapy for solving “here and now” problems rather than working through the past.

1. *Gottman Method*

This modality teaches couples how to increase closeness and friendship behaviors by bringing awareness of the partner’s world. It assists the couple to learn to create conversation patterns that foster interest and effectively ends power struggles.

1. *Cognitive Behavioral The*rapy (aka ‘CBT’)

This modalitystrategizes therapy through the lens of belief that we can change our actions by changing our thoughts.

1. *Dialectical behavioral therapy* (aka ‘DBT’)

This modality is based in CBT, however incorporates Mindfulness, learning to be nonjudgmental, learning to accept and move on and the basics of self-soothing in times of stress, tools for making better choices and methods for managing emotions during crisis.

* **Therapeutic Interventions:**

Therapeutic interventions with most clients include:

1) Clear identification of goals and barriers.

2) Developing strategies for solving issues and moving on to live a successful life.

3) Pinpoint thinking errors and learn to challenge and change them.

4) Focus strongly on Mindfulness, teaching how to accept, how to let go, how to manage emotions and communicate in a nonjudgmental manner.

5) With couples I also focus on communication helping the couple create conversation patterns that foster interest and effectively end power struggles. I also teach techniques for increasing closeness and friendship behaviors which by extension assists with building, healing and enhancing sexual relationships. *Everyone* deserves the best sex of their lives and helping people attain the knowledge and develop the closeness for that is a special joy for me. I also specialize in “conscious uncoupling” (separation and divorce) and problem solving in this arena.

**Length of Therapy:**

You will be investing a good deal of time, money, and energy into therapy, so you should choose a therapist carefully. Therapy can be short, a few months perhaps, or it can be long, lasting a year to 18 months, possibly longer. Due to the level of intimate disclosure, and the length of time you might be attending therapy, I strongly believe you should feel comfortable with the therapist you choose, and the therapy you receive. Choose a therapist that you connect with ***not*** one based solely on fee cost, convenient location, degree, etc. If you are comfortable with your therapist therapy is more likely to be helpful.

**Course of Treatment**

Our first session will consist of us going over the intake forms, answering questions, meaning of informed consent and making sure everything is signed and you receive your copies of all your intake paperwork. The first session usually includes a discussion about what brings you to therapy. By the end of our first session, we will decide together in which direction to proceed, whether to continue therapy, seek a referral, etc. If we decide to continue therapy, I will spend approximately 2 sessions getting to know more about you and your psychiatric history, if any. After completing the history, we will talk more deeply about your therapy goals and collaborate an initial plan for attack for reaching your goals.

As a Licensee of the Oregon Board of Licensed Professional Counselors and Therapists, I am bound by and I abide by the code of ethics. Between that code and HIPPA, I make every effort to keep your mental health information and personal details protected.

**Emergency Plans**

If you find yourself having a mental health emergency, the fastest form of treatment is to call 9-1-1 and/or go to an emergency room in your area. Do not email me or try to text me if you are having a mental health emergency. You can always contact me later, or have a loved one, or hospital staff contact me. *I, nor Blue Buddha Counseling LLC are emergency clinics and we cannot provide emergency level of care!* If you have an emergency that lands you in the hospital during appointment time, after verification with hospital staff, you will not be charged. If I cannot verify your entrance into the hospital, you will be charged ½ the normal rate for the first incident.

Emergency support will come in the form of 4 free ‘check-ins’ either by phone or telemedicine video, one per week for 4 weeks. This communication is *not* your therapy session and will not be substituted for your therapy session. They are post-crisis check-ins meaning they are short (no more than 15 minutes) and meant to touch base. Post-crisis you will be seen 2X/week (1 your normal appointment and 1 check-in). If you need more than that we can discuss the financial aspect. If your 15 minute check-ins end up being longer than 15 minutes more than once, you will be charged $2.99/minute past the 15 minute mark.

**Communication between Sessions**

If/when you call me, do not expect me to answer the phone: I am probably in session or away from my phone. I return calls as soon as possible, during my working hours Monday through Saturday (360-721-4167). You may text me if you wish and honestly, that is probably faster. If you wish to have a phone session, please refer to Section C pg. 27 for the service fees chart. I check email daily but usually once in the morning and once at night. Do not email me if you are in crisis as I may not see your email for hours. I require a phone call 24 hours prior to your appointment if you are cancelling an appointment or discontinuing a workshop (see cancellation policy – in text pgs. 29-32, also found on pgs. 34, 35).

* **Acceptance of Electronic Communications**

When you agree to the terms of this informed consent, please understand that you are also acknowledging and agreeing to the terms of communication outlined in this notice.

 I hereby consent and state my preference to have my Counselor and Blue Buddha Counseling LLC communicate with me by email or standard SMS messaging regarding various aspects of my counseling services, which may include, but shall not be limited to appointments/scheduling, questions, homework, and billing. I understand that email and standard SMS messaging are not confidential methods of communication and may be insecure. I further understand that, because of this, there is a risk that email and standard SMS messaging regarding my care might be intercepted and read by a third party.

* **Acknowledgement of Receipt/Agreement to Forms regarding Informed Consent for Counseling**

By signing below, Clients(s) acknowledge that Clients(s) have reviewed and fully understand the terms and conditions of this Agreement. Client(s) have discussed such terms and conditions with the Counselor, and Blue Buddha Counseling LLC, and have had any questions with regard to its terms and conditions answered to Client(s)’ satisfaction. Client(s) agree to abide by the terms and conditions of this agreement and consent to participate in psychotherapy with the Counselor. Moreover, Client(s) agree to hold Counselor and Blue Buddha Counseling LLC free and harmless from any claims, demands, or suits for damages from any injury or complications whatsoever, save negligence, that may result from such treatment.

The client (s), as evidenced by the signature below, has read, understands and agrees to all of the statements in Section B of the Public Disclosure Statement and Informed Consent Agreement of Jaye Bahre M.S. LPC, CEO of Blue Buddha Counseling LLC. Section B covers approach to treatment, length of treatment. A copy of signatures for Section B has been, or will be provided to the client (s).

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Client Signature Date

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**Section C**

**Services**

* **Risks and Benefits of Therapy**

Psychotherapy is a process in which we will discuss a myriad of issues, events, experiences and memories for the purpose of creating positive change so that you can experience your life more fully. It provides an opportunity to better and more deeply understand one’s self, as well as any problems or difficulties you may be experiencing. Psychotherapy is a joint effort between us, you and your counselor. Progress and success may vary depending upon the particular problems or issues being addressed, as well as many other factors.

Participating in therapy may result in a number of benefits to you, including, but not limited to, reduced stress and anxiety, a decrease in negative thoughts and self-sabotaging behaviors, improved interpersonal relationships, increased comfort in social, work, and family settings, increased capacity for intimacy, and increased self-confidence. Such benefits may also require substantial effort on your part, including an active participation in the therapeutic process, honesty, and a willingness to change 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 remembering and discussing unpleasant events, feelings and experiences. The process may evoke strong feelings of sadness, anger, fear, anxiety, etc. There may be times in which I will challenge your perceptions and assumptions and offer different perspectives. The issues presented by you may result in unintended outcomes, including changes in personal relationships or work. Sometimes a decision that is positive for one family member is viewed quite differently by another. You should be aware that any decision on the status of your personal or work relationships is your sole responsibility. During the therapeutic process, many people find that they feel worse before they feel better. This is generally a normal course of events. Personal growth and change may be easy and swift at times but may also be slow and frustrating.

Your Counselor is ready and available to discuss any concerns you have regarding your progress in therapy. Due to the varying nature and severity of problems and the individuality of each client, your Counselor is unable to predict the length of your therapy or to guarantee a specific outcome or result.

Blue Buddha Counseling LLC and I offer individual counseling and group counseling. At times, I put on workshops that take a deeper dive into one topic. I also do retreats that deeply cover a therapeutic topic through action/activities out in nature over the course of a few days. I also do consultation work, mediation work, end of life counseling and, occasionally serving as an advocate in court.

* **Counseling (Individual and Group)**

A “full hour” of counseling is 45 minutes of counseling and 15 minutes for my paperwork after we are finished.

Packages of counseling sessions are available may be purchased on the Blue Buddha Counseling LLC website ([www.bluebuddhacounseling.com](http://www.bluebuddhacounseling.com)). These packages may be purchased after the initial assessment and the intake sessions are completed. Packages of counseling sessions are not transferrable nor able to be combined with any other offer. Purchasing packages of sessions is much more cost effective as they are generously discounted. The remaining balance of pre-paid counseling sessions of any type (individual or couples) ***will not*** be refunded if you choose to discontinue counseling. Counseling packages must be used within 90 *calendar days* from purchase. The final appointment in the package may be saved for a “6-month tune-up” appointment.

* **Discussion of Treatment Plan**

It is the intention of Blue Buddha Counseling LLC and your Counselor to provide services that will assist you in reaching your goals. Within a reasonable period of time after the initiation of treatment, your Counselor will discuss their working understanding of the problem, treatment plan, therapeutic objectives and their view of the possible outcomes of treatment. Sometimes more than one approach can be helpful in dealing with a certain situation. During the course of therapy, various treatment approaches may be suggested. These suggestions are according, in part, to the problem that is being treated and your Counselor’s assessment of what may benefit you.

We believe that therapists and clients are partners in the therapeutic process. You have the right to agree or disagree with recommendations. If you have any unanswered questions about any of the procedures used or suggested in the course of your therapy, the possible risks, your Counselor’s expertise in employing them, or about the treatment plan, please ask. You also have the right to ask about other treatments for your condition and their risks and benefits. If you could benefit from any treatment not provided by Blue Buddha Counseling LLC, your Counselor will assist you in obtaining those treatments by providing a referral.

Counseling provided by Blue Buddha Counseling LLC is best when accompanied by the client taking time to get to know themselves better through participation with homework. The brain simply processes information differently when the client takes the time to write – or type if you prefer. For your homework, you will be completing journaling exercises, worksheets, experiments and possibly artwork. Change requires committed practice of new skills. Homework is integral to the success of your treatment. If you are not open to practicing homework or suggested changes, progress may be limited.

**Fee scale**

Full payment is due at the end of each session. I take Venmo for payment. Both of these things are expected unless we make a different agreement *prior* to the session. Payment for groups is done as part of the sign-up process and can be completed at any point before the beginning of group. Some groups will be posted on EventBrite, and those groups can be paid for on the EventBrite website. A fee can be applicable with these cash sending/receiving apps. All fees will be added to your bill.

**Counseling Fees**

|  |  |
| --- | --- |
| Individual Therapy single sessionsIntensive 90-min session | $72 (new clients\*) $62 (pre-established clients\*)$150 |
|  |  |
| Prepaid package of individual therapy single sessions | 4 Sessions - $280 (new) ($225.00 Est.)6 Sessions - $425.00 (new) ($350.00 est.)8 sessions - $550.00 (new) ($475.00 est)  |
|  |  |
| Couples Therapy single sessions | $92 |
| Prepaid Couples Therapy package of single therapy sessions | 4 Sessions - $350.006 Sessions - $535.008 Sessions - $700.00 |
|  |  |
| Groups for IndividualsRules and particulars for Group Requirements listed in the “Information about Groups” section on pg. 29\*See to the right and also listed on pg. 31 to find out what is included in the charge for group therapy.In-person groups for Individuals | **Weekly Process Group** **Online**- $15 per session, drop-in, PRN **Specific Subject** **Online** - 4 week (1 month) *pre-recorded* *video training*: $175 flat fee\* for the entire 4-week training (with workbook); $150 w/o workbook; $165 if no workbook needed**Specific Subject Online** - 4 week (1 month) of *presentation via LIVE streaming video*: $180 flat fee\* (for the entire 4 week training; $150 (w/o workbook – not recommended); $175 if no workbook accompanies group material.6 week: $250 flat fee\*8 week: $350 flat fee\*4 to 8 weeks depending on the depth of the subject4-week groups: $195 flat fee\*6-week groups: $250 flat fee\* 8-week groups: $300 flat fee\*\*See pg. 31to find out what is included in these fees. |
| Groups for Couples | Prices for groups for couples will be determined by the length of the group (i.e. 4 wks., 6 wks. etc), the materials needed (if any).   |
|  |  |
| Initial Consult (30 min)  | FREE |
|  |  |

\*New client – refers to someone I have not spoken to yet, someone who has been referred by another client or who has come to me from the website. You will remain a “new client” through the first month and then I will lower your fees to the “established client” level.

\*Established client – refers to someone I have been working with prior to coming into my private practice. Your fees will stay as outlined in this graph. If someone you refer becomes a client, you will enjoy 3 sessions of $10 off per session.

***TEMPORARY*** reductions in fee can be offered on a case-by-case basis for a ***LIMITED*** period of time!

Established clients\* are allowed some latitude with fees. If you run into hardship, let’s discuss it. I would rather offer a limited time reduction in cost rather than have a client stop coming to therapy simply due to a reduction in income. I am not opposed to discussing a barter of equal value.

(\*Established clients\* is a term I define on a case-by-case basis and after the intake process is complete. Intake process includes: ‘get to know you’ ½ hr. call/video; completion of all forms including signatures; return of all forms and any other initial business outlined in the ‘Course of Treatment’
(in Section B, pg. 20).

Communication with you or on your behalf under 10 minutes per week is not billed or charged. Any additional coordination, communication, or coordination of service with you or on your behalf will be charged $2.99/minute after 10 minutes. This includes, but is not limited to phone communication, professional documentation and letters/reports. Do not call for 9 minutes and hang up and then call back a while later. Phone calls of under 10 minutes made repeatedly will be charged as $2.99/minute.

Should the fee structure change, you will be notified within 30 days. A new signed fee agreement will be signed prior to continuing the service that changed.

*“Fine Print” about the payment chart:*

**Individual Therapy**

Prepaid package of single sessions can be purchased on the Blue Buddha Counseling LLC website ([www.bluebuddhacounseling.com](http://www.bluebuddhacounseling.com)). Buying a package means paying for the entire package at the time of purchase. “Packages” are not pay as you go, or any other form of making payments on the package. Packages expire 6 months after the date of purchase. ***No refunds will be given if you do not use all your prepaid sessions and they expire.***

**Couples Therapy**

During couples’ therapy, the price is based on 2 people attending. Partial refunds will not be given if one party does not attend.

Prepaid Couples Therapy package of single sessions can be purchased on the Blue Buddha Counseling LLC website ([www.bluebuddhacounseling.com](http://www.bluebuddhacounseling.com)).

**Information about Groups**

* **Groups for Individuals**

**Weekly Process Group Online** - $15 per session, drop-in, PRN

This group will be a place where we explore supporting mental health: talking about recent world events, recent personal events/current worries. Every week will have a theme and a bit of ‘lecture time’ where I present the topic and then open it to the group. We will close each group with a 5-minute led meditation. These groups are “PRN”, or, “as needed”. You only pay for a group when you sign up for one; they are always different and do not require regular attendance. There also are weekly process groups that will be subject specific but still “drop-in” and constructed in a “stand on its own” format where Week 2 does not depend on participation in Week 1, etc. Again, you only pay for the group you sign up for.

**Specific Subject Online**

These groups are ***pre-recorded*** and cover one topic, such as “Managing Your Emotions” and are offered once per week for 1 month. Think of these as “psychoeducational movies” in which you watch and listen, and do the homework/turn it in according to the instructions. With these groups, you pay the flat fee ***one time****,* you will receive a link and then you “attend” when you want to, any time day or night (see fee chart above).

**Specific Subject Online** - ***live* *presentation via streaming video***:

These are the same as above with the exception that I will be doing them through live streaming. The price is a little higher because these require me to host them in real time.

**Specific Subject in Person** – (4 to 8 weeks depending on the depth of the subject)

 4-week groups: $195 flat fee\*

 6-week groups: $250 flat fee\*

 8-week groups: $300 flat fee\*

\*See below to find out what is included in these fees.

All in-person groups have a size limit to maintain social distance. The group limit will depend on the physical space in which the group convenes. The group limit does not pertain in groups where we are outdoors. Masks will be worn during the indoor groups. If you do not wish to wear a mask, then ***please do not sign up for an in-person group***. (I am not doing in-person groups at this time, however, I will at some point.)

Refunds of ½ the price of the group given if you cancel your attendance no later than 3 days (72 hours) prior to the beginning of the group. If I/Blue Buddha Counseling LLC cancels the group, a full refund will be issued within 30 calendar days.

* **Groups for Couples**

Price to be announced when a group is introduced for sign up. Refunds of ½ the price of the group given if your attendance is cancelled no later than 3 days (72 hours) to the beginning of the group.

I provide groups for couples in person only. This is due to the nature of building the group dynamic and finding support in other people. Groups for couples will be limited to 3 couples to maintain social distancing requirements. Masks must be worn; same as above, if you refuse to wear a mask, ***do not sign up for my in-person classes.***

* **Caveats about Groups**

Full payment for the group occurs at the time of signing up for the group. If you are participating in an online group, a Word DOC or a PDF file of the group materials will be provided to you via email or a link after you have completed the check-out process. If you are participating in a group in which we are meeting at a physical location, you will still be provided an email or a link; please print out and bring your materials to group with you. I will have a few copies of the materials printed off with me, but I will not bring enough for the entire class so DO NOT COUNT on picking up your copy from me in class. PLEASE CONTACT ME if you do not have a printer, or some other issue like that and I will be sure to have a copy for you.

***No*** “make-up” classes offered. ***No refunds*** given if you do not attend after you pay for a group therapy session or package. Packages for group therapy must be used at the time of purchase for the specific group for which they were purchased. Purchase of a package of group sessions is not transferrable from one group to another. Eligibility for attending any particular group expires at the end of the group regardless of whether you attended or not. You may not buy a package for a group and then hang on to it towards a future group. If you are buying a group for someone other than yourself all these same rules apply. Payments for groups ***MUST*** be completed 72 hours before the start of the group. Registration and payment for groups will CLOSE at the 72 hour mark prior to the beginning of the group.

Packages for groups can be purchased without the supplementary workbook, however that is **NOT RECOMMENDED!!** The “lecture” portion of groups are made to go along with the materials and the homework assignments may be daunting without all the worksheets, etc. that accompany them.

When you receive the group materials, they are yours to keep. No permission is extended, assumed or granted to use, share, distribute, sell, or profit from any portion of the group materials for any reason. These rules apply regardless of being online (video – pre-recorded or livestream video) or in person. No recordings of any type may be taken. If you would like to reuse any portion of my materials please leave me a message: 360.721.4167

**Workshops**

Occasionally I will run workshops. Some workshops will be open to the public and some workshops will not. The status of open or closed to the public will always be made clear in the description. Read the intro carefully before paying for the workshop!! ***NO*** refunds for ‘reading it wrong’. Refunds of ½ the price of the group given if your attendance is cancelled no later than 3 days (72 hours) prior to the beginning of the workshop.

The workshops will be:

1. Focused on one topic
2. Maximum of 4 hours long
3. In person
4. Snacks, coffee/tea provided
5. Educational materials provided, sometimes including a flash-drive of material for home study

$200 per person; $350 per couple

**Caveats about Workshops**

Occasionally I will be putting on workshops. These events may include a mixture of clients and non-clients, however, everyone is there to learn and grow. The workshops will include some lecture, some video, probably break-out sessions, and most likely a fun art project and/or game(s). While workshops are a TON of fun, they can also be a place where intense healing can begin. I send each person (or couple) home with special instructions for self-care and ongoing homework. Workshops are longer affairs averaging 3-4 hours long. They take a lot of preparation and work for me to put on. Please be sure you are able to attend PRIOR to paying for a workshop!! Sign up and pay for the workshops early as they tend to fill up fast! Payment for workshops ***MUST*** be completed 72 hours before the day of the workshop so I can get a proper head count. Registration for the workshops will ***CLOSE*** at the 72 hour prior to workshop day. ***NO*** refunds will be given after the close of registration.

**Retreats**

Once in a while, I will arrange for a retreat. These will most likely be at the beach – maybe camping, maybe at an Air B-n-B, maybe a float down the river or maybe at a mountain escape! Whatever we do it will be amazing and fun! These adventures will be 3-4 days long with planned therapy activities and yes, plenty of down time. Price will be based on cost of activity and what is included in the package. TBD.

The client (s), as evidenced by the signature below, has read, understands and agrees to all of the statements in Section C of the Public Disclosure Statement and Informed Consent Agreement of Jaye Bahre M.S. LPC, CEO/Member of Blue Buddha Counseling LLC. Section C covers risks and benefits of therapy, policy about individual, couples and group counseling, covers fee structure for therapy and refund policy. A copy of signatures for Section C has been or will be provided to the client (s).

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**Section D**

**Client Financial Responsibilities**

Payment in full is due at the time of each session.

* **Insurance**

I am not accepting insurance at this time.

* **Private Pay**

Payment is due at the time of service. The session will be purchased prior to the appointment either by buying a session on the Blue Buddha Counseling LLC website ([www.bluebuddhacounseling.com](http://www.bluebuddhacounseling.com)) or by paying your counselor through Venmo.

**Collection Efforts**

I will make attempts to contact you to collect on an unpaid balance. If this is unsuccessful, you could be discharged from services and provided with a referral. *PLEASE!! If you are having issues paying,* *alternative payment* ***can be discussed and mitigated***, however, this discussion needs to be had ***prior*** to creating a situation where this all happens!

**Cancellation Policy**

In matters of cancellations and no shows, I work with Blue Buddha Counseling LLC personally to manage the late cancellations, no-shows and associated fees according to the private pay policies laid out above. If you have questions/concerns about the cancellation/no show fee policies, or you would like to dispute the charges, please direct those inquiries to myself and Blue Buddha Counseling LLC.

**No Show or Late Cancellation Fees** (less than 24 hours)

 First late cancellation (under 24 hrs ahead of appointment) or no show: $50

Any late cancellation (under 24 hrs ahead of appointment) or no show thereafter: full scheduled session fee will be charged

**Payment Agreement**

By signing this agreement, you are acknowledging you are responsible for any unpaid portion of your bill and you are agreeing to the payment terms as follows:

* I am fully responsible for my account and understand that payment is due at the time of service. I intend to pay when services are rendered, with either debit/credit (or other forms such as Venmo, as discussed with Counselor; *any form of payment other than a debit/credit card will be discussed, PRIOR to a session where the alternative form of payment is desired*).
* I understand I may request alternative forms of payment and it is up to Blue Buddha Counseling LLC and my Counselor to choose to accept different form of payment.
* I understand that when I make an appointment, my therapist has reserved that time especially for me. In order to preserve fairness and goodwill in our working relationship, **I will give at least *24******hours notice* before canceling a session**.
* I understand the First “no-show” or “late-cancel” will result in being charged a $50 fee

 and the full fee on any no-show appointments thereafter.

The client (s), as evidenced by the signature below, has read, understands and agrees to all of the statements in Section D of the Public Disclosure Statement and Informed Consent Agreement of Jaye Bahre M.S. LPC, CEO of Blue Buddha Counseling LLC. Section D covers Client financial responsibility policy, outlines procedures for collection on delinquent accounts and discusses appointment cancellation policy. By agreeing to this section, you are granting permission to Blue Buddha Counseling LCC, and myself to charge your card for fees for treatment, no show/late cancellations fees (according to the policy explained on pg. 30 Section D) and collection efforts (as outlined in the policy explained on pg. 30 Section D). A copy of signatures for Section D has been provided to the client (s).

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Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Section E**

**Records and Record Keeping**

I and Blue Buddha Counseling LLC keep client records. In client records, I document client progress, diagnosis (if any), assigned homework, themes, difficulties, future services and therapeutic interventions. I do all my own record keeping. All client records are typed on a secure computer and stored on flash drives which are kept under lock and key. If there is something in the record which needs to be corrected, this is done by typing a line through the erroneous information, making the correction and making a notation/documentation of the correction directly after the correction. (Example: *Original sentence:* Laura grew up in Chicago, living on the Westside until she was 18. Correction: Laura grew up in Chicago, ~~living on the Westside~~ living on the Eastside until she was 18. (Correction made 03.30.2021 10:00 AM by Jaye Bahre M.S. LPC, Member & CEO/Blue Buddha Counseling LLC.)

There is more information about records keeping in the HIPPA portion below. See that section for further information about the extent of your privacy around your records.

**Confidentiality and Privacy**

I am bound by my professional ethics to protect client’s rights to confidential communication in regards to their involvement in counseling, groups and workshops. If you need or want your information to be shared with another medical office, your school, your family, etc. (anyone other than me), I require a signed ‘Release of Information’ form for each separate entity or person. ***There are limits and caveats to confidentiality!! PLEASE read this carefully!!***

1. In the event of a medical emergency, emergency responders or services may be given necessary information.
2. In the event of a threat of harm to oneself, emergency responders may be called and necessary information may be given.
3. If a serious threat of harm against or to someone else, the person must and will be notified.
4. If ordered by a judge or judicial officers, information regarding client treatment must be disclosed.
5. If the client submits a complaint against this therapist with the State of Oregon, information will be released.
6. If records are subpoenaed by an attorney in the State of Oregon, they will be released unless the client filed an Order of Protection within 14 days of the subpoena.
7. In the event of the client’s death or disability, the information may be released if the client’s personal representative or the beneficiary of an insurance policy on the client’s life signs a release authorizing disclosure.
8. In the event of the client revealing the contemplation or commission of a crime or harmful act, the therapist may release that information to the appropriate authorities.
9. For purposes of audit either by third party payers, outside funders or the State Department of Mental Health for the state licensing review, information will be released.

**HIPPA – PHI** (Personal Health Information)

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

**PLEDGE REGARDING HEALTH INFORMATION:**

We at Blue Buddha Counseling LLC, understand that healthinformation about you and your health care is personal. We are committed to protecting health information about you. We create a record of the care and services you receive from me. This record is necessary to provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care generated by this mental health care practice. This notice will tell you about the ways in which Blue Buddha Counseling LLC and I may use and disclose health information about you. Blue Buddha Counseling LLC and I am required by law to make sure that protected health information (“PHI”) that identifies you are kept private.

1. **HOW BLUE BUDDHA COUNSELING LLC and I MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU:** Thefollowing categories describe different ways that Blue Buddha Counseling use and disclose health information. Not every use or disclosure in a category will be listed. However, all of the permitted ways to use and disclose information will fall within one of the categories.
2. **For Treatment Payment, or Health Care Operations:** Federal privacy rules (regulations) allow health care providers who have direct treatment relationship with the patient/client to use or disclose the patient/client’s personal health information without the patient’s written authorization, to carry out the health care provider’s own treatment, payment or health care operations.
3. Blue Buddha Counseling LLC and I may also disclose your protected health information for the treatment activities of any health care provider. For example, if a clinician were to consult with another licensed health care provider about your condition, we would be permitted to use and disclose your person health information, which is otherwise confidential, in order to assist the clinician in diagnosis and treatment of your mental health conditions.
4. **Lawsuits and Disputes:** If you are involved in a lawsuit, your health care information may be disclosed in response to a court, administrative order, subpoena, discovery request, or other lawful process. Efforts will be made to inform you of but only if efforts have the request or to obtain an order protecting the information requested.
5. **CERTAIN USES AND DISCLOSURES REQUIRE YOUR AUTHORIZATION:**
	1. **Psychotherapy Notes:** Blue Buddha Counseling LLC and I keep “psychotherapy notes”. Any use or disclosure of such notes requires your authorization unless the use or disclosure is:
6. For my use in treating you
7. For my use in training or supervising mental health practitioners to help them improve their skills in group, joint, family, or individual counseling or therapy.
8. For my use in defending myself in legal proceedings instituted by you.
9. For use by the Secretary of Health and Human Services to investigate my compliance with HIPAA.
10. Required by law and the use or disclosure is limited to the requirements of such law.
11. Required by law for certain health oversight activities pertaining to the originator of the psychotherapy notes. Required by a coroner who is performing duties authorized by law. h. Required to help avert a serious threat to the health and safety of others.
	1. **Marketing Purposes:** I will not use or disclose your PHI for marketing purposes.
	2. **Sale of PHI:** I will not sell your PHI.

I**V. CERTAIN USES AND DISCLOSURES DO NOT REQUIRE YOUR AUTHORIZATION**

Subject to certain limitations in the law, Blue Buddha Counseling can use and disclose your PHI without your authorization for the following reasons:

1. When disclosure is required by state or federal law, and the use or disclosure complies with and is limited to the relevant requirements of such law.
2. For public health activities, including reporting suspected child, elder, or dependent adult abuse, or preventing or reducing a serious threat to anyone’s health or safety.
3. For health oversight activities, including audits and investigations.
4. For judicial and administrative proceedings, including responding to a court or administrative order, although my preference is to obtain an authorization from you before doing so.
5. For law enforcement purposes, including reporting crimes occurring on my premises.

6) To coroners or medical examiners when such individuals are performing duties authorized by law.

7) For research purposes, including studying and comparing the mental health of patients who received one form of therapy versus those who received another form of therapy for the same condition.

8) Specialized government functions, including, ensuring the proper execution of military missions; protecting the President of the United States; conducting intelligence or counter-intelligence operations; or, helping to ensure the safety of those working within or housed in correctional institutions.

9) For workers’ compensation purposes. Although my preference is to obtain an Authorization from you, Blue Buddha Counseling LLC and I may provide your PHI in order to comply with workers’ compensation laws.

10) Appointment reminders and health related benefits or services. Blue Buddha Counseling LLC and I may use and disclose your PHI to contact you to remind you that you have an appointment with me. Blue Buddha Counseling LLC and I may also use and disclose your PHI to tell you about treatment alternatives, or other health care services or benefits that I offer.

1. **CERTAIN USES AND DISCLOSURES REQUIRE YOU TO HAVE THE OPPORTUNITY TO OBJECT**

Disclosures to family, friends, or others. Blue Buddha Counseling LLC and I may provide your PHI to a family member, friend, or other person that you indicate is involved in your care or the payment for your health care, unless you object in whole or in part. The opportunity to consent may be obtained retroactively in emergency situations.

**VI. YOU HAVE THE FOLLOWING RIGHTS WITH RESPECT TO YOUR PHI**

1. The right to request limits on uses and disclosures of your PHI. You have the right to ask me not to use or disclose certain PHI for treatment, payment, or health care operations purposes. Blue Buddha Counseling is not required to agree to your request, and I may say “no” if I believe it would affect your health care.
2. The right to request restrictions for out-of-pocket expenses paid for in full: You have the right to request restrictions on disclosures of your PHI to health plans for payment or health care operations purposes if the PHI pertains solely to a health care item or a health care service that you have paid for out-of-pocket in full.
3. The right to choose how your PHI is sent to you: You have the right to ask me to contact you in a specific way (for example, home or cell phone) or to send mail to a different address, and I will agree to all reasonable requests.
4. The right to see and get copies of your PHI: Other than “psychotherapy notes,” you have the right to get an electronic or paper copy of your medical record and other information that Blue Buddha Counseling LLC and I have about you. Blue Buddha Counseling LLC and I will provide you with a copy of your record, or a summary of it, if you agree to receive a summary, within 30 days of receiving your written request. Blue Buddha Counseling LLC and I may charge a fee for doing so.

1. The right to get a list of the disclosures made by Blue Buddha Counseling LLC: You have the right to request a list of instances in which Blue Buddha Counseling LLC and I have disclosed your PHI for purposes other than treatment, payment, or health care operations, or for which you provided me with an authorization. Blue Buddha Counseling LLC and I will respond to your request for an accounting of disclosures within 60 days of receiving your request. The list given you will include disclosures made in the last six years unless you request a shorter time. Blue Buddha Counseling LLC and I will provide the list to you the first time at no charge while additional requests will incur a fee.
2. The right to correct or update your PHI. If you believe that there is a mistake in your PHI, or that a piece of important information is missing from your PHI, you have the right to request that I correct the existing information or add the missing information. Blue Buddha Counseling LLC and I may say “no” to your request, but will tell you why in writing within 60 days of receiving your request.
3. The right to get a paper or electronic copy of this notice. You have the right get a paper copy of this Notice, and you have the right to get a copy of this notice by e-mail. And, even if you have agreed to receive this Notice via e-mail, you also have the right to request a paper copy of it.

**Acknowledgement of Receipt of Privacy Notice**

Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), you have certain rights regarding the use and disclosure of your protected health information. By signing below, you are acknowledging that you have received a copy of HIPPA Notice of Privacy Practices.

The client (s), as evidenced by the signature below, has read, confirms understanding and agrees to all of the statements in Section E of the Public Disclosure Statement and Informed Consent Agreement of Jaye Bahre M.S. LPC, CEO of Blue Buddha Counseling LLC. Section E covers confidentiality, privacy of records and HIPPA-PHI compliance policies. A copy of signatures for Section E has been provided to the client (s).

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Practitioner Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Section F**

**Consumer Rights**

 **As a client of a licensee of the State of Oregon you have the following rights**:

* To expect that a licensee has met the qualifications of training and experience required by state law
* To examine public records maintained by the Board and to have the Board confirm credentials of a licensee
* To obtain a copy of the Code of Ethics (Oregon Administrative Rules 833-100)
* To report complaints to the Board
* To be informed of the cost of professional services before receiving the services
* To be assured of privacy and confidentiality while receiving services as defined by rule or law, with the following exceptions: 1) Reporting suspected child abuse; 2) Reporting imminent danger to you or others; 3) Reporting information required in court proceedings or by your insurance company, or other relevant agencies; 4) Providing information concerning licensee case consultation or supervision; and 5) Defending claims brought by you against me
* To be free from discrimination because of age, color, culture, disability, ethnicity, national origin, gender, race, religion, sexual orientation, marital status, or socioeconomic status.
* You have the right to refuse treatment from me.
* You have the right to choose a practitioner and/or treatment modality that you feel best meets your needs.

**Client Responsibilities**

1. Provide complete information about the reasons bringing you to therapy and psychological history to enable proper evaluation and treatment.
2. Ask questions to ensure an understanding of the condition or problem.
3. Show respect to your therapist.
4. Reschedule/cancel an appointment so another person may see the therapist.
5. Pay bill at beginning of the session.
6. Inform the therapist if one’s condition worsens.

The client (s), as evidenced by the signature below, has read, understands and agrees to all of the statements in Section F of the Public Disclosure Statement and Informed Consent Agreement of Jaye Bahre M.S. LPC, CEO of Blue Buddha Counseling LLC. Section F covers Client rights and responsibilities. A copy of signatures for Section F has been provided to the client (s).

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**Section G**

**And all the Rest**

* **Professional Consultation**

I covered some of this information in the explanation of HIPPA, Section E, (starts on pg. 38) “Professional consultation” can mean different things, so I would like to cover that here:

The first meaning of “professional consultation” is when I am consulting your other healthcare professionals about you, with your permission and only after signing a Release of Information.

A second meaning of “professional consultation” is when I bring your case to another mental health professional for consultation. Your HIPPA information is always protected.

A third meaning for “professional consultation” refers to me working on your behalf with an attorney or other professional who is not a medical professional.

**Testifying in court**

Honestly, I despise doing this. I am not in the business of being used as a tool. I will not lie and I charge up the ass for this service, so think twice before asking me to do this for you. The fee for this is $150/hr for time it takes me to put your case together + traveling costs ($1.00 per mile, hotel accommodations at a place of my choosing, meal allowance of $150 per day) + $150/hr for sitting in court.

**Social Media**

**Participation in the Facebook Fan Group for Blue Buddha Counseling:**

[**https://www.facebook.com/groups/bluebuddhacounseling**](https://www.facebook.com/groups/bluebuddhacounseling)

This is free to anyone public or client that wants to join. This is ***NOT*** a place for airing your private counseling business. The Fan Group is a place where people can get friend-like support from other people, share things like poems, or uplifting pictures and meet up for my mental health education-based “live” shows. Each week I will offer information or a reflection an aspect of life, mental well-being, and how our personal mental health ties it all together for us. You are free to comment with your own experiences. Once in a while I may offer a “Ann Landers”-like bit of ‘common sense’ advice for a session!

Send me a private message to give me in any mental health related questions you would like answered on the air.

I can also be found on Instagram: @bluebuddhacounseling

**Termination of Care Procedures**

Alas! All good things must end… No one likes to think of a relationship ending, even a therapeutic one. During therapy, trust is formed and intimate details are explored… minds are opened and emotions expressed. The therapeutic relationship bonds people together in the most amazing of ways and can bring powerful transformation. A relationship with the potential of being so important deserves to be wrapped up in a special way.

First, I talk with my client about their thoughts about termination and we make a plan that usually includes adding more time between appointments, shorter sessions or perhaps email check-ins will be part of the plan. We will spend more exploring of your journaling assignments, and work on helping you make connections for yourself that will support your mental health going forward. Some clients just tell *me* when they are done. Whatever our plan turns out to be it will be as comfortable as possible for you.

Therapeutic relationships are voluntary. You are able to terminate sessions with me at any point. If I feel that you might benefit from the approach of another counselor, we will discuss a referral. If you are experiencing physical pain or discomfort, see a medical doctor immediately. Therapy is ***not*** a substitute for medical attention and treatment.

**Contacting the Board:**

I am a licensed practicing counselor (LPC) with the Oregon Board of Licensed Professional Counselors and Therapists. Therapists practicing therapy for a fee must be registered or licensed with the State of Oregon for protection of the public health and safety. Clients of licensed or registered counselors in the State of Oregon may file a complaint with the State of Oregon Board of Licensed Counselors and Therapists at any time they believe a therapist has demonstrated unprofessional conduct. Registration of an individual with the Board does not include recognition of any practice standards, or necessarily imply the effectiveness of any treatment. You can find more information about licensees, get questions answered and file complaints by contacting the Board at:

**Oregon Board of Licensed Practicing Counselors and Therapists**

**3218 Pringle Rd SE, #120, Salem, OR 97302-6312**

**Telephone: (503) 378-5499**

**Email:** **lpct.board@oregon.gov**

**Website: www.oregon.gov/OBLPCT**

**License #: C6120**

The client (s), as evidenced by the signature below, has read and understands all of the statements on this Personal Disclosure Statement. A copy of this Personal Disclosure Statement has been provided to the client (s).

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