

## Welcome Information | Kate McNulty LCSW

This information is provided in order to welcome you to my office and answer some questions you may have. It will tell you what to expect of our meetings and how we can best work together. I work with methods that are research-based; at the same time, I rely on experience and intuition about what might be helpful for *you*, because we are addressing your particular life and concerns. I help you identify your strengths as well as your struggles, and may suggest books or connect you with community resources as needed. One of my goals is to support you in handling your thoughts and emotions with more skill. I want to provide tools and immediate assistance, but beyond that also aim to help you achieve authentic change, and enjoy a more deeply meaningful and satisfying life. I adhere to the strictest ethical standards of my discipline, and strive to provide effective and well-informed service to my clients.

Although I cannot guarantee the results of your treatment, my commitment to you is that:

- Sessions will begin promptly, with rare exceptions due to unavoidable emergencies
- I will offer you my full attention and involvement during your sessions
- We'll use effective methods; I'm accountable to you for the kinds of changes you're trying to accomplish
- I am willing to answer your questions and to give you plenty of honest feedback
- I'll provide you with complete information about cost and payment options for your therapy
- Together we will decide how long treatment should last and how to budget your resources to make sure your needs are met

Please don't hesitate to let me know if you have any concerns or comments about your experience here. I really value the opportunity to hear about whether our work is meeting your needs.

**COLLABORATIVE WORK** Much of what makes counseling effective involves client and counselor both using imagination and creativity. By using written feedback, we can learn exactly how counseling is working for you and make adjustments in what we are doing together. You should know within 3-6 sessions whether the "fit" between us is a good one. I encourage you to be candid in letting me know your needs. If at any time you feel misunderstood, or that the treatment is not helpful, please say so. If suggested activities or new behaviors are not a good fit for your goals, I need to hear about this from you. The number of visits you need to be in counseling depends your readiness to make changes and upon the goals that you set in your work.

Although counseling is a safe and moderate way to address your concerns, there are certain risks associated with it. Some people experience an increase in stress at first. Some problems also get worse before they get better; discussing long-standing unresolved conflicts or unhappiness can seem unproductive in the initial stages of dealing with them. Other risks may occur as well, depending on your situation; please ask any questions you have.

**PURPOSE OF OUR MEETINGS & WAYS PEOPLE CHANGE** In initial sessions we will work on defining what sort of help you are seeking and what goals we might be able to set for our work together. These goals may focus on a specific problem or situation; may be related to life pattern changes you want to make; or may be more broadly described as looking for greater self-understanding, more satisfying relationships, or finding meaning in your life. You may not be able to describe exactly what you are looking for initially, and we can also use that as a good starting place. People achieve change in many ways. Martial arts and movement, learning to breathe

effectively, various outdoor experiences, volunteering, playing a musical instrument, reading life-changing books, and a myriad of other activities may be therapeutic. I am interested in exploring any helpful way to transform and resolve your difficulty, to go beyond coping with problems and to achieve lasting change.

**LATE CANCELS & MISSED SESSIONS** I meet with clients by appointment only. If you cancel a meeting time, please plan to allow 48 hours advance notice so I can offer the time to someone else who needs it. I charge \$48 late cancel fee when cancellations occur with less than 48 hours notice.

**EMERGENCY CONTACT** I check messages regularly and you may call our answering service, (503) 295-6265. If you do not receive a sufficiently prompt response and feel you have an emergency situation, you may call 911 or go to the nearest emergency room. If I am away, a colleague will cover for any urgent needs.

**CONFIDENTIALITY** Our meetings are completely private, and I will not disclose any information without your written consent. Exceptions to this would be: 1) legal obligation to report abuse of children or the elderly; 2) release of records to the court under subpoena; 3) serious threat of harm to yourself or another; 4) medical emergency. I may consult with clinical colleagues regarding your care; however your name would not be used. If I were to become unexpectedly incapacitated, arrangements have been made with a trusted colleague to access files and notify clients. Please ask if you have any questions about confidentiality. My priority is to provide you with a trustworthy relationship that protects your private information.

**LEGAL ISSUES** Should you anticipate involvement in a court action, I advise you to talk with your attorney before disclosing information that could be damaging to your case. I do not wish to be party to any legal proceedings against current or former clients. The purpose of counseling is to support clients in achieving therapy goals, not to address legal issues that require an adversarial stance. By signing this form, you agree not to involve me in legal/court proceedings, or to attempt to obtain records of treatment for legal/court proceedings when marital or family therapy has not achieved resolution of disputes.

**ABOUT MY BACKGROUND** I am a Licensed Clinical Social Worker. This means that I am trained to help you listen carefully to your own thoughts, feelings and ideas, and also to consider your relationships, work life, family background, and how you may be influenced by social attitudes and values. Whether I am working with you as an individual or as part of a couple, I am thinking about the close relationships in your life and how we can help you create the healthiest, most beneficial connections for yourself.

**COMPLETING OR STOPPING THERAPY** Periodically we assess how our work is going. If you're considering stopping our meetings, you may wish to let me know in advance. If we allow ourselves 1-2 sessions for wrapping up, then we can summarize the work we have done and forecast how you can maintain the progress you've made. This will help you to retain any new habits and changes you may have achieved.

Client Signature and Permission Form- to sign in office after reviewing policies and forms

PERMISSION TO CONTACT

I may occasionally send a note or card to you. Please initial to give your permission.

\_\_\_\_\_ OK to contact in future      OR \_\_\_\_\_ Postal mail only      \_\_\_\_\_ Email only

PHYSICIAN CONSULTATION It is always advisable to see your doctor at the beginning of any form of therapy, to ensure that none of the concerns you are discussing are related to a medical problem. It is often helpful for me to communicate with your Primary Care Physician or other people treating you, and I am glad to do so, with your written permission.

Primary Care Physician \_\_\_\_\_

Name of clinic or practice group \_\_\_\_\_

Address \_\_\_\_\_ Phone \_\_\_\_\_

Other therapists or counselors you are working with

Name \_\_\_\_\_ Phone \_\_\_\_\_

I have reviewed these forms regarding Kate McNulty's practice and had an opportunity to ask any questions:

- Introductory Brochure
- Welcome Information
- Social Media Policy
- Consent to Use and Disclose Your Health Information
- Authorization to Use and Disclose Protected Health Information
- Notice of Privacy Practices

Signature \_\_\_\_\_

Date \_\_\_\_\_