Childers Counseling Service
Located on the Country Club Plaza
Kansas City, MO 64112
Web: www.ChildersCounselingService.com
Phone: 816-892-0803
E-mail: Martha@ChildersCounselingService.com

Martha Childers, EdS, LPC
Informed Consent

Confidentiality of Information: Most of the information discussed with your therapist is confidential and protected by laws. Some information which must or may be disclosed even without your consent includes:

- If you threaten to harm yourself or someone else
- If a court orders disclosure of information
- If you therapist, due to sudden illness or vacation, becomes unavailable and backup therapist is required.
- When abuse of child, defenseless person, or animal is known or suspected (Reporting required by State Law)
- By signing below, you authorize me to perform an evaluation of you and conduct therapy.
- For specific court cases, by signing below you are authorizing me to write a psychological report on our behalf for the courts/consulate.

Security of records: Your treatment records and related financial records are stored in a secure locked file cabinet or a secure online file not accessible to the public.

Statement of Financial Policy: When payment is submitted at the time an appointment is made, a savings of 5% applies. Otherwise, payment is due at the beginning of each appointment. Cash, check, and credit card are acceptable forms of payment. A charge is made for each additional 1 to 15 minute increments.

Length of therapy appointment: 45 minutes. Regardless of the time you arrive, your session ends 45 minutes after the scheduled start time. When appropriate, the therapy session may be extended.

Phone consultation: not available. Calls may be made only for making or cancelling an appointment.

24 hour cancellation policy: You will be charged for every scheduled appointment unless you cancel at least 24 hours in advance. At any time, hazardous road conditions are a valid excuse for cancellation without charge.

Referrals: Not all therapist/client relationships are a good "fit." If either party feels this way, you will of course be given referral names for you to contact. If your therapist believes you would benefit from a psychological assessment, you will be given referral information to a psychologist who will give you psychological tests and discuss the results with you. If your therapist believes you could benefit from mediation, you will be given referral information to a psychiatrist who will administer and manage your medication. In such case, you continue to see this therapist in addition to seeing a psychiatrist and the assessing psychologist.

Standard therapy fee: You understand that the hourly fee is $150 for the initial evaluation session and $125 for following sessions unless a reduced fee has been set due to your financial situation. Additional 1-15 minutes will be charged at $30 each or one fourth of the reduced fee. Sessions paid when scheduling will be reduced by 5%. When the session is extended and the session was paid at 5% savings, the extensions will be reduced by 5% as well.

Note: If you have not been seen for 3 consecutive months, your file will be considered close. If you wish to resume therapy any time after that, you will need to go through another evaluation session.

By signing below you are stating that you agree to comply with the conditions listed above and consent to treatment with Childers Counseling Service.

_____	_____	_____	_____
Printed name	Signature	Date	Witness