

RIVER VALLEY

Psychological Services

Disclosure Statement

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Thank you for choosing River Valley Psychological Services. The following information is to help you determine if my services as a counselor match your needs as a client. It contains information about my background and approach, the therapeutic process, professional relationship, fees, your rights as a client and other pertinent client information. Please read the following and ask any questions that would help you determine whether working with me and River Valley would be a good choice for you.

Background & Approach

I am a Licensed Clinical Social Worker in the State of Washington (License #LW 66950781) with a Master's of Social Work from University of Washington. Before and after the conclusion of my master's program, I had the privilege to work in many social service agencies in the Puget Sound Area and within hospital social work. I am now working with River Valley Psychological Services and my practice focuses on providing therapeutic families and adults with a wide range of issues and concerns. My areas of practice include stress, anxiety, depression, trauma, PTSD, life transitions/adjustment problems, relationship concerns, and communication skills. My educational and work experience/training has enabled me to apply a range of coherent theoretical approaches, such as Cognitive Behavioral Therapy (CBT), Solution Focused Therapy, Client-Centered Therapy, and Psychodynamic Therapy.

Therapeutic Process

The therapeutic relationship is a collaborative process that necessitates that we work alongside each other and that we both apply attention and effort to the work in order to see gains. The client-therapist relationship is a unique and dynamic relationship that will grow and change over time. Like many relationships, it will take time for client and counselor to build mutual trust, and it is my goal to hold a space for you to feel comfortable. Effective and productive therapeutic experiences will contain both highs and lows. It is likely that there will be times when as a client, you will feel really proud of the work you are doing, satisfied with your therapeutic relationship, and excited about the ways you are growing and changing as a product of being in therapy. Growth is so beautiful and rewarding and also, often the insight that comes can cause some discomfort and examination of one's stressors can bring on additional stress as we walk through the difficulty- this is very normal, and indeed, expected. Clients are encouraged to talk to their therapist about how they are feeling at each stage of the therapeutic process, and to share their experiences openly and honestly so that the therapist can know how to be most helpful to the client.

Sessions will last approximately 50 minutes. Please try your best to be on time, so we don't have to cut our time short. (Unfortunately, I do not have the ability to flex the timeslot)

Professional Relationship

The client-counselor relationship is characterized by openness, honesty and directness. It is therefore important to begin our relationship with a clear agreement on our mutual rights and responsibilities. Because of the professional nature of the client-therapist relationship, there are some significant differences between the therapeutic relationship and other relationships that I would like to clarify. It is considered unethical and harmful to the therapeutic process for clients and therapist to interact outside of the therapist office. Any social or business relationships between client and therapist are considered "dual relationships," and may interfere with your treatment.

It is my belief that your feedback plays an integral role in the therapeutic process. As a client, you have the right to choose a therapist who best suits your needs and preferences. You have the right to inquire about treatment as well as terminate treatment at any time. In reciprocal, I reserve the right to refer any client out to a different clinician if I feel I cannot best serve you for any reason – the purpose of this would be to support the best possible therapeutic outcome for you in the event I feel another provider may better serve your needs.

Limitations

I do not offer services or consultation for any sort of legal or court-mandated programs including but not limited to: civil litigation, auto-accidents, custody cases, dependency cases, mental health court/SUD diversion programs, disability cases. If a client happens to become involved in a legal matter in the course of our working together, I ask that you please advise me immediately so that a proper referral can be entered for you. I will not generate any court reports and cannot/do not complete endorsements for therapy or emotional support animals.

Records & Confidentiality

The law requires me to maintain written treatment records. You have the right to review your records and request modifications of inaccurate information. In Washington State, therapists may deny access to patient records if the health care information may be injurious to the patient's health and/or could reasonably expect to cause danger to the life or safety of the patient (RCW 70.02.090). All information that you share in session is kept strictly confidential. Specific information can only be released with your prior written consent. *Exceptions to the rule of confidentiality apply in cases when a child, dependent, elderly person, or disabled adult is abused or neglected, when potential suicidal or homicidal behavior is suspected, or pursuant to a lawfully issued subpoena.*

Fees & Payment

Please contact our office to obtain fee information for the initial assessment session and proceedings regular appointments. Payment is due at the time of service. If you are using

insurance, the office staff will facilitate the billing process. You are responsible for understanding your insurance benefits and for making deductibles and co-payments. Payment will be made to the office manager or me at the time of your appointment unless other billing arrangements have been made in advance.

Cancellation Policy

If you need to cancel your appointment, please call the office 24 hours in advance to let us know. You can reschedule at this time as well. Please note that appointments missed or cancelled without this advance notice will be charged the full fee unless I am able to fill the scheduled hour. Insurance companies will not pay for missed or cancelled appointments and you will be responsible for these charges. Any overdue accounts will be sent to a collection agency.

Emergencies

River Valley Psychological Services hours of operation are usually 9:00 AM- 5:00 PM. Should you experience an emergent circumstance such as suicidal or homicidal ideation or grave disability secondary to your psychiatric health, please ensure your safety first and foremost. In emergencies, the 24-hour King County Crisis Line is available at (206) 461-3222. Please call 911 if there is a life-threatening emergency or appear at your closest emergency room.

Consent for Treatment

Your signature below indicates that you have read this document in full and agree to its contents. Your signature also indicates that you consent to receive mental health counseling services from Christina Sand, LICSW.

_____	_____
Client Signature	Date

Client Name (Printed)	
_____	_____
Christina Sand, LICSW	Date