

CONSENT FOR PROFESSIONAL SERVICES FORM

Consultations for Therapists and Other Professionals Somatic Experiencing® Sessions and Consultations for SE™ Students

APPROVALS

Sarah is a Registered Psychotherapist, Canadian Certified Counsellor and Somatic Experiencing® Practitioner approved by the Somatic Experiencing® Trauma Institute to offer personal SE™ sessions that count towards certificate hours at all levels (beginner, intermediate and advanced). She has almost completed the requirements for approval to offer SE™ consultations. She offers clinical consultations to a variety of professionals, but these do not count towards SE™ certificate hours at the present time. She is an approved SE™ training assistant at all levels.

CONSULTATIONS

Sarah provides consultations to professionals seeking guidance in the following areas. She does not offer formal supervision for individuals who are required to practice under a supervisor.

- Clinical case consultations focusing on trauma recovery and complex cases, integrating a wide range of approaches. See www.sarahschlote.com, www.healingrefuge.com and www.equusoma.com for details.
- Integrating trauma-informed care principles and practices in a range of professions and settings.
- Safe and effective use of self in working with clients/students/animals, including working through counter-transference (addressing personal material that has become triggered in the context of your work or that is affecting effectiveness with clients/students/animals).
- Career coaching for individuals wanting to enter the helping professions and/or the field of animal- and equine-assisted interventions.
- Curriculum development or preparing content for speaking engagements, workshops or training delivery.

RISKS AND BENEFITS OF SOMATIC EXPERIENCING®

While SE™ is a gentle and titrated approach to trauma resolution that is based on gradual exposure, attunement and nervous system regulation, SE™ may involve the risk of remembering unpleasant events, feeling unfamiliar sensations, or arouse strong or unanticipated feelings or memories. Benefits may include increased capacity to tolerate and embody unpleasant sensations and emotions, increased capacity to experience joy, triumph, pleasure, and aliveness, decreased activation associated with certain issues, topics or events, and a greater sense of regulation, wellness, empowerment, agency, present-moment awareness and resiliency in the face of stressors, triggers and relationship challenges. Like with any approach, outcomes are difficult to predict or guarantee and depend on a number of factors. If you have any questions or concerns, you are welcome to discuss these with her, or address them to the Somatic Experiencing® Trauma Institute, the College of Registered Psychotherapists of Ontario, or the Canadian Counselling and Psychotherapy Association.

CONFIDENTIALITY

Sarah and her staff respect the privacy of her clients, hold in strict confidence all information about clients and comply with applicable privacy and other legislation. No information will be released to a third party without your prior authorization. At any time, you have the right to withhold or withdraw consent to, or place conditions on, the disclosure of your information. **Exceptions to confidentiality** include the legal and/or ethical obligations to disclose information if someone is at risk of harming themselves or someone else; a child is in need of protection; in the case of particular legal proceedings or investigations; if an individual is injured, ill or incapacitated and unable to give consent; or to a regulatory College in cases of investigation under the Regulated Health Professions Act. Sarah will also disclose anonymous information when consulting with other professionals for guidance specific to the therapeutic approaches she uses, for the purposes of providing quality care. In case of unexpected death or illness, you may be contacted by a representative who is acting on behalf of Sarah, who will be obliged to ensure confidentiality and provide you with a referral.

PRIVACY AND RECORD KEEPING

Records are retained for at least 10 years from the date of the last interaction with the client, or for 10 years from the client's 18th birthday, whichever is later. All information is maintained in compliance with the Personal Information Protection and Electronic Documents Act (PIPEDA) of the Federal Government of Canada and the Personal Health Information and Protection Act (PHIPA) of the Province of Ontario. All personal information obtained, used, and disclosed in sessions is done with your consent. You may request a copy of your records for a reasonable fee for the time spent preparing, copying and mailing the file (where applicable). Please note that records cannot be released when they contain the name of another person and redaction of content is necessary to protect that person's confidentiality, and that reports from other professionals cannot be released without the consent of that professional.

RATES AND PAYMENT POLICIES

- **60-minute session or consultation:** \$160 + HST (tax if applicable). Services provided at certain SE™ training modules may have an adjusted rate that has been agreed-upon by providers. This rate is: _____.
- Rates for appointments longer than 60 minutes are pro-rated to the time used.
- **Non-clinical support:** Work done outside of sessions (letters, reports, check-in calls over 10 minutes, etc.) is also charged by the hourly rate.
- **Sliding scale:** Limited spots are available on sliding scale for clients whose gross household income or whose parents'/caregivers' income (if a parent/caregiver is paying for services) is under \$50,000 CAD per year. Proof of income may be required.
- **Payment methods:** **cash** (exact change), **personal cheque** made out to Sarah Schlote, **eTransfer** or **credit card** (Square or PayPal). If paying by eTransfer or PayPal, payment must be received prior to the start of session. Any outstanding payment for sessions will be required prior to scheduling subsequent appointments. In the event that payment is not received for an appointment, clients will be given the opportunity to do so and if payment is still not made, Sarah reserves the right to employ the services of a collection agency to recover unpaid fees.
- A 5% annual interest rate will be charged for payments not received within 30 days of the session.
- A \$25 service charge will be added to the amount owing for NSF cheques.

CANCELLATION POLICIES

- Cancellations **within 48 hours from the session and missed sessions** will be billed at the full rate.
- If it is possible to reschedule within the same week, the cancellation fee will be waived (please be advised that sometimes there are no other available times within the same week).
- If you cancel or miss 3 consecutive appointments, or fail to respond to Sarah's attempts at contacting you, Sarah reserves the right to discontinue providing services and you will be provided with information about other services that might be of assistance if this is of interest to you.
- Fees for missed or cancelled sessions are not typically covered by extended health benefits plans.
- Cancellation or missed session fees will be **waived on compassionate grounds**, for example: in the event of sickness, a medical emergency requiring urgent professional treatment, or death in the family. **In the case of bad weather or dangerous road conditions, sessions will still take place by phone or video call.** Cancelling a session due to weather will follow the same cancellation policy as above.

Informed consent is essential and out of respect for your right to choice and self-determination. Consent must be given voluntarily, knowingly and intelligently. You have the right to change your mind and withdraw informed consent at any time, terminate services, or refuse a particular approach if you are not comfortable with it. By signing below, you confirm that you have read and understand the information presented in this document and consent to receiving professional services offered by Sarah Schlote, MA, RP, CCC, SEP.

Name: _____

Signature: _____ Date: _____