AIMEE I. GAFFNEY, M.A.C.P.

LICENSED PSYCHOLOGIST-MASTER

BURLINGTON, VERMONT 05401 802-233-0447

OUTPATIENT CONTRACT

SESSIONS:

The therapy hour consists of 50 -60 minutes. Your therapy hour is reserved for you. If you must cancel, please give a 24-hr. notice or you will be charged the full fee which cannot be billed to insurance.

FEES:

My hourly fee is \$140.00. This fee is due in full at the time of your session. You may pay by check or through the Jituzu portal which is the professional software I use. There are instances in which I can reduce the fee, if in a time of hardship. Please address the need with me as it arises. I am a small private practice and timely fee collection is essential in order for me to provide these services. I also charge for any phone calls, paperwork, or contact with other professionals that you ask me to do for you. This is pro-rated per the half hour.

CONTACTING ME:

I am often not immediately available by phone. When I am with a client, I do not answer the telephone nor return texts or emails. However, you may leave a message and I will make every effort to get back to you on the same day, except for weekends or holidays. When I am out of the office on vacation, or at a conference, I will leave the name of a trusted colleague whom you can contact if necessary. Please note that I do have a website : <u>www.aimeegaffney.com</u> and email: <u>agaffn@gmail.com</u>

CONFIDENTIALITY:

In general, confidentiality is protected between a client and a psychologist, or mental health professional, by law. I can only release information about our work to others with your permission. However, there are exceptions:

- 1.) Both law and standards of my profession require that I keep appropriate treatment records. In most judicial proceedings, you have the right to prevent me from releasing your records or providing any information about your treatment. However, in some circumstances, such as child custody proceedings and proceedings in which your emotional condition is an important element, a judge may require my testimony or release of your records if he/she determines that resolution of the issues before her/him demands it.
- 2.) If you are using insurance to pay for any part of my services, you should be aware that your insurance agreement has required you to authorize me to provide a diagnosis and information

about you, your treatment, and your progress in therapy. All insurance companies claim to keep such information confidential, but once it is in their hands, I have NO control over what they do.

- 3.) If I believe that a child, an elderly person, or a disabled person is being abused by you, I am legally required to contact the appropriate agency and report it.
- 4.) If I believe that a client is threatening serious bodily harm to another, I am legally required to take actions, which include notifying the potential victim, notifying the police and/or seeking appropriate hospitalization.
- 5.) If I believe that a client is threatening to harm her/himself, I am legally required to seek <u>hospitalization for the client, or to contact authorities or family members, or others who can</u> help provide protection.

These situations have rarely arisen in my practice. Should such a situation occur, I will make every effort to discuss it with you before taking any action.

I may occasionally find it helpful to consult about a case with other professionals. In these consultations, I do not reveal the identity of my client. The consultant is, of course, also legally bound to keep the information confidential. Unless you object, I will not tell you about these consultations unless I feel that it is important to our work together.

COUPLES THERAPY:

I believe that honesty and openness is essential to healthy intimacy. Therefore, any information provided to me privately (in session or, for example in a telephone conversation) by one partner will NOT be kept in confidence from the other partner. The rules and ethics of confidentiality do, of course, apply to the couple as a unit.

MY QUALIFICATIONS:

I have a Master's degree in Counseling Psychology from Antioch University and have been in private practice since 1986. Previous to licensure, I had three years of supervised practice at an outpatient mental health facility, at the Department of Corrections, and in private practice. I have trained extensively in the areas of individual adult psychotherapy, women's adult development, and Interpersonal and Depth Psychology. I have also studied broadly in family and couple's therapy.

Since 2008 I have been certified as an advanced "SEP": a Somatic Experiencing Practitioner for Healing Trauma, through the Foundation for Human Enrichment, an institute founded by Dr. Peter Levine, the developer of this approach to healing trauma, now taught around the world. More information is available about this work on my website: <u>www.aimeegaffney.com</u>. ETHICAL CONDUCT

Under Vermont Law (ACT 222) I must make available to you a list of actions entitled Unprofessional Conduct for Psychologists, and information about general complaint procedures. These documents are available in the waiting room, on my website, or asking me for a copy.

Your signature below indicates that you have been informed of the above documents, that you have read the information in this contract, and agree to abide by its terms during our professional relationship. Thank you.

Signature of Client: _____

Date:

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