Come Together Counseling

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1. Informed Consent

This document is an informed consent. The goal of this document is for us to come to common understandings about our relationship with each other. Everything in this document is open to discussion.

Section I: About Me and My Practice

Hi there! My name is Renya. I graduated from Syracuse University in 2021 with a Masters in Marriage and Family Therapy and Certificate of Advanced Studies in Trauma. I'm deeply committed to my own personal growth and healing, as well as advocating for the social changes that make personal growth possible. When I'm not working I like to write fiction and poetry, read books, listen to music, and spend time with my loved ones.

Some of my relevant identities are that I am white, nonbinary, queer, and a Relationship Anarchist.

My therapy practice seeks to decenter mental health diagnoses in favor of managing the difficulties of living, and connecting with some form of meaning.

Section II: Your Rights

Confidentiality and HIPAA. The information that you reveal during our time together is confidential, which means that I will keep any information that can possibly identify you private. Pursuant with HIPAA (Health Insurance Portability and Accountability Act), any information that you would like shared with another medical provider can only be released with a signed ROI (Release of Information) form. Your information is always available to you free of charge via the My Clients Plus patient portal or upon request after we have concluded our therapy relationship.

Mandated Reporting. As a mandated reporter, I am "legally required to report suspected child abuse if I have reasonable cause to suspect that a child is a victim of child abuse" (language from DHS PA website). If this report is pursuant to you or your child, I will inform you that I am making the report so that we can discuss how it will affect our time together.

Duty to Warn/Protect. By law, I am required to warn a person if you make specific, articulable threats against a particular person. This might mean contacting them directly or getting law enforcement involved.

Mistreatment. If you suspect that I have mistreated you in our time together, I would invite you to contact my supervisor at brandydefigliolmft@gmail.com or report me to my licensing board via emailing them to request a complaints packet ethics@aamft.org.

No Surprises Act. Per the No Surprises Act, you have a right to understand what you will be charged prior to receiving services. This process is outlined further in "Statement of Agreed Upon Fee For Services Rendered," wherein your fee structure will be laid out in one place for you to sign at the outset of treatment, and everytime our fee changes.

Section III: About Our Time Together

Finding a New Normal. Typically we come into therapy because our "normal" day to day life is causing us distress. In the course of our process together, our goal will be to find a new normal that causes you less distress.

The Power of Stories. I use a therapy approach that looks at the stories we tell about ourselves, as well as where those stories came from. In our work together, you'll get the chance to rewrite your story through the reprocessing of old experiences and the choosing of new experiences.

Long Term Relational Healing at YOUR Pace. The healing process might evoke deep feelings of pain, sadness, grieving, and loss. Equally it might evoke feelings of euphoria, happiness, and a sense of connection with yourself. One thing we can be sure of is that healing happens through a relationship building process – both our relationship(s) together, as well as the other relationships in your life.

Consent and Regular Check Ins. Throughout our time together I'll be regularly checking in with you about what you're comfortable with, what we're doing together, and how you're feeling in that moment. I recognize that therapy is not likely to be helpful if I 'push' you beyond where you're willing to go. I also recognize that many people who come to therapy may not have had their right to consensual treatment recognized in the past and might be unfamiliar with what this looks like and how it feels, so this will be something we mutually define and practice.

I Will Mess Up. While I am a therapist with specific training, I'm also just a person trying to figure things out same as you. I will say something that rubs you the wrong way, or not be emotionally present all the time. In our process it is normal for you to occasionally be upset with me. What happens next is extremely important – we can collaborate to work through what happened together, or you can decide that it's in your best interest to end our sessions. What I will ask is that, if something comes up, we can give repair a try.

Intention Setting. When we begin our work together, we will create a contract detailing what we are doing together and how we are doing it. Expect for us to start working on this form in the sessions following our intake and to review it every few months or as necessary to ensure it is still accurately depicting what we are doing.

Crisis, Including Suicidal Ideation. At some point in our journey together, and maybe even as we are beginning, you might go through a crisis - including possible thoughts of suicide. My perspective about this is that we will make a plan for what to do when a crisis occurs. Police "check ups" and psychiatric hospitalization can sometimes harm rather than help. I view these interventions as being an absolute last resort that I would rather avoid, unless you are specifically requesting it. Our plan will include mention of other people you can ask for help, coping tools, and a specific plan if you feel particularly unsafe. That may include increased sessions so I can better support you. I also welcome the open discussion of suicidal feelings, self harm feelings, angry feelings, etc. I understand how people might be hesitant to share these feelings with therapists, but I want to assure you that it is okay for us to discuss as this gives us an opportunity to address it together.

Systems not Diagnoses. I recognize that you may be coming here with a diagnosis given to you by someone else. A big part of my decision not to work with insurance companies is to have the freedom not to focus our attentions on your diagnosis, but rather look at your environment and the systems that impact you, your history and what has happened to you, and for you to define yourself, not me.

Mind Body Connection. Our physical and mental health symptoms are intricately connected. That means that our mental health conditions will impact our physical health, and vice versa. I'm not a doctor so I can't give you medical advice, however I've seen it many times that working through our life experiences and changing our environments can help to relieve physical health symptoms.

Drugs and Alcohol. If you show up to a session intoxicated, we will have a discussion about if it makes sense to continue our session, starting with a discussion about your drug and/or alcohol usage, and the role it plays in your life. Alternatively, it might make more sense to reschedule if you are too intoxicated for us to continue. I will trust your judgment in determining if/when/how to reduce or discontinue your drug and/or alcohol use.

Self Disclosure. Self disclosure refers to the process whereby a therapist shares information about themselves with you in order to relate with you. My process for determining when I self disclose is as follows: when it's relevant to something we are discussing, if it's something that could possibly help you in your process and not me in my process, after asking for your permission to share about myself, and/or if it's something that you're asking about.

Meeting in Person. If we happen to be in the same public space, you are allowed to approach me to exchange a few brief words. I will not be approaching you as that might identify you as a client of mine and thus be a violation of HIPAA. Depending on the intimacy of the space, if I see you I might leave to avoid a situation in which the context of our relationship would change.

Personal Social Media. If I find your private social media profile, I will be blocking it immediately and informing you about this during our next session. I would ask that you do the same for me. This is to maintain appropriate boundaries in our relationship. In the process of one of us finding the other on social media, we may discover new information about each other. If this happens, my expectation is that the discoverer will share what they saw so we can both talk about it.

YouTube. I am making content on YouTube connecting radical politics and mental health, among other things. You are welcome (but not required) to watch these videos, but I would ask that you please do not leave comments or subscribe to my Patreon. A big part of my reasoning for making this channel is for it to be a resource, including one for you if that's something that interests you. If you would like the resources I include with a Patreon subscription, please check in with me if this is something I can provide for you. If you experience a strong reaction while watching one of my videos, I would urge you to bring this up during our next session so we can discuss it. You can find a link here: https://www.youtube.com/channel/UCWWn3zi0g6yxgRgjOSmKdDQ/featured.

Communications. Most of our communications will take place through the My Clients Plus patient portal. Alternatively, you can contact me for scheduling purposes via text or call at 215-515-8058 or email renya@cometogethercounseling.net. I will respond to you within two days during normal business hours, which generally are 10am - 6pm not including weekends or holidays. I am not able to be on call in case of emergencies. Instead we will be discussing people in your life you can reach out to in case of an emergency, as well as local hotlines or service providers that may also be a good fit.

Note Taking. As a component of the therapy process, I'll be taking notes after our sessions and calls. The purpose of taking and keeping notes is to understand your journey and the therapy process over time. If you'd like, I can forward these notes to you when they are completed, otherwise they will be available to you free of charge at any time as long as I am in practice and for seven years after I have left. I will not be providing these notes to anyone else without your express written permission (with the exception of my supervisor).

Recording. As a function of my supervision and for the betterment of my practice as a therapist, I may ask for your consent to record our session so that I may review it later.

Payment. Our rates are for 50 minute sessions, pro - rated to the quarter hour – meaning that if we decide to meet for longer than 50 minutes, the cost of our sessions will adjust accordingly.

Cancellations. A cancellation 24 hours in advance (on days in which I am working, so Saturday and Sunday don't count) is no charge. A cancellation with less than 24 hours notice is half charge of whatever your session fee is.

Missed Appointments/No Shows. If you make contact with me and we schedule another session within 48 hours of the appointment you missed, it is a half charge of your session fee. If you do not make contact or make contact with me more than 48 hours after your appointment it is a full charge for the missed appointment. Limit of 6 No Shows within a 6 month period, with possible exception for extreme circumstances.

Emergencies. I can be flexible in waiving late cancel fees or no show fees. What I will ask in these situations is for you to self identify that you are experiencing an emergency and would like to request me to waive your fee. As emergency can take on a lot of different forms and I trust you to know what this looks like for you – something that is urgent, unplanned, and a big deal. If you are missing multiple appointments and asking me to waive fees due to there being multiple emergencies, we might need to check in about our ability to continue meeting.

Emergency Contacts. As we work together, you might experience an emergency that would impact your safety. If this comes up, we can discuss you giving me an emergency contact and what situations you would like me to be in touch with them.