



Living Hope

Family Therapy and Counseling
1401 E. Taft, Sapulpa, Ok. 74066
918-914-4673

Dr. Allen Schneider, D.Min., LMFT

POLICIES OF THERAPEUTIC PRACTICE

Effective date: May 1, 2015

WELCOME

Welcome to Living Hope Family Therapy and Counseling. Living Hope FTC is an association of independent mental health professionals who offer therapy and counseling from a Christian perspective. Because of the independent nature of our relationship, each therapist establishes his/her own fees and practice policies. The following information describes the *Policies of Therapeutic Practice* for Dr. Allen Schneider, LMFT.

DR. ALLEN SCHNEIDER

Dr. Allen Schneider is a Licensed Marriage & Family Therapist and a clinical member of AAFMT. He is also an ordained pastor in the United Methodist church. He has been licensed as an MFT since 1991 and currently provides counseling and therapy for individuals, couples, and families. His services are provided within the perspective of a family systems model. Although he uses a variety of therapeutic approaches, his primary approach is known as Solution Focused Brief Therapy. This is a positive approach to counseling which focuses on helping clients identify and attain their "best hopes."

THE COUNSELING PROCESS

Counseling is a shared listening process focused on specific problems and situations. Therapy is a process of self-discovery and healing. Both are dependent upon a relationship of trust, openness, and commitment. Marriage and Family Therapy is a specific approach to counseling and therapy which seeks to utilize the resources of the entire family system to bring about positive change, healing, and growth.

The therapeutic process has both benefits and risks. Risks can include uncomfortable feelings of: sadness, guilt, anxiety, frustration, and anger, as unpleasant issues

and problems are discussed. Benefits can include: healing from emotional pain, enhanced relationships, and resolution of identified problems. There are no guarantees but most clients find therapy to be a positive and growing experience.

For some the course of therapy is brief (4-6 sessions). For others the course of therapy is extended. Treatment length is usually determined by both the complexity of the presenting problem and the readiness of the client to work for change.

APPOINTMENTS

When you make an appointment a specific time block is reserved for you. The typical therapeutic session is 50 minutes in length. An extended session (75 min) can also be scheduled. Many individuals, couples, and families find extended sessions to be beneficial. If you should have to be late you will be seen for the remaining portion of your reserved time. Every effort will be made to see you on time. However, in some unusual circumstances you may have to wait before the appointment begins. In such cases you will be seen for your full visit. **If you need to cancel an appointment, please do so at least 24 hours in advance; otherwise the regular session fee will be charged.**

Appointments are usually scheduled on a weekly basis. In some instances, indicated by intense concern or a crisis, more frequent appointments may be desired. As therapeutic process is made, appointments can sometimes be extended to semi-weekly or monthly visits.

FINANCIAL POLICIES

Fees for regular sessions (45-50 mins.) are \$115.00. Extended sessions (70-75 mins.) are \$165, and the fee for a "check-in" or extended phone call (25 mins.) is

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There's Healing And Hope For Families Today!

\$60.00. Reduced fee sessions can be arranged in cases of special need. Payment is due at the end of each session. Payment can be made by cash, check, or credit card. Fees for court testimony and report writing are \$200.00 an hour and must be paid in advanced. A \$35 fee will be charged for all "returned" checks.

INSURANCE CLAIMS

For insurance purposes, Dr. Schneider is an "out of network" provider. Out of networks services provided by LMFT's are covered by many insurance companies. At your request a statement will be provided for you to file with your insurance company. Please be aware that in such cases a "mental health diagnostic code" is required and once documented this will become a part of your personal health information (PHI). It is the client's decision as to whether or not an insurance claim will be filed. If you do choose to file, this office will assist you by providing any information necessary for the processing of your claim. **The client, however, is ultimately responsible for the account.**

TELEPHONE CALLS

You are welcome to call me to arrange appointments or briefly to report treatment concerns. You will usually need to leave a message and your call will be returned as soon as possible. Please note that therapeutic conversations, will be billed at a rate of \$55.00 for a 25 minute block.

EMERGENCIES

If you have an emergency you are encouraged to call 911 or proceed to the nearest emergency room.

Please give your medical team my name and number with proper authorization so that I can be notified regarding your situation.

EMAIL AND SOCIAL MEDIA

For the purpose of making business arrangements the client is welcome to contact me by email. Please note, however, I do not enter into therapeutic discussions through email or various forms of social media. I do not become "friends" with clients on Facebook.

REFERRALS

There are times when clients may be referred to other professionals for specialized services. Examples would include referral to a physician for medical evaluation or to a psychologist for specific testing. When referrals are made, the client is encouraged to state his/her preferences for consultants.

CONFIDENTIALITY AND DISCLOSURE OF RECORDS

For a complete statement regarding confidentiality and possible disclosure of PHI (Personal Health Information), please refer to the document titled, *NOTICE OF PRIVACY PRACTICES*.

PARTICIPATION IN THERAPY

Since my therapeutic orientation is that of a Family Therapist, it is my usual approach to include all relevant family members in the counseling session. For couples therapy this would include both spouses. For family therapy this would include: parent(s) (or guardians), children, and others living in the home. While there may be occasions, in marriage and family therapy, when seeing an individual family member is advised; in such situations limits to confidentiality may apply. A "no secrets" approach is the policy of this practice.

RESPECT AND RIGHT OF TERMINATION

If you are unhappy with what is happening in therapy, I hope you will take with me so that I can respond to your concerns. You may also request that I refer you to another therapist and are free to end therapy at any time. You have a right to considerate and respectful care.

Please note that I too have a right to end treatment should there be any instance of harassment or threats made towards me or my family.

You will be asked to sign a document indicating that you have read and received a copy of these policies.