



Counselling Consent and Confidentiality

Counselling therapy is a confidential process aimed at helping you address important concerns in your life, to develop a greater understanding of yourself, your life, and implement new skills and perspectives to help nurture a more balanced and wholesome way of being. The foundation of this work is based on a supportive, honest, and respectful relationship with your therapist, who has the training, experience, and desire to help you establish and reach your personal goals.

The initial session with your therapist will involve information sharing and collaborative development of an action plan to help guide the counselling process. This action plan may involve psychological education, cognitive processing, behaviour activation, individual study, relaxation and coping strategies, or a combination of these to ensure you are receiving a well-rounded and holistic approach to your healing. It is possible that at some counterpoints in the therapeutic process, increased anxiety, confusion, or emotional reaction may take place as you work toward your healing. This is completely normal and typically vital to the therapeutic process.

Tele-therapy and E-Counselling

If you are unable to participate in therapy in-person for any reason (travel limitations, weather conditions, personal reasons), phone or video sessions can be provided within a secure, private platform (via OWL Scheduling Software). If you wish to proceed in counselling via video or phone, it is important that you can find a quiet, uninterrupted space to conduct the session.

Confidentiality

All information, interactions, scheduling, attendance, content of sessions, progress in therapy, and records are confidential. You have the right to obtain any of the above information at any time, with the signing of a “consent to release information” form that your therapist will provide. All documentation of your personal file is stored securely by your therapist. Records are securely destroyed after 10 years following termination of therapy.

If you have any questions about this process, please do not hesitate to discuss details with your therapist at any time.



Limits of Confidentiality

Your therapist has the protection of your privacy at heart, but is ethically obligated to disclose information to the proper authorities under the following conditions:

- There are reasonable grounds to believe that there is a risk of imminent harm to you, or specified others, including the abuse of children,
- If there is reason to believe that a member of a regulated health profession in New Brunswick has sexually abused a client,
- A court subpoena.

Your personal information is not shared without you being notified, under any circumstance.

Fees

- Individual Counselling Therapy (60 minutes): \$150
- Couples Counselling Therapy session (75 minutes): \$187.50
- Sessions that are over 60 minutes will be charged accordingly

Social Media

It is entirely possible that you may come across your therapist on an online platform (Facebook, Instagram, etc.). Please note that your therapist is governed by ethical guidelines that prevent them from connecting with clients on these social platforms, so not to risk a breach of confidentiality.

Cancellation Policy

If you need to cancel or reschedule an appointment, please advise your therapist via phone or email 24 hours in advance. If less than 24-hour notice is provided, a \$45 cancellation fee will be charged. Please cancel on Friday for appointments scheduled for Monday- if possible. If you need to cancel or rebook your appointment: Email: nicolebreentherapy@gmail.com OR Call (506) 497-5082

If your therapist has reason to be concerned for your wellbeing and/or you fail to attend an appointment, a follow up call will be issued to check in on your wellbeing.



Please note, your therapist views calls and texts after hours as an *invitation, not obligation* to respond to, unless there is a crisis situation the therapist has been made aware of. It is likely that your therapist may be “unplugged” outside of regular hours and will respond as soon as possible.

By signing below, I agree and understand the above information, expectations, purpose, benefits, possible risks, emergency procedures, cancellation policy, and confidentiality policies. I hereby consent to participation in the counselling process with Certified Canadian Counsellor, Licensed Counselling Therapist, Nicole Breen, BA Honours, MA Counselling Psychology.

Client Name (Printed): _____

Client Signature: _____

Date: _____

Counsellor/Therapist Name: Nicole Breen _____

Counsellor/Therapist Signature: *Nicole Breen* _____

Date: _____