

GILLIAN ASHLEY-MARTZ
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STATEMENT OF UNDERSTANDING AND CONSENT TO TREATMENT

This document is intended to answer questions that client's often have when they seek counselling services and to obtain a new client/s consent to treatment.

Confidentiality:

For counselling to be successful it is essential clients feel that their concerns will be kept confidential. As your counselor I am obliged by ethical standards of practice to keep the content of all our interactions confidential. There are legal limits to confidentiality however and they are as follows:

client tells me anything that leads me to assess that they are at risk of harm

client tells me anything that leads me to assess that a child is at risk of harm

I am ordered by a court of law to disclose information

I am required by my professional boards to keep simple clinical notes of all counselling sessions that include dates of service provision, any legal documentation, contact with other professionals, brief summary, (one or two lines) of content of sessions. These notes are required to be kept in a locked cabinet. Clients are always welcome to view notes.

Level of education and experience in the counselling field:

I hold a Masters Degree in Social Work and a Certificate of Couple and Family Therapy from the Justice Institute of BC. I am also a Registered Clinical Counsellor, a Registered Social Worker and a Certified Canadian Family Educator. I am also a certified EMDR therapist. I have worked in the counselling field for 20 years the last 14 of which have been in private practice. I am trained in many different areas of counselling practice so that I can respond to a large range of client needs. These include Cognitive Behavioural Therapy, Attachment Theory , EMDR trauma methods, Clinical Hypnosis, Brief Solution Focused Therapy. I am currently developing my practice in the field of Equine Facilitated Wellness which provides powerful experiential learning for clients looking for an alternative to office based therapy. No horse experience is needed and there is usually no riding involved.

Membership of Professional Boards:

I hold full, professional membership with the BC Association of Registered Clinical Counsellors, BC College of Social Workers, BC Association of Social Workers and Family Resource Programs, Canada

What to expect from the counselling experience:

I regard my role as helping my client/s define their goal/s for counselling and together we develop a treatment plan from there. This may be short-term, longer-term or

provide intermittent support as needed. Clients can expect that I will above all listen without judgement and create a safe, respectful, encouraging and comfortable space for client's to explore whatever issues they bring to the counselling process.

If a client presents with concerns that I feel are outside the scope of my practice expertise I will work with the client to refer to appropriate outside sources.

Length of sessions:

Sessions will be an hour in length including time to complete payment and arrange future sessions. Longer or shorter sessions can be arranged with notice.

Fees:

Payment of fees is required at the time of service provision unless otherwise arranged. Payment can be in the form of cash or cheque. Debit or Visa facilities are not available at this time. Fee structure is \$150 for individual, couple or family sessions. These fees are in accordance with the guidelines provided by the BC Association of Registered Clinical Counsellors. A receipt will be issued to clients to submit for insurance purposes.

Cancellation policy:

24 hours notice is required in order not to be charged a late fee of \$100 for a missed session.

Communication outside of sessions:

I am available to be contacted during regular office hours from 9.00 to 5.00 Monday to Thursday. However I am often in session all day and won't be able to return calls till late in the day or the next day. If a client thinks they will need support outside of office hours this can be arranged through another agency. I do not check messages in the evenings or weekends or on statutory holidays so that I can have meaningful time off . Phone calls or emails requiring more than 10 minutes of office time will be charged for at a rate of \$2 per minute.

Please sign below as having read and understood the above statement of understanding and consent to treatment. Keep a copy for your own records.

Name/s:
Signature/s:.....
Counsellor's signature:.....
Date:

**GILLIAN ASHLEY-MARTZ
MSW RSW# 04523 RCC# 2876**

NAME/S.....

PHONE#..... CELL#

EMAIL.....

PLEASE INDICATE YOUR PREFERRED METHOD OF CONTACT.....

IS IT OK TO LEAVE MESSAGES AT THESE #s.....YES NO.....

ADDRESS.....

.....

REFERRED BY.....

EMERGENCY CONTACT NAME AND PHONE #.....