

**ARACOMA SMITH, LCSW, PLLC**  
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I would like to welcome you to my practice. I appreciate the opportunity to be of help to you and hope this handout will provide information useful in making an informed decision concerning my services. Therapy is a large commitment of time, money, and energy. I believe you should be comfortable with the therapist you choose. I also believe we can work most productively together when we are clear with each other about roles and expectations. Please read this information sheet carefully so that we can discuss any questions you may have. I will then ask you to sign off that you are in agreement with the stated terms before we start therapy.

**MY BACKGROUND:** I graduated from West Virginia Wesleyan College in 1995 with a Bachelor in Arts in Psychology and Sociology. I went on to do my graduate work at Radford University and received my Masters in Social Work in 1997. I have been licensed by the Commonwealth of Virginia, Department of Health Professionals since 1999 as a Licensed Clinical Social Worker. I am also a member of the National Association of Social Workers. My clinical experience includes: domestic violence, acute-care psychiatric, outpatient counseling, oncology, residential treatment for children, foster care, psychiatric assessment, employee assistance, and a partial hospitalization program. I have been in an outpatient setting since 2001.

**WHAT TO EXPECT IN PSYCHOTHERAPY:** Therapy is not like visiting a medical doctor in that it requires your very active involvement and efforts to honestly assess your thoughts, feelings, and actions. Therapy involves learning to understand yourself better, to make decisions about relationships, parenting, careers, personal lifestyles, etc., to develop skills, like communication, stress management, or assertiveness; to deal with feelings, like fear, love, depression, anxiety, anger; and to solve problems and deal with painful life situations, both past and present.

I view therapy as a collaborative effort. You are expected to be as open and honest as possible in identifying the concerns that bring you to therapy and committed to work on these concerns. I will act as a consultant with specialized knowledge and training to assist you in making the desired changes. By the end of the first or second session I will be able to offer you my initial impressions and verbal treatment plan, which can change somewhat as we progress in treatment. You will then be able to make the best treatment decisions, in your own best interest. If at any time you wish to consult with another therapist, I will assist you with a referral.

Psychotherapy may be tremendously beneficial for some individuals while, at the same time, there are some risks. The risks may include the experience of intense and unwanted feelings, including sadness, anger, fear, guilt, or anxiety. It is important to remember that these feelings may be natural and normal and are an important part of the therapy process. Other risks of therapy might include: recalling unpleasant life events, facing unpleasant thoughts and beliefs, increased awareness of feelings, values, experiences, and alterations of an individual's ability or desire to deal effectively and harmoniously with others in relationships. In therapy, major life decisions are sometimes made involving families, career, and lifestyle. These decisions are a legitimate outcome of therapy experience as a result of calling in to question your beliefs and values. As your therapist, I will be available to discuss these aspects of our work together.

**APPOINTMENTS:** I am a non-emergency practice and sessions are by appointment only. Therapy sessions are generally scheduled for 45 to 55 minutes. Because the appointment is reserved for you, it is necessary to charge for appointments that you arrive more than 15 minutes late for, are not kept, or not cancelled within one business day (24hrs) of their scheduled time. Exceptions are only made in weather or medical emergencies and are at the discretion of myself. If an appointment is missed you will be charged a \$50.00 fee and this will not be covered by your insurance. In addition, if there are two missed appointments all future appointments may be cancelled without notice and you may be discharged from my care. This will be determined on a case by case basis. If you have not been seen within three months, you will be discharged from my care and no longer considered a patient under my care. If you wish to be seen again, you will need to reschedule as a new patient at that time.

**BILLING/INSURANCE:** If I am a contracted provider with your insurance company then I will file all claims for you. It is important that you provide all insurance information properly and update me of any changes. If this is not done you may then be held responsible for the entire bill. You are responsible for obtaining the initial Authorization for care and I will then follow up with your insurance company. It is also important that you clearly understand your mental health benefits, these will most likely be different than your regular medical coverage. You are responsible for your co-pay at the time of your visit (**cash and check are only accepted**) and then are expected to pay any co-insurance as soon as the Explanation of

Benefits (EOB) comes in from you insurance provider. If balances are not paid within one month, then all future appointments will be cancelled. If the balance is not paid within three months then it will be sent to collections and I will no longer be able to provide services to you. You will also be responsible for all collections costs that occur. Please note that there is a \$40 fee for returned (NSF) checks.

**PHONE CALLS/E-MAIL:** I cannot always be reached by phone immediately, but will make every effort to return calls as efficiently as possible. If you have a concern that you feel cannot wait until our next scheduled appointment time, please call and leave a detailed voice mail. If there is an emergency and you cannot reach me, please follow the following protocol. First, call 911 if it is a life threatening situation. Second, if you need guidance on what you should do you can either call Snowden at Fredericksburg at 540/741-3900 or the Rappahannock Community Services Board at 540/373-6876- both of these numbers have 24hour assistance. Please note that if a phone call exceeds 5 minutes of my time you may be billed for the call. You can also reach me by email for updates or to change appointment times. Please be aware that I do not provide therapy on the phone or by email. Finally, if you are in an emergency situation and my cell number is given, please note that Voice Mail on this is not confidential and that any information that is received may be viewed by others.

**COURT APPEARANCES:** The purpose of my work is to provide clinical intervention that assists in symptom reduction. I do not provide evaluations for any court processes such as custody, visitation disputes, or criminal charges. Should these services be required before or after treatment has begun, I can refer you to the appropriate professional that can provide these services. If at any point there are legal proceedings and I receive a subpoena you will be charged for the entire time I am away from the office. I will need at least a five-business day notice if court should be cancelled or you will be charged for the number of days that I was scheduled out (8hrs per day). In addition, if I need to seek legal representation you will also be responsible for these fees. The fees for court appearance range from \$250 to \$400 per hour.

**CONFIDENTIALITY:** As a social worker licensed by the Commonwealth of Virginia and as a member of the National Association of Social Workers, I agree to abide by and uphold the most responsible, ethical and professional standards possible. I regard the information you share with me with the greatest respect so I want to be as clear as possible about how it will be handled. In general, I can tell no one what you tell me or even acknowledge that you are a patient. State law and professional ethical principles in all but a few rare circumstances legally protect the privacy and confidentiality of records. Specifically, some exceptions to confidentiality that I commonly encounter are: 1) When I have reason to believe you intend to harm yourself or another person, 2) When I have reason to believe a minor child (under age 18) has been or will be abused or neglected and 3) When your records have been subpoenaed by a legitimate court order (or you are being treated by me under a court order). I will make every effort possible to inform you prior to releasing your or our dependents records.

*Patients who are dependent/minors:* As the therapist of a dependent /minor, it is important that the patient is able to completely trust me. As such, I keep confidential what the minor says in the same way that I keep confidential what adult says. As the parent/guardian, you have the right and responsibility to question and understand the nature of my activities and progress with the minor, and I must use my clinical discretion as to what is appropriate disclosure. In general, I will not release specific information that the minor provides to me. However, I feel it is appropriate to discuss with you, the parent/guardian, the minor's progress and your participation in their treatment. For children of divorced or separated parents please note that both parents are entitled to the child's medical records unless the courts have ruled otherwise.

*Please Note:* If a portion of your treatment expense is covered by insurance, they may require me to provide certain information about your diagnosis and care. If you have questions about information to be released, please bring it to my attention for discussion. Delinquent accounts may be turned over to a collection agency, but you will be notified in advance of this action. Psychotherapy notes will not be released to the collection agency.

**-EMAIL:** Due to having a small practice I depend on using email to communicate with my clients outside of your appointment time. I follow HIPAA regulations when it comes to using electronic communication.

**-RECORDING SESSIONS:** At no time are you permitted to either video or verbally record treatment sessions.

**TERMINATION:** Termination of psychotherapy may occur at any time, and either of us may initiate it when we believe it is in your best interest to do so. I ask that we meet for a least one last session to review our work together. If any referral is warranted, it will be made at that time. If you are dissatisfied with any aspect of our work, please raise it with me immediately, as it will make our working together slower and more difficult if not resolved. If you believe that you have been treated unethically by me, or any therapist, and cannot resolve this problem with me, you can contact the Virginia State Board of Social Work.