

SOLUTION FOCUSED FAMILY CENTER



Interview Office:

Solution Focused Family Center
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www.solutionfocusedfamilycenter.com

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Therapy Service Advisement Form

Welcome to Solution Focused Family Center. The purpose of this statement is to inform you about Mindy Harrison, LCSW-S with Solution Focused Family Center's services and policies, ensuring clarity in our professional relationship. Please review this document carefully, as it outlines expectations, limitations, and program requirements. This document serves to clarify the therapy process, including procedures and policies. It, along with any attachments, must be completed and returned to Solution Focused Family Center prior to beginning treatment.

My Qualifications and Experience:

Mindy Harrison is a Licensed Clinical Social Worker Supervisor (#38536) in the State of Texas. She holds a Master's Degree in Social Work, and a Bachelor's Degree in Social Work. Her training and current license qualifies her to offer individual, group, and family therapy for adults, adolescents, and children. There are no restrictions on her license. She has worked in the therapy field for 20 years and has worked extensively with families and children. Her area of experience includes: family conflict, parenting stressors, co-parenting, child, adolescent, and adult depression and anxiety, and infertility issues. In addition to her private practice, she is a Board Approved Supervisor to individuals seeking advanced licensure of LCSW.

The Therapy Process, Purposes, Goals, and Techniques:

At Solution Focused Family Center, our therapy services are designed to address a variety of individual and family concerns, aiming to decrease emotional distress and enhance overall well-being. We offer short-term therapy through individual, family, couple, and group sessions tailored to meet the unique needs of our clients. The initial visit will consist of an assessment session, in which we will discuss the concerns that prompted you to see therapy, and you and your therapist will collaboratively develop a treatment plan. It's essential to have a good fit between you and your therapist; if at any point you feel otherwise, we encourage open communication to explore the possibility of transferring to a more suitable therapist.

The therapy process can evoke a wide range of emotions, from positive feelings of excitement and energy to difficult emotions like guilt, anger, or frustration, just to name a few. Emotional healing that may take place during therapy can become personally enriching and encourage you to either face a conflict or learn new coping styles. Our therapists will do everything they can to provide a positive, safe, supportive environment for you to explore the concerns that have brought you to the point of seeking therapy. Please note that therapy can take time and is not a quick fix to your problems. If additional services such as medical evaluations, psychiatric medication management, or educational classes are deemed necessary, we will discuss these options and assist in finding appropriate providers.

The more effort you invest in the therapy process such as arriving on time, maintaining consistency, following recommendations, and completing assigned homework, the greater the benefits you will derive from your sessions. Your motivation and commitment play a significant role in achieving positive outcomes from therapy.

The more honest you are about the challenges you face and the role you play in them, avoiding the temptation to embellish or impress, the greater the benefits you will gain from therapy. Authenticity in sharing your experiences fosters deeper understanding and facilitates meaningful progress in the therapeutic process.

We utilize various treatment methodologies, including cognitive behavioral therapy, solution focused therapy, family systems approach, and psychoeducational components, to develop a tailored treatment plan for you and your family. Ultimately, our goal is to empower clients to achieve optimal well-being by integrating their physical, emotional, mental, and spiritual selves, thereby enabling them to lead fulfilling lives.

Treatment of Minors:

Treatment of minors under the age of 18 will only be provided with the permission of the legal guardian or conservator. By signing this form for a minor client, you state that you are the legal guardian or conservator of the minor client with the legal right to consent to treatment, and you agree to provide a copy of current divorce/child custody order if any exists. This agency must have a copy of the current order to begin treatment.

Client/Therapist Relationship:

The client-therapist relationship is strictly professional and centered on therapeutic treatment. Although sessions with your Mindy Harrison, LCSW-S may involve sharing of very detailed and personal information, the relationship is a professional rather than a social one. It is essential that this relationship remains focused solely on therapy, avoiding any social interactions or personal references. For instance, please refrain from inviting your therapist, Mindy Harrison, LCSW-S, to any social gatherings or requesting personal connections outside of the therapeutic context.

Mindy Harrison, LCSW-S has experience working within the community and may know previous treatment providers or attorneys. If you suspect any potential conflicts of interest or biases, it's crucial to discuss these concerns with her before beginning services. Maintaining a professional relationship ensures that your therapist can effectively focus on your needs, providing the best therapeutic support without the complications of social or business interactions. Additionally, gifts or any form of service exchange is not appropriate within this relationship.

Our paths may cross in social situations, the therapeutic relationship takes precedence, along with protection of confidentiality. Mindy Harrison, LCSW-S will not initiate greetings if we encounter each other outside of the therapy office.

Dual Roles:

Therapists cannot serve in dual roles. Therefore, Mindy Harrison, LCSW-S cannot assume dual roles, particularly if there has been prior engagement with a therapist outside the current therapy services. For example, if Mindy Harrison, LCSW-S has conducted a child custody evaluation for the client's family, has acted as a parent facilitator, or was the therapist for any other party related to the case, she will not be able to provide therapy services in this context. This policy ensures clarity and maintains the integrity of the therapeutic relationship.

Referrals

No therapist can meet the needs of every individual, and some issues may require additional services or a referral to a therapist who may be a better fit for your needs. If either you or your therapist believes that a referral is necessary, they will provide alternatives, including programs or professionals who can assist you. A verbal discussion of these alternative therapy options can also be provided upon request. Please note that you will be responsible for contacting and evaluating these referrals or alternatives to determine the best course of action for your situation.

Risk and Benefits of Therapy:

Therapy can offer numerous benefits, including improved mental health, enhanced self-awareness, and better coping strategies for life's challenges. Through therapeutic conversations, individuals gain insights into their thoughts and behaviors, which can lead to personal growth and healing. Therapy is a personal exploration and may lead to major changes in your life perspectives and decisions. These changes may affect significant relationships, your job, and your understanding of yourself. However, there are also risks involved, such as the potential for emotional discomfort when addressing painful experiences or feelings. Some of these life changes could be temporarily distressing. Additionally, the effectiveness of therapy can vary based on the compatibility between the client and therapist, as well as the client's willingness to engage in the process. While benefits are expected from the therapy process, specific results cannot be guaranteed. The exact nature of these changes cannot be predicted. It's essential for individuals to weigh these benefits and risks, understanding that while therapy can be a powerful tool for change, it may also require confronting difficult emotions and experiences. Ultimately, a supportive therapeutic relationship can help mitigate these risks, fostering a safe environment for exploration and growth. Together you and your therapist will work to achieve the best possible results for you.

Postponement Policy:

We reserve the right to postpone therapy for clients who arrive at sessions under the influence of drugs or alcohol, as this can hinder the effectiveness of the therapeutic process and compromise safety. Additionally, sessions may be postponed if a client is experiencing a severe mental health crisis or acute distress, making it difficult to engage in productive therapy. If clients have not followed through with agreed-upon steps in their treatment plan, such as missing medication appointments or necessary assessments, this may also warrant a postponement. Furthermore, if a client expresses that they are not in the right frame of mind to participate or if there are concerns about their safety or the safety of others, postponement may be deemed necessary. This policy aims to protect the integrity of the therapy process and support clients in achieving their therapeutic goals more effectively.

Clients Rights and Termination:

We reserve the right to terminate therapy for clients who come to the therapy session under the influence of drugs or alcohol, as this can impede the therapeutic process and compromise safety. Additionally, we may discontinue therapy for clients who do not adhere to medication recommendations made by their psychiatrist or doctor. Furthermore, termination may be warranted if a client exhibits aggressive or dangerous behavior, or if there are consistent no-shows for appointments, which can disrupt the therapeutic process. If your therapist assesses that you are no longer benefiting from the therapy relationship, they will discuss their assessment with you before making any decisions about termination.

Clients have the autonomy to control their therapy relationship and can choose to terminate services at any time, ensuring that they feel empowered in their therapeutic journey. This ability to end the relationship reflects the importance of personal choice and comfort in the therapy process. It is vital for clients to feel that their needs are being met, and they should feel free to advocate for their well-being throughout their experience.

Notice to Clients:

The Texas Board of Social Worker Examiners investigates and prosecutes professional misconduct committed by social workers. At any time you are dissatisfied with Mindy Harrison, LCSW-S's services as a therapist, you have the right to let her know. If you do not feel that Mindy Harrison, LCSW-S may resolve your complaint, you may file a formal complaint through contact with the Texas Board of Social Work Examiners by mail at Complaints Management and Investigative Section, P.O. Box 141369, Austin, TX 78714-1369.

Scheduling Appointments:

Clients are seen by appointment only, with sessions typically lasting 45 to 60 minutes. This time includes both treatment and the arrangement of follow-up sessions as needed. If you are unable to keep your appointment, please notify Solution Focused Family Center at least 72 hours in advance so that another client may utilize that time. If you do not show up or fail to contact Solution Focused Family Center within this timeframe, you will be required to pay the full amount of your session. Additionally, if you arrive 15 minutes late or more, your session may be rescheduled, and you will be billed for the full rate of both the current session and any rescheduled sessions.

Contacting the Therapist:

Contacting the Mindy Harrison, LCSW-S with Solution Focused Family Center is straightforward; you can reach her at 817-966-5401. Please leave a message, as the voicemail box is confidential, and your call will be returned at the earliest convenience. For additional inquiries or to schedule an appointment, you may also reach out via email at info@solutionfocusedfamilycenter.com. We are committed to responding promptly to ensure you receive the support you need.

After-Hours Emergencies:

Please be aware that Solution Focused Family Center does not provide 24-hour crisis therapy. If you are experiencing a mental health emergency and need immediate assistance, it is crucial to call 911 or go to your nearest emergency room. For ongoing support, we encourage you to reach out during regular office hours, where we can discuss your needs and explore appropriate resources. Your safety and well-being are our top priorities, and we want to ensure you have access to the help you need in a timely manner.

Email Communication Policy:

We do not engage in therapeutic conversations via email, as emails are considered highly insecure and may compromise your confidentiality. While email can be a convenient tool for communication, it does not provide the necessary security for discussing sensitive topics related to your treatment. Therefore, we only use email for brief notifications or logistical questions, such as requesting an invoice, changing an appointment, or confirming session details.

For any discussions regarding your mental health or therapeutic progress, we strongly encourage you to address these matters during our scheduled sessions. This ensures that we have the appropriate time and environment to explore your concerns in depth, while also maintaining the confidentiality and integrity of your treatment. If you have any questions, concerns, or issues that arise between sessions, please feel free to bring them up in our next appointment, where we can engage in a thoughtful and secure dialogue. Your privacy and well-being are our top priorities, and we want to ensure that you feel safe and supported throughout your therapeutic journey.

Text Message Communication Policy:

We do not engage in therapeutic communication via text messages, as this medium is also considered highly insecure and may jeopardize your confidentiality. Text messaging, while convenient, lacks the security necessary for discussing sensitive personal matters and can lead to misunderstandings or misinterpretations. Therefore, we only use text messages for brief, non-therapeutic communication, such as confirming appointments or providing logistical information.

For any discussions related to your mental health or therapeutic progress, it is essential to address these topics during our scheduled sessions. This allows us to create a safe and supportive environment where we can thoroughly explore your concerns and ensure that your privacy is respected. If you have questions or issues that arise between sessions, we encourage you to bring them up at your next appointment, where we can engage in meaningful and secure dialogue. Your well-being is our highest priority, and we want to ensure that you feel comfortable and supported throughout your therapeutic journey.

Social Media Communication Policy:

We do not engage in any relationship or communication with clients via social media. This policy is in place to protect your privacy and maintain professional boundaries, as social media platforms can blur the lines between personal and professional interactions. Engaging with clients on these platforms may compromise confidentiality and create potential conflicts of interest. Additionally, social media lacks the secure environment necessary for discussing sensitive topics related to your treatment. If you have questions or concerns, we encourage you to address them during our scheduled sessions, where we can ensure a safe and supportive setting for your therapeutic journey. Your well-being and privacy are our top priorities.

Records and Confidentiality:

All of our communication becomes part of the clinical record. Records are property of Solution Focused Family Center. It is the agency policy not to release clinical records without a subpoena. Adult records are disposed of seven (7) years after services end. Minor client files are disposed of seven (7) years after the client's 18th birthday. In the event of the dissolution of this agency, records will be transferred and become property of another licensed therapy provider in the State of Texas.

Most information provided during sessions is confidential. No information will be released without the client's written consent unless mandated by law. There are some circumstances under which we are required to disclose confidential information without consent. These include but are not limited to:

1. Your therapist determines you are a danger to yourself or someone else.
2. You disclose abuse, neglect, or sexual exploitation of a child, elderly, or disabled person.
3. You disclose sexual contact within the context of a professional relationship with another mental health provider.
4. Your therapist is ordered by a court to disclose information.
5. You direct your therapist in writing to release your record.
6. Your therapist is otherwise required by law to disclose information. Our therapists follow ethical standards prescribed by state and federal law. We are required by practice guidelines and standards of care to keep records of your therapy. These records are confidential with the exceptions noted below and in the Notice of Privacy Practices provided to you.

If you have any questions regarding confidentiality, you should bring them to our attention when you and your therapist discuss this matter further. By signing this Advisement Form and Informed Consent Form you are giving consent to the undersigned therapist to share confidential information with all persons mandated by law, and you are also releasing and holding harmless the undersigned therapist from any departure from your right of confidentiality that may result.

In the context of marriage or family therapy, our therapists prioritize confidentiality, adhering to the standard limitations regarding necessary reporting stated above. We will maintain confidentiality for anything disclosed to us without the knowledge of family members. However, we strongly encourage open communication among all family members to foster a supportive environment. If we determine that keeping certain secrets may be detrimental to the therapeutic process, we reserve the right to terminate the therapy relationship. This approach ensures that therapy remains effective and beneficial for everyone involved.

When a minor is the client in therapy, the role of parents and guardians is crucial in supporting the therapeutic process. We will discuss the child's therapeutic progress and gather background information from all legal parents and guardians to ensure a comprehensive understanding of the child's needs. However, we will not disclose specific details about what is said during therapy sessions. Instead, we will provide general updates on how things are progressing, helping parents stay informed about important issues while respecting the child's need for confidentiality. It is essential for both the child and the parents to understand that fostering a sense of privacy encourages open communication, which is vital for effective therapy.

Recording During Session:

To protect your confidentiality, Solution Focused Family Center does not allow recording of therapy sessions of any kind including, handheld recording, video recording, or cellular phone recording during therapy sessions or telephone calls without prior written consent of you and your therapist. If you wish to record a session, please let your therapist know.

Duty to Warn / Duty to Protect

If Mindy Harrison, LCSW-S believes that you, or your child, are in physical or emotional danger to themselves or another person, they are hereby given specific consent to contact any person who is in a position to prevent

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harm to yourself or another. This may include, but is not limited to, contacting the person in danger, medical personnel, or law enforcement. Mindy Harrison, LCSW-S also is given specific consent to contact the emergency contacts listed on your Intake Form in addition to any medical or law enforcement personnel deemed appropriate. Mindy Harrison, LCSW-S is also granted permission to reach out to other designated individuals deemed appropriate for ensuring safety and protection in these situations. This consent is given in recognition of the therapist's duty to warn and protect as required by law.

Previous Therapists:

If you have been under the care of another therapist in the past, Mindy Harrison, LCSW-S will require a release to contact that therapist and obtain their records if necessary. If you are currently under the care of another therapist we are ethically obligated to confer with that therapist before beginning treatment with you.

Incapacity of death:

In the event of the death or incapacity of the therapist, it is necessary to assign care, custody, and control of treatment records to another professional. By signing this form, you consent to Dr. Aaron Robb, taking possession of your treatment records. He will provide copies at your request or deliver them to the therapist of your choosing.

Payment/Insurance Filing:

Mindy Harrison, LCSW-S is in-network with multiple insurance companies and will bill insurance for services when there is a DSM diagnosis related to mental health, such as anxiety or depression. However, she will not bill insurance for court-ordered co-parenting therapy, reunification therapy, or any other therapy services that do not fall under a qualifying DSM diagnosis. Clients can request a statement of services to seek reimbursement from their insurance provider if needed. For clients with insurance that Mindy Harrison, LCSW-S is not in-network with, she will be considered an out-of-network provider for insurance purposes.

Most insurance companies provide some mental health benefits for their subscribers. It will be up to you to contact your insurance provider to verify your benefits, as well as verify what documentation they might need for you to provide to receive reimbursement. Your therapist will assist you in whatever way your therapist can. (i.e. provide detailed receipts of service). Please keep in mind you are still responsible for the entire session fee, and then you submit to the insurance company for any reimbursement that they might provide you.

Fee Schedule:

The fee for the initial intake consultation is \$250. Subsequent session fees are \$200 for a 45-minute session and \$250 for a 60-minute session. Charges are calculated per hour and rounded to the nearest 15-minute increment, with a standard rate of \$250 per hour. This fee covers a range of services, including scheduled office visits, administrative tasks (such as correspondence, phone contact, written communication), travel, consultations with other providers, and any additional work performed on behalf of the client.

Payment is expected at or before the start of each session and can be made via cash, credit card, Venmo, or Zelle. Please note that personal checks are not accepted. Additionally, any records produced by Solution Focused Family Center will be billed at the same rate as charged by the Tarrant County District Clerk's Office.

Court Appointment:

In some cases, clients are court ordered to therapy. Although you may be providing payment to Solution Focused Family Center, your therapist is working under court appointment and may be required by the court to provide information regarding services rendered in accordance with the court order. During court ordered therapy your therapist may also be required to provide information to one or more of the attorneys involved.

Court Appearances Fees:

If Mindy Harrison, LCSW-S receives a subpoena, the requesting lawyer must contact our office to arrange a time for the subpoena to be served. The fee for any requested appearance, including subpoenas, settlement conferences, or dispositions, is \$250 per hour, with a minimum charge of \$1,000 for 4 hours, payable upon receipt of the subpoena. A retainer of \$2,000 is required for a full day, and a \$1,000 retainer is required for a half-day, both payable in full upon receipt of the subpoena.

We require a minimum of 7 working days' notice to accommodate any schedule changes for our other clients. Legal cases necessitate significant time to be cleared from our calendar, along with additional professional preparation for any requested appearance, including subpoenaed or telephonic appearances. Fees are due no later than 7 days prior to the court date and are nonrefundable, as we must clear our schedule regardless of whether the hearing occurs.

Please note that if an appearance request is received with less than 7 days' notice, the appearance fee is due immediately, along with an express charge of \$350. Additional fees for documentation preparation may also apply, as outlined in the therapist advisement form. Any additional time spent by our therapist in case preparation, travel, and witness time will be billed at an hourly rate of \$250.

Clients are responsible for any attorney fees and costs incurred by Solution Focused Family Center and Mindy Harrison, LCSW-S, due to legal actions, such as filing a Motion to Quash. If Mindy Harrison, LCSW-S is requested to appear in court by you or another party, you will be billed for all professional time, including preparation and transportation costs, given the complexity of legal proceedings. Failure to provide the specified fees constitutes a release from the requested appearance.

Mindy Harrison, LCSW-S will only testify to the facts of the case and their professional opinion. Mindy Harrison, LCSW, is unable to make recommendations regarding child custody arrangements, as doing so would violate social work licensing standards and ethical guidelines. According to the Texas State Board of Social Worker Examiners, the social workers should avoid making recommendations regarding child custody. The ethical guidelines and licensing standards emphasize that social workers must:

1. **Maintain Impartiality:** Making custody recommendations can compromise a social worker's objectivity, which is essential in their role as advocates for clients.
2. **Focus on Best Interests:** The primary concern should always be the well-being of the child, and custody decisions are best left to the courts, which can consider all evidence and testimony.
3. **Avoid Conflicts of Interest:** Engaging in custody recommendations can create conflicts that may undermine the social worker's professional integrity.

4. Adhere to Ethical Standards* The National Association of Social Workers (NASW) Code of Ethics discourages social workers from providing services outside their scope of practice or expertise, including legal matters such as custody disputes.

These guidelines ensure that social workers act in ways that are ethical, professional, and in the best interests of their clients and the children involved.

Travel Fees:

If Mindy Harrison, LCSW-S is required to travel outside of Tarrant County and its contiguous counties (Collin, Denton, Dallas, Parker County) to testify, an additional travel fee will apply. This fee structure is as follows:

- Commute of up to 2 hours: \$500
- Commute of up to 4 hours: \$1,000
- Commute of up to 6 hours: \$1,500
- Commute of up to 8 hours: \$2,000

These fees cover travel time to and from the court hearing or deposition. Additional costs for travel-related expenses, such as airfare, lodging, parking, meals, and transportation, will also apply.

An invoice will be sent to the requesting party, and payment is due upon receipt. Please be advised that failure to pay the minimum required fees as specified will constitute a release from the requested or subpoenaed appearance.

Professional Guidelines:

As a licensed social worker in Texas, Mindy Harrison, LCSW-S adheres to the professional guidelines set forth by the Texas State Board of Social Worker Examiners and the National Association of Social Workers (NASW) Code of Ethics. These guidelines emphasize the importance of maintaining client confidentiality, promoting social justice, and ensuring the well-being of all clients. Mindy Harrison, LCSW-S is committed to providing services that are culturally competent, evidence-based, and ethically responsible. Furthermore, Mindy Harrison, LCSW-S strives to maintain professional boundaries, engage in continuous learning, and uphold the integrity of the social work profession in all interactions and practices.

Mindy Harrison, LCSW-S is trained in the needs of families raising children between two homes. She shares the mission of the Association of Family and Conciliation Courts (AFCC), which is dedicated to improving the lives of children and families through the resolution of family conflict. Mindy Harrison, LCSW-S upholds the values of collaboration and respect, fostering interdisciplinary dialogue and innovation to empower families to resolve conflicts and make informed decisions about their futures.

Consent to treatment:

By signing this Professional Disclosure Statement and Informed Consent form as the client or guardian of said client, you acknowledge that you have read, understand, and agree to the terms and conditions contained in this form. You agree you have been given appropriate opportunity to address any questions or request clarification for anything that is unclear to you. You acknowledge voluntarily agreeing to receiving mental health assessment, treatment and services for yourself (or your child if said child is the client), and understand that you may stop such treatment or services at any time. NOTE: If you are consenting to treatment of a minor child

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and a court order has been entered with respect to the conservatorship of said child or impacting your rights with respect to consent to the child's mental health care and treatment, services will not be rendered to your child until the therapist has received and reviewed a copy of the most recent applicable court order.

This document contains relevant information about my professional services and business policies. It also contains summary information about the Health Insurance Portability and Accountability Act (HIPPA), a federal law that provides privacy protections and patient rights with regard to the use and disclosure of your Protected Health Information (PHI) used for the purpose of treatment, payment, and health care operations. I am required to provide you with the attached Notice of Privacy/Confidentiality Practices and request that you sign the attached written acknowledgment that you received a copy of the notice. The notice describes how I may use the information gathered during our sessions in order to provide services to you. The notice also explains how I may use and disclose PHI for payment or health care operations and for other purposes that are permitted or required by law. The notice also explains your rights regarding your clinical record that I maintain and a brief description on how you may exercise these rights. When you sign the document attached, it will serve as an agreement between us. You can revoke in writing this agreement at any time. Your revocation will be binding on me unless I have taken action in reliance on the Agreement, (if there are obligations required of me by your health insurer in order to process or substantiate claims made under your policy; or if you have an outstanding balance for service previously rendered.)

If you have any questions about this notice, please feel free to bring them to our initial session, or contact me at 817-966-5401.

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Acknowledgment of Therapy Service Advisement Form and Informed Consent to Treatment

I _____ acknowledge that I have received and understood the Therapy Services Advisement Form on the preceding pages for the therapy services by Mindy Harrison, LCSW-S, with Solution Focused Family Center. By signing the Therapy Advisement Form as the Client or Guardian of the Client, I acknowledged that I have read, understood, and agree to the terms and conditions in the form. I hereby confirm that I have received and been given the opportunity to review the Solution Focused Family Center's Notice of Privacy Practices. Additionally, I am aware that if I have any questions, I may contact the privacy officer, Mindy Harrison, LCSW-S, at the provided email address or telephone number. I have had the opportunity to address any questions or clarify anything that is unclear. I understand that if I am not under a court order, I may discontinue services at any time by signing this form. I also acknowledge that I have been informed of my fees per session or for an assessment evaluation.

Printed Name of Client

Relationship to Client

Signature of Client and/or Parent/Guardian

Date

Signature of Therapist

Date

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Acknowledgment of Receipt of HIPPA Notice of Privacy Practices

I _____ acknowledge that I have received and understood the HIPPA Notice of Privacy Practices for the therapy services by Mindy Harrison, LCSW-S, with Solution Focused Family Center. I understand if I have any questions regarding my privacy rights, I can contact Mindy Harrison, LCSW-S, at the address or phone number above.

Printed Name of Client

Relationship to Client

Signature of Client and/or Parent/Guardian

Date

Signature of Therapist

Date