



AMY C. BADDING, LMHC, RPT

INFORMED CONSENT

PLEASE INITIAL WHEN YOU HAVE READ EACH SECTION.

___ **My Services:** Congratulations on making the step to help your child and family! My name is Amy Badding and I am a licensed mental health counselor and registered play therapist. I specialize in working with children under the age of 12 who may be struggling with anxiety, attachment, depression, disruptive behaviors, major life changes and/or trauma. My goal is for us to work together to determine the best treatment for your child’s mental health issue(s). Below is a list of treatment modalities I am trained in providing for you and your child:

Child-Centered Play Therapy

EMDR for Children

Family Counseling

Parent-Child Interaction Therapy

Theraplay/MIM Assessment

Other directive modalities: Cognitive Behavioral Therapy, Gestalt Play Therapy, and Prescriptive Play Therapy.

During the initial assessment, we will determine the best type of treatment approach to use to help your child reach their therapy goals. There may be times when a referral will need to be made. If I feel I cannot serve your child in the therapy approaches I am trained in, then I will give you a list of providers in the area that may be able to help.

___ **Payment for Service:** Below are my fees for therapy services, as well as non-therapy services. If you have mental health benefits with your health insurance company, I will need a copy of the child’s health insurance card, so please have this available at your first appointment. Please contact your insurance company, prior to the first session, to check your mental health benefits. If your insurance plan does not cover mental health services, then you will be charged directly, and payment is expected at the time of service. All insurance co-pays are due at the time of service. If you do not wish to bill through your insurance provider, we can discuss a out-of-pocket payment.

Fees for individual therapy sessions:
30-minute sessions- \$75.00
45-minute session- \$125.00
60-minute session- \$175.00

___ **Other Fees:** Insurance plans DO NOT pay for my time outside of the session/office. I DO NOT charge for phone contact or emails with professionals for collaboration of services for the child. I do charge for my time if a meeting outside of the office is necessary. Please understand that meetings outside of the office require travel time, preparation of my expertise, and time away from meeting with other clients. Below are my fees for other services you may need during your child’s time in therapy:

Written Reports- \$25.00/report
Meetings with the child’s school or other professionals - \$50.00/hour
Observations at the child’s daycare or school- \$50/hour

___ **Scheduling Appointments:** During your intake session, we will discuss my office hours, the child’s school schedule, and the parent’s work schedule (if applicable). We will work together to determine the best day/time for your child’s therapy appointments. I

typically schedule 3 months out for each client. After 3 months of treatment, we will assess progress towards treatment goals. We will determine continuing with weekly, every other week, monthly, or “as needed”.

Please understand that 100% of my caseload is in school daily. Therefore, I cannot see all my clients during after school hours/evenings. This can make scheduling very challenging. If I am not able to work with your schedule or you feel my schedule is not going to meet your family’s needs, I can give you referrals that may have better options.

Some things to consider when scheduling: early appointment times so the child is just missing the start of the school day once a week; lunch hour for working parents and/or the child; or end of the school day, so the child is leaving early for only one day a week. Also, I have copies of the Ames and surrounding school district’s schedules. Consider scheduling appointments on no school days or early out days. Also, if the child is having significant issues at school, often the school is willing to work with the parent/child/therapist in order to have the child attend therapy during the school day.

_____ Cancellations/No Shows: If you need to cancel or reschedule your appointment, please contact me within 24 hours. This allows me to offer the appointment day/time to someone on my waitlist. If your child is sick, PLEASE DO NOT BRING them to therapy. I WILL NOT charge a fee if the child is sick and you need to cancel last minute. If I am sick or I have a sick child at home, I will contact you, by phone, by 7:00pm the night before or 7:00am the morning of the appointment.

If you miss an appointment, please call me and let me know. I DO understand that life happens, and appointments get missed. I also understand that emergencies or sudden illness cannot be helped. Missed appointment fees are as follows: 1st Missed Appointment- no charge; 2nd Missed Appointment- \$25.00; 3rd + Missed Appointment- \$50.00

_____ Fostercare/DHS CINA case: (if this does not apply, please skip to next section): If the child is in fostercare and involved in a DHS CINA case, it is important that all paperwork is completed by the parent or legal guardian BEFORE the scheduled appointment. I cannot meet with the child unless this paperwork is complete. I highly recommend the parent or legal guardian sign a release for the fosterparent. This release allows me to communicate with the fosterparent about scheduling and any issues the child may be struggling with in their home, as well as how to help the child. It is also recommended that the parent or legal guardian sign a release for the caseworker, so I know what is going on with the case. In order to best help the child, collaboration between the parent and all others involved is essential.

_____ Divorce/Custody case: (if this does not apply, please skip to next section): Please be aware that I DO NOT make custody recommendations, nor will I brief your child’s confidentiality in a court hearing. This is not my area of expertise and it damages the relationship between the child and therapist. What I CAN do, if you child is going through a high conflict divorce is educate you (the parents) on how it is affecting your child and what you can do to help them through this difficult time. I CAN help your child understand what divorce is and how to cope with it. I use the book, “Creative Interventions for Children of Divorce” by Liana Lowenstein, MSW to help your child through this difficult time.

_____ Contact Information: I can be reached by phone and/or email. Please call my confidential voicemail and I will return your call within 24 hours during the weekday and Monday if a message is left on the weekend. I use email for contact as well. I will do my best to return your email within 24 hours. Please understand that my day is typically spent with clients, so I will return all messages at my earliest convenience. Please be aware that all emails and phone contact are documented and part of the child’s file.

_____ Emergencies: IF YOU HAVE A MENTAL HEALTH EMERGENCY, PLEASE DO NOT WAIT FOR MY RETURN CALL OR EMAIL. CALL 911 OR TAKE YOUR CHILD TO THE NEAREST EMERGENCY ROOM. PLEASE CONTACT ME VIA VOICEMAIL OR EMAIL TO LET ME KNOW YOU HAVE DO SO. I WANT TO BE ABLE TO SUPPORT YOU AND YOUR CHILD IN ANYWAY I CAN. AN ER VISIT IS A SCAREY EXPERIENCE FOR EVERYONE INVOLVED.

By signing below, you agree to all information in this consent form and agree that you have reviewed all information in the “The Health Insurance Portability & Accountability Act of 1996 (HIPAA)”. I also agree for Amy C. Badding, LLC to use my mental health information in the secure and confidential program, Therapynotes for documentation of her services. And, I agree to allow Kelly Brown Billing, Inc. to have access to my health insurance information to assist in billing for therapy services under Amy C. Badding, LLC.

Signature of Client

Date

Signature of Parent or Legal Guardian if client is under the age of 18

Date

