NOTE: Please review this Services Agreement and sign the Consent Form at the end of the document.

Welcome and Overview

Thank you for your interest in my counseling and psychotherapy practice. If you decide to work with me, I will do my best to provide you with service that is responsive to your preferences and needs.

The purpose of this Professional Services Agreement is to describe my background and approach and to explain the services and policies of my practice. I provide you with this information in the hope it will promote the collaborative nature of our relationship should you decide to proceed. I encourage you to review this document carefully and to ask me any questions you may have.

Professional Background Statement

I am a licensed clinical professional counselor (LCPC) and a Board-certified psychodramatist and psychodrama trainer (TEP). I hold two Master’s degrees from Johns Hopkins University — one in Clinical Counseling and one in Applied Behavioral Science.

My training in Clinical Counseling has prepared me to work with individuals, couples and groups, assisting with mental health problems or other issues that may be impeding fulfillment of one’s personal goals.

In addition to my education as a mental health counselor, I have specialized training leading to national certification—as a practitioner and a trainer—by the American Board of Examiners in Psychodrama, Sociometry, and Group Psychotherapy.

Psychodrama is a form of psychotherapy developed by Jacob L. Moreno, M.D., a Viennese psychiatrist who came to the United States in 1935. Psychodrama uses various
forms of dramatic enactment to expand and deepen the purely verbal method of therapy. Because psychodrama brings the body, mind, and emotions into action at once, it can sometimes be more powerful than traditional talk therapy alone.

Psychodramatic action can help a person achieve insight into a problem, express feelings, complete unfinished actions, and learn new and more satisfying ways of behaving. Although it is typically practiced in groups, psychodrama can be used in individual and couple sessions.

I am also trained and certified in a form of couple/marital psychotherapy called *Imago Relationship Therapy*. Imago maintains that we all have some unmet needs from childhood that we carry into our adult relationships. Imago helps us resolve those early psychological issues within the context of a safe and supportive relationship. In so doing, Imago promotes new levels of caring and closeness within the relationship of concern.

**Professional Services Offered**

My practice is limited to adults. Although I can assist with a variety of concerns, I have special interest and expertise working with people with a history of trauma such as physical, sexual or emotional abuse. I also work with individuals experiencing problems with anxiety, depression, eating disorders, and life transition issues such as health problems, divorce and job loss. I offer *individual psychotherapy* that may or may not include psychodrama and other experiential methods, depending on the preferences and needs of each person.

I offer *group psychotherapy* for adults, using a psychodramatic approach. The purpose of this group therapy is to help members lead more satisfying lives by experiencing positive connections with self and others and by learning new roles and more skillful behaviors. Through a variety of verbal and experiential methods, group members are helped to enhance personal strengths and resources, resolve unfinished emotional issues, achieve insight into patterns that do not serve their goals, and learn more satisfying roles.

In addition, I offer *counseling and psychotherapy for couples* that is designed to identify and build on the strengths of the relationship and address specific problem areas. I use Imago Relationship Therapy to help partners restore trust after a rupture, learn ways to handle conflict, and bring renewed energy into a lackluster relationship. Through Imago, I help partners learn new, more skillful ways of relating so they can experience greater intimacy, connection and fulfillment in their relationship.

My clinical orientation is integrative. Based on each individual’s unique situation, I draw on various theories and techniques in a systematic way to develop a coherent approach that will best suit the person’s specific situation.

All of my work is informed by my study of transpersonal psychology, my practice of hatha yoga and diverse spiritual practices, and my personal intention to live in the
moment with an attitude of mindfulness and loving kindness. My work with clients is based on a holistic, strengths-based approach. I emphasize conscious awareness, thoughtful planning, and mindful action as ways to bring about the change you desire. I encourage all clients to cultivate a variety of strategies for compassionate self-care, including physical, mental, emotional, and, as compatible with their particular belief system, spiritual.

In psychotherapy I strive to be sensitive to multicultural and diversity issues, such as an individual’s gender, race, ethnicity, sexual orientation, cultural heritage and values. Regardless of whether or not we share the same worldview and belief system, I want to understand how my clients see the world. Clients’ spiritual, religious and/or philosophical beliefs may or may not be an important topic for exploration in our work. I strongly encourage clients to use their religious, spiritual or philosophical beliefs, whatever they may be, as a source of strength. I am also open to any discussion of the ways my clients believe that these values and beliefs may have created problems in their lives.

Payment and Cancellation Policies

I request that you provide payment at the time of each session, either by check, in cash or through credit card. There is a $5.00 service charge for credit cards.

I do not participate in any health insurance plans. If you request it, I will provide you with a statement at the end of each month that you can submit to your insurance carrier. Some insurance companies provide partial reimbursement for out-of-network providers.

If you are counting on insurance coverage to help finance your therapy, please be sure to check prior to beginning your sessions to be certain your insurance will cover the service you are receiving for an out-of-network provider. It will also be important for you to tell your insurance company representative that you are planning to see a licensed clinical professional counselor (LCPC). LCPCs are not currently eligible to receive Medicare reimbursement.

Cancellation Policy:

If, for some unforeseeable reason, you are unable to keep a scheduled appointment, please contact me by phone, text or email at your earliest possible convenience. (Phone: 410-746-7251; Email: cthynugent@verizon.net.)

Following is my cancellation policy:

- **With at least 24 hours’ notice:** No fee. Thank you for giving me advance notice, so I can schedule other clients or students in the appointment time I have held for you.

- **With less than 24 hours’ notice:** The cancellation fee is equal to the fee for your session.
Thank you for your consideration of my schedule.

**Contacting Me**

If you need to reach me, please call me or leave a confidential voice mail message at 410-746-7251. Please leave the best number and times for me to return your call and briefly explain the purpose of your call.

I return all calls within 24 hours. Unless you direct me otherwise, I may return your call as late as 8:00 p.m. If you have left a message and do not hear from me within 24 hours, please call again as that will be an indication that I have not received your message for some reason.

If you are experiencing a psychiatric emergency, do not wait for a return call from me. Instead, go to the nearest hospital emergency room or call 911 for immediate assistance.

If you have signed a consent to electronic communication, I will respond to brief text or email messages, primarily for the purposes of coordinating appointments and wellness checks. You can send texts to 410-746-7251 and email to: cathynugent@verizon.net. Please be aware that texts and email are not secure forms of communication. It is not advisable to use electronic communication to convey sensitive or confidential information.

**Confidentiality**

In accord with the ethical standards of my profession, I maintain the confidentiality of your disclosures to me. Your written authorization is required for the release of any information or records, for example to your physician or another professional you are seeing. If you would like me to speak with another practitioner, please let me know, and I will provide you with a Release of Information Form.

Exceptions are made to the confidentiality of your disclosures to me in the event of the following situations: a court order compelling me to release confidential information; threats of imminent danger to you or another person; or suspected abuse of children, persons with disabilities, or elderly persons.

On occasion, I receive professional consultation related to my practice. In those instances, I may discuss your course of treatment with the consultant, but I will not disclose any personally identifying information.
**Additional Policies**

I do not become involved in legal matters such as child custody cases. I find that the adversarial nature of legal cases does not align well with the collaborative nature of psychotherapy.

To avoid confusion or boundary issues, I do not see family members or friends of current clients, except in the case of spouses or partners for couples counseling or if my current client requests that I facilitate a conjoint session with a significant other. Conducting individual therapy with someone from a client’s family or close personal network can lead to confusion and challenges maintaining appropriate boundaries.

**Statement on Risks and Benefits**

Although there are many benefits, there are also certain risks associated with participating in psychotherapy. Talking about concerns and working through issues with experiential modalities, such as psychodrama and Imago Relationship Therapy, can sometimes bring up strong feelings. Approaching feelings or thoughts you have tried not to think about for a long time may be difficult. Making changes in your beliefs or behaviors can be difficult and may be disruptive to the patterns of your ongoing relationships. It is important that you consider carefully whether these risks are worth the benefits of participating in therapy. Most people who take these risks find that participating in psychotherapy is helpful and can be transformative.

**What to Do If You Have Questions or Concerns**

I welcome your questions about psychotherapy, the administrative policies of my practice, and any other issues you may have about the professional services I provide. Please raise your questions and concerns during our sessions so we can discuss them.

If you feel I have not addressed your concerns to your satisfaction, you may contact the Maryland Board of Professional Counselors and Therapists, Maryland Department of Health and Mental Hygiene, 4201 Patterson Avenue, Baltimore, Maryland 21215-2299. Phone: 410-764-4732. You may also contact the American Board of Examiners in Psychodrama, Sociometry, and Group Psychotherapy at 202-483-0514 or abepsychodrama@yahoo.com.
CATHARINE D. NUGENT COUNSELING & PSYCHOTHERAPY, LLC
6636 PARK HALL DRIVE
LAUREL, MD 20707

CONSENT TO TREATMENT

Please sign below to indicate that you have read the preceding document and consent to receiving counseling/psychotherapy services within the parameters explained:

Name: ___________________________ Date: ______________

Additional Consent to Use Electronic Communication

I understand that electronic communications, including text messages, electronic mail (email) and telephones/telephone messages, may not be secure.

By my signature below, I consent to the use of electronic communication (text, phone and/or email) with Catherine D. Nugent, LCPC, TEP, for the purpose of coordinating appointments and for wellness checks, as indicated below. (Please check any that you consent to using in the context of psychotherapy):

_____ Text messages to my phone.
   Phone number: ________________________________

_____ Conversations and voice mail messages left on my phone:
   Phone number: ___ Same as above
   Alternate phone number for voice mail messages:
   ________________________________

_____ Electronic mail to the following email address:
   ________________________________

Name: ___________________________ Date: ______________

Thank you for choosing my practice. I look forward to working with you.