

HEALING HEART, PLLC

341 N. Caswell Rd.
Charlotte, NC 28204
704-565-9212

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healingheartcharlotte.com

Office Policies and Professional Disclosure

Welcome to Healing Heart! Please take the time to read this carefully.

YOUR RIGHTS:

- To receive quality professional services
- To be assured privacy and confidentiality
- To review and discuss your fee for services
- To refuse services at any time
- To see your record upon written request and to insert a written statement into the record about services received or not received

YOUR RESPONSIBILITIES:

- To be on time for scheduled appointments
- To pay fees for services according to the practice policy
- To actively participate in your own treatment
- To give a 24 hour notice if canceling an appointment or a fee will be charged

PROFESSIONAL CREDENTIALS

Johanna Hyland, owner of Healing Heart, PLLC earned her Master's in Social Work from UNC Chapel Hill. She is a Licensed Clinical Social Worker (C008591) through the North Carolina Social Work Certification and Licensure Board. Johanna Hyland, MSW, LCSW is qualified by education and experience to counsel individuals, families, couples and groups. Johanna has extensive experience working with both children and adults. She worked as a clinical social worker at Thompson Children & Family Focus, the Mecklenburg County Women's Commission and Carolinas Medical Center before deciding to go into private practice. Johanna specializes in working with children and families of children with special needs and in women's health. Johanna is passionate about helping women struggling with infertility and helping women cope with the challenges of pregnancy or adoption and motherhood. Johanna has advanced training in Cognitive Behavioral Therapy, Trauma Focused Cognitive Behavioral Therapy, Motivational Interviewing, and Mindfulness and Relaxation Training for Anxiety and Depression.

THERAPY DOG

Johanna Hyland may utilize her personal dog, Charley, who is a certified therapy dog with Therapy Dog, Inc. in some of her sessions. Charley has worked therapeutically with both

children and adults in various settings. Charley had to pass rigorous training to become certified as therapy dog and Canine Good Citizen. Neither Johanna Hyland nor Healing Heart, PLLC will be held liable for any property damage or personal injury caused by her therapy dog Charley.

SETTING

When clinically appropriate, Johanna Hyland may choose to work with people in settings other than 341 N. Caswell. Clients will never be forced to meet outside of this location, but if Johanna and the client decide it is clinically appropriate and beneficial to the client then they may schedule a session at an alternative location. Johanna cannot assure confidentiality if a client chooses to meet outside of the office setting. However, Johanna and the client will discuss beforehand how they will handle it if the client sees someone they recognize.

CONFIDENTIALITY: POLICIES & LIMITATION

Under North Carolina Law, all information disclosed within sessions and the written records pertaining to those sessions are confidential and may not be revealed to anyone without your verbal authorization and/or written consent except where disclosure is required by law. The law most commonly requires disclosure when you or another person identified by you is in eminent danger. Then Healing Heart, PLLC is legally and ethically mandated to communicate with third parties who can protect the endangered person regardless of your preferences. The most common situations for legal disclosure include hospitalizations because of suicidal or dangerously violent behavior; warning potential victims of homicidal intent; and contacting protective services because of neglect, abuse, or molestation of a child or elder person. If there is an emergency during our work together, or in the future after termination, and Healing Heart, PLLC is concerned about your personal safety, the possibility of you injuring someone else, or about you receiving proper psychiatric care, Healing Heart, PLLC will do whatever it can within the limits of the law to prevent you from injuring yourself or others and to ensure that you receive the proper medical care. For this purpose, Healing Heart, PLLC may also contact someone whose name you have provided for me in case of emergency.

Disclosure may also be required pursuant to a legal proceeding. If you place your mental status at issue in litigation initiated by you, the defendant may have the right to obtain the psychotherapy records and/or testimony by Healing Heart, PLLC. If this situation arises, Healing Heart, PLLC will do its best to protect your interest to the extent possible.

In family and couples therapy, confidentiality and privilege do not apply between family members. In the case of child and adolescent therapy, privacy within the therapy relationship may be essential to treatment. Parents and guardians of minor-aged clients have the right and responsibility to question and understand the nature of the services provided to their children, and clinical discretion will be used to determine what appropriate disclosure is in these circumstances. In instances where the child or adolescent's judgment is not sound and the risks he or she is incurring seem substantial, family members will typically be informed so that they can protect their children.

Disclosure of confidential information may be required by your health insurance carrier or

HMO/PPO/MCO/EAP in order to process insurance claims. Healing Heart, PLLC has no control over, nor knowledge about, what insurance companies do with the information they obtain, nor can Healing Heart, PLLC limit who has access to this information once it is provided to them. You should be aware that submitting a mental health invoice for reimbursement carries a certain amount of risk to confidentiality, privacy, or to future capacity to obtain health or life insurance. The risk stems from the fact that mental health information obtained by insurance companies is inherently vulnerable to unauthorized or unwanted access.

It is important to be aware that e-mail and cell phone communication can be relatively easily accessed by unauthorized people and hence can compromise the privacy and confidentiality of such communication. E-mails, in particular, are vulnerable to such unauthorized access due to the fact that servers have unlimited and direct access to all e-mails that go through them.

Please know that Healing Heart, PLLC provides complimentary credit card processing services through Square, Inc. for the convenience of clients. You can also pay for sessions with check or cash. If you decide to pay with a credit card, Healing Heart, PLLC is not responsible for any security breaches that may occur in connection with payments made using Square, Inc.

WRITTEN RECORDS & REPORTS

Both the law and the standards of our profession require that we keep appropriate treatment records. As a client, you have the right to review or receive a summary of your records at any time, except in limited legal or emergency circumstances, or when we assess that releasing such information might be harmful. In such a case, Healing Heart, PLLC will provide the records to an appropriate and legitimate mental health professional of your choice. Upon your request, Healing Heart, PLLC will release information to any agency/person you specify unless it is believed that releasing such information might be harmful to you. Please remember that legal guardians as well as any parent whose parental rights have not been terminated are legally entitled to the medical records of their child, including psychotherapy records.

TELEPHONE & EMERGENCY PROCEDURES

Clients will be given Johanna Hyland's work cell phone number. There is typically no charge for brief telephone calls or check-ins. These are sometimes used to assist clients through a hard time or to help them in between sessions when something upsetting happens. If a call goes beyond fifteen minutes, Healing Heart, PLLC has the right to charge for a prorated session (\$30 per each 15 minute increment). Scheduled telephone appointments will be charged at the same rate as face-to-face therapy. There is no guarantee that Johanna will be available during any given crisis, and in a true emergency where you need to talk to someone right away and you cannot reach Johanna Hyland at Healing Heart, PLLC you should call Carolinas Behavioral Health's 24 hour call center at 704-444-2400, Mobile Crisis Services at 1-800-939-5911, 911, or proceed to your nearest hospital emergency room.

APPOINTMENTS & CANCELLATION POLICY

Initial intake therapy appointments will take between fifty and ninety minutes. During this time, Johanna Hyland will be gathering important information about your history and current circumstances to determine how to best treat you. After the intake appointment, Johanna Hyland has the right to refer you to a better suited clinician if she believes that she is not the best person to treat you. Individual counseling sessions are generally fifty to sixty minutes in length. Because scheduling an appointment involves the reservation of time specifically for you, a minimum of 24 hours' notice is required for canceling an appointment without charge. If you cancel with less than 24 hours' notice, you will be charged \$50 for the session. If you do not show for a scheduled session and have not notified Johanna, you will be charged the full session rate. Please be aware that insurance companies rarely reimburse for missed sessions.

FEES & PAYMENTS

Clients are required to pay the arranged fee at the end of each session. If this is going to be a problem then please discuss this with Healing Heart, PLLC prior to booking your appointment.

All sessions, including the initial intake, are billed at \$120 per session. At the beginning of treatment, there is no additional charge for consultation with other professionals involved in your care. During the course of treatment, there is also no fee for brief telephone check-ins with clients or other professionals involved in your treatment. Please note, Healing Heart, PLLC provides phone check-ins when able to, but there is no promise that this can be accommodated at all times. School or hospital visits, frequent and extensive consultation with other professionals involved with your treatment, report writing and reading, longer sessions, travel time, arranging for hospitalization, extensive weekly telephone contact and/or scheduled telephone sessions, etc. are subject to charge at a prorated therapy rate of \$30 per fifteen minute increments. Please notify me if any problem arises during the course of therapy regarding your ability to make timely payments.

COUPLES COUNSELING POLICIES

Couples therapy begins with an evaluation of the relationship, past and present. It is important to understand that anything either spouse/partner tells Healing Heart, PLLC individually, whether on the phone or in an individual meeting, may be shared with the spouse/partner during a subsequent couple's session using the therapist's discretion. This is to avoid either person feeling that the therapist is aligned with one party over another. If the therapist feels that one person in the couple needs individual counseling, the therapist will recommend this and if desired will help assist with linking and referring to the appropriate counselor. Please understand that information discussed in therapy is for therapeutic purposes only and is not intended for use in any legal proceedings involving the partners. By entering into therapy, you accept that working toward change may involve experiencing difficult and intense feelings, some of which may be painful, in order to reach therapy goals. You understand that the changes one or both of you makes will have an impact on the relationship and on others around you. Healing Heart, PLLC therapeutic focus in couples counseling is on preserving and enhancing the

relationship rather than a focus on individual happiness. However, if remaining together is harmful to one or both partners, the focus will be on facilitating an amicable separation.

Please note, Healing Heart, PLLC does not provide counseling to couples involved in a physically, emotionally, verbally or sexually abusive relationship because couples counseling is not recommended in these situations. If you are currently in an abusive relationship please call the Mecklenburg County Women's Commission at 704-336-3210 or Safe Alliance 24 Hour Rape/Crisis line at 704-332-2513.

POLICIES FOR ALL CLIENTS

You recognize that the process of therapy can often bring up deep rooted feelings, some of which are positive and others are negative. You understand that the therapist will do her best to support and counsel you through whatever arises. You accept that such changes can have both positive and negative effects and agree to evaluate potential effects of changes before undertaking them. You understand that no promises have been made as to the results of treatment or of any intervention provided by Healing Heart, PLLC. You are aware that you may stop treatment at any time, and you agree to be responsible for paying for the services already received or for those you did not properly cancel.

You acknowledge and recognize that if at any point the therapist feels that she is not the best person to treat you, she can link and refer you to a better suited clinician. Once you have been referred to another clinician, Healing Heart, PLLC will terminate therapy with you. At your request, Healing Heart, PLLC will be happy to share information with your new clinician in order to ensure a smooth transition to a new clinician if a Consent to Release information has been filled out by you. At any point you have the right to terminate therapy with Healing Heart, PLLC.

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Office Policies and Professional Disclosure Acknowledgement of Receipt

CONSENT TO TREATMENT

I have read Healing Heart’s Office Policies and Professional Disclosure carefully, and I understand the policies outlined, and agree to comply with them. I have had the opportunity to ask questions about the policy if necessary. I give my consent to Healing Heart, PLLC to evaluate and/or treat me or my minor child.

Printed Name of Client

Client DOB

Signature of Client

Date Signed

Printed Name of Legal Guardian (if applicable)

Signature of Legal Guardian (if applicable)

Date Signed