



Run Free Counselling Centre

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Intake Form

Welcome to Run Free Counselling Centre (RFCC). Our goal is to ensure you have a positive experience as we work to help you find healing. Your participation is important to us, and the following information will help you better understand the counselling process. Please read the following policies carefully and ask us if you have any questions.

Policies

Confidentiality

All members of the RFCC team are contractually obligated to keep your information strictly confidential. The following people may have access to your file: your counsellor; management for the purpose of dispute resolution or legal proceedings; the supervisor of your counsellor for the purpose of teaching and consultations; and administration for the purpose of updating the file. If you request to have your file transferred to another professional such as your lawyer, doctor or pastor, we require that you sign an "Authorization to Release Information" form prior to the transfer.

Limitations to Confidentiality

Counsellors are required by law to report to the appropriate authorities if there has been physical abuse of a child under the age of 18, or if there is reason to believe a client or another person's life may be in jeopardy. If a judge subpoenas a counsellor to testify in court or to release the contents of a file, the counsellor is required to do so by law.

The Workers' Compensation Act (WCA) requires a counsellor to report work-related psychological injuries to WCB within 48 hrs. The requirement to report remains even if the client expressly refuses disclosure to the WCB.

Termination or Refusal of Services

If at any point you determine that your relationship with your counsellor must come to an end, you have the right to request a referral to another counsellor. Our counsellors reserve the right to terminate or refuse counselling services at any point, without notice or explanation. Your healing and growth is our priority.

Appointments

Counselling services at RFCC are by appointment only. Sessions vary in length. Continuity is vital to the healing process, so we encourage you to plan ahead in scheduling your appointments. RFCC is not able to operate as an Emergency Response Organization. If there is an emergency, we encourage you to contact the appropriate local support services. We will do our best to give you the information needed to make these connections.

Cancellations or Missed Appointments

We understand that unforeseen circumstances can occur. However, since your counselling requires your counsellor to reserve a significant amount of time exclusively for your benefit, we have a policy regarding cancellations and missed appointments. RFCC charges 50% of the regular fee for appointments that are not cancelled at least 24 hours in advance. Appointments that are missed without notice will be charged in full.

*Charges for late, cancelled or missed appointments often cannot be submitted for health insurance reimbursement.

I have read, understand and agree to the above policies regarding cancelled or missed appointments.

Initial X_____

Fees

RFCC operates on a fee-for-service basis. The fee covers the counselling session as well as the preparation time and administrative record keeping. If you are unable to afford the fee, we encourage you to have an open conversation with the RFCC Director and/or support staff to discuss available options for financial support.

Available options may include:

- Local Organization Support
- Insurance Coverage
- Employee Benefits

Additional Fees

- A \$25.00 fee will be charged for returned and NSF cheques
- Books and workshop materials recommended by your counsellor can be purchased in the administration office.

Faith Based Counselling

RFCC is a Biblical Counselling Centre. Our counselling staff is trained to provide counselling from a faith-based perspective that adheres to Biblical beliefs and values. However, we are aware that not all clients will share these same beliefs and values. If you do not wish to receive counselling from a Biblical perspective, our counsellors will honour that request.

Would you like to receive counselling from a faith-based perspective? (*Select only one*)

- ☐ Yes ☐ Impartial
☐ No

Insurance Coverage and Employee Benefits

RFCC employs counsellors from a variety of educational backgrounds such as Registered Psychologists, Clinical Counsellors, Life Coaches, etc. These counsellors may be covered by your extended health insurance or employee benefits in Canada.

Please check with your insurance provider or employee administrator to check the types of counsellors or therapists that may be covered within your policy.

Direct billing to insurance providers may be possible from the RFCC office. If you are interested in direct billing, please speak with an RFCC administrator.

Recording Sessions

We understand that you may want to record your therapy sessions in order to refer back to them later, however creating a personal recording of your sessions, including audio, video or transcript recordings, is strictly prohibited. This is done to protect you, your counsellor, and RFCC. We highly encourage clients to take notes and lots of questions in order to understand the contexts of your therapy.

Telecounselling

RFCC is pleased to offer services to our clients through distance delivery (“telecounselling”) – via videoconferencing. The platform used at RFCC is called Owl Practice. Owl Practice offers a third-party video communication service that uses industry standard privacy and security measures. For additional information regarding their privacy standards and tips on privacy, visit the following links:

- <https://owlpractice.ca/privacy.php>

Telecounselling Precautions

Telecounselling and face-to-face counselling involve important differences that limit the responsibilities assumed by your counselor. Unlike in face-to-face counselling, your counsellor cannot guarantee the same degree of confidentiality since telecounselling partially takes place in a space outside of your counsellor’s control (i.e., the internet, your physical location). Because telecounselling takes place at a distance and possibly across jurisdictions your counsellor cannot reliably intervene in situations that may involve risk to your emotional or physical well-being (e.g., if you are in crisis, suicidal, or require hospitalization). This means you agree to take full responsibility for making the following treatment decisions:

- Whether and where you decide to initiate the teleconference
- Whether and how you will protect the confidentiality of your conversation from your side of the teleconference
- What you will do in advance, should you need emergency emotional support and awareness of local crisis or emergency hot-line contacts

While engaging in telecounselling has many benefits, there are some additional risks as outlined below:

- There are therapeutic limitations to online services. For example, there is the potential for misunderstandings when two people are not in the same room
- Technology limitations may impact services (e.g., time delays, equipment failure)
- While efforts will be made to protect privacy, information transmitted via the internet may not be secure (e.g., hackers)
- Additional information will need to be gathered to ensure your safety. This includes emergency contacts and your exact location during sessions

Agreement

By initialling below, you assume full responsibility for the risks inherent in insecure internet transmissions, including any losses or damages. You agree to not record the audio or video of your telecounselling session and not to post transcripts or any other recording of your counseling sessions online or to distribute them in any way.

Initial X _____

Billing

A valid credit card is required on your file. Your card will not be charged until the time of your session. **A credit card is kept on file for your convenience or in the case of an unpaid balance, no-show, or late cancellation.** Your credit card information is stored in a secure system available to only the director and administrator. It may be removed at any time at your request. If a charge cannot be fulfilled on your credit card, you will be contacted and given ten days to provide another payment method.

If you would like to pay by way of cash, cheque, e-transfer, or debit card your credit card on file will **not** be charged. If insurance coverage has been approved and communicated to Run Free Counselling Centre, your credit card on file will **not** be charged.

To make appointments without a credit card on file, you will need to call or email the Run Free Administrator to confirm the method of payment.

Please complete all fields. You may cancel this authorization at any time by contacting us. This authorization will remain in effect until cancelled.

Credit Card Information

Card Type: ☐ MasterCard ☐ VISA ☐ Discover ☐ AMEX
☐ Other _____

Cardholder Name (as shown on card): _____

Card Number: _____ CVV _____

Expiration Date (mm/yy): _____

Cardholder Postal Code (from credit card billing address): _____

I, _____, authorize Run Free Counselling Centre to charge my credit card above for agreed upon purchases. I understand that my information will be saved to file for future transactions on my account.

Customer Signature _____ Date _____

Contact Details

First Name

Last Name

Sex (Select only one)

- ☐ Male
- ☐ Female

Date of Birth (YYYY/MM/DD)

E-mail

Phone

Alternate Phone

Street Address

Postal Code

City

Province

Country

Insurance Information When Applicable (not all RFCC counsellors are eligible for coverage)

Provider Name

ID Number

Group Number

Emergency Contact Information

First Name

Last Name

E-mail

Phone

Relationship

Presenting Concerns

Have you been to counselling previously? ☐ Yes ☐ No

When did you go and for how long? _____

How did you hear about Run Free Counselling Centre?

Presenting concerns (Check all that apply)

- | | | | | |
|---------------|--|--|--|---|
| Personal | <input type="checkbox"/> stress | <input type="checkbox"/> anxiety | <input type="checkbox"/> employment | <input type="checkbox"/> finances |
| | <input type="checkbox"/> panic attacks | <input type="checkbox"/> self-esteem | <input type="checkbox"/> depression | |
| | <input type="checkbox"/> loss | | | |
| Family | <input type="checkbox"/> parental/child conflict | <input type="checkbox"/> blended family | <input type="checkbox"/> parental divorce | |
| Relationship | <input type="checkbox"/> sexual | <input type="checkbox"/> divorce | <input type="checkbox"/> separation | <input type="checkbox"/> infidelity |
| | <input type="checkbox"/> reconciliation | <input type="checkbox"/> communication | <input type="checkbox"/> conflict resolution | |
| School | <input type="checkbox"/> social skills | <input type="checkbox"/> behavioural | <input type="checkbox"/> academic | |
| Health | <input type="checkbox"/> sleep concerns | <input type="checkbox"/> headache | <input type="checkbox"/> appetite | |
| Mental health | <input type="checkbox"/> self-harm | <input type="checkbox"/> suicidal thoughts | <input type="checkbox"/> suicide attempt(s) | <input type="checkbox"/> anorexia/bulimia |
| Abuse | <input type="checkbox"/> spouse | <input type="checkbox"/> child | <input type="checkbox"/> elder | <input type="checkbox"/> (non)-family |
| | <input type="checkbox"/> sexual | <input type="checkbox"/> emotional | <input type="checkbox"/> financial | <input type="checkbox"/> physical |
| Addictions | <input type="checkbox"/> alcohol | <input type="checkbox"/> drugs | <input type="checkbox"/> pornography | <input type="checkbox"/> internet |
| | <input type="checkbox"/> gambling | <input type="checkbox"/> food | | |

Overview

I have read this consent form, and felt like I had enough time to discuss it, ask questions and understand it.
I agree to engage in counselling at Run Free Counselling Centre under the conditions outlined in this document.

Signature _____

Date _____