

Consent for Treatment:

In signing Kellye Hutton Slaggert’s professional disclosure form, you are in agreement with:

I have read all of the preceding information and understand my rights and responsibilities as a client. All of my questions and concerns have been addressed by the therapist.

This agreement for services will remain effective until _____, or until ended by agreement between the two of us. If you have missed scheduled visits, and you do not call within 12 weeks, I will accept that as your notice that you have terminated this agreement and that you wish to discontinue counseling with Playful Connections Therapy Center.

By signing below, I understand and agree to all the terms discussed in this disclosure statement and the stated fees.

I also affirm, by signing this form, that I am the legal guardian/custodial parent with legal consent to treatment for any minor child or children for whom I am seeking therapy services.

Client/Guardian Signature

Date

Provider Signature

Date

Please sign both copies of this form. One is for you to keep and refer to if needed. The other will be a part of my confidential records.

this problem with me, you can contact the North Carolina Board of Licensed Professional Counselors at P.O.B. 1369 Garner, NC 27529, (919) 661-0820. They will be able to provide you with additional information about your rights as a client or assist you with filing a complaint.

Clients who have complaints or grievances about PCTC provider(s) are to contact their LME/MCO or insurance provider. Medicaid beneficiaries or their personal representatives have the right to due process. Contact your CAP-C program for more information.

Client Rights

PCTC strives to protect and promote the rights, privacy and confidentiality of all persons served. All information during each session is confidential. This is an essential part of a good therapeutic relationship. I do not share with anyone what goes on during our session. The privacy and confidentiality of our conversations and my clinical records of yours is protected by state law and my profession's ethical principles, in all but a few circumstances. There are two circumstances which legally and ethically, I am bound to break confidentiality. 1) If I feel you are going to harm yourself or another person and 2) when I believe a child or an elderly person has been or will be abused or neglected. There are rare situations when the courts may order confidential information to be released. If you would like me to release information to a third party, or transfer your care to another provider, you will be asked to sign a document providing me with permission to release the specific information you are requesting. If you are submitting claim information to your insurance company a diagnosis will be provided and will become part of you or your child's medical record.

With older children, their confidentiality and therapeutic relationship with me is extremely important. As the parent/guardian you may have a legal right to information. If you insist on knowing details of my sessions with your child, your child may lose confidence in me and the therapeutic relationship could deteriorate to the point where the benefits of therapy are lost.

PCTC will share the clients rights with the family in a manner that is clear and understandable prior to the beginning of services.

PCTC ensures that the sharing of confidential billing and other administrative and service-related information is done so according to the confidentiality guidelines under HIPPA.

Upon entering treatment, each client is given an overview of policies relating to the client's rights which states "as a client of PCTC you have the following rights: 1) to receive treatment regardless of sex, race, creed, ethnic origin, age, sexual preference, religion, socioeconomic status, handicaps, or sources of financial support.

Clients will be provided copies of their rights and responsibilities, grievance policy/procedure, Notice of Privacy practices, confidentiality (along with legally mandated exceptions).

A limited number of sliding scale fees will be available each year.

If you, or someone else, need a copy of your file, there is a charge of \$.25 per page for copying plus postage. If I am requested to provide a written report, my hourly fee, billed in 15 minute increments, will be billed for the time spent reviewing your file, drafting and publishing the report.

After hours calls and Emergencies: You may leave a message on my phone at anytime. I regularly check messages Monday-Friday and will make every attempt to return your phone call within 24 hours of the time I receive it. If I have not returned your phone call within 24 hours, please try again as your message may have been lost through the phone company. I do not check messages after 6:30 p.m. weekdays or routinely on weekends.

I do not provide emergency after hour services during evenings, weekends or holidays. If there is an emergency please call 911 and utilize the emergency department at your local hospital.

Attendance Policy: In order for me to effectively work with you and your child I expect all to arrive at their scheduled appointments on time. If you are more than 15 minutes late we will have to reschedule to ensure timeliness to other's appointments scheduled for later in the day. If you do need to re-schedule, kindly give 24 hour's notice. If 24 hours advance notice is not given, *you will be responsible for paying for the missed session.* Please make sure to record your appointments on your personal calendar, as reminder calls are not provided.

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As a professional striving for continued education and learning I do regularly receive supervision. Names and identifying information are changed during discussions with supervisors. All supervisors are bound by the same professional confidentiality as I am.

NC procedures for complaints: Should you become dissatisfied with any aspect of your therapeutic treatment, please tell me immediately. I will make every effort to resolve your concerns. I like to have open communication with all people I serve. This will make our work together more efficient and effective. If you think you have been treated unfairly or unethically and cannot resolve

Kellye Hutton Slaggert M.A.LPC
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Licensed Professional Counselor (NC 9122)
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I received my master in clinical psychology from Western Michigan University in 1990. In addition to holding a license in the state of North Carolina, I also am licensed in the state of Michigan & Georgia. The past 20 years I have worked with developmentally disabled adults & children along with their families. My more recent experience has been with children who are experiencing developmental delays, difficulties with social interactions, difficulties understanding or responding to their environment.

The theoretical orientation **D**evelopmental, **I**ndividual Difference, **R**elationship-based (DIR//floortime®), is the primary basis for the clinical work I do. Person centered therapy may be used behavior therapy may also be incorporated. The DIR/Floortime® model is based upon the tenant that parents provide a key, integral component to their child's development. While I may work 1:1 with your child, I will also provide parental coaching/facilitating to support you in your floor time efforts throughout your day at home. Looking at your child in his/her unique developmental levels and individual differences is the focus rather than specific behaviors. My goal is to work with you and your child to help him/her move through the 6 basic developmental milestones (shared attention, engagement and relating, two way intentional communication, problem solving, meaningful use of ideas, and logical thinking). Building off your child's interest and preferred activities is the premise for helping your child build and establish relationships and form emotional connections to others. These emotional connections are the foundations for other types of learning. I strive to have every child and family feel safe and secure while in session. With each child's unique sensory profile, the environment will be adapted to the extent possible. I also incorporate a cognitive behavioral approach when suitable. The premise behind this approach is that our thoughts can cause our feelings and behaviors vs. people, situations or specific events. While it is impossible to change specific circumstances, it is possible to change our thoughts and perceptions. This approach uses a combination of behavioral and cognitive principles based upon research. The approach is problem focused and specific strategies are implemented to address problems. Types of interventions include, but not limited to: relaxation, adaptive coping strategies, desensitization, imagery, motivational self-talk and/or setting goals.

My practice provides the following services: 1:1 floortime with children, consultation with families on facilitating home based floortime programs, addressing relationship challenges parents/caregivers may have that could impact the child's development and/or harmonious living, helping families reduce child: meltdowns, regressions, relationship problems, social challenges, emotional regulation, behavior problems; along with educational & training sessions. My sessions are for 50 minutes.

Services and Fees: My hourly rate is 125\$. Cash, checks or credit cards are both accepted for payment of services rendered. Payment is expected at the time of service. The client's insurance policy is a contract between them and their insurance company. PCTC is not a party to that contract. As a courtesy, PCTC will submit bills to insurance carriers who we are in network with. If client's insurance is out of network, payment is due at time services rendered and PCTC will provide needed documentation for the client to be reimbursed by their insurance company.