

INFORMED CONSENT TO TREATMENT

As part of this equine-facilitated psychotherapy (EFP) treatment you will be entering into a therapist-client relationship with the professionals at Unbroken. Please take the time to read through this information with regard to the way this therapy program works, expectations of both client and therapy team, and the limits to confidentiality. Signing this form indicates your understanding of the terms and conditions of the therapeutic relationship and willingness to engage in this process. You will be notified in advance of any changes to these terms and conditions that may occur during the course of therapy.

Professional Disclosure Statement

Hadley Hill obtained her BA in Psychology in 2006 from Middlebury College, her MA in Counseling in 2010 from St. Edwards University, and obtained her professional counseling license (LPC #67886) in 2013. She has worked with clients of all ages and backgrounds facing a multitude of challenges, in an agency as well as private practice setting. She is an Eagala certified Mental Health Specialist in Equine-Assisted Mental Health and Learning, a PATH Int'l certified Equine Specialist, and is currently pursuing her certification in Natural Lifemanship Trauma-Focused Equine Assisted Psychotherapy. In order to maintain her license she participates in ongoing continuing education and adheres strongly to the Code of Ethics of the Texas State Board of Examiners of Professional Counselors.

Sarah Beth McIntosh obtained her BS in Agriculture and Natural Resources in 2015 from Berea College and has extensive experience in the handling and care of equines. She is a PATH Int'l certified Equine Specialist in Equine-Assisted Mental Health and Learning and is currently pursuing certification in Natural Lifemanship Trauma-Informed Equine-Assisted Psychotherapy.

Structure of Sessions

Every EFP session is conducted by both a mental health professional (Hadley Hill) and an equine professional (Sarah Beth McIntosh) teamed up with one or more equines. This is to



maximize the physical and emotional safety of the workspace. Sessions will be UNMOUNTED – that is, clients will not be riding the horses but interacting with them on the ground. This is partially a safety/liability issue, but also aligns with one of the main principles of EFP, which is that interacting with horses on the ground offers an entirely new way of experiencing them and learning from them while the horses are less restrained in their natural element. Sessions are always scheduled for two hours. Sessions may at times last closer to 90 minutes, but we like to build in the extra time cushion to allow for check-in, emotional regulation, and processing both before and afterwards.

Payment

Payment is due at the time services are rendered. We accept cash, check, credit card, and PayPal. Unbroken does not bill insurance, however we will gladly furnish a detailed invoice upon request for you to submit to your insurance company for reimbursement.

Lateness and Cancellation Policy

If a client shows up late to session, the session will still end at the scheduled time and client will still be charged the full fee. We require **24 hours notice** of a cancellation, except in unexpected situations that arise out of clients' control such as sickness, family emergency, accidents, or inclement weather making it unsafe to drive. We at Unbroken will likewise do our best to give clients 24 hours notice if we must cancel a session for any reason. Clients are allowed one no-show without penalty. A second no-show will incur a \$125 fee, and three no-shows will result in the client's termination from the program.

Emergency/Crisis Situations

We at this facility do NOT provide emergency crisis management services or phone counseling. If you are having an emergency or are in crisis, please dial **911** or the local 24-hour helpline at **(512) 472-HELP (4357).**



Confidentiality

The counseling relationship carries communication privileges and rights to confidentiality. What you discuss in therapy will remain confidential. There are, however, several situations in which we would be required both ethically and by law to break confidentiality. These situations include:

- 1) If you report an ongoing situation in which a child, elderly person, or anyone who cannot otherwise protect themselves is being neglected, physically abused, or sexually abused;
- 2) If you report that you have had sexual relations with another mental health professional during the time you were in a counseling relationship with him/her;
- 3) If you represent a harm to yourself;
- 4) If you represent a harm to someone else;
- 5) If our records are subpoenaed by the courts for purposes of litigation;
- 6) If you grant written permission for your records to be sent to another mental health professional or some other kind of professional to allow for coordination and consistency of treatment.

Risks Associated with Therapy

As with most types of positive change and growth, there is usually some discomfort involved in the process. The therapeutic process can often lead to emotional or psychological instability as clients develop new or heightened awareness of emotionally charged material. While this can be uncomfortable or even painful, it is usually a sign of the beginnings of positive growth. This emotional instability may occur at any time during the therapeutic process. Significant relationships in one's life (including family, professional, social and/or intimate) may also be affected as a result of therapy. Relationships may experience varying degrees of strain as one undergoes changes during the therapeutic process.

The Unbroken treatment team will do our best to be a strong source of support during these times, within the boundaries of the therapeutic relationship.



By signing this Informed Consent form, you indicate that you are comfortable with the terms outlined above. You have a right to terminate therapy at any time, and we at Unbroken reserve the right to terminate or transfer services if it is deemed therapeutically necessary or beneficial.

Signature of Client (or of Parent/Legal Guardian if client is under 18):

Signature of Unbroken Therapist:

Date