

Sample Policy for First Session (Intake)

This is what I have documented as suggestions for the first session in my center. We are always improving our policies, so I invite the clinicians to share their thoughts with me. Yours may be different of course. This is just a sample for you.

OCRC First Session Recommendations

To our OCRC Clinicians – please note: If you disagree with any part of this policy – or have suggestions for improving the policy – please let the Clinical Director know. We are always striving for quality improvement and value your suggestions. Also, there may be occasions where you choose to not implement this policy. Please let the Clinical Director know when there has been an exception and help us to understand why.

Providing a consistent experience for clients helps them feel safe and can increase their confidence in their choice of therapists. It also can help to avoid (or handle) future problems. We want them to feel like they have made a good choice in choosing you and OCRC. We also want to normalize what is ahead and get some commitment to the process.

At OCRC, the first session is really to get to know the client; to give them the experience of feeling heard and respected. We listen to their story and make the decision if we can help. If we can, we let them know that we want to and believe we can help them to feel better and get along better.

Further, as therapists, we are keenly aware that many clients are nervous about therapy and are looking for confidence from the therapist, so we are willing to take a leadership role.

Below are some suggestions on how to take that role and make sure you and the client are on the same page regarding treatment. Please use your own words – and please discuss with the Clinical Director if you have any thoughts/concerns/questions.

One of the main things we wish to do is discuss the expectations of therapy. The clients are leaning on us to provide that for them. We are the experts on the therapy process and they are paying us for our professional opinion. If a client wants to come irregularly (from the beginning), I advise you to consider if this is really in the best interests of the client and of you. If the client cannot afford regular treatment, it may be in everyone's best interests to have them find a therapist (such as an OCRC intern) who can help them in a more cost-effective manner ... and where they can still come weekly.

Again, please let the Clinical Director know if you have thoughts, comments, or questions about this. We are always looking for ways to improve and would appreciate your input.

1. Set expectations and gain commitment (the Leadership Role)

So, in an intake session at OCRC, it is considered good practice to:

- Listen to the story from each partner with respect – helping them to feel understood.
- Decide if we want to continue with these clients – if not, gently explain and refer appropriately.
- If so, explain in an overview how treatment works and normalize what happens next. Certainly you want to use your own words, but the point is to help them commit to therapy with you.

For example, you might say something like:

BOOK RESOURCE SECTION

“I would really like to work with you. I am very committed to relationships and I want yours to be what you’d like it to be. I want to help you (*insert their goals*) and I think if you and I are both committed to the process, we can help you get there. So let me share with you how my therapy works and how we might help you to (*insert their goals*).

“Most people who come to us have been in a rut for some time. My goal is to help you out of that rut and learn new ways to interact so that you can be happier, get along better, and learn how to talk about and solve difficult problems (*or however they describe their goals*).

“So here is how it is going to work. You might find that today when you leave you have two reactions – you may feel relief since you are finally opening up and getting some help... or you may have an argument. This is totally normal. Neither is indicative of whether or not therapy is working. It just means we have started poking around a little.

“As you come back regularly, we will be working together to help you get more relief and as mentioned, learn how to talk about things so that there are fewer arguments (*or their goals*). So as you start learning new ways of connecting, you may find yourself feeling better for a few sessions and then you may, out of habit, fall back into that old rut. My goal is to help you get out and stay out of that rut. Most people fall into the rut a few times before they really trust that the new ways of connecting work well.

“So while we start looking for progress right away, most people come to therapy at least 10 times on a weekly basis in order to have the experience and practice the skills necessary to stay out of that rut. So when people come to us, we expect they will come at least 10 times on a weekly basis so we can get some traction.

“Now, that doesn’t mean we are done at 10 sessions, but

we have a lot of traction there and a better ability to stay out of the rut. And that is when things can get much better and better faster. And just to make sure, I will always be checking in with you – each week – to make sure you are getting what you need from me and from our work together. If you aren’t getting what you need, then I will modify what I am doing to help you get better results.

“How does that sound? What do you think? I am all in if you are!”

2. Discussion of Informed Consent

If you and the clients agree to treatment, we then discuss (and document in the intake notes that we discussed) key points from the informed consent paperwork including but not limited to:

- confidentiality
- cancellation policy
- how we will evaluate the relationship (either asking them each session or using the ORS/SRS)
- Secrets (or “no-secrets”) policy

Please remember to document that you discussed these policies. As the lawyers say, “If it isn’t documented, it didn’t happen.”

3. Schedule the next several sessions

Invite them to have a standing (set) weekly appointment time. We have seen that people who have regular sessions tend to be more compliant with treatment AND it will help you manage your schedule better.

Should they not wish to do that, see if they are willing to schedule the next two or three sessions. This way if they cancel or

do not show for an appointment, the appointment after they missed is, at least, already scheduled.

Note: See the section on Scheduling Sessions in the Practice Management system for details as to how to add the future sessions to our practice management system calendar.

Additional Note: Some OCRC clients may benefit and be open to “double sessions” – 90-minute weekly sessions. We have found that some couples appreciate these as 45 minutes (our regular session length) goes by so quickly and neither partner feels completely “heard.” If you want to offer the 90-minute sessions, you can explain the value and also let them know that the fee is then double the regular 45-minute session fee.

Also, please make sure you adjust the calendar to show it is a 90-minute appointment.

4. Obtain Payment Arrangements

Clients have the option of paying for their sessions three ways at OCRC:

- Cash
- Credit Cards and Debit cards with a logo (AmEx, MC, Visa, Discover)
- Check (not encouraged, but if taken, please have them made out to OC Relationship Center or Relationship Center)

If the client wishes to pay by credit card, please have them fill out a credit card authorization form (*blank ones are located in the hall cabinet*) and indicate if they wish to be charged once or on an ongoing basis. Please make sure the card is in the name of the client and not a third party. If a client indicates that a relative will pay,

please explain that we cannot accept payment from someone who is not our client. We ask the client to pay for the session and then work it out however they wish with the third party.

Please also make sure the number on the credit card matches the number the client puts on the form and that everything is legible and all fields are filled in. (If you fill out the form yourself, you can then make sure the printing is legible and no fields are missed.) The client just needs to sign the form then.

Payment is expected at the time of service. However, if the client wishes to always pay via credit card, we will keep it on file for the client so the client only has to complete the authorization form once.

If a client pays cash and gives you more than the session fee, please indicate that on the invoice that you submit in the practice management system and on your daily tracking sheet. The client will get a credit in our system so they can pay less the next time. We don't have a system for "giving change." Please let the bookkeeper know if the client won't be returning and they have a credit balance. We will send them a check.

Please put the payment for this session (and all sessions for the day) in an envelope with your name on it and include in the envelope, the daily payment sheet for all the clients you saw that day. Please place the envelope in the kitchen area designated for that function.

NOTE: See the Practice Management section to see how to enter everything into the online system.

Please feel free to contact our bookkeeper, Bob Truffo, at xxx.xxx.xxx if you have questions regarding client invoices or payments.