

**Leslie K. Dalton, Ph.D., SEP**  
**Licensed Clinical Psychologist**

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[www.illuminationwellbeing.com](http://www.illuminationwellbeing.com)

Phone (703) 550-4056

### **Information About Services**

Welcome to my practice. This document addresses some frequently asked questions about psychotherapy, and also clarifies certain policies and procedures that are specific to my practice.

#### Scheduling and Cancellation Policy

At the beginning of treatment, you and I will agree on a regular meeting time. When we schedule an appointment, this time is reserved for you. Please let me know of any planned cancellations or the need to reschedule at least one week in advance, if possible. Because this time can not be offered to anyone else without notification from you, at least 24 hours advance notice for cancellation of a session is required. If you cancel a session with less than 24 hours notice, or miss a session without notice, you will be charged \$200.00. Health insurance companies do not cover charges for missed sessions or late cancellations.

#### Fees and Payment

The fee of \$250.00 for the initial evaluation session and \$200.00 for each subsequent 45 minute session is due before each session. A portion of this fee may be reimbursable through your health insurance. Services other than psychotherapy requiring a time commitment of more than 15 minutes (such as telephone calls, report reading and writing, consultation with other professionals) will be charged at a rate proportional to the session fee, based on the amount of time spent on the service. Fees will be reassessed once a year.

If, during the course of therapy, you become unable to make timely payments, please let me know so that I can seek appropriate referrals for you that are more affordable. It is not beneficial to allow an unpaid balance to accrue; thus, if payment has not been made for more than two consecutive sessions, further sessions will be scheduled only following payment.

#### Consultation

I consult regularly with other professionals regarding my clients in order to ensure provision of the most effective treatment. Clients' names and other identifying information are never revealed; clients' identities remain anonymous and confidentiality is fully maintained.

#### Confidentiality

In general, the privacy of all communications between a psychologist and a client is protected by Virginia Law, the Ethical Principles of the American Psychological Association, and the Health Insurance Portability and Accountability Act (HIPAA). I will make every effort to guard your privacy; however, there are a few specific exceptions to confidentiality, including the following:

1. If you choose to use your health insurance to help pay for the cost of treatment, the insurance company may require information about your treatment in order to authorize coverage, such as dates of treatment, symptoms, and diagnosis.
2. With your expressed written consent, you may authorize me to release records or other information to individuals of your choosing.
3. Under ethical and legal requirements, I may be required to break confidentiality in cases in which there is clear and imminent danger to you or another person.
4. The law requires that therapists disclose information regarding child or elder abuse or neglect.
5. In certain legal proceedings, confidential information may be required to be disclosed by court order.
6. Should you default on payment, it may be necessary to secure the services of a collection agency for reimbursement. Should this occur, it will be your responsibility to pay the collection agency surcharge in addition to your outstanding balance.

Social Media Policy

I do not accept friend or contact requests from current or former clients on any social networking site (Facebook, LinkedIn, Instagram, etc.) I believe that adding clients as friends or contacts on these sites can compromise your confidentiality and our respective privacy. It may also blur the boundaries of our therapeutic relationship.

Communication and Emergencies

Sessions are scheduled by appointment only. If you need to reach me between regularly scheduled appointments, you can leave a message at (703) 550-4056. The voice mail at that number is confidential, and I will return your call as soon as possible. You may also email me at Lkdaltonphd@gmail.com. I check messages regularly during business hours. In an emergency, if you are unable to wait for a return call, please call the Crisis Link hotline, where counselors are available 24 hours a day, at (703) 527-4077. When I am out of town, another therapist will cover my practice.

**I authorize Leslie K. Dalton, Ph.D. to provide me with psychotherapeutic services. I have read, and I understand and accept the policies and procedures described above. I agree to abide by these terms during our professional relationship.**

Name of Client \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

\_\_\_\_\_ Date \_\_\_\_\_

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