VERMONT CENTER FOR RESILIENCY

Clinician's Name
Clinician's Degree and License
Vermont Center for Resiliency, PLLC
Office address
Burlington, VT 05401
Tel. 802-xxx-xxxx

Blueprint / Vermont Center for Resiliency, PLLC

Information about my Practice

Contact Information:

- Use the above number and extension to leave a message for me 24 hours per day, 7 days per week. I will get back to you, usually within 24 hours, however I do not usually check messages over the weekend, holidays or after 5pm. Please refer to Email and Text Policy for information about other forms of communication.
- If you are in crisis do one of the following:
  - Call 911.
  - Call Howard Center First Call for Chittenden County Crisis line at 802-488-7777.
  - Go to your local hospital Emergency Department.
  - During the weekdays (Monday - Friday 9am-5pm) access Mental Health Urgent Care at 1 So. Prospect St, Burlington VT.

Length of Sessions:

- Psychotherapy sessions are approximately 50-55 minutes.

Behaviors/Conditions that Are Cause for Termination of the Therapist/Client Contract:

- Disruptive, abusive, threatening, or violent language or behavior towards the therapist (general swearing while talking is generally fine)
- Bringing weapons into the building
- Impairment with a substance during client/therapist meetings
- Audio or video recordings of sessions
- Multiple late cancellations or No-Shows
- A condition not treated by this clinician or that is beyond the scope of private practice

Confidentiality: All information you share with me is held in confidence and I can share it with others (with the exception of your health plan, as noted above) only by you giving me your written consent.
There are three exceptions to this policy:

1. If a client is involved in a court case, clinical records and/or therapist testimony may be subpoenaed.
2. Vermont state law mandates that a mental health professional who reasonably suspects that any child, elder or member of a vulnerable population has been abused or

neglected must report abuse or neglect to the Department For Children and Families or Adult Protective Services for possible investigation.

3. If a therapist has reasonable cause to believe that a client may inflict harm upon him or herself or another or another's property, the therapist is bound ethically and legally to do whatever is necessary to protect human life and/or property.

Specific Considerations for receiving Mental Health Care within Primary Care: due to the nature of primary care offices that often provide services for entire families, there is a higher than average possibility of your Blueprint Clinician also working with a family member. Please know that confidentiality is upheld and your Blueprint Clinician will not disclose that they are working with you.

Disclosure: Vermont state law requires that I disclose to all clients my professional qualifications and experience, information about what constitutes unprofessional conduct, and information about how to file a complaint with the Office of Professional Regulation. (Provided separately)

Privacy: The Federal regulation known as the "HIPAA Privacy Rule" requires that I provide detailed notice in writing of established privacy practices. (Provided separately)

Records: To request your medical records from our work together in this Blueprint VCR/ Primary Care model, you can contact me directly via email or phone extension, or can reach out to the VCR, PLLC Director Kris Reynolds, LICSW at kristine@vtresiliency.com to ask for the medical records request process.

Social Media: The code of ethics for my profession prohibits me from responding to friend requests on any social media sites, including Facebook and LinkedIn.

For Client or Client's Representative: My signature below indicates that I have read the above information and have had an opportunity to ask questions, and that I understand and agree to abide with the above.

Signature of Client	Print Name	Date
Signature of Client	Print Name	Date
Signature of Client's Representative (if applicable)	Relationship to Client	Date