

Samantha Good, LICSW
License # LW 60067478
Individual and Family Psychotherapy
State of Washington Required Disclosure

By law, I am required to help you understand the safeguards and provisions affecting treatment.

Theoretical Orientation and Treatment Approach

My approach to treatment incorporates both psychoanalytic and family systems theories. I work with patients to understand the how experiences and relationships from the past can influence what's happening now. In treatment, we will examine your unique life experiences, including your family history, the ways you relate to others, and how you understand yourself. I will work with you to build a trusting and honest relationship within which we can do such exploration. I will listen carefully in order to notice conscious and unconscious life patterns, thoughts, and feelings that may cause you to feel pain or to feel stuck in areas of your life.

The type of therapy I practice requires a commitment of time and attention to the process. I generally work with patients for a period of months or years to achieve the depth of understanding that allows for lasting change. I work with patients at a minimum of once per week, and often see patients at a greater frequency, several times per week.

For children and families, treatment may include play therapy and/or specific techniques to change problematic behaviors. Play therapy helps children express feelings, fears or conflicts that they may not yet be able to express in language. Also, there are times when small adjustments to parent-child interactions may resolve or significantly improve family problems. When children are in therapy, I simultaneously work with parents to support their child's growth and development.

Education and Experience

I am a Licensed Independent Clinical Social Worker in the state of Washington and a Child Mental Health Specialist. I completed a bachelor's degree in psychology from Bowdoin College in 2000 and a master's degree in social work from Smith College School for Social Work in 2005. Since that time, I have worked as a therapist to children, families, couples, and adults in multiple settings. I received postgraduate training in couple and family therapy at the Ackerman Institute for the Family in New York in 2006-2007. I am certified to provide Parent-Child Interaction Therapy and have provided supervision and consultation in child and family therapy for the past 6 years. I completed a two year Certificate in British Object Relations Psychotherapy at the COR Northwest Family Development Center in Seattle. I participate in ongoing training and consultation as part of my practice.

Fee Information and Payment Policies

Psychotherapy sessions will be 50 minutes in length and my fees are as follows: \$110 for an individual psychotherapy session, \$130 for a family or couple therapy session. I accept personal checks and cash. I do not accept credit cards.

You will be given a statement at the beginning of each month and you will be required to make your payment by the 15th of the month. If you prefer, you may pay at the time of each session. You are responsible to make your payment regardless of whether or not your health insurance company may eventually pay a portion, unless we have made other arrangements.

Appointments and Cancellations

We will arrange specific, regular meeting times for our sessions. Sessions will occur at a minimum of once per week.

I require notice of any cancellations at least 48 hours prior to our scheduled session. If you miss your appointment or fail to give me adequate notice, you will be responsible for the full fee of the appointment. Insurance cannot be billed for such missed or cancelled appointments. If you arrive late, the session cannot be extended.

I will provide you with advance notice of any vacation times or planned absences from the office.

Emergency/Crisis Procedures

I return phone calls Monday-Thursday between 9am and 5pm. If you have a crisis after business hours or on the weekend, please contact the King County Crisis Line, 206.461.3222. I am not available for crisis services after regular business hours.

Confidentiality

All material shared in the context of psychotherapy is confidential, which means it will not be shared with anyone without your written permission. If it would be beneficial to your treatment, I will obtain your written permission to collaborate with a third party (e.g., a psychiatrist or primary care physician). This confidentiality is subject to certain **exceptions**, including:

1. In the event of a serious threat to harm oneself or someone else, the proper individuals and/or authorities must be contacted. This includes the person against whom the threat is made.
2. In the event of suspected child or elder abuse or neglect, the proper authorities must be notified. The actions do not have to be witnessed to be reported.
3. In the event that you bring a complaint against me with the State of Washington Department of Health, information will be released.
4. In the event that your records are subpoenaed by a judge or a judicial officer, information must be released.
5. In the event that your records are subpoenaed by a lawyer in the State of Washington, they will be released unless you file a Protection Order.

6. In the event of a medical emergency, emergency personnel will be given necessary information.
7. In the case of a minor client, information indicating that the client was the victim of a crime may be released.
8. In the case of death or disability, information may be released if your personal representative or the beneficiary of your life insurance policy signs a release authorizing disclosure.

Complaint Procedure

As required by RCW 18.19.060, you may file a complaint with the Department of Health at any time you believe I have demonstrated unprofessional conduct. Therapists practicing therapy for a fee must be registered or licensed with the Department of Health for protection of the public health and safety. Registration of an individual with the Department does not include recognition of any practice standards, or necessarily imply the effectiveness of any treatment. It is your right to discontinue treatment at any time, with or without notice to the treatment provider. Questions or complaints may be directed to Department of Health, Health Professionals Quality Assurance, P.O. Box 47868, Olympia, WA 98504-7869, (360) 236-4700.