

Jenny Gardon, MSW, LICSW  
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### Psychotherapy

In general, the goal of therapy is to relieve symptoms and enable you to have greater satisfaction in your life. Much of the work of therapy is to become more connected with your self and your feelings, (including sensations, needs, behaviors, and motivations) and important others. Accepting and meeting your needs follow. Therapy is a collaborative process based on a supportive therapy relationship. Many feelings are engendered in the process. I encourage you to tell me about and make use of these feelings and of our relationship as we go along.

### Training, Credentials, and Approach

My current study in this work is on applying the new findings in neuroscience and attachment to individual psychotherapy and couples therapy. These approaches focus on restoring regulation of our nervous systems, calming upset and reactivity, and strengthening our capacities to be close with self and others.

I earned my Masters degree in Social Work from the University of Washington in 1983, and have continued to study human development and psychotherapy since then. My thinking and practice of therapy have developed over the years with experience, training, and my own life's evolution. Post-graduate training has included family-systems theory, cognitive therapy, and contemporary schools of psychoanalytic therapy including the object relations and relational approaches, as well as the studies mentioned above.

From 1978 - 1998 I worked in hospital, residential, and outpatient settings. I began independent practice in 1988, and have been in full time independent practice since 1998.

I am active in local professional organizations, and provide consultation and supervision in addition to therapy.

I am licensed as an Independent Clinical Social Worker, (LICSW) with Washington State's Department of Health. (License number 020704 - LW00004993.)

### Confidentiality

The assurance that I will honor your privacy is one of the foundations of safety in therapy. I will hold our conversations in confidence in accordance with federal and Washington laws and ethical practice. The exceptions to this privacy are suspected abuse of a child or vulnerable disabled or elderly adult, threat to harm self or other, a subpoena regarding our work, your permission to talk with a specific person, or to record with your permission for training and supervision purposes, and electing to use insurance benefits. Please refer to Notice of Privacy Practices for more information.

### Appointments

Once we establish our meeting time/s, I will hold it/them for you every week, and hope that we can meet consistently. This time is reserved for you, and I ask that you be financially responsible for this time whether you attend or not (much like paying tuition). Your fee applies for missed or cancelled appointments (beyond one per quarter) as well as for those attended, unless we can make up a missed appointment within the same week.

If in spite of efforts to protect our time, you or I cannot keep our usual appointment, I will try to find an alternate time to meet with you, and I would ask you to do the same.

As with other aspects of our work, let's discuss this financial/cancellation policy for clarity, and consider what adjustments, if any, are needed and mutually acceptable.

Fees

- For individual therapy, my fee is \$175 for the first meeting, then \$150 for a standard 45-50-minute session. When needed, we can arrange for longer sessions.
- With couples, I prefer extended sessions of 70 minutes, at a charge of \$225.
- My fees are increased periodically.
- You have the option of making your payment to me weekly, at the start of each session, or monthly, at the beginning of each month for the previous month. Payment can be made by check, cash, or using your bank or credit union’s online bill-pay.

Insurance

- If you have an out-of-network benefit with your insurance company, it will cover my services. For the time being, I remain on the First Choice Health insurance panel. It is possible I will terminate this contract before our work is complete. This would mean your financial responsibility will change to the “out-of-network” level, possibly the full fee.
- Insurance companies do not cover missed appointments and vary about telehealth.
- If you elect to use medical insurance, you remain responsible for paying the full fee or your co-pay regularly. I will either provide you with documentation to be reimbursed, or bill the insurance company directly, depending what agreement, if any, I have with your insurer.

Phone availability, e-mail, my absences and support during my absence

- I check for voice mail messages several times each weekday. If you urgently need to talk to me outside of business hours, please call my answering service at 425-608-3337, and they will attempt to get your message to me.
- You may contact me by e-mail about a scheduling. I will not use e-mail for discussion of any therapy issues.
- I am sometimes away a month at a time, and this may increase. When I am away, I can arrange to have a colleague available as needed. Let’s discuss this as it comes up.

Acknowledgment of receipt of Notice of Privacy Policies

By my signature below I/we acknowledge I/we received a copy of the Notice of Privacy Practices (HIPAA) for Jenny Gardon, LICSW.

Client Signature	Client name	Date
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Client Signature	Client name	Date
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Consent

I have read, had opportunity to discuss, and received a copy of these Practice Policies. I would like to proceed with psychotherapy with Jenny Gardon, and agree to these policies.

Client Signature	Client name	Date
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Street address	email address	phone
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Client Signature	Client name	Date
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Street address	email address	phone
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