



Beautiful Autism, LLC

16404 Smokey Point Blvd, Suite 102, Arlington, WA. 98223

425-387-3872 Jen@BeautifulAutism.com

Disclosure Statement Client Service Agreement

Jennifer W. Edwards, LMHC

DOH License: LH60717278

NPI: 1417245234

Qualifications

Jen is a licensed mental health clinician associate in the state of Washington. This means she has completed graduate work at an accredited university, completed clinical internship hours, been supervised during post graduate hours, maintains yearly required continuing education hours, and maintains state licensure requirements for the state of Washington through the Department of Health.

In 2004 Jen graduated from Western Baptist College with her bachelors of science in elementary education. She then taught school in both private and public school for six years. In 2012 she graduated from Liberty University with her masters degree in marriage and family therapy. Since 2012 she has been counseling, primarily focusing on children and adolescents, individuals with special needs, and the family unit.

Since 2010 Jen has been focusing a lot on Autism Spectrum Disorder. She has over 100 training hours in this area of study. Other behavior disorders, including ADHD and ODD, Jen has also been trained in.

Jen uses a vast array of techniques and therapeutic interventions. Many of these comes from trainings she has completed, and now herself trains on. At times she may offer different therapeutic techniques or assessments if she feels it will help the client move forward to meet the therapy goals.

Therapy Philosophy

Jen believes in creating goals together with the client for therapy in order for true success to happen. However, she cautions that therapy is not a quick fix and will take time.

The approach she uses often with children on the Autism Spectrum is the SCERTS model. This is a model that incorporates all aspects of life for the child, including school, home, family, and therapy.

For other clients, an approach is used that is most helpful and comfortable for the client to grow and mature in their emotional state. However, at times it is appropriate and helpful for some emotional stretching to happen in therapy, and this will be done when Jen finds it necessary and appropriate.



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Limits on Confidentiality

Confidentiality is always to be upheld in therapy between a client and therapist. However, there are times when confidentiality legally must be broken:

- If there is serious or foreseeable harm to self or another person
- If the court requests records

At times it is the therapist's prerogative to consult with other therapists. All measures will be taken to keep total confidentiality. Consulting is done to give the therapist another viewpoint and help the therapeutic process for both the client and therapist.

When billing through insurance, DDA, or any other form of billing, an administrative employee of Beautiful Autism may be seeing your information for billing purposes only. This person will have training in confidentiality and has agreed to not share your information.

Initial _____

Minors and Parents

Washington state law allows minors under the age of 13 years old to have their records examined by parents. However, please understand that this is highly discouraged and can damage the therapeutic process for the child. Children 13 years and older have the right to keep records confidential.

However, it is important that the parents be involved in the therapeutic process. Therefore time will be spent with the parents for minors under the age of 13 during therapy either during the session, or by email. For 13 years and older, it will be discussed during session what information will be shared with parents, and then either parents will join at the end of session or will be emailed. Please realize minors 13 years and older have the right to refuse discussing therapy with parents.

Initial _____

Payment

Any money due at the time of session is expected to be paid at session. This includes full payment, co-pays, etc. Cash, check, credit, debit, and FSA cards are welcome. An invoice can be provided if wanted.



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If a session needs to be rescheduled due to illness or emergency situation, please provide 24 hour notice if possible and no charges will be issued. **All no shows, or last minute cancellations will be charged full rate.**

You are responsible for any amount insurance does not pay. If your bill is not paid within 60 days, please be aware that your bill may end up going to collections.

Initial _____

Client-Therapist Relationship

The client and therapist relationship is to always be maintained as a professional relationship. It is expected that communication will likely take place outside of the office between the client and therapist. This can be done by phone, email, or text. Please be aware the therapist will try to respond within 24 hours, and cannot guarantee immediate response by phone, email, or text. Professional and ethical boundaries will always be maintained and are expected by both parties and will be monitored by the therapist.

Initial _____

Client Signature _____ Date _____

Parent/Guardian Signature _____ Date _____

Therapist Signature _____ Date _____