Dr. Shari Geller

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Gentle Integration of Body, Mind & Soul

INFORMATION LETTER AND CONSENT FORM

BACKGROUND AND QUALIFICATIONS:

I am a registered psychologist in the province of Ontario and have been practicing psychotherapy for 20 years. I received my M.A and Ph.D in Clinical Psychology from York University. I am also on the teaching faculty at York University, Applied Mindfulness Meditation (AMM) at University of Toronto, and the adjunct faculty at the Music and Health Research Collaboratory (MaHRC) at University of Toronto. I have authored and published articles on therapeutic presence, which is the value of being fully in the moment with and for clients, to optimize health, integration and wellbeing. I have also developed a group program, Therapeutic Rhythm and Mindfulness (TRMTM). TRM is designed to cultivate presence through boosting positive emotions such as vitality, joy and social connectedness, while releasing difficult emotions, stress and trauma that may be held in the body.

APPROACH TO THERAPY:

I believe in the healing capacity of each and every individual and my role is to provide a safe and supportive environment to help people access the natural growth potential within. My therapeutic approach is diverse and includes emotion-focused, client-centered, mindfulness, and bodily-oriented psychotherapies, such as Focusing and Sound/Music oriented modalities. I approach therapy and clients based on the present moment, attuning to the needs, style and state of a particular person at a particular time, supported and informed by our ongoing work together. I offer tools for resiliency and well-being while creating a safe environment for processing and working through difficult emotions and issues.

I currently practice in both downtown Toronto and the Grey County area, offering individual, couple, and group psychotherapy for clients suffering from various difficulties including depression, anxiety, insomnia, grief, post-traumatic stress disorder, post-effects of sexual, physical and emotional trauma, relationship issues, separation and divorce, sexuality issues, chronic physical pain, stress and tension, and various other forms of physical and emotional illnesses. It is important to note that not everyone who comes to therapy is suffering with an "illness" or "disorder." I also work with people who desire personal or spiritual growth and wish to develop greater self-awareness, wellbeing and to live a more authentic and meaningful life.

My intention in therapy is to help people to help themselves, as well as to access the deep well of knowledge and wisdom that I believe is inherent in every human being. Often times we get stuck in various aspects of our life due to trauma or loss, or we suffer from inherent forms of emotional distress such as anxiety, panic or depression. My goal is to help people to listen to their own body signals and needs, and to access their own inner resources for continued healing and growth.

HOW MUCH DOES IT COST FOR A SESSION?

A one-hour session is billed at \$200. Extended Health Care Coverage is offered if you have this available to you. If you have difficulty with the fees, there is a sliding scale offered. Please note that 24-hour notice for cancellation is required or else there will be a charge for the session.

WHAT HAPPENS IN THERAPY?

The first session typically involves us meeting and for me to understand what brings you to therapy, your background and may involve a brief history. It is also an opportunity for you to get to know me as your therapist, and ask questions. The goals of therapy are then formed and based on a collaborative effort between us to help develop an understanding of what is troubling you, the source of that discomfort, and how to develop positive coping mechanisms to move beyond your difficulties to a more holistic or at least non-harmful approach to living a balanced and full life. You are encouraged to talk about whatever issues you wish and it is equally important that you not talk about anything that you wish not to disclose. You are viewed as the expert on your self and the therapist is there to help uncover and deepen your expertise. You also have the choice to end therapy at anytime if you find that it is not working for you. However, I encourage you discuss this first with me, as sometimes a feeling of not working is actually an indicator of something important emerging in the therapy. If you still feel that therapy is not useful, the choice to leave is always an option.

Please note that you will get as much out of therapy as you are willing to put into it. I will incorporate different practices as well as talk and ask questions to facilitate your growth and recovery (if applicable). This experience will be amplified by your willingness to spend time with your self and work on what has been discussed in therapy, between sessions. This way, you will develop the skills and ability to overcome difficult experiences and emotions and to deepen your self-knowledge and awareness when you are on your own, in between sessions, and long after therapy has ended.

WHAT ABOUT CONFIDENTIALITY?

Psychologists are bound by professional and ethical standards to maintain strict confidentiality. However, there are exceptions to confidentiality, which are as follows:

If you report harm to be done to yourself or someone else, if you report abuse of a child under the age of 16-years old, or if you report abuse you received by another regulated health practitioner then the information needs to be released for the protection of you or other people. The final exception to confidentiality is if the court subpoenas the information. If these situations emerge then I would attempt to speak with you first if possible, unless there is imminent risk or harm. In addition, Psychologists are regulated by the College of Psychologists of Ontario who may inspect our records as a part of their regulatory activities in the public interest.

If you have any questions that have not been answered by this information sheet then please feel free to ask.

I (we) have read the above and accept the conditions of the practice set out above:	
Name	
Signature:	Date: