

# OFFICE POLICIES

Springs New Hope, LLC  
Scott F. Olds - (303) 817-8369  
[www.springsnewhope.com](http://www.springsnewhope.com)

10960 W. 65<sup>th</sup> Way, Arvada, CO 80004

1. Payment is due at the time of service unless prearranged. Payment is for a standard 1-hour session (\$90), an extended 90-minute session (\$95), or a 30 minute half session (\$45). Rates for a couple or family are \$120 per hour. A sliding scale based on income is available for those who can't afford the full session fee. Open Path fees are set at the 1st appointment.
2. Cancellation policy: 24-hour notice of cancellation is required except in special circumstances such as extreme weather, a transportation crisis, or a medical crisis. Cancellation later than 24 hours ahead or failure to keep an appointment without a special circumstance results in client responsibility for the session fee. If I must cancel later than 24 hours ahead due to a special circumstance, I will not hold you responsible for any payment for the canceled session and will attempt to reschedule for the earliest opportunity.
3. Late arrival policy: Late arrival may result in the loss of a comparable portion of the session if I do not have the flexibility to accommodate. If you are more than 15 minutes late, I may not be available for the session. If I am more than 15 minutes late you may leave and I will not hold you responsible for the fee. If I anticipate that I may be late, I will make an effort to notify you. If I am late, I will either not reduce the time of your session or I will give you the missed time during a future session.
4. Telephone and video tele-counseling policy: I generally check my messages a minimum of twice a day five days a week (Mon.-Fri.) and at least once at the end of the weekend. When you call please let me know what times are best to call back at a given number. I do not place or return calls after 9 P. M. or before 8 A. M. except in an emergency. Tele-sessions may be scheduled ahead at the standard session rate. Non-urgent crisis sessions by telephone of longer than 15 minutes, also will be billed at the standard rates. Routine calls will be limited to about 5 minutes.
5. Crisis intervention: My practice in psychotherapy provides support for healing and personal development. I do not provide urgent mental health care requiring hospitalization or other institutional services. Crisis calls requiring urgent reply should be directed to the relevant crisis hotline:
  - a. Suicide prevention: St. Anthony Hospital 303-629-4490
  - b. Child Abuse Hotline 720-944-3000
  - c. Suicide & Crisis-A Hot Line 303-860-1200
  - d. Suicide & Crisis-A Line for Youth 303-894-9000
  - e. Colorado Crisis line 1-844-493-8255 **OR, call 911**

I have been informed of my therapist's office policies.

\_\_\_\_\_  
Client Signature (parent or guardian if a minor)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Therapist Signature

\_\_\_\_\_  
Date