

Dr. Kristina Towill & Dr. Ann-Louise Ellwood Registered Psychologists

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INFORMATION FOR CLIENTS Dr. Ann-Louise Ellwood, R. Psych. (CPBC # 1869)

Welcome to my practice. I appreciate you giving me the opportunity to assist you in working toward your goals.

This brochure answers some questions clients often ask about therapy in general and my specific therapy practice. Our work together will be most helpful when you have a clear understanding of what we are trying to do and when we agree on the approach being taken in therapy.

This brochure briefly discusses the following areas:

- My training, professional background, and approach to therapy
- What typically happens in the first, and subsequent appointments
- How long therapy might take
- The risks and benefits of therapy
- The terms and limits of confidentiality, and
- Appointment and Fee information

Please read through this entire brochure and note any areas on which you are not clear or any question that you may have. After you read this brochure, we will discuss in person any questions or comments that you have, and how these issues will apply to your own situation so that you benefit optimally from my services.

About Psychotherapy

Because you will invest a good deal of time and energy into therapy, it is important that you choose a therapist carefully. You should feel comfortable with the therapist you choose and have confidence that he or she is skilled and competent in assessment, diagnosis, and treatment. When you are confident in your therapist's ability and ethics, you are likely to benefit most from therapy. The following information will familiarize you with how I practice, as well with my training and background. Don't hesitate to discuss any of this with me personally. If you were referred by another professional, or came by my name though a friend, I encourage you to ask that person about their experiences with me.

My approach to therapy draws primarily on cognitive-behavioural principles and strategies. Cognitive-behavioural therapy has a large research base to support its efficacy with a wide range of problems. At the core of this approach is the premise that much of how we feel and behave is caused by our thoughts – that is, how we think about ourselves, others, and the world around us. When working on mood, anxiety and health issues, I adapt treatment to the specific problems and goals that the client(s) and I are addressing. Depending on the clients' own goals for therapy, we may look at some of the following areas:

- Clients' expectations of themselves, the world and others,
- Core beliefs and thinking styles,
- Recognizing and changing patterns that feed distress,
- Current stressors, fears, or anxieties that are compromising the enjoyment of relationships and life in general.

About Confidentiality

I will treat with great care all the information that you share with me. It is your legal right that our sessions and my records about you are kept private. In general, I will tell no one what you tell me. If I need to consult or otherwise speak about you to another professional, I will always ask you to sign a "Release of Information" form.

In all but a few rare situations, your confidentiality (that is, your privacy) is protected by law and by the rules and ethics of my profession. Here are the most common cases in which I cannot ensure that your confidentiality will be protected:

- 1. If you are involved in legal proceedings, my records could be subpoenaed and/or I could be asked to testify in court.
- 2. If you make a serious threat to harm yourself or another person, the law requires me to try to protect you or that other person. This usually means telling others about the threat, for example, the police.
- 3. If I believe that a child has been or will be abused or neglected, I am legally required to report this to the authorities.
- 4. If some or all of your therapy is being covered by an insurance company, I may be obliged to provide basic information, for example, the dates we've met, my fees, and perhaps a treatment plan. Depending on your coverage, I will review this more with you during our first session.

I also may consult with other therapists or professionals. This helps me to give you high-quality treatment. Your name will never be used in these consultations.

My Background

I am a psychologist with master's and doctoral degrees in Clinical Psychology from the University of Calgary. My practice focuses on depression, anxiety, and the impact of physical illness on individual and family well-being. I often work with people who are living with chronic or life-threatening conditions and who are struggling with their mood, family functioning, or work concerns. I have been working directly with individuals and families with these issues since 2004. After completing my doctoral degree in Clinical Psychology, I worked as a therapist and researcher at the BC Cancer Agency for two and half years before moving into private practice. Throughout my training, I have worked with a wide range of mental health issues across a variety of contexts (e.g., neuropsychological rehabilitation, psychosocial oncology, outpatient psychiatry, and early psychosis) and I have been trained in several different treatment approaches (e.g., cognitive behaviour therapy, interpersonal behaviour therapy, and family therapy).

I am a member of the College of Psychologists of BC, the Canadian Psychological Association, and the BC Psychological Association. I was formerly an Adjunct Professor at UBC-Okanagan in the Psychology Department, served as a liaison to the National Cancer Institute of Canada's Clinical Trials Group, and have several peer reviewed publications and presentations reflecting the research I have conducted on the impact of chronic and life-threatening illness on emotional well-being and family functioning. I am also a former Izaak Walton Killam memorial scholar and won the Donald N. Byers prize for my research on the factor's influencing terminally ill cancer patients' will to live.

What Can I Expect From Our Sessions?

The First Session

How sessions will look depends a lot on the challenges you're facing and your own goals for therapy. Speaking generally, in the first session we will usually spend one to one and a half hours reviewing your background – including your family background, current relationship, medical history, and so on – and your present circumstances and experience of the problem(s). I will ask you about your understanding of the problem(s), and will likely share some thoughts that I have about these challenges as well. By the end of the first or second session, I will share with you my impression of the problem and how I envision us proceeding.

I view our working relationship as one of collaboration and partnership. I will use my knowledge and skills to assist you and I will look to you for problem areas that you'd like to work on, goals, and so forth. Good therapy requires effort, perseverance, and your active involvement in exercises we do, both in and between sessions. I have a large library of books on various topics that may be relevant to your situation, and I am happy to recommend them to you. I may also give you handouts and articles, and encourage you to learn as much as possible on the area in which you are having difficulty.

I think of my role as one in which I teach my clients the skills they need to actively cope with their challenges so that they can live their lives to the fullest extent. My goal is that you learn the skills you need so that you can solve your problems and manage your mood on your own. I pride myself on working efficiently and competently, and we will regularly look at our progress and goals to ensure that our work together is helpful and effective.

The Second & Subsequent Sessions

After the first session, we will tailor your sessions to speed your improvement. I will likely ask you to do specific exercises – for example, deep relaxation and guided imagery or communication exercises – or I may spend time explaining "homework" exercises that I would like you to do between sessions, in the privacy of your own home or out in the community. These may relate to changes in the way you think about and react to situations in your day-to-day life, how you think about your health, how you structure your day and spend your time, and so on. Sometimes we will "just talk", but always in a purposeful way. For example, I might encourage you and/or your family to explore how particular thoughts or beliefs are impacting on your life and relationships, and what other beliefs you can "practice" that would better support your health and happiness. Of course, I will always explain the rationale of any technique I use and you are free to decide whether you'd like to proceed, or try another strategy.

Most of my clients see me once a week, or once every two weeks, for a few months. After that, we may meet less often, ensuring that things are on track and that you're continuing to make good progress. My goal is to work as efficiently as possible, such that no more time, energy, and money are invested than need be. I am not a therapist that spends years probing early childhood experiences. Rather, I'm most interested in assisting you in the **here and now**, so that you can live your tomorrow with the skills and perspective to enjoy satisfying lives and relationships. You are absolutely free to stop therapy at any time, and I will be very happy to provide you with alternative resources and professionals to contact should this be your choice. As we work together, we will collaboratively decide when stopping therapy would be a good choice.

The Risks and Benefits of Therapy

As with any treatment, there are some risks as well as many benefits to therapy. Some clients will experience, for a time, uncomfortable levels of negative emotions. Clients may recall unpleasant memories. Sometimes major life decisions are made, including decisions that involve changed relationships or separation from significant others. Sometimes, too, a client's problem may temporarily worsen after the beginning of treatment. Most of these risks are well accepted by clients as they go about making important changes in their lives. Of course, I will be available to discuss any possible negative effects of our work together.

Overwhelmingly, my clients report positive changes in their lives and relationships. Clients feel more equipped to deal with life's challenges and live their lives fully and with greater meaning. Often there is a reduction in negative feelings, and a resolution to longstanding problems. In addition to the positive comments clients have shared with me about our work together, the type of therapy that I use has been shown to be effective in hundreds of well-designed research studies.

About Our Appointments

Cancelled Appointments

A cancelled appointment delays our work. I consider our meetings very important and ask that you do the same. Please try not to miss appointments whenever you can help it. When you must cancel, please try and give me at least a week's notice. If something comes up last minute, I ask that you give me 48 hours notice, NOT INCLUDING WEEKENDS. Except for unpredictable emergencies, you will be charged the regular fee for any missed sessions where you have not given 48 hours notice.

Fees, Payment, and Billings

For a 50-minute session, I follow the recommended fee schedule of the BC Psychological Association. Note that fees vary depending on the service provided. Please pay for each session at its beginning with a cheque or cash payment. My office will issue you a receipt for all payments made.

If you have partial or full coverage for our sessions through an insurance provider or other extended health provider, it is your responsibility to look into such benefits and seek reimbursement from your insurer. Regardless of third party coverage, my fee is expected to be paid at the beginning of each session.

If You Need to Contact Me

Because I work on a part-time basis, my days at the office are very full. If you have issues that you wish to discuss with me between our sessions, I would ask that you make an appointment to see me. If you are in crisis between sessions, you should call 911; see your family physician immediately; or go to the nearest emergency room at your local hospital.