



**Catholic Family Services of Durham**  
**Services à la famille catholiques de Durham**

Welcome to Catholic Family Services of Durham  
Walk-In Counselling Clinic

- The Intake Screener will meet with you to discuss what you are seeking help with today, set up your appointment, and negotiate the fee for your booked single session. Our fee schedule, ranging from \$5.00 to \$65.00 is based on two factors: family income and number of dependents. We will adjust your fees to fit your circumstances. No one is turned away due to an inability to pay.
- During a booked Single Session, a clinician will work with you to create a plan and identify possible next steps to begin desired change.
- A Single Session is about 1 hour long and will be completed by phone or by video at a time that is convenient for you and your counsellor. Your therapist will review with you the requirements and details of this mode of therapy during your screening call
- At the end, we ask that you take the time to complete a survey to let us know how you felt about the Single Session you attended. This anonymous information is used to report to our funders on how helpful the program has been to participants.
- If it is deemed to be appropriate by the counsellor, your name may be placed on the waiting list for individual, couple or family counselling until space becomes available.
- You may return to the walk in up to **once in a four week period** to receive another session. Please note that you may not see the same clinician in subsequent visits.

**Please note: We do not provide letters or reports for clients of the Walk-In Clinic.**



## Walk In Conditions of Service – SCREENING

- I have read and understood the “Welcome to Walk-In” leaflet.
- I have had the opportunity to ask questions, and those questions have been answered to my satisfaction.
- I understand that Walk-In sessions are meant to be a one-time meeting but I can make use of the walk in once during a 4 week period. Any plans for ongoing service will be discussed with the therapist in the single session.
- I understand the limits of confidentiality.
  - Exceptions may be made in life threatening situations or where child abuse or neglect is indicated. Agencies are also subject as a matter of law to a subpoena and so in some circumstances, a client record or a counsellor’s evidence may be required by a court of law.
- I understand my/our fee for the Walk-In Session today will be \_\_\_\_\_.
- I understand that CFSD does not provide court letters or reports for clients of the Walk-In Clinic. However, I will be provided with a single session note which can be used as evidence of my attendance here today.

***I/We understand and consent to the above counselling conditions.***

_____	_____	_____
Client Name	Signature	Date (month/day/year)

_____	_____	_____
Client Name	Signature	Date (month/day/year)

_____	_____	_____
Client Name	Signature	Date (month/day/year)

_____	_____	_____
Screeener/Clinician’s Name (include credentials)	Signature	Date (month/day/year)