



DBT THERAPY AGREEMENT

I, DBT THERAPIST _____ AGREE TO:

1. Provide you with therapy on a regularly scheduled basis, unless I am ill or on vacation.
2. Provide you with contact information for another therapist willing to see you while I am on vacation of more than two-week duration.
3. Get consultation on a regular basis.
4. Provide between-session, brief, telephone coaching, if you need it. Phone coaching typically occurs in a 5-10 minute timeframe. If your need exceeds one 15-20 minute coaching call per week, we will discuss and problem-solve. It may involve scheduling time for calls, for which there would be a charge; it may involve accessing outside resources.
5. Make every reasonable effort to conduct therapy as competently as possible.
6. Make my best effort to be helpful, to help you gain new insight, to learn new skills, and to teach you some of the behavioural tools you need to deal more effectively with your current situation.

I, CLIENT _____ UNDERSTAND:

1. My therapist will not provide telephone coaching for 24 hours after an episode of self-harm or when I engage in unhelpful target behaviours that I want to change. This is to avoid reinforcing these behaviours, and ultimately to help me achieve my goals.
2. My therapist commits to working with me, however there are certain circumstances in which they may unilaterally terminate therapy. These are:
 - a. If I miss 4 weeks of therapy in a row without prior agreement
 - b. If an unexpected mitigating condition occurs (such as moving out of town; disability or serious illness of therapist)
1. My therapist cannot save me, or solve my problems, or keep me from engaging in unhelpful behaviour. My therapist can show me the way, but they cannot walk the trail for me.
2. My therapist will conduct a behavioural chain analysis with me in the session following an unhelpful target behaviour.
3. My therapist is human and will make mistakes
4. I am able to terminate therapy when I wish, but agree to discuss this with the therapist first.
5. If I quit therapy, therapy will be terminated and not restarted.

I, CLIENT _____ AGREE TO:

1. Work on the targets of DBT which include:
 - a. Eliminating behaviours that are harmful to myself or others (e.g. intentional self-harm, attempts to die, aggression)

- b. Eliminating therapy interfering behaviours (e.g. not attending sessions, not disclosing information, not being honest about my experience of therapy)
 - c. Reducing quality of life interfering behaviours (e.g. substance use, risky sexual behaviour, employment-related problems)
 - d. Increase the skills taught in DBT, including Mindfulness, Distress Tolerance, Emotion Regulation and Interpersonal Effectiveness
1. Access other resources for coaching and support when my therapist is unavailable. This might include calling Mobile Crisis or certain trusted family members or friends.
 2. Not attend sessions under the influence of drugs or alcohol.
 3. Participate in a DBT Skills Group.

I have read the above information and/or it has been reviewed with me. I understand the limits confidentiality and the terms of receiving these mental health services. I accept them and consent to mental health services.

Client

Signature:

Client

Name:

Signature of Legal Guardian (if applicable):

Date:

e:
