

# **COMPASSIONATE INQUIRY CONSENT FORM**

“We all long to be seen, heard, understood, and loved. We heal when we feel safe in relationship, connected to our bodies, our breath, the present moment, and one another. Only when we experience the connection to ourselves and others, can we open up to our vulnerability and emotions, and discover and express what is true for us. This expression is what heals us.”

“The process of Compassionate Inquiry invites us to look at the stories we tell ourselves unconsciously, and how these stories direct our lives, affect our health, and generate suffering. Once we recognize the beliefs we have been carrying and where they originated, we can question their validity. Once questioned, we can open to the possibility of releasing them, and the hold they have on us. A new way of being emerges, leading to spontaneity, choice, expansion, and freedom.”

“Compassionate Inquiry evolved from Dr. Gabor Mate's personal journey and his experience of 20 years working with patients through family practice, palliative care, addiction, and trauma.” (Mate, 2021)

Jill Kelly, DiplAc, LAc is licensed as an acupuncturist in Tennessee, USA and is National Board Certified in Acupuncture by the NCCAOM. “NCCAOM Mandatory Core Competencies” which are the categories of competency to maintain national board certification in acupuncture and Oriental Medicine involve “Effective information exchange using active listening skills and verbal/non-verbal communication. 1. Professional communication with patients, families, caregivers, and other healthcare professionals. 2. Patient counseling & lifestyle intervention 3. Compassionate care for patients.” (NCCAOM ® Recertification Handbook, 2018) Jill has ~30 years experience in acupuncture and Oriental Medicine and over 40 years of natural health study. She completed the Compassionate Inquiry Professional Program (February 2021) and is currently completing the Compassionate Inquiry Mentorship Program. She is not a licensed psychologist or mental health professional.

**Service provided:** One on One Individual Compassionate Inquiry Session

**CONFIDENTIALITY** I understand that there are exceptions to legal confidentiality and professional ethics. These exceptions exist as they are legal obligations professionals must adhere to, according to the regulations of their professions. Exceptions include but are not limited to: 1) Files subpoenaed by a court of law; 2) Disclosed or suspected child abuse/neglect; 3) Perceived threats of violence/risk to oneself or to others (i.e. threats of suicide, threats to injure or harm others); 4) Report to the appropriate authorities in the event a Regulated Health Professional (i.e. social worker, psychologist, physician and surgeons, dentists etc.) of whom the therapist was told the name, behaved in a sexually inappropriate manner with the client.

I understand confidentiality is to be maintained at all times. Confidential means that no information, using people's names/identification, is shared outside the CI session. The technical definition of confidentiality in a therapeutic context is *"The ethical principle or legal right that a physician/therapist/psychologist/social worker/counsellor/intern/mentee or other health professional will hold secret all information relating to a client, unless the client gives consent permitting disclosure."*

Unless disclosure is requested or permitted by you or unless it is required by law, Jill Kelly shall keep all personal and identification and session information STRICTLY CONFIDENTIAL. That is, Jill Kelly will not disclose your name, identifiable information or details of the substance of your session unless a legal exception exists. For example, if Jill Kelly has reason to believe that you may be at imminent risk of harm to yourself and/or others, she is under legal and ethical obligation and only then Jill Kelly may disclose and discuss relevant details with third parties but only on a need to know basis.

I understand that sessions are held over Zoom which is a platform that is not a secure or encrypted site. Similar to using cell phones, email, and social media, privacy may be compromised which can lead to breaches of confidentiality, despite our best efforts to ensure confidentiality.

## **ACKNOWLEDGEMENTS**

I acknowledge that I am 18 years of age or older.

I acknowledge and agree that I voluntarily engage with Jill Kelly in Compassionate Inquiry.

I acknowledge and agree that during my session, Jill Kelly will rely on information provided by me and I affirm that all information provided to Jill Kelly is true and accurate to the best of my knowledge and belief.

I acknowledge that Compassionate Inquiry should never be used in place of professional counseling or medical care.

I acknowledge and agree that Compassionate Inquiry does not constitute legal, medical, business or financial advice.

I ACCEPT FULL RESPONSIBILITY FOR ANY ACTIONS AND/OR INTERPRETATIONS MADE BY ME OR DECISIONS I CHOOSE TO TAKE OR MAKE BASED ON MY INDIVIDUAL SESSION.

I AGREE TO HOLD JILL KELLY COMPLETELY HARMLESS AND I FOREVER RELEASE AND FULLY DISCHARGE JILL KELLY OF AND FROM ANY AND ALL CLAIMS, DEMANDS, CAUSES OF ACTION AND RIGHTS, WHETHER KNOWN OR UNKNOWN, RELATING IN ANY WAY TO MY DEALINGS WITH JILL KELLY.

By booking Compassionate Inquiry with Jill Kelly, I am representing that I have carefully read and reviewed this DISCLAIMER AND ACKNOWLEDGEMENT IN FULL; that I fully understand it and that I freely and voluntarily accept the risks and limitations involved in voluntarily seeking Compassionate Inquiry services provided by Jill Kelly.

I have asked any of the questions I have at this time. I understand and consent to all of the above conditions and I hereby consent to participate in CI session(s) with Jill Kelly.

I verify that entering my name below is in lieu of me signing this document when done electronically.

I understand, accept, comprehend and provide consent for the information provided in this document.

**I have read and agree to the terms above (date and client signature required)**

**PRINT NAME** \_\_\_\_\_

**SIGNATURE** \_\_\_\_\_

**DATE** \_\_\_\_\_

Mate, Dr.G. (2021). *Compassionate Inquiry*. [email].

NCCAOM ® Recertification Handbook Recertification Handbook. (2018). [online] . Available at: <https://www.nccaom.org/wp-content/uploads/pdf/NCCAOM%20Recertification%20Handbook%20918.pdf> [Accessed 20 Feb. 2021].