

 Dr. Marcia Kostenuik, MD CCFP BSc

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**Coaching Agreement**

Thank you for the opportunity to work with you. The following information will help outline expectations of the coaching-client relationship and your experience. I look forward to helping you with your goals.

**Role & Expectations: Coach**

-help establish your personal goals

-be an active listener, ask important questions, give honest feedback

-share strategies and approaches that apply to your circumstances

-encourage positive changes

-help you build skills and knowledge

-assist by noticing progress towards goals, reinforcing positive changes and assisting with areas of ongoing challenge

**Role & Expectations: Client**

-commit to setting goals and following through with action plans

-take responsibility and accountability for your progress and your accomplishments

-be open to working through challenging areas that help you reach your goals

-honesty about progress, willingness to work with some challenges

**Coach-Client relationship:**

-open, honest, good communication

-feedback is welcome and given in a spirit of kindness and growth

-a professional relationship that does not extend beyond professional boundaries

-respect start and stop times for appointment

**Communication Consent**

Re: use of email/text/phone: do not use for crisis or personal information; I cannot guarantee response time, may be used to receive appointment reminders or appointment information, may be used to cancel an appointment, may be used to share articles/resources; ensure you keep your devices private and password protected, any content can become part of your record

-your privacy and confidentiality cannot be guaranteed using electronic messaging, text, email, phone, Zoom; these are to be used at your discretion; do not send/share sensitive personal information

-fax or encrypted/password protected email may be a more secure way to send personal information

**Payment**

Payment is required in advance or at the time of the appointment by e-transfer.

**Cancellations**

Please give 24 hrs notice for cancellations or you may be charged for the missed appointment.

**Confidentiality and Informed Consent**

Your information and records are private however there are some exceptions to privacy when required by a court of law. For example, I am obligated to report confidential information to the appropriate agencies in the case of a court subpoena and in these situations:

1. If I have information that indicates that a child, elderly or disabled person is being abused or neglected.
2. If a client is at imminent risk to him/herself or makes threats of imminent violence against another person.

There may be other instances where there is a legal duty to release information and if this occurs, I will do my best to communicate in advance any necessary and legally obligated protective action that is needed.

**Coaching vs. Psychotherapy**

Coaching is a relationship between the professional coach and the client and is focused on the client taking action towards their vision and goals. Coaching uses a process of inquiry and personal discovery to build the client’s awareness and to help them take responsibility in constructive ways while providing the client with structure, support, and honest feedback. The coaching process involves helping generally well-functioning people create and achieve goals, maximize personal development, and navigate transitions in their career, family life, and personal life. (1)

Coaching does not provide diagnosis or treatment of medical or psychiatric disease and is not psychotherapy. The key difference between psychotherapy and coaching is that psychotherapy focuses on resolving illness or trauma, whereas coaching focuses on enhancing achievement and fulfillment in a generally well0functioning person (1). If you require psychotherapy please seek appropriate support, you may talk to your family physician for referrals or for local/available resources. If you are currently receiving psychotherapy (or are planning to) it is part of this agreement that you will inform me as soon as possible.

**Dr. Marcia Kostenuik**

As a physician, medical psychotherapist, teacher, educator, and physician peer supporter I have extensive experience in helping physicians with concerns related to work, family life, parenting, relationships, and personal goals. Over the past 20+ years I have read extensively and attended training in the areas of psychology, communication, interpersonal skills, organization skills, success psychology, personal coaching, parenting, relationships, and personal growth. In my role as physician, as well as member of the Institute of Coaching (McLean, Affiliate of Harvard Medical School). I am committed to lifelong learning and personal growth with the goal of helping others along their journeys.

**Agreement**

In registering for a personal coaching session(s) you are agreeing to the following:

1. I agree to all terms and conditions above.
2. Any decisions I make about handling my personal, work, and relationship issues and life decisions are exclusively my responsibility.
3. I understand that personal coaching is not a health service, is not psychotherapy, and does not involve diagnosis or treatment.
4. If I am in therapy or under the care of a mental health professional I promise that I have consulted them about working with a coach and they are aware of my decision to proceed.

By proceeding with your visit you are acknowledging that you have read the information in this agreement and you agree to abide by its terms and conditions.

I appreciate the opportunity to work with you,

-Marcia Kostenuik MD FCFP BSc

I/have read this document in its entirety (3 pages) and agree to all of the above.

Name:

Signature - type your name here to acknowledge agreement:

Date:

Sincerely,

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Dr. Marcia Kostenuik

Reference

1. Auerbach, Jeffery E., Personal and Executive Coaching: The Complete Guide for Mental Health Professionals, Executive College Press 2001