

**PERMISSION TO RECORD & OBSERVE THERAPY SESSIONS**

Overview:

To enhance and enrich the provision of Emotionally Focused Therapy (EFT), ICEEFT Certified therapists watch or hear therapy sessions by video or audio recording. This allows for therapist self-supervision and advanced clinical consult by an ICEEFT clinical supervisor if needed. In order for a supervisor to observe or hear a recorded session, your clients must give their written consent.

I understand:

1. That one of the purposes of allowing observation or listening of my therapy sessions is to enhance the effectiveness of the EFT therapy I am receiving from my therapist.
2. That my therapist owns the video/audiotapes and video/audiotapes are not part of my medical record.
3. Videos are completely destroyed at regular intervals.
4. That I may withdraw this consent at any time for any reason without any questions asked.
5. That any ICEEFT Approved Supervisor who provides clinical consult and observes or hears my therapy sessions is held to the same confidentiality standards as my therapist.
6. That if by chance any supervisor knows me socially, he/she will immediately stop the recording and will not observe, seek, or be given any information about my therapy.
7. If videos are used with a supervisor out-of-state, I consent for videos to be conveyed via encrypted electronic methods which are HIPPA compliant without any identifying attached. I understand that these videos are destroyed after the consultation and not maintained as part of my record.

Consent:

By signing below, I give my consent to allow my therapy sessions with **Rebecca E. Clark, LMFT** to be observed via video or heard via audiotape by supervisors. This consent is valid unless revoked by clients.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

  
\_\_\_\_\_  
Therapist Signature

\_\_\_\_\_  
Date