

## **Working Together: Your Rights and My Policies**

### What To Expect

The purpose of meeting with a therapist is to get help with problems that are bothering you or that are keeping you from being successful in important areas of your life. You may be here because you wanted to talk to a therapist about these problems. Or, you may be here because your parent, guardian, doctor or teacher had concerns about you. When we meet, we will discuss these problems. I will ask questions, listen to you and suggest a plan for improving these problems. It is important that you feel comfortable talking to me about the issues that are bothering you. Sometimes these issues will include things you don't want your parents or guardians to know about. For most people, knowing that what they say will be kept private helps them feel more comfortable and have more trust in their counselor or therapist. Privacy, also called "confidentiality", is an important and necessary part of good therapy.

As a general rule, I will keep the information you share with me in our sessions confidential, unless I have your written consent to disclose certain information. There are, however, important exceptions to this rule that are important for you to understand before you share personal information with me in a therapy session. In some situations, I am required by law or by the guidelines of my profession to disclose information whether or not I have your permission. Here are some of those situations.

### **Confidentiality cannot be maintained when:**

- You tell me you plan to cause serious harm or death to yourself, and I believe you have the intent and ability to carry out this threat in the very near future. I must take steps to inform a parent or guardian of what you have told me and how serious I believe this threat to be. I must make sure that you are protected from harming yourself.
- You tell me you plan to cause serious harm or death to someone else who can be identified, and I believe you have the intent and ability to carry out this threat in the very near future. In this situation, I must inform your parent or guardian, and I must inform the person who you intend to harm.
- You are doing things that could cause serious harm to you or someone else, even if you do not intend to harm yourself or another person. In these situations, I will need to use my professional judgment to decide whether a parent or guardian should be informed.

### **Confidentiality cannot be maintained when: (cont'd):**

- You tell me you are being abused--physically, sexually or emotionally--or that you have been abused in the past. In this situation, I am required by law to report the abuse to the Department of Child and Family Services.
- You are involved in a court case and a request is made for information about your counseling or therapy. If this happens, I will not disclose information without your written agreement unless the court requires me to. I will do all I can within the law to protect your confidentiality, and if I am required to disclose information to the court, I will inform you that this is happening.

If you have any questions about this or any other policy, please let me know so we can discuss any concerns you have.

### Communicating with your parent(s) or guardian(s):

Except for situation such as those mentioned above, I will not tell your parent or guardian specific things you share with me in our private therapy sessions. This includes activities and behavior that your parent/guardian would not approve of or would be upset by *but do not put you at risk of serious and immediate harm*. However, if your risk-taking behavior becomes more serious, then I will need to use my professional judgment to decide whether you are in serious and immediate danger of being harmed. If I feel that you are in such danger, I will communicate this information to your parent or guardian.

**Example:** If you tell me that you have tried alcohol at a few parties, I would keep this information confidential. If you tell me that you are drinking and driving or that you are a passenger in a car with a driver who is drunk, I would not keep this information confidential from your parent/guardian. If you tell me, or if I believe based on things you've told me, that you are addicted to alcohol, I would not keep this information confidential.

**Example:** If you tell me that you are having protected sex with a boyfriend or girlfriend, I would keep this information confidential. If you tell me that, on several occasions, you have engaged in unprotected sex with people you do not know or in unsafe situations, I will not keep this information confidential. You can always ask me questions about the types of information I would disclose. One way to do this is in the form of a "hypothetical discussion", in other words: "If someone told you that they were doing \_\_\_\_\_, would you tell their parents?"

Even if I have agreed to keep information confidential--to not tell your parent or guardian--I may believe that it is important for them to know what is going on in your life. In these situations, I will encourage you to tell your parent/guardian and will help you find the best way to tell them. Also,

when meeting with your parents, I may sometimes describe problems in general terms, without using specifics, in order to help them know how to be more helpful to you.

You should also know that I maintain a clinical chart for all my patients and this is kept in a locked cabinet, or on my password protected computer. This chart can include a description of your condition, your diagnosis, treatment goals, treatment plan and progress in treatment. If your therapy is being paid for by insurance, the company may request to see this information. I also keep informal notes during our sessions, which are confidential and cannot be shared with anyone without your written consent, unless I am required to do so by a judge.

### **Communicating with other adults:**

School: I will not share any information with your school unless I have your permission and permission from your parent or guardian. Sometimes I may request to speak to someone at your school to find out how things are going for you. Also, it may be helpful in some situations for me to give suggestions to your teacher or school counselor. If I want to contact your school, or if someone at your school wants to contact me, I will discuss it with you and ask for your written permission. A very unlikely situation might come up in which I do not have your permission, but both I and your parent or guardian believe that is very important for me to be able to share certain information with someone at your school. In this situation, I will use my professional judgment to decide whether to share any information.

Doctors: Sometimes your doctor and I may need to work together; for example, if you need to take medication in addition to seeing a counselor therapist. I will get your written permission and permission from your parent/guardian in advance to share information with your doctor. The only time I will share information with your doctor, even if I don't have your permission, is if you are doing something that puts you at risk for serious and immediate physical/medical harm.

### **Electronic Communications**

Email communications are not secure. I will use email to communicate with you regarding non-confidential matters, such as office directions and appointment confirmations. Because it is not a secure mode, I do not communicate nor will I respond to confidential information communicated by email. I discourage you from emailing me anything you would not want to be seen by the public.

### **Communicating with you:**

There will be times when I need to communicate with you by telephone, mail, or by other means. Please indicate your preference by checking one of the choices below. *Please be sure to inform me if you **do not wish** to be contacted at particular time or place, or by a particular means.*

Please check all that apply. You are giving me permission to:

\_\_\_\_\_ Call me at home and leave me a message. My home number is \_\_\_\_\_

\_\_\_\_\_ Call me on my cell phone and leave a message. My cell phone number is \_\_\_\_\_

\_\_\_\_\_ Text me on my cell phone. My text number is \_\_\_\_\_

\_\_\_\_\_ Communicate with me by email. My email address is \_\_\_\_\_

**Fees and Cancellations**

Your parent or guardian is responsible for all therapy fees, unless separate arrangements have been made with me. Fees or copays are paid at the time of the session and you are expected to bring the fee with you or make sure your parent has provided it to me. Except in cases of sudden illness or family emergency, your parent or guardian will be charged for any appointments cancelled without 24-hour notice. *It is your responsibility to give me 24 hour notice of any cancellations.*

**In an emergency:**

Dial 911, contact the nearest emergency room or the Marin County Crisis Unit at 415-473-6666. You may try to reach me on my voicemail, but in case I am not immediately available, please use these contact numbers.

**Endings**

You may end therapy at any time. A final phone call or session is requested with you and your parent/guardian for closure. If you miss a session or discontinue treatment for 4 weeks or more and I do not hear from you or your parent/guardian, I will assume that both you and your parent/guardian have decided to end your treatment and I will close your case. If, at any time, you decide to return, I will be happy to discuss that option with you.

By signing this you are assuring me that you have read and understand this entire agreement for services. Please ask me any questions or discuss any concerns you have before you sign.

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<b>Signature</b>	<b>Printed Name</b>	<b>Date</b>
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<b>Signature of Parent</b>	<b>Printed Name</b>	<b>Date</b>
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<b>Signature of Parent</b>	<b>Printed Name</b>	<b>Date</b>
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