## Informed Consent, Confidentiality & Records

Signing this document gives your consent to receive psychotherapy services. Additionally, it acknowledges your understanding of privacy policies. Your communications with your therapist will become part of a clinical record of treatment, and it is referred to as Protected Health Information (PHI). Your therapist will always keep everything you say in counseling completely confidential, with the following exceptions:

- 1. You direct your therapist to speak with someone specifically and you sign a "Release of Information" form;
- 2. Any threats to harm yourself, another person, or inability to care for yourself, requires the therapist to inform legal authorities;
- 3. Suspected physical, mental, or sexual abuse or neglect of a child, elderly person or disabled person will be reported to Social Services;
- 4. When your insurance company is involved (i.e., in filing a claim, insurance audits, case review or appeals, etc.);
- 5. Your therapist is ordered by a court to disclose information. Your therapist's license does provide the ability to uphold what is legally termed "privileged communication." <u>Privileged communication</u> is your right as a client to have a confidential relationship with a counselor. If for some unusual reason a judge were to order the disclosure of your private information, you may appeal this order. I cannot guarantee that your appeal will be sustained, but I will do everything in my power to keep what you say confidential.
- 6. Your file will be culled 10 years after your last session. If you wish to have your file sent to another therapist at that time, you must advise Dr. Kirschner/Life Mastery Center in writing and include the name and contact information for the new therapist.
- 7. In the event that it is found that you have connected with Dr. Kirschner/Life Mastery Center on any social media, Dr. Kirschner is legally obligated to delete (unfriend) that connection.

Please note that in couple's or family counseling, your therapist does not agree to keep secrets. Information revealed in any context may be discussed with either partner or within family counseling. Counseling cases may be discussed with other professionals involved in the client's treatment and/or discussed in supervision sessions with other counselors. If you have any questions about confidentiality, please ask.

## Complaints

You may submit a complaint to me or to the Secretary of Health and Human Services if you believe I have violated your privacy rights. You may also file a complaint with the Maryland Board of Social Work Examiners.

Signature of Client (Guardian)

Date