
CONFIDENTIALITY: How it Works

INFORMED CONSENT

Your expectations of confidentiality are a critical part of how Counseling can be helpful. Therefore, it is important for you to fully understand what level of privacy to expect and also what the legal limitations are.

In AL, from the age of 14 and up you are entitled to access medical/mental health treatment at your will and without the notification or consent of any parent, guardian or custodian. Age 14 & up, it is your choice to Request or Consent to Release any Information about your treatment. You can limit what is released and you can revoke your consent at any time. For multiple participants, ie Family or Couple's Counseling, all participants must be in agreement or I can only release a summary that is specific to the requestor only! Any communications must be available to all participants; this means I will not be the keeper of secrets.

Your privacy is important to me. I will refer to you by your first name. I will not acknowledge you in public unless you initiate this. The outer office remains locked. My office door is locked and your files are kept in my locked cabinet. If I must transport files they will be in a locked briefcase and locked car. After services are ended, your files are kept locked for 7-10 years for adults & kids respectively. Technology I use, like my computer and work cell phone are password protected. My computer is encrypted. Even so, privacy cannot be guaranteed. No audio or video recording devices will be allowed or used at any time, by any participant, unless there has been written permission by all participants, in advance. If you see any potential for privacy leaks please make me aware so I can do my best to resolve these immediately.

If your treatment causes me to seek professional consultation, I will use every precaution so as to not give any identifying information. If I am incapacitated my confidential Records' Custodian and Emergency Clinical Coordinator designee is Angel Jernigan, LPC 205-538-4710. Be sure to have this information for your future reference.

It is critical that you understand the circumstances in which, BY LAW, I AM REQUIRED TO REPORT limited information that you disclose to me.

1. If there is suspicion of ABUSE of vulnerable persons such as children, the elderly (60yo +), the disabled... I must notify The Department of Human Resources (DHR) or the Police.

Rhonna W. Phillips
Counseling & Therapy Services, LLC

2. If you are in clear danger & imminent risk of committing **SUICIDE** or seriously harming yourself.

3. If you are in clear danger & imminent risk of **seriously harming or KILLING** another person. I have a **DUTY TO WARN**. For both #2 and #3 the Police and/or Emergency Medical Services (EMS) would be notified, unless you agree to have your designee transport you **immediately & voluntarily to the Hospital for Psychiatric** assessment. If you have a **communicable DISEASE** that can be fatal, and you intend to put a person at this risk, I have a duty to report it to the local Health Authorities & to warn the person at risk of harm. AL Health Depts. have anonymous partner notification programs.

4. **If a Judge orders me, or in situations like** mental health hospitalizations, court ordered assessments, any civil, criminal, or disciplinary **DEFENSE** of ME that involves your mental or emotional condition, or if a victim of sexual assault or family violence died, I may have no choice; **I must provide the records or testimony ordered**. Clients being treated with Substance Abuse disorders have special protections of those records, **EXCEPT** if they commit a crime on the premises (and it is a federally funded program like TASK or Beacon Addiction Ctr.)

Client's Emergency contact is:

_____ Hm: _____ C: _____

Client acknowledges as understood

Date

Rhonna W. Phillips, MA
Licensed Professional Counselor & Supervisor
Licensed Marriage and Family Therapist
Collaborative Practitioner
Qualified Family & Domestic Relations Mediator

Rev. 1-2018