

**INFORMED CONSENT FOR COUNSELING**

Please read this consent form carefully, as it describes the policies and procedures followed by Tracy E. Hill, Ph.D. & Associates LLC (hereinafter “Center Street Center”) and those of the laws and professional regulations of the Commonwealth of Pennsylvania, the Board of National Certified Counselors, the American Psychological Association and the American Counseling Association.

**WHAT YOU CAN EXPECT FROM COUNSELING SERVICES & TREATMENT:**

The duration of treatment is different for each person. Typical treatment is six to eight sessions. If you are uncomfortable with your treatment for any reason, you are asked to discuss this directly with your clinician or the Director. We will work with you to uncover what might be preventing progress, will modify goals with you if appropriate, and will make any necessary referrals for you for other professional services if necessary or at your request. Oftentimes, people find that they have a temporary increase in their level of distress when starting therapy because the process of working on personal issues can be difficult.

At any time, you may initiate a discussion with your clinician or the Director a discussion of possible positive or negative effects of entering, not entering, continuing or discontinuing counseling services. Although we expect you to benefit from counseling, we cannot guarantee any specific results. Counseling is a personal exploration using a combination of art and science and may lead to major changes in your life perspectives or decisions. These changes may affect significant relationships, your job, and/or your understanding of yourself amongst other notable changes you may see or feel. You may feel distressed, usually only temporary, by some of the things you learn about yourself or some of the changes you make. Counseling is difficult work for the client and a lot of emotional energy is spent during each session. You may be quite tired after a session and should plan on feeling emotionally and/or physically exhausted. Taking self-care measures such as rest, hydration and reflection among other self-care measures that you employ individually is a good idea after each session.

**ELIGIBILITY FOR COUNSELING SERVICES:**

Clients interested in receiving counseling services must be at least 14 years old in Pennsylvania without needing parental consent. Clients under the ages specified above need parental consent to engage in any counseling services, assessments etc. By entering into counseling, you acknowledge that a) you are doing so voluntarily (unless court mandated), b) you understand the information being presented to you, and c) it has been determined by the Director or a clinician at Center Street Center that you have the ability and mental capacity to engage in counseling and make informed decisions for yourself.

**SCOPE OF PRACTICE:**

Center Street Center follows local and regional laws and codes of ethics as applicable to Pennsylvania. The scope of our clinical practice includes:

- Assessment, testing and evaluation
- Individual, family and group counseling and psychotherapy
- Diagnosis and treatment planning for mental health and emotional disorders
- Prevention, behavior modification, and guidance to individuals and families
- Lectures, workshops and seminars for local organizations and companies

**NATURE OF COUNSELING:**

When people come to counseling, it is because they want something to be different in their lives. They may want to change their life situation, solve a particular problem, make a difficult decision, or understand what is happening in their lives, themselves or to those around them. As a first step in counseling, we will explore your feelings and concerns, decisions you want to make, or changes you may want. We will then guide you in your exploration, decisions and changes. For counseling to be most effective, you must make a

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commitment of time and energy and take active part in the counseling process; this may involve activities or homework between sessions, taking assessments during sessions, or practicing new behaviors and/or ideologies during and after sessions.

Counseling provides the opportunity for growth and self-discovery in the context of a safe, supportive, unbiased and nonjudgmental therapeutic relationship. We use a multi modal approach to counseling depending on the individual(s) we are working with. Each person is unique to how they view themselves or others. What may work for you, may not be appropriate for another. We tailor our counseling practices to each unique person using Trauma Focused Counseling, Cognitive Behavioral Counseling, Person Centered Counseling, Gestalt Therapy, and other counseling theories and practices as they may work best with you.

Please understand that there are no guarantees of what you will experience and what your outcomes may be. You agree that you understand the possible advantages and disadvantages of counseling and shall not hold Center Street Center or their clinicians accountable for any negative effects of counseling you may experience.

**DUAL RELATIONSHIPS:**

Although our sessions may be very intimate psychologically, ours is a professional relationship with important boundaries. Sexual involvement between a clinician and client is never part of the therapeutic process nor are any other actions or dual relationship situations that might impair our objectivity, clinical judgment or therapeutic effectiveness or that could be exploitative in nature. In addition, on the occasion that we see a client outside of the office (when we may accidentally run into each other in public), we are highly discreet and will maintain your confidentiality. We will do our best to follow your lead and it is your decision to acknowledge us during the encounter (or not). Even with your acknowledgment, we will preserve the integrity of our working relationship. For this reason, we will not accept any invitations via social networking sites nor will we respond to blogs, posts or comments written by clients or accept comments on our social networking sites from clients in which their identity is identified without their request to do so.

**AGREEMENT:**

This Informed Consent for Counseling shall be interpreted only in accordance with the laws of the Commonwealth of Pennsylvania and any legal proceeding associated with this Agreement will occur exclusively in the courts located in that state.

**PRIVACY POLICY:**

According to mental health licensing statutes, the law protects the privacy of all communications between a client and practitioner. Center Street Center follows the requirements of HIPPA.

Confidentiality is taken seriously and discussing or releasing your information to any individual, agency or corporation except if such release is requested by a signed authorization form or if a client indicates intent to do harm to her/himself or others.

**CONFIDENTIALITY POLICY:**

Therapy is best experienced in an atmosphere of trust. For that reason, all therapy sessions are strictly confidential and may not be revealed to anyone without your written permission. There are exceptions to confidentiality where disclosure is required by law. Additionally, there may be times that we need to consult with an adjunct colleague in order to discuss aspects of our sessions to support our therapeutic work together and best support your process. In addition, as a teaching faculty member at several post-secondary

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Client Signature

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Date

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institutions, we may discuss your case from a teaching perspective. When doing so, please understand that we will never use your name and will change significant identifying details in order to protect your confidentiality. According to mental health licensing statutes, the law protects the privacy of all communications between a client and practitioner. Center Street Center's practice follows the requirements of HIPPA. Confidentiality is taken seriously and discussing or releasing your information to any individual, agency, or corporation except if such release is requested by a signed authorization form; or if a client indicates intent to do harm to her/himself or others.

**LIMITS OF CONFIDENTIALITY:**

What you discuss with the clinicians and/or interns at Center Street Center is kept confidential with some exceptions. The Notice of Privacy Practices provides detailed information about how private information about your health care is protected and under what circumstances it may be shared. Confidentiality of email, texting and cell phone communication is not protected and should be limited to scheduling appointments, canceling appointments and the like.

We make every effort to keep all information confidential. We encourage you to communicate through a computer that you know is safe and wherein you can be assured of your confidentiality from others. If you are communicating with our office via electronic communication (email, fax, text, etc.) from your place of employment, it is considered an unsecure form of communication. Please see our Electronic Communication Agreement & Authorization Form.

We will protect the confidentiality of information received in our counseling relationship as specified by federal and state laws, written policies and ethical standards. Discussions between us and even the fact that you are in counseling, are kept confidential. For this reason, if we see you in public, we will protect your confidentiality by greeting you only if you greet us first.

**LEGAL EXCEPTIONS TO CONFIDENTIALITY:**

What you discuss during your session is kept confidential. Legal exceptions to confidentiality are in place to protect your safety and the safety of others. The following are exceptions to confidentiality:

**Duty to Warn and Protect:** If you disclose a plan or threat to harm yourself or disclose a reasonable level of imminent risk to self or others, the clinician must attempt to notify your family and notify legal authorities and/or have you evaluated in a hospital. Additionally, if you disclose a plan to threaten or harm another person, the clinician is required to warn the possible victim and notify legal authorities.

**Abuse of Children and Vulnerable Adults:** If you disclose, or it is suspected that there is abuse or harmful neglect of children or vulnerable adults (i.e., elderly, disabled/incompetent, etc.), the clinician must report this information to the appropriate state agency and/or legal authorities.

**Prenatal Exposure to Controlled Substances:** Clinicians must report any admitted prenatal exposure to controlled substances that could be harmful to the mother or the child.

**Minors/Guardianship:** Parents or legal guardians of non-emancipated minor clients have the right to access the clients' records.

**Insurance Providers:** Insurance companies and other third-party payers are given information that they request regarding services to the clients.

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We are legally mandated as reporters of abuse or intent to harm others. If you are homicidal and make a serious threat to hurt another person or persons or we have reason to believe that you are at imminent risk to self or others, we will contact 911 and make every attempt to notify the intended victim or victims. Additionally, if we are court ordered or subpoenaed to release records, we must abide by the court order and we may be compelled by the court to testify and must answer all questions honestly.

**SUICIDE POLICY:**

If you are suicidal, or we deem after conducting a suicide risk assessment, that you may harm yourself or are in imminent danger to yourself, we will take all reasonable steps to prevent such harm to yourself. This may include breaking confidentiality, calling 911 or other reasonable means to prevent self-harm.

**COUNSELING WITH MINORS:**

Parents and guardians have a right to information about their child's treatment. However, for counseling to be most helpful, minors need to know that they can talk freely and privately. For this reason, we keep specific discussions shared by the child in confidence. If, however, we feel that the child's safety is in jeopardy or if the child expresses intent to harm self or others or demonstrates imminent danger to self or others, we will notify the parent/guardian as immediate as possible. Maintaining confidentiality, especially as it pertains to illicit drug use or consensual sexual activity is *not* considered an immediate harm to self or others. Therefore, you (parent/guardian) will not be informed should this confidential information be disclosed by your son/daughter. We *will* do everything in the counseling process to encourage your son/daughter to share this information with you of their own free will, but we cannot guarantee it. A parent or guardian who has legal authority must be the one to consent to the minor's treatment. Please note that Pennsylvania law states that minors 14 years or older are able to consent to treatment for him/

**FULL CLIENT DISCLOSURE & RIGHT TO REFUSE COUNSELING SERVICES:**

If you have any history of major psychiatric episodes, hospitalizations or drug/alcohol dependence or have been diagnosed as any of the following – Major Depressive Disorder, Bipolar Disorder, Mentally Ill/Chemically Addicted (MICA), and/or Schizophrenia – you **must** disclose this information to the clinician at Center Street Center.

Failure to disclose or knowingly misleading or withholding the above said information excludes Center Street Center and clinicians from any legal obligation or liability related to said client's diagnosis, prognosis, outcome and/or actions.

If it is deemed at any point in the treatment that your needs are greater than the Director or clinicians at Center Street Center's area of expertise or scope of practice, Center Street Center reserves the right to refuse and/or end treatment and appropriate referral sources will be provided.

**PAYMENT FOR SERVICES:**

Payments (co-pays, fees for service, etc.) for services must be made prior to the time of each session. You may make your payment via check, cash or credit/debit (3% additional surcharge). Current Fees and Services are listed on our website at <https://www.centerstreetcenter.com>. Please see our Financial Policy for more detailed information.

**Missed Payments:** It is reasonable that you may miss or forget a payment on occasion. However, if frequent late payments or missed payments become an issue and you have missed more than two consecutively, your sessions will be put on hold and you will lose your scheduled time until your account is brought up to date. We reserve the right to use a collection agency and provide your information to collect unpaid invoices if necessary.

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Client Signature

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**CANCELLATION POLICY:**

You must provide 48 hours advanced notice for cancellation in order to prevent a Cancellation Fee. You can cancel via email (appts@centerstreetcenter.com) or call (484-896-9161). We understand that occasionally circumstances beyond your control may arise which would prevent you from keeping your appointment. If we are unable to attend your session due to an emergency or illness, every attempt will be made to contact you 24 hours in advance on the phone numbers and/or email you have provided. Please read our 48 Hour Cancellation Policy.

**On Going Cancellations or Multiple No Shows:** It is understandable that occasionally an appointment will be cancelled or missed due to illness or emergency. However, your regular session day/time has been reserved for you. Our client schedule does not allow for a great deal of flexibility with respect to continual cancellations, rescheduled appointments or no shows. If you find that your schedule is no longer able to accommodate the session time reserved for you or you would like to terminate counseling sessions, please discuss this with your clinician or the Director and we will do our best to either find an alternative time slot or refer you to another mental health professional. You are responsible for keeping track and attending your sessions.

**FRIENDS, FAMILY, CO WORKERS REFERRALS POLICY:**

The greatest compliment a counselor can receive are referrals from current or former clients. There are times when clients wish to introduce one of us as their counselor so they can recommend Center Street Center as a referral, which is ethical and acceptable. Please understand that your confidentiality is extremely important to us. If another client that we see referred you to us, or if you refer a friend, coworker or family member to us, legally and ethically, we are not able to discuss your counseling or participation in counseling with any other person unless as directed by you except as noted above (Legal Exceptions to Confidentiality).

**INFORMED CONSENT FOR COUNSELING AGREEMENT:**

I have read the above Informed Consent Counseling, understand and agree to all the terms above:

Client Signature	Date

Client Name PRINTED	Date

Client Signature	Date

Client Name PRINTED	Date

Client Signature	Date