



Professional Disclosure Statements and General Counselor Policies

(Last Updated: 6/2022)

This document contains general information about my practice and approach to therapy; as well as specific policies that are maintained for the benefit of the client and counselor. Please read carefully and jot down any questions you may have for me when we meet.

Confidentiality: Is Therapy confidential? Are there limitations?

Counseling sessions are confidential. Any release of information regarding these sessions will require client's/guardian's written permission. **There are some limits to confidentiality** that require clinicians to release information without client/guardian consent. These are as follows:

1. If a client reveal that they intend to harm themselves or someone else, therapists have a legal and ethical duty to warn someone of this possibility. This may involve notifying a family member or significant support person to both protect the client and to involve the support person in making a plan to prevent harm coming to the client or others. When potential harm to someone else is involved, this "duty to warn" may require that legal authorities and/or the intended victim be notified.
2. If the client reveals information about child abuse or neglect of someone who is currently a minor by their parent or caretaker, I understand this information must be reported to the Department of Social Services. Therapists are Mandated Reporters, meaning they are legally and ethically required to report information they have been given that informs or makes them suspect child abuse or neglect.
3. If it is determined that a client is gravely disabled, the therapist may need to seek proper assistance for the client without the client's consent. This goes back to prevention of harm or protection of client safety.
4. Therapist(s) and their client records can be subpoenaed to either Family or Criminal Court. Further information about this is found in the HIPAA policy statement. Please note: It is not the policy of this office to provide recommendations or record documentation to support disability claims.
5. Should a client commit a crime against this practice or anyone who works here, therapists have a right to report it to law enforcement.
6. Should a client have a medical emergency, the therapist or their staff may call medical personnel to assist the client.
7. Should a client claim malpractice or breach of ethics, the relevant medical records may be reviewed by those involved in the investigation or court case.

I understand that if any involuntary release of information is necessary, my therapist will discuss it with me at the time or in advance -- unless doing so would be contrary to their clinical judgment. I also understand that in couple, parent-child, or family therapy, secrets about important information may interfere with therapy, and the therapist may encourage the client to share critical information with those who should know. I understand that in certain instances, it may be difficult for therapy to continue if the client chooses not to reveal important information.

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Client Crisis Policy: What should I do if I'm in crisis?

Call 911. I am an outpatient therapist working on a part-time basis, I am not available to assist in crisis-intervention at all times.

- If you are in crisis, please call 911 or go to the nearest Hospital Emergency Room.
- If you need police, request a Crisis Intervention Team (or CIT) officer.
- If you or someone you know is at risk or contemplating suicide, you can call the National Suicide Prevention Lifeline at 1-800-273-TALK (8255) or any of the following:
 - Crisis Text Line: Text HOME to 741741
 - Trevor Project (for LGBTQ+): Call 1-866-488-7386 or text START to 678-678.
 - Veterans Crisis Line: 1-800-273-TALK and Press 1. Text 838255.

Mutual Therapy Expectations: What expectations are there for me in therapy?

1. **Be on time (or let me know if you're running late).** I make it a point for sessions to generally start on time. If you're running late, please let me know (*and if I'm running late, I will let you know*) as soon as you can. Session time missed will be deducted from the original scheduled minutes without a reduction in fees. I will still be available and willing to see me for any time that remains for my appointment, but cannot guarantee that I will still be available if a client is more than 15 minutes late and has not reached out to me or responded to my attempts to reach them.
2. **Ask questions about your treatment.** As a consumer of services, you have the right to choose a therapist with whom you feel comfortable and to ask questions regarding the services you are receiving. As a therapist, I encourage you to share any questions and concerns you have about your treatment. Entering into therapy may lead to significant changes in your life. These changes may be related to: people will often modify their emotions, attitudes, beliefs and behaviors, they may make changes in their relationships or other significant aspects of their lives, they might change employment, begin to feel differently and alter other significant aspects of their lives. Please understand that participation in counseling is voluntary and that you can terminate therapy sessions at any time. If you ever feel that you could be better served elsewhere, please know that I am happy to provide you with referral options.
3. **Make sure you are safe and feel comfortable talking.** This is particularly important if we are meeting virtually. It is your responsibility to ensure that you are in a confidential and safe environment before entering into my telehealth session with my counselor. Please be aware that the counselor may terminate the session without refund of fees if the counselor deems the environment to be unsafe or lack privacy and you are unable/unwilling to make requested changes to ensure the therapeutic environment.

Diagnosis: Are you going to diagnose me?

Probably... Most health insurance companies require a diagnosis to reimburse clients for treatment costs (whereas some will not reimburse at all). In addition, most will require a diagnosis of a mental health condition before they will agree to reimburse you. Many situations and conditions for which people seek counseling do not qualify for reimbursement. If you are submitting an insurance claim and a qualifying diagnosis is appropriate in your case, I will inform you of the diagnosis. Any diagnosis made will become part of your permanent insurance records and counselor will always be willing to discuss diagnoses made with client at their request.

But... That said, some issues for which people seek interpersonal counseling (for instance: ADHD, Autism Spectrum Disorder, anxiety disorders) may require additional evaluation in order to receive other types of treatment. As a Mental Health Counselor, I can tell you if I think you need to pursue additional treatment (such as medication or occupational therapy) or evaluation based on the symptoms you report and my clinical experience and knowledge.

Emergency Contact: Why do you need an emergency contact if this is confidential?

On the client intake form, I will ask for your emergency contact. This person will only be contacted in the event of a medical emergency during a session or if I have significant concern for health and safety (e.g., you fail to arrive for a regularly scheduled appointment and cannot be reached). Additionally, I will only disclose the minimum information required to determine you are safe.

End of Counseling: What happens if I want to stop counseling, or I feel like I'm done?

The goal of treatment is to provide you with tools that give you confidence to maintain your mental wellness. The goal is not perpetual treatment. I will recommend discharge when we arrive at mutual agreement that your treatment goals have been met. *You are, of course, free to end treatment at any time.*

If I have made 3 attempts to contact you without hearing back or I have/receive no contact with you for 60 days, I will assume you have terminated treatment and close your file.

After discharge, I remind clients they are welcome to return when/if the occasion arises for further treatment.

Social Media: Can we be friends on Instagram?

I do not accept friend requests on my personal social media accounts. This is for a few reasons:

- in accordance with law and privacy standards for you as a client
- in order to maintain the integrity of the therapeutic relationship.

I do have a public Instagram (@elizabethperryipc) and Facebook account (Elizabeth Perry Counseling), which you can find through the sites/applications. Neither Instagram nor Facebook is not a substitute for therapy, and I will not respond to direct messages asking for therapy in that medium. If you have questions regarding this policy, I am happy to discuss this with you in session.

Other Contact: What if I see you somewhere outside of a session?

Personal: If we see each other outside of therapy, please understand that I will never approach you for contact to protect and maintain your privacy. Feel free to say hello to me if you like, but know that you are under no pressure to do so. Your life and time are yours and you do not owe me any acknowledgement. If you do choose to say hello, please know that I will respect your privacy by not identifying how we know each other to anyone who may be present.

Professional: Appointments will be confirmed via the online client portal. If you have questions or concerns between sessions, feel free to use the portal; email me at elizabeth@elizabethperrycounseling.com; or call or text (864) 670-5406. Please understand, however, that counseling will not be done via email or text message. Please note I will only return phone calls within the hours of 9am and 5pm, Monday-Friday.

For any other questions about therapy or expectations, please contact us.