

12340 Jones Rd., Suite 290 Houston, TX 77070 281-894-7222

Informed Consent and Your Rights

Overview of Therapy

Counselors at Shield Bearer do not prescribe medication, but are trained in a broad range of techniques. The goal of therapy is to help you resolve the problems for which you are seeking help. Although it is impossible to guarantee any specific results regarding your therapeutic goals, your counselor will work with you as conscientiously and diligently as they can to achieve the best possible results. If you ever have questions about the services provided or are dissatisfied with them, please let the counselors know. The counselor will provide other treatment options and/or referrals as necessary. While our sessions might be psychologically intimate, it is important for you to realize that the relationship is professional rather than social. Other than the chance meetings, our contact will be limited to the appointments you arrange with the counselor. The counselor cannot and will not attend social gatherings, accept gifts, or relate to you in any way other than in the professional context of the therapy sessions. As a client, you will be best served if the relationship remains strictly professional. Unlike a friendship, our relationship will concentrate exclusively upon your goals and concerns. While you might learn about your counselor as you work together, it is important for you to remember that you are experiencing the counselor solely in a professional role.

Treatment of Minors

Minors are defined as persons under 18 years of age who has never married, and has not been emancipated by law, or by virtue of serving in the armed forces, or having child of their own. See Texas Family Code ("TFC") §101.003. Generally, parental consent (either parent) is required for the treatment of minors, or control of minor records (either parent may, in writing, request copies or authorize release of medical records and/or billing information, e.g., a HIPAA release.) See, Texas Health & Safety Code ("THSC") § 611. In the event of a divorce or custody arrangement between the minors parents or legal guardians, a counselor MUST obtain and review a current copy of any applicable custody agreement, divorce decree, or other court order, unless fed or state law provides exemption. If the minor is seeking treatment exempt from a parent or guardian, please notify the client' counselor immediately as a therapist must have consent from a legally authorized person prior to treatment. Any documents reviewed and relied upon to determine who is a legally authorized person, MUST be retained and stored with the patient consent forms. Revocation of consent must be made in writing, is dates, and is signed by a legally authorized person.

Confidentiality

The information that you provide in therapy is confidential and will not be shared with anyone without your written consent as prescribed by law. However, there are a few circumstances when confidentiality, by law, will not be maintained, including the following:

• Concern of imminent harm to yourself (suicide) or others (homicide);

- Crucial information regarding your physical or emotional well-being;
- Suspicion or knowledge of abuse, neglect, or exploitation towards a minor or vulnerable adult;
- Litigation brought against me or the organization by the client;
- Order for release of records or attendance to court by any order of the Court
- Requirement for mental health services from disability, insurance, etc.;
- Necessity for collection of any outstanding balance; or
- Any other situation required by law.

Your right to confidentiality is important. Knowing this, your session will not be recorded (video or audio) and photos of you will not be taken without your written consent. It is important that you also do not record or take photos while in session.

Session will only be provided in a place that the counselor and the client agree on. Services will not be held in public.

Confidentiality when treating minors is unique. It is important that the minor is able to disclose information in session without fear of disclosures. However, parents generally have the legal right to obtain information about the minors treatment. In general, counselors will not disclose specific content from session unless there is concern for the minors safety or health. They will discuss general themes that are discussed in session, treatment goals, and treatment progress. If there is a concern that a parent had regarding treatment, they are encouraged to discuss this with the counselor.

Coverage/Emergencies

Shield-Bearer Counseling Centers are not crisis counseling centers. If you are experiencing danger or a life-threatening emergency, call 911 or go to your nearest emergency room immediately. If you need to contact your counselor between sessions, call 281-894-7222 and request to speak to them. If they are unavailable, they will return your message as soon as they receive it. Contact between sessions, including texts or emails (except for appointment setting information), may require an additional session fee.

Licensing Types of Providers

All providers are contract counselors with Shield Bearer Counseling Centers may hold a variety of license types as described below.

Each licensure type is guided by sets of National Code of Ethics, Federal Laws, and State Laws and Ethics specific to their license.

Each counselor is required to notify the client of their individual license status and supervisor status as required by State guidelines. Your counselor will provide this information to you during your time together. Counselors under supervision may be required to have you to sign a separate notification form.

- Counselors-In Training (Graduate Student Intern)- this provider is a student in a graduate program typically at the end of their program and are considered advanced students. They have taken the required coursework for their University for a clinical placement. They are supervised by both a University supervisor and a clinical site supervisor. Additionally, counselors in training at Shield Bearer Counseling Centers are supervised by the Graduate Education Program Coordinator and Clinical Director. These providers do not hold State licensure.
- Licensed Masters of Social Work (LMSW)- this provider has a Masters Degree in Social Work. They have completed the State requirements or provisional licensure and is gaining clinical experience towards a license as a Licensed Clinical Social Worker. They are under supervision from an LCSW-Supervisor while obtaining their hours. They adhere to the National Association of Social Work Ethics and are governed by The Texas Behavioral Health Executive Council and Texas State Board of Social Worker Examiners.

- Licensed Clinical Social Workers (LCSW)- this provider has a Masters Degree in Social Work, has passed the State exam for social workers, and has gained the supervised clinical experience to obtain this degree of licensure. They are no longer under formal clinical supervision and may be a State approved supervisor themselves (LCSW-S). They adhere to the National Association of Social Work Ethics and are governed by The Texas Behavioral Health Executive Council and Texas State Board of Social Worker Examiners.
- Licensed Marriage and Family Therapist (LMFT- Associate, LMFT, LMFT-Supervisor): This provider has a Masters degree concentrated on theories and interventions for providing clinical mental health services to individuals, couples, and families. They are specifically trained in family systems theories and approaches that may differ from other forms of mental health providers. LMFT Associates have passed the National Examination in Marital and Family Counseling for licensure and are under formal clinical supervision by an LMFT-Supervisor while they obtain the State required clinical hours for full licensure. LMFTs are fully licensed, having completed all State requirements for full licensure. LMFT-Supervisors (LMFT-S) are fully licensed providers who have taken additional training and have extensive clinical experience; they provide formal clinical supervision to LMFT Associates. They adhere to the American Association for Marriage and Family Therapy and are governed by The Texas Behavioral Health Executive Council and Texas State Board of Examiners of Marriage and Family Therapists.
- Licensed Professional Counselor (LPC- Associate, LPC, LPC-Supervisor): This provider has a Master's degree concentrated on theories and interventions for providing clinical mental health services to individuals, couples, and families. LPC Associates have passed a National Counselor Exam for licensure and are under formal clinical supervision by an LPC-Supervisor while they obtain the State required clinical hours for full licensure. LPCs are fully licensed, having completed all State requirements for full licensure. LPC-Supervisors (LPC-S) are fully licensed providers who have taken additional training on the theories and approaches for clinical supervision and have extensive clinical experience; they provide formal clinical supervision to LPC Associates. They adhere to the American Counseling Association and are governed by The Texas Behavioral Health Executive Council and Texas State Board of Examiners of Marriage and Family Therapists.

Professional Records

Records are held in an electronic HIPAA complaint database, called TheraNest. Records are maintained by the Custodian of Records and before any release, the requests funnel through this person. The records are not property of individual providers of Shield Bearer Counseling Centers and in the event of their separation from the agency, the records do not leave with them. In the in the event of the licensee's death or incapacity, or the termination of the licensee's counseling practice, the records remain within Shield Bearer Counseling Center and under the control of the Custodian of Records.

Session Fees and No Show Fees

Therapy sessions are typically 47-53 minutes in length. The remainder of the hour is used to chart notes, file insurance claims, and return client phone calls. An additional fee applies when sessions exceed 60 minutes. Any fees incurred are due at the time services are rendered. Acceptable forms of payment include debit or credit card. If you are receiving services paid for by another party, the fees remain your responsibility until paid.

Shield Bearer values our services between \$130-150 per session hour. Your individual negotiated rate is based on several factors. Rates are agreed upon during the intake process and are provided to you in the client portal welcome letter. The receipts that you receive after payment is made, acts as additional acknowledgment of the agreed upon rate. Should you have any questions regarding your rate, need an invoice, or need to request a rate adjustment, please contact your provider and they will assist.

If you are using insurance as a payment method, co-pays and any other costs are collected at the start of session.

Appointments not cancelled or rescheduled within 24 hours of the appointment time will be charged the full contracted rate (or \$30 fee, whichever is higher). That payment will be applied to the credit card authorized for use during my Intake process.

Appointments and Cancellations

Regardless of whether I call/text/email to confirm your scheduled appointment, your appointment time has been reserved specifically for you, and being on time will ensure that you receive the full time scheduled. If you cannot keep your scheduled appointment, kindly cancel at least 24 hours in advance.

Clients who no show/late cancel their initial intake appointments 3 consecutive times, will be referred out for services from Shield Bearer Counseling Centers. Clients who have a pattern of no showing/rescheduling/late canceling may be referred out for other services.

- A responsible parent or adult must be present on-site for the entire duration of the session for children under age 16. Children under the age of 10 cannot be left unattended in the waiting room at any time.
- There is no charge for cancellations made at least 24 hours prior to appointment time.
- There is a session fee (or \$30 fee, whichever is higher), for scheduled appointments cancelled less than 24 hours prior to appointment time or for missed appointments. This fee must be paid at or prior to your next appointment.
- If you exhibit a pattern of canceled or missed appointments, I may have to terminate services. In the event that services are terminated, I will provide referral sources to area mental health providers.

Policy Regarding Court Documents and Appearances

Shield-Bearer counselors prefer not to attend court proceedings. However, if subpoenaed by a judge to attend court, the fee for the day is \$5,000. Whether the proceedings take one hour or 10 hours, the fee is the same.

Client protection and privacy is of utmost importance per HIPAA and Licensure Boards in Texas. Therefore, therapy session notes are for the therapist to keep track of the dialogue, impressions, and disclosures of events pertinent to the client's life story. These notes are not available for interpretation by anyone else. A session summary will be created by the therapist and made available to the client, or anyone to whom the client grants written permission.

Client Rights and Agreement

- I understand that I have chosen to undergo therapy, that this choice is voluntary, and that I may terminate treatment at any time. I understand that there is no assurance that I will feel better. I understand that therapy is cooperative in nature and that I must actively engage in the process to effect change. I understand that during my treatment, subject matter may be discussed that is of a sensitive nature which may cause discomfort. And that this may be necessary for me to resolve my presenting areas of concern.
- I understand that my therapist and/or any other Shield-Bearer Counseling Centers staff member may exchange any and all information pertaining to my therapy to the extent that such disclosure is necessary for the processing of payment, case management, coordination and/or continuity of treatment, quality assurance, outcome assessment, or utilization review purposes. I understand I can revoke my consent in writing at any time, except to the extent that treatment has already been rendered or action has been taken in reliance upon this consent. If I do not revoke this consent, it will expire automatically one year after all claims for treatment have been paid.
- I understand that I have rights to my records under the law and should I need my records, for any reasons, I will request them in writing. I understand that Shield Bearer has 15 days to provide me those records and fees for providing those records may be assessed. Policies around this request will be provided on the request for records.
- I agree not to record (video or audio) or take photos of my time in session of counselor without written permission.
- I understand that I have a right to contact the Texas Behavioral Health Executive Council if I have ethical concerns (contact information provided below). I also understand that I may choose to voice my concerns to the Executive Director and/or the Clinical Director of Shield-Bearer.
- I understand that I will be charged the full contracted rate (or \$30 fee, whichever is higher) for each session not cancelled 24 hours in advance and that payment will be applied to the credit card authorized for use during my Intake process.

- I understand that sessions last 47-53 minutes, and that an additional fee may apply when sessions exceed this time.
- I understand that I am responsible for all payments. If the client is 18 or under, I consent to the client's participation in counseling and accept responsibility for payment. I acknowledge that I have been made aware of my session rate, in writing in my welcome letter (and by credit card receipt), and agree to this rate.
- I understand that if I am signing consent for a minor (18 years and under), I have authority to give consent. I will provide proof in the form of legal documentation if necessary.
- I understand that if I am signing consent for a minor (18 years and under), I am responsible in notifying the other parent or guardian that the minor is in treatment. I further understand that if treatment is revoked by either party, OR the counselor has information that the other party would not consent to services if they knew, services will cease until consent is resumed.

Licensing Board Information

Notice to Clients: The Texas Behavioral Health Executive Council investigates and prosecutes professional misconduct committed y marriage and family therapists, professional counselors, psychologists, psychological associates, social workers, and licensed specialists in school psychology. Although not every complaint against or dispute with a licensee involves professional misconduct, the Executive Council will provide you with information about how to file a complaint. Please call 1-800-821-3205 for more information.

- Texas Behavioral Health Executive Council Attn: Enforcement Division 333 Guadalupe St., Ste., 3-900 Austin, TX 78701.
- Texas State Board of Examiners of Licensed Clinical Dependency Counselors Complaints Management and Investigative Section P.O. Box 141369Austin, TX 78714-1369. Telephone: 512-834-6605

Receipt of HIPAA Notice of Privacy Practices

I acknowledge notice of availability of Notice of Privacy Practices. I understand a copy of this document can be provided at my request. I certify that I have read the Federal HIPAA Ruling provided by this office.

I have read, understand, and agree to these policies, and certify that all the information on this form is true. I