

Rights, Privacy, Responsibilities and Consent for Treatment of a Minor

Your son or daughter is requesting treatment at the Fredonia Counseling Center. However, because they are under 18 years of age, parental consent is necessary for them to receive counseling and psychological services. The purpose of this form is to describe the services offered and inform you of your and your child's rights and responsibilities regarding our services.

I. RIGHTS

1. Eligibility

Counseling services are available to currently enrolled, full- and part-time Fredonia students.

2. Services Available

At the end of the initial assessment, if further services are indicated, the counselor may recommend group, individual, or couples counseling, suggest further evaluation, or refer a student to other services on- or off-campus. Occasionally, some students find that the initial consultation meets their needs and require no further services.

We offer a range of services, including group counseling, short-term individual, and couples counseling. A student has the right to refuse diagnostic or treatment services. The counselor may be a Licensed Mental Health Counselor, Licensed Marriage and Family Therapist, Licensed Social Worker, or a graduate student under the supervision of the professional staff.

3. Prompt Service

A student will be seen for services in a timely manner. Same-Day Triage appointments are available on a first come, first-serve basis. If, however, a student experiences a crisis before being assigned to a counselor, they should contact the Counseling Center, and articulate the urgency of their concern, so that crisis services can be arranged.

4. Respect

Counseling Center staff will respect each student as an individual and convey this respect by providing quality care, keeping appointments, or contacting the student if a change in time is necessary, and by giving complete attention during sessions.

II. PRIVACY

1. Privacy

Information shared by a student will be kept in strict confidence. The Counseling Center creates and maintains records describing physical and mental health history, symptoms, diagnoses, treatment, and plans for future care or treatment. Most disclosures of private information would require both student and parental permission. Because the professional counseling staff operate as a team, we may confer with each other as professionally necessary to provide the best possible service to a student.

2. Disclosures that do not require a parent or student's permission

- **Child Abuse:** If, in our professional capacity, it comes to our attention that a child is abused/maltreated, we must report such abuse/maltreatment to Child Protective Services.
- **Emergency Situations:** We may use or disclose information about a student if we are unable to obtain parental consent yet emergency treatment is needed. If this happens, we will try to obtain parental consent as soon as we reasonably can after providing or arranging for treatment.
- **To Avoid Harm:** We may disclose information about a student to protect the student or others from a serious threat of harm by the student.
- **National Security:** We may be required, by federal law, to disclose information about a student to federal officials for intelligence and national security activities.
- **Release of Information to Parents or Guardians:** While your child is a minor, you have right to discuss your child's counseling with her/his counselor. Once a student reaches the age of 18, he or she will be asked to complete a new consent as a legal adult. After your child turns 18, you can ask her/him give the counselor written permission to allow two-way communication between yourself and the counselor. If your child does not sign such a release at that time, you can communicate information to the counselor, but the counselor will not be able to confirm whether or not your child is continuing in counseling or talk to you about your child's counseling experience.
- **Lawsuits and Disputes:** We may disclose information about a student if we are ordered to do so by a court or administrative tribunal.

III. THE STUDENT'S RESPONSIBILITIES

1. Participation

Active participation in the counseling process is necessary for progress to be made. It is important that a student notifies the counselor if problems worsen.

2. Cancellations

It is the student's responsibility to keep scheduled appointments, unless rescheduled or canceled **at least 24 hours in advance.**

3. Feedback

The Counseling Center staff is interested in any positive or negative feedback, students may have regarding the services received. We periodically ask students to complete an anonymous evaluation asking for feedback about our services. If for any reason a student is not satisfied with the counseling process, we encourage that person to discuss this first with his or her counselor. If concerns are not resolved to a student's satisfaction, the student may request an appointment with the Clinical Director of Mental Health Services to discuss possible reassignment or other counseling options.

I am the parent or legal guardian of _____.
Student's Name (Print)

I have received a copy of the Fredonia Counseling Centers Parental Consent for Treatment form. I have read and fully understand the information contained in this form. I hereby give my permission to the professional staff of the Fredonia Counseling Center to engage in counseling services with my minor child.

Student's Name (Print)

Student's Date of Birth

Name of Parent/Legal Guardian (Print)

Signature of Parent/Legal Guardian

Date

*This form will be faxed, mailed or emailed to a parent. **Please return the form to the Fredonia Counseling Center to the fax number or postal address on this form or in an email attachment to your student's counselor.** The counselor may also elect to verify parental consent upon receiving the signed consent form.*