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THE NATURE OF CONFIDENTIALITY

1. As your therapist, I strive to provide a safe haven in which you can openly explore very personal issues. I am committed to guarding your right to privacy, within the limits of the law. There are issues surrounding confidentiality of which you should be aware.
2. In an effort to provide you with the best services possible and in accordance with state law, I attend a professional supervision/consultation group. The professionals with whom I discuss my cases have access to confidential information and are bound by the same confidentiality measures listed here.
3. There are certain situations in which a **therapist is required by law to reveal information** obtained during therapy. Disclosure is required by law in the following circumstances:
 - a. A reasonable **suspicion of abuse/neglect of a child or vulnerable adult**. A report will be made to the appropriate protective agencies.
 - b. When you **threaten grave bodily harm to others**. As a therapist, I have a duty to warn those you have threatened and or to contact law enforcement.
 - c. When you are **suicidal or threaten significant bodily harm to yourself**. I have a duty to obtain help from others such as family members or other professionals to do what is necessary to keep you safe and/or to contact law enforcement.
 - d. When a court of law issues a legitimate **court order** (signed by a judge).
 - e. When you are in a **probation/parole period** or other legal situation that would require disclosure.
4. Except in the above circumstances, I will release information about you only if you provide a **written request**. Releases of information for families/couples in therapy require the written permission of **every member** of the family/couple in treatment able to execute a waiver.
5. If I see a **child under the age of consent** (younger than 16), all custodial parents have a right to information shared in the session. Custodial parents should be aware that exercising this right may be detrimental to the therapeutic process, and so may wish to allow confidentiality between the child and therapist. If a child's parents are divorced or separated, and have **joint legal custody**, I will require **both parents to sign consent to treat the child** even if one parent does not have primary physical custody of the child. If the court has appointed an attorney to represent the child, that attorney has the right to information shared in the session. If stated in a court order, that attorney has the exclusive right to decide if information about the child's sessions will be disclosed or not.
6. There are special **confidentiality concerns for families and couples** in treatment.
 - a. I view the couple or family as the "treatment unit".
 - b. It is important for you to be aware that "secrets" that are kept from family members are generally not healthy for you or your family. For this reason, if an individual member or subset of the couple/family discloses a confidence that has bearing on other family members, I will encourage the person(s) to reveal the information to the other members. I will support you in finding ways to make such a disclosure.
 - c. Should you reveal to me a "secret" that you refuse to disclose to the others and that puts me, by my knowing the "secret", in a position of hurting my honest relationship with others in the treatment unit, I will terminate the therapy.

I affirm that I have read the nature of confidentiality in therapy set forth above. I have had an opportunity to ask questions and have had my questions answered satisfactorily.

Printed Name

Signature

Date

Printed Name

Signature

Date