



LIMITS OF CONFIDENTIALITY AND ACKNOWLEDGEMENT OF NOTICE OF PRIVACY PRACTICES

Under certain legally-defined situations, the counselor is required to report information revealed during the course of therapy to other agencies or persons without the client's written consent. Every effort would be made to discuss this with the client, should such a situation arise. In emergency situations this cannot be guaranteed, however.

1. If the client reveals information to the counselor about child abuse or neglect, the counselor is required by law to report this to the appropriate authority.
2. If the client reveals information to the counselor about the abuse, neglect, or financial exploitation of a senior citizen who is unable to seek assistance for himself or herself, the counselor is required by law to report this to the appropriate authority.
3. If the client threatens suicide, the counselor is required by law to report this to appropriate individuals.
4. If the client threatens bodily harm or death to another person, the counselor is required by law to warn the intended victim and notify the appropriate law enforcement agencies.
5. If the client is in therapy or being tested by order of a court of law, the results of treatment or tests ordered must be revealed to that court.
6. If a court of law issues a legitimate subpoena, the counselor is required by law to provide the information specifically described in the subpoena.

____ I (the client) have read (or have had read to me) the above limits of confidentiality. I
(Initial) have a full understanding of their meaning and consequences. I agree to these limits of confidentiality.

____ I have also been given access to the ACCFS Notice of Privacy Practices and have had any
(Initial) questions that I have about it explained to me.

Printed name of Client

Signature of Client

Date

Signature of Parent/Guardian (if client is under 18)

Date

Witness

Date

NOTES:

1. If client is under 12, parent/guardian signs.
2. If client is between 12 and 18, parent/guardian and client sign. If client refuses consent, there shall be no disclosure unless therapist feels it is in the best interest of client.
3. If over 18, client signs.
4. A copy of this form will be kept in the client's record.