



Thriving Families. Nurtured Children.

# Therapeutic Counseling Program

## ADULT WELCOME PACKET

Our counseling program was created to serve a child or adult survivor of childhood adversities, who would not otherwise be afforded the benefits of therapeutic counseling. Based on your assessment with your counselor you will be provided with 8-10 counseling sessions **at no cost to you**. These sessions are 50 minutes long unless otherwise specified.

### Our Counseling Program Goals:

- To provide a safe, caring, and compassionate environment with competent counselors trained in effective therapeutic interventions that assist and support children, adults, and families healing from childhood trauma and abuse.
- To provide support of victims through linking them to additional community resources as well as assist them with applying for victim compensation when appropriate.

### Our Contact Information:

**Family Resource Center Annex:** 191 Jefferson Street in Clarkesville

**Phone:** 706-778-3100 ext. 106

**Email:** [referrals@pcahabersham.org](mailto:referrals@pcahabersham.org)

**Fax:** 706-928-5183

**Website:** [www.frcfneg.org](http://www.frcfneg.org)

**Mailing Address:** 122 North Laurel Drive, Clarkesville GA 30523

### Appointment Cancellation Policy:

Therapeutic Counseling is being provided to you at no charge and we expect you to place the same value on our services and our time by **not** cancelling appointments with your therapist at the last minute. If you find you must cancel your appointment, out of courtesy to our therapists and other clients on our wait list, please provide **24- hour notice of cancellation**. Our phone system allows you to leave a message of your need to cancel 24 hours a day. If our agency finds that you regularly miss your appointments or reschedule them at the last moment it may be in the best interest of all parties for us to exit you from our counseling program and refer you to other counseling agencies.

### Contacting Your Therapist:

Our therapists offer their time for counseling at the Family Resource Center on specific days of the week, as each have private practices outside of their contracted work for our agency. For questions, rescheduling, or cancellations, please call 706-778-3100 ext. 106. Once you have met with your therapist, please use their cell number after your initial visit. Our counseling program is an outpatient practice and we can accommodate individuals who are reasonably safe and resourceful. Our therapists do not carry a beeper and are **NOT** available 24/7. If at any time this does not feel like sufficient support, please inform your therapist to discuss additional resources. Generally, our therapists will return phone calls within 48 hours during normal business office hours.

## **In Case of an Emergency:**

If you need eminent and immediate help, please use the resource numbers listed below. Our counseling program is an outpatient practice and we are set up to accommodate individuals who are reasonably safe and resourceful. Our counselors do not have 24-hour availability and if at any time this does not feel like sufficient support, please inform your counselor. The two of you can discuss additional resources or transfer your case to a clinic with 24-hour availability. If you have a mental health emergency, we encourage you not to wait for your next appointment, but to call the emergency numbers listed below:

### **Emergency and Resource Numbers**

- Call Laurelwood Hospital at 770-531-3800 or Peachford Hospital at 770-454-5589
- Call the Suicide Prevention Hotline at 1-800-273-8255
- Call the Youth America Hotline (teens counseling teens) at 1-877-968-8454
- Call 911 or go to your nearest emergency room
- **Call GCAL 1-800-715-4225 (for all mental health emergencies 24 hours a day)**

## **Technology:**

**Cell Phones & Texting:** Text messaging is only to be used for appointment confirmation if consent is given on application. ***Please never send a text message to your counselor with dialogue that discusses your case.*** We cannot guarantee receipt of a text message and they cannot provide you with the privacy that you are entitled to as our client. However, when needing to re-schedule or to notify your therapist of any changes, always use their cell phone to leave a message, as our office staff are not always available and are not at the Center on weekends. Please make sure you and your child's therapist have shared your (cell) phone numbers with each other.

**E-mail:** Though our email server is HIPAA compliant it is important for you to know that there are still risks associated with emailing private and confidential information. Emails will become part of your clinical record. Do NOT communicate urgent needs via email.

**Social Media:** We do NOT communicate via any social media outlets with clients enrolled in our counseling program to ensure your privacy and confidentiality.

**Technology is continuously changing and evolving and new ways of communicating emerge frequently. Please direct any questions or concerns you may have with your therapist for further clarification.**

## POLICIES ON DIVORCE AND/OR CUSTODY CASES

### About Litigation:

Our Counselors and agency are not custody evaluators and cannot make any recommendations on custody. We can refer you to a licensed professional who DOES provide custody evaluation if needed. Due to the sensitive nature of divorce and all potential issues that may arise in such cases, we have very specific policies to which you must agree before we enter a counseling relationship.

1. If applicable, we require a copy of any most current standing court order demonstrating the custodial rights of each parent and/or the parenting agreement that is signed by both parents and the judge at the first intake session.
2. If applicable, we will provide an interview with any court-ordered Guardian ad Litem (GAL) and/or custody evaluator (CE) whom the court has ordered and who will have access to the child's records and any time spent speaking with the GAL or CE will be billed to and paid by you, the client, at our court-related-fee hourly rate.
3. We require all clients waive their right to subpoena any of our therapists to court. By signing this Agreement, you are acknowledging and agreeing NOT to have us subpoenaed to court. This policy is set in order that we can preserve the integrity of the therapeutic progress and relationship with you and/or your child(ren). There are exceptions to this and can be discussed further should the issue arise, and this policy needs to be waived.
4. **In the case the above policy regarding subpoenas and court is waived (or disregarded) and one or our Counselors are subpoenaed to appear in court -- even with a waiver of this policy-- you will be billed for the full standard fee for Court Related work of \$400/hour for all professional time. Any time dedicated to any court-mandated appearance including preparing documentation, discussions with lawyers and/or the guardian ad litem in connection with the court appearance, and any time spent waiting at the court house in addition to time on the stand, as well as any travel time, will be billed at \$400 per hour and must be paid in advance. Any reduced fee granted will not apply to court related work.**

## PATIENT RIGHTS AND RESPONSIBILITIES

The HIPAA Notice of Privacy Practices can be found at the office and waiting areas of the Family Resource Center Annex and on our website: <http://frcofneg.org>

### CONSENT FOR TREATMENT

**Confidentiality, Limits of Confidentiality & Records:** Your communications with our counselors will become part of a clinical record of treatment, and it is referred to as Protected Health Information (PHI). Your PHI will be kept in a file stored in a locked cabinet. Additionally, our counselors will always keep everything you say to them completely confidential, with the following exceptions: (1) you direct one of them to tell someone else and you sign a "Release of Information" form; (2) The counselor determines that you are a danger to yourself or others; (3) you report information about the abuse of a child, an elderly person, or a disabled individual who may require protection; or (4) Your counselor is ordered by a judge to disclose information. If for some unusual reason a judge were to order the disclosure of your private information, this order can be appealed, and our counselors and agency will do everything in their power to keep what you say confidential.

**Professional Relationship:** Psychotherapy is a professional service your counselor will provide to you. Because of the nature of therapy, your relationship with he/she must be different from most relationships. It may differ in how long it lasts, the objectives, or the topics discussed. It must also be limited to only the relationship of therapist and client. If you and your counselor were to interact in any other ways, you would then have a "dual relationship," which could prove to be harmful to you overall and is, therefore, unethical in the mental health profession. Dual relationships can set up conflicts between the therapist's interests and the client's interests, and then the client's (your) interests might not be put first. To offer all our clients the best care, the counselor's judgment needs to be unselfish and purely focused on your needs. Therefore, your relationship with our counselors must remain professional in nature.

Additionally, there are important differences between therapy and friendship. Friends may see your position only from their personal viewpoints and experiences. Friends may want to find quick and easy solutions to your problems so that they can feel helpful. These short-term solutions may not be in your long-term best interest. Friends may also need to have you do what they advise. A therapist offers you objective choices and empowers you choose what is best for you. A therapist helps you learn how to solve problems better and make better decisions. A therapist's responses to your situation are based on tested theories and methods of change.

Therapists are required to keep the identity of their clients a secret. As much as our counselors would like to, he/she will not address you in public unless you speak to him/her first. They also must decline any invitation to attend gatherings with your family or friends, or to accept "friend" requests on Facebook or any other social media. Lastly, when your therapy is completed, he/she will not be able to be a friend to you like your other friends, as you may want counseling from him/her sometime in the future. In sum, it is our counselor's duty to always maintain a professional role. Please note that these guidelines are not meant to be impolite in any way; they are strictly for your long-term protection.

**Patient Rights:** Confidentiality is a privilege protected by law and ethics of the counseling profession that allows for strict private discussion of issues that concern you. Exceptions include: Disclosure to appropriate authorities or family members when there is sufficient cause to believe that you pose a threat of physical harm to yourself or others. Also, it is required by law to report any form of child neglect or abuse.

**Respect and Non-Discrimination:** All agency services are available regardless of actual or perceived age, race, color, religion, national origin, sex, gender identity, sexual orientation, residency status, or disability. You will not be deprived of any civil right solely by reason of your involvement with the agency. In addition, if you believe you have been harassed or subject to discriminatory treatment because of race, color, national origin, sex, age, religion, or disability, or have been retaliated against for engaging in protected activity, you have the right to file a complaint to the Civil Rights Officer of the Criminal Justice Coordinating Council (CJCC) at (404) 657-1956 104 or 104 Marietta St, Suite 440 Atlanta, GA 30303. Generally, formal complaints must be filed with the Civil Rights Officer within 180 calendar days of the alleged act of discrimination. If the complaint is not filed on time, the complainant should provide the reason for the delay and request a waiver of this filing requirement. The CJCC will decide whether to grant the waiver. The complaint may be filed in a letter, in an email, in person, or over the phone. In anticipation of filing a complaint, an individual may find it beneficial to contact the Civil Rights Officer to obtain policy clarification, advice, or assistance.

**Telephone Consultations:** Occasionally, there will be a need to consult briefly by phone. For these necessary and brief consultations, there is no charge; however, if you desire further assistance, we can schedule an earlier office appointment.

**Child Care Release:** PCAH does not provide childcare and is not responsible for children or adolescents left unsupervised in the waiting room. Minors must be picked up following their appointments on time. If you must leave your child in the waiting room during a session, it is your responsibility to provide appropriate supervision for that child. Children under the age of 10 may not be left without supervision in the waiting room.

**Additional Rights and Responsibilities:** In addition to your right to confidentiality, you have the right to end your counseling at any time, for whatever reason. You have the right to question any aspect of your treatment with your counselor. PCAH reserves the right to discontinue counseling at any time including, but not limited to, a violation by you of the expectations presented in this Client Welcome Packet, a change or reevaluation by your counselor of your therapeutic needs, our agency's ability to address those needs, or other circumstances that lead PCAH to conclude in its sole and absolute discretion that your counseling needs would be better served at another counseling facility. Under such circumstances, PCAH will suggest an appropriate counselor(s) or counseling agency.