

## **Building Blocks Counseling Services**

### **Rights and Responsibilities**



Welcome to Building Blocks Counseling Services. We appreciate you giving us the opportunity to work with you. This page addresses some important topics and questions that are often asked of counseling services and our agency. We believe that our work together will be most successful when you are an informed participant. After you have read this and feel you understand it, we will ask you to sign it and we each will get a copy.

#### **About your therapist**

Different therapists have different experiences and specific focuses. My license is current and in plain view in my office. I am in compliance with both the Illinois Department of Professional Regulations and Iowa Board of Behavioral Science. If you have any questions about my qualifications, please ask. If we feel the concerns you bring to your counseling sessions are beyond my expertise and training, I will tell you this and assist you in locating a therapist more qualified to address your particular issue.

#### **Who sets my goals?**

Since your cooperation is paramount to the success of your treatment, we will work together to set your treatment goals. These goals can be re-examined, changed, elaborated on or deemed no longer appropriate as we proceed with counseling.

#### **Who pays for this?**

It is ultimately your responsibility to pay for your therapy. If you have private insurance, we will follow your insurance company's protocol and work with your insurance company to receive their part of the fee. If they deny payment, you will be responsible for the full amount. If you are private pay, you are responsible for the full fee, payable prior to each session. If this becomes a hardship, please let me know.

#### **Confidentiality: HIPAA**

Building Blocks Counseling Services respects your right to privacy. WE understand your personal health information, as well as your identifying information (DOB, SS#, etc) is sensitive. We will not and, by law, cannot, disclose this information to others unless you sign a consent form for us to do so., or the law authorizes us to. This extends to your children (over the age of 12) as well.

The HEALTH INFORMATION PRIVACY AND ACCOUNTABILITY ACT (HIPAA) protects the privacy of the health information we create and obtain in providing care and services to you. For example, your protected health information includes, but is not limited to your diagnosis, treatment plan, health information from other sources, and payment information related to these services.

Federal and state law allows us to use and disclose your protected health information for the purpose of treatment, payment and health care options. We may use and disclose your information to be in compliance with quality and compliance review, legal issues, risk management, audit functions (including fraud) and abuse detection.

#### **Exceptions**

We are mandated by the State of Iowa to report all cases of child/elderly abuse and neglect. Also, if a client states that they are suicidal/homicidal or planning to break the law, we are required to make a hotline report.

#### **Additional information for you**

Please remember that our relationship is professional, not social. Therefore, we do not attend family functions, accept gifts or meet with you socially. It would compromise our therapeutic relationship. Out of respect for you, if I see you in public, I will not address you, unless you address me first and I will never state how I know you.

#### **Viewing reports**

We will review your assessment during the formation of your treatment goals. If you wish to see any other reports, we can make them available only if your therapist wrote it and only if it is in your file. We cannot authorize you to look at a report written by someone else or about someone else in his or her file.

**Late for session**

Our scheduled appointment time is paramount in the therapeutic process. Consistency is also important. Therefore, we expect you to keep your appointments and be on time. We will do everything in our power to let you know if we will be late or have an emergency. We ask that you do the same. Please make sure that we have a current phone number to reach you.

**Grievance procedure**

It is very important that problems that arise during your therapy session be discussed with your therapist as soon as possible.

**Discrimination Policy**

We do not discriminate against anyone because of age, sex, marital/family status, race color, religious belief, physical ability, sexual orientation or criminal background. Besides being a state law, this is also our personal belief.