

## **INFORMED CONSENT FOR COUNSELING SERVICES**

### **Galen University**

#### **The Counseling Process**

The counseling process is a partnership between you and a counselor to work on areas of dissatisfaction in your life or assist you with life goals. For counseling to be most effective, it is important that you take an active role in the process. This involves keeping scheduled appointments, listening to the clinician, being honest with the counselor, discussing the counseling process with the clinician, and completing outside assignments agreed upon with the clinician. Counseling can have both benefits and risks. While counseling can be of benefit to most people, the counseling process is not always helpful.

The counseling process also can evoke strong feelings and sometimes produce unanticipated changes in one's behavior. It is important that you discuss with your counselor any questions or discomfort you have regarding the counseling process or any behavioral changes you may be experiencing. Your counselor may be able to help you understand the experience and/or use different methods or techniques that may be more satisfying.

#### **Confidentiality:**

The counseling office at Galen University recognizes that confidentiality is essential to effective counseling. We believe that for counseling to work best, you must feel safe about sharing personal information about yourself with your counselor. When you share information about yourself with your counselor, they will respect the importance of that information.

Your records from the counseling services are not part of your student record. However, it is because of the strength of our belief in the importance of you feeling safe about sharing information about yourself with your clinician that we want to inform you about the circumstances in which we may share information about you without your consent.

#### **Exceptions to Confidentiality**

- If you pose a threat of harm to yourself, to another person, or to the University community, we will take whatever steps are required by law, or permitted by law, to help prevent the potential harm from happening. This may include contacting your family and/or Galen University officials;
- In the event of a psychiatric emergency or hospitalization;
- If you report information indicating that a child, individual with a disability, or an older adult is suffering abuse or neglect;

- A court order issued by a judge could require us to release information contained in your records or could require a therapist to testify.
- If you are under 18, your parents or legal guardian(s) may have access to your records and may authorize their release to other parties.

The above is considered to be only a summary. Please ask your counselor if you have questions about specific situations or any aspect of confidentiality.

### **Counseling Records:**

Counseling records are stored in locked files and/or electronically on a secure web-based platform that is only accessible by our staff. Upon request, you may review your counseling records. In order to ensure the information contained is clearly understood, you will be asked to arrange an appointment with your counselor to go over the information.

### **Counseling Decisions:**

Frequency of sessions, number of sessions, goals, type of counseling, and any alternative counseling methods will be discussed and negotiated between you and your clinician. You are encouraged to regularly discuss your progress and review your goals with your clinician.

If you have questions about recommendations or the approach used by the counselor, please discuss your questions or concerns with the counselor. If you feel these recommendations are not appropriate, you may refuse to accept them. If you feel you are not making satisfactory progress toward your goals, please discuss this with your counselor.

### **Email:**

The counseling office at Galen University seeks at all times to maintain and respect the confidentiality of each client, including not only the details of any services rendered but also the fact that an individual may be in contact with our office. With this in mind, we wish to remind each person that email is not a secure form of communication. Because confidentiality cannot be assured, the use of email is discouraged in regard to communications with the counseling office. When necessary, email may be used for scheduling appointments but should not be used for counseling purposes. The suitability of any clinical consultations or recommendations can only be determined through counseling sessions.

The fastest way to contact the counselor is by phone. Please call the counselor at ( ) if your message is time-critical. If your call is after office hours, you can expect a call back by the next business day.

**If you are in imminent crisis, please contact emergency services, as the counseling office at Galen University does not provide crisis services.**

**Emergency services can be found here:**

- **In a mental health emergency, call 911 nationwide, or 90 in Belize City only**

**Psychiatric Nurse Practitioner at nearest hospital or clinic:**

**Belmopan**

1. **Western Regional Mental Health Clinic-** Floriana Avenue, Tel: 822- 2263
2. **Acute Psychiatric Unit-** Floriana Ave, Tel: 822-2263
3. **Palm View Center-** Maya Mopan, Tel: 820- 2790

**San Ignacio**

1. **San Ignacio Mental Health Clinic-** Bullet Tree Rd, Tel: 804- 2761

**Belize City**

1. **Cleopatra White Poly Clinic-** Mental Health Tel: 223-5213/ 223-0131
2. **Central Health Region-** Community Treatment Program Old Nursing School Building Corner of Princess Margaret Drive/ St Thomas, Tel: 223-2722
3. **Port Loyola Mental Health Clinic-** Drop-in Centre Faber's Road/ Gibnut Street Tel:227-5354

**Corozal**

1. **Corozal Community Hospital-** San Antonio Rd, Santa Rita Tel: 422-3909 or 422-2076 (ambulance)

**Orange Walk**

1. **Northern Regional Hospital-** Holy Trinity Street, Tel: 322- 1560

**Dangriga**

1. **Southern Regional Mental Health Clinic** – Dangriga Hummingbird Hwy, Tel: 522-3834

**Punta Gorda**

1. **Punta Gorda Hospital Counselling clinic-** Main Street, Tel: 722- 2145

**Scope of Care**

The Counseling Center at Galen provides short-term counseling and consultation to students who are experiencing emotional and psychological problems that are interfering with their ability to be successful in school and with their individual personal development. Our purpose is not to provide intense treatment for severe, chronic, or long-term mental illness or mental health problems.

**Canceling or missed Appointments:**

- Please contact (Call/Email/or text) us as soon as possible. We request a **24-hour notice** of cancellation in order to best use that time to help other students that may come in, and a 24-hour notice gives time for other students to schedule an appointment at that time.
  - If three or more "no shows," a decision will be made if we can continue to evaluate and/or treat the student. The decision may be made to refer the student to an outside provider for ongoing treatment.

**Consent**

I certify that I have read, understand, and agree to abide by the information, terms, and conditions in this Informed Consent for Counseling Services form. I have had the opportunity to discuss any questions about the information contained in this form, or any other aspect of Galen University's counseling services. I hereby give my consent to Galen University's counseling services to evaluate, provide counseling services, and/or refer me to others as needed.

**Client's Printed Name and Signature:** \_\_\_\_\_

**Client's DOB:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**If the student is under the age of 18 years old, parental/legal guardian consent is needed:**

**Parental/legal guardian's printed name:** \_\_\_\_\_

**Parental/legal guardian's signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_