

FamilyMeans Consent To Treatment

Your rights are protected under the data privacy laws of both Minnesota and Wisconsin. The state where you are seen, not the state of residence, determines which specific laws apply. These laws are to protect your privacy, to let you know what kind of information we collect on you, how we use that information and how you can access it. Copies of the pertinent sections of the statutes are available in the lobby for your review.

The information you share with us is kept in a confidential file. The contents of this file can only be released to a third party with your written consent. The exceptions to this are the mandatory reporting of the abuse or neglect of a child or vulnerable adult, situations where it is determined you are a danger to self or others, and response to a court order. By signing an insurance form, you give your insurance company access to your records. Periodically our licensing bodies confidentially survey our records for compliance with standards.

The information that is collected about you includes basic demographic information (name, address, place of employment, etc.), a synopsis of what you share with your counselor and your counselor's impressions of your situation. This will include a diagnosis of your condition or situation. The exception to this may be clients being seen under an Employee Assistance Program. Any client who is seen will have a written treatment plan which he or she will be asked to sign expressing agreement with the plan.

The information that is collected about you is used to create a history of your treatment here and assist in planning that treatment. Part of that planning may include review with your counselor's supervisor or presentations at Case Conference for the purpose of obtaining input concerning your treatment from other professional staff. You may discontinue treatment at any time.

Counseling is a collaborative process between client and counselor. Both you and your provider have rights and responsibilities as part of the assessment and treatment process. While case records are the property of the agency, you have a right to know your record's content. You may review your file with a professional staff person upon reasonable notice and without charge. You also have the right to information from your counselor about your services which includes:

- a) benefits of the proposed treatment and services
- b) the way treatment and services will be provided
- c) any expected side effects or risks of the treatment which are a reasonable possibility, including side effects or risks from medications
- d) alternative treatment modes and services
- e) the probable consequences of not receiving treatment if declined
- f) the cost of services

Providers at FamilyMeans have the following rights and responsibilities:

- a.) to strive to benefit those with whom we work and to take care to do no harm
- b.) to uphold ethical and professional standards of conduct and behave in a trustworthy manner
- c.) to serve the best interest of those with whom we work
- d.) to practice within the boundaries of competence
- e.) to seek out opportunities for continued professional growth through training, supervision, and consultation

This informed consent is valid for one (1) year from the date it is signed. You may withdraw informed consent, in writing, at any time. If you are not satisfied with the services you receive, you may file a grievance. A copy of the agency grievance procedure is available with different procedures for Minnesota and Wisconsin residents. Clients residing in Minnesota may report unresolved grievances to the Division of Licensing of the MN Department of Human Services at 651-431-6500. Wisconsin residents shall discuss at intake and receive a brochure regarding their rights and grievance procedures.

I agree to initial treatment at FamilyMeans.

I have received a copy of FamilyMeans Privacy Notice explaining my privacy rights under HIPAA.

Client Name _____ Date _____

Signature of Client or Guardian _____ Relationship to client: _____