



Informed Consent

RCW 18.19.060 requires counselors to provide written disclosure of the following information to clients before counseling begins.

What to expect in mental health counseling

An initial assessment is made based upon the Client History and Information form you complete and an introductory interview to determine the most appropriate treatment.

It is important for you, the client, to share with me the goals you have for therapy and realize that entering into therapy does not guarantee anticipated outcomes or a cure. You will benefit the most from counseling if you explore options and be willing to pursue solutions to your hopes and aspirations.

The length and course of treatment are dependent upon the presenting problem, diagnosis, treatment history, and your willingness or availability to promote change. Treatment will be mutually agreed upon. Recalling situations or memories and discussing them may cause strong "negative" emotions to surface. There is a possibility that you may for a time feel worse. Know also that sometimes, change is painful and frustratingly slow.

Rights

You have the right to refuse treatment and the right to choose a practitioner and treatment modality which best suits your needs.

Limits of Confidentiality

Discussions between the counselor and client are private. It is the counselor's goal to protect the client's confidentiality. However, there are exceptions to confidentiality:

- 1) By law, all mental health professionals are required to notify authorities about cases of suspected abuse and neglect of a child an adult dependent person (RCW 26.44.030), and vulnerable adult or developmentally disabled person (RCW 74.34).
- 2) If a client threatens to harm herself/himself or others, Washington State Law requires that others be informed. If that threat is perceived to be serious, the proper individuals (including law enforcement) must be contacted which may include the individual against whom the threat is made.
- 3) In response to a subpoena or court order, I may be required to disclose personal health information. I would prefer to work with you to prevent or limit such action.
- 4) Information that may jeopardize my personal safety will not be kept confidential.
- 5) In the event of a medical emergency, emergency personnel may be given pertinent information.
- 6) I may use or disclose your personal health information to defend a complaint, a negligence suit you bring to the licensing board or other charges to law enforcement authorities.

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7) In the event of a client's death or disability, the information may be released if the client's personal representative or if the beneficiary of a client's life insurance policy signs a release authorizing disclosure.

8) When you provide me with written authorization to communicate with a third party . Examples-- speaking with your doctor to maintain continuity of care or to a family member that is assisting in your care. (There are many other examples.) Other uses and disclosures will be made only with your written authorization and you are legally permitted to revoke any authorization you make.

9) Your private health information (PHI) will be used for the purpose of retaining ethically required consultation with counselor's colleagues, arranging for payment of services or for business functions referred to as Treatment, Payment and Operations. Listed below are examples of the uses and disclosures that I may make of your PHI. These examples are not meant to be a complete list of all possible disclosures, rather, they are illustrative of the types of uses and disclosures that may be made:

Treatment--Your PHI may be used and disclosed by me for the purpose of providing, coordinating, or managing your health care treatment and any related services. This may include coordination or management of your health care with a third party, consultation or supervision activities with other health care providers, or referral to another provider for health care services.

Payment-- I may use your PHI to obtain payment for your health care services. This may include providing information to a third party payor, or, in the case of unpaid fees, submitting your name and amount owed to a collection agency.

Operations-- I may use and disclose your protected PHI for certain purposes in connection with the operation of my professional practice, including supervision and consultation.

10) Criminal activities: If you speak to me of your direct involvement in a past criminal offense (murder, bank robbery, rape, or severe physical assault) I reserve the right to report to the appropriate sources if the offense was not reported.

Consultation

The competent and ethical practice of psychotherapy dictates that I participate in case consultation with other licensed professionals when necessary. Should I obtain consultation regarding aspects of your treatment, I will omit identifying information (including name, place of employment, etc.) so that confidentiality will be preserved to the best of my ability. Your signature on this policy statement serves as your consent that we may pursue consultation regarding your treatment without obtaining additional written consent from you to do so.

Unprofessional Conduct

You may contact the Washington State Department of Health (DOH) in order to receive a list of or copy of the acts of unprofessional conduct listed under RCW [18.130.180](#). In order to file a complaint, you may contact the DOH at: Department of Health, Health Systems Quality Assurance (HSQA), Complaint Intake, P.O. Box 47857, Olympia, WA 98504-7857. Local: 360-236-4700, Email: HSQAComplaintIntake@doh.wa.gov

Contact Outside the Office

The professional, confidential relationship required for therapy limits other contact with me, including other business or social settings. This is to protect your confidential counseling process and is part of a counselor's ethical code. For this reason, I will not respond to any social media requests. Personal and/or business relationships undermine the effectiveness of therapy and should be avoided. There may be occasions when you see me outside the office. In an effort to protect your confidentiality and privacy, I will not initiate conversation. At no time will I discuss clinical issues with you in social settings. This professional relationship continues after you stop services at Soul Archaeology Counseling for at least 5 years. If after the 5-year timeframe a personal relationship is established, a future professional relationship is not permitted. It is for this reason, I consider our professional, confidential relationship to continue as long as you are eligible for services with Soul Archaeology Counseling.

Gifts

Often, clients wish to bring a gift to their counselor. Gifts of a small monetary value, and symbolic in nature are acceptable. Expensive gifts are exploitive in nature and could undermine effective therapeutic relations. It is against my professional code of ethics to receive these. **At no time are you ever obligated to give a gift!** If you have further questions, please talk with me.

Referrals and coordinating with other healthcare providers

Many people benefit from psychotropic medications in the treatment of severe illness. If you would like to discuss this, I am happy to coordinate a referral from your primary care physician to a psychiatrist.

I may suggest you consult with a medical healthcare provider regarding ruling out possible physiological causes for any distressing symptoms. If another healthcare provider is working with you, I may ask you to sign a release of information form so that I may communicate with that person about your care. Sometimes I also recommend a support or counseling group as an adjunct to our individual work. Of course, you have the right to carefully consider and say, "yes," "no," or "not now" to anything I suggest.

If you have worked with other mental health practitioners within the last five years, I may ask your permission to request your records from that individual. I will need your written authorization to do so.

I am also available to coordinate with schools, family, clergy/spiritual mentor, physicians or other health providers as needed.

Drugs and alcohol create false realities and self-images, interfering with the underlying issues and the ability to gain deeper insights. Individuals actively abusing drugs or alcohol may need to go through a chemical dependency assessment and be referred to a recovery program, or Chemical Dependency counselor before beginning mental health therapy. However, best outcomes are experienced when one receives chemical dependency and mental health therapy simultaneously.

Custody or Visitation Recommendations:

It is my belief that courtroom testimony adversely affects the therapeutic relationship and interferes with the counseling process. If you are involved in divorce or custody litigation, the therapist role is not to make recommendations to the court concerning custody or parenting issues.

By signing this disclosure, you are stating it is your understanding that the therapist will not make any recommendations regarding custody or visitation in these proceedings.

Hormone Treatment/Gender Reassignment

Due to the specialized nature of this treatment and medical implications, I am not able to complete evaluations or make recommendations regarding hormone treatment and gender reassignment. I am happy to help refer you to a licensed psychologist or medical doctor to assist you with this need and can provide counseling to help with the complex emotions associated with this process.

Service/Emotional support animals

I do not write letters, sign rental forms or otherwise endorse service animals, emotional support/companion animals. Animals are not permitted at Soul Archaeology Counseling, with the exception of service animals who are defined in RCW 49.60.218 as “any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual, or other mental disability.”

Personally, I love animals. However, I want to be mindful about my other clients’ possible allergies.

Termination

Ethically, the counselor always assesses the benefit of counseling for you. If at any point during psychotherapy I assess that I am not effective in helping you reach the therapeutic goals, or that you are non-compliant to the process, I am obligated to discuss this with you and, if appropriate, to terminate treatment. In such a case I would give you several referrals that may be of help to you. If you request it, and authorize it in writing, I will talk to the counselor of your choice in order to help with the transition. If at any time you want another professional’s opinion or wish to consult with another counselor, I will assist you with referrals, and with your written consent, I will provide them with the essential information needed. You have the right to terminate therapy at any time.