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VCS Inc. GENERAL COUNSELING SERVICES

Informed Consent

Thank you for considering our VCS Inc. General Counseling Services. Our services are a successful collaborative partnership between VCS Inc. and you. This document will review the rights and responsibilities of all parties. Please review and sign. You may ask questions at any time. We thank you for choosing VCS Inc.

*NOTE: By signing below, you acknowledge that the counseling services provided by the VCS General Counseling Program is not psychotherapy and your counselor may be an unlicensed counselor. Rest assured that the assigned counselor has gone through our VCS Training Model© and is carefully supervised by a VCS licensed mental health professional. Your assigned counselor is a “Volunteer” but that does not mean they are inexperienced.*

What is VCS General Counseling? Counseling is the formation of a relationship between the counselor and the client where a respectful and safe environment is created to allow for discussion of your thoughts, emotions and desires for your future. Our counselors will never instruct you in what path to take in your personal life but, through discussions, you will be able to arrive at decisions that have been well thought out and examined. Please note that you may be referred to our VCS Mental Health Clinic Services if recommended by your Counselor and you agree.

*Confidentiality*

Confidentiality is one of the cornerstones of effective services. However, there are a handful of situations where we are legally required to release confidential information (verbally or in writing). *Be aware that your assigned counselor and/or VCS cannot claim any privilege to protect confidential information if subpoenaed or legally requested.*  Outside of these situations, VCS and your counselor honor all confidentiality rules (i.e., HIPAA, NYS privacy rules, HiTECH, etc.), if possible. Counseling works when people feel safe, secure, and confident that what is discussed in counseling sessions does not get shared with others. Please see the below conditions under which it may be necessary for VCS Inc. to discuss your case with other professionals. Such situations include:

1. If we believe that there is a danger that you may harm yourself or others or that you are incapable of taking care of yourself.
2. If we become aware of your involvement in the abuse of children, elderly, or disabled persons.
3. If we are ordered by a court to release your records. This sometimes happens when clients are plaintiffs in lawsuits and psychological records are subpoenaed as part of that process.
4. As part of a supervision process, we have a strict protocol for the supervision of our Counselors with a VCS Mental Health licensed professional to ensure the care we are providing is based in quality and in best-practices.

*Record Keeping*

*GENERAL COUNSELING CLIENT RECORDS MAINTAINED BY VCS Inc. ARE NOT DEEMED TO BE MEDICAL RECORDS.* VCS may take notes at each counseling session. They are for our use only as a means to keep track of important contact data and your participation dates. The Counselor may at their discretion, take notes to use as content for their supervisory sessions. We maintain your records in a secure location that cannot be accessed by anyone other than employees of VCS. Furthermore, since the records we maintain are not considered medical in nature, we will be unable to respond to any request for medical records from any third party. This includes, but is not limited to, requests from attorneys, claims for Social Security Disability, Workman’s Compensation, Family Court Matters and other legal proceedings, medical providers and the like.

*Diagnosis*

VCS Inc. General Counseling services will not provide you with a formal psychiatric diagnosis as it is outside the purview of the General Counseling program. Any diagnosis shared during the sessions, is purely subjective and suggestive and does not constitute a formal diagnosis. If you desire or need a more formalized clinical experience, we can refer you to the VCS Mental Health Clinic where you will receive a diagnosis, psychotherapy, and medication prescriptions if you desire.

*Additional Rights*

It is important to note that counseling services in general do have risks. Working with difficult emotions, thoughts, and behaviors can be very upsetting. Changing your behavior, altering your beliefs, facing realities of your life can sometimes be disruptive to the relationships in your life. You may find strong feelings develop within the context of the Counselor/Client relationship. This is not uncommon and is something to be talked about and worked through. Sometimes people feel worse before they feel better. Sometimes the “feeling better” doesn’t happen fast enough. Should you feel this way, it’s important to discuss it with your Counselor. It is important to consider these risks before entering into counseling and decide whether you feel the potential rewards outweigh any possible risks. Most people who participate in our General Counseling Services find it valuable and helpful to them in thinking, feeling, and doing better.

How Long will I Be in Counseling? Many people wonder about the length of counseling. There is no one answer. As we are all individuals our experiences are varied. What works for one person just works for one person. Therefore, you and your Counselor will work closely together to understand the reason for your seeking counseling. When clients work consistently on their behalf, they achieve their goals much faster. While it is rewarding for you to end counseling once you have reached your goals, there may be an occasion you decide to leave. Here are some examples:

1. You believe that the counseling sessions are not helping you and you feel you would be better served by the VCS Inc. Mental Health Clinic, another provider, or no counseling services at all.
2. If by your actions, words or deeds, you are violent, you will be dismissed. This includes threatening behavior either verbally or physically, harassing your counselor, or any VCS Inc. staff member. This includes digital harassment, via telephone or social media or voicemail. This is not an exhaustive list. However, generally, if we feel unsafe, we reserve the right to terminate you unilaterally and immediately from the program. If this happens, we will always have your best interest in mind, and will provide you with names and numbers of another agency that provides mental health care. We, of course, cannot guarantee their availability or acceptance.

*Your Responsibilities as a Client*

1. Speak up if you have any concerns with your counselor or the agency overall. We respond to all concerns clients bring to us with all seriousness and respect. We encourage you to speak with your counselor first, as they are in positions to understand your concern and possibly help resolve it. If you are not comfortable with that, you can ask to speak with the *Director of the General Counseling Services*. Our main telephone line is (845) 634-5729 where you can ask to be further directed to the person of your choice. You can also go onto our website at [www.vcs-inc.org](http://www.vcs-inc.org) and access the staff directory.
2. You may ask for an assignment change to another Counselor. While this is disruptive to the healing process, we will honor your request. It is important to us that your experience at VCS Inc. is healing, safe and respectful. You also have the right to care without discrimination as to race, ethnicity, color, gender, sexual orientation, age, religion, or national origin. You have the right to ask questions about any aspects of sessions and about the counselor’s specific training and experience. You have the right to expect that we will behave within our professional boundaries in keeping with VCS Inc. ethical standards and fully ban counselors and clients from having any social or sexual relationships either with current or former clients/counselors.
3. You are responsible for keeping your scheduled appointments. Sessions last for approximately 50 minutes. If you miss a session without canceling or canceling within 24 hours’ notice, you will be billed for the session and are required to pay for it at or prior to the next session.
4. You are responsible for paying for your session weekly unless VCS Inc has made other arrangements for you in writing. Your fee per session is \_\_\_\_\_\_\_\_\_\_\_\_\_. If we decide to meet for a longer period, we may bill you on a prorated basis for the time. Emergency phone calls, of less than 15 minutes, will not be billed. The exception to this is if you develop a pattern of calling outside of your session. You will then be billed for our time. VCS Inc. reserves the right to reevaluate the agreed upon fee for any reason. If your financial circumstances change, please discuss the matter with your counselor as other fee arrangements can be made.
5. If you are arrears in payment for 2-sessions, your counseling sessions will cease until you pay the outstanding balance. VCS Inc. has sole discretion to assert the herein at any time and failure to do so does not constitute a waiver of this paragraph. If reasonable payment arrangements are not made or kept, VCS Inc. reserves the right to terminate services. Please know that your Counselor is not responsible for changing your payment fee or to cancel any debt you owe VCS Inc.

*Contacting Us*

Your counselor may not be available to answer your call immediately. Counselors are with other clients and can have other responsibilities which make it difficult for timely responses.

However, you can contact a receptionist during office hours and leave a message for your counselor or other staff person. We will try to return your call as soon as possible, but we ask for patience as it may take a day or two. For emergencies, we ask that you do not contact VCS Inc. but please do one of the following if you are unable to keep yourself or those around you safe:

1) contact your Local Hospital Emergency Room, or 2) call 911 and ask to speak to the mental health worker on call, or 3) call the Rockland County Behavioral Health Response Team at (845) 517-0400. We will inform you in advance of your counselor’s planned absences and provide you with the name and phone number of the counselor or mental health professional who will be providing coverage for your counselor.

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*Client Consent for Counseling*

I acknowledge that I have read and understand the foregoing. I have asked any questions as it relates to the herein and acknowledge that my counselor may not be a licensed professional. I also agree to pay the sum of \_\_\_\_\_\_\_\_\_\_ per session. I understand my rights, risks and responsibilities as a client, and my counselor’s responsibilities to me. I agree to undertake counseling services with VCS Inc. General Counseling Services. I know that I can terminate at any time for any reason. I know that I have the right to refuse any requests or suggestions made by counselor or other staff member from VCS Inc. that I deem not to be suitable to me. While I understand that my counselor has knowledge and experience, I recognize that I am the final authority of what I want to incorporate into my life from this counseling experience.

Signed\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_