



UNC
GREENSBORO

Division of Student Affairs
**Counseling &
Psychological Services**

Counseling & Psychological Services Information and Consent to Treatment

Current Location & Phone Number: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

Emergency Contact Relationship: _____

The UNCG Counseling & Psychological Services (Counseling & Psychological Services (Counseling & Psychological Services)) provides a wide range of counseling and psychological services to currently enrolled UNCG students. The services may include: in-person and virtual short term individual and group counseling, workshops, crisis intervention, and/or consultation. Our staff is committed to meeting the needs of people of diverse racial, ethnic, and national backgrounds, gender, sexual/affectional orientations, mental and physical abilities, religious/spiritual beliefs, and socioeconomic backgrounds, as well as other types of diversity.

Eligibility: Only currently registered students at UNCG may receive in-person or telemental health services. Students under the age of 18 are considered minors and may only receive services if the Consent to Treat a Minor form is completed by a parent or legal guardian and delivered or faxed to the UNCG Counseling & Psychological Services prior to the meeting with a counselor. Students who are not in the state of North Carolina at the time of care are not eligible to receive telemental health services.

Confidentiality: The personal information you share with your therapist is confidential in accordance with North Carolina Privileged Communication laws, professional ethical codes, and federal privacy regulations. Your therapist may consult with other Counseling & Psychological Services staff, or staff in the Campus Violence Response Center (CVRC) to ensure

that you receive the best treatment possible. Outside of the exceptions listed below, no information is released to parties, outside Counseling & Psychological Services, CVRC and those with a need to know within UNCG Student Health Services (SHS), without your expressed written consent. Your therapist may share information with other SHS professionals for the purpose of coordinating care, which may become part of your SHS medical record.

YOUR INITIALS HERE SHOW YOUR UNDERSTANDING OF AND CONSENT TO THE ABOVE COMMUNICATION BETWEEN CAPS STAFF, CVRC STAFF, AND OTHER PARTS OF SHS: Student Initials: _____ Date _____

Exceptions to confidentiality are as follows:

- If you are clearly likely to do physical harm to yourself or another person in the near future, it is your therapist's duty to take steps to protect your safety and the safety of others.
- If you share information about currently occurring abuse or neglect of a child or dependent adult, state law requires that your therapist report the information to the Department of Social Services.
- CPsychological Services may release information contained in your counseling record.

Initial Screening: To initiate services, you can call our office to schedule an initial phone screening, come in, schedule via the patient portal, or call in during afternoon "Same Day Service" hours, or you will be connected when you access our crisis intervention services. During your initial screening you will discuss your concerns and needs with a therapist and determine what services will be most effective. When indicated, we will help you connect with on-campus and/or community resources. *Students who have been clients here are not eligible to become graduate student trainees at the .*

Subsequent Services and Appointments: Counseling and psychiatric services are most effective when clients actively engage, help establish and work on treatment goals, complete out-of-session activities or assignments, and discuss challenging issues. Counseling and psychiatry appointments are limited; we ask that you cancel/reschedule 24-hours in advance so that another student might make use of that time. **Failure to cancel/reschedule counseling or psychiatry appointments at least 24-hours in advance will result in a \$25 no-show fee. In order to provide comprehensive care, if you are 10 or more minutes late for a psychiatry appointment, it will be cancelled and the \$25 no-show fee will be applied. Services may be terminated if you have an excessive number of cancellations or no-shows.**

I UNDERSTAND AND CONSENT TO THE \$25 NO-SHOW/LATE FEE.

Initials: _____ **Date:** _____

Telemental Health and Telehealth Services: Telemental health or telehealth (for psychiatry) services may be offered to improve access to counseling services to enrolled UNCG students in the state of North Carolina when significant barriers to receiving in-person counseling services exist.

In order to receive TMH services, it is required that you:

- Be in the state of North Carolina at the time of service delivery.
- Provide your location at the start of each telemental health session.
- Engage in TMH sessions only from a private location where you will not be heard or interrupted. Your provider may reschedule your session if you are not in a private location.
- Do not record sessions. UNCG Counseling & Psychological Services will not record your sessions without your prior consent.
- Provide an emergency contact who can be accessed in the event that your provider believes your safety/safety of others is at risk.
- In addition, your provider may require that you create a safe environment at your location during treatment. This may mean securing/disposing of firearms, excess medication, and/or objects used for self-harm.

I have the following rights with respect to telemental health and telehealth:

- I have the right to withhold or withdraw consent at any time without affecting my right to future care or treatment or risking the loss or withdrawal of any benefits to which I would otherwise be entitled.
- The laws that protect the confidentiality of my medical information also apply to telemental health as do the exceptions to confidentiality.
- The same laws that give me the right to access my medical information and copies of medical records in accordance also apply to TMH and TH.
- The dissemination of any personally identifiable images or information from the TMH or TH interaction to supervisors or other entities shall not occur without my consent.

I understand the following potential benefits, risks, consequences, and limitations of telemental health:

- TMH may offer you greater access to services but should not be viewed as a substitute for face-to-face counseling with a mental health provider or medication management by a physician. It is an alternative form of counseling with certain limitations.
- TMH may not be appropriate if you are having a crisis, acute psychosis, or suicidal or homicidal thoughts.

- TMH may lack visual and/or audio cues, which may decrease non-verbal communication, requiring increased verbal clarification.
- TMH may have disruptions or delays in the service and quality of the technology used. The most reliable backup is a phone. Therefore, it is recommended that you always have a phone available and that your provider knows your phone number. If you cannot access your phone, please send a secure message to your provider via the Student Health Services patient portal.
- In rare cases, security protocols could fail and your confidential information could be accessed by unauthorized persons.

Urgent Concerns and Emergency Resources: During business hours, if you are experiencing a mental health crisis or urgent mental health need, same day services are available. If you are experiencing urgent mental health needs outside of office hours, you can speak with an on-call counselor at 336-334-5874. If you are experiencing a crisis, call the UNCG Police at 336-334-4444, call 911, or go to your nearest emergency room.

Communication: If you opt into the service, you will receive appointment reminders through the patient portal and be alerted through your UNCG email of such messages. Additionally, Counseling & Psychological Services providers only communicate with you through Patient Portal Secure Messages or via phone, if you grant permission. You will be informed of this secure communication through your UNCG email address and will then need to log in to your Patient Portal to read secure messages. Counseling & Psychological Services staff will not communicate with you via any social media networking site.

On-Site and In-Person Services: You understand that by engaging in on-site and in-person services at the UNCG Student Health Services Counseling & Psychological Services, you are assuming the risk of exposure to COVID-19 or other public health risks. The Counseling & Psychological Services has taken steps to mitigate the risk of exposure to COVID-19 and other public health concerns, including but not limited to adapting our clinic and office areas.

You also have a responsibility to minimize exposure of public health concerns. You may only receive on-site and in-person services if you are symptom free. You are required to complete a symptom screening before engaging in on-site and in-person services. You agree to take certain precautions consistent with university policy, as well as state and national guidelines. You are required to engage in social distancing and masking mitigation strategies at all times throughout Student Health Services. If you do not or are unable to adhere to these safeguards, you will be offered a telemental health service or be provided with a community health referral.

If we become aware of someone in the clinic who has developed symptoms, tested positive for COVID-19, or has been identified as a close contact of someone who has tested positive, we will

notify the University. Should this occur, we will only provide the minimum required information. The University will conduct contact tracing.

MY INITIALS INDICATE THAT I AGREE TO THIS POTENTIAL DISCLOSURE OF PRIVATE HEALTH INFORMATION TO THE UNIVERSITY WITHOUT AN ADDITIONAL SIGNED RELEASE. Initials: _____ Date: _____

Your Rights: As counselors, psychologists, psychiatrists, psychiatric nurse practitioners, and social workers, we uphold ethical and professional standards. If you have any questions/concerns about your treatment at the Counseling & Psychological Services, please bring these issues to the attention of your therapist or the CAPS Associate Director/Director. You have the right to discontinue therapy at any time, or request a change in therapist. We request that you let your therapist know of your intentions, so that other treatment options may be suggested; or, you may complete a "Transfer of Provider Request" form which you can ask for at the Counseling & Psychological Services front desk. You also have the right to complete a [Comments, Concerns, Complaints and Kudos](https://shs.uncg.edu/about/comments) (<https://shs.uncg.edu/about/comments>) feedback form that will be addressed by an SHS administrator. Please refer to the Student Health Services Rights and Responsibilities Statement for additional information.

I have read and understand the above information, and I consent to treatment and to the public health guidelines at the UNCG Counseling & Psychological Services. If I have any questions I will discuss them with my provider.

Signature of client: _____

Date _____