

**THE COUNSELLING CENTRE (TCC)
AT CARIBBEAN GRADUATE SCHOOL OF THEOLOGY
18-20 West Avenue, Kingston 8**

INFORMED CONSENT FOR COUNSELLING SERVICES

COUNSELLING SERVICES

The Counselling Centre provides treatment which will include individual therapy, family therapy, couples therapy, group therapy, play therapy and Employee Assistance Programme (EAP). **Appointments are scheduled 9 a.m. to 7p.m. Monday through Thursday and 9 a.m. to 4 p.m. Fridays.**

FEES

Fees are charged based on the type of counselling services required:

1. All professional fees are due immediately before psychological services are rendered.
2. Psychological services provided are normally for an hour and half in duration for intake individual sessions (1st sessions), an hour for subsequent sessions and two hours for couple or family sessions. Beyond this time (half an hour or more) the client will be charged for an additional session.
3. Clients who arrive late for their counselling sessions will receive the remaining minutes of the session. However, full payment is expected.
4. Clients who arrive later than 45 minutes for their session are required to reschedule their session. Clients may be charged a late/no show cancellation fee.
5. Additional professional fees such as letters and reports not covered by treatment sessions will attract a separate professional fee.

If, due to an illness or emergency, you are unable to attend your scheduled appointment, please call The Counseling Center and cancel the appointment as far in advance as possible.

CONFIDENTIALITY

A written case record containing personal data, interview notes, test results, and necessary psychological reports will be kept on each client. **Your record never leaves the Counselling Centre.** This information is **privileged and will be held in strict professional confidence, except in cases:**

- when the client or others are in personal and imminent danger.
- when the laws or agencies or civil authorities are at issue. Your counsellor is **required by law** to report cases involving child abuse and/or sexual molestation, abuse or neglect of the elderly or disabled as well as certain criminal activities.
- when the client's case records are subpoenaed by a court of law.
- when the counsellor deems it necessary to consult with other professionals about a client.
- where the client is in direct danger through suicidal intent to cause harm to self.

- where the client is a dangerous threat to others with the homicidal intention of doing harm to another individual. The counsellor has the ethical responsibility to inform such an individual and or notify the police.
- when the counsellor is engaging in educational and training purposes. The Counselling Centre (TCC) is affiliated with the Caribbean Graduate School of Theology and assist in the training of Master’s level counselling psychology students. All students at TCC are under the supervision of the TCC Director (PhD level Clinical Counsellor). At times, students may find it necessary to share the content of counselling interviews, including cases notes, audio recorded sessions, and/or videotaped sessions. **In such cases, every effort will be exerted to protect the identity of the client/subject.**

CONSENT TO TREATMENT

I have read (in full), understood and agreed to the above information. I have been given appropriate opportunity to discuss the procedures and conditions with my counselor and I am satisfied that my queries have been answered to the fullest extent. I consent to the treatment and services offered to me (or my child if said child is the client) with full knowledge and understanding of the procedures entail herein. I also understand that I have the right to stop such treatment or services at any time. I authorize my counsellor to release the confidential information associated with my client record under the above conditions necessary.

Name (Client/Parent/Guardian) _____

Name (Spouse/Parent) _____

Signature _____

Date _____

Signature _____

Date _____

Counsellor’s Signature _____

Date _____

Clinical Supervisor _____

Date _____