



## Confidentially & Liability Agreement

### Client Bill of Rights - Your Rights Regarding Confidential Information About You.

- Receive respectful treatment
- Refuse treatment or a particular intervention strategy
- Ask questions at any time
- Have full information about fees, method of payment, insurance reimbursement, etc.
- Choose your own lifestyle and to have that choice respected by your counselor.
- Have full information regarding counselor qualifications to practice, including licensure or registration, training, experience, etc.
- Consult as many counselors as you choose
- Talk about any part of your counseling with anyone you choose
- Withdraw informed consent at any time
- Decline any referrals the therapist may suggest
- Inspect and receive a copy of any material to be disclosed to another individual or agency/organization
- **Right to Request Confidential Communication:** You have the right to request that we communicate with you about confidential matters in a certain way or at a certain location. For example, you may ask that we only contact you at work or by mail. To request confidential communications, you must make your request in writing to the Agathos INC professional who is treating you. We will not ask the reason for your request. Your requests must specify where you wish to be contacted.
- **Right to Request Restrictions:** You have the right to request a restriction or limitation on the confidential information we use or disclose about you. You also have the right to request a limit on the information we disclose about you to someone who is involved in your care or the payment for your care. To request restrictions, you must make your request in writing to the Agathos INC professional who is treating you. In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure, or both; and (3) to whom you wish the limits to apply
- **Right to a Paper Copy of this Notice:** You have the right to a paper copy of this notice. You may ask us to provide you a copy of this notice at any time. Even if you have agreed to receive this notice electronically, you are also entitled to a paper copy of this notice.

**How We May Use and Disclose Medical Information About You** - The following categories describe different ways that we use and disclose medical information. For each category of use or disclosure, we will explain what we mean. Not every use or disclosure in a category will be listed. However, all of the ways we are permitted to use and disclose information will fall within one of the categories.

- **For Treatment:** We may use information about you to provide you with treatment or services. We may disclose information about you to doctors, therapists, nurses, case managers, medical students, or other personnel who are involved in taking care of you at your request only.
- **Family and Friends:** We may use or disclose information to a family member, a personal representative, or another person responsible for your care. We may also give information to someone who helps pay for your care.

In addition, we may disclose confidential information about you to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status, and location.

- For Health Care Operations: We may use and disclose information about you for our operations, to make sure that all of our clients receive quality care. For example, we may use confidential information to review our care and services and to evaluate the performance of our staff in caring for you. We may also disclose information to doctors, therapists, nurses, medical students, and office staff for review and learning purposes.
- Appointment Reminders: We may use and disclose information to contact you as a reminder that you have an appointment.
- As Required by Law: We will disclose information about you when required to do so by federal, state, or local law. For example, Ombudsman, Child Protection, and a Valid Court Order. To Avert a Serious Threat to Health or Safety: We may use or disclose information about you when necessary to prevent a serious threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.
- Law Enforcement: We may release medical information if asked to do so by law enforcement officials:
  - In response to a court order, subpoena, warrant, summons or similar process.
  - To identify or locate a suspect, fugitive, material witness, or missing person.
  - About the victim of a crime if, under certain limited circumstance, we are unable to obtain the person's agreement.
  - About the death we believe may be the result of criminal conduct.
  - About criminal conduct at Agathos INC.
  - In emergency circumstances to report a crime, the location of the crime or victims, the identity, description or location of the person who committed the crime.
- Coroners, Medical Examiners, and Funeral Directors: We may release information to a coroner, medical examiner, or funeral director. This may be necessary to identify a deceased person or determine the cause of death.
- National Security and Intelligence Activity: We may release information about you to authorized federal officials for intelligence, counterintelligence, and other national security activities authorized by law. Protective Services for the President and Others: We may disclose medical information about you to authorized general officials so they may provide protection to the President, other authorized persons, or foreign heads of state or conduct special investigations.

### **Risks and Benefits**

When receiving treatment for health problems there are usually both risks and benefits. It is the same for mental health care and counseling. Risks or side effects may include discomfort from sharing personal information, or discomfort from trying/applying treatment strategies to your daily living routine. There also may be times of strong, sometimes unpleasant feelings. However, this is a normal part of the counseling process and can be discussed with your counselor at any time.

Although there are possible risks to counseling, the possible benefits can be even more substantial. These benefits include an increase in ability to cope with life stressors, decrease in mental health symptoms, better relationships, increased self-understanding and acceptance, and an overall feeling of being understood and unconditionally accepted. These are a few examples of potential benefits. As the client, or guardian of the client, you have numerous rights (refer to Client's Bill of Rights). One of which is the right to refuse or decline any proposed counseling methods or services. However, your refusal may have a number of consequences including: symptoms or problems may become chronic or intensify; symptom relief may take longer to achieve; your treatment options may decrease; et cetera.

## **Confidentially**

During the course of serving your interests, it may be necessary to share information with Health Care Providers or Business Associates. The following are examples or instances where information may be shared:

- Biblical Counselors and/or Interns receiving supervision will need to consult with their supervisor to ensure you are receiving the best clinical services possible
- Collaborating with those professionals to provide the best and most consistent care

## **LIMITS OF CONFIDENTIALITY STATEMENT**

All confidential information provided to Agathos, is strictly confidential by our Biblical Counseling staff and will not be revealed to any outside person or agency without your written permission on an information release consent form, except when required by law.

You should know that there are certain situations in which all counselors are mandated by Tennessee or Case Law to reveal information to other persons or agencies without your expressed permission or consent.

### **These situations are:**

1. If you threaten bodily harm or death to another person, we are required to inform the intended person, as well as appropriate law enforcement agencies.
2. If there is sufficient evidence presented in the course of ministry to suspect that a child or elderly person is being or has been abused, either by neglect, assault, battery or sexual molestation, we are required to report the reasonable suspicion of such abuse to appropriate authorities.
3. If a court of law issues a legitimate subpoena or court order, we are mandated by law to provide the information specifically described in the subpoena.
4. If there is expressed intention to commit bodily harm to one's self (i.e. suicide), we are required by law to inform necessary individuals and/or agencies to prevent harm.

The professionals at Agathos INC are committed to obeying all Federal, State, and Local laws and regulations regarding Privacy Practices. If any other uses or disclosures than the ones listed above are needed, information will only be released with the written authorization of the individual in question. This written authorization may be revoked at any time by the individual, as provided by law. If for some reason there is a need to share information in your record with a health care professional, you will first be consulted and asked to sign a consent form authorizing transfer of the information.

## **BIBLICAL CARE MINISTRY IS NOT PROFESSIONAL PSYCHOTHERAPY**

The mission of Biblical Counselors at Agathos is to bring healing, hope, and wholeness to individuals, families, and communities by expanding and equipping spiritually grounded individuals through Biblical and psychologically informed care and counseling. Biblical care ministry is not based on a medical or professional model consequently Biblical counselors care for people rather than treat disorders. Biblical counselors cannot provide a diagnosis of mental disorders or psychotherapy to treat disorders. Consequently, Biblical counseling is not covered by most health insurance. The credentials of our counselors are NOT to be equated with, nor are they represented as being equal to licensing by the State of Tennessee as a professional licensed therapist/psychotherapist. Because they are Biblical Counselors performing a Biblical Care function, Agathos Biblical counselors do not fall under the regulatory license requirements of the State of Tennessee.

**Confidentiality & Liability Agreement:**

I, \_\_\_\_\_, have read and understand the above Disclosure Statement and acknowledge that the ministry of Agathos is the type of counseling I desire to receive. I have also read and accept the Limits of Confidentiality Statement above and agree to the terms of the Pastoral Care/Prayer Ministry Agreement.

**Client Signature** \_\_\_\_\_ **Date**

**Note: This page must be signed and returned with your INTAKE FORM before counseling begins.**

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