

Washtenaw Community College

4800 E. Huron River Drive Ann Arbor, MI 48105-4800

Informed Consent

Welcome to your counseling session at Washtenaw Community College (WCC). Your counselor holds a Master's degree in Counseling and is a Licensed Professional Counselor (LPC) in the State of Michigan.

Confidentiality

Your counselor adheres to Federal and State laws and professional ethical standards, including retaining personal counseling records for seven years, or as otherwise required or permissible under applicable laws. Counseling records (i) are confidential, (ii) are maintained and stored in a secure electronic format with access restricted to authorized staff and (iii) may only be released when mandated by a court or authorized by your signature (or that of your legal representative), except as otherwise required or permissible by law. We are legally required to disclose information in some situations to protect people from harm, even though that requires revealing some information about a client's treatment. The following situations are examples of exceptions to confidentiality:

- If we believe that a client is threatening serious harm to another person, we are required to take protective actions which may include but not limited to notifying appropriate WCC personnel, notifying the potential victim, notifying the police and/or seeking appropriate intervention.
- If a client threatens to hurt him/herself, we may be required to contact others who can help provide protection from harm.
- If we learn from first-hand knowledge that a child or incapacitated adult is being abused, we may be required to file a report with an appropriate agency.
- If your records are requested by a proper subpoena or court order, we may be required to turn your records over to the court.
- If you are a minor and/or a dual enrolled student, we may be required to communicate with your home-school counselor in part of the collaborative efforts to ensure your safety and well-being. WCC personal counselors adhere to the Michigan Mental Health Code, Public Act 258 of 1974, and more specifically MCL 330.1707 Rights of Minor, indicating the following:
 - A minor 14 years of age or older may request and receive mental health services and a mental health professional may provide mental health services, on an outpatient basis, excluding pregnancy termination referral services and the use of psychotropic drugs, without the consent or knowledge of the minor's parent, guardian, or person in loco parentis.
 - Except as otherwise provided in this section, the minor's parent, guardian, or person in loco parentis shall not be informed of the services without the consent of the minor unless the mental health professional treating the minor determines that there is a compelling need for disclosure based on the substantial probability of harm to the minor or to another individual, and if the minor is notified of the mental health's professional's intent to inform the minor's parent, guardian, or person in loco parentis.

- Services provided to the minor under this section shall, to the extent possible, promote the minor's relationship to the parent, guardian or person in loco parentis, and shall not undermine the values that the parent, guardian, or person in loco parentis has sought to instill in the minor.

Client Responsibilities

To ensure that counseling is productive, it is essential that you attend all sessions and actively participate in the process. Please contact our office if you cannot attend a scheduled appointment. You may contact the secretary or your counselor for the purpose of rescheduling that appointment; otherwise, your counselor may contact you to reschedule.

Length and Frequency

Most counseling sessions are scheduled once per week and will last between 45 and 50 minutes depending upon the presenting problem. Appointments are requested. However students may be seen on a walk-in basis if a counselor is available. **The services that are provided by your counselor at Washtenaw Community College are intended to help support you in your academic and personal goals. Counseling services provided by your counselor are not all inclusive and are not intended to diagnose or treat specific mental disorders. Referrals to an outside agency for certain specialized areas such as substance abuse counseling, serious personality disorders, and/or severe depression may be made.** Your counselor provides short term solution-focused counseling, generally meaning 4-8 sessions. Depending on your presenting concerns, your counselor may provide a referral to a counselor in our office or to an outside agency. If you desire more intense or long term services a referral may be provided.

Supervision of Counselors-In-Training & Collegial Consultations

Limited Licensed Professional Counselors receive supervision from trained fully Licensed Counselors. Limited Licensed Counselors will inform students of their training status during intake. Counselors engage in peer review with colleagues or supervisors regarding professional development and/or case consultation. All are bound by the confidentiality policy noted above.

Fees/Services

There will be no charge for Washtenaw Community College students to receive counseling services at the college. WCC students enrolled in the current semester are entitled to an initial consultation. Counseling services at WCC are only available to currently enrolled WCC students.

Contacting your Counselor

If you need to contact your counselor, leave a message at his/her direct extension: _____ . The contact number for the Counseling & Career Planning Department is 734-677-5102. If your call is an emergency, you may contact the following:

***Campus security: (734) 973-3411 (If on campus) ext.: 3411 from a campus phone
*911 if off campus**

***CAP Student Assistant Program, 24/7, Toll Free 1-866-227-3834**

***U-M Psychiatric Emergency Services: (734) 996-4747**

***St. Joseph Mercy Hospital Emergency Room: (734) 712-3000**

***SAFE House Crisis Hotline: (734) 995-5444**

***RAINN- Rape Abuse & Incest National Network (800) 656-4673**

If you have any questions regarding informed consent, now, or at any time, please feel free to let your counselor know. Please sign below to indicate that you have read this and have had an opportunity to ask any questions. By signing below you are indicating your consent to engage in the counseling process.

I have read this document in its entirety and, having had an opportunity to ask any questions I may have, I understand the information contained in it, and I agree to participate in the counseling process under the conditions that have been described to me.

Student's Name (print)

Student's Signature

Date

Witness (print)

Witness Signature

Date

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