



Professional Disclosure Statement
And Consent for Treatment
with Holly D. French, LPC

The majority of this document is mandated by South Carolina State Law; it is provided for your protection. Mindful Upstate has tried to anticipate any risk you may face as a result of being in therapy. If you have any questions regarding the documents you have received, please feel free to discuss them with Holly French, LPC.

Contact Information: Mindful Upstate is located at and receives mail at 3523 Pelham Rd. Suite B, Greenville, SC 29615. Usual office hours are Friday 8:30 a.m. to 5:00 p.m. Clients are seen by appointment only, and alternate days and times may be considered at our discretion upon request. Our telephone number is 864-887-5139.

Personal Qualifications: Holly French is a Licensed Professional Counselor and is director of Mindful Upstate. Please note some of her credentials listed below:
~ South Carolina Licensed Professional Counselor

Holly French received a Bachelor's of Science degree in Human Development and Family Studies from Auburn University and received a Master's of Education degree in Community Counseling from Clemson University.

Services: Holly French provides a variety of psychotherapeutic services including:

- Therapeutic psychosocial assessment
- Individual counseling for children, adolescents, and adults
- Couples and family counseling
- Counseling involving treatment of trauma, anxiety disorders, depression and mood disorders, attention deficit-hyperactivity disorder and behavioral disorders, anger management, family and life adjustment problems, and women's issues

Fees: It is customary to pay for professional services at the time services are rendered. Payment will be expected at each visit, unless alternative arrangements have been made with Holly French in advance. Hourly charges for services are as follows: initial assessment is \$160, follow-up assessment is \$120, family and couples counseling is \$120, and individual counseling is \$105. If you have questions about fees and payment options, please discuss with Holly French as needed.

Confidentiality: The information you share in psychotherapy is protected health information and is generally considered confidential by South Carolina statute law and federal regulations. Your therapy file can be subpoenaed in South Carolina through a court order (signed only by a judge) but is



considered privileged in the federal court system. Holly French is mandated by standards- through Duties to Warn- to breach confidentiality if she discovers: 1) you are threatening self-harm or suicide 2) you are threatening to harm another or homicide 3) a child has been or is being abused or neglected and/or 4) a vulnerable adult has been or is being abused or neglected. Additionally, clients who have communicable diseases must consider that there is a duty to warn if the disease and/or behaviors put others at risk. Finally, if you wish your protected health information released to another party, you must sign a specific release of information.

Ethics: Holly French follows the Code of Ethics of the American Counseling Association and the South Carolina Board of Examiners for Licensed Professional Counselors. Any type of sexual behavior between therapist and clients is unethical. It is never appropriate and will not be condoned.

Informed Consent: You will be asked to sign the last page of this document. Your signature verifies you have been given this document and the HIPAA document that follows; that you have read and understand these documents; and that you consent to treatment. Further, you need to be aware:

- Treatment isn't always successful and may open unexpected emotionally sensitive areas.
- Holly French is not a physician and cannot prescribe medications.
- Holly French may need to consult with your physician, attorney, or other counselor.
- Holly French is not available 24 hours a day.
- Appointments may be successfully cancelled as late as 24 hours prior to the scheduled time. If this is not done, you will be charged a \$50 fee for a missed appointment.
- Holly French is licensed through the South Carolina Board of Examiners for the licensure of professional counselors, marriage and family therapists, and psycho-educational specialists; this Board is located in the Synergy Center (Kingstree Building) in Columbia, SC 803-896-4652 (mailing address is P.O. Box 11329, Columbia, SC 29211-1329).
- Holly French is the sole proprietor of Mindful Upstate, and she will be your primary contact for appointments, problems, complaints, and commendations.



Health Insurance Portability and Accountability Act of 1996 (also known as HIPAA)

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully. This document may be updated without notice, so please review it each time you visit us. A copy of this statement is always available upon request.

All information revealed by you in a counseling or therapy session and most information placed in your counseling or therapy file (all medical records or other individually identifiable health information held or disclosed in any form [electronic, paper, or oral]) is considered “protected health information” by HIPAA. As such, your protected health information **cannot be distributed to anyone else within your express informed and voluntary written consent or authorization**. The exceptions to the are defined immediately below. Additional information regarding your rights as a client can be found in your therapist’s/counselor’s Professional Disclosure Statement and Consent for Treatment.

Use or disclosure of the following protected health information does not require your consent or authorization:

1. Uses and disclosures required by law- like files court ordered by a judge
2. Uses and disclosures about victims of abuse, neglect, or domestic violence- like the Duties to Warn explained in your therapist’s/counselor’s Disclosure Statement
3. Uses and disclosures for health and oversight activities- like correcting records or correcting records already disclosed
4. Uses and disclosures for judicial and administrative proceedings- like a case where you are claiming malpractice or breach of ethics
5. Uses and disclosures for law enforcement purposes- like if you intend to harm someone else (see Duties to Warn in your therapist’s/counselor’s Disclosure Statement)
6. Uses and disclosures for research purposes- like using client information in research; always maintaining client confidentiality
7. Uses and disclosures to avert a serious threat to health or safety- like calling Probate Court for a commitment hearing
8. Uses and disclosures for worker’s compensation- like the basic information obtained in therapy/counseling as a result of your worker’s compensation claim



Your Rights as a Counseling/Therapy Client under HIPAA

1. As a client, you have the right to see your counseling/therapy file. Psychotherapy notes are afforded special privacy protection under the HIPAA regulations and are excluded from this right.
2. As a client, you have the right to receive a copy of your counseling/therapy file. This file copy will consist of only documents generated by this office. You will be charged copying fees at \$.20 per page. Psychotherapy notes are afforded special protection under the HIPAA regulations and are excluded from this right.
3. As a client, you have the right to receive amendments to your counseling/therapy file.
4. As a client, you have the right to receive a history of all disclosures of protected health information. You will be charged copying fees at \$.20 per page.
5. As a client, you have the right to restrict the use and disclosure of your protected health information for the purposes of treatment, payment, and operations. If you choose to release any protected health information, you will be required to sign a Release of Information form detailing exactly whom and what information you wish disclosed.
6. As a client, you have the right to register a complaint with the Secretary of Health and Human Services if you feel your rights, herein explained, have been violated.

Prior to your counseling, you will receive 1) an exact duplicate of these two pages and 2) your counselor's Professional Disclosure Statement and Consent for Treatment- both for your personal records. It will be necessary for you to sign a certificate indicating that you have received, read, and understand both documents. This certificate will be placed in your counseling file. Please do not sign the certificate if you do not understand any part of the HIPAA Client's Rights or the Professional Disclosure Statement and Consent for Treatment. Your counselor will be happy to explain these documents further.

Page 5 is the signature certificate and you will leave it with Holly French.

Thank you!



Certificate of Receipt

I acknowledge that I have received and read Mindful Upstate's **Professional Disclosure Statement and Consent for Treatment** and the **HIPAA Client's Rights**. I further acknowledge that I seek and consent to treatment with Holly French, LPC. My signature below confirms that I understand and accept all the information contained in Mindful Upstate's **Professional Disclosure Statement and Consent for Treatment** and the **HIPAA Client's Rights**.

Print name of client

Signature of client/legal guardian of minor

Date