

Student Health Centers Behavioral Health Counseling Services (BHCS) INFORMED CONSENT– Minors 12 Years of Age or Older

Mission: Palomar College provides students with Behavioral Health Counseling Services (BHCS) through the Student Health Services Department. BHCS is a safe place to talk with someone privately about any concern. This may include stress, loneliness, anxiety, depression, adjustment challenges, relationship difficulties, managing an existing behavioral health condition, questions about identity or other issues. BHCS provides time-limited counseling services, limited crisis support and outreach and referral services. BHCS does not provide long-term therapy, psychiatric medication or on-call or after-hours services. Currently enrolled students whom have paid the semester's health fee are eligible for services.

Treatment of a Minor Child: BHCS requires the consent of both parents who have legal custody prior to providing any services to a minor child. If any question exists regarding the authority of Representative to give consent for such services, BHCS will require the parent/legal guardian to submit supporting legal documentation prior to the commencement of services.

In the State of California, minors age 12 years and older may consent to their own outpatient mental health services if the minor meets the following criteria:

Mature enough to participate intelligently in the outpatient services AND would present a danger of serious physical or mental harm to self or others without the treatment OR is the alleged victim of child abuse (California Family Code 6924/California Health & Safety Code 124260).

Risks and Benefits of Therapy: Mental health counseling can have both benefits and risks. Participating in counseling may include reduced stress and anxiety, a decrease in negative thoughts and self-harming behaviors, improved interpersonal relationships, increased comfort and success in social, school and family settings or solutions to specific problems. There is no guarantee that counseling will "cure" or improve any condition.

Participating in counseling may also include discussion of personal challenges and frustrations, an increase in uncomfortable feelings such as sadness, guilt, anger or frustration or remembering and discussing unpleasant events. This is considered normal for counseling.

Confidentiality: The information disclosed by the client is generally confidential and will not be released to any third party without written authorization from the client and/or the client's Representative.

EXCEPTIONS – BHCS HAS A LEGAL RESPONSIBILITY TO DISCLOSE INFORMATION WITHOUT YOUR PERMISSION AS FOLLOWS

- You are likely to harm yourself or someone else or are a danger to the college community.
- A family member informs BHCS that you are a threat to yourself or someone else or are a danger to the college community.
- Reasonable suspicion of the abuse or neglect of minors exists, including sexual exploitation as defined by AB 1775.
- Reasonable suspicion of the abuse or neglect of dependent adults or the elderly exists.
- A valid court order is issued or for the disclosure of your records or required pursuant to a legal proceeding.
- Federal officials conducting national security and intelligence activities may require disclosure of a client's records. By law, BHCS cannot reveal if such a disclosure has occurred.
- Inability to care for yourself regarding food, clothing or shelter.

NOTE: BHCS reserves the right to engage in professional and clinical consultation with the Vice President of Student Services, Dean of Counseling Services, Director of Student Affairs, Director of Student Health Services and/or Campus Police and other professional staff within Student Health Services to coordinate care and safety, especially if the client is an active danger to him/herself or others.

Services:

<u>Intake</u>

During your first meeting, a counselor will review the concerns and circumstances with respect to your personal history to help understand what led you to seek counseling services. The goal of this session is to decide on a course of action to best meet your needs. This may include: your concern has been resolved and you choose not to schedule further counseling, you may be referred to another on-campus resource or an off-campus resource, or continued services with a therapist at BHCS may be scheduled.

Duration/Type of Services

BHCS incorporates a brief therapeutic model with an emphasis on developmentally-oriented therapy directed at helping students succeed in the college environment. The number of counseling sessions are determined by a clinical assessment and the BHCS counselor/supervisor. When specialized or longer term services are needed, we can assist in making referrals to off-campus professionals. No counseling will be conducted via email. Counselors do not provide excuses for missing classes. Counselors are not able to be included as personal or professional references for job or school related applications or provide recommendation letters for students who are clients at BHCS.

Crisis Policy and Emergencies

All appointments may be shortened or rescheduled in the event of a presenting crisis or emergency. BHCS does not provide afterhours services including Crisis Services. If you are in a crisis situation or have an emergency please call:

ON CAMPUS - Campus Police 760-891-7273

OFF CAMPUS - San Diego County Crisis Line 1-888-724-7240 or 911

Scheduling and Cancellation Policy

Please arrive on time for your appointment. If you are you are unable to keep your appointment, please call to cancel and/or reschedule. We try to arrange initial counseling appointments promptly, however, a wait for appointments is common during busy periods of the year. If you consider your situation an emergency, please let our staff know. It's best to schedule appointments during times that you are not scheduled to be in class.

Billing and Fees

All students who are currently enrolled in classes and have paid the student health fee may utilize BHCS at no cost.

NOTE: A "no show" fee of \$5.00 will be charged to established clients (clients whom have signed the INFORMED CONSENT) that do not show up for a scheduled appointment and have not called to cancel or reschedule the appointment. If a student is late to their appointment by 10 or more minutes, the staff reserves the right to cancel the appointment and count as a no show. Three "no show" appointments within the academic semester disqualifies you from receiving on-campus therapy appointment for the semester. However, students will remain eligible for crisis appointments and referral services to off-campus resources.

Please initial if you consent to the submission of information necessary for statistical, licensure, funding and billing purposes, including Medi-Cal and/or LEA Medi-Cal billing option through electronic, paper or computer media.

Hours of Operation/Contact

Monday – Thursday 8:00am to 4:30pm Friday 8:00am to 3:30pm

Phone: (760) 891-7531

CONSENT STATEMENT: Please sign below to indicate that you understand the above policies, and have had the opportunity to ask questions and agree to participate in mental health counseling in accord with these policies.

Signature of Client (if Client is 12 years and older) and Printed Name	Date
Signature of Present(s) or Legal Guardian (relationship to Client)	Date
Behavioral Health Counselor's Signature and Printed Name	Date