

12 Crow Canyon Court, Suite 210, San Ramon, CA 94583

Notice Of Privacy Practices

{Short Version}

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.

My Commitment to your Privacy

My practice is dedicated to maintaining the privacy of your personal health information. I am required also by law to do this. These laws are complicated, and I wish to provide you with this important information. This page is a shorter version of the full, legally required Notice of Privacy Practices (NPP), which I have printed out and placed for you to read in my waiting room. Please refer to the full notice for more information. Since I can not cover all possible situations in this notice, please contact me with any additional questions you may still have after reading this notice. My phone number and email address are listed at the end of this page.

I will use the information about your health, which I receive from you or from others, mainly to provide you with **treatment**, to arrange **payment** for my services, or for some other business activities, which are called in the law, health care **operations**. After you have read this NPP, I will ask you to sign a Consent Form to let me use and share your information. If you do not consent and sign this form, I cannot treat you.

If you or I want to use or disclose (send, share, release) your information for any other purposes, I will discuss this with you and ask you to sign an Authorization Form to allow this.

In all ordinary circumstances, I will keep your health information private. There are some unusual times when the law requires me to use or share it, such as:

1. When there is a serious threat to your health and safety or the health and safety of another individual or the public. I will only share information with a person or organization who is able to help prevent or reduce the threat.
2. Some lawsuits and legal or court proceedings.
3. If a law enforcement official requires me to do so.
4. For Workers Compensation and similar benefit programs.

There are some other situations like these but which do not happen very often. They are described in the longer version of the NPP.

Your Rights Regarding your Health Information

1. You can ask me to communicate with you about your health and related issues in a particular way or at a certain time. For example, you can ask me to call you at home, and not at work to schedule or cancel an appointment. I will try my best to do as you ask.
2. You have the right to ask me to limit what I tell certain individuals involved in your care or in the payment of your care, such as family members and friends. While I do not have to agree to your request, if I do agree, I will keep our agreement except if it is against the law, or in an emergency, or when the information is necessary to treat you.
3. You have a right to look at the health information I have about you such as your medical and billing record. You can even get a copy of these records but I may charge you. Contact me to arrange how to see your records.
4. If you believe the information in your records is incomplete or incorrect, you can ask me to make some kinds of changes (called amending) to your health information. You have to make this request in writing and send it to me. You must tell me the reason you want to make these changes.
5. You have a right to a copy of this notice. If I change this notice, I will post it in the waiting room, or you can request a copy of the current notice from me at any time.
6. You have the right to file a complaint if you believe your privacy rights have been violated. You can file a complaint with the Secretary of the Department of Health and Human Services. All complaints must be in writing. Filing a complaint will not change the health care I provide to you in any way.

If you have any questions regarding this notice or my health information privacy policies, please contact your therapist: Mindy McHugh, at (925) 855-1320 by phone, or by email at Mindy@MindyMcHugh.com.

The effective date of this notice is April 14, 2003.

Client–Therapist Contact: Proper and Improper Conduct

This brochure has been written to help you understand what is proper and improper conduct for a therapist, and what responses are available to you as a consumer. It may raise issues that you have not considered before. However, if you are well informed, you will be better able to make sure your needs get met in therapy.

Although most therapists are ethical people (that is, good and law-abiding people) who care about their clients and follow professional rules and standards in their practice, there are a very few who do not consider what is best for their clients and who behave unethically. These issues apply to any mental health worker: psychologists, psychiatrists, social workers, counselors, clergy, nurses, or marriage and family therapists.

Therapist Behaviors That May Not Be OK

There will be times in your therapy when it might be important, even if it is very uncomfortable for you and your therapist, to discuss your feelings and concerns about sex. In fact, such discussions may be needed if you are to benefit from your therapy. **However, sexual contact is never a proper part of any sex education or sex therapy.**

Many caring therapists sometimes show their feelings through touch. These forms of physical contact in therapy, such as a handshake, a pat on the back, or a comforting hug, may not concern you. But you are the best judge of the effects that any touching may have on you. If your therapist engages in any type of physical contact that you do not want, tell him or her to stop, and explain how you feel about that contact. A responsible therapist will want to know about your feelings and will respect your feelings without challenging you.

If your therapist makes sexual comments or touches you in a way that seems sexual to you, you are likely to feel discomfort. Trust your feelings. Do not assume that your therapist must be right if it feels wrong to you.

There are warning signs that a therapist may be moving toward sexual contact with you. The therapist may start talking a lot about his or her own personal problems, giving you gifts, writing letters to you that are not about your therapy, or dwelling on the personal nature of your relationship. Or the therapist may create the idea that he or she is your only source of help by criticizing you for standing up for yourself, or by telling you how to behave with a sexual partner. A red flag should definitely go up if your therapist discusses his or her own sexual activities or sexual attraction to you. Other signs include making remarks intended to arouse sexual feelings, or forms of physical seduction, such as sexual touching.

Attraction to Your Therapist

It is normal for people in therapy to develop positive feelings, such as love or affection, toward a therapist who gives them support and caring. These feelings can be strong and may sometimes take the form of sexual attraction. It can be helpful to discuss these feelings with your therapist in order to understand them. A caring, ethical therapist would never take advantage of your feelings by suggesting sexual contact in therapy or by ending therapy to have a romantic relationship with you.

Though sexual feelings sometimes occur, and discussion about them is often useful, sexual contact with your therapist cannot be helpful. Sexual contact in therapy has been found to be harmful to the client in many ways, including damaging the client's ability to trust. The harmful effects may be immediate, or they may not be felt until later. For this reason, sexual contact with clients is clearly against the rules of all professional groups of mental health workers (psychologists, psychiatrists, social workers, and so on).

Actions You Can Take If You Believe That Your Therapist's Actions Are Not OK

Any time you feel uncomfortable about a part of your therapy, including therapist behavior that you think is improper, consider discussing this with your therapist. Your therapist should not try to make you feel guilty or stupid for asking questions, and your therapist should not try to frighten, pressure, or threaten you. If your therapist will not discuss your concerns openly or continues to behave in ways that are not OK with you, you probably have reason to be concerned.

When a discussion with your therapist about these behaviors does not help, you have the right to take some further action. You may wish to find another therapist and/or file any of several types of complaints. It is important for *you* to make the final decision about what course of action is best for your concerns and needs.

It may be very hard for you to think about making any kind of complaint against your therapist. You may worry that he or she will eventually find out about your complaint and be angry or hurt about it. You may also be concerned about possible harm to your therapist. There are several points to consider when you are trying to decide what is the best thing to do:

- Sexual contact between a therapist and a client is never a proper form of treatment for any problem. A therapist who suggests or engages in sexual contact in therapy is showing a lack of concern for you.
- Sexual contact in therapy is never your fault. Regardless of the particular things that have happened, you have placed your trust in the therapist, and it is his or her duty not to take advantage of that trust. If the therapist does this, you have been betrayed.
- A therapist who engages in sexual contact with a client is likely to do so more than once and with more than one client. If no one reports this behavior, **other people may be harmed by the same therapist.**

Specific Courses of Action

Remember that you have the right to stop therapy whenever you choose. At the same time, you may also wish to **make some type of complaint against the therapist** who has acted improperly.

If you choose to make a complaint against your therapist, the process may become long and difficult. Other clients taking such action have felt overwhelmed, angry, and discouraged. **It is very important that you have support from people** you can depend upon. Good sources of support might be family members, friends, support groups, a new therapist, or some type of advocate. Identifying and using good sources of support will help you feel more secure about the plan of

action you have chosen.

You may wish to see another therapist to help you continue with your therapy, including dealing with problems resulting from the experience with the unethical therapist. It would not be unusual for you to have confusing thoughts and feelings about your experience and your previous therapist. It would also be understandable if you felt frightened about seeking, or had difficulty trusting, a new therapist.

You may also want an advocate to actively help you in making and pursuing plans. Try to locate a mental health worker who has had experience with other clients who have been victims of therapist sexual misconduct. He or she will be able to understand your situation, provide you with important information, and support you in your choice of action.

Many therapists work in agencies or other offices with supervisors. Consider talking to your therapist's supervisor or agency director to see what can be done.

You may want to **contact the state and/or national professional group** to which your therapist belongs. For example, many practicing psychologists are members of this state's Psychological Association and the American Psychological Association. These organizations have specific rules against sexual contact with clients, and each has an ethics committee that hears complaints. State and national professional associations do not license their members to practice psychotherapy; however, they can punish an unethical therapist, sometimes by expelling that person from membership in the organization. Such an action may make it more difficult for the therapist to get or keep a license to practice.

If your therapist is a licensed professional, you may want to **contact this state's licensing board** of the profession to which your therapist belongs. It has the power to take away or suspend the license of a psychologist found guilty of sexual misconduct.

Another option is to **file a civil suit for malpractice**, which would be done through a lawyer. To get a referral to an advocate or therapist experienced in working with victims of sexual misconduct, or to obtain information on filing a complaint, call or write to this state's professional organization.

Here are the addresses of some of the organizations mentioned above:

American Counseling Association
5999 Stevenson Avenue
Alexandria, VA 22304
703-823-9800

American Psychiatric Association
1400 K Street, N.W.
Washington, DC 20005
202-682-6000

American Psychological Association
750 First Street, N.E.
Washington, DC 20002-4242
202-336-5500

National Association of Social Workers
750 First Street, N.E., Suite 700
Washington, DC 20002-4241
202 408-8600

There are groups in many communities to help victims of sexual abuse, and you can usually find them through the telephone book's "Human Services" section.

Please write your questions on the back of this handout so we can discuss them. Thank you.

Limits of the Therapy Relationship: What Clients Should Know

Psychotherapy is a professional service I can provide to you. Because of the nature of therapy, our relationship has to be different from most relationships. It may differ in how long it lasts, in the topics we discuss, or in the goals of our relationship. It must also be limited to the relationship of therapist and client *only*. If we were to interact in any other ways, we would then have a "dual relationship", which would not be right, and may not be legal. The different therapy professions have rules against such relationships to protect us both.

I want to explain why having a dual relationship is not a good idea. Dual relationships can set up conflicts between my own (the therapist's) interests and your (the client's) best interests, and then the client's interests might not be put first. In order to offer all my clients the best care, my judgment needs to be unselfish and professional.

Because I am your therapist, dual relationships like these are improper:

- I cannot be your supervisor, teacher, or evaluator.
- I cannot be a therapist to my own relatives, friends (or the relatives of friends), people I know socially, or business contacts.
- I cannot provide therapy to people I used to know socially, or to former business contacts.
- I cannot have any other kind of business relationship with you besides the therapy itself. For example, I cannot employ you, lend to or borrow from you, or trade or barter your services (things like tutoring, repairing, legal advice, dentistry, etc.) or goods for therapy.
- I cannot give legal, medical, financial, or any other type of professional advice.
- I cannot have any kind of romantic or sexual relationship with a former or current client, or any other people close to a client.

There are important differences between therapy and friendship. As your therapist, I cannot be your friend. Friends may see your position only from their personal viewpoints and experiences. Friends may want to find quick and easy solutions to your problems so that they can feel helpful. These short-term solutions may not be in your long-term best interest. Friends do not usually follow up on their advice to see whether it was useful. They may *need* to have you do what they advise. A therapist offers you choices and helps you choose what is best for you. A therapist helps you learn how to solve problems better and make better decisions. A therapist's responses to your situation are based on tested theories and methods of change. You should also know that therapists are required to keep the identity of their clients secret. Therefore, I may ignore you when we meet in a public place, and I must decline to attend your family's gatherings if you invite me. Lastly, when our therapy is completed, I will not be able to be a friend to you like your other friends.

In sum, my duty as therapist is to care for you and my other clients, but *only* in the professional role of therapist. Please note any questions or concerns on the back of this page so we can discuss them.

What You Should Know about Confidentiality in Therapy

I will treat what you tell me with great care. My professional ethics (that is, my profession's rules about moral matters) and the laws of this state prevent me from telling anyone else what you tell me unless you give me written permission. These rules and laws are the ways our society recognizes and supports the privacy of what we talk about—in other words, the "confidentiality" of therapy. But I cannot promise that everything you tell me will *never* be revealed to someone else. There are some times when the law requires me to tell things to others. There are also some other limits on our confidentiality. We need to discuss these, because I want you to understand clearly what I can and cannot keep confidential. You need to know about these rules now, so that you don't tell me something as a "secret" that I cannot keep secret. These are very important issues, so please read these pages carefully and keep this copy. At our next meeting, we can discuss any questions you might have.

1. **When you or other persons are in physical danger**, the law requires me to tell others about it. Specifically:
 - a. If I come to believe that you are threatening serious harm to another person, I am required to try to protect that person. I may have to tell the person and the police, or perhaps try to have you put in a hospital.
 - b. If you seriously threaten or act in a way that is very likely to harm yourself, I may have to seek a hospital for you, or to call on your family members or others who can help protect you. If such a situation does come up, I will fully discuss the situation with you before I do anything, unless there is a very strong reason not to.
 - c. In an emergency where your life or health is in danger, and I cannot get your consent, I may give another professional some information to protect your life. I will try to get your permission first, and I will discuss this with you as soon as possible afterwards.
 - d. If I believe or suspect that you are abusing a child, an elderly person, or a disabled person I must file a report with a state agency. To "abuse" means to neglect, hurt, or sexually molest another person. I do not have any legal power to investigate the situation to find out all the facts. The state agency will investigate. If this might be your situation, we should discuss the legal aspects in detail before you tell me anything about these topics. You may also want to talk to your lawyer.

In any of these situations, I would reveal only the information that is needed to protect you or the other person. I would not tell everything you have told me.

2. In general, **if you become involved in a court case or proceeding**, you can prevent me from testifying in court about what you have told me. This is called "privilege," and it is your choice to prevent me from testifying or to allow me to do so. However, there are some situations where a judge or court may require me to testify:
 - a. In child custody or adoption proceedings, where your fitness as a parent is questioned or in doubt.
 - b. In cases where your emotional or mental condition is important information for a court's decision.
 - c. During a malpractice case or an investigation of me or another therapist by a professional group.
 - d. In a civil commitment hearing to decide if you will be admitted to a psychiatric hospital.

- e. When you are seeing me for court-ordered evaluations or treatment. In this case we need to discuss confidentiality fully, because you don't have to tell me what you don't want the court to find out through my report.
3. There are a few other things you must know about confidentiality and your treatment:
- a. I may sometimes consult (talk) with another professional about your treatment. This other person is also required by professional ethics to keep your information confidential. Likewise, when I am out of town or unavailable, another therapist will be available to help my clients. I must give him or her some information about my clients, like you.
 - b. I am required to keep records of your treatment, such as the notes I take when we meet. You have a right to review these records with me. If something in the record might seriously upset you, I may leave it out, but I will fully explain my reasons to you.
4. Here is what you need to know about confidentiality **in regard to insurance and money matters**:
- a. If you use your health insurance to pay a part of my fees, insurance companies require some information about our therapy. Insurers such as Blue Cross/Blue Shield or other companies usually want only your diagnosis, my fee, the dates we met, and sometimes a treatment plan. Managed care organizations, however, ask for much more information about you and your symptoms, as well as a detailed treatment plan.
 - b. I usually give you my bill with any other forms needed, and ask you to send these to your insurance company to file a claim for your benefits. That way, you can see what the company will know about our therapy. It is against the law for insurers to release information about our office visits to anyone without your written permission. Although I believe the insurance company will act morally and legally, I cannot control who sees this information at the insurer's office. You cannot be required to release more information just to get payments.
 - c. If you have been sent to me by your employer or your employer's Employee Assistance Program, either one may require some information. Again, I believe that employers and companies will act morally and legally, but I cannot control who sees this information at their offices. If this is your situation, let us fully discuss my agreement with your employer or the program before we talk further.
 - d. If your account with me is unpaid and we have not arranged a payment plan, I can use legal means to get paid. The only information I will give to the court, a collection agency, or a lawyer will be your name and address, the dates we met for professional services, and the amount due to me.

5. Children and families create some special confidentiality questions.

- a. When I treat children under the age of about 12, I must tell their parents or guardians whatever they ask me. As children grow more able to understand and choose, they assume legal rights. For those between the ages of 12 and 18, most of the details in things they tell me will be treated as confidential. However, parents or guardians do have the right to *general* information, including how therapy is going. They need to be able to make well-informed decisions about therapy. I may also have to tell parents or guardians some information about other family members that I am told. This is especially true if these others' actions put them or others in any danger.
- b. In cases where I treat several members of a family (parents and children or other relatives), the confidentiality situation can become very complicated. I may have different duties toward different family members. At the start of our treatment, we must all have a clear understanding of our purposes and my role. Then we can be clear about any limits on confidentiality that may exist.

- c. If you tell me something your spouse does not know, and not knowing this could harm him or her, I cannot promise to keep it confidential. I will work with you to decide on the best long-term way to handle situations like this.
- d. If you and your spouse have a custody dispute, or a court custody hearing is coming up, I will need to know about it. My professional ethics prevent me from doing both therapy and custody evaluations.
- e. If you are seeing me for marriage counseling, you must agree at the start of treatment that if you eventually decide to divorce, you will not request my testimony for either side. The court, however, may order me to testify.
- f. At the start of family treatment, we must also specify which members of the family must sign a release form for the common record I create in the therapy or therapies. (See point 7b, below.)

6. Confidentiality in group therapy is also a special situation.

In group therapy, the other members of the group are not therapists. They do not have the same ethics and laws that I have to work under. You cannot be certain that they will always keep what you say in the group confidential.

7. Finally, here are a few other points:

- a. I will not record our therapy sessions on audiotape or videotape without your permission.
- b. If you want me to send information about our therapy to someone else, you must sign a "release-of-records" form. I have copies, which you can see so you will know what is involved.
- c. Any information that you also share outside of therapy, willingly and publicly, will not be considered protected or confidential by a court.

The laws and rules on confidentiality are complicated. Situations that are not mentioned here come up only rarely in my practice. Please bear in mind that I am not able to give you legal advice. If you have special or unusual concerns, and so need special advice, I strongly suggest that you talk to a lawyer to protect your interests legally.