



Informed Consent Form

Sakala Success Centre
 Burman University
 Lacombe, AB
 Tel: 403-782-3381 ext. 4141
 Fax 403-782-4107

Date of Contact:		<input type="checkbox"/> Burman	
Name:			
Address:			
Home Phone:		Cell/Burman Contact Phone:	
Email:			

I give the Sakala Success Centre permission to correspond with me through the following channels (Check all apply):

Mail Home Phone Cell/Burman Phone Email

Purpose of Appointment (Check all that Apply)

- | | | |
|---|--|--|
| <input type="checkbox"/> Educational | <input type="checkbox"/> Academic | <input type="checkbox"/> Personal-Social |
| <input type="checkbox"/> Occupational/Career | <input type="checkbox"/> Testing | <input type="checkbox"/> Addictions Assessment |
| <input type="checkbox"/> Premarital Counselling | <input type="checkbox"/> Marital Counselling | <input type="checkbox"/> Accommodations |
| <input type="checkbox"/> Other: _____ | | |

Medication	Dosage	How Long

Who Referred You for Counselling?

I was referred <input type="checkbox"/>	(By Whom):
I came voluntarily <input type="checkbox"/>	Counselor initiated <input type="checkbox"/>

For Office Use Only

External Referral

Yes	No
Referral made to:	

COUNSELING SERVICES

The Sakala Success Centre provides counseling and academic services at no cost to students at Burman University. These services include, but are not limited to, academic, career, addiction, and personal counseling, and are available on an individual appointment basis. Online counselling services are also available. Additionally, programs and workshops may be offered by the Sakala Success Centre throughout the academic school year. Appointments are to be made in person, or by phone at 1-403-782-3381 Ext. 414.

Office hours are as follows:

Monday-Thursday: 8:00AM – 5:00PM

Friday: 8:00AM – 12:00PM

ELIGIBILITY FOR SERVICES

The Sakala Success Centre provides counseling services only to currently enrolled Burman University students. A brief-counseling model is utilized as it is most appropriate for our academic clientele. Clients attending counselling will receive up to 8 individual counseling sessions at the Sakala Success Centre. If, at the end of these allotted sessions, the therapist and client deem more sessions to be necessary, there may be additional counseling sessions granted. Students may request off-campus counseling referrals at a fee to the student.

MINORS AND MATURE MINORS

If you are under the age of 18, you are not legally able to consent to treatment, and written consent is required from your parent or legal guardian(s). Minors must also understand that parents' and guardians' have access to their counseling records. To the best of our ability, the Sakala Success Centre will provide legal guardians with only general information about our therapeutic work with you, unless disclosures within therapy fall beyond the limits of confidentiality. To the highest degree possible, the Centre will include minor clients in decisions of disclosure to legal guardians and involve them within the conversation. However, if the therapist determines you are a mature minor, based on your understanding of the therapy process, its risks, and benefits, along with your ability to apply your own values when you make decisions, parental or legal guardian consent will not be required.

CONFIDENTIALITY

The Sakala Success Centre adheres to the strict confidentiality guidelines determined by the ethical and legal standards for counseling and mental health professionals in Canada, and the province of Alberta. All communications will be made in person, by telephone, or through email (unless otherwise requested by the client). Please be aware, that while every effort is made to safeguard your privacy, we cannot guarantee the confidentiality of email messages. Any communication that occurs by email is part of the client file and will be stored with the remainder of your counselling documentation. All records and privileged communication by the Sakala Success Centre relating to clients **18 years of age, or older**, are kept in complete confidence, except in these cases:

- 1. You directly, or indirectly imply the intention to engage in self-harming and/or suicidal behaviours.**
- 2. You threaten to harm another person(s), including murder, assault, or other physical harm.**
- 3. You report suspected abuse of a child (under age 18), including – but not limited to – neglect, as well as physical, and sexual abuse.**
- 4. You report abuse of the elderly or a dependent adult.**

5. **When Sakala Success Centre professional staff/interns discuss case material for the purpose of consultation, or supervision. There are times when the therapist access consultations from trained professionals in the community and may engage in supervision. Your name or other identifying information will not be shared in order to protect your identity.**
6. **When anonymous demographic statistical data is collected by use of anonymous exit survey as required by the province of Alberta.**
7. **When official records are court ordered to be released to the property of the court.**

The law mandates that mental health professionals may need to report these situations to the appropriate persons and/or agencies.

In the case of Mature Minors, the legal guardian(s) of a client, under the age of 18, will be contacted if deemed necessary by the counselling practitioner due to the severity of the presenting therapeutic concerns.

CLIENT RIGHTS AND RESPONSIBILITIES

- a. You have the right to confidentiality within the limits described above.
- b. You have the right to be aware and engaged in your treatment planning, goal setting, and the direction of your therapeutic experience.
- c. If during the counselling process, you or your therapist determine that he/she is not effective in helping you reach your therapeutic goals, or if more long-term, or specialized therapy beyond the counselor's competence is warranted, your counselor is obligated to discuss this with you, and if appropriate provide treatment referral options and terminate treatment.
- d. You have the right to be informed of any risks or benefits that may be associated with your therapy.
- e. You have the right to refuse therapeutic interventions, terminate treatment, or request a referral to another counselling professional.
- f. You have a right to request access to your confidential counseling files and paperwork by submitting a written release of information form to the Sakala Success Centre.
- g. The client has a responsibility to make a good faith effort to fulfill and participate in the recommended therapeutic measures suggested by their therapist.
- h. If you believe that your counsellor or the centre has behaved or practiced in an unethical manner, you have the right to file a report to the Vice President of Student Services at Burman University, or to file a formal complaint with the regulatory body of the counsellor in question.
- i. The client has a responsibility to inform the Sakala Success Centre of appointment cancelations at least 2 hours in advance. If the Success Centre cannot be reached, or is outside of posted office hours, a message must be left on the centre's phone informing of the cancelation. Clients who miss 2 consecutive appointments without informing the Sakala Success Centre will have their therapy terminated as it will be assumed they no longer desire services.

POTENTIAL RISKS AND BENEFITS

Therapy can be beneficial to the individual for many different reasons, however, during the process of therapy there can also be risks involved. Below are some of the potential risks and benefits of engaging in the therapeutic process.

- a. Therapy often involves discussions surrounding a clients' most hurtful or difficult life experiences. While therapeutically working through these experiences can provide healing, these discussions may be triggering and difficult to talk about.

- b. While the aim of therapy is to work through difficult experiences, finding growth and wellness as a person, things will often get worse before they will get better. It is not uncommon that the bringing up of previous traumas will cause a great deal of distress within the client that will need to be worked through before healing can occur. Counselling is different from talking to a friend or family member. Conversations will have specific goals, and although the counsellor will be supportive, they would also challenge you.
- c. Therapy takes place within a professional therapeutic relationship. You will be sharing important details with your counsellor but will know little about them. At times, due to personality differences or therapy preferences, the counseling relationship may not be a good fit. If this is the case, a referral to another counsellor can be made.
- d. Therapy can provide healing, comfort, and growth.
- e. Therapeutic work can help provide clarity and perspective to personal, academic, or career quandaries.
- f. The therapeutic process can help to identify and correct unhealthy behavioral patterns, relational templates, and coping mechanisms.
- g. If online counselling services are accessed, the centre is not able to control for confidentiality of therapy as we do not control for where the client chooses to call into the therapy session from. This may result in unwanted parties overhearing the contents of the virtual counselling session.

WHO HAS ACCESS TO YOUR INFORMATION?

Sakala Success Centre utilizes an on-line calendar. This means that the director, administrative assistant, and student worker may see your first and last name in the calendar. If a court subpoenas a copy of the calendar, a third party may also see those details. Staff working in the centre are bound to a confidentiality agreement and never have a right to view or release identifying information to anyone.

YOUR FILE AND HOW IT IS STORED

When receiving counselling services, a file will be started with your identifying information. It will also include your initial intake assessment, informed consent, copies of any letters or emails written on your behalf, email communication between you and the counsellor, and progress notes. You have full access to your file and may request to view it at any time. Your file is closed when you and your counsellor terminate counselling. Files are stored in a locked cabinet and room and will be shredded after 7 years.

EMERGENCY SITUATIONS

In the event of an emergency in which you are unable to reach the Sakala Success Centre team, or which takes place after Centre posted hours, call:

- **9-1-1** Emergency Services
- Burman Campus Emergency at **1-403-786-9009**
- The Central Alberta Distress Line **1-800-784-2433**
- The Kid's Help Phone (24 years or younger) at **1-800-668-6868**
- Obtain safe transportation to the nearest hospital emergency room

***Note: After reading this page, please place your initials on the lines provided**

Having read and understood the above document, I agree to the limits of confidentiality stated therein. _____

I understand that confidentiality cannot be guaranteed in online counselling due to the uncontrolled nature of where I choose to locate myself during the counselling session. _____

I understand that the Sakala Success centre provides internship opportunities for counsellors in training to develop their competency as independent practitioners. Sessions may be recorded or viewed live, and I understand also, my counsellor may work under the direction of a supervisor and that this supervision is important to the overall quality of my therapy. _____

I understand that free counselling at Burman University is a service offered for my benefit and wellbeing and should be viewed responsibly. I also understand that there is often a waitlist to see the counsellor, and therefore I agree to respect the following guidelines:

- a. If I miss two consecutive scheduled appointments in a semester, without calling 2 hours in advance to notify the Student Success Centre that I will not be able to meet the appointment, it will be assumed that I no longer desire counseling services, and my case will be closed. _____**

Client Name: _____

Date: _____

Client Signature: _____

Counselor Name: _____

Date: _____

Counselor Signature: _____

IF APPLICABLE

Legal Guardian Name: _____

Date: _____

Legal Guardian Signature: _____