
JENNIFER PALAU, MSW, LICSW

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HIPAA and Washington State Information to the Adolescent Client

What is Confidentiality?

The privacy of your personal information is of utmost importance. I am compliant with current Federal and State of Washington laws, including the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

What can you expect? What does this mean?

As a general rule, I will keep information you share with me in our sessions confidential, unless I have your written consent to disclose certain information. There are legal exceptions to this rule that I must abide by as a mandated reporter. It is important for you to understand these situations before disclosing any personal information to me. Based on the law and the requirements of my professional license, I am required to disclose certain information whether or not I have your written permission.

1. **HARM TO SELF:** you tell me you plan to cause serious harm or death to yourself and I believe you to have the intent and ability to carry out this threat in the very near future. I must take steps to inform a parent or guardian of what you have told me and how serious I believe this threat to me. I must make sure that you are protected from harming yourself.
2. **HARM TO SOMEONE ELSE:** You tell me you plan to cause serious harm or death to someone else who can be identified, and I believe you have the intent and the ability to carry out this threat in the very near future. In this situation I must inform your parent or guardian as well as the person you intend to harm.
3. You are doing things that could cause serious harm to your or someone else, even if you do not intend to harm yourself or another person. In these situations I must use my professional judgment to decide whether a parent or guardian should be informed.

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4. You tell me you are being neglected or abused (physically, sexually, or emotionally) or that you have been abused in the past. In this situation, I am required by law to report the abuse to Child Protective Services.
5. You are involved in a court case and a request is made for information about your counseling or therapy. If this happens, I will not disclose information without your written agreement unless the court requires me to. I will do all I can within the law to protect your confidentiality; if I am required to disclose information to the court, I will inform you of this happening.

What do I communicate with your parent(s) or guardians(s)?

Except for situations mentioned above, I will not tell your parent or guardian the specific things you share with me in our therapy sessions. This includes activities and behavior that your parents would not approve of or would be upset by, but that does not put you in serious immediate harm or risk. However, if your risk-taking behavior becomes more serious, then I need to use my professional judgment to communicate this to your guardian for your safety. I will encourage you to tell your parent and guardian and help you find the best way to tell them. Also when speaking to your parents, I may describe problems in general terms, without using specifics, in order to help them know how to be more helpful to you.

In signing this release you understand and give consent for me to coordinate services with your parents on your behalf. This includes scheduling in person, via phone and email. As well as coordination of payments. Coordination of payments includes receiving insurance information; dates of services; type of service (individual or family); and amount due for services provided. The primary reason of disclosure will be for payment of services. The content of our therapeutic sessions will remain confidential.

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Client

Date

Therapist

Date