Mindful Connections Behavioral Health, PC

Individual, Couples, and Family Therapy

Confidentiality Agreement

Contents of all therapy sessions are considered to be confidential. Verbal communication and written records will not be shared with any other party without your written consent or the written consent of a minor's legal guardian.

Exceptions to this are as follows:

Duty to Warn and Protect

If you disclose an intent or a plan to harm another person, Tara Incopero is required to warn the intended victim and report this information to legal authorities.

If you disclose or imply that you have a plan for suicide, Tara Incopero is required to notify legal authorities and make reasonable attempts to notify your family and/or persons listed as emergency contacts.

Illinois Law

If you present as a clear and present danger to yourself or others, and/or are developmentally or intellectually disabled, then Tara Incopero is mandated to report you to the Department of Human Services and to the Illinois FOID Reporting System.

Abuse of Children and Vulnerable Adults

Tara Incopero is a mandated reporter. If you state or suggest that you are abusing, or have recently abused a child or vulnerable adult, or a child or vulnerable adult is in danger of abuse, Tara Incopero is required to report this information to the appropriate social service agency and/or legal authorities.

Prenatal Exposure to Controlled Substances

Tara Incopero is required to report admitted prenatal exposure to controlled substances that are potentially harmful.

Minors/Guardianship

Parents or legal guardians of non-emancipated minor clients have the right to access the clients' records. (A written request must be submitted.)

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<u>Insurance Providers (when applicable)</u>

Insurance companies and other third-party payers are given information that they request regarding services provided to you. Information that may be requested includes, but is not limited to: types of service, dates/times of service, diagnosis, treatment plan, description of impairment, progress of therapy, and summaries.

By signing below, I agree to the above limits of confidentiality and understand their meanings and ramifications.

Client Signature	Today's Date
Client Signature	Today's Date
Client's Parent/Guardian if under 18	Today's Date
Tara Incopero, LCSW	Todav's Date