



Informed Consent for Mental Health Services

UVU Student Health Services (SHS) consists of the following sub-departments: mental health services, medical services, psychiatric services, crisis services, and assessment services. This document provides information on how mental health, crisis, and assessment services are provided.

ELIGIBILITY

In order to qualify for mental health and assessment services you must be a current-term registered student at UVU. A student must be 18 years or older to receive mental health and/or assessment services. Students requesting to begin individual or couples therapy treatment during the spring or fall semesters must be enrolled with at least 9 credit hours in order to be eligible. Students requesting to begin treatment during the summer semester must be enrolled with at least 6 credit hours. A student is permitted to receive therapy services while on a vacation semester provided this will not result in two consecutive semesters of not attending classes. Students who are registered for classes but have never attended UVU previously must wait until classes commence before receiving mental health or assessment services. Any student currently enrolled may be eligible for group therapy, biofeedback, or assessment services regardless of amount of credit hours. Couple's therapy requires that at least one of the participants is a UVU Student. Crisis services do not require a specific number of credit hour enrollment for services; however, subsequent services or referrals for therapy may utilize these eligibility requirements.

COUNSELING SERVICES

Mental Health Services primarily provides group therapy, individual therapy, biofeedback, and couple's therapy. Services are provided by professionals who are licensed psychologists, licensed social workers, licensed mental health counselors, as well as graduate trainees (who are supervised by a licensed professional). Generally, students are allotted a total of 24 individual and/or couples sessions over their time at UVU. Many students can have their needs met within a few sessions, though symptom reduction can often take several months. If further regular individual therapy is needed, your therapist will make a determination in consultation with other therapists at SHS. An appropriate referral to a community resource may be made. Group therapy service can extend beyond 24 sessions. Couple's therapy requires that at least one of the participants is a UVU Student. Biofeedback is a brief service that helps train psychophysiological balance and relaxation with the help of technology and may be used alone or with other treatments.

A student (or a non-student participating in couples counseling) has the right to refuse or discontinue treatment at any time without penalty or explanation. If you choose to discontinue therapy against professional recommendation a notation to that effect may be placed in your records. Additionally, there are situations, including but not limited to the following, where SHS may limit services and/or may refer students for treatment outside of SHS:

- Court-ordered or forensically oriented treatment (e.g., evaluations for emotional support animals, treatment for criminal behavior such as domestic violence or pedophilia, court-ordered substance abuse treatment).
- Treatment for disorders of acute severity (e.g., detox from substance abuse, acute suicidality, and/or severe psychosis).
- Treatment that falls beyond a clinician's areas of expertise, or outside the scope of services provided by this facility or treatment needs that cannot reasonably be addressed within the 24-session limit.

- Treatment for a student who seeks counseling but is noncompliant with the clinician’s treatment recommendations (e.g., a client who does not take prescribed medication, a client who is unwilling to address the symptoms, problematic patterns, and/or behaviors in treatment).
- Treatment for a student whose behavior creates a hostile or unsafe environment at SHS, affecting staff and/or other students.

TELEHEALTH CONSULTATION AND TREATMENT

SHS can provide some of its services, such as therapy, through telehealth. The same expectations and limitations apply to therapy through telehealth as outlined in this document. This modality of treatment cannot be guaranteed or may be necessary in place of face-to-face live treatment. Your therapist may adjust treatment between live or telehealth modalities. For purposes of this document, “Telehealth” has the meaning assigned to the term by Utah statute, which is “the transmission of health-related services or information by using electronic communication or information technology.” (Utah Code § 26-60-102(8)). This form of service usually consists of live video conferencing through a personal computer with a webcam. It may also consist in direct phone contact.

When receiving Telehealth, it is also required that you: inform your therapist of your location and only engage in sessions when you are physically in Utah; engage in sessions only from a private location where you will not be overheard or interrupted; use your own computer or device, or one owned by UVU that is not publicly accessible; do not record any sessions.

SHS utilizes third party services that incorporate security protocols for a confidential connection (e.g., Doxy, WebEx); however, 100% security cannot be guaranteed. Research suggests that similar positive outcomes can occur from telehealth as live treatment. If you get disconnected from a Telehealth session, end and restart the session. If you are unable to reconnect within five minutes, your provider will call you at the phone number you provided to SHS.

THE COUNSELING PROCESS

The counseling process is a partnership between you and your therapist to work on areas of dissatisfaction in your life or assist you with life goals. It is important to make active effort on your part both during and between counseling sessions. Attend sessions regularly. Turn off your phone and come prepared with things to talk about. Your therapist will work with you to determine how frequently treatment is needed. If there is a treatment element or procedure that you do not understand, please ask your therapist for clarification. Psychotherapy has been shown to have a number of intended benefits, which may include: better relationships, improved mood, reductions in stress and/or distress, solutions to specific problems, a better understanding of self, and improved academic performance. It is important to understand that there is no way to guarantee that you will experience specific outcomes during the course of treatment. There may also be potential risks associated with treatment. Such potential risks include feeling emotional discomfort, experiencing negative feelings, or worsening symptoms. The changes made in therapy may also impact relationships in unexpected ways. Certain psychological conditions, such as suicidal states, may result in death regardless of the intervention by the counselor. You knowingly and voluntarily accept and assume responsibility for each of these risks and dangers, and all other risks and dangers that could arise out of, or occur during, your participation in treatment. You understand that decisions about your relationships, personal life, or work, are your responsibilities and that there are no guaranteed outcomes, although benefits may occur.

ASSESSMENT SERVICES

Assessment services provide evaluations for Learning Disorders (LD), for Autism Spectrum Disorders (ASD), or for Attention-Deficit/Hyperactivity Disorders (ADHD). Other psychological evaluations like these are possible. The process of an evaluation includes interviews and administration of psychological test instruments. A detailed report of the findings of the evaluation typically is provided at the end of this process. The protocols of psychological test instruments are not a part of your medical health record. Payment for the evaluation is expected before releasing the report. No guarantees are made as to a specific diagnosis before the completion of the evaluation.

CONFIDENTIALITY, PRIVACY, AND RESEARCH

You hereby consent to receiving text, digital, and email communications (including auto-dialed, artificial, and pre-recorded messages and calls) to your cellular phone number, email address, and any other telephone numbers provided during any interaction, agreement or communication with SHS, any independent contractor, or their affiliates, agents and contractors. Text or email may be used by SHS for scheduling or appointment reminders. You acknowledge that text and email communications are not a secure method of communication and accept the risk that your information may be intercepted and read by a third party. You understand that despite SHS's best efforts to keep your medical health record confidential and securely stored, SHS cannot guarantee 100% security.

In accordance with state and federal law (including FERPA), and Utah state licensing requirements, SHS protects the client's privacy and the confidentiality of communications between a client and therapist. In most situations, it is not permissible for therapists to release information about your treatment to others unless you have signed a written authorization form. However, SHS may disclose information to certain third parties in situations such as the following:

- If there is knowledge or reasonable suspicion of abuse to a child, elderly person, or disabled adult, a report will be made to the Division of Child and Family Services. This includes physical, sexual, and emotional/psychological abuse. This also includes if you reveal any instances of abuse or neglect on the part of yourself or others you know.
- If there is a clear and present danger of harm to self, relevant clinical information may be shared in order to facilitate appropriate care and/or hospitalization.
- When an explicit threat of imminent physical harm or death is made, our duty to protect and warn, and our need to facilitate appropriate care and/or hospitalization, may include notifying, and sharing relevant clinical information with, law enforcement, the potential victim, and UVU's Behavioral Assessment Team.
- Upon proper court order or subpoena signed by a judge or magistrate, information related to the clinical record may be shared in order to be in compliance with the law.
- If a client files a complaint or lawsuit against a therapist, relevant information regarding that client may be disclosed for the therapist's defense.
- Clinical information may be shared for the purpose of supervision and/or consultation with other SHS professionals.
- For the purpose of academic accommodations and in order to ensure safety of the campus community, coordination with on-campus departments such as the Behavioral Assessment Team, Conflict Resolution, Sports Therapy, Autism Center, and Office of Accessibility Services may occur.

Further, you grant SHS an irrevocable, perpetual, non-exclusive, non-sublicensable, and non-transferable license to use de-identified information SHS collects about you solely for research and quality improvement purposes (i.e. internal audits, reporting, publication in scientific journals, etc.).

SUPERVISION AND TRAINING

Some therapists at SHS are graduate students who are in training and are not yet independently licensed. They provide services under supervision of SHS licensed mental health professionals. If your therapist is a graduate trainee, they will inform you that they are in-training and will provide you with the name of their supervisor during the first session.

Recording of sessions is standard practice for therapists-in-training and may be utilized by them or by licensed therapists. During your first session, by signing this form you consent to and agree to be recorded as part of your treatment. Your treatment will be discussed with the supervisor, and often with other graduate trainees or licensed providers. The purpose of recording and supervision is educational, for research purposes, and to assist therapists in providing the best possible service to you as the client; however, identifying information will be confidential. Session recordings are retained for no longer than reasonably necessary and are deleted regularly (typically at the end of the graduate trainee's contract). Recordings do not belong to you but are the property of SHS. Video is recorded digitally, encrypted, and stored securely though, as mentioned above, SHS cannot guarantee 100% security. You may revoke your consent to be recorded at any time with a written notice.

You understand that when therapists-in-training at SHS diagnose specific mental health diagnoses, these diagnoses are provisional only.

APPOINTMENTS AND FEES

You accept full responsibility for all charges billed to you by SHS. Payment is expected within 30 days of the time of service or a hold on your student account may occur. Therapy sessions are typically scheduled once per week or once every other week. Group therapy sessions are held weekly. Please be aware that cost of services may increase in the future. The current pricing of services is:

Service Type	Cost
Individual (or Couples) Therapy (45-50 min session)	\$10
Individual (or Couples) Therapy (25-30 min session)	\$5
Group Therapy (60-90 min session)	No fee
Learning Disability/Autism Assessment Evaluation	\$400
ADHD Assessment Evaluation	\$75
Psychological Evaluation or similar service	Varies
Biofeedback Relaxation Training	No fee

MISSED AND LATE APPOINTMENTS

If you miss a therapy session without notice you will incur a \$10 fee. If you cancel or reschedule a therapy session on the day of the appointment, you will incur a \$10 fee. In either case, if an emergency or unexpected conflict arises (e.g., illness, transportation problem), please inform your therapist within a week of the occurrence to avoid this charge. If you are more than 10 minutes late for your first appointment (intake) or more than 15 minutes late for an ongoing appointment, you may need to reschedule your appointment. If you attend a therapy session while under the influence of alcohol or illicit drugs, the session will be terminated and rescheduled. For assessment evaluations, a \$10 fee per scheduled hour is incurred. If you do not attend an appointment and have not made previous arrangements with your therapist, your case will be automatically considered terminated. You are welcome to engage in services again but may be required to wait to see a therapist due to high demand for services.

CONTACTING YOUR THERAPIST

Generally, if you need to change an appointment, contact our front desk support staff at SHS: 801-863-8876. Support staff are available to answer phones during SHS's office hours (Monday, Wednesday & Thursday 8-7, Tuesday & Friday 8-5). However, when you call, it may be necessary for you to leave a message (either on your therapist's voicemail or with support staff). Most therapists are able to return your call within 2-3 business days. Please note SHS is closed on weekends and at various points of the year for university holidays and school breaks; voicemail and email are not monitored during closures.

If your therapist will be unreachable for an extended period of time, you may contact support staff, or the therapist may provide you with the name of a colleague to contact if necessary. In the case of a mental health emergency, walk-in crisis appointments are available, but only as described in the next section. So that your provider can get you help in the case of an emergency, you must identify an emergency contact person who can be contacted in the event that your provider believes your safety is at risk. You understand that if your provider believes your safety is at risk, they may contact police to conduct a welfare check or provide transportation to a hospital.

Therapists typically do not provide therapeutic intervention or consultation by phone, email, or text. Please reserve discussion of any concerns for during your therapy sessions. It is important for you to be aware that if sending a therapist an email or text, confidentiality cannot be guaranteed and your therapist may not respond.

You understand that though our paths may cross in public or social situations, SHS and its staff and therapists will do the utmost in protecting the confidentiality of the therapeutic relationship and will not initiate greetings. SHS and its staff and therapists will also not initiate or accept social media requests.

EMERGENCY CARE AND CRISIS SITUATIONS

SHS offers walk-in crisis appointments Monday-Friday from the hours of 8AM-4:15PM.

The following are examples of crisis situations:

- You are currently so distressed that you may be unable to keep yourself safe.
- You are currently so upset that you may be unable to keep others safe.
- You have been physically or sexually assaulted within the last few days.
- Someone close to you has died within the last few days.

If you are in crisis, please come into SHS (SC-221) and inform the front desk staff that you need an emergency appointment. In the event of a crisis situation outside of business hours or when services are unavailable, please utilize the following resources:

- Call 911 or go to the nearest hospital emergency room.
- Call or text the Suicide & Crisis Lifeline: 988.
- Call or go to Wasatch's Recovery Outreach Center at 1175 East 300 North in Provo. Phone: 801-852-3131. <https://www.wasatch.org/crisis-services/>
- Contact the Crisis Text Line by texting "HOME" to 741741.
- Download and use the **SafeUT App**: <https://safeut.org/>

It is important that you inform your therapist as soon as you are aware of upcoming significant stressors and suicidal thoughts so that you can work together to develop a crisis plan and find services and resources that are available to you at all hours of the day.

Please note that the administrative procedures above may be modified as deemed appropriate by the staff at Student Health Services.

Your signature below indicates that you have read the information in this document and agree to abide by its terms during the course of the therapeutic or assessment relationship.

You acknowledge and understand that all claims for negligence and other claims against Utah Valley University and its employees and agents, including physicians, nurse practitioners, therapists, technicians and students may be governed by the provisions of the Utah Governmental Immunity Act, Utah Code Annotated Section 63G 7-101 et seq., as may be amended from time to time, a special law restricting how and when a claim must be presented and limitations on the amount recovered.

Upon consideration of the information presented to me, I authorize Student Health Services to provide me with services and to use the methods that are deemed clinically appropriate. Treatment begins once I meet with a therapist and a service is provided. I make this decision to accept the proposed treatment or assessment knowingly, voluntarily, and without coercion. I understand the legal consequences of signing this document, including assuming all risks of my participation in treatment. I understand that I am responsible for my obligations and acts as described in this document. I read and agree to be bound by the terms of this Informed Consent document.

Signed: _____ Date: _____
If you would like a copy of this document, please ask your clinician for a photocopy, or [visit our website](#).