

### Statement of Clients' Rights

I provide psychotherapy and counseling to all clients without regard to race, color, religion, national origin, sexual orientation, age, disability, veteran status, or any other discriminatory factor recognized by law. Clients have the right to treatment, including access to medical care and habilitation, regardless of age or degree of disability. When you receive services from me, you also have certain rights, which I have listed below.

**RIGHT TO CONFIDENTIALITY.** Unless the law requires it, your records and other information about you will not be released without your written permission (or if you are a minor, the written permission of your parent or legal guardian). There are, however, some circumstances under which I may be required by law to share information with others about the services you receive, to include:

- If you give written permission, I may share information with any person or agency you identify.
- If I believe that you are in imminent danger to yourself or to others, or if I believe you are likely to commit a crime, I may share information with law enforcement and with threatened individuals.
- To report a crime committed by you on my office premises or against me.
- The court may order me to release your records without your permission.
- If I suspect that you have neglected or abused a child or dependent adult, or you are being investigated for child abuse or neglect, I am required by law to share information with county protective services officials.
- If you are HIV positive and I am aware that you are not following proper control measures, I am required to report this to agents charged with the protection of public health.
- To medical personnel in a medical emergency.

**RIGHT TO REFUSE TREATMENT.** You have the right to consent to treatment or services and may withdraw your consent at any time. If you refuse a recommended service or treatment, I will attempt to inform you of the consequences for such refusal. If no other services are available, this refusal may lead to termination from this company. The only time that you can be treated without your consent is in an emergency situation, when it has been court-ordered, or if you are a minor and your parent or guardian has given consent. This is outlined in GS 10A NCAC 27D .0303.

**RIGHT TO KNOW THE COST OF SERVICES.** You should be informed of the costs of your services before the provision of the services. It is your responsibility to arrange for payment of costs, and your services can be terminated for failure to pay for agreed costs.

**RIGHT TO PRIVACY.** You have the right to be free from any unwarranted search of your person or property.

**RIGHT TO BE TREATED WITH DIGNITY.** I do not administer any potentially painful procedures or stimuli to reduce the frequency or intensity of a behavior. I must protect clients from harm and report any form of abuse, neglect, or exploitation.

**RIGHT TO RECEIVE A COPY OF TREATMENT PLAN.** Clients have the right to a copy of their treatment plan at any time, by requesting plan from treatment provider. The plan can be changed by the therapist or client at any time, but no less than annually.

Client initials: \_\_\_\_\_



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**RIGHT TO CONTACT DISABILITY RIGHTS OF NC.** Disability Rights North Carolina is a 501(c)(3) nonprofit organization based in Raleigh. Its team of attorneys, advocates, paralegals and support staff provide advocacy and legal services at no charge for people with disabilities across North Carolina. As the state's federally mandated protection and advocacy system, Disability Rights North Carolina is charged with protecting the rights of children and adults with disabilities living in North Carolina. You have the right to contact them if you need an advocate.

Toll-Free: 877-235-4210 Phone: 919-856-2195

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Client initials: \_\_\_\_\_