

*Legal Involvement & Protection of Confidentiality
Disclosure & Statement*

Confidentiality is key to the therapeutic relationship and must be safeguarded in every way possible. Clients feel safe, and therefore able to share vulnerable and highly personal information, if they trust that their privacy is protected.

Court and legal involvement frequently place the therapist in a difficult situation, in that the confidentiality of treatment, assessment, session material, written communications, or records of written communications may be compromised as the therapist serves in the role of advocate or expert witness.

In your case, I am particularly concerned about: _____

Therefore, I request that you sign below to indicate that neither you, nor your legal representation (insomuch as you are able to influence the actions of legal representation) will subpoena or deposition the above information. The purpose of this request is, again, to safeguard the confidentiality of sensitive information or material, and thus, to protect the integrity and efficacy of the therapeutic relationship.

Should you be in a position in which you know that you will need your clinical records or the testimony of your therapist in court, please discuss this with Beth D. Bowers, MSW, LCSW and understand that you will likely be referred to another suitable therapist.

To protect the confidentiality of _____, neither I, nor my legal representation will subject the above mentioned information or material to subpoena for testimony or deposition or submission as evidence. Furthermore, I hereby certify that I have been made aware that the fee for court appearances is \$300.00 per hour, including preparation and travel time, and Beth D. Bowers Counseling, PLLC requires a minimum of \$500.00 retainer to be paid prior to the time of court appearance.

Signed and agreed to.

Signature of Client or Parent/Guardian

Date

Witness

Date