

Boston College University Counseling Services

Information about Services

Students come to University Counseling Services (UCS) for a variety of problems and concerns. Typically, a student will be seen for an intake/evaluation process that may take a few sessions. During that time the student and a clinician will work together to determine what might prove most helpful to the student. In most cases, this will involve brief individual or group psychotherapy at UCS. Students needing ongoing, weekly therapy, or specialized care are assisted in finding appropriate referrals off-campus.

At UCS, individual sessions are 45-50 minutes long and group sessions ranges from 1-1.5 hours. Please come to your appointment on time as we will not be able to extend the session time due to lateness. Students are expected to make every effort to cancel appointments 48 hours in advance so that another student in need of an appointment can use that time slot. If more than three appointments are missed, we will need to reassess your treatment needs.

Hours of Operation

UCS is open from 8:45 a.m. to 4:45 p.m. for appointments, Monday through Friday, except on University holidays. The Psychological Emergency Clinician (PEC) is available during regular office hours for urgent mental health concerns, and can be contacted by either walking in to our offices or calling 617-552-3310. PEC is also available after hours and on weekends for psychological emergencies that requires immediate attention and cannot wait until regular office hours. Students can contact health services at 617-552-3227 and a nurse will put the student in contact with the PEC. When the Inpatient Unit is closed or in case of a life threatening emergency, please contact Boston College Police at 617-552-4444.

Eligibility

Full-time students enrolled in degree programs are eligible for all UCS services. Part-time or non-matriculating students (including those on dissertation status, on leave of absence or in special programs) are only eligible for consultation and referral, if appropriate. Students seeking an evaluation for medication should be advised that UCS is only able to provide this service to those who are also engaged in ongoing psychotherapy with a UCS clinician. We can help you with a psychiatry referral off campus if you are interested in medication only.

Involvement in Administrative Actions

Students sometimes come to UCS requesting intervention on their behalf in response to academic or disciplinary difficulties. As a matter of policy, UCS does not intervene in related administrative decisions regarding individual students.

On occasion, students are requested by certain University officials (e.g. Dean of Students) to meet for a consultation with a clinician. In these cases, the clinician would, with the written consent of the student, report back to the referring administrator regarding the general issue for which the referral was made. However, the clinician would not share detailed clinical information about the student with an administrator.

Staff Supervision and Consultation

The staff of UCS is comprised of professionals with differing areas of expertise, and includes those who work under the supervision of senior staff. To provide you with the best service possible, we may discuss your

situation with other staff members of UCS. In addition, some information is collected and used to carry out administrative tasks. All information shared among these professionals is treated as confidential.

Privacy of Information and Confidentiality

UCS will release information regarding a student's use of the services or personal information only if the student signs a written authorization that meets certain legal requirements, or in certain rare circumstances which legally require us to disclose this information regardless of the client's authorization. A client may authorize UCS to release records or to disclose other information to individuals of the client's choosing. The following situations do not require the authorization of the client.

- **Child Abuse:** If we, in our professional capacity, have reasonable cause to believe that a minor child is suffering physical or emotional injury resulting from abuse inflicted upon him or her which causes harm or substantial risk of harm to the child's health or welfare (including sexual abuse), or from neglect, including malnutrition, we must report such condition to the appropriate state department of social services.
- **Adult and Domestic Abuse:** If we have reasonable cause to believe that an elderly person (age 60 or older) is suffering from or has died as a result of abuse, we must make a report to the appropriate state department of social services.
- **Health Oversight:** The licensing authorities of the professions represented in UCS have the power, when necessary, to subpoena relevant records should any clinician be the focus of an inquiry.
- **Judicial or Administrative Proceedings:** If you are involved in a court proceeding and a request is made for information about your diagnosis and treatment and the records thereof, such information is privileged under state law and we will not release information without written authorization from you or your legally-appointed representative, or a court order.
- **Serious Threat to Health or Safety:** If you communicate to your clinician an explicit threat to kill or inflict serious bodily injury upon an identified person and you have the apparent intent and ability to carry out the threat, we must take reasonable precautions. Reasonable precautions may include warning the potential victim, notifying law enforcement, or arranging for your hospitalization. We must also do so if we know you have a history of physical violence and we believe there is a clear and present danger that you will attempt to kill or inflict bodily injury upon an identified person. Furthermore, if you present a clear and present danger to yourself and refuse to accept further appropriate treatment, we have an obligation to take reasonable actions to ensure your safety. These actions could include involuntary hospitalization or notifying your family or others who could assist in protecting you.

Professional Records

UCS is required to keep records of your contacts with us. Counseling records include reasons for consulting with UCS, diagnosis (if appropriate), counseling goals and progress toward those goals, client's social and medical history, any past treatment records received from other providers, notations of any professional consultations. Clients may examine and/or receive a copy of their clinical record, if requested in writing, unless the clinician believes that such access might be harmful to the client. In those situations, clients have a right to a summary and to have the record sent to another mental health provider or to a designated legal representative. Due to their content, clinical records can be misinterpreted and/or be upsetting to untrained readers. Accordingly, we may determine that clients should review their records in the presence of their clinician.

Your signature below indicates that you have read *Information about Services* and agree to the conditions it describes. After completing the section, please return this page to an office administrator at the front desk.

Eagle ID # _____

Birthdate _____

Name _____ Preferred Name _____

Preferred Pronoun (e.g. she, her, he, him, they, them, ze, zem, zirs, hirs) _____

Residence hall or off-campus address _____

Preferred phone number () _____

Email _____

May UCS contact you by email? Please check: Yes ___ No ___

May UCS send you text message appointment reminders? Please check: Yes ___ No ___

Signature _____

Date _____