



Student Health and Counseling Services Counseling Informed Consent

You have the right to be informed of our policies and procedures before giving your consent for counseling. Please read this information carefully. When you sign this document, it will represent an agreement between you (student) and the counseling center about the mental health services you will receive and our privacy practices.

THE COUNSELING PROCESS

Counseling is a collaborative process, and most students find it helpful. At times, though, sessions can bring up uncomfortable feelings or difficult memories, and no particular outcome can be guaranteed. Your counselor will talk with you about your goals and progress, and we encourage you to share any questions or concerns about your care at any time.

ELIGIBILITY

Counseling from Student Health and Counseling Services is only available to CSUSM registered students who have paid the SHCS fee. If you are under 18, please let us know when scheduling, as additional consent requirements may apply. Under special circumstances, students who withdraw from the University while being seen at SHCS may continue services briefly with their counselor with the Director's approval. In addition, to remain eligible, your treatment needs must fit within a short-term counseling model (as determined by counseling staff), and you must avoid misusing counseling services (e.g., frequent no-shows or late cancellations). Students are eligible for couples counseling only when both individuals in the couple are current CSUSM students.

SCOPE OF SERVICE

Services are provided by licensed mental health counselors, unlicensed mental health counselors, or psychology interns. All unlicensed counselors are supervised by CA licensed counselors at SHCS. You have the right to know the professional status of your counselor. If you are seeing an unlicensed counselor, you have the right to contact their supervisor. If you need to do so, call SHCS at (760) 750-4915.

There are instances when your care may not be appropriate at SHCS. If it is determined that your needs might be better met elsewhere, your case is outside the Scope of Service



at SHCS, or that you are ineligible for services, the counselor you are working with will provide referrals and try to assist you in obtaining other services. SHCS does not typically provide long-term ongoing counseling; if you require such services, SHCS will assist in referring you to other services.

Couples counseling will only be provided if both individuals in the couple are current students at CSUSM. Couples counseling will not be provided, or will be ended, if relationship violence (sexual, physical, or threatening behavior) has recently occurred. You and your partner will have the option of being seen individually or referred to an outside service.

We do not provide court-mandated, court-ordered, or attorney-recommended therapy. We also do not provide services to those purely seeking documentation for court or employment purposes. We do not release client information for security or employment screening. It is our position that the use of psychological records for these purposes is a misuse of the records, and that meaningful consent cannot be assured when required as part of a legal matter or an employment screening.

SESSIONS AND CANCELLATIONS

Services will be based on clinical need and determined collaboratively with you. Individual counseling services are provided from a brief-therapy framework with session limits. Individual counseling sessions are usually held weekly or bi-weekly and are approximately 45-50 minutes in length. Groups may be longer-term and can be attended in addition to or independent of individual or couples counseling. There is no session limit for group or couples therapy.

If you need to cancel an appointment, we ask that you notify us at least 24 hours in advance. Services may be subject to termination after two no-shows, cancellations with fewer than 24 hours' notice ("late cancellations"), or inconsistent attendance in one semester.

Unlicensed counselors are required to audiotape and videotape a certain number of counseling sessions for review by their supervisors and, in some cases, other counseling staff, for the purpose of providing you the highest quality care. Your written consent is needed for these recordings. All recordings are locked, kept confidential, and will be erased after being reviewed unless needed for future reference (for which your written permission must also be obtained). You have the right to decline recording. Whether or not you give consent to record will not affect the availability or quality of service.



In most cases, you will be assigned the first available counselor. You have the right to request a different counselor or appeal your counselor's actions. If you are uncomfortable with something your counselor is doing, or feel that your counselor is acting improperly, we ask that you first attempt to resolve the matter with them directly. If unable to resolve the matter with your counselor, or you do not want to talk directly with your counselor, we ask that you provide a brief written or verbal description of the problem for review by the counselor's supervisor (if the counselor is an intern) or the SHCS CAPS Director, who will discuss the issue with you and the counselor and take whatever steps are deemed appropriate to address the situation.

If the problem is still not resolved to your satisfaction, you have the right to contact the Associate Vice President of Health & Wellness by calling (760) 750-4915.

CONFIDENTIALITY AND RECORD KEEPING

All information disclosed within sessions is confidential and will not be revealed to anyone other than appropriate SHCS staff without your written permission except in situations where disclosure is required by law. These situations include (1) when the counselor believes that a client may be a danger to themselves or another person, and that disclosure is necessary to minimize risk. In the case of danger to another, the counselor is required to make reasonable efforts to protect the victim by communicating the threat to the intended victim(s) and to a law enforcement agency; (2) there is reasonable suspicion of actual or potential child neglect or abuse (emotional, physical, sexual) involving the client or others known by the client; (3) there is reasonable suspicion that a child has heard or witnessed relationship violence; (4) there is reasonable suspicion of neglect or abuse of a dependent adult or elderly person (age 60+); (5) a client is "gravely disabled" due to a severe mental illness or severe substance abuse and is unable to take care of basic needs (e.g., food, shelter, clothing); (6) A client initiates legal proceedings to establish competency; (7) a valid subpoena or court order from a judge is issued for a client's files or where otherwise mandated by law; (8) a client (or client's heirs, executors) files a suit or complaint against a counselor or SHCS.

Your records also can be released with your consent and authorization. You can provide consent by completing an Authorization for Release of Information form in hard copy or electronically through the Cougar Health Portal to provide SHCS permission to release your records to another entity on campus (e.g., Disability Support Services), off-campus entity (e.g., off-campus therapist), or to yourself. You can designate the length of



authorization (e.g., six months or one year) and have the right to revoke authorization at any time.

The law requires that records of services be maintained to help ensure that clients receive a consistent quality of care. A confidential file will be maintained to provide a record of your services. Records are electronic. SHCS can use your health information and share it with other members of your SHCS health care team (physicians, nurses, counselors, and other clinicians) who are treating you. Information is shared on a strict “need to know” basis. Security measures are in place to limit access to your medical and counseling records to SHCS provider staff only.

Lastly, we ask that you not record sessions in any form — audio, video, or through devices such as smart glasses or other wearables. Any recording requires the prior consent of everyone involved, so please talk with your counselor first. Recordings made without consent cannot be protected as confidential by SHCS, and California law prohibits recording private conversations, including therapy sessions, without the consent of all parties.

COUGAR HEALTH PORTAL

As a client of Student Health and Counseling Services, you can access some of your records through the Cougar Health Portal accessible through the SHCS Website. It also allows our providers to communicate with you through secure messages and protect your privacy by keeping portal credentials secure and confidential. If you need additional documentation, please complete a Counseling Authorization for Release of Information form.

Please note that documentation of your meetings with your counselor can come across as succinct and impersonal. The documentation will not adequately convey the stories that are so important in your life and will not capture the nuances of the work. The notes simply do not reflect the entire picture or emotions shared with your therapist; they are a snapshot of key elements of the session. If you have any questions or concerns about the information found in your chart, please contact your therapist to discuss them.

CONTACTING US

Because electronic mail cannot be a guaranteed means to protect confidential information, counseling staff will not communicate with you via e-mail except in rare circumstances. Thus, a counselor may not respond to your e-mail messages. If you



consent via the Cougar Health Portal, email and/or text message reminders can be sent regarding your upcoming appointment. The Cougar Health Portal shall be used for secure messaging between you and your provider. You may also contact SHCS at (760) 750-4915 Monday through Friday between 8:00am – 4:45pm.

In the case of an urgent need after hours, please call (760) 750-4915 and dial “2” to speak to a mental health crisis counselor. You can also call one of the community crisis services listed on the *Crisis Resource List* given to you during the phone consultation via the Cougar Health Portal. In the case of a life-threatening emergency, please call University Police by dialing 911 and/or proceed to the nearest emergency room.

Professional ethics strongly discourage “dual relationships” (social, romantic, business relationships) between clients and counselors. We understand that contact with clients outside of the counseling office on a university campus may be unavoidable. Intentional personal contact is discouraged. Counselors are legally prohibited from having sexual contact with current or former clients.

INFORMED CONSENT TO TELEMENTAL HEALTH

In California, "Telehealth" is defined as a method to deliver health care services using information and communication technologies to facilitate the treatment, diagnosis, consultation, education, and case management of a patient's health care while the patient and provider are at two different locations. This form of service usually consists of live videoconferencing through a personal device with a webcam. Telemental health (TMH) is offered to improve access to counseling services.

Counselors are only authorized to provide TMH services in California (and in other states they are licensed in). Students are required to be in the state of California (or in a state their counselor is licensed in) during all appointments. If students are located outside of California, in a state their counselor is not licensed; their appointment will be rescheduled and emergency resources provided if needed.

Telehealth services will only be provided if the student is deemed appropriate for telehealth services based on their presenting concern, clinical presentation, and treatment needs. Exceptions can be made with consultation with the appropriate administrator.

When receiving TMH services, students are required to:

- Only engage in TMH sessions while you are physically in California.



California State University SAN MARCOS

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Tel: 760.750.4915 Fax: 760.750.3181 shcs@csusm.edu www.csusm.edu/shcs

- You must inform your counselor of the exact location in which you will be during your TMH sessions and inform them if this location changes.
- Engage in TMH sessions only from a private location where you will not be overheard or interrupted by other people. You may not be in a moving vehicle or in a public area.
- Use your own computer or device, or one owned by CSUSM that is not publicly accessible for TMH sessions.
- Ensure that the computer or device you use has updated operating and anti-virus software.
- Do not record any sessions, nor will CAPS record your sessions without your written consent.

I understand that I have the following rights with respect to TMH (please add your initials):

- _____ I have the right to withhold or withdraw consent at any time without affecting my right to future care or treatment or risking the loss or withdrawal of any benefits to which I would otherwise be entitled.
- _____ The laws that protect the confidentiality of my medical information also apply to TMH.
- _____ I understand that the same laws that give me the right to access my medical information and copies of medical records in accordance with California law also apply to TMH.
- _____ I understand that the dissemination of any personally identifiable images or information from the TMH interaction to researchers or other entities shall not occur without my written consent.

I understand the following potential risks, consequences, and limitations of TMH:

- _____ TMH should not be viewed as a substitute for face-to-face counseling. It is an alternative form of counseling with certain limitations.
- _____ TMH possible contraindications include, but are not limited to a crisis, acute psychosis, or suicidal or homicidal thoughts.
- _____ TMH may lack visual and/or audio cues, which may increase the likelihood of misunderstanding each other.
- _____ TMH may have disruptions or delays in the service and quality of the technology used.
- _____ In rare cases, security protocols could fail, and your confidential information could be accessed by unauthorized persons.

I understand the following back up plan in case of technology failure:

The California State University

Bakersfield | Channel Islands | Chico | Dominguez Hills | East Bay | Fresno | Fullerton | Humboldt | Long Beach | Los Angeles | Maritime Academy
Monterey Bay | Northridge | Pomona | Sacramento | San Bernardino | San Diego | San Francisco | San Jose | San Luis Obispo | San Marcos | Sonoma | Stanislaus



- _____ The most reliable backup is a phone. Therefore, it is recommended that you always have a phone available and that your counselor knows your phone number. If you get disconnected from a telemental health session, end and restart the session.
- _____ If you are unable to reconnect within five minutes, call your counselor. If they do not hear from you within ten minutes, you agree (unless you request otherwise) that your counselor can call you on the phone number you listed on your registration.

In the event of an emergency during a TMH appointment, the following are important and necessary:

- _____ You must identify on your informed consent form a person who can be contacted if your counselor believes your safety is at risk.
- _____ Your counselor may need to verify that your emergency contact person is able and willing to go to your location in the event of an emergency, and/or call 911 or transport you to a hospital if your provider deems necessary.
- _____ In addition, your counselor may require that you create a safe environment at your location during the entire time that you are in treatment. This may mean disposing of all firearms and excess medication from your location.

EMERGENCY CONTACT:

If you are ever experiencing an emergency, including a mental health crisis, please call 911, University Police at (760) 750-4567, the 24-hour Suicide & Crisis Lifeline by dialing 988, or go to your nearest emergency room. For urgent counseling support after hours, you may call our office at (760) 750-4915 and dial “2” to speak with a crisis counselor.

PRIVACY POLICY AND HIPAA

Our privacy policies are also directed by a federal law known as the Health Insurance Portability and Accountability Act of 1996 (HIPAA). You can access our privacy practices at: <https://www.csusm.edu/shcs/generalinfo/confidential.html>

You have the right to file a complaint with the California Board of Psychology and/or the California Board of Behavioral Sciences if you think that your counselor has acted illegally, irresponsibly, or unprofessionally.

For questions or complaints for the California Board of Psychology, call (916) 547-7720, Toll free (866) 503-7720 or write to: California Board of Psychology, 1625 North Market Street, Suite N-215, Sacramento, CA 95834. Complaints can also be filed online.



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For questions or complaints for the California Board of Behavioral Sciences, call (916) 574-7830, or write to: California Board of Behavioral Sciences, 1625 North Market Street, Suite S-200, Sacramento, CA 95834. Complaints can also be filed online.

ACKNOWLEDGEMENT

Your signature below indicates:

- You have read and fully understand all of the policies and procedures described above.
- You understand that violation of these policies and procedures may result in termination of services.
- You are voluntarily consenting to and authorizing Counseling Services to provide psychological services.

Client's Name: _____

Client ID: _____

Emergency Contact Name: _____

Relationship to Emergency Contact: _____

Signature: _____ Date: _____

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Monterey Bay | Northridge | Pomona | Sacramento | San Bernardino | San Diego | San Francisco | San Jose | San Luis Obispo | San Marcos | Sonoma | Stanislaus