

Ellen Wilkins Counseling and Therapy

Ellen Wilkins, LMFT

210 25th Ave. N., Suite 601

Nashville, TN 37203

615-308-8680



Parkview Towers

“No Secrets” Policy for Family Therapy and Couples Therapy

This written policy is intended to inform you when I agree to work with a couple or family, I consider the couple or family to be my client as a unit. For instance, if there is a request for the treatment records of the couple or family, I will seek authorization from all members before I release confidential information to third parties. Also, if my records are subpoenaed, I will assert the client-therapist privilege on behalf of the client (treatment unit).

During the course of my work with a couple or a family, I may see a smaller part of the treatment unit (e.g. an individual or two siblings) for one or more sessions. These sessions should be seen by you as part of the work that I am doing with the family or the couple, unless otherwise indicated. If you are involved in one or more sessions with me, please understand that generally these sessions are confidential in the sense that I will not release any confidential information to a third party unless I am required by law to do so unless I have your written authorization. In fact, since these sessions can and should be considered a part of the family or couple therapy, I would also seek the authorization of the other individuals in the treatment unit before releasing confidential information to a third party. However, I may need to share information learned in an individual session (or a session with only a portion of the treatment unit being present) with the entire treatment unit-- that is, the family or the couple, if I am to effectively serve the unit being treated.

I will use my best judgement as to whether, when, and to what extent I will make disclosures to the treatment unit, and will also, if appropriate, first give the individual or the smaller part of the treatment unit being seen the opportunity to make the disclosure.

Thus, if you feel it necessary to talk about matters that you absolutely don't want to be shared with anyone within the family or couple unit, you might want to consult an individual therapist who can treat you individually.

This “no secrets” policy is intended to allow me to continue to treat the client (couple or family unit) by preventing, to the extent possible, a conflict of interest to arise where an individual's interests may not be consistent with the interest of the unit being treated. For instance, information learned in the course of an individual session may be relevant or even essential to the proper treatment of the couple or the family. If I am not free to exercise my clinical judgement regarding the need to bring this information to the family or the couple during their therapy, I might be placed in a situation where I will have to terminate treatment of the couple or the family. This policy is intended to prevent the need for such a termination. We, the members of the couple/family or other unit being seen, acknowledge by our individual signatures below, each of us has read this policy, we understand it & have had an opportunity to discuss with Ellen Wilkins, intern for MFT and are in agreement with this policy.

_____ Date _____
name of client (Please print & sign)

_____ Date _____
name of client (Please print & sign)

_____ Date _____
name of client (Please print & sign)