

Growing Harmony Services, LLC
Linda Tremblay, MA, LCMHC, MLADC
Offices Located: Dover & Pittsfield, NH
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603-661-7345 www.lindatremblaytherapy.com

MENTAL HEALTH BILL OF RIGHTS

- * To be treated with dignity, consideration, and respect at all times.
- * To information about the licensee's professional code of ethics.
- * To expect quality service provided by concerned, trained, professional and competent therapist.
- * To appropriate information regarding the mental health counselor's education, training, skills, license, and practice limitation, and to request and receive referrals to other clinicians when appropriate.
- * To expect complete confidentiality within the limits of the law; and to expect that no information will be released without the client's consent except as required by the law.
- * To information regarding the provisions for record management following the death or disability of the licensee.
- * To be informed of the legal exceptions to confidentiality including reporting requirements regarding child abuse and neglect and the abuse of incapacitated adults; as well as the licensee's responsibility to communicate the threat of violence to self, person or property to the victim or victims or to notify the police department of such threat or obtain civil commitment.
- * To be informed of the illegality of sexual contact and other boundary violations between a current or former client and therapist.
- * To a clear working contract in which business items, such as time of sessions, payment plans/fees, absences, access emergency procedures, and third-party reimbursement procedures are discussed.
- * To an individual mental health diagnosis as part of evaluation as designated in RSA 330-A:2VI.
- * To a clear statement of the purpose, goals, techniques, rules of procedure and limitation and nature of assessments, as well as the potential dangers of the service to be performed.

- * To full, knowledge, and responsible participation in the ongoing treatment plan to the maximum extent feasible.
- * To obtain information about their case record including assessment results and to have this information explained clearly and directly; to request information and/or consultation regarding the conduct and progress of their therapy.
- * To refuse any recommended services and to be advised of the consequences of this action.
- * To a clearly defined ending process, and to discontinue therapy at any time.
- * To a client grievance procedure, including requests of consultation and/or mediation and to file a complaint with the mental health counselor's supervisor, and/or the appropriate credentialing body.
- * To a safe environment free of emotional, physical and sexual abuse.

MLADC (Master's level licensed alcohol and drug counselor)
State of NH, Board of Alcohol & Other Drug Abuse, 603-271-6107

LCMHC (Licensed clinical mental health counselor)
State of NH, Board of Mental Health Practice, 603-271-6762

The above information is contained in the client information materials provided to clients at the beginning of treatment. This information will be reviewed during the initial session.