



HIPAA Acknowledgment Form

HIPAA (the Health Insurance Portability and Accountability Act) is a Federal Law that requires all health care professionals to adhere to the federal standards concerning confidentiality with regard to a person's health care information. That includes communication between a psychotherapist and client.

Psychotherapeutic work within the confines of a school present an added dimension, since the student is a part of a larger network of providers including teachers and administrative staff. Typically, I can only release information about our work to an individual outside the Shulamith School for Girls of Brooklyn's school staff with your written permission. That includes any requests you have for me to share information with persons outside Shulamith School for Girls of Brooklyn.

In addition, as a mandated reporter, I have the responsibility to report suspicions of abuse or neglect to the designated authorities, however, I would certainly make every effort to discuss the situation with you before taking action. In addition, I would need to comply with any court ordered requests for communication.

Please indicate below by your signature that you have read and understood the above information.

Name

Relationship to Student

Signature

Date