

UAB EMPLOYEE ASSISTANCE AND COUNSELING CENTER STATEMENT OF UNDERSTANDING

Welcome to the UAB Employee Assistance and Counseling Center (EACC). We are pleased that you have decided to use our service. The EACC is a voluntary confidential employee assistance and counseling service. Our service is an employee benefit designed to provide employees and their immediate household members with resources for resolving work-related and personal problems. The EACC provides employee assistance, confidential counseling, community referral, supervisor consultation, crisis management and a variety of educational programs. Licensed mental health professionals provide confidential individual, family and relationship counseling. Our goal is to assist our clients in clarifying issues, exploring options, and finding solutions. Our service is provided as an employee benefit of UAB, UAB Medicine, VIVA and the Homewood School System at no cost to our clients.

Assessment

As a new client, you will meet with an intake counselor for an assessment. The counselor will explore with you the reasons that caused you to seek counseling and the goals you hope to achieve. At the end of this session, the intake counselor will suggest an appropriate follow-up plan for you. A follow-up appointment may be scheduled at the end of your assessment visit. Our clinical staff works as a team, consulting with one another, to increase the effectiveness of our service to you.

**Should you have questions or need to re-schedule and appointment please call us at
(205-934-2281 or toll free within Alabama 1-877-872-2327)**

Counseling

Counseling sessions are usually 45 to 50 minutes in length. Intervals between sessions will be scheduled dependent upon your needs. Should you decide to terminate the counseling relationship, we recommend that you consult with your counselor to tie up loose ends and to allow for feedback concerning the counseling process.

Children under the age of 15 may be referred externally for individual counseling unless seen within the context of family therapy.

Scope of Benefit and Eligibility

The EACC provides services for all eligible persons, without regard to race, color, age, religion, sex, sexual orientation, national origin, disability, or veteran status. If it is determined by the clinical staff that an individual's needs exceed the scope of service or expertise available at the EACC, we will assist you to identify an appropriate referral to meet your needs. Services provided to you at the EACC are a benefit at no cost to you by UAB, UAB Medicine, VIVA, and the Homewood School System. The EACC does not pay the costs of therapy or community resources/treatment services to which you may be referred. UAB, UAB Medicine, and VIVA employees and members of their immediate households are eligible for up to 12 sessions each year. Detailed information regarding Homewood School Systems benefits is located on our web site, www.uab.edu/eacc.

Confidentiality

We understand that confidentiality is essential to your counseling progress. Our counselors are licensed master's level or higher mental health professionals who are ethically and legally bound to maintain your confidentiality. A written and electronic record (date, time, nature of meeting) of your contacts with the EACC will be maintained in a secure manner. Only EACC staff members have access to your clinical record, except as required by law or as described below. Should you need to access your file please contact your therapist. Your therapist will review the file with you and provide a written summary if requested.

Program Evaluation

The non-clinical data that you provide may be used for our EAP program evaluation research. You will not be identified and your information is anonymous.

Limits of Confidentiality

All information disclosed in counseling sessions is strictly confidential and will be released ONLY with your prior written permission, **except** as otherwise required by law. **The counselor's legal responsibility to disclose information includes, but is not limited to, the following conditions:** suspected or known child, elder, or disabled person abuse or neglect, mandatory reporting of health care providers experiencing psychiatric or substance abuse disorders that may present a danger to self or others to their licensing boards, threat of danger to another individual, imminent threat of suicide by the client, legal subpoena to present records to comply with a court order, mandatory state and federal requirements, and in any emergency medical circumstance that requires immediate medical attention. If you received couples or family counseling, records require a written release by all parties or a Judge's order to be released.

Due to the strict adherence to our policy of client confidentiality, we are unable to report suspected cases of sexual harassment in the workplace. **If you believe you have a sexual harassment complaint, UAB Policy encourages you to promptly report this situation to the designated official.** If you are a UAB employee, contact the UAB Office of Human Resource Management Relations at 934-4458, Room 260X Administration Building, to report sexual harassment. If you are a UAB Medicine, VIVA or Homewood School System employee, ask your Human Resource Office for information on how to report sexual harassment.

Legal Testimony

It is not the practice of the UAB Employee Assistance and Counseling Center to provide legal testimony for Employee Assistance and Counseling Center clients. Our therapist are not trained as forensic experts, so if you know that you will require the testimony of a therapist in a court case please let us know so that we can provide you with a referral to a therapist appropriately trained to represent your best interest in such situations. **You will be responsible for a fee of \$250 per hour should one of**

our therapist's be called upon to provide testimony for you in a court of law. This fee also applies to any travel, preparation, and consultation time required of our therapist as a result of court action. The cost to you for record reproduction is \$25 per page.

The EACC does not offer a court approved **Anger Management Class**. If a client has been court ordered to participate in Anger Management Classes and/or Counseling for domestic violence or any other reason, the EACC may provide counseling only if the client participates in an Anger Management Class elsewhere.

Your Responsibilities as the Client

This service is provided to you as a benefit at no cost to you by UAB, UAB Medicine, VIVA, and Homewood School System. It is your responsibility to attend all appointments as scheduled and on time. If you are unable to attend an appointment, please call as soon as possible to cancel, as there are others who need our services. If you fail to show up for 2 scheduled appointments without calling to notify us, you may be placed on a waiting list for the next available appointment and you will need to speak with your therapist regarding continued service or an appropriate referral.

As a client of the EACC, it is your responsibility to maintain the confidentiality and anonymity of other clients that you encounter while visiting our offices.

If at any point you have questions or concerns regarding your service provider or the counseling process, it is your right and responsibility concerns to discuss those concerns with your counselor.

Inclement Weather Policy

During inclement weather, the UAB Employee Assistance and Counseling Center (EACC) will make every effort to maintain regular business hours (8:00 am to 6:00 pm). However, when an announcement is made that the UAB Campus is closed due to inclement weather, the EACC will also be closed. Such announcements are usually made on the UAB main web page located at www.uab.edu, www.uab.edu/emergency, B-Alert, your local news stations, or WBHM radio (90.3 FM). Also, there may be rare occasions when this office building (a non- UAB property) is closed due to weather related or uncontrollable building related circumstances to protect the safety of the public.

Late Appointment Policy

Tardiness to appointments can have an adverse effect on the therapeutic process if there is not enough time to discuss treatment concerns. If you are a current EACC client and you arrive 15 minutes late or more for your scheduled appointment, you will be asked to reschedule unless your counselor can accommodate you, if their schedule allows. This may mean you will have to wait until your counselor's next available appointment which may be scheduled at least a week out or more.

Also, if you are a NEW EACC client and arrive at your scheduled appointment time 15 minutes late or more and have not completed your intake paperwork, you may be asked to reschedule your

appointment. **If you have not completed your intake paperwork as instructed, PLEASE arrive at least 30 minutes prior to your scheduled appointment.**

Distance Counseling

Structure of Sessions

The EACC offers Distance Counseling via face-to-face video conferencing to UAB Medicine and VIVA employees and members of their immediate households who work at a clinic/location outside of Birmingham (Mobile, Montgomery, Huntsville, etc.). This service is available to clients who are assessed as being appropriate for this form of counseling.

Video conferencing counseling sessions are held via Zoom, which is HIPPA compliant and is encrypted to the federal standard. It is recommended that you sign on to your account at least 5 minutes prior to your session start time. You are responsible for initiating the connection with the UAB EACC via the provided link at the time of your session.

Prior to beginning Distance Counseling, you will need to have an initial video consultation with a UAB EACC staff member in order to verify your identity by matching you with your picture ID. During this initial verification, you will choose a passphrase or number which you will use for all future sessions. This process protects you from another person posing as you.

Whenever there is communication that lacks visual or audio cues there is a risk of misunderstanding. When this happens, it is important to assume that your counselor has positive regard for you, and to check out your assumptions with your counselor. This will reduce any unnecessary hardship.

Limitations of Distance Counseling

Distance counseling should not be viewed as a substitute for face-to-face counseling or medication by a physician. It is an alternative form of counseling with certain limitations.

By signing this document you agree that you understand that distance counseling:

- may lack of visual and/or audio cues, which may cause misunderstanding.
- may have disruptions in the service and quality of the technology used.
- may not be appropriate if you are having a crisis, acute psychosis, suicidal, or homicidal thoughts.

Emergency Management for Distance Counseling

So that the EACC is able to get you help in the case of an emergency and for your safety, the following measures are important and necessary. In addition, by signing this agreement form you are acknowledging that you understand and agree to the following:

- You will inform the EACC of the location/address in which you will consistently be during counseling sessions, and will inform the EACC if this location changes.

- You will identify on your client information form a person whom your therapist is allowed to contact in the case that your therapist believes you are at risk. You and your therapist will verify that this emergency contact person is able and willing to go to your location in the event of an emergency, and if your EACC therapist deems necessary, call 911 and/or transport you to a hospital.

Backup Plan in Case of Technology Failure

The most reliable backup is a phone. Therefore, it is recommended that you always have a phone available and that your therapist knows your phone number.

If you get disconnected from a video counseling session, restart the session. If you are unable to reconnect within ten minutes, please call your therapist.

I have received a copy of the EACC Statement of Understanding, which contains information concerning the EACC and the counseling process, including but not limited to the following topics:

- | | | |
|------------------------|---------------------------|----------------------------|
| • Intake procedure, | • Confidentiality for the | • Confidentiality expected |
| • Counselor assignment | counseling relationship | of clients towards other |
| and process; | • The <u>Limits</u> of | clients UAB Employee |
| • Scope of Benefit; | Confidentiality | Assistance and |
| • Legal Testimony | • Verification of | Counseling Center clients |
| • "No Show" Policy | attendance in cases of | • Reporting of Sexual |
| | supervisor referral | Harassment complaints |

I understand that it is my responsibility to read this information prior to my first counseling session and to ask an Employee Assistance and Counseling Center counselor to further explain any portions which I do not understand. I also understand that by participating in the UAB Employee Assistance and Counseling Center services, I am agreeing to abide by the guidelines set forth in the UAB Employee Assistance and Counseling Center Statement of Understanding. I hereby acknowledge that I have read and understand this Statement of Understanding. I acknowledge that I have received a copy of this agreement.

I hereby release and hold harmless the University of Alabama at Birmingham, the UAB Employee Assistance and Counseling Center, VIVA, Homewood City Schools, and their employees, agents, and assigns from any and all legal liability that may arise from my participation in the services offered by the UAB Employee Assistance and Counseling Center or by Homewood City Schools as part of its contractual relationship with the UAB Employee Assistance and Counseling Center. I certify that this release has been made freely, voluntarily and without coercion and the information given above is accurate to the best of my knowledge.

Participant Name (Please Print)

Date

Participant Signature

Date

Personal Representative Name (Please Print)

Date

Personal Representative Signature

Date

If you are signing this form on behalf of someone other than yourself, please enclose with this form proof of your authority to do so and attach written documentation (i.e. Guardianship Order, Custody Order, Court Order) as appropriate.

Witness

Date

**THANK YOU FOR CHOOSING TO USE THE UAB EMPLOYEE ASSISTANCE AND COUNSELING CENTER
WE LOOK FORWARD TO WORKING WITH YOU**

**UAB Employee Assistance and Counseling Center
2112 11th Avenue South Suite 330, Birmingham, AL 35205
PHONE: (205) 934-2281; FAX: (205) 975-7367; WEB: uab.edu/eacc**