

Boca Integrative Health, PA

A Group of Professional Associations

7100 W. Camino Real, Ste. 207, Boca Raton, FL 33433 • Tel: 561-391-2770 • Fax: 561-391-2930

Group/Family Therapy Confidentiality Parameters Form

In certain situations, individuals, families or other groups are best helped by the therapist meeting with the people separately. This is because the therapist can have an overview of the whole picture and understand the underlying dynamics.

Similarly, sometimes an individual or individuals will wish to continue seeing the therapist individually after the group has finished their joint sessions. This works out well for the patient, as, again, the therapist already understands the person's relationships and can place them in context during ongoing therapy.

During individual sessions confidential information is disclosed to the therapist. This is your private information and will not be disclosed to the other members of the group without your permission. However, in some situations the therapist may feel that disclosure will help move the therapy forward. We would therefore like your permission to disclose information, limited, of course, to the best interest of the therapy and with due regard for your own privacy. Any disclosure would be made at our exclusive discretion.

_____ I give permission for any information I divulge to be shared with family members

_____ I do not give permission for any information I divulge to be shared with family members.

_____ I give permission for any information I divulge to be shared with family members, however you may not divulge the following:

Signature and date

Print name