

## **MOORE CENTER CLINICAL SERVICES Consent for Clinical Consultation or Trainings**

Welcome to Moore Clinical Services. Our clinicians and therapists are trained in providing services that are trauma-informed and evidence-based to individuals with intellectual/developmental disabilities or traumatic brain injury. Clinicians are either licensed professionals, or professionals working towards licensure and working under supervision. All Clinicians follow the NH Mental Health Bill of Rights for Clients expectations. This document contains important information about our professional services and business policies. Please read it carefully and ask any questions you might have so that we can discuss them. When you sign this document, it will represent an agreement between you and Moore Clinical Services Department.

### **Clinical Consultation Services:**

Clinical Services offers “Clinical Consultation” and/or related Clinical “Training” to teams and/or clients who present with profiles of elevated risk to the community; unique and/or clinically complex needs; and/or who have struggled with stability within the service system. These types of services are not client-facing, but generally are contextualized and requested to inform services for a specific client.

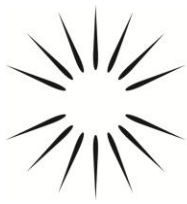
The “Clinical Consultation” service is a voluntary service that requires informed consent; it is not a confidential service, meaning the results of the consultation or training will be provided to the referral source; and may differ regarding whether a written recommendation or resource is being requested at the conclusion of the service or training.

A “Clinical Consultation” services starts with a referral from a team and a statement of need, guiding the breadth of the consultation and to what extent the client and/or team may facilitate: file review; collateral contact with core team members; a collateral interview with the client (when appropriate); written case impressions or recommendations. The extent to which any recommendations given by the Department are followed or implemented is not the responsibility of The Moore Center Clinical Services Department.

To ensure the service is thorough, the service coordinator may need to gather and provide files, securing any consents from you or your guardian needed to do so (whether additional consents are needed for the records release is at the discretion of the agency holding the record), and/or facilitate team contact. An incomplete record provided may impact the Clinician’s ability to provide the service.

### **Meetings or Trainings, if applicable:**

Collateral interviews, trainings, and/ or consultative work will be scheduled with the support of the team, by zoom or in person at the discretion of the Clinician.



**Fees/Payment for Services:**

The service coordinator is responsible for promptly requesting SSL funding or providing proof of alternative funding. The service will not begin until funding is in place. Moore Clinical Services will assist with a “needs statement” if requested. The timeline of the service and the cost of the services are outlined in the Fee Schedule/Description of Services provided by the Department.

**Confidentiality:**

Please review the Statement of Confidentiality from the Department for general principles related to the NH Mental Health Bill of Rights, and also understand the Clinician in this role and service is not your therapist. Your records will be sent by your referral source to The Moore Center’s Clinical Department. These are a voluntary service and any report will be shared with the referral source and/or guardian/client.

**Signatures:**

I understand and consent to the above terms and conditions. I have directed any questions to the Clinical Services Department before signing. I understand the consent will remain valid for one year from the date I sign unless I otherwise rescind my consent.

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Client Signature

\_\_\_\_\_

Date

\_\_\_\_\_

Client Printed Name

\_\_\_\_\_

Guardian Signature (if applicable)

\_\_\_\_\_

Date

\_\_\_\_\_

Guardian Printed Name (if applicable)

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