

# LIVING *in the* WAKE of ADDICTION



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## Confidentiality Agreement

1. I understand that if I would like Gloria Englund to talk or share information about our sessions together with anyone else, I will need to complete an appropriate “release of information” form.

2. I understand Gloria Englund respects and upholds confidentiality rules and laws. She will only release information about our work to others with my written permission, court order or legal subpoena. In addition, there are some situations in which she is legally obligated to breach my confidentiality and contact local law enforcement and/or social services authorities in order to protect me or other people from harm. These situations include disclosure of:

(1) child or elder abuse, (2) self-harm (suicidal or other behavior), (3) harm or violence to others.

She is required to notify the appropriate authorities to prevent such actions from taking place. These situations rarely occur but if such a situation did occur, she would make every effort to discuss it with me before taking action.

3. Confidentiality Online: It is never possible to guarantee 100% protection of the confidentiality of either email transmissions or phone calls. Gloria will do everything possible to protect against any intrusions. She recommends communicating using a personally owned computer. If you send/receive emails from public computers, others may be entitled to view these emails.

Regarding telephone communications, please understand that if you choose to use a cordless or cell phone during a phone session with her, someone with a scanner or other electronic equipment could possibly hear the conversation. To summarize, there are risks to your confidentiality online, as there are in an office setting as well. However, she believes these risks to be extremely small assuming common sense is used and appropriate precautions are taken to protect emails sent and received.

I, as the client \_\_\_\_\_, attest I have read, understood and checked the items on this list myself. I attest that if I had any questions about the items in the lists above, I would have discussed them with Gloria Englund before I signed this form. I understand by signing this form, it states I have read and understood my role as a client and Gloria Englund’s role as a Recovery Coach.

Client’s Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Client’s Signed Name \_\_\_\_\_ Date \_\_\_\_\_

Signature of Recovery Coach Gloria Englund \_\_\_\_\_ Date \_\_\_\_\_