



Notice to Families: School-Based Counseling Services

Dear Parents and Guardians,

We are pleased to share that **Ashford Schools** is partnering with **E and P Therapy, LLC** to provide on-site mental health counseling services for students during the school day. These services are designed to support students' emotional well-being, coping skills, and overall success at school.

Who Provides the Services:

Services will be provided by **Dr. Diane Tarricone**, a licensed clinician with E and P Therapy, LLC, a private mental health practice located in Colchester, CT.

What Services Include:

- Individual counseling sessions for students
- Short-term or crisis support when needed
- Collaboration with school staff (with parent/guardian consent)
- Referrals to community-based services or higher levels of care if appropriate

Location and Schedule:

Counseling sessions will take place during the school day, in a private space provided by the school (located in an office in the Library). The schedule will be arranged in coordination with school staff and families to minimize disruption to academic time.

Consent and Confidentiality:

- Written **parent/guardian consent** is required before any services begin.
- Information shared in counseling is confidential and protected under **HIPAA** (for E and P Therapy) and **FERPA** (for the school).
- Information will only be shared with school staff or others involved in your child's care **with your written permission**, except in cases of safety or mandated reporting.

Cost of Services:

E and P Therapy, LLC will handle all billing and documentation.

- Services may be covered by your child's **health insurance**.
- If insurance is not available or does not cover the service, **private pay options** are available. For billing or insurance questions, please contact E and P Therapy directly.

Contact Information:

E and P Therapy, LLC

 752 Middletown Road, Unit A, Colchester, CT 06415

 860-634-4461

 referrals@eandptherapy.com

 <https://sites.google.com/eandptherapy.com/eandptherapy>

We are excited to offer this opportunity to make mental health support more accessible to students and families. Please reach out with any questions or to request consent forms.

To make an appointment email, call or text

referrals@eandptherapy.com

860-634-4461

To schedule an intake we will need the following information to be provided:

1. Client Name
2. Client DOB
3. Parent name
4. Parent phone number
5. Parent email
6. Family mailing address
7. Photo of clients insurance card

E and P Therapy, LLC

752 Middletown Road, Unit A

Colchester, CT 06415

860-634-4461

referrals@eandptherapy.com