

Information Sheet and Consent for Treatment and Services of a Minor Child.

The following information is based specifically on my practice and may not apply to other counselors and therapists.

Consent for treatment of a Child

Effective March 28, 2013, Texas Social Workers must receive a written consent for service prior to working with a minor child in counseling.

§781.203. General Standards of Practice

“Social worker shall ensure that the client or a legally authorized person representing the client has signed a consent for services, when appropriate. Prior to commencement of social work services with a minor client who is named in a Suit Affecting Parent Child Relationship (SAPCR), the licensee shall ensure that all legally authorized persons representing the client have signed a consent for services, if applicable. A licensee shall maintain these documents in the client’s record.”

In the event of a Divorce or other legal matter effecting the parent-child relationship, both parents must sign a consent and if possible, should be kept updated on the progress of the child in counseling.

Prior to the first counseling or assessment session.

The parent bringing in the child for treatment, will be responsible for signing this form and will insure that the other legally authorized parent receives a copy and will sign their own consent for treatment form. An appointment will not be set until I have received this information. The responsibility for getting these signatures falls to the parents. In addition, a copy of the divorce decree or final legal suit regarding a parent-child relationship should be sent for the case record.

If there is a disagreement between the parents about the need for counseling, this therapist will be happy to meet with the concerned parent(s) to discuss any recommendations but, the cost of my time and services will be the responsibility of the objecting parent.

It is important to note that I do not provide Forensic services. I do not work on cases in which there is a possibility of custody litigation or legal testimony. Should this be your concern, please inform me immediately so I can refer you to someone with that expertise.

Should a custodial parent disagree with continuing counseling for a child in a non-life threatening situation, I will not continue the counseling. The parent who wishes counseling for their child should consult their attorney or a judge for more information about the next course of action.

Limits of Confidentiality.

I understand that for counseling to be effective between a counselor and a child, the child needs to feel it is a safe environment to talk and express themselves. In the case where a minor child is the identified patient, the child is considered the client...not the parents.

*It is also important that divorced parents understand that their personal problems and concerns may not fall under the laws of confidentiality... the focus of discussions and treatment should remain on the child and how your personal concerns may be impacting the child. Should you feel counseling would be beneficial. I will refer you to another counselor with experience in your area of concern.

Parents need to be aware that counseling is confidential except under the following circumstances:

1. A Release of Information form is signed. (I ask older children for their consent to speak with their parents)
2. I receive a subpoena which requires me to respond to a court of law, regardless of the party which initiated the subpoena.
3. I have reason to suspect that harm may come to another person or a person may harm themselves.
4. I have reason to suspect that harm has come to a child or a child may harm themselves.

Informed Consent

I agree for my child to participate in counseling to assist in assessing and challenging thinking and behavior patterns which may be negatively impacting my child's health and relationships. Depending on the age and developmental level of my child, counseling may consist of talk therapy, play therapy, family therapy, sibling therapy, etc. I understand that sometimes negative behaviors will get worse at the beginning of counseling because problems are discussed, and it can be an embarrassing or painful process. I am also aware that, for optimal results, I may be asked to reflect on possible changes in my thinking and behavior related to my child that may help change relationship patterns. I agree to talk with the therapist about any concerns I may have about therapy and know that I may discontinue my child's therapy at any time. Under some circumstances a child age 16 and up has a right to withhold information about their treatment. Please be aware that my disclosing this information to parents may be prohibited by law. This can apply to issues regarding drugs, alcohol, pregnancy, and mental health treatment.

*It is recommended that the parent schedule a separate visit with the therapist to discuss major concerns about counseling rather than discuss them in front of the child so that the adults can speak freely without upsetting the child. I would prefer for that meeting to include all the parents so that everyone hears the same information.

My signature indicates that I am legally responsible for/have the legal authority to authorize treatment for the child named below, and that I understand and agree to consent to treatment for my child and accept the limits of confidentiality.

I understand and agree to consent to treatment for my child and accept the limits of confidentiality.

Child's Name:

Parent/Guardian name

Address

City, State and Zip

Email Address

Phone

Signature of Parent: