

CRISTY PARETI, PSYD, LMFT

Licensed Marriage and Family Therapist MFC #47538

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**INFORMED CONSENT
CHILD OR ADOLESCENT PSYCHOTHERAPY**

Minor's Name _____ Date of Birth _____

Parent/Legal Guardian's Name _____

California law requires that parents or legal guardians of clients be provided with information to allow them to make informed decisions regarding their child's participation in psychotherapy. This document provides the following information: risks and benefits of psychotherapy, medical concerns, assessment, the need for children and adolescents to have confidential psychotherapy, collateral contact, treating children of separated and/or divorced families, professional records, confidentiality from third parties, alternative treatment methods, length of treatment, fees for therapy, cancellation policy, and emergency contact information. Please read this information carefully. Inform me of any questions you may have. As these issues are understood, please initial in the places provided.

Initial here if this section has been read and understood _____

Background of Clinician

I am a licensed Marriage and Family Therapist, licensed by the Board of Behavioral Sciences in the State of California. I have a Masters of Arts in Clinical Psychology, and a Doctorate in Clinical Psychology. I have advanced training and experience working with individual adults, groups, families, and children.

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Risks and Benefits of Psychotherapy

The goal of psychotherapy is reduction of symptoms that have resulted in you seeking treatment for your child. However, some individuals experience an exacerbation

of problems or different problems in the course of psychotherapy. Children and adolescents in particular tend to experience an intensification of symptoms after treatment begins due to developmental realities. Awareness and understanding tends to outpace the development of coping strategies. At times, I may be able to identify when this can occur and will notify you. Additionally, I will attempt to provide you with some feedback regarding how best to respond to your child's symptoms and behaviors.

These problems can include increases in anxiety, depression, sadness, sleep disturbances, eliminatory disorders, intrusive thoughts, flashbacks, self-destructive or angry impulses, behavior problems, social problems, academic problems, suicidality, and problems and conflict in family relationships. Hospital care or residential treatment may be necessary.

Children in psychotherapy benefit from having a support system, including family, friends, a supportive school environment, and in some cases, religious affiliations. Expressive activities, such as play, art, writing, music, exercise, are also important for the mental health of children. Other treatment modalities such as family therapy, group therapy, 12 step groups, support groups, and medication may be helpful. Referrals can be provided to help develop a support system at your request.

In most cases, therapy eventually improves a child's sense of well-being and one's relationships. In some cases, children obtain little or no benefit from therapy or become worse. It is not always possible to predict the outcome for an individual. Given this knowledge, the decisions to begin, continue, or terminate therapy for your child generally belongs to a child's parents. In some cases, the decision is that of the child at a certain age, such as in cases involving issues of child abuse, sexual assault, substance abuse, birth control, pregnancy, sexually transmitted diseases, and severe psychological need. These decisions may be evaluated with one's therapist. Clients may also obtain independent consultation for a second opinion at any time.

It is also important to consider that if a genuine mental health issue is present and psychotherapy is recommended, but not pursued, a child may experience a worsening of symptoms and decrease in overall functioning.

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Medical Concerns

I am not a medical doctor and can therefore not recognize or diagnose medical conditions. It is essential that you obtain a medical examination for your child to determine any medical origins of your psychological problems, e.g., neurological disorders, endocrinological abnormalities, glucose and insulin imbalances, effects of toxins, infectious disease, gastrointestinal disorders, side effects of medication, etc. I will provide you with referrals if needed.

Not being a medical doctor, I am unable to prescribe psychiatric medication, but will refer your child for psychiatric consultation if this appears to be indicated.

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Assessment

Psychotherapists must conduct both an initial and ongoing assessment of children to understand their psychological needs. It is essential that you cooperate with this assessment process by completing all forms, questionnaires, and psychological tests provided to you and by meeting with me, with or without your child present, as your child's therapist indicates. Please be completely open and honest with me about all influences that may be affecting your child, even if doing so is painful or embarrassing. Therapists usually cannot tell when parents or children deliberately conceal things. Therapists can only help children with problems to the extent that they are provided with the whole truth.

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The Need for Children and Adolescents to have Confidential Psychotherapy

As a parent or guardian of a child receiving psychotherapy, I will involve you in helping your child to the fullest extent possible. However, the content of your child's sessions must be confidential in order to enable your child to confide in me and for therapy to be effective.

In treatment of adolescents, there are many issues that therapists have no opportunity to address unless adolescents trust that communication in therapy will not be shared with parents or guardians. These issues include use of cigarettes, alcohol, and drugs, sexual behavior, sexual orientation, involvement in gangs, ditching/truancy, school failure, peer involvement that parents do not approve of, and criminal activity. I am committed to work to help him/her behave in ways that are not self-destructive, that do not limit his or her options for the future, facilitate healthy decision-making, and that are considerate to the needs and feelings of others. If any of these issues rise to the level of serious, imminent danger to self or to others, parents and/or appropriate authorities will be notified. As much as possible, I work to notify you as soon as I am able. However, it is possible that authorities will have to be contacted before we can speak.

Having specified the above, it is important to note that this does not preclude communication with me. It is imperative that we have a collaborative working relationship that facilitates and promotes healthy family functioning.

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Collateral Contact with Parents and Others

Your contract with me is collateral, that is, auxiliary to your child's treatment for the purpose of assisting in your child's treatment. I am not treating you and have no therapeutic obligation to you. Therefore, your communication with me is not privileged or confidential. I will provide you with psychotherapy referrals if you request such referrals or if I believe that therapy would better help you help your child.

However, this does not minimize the importance of your participation in your child's treatment. At times, we may work together with your child and/or other members of the family. I am committed to working toward the improvement of all relationships in the family and intend to work with you in as collaborative manner as possible.

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Treating Children of Separated or Divorced Parents

In families of separation and divorce, children's psychotherapists work to help them cope adaptively with the forces acting upon their lives. Treating children in these contexts is difficult because:

1. Both parents usually have different views of the forces acting upon the child and the child's needs.
2. Parents' views may be affected by their own psychological experiences, issues, needs, and experiences with one another.
3. Both parents usually fear that the child's psychotherapist will side with the other parent.
4. Both parents usually fear that the child's psychotherapist will make custody or visitation recommendations that are not in the best interest of the child or parent.

For these reasons, I have instituted the following policies in treating children of separated or divorced parents who share legal custody.

1. Please provide me with a copy of the section of the divorce decree or mediation agreement that specifies custody issues.
2. Both parents must consent to treatment, ideally before the first session with the child, or shortly thereafter. Exceptions will only be made if it is determined clinically appropriate.
3. Both parents will be offered "equal time" in face-to-face or phone contacts as much as realistically possible, unless this is contraindicated, such as cases in which I determine that contact with one or both parents might negatively affect the child (e.g. if there is a concern related to parental abuse or threats to the child).
4. I will not communicate with attorneys for either parent or guardian.
5. Any information provided by one parent may be shared with the other parent by me.
6. I will not provide custody or visitation recommendations to the court, mediator, and/or psychologist conducting a family psychological evaluation. If the child

has a court representative (attorney, guardian ad litem, or other advocate) or if requested by both parents or ordered by the court, I may discuss observations about the child with these parties.

These policies may not apply when a parent resides out of the area or is incarcerated, when parent-child contact is limited by a court (Juvenile, Family, or Guardianship) or court representative (i.e., County Services Agency social worker), when there is substantial evidence that a parent might be physically or psychologically harmful or damage the therapeutic relationship, or when a parent fails to respond to my attempts to establish contact with that parent.

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Cell Phone and E-mail Communication

Cell phone and e-mail communication can be intercepted by third parties therefore confidentiality cannot be guaranteed. We are permitted to use this form of communication but must inform you that I cannot guarantee confidentiality. This is particularly important because I use a cell phone for my office. It provides ease of accessibility that a land line, pager, and answering service does not. Psychotherapists are required to make a record of each client contact. E-mail communications are printed in full and become part of a client's file.

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Confidentiality from Third Parties (Other Than Parents)

Psychotherapy is confidential from parties other than parents with important exceptions:

1. Information may be released to designated parties by written authorization of clients, parents, or legal guardians.
2. When reimbursement for psychotherapy is sought from insurance companies or other third parties, information, including psychological diagnoses, must be provided to the third party. In some cases, explanations of symptoms and treatment plans, and, in rare cases, entire client records, must be provided to the third party. If health coverage is provided by the parent's employer, the employer may have access to such information. Insurance companies usually claim to keep psychological diagnoses confidential, but may enter this information into national medical information databanks, where it may be accessed by employers, other insurance companies, etc., and may limit future access to disability insurance, life insurance, jobs, etc. I will provide you with copies of reports submitted to insurance companies at your request.
3. Psychotherapists are required to release information obtained from children or from collateral sources (other individuals involved in a client's psychotherapy, such as parents, guardians, and spouses) to appropriate authorities to the extent to which such disclosure may help to avert danger to a psychotherapy client or to

others, e.g., imminent risk of suicide, homicide, or destruction of property that could endanger others.

4. Psychotherapists are required to report suspected past or present abuse or neglect of children, adults, and elders, including children being exposed to domestic violence, to the authorities, including Child Protection and law enforcement, based on information provided by the client or collateral sources.

5. If children participate in psychotherapy in compliance with a court order, psychotherapists are required to release information to the relevant court, social service, or probation departments.

6. I must release information, which may include all notes on your child's psychotherapy and contact with collateral sources, in response to a court order, and may also be required to do so in response to a legitimate subpoena.

7. Psychotherapists often consult with other professionals on cases, and teach or write about the psychotherapy process, but disguise identifying information when doing so. Please indicate to your therapist if you wish to place restrictions on consultation, teaching, or writing related to your case.

8. Psychotherapists reserve the right to release financial information to a collection agency, attorney, or small claims court if you are delinquent in paying your bill.

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Professional Records

Psychotherapy laws and ethics require that California licensed psychotherapists keep treatment records. Professional records can be misinterpreted and/or upsetting to untrained readers. Your child and you are entitled to receive a copy of these records unless your therapist believes that seeing them would be emotionally damaging to you or your child, in which case your therapist will review them together with your child or with you or will send them to a mental health professional of your choice, to allow you or your child to discuss the contents. Clients will be charged copying costs plus \$4.00 a minute for professional time spent responding to information requests.

Your child's record includes a copy of the signed informed consent form, acknowledgement of receipt of privacy policy and practices, progress notes, any releases of protected health information, and copies of your insurance claims and records. Records are kept in a locked file cabinet in my office or at my home as I am in the office various days of the week and often find I need access to your child's record when I am not in the office. Please note that my records stay on my person from the moment I leave the office until I arrive home and are immediately placed in this confidential, locked cabinet.

Alternative Treatments

Other treatment approaches are available as an alternative, or as an adjunct, to individual child psychotherapy. These include family therapy, group therapy, 12-step groups and support groups, medication, expressive therapies (e.g., art, writing, psychodrama), cognitive therapy, behavior modification, guided imagery, Eye Movement Desensitization and Reprocessing (EMDR), Accelerated Information Processing (AIP), Traumatic Incident Reduction (TIR), Electroencephalograph (EEG) Spectrum Therapy, Critical Incident Debriefing, careful use of hypnosis and guided imagery, and nutritional consultation.

I am not trained in all of these modalities. For those I have been trained in I will provide you with an explanation for the intervention and obtain your consent if indicated. For those therapies in which I am not trained, I may provide you with referrals if I believe your child would benefit from these services.

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Fee for Psychotherapy

Fees for out-of-pocket psychotherapy sessions and collateral contacts: \$150.00 per 45-50 minutes, including any time missed by being late. Payment is due at each session. I accept PPOs, EPOs and POS as an “out-of-network provider.” I also offer fees on a sliding scale. If a sliding scale fee was agreed upon in your case, the amount agreed upon is \$ _____ per _____/45-50 minutes.

Phone calls exceeding 10 minutes once a week: \$2.00 per minute.

Participation in court related matters, including testimony: \$300.00 per hour.

I understand that payment is due at the end of each session. I agree to cooperate with procedures required to collect third-party payments. If I receive a third-party payment, I agree to turn it over to my therapist as soon as possible.

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Litigation Limitation

Due to the nature of the therapeutic process and the fact that it often involves making a full disclosure with regard to many matters that may be of a confidential nature, it is agreed that should there be legal proceedings (such as, but not limited to, divorce and custody disputes, injuries, lawsuits, etc.), neither you (the patient) nor your attorney, nor anyone else acting on your behalf will call on Dr. Pareti to testify in court or any other proceeding, nor will a disclosure of the psychotherapy records be requested. If, however, you become involved in legal proceedings that require my participation, you will be expected to pay for all of my professional time, including preparation and transportation costs, even if I am called to testify by another party. Because of the

difficulty of legal involvement, I charge \$300.00 per hour for preparation, travel, and attendance at any legal proceeding.

Cancellations

I understand that my child's psychotherapist reserves an appointment time for my child. I agree to call 24 hours in advance if I must cancel a session in order to allow my child's therapist to reschedule her time. If I provide less than 24 hours notice of a cancellation, unless a sudden medical emergency has occurred, I will pay the regular session fee of \$150.00. I understand that my insurance company will not reimburse for this expense.

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Emergencies

I understand that I may telephone my child's therapist in an emergency. My child's therapist is not always immediately available by phone and may not be available in the late evening. If unavailable, my therapist will return my call as soon as possible. If I can not reach my therapist, I can call the 24-hour Crisis Team at 800-479-3339, or I can call 911. When my therapist is out of town, and if I am not also seeing another mental health professional, such as a psychiatrist, my child's therapist will provide me with phone numbers of alternate sources of help.

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Psychotherapy Contract for Parents or Guardians of Child Clients

I have read the above information, have asked questions as needed, and understand the issues related to risks and benefits of psychotherapy, medical concerns, assessment, the need for children and adolescents to have confidential psychotherapy, collateral contacts with parents and others, treatment children of separated or divorced families, professional records, confidentiality from third parties, alternative treatments, length of psychotherapy, fees for psychotherapy, emergencies, and cancellations.

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Length of Psychotherapy

Some psychological problems in children can be alleviated in a few sessions. Other problems requires years of treatment. It is often difficult to predict the length of therapy needed. Some disorders cannot be properly treated within the limitations of some health insurance policies. If this is the case, we will discuss how best to meet your child's needs.

The decision to terminate therapy belongs to the parent or legal guardian, except in cases in which the decision is that of the child at a certain age, e.g. cases involving issues of child abuse, substance abuse, birth control, pregnancy, and severe need.

Terminating therapy with a child should be done over a number of sessions, particularly in cases of a long-term therapeutic relationship. Should you or your child decide to terminate therapy prior to the child's therapist's recommendation, it is important that your child have a final meeting with his or her therapist.

If I believe you are terminating your child's therapy before adequate treatment has been received for your child's psychological problems, your child's therapist will provide you with referrals for other therapists or you may choose to continue therapy with your current therapist.

Initial here if this section has been read and understood _____

Based on my understanding of these issues, I agree to proceed with treatment for my child.

Print Name	Signature	Relationship to Child
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Date

Client Name	Client Signature	Date
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