

David Schaublin, LCSW

CONSENT FOR COUNSELING SERVICES TO ADOLESCENTS

Clients Who Are Dependents:

If you are requesting services for an adolescent as the guardian, the parent, or Managing Conservator/Possessor Conservator of that child, it will be critical that the child trust the therapist. With your understanding in advance, I shall keep what your child says/does confidential.

If I think it would be helpful to share a specific detail with you, I will first ask the adolescent's permission to do so, or I will encourage the adolescent to do so. It is important to the therapy process that he/she does not think the parent and the therapist are conspiring against him/her in any way. You have the right and responsibility to question the therapy process, to understand the nature of activities with the adolescent, and to be informed of the adolescent's progress. I have the right to use my clinical discretion as to what is appropriate disclosure. I will review the adolescent's progress in therapy with you, and I want to obtain feedback from you regarding your interactions with the adolescent and observations of the adolescent in various settings. In this way, we will work as a team. I will value your consultations with me and your involvement. I will discuss with you how you can participate effectively in the adolescent's treatment and progress outside of therapy.

Client Rights:

Clients are also assured of confidentiality, which is a protected ethical right and a New Jersey state law, subject to legal limits. Should I believe it beneficial to me and to you to consult with another professional outside our agency regarding your case, I will notify you and obtain a release of information signed by you. At times, I may seek professional supervision or consultation of the case without identification of the client in any way. There are some exceptions to confidentiality, which are addressed below.

Duty To Warn - Confidentiality

The following are exceptions to confidentiality:

- I am required by law to report any incidence of suspected child abuse, neglect, or molestation in order to protect the child involved;
- In legal cases, I or my records may be subpoenaed by the court system;
- Whenever obligated by law or a judge to share confidential information;
- Whenever there is a legal exception to confidentiality;
- You authorize me to notify relevant other (including a possible victim) and/or law enforcement authorities, if I judge that a client has an intention to harm self or others.

Other Exceptions to Confidentiality are as follows:

- Managed care organizations usually require that I consult with their case managers and provide progress updates to their organization. This is how their personnel determines whether to provide you with necessary authorization for visits. If you have a managed care plan, I have no control over the data required by your organization once it leaves my office.
- Insurance verification
- In divorce cases in which parents share joint custody, either parent has a right to the child's record, unless otherwise stipulated in the divorce decrees.

Keep this first page for your records.

David Schaublin, LCSW

SIGNATURE STATEMENT

1. The minor(s) named below live in my home and I am 18 years of age or older. Yes No
2. Name of Child: _____ Child's Date of Birth: _____
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3. Your Name (please print): _____
4. Your relationship to child(ren): Parent Stepparent Guardian Grandparent Other
5. I hereby swear that I have the following **legal custody** (circle appropriate): Joint Sole None
6. I hereby swear that I have a legal right to obtain treatment for the above-named child(ren): Yes No
7. In instances of divorce, it is essential that the legal custodian of the child(ren) grant permission for the services. If you are a divorced parent, a stepparent, a grandparent, a guardian, or other, you may be asked to provide a copy of the court order which names you the legal custodian of the above child(ren). Are you willing to do so? Yes No

If the answer to any of the above questions is "No," counseling services can not be provided to the above-named child (ren) until a copy of the court order which names you the legal custodian is provided to this office.

- I have read, understand, and agree to the *Confidentiality Statement* and the *Informed Consent/Duty to Warn* (exceptions to confidentiality)
- I am aware of its content and policies and understand that a copy of this *Signature Statement* will be a part of my case record.
- I have read it and if necessary, I have discussed and clarified my understanding of it with David Schaublin, LCSW
- I agree to abide by the terms/policies set forth in this document.
- I consent to have the above named minor(s) receive therapeutic services provided by David Schaublin, LCSW without a parent or guardian present.

Signature of person authorizing consent of services

Date