

ADDITIONAL CONSENT FOR TREATMENT OF MINORS AT IPG

Name of Patient

Date of Birth

The following are additional policies and procedures of Insight Psychological Group (IPG) which apply to the treatment of minors. Please read through them and sign at the bottom of the form.

1. **Consent from Parent or Legal Guardian:** A parent or legal guardian will be required to consent to treatment provided to your child. If the parents of a child are separated, treatment is provided to the child only with the written consent of both parents unless one parent has a custody order authorizing the parent to make medical decisions for the child. If the parents of the child are divorced, consent for treatment of the child may be given by the parent authorized to make medical decisions for the child. If a court of law has ordered that medical decisions for the child are to be made jointly by the child's parents, then consent of both parents is required for treatment of the child. If applicable, you will need to provide us with a copy of the most recent custody decree that establishes custody rights of you and the other parent, or otherwise demonstrates that you have the right to authorize treatment for your child.

2. **Confidentiality:** IPG takes your child's privacy and confidentiality very seriously. We comply with Federal and New Jersey State laws regarding confidentiality of client information. We will minimize the amount of information we share without your or your child's express consent, however we want to bring your attention to certain circumstances in which we may disclose details of your child's care:
 - Your child's therapist may share information about your child's treatment with a supervisor or other clinical managers at IPG. However, it will be done in a way that minimizes the sharing of their personal information to only that which is necessary to ensure the most effective care possible for your child and/or to improve your experience with our services.
 - In certain circumstances, your child's therapist may be required by law to inform you, legal authorities, or potentially impacted individuals, regarding the following possibilities:
 - **Abuse:** When a minor reports that he or she is being abused and/or neglected, our therapists are required by law to report the information to the appropriate social service agency and/or the police. Furthermore, if the Division of Child Protection and Permanency requests that our licensed mental health professionals release information to them, we are required by law to provide them with the requested information.
 - **Duty to warn and protect:** When a minor discloses imminent intentions to harm another person or one's self, our therapists are required by the law to notify the intended victim, and/or the intended family, and/or report the information to the police and/or seek hospitalization for the client(s).
 - If IPG is ordered by a court to release information as part of a legal proceeding, your child's therapist may be required to share details of their care.

3. **The Process of Psychotherapy:** The process and outcome of psychotherapy may vary depending on the particular problems addressed, the dynamic between the therapist, client, parent or guardian and various other factors. We are committed to providing your child with the most professional and ethical treatment possible.

Your child's participation in therapy can result in a number of benefits, including improved interpersonal relationships, resolution of specific problems, and positive personal change. In order for therapy to be successful, your child will need to make an active effort both during and outside of your sessions. Since therapy often involves discussing unpleasant aspects of life, your child may experience uncomfortable and intense feelings like sadness, guilt, anxiety, frustration and anger. In addition, it may even result

in changes that were not originally intended (such as family conflict or other challenges). Change can often happen quickly, but may also occur more slowly. There are no guarantees about what your child will experience. Your therapist's role is to help guide your child through the therapy process by offering emotional support, actively listening to their concerns, asking relevant questions, providing treatment plans and recommendations, and monitoring their treatment progress.

A parent or guardian must attend the first session. During the first session, you and your child's therapist will discuss the reasons you are seeking therapy for your child, or why your child is seeking therapy for themselves, the potential goals for the therapy, and any background information related to your child's presenting concerns. In subsequent sessions, your child and their therapist will work collaboratively towards achieving their goals of therapy. Subsequent sessions may focus on understanding thought patterns, feelings, and behaviors that are relevant to presenting concerns and work towards more effective ways of coping. Your child's therapist may or may not, at their professional discretion and subject to state law, ask you and/or the other parent to join subsequent sessions with your child, or they may request to hold clinical sessions with you and/or the other parent alone to discuss how best to support your child's mental health.

Throughout therapy, your child will work with their therapist to tailor treatment to meet their goals and assess whether the goals are being met. If at any point you or your child are unhappy about the progress, process, or outcome of the treatment, please discuss this with the therapist. There are many different methods your child's therapist may use to address the concerns that bring them to therapy. Your child's therapist strives for genuineness and a nonjudgmental stance in all patient relationships. However, if at any time you or your child feel that your child is not connecting or that the therapist has misunderstood your child in an important way, please discuss your concerns in session with your child's therapist.

Please let your child's therapist know if your child will be traveling to another state or if your child moves to another state. In some cases, therapists are not able to provide services to your child while they are located in another state, even temporarily.

4. **Communication with Parent(s) or Guardian(s):** Generally, information shared in session is confidential. As permitted by applicable federal and state law, your child's therapist may share information about your child's treatment with you. On the one hand, it is best that the treatment overall be cooperative, involving the parents and the child, in order to build and maintain the rapport between your child and clinician since rapport is vital to treatment success. At the same time, however, trust between your child and their therapist is built when information remains confidential.

Therefore, unless there is a safety concern, your child's therapist will be exceedingly judicious about what information is shared with their parents. Your child would be consulted first about any disclosures, and they will be encouraged to share their own information directly with you first in order to establish better communications within the family structure. From time to time, your therapist may update you on your child's progress, with suggestions on how to support his or her mental health, or with information about the therapeutic process. Such updates will generally last no more than 10-15 minutes, so as not to infringe upon the therapist's focused time with your child.

IPG's therapists do not keep records of the specific content of your child's disclosures or discussions with the therapist during treatment, unless required specifically by law. Your child's therapy records will consist strictly of the child's symptoms, presenting problems, diagnosis, the goals for the therapy, the interventions used, and the progress made, aside from any assessments of risks of safety or harm.

5. **Communication with Other Adults:**

- **School:** Your child's therapist will not share information with their school unless you and your child provide written permission to allow communication. Sometimes your child's therapist may want to talk to people at your child's school who interact with your child and may have information that is valuable for treatment and/or may be able to utilize strategies learned in therapy to help in the school environment.

- **Doctors or other care providers:** Your child’s therapist will not share information with their doctor or other care providers unless you and your child provide written permission to allow communication, unless otherwise required by state law. Your child’s therapist may need to speak with your child’s doctor or other care provider to confer on your child’s care.
6. **Therapeutic Focus:** IPG therapists do not make recommendations, write letters of recommendation or complete application forms related to items outside the scope of treatment. Such type of letters or forms our clinicians will not provide include: medical leave forms, medical disability forms, fitness to work assessments, or recommendations for child custody, child residence, or the balance of time spent with either parent, particularly in divided custody arrangements.
- The child’s records will only be released by IPG if presented with a court order signed by a judge.*
7. **Missed Appointments and Cancellations:** IPG requires at least 24 hours advance notice for cancellation of an appointment. If your child is unable to attend their scheduled appointment due to circumstances beyond their control, you or your child must message their therapist directly to cancel or reschedule their appointment. Once an appointment is scheduled, your child will be expected to attend unless you or they contact their therapist to reschedule.
- If a session is cancelled within 24 hours of a scheduled day/time, a Scheduling Fee of \$50 will be charged. If a session is not attended without prior notice, a Scheduling Fee of \$75 will be charged. Failure to provide sufficient notice for cancellations and/or repeated no-shows for your child’s appointment will make their treatment subject to termination.
8. **Emergency Procedures:** In a crisis, please call 911 or go to the local emergency room. Please do not contact your child’s therapist or IPG if your child is experiencing an emergency. In a non-emergency situation, if your child experiences distress prior to the appointment, you or your child may reach out to the therapist for a brief phone or telehealth consultation lasting no more than 10-15 minutes, or to schedule an additional session.
- If your child experiences an emergency during sessions with their therapist, whether in-person or via telehealth, or if your child’s therapist becomes concerned about your child’s personal safety, the possibility of your child injuring someone else, or about your child receiving proper psychiatric care, your therapist will do whatever possible within the limits of the law to prevent your child from injuring self or others and to ensure that your child receives the proper medical care. For this purpose, IPG and your child’s therapist may contact a parent, guardian, or other emergency contact listed in the patient’s file.
9. **Social Media:** IPG believes that adding clients as friends or contacts on social media sites (e.g., Facebook, LinkedIn, etc.) can compromise clients’ confidentiality and privacy. Consequently, given the importance of client confidentiality, your child’s therapist will not accept friend or contact requests from current or former clients or their parents/guardians on any social networking site. If you have questions about this, please raise them with your child’s therapist.
10. **Length of Therapy:** Evidence-based treatments, or treatments that have been rigorously tested and proven to be helpful, typically are shorter-term treatments than general counseling or the general provision of support. Most clients notice some initial changes or relief within the first few sessions of treatment. Your child’s course of treatment will be individualized depending on the intensity and duration of your child’s presenting concerns, your child’s level of engagement and active participation in the treatment plan, and the specific nature of your child’s concerns.
11. **Ending Treatment:** You may withdraw your child from treatment at any time. We strongly encourage you or your child to discuss any plans to end treatment with their therapist before taking action, so that they have an opportunity to offer further recommendations or referral options.

If at any point during psychotherapy your child's therapist assesses that the sessions are not effective in helping your child reach therapeutic goals, your child's therapist will discuss this with you and, if appropriate, end treatment. In such a case, they will work with you to identify alternative options.

If your child does not keep their scheduled appointments and does not respond to communications from their therapist, your child's therapist will assume your child has elected to end treatment and we will close your child's case. If this occurs, and your child wishes to resume treatment, please contact our main offices to reinstate therapy.

Your signature below indicates your agreement to abide by the above policies and provides your authorization for the treatment of the patient mentioned below at Insight Psychological Group:

Name of Patient

Name of Parent/Guardian

Signature

Date

Name of Second Parent/Guardian

Signature

Date