



CHILD THERAPY CONTRACT

Prior to beginning treatment, it is important for you to understand our approach to child therapy and agree to some rules about your child's confidentiality during the course of his/her treatment. The information herein is in addition to the information contained in the Consent for Treatment. Under HIPAA and the APA Ethics Code, we are legally and ethically responsible to provide you with informed consent.

One risk of child therapy involves disagreement among parents and/or disagreement between parents and therapists regarding the best interests of the child. If such disagreements occur, we will strive to listen carefully so that we can understand your perspectives and fully explain my perspective. We can resolve such disagreements, or we can agree to disagree, so long as this enables your child's therapeutic progress. Ultimately, you will decide whether therapy will continue. If either of you decides that therapy should end, we will honor that decision, however we ask that you allow Neuro Harmony, LLC the option of having a few closing sessions to appropriately end the treatment relationship.

PRIVACY/CONFIDENTIALITY - Therapy is most effective when a trusting relationship exists between the therapist and the client. Privacy is especially important in building and maintaining that trust. One goal of treatment is to promote a stronger and better relationship between children and their parents. However, it is often necessary for children to develop a "zone of privacy" whereby they feel free to discuss personal matters with greater freedom. This is particularly true for adolescents who are naturally developing a greater sense of independence and autonomy. *By signing this agreement, you will be waiving your right of access to your child's treatment records.*

PARENT INVOLVEMENT - It is also vital that the parent is involved in the treatment of said child. Parental involvement is required at Neuro Harmony, LLC. It is imperative that at least once a month you, the parent, guardian or GAL, are available, in the office for a consultation with your child's therapist. Your child's therapist will make every effort to communicate with you at least monthly regarding your child's progress.

TREATMENT STATUS - It is our policy to provide you with general information about treatment status. However, if your child is 12 years or older, we are unable to share with you what your child has disclosed unless your child authorizes that information.

RISK - If your child is an adolescent, it is possible that he/she will reveal sensitive information regarding sexual contact, alcohol and drug use, or other potentially problematic behaviors. Sometimes these behaviors are within the range of normal adolescent experimentation, but at other times they may require parental intervention. If we ever believe that your child is at serious risk of harming him/herself or another, Neuro Harmony, LLC will inform you as soon as possible.

COURT OR LEGAL INVOLVEMENT- Although our responsibility to your child may require our involvement in conflicts between the two of you, we need your agreement that Neuro Harmony's involvement will be strictly limited to that which will benefit your child. This means, among other things, that you will treat anything that is said in session with me as confidential. Neither of you will attempt to gain advantage in any legal proceeding between the two of you from our involvement with your children. In particular, we need your agreement that in any such proceedings, neither of you will ask me to testify in court, whether in person, or by affidavit. You also agree to instruct your attorneys not to subpoena me or to refer in any court filing to anything I have said or done.

Note that such agreement may not prevent a judge from requiring our testimony, even though Neuro Harmony, LLC will work to prevent such an event. If we are required to testify, we are ethically bound not to give opinions about either parent's custody or visitation suitability. If the court appoints a custody evaluator, guardian ad litem, or parenting coordinator, Neuro Harmony, LLC will provide information as needed (if appropriate releases are signed or a court order is provided), but "WILL NOT" make any recommendation about the final decision. Furthermore, if your child's therapist is required to appear in court, the party responsible for our participation agrees to pay a \$500 fee to begin court preparation and agrees to pay the current rate of \$200.00 per hour for time spent traveling, preparing reports, testifying, attendance and any other case-related costs.

ABBREVIATED CONTRACT SUMMARY

- If you decide to terminate treatment, Neuro Harmony, LLC reserves the right of having a few closing sessions with your child to properly end the treatment relationship.
- You are waiving your right to access to your child's treatment records.
- Your child's therapist will inform you if your child does not attend the treatment sessions.
- At the end of treatment, your therapist is able to provide you with a summary that includes a general description of goals, progress made, and potential areas that may require intervention in the future.
- If necessary, to protect the life of your child or another person, Neuro Harmony, LLC has the ethical responsibility to disclose information to you without your child's consent.
- You agree that your child's therapist's role is limited to providing treatment and that you "WILL NOT" involve them in any legal dispute, especially a dispute concerning custody or custody arrangements (visitation, etc.).
- You also agree to instruct your attorneys to "NOT" subpoena Neuro Harmony, LLC or any of Neuro Harmony LLC's representatives or to refer in any court filing to anything said or done.
- If there is a court appointed evaluator or Guardian Ad Litem, and if appropriate releases are signed and a court order is provided, Neuro Harmony, LLC will provide general information about the child which "WILL NOT" include recommendations concerning custody or custody arrangements.
- If, for any reason, Neuro Harmony, LLC or your child's therapist is required to appear in court, the party responsible for the participation agrees to pay a \$500 fee to begin court preparation and agrees to pay the current rate of \$200.00 per hour for time spent traveling, preparing reports, testifying, attendance and any other case-related costs.

Parent/Guardian

Date

Parent/Guardian

Date

Witness

Date