WPCS Policy for Treating a Child
Of Divorced, Separated, or Unmarried Parents

We are very pleased to be able to treat your child. Overall, therapy for children is very effective. For children going through a divorce or separation, research has shown a safe and neutral setting to discuss feelings helps with a child’s adjustment.

In order for the therapy to succeed, it is important for you to understand how treatment works and to agree to the following terms and conditions. Please read this information carefully and ask me any questions about it before your child starts treatment.

1. **Treatment will focus on your child.** His/her mental health diagnosis, and any adjustments to changing family conditions. Since the focus will be on your child, I will not be providing mediation, marital counseling, adult treatment, or custody/parenting evaluations. I can provide you with a referral for these services.

2. **Parental involvement in treatment.** I will involve parents in your child’s treatment as is clinically indicated in accordance with my professional judgment.

3. **Your job in treatment is to focus on your child’s needs.** Please protect your child from conflict related to separation/divorce or custody issues. It is important Parents do not argue in front of your child or involve your child in adult conflicts. Please do not bring up complaints about the other parent during your child's session. Whenever possible, support your child's relationship with the other parent.

4. **Parental Disputes:** I will not take sides in any dispute between you and the other parent.

5. **I do not make recommendations for custody, parenting time, parental fitness.** I will not provide an evaluation of any kind to the court. I will not be a willing party to any legal proceedings against either parent. If you are involved in legal proceedings, please notify me as soon as possible. It is important for me to understand how your involvement in these proceedings might affect our work together. My goal is to support your child to achieve therapy goals, not to address legal issues that require an adversarial approach. Parents requesting treatment for their child are agreeing to not involve me in legal/court proceedings and will not attempt to obtain records of treatment for legal/court proceedings. This is to avoid the misuse of your child's treatment for legal objectives.

6. **I will provide each parent updates on progress in treatment as requested.** In addition, I will work with you on what you can do to improve your child’s outcomes in treatment. I will not provide feedback on what the other parent is to do to improve outcomes.

7. **Limits of Confidentiality of Information Provided by Parents.** I keep records about your child's treatment. My treatment records will also include child-focused information supplied by each parent. Please recognize that any information you disclose to me may be included in your child’s treatment record. Be aware this treatment record is accessible by the other parent.

8. **I will report safety concerns.** Although your child's treatment is a confidential and privileged relationship, if I become concerned that your child's safety is in jeopardy I will make a report to the authorities.

**Parent statement:** I have read this information and have had an opportunity to ask questions. My signature below indicates that I agree to all of these terms and conditions of WPCS above stated Policy. Additionally, I acknowledge that my failure to follow and adhere to the terms and conditions of this Policy may impede WPCS ability to provide my child quality care, and could result in termination of treatment.

_______________________________________  ______________________________________
Child Name                                Clinician Name(s)

_______________________________________  ______________________________________
Parent Name                                Parent Name

Parent Signature  Date  Parent Signature  Date