



Lighthouse Child & Family Services

TREATMENT CONTRACT

You may discontinue treatment at any time. There is nothing in this contract requiring you to start or continue in therapy.

Please Initial

_____ Treatment has both benefits and risks, and requires an investment of your/your child's time and energy in order to make the process of treatment most successful. We will begin with a Diagnostic Assessment, which is discussion of your child's needs and concerns, and what it is you/they would like to accomplish by coming for treatment. Next, we will discuss a treatment plan in accordance with the goals and aims.

_____ Treatment works best if we all work as a team. We will work together to establish the goals and duration of therapy. You will be sent quarterly treatment plans and you have the right to discuss and change these at any time.

_____ I am available during normal school days/hours. If you are in need of assistance at times I cannot be reached, you may contact the Crisis Hotline for Mille Lacs County (and surrounding areas) at 1-800-523-3333.

_____ If I am not able to help your child with my services, you have the right to request a referral to another treatment provider who may be better able to meet your needs.

_____ Treatment works best if your child attends appointments consistently. I will coordinate with you and the school to identify the best time to meet with your child. Please also coordinate with me if your child will be absent for an extended period of time or they have an upcoming meeting at the school you would like me to attend. We require a 24-hour notice for cancellation of all appointments, so please contact us at your earliest convenience.

_____ Although confidentiality and privileged communication remain the right of all clients of mental health professionals, there are instances where safety lawfully supersedes confidentiality:

- If an individual intends to make harmful acts or take dangerous actions against another human being
- If an individual intends to take dangerous actions against themselves
- If harmful acts are being done to the client

In these named instances it is the mental health professional's duty to report this to the proper authorities and/or individuals and to warn the person or the family of the person who is likely to suffer the results of harmful behavior, or the family of the client who intends to harm himself.

_____ You are responsible for telling me if you wish to conclude your child's treatment. If you feel your child has reached a point where they no longer need my services, please contact me so discharge paperwork may be completed.

Parent Signature

Date

Client Signature

Date

Therapist Signature

Date