

Carmen Richardson Counselling Therapy and Art Therapy Consent Form – Minors

I, _____ (please print) agree that _____
(Parent or Guardian) (minor/s)
may participate in individual therapy and/or art therapy or group art therapy facilitated by Carmen Richardson.

I authorize Carmen Richardson to maintain a digital and/or hard copy of his/her art work and creative writing in the minor's counselling file. However, any art work that is too large for the file, and is left with Carmen Richardson after services have terminated, will be confidentially disposed of within 6 months.

The laws and standards of the social work profession require that social workers keep record of the therapy and that this record is kept for 10 years in a secure location. After this time period, the file is shredded. When couples, families and groups receive counseling services, separate files for each individual are often kept.

I understand I am choosing to have my child(ren) engage in counselling in order to change and/or improve some aspect(s) of his/her life. Please know that any form of therapy can temporarily and initially cause some discomfort for them and their relationships. The therapist will assist them in resolving these issues and move towards reaching the goals set for therapy. At any time if you believe therapy is not progressing as you would like, please discuss this with Carmen Richardson.

I acknowledge that as guardian I have the right to access the minor's file. However, I waive this right, in order to offer my child(ren) privacy. I understand that Carmen Richardson will keep me updated and apprised of the therapy progress in general terms unless the minor has given permission for more specific information to be conveyed to the guardian.

I understand that Carmen Richardson will, at all times, confidentiality protect the information written or conveyed to her by the minor and his/her guardian. However, I understand the limits to confidentiality in the following situations:

1. If the therapist believes the minor is at present an imminent danger of doing harm to him/herself or someone else. These actions may include notifying family member(s), notifying any potential victim(s), and/or notifying the police,
2. When a minor is being abused the therapist is legally responsible to report these actions,
3. When the file and/or the therapist has been subpoenaed by the court,
4. When I have given written permission to my therapists to release all or part (summaries) of information contained in my child(ren)'s records.

If the child is participating in group counselling, group members are asked to keep information disclosed in group confidential, however, group members are under no legal requirement to do so. Thus, Carmen Richardson cannot guarantee confidentiality when offering group counselling.

If I share with my child's therapist, information about past or present illegal activities or I tell the therapist about professionals (e.g., counsellors, nurses, teachers) who have acted unethical, the therapist reserves the right to take action based on the provided information. Action may involve sharing what was told to relevant bodies such as the Canadian Medical Association or the police.

The therapist will always strive to tell me in advance of any action she might take on these issues and when possible, she will avoid mentioning my name when taking action.

I acknowledge that the therapist will be developing a professional therapeutic relationship with my child(ren), which provides a safe place for the child(ren) to work on the issues identified and reach the therapeutic goals. We will engage in ONLY this professional relationship: not familial, friendship, sexual, or otherwise.

Parent/Guardian

Date

PART II: CONSENT FOR RESEARCH AND TRAINING

I further authorize that the minor's art work and creative writing may be used for Educational and/or Research purposes, for unlimited duration, providing that the therapist removes all identifying features of the minor and the minor consents that I may use his/her work for training/research purposes. Specifically, I understand that the creative work of the minor will be kept anonymous; he/she will not be identified by name, address, or other specific information which may disclose his/her identity to the public.

I understand that the ownership of the original art work, for research and writing purposes, remains with the minor. The risk to giving consent is relatively low. The art work is part of the therapy process, so further work is not required of the client, the minor's identity is protected, and consent can be withdrawn at any time. The benefits of giving consent are that the minor is contributing his/her work to further the development of knowledge in the field of art therapy.

If I have any concerns with how the research is being conducted, I can register my concerns with Carmen Richardson or with the Canadian Art Therapy Association.

I understand that I am free to withdraw consent for the work of the minor to be used for training/research purposes at any time up to 1 year after the last recorded treatment session. However, I recognize that any of the minor's art or creative work that is in published form might not be able to be recalled.

Signed: _____ Date: _____
(Minor)

Signed: _____ Date: _____
(Parent or Guardian)