



# Chatrath Counselling Centre

## PARENTAL INFORMED CONSENT FOR YOUTH UNDER 16 YEARS

### Parental Consent for Counselling/Therapy Participation

Counselling at Chatrath Counselling Centre involves taking part in a process of addressing personal challenges with a professionally trained counsellor, to achieve more fulfilling individual lives, or couple/family relationships. This process of change will be unique to your child's situation. It will consist of:

- Clearly defining problem areas
- Establishing therapeutic goals
- Determining an intervention plan
- Participating in an evaluation

Prior to agreeing to this process, it is important to understand that the person for whom the sessions are scheduled is defined to be “*the client*”. In this context, your child for whom you are consenting, is considered “*the client*”.

Individuals (client and parents) have a right to ask the counsellor about their qualifications, background, and therapeutic orientation. In addition to a qualified counsellor, the match between the client and counsellor will influence the outcomes of counselling. Individuals (client and parents) are encouraged to voice any concerns to ensure services are best suited to the client’s needs. To best deliver therapeutic assistance to children, individuals, couples, and families, we have developed certain policies and procedures. They are as follows:

1. **APPOINTMENT SCHEDULING:** Clients are asked to attend each session as scheduled. A parent will be provided with an email reminder of upcoming appointments. The sessions are 50 minutes in length. Should it become necessary to cancel an appointment, we require a minimum of 24 hours’ notice. Failure to provide 24 hours’ notice for cancellation or re-schedule may result in a full session fee charged.

- I have read and agree to above terms as it pertains to appointment scheduling and cancellation policy
2. **INSURANCE:** It is the parental responsibility to enquire with their insurance provider(s) to determine if services will be covered. By checking the box/initialing, the parent acknowledges they have been advised and encouraged to enquire with their insurance provider(s) prior to beginning services to ensure coverage. Contract counsellors with Chatrath Counselling Centre will have varying credentials under the mental health profession. It is the client's responsibility to enquire with their individual insurance companies to determine if their session with any counsellors associated with Chatrath Counselling Centre.
- I have read and agree to above terms regarding insurance use and client responsibility
3. **CONFIDENTIALITY:** According to professional ethics and federal and provincial laws, all counselling sessions are strictly confidential. However, there are certain limitation to confidentiality as outlined in this information package which have been read and understood. I understand that these confidentiality rights apply to the child for whom I am consenting as they are the client. As a parent, I understand that I am not going to be privy to the content/discussion of the counselling sessions as protected by the parameters of confidentiality.
- I have read the confidentiality information sheet (separate information sheet) and the above statement and agree to the terms
4. **SUPERVISION OF UNATTENDED CHILDREN:** Chatrath Counselling Centre requires children under the age of 12 to be supervised by an adult. Please note that children must always be supervised while in the waiting area. We are not able to provide childcare and supervision while you are in session. Should you be accompanying one child to participate in one of their therapy sessions, we ask that other children are not attending the Centre with you if they require your supervision. We are not able to accommodate waiting room space for accompanying individuals (adults or children) who are not directly engaging in sessions.
5. **FEES:** Session fees are \$100.00-\$125.00 per 50-minute session and are to be paid upon completion of each session. We accept cash, cheque, Visa, MasterCard, and e-transfer as forms of payment. An administration fee of \$25.00 will be added to any NSF (non-sufficient funds) cheques. Subsequent sessions cannot be scheduled without payment receipt of previous appointments. Masters

Candidate Practicum Student(s) full session fees are charged until eligible insurance maximums are reached; sessions thereafter will be billed at a rate determined on a sliding scale basis (determined using Notice of Assessment household income and number of dependents).

6. **TERMINATIONS:** Clients and parents of children/youth deemed not of maturity to consent, have the right to terminate counselling at any time. However, we encourage discussion with the therapist so that sufficient closure can take place. Please note that, due to Chatrath Counselling Centre policy and practice limiting involvement with legal involvement specific to child custody disputes, we cannot provide service involving minor children actively involved in legal proceedings where custody is in dispute and joint consent is not provided. If a client is found to be involved in such circumstances, services will be terminated. Once legal proceedings are completed, service can be resumed.

I am aware of the policy in working with children/youth who become involved in child custody disputes and agree to notify my child/youths counsellor should any proceedings of this nature evolve after the initial starting point of counselling services.

7. **CRISIS SERVICES:** Emergency services are not provided by Chatrath Counselling Centre. If you need immediate assistance, the following are some resources available:

- KLINIC Crisis Line at 204-786-8686
- Crisis Stabilization Centre at 204-940-1781
- Youth Crisis Stabilization System at 204-949-4777
- Manitoba Suicide Line at 1-877-435-7170

8. **RESPECTFUL WORKPLACE:** Please note that Chatrath Counselling Centre is committed to a positive environment in which all individuals (staff, clients, and client families) are treated with compassion, respect, and dignity. Abuse and harassment in any form (verbal, emotional, physical, sexual) will not be tolerated and may result in a termination of services. We reserve the right to refuse and terminate services for reasons in breach of this policy.

I have read, understand and agree with the above noted policy regarding Respectful Workplace

Child/Youth Full Legal  
Name:

Child/Youth Date of Birth:

Parent's Name Providing Consent:

Parent's Name Providing Consent:  
(if dual parental consent is required)


- I have completed the above information including my child's Full Legal Name, Date of Birth and my Name as an Indicator of my consent for my child to participate in counselling services with Chatrath Counselling Centre. In consenting to this service, I am consenting to issue payment for all services provided to my child. I understand that frequency of sessions will be discussed with parent(s) ahead of time to respect the financial commitment being made by families on their child's behalf.

Parental/Guardian Signature#1 (Electronic or Downloaded and Signed)

---

Date Signed with Checked Acknowledgment and Agreement:

---

**SECOND PARENTAL SIGNATURE REQUIRED IN CASES OF SEPERATION/DIVORCE WITH SHARED CUSTODY**

Parental/Guardian Signature#2 (Electronic or Downloaded and Signed)

---

Date Signed with Checked Acknowledgment and Agreement:

---