

# Legal Model for Therapeutic Supervised Parenting Time

written by CPH Insurance | June 15, 2016

In high conflict domestic relations and custody cases, courts often order that a parent may be required to have “therapeutic supervised parenting time”, in order to maintain the safety of a child or children, when they have contact with a parent. Factors which may cause a court to require supervised parenting time may include a history of drug or alcohol problems, allegations of child abuse, or other circumstances which impact a child’s safety while in the parent’s company. Therapeutic supervised parenting time is meant to be a process which will provide clinical services to the child who will be participating in the supervised parenting time process with a parent.

Before beginning a therapeutic process whereby a clinician will be monitoring the time spent by a child in the company of a parent, obtain informed consent from the parent(s) or legal representative for the child who has authority to consent to treatment. If the supervised parenting time will involve a father, for example, then meet first with the child’s mother in order to obtain appropriate history, intake information, and the factors which may have caused the court to order that parenting time be supervised. Discuss the clinical aspect of the supervised parenting time process, including the steps that will be taken to maintain the child’s physical and emotional safety. No doubt, the primary purpose of the court-ordered process will be to improve the child’s relationship with the parent, the child’s comfort level in becoming better acquainted with the parent, as they spend time together, and to provide psycho-educational information to the parent concerning the child’s needs, the child’s emotional safety, and basic parenting tips.

Because of conflicts that have arisen in the past, experience has shown that the child should be the identified client for the clinical aspect of supervised parenting time, so that the parent will be a collateral in the process, who receives feedback and psycho-educational information to better understand the child’s needs and the ways in which the parent can improve his/her parenting practices.

After an initial meeting with the parent who may be providing consent for treatment for the child, but who will not be involved in the supervised parenting time, meet with the parent whose parenting time will be supervised. Establish a good legal and ethical boundary with that individual, informing the parent of the process and its ground rules. Disclose the fact that the parent will be a “collateral” in the child’s treatment process; but will not be a counseling client. Prepare a statement concerning “Policies and Procedures” which will disclose the ground rules, logistics, and the fact that statements made by the parent, as well as your observations of parent-child interactions, may be shared with the other parent, other professionals, or the court (with appropriate consent from the privilege holder for the child). Again, emphasize that a therapist-client relationship with the parent engaged in supervised parenting is not being established; only a therapist-client relationship with the child.

Meet with the child separately, on as many occasions as you may need, until the child is comfortable with the parenting time that will occur. Let the child provide input concerning the ground rules and procedures for the process, especially if the child has been a victim of abuse or neglect in the past committed by the parent whose parenting time is being supervised. Maintain good, thorough notes concerning your process to prepare the child for supervised interactions with the parent.

### **Maintaining Ethical Boundaries**

Frequently, the judges who order therapeutic supervised parenting time invite the clinician who will be conducting that process to make recommendations to the court concerning when the parenting time process no longer needs to be supervised. Because the therapist will be conducting a therapeutic process, no forensic recommendations may be made to the court. If you need to frame concerns regarding a child's safety in having contact with the parent, then address clinical concerns and recommendations carefully, so that you are not committing a boundary violation by making a forensic recommendation to the court, while serving in a clinical role. Because of the fact that you will be providing therapeutic services to the child, designed to accomplish goals for your child client, ensure that you have consent in writing from the child's legal representative, before providing any reports to the court or testimony in court regarding the process, the parent's compliance with your program rules, or progress made by the parent and child toward improving their relationship and the child's comfort level with the parent.