



Juvenile Justice Diversion Treatment Program Partnership Agreement

River Oak
Center for Children

River Oak's Juvenile Justice Diversion Treatment Program provides individual, family, and group therapy for youth and their families. Treatment requires family involvement. We need and want to know what is important to you.

Your facilitator will learn about your young person's situation and work with you to make a treatment plan that fits everyone. If you and your facilitator feel that your family may need more services or a different kind of services, we will meet together as a team to determine how to better meet your needs. This form outlines the responsibilities of each person in this partnership.

The facilitator is responsible to:

1. Schedule regular appointments and be on time.
2. Cancel appointments at least 24 hours in advance.
3. Discuss your concerns and questions with you.
4. Understand your goals for treatment.
5. Use the best-researched methods for treatment.
6. Tailor services to meet youth and family needs.
7. Provide you with strategies to use with your youth and family.
8. Work together with people such as teachers, physicians, social workers, as needed.
9. Help you to connect with supports and resources in your community, as needed.

The parent or caregiver is responsible to:

1. Bring your youth to sessions on time and be ready to participate as requested.
2. Cancel appointments at least 24 hours in advance.
3. Share any changes in your youth and/or their environment with your facilitator.
4. Participate in planning meetings, complete homework assignments, and follow the treatment recommendations.
5. Share any concerns or questions you have about therapy with your facilitator.

The youth is responsible to:

1. Help set your own therapy goals.
2. Being present and ready to participate in all scheduled sessions.
3. Share any questions or concerns you have about therapy with your facilitator.
4. Participate in planning meetings.
5. Complete homework assignments.

We know that your time is valuable and we want to offer you appointments at times and days that work for you. Attendance at scheduled appointments is very important to your youth and his/her treatment.

Missed Appointment Policy

1. If your youth was referred by a Sacramento County Probation, they will be informed of any missed appointments or cancellations.
2. A cancellation must be made 24 hours before the scheduled appointment or it will be considered a missed appointment.

3. After the 1st missed appointment, we will call you to reschedule your appointment. We will talk to you about possible ways we can better meet your needs.
4. After the 2nd missed appointment, we will call you to re-schedule your appointment and a River Oak Family Advocate may call you to see if there are any barriers to using services. They will try to help you overcome these barriers.
5. On the 3rd missed appointment, a letter will be mailed to you asking you to call your facilitator within 10 days. If you do not call your facilitator in 10 days, we will plan on closing services.

Late Policy

If you are more than 20 minutes late for a scheduled session without calling your facilitator, it will be considered a “missed appointment.” If your facilitator is still available, they might be able to see you for the rest of your scheduled session.

Safety Policy

River Oak Center for Children strictly prohibits the possession or use of any firearm or other type of weapon on the premises. This includes parking lots, agency sponsored events or activities. Clients in violation of this policy will be asked to leave the premises. We also request that you secure all weapons and pets are secured before any session occurs in your home.

Collaborative Documentation

Like other health providers, we have a chart for each client. In this chart we write about your goals, your counseling sessions, and other important information. At River Oak we write much of this information with you, so that your perspective is included and you understand what it in your chart. This is called Collaborative Documentation.

Emergencies

If you have any medical concerns please contact your child’s physician. If you have urgent matters to talk about with your facilitator please call them immediately. All facilitators/therapists have voice mail and check it during the day. Your call will be returned as soon as possible. In the event of a mental health emergency involving your child, please refer to your safety plan and the emergency numbers listed on it.

- Emergency Response: 9-1-1
- Sacramento County Minor Emergency Response Team: (916) 875-1000

- _____
Facilitator’s name Phone

- _____
Program Manager’s Name (916) 609-5100
Phone

- River Oak’s emergency on-call system phone number: **(916) 710-5791**

Partnership Agreement Receipt

I have reviewed the Partnership Agreement with my facilitator and understand the responsibilities and limits of treatment. I have been given my facilitator's phone number as well as the emergency On-Call System overview.

Client Name

Client ID #

Caregiver's Signature

Date

Client Signature

Date

Staff's Signature

Date