

LWS Opta Ocanku
Alcohol / Drug Screening
Consent Form

Little Wound School received a 16 month SAMHSA Grant in response to COVID-19 pandemic's impact on Native American Youth with substance use disorders. Our Goal is to decrease substance use through substance abuse education, screenings, assessments, outpatient services, treatment planning, referrals as well as Equine Therapy and culturally based counseling services along with Lakota Healing Ceremonies.

The alcohol/drug screening is the process by which a client is determined to be appropriate and eligible for admission to a particular program. Areas of focus are substance use disorders, substance-related riding/driving risk, and other risky behaviors among youth ages 12-21. Screening tools have been used as part of universal screening efforts in thousands of busy medical and community health settings, as it yields information that can serve as the basis for early intervention and patient-centered counseling.

In the event of a high screening score parent/guardian will be contacted for consent for further assessment and evaluation.

LWS Opta Ocanku Program staff are credentialed in their respective fields of Addiction and Mental Health with many years of experience and education to provide these services.

Statement of Agreement: I acknowledge that I fully understand what I have read. I give consent for my child to participate in counseling with the Opta Ocanku staff at the Little Wound School.

___ I consent for my child to be screened for alcohol/drug use

___ I consent for my child's participation in Lakota Ceremonies; Inipi, smudging/songs.

___ I DO NOT GIVE MY CONSENT FOR MY CHILD TO BE SCREENED FOR ALCOHOL/DRUGS

___ I DO NOT GIVE CONSENT FOR MY CHILD TO PARTICIPATE IN LAKOTA CEREMONIES.

Student Name (Print)

Grade

Parent/Guardian (Print)

Date

Parent/Guardian (Signature)

Date