



STATE OF WASHINGTON

DEPARTMENT OF CHILDREN, YOUTH, AND FAMILIES

KING EAST

805 156th AVE NE
BELLEVUE WA 98007

Veronika Goodnight

Laura an

CASE ID: (2682764)

Dear Veronika,

Thank you for working with the Department of Children, Youth, And Families (DCYF) during your Family Assessment Response (FAR). I hope it was helpful to you and your family. Your case with DCYF is being closed.

As you know, the health, safety and well-being of your family are very important. Joining with your community to find resources, support, and connections is one way to improve your children's safety and well-being. We are providing you with some community resources and programs that may be helpful to you in the future:

Family Voluntary Services at 1-866-363-4276

The Family Help Line is a toll-free number from anywhere in Washington State, available to parents, caregivers, anybody who has an interest in or questions about a child in their community. They can help individuals find resources, parenting classes (YES, INCLUDING Parenting Classes that would meet specific court ordered content), and other community events. They are also a phone call away just to talk and problem solve with callers. You can speak with somebody, or just leave a message for one of their Family Help Line Parenting Coaches to give the caller a call back. In most cases, they can have a live translator on the line in minutes if that is needed.

The Family Help Line recognizes that Washington's families come in all shapes and sizes – and one size doesn't fit all! They have created a statewide network of support, education and leadership programs for Washington's families' unique needs. Call them for help finding local support groups, parent groups, and programs for children and teens tailored to the individuals location within Washington State.

1-800-932-4673 or email at: familyhelpline@parenttrust.org

Family Reconciliation Services at 1-866-363-4276

Family Reconciliation services supporting adolescent children between the ages of 12-17 years. This unit in DCYF helps supports adolescent children struggling with difficult behaviors such as substance use, truancy or running away. Once you call the number and report the concern, a social worker will reach out to you and talk to you to address concerns related to your adolescent child and offer services that will support the adolescent child. The service is completely free of cost for families.

If you have any questions, concerns or comments I can be reached at:

425 515 5925 or at gracey.pearson@dcyf.wa.gov.

Sincerely,

Gracey Pearson, MSW (She/Her)

Child Protective Services

King East Office

Department of Children, Youth and Families

805 156TH AVE NE, BELLEVUE WA 98007

From: KiT Spins kit@kitspins.com
Subject: Withdrawal of Consent for Ongoing Therapy for Aidan and Raina
Date: Apr 25, 2025 at 1:49:11PM
To: Dan Claussen dan@larchcounseling.com
Cc: Danielle Smith danielle@larchcounseling.com, Mario Gaspar De Alba
mario@larchcounseling.com

Dear Danielle, Mario/Dan,

I am writing to formally withdraw my consent for therapy sessions for my children Aidan Goodnight-Ralidak and Raina Goodnight-Ralidak at Larch Counseling.

Recent developments have raised serious concerns regarding the use and content of Aidan and Raina's therapy notes. The notes were used in ongoing legal proceedings in a manner that was misleading, harmful, and detrimental to the children's emotional health. The records show significant inconsistencies, including disclosures that Raina lied, and reflect a one-sided perspective primarily drawn from sessions conducted during my residential time.

As the parent who initially organized therapy for the children, I have always prioritized their emotional well-being. However, given the current temporary separation order, the misuse of therapy records, and the risk of further emotional harm, I must insist that all therapy services for Aidan and Raina be **paused** immediately until the pending legal matters are resolved.

This withdrawal of consent does not apply to Elora Goodnight-Ralidak, whose therapy related to prior trauma continues to be authorized and warranted.

Please confirm receipt of this communication and cancel any pending sessions for Aidan and Raina effective immediately.

Thank you for your attention to this matter.

Sincerely,
Veronika Goodnight
Mother of Elora, Aidan, and Raina Goodnight-Ralidak
(805) 895-0509 | kit@kitspins.com

From: KiT Spins kit@kitspins.com
Subject: Raina's Bedtime Behavior & Concerns Around Transition
Date: Apr 3, 2025 at 11:24:13 PM
To: Danielle Smith danielle@larchcounseling.com

Hi Danielle,

I wanted to share some recent challenges I'm experiencing with Raina, particularly around bedtime and emotional regulation, especially after time with her dad.

This week, I allowed Raina to spend two nights with her dad and Monica during what would normally be my parenting time. I made that choice to support their relationship and hoped it would be positive for her. However, at Elora's softball game, yesterday, I watched Raina use her connection with Monica in a way that felt emotionally manipulative. She was upset with me for not following her timeline, and she responded by sitting directly on Monica's lap in front of me. It really hurt, and I ended up going to my van to hide crying.

Tonight was my first night back with Raina. It was a great day. I picked her up early from school and surprised her with a tour of our new home and then we went to my aerial class with other kids. She played. Danced. It was a beautiful day. At home Colin and I let the kids stay up since it's my last night. We played Uno with the kids—it was fun and went well. I clearly explained that playing a game meant they'd need to go to bed right after. I followed our usual bedtime routine: sang their songs, rubbed Raina's back, cuddled with her and tried to be present and soothing. But Raina kept coming out of the room, escalating each time. Eventually, I went downstairs because I felt I couldn't keep giving attention to the behavior.

Colin allowed her to rest next to him on the couch briefly, but once he said it was time for bed (around 10:43), she began screaming—nonstop, intense “Mom! Mom! Mom!” shrieks. It's still going. Elora and Aidan can't sleep. I'm concerned the neighbors can hear. It's overwhelming.

I don't know if there's a direct connection to her sleeping at her dad's, but I've noticed that when the kids transition from his house, their behavior shifts significantly. Raina has always struggled at bedtime, but this is on a whole new level. It feels extreme, and I'm unsure how to help her through this in a way that's loving but also protective of the rest of the family's peace and emotional well-being. I've done everything. Spanks. Bedtime charts. Stickers. Taking away. Tapping. Essential oils. Snuggles. Songs. Reading. Stories. Tonight was traumatizing. And now tomorrow they leave for a week on their father's spring break time.

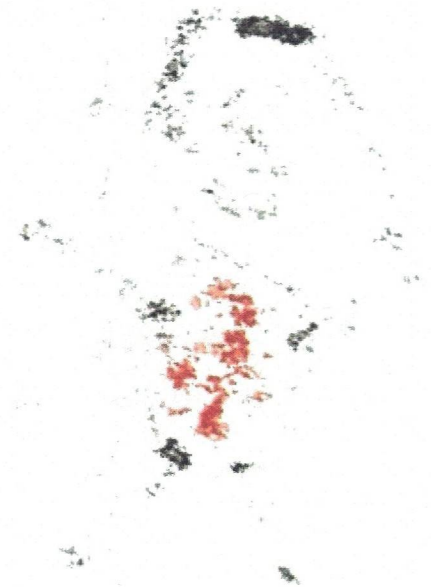
I'd appreciate any insights or suggestions you may have.

-Veronika

Have Mamma

Day You
Are the
Best Mom
I Wish
that I
can See
you

♡ Rain



ESIGNED - SUPPLEMENTAL FIN...



Done

Balance of Harms and Advantages

The Court is required, under RCW 26.09.260(2), to balance the detriments and advantages of changes to the residential schedule.

So far, this Court has focused on discussing Ms. Goodnight's shortcomings and Mr. Ralidak's strengths. However, Ms. Goodnight has many strengths as a parent and Mr. Ralidak has shortcomings. Ms. Goodnight is highly sensitive to the children's emotional needs. Mr. Ralidak is not. When the Court inquired with the parties regarding the emotional needs of the children, Ms. Goodnight discussed how the youngest is prevented by Mr. Ralidak from calling her mother to say goodnight. Mr. Ralidak allows this 6-year-old child to cry herself to sleep, calling out for her mother, because he believes imposing a regimented bedtime routine is paramount. This shows a callous lack of understanding of the children's emotional needs, particularly when applied to a child so young who is missing her primary caregiver.

When the Court inquired about the emotional needs of the children, Mr. Ralidak tellingly did not respond with a discussion of the children's emotional needs, to be heard, to be understood, to be loved. Rather, he discussed routines, stability, responsibility, and other admirable traits and structures that are important for children ... but that have nothing whatsoever to do with their emotional needs. It is clear to the Court that the change in the residential schedule should not result in the children being away from their mother for more than a week; in fact a weeks' time, on a regular basis, may be too long, particularly considering the emotional needs of the youngest child.

In order to accommodate the children's emotional needs, particularly that of the youngest child, not to be away from either parent for a full week; to allow Ms. Goodnight to remind the children to utilize the emotional regulation techniques she is working with them on; and to enable Mr. Ralidak to monitor the children's homework and healthcare more closely, the Court finds it necessary to allow a mid-week visit for each parent.

The Court will also modify various miscellaneous provisions of the parenting plan in an effort to resolve ongoing disputes (and avoid additional court hearings) and more clearly define how the parents must make decisions going forward.

ORDER OF THE COURT:

SUPPLEMENTAL FINDINGS AND CONCLUSIONS

Page 5 of 10

Illness of Child. In the event of serious illness of the child, which affects the residential time of the child with a parent, the parent who misses residential time as a result of the illness shall be granted additional time to compensate for any time lost. Make up time shall be taken within 14 days or deemed waived.

First Right of Refusal. Any absence that results in a parent not being able to personally supervise the children for a period of longer than 72 hours shall result in the other parent receiving the first right of refusal for childcare.

Passports. The parent travelling last shall retain possession of the passports. International travel is strictly prohibited absent written agreement of the parties which shall not be unreasonably withheld. If passports are sought, the other parent must complete all necessary paperwork and send the paperwork to the parent applying for the children's passports via certified mail within 14 days of notice via the parenting app.



Monikers for Third Party Adults. The parties are prohibited from encouraging or supporting the use of the terms "father", "daddy", "mother", "mommy" or any other derivative denoting parenthood to any other person besides Veronika and Mathew.

15. Proposal

Does not apply. This is a Court order if signed by a judge or commissioner below.

16. Court Order

This is a final Court order and replaces all other orders (temporary or final) previously entered in this case.

Order of the Court: The Parties are ORDERED to follow the provisions outlined above.

Other: The Court incorporates all findings of fact and conclusions of law as stated orally at the close of the trial, and as written in the "Order of the Court: Supplemental Findings and Conclusions" entered separately today.



4:48



(WGCS) Wa Group Case Sup...



Emery Lauten

Today

You

I just wanted to upload that larch counseling is unethical and wrong...

OMG. Larch Counseling totally fucked with me, too! Dan LIED to me in emails! He was shady AF! They violated my rights & their ethical responsibility to me in favor of my abuser husband. One of their counselors, Victoria Morgan, is who I hired to work with me and my daughter in person for mother-daughter relationship therapy, but then she talked to Carl (my psycho/ex) by phone and then cut me out completely and declared herself my daughter's private therapist without giving me any notice, even though I am the one who signed the contract and paid her! She has been doing Dan Claussen emailed me this big lie to cover up what they did after I contacted him to complain. My daughter's therapy is now (since then) being done with Victoria via telehealth at Carl's house where he can be



Message





(WGCS) Wa Group Case Sup...



talked to Carl (my son's ex) by
phone and then cut me out
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She has been doing Dan Claussen
emailed me this big lie to cover up
what they did after I contacted
him to complain. My daughter's
therapy is now (since then) being
done with Victoria via telehealth
at Carl's house where he can be
listening and monitoring. I know
he has been coaching my
daughter on what to say to the
therapist and having her practice
in preparation for the GAL. This is
the therapist who supposedly
reported me to CPS, although I
have not been contacted by CPS,
so I assume it didn't pass their
credibility requirements. But yeah,
this Larch Counseling place
sabotaged my therapy with my
daughter and is working for her
abuser & mine. WTF?!?! 😬

EL

4:48 PM



Message





CPS Report Form

CPS Phone Numbers

King: 1-800-609-8764 | **Snohomish:** 1-866-829-2153 | **Statewide:** 866-363-4276

This form is designed to be a flag that a CPS call was made and point it to the correct clinical contact or progress note. Fill this form out to point it towards the correct clinical note that contains a description of why the report was made, and upload it to Therapy Notes. If you are a clinical intern, make sure to notify your supervisor when a report was made.

CPS Report #: 5581786 , Sherry Jackson

Type of Clinical Note Created: Contact Note

Date of Clinical Note: 1-6-2025

Danielle Smith
Therapist Name

Danielle Smith
Signature

2-10-2025
Date



CPS Report Form

CPS Phone Numbers

King: 1-800-609-8764 | **Snohomish:** 1-866-829-2153 | **Statewide:** 866-363-4276

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CPS Report #: (they called me)

Type of Clinical Note Created: Contact Note

Date of Clinical Note: 2/6/2025

Danielle Smith
Therapist Name

Danielle Smith
Signature

2/6/2025
Date



CPS Report Form

CPS Phone Numbers

King: 1-800-609-8764 | **Snohomish:** 1-866-829-2153 | **Statewide:** 866-363-4276

This form is designed to be a flag that a CPS call was made and point it to the correct clinical contact or progress note. Fill this form out to point it towards the correct clinical note that contains a description of why the report was made, and upload it to Therapy Notes. If you are a clinical intern, make sure to notify your supervisor when a report was made.

CPS Report #: 5619864

Type of Clinical Note Created: Contact Note

Date of Clinical Note: 2 - 10 - 2025

Danielle Smith

Therapist Name

Danielle Smith

Signature

2-12-2025

Date



CPS Report Form

CPS Phone Numbers

King: 1-800-609-8764 | **Snohomish:** 1-866-829-2153 | **Statewide:** 866-363-4276

This form is designed to be a flag that a CPS call was made and point it to the correct clinical contact or progress note. Fill this form out to point it towards the correct clinical note that contains a description of why the report was made, and upload it to Therapy Notes. If you are a clinical intern, make sure to notify your supervisor when a report was made.

CPS Report #: 5621715

Type of Clinical Note Created: Contact Note

Date of Clinical Note: 2-14-2025

Danielle Smith

Therapist Name

Danielle Smith

Signature

2-17-25

Date



CPS Report Form

CPS Phone Numbers

King: 1-800-609-8764 | **Snohomish:** 1-866-829-2153 | **Statewide:** 866-363-4276

This form is designed to be a flag that a CPS call was made and point it to the correct clinical contact or progress note. Fill this form out to point it towards the correct clinical note that contains a description of why the report was made, and upload it to Therapy Notes. If you are a clinical intern, make sure to notify your supervisor when a report was made.

CPS Report #: 5629627

Type of Clinical Note Created: Contact Note

Date of Clinical Note: 2-28-25

Danielle Smith

Therapist Name

Daniel Smith

Signature

3-5-25

Date



Contact Note

Larch Counseling PLLC

Date and Time: 1/6/2025 7:48 PM

Note Completed By: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Contacted Party

Name: CPS

Relationship to Patient: CPS

Method of Communication

Phone

Reason for Communication

Safety issues

Billing Information

Time spent: 10 minutes

The patient will not be billed for this communication.

Communication Details

Clinician contacted CPS, for safety concerns regarding threats to my client. The threat included was "That the client would be thrown off the balcony for not listening". Said by a new person the client is living with.

Case Contact: Sherry Jackson

#5581786

Danielle Smith, LMHCA, Licensed Mental Health Counselor Associate, License MC61294206, signed this note and declared this information to be accurate and complete on 1/6/2025 at 7:50 PM.



Contact Note

Larch Counseling PLLC

Date and Time: 2/10/2025 4:17 PM

Note Completed By: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Contacted Party

Name: CPS

Relationship to Patient: CPS

Method of Communication

Phone

Reason for Communication

Safety issues

Billing Information

Time spent: 10 minutes

The patient will not be billed for this communication.

Communication Details

Clinician reached out to update CPS after being made aware of some concerns by father. CPS called clinician last week, and at the time clinician did not have answers to the questions they were asking.

Case Contact Keri Thornhill

Number- 5619864

Danielle Smith, LMHCA, Licensed Mental Health Counselor Associate, License MC61294206, signed this note and declared this information to be accurate and complete on 2/10/2025 at 4:18 PM.



Contact Note

Larch Counseling PLLC

Date and Time: 2/14/2025 2:08 PM

Note Completed By: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Contacted Party

Name: CPS

Relationship to Patient: CPS

Method of Communication

Phone

Reason for Communication

Safety issues

Billing Information

Time spent: 10 minutes

The patient will not be billed for this communication.

Communication Details

Spoke to CPS on 2/14/2025. Clinician followed up with questions about bruises. Clinician disclosed the use of corporal punishment by mom's partner. Clinician stated that client said mom/dad/step mom do not use spanking as a punishment only mom's partner.

Case number-5621715

Contact-Vinjo Chow

*I do not spank! Only twice! Raina says
I don't spank.*

Danielle Smith, LMHCA, Licensed Mental Health Counselor Associate, License MC61294206, signed this note and declared this information to be accurate and complete on 2/14/2025 at 2:11 PM.



Contact Note

Larch Counseling PLLC

Date and Time: 2/17/2025 3:16 PM

Note Completed By: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Contacted Party

Name: Dan Clausen

Relationship to Patient: Therapist

Method of Communication

In Person

Reason for Communication

Safety issues

Billing Information

Time spent: 20 minutes

The patient will not be billed for this communication.

Communication Details

Discussed with supervisor/owner Dan Claussen about CPS called, and how to proceed with both parents.

Danielle Smith, LMHCA, Licensed Mental Health Counselor Associate, License MC61294206, signed this note and declared this information to be accurate and complete on 2/17/2025 at 3:17 PM.

Progress Note

Larch Counseling PLLC

Clinician: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Date and Time: 3/3/2025 1:00 PM - 2:00 PM

Duration: 60 minutes

Service Code: 90837

Location: Duvall Office

Participants: Client only

Diagnosis

F43.25 Adjustment disorder with mixed disturbance of emotions and conduct

Current Mental Status

Orientation:	X3: Oriented to Person, Place, and Time
General Appearance:	Appropriate
Dress:	Appropriate
Motor Activity:	Unremarkable
Interview Behavior:	Appropriate
Speech:	Normal
Mood:	Euthymic
Affect:	Congruent
Insight:	Excellent
Judgment/Impulse Control:	Excellent
Memory:	Intact
Attention/Concentration:	Good
Thought Process:	Unremarkable
Thought Content:	Appropriate
Perception:	Unremarkable
Functional Status:	Intact

Risk Assessment

Patient denies all areas of risk. No contrary clinical indications present.

Medications

none

Symptom Description and Subjective Report

Client was engaged, but disregulated a few times through out our session.

Clinician was approached by mom in the lobby. Mom shared that client hasnt been sleeping well, and is lying. When client came into room, she repeatedly say "all i do is lie, I am liar", and "I am not good".

Clinician asked client if client lies to her, client shared "she has, and that it isnt Collin who spansks her, but her mom". Client shared that mom had spanked her the night before. Client said she lied for mom to not get in trouble.

Client also shared that "my mom doesn't play with me like this, she never has"

Objective Content

Client used play as a way to show her emotions

Client acted out with puppets each emotions, and gave examples of each



Contact Note

Larch Counseling PLLC

Date and Time: 3/7/2025 2:42 PM

Note Completed By: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Contacted Party

Name: Gracey Pearson
Relationship to Patient: DCYF

Method of Communication

Email

Reason for Communication

Safety issues

Billing Information

Time spent: 10 minutes

The patient will not be billed for this communication.

Communication Details

Clinician sent email on 3/7 to Gracey Pearson addressing new safety concerns that Raina shared with me on Monday 3/3. Email is below.

Hi Gracey,

Thank you again for taking my call. I saw Raina on Monday 3/3/2025 where she shared new information with me.

Raina entered my office telling me "I am a bad kid, all I do is lie. I am bad" She shared that mom yells at her all the time, tells her she is lying, and spanks her. When asked how often she gets spanked, Raina replied with "a lot." Raina also said that at her dad's house she is never spanked.

Raina has also asked me questions "why she has to leave dad's house", and made statements that "mom doesn't play with her".

It should be noted that I have not spoken to mom about the use of corporal punishment with Raina. After my interactions with both Raina and mom I have increased concerns of how that information will be used. For that reason I have not talked to the mom about any new information that has been shared with me.

Thanks for your time! Let me know if you have any other questions.

Danielle

Danielle Smith, LMHCA, Licensed Mental Health Counselor Associate, License MC61294206, signed this note and declared this information to be accurate and complete on 3/7/2025 at 2:43 PM.



Contact Note

Larch Counseling PLLC

Date and Time: 4/4/2025 2:11 PM

Note Completed By: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Contacted Party

Name: Gracey Pearson

Relationship to Patient: DCYF

Method of Communication

Email

Reason for Communication

Safety issues

Billing Information

Time spent: 5 minutes

The patient will not be billed for this communication.

Communication Details

Emailed Gracey with new information regarding mom parked out front situation. Confirmed it was mom through sibling. Gracey was updated.

Danielle Smith, LMHCA, Licensed Mental Health Counselor Associate, License MC61294206, signed this note and declared this information to be accurate and complete on 4/4/2025 at 2:12 PM.

*I was parked outside b/c I just finished my therapy session.



Contact Note

Larch Counseling PLLC

Date and Time: 4/6/2025 6:18 PM

Note Completed By: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Contacted Party

Name: Matthew Ralidak

Relationship to Patient: Father

Method of Communication

Phone

Reason for Communication

Safety issues

Billing Information

Time spent: 30 minutes

The patient will not be billed for this communication.

Communication Details

Dad asked to speak on a phone call with me on 4/4. He told me it was urgent. Dad told me that during school pick up, the mother came up to him asking why he called he CPS. He told her he didn't. He said that he felt she was trying to intimidate him with her fiance Collin present. He said he had to get school officials to get involved to ask her to leave, as well as calling the police. He described this situation as unhinged and stated he would be filing a protection order against her and Collin. He wanted to relay this information bout of safety concerns for myself.

Dad also shared that his other two children told him the night before that Raina was slapped across the face, spanked, and thrown against the door.

Danielle Smith, LMHCA, Licensed Mental Health Counselor Associate, License MC61294206, signed this note and declared this information to be accurate and complete on 4/6/2025 at 6:22 PM.

* Fabrication .



Contact Note

Larch Counseling PLLC

Date and Time: 4/6/2025 6:22 PM

Note Completed By: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Contacted Party

Name: Gracey Pearson

Relationship to Patient: DCYF

Method of Communication

Email

Reason for Communication

Safety issues

Billing Information

Time spent: 10 minutes

The patient will not be billed for this communication.

Communication Details

Clinician emailed Gracey on 4/6 with updated concerns about the Father's information. The email is below:

Good Evening Gracey,

Hopefully this will be my last email to you! Thanks again for taking the time to read all my emails and be supportive of this family. Raina's father called me on Friday night to notify me of a couple different things. He told me that the children told him (all second hand information at this point), that Veronika spanked, slapped and threw Raina against the door the night prior. I am meeting with Raina tomorrow, so I will be curious if this is something she brings up in our session.

Lastly, I know there was an altercation at school with the parents. Involving who called DCYF, since it was my email that reopened all this I just wanted to ask if my name will be given to Veronika. I understand that's not your choice, I just want to make sure I am taking any safety precautions as this seems to be escalating.

Thank you again for all your time and dedication.

Danielle

Danielle Smith, LMHCA, Licensed Mental Health Counselor Associate, License MC61294206, signed this note and declared this information to be accurate and complete on 4/6/2025 at 6:23 PM.



Contact Note

Larch Counseling PLLC

Date and Time: 4/6/2025 6:25 PM

Note Completed By: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Contacted Party

Name: Jessica Milian and Dan Claussen

Relationship to Patient: Supervisors

Method of Communication

Phone

Reason for Communication

Safety issues

Billing Information

Time spent: 25 minutes

The patient will not be billed for this communication.

Communication Details

On Friday 4/4 clinician spoke with both Jessica Milian and Dan Claussen for supervision related to all the new information given. Clinician was advised to reach out to Gracey again about physical punishment being used by mom. Supervisors also helped clinician address any safety concerns within the office.

Danielle Smith, LMHCA, Licensed Mental Health Counselor Associate, License MC61294206, signed this note and declared this information to be accurate and complete on 4/6/2025 at 6:27 PM.



Progress Note

Larch Counseling PLLC
Clinician: Danielle Smith, LMHCA
Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Date and Time: 4/14/2025 3:00 PM - 4:00 PM
Duration: 60 minutes
Service Code: 90837
Location: Duvall Office
Participants: Client only

Diagnosis

F43.25 Adjustment disorder with mixed disturbance of emotions and conduct

Current Mental Status

Orientation:	X3: Oriented to Person, Place, and Time
General Appearance:	Appropriate
Dress:	Appropriate
Motor Activity:	Unremarkable
Interview Behavior:	Appropriate
Speech:	Normal
Mood:	Euthymic
Affect:	Congruent
Insight:	Excellent
Judgment/Impulse Control:	Excellent
Memory:	Intact
Attention/Concentration:	Good
Thought Process:	Unremarkable
Thought Content:	Appropriate
Perception:	Unremarkable
Functional Status:	Intact

Risk Assessment

Patient denies all areas of risk. No contrary clinical indications present.

Medications

none

Symptom Description and Subjective Report

Client was engaged and present but struggled talking. Client shared at one point really missing her mom. When clinician asked what part she said all of her mom. Client shared though she was enjoying being at dads, she just wanted to be able to talk to mom. Clinician asked about the "you are my sunshine" song, and client shared that she doesn't like the song because it's the one mom sings. Client shared that she gets nervous to share things in fear mom will be mad. Client told the clinician today "she doesn't trust me anymore"

Objective Content

Client engaged in play with the client to build trust

Interventions Used



Progress Note

Larch Counseling PLLC

Clinician: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Date and Time: 4/16/2025 7:00 PM - 8:00 PM

Duration: 60 minutes

Service Code: 90837

Location: Duvall Office

Participants: Mom, and mom's partner Collin; client not present

Diagnosis

F43.25 Adjustment disorder with mixed disturbance of emotions and conduct

Medications

none

Symptom Description and Subjective Report

Mom asked clinician to meet with both her and partner to discuss bedtime. Mom was emotional and upset after everything that had happened with restraining order and not seeing her children.

Mom and partner laid out the night of bedtime that transpired- Mom believes that Raina came home from dad and is dysregulated. Mom stated there no calming her down, screaming, screaming on the toilet. Mom did normal bedtime routine but eventually had to take a break because Raina wouldn't stop screaming. Eventually mom lost control spanked Raina and told her to "get the fuck out" from that point Alora came out screaming "to not hit her sister". Mom stepped away. Collin took over, and laid with them, and talked to each of them and eventually got them both to calm down and sleep.

Mom showed remorse for her behavior

Alora shared that night that she was worried mom was going to lose custody.

Objective Content

Clinician went over bedtime strategies with mom and boyfriend

Clinician discussed the use of corporal punishment and the importance of remaining calm, and setting the example.

Interventions Used

Cognitive Reframing, Exploration of Relationship Patterns, Preventative Services, Structured Problem Solving, Supportive Reflection, and Symptom Management

Treatment Plan Progress

Objectives

1. Client will be able to process emotions, identify

Progress: Not Addressed

2. Client will learn self-soothing and coping skills for when the client is experiencing big emotions

Progress: Not Addressed

3. The clinician will show the client unconditioned positive regard

Progress: Not Addressed



Progress Note

Larch Counseling PLLC
Clinician: Danielle Smith, LMHCA
Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Date and Time: 5/1/2025 7:00 PM - 8:00 PM
Duration: 60 minutes
Service Code: 90837
Location: Duvall Office
Participants: Client, Stepmom, partime

Diagnosis

F43.25 Adjustment disorder with mixed disturbance of emotions and conduct

Current Mental Status

Orientation:	X3: Oriented to Person, Place, and Time
General Appearance:	Appropriate
Dress:	Appropriate
Motor Activity:	Unremarkable
Interview Behavior:	Appropriate
Speech:	Normal
Mood:	Euthymic
Affect:	Congruent
Insight:	Excellent
Judgment/Impulse Control:	Excellent
Memory:	Intact
Attention/Concentration:	Good
Thought Process:	Unremarkable
Thought Content:	Appropriate
Perception:	Unremarkable
Functional Status:	Intact

Risk Assessment

Patient denies all areas of risk. No contrary clinical indications present.

Medications

none

Symptom Description and Subjective Report

Client reported that she misses mom and is confused. Client reported that she likes being at dad's thought because she no longer has spans or yelling at her. Client says she no longer has to hear her mom called her "bad". Client called stepmom, "mom" throughout our session.

Objective Content

Client did sand tray with clinician and created a story/scene where the mom was bad and died. Client said everything is ruined.

Interventions Used

★ I've never called my daughter "bad"

★ I've spanked my daughter twice when all peaceful remedies exhausted.



Progress Note

Larch Counseling PLLC

Clinician: Danielle Smith, LMHCA

Patient: Raina Soleil Goodnight-Ralidak, DOB 6/3/2018

Date and Time: 5/14/2025 6:00 PM - 7:00 PM

Duration: 60 minutes

Service Code: 90837

Location: Duvall Office

Participants: Client, Step-mom second half

Diagnosis

F43.25 Adjustment disorder with mixed disturbance of emotions and conduct

Current Mental Status

Orientation:	X3: Oriented to Person, Place, and Time
General Appearance:	Appropriate
Dress:	Appropriate
Motor Activity:	Unremarkable
Interview Behavior:	Appropriate
Speech:	Normal
Mood:	Euthymic
Affect:	Congruent
Insight:	Excellent
Judgment/Impulse Control:	Excellent
Memory:	Intact
Attention/Concentration:	Good
Thought Process:	Unremarkable
Thought Content:	Appropriate
Perception:	Unremarkable
Functional Status:	Intact

Risk Assessment

Patient denies all areas of risk. No contrary clinical indications present.

Medications

none

Symptom Description and Subjective Report

Client was engaged and present. Client listened really well and was able to articulate different feelings. Client shared that she really misses her mom but that she is glad she isn't getting slapped anymore. Client shared she does want to go back and live with mom, but also wants to live with dad

Objective Content

Client and clinician did a feelings activity

Client and clinician played and colored

Interventions Used