

Office Policies & General Information

Agreement for Co-Parenting Counseling Services

CONFIDENTIALITY: All information disclosed within sessions and the written records pertaining to those sessions are privileged and confidential and may not be revealed to anyone without your (client's) written permission, except where disclosure is required by law.

WHEN DISCLOSURE IS REQUIRED BY LAW: Some of the circumstances where disclosure is required by the law are: where there is a reasonable suspicion of child, dependent or elder abuse or neglect; where a client presents a danger to self, to others, to property, or is gravely disabled.

WHEN DISCLOSURE MAY BE REQUIRED BY LAW: Disclosure may be required pursuant to a legal proceeding. If you place your mental status at issue in litigation initiated by you, the defendant may have the right to obtain the psychotherapy records and/or testimony by me, Chanise Hendrix, LMFT. In couple and family therapy, or when different family members are seen individually, confidentiality and privilege do not apply between the couple or among family members. I will use my clinical judgment when revealing such information. I will not release records to any outside party unless I am authorized to do so by all adult family members who were part of the treatment.

LITIGATION LIMITATIONS: Due to the nature of the therapeutic process and the fact that it often involves making a full disclosure with regard to many matter which may be of a confidential nature, you agree that should there be legal proceedings (such as custody disputes, injuries, lawsuits, etc.), neither you (clients) nor your attorneys, nor anyone else acting on your behalf, will call on me to testify in court or at any other proceeding, nor will a disclosure of the psychotherapy records be requested.

CONSULTATION: I consult regularly with other professionals regarding my clients; however, neither clients' names, nor any other identifying information, are ever mentioned. My client's identity remains completely anonymous and confidentiality is fully maintained.

TELEPHONE & EMERGENCY PROCEDURES: If you need to contact me between sessions, please leave a voicemail message at (916) 217-7758 and your call will be returned as soon as possible. I check my messages several times each day unless I am out of town. If an emergency arises, please indicate it clearly in your message. If you need to talk to someone right away you may consider calling your family physician.

PAYMENTS, INSURANCE REIMBURSEMENT & RETAINERS: Payment is due upon logging in or at arrival for the appointment unless other arrangements have been made. Each 50-minute session will be billed at the rate of \$160.00 per session. If your insurance will cover this type of counseling, I will supply you with an insurance billing form that you can submit to your insurance provider for direct reimbursement.

____ Yes, I will need an insurance bill for reimbursement.

Clients also agree to pay and maintain a retainer in the amount of \$320.00. Retainers can be used to cover costs described in the pertinent sections below. Unused retainers will be refunded to clients at the end of co-parent counseling.

PHONE, EMAILS AND LETTERS: Phone calls requiring more than five (5) minutes and emails including any information other than scheduling an appointment shall cost the client the same hourly rate as a counseling session for the time required to print and read the emails. If a letter is needed and agreed upon by both parents, there will be a minimum charge of \$100.00. The cost would increase if the time required extends over 20 minutes. Retainers can be used to cover these costs.

THE PROCESS OF CO-PARENTING COUNSELING: Change happens because a person consciously decides to speak and behavior differently. Growth does not happen without purposeful choice and effort by that individual. Your co-parenting relationship will improve to the degree both parents make the wise choice to apply themselves and make the necessary changes. Only you can determine what you will say and do. Please know that your child(ren) will thrive to the degree their parents provide a tension free environment and peaceful parental exchanges.

Referrals: If in the course of our working together I determine that I cannot assist you to the full degree you are in need of, I will refer you to another professional(s) who would likely be more able to assist you in your efforts to produce change and growth in your life.

Dual Relationships: Therapy never involves sexual or business relationships or any other dual relationship that impairs the therapist's objectivity, clinical judgment, and therapeutic effectiveness or can be exploitative in nature.

CANCELLATION: Appointments are arranged so that we share a consistent, ongoing weekly or biweekly scheduled time together. If your appointment must be canceled, a minimum of 24 hours prior notice is expected to avoid being charged for that session. If one parent cancels the session in less than 24 hours, that parent will be responsible for the entire cost of the missed session. You will also be charged if you "No Show" for your scheduled time. Retainers can be used to cover these costs.

My Agreement to You: I agree to assist you in gaining awareness and understanding of the obstacles you face, and to help you gain new skills to make healthy choices in your life, however, this in no way guarantees that the changes you would like to have happen will occur.

I have read the above Office Policies and General Information Agreement carefully; I understand them and agree to comply with them.

_____	_____	_____
Client Name	Signature	Date
Chanise Hendrix, LMFT		
_____	_____	_____
Therapist Name	Signature	Date

Co-Parenting Counseling Intake Form

CLIENT INFORMATION

Full Name _____

Date of Birth ____ / ____ / ____ Place of Birth _____

Gender Male Female Non Binary

Home Address _____

City _____ Zip Code _____

Cell Phone _____ Email _____

Work Phone _____

Occupation _____ Employer _____ Work Hours: _____

Single: _____ Married: _____ Divorced: _____

Relationship Info with Other Parent:

Date of Marriage: _____ Date of Separation: _____ Date of Divorce: _____

Previous Psychotherapy? Yes No

When? _____ With Whom? _____

Referred By: _____

ATTORNEY'S INFORMATION

Attorney' Name _____

Phone Number _____ Email _____

CHILDREN INFORMATION

Name	DOB	Ages
_____	_____	_____
_____	_____	_____
_____	_____	_____

SIGNATURE

Name Signature Date

Co-Parenting Counseling Questionnaire

The following questionnaire is designed to help you think about a variety of aspects of the coparenting relationship important in facilitating the development of adaptive co-parenting skills. Please include as much information as you consider relevant. I will review your questionnaire and may include content as relevant in our meetings.

Describe what is motivating you to pursue co-parenting counseling currently:

Describe your primary goals you wish to accomplish in co-parenting counseling?

What do you feel your significant challenges are to achieve your stated goals?

Co-Parenting Counseling Process

The overarching goal in co-parent counseling is to create a durable structure to support interparent communication about the children they share. The structure is comprised of skills and practices that (1) limit communication to only issues involving the children, (2) facilitate reliable information sharing and (3) provide a pathway to defuse and manage disruptions to competent cooperative communication.

Necessary Skills and Practices for Successful Co-Parenting

Mastery of the following skills and practices are critical to successful co-parent functioning:

1. Developing a business-like relationship with each other as co-parents.
2. Separating the co-parent relationship from parent-child relationships.
3. Learning to communicate effectively, regularly, and specifically about the children.
4. Utilizing opportunities to support each child's relationship with the co-parent.
5. Keeping thoughts, feelings, and attitudes about the co-parent out of each child's ears.
6. Refraining from "venting" to confidants about the co-parent when children can overhear.
7. Learning to share medical, educational, athletic, social, and other relevant information about the children effectively.

The Lens and the Clarifying Question

In order to begin work on the skills necessary to build a durable communication structure, coparents need to be aware that over the course of their relationship with one another, they have developed a lens through which they now see the behavior of the other parent. This lens is likely to color their respective perceptions of the meaning of their co-parent's actions. Becoming aware of this lens allows co-parents to see that they might need additional information before drawing conclusions about the meaning of their co-parent's (apparent) actions that seem off or concerning in some way. Once this possibility is recognized, a co-parent can utilize a "clarifying question". As the name implies, a clarifying question can be asked when a co-parent becomes aware of an incident, or information that is concerning in some way. Perhaps a child reported something that happened at the other parent's home, or someone else reported information that requires input from the other parent for the situation to be better understood. Asking for clarification in an open, non-judgmental way allows co-parents to work together to resolve an issue or plan for further investigation of an incident. The ongoing utilization of clarifying questions can also serve to erode negative lenses that have developed over time and as a function of unresolved conflict.

Ground Rules for Co-Parenting

1. Keep your children in the front of your mind. You are working for them.
2. Do not interrupt each other. You will both have the opportunity to be heard.
3. Treat each other with respect and curtesy. Sarcastic, demeaning, or belligerent behavior is not productive. It is your sole responsibility to remain productive throughout this process.
4. Stay focused on one issue at a time. Working all the way through an issue from both perspectives, provides an opportunity to identify and develop methods for addressing assumptions and misunderstandings in communication.
5. Keep your focus on improving the future for your children. You do not want your relationship with each other to burden them.
6. No blaming, swearing or name calling. You must commit to behaving in a productive fashion for your children.
7. Absolutely no yelling. You are 100% responsible for keeping your own behavior productive throughout this process.
8. While you do not have to agree, you do have to make a commitment to try to see the issues from your co-parent's point of view.
9. If you do not agree with something your co-parent says, that does not automatically mean your co-parenting is lying. There may be other reasons you do not see an issue or situation in the same way. Allowing for this possibility is essential for developing the necessary problem-solving skills that support a collaborative co-parenting relationship.
10. If you feel overwhelmed or unable to continue productively, ask for a break.

For the sake of my children, I agree to adhere to the above co-parenting ground rules.

Client Name

Signature

Date