

# Todd E. Ransford, Ph.D.

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## **PARENT COORDINATION** **POLICIES & INFORMED CONSENT**

**OVERVIEW:** The primary goal of parent coordination is to provide parents with a forum for resolving child-related disputes outside of the courtroom. The duties of a parent coordinator include providing parents with problem solving and conflict management services, monitoring compliance with court orders, and providing parents, attorneys, and the court with recommendations for new or modified parenting time provisions, as necessary. This process differs from both therapy and mediation: there is no therapist/client privilege, the process is not confidential, and insurance companies generally do not offer reimbursement for parent coordination. In addition, the scope of parent coordination is limited to matters concerning your child. It is expected that both parents will maintain a respectful tone during discussions, make good faith efforts toward cooperation, and prioritize the interests of the child over other competing concerns.

**APPOINTMENTS:** I generally meet with each parent separately for an initial one hour visit, followed by 90 minute conjoint visits. At my discretion, I sometimes meet with parents separately beyond the first visit, but the content of these visits is not confidential and a summary of these visits will be made available to the other parent. In order to be effective, the parent coordination process must involve open, sharing communication.

Please make every effort to be on time for your appointments. If you arrive late you will still be seen, but the session will end at the allotted time.

**CANCELLATION:** If you cannot keep your appointment, it will be your responsibility to cancel 24 hours ahead of time. If you do not cancel within 24 hours of your appointment, you will be charged a \$50 late-cancellation fee.

**PAYMENT FOR SERVICE:** My hourly rate is \$180 for all services except court testimony/deposition, which requires reserving either a half-day (\$700) or full day (\$1400). To begin the parent coordination process, I require a \$1000 retainer (\$500 per parent, if fees are being divided equally). This retainer must be paid in full prior to the first date of service. I will request additional money when either parent's retainer dips below \$150 or the combined retainer fund is less than \$300. The fees for conjoint visits will be divided equally between the parents, unless a different fee arrangement is specified in the court order or agreed upon by both parents. Conversely, fees for individual visits and contacts will be charged solely to the individual parent.

Phone consultations, e-mail exchanges, requests for letters, and other case-related services will be billed at \$180 per hour in 15-minute increments (e.g., a 30-minute phone consult would result in a charge of \$90). Charges are assessed to whichever parent is the direct recipient of services. So, for example, if a parent calls me to talk about the other parent's outrageous conduct, the parent receiving the consultation would be charged for my time (not the one behaving outrageously). If, however, I find it necessary to place a call to a parent to mediate a dispute, investigate a problem, or manage a crisis, the parent receiving my call would be billed for any time spent in direct consultation. Fees for conference calls involving both parents will be divided in the same way that conjoint sessions are.

In some circumstances, I may request documents that are needed to form an understanding of relevant family history or specific events (e.g., a custody evaluation or police reports). Time spent reviewing these background materials will be assessed to both parents. However, when a parent submits additional documents to me for review, the parent initiating the request will be charged for these services.

**DISCLOSURE OF INFORMATION:** The information disclosed in parent coordination meetings will be handled with discretion, yet it should be noted that certain legal protections, such as confidentiality and privilege, do not apply to parent coordination. In order to fulfill my duties as a parent coordinator I must be able to communicate with the court and with all attorneys involved in your case. I may also need to communicate with therapists, teachers, physicians, law enforcement officials, and other professionals who have relevant information about parent or child functioning. Parents must agree to sign all releases necessary to obtain information from these professionals.

### STATEMENT OF INFORMED CONSENT

I have read and fully understand the preceding statements and conditions of service. By signing this form, I am agreeing to these terms and authorize Dr. Ransford, for the duration of his appointment as parent coordinator, to communicate with the court and with the attorneys involved in my case.

Signed \_\_\_\_\_

Date \_\_\_\_\_

Client name \_\_\_\_\_

Signed \_\_\_\_\_

Date \_\_\_\_\_

Client name \_\_\_\_\_