

## PARENTING COORDINATION POLICIES AND PROCEDURES

Please initial:

\_\_\_\_\_ CONFIDENTIALITY: Parenting Coordination is not a confidential process. However, confidentiality between parents is assured whenever possible. A Parenting Coordinator is required by law to reveal to other persons or agencies without permission from the participant: 1) if a parent threatens grave bodily harm or death to self or another person; 2) child abuse, elder abuse, or abuse of the mentally handicapped; 3) information legitimately ordered by a court of law.

\_\_\_\_\_ APPOINTMENTS: Appointments may be scheduled by Dr. Marowitz. **You must give at least a 48 hour notice if you need to cancel an appointment. You will be charged for appointments made but not kept.**

\_\_\_\_\_ EMERGENCIES: In case of emergency contact 911 or the Department of Children and Families.

\_\_\_\_\_ FINANCIAL OBLIGATIONS: Fees are as detailed on the Parenting Coordination Fee Schedule. Payment is due at the beginning of each session. The amount charged for each session shall be equally divided between the parents (with the exception of individual sessions) unless designated differently by the court's order.

Issues affecting the child(ren) and /or parents will be discussed in the presence of both parents.

Individual appointments may be scheduled as needed for either parent for the purpose of working on communication skills/strategies, personal concerns about the case, reviewing communication or any other situation important to the parent. Decisions affecting the other parent or child(ren) will not be made during these appointments.

Telephone appointments may be scheduled to inform the Parenting Coordinator of pending issues, discussing strategies that may assist the parent, or in cases where one parent is unable to attend the session in person (i.e. resides out of the area or is traveling).

Telephone calls will be billed to the parent who initiates the call. Emergency calls may be billed to both parents at the Parenting Coordinator's discretion.

Emails will be billed in accordance with telephone call procedures detailed above.

Payment methods are cash, check, Venmo, MasterCard and Visa.

I have read the above and agree to abide by these terms.

\_\_\_\_\_  
PARENT SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
WITNESS