

# CORNERSTONE

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## Custody Evaluation Informed Consent For Participants

### Introduction:

These procedures have been standardized to provide the court with important information about you, the other parent, and your child(ren) so that the court may make the decision about what is in the best interest of your child(ren).

This custody evaluation is designed to give both parents an equal opportunity to be considered for custody, and to assess whether shared custody is feasible. Your cooperation is essential. You may ask to interrupt the evaluation at any time to consult with your attorney without fear that such request will be held against you in any way. It is important that you are honest and that you express your concerns for your child(ren) completely so that I can be sure that I have considered everything that you feel is important.

Carefully read the entire document and write your initials in the space to the left of each of the items to document that you have read, understood, and agree to the conditions of the evaluation. In addition, please date and sign where indicated. Signing this document indicates that you understand the evaluation procedures and agree to participate as specified by the conditions set forth in these documents. You may have your attorney review this agreement, if they so choose, to indicate that he/she understands and agrees with the conditions of this evaluation.

\_\_\_\_ 1. This is an agreement between Dr. Joe A. Lipetzky, PsyD, from here on out referred to as the evaluator, and \_\_\_\_\_, Parent, for the evaluator to render the professional services designated below in the case of \_\_\_\_\_ vs. \_\_\_\_\_. This document constitutes the entire agreement. Modifications to this agreement must be made in writing and signed by both parties.

\_\_\_\_ 2. This evaluation was agreed to by both parties, their respective attorneys, and ordered by the court. The evaluator was appointed by Judge \_\_\_\_\_ in \_\_\_\_\_ County, to assist the court in this case.

- A: The evaluator does not work for either party regardless of their responsibilities for paying the fees for the evaluation.
- B: When a judge appoints an evaluator to assist the court, that evaluator is clothed with judicial immunity from civil litigation, pursuant to Idaho Rule 706.
- C: The evaluator cannot have a prior personal or professional relationship with either party, stepparent, or child(ren) in this case. If during the evaluation it becomes aware that such a relationship exists, the evaluation will be stopped and the evaluator will write a request to the court to be removed from the case so that another evaluator can be assigned. If there are any such relationships you believe to exist, make this known prior to starting the evaluation or as soon as identified.
- D: The evaluator must remain impartial throughout the evaluation process. To do this the evaluator will follow set procedures and protocol. The evaluation will also be balanced with regard to time spent with each parent. All communication to the evaluator, with the exception of the individual interviews and home visits, must be done through written means or through your attorney. The evaluator will not take telephone calls from either parent.
- E: Custody recommendations are not a judgment that would be considered the final word in your case. Often, the recommendations from the evaluator serve as a starting point for negotiations between the parties to reach a settlement. If a settlement is not reached, the judge has the ultimate deciding power for custody decisions. The judge uses the custody evaluation and any conclusions or recommendations to further his or her understanding of the parties and the needs of the child.

- \_\_\_\_\_ 3. The parents hold no privilege for information obtained during evaluations in custody litigation. This means that the evaluator has a duty to report to the court all information that he discovers during the course of this assessment, whether the parent wants the information disclosed or not. This evaluator must take all the information into consideration when determining the best interest of the children.
- \_\_\_\_\_ 4. Parents have some confidentiality through this evaluation process, such that the evaluator will not discuss this case with any person other than the parents, the judge, the parents' attorneys, or the persons that are designated on the reference list, without the parents' written consent. There are, however, limits to confidentiality. Confidentiality will be broken without consent in the case of a parent reporting probable harm to self or others or the abuse of a child.
- \_\_\_\_\_ 5. In this case, the evaluator will render the services listed below:
- Individual interviews with each biological parent
  - Individual interviews with persons in a stepparent role, from here on referred to as the stepparent
  - Interviews with each child at or over the age of six

- Home visits with each parent
- Observations of parents and children
- Psychological testing
- Review of records pertinent to the case
- Possible interviews with collateral contacts
- Possible travel and related expenses
- Preparation of a written report
- Possible extraordinary clerical expenses

\_\_\_\_\_ 6. The evaluation is designed to assess the following:

- The psychological functioning of each parent;
- The history of the parents' relationship;
- The parenting skills and relative strengths and weaknesses of each parent;
- The quality of the relationships between the child and each parent;
- The child's relationships with siblings;
- The presence or degree of family violence or abuse;
- The intensity of the parents' conflict and the degree to which the child is exposed to the conflict;
- The temperament, emotional functioning, and needs of the child;
- The developmental needs of the child;
- The ability of the parents to work together to meet the child's needs;
- The degree of alignment and alienation in the child's relationships and reasons for such relationships;
- Geographic issues with one or both parents desiring to move out of the local area
- The impact of a parent's own childhood on the current dynamics.

\_\_\_\_\_ 7. Allegations of abuse, neglect, or substance use/abuse will be taken seriously and investigated. False allegations in these areas are a serious concern and reflect poorly on the alleging party.

\_\_\_\_\_ 8. Psychological Testing: You must consent to take psychological tests as part of your custody evaluation. Your results from this testing will be interpreted and included in the final report. Sometimes embarrassing information can come out in the testing interpretation. You may also believe that the testing interpretation is not accurate in how you see yourself. However, no custody decisions will be made solely from the psychological testing data. This information is only used to supplement the other data collection in this evaluation.

\_\_\_\_\_ 9. Records: Each parent may provide to the evaluator documents for review. However, each party must follow the evaluation guidelines.

A: Only provide documents that objectively add to the case. Personal journals or calendars should not be included.

B: Provide all documents to your attorney so he/she can verify that the documents are legal and admissible.

C: Keep all originals of documents in your possession. Once documents are provided to the evaluator, it goes into a permanent file and cannot be returned. If you need copies of your documents you will be charged administrative costs.

D: The evaluator's hourly rate will be charged for reviewing documents, so ensure that documents are concise and relevant to your case.

\_\_\_\_\_ 10. The evaluator must also be free to contact any other parties who may have useful information to the case. These individuals are considered to be collateral contacts. It is up to the discretion of the evaluator whether he interviews collateral individuals or not. Most of the time, collateral interviews are conducted over the telephone. The parties must agree to follow the guidelines for collateral interviews.

A: Only persons who have a perceived level of objectivity regarding both parents and the child(ren) will be contacted. Do not list friends or relatives to be contacted.

B: List contacts only on the provided **Collateral Contacts Release of Information form**. Only individuals listed on this form will be considered for contact. Be sure to list the contacts' names, phone number, relation to you, and the type of information they hold related to your case.

C: There is no confidentiality for your collateral contacts. If they are not willing for the evaluator to use their name and document their statement, the interview will not be completed or included in the evaluation report.

D: Inform your contacts that you are undergoing a custody evaluation and that the psychologist **MIGHT** contact them. Ask their permission to be contacted before you place them on your list. Tell your contacts that it is okay with you that they speak with the evaluator and that they have your permission to say whatever they feel to be true and the best interests of the child(ren).

E: If you or your child/children have been in counseling at any time during the last five years, please complete a **Release of Confidential Records and Information** form for each counselor. Please provide this signed release at the onset of the evaluation with your, completed initial paperwork.

\_\_\_\_\_ 11. The evaluator charges an hourly rate of \$175 for all services provided during the custody evaluation. The compensation shall be received as follows:

A: By payment of a deposit of \$3,500 from the responsible party, prior to initiating any service. This is only a deposit and not the total cost of the evaluation. Many times the court assigns responsibility of payment of the evaluation to both parties, either split equally or divided by some other percentage. If this is the case in your evaluation, each party is responsible for their portion of the initial deposit. All funds are held in a trust account and applied to your bill as charges are accrued.

- B: Prior to the release of the final report, the evaluator must be paid in full for all services rendered. The costs of these evaluations typically start at \$3,500 and go up based on the number of adults interviewed, the number of children evaluated, travel time, the amount of documents reviewed, and the extent of collateral contacts. The responsible parties will be notified of their portion of the final bill. No payment arrangements will be made. Final payments must be in cash or secured funds. No personal checks will be accepted.
- C: In the event of a settlement prior to the release of the evaluator's report, the responsible parties agree to pay their portion of all outstanding charges and any extraordinary expenses immediately upon receipt of any itemized statement detailing those charges. Any funds held in trust from deposits and payments that are not used to pay for charges will be refunded to the parties, following legal documentation of said settlement.

- \_\_\_\_\_ 12. It is very important to keep appointments. The schedule of meetings is arranged to balance the assessment and to make sure each party has an equal opportunity to present his or her case. Appointments that are not attended with less than 24 hours notice will be billed at full rate for the full amount of the evaluator's time. Appointments cancelled with more than 24 hours notice, will not be billed. Missed appointments that are not explained clearly will be interpreted by this evaluator as signs that the delinquent party is not cooperative. A lack of cooperation will tend to lower the evaluators estimate of the parent's fitness to obtain custody of the child.
- \_\_\_\_\_ 13. After the evaluator has completed his meetings with all the respective parties in the case, a final report will be written and sent simultaneously to the court and both attorneys. The evaluator will not provide either parent or their respective attorneys with preliminary opinions before the report is submitted to the court. You will receive your copy of the evaluation through your attorney. If there are other professionals involved in the case who require a copy of the evaluation, they also will receive a copy of this evaluator's report only with written consent from both parties. After the submission of the report, all communication between the parties and the evaluator will be stopped. Further communication or information, which arises after the writing of the report, must be submitted through the attorneys. This is to allow the evaluator to maintain his status as impartial expert. Any information given to one attorney must be given to the other attorney. Communication by the parent with the evaluator's office will be asked to cease. If communication continues, the judge and the parent's attorney will be notified of the parent's behavior.
- \_\_\_\_\_ 14. Prior to rendering in-court testimony, the parent agrees to pay any outstanding charges and a \$600 court fee. Typically the party requesting the evaluator to appear in court is responsible for the evaluator's fees. A subpoena without the required deposit will be viewed as invalid and ignored, whereby the evaluator's schedule will not be blocked out for the court time. The court fee will cover up to 4 hours of the evaluator's time, including travel, waiting, and testimony. Any amount of time that exceeds 4 hours will be billed at \$175 per hour.

Depositions will be billed at \$175 per hour and require a deposit based on the number of hours your attorney needs for the deposition. If the deposition is not held in the evaluator's office, travel time and expenses will be added to the deposition time.

- \_\_\_\_\_ 15. The evaluator requests that the parent or the attorney inform him of changes in court, deposition, or other relevant scheduled dates at least one (1) business day in advance. The evaluator would request a minimum of five (5) days notice for court dates. Time which has been reserved by the parent for court, which cannot be rescheduled, will be charged to the parent. The parent hereby agrees to pay these charges, including the cost of collecting unpaid fees, under the terms stated in this agreement.
- \_\_\_\_\_ 16. This agreement may be terminated in writing by the parent or the evaluator for any of the following reasons:
- A. Refusal of one or both parties to participate in the evaluation
  - B. Failure to perform according to the terms of this agreement.
  - C. Misrepresentation of the facts in the case by the parent or attorney.
  - D. An allegation by the parent or attorney that the evaluator engaged in unethical or illegal behavior.
  - E. Settlement between the parties.
- \_\_\_\_\_ 17. Custody disputes are often filled with much negative emotion and a lack of compromise between the parents. Although the evaluator makes his recommendations based on the best interests of the children, the recommendations might be different than what one or even both parents want. When this happens, it can bring about a range of reactions from the parents, including but not limited to; depression, hopelessness, anxiety, confusion, or anger. These feelings are normal, but tend to dissipate over time with the establishment of a consistent parenting plan and routine.
- \_\_\_\_\_ 18. I have read the above, and I agree to proceed with the custody evaluation under these conditions. I agree to pay the fees for which I am responsible and fulfill my obligation to complete the evaluation as ordered by the court. I understand that anything I reveal during this evaluation may be reported to the court. When in doubt, I may consult my attorney before disclosing any information, which I think may be harmful to my legal position. I am encouraged to share this document with my attorney before I sign it.

\_\_\_\_\_  
Parent Signature / Date

\_\_\_\_\_  
Evaluator Signature / Date

## Initial Referral Parties and Child(ren) Involved in Case

Record the names and information of each party and of the attorneys involved this case.

CHILD(REN)

Name	Date of Birth	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
\_\_\_\_\_  
Phone: \_\_\_\_\_  
Attorney: \_\_\_\_\_  
Phone: \_\_\_\_\_

Date of referral \_\_\_\_\_.

Was the evaluation court-ordered? **Yes No** Was the evaluation agreed to by both parties? **Yes No**

Name of presiding judge \_\_\_\_\_ Date of hearing \_\_\_\_\_

**Fee Arrangements:** Responsible party: \_\_\_\_\_

**Fee Payments:** Advance Payment \$ \_\_\_\_\_ Attorney trust Account \$ \_\_\_\_\_

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## Consent for Psychological Services to Children

Name	Date of Birth	Age
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Name of person giving consent: \_\_\_\_\_

Your relationship to the child:  Parent  Stepparent  Grandparent  Other

I, \_\_\_\_\_, am the legal custodial parent of the child(ren) listed above. I consent to the following psychological services for the child(ren) named above.

**Some or all of the following may be used.**

- Clinical Interview of the child(ren)
- Psychological testing of the child(ren)
- Parent Interviews
- Interviews of people from the reference list submitted by the parent
- Interview with physician
- Interview with stepparent or noncustodial parent
- Observations of the children

\_\_\_\_\_  
Signature of person giving consent

\_\_\_\_\_  
Date

\_\_\_\_\_  
Evaluator Signature

\_\_\_\_\_  
Date

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## AUTHORIZATION TO RELEASE INFORMATION FOR MINOR CHILDREN

Authorization to release information on the minor child(ren) listed below is hereby given to \_\_\_\_\_, evaluator. This release is for all records regarding the identity, history, evaluation, testing, diagnosis and treatment of the minor child(ren) listed below. This request is made voluntarily for professional purposes. I can revoke this authorization by giving written notice to the evaluator. If not revoked, this form will be valid for one year from the date it is signed. A photocopy of this authorization will be as valid as the original.

<u>Child(ren)'s Name</u>	<u>Date of Birth</u>	<u>Age</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

\_\_\_\_\_  
Signature of parent or guardian

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of Evaluator

\_\_\_\_\_  
Date