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DISCLOSURE STATEMENT: PRE-ADOPTION MENTAL HEALTH EVALUATION

This statement is a disclosure of certain information about the process of psychological assessment. It details certain rights and responsibilities that you have in this process and gives you some information about me.

My Training, Licensure, and Practice

I received a Doctorate of Psychology (PsyD) in Clinical Psychology from Argosy University/Seattle in 2011. I completed his predoctoral internship at the Fremont Community Therapy Project and Ryther Child Center in Seattle, WA, where I conducted numerous assessments and supervised other students on their clinical work. I am a Licensed Psychologist in Washington Sate (PY60252354). I currently work in a group practice called Spectrum Behavioral Health. I may consult with any of the members of my group during the assessment process to ensure the most accurate results possible.

Approach to Assessment

The assessment process is designed to help me answer questions about the possible causes of problems or distress that you may be currently experiencing. It is not meant to be psychotherapy, and will be brief and focused on the legal questions raised by the attorney who made this referral. The assessment process usually has two parts that require your participation; a structured interview, which normally takes between three and eight hours, and the administration of psychological testing, which normally takes from three to five hours. The times vary depending on how much information you have to share with me, and the complexity of the issues being assessed. I will also probably be reviewing your medical and psychological records, and other written materials relevant to your case. I may also ask you for permission to speak to other people who have known you well who may help me to understand you.

It is important that you understand in advance that this is an independent evaluation. There is a possibility that Dr. Bailey's impressions may be unfavorable to your position, and it is his ethical responsibility to report the findings consistent with the information gained during the assessment process. Dr. Bailey will be making recommendations consistent with the clinical interview, document review, psychological testing findings, and the most up to date research.

Dr. Bailey recognizes that his impressions are very important to you. However, please do not ask him to give you an opinion until he had had an opportunity to hear all information, review the psychological test results, and fully review the file. At that time, feedback will be given either verbally or in written form. He will discuss all findings with you prior to completion of the evaluation.

If during our evaluation you report information to me that causes me to suspect child abuse or vulnerable adult abuse, I must by law report my findings to the appropriate state agencies. I would inform you if I planned to take this step. If I learned that you were likely to harm another person, I must by law inform that person and the authorities. I would inform you if I took that step.

The Evaluation Process

So you know what will happen during the evaluation, here are the steps we will ask you to follow. This step-by-step plan will help Dr. Bailey make fair recommendations pertaining to the pre-adoption process. This evaluation will follow a structured pattern to maximize the fairness and the objectivity of the report. However, Dr. Bailey may modify any part of the process on an individual basis due to the needs of each case.

1. At your initial appointment, you should bring any written documents that you might think would be relevant to your case. (It is very rare that additional background documents are needed in an adoption evaluation.) Please highlight and make notes in the portions of the documents you think are noteworthy.
2. In the first part of the clinical interview you and Dr. Bailey will review the consent form, answer any questions you have, and have you sign that document. Also, if your specific country requires completion of specific paperwork, this will be when those documents will be reviewed.
3. Dr. Bailey will conduct a detailed clinical interview with you and your partner/spouse (if you are married). The interviews will have special focus on mental health issues and your readiness for adoption.
4. Both parties will complete various psychological assessment measures, which will be chosen based on the requirements of the adoption agency or country.
5. Following your structured interview and testing, releases of information will be signed so that the relevant records may be obtained and so that third-party individuals can be contacted who may be able to help with the evaluation.
6. Collaterals will be interviewed if appropriate.
7. All of the documents will be reviewed.
8. A follow-up interview will occur if needed in your case.

Fees

My fee for all parts of the pre-adoption evaluation process, (for example, assessment interviews, test scoring, reading records, talking with the attorney, report writing) is \$250.00/hr. I bill on a monthly basis; fees are payable in full at the end of the month in which services are

rendered. Late bills incur a charge of 1.5% per month on any unpaid balance. I reserve the right to take delinquent accounts to a professional collection agency if the full amount is not paid after three consecutive unpaid monthly bills. Your insurance will not pay for pre-adoption evaluations, since they do not meet insurance company definitions of medical necessity.

Complaints

If you have reason to believe that I have acted in an unethical or unprofessional manner, I encourage you to discuss this directly with me. If you do not feel that I have been responsive to your concerns, there are several formal routes by which you can bring a complaint against me. You can write to the Examining Board of Psychology, Dept. of Health, 1300 SE Quince St., Olympia WA 98504, or to the Ethics Committee of the American Psychological Association, 750-1st Street NE, Washington DC 20002-4242.

Client's Consent to Assessment

We have read the above disclosure statement and understand its terms. We have discussed any questions that I have with Dr. Bailey, and he has answered them to our satisfaction. We agree to my participation in the assessment process as described above. We understand that my statements in this process will not be kept confidential because a report will be submitted to the adoption agency, but I understand that Dr. Bailey will keep these materials private when he is not required by law to share this information. We agree to the release of information to the adoption agency that referred you. We agree to the fees quoted above. We are over the age of eighteen and competent to enter into this agreement.

Parent 1:

Signed: _____

Print Name: _____

Date of Birth: _____

Parent 2:

Signed: _____

Print Name: _____

Date of Birth: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Today's date: _____