

**Beautiful Beginnings Doula Services**

**Jocelyn Skinner**

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[**www.bbdoulaservices.com**](http://www.bbdoulaservices.com)

Letter of Agreement

Describing Services, Limits and Fees

What is a Birth Doula?

As a birth doula, I accompany women in labor to help ensure a safe and satisfying birth experience. I

have received education for the doula role from “The Simkin Center” at “Bastyr University” and

advanced doula training seminars from PALS, NAPS and DONA Doulas. I am certified with

DONA International and PALS Doulas. I follow DONA International's Standards of Practice

and ‘Code of Ethics’ for birth doulas. I draw on my knowledge and experience to provide

Emotional support and physical comfort during your labor and birth using relaxation, massage,

positioning, rebozo, and other pain coping techniques. I am independent and self-employed. As your

doula, I am working for you, not your caregiver or hospital.

**My Services**

* One to two prenatal meetings to discuss your preferences, needs, and concerns for support and comfort in labor.

* Personalized informational support: Explanation of medical terms, finding citations for evidence based care, and researching community resources that fit your needs.

\_\_\_\_\_\_\_\_, \_\_\_\_\_\_\_\_ initial

* Borrowing privileges from my reference library.
* Help preparing your birth preference plan.
* 24-hour availability, with back-up support available.
* Continuous support during your labor
* Birth notes
* Photos of your birth if you so choose, with your camera.
* Two post-partum visits.

**Availability and On-Call Period**

I am on-call for your labor and birth two weeks before your due date, or if you begin showing

preliminary signs of labor before 38 weeks. I remain on-call for you until your baby is born.

**Late pregnancy**

Once you reach 38 weeks, I prefer you keep close contact with me, calling or emailing every week

to let me know how you’re doing. I can make suggestions for increasing physical comfort during this

time, help you negotiate birth preferences with your health care provider and let you know what

physical and emotional signs to look for that could herald impending labor.

**When you are in labor**

I prefer that you call me when you think you are in labor, even if you do not yet need me. I can answer

questions and make suggestions over the phone. We will decide if I should come right then or wait for

further change. I usually need approximately one and a half hours to get to you from the time

\_\_\_\_\_\_\_, \_\_\_\_\_\_\_ initial

you ask me to come. We will also decide where to meet: at your home, the hospital or the birth center.

Except for extraordinary circumstances, I or my back-up will remain with you throughout labor and

birth.

**After the birth**

I usually remain with you for one or two hours after birth, until you are comfortable and your family is

ready for quiet time together. I can also help with initial breastfeeding, if necessary. I will usually come

to your home for your first post-partum meeting within 2-4 after you are home. Within 4 weeks, of

your baby’s birth we’ll have our final postpartum wrap-up meeting. At this point I will have your

birth notes finished.

**Limitations of Practice**

As a doula, I do not:

* + Perform clinical tasks, such as blood pressure, fetal heart checks, vaginal exams, and others. I am there to provide only physical comfort, emotional support and advocacy.
  + Make decisions for you. I will help you get the information necessary to make an informed decision. I will also remind you if there is a departure from your birth plan
  + Speak to medical staff regarding matters where decisions are being made. I will discuss concerns with you and suggest options, but you or your partner will speak on your behalf to the medical staff.

**Fees and Deposit**

My fee is $1000.00. A nonrefundable retaining fee of $500 is due with your signed contract and the

remaining $500 birth fee is due no later than the second prenatal visit. It may be mailed to, 1104 Loves

Hill Dr. Sultan WA. 98294, or paid in person. A refund of your birth fee will be given if you change your

mind regarding my services for any reason, and you give me notice at least two weeks before your due

date. I will refund your birth fee but the retaining fee is nonrefundable. Failure to inform me you are in

\_\_\_\_\_\_\_, \_\_\_\_\_\_\_ initial

labor or, if your labor is precipitous, and I don’t attend your birth because of this, are not causes for a

refund. I offer a 10% active military discount.

\*\*\*I do offer sliding scale or free doula services to teen mothers, single mothers, and mothers who

could not regularly afford a doula. If you are able to pay above and beyond my fees, just know that the

additional amount, allows me to provide these low cost/ free services. The money goes into a

“scholarship” type fund and will cover basic needs such as transportation, materials, and other

expenses.

Sliding scale fee amount agreed to $ \_\_\_\_\_\_\_\_\_, initial \_\_\_\_\_\_\_\_,\_\_\_\_\_\_\_\_\_

Doula’s signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Certification of Acknowledgment and Acceptance of Services**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Client

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Client's Partner

HIPPA Compliance and Client Confidentiality (doulas are not legally bound by HIPPA)

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, at \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (address)

and\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (phone), give my permission for Jocelyn Skinner to take notes about me,

Including personal information I choose to disclose to her, and information regarding the labor, birth

and the postpartum period pertaining to myself and my child. I understand that Jocelyn will share this

information with her back-up partner as well as completing a Data Collection Form for Dona and PALS

for statistical analysis. I understand the Jocelyn will **not** share my information with anyone else without

my expressed verbal consent.

**By signing this document you are agreeing to all the terms of the document and are agreeing to pay the fees and deposit listed in this document.**

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_ Doula signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Partner’s Signature

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Financially responsible party (if different from client)

Due Date: \_\_\_\_\_\_\_\_ Planned Birth Location: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Care Providers: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_