## A. Agreement

In order to ensure the safety of adult, youth, and child victims of domestic violence, dating violence, sexual assault, or stalking, and their families, I shall protect the confidentiality and privacy of persons receiving services.

## B. Nondisclosure

Subject to sections (C) and (D),

1. I shall not disclose, reveal, or release any personally identifying information or individual information collected in connection with services requested, utilized, or denied, regardless of whether the information has been encoded, encrypted, hashed, or otherwise protected;
2. Unless information is compelled by statutory or court mandate, I shall not disclose, reveal, or release individual client information without the informed, written, reasonably time-limited consent of the person about whom information is sought, whether for this program or any other Federal, State, Tribal, or territorial grant program.
3. in the case of an unemancipated minor, the minor and the parent or guardian or in the case of legal incapacity, a court-appointed guardian must give consent
4. consent for release may not be given by the abuser of the minor, incapacitated person, or the abuser of the other parent of the minor
5. If a minor or a person with a legally appointed guardian is permitted by law to receive services without the parent’s or guardian’s consent, the minor or person with a guardian may release information without additional consent.
6. If I am part of a multi-service organization:
7. I shall not disclose, reveal, or release individual client information to any other divisions within this organization, and to the leadership of the organization (e.g., executive director) without the informed, written, reasonable time-limited consent of the person (as described in (B.2).
8. The executive shall have access without releases only in extraordinary and rare circumstances. Such circumstances do *not* include routine monitoring and supervision.
9. If I am a part of an organization with a confidential emergency shelter:

 I shall not disclose the shelter address or location to the public, except with written authorization of the person or persons responsible for the operation of the shelter.

## C. Information Release compelled by Statutory or Court Mandate

1. If information is compelled by Statutory Mandate (such as abuse reporting) or Court Mandate (such as a subpoena), I understand that I must:
2. Make reasonable attempts to notify the survivor, and
3. Take steps necessary to protect the privacy and safety of the persons affected by the release of information.
4. Information Release Compelled by Statutory Mandate, i.e. reports of abuse or neglect

**[ ]  I am a mandatory reporter of**

* + child abuse
	+ elder abuse
	+ abuse of persons with severe and persistent mental illness or developmental disabilities receiving services from a community program

**[ ]  I am not a mandatory reporter**.

1. If I am mandated by Oregon or tribal law to report abuse or neglect, I understand that:
	1. Nothing in these provisions prevent me from reporting suspected abuse or neglect, as those terms are defined and specifically mandated.
	2. Before making a mandatory report, I must make reasonable attempts to notify the survivor and take steps to protect the privacy and safety of the persons affected by the release of information.
2. If I am not mandated by Oregon or Tribal law to report abuse or neglect, *I am prohibited* from reporting suspected abuse or neglect that I learn of in my role as an advocate in connection with services provided or people served.
3. Information Release Compelled by Court Mandate:

If I receive a subpoena, I understand that:

1. I cannot disclose anything to the person serving the subpoena,
2. I must inform my supervisor or executive director immediately,
3. I must make reasonable attempts to notify the survivor, and
4. I (or the organization) must take steps necessary to protect the privacy and safety of the persons affected by any release of information.

## D. Oregon Advocate-Victim Privilege

**[ ]  I am qualified to carry advocate-victim privilege**

* + In Oregon
	+ As covered in Tribal Code

**[ ]  I am not qualified to carry advocate-victim privilege**

If I checked that I am qualified to carry advocate-victim privilege, I certify that:

1. I am associated with a “Qualified Victim Services Program.”
	1. ORS 147.600 and ORS 40.264: A nongovernmental, nonprofit, community-based program receiving moneys administered by the state Department of Human Services or the Oregon or United States Department of Justice or a program administered by a Tribal government that offers safety planning, counseling, support or advocacy services to victims of domestic violence, sexual assault, dating violence, or stalking.
2. I have completed the required 40 hours of training in advocacy for victims of domestic violence, sexual assault, dating violence, or stalking that meets the minimum requirements set out in OAR 137-085-0080 including at least 2 hours focused on confidentiality and privilege, VAWA, FVPSA, and other funding requirements relating to confidentiality and privilege.
3. I feel capable to respond to survivors of domestic violence, sexual assault, dating violence and stalking.
4. I will hold all communications made in course of safety planning, counseling, support or advocacy services confidential.
5. I will maintain the confidentiality of all records that are created or maintained in the course of providing services regarding the victim.

## E. Information Sharing

1. I understand that I may share—
2. non-personally identifying data in the aggregate regarding services to our clients and non-personally identifying demographic information in order to comply with Federal, State, tribal, or territorial reporting, evaluation, or data collection requirements;
3. court-generated information and law enforcement-generated information contained in secure, governmental registries for protection order enforcement purposes; and
4. law enforcement-generated and prosecution-generated information necessary for law enforcement and prosecution purposes.
5. I understand that in **no** circumstances may—
6. an adult, youth, or child victim of domestic violence, dating violence, sexual assault, or stalking be required to provide a consent to release their personally identifying information as a condition of eligibility for the services provided by this organization;
7. any personally identifying information be shared in order to comply with Federal, tribal, or State reporting, evaluation, or data collection requirements, whether for this program or any other Federal, tribal, or State grant program.
8. I also understand that:
9. I am required to keep all client information confidential even after I am no longer employed with the present Qualified Victim Service Program, whether I was terminated, quit, laid off, or my employment otherwise ended;
10. I am required to keep all client information confidential even after the death of the client except in very specific circumstances that will be determined by my Executive Director;
11. I may lose my advocate certification if I violate any of the requirements laid out in this document.

I hereby acknowledge that I understand and will comply with these Confidentiality and Privacy Requirements.

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| --- | --- |
| **Signature** |       |
| **Printed Name, Title** |       |
| **Date** |       |
| **Organization Name** |       |