

DISCLOSURE FORM and CONSENT For SERVICES

Kids Advocates 2.0, LLC, Supervised Visitation Company is contracted with DCF to provide supervised visitation; transportation; parenting education and mentoring services. Because of this your confidentiality is limited. Anything you say during visits can and may be shared with Court system and DCF. However, KA 2.0, LLC maintains a strict level of confidentiality outside of Court system/DCF. Providers also share some information with supervisors and other staff at KA 2.0, LLC as we work together to find appropriate resources to assist you.

All Providers from KA 2.0, LLC are mandated reporters. If you say anything that indicates you are a threat to harming yourself or others we will report it to appropriate officials including your DCF Social Worker. If Provider learns of abuse/neglect he/she will report it. This is necessary for the safety of all people involved.

Your initials in the box below indicate your understanding of our confidentiality and HIPAA policy. After this document has been signed it will be placed in the case file indicating this understanding. In signing this form, you consent to having KA 2.0, LLC supervise your visit, provide parent education, transportation and mentoring services (some or all of these services).



This form was read to me and any questions or concerns were discussed with me.

Please initial above and sign and date this form to indicate your understanding of our Policy.

Signature: _____

Date: _____

Signature: _____

Date: _____

Witness: _____

Date: _____