

**COAST GUARD FAMILY ADVOCACY PROGRAM INFORMATION/LIMITS OF
CONFIDENTIALITY FORM****PRIVACY ACT STATEMENT**

- AUTHORITY:** 5 USC 301; 14 USC 632; 44 USC Chapters 29, 31 and 33; 10 USC 1058 and 1059; COMDTINSTs 1752.1 (series) and 1754.16 (series)
- PRINCIPAL PURPOSE:** To identify and record information on incidents of child and intimate partner maltreatment and provide protection and treatment to military members, family members, and intimate partners.
- ROUTINE USES:** To verify that Family Advocacy Program (FAP) clients are informed of the limits of confidentiality in accepting FAP services. Incident data, risk assessments, safety and treatment plans are used to determine what course of action is needed to ensure that the right services and treatment are provided to FAP clients. Information is also used for quality assurance purposes to improve FAP services. FAP personnel use the data to identify incidence and prevalence rates and trends, track involved families, and to justify appropriate resource allocation. Information provided on this form will not be disclosed externally except in accordance with DHS/USCG-028 Family Advocacy Case Records Systems of Records, 73 FR 77782 (December 19, 2008).
- DISCLOSURE:** Voluntary; however, failure to provide information may delay the provision of appropriate services to the individual.

FAMILY ADVOCACY PROGRAM (FAP)

FAP is a Congressionally-mandated Coast Guard (CG) program which is designed to assist and support persons who are reported as victims or offenders in incidents of maltreatment. The goals of the FAP are to prevent maltreatment within family and intimate partner relationships, assist commands in addressing incidents of maltreatment, and to mitigate the effects of maltreatment incidents on mission-readiness where possible.

The Family Advocacy Specialist (FAS) will gather information about the incident from those involved. The FAS takes immediate action to ensure that persons involved are safe.

Incident information will be shared with an Incident Determination Committee (IDC) at the appropriate CG Health, Safety, and Work-Life Regional Practice (HSWL RP). The AD member's Command will be notified and invited to send a representative to participate on the IDC. The purpose of the IDC is to ensure fairness and accuracy in determining whether or not the incident reported meets the CG criteria for the type of maltreatment that has been alleged.

When an Incident Status Determination of "meets criteria" is made by the IDC, the case is then clinically staffed by the FAS to determine if further assessment and/or treatment or other services are needed. AD members alleged to be offenders may be command-directed to participate in treatment.

Information on incidents determined to "meet criteria" will be accessible in the CG FAP Central Registry. The Central Registry is a database that exists for the purpose of certain background checks required for child-related employment within DoD and the CG, and background requests from DoD FAPs and military criminal investigative offices.

Any person involved in an incident may request that the IDC reconsider the determination if there is new information about the incident that was not made available, or there is reason to believe that the determination process did not follow CG policy.

LIMITS OF CONFIDENTIALITY

The FAS will document information about contacts in the FAP record to ensure continuity of care. In the majority of cases the FAS will limit information shared with commands to the details of the incident(s) that brought you to the FAP, the level of risk for further incidents, and any recommended treatment plan. There are additional exceptions that can determine what information can and cannot be released without your consent. For example:

1. **Safety:** If you threaten to harm yourself, we may seek your hospitalization and/or other assistance to ensure your safety. If you threaten serious bodily harm to another, we are required to take protective actions, such as contacting the intended victim, police, command, or seeking hospitalization.
2. **Abuse:** If we believe that a child, spouse, or vulnerable adult is being mistreated, we may be required by State or other applicable law and Commandant Instruction 1752.1 (series) to file a report. Excepting allegations for which the victim has been granted the restricted reporting option, the FAS is required to report all allegations of maltreatment involving active duty (AD) members to the CG Investigative Service.
3. **Legal:** If you are involved in legal actions/proceedings, your FAP record may be subject to disclosure based on a subpoena or lawful directive from a court.
4. **Privileged Communication:**
 - (1) Privilege under Military Rule of Evidence 513 (psychotherapist/psychotherapist assistant-patient privilege). A patient seeking help for a mental or emotional condition may have a privilege to refuse to disclose and to prevent any other person from disclosing a confidential communication between the patient and a psychotherapist or psychotherapist assistant, in a case arising under the UCMJ. This privilege applies to communications between a patient and psychotherapist, only if such communication was actually made for the purposes of diagnosis or treatment of the patient's mental or emotional state. Communications related to the administrative intake procedures of a FAS who may be a psychotherapist are generally not privileged communications. However, CG policy requires FASs who are psychotherapists to disclose to members of the FAP/IDC and to Command leadership, certain information obtained from a patient, such as incident details of a sexual assault. These communications may break the psychotherapist/psychotherapist assistant-patient privilege in a case arising under the UCMJ.
 - (2) Privilege under Military Rule of Evidence 514 (victim advocate – victim privilege). A victim of a sexual or violent crime may have a privilege to refuse to disclose and to prevent any other person from disclosing confidential communications between the victim and a victim advocate, in a case arising under the UCMJ. The privilege applies only when a victim advocate is acting solely in that role. If the victim advocate is simultaneously acting as the FAS, CG policy requires them to disclose to members of the FAP/IDC and to Command leadership, certain information obtained from a victim, such as incident details of a sexual assault. These communications may break the victim advocate-victim privilege in a case arising under the UCMJ.
5. **Care Coordination:** Since the FAS is part of the HSWL RP Healthcare Team, any treatment plan developed for AD members may be shared and discussed with your Primary Care Provider if you are an AD member. The sharing of this information may result in short entries being placed in your medical record.
6. **Quality Care Review:** Quality assurance personnel may review your record to ensure that care standards are being met. If this occurs the reviewers are required to keep your identity confidential.

STATEMENT OF UNDERSTANDING

I have read the above and understand that information about me will be treated as confidential within the limitations mentioned above and the Privacy Act of 1974.

CLIENT SIGNATURE

DATE

I have reviewed these limitations of confidentiality with the above-identified client to ensure he/she understands them.

FAS SIGNATURE

DATE

All records created as a result of processes prescribed in this form are maintained per Information and Life Cycle Management Manual, COMDTINST M5212. 12 (series)