



Confidentiality Agreement for Court Observers

First Judicial District Family Treatment Court – Lewis and Clark County

I, _____, understand that I am an invited guest of the First Judicial District Family Treatment Court for the purpose of observing the Court's processes and procedures. I understand that these proceedings are confidential and that information from DPHHS-CFSD cases and treatment provider records will be discussed, and understand that these records are used for the purpose of assessing the needs of the Treatment Court participants, creating treatment plans, and monitoring participant participation. Audio and/or video recording of any kind, shall not be permitted during any Court session, staffing event, or other confidential meeting.

I further understand that during the court observation session's/term of my invitation to the First Judicial District Family Treatment Court, I may hear information that is highly sensitive and legally confidential information, pursuant to Federal Rule 42 CFR, Part 2.

I understand that release of this information is punishable as a criminal offense and swear that I will keep all information about the cases, case workers, and any/all discussion of the clients/participants strictly confidential.

Observer Name (Print)

Observer Signature

Date

Witness Name (Print)

Witness Signature

Date

Date of Observation: _____

This Agreement shall expire 365 days after being executed.