

Vanderburgh County Veterans Court
Team Member Memorandum of Understanding
Treatment Provider

I understand that all participant alcohol and/or drug treatment records are protected under the federal Regulations governing the Confidentiality of Alcohol and Drug Abuse Patient Records, 42 C.F.R. Part 2. I agree to uphold all of the requirements of 42 C.F.R. Part 2, including the receipt, security and release of confidential information.

I understand that I am expected to attend and participate in the problem-solving court team meetings and to carry out my assigned problem-solving court responsibilities in accordance with all applicable laws, rules and ethical standards.

All Veterans Court participants that are provided treatment at Southwestern Behavioral Healthcare will be required to have an active Release of Information to the Vanderburgh County Veterans Court.

My treatment court responsibilities are as follows:

- Provide the team members of the participant's progress in treatment and give written reports to the case manager and Participant Advocate.
- Attend the yearly workshop in Indianapolis and additional training hours. Document training hours.
- Other _____

I agree to fully abide by all of the conditions of this agreement.

Glyn Ald Director of Adult Services 2/20/22
Team Member Signature, Title Date

D. D. Kiely 3-1-22
Honorable David D. Kiely Date