**PROVIDING SERVICES AND GIVING CONSENT**

Participation in post-adoption and kinship support services is completely voluntary, and our goal is to provide support based on the specific needs of your family. When services begin, your adoption specialist or kinship support specialist will talk with your family about strengths, needs, and how things are going. You and your assigned worker will work together to decide what services would be helpful. These services are free for families and are paid for by a grant from the Virginia Department of Social Services. In special circumstances, youth and families can receive ongoing services up to the age of 21. If you feel your familiy may qualify for extended services, please reach out to your assigned worker.

**Your Responsibilities:**

* Participate in a conversation with your assigned worker to assess your family’s strengths and needs. This helps the specialist co-plan services to fit your family.
* Let your assigned worker know if your family’s needs change, so services can be adjusted.
* Work with your assigned worker to create a service plan based on your family’s needs. This plan can be updated as your family’s needs change.
* Follow the strategies agreed upon in the service plan, or talk to your assigned worker if there are any problems with the plan.
* If you have any questions about the services being recommended, ask your assigned worker or another team member for help.
* Stay in touch with your assigned worker at least every three months. If there’s no contact for more than 12 months, the case may be closed. However, your home can be opened again if you continue to live in Virginia and have an adopted child or legal guardianship of a relative/fictive kin youth and continue to meet program eligibiliy guidelines.
* You can stop receiving services at any time by letting a team member know. Participation is always voluntary.

Post-adoption and kinshp support services are paid for by a grant from the Virginia Department of Social Services. Services are based on the needs of each family, with the goal of keeping families stable and preventing permanency disruptions. Free services include:

* Case management (advocacy, training, support, referrals to community resources)
* Group activities and events for parents and youths
* Support groups for parents and youths
* Parent night out events
* Educational and training opportunities
* Access to a lending library including books and online training videos

When available, families may also use **Community-Based Services** through DePaul Community Resources**,** which can be covered by insurance or other programs like the Children’s Services Act (CSA). These services include:

* Counseling: individual, family, and intensive in-home counseling
* Family Engagement Services: in-home education and support to help improve relationships and stabilize families.

**REPORTING CONCERNS**

Your opinion about the services you receive is important. If you are not happy with services, please discuss this with your assigned worker as a first step. You may also contact:

Andrea Sabourin, Adoption Program Manager, at [asabourin@depaulcr.org](mailto:asabourin@depaulcr.org) or (2540) 269-0512

Misti Greer, Director of Adoption, at [mgreer@depaulcr.org](mailto:mgreer@depaulcr.org) or (276) 242-8171

Marya McPherson, Vice President of Child and Family Services, at [mmcpherson@depaulcr.org](mailto:mmcpherson@depaulcr.org) or (540) 269-0504

**CONFIDENTIALITY**

Your privacy is important to DePaul Community Resources. All client information is private. We will only share your information if you give written permission, except in these situations:

1. Mandated reporting of abuse, neglect, self-harm, harm to others, duty to warn of threat to harm others, or inability to care for self.
2. Medical emergency; for the purpose of preventing injury to or death of client or another person.
3. Subpoena for records, legal counsel, hearings, reviews, appeal or investigation under the regulations of Licensing, Human Rights, or certification or accreditation. (12 VAC 35-115-80)

**HIPAA**

I acknowledge that I have received the Notice of HIPPA Privacy Practices for DePaul Community Resources.

**CLIENT RIGHTS**

You have the right to:

* Be treated with dignity and respect
* Be informed about your services
* Have a say in your services
* Speak privately to others
* Have your complaints addressed
* Share your preferences
* Ask questions and be informed about your rights
* Get help with your rights

*You will be asked to sign an “acknowledgment of orientation and receipt of privacy practices,” which confirms that you have received and agree to the above information. Thank you for participating in Post-Adoption Services.*

**ACKNOWLEDGEMENT OF ORIENTATION AND RECEIPT OF PRIVACY PRACTICES**

The following areas have been covered in discussion and a handout has been given to me to orient me to DePaul Community Resources and the service(s) I will receive:

Provision of services and consent, including services available

Grievance procedures

Confidentiality

HIPPA

Client Rights

**Signature indicates acknowledgement and agreement to all the above.**

Parent/Legal Guardian signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:

Parent/Legal Guardian signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: