

Harriett Buhai Center for Family Law
Confidentiality and Conflicts of Interest Pledge

The Harriett Buhai Center for Family Law (Center) relies upon the following statutes and codes in establishing this agreement, including but not limited to the California Rules of Professional Conduct and the California Business and Professions Code. If you are unable to abide by the terms set forth below, please refrain from signing this agreement and inform the Volunteer Coordinator or Pro Bono Manager. Regrettably, we may not be able to have you participate in the volunteer program.

Duty of Confidentiality:

1. I understand that the Center is a nonprofit law firm formed to provide free legal services to indigent persons. Because the Center provides legal advice to its clients, the Center is bound by the duty of confidentiality and performs a conflict check on all clients. All information gathered at the Center by any individual operating under its auspices in any capacity must be kept strictly confidential. The duty of confidentiality applies to all staff and volunteers.
2. I understand that the duty of confidentiality applies to me because everyone who provides services at the Center, both lawyer and non-lawyer alike, function under the scope of professional responsibility of the Center, as set forth in the California Rules of Professional Conduct.
3. I understand that confidentiality is necessary for the integrity of the legal process because trust is essential for open communication between lawyer and client, which facilitates effective assistance and representation.

Example:

- a. If a client reveals that they committed a crime in the past, the volunteer may not report this crime to authorities or discuss it outside the Center with anyone. Additionally, if a client discusses business plans or financial circumstances with a volunteer, this information cannot be used by the volunteer in any way outside of the Center and cannot be shared with other clients or individuals.
In fact, the only time information learned by a volunteer can be used is to prevent a client from committing a future crime that the volunteer believes will result in serious bodily injury or death to themselves or another individual. All other information should be kept strictly confidential, not to be discussed in any public place or to report any past criminal

action. Before revealing this confidence, the volunteer must discuss it with a supervising staff attorney.

Mandatory Reporters and Others:

4. I agree that anything I witness, learn, hear, or work on while at the Center will be held confidential and not be used for any other purpose at any time, even if I am a mandated reporter or have other professional duties that conflict with the duty of lawyer-client confidentiality.
5. I understand that while providing services for the clients of the Center and/or performing any other work, any responsibilities I have in my professional capacity or like employment or duty are subordinate to the Center's primary duty of confidentiality of attorney-client communication and may never be used or acted upon.
6. I agree that while volunteering at the Center, any mandatory reporter's duty to report an incident is suspended. Mandatory reporters cannot report any incidents learned about while volunteering at the Center due to the duty of confidentiality, as explained above.

Example:

- a. Mandated reporters have a duty to report known or suspected child abuse or neglect while acting in their professional capacity. For example, a teacher or DCFS case worker is a mandatory reporter. If teachers or DCFS case workers are volunteering at the Center, they are not permitted to make reports regarding suspected child abuse. This is both because the mandatory reporter's duty does not attach when acting outside professional capacities and because the Center has a duty of confidentiality toward all clients.

Conflicts of Interest:

7. I understand that because I am operating under the auspices of the Center that I must abide by the rules governing conflicts of interest for lawyers. Specifically, I understand that I cannot help adverse parties when the information I received or learned at the Center in the course of my service from one party will or might affect the way I assist the other person, except as permitted under California Rule of Professional Conduct 1-650.
8. I understand that California Rule of Professional Conduct 1-650 only protects me from identifying conflicts if I am a) an attorney providing short-term limited legal services to a

client through the Center, b) both the client and I understand that I will not continue representation, and c) I do not know of a conflict I or someone from my firm has with the client.

Concurrent Representation

9. I understand that if an individual that is a spouse or other parent of the Center's client asks me to assist him or her while I am still aiding or plan to aid a current client of the Center, whether on the same case or something unrelated, that I will not aid the second individual.
10. I understand I cannot aid the second individual because of the Center's duty of loyalty to the first client and the need for the first client to have confidence that the Center and I will maintain his or her secrets, except as provided by California Rule of Professional Conduct 1-650.

Example:

- a. Volunteers cannot assist parties with adverse interests at the same time. If, for example, a volunteer is aiding the father in the dissolution of his marriage in private practice or at another agency, the volunteer may not also aid the mother in the same dissolution action as a volunteer at the Center. This creates a conflict of interest because it would be impossible for the volunteer to remain loyal to and maintain the confidences of both clients.

Successive Representation

11. I understand that if a new individual brings me a case adverse to a former client whom I aided at the Center that I will not accept the case if it breaches the Center's duty of confidentiality to the former client. In other words, I will not aid the successive individual if it is possible that the information I received from the former client will affect the way I help the proposed successive client, except as provided by California Rule of Professional Conduct 1-650.
12. I agree that I will never use the information I receive at the Center in providing help to the opposing party and that, to the extent possible, I will recuse myself from representing, giving legal advice, or assisting such individuals.

Example:

- a. If, for example, the volunteer assisted or represented the wife in a dissolution action, then the volunteer cannot help or represent the father if the father comes to the volunteer for assistance with a dissolution of another marriage. A conflict of interest exists because the volunteer learned confidential information about the wife in the first action which may still be adverse to the father's interests. However, the volunteer could represent the father's second wife, as the two wives do not have adverse interests.
- b. If the parties are unrelated, volunteers can represent opposing interests. For example, representing a domestic violence victim in one case does not preclude a volunteer from representing someone accused of committing domestic violence in another if the parties are unrelated.

Solicitation by Harriett Buhai Center Clients

13. I understand that if a current Harriett Buhai Center client asks me to represent him or her for a fee, then I will decline this request and inform the client that I am unable to perform this request.

I have read and I agree to the above conditions.

Name of Volunteer/Staff

Date

Signature of Volunteer/Staff

N/A
Witness

N/A
Date

CONTRACTOR NON-EMPLOYEE ACKNOWLEDGEMENT AND CONFIDENTIALITY AGREEMENT

(Note: This certification is to be executed and returned to County with Contractor's executed Work Order. Work cannot begin on the Work Order until County receives this executed document.)

Contractor Name Harriett Buhai Center For Family Law Non-Employee Name _____

Work Order No. _____ County Master Agreement No. DVSS16-011

GENERAL INFORMATION:

The Contractor referenced above has entered into a Master Agreement with the County of Los Angeles to provide certain services to the County. The County requires your signature on this Contractor Non-Employee Acknowledgement and Confidentiality Agreement.

NON-EMPLOYEE ACKNOWLEDGEMENT:

I understand and agree that the Contractor referenced above has exclusive control for purposes of the above-referenced Master Agreement. I understand and agree that I must rely exclusively upon the Contractor referenced above for payment of salary and any and all other benefits payable to me or on my behalf by virtue of my performance of work under the above-referenced Master Agreement.

I understand and agree that I am not an employee of the County of Los Angeles for any purpose whatsoever and that I do not have and will not acquire any rights or benefits of any kind from the County of Los Angeles by virtue of my performance of work under the above-referenced Master Agreement. I understand and agree that I do not have and will not acquire any rights or benefits from the County of Los Angeles pursuant to any agreement between any person or entity and the County of Los Angeles.

I understand and agree that I may be required to undergo a background and security investigation(s). I understand and agree that my continued performance of work under the above-referenced Master Agreement is contingent upon my passing, to the satisfaction of the County, any and all such investigations. I understand and agree that my failure to pass, to the satisfaction of the County, any such investigation shall result in my immediate release from performance under this and/or any future Master Agreement.

CONFIDENTIALITY AGREEMENT:

I may be involved with work pertaining to services provided by the County of Los Angeles and, if so, I may have access to confidential data and information pertaining to persons and/or entities receiving services from the County. In addition, I may also have access to proprietary information supplied by other vendors doing business with the County of Los Angeles. The County has a legal obligation to protect all such confidential data and information in its possession, especially data and information concerning health, criminal, and welfare recipient records. I understand that if I am involved in County work, the County must ensure that I, too, will protect the confidentiality of such data and information. Consequently, I understand that I must sign this agreement as a condition of my work to be provided by the above-referenced Contractor for the County. I have read this agreement and have taken due time to consider it prior to signing.

I hereby agree that I will not divulge to any unauthorized person any data or information obtained while performing work pursuant to the above-referenced Master Agreement between the above-referenced Contractor and the County of Los Angeles. I agree to forward all requests for the release of any data or information received by me to the above-referenced Contractor.

I agree to keep confidential all health, criminal, and welfare recipient records and all data and information pertaining to persons and/or entities receiving services from the County, design concepts, algorithms, programs, formats, documentation, Contractor proprietary information, and all other original materials produced, created, or provided to or by me under the above-referenced Master Agreement. I agree to protect these confidential materials against disclosure to other than the above-referenced Contractor or County employees who have a need to know the information. I agree that if proprietary information supplied by other County vendors is provided to me, I shall keep such information confidential.

I agree to report to the above-referenced Contractor any and all violations of this agreement by myself and/or by any other person of whom I become aware. I agree to return all confidential materials to the above-referenced Contractor upon completion of this Master Agreement or termination of my services hereunder, whichever occurs first.

SIGNATURE: _____

DATE: ____ / ____ / ____

PRINTED NAME: _____

POSITION: Volunteer