



CONFIDENTIALITY POLICY

It is the policy of Family Promise to protect the privacy of our clients and their families. We do this not only to comply with any applicable state and federal privacy laws, but also to promote an atmosphere of professionalism and trust. Unwarranted disclosure of confidential information can damage our relationship with clients and make it more difficult for us to help them. Therefore, ***no employee or volunteer may share confidential information about our clients or former clients with anyone outside of the agency without proper authorization.***

For the purposes of this policy, “confidential information” includes but is not limited to clients’ names, case histories, financial records, health records, legal documents, photographs, oral statements and other personal data maintained by Family Promise in the form of notes, files, computer records, or similar materials. General information, policy statements or statistical data that is not identified with any individual or family is not confidential. “Proper authorization” means written consent from the client or by direction of a supervisor.

Staff members are responsible for maintaining the confidentiality of information relating to other staff members and volunteers in addition to clients.

Any violation of this policy may result in disciplinary consequences up to and including termination of employment or service. Violation of state and federal laws regarding confidentiality of records may result in criminal penalties and/or civil liability.

Nothing in this policy is intended to prevent an employee or volunteer from reporting a crime or child abuse or neglect to appropriate state and law enforcement agencies. Family Promise has endorsed the National Association of Social Worker’s Code of Ethics, which outlines mandated reporting for intent to harm self or others (duty to warn), or child abuse/neglect.

Do’s and Don’ts of Client Confidentiality

Do talk about Family Promise’s programs and activities as well as your role in the organization, but do not disclose clients’ names or talk about them in ways that could make their identity known to people outside Family Promise.

Do not reveal to people outside of Family Promise that an individual is or has been a recipient of services unless the client has given permission to do so.

Do obtain proper authorization from clients to share confidential information with outside parties in order to assist clients with achieving their case plan goals.

Do ask your supervisor for clarification if you are unsure about the confidential nature of specific information.

Do not remove any confidential information about clients maintained by Family Promise from the organization’s premises without prior authorization from Family Promise.

ACKNOWLEDGEMENT OF CONFIDENTIALITY POLICY

___ I acknowledge receipt of the Family Promise Confidentiality Policy and agree to follow all of the requirements of the policy.

___ I agree to protect and maintain the confidential information about clients and former clients and their families that I learn during the performance of my duties as GENERAL VOLUNTEER.

___ I understand that violation of this policy may result in disciplinary action up to and including termination of my service with Family Promise as well as any applicable civil or criminal liability.

___ I understand that I have an ongoing obligation to inform my supervisor immediately whenever any violation (intentional or otherwise) of the policy has occurred.

Signature of Volunteer: _____

Print Name: _____ Date: _____

Signature of Parent/Guardian (if minor): _____

Print Name: _____ Date: _____