

Help's on the Way

6784 Edwards Road Belleville, MI 48111-1136 IRS-EIN 38-3590783 (734)776-3184 www.helpsontheway.org

Policy Name: Confidentiality Agreement Policy Adoption Date: December 8, 2008

The ministry of Help's on the Way regards the control of personal and private information of clients, volunteers and board members as a sacred trust. This trust must be guarded and protected from unauthorized use in any and all operations of the ministry. In light of this trust, the ministry of Help's on the Way has adopted a policy which is intended to protect those rights of privacy. All volunteers and board members must sign the confidentiality agreement which follows on **page two** of this document.

## Help's on the Way Confidentially Agreement

As a volunteer/board member assisting at Help's on the Way, I have been authorized by the board of directors to act as an agency official subject to the direction and control of the board of directors. As a volunteer, I may under limited circumstances, have access to records and other information related to clients, including information about other volunteers and or board members. These records include all files, documents and other materials that may contain personally identifiable information on any client, volunteer or board member. By signing the agreement as discussed below, I willingly agree to the following:

- I will not discuss with non-ministry agents, while serving as a volunteer/board member or when no longer in a volunteer/board member position, the content of any specific confidential records; nor will I disclose any personal information regarding any client, volunteer or board member.
- While in the possession and control of confidential records, and while handling, distributing, organizing, mailing, or filing records, I understand that I must protect those documents from being viewed or obtained by non-authorized individuals.
- I understand that any questions posed by non-ministry agents related to the content of confidential records must be directed to the Executive Director of Help's on the Way. As a volunteer/board member, I am not authorized to examine or comment on client records to anyone not authorized by the Executive Director. Further, I understand that I must direct anyone requesting client/volunteer/board member information to seek the assistance of the Executive Director or his/her designee.
- I will never take any confidential records from the Client Services Center unless authorized to do so by the Executive Director or his/her designee.
- I will report any breach or suspected breach in the confidentiality agreement immediately upon my discovery to the Executive Director or his/her designee. I understand and agree that my failure to maintain the confidentiality of records and information to which I am given access, will disqualify me from further service as a Help's on The Way volunteer/board member and may result in further action by the Board of Directors.

| Volunteer signature:                         | Date: |
|--|-------|
| Volunteer Contact Information (PLEASE PRINT) |       |
| Full Name:                                   |       |
| Address:                                     |       |
| City:  |       |
| State:                                       |       |
| Home Phone: ( )                              |       |
| Cell Phone: ( )                              |       |
| Email:                                       |       |
| Emergency Contact Name and Phone:            |       |