



Epworth
Children's Home

Epworth Confidentiality Agreement

Members of the Board of Trustees, Employees, Volunteers and partners of Epworth Children's Home will have access to confidential information, both written and oral, in the course of their affiliation with the organization, employment and job responsibilities. It is imperative that this information is not disclosed to any unauthorized individuals to maintain the integrity of the client information.

An unauthorized individual would be any person that is not currently a Member of the Board of Trustees, employee, volunteer or partner of Epworth Children's Home.

Disclosures may only occur at the direction of the President's office or by written client authorization.

HIPAA Confidentiality Agreement

I have read and understand Epworth Children's Home policies, with regards to privacy and Security of personal health information. I agree to maintain confidentiality of all information obtained in the course of my relationship/employment including, but not limited to, financial, technical, or propriety information of the organization and personal and sensitive information regarding patients, employees, and vendors.

I understand that inappropriate disclosure or release of patient information is grounds for termination and/or civil prosecution.

Signature: _____

Date: _____

Print Name: _____

Position: Foster Parent