Client Data Confidentiality Agreement

This agreement establishes the terms and conditions between \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [name] and the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereafter referred to as the Agency, to preserve and protect confidential client information. This agreement applies to any staff and volunteers who collect and interact with data about clients, including paid employees, temporary, contract or seasonal staff, volunteers, students and/or interns.

**I. PURPOSE**

The purpose of this Client Data Confidentiality Agreement is to protect the identity and privacy of individuals providing personal information and data. Staff and volunteers at the Agency may encounter personal and sensitive information about individuals and partners through the course of their work. Therefore, it is important to refrain from disclosing any information to unauthorized third parties about the people and partners we serve to avoid disclosing information they would not wish to be shared.

**II. CONFIDENTIAL INFORMATION**

Confidential client information should never be discussed in the presence of unauthorized third parties, except under the Terms outlined below. Any files and/or documents containing confidential information should never be shared or released to third parties, except under the Terms outlined below.

Confidential information includes, but is not limited to, the following:

1. Identifying information about the client, including name, address or phone number;
2. Information relating to the client’s family or other household members;
3. Information regarding the client’s food security, food assistance, or distribution status;
4. Information about the preferences, statuses, or other personal information disclosed by the client;
5. Verbal information provided by or about a client;
6. Visual observation of clients receiving food assistance or accessing other services; and
7. Any other information that would identify the client or potentially place the client and/or family members and collecting organization at risk.

**III. TERMS**

By signing this Confidentiality Agreement, I understand and acknowledge that:

1. All communications between agency staff, volunteers, partners, and clients are confidential.
2. It is my responsibility to protect the privacy, confidentiality and security of all client records and data included, such as personal, employment, health, and information. This includes client records stored in the Central Texas Food Bank’s client database called Oasis Insight.
3. As the Agency’s staff, volunteer, or intern, I will not disclose confidential information to any third party without express client consent and the Agency’s knowledge and consent to release such data.
4. I have a duty to keep client information confidential while with the Agency and after my employment, internship, or volunteer status ends.
5. My user ID is recorded in Oasis Insights when I access the electronic records in the system and I am only authorized to use the user ID I was assigned. Use of my user ID is my responsibility whether by me or anyone else. I will only access the minimum necessary information to satisfy my role or the need of the request.
6. I understand that my failure to abide by the terms of this Confidentiality Agreement may result in the termination as staff or volunteer at the agency.

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [PRINT NAME], on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ [DATE] have read the above Confidentiality Agreement and understand its terms and my responsibilities as staff person or volunteer.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of User