

DeKalb County Community Action Department
Confidentiality Policy

As employees, volunteers, visitors, board members, and monitoring staff of the DeKalb County Community Action Department, we dedicate ourselves to eliminating poverty in this county. We strive to treat all persons with decency and dignity; and with respect for cultural diversity.

To this end we will accept the duty and responsibility to respect and protect the privileged information, which we have access to in the course of our affiliation with DeKalb County Community Action Department. The confidentiality of client related information is a priority for this agency. A breach of confidentiality is a serious matter and may result in termination of an individual's relationship with DeKalb County Community Action Department.

No information, written or verbal, shall be released without a specific written release form signed by the individual. The release form must identify the specific agency or individual and circumstance to whom information can be released. The release must be time limited. This release can be revoked in writing at any time.

All client specific information will remain on the premises of DeKalb County Community Action Department in a confidential manor. If it is necessary to transport such information off the premises it will be done in a manor that protects the information from disclosure.

EXCEPTIONS TO CONFIDENTIALITY: Written or verbal information may be provided when required by a funding source. However, such information shall be non-identifying whenever possible. Written or verbal information may be provided when clearly mandated by law or pursuant to a court order or subpoena. Information may be disclosed in cases of potential suicide or homicide when the failure to disclose is likely to result in a clear and imminent risk of serious physical injury or death. Finally, the staff of DeKalb County Community Action Department are mandated reporters in cases of suspected child abuse and will share all information as required by law.

I have read, understand and agree to comply with the above policy.

Signature_____ Date_____

Print name_____

Relationship to DCCAD_____