



Homelessness Information Partnership Fredericton (HIPF) Limited Confidentiality Statement

I _____, of _____
(Name) (Name of organization)

am aware that as a guest of the Homelessness Information Partnership Fredericton (HIPF) I may have access to confidential information for the purposes of assessing the appropriateness of applications for housing or support services. I agree to keep all information, including clients' personal information, organizational data, and any other sensitive information, confidential. I will take reasonable steps to protect privacy and adhere to my organization's Privacy Policies regarding the access, storage, sharing, and handling of all confidential information. I recognize that by signing this agreement I am entitled to attend **one** Governance or Case Conferencing meeting on the following date:

_____.

This Confidentiality Statement will expire at the end of the meeting on the above date. To attend future Governance or Case Conferencing meetings, I will be required to sign a renewed HIPF Limited Confidentiality Statement or HIPF Confidentiality Statement.

In particular, I will:

- Treat all client data as confidential and only engage in discussion of such information as required in the course of my professional duties;
- Not release or otherwise provide access to information shared at the meeting to another person, agency, or body without the required prior authorization by the client and/or the HIPF;
- Ensure that confidential information is kept in a secure location at all times;
- Equally ensure that any information I am entrusted with remains confidential and secure.

I acknowledge a responsibility to report any instances of unauthorized disclosure of Client Information or if a client's privacy has otherwise been breached. I further acknowledge my obligation to report any activity which is fraudulent, unethical, or criminal. I further understand that improper disclosure of information may be cause for the HIPF to rescind any future invitations to participate in committee meetings.

Signature: _____ **Date:** _____