

Confidentiality Agreement

- I. **Purpose.** The purpose of this Confidentiality Agreement is to protect the identify and privacy of participants/clients as it pertains to the Denver Needs Assessment of People Who Use Opioids, referred to hereafter as “the Assessment.” Staff and Volunteers at Agencies involved in the recruitment and interviewing of participants in “the Assessment” may have information regarding who participated, as well as other sensitive information regarding participants. The release of the identities of participants can be extremely detrimental to the participants, including the possibility of serious legal and physical ramifications. This is particularly true as the Assessment discusses topics such as illicit drug use and other illegal activities. Therefore, it is essential to refrain from disclosing any information regarding the participants of the assessment, including whether a specific individual participated.
- II. **Confidential Information.** Confidential participant/client information should never be discussed in the presence of third parties. Any files and/or documents containing confidential information on participants of the Assessment should never be shared or released. Confidential information includes, but is not limited to, the following:
 - i. Identifying information about the participant, including name, address, or phone number;
 - ii. Where the participant was recruited from;
 - iii. Information regarding the participant’s drug use history;
 - iv. Information about the abuse, trauma, and/or persecution experience by the participant;
 - v. Any other information that could potentially identify the individual as a participant of the Assessment or place them at risk.
- III. **Terms.** By signing this Confidentiality Agreement, you agree to the highest ethical standards and to abide by the following provisions:
 - i. All communications between your Agency staff and volunteers who knew the identities of the clients that participated in the Assessment are confidential.
 - ii. All communications regarding the Assessment between your Agency and other Agencies involved in the Assessment regarding participant information are confidential.
 - iii. The staff or volunteer shall not disclose any information regarding participants of the Assessment.
 - iv. All documentation regarding participants of the Assessment are confidential.
 - v. All recorded, typed, and handwritten interviews with participants are confidential.
 - vi. Information released in the report following completion of the Assessment will take every precaution to conceal the identities of participants.
 - vii. I understand that as a staff or volunteer, I have a duty to keep client/participant information confidential throughout my term as a staff or volunteer as well as after my employment or volunteer status ends.

I, _____ (print name), have read the above Confidentiality Agreement and understand its terms and my responsibilities as a staff member/volunteer.

Signature of Staff/Volunteer

Signature of Supervisor

Date