



Confidentiality Contract

As a psychiatric mental health treatment agency, our rules regarding confidentiality are very strict. No indication may be made regarding your knowledge of a client, verbally or in writing, to anyone outside our agency unless the proper Authorization to Use/Disclose Health and Clinical Information forms have been signed. No client's names are to ever be mentioned in public. Violating the client's right confidentiality can result in civil and criminal penalties. For more specific information on confidentiality, see the Handbook On Confidentiality from the State Mental Health Division.

I understand at Riverview Center for Growth, I have access to certain sensitive information about clients (children and families). I further understand it is my responsibility to:

- Protect the privacy of those about whom I have confidential information.
- Not reveal any confidential client material to unauthorized persons.
- Not talk about clients or matters pertaining to client treatment in places where others may overhear the conversation.
- Limit my access to confidential information to that for which I am authorized.
- Not talk about clients to anyone who does not work for RCG.
- Only use client information in the context of my duties at RCG.

I have read and understand the above rules. I agree to fully abide by these rules. I understand that violation of these rules could result in civil or criminal action and dismissal from Riverview Center for Growth.

Printed Name

Signature

Date Signed

Witness Signature

Date Signed