

**SAMPLE**

**Confidentiality Agreement for Minister of Wellness**

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(This policy can, with changes in the position label, be used for all serving within the Wellness Ministries)

After reading the document *Confidentiality and Ethics Confidentiality* (Section 2, VIII, #5), I understand that confidentiality and privacy are the right of every person I serve, particularly concerning personal information about their health. I am aware that I am trusted to protect that right and acknowledge that responsibility.

I agree with and will act according to the points listed below:

1. Confidential health and wellness information shared by a congregant will be shared when appropriate only with that person's prior approval.
2. Confidential health and wellness information gathered about the congregant will only be discussed with them unless permission is given by that individual (or their legal proxy) to discuss that information for appropriate reasons with others.
3. When I have questions as to when maintaining confidentiality is inappropriate or not legal according to the mandated reporter laws of my state, I will seek guidance from an appropriate resource.
4. Personal privacy will be maintained for the congregant, and their health and wellness information will not be shared with other members of the congregation or my family or friends.
5. A breach of confidentiality will result in a review of the circumstances and possible removal from being a provider within the Wellness Ministries.

I have been given a copy of this statement. After reading it carefully, my questions have been answered, and I understand its contents and expectations.

I will honor this agreement.

Signature:	Date:
Witness:	Date