

NON-DISCRIMINATION

This agency is an equal opportunity employer. It strictly adheres to all state and federal non-discrimination statutes and regulations including but not limited to Title VII of the Civil Rights Act of 1964, Section 504 of the Rehabilitation Act of 1973, and Section 303 of the Age Discrimination Act of 1975. Abuse Alternatives, Inc. does not discriminate against race, religion, sex, national origin, marital status, disabilities, or age.

DRUG-FREE WORKPLACE

All persons are prohibited from consuming, displaying, or possessing alcoholic beverages or illegal drugs while on Abuse Alternatives, Inc. property or while performing work for Abuse Alternatives, Inc. Any person taking any kind of medication, which may affect job performance, needs to report this to the supervisor to determine with the employee whether reasonable accommodation needs to be made for effective job performance and/or safety. All employees will be required to sign a "Drug-Free Workplace Policy".

In compliance with Public Law 103-227, Part-C Environmental Tobacco Smoke, smoking will not be permitted anywhere within the facilities of the emergency shelter or public offices. No person shall use any tobacco product inside the facilities. All employees will be required to sign a "Smoke/Tobacco-Free Workplace Policy".

CONFIDENTIALITY

All employees and volunteers will sign and adhere to the confidentiality agreement. This agreement states that information pertaining to clients and to the emergency shelter will not be disclosed to outside sources. Information concerning a client may be released only with written and signed consent from that client. Information may be released with written consent only in the circumstances outlined in the confidentiality agreement.

Client records are confidential and will be stored in a locked room. Computerized files will be secured. The use of cordless and/or cellular phones, internet, email, or fax transmissions concerning confidential client information is prohibited except in crisis situations with the expressed consent of the client.

BACKGROUND EMPLOYEE CRIMINAL RECORDS SEARCH

Prior to any applicant for employment being selected for employment after August 1, 2001, he/she will be required to complete a release for criminal history records check. The purpose of this search will be to comply with funding grant guidelines and to protect clients. This significant criminal history or relevant conduct will be considered in confirming final employment.

Any failure to inform or disclose a significant criminal history from the agency will be considered grounds for dismissal.

Confidentiality Agreement

I agree to keep confidential from outside sources all information pertaining to clients of Abuse Alternatives, Inc. I realize that this is privileged information and is not to be shared with anyone other than current staff and volunteers of Abuse Alternatives, Inc. Furthermore; I promise not to disclose the location of Abuse Alternatives Inc. Shelter to anyone other than maintenance personnel, law enforcement officers, and other social service agencies. I will only give out this information with a supervisor's approval. Failure to adhere to this agreement may result in dismissal.

I understand that I am obligated to report any pertinent information which may affect a client's eligibility status or any knowledge of breach of confidentiality.

I understand that the use of a cordless and/or cellular phone, internet, email, or fax transmission concerning client confidential information is prohibited except in crisis situations with the expressed consent of the client.

All client records are confidential and will be stored in a locked room. Computerized files will be secured.

Every client will be informed of the confidentiality agreement.

I understand that information concerning clients may only be released with written and signed consent from that client. Information can, however, be released without written consent from a client under the following circumstances:

1. There is a risk of harm to self or others which requires the appropriate service providers to be contacted.
2. There is suspected child abuse or neglect at which time the Department of Human/Social Services will be notified.
3. There is suspected abuse, neglect or exploitation of an adult who is 60+ years old or an adult who is 18 years or older and is incapacitated, at which time the Department of Human/Social Services will be notified.
4. There is a need to inform parties at risk of bodily harm threatened by any client, male or female. This will include threats to damage/destroy property.
5. A subpoena requires employees or volunteers to testify and/or to release a client's record or parts of that record.

I do hereby agree to abide by the confidentiality agreement. I fully understand that any violation of this agreement may result in immediate termination. I further understand that this confidentiality requirement will continue after my employment, internship, or role as volunteer.

EMPLOYMENT ACKNOWLEDGEMENT

Employee/Volunteer Signature

Print Name

Witness

Date