



CONFIDENTIALITY DECLARATION

State and federal law as well as Regional Center of the East Bay policy require that all information obtained from whatever source in the course of the diagnosis and treatment of Regional Center of the East Bay clients to be maintained in a confidential manner. No release of such information may be made by anyone employed by or associated with Regional Center of the East Bay, except as allowed by law to authorized persons. In addition, the privilege of confidentiality is to be asserted by all signers of this declaration on behalf of clients of Regional Center of the East Bay.

Breach of confidentiality may subject an individual to penalties at law (Welfare and Institutions Code Section 4518; United States Code of Federal Regulations; etc.); may make an employee of Regional Center of the East Bay subject to disciplinary action including immediate terminations; and will undermine the trust relationship between Regional Center of the East Bay and its clients.

DECLARATION: *By my signature below I hereby declare that I shall never reveal information obtained from whatever source in the course in of diagnosis or treatment of Regional Center of the East Bay clients except through authorized channels to authorized individuals. I also certify that I have read Welfare & Institutions Code Section 4514 et.seq.*

Name: _____

Signature: _____

Position: _____

Date: _____

Copy: Personnel File
Employee