
CONFIDENTIALITY AGREEMENT
CALGARY COORDINATED ACCESS AND ASSESSMENT PROGRAM (CAA)

GUEST PARTICIPANT, PLACEMENT COMMITTEE

A group of Calgary agencies have come together to collaboratively streamline and make more efficient the entry point into the system of care for those experiencing, or at risk of experiencing, homelessness in Calgary. This collaboration is known as the Calgary Coordinated Access and Assessment Program (the "CAA"). The CAA is designed to provide standardized, measurable and transparent service delivery aimed at preventing people from entering the homeless sector as well as triaging the most vulnerable into available spaces in Housing First Programs.

I, _____ acknowledge and agree that I will be participating in the CAA Placement Committee meeting as a guest and that as a guest, I will act as an observer and will not impact the placement of any individuals discussed. **I acknowledge that the information shared at Placement Committee is of a highly sensitive and confidential nature and I agree not to share, communicate, disclose or release any and all information obtained by myself at Placement Committee, or during any communications following, as a result of my direct or indirect participation.**

I agree to accept and retain the Confidential Information in confidence and, at all times, not to disclose or reveal the Confidential Information to others, including but not limited to work colleagues and other individuals I interact with in the course of my work, and to refrain from using the Confidential Information for purposes other than those authorized by the CAA in writing.

"**Confidential Information**" includes but is not limited to personal information of any staff, volunteers or other agency representatives; any information about clients, including but not limited to personal information, health information, housing placement information; content of Placement Committee discussions; any business information of the CAA, or the individual agencies who are part of the CAA, not in the public domain at the time of disclosure; and any information that a reasonable person would identify as confidential in nature.

By signing here, I confirm I have read and understood the above Confidentiality Agreement and I affirm and agree to the terms of this Confidentiality Agreement.

Print Name: _____

Signature: _____

Date: _____