



Employee Confidentiality Statement

As an employee for the State of Tennessee Department of Children's Services, I,

_____ understand that:

Employee's Name (Print/type)

- I am prohibited from releasing any information either in writing or verbally to anyone outside the department without the appropriate signed authorization.
- All information that I have access to via computer, telephone, files or through employees will be held in strict confidence and not shared with parties outside the realm of those identified for carrying out the responsibilities of my position and ensuring care and securement of services for the program enrollees/clients and/or employees.
- When working in a non-traditional work setting, i.e.: but not limited to a community, home, or other alternate setting, I will ensure that confidential conversations are not overheard by members of the public, family, and friends; and information and notes located on a computer or paper documents are not available to be read or accessed by non-DCS persons.
- Any breach of enrollee/client and/or employee confidentiality resulting from my written or verbal release of the information provides grounds for disciplinary action up to and including termination.
- When posting department-related information to personal social media accounts I must follow confidentiality laws and policies. I am expected to use good judgment and not post information that is confidential or otherwise could lead to the identification of a department client.

Employee's Signature

Edison Employee ID No.

Date

Human Resource Officer's Signature

Date