



Ergo-Team Confidentiality Agreement

I understand that as an investigator of this Ergo-Team, some of the information I will be collecting as part of my work will include personal health information of volunteer participants and others.

I understand that volunteer participants and others have a basic right to privacy. Privacy entails the protection of any personal information provided, and assurance that the information provided will only be used for the purposes outlined. I also understand that participants have the ability to refuse to provide information on topics they would not like to discuss. For more information on privacy protection in the work place, please consult the Office of the Privacy Commissioner of Canada (http://www.priv.gc.ca/fs-fi/02_05_d_17_e.cfm).

I understand that I must maintain strict confidentiality of information obtained from volunteer participants in this project.

I understand that to do the project, not all members of the Ergo-Team will require all confidential information about employee volunteers and that the employee representatives on the Ergo-Team will limit the number of persons on the team who have access to information not required for the project.

As a member of the Ergo-Team, I agree not to disclose or discuss any confidential information to which I have access except with the appropriate members of the Ergo-Team.

I also agree not to use this information for any purpose other than my work as an Ergo-Team member to improve the occupational health of company workers.

I understand that a failure to abide by this requirement could violate volunteer participants' right to privacy.

Position on the research study:

investigator/employee representative

supervisor/management representative

maintenance representative

Ergo-Team Member Name (print)

Witness Name (print)

Ergo-Team Member Signature

Witness Signature

Date: _____

Date: _____