



NORTHAMPTON COUNTY

Department of EMERGENCY MEDICAL SERVICES



STANDARD OPERATING GUIDELINES

TOPIC: Confidentiality, Dissemination of Patient Information and EMS Provider Verification	SOG #: 2.22.2
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Status: ACTIVE	Written: 02/03/2001
Written by: Hollye B. Carpenter	Revised: 01/01/2013
Approved by: Hollye B. Carpenter	Adopted: 01/01/2013

PURPOSE

To provide written confirmation a staff member understands the Department's obligation to maintain confidential information

SCOPE

All department EMS personnel

CONTENT

Given the nature of our work, it is imperative that we maintain the confidence of patient information that we receive in the course of our work. The Northampton County Department of EMS prohibits the release of any patient information to anyone outside the organization unless required for purposes of treatment, payment, or health care operations and discussions of Protected Health Information (PHI) within the organization should be limited. Acceptable uses of PHI within the organization include, but are not limited to, exchange of patient information needed for the treatment of the patient, billing, and other essential health care operations, peer review, internal audits, and quality assurance activities.

I understand that the Northampton County Department of EMS provides services to patients that are private and confidential and that I am a crucial step in respecting the privacy rights of the patients of the Northampton County Department of EMS. I understand that it is necessary, in the rendering of services for the Northampton County Department of EMS, that patients provide personal information and that such information may exist in a variety of forms such as electronic, oral, written or photographic and that all such information is strictly confidential and protected by federal and state laws.

I agree that I will comply with all confidentiality policies and procedures set in place by the Northampton County Department of EMS during my entire employment or association with the Northampton County Department of EMS. If I, at any time, knowingly or inadvertently breach the patient confidentiality policies and procedures, I agree to notify the Privacy Officer of the Northampton County Department of EMS immediately. In addition, I understand that a breach of patient confidentiality may result in suspension or termination of my employment or association with the Northampton County Department of EMS. Upon termination of my employment or association for any reason, or at any time upon request, I agree to return any and all patient confidential information in my possession. This is not a contract for continued employment.

I acknowledge training regarding HIPAA awareness and protection of patient privacy. I have read and understand all privacy policies and procedures that have been provided to me by the Northampton County Department of EMS. I agree to abide by all policies or be subject to disciplinary action, which may include verbal or written warning, suspension, or termination of employment or of any membership or association with the Northampton County Department of EMS. This is not a contract of employment and does not alter the nature of the existing relationship between the Northampton County Department of EMS and me.

EMS Provider signature:	Date
Witness signature:	Date