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	Document Title:	CONFIDENTIALITY OF PATIENT AND ORGANIZATIONAL INFORMATION

PURPOSE:

1. To protect the rights of confidentiality of all patients, employees, physicians, guests and the hospital itself by limiting disclosure of confidential information to those having a need to know in order to perform the duties of their job or to take action upon that information.
2. To implement the appropriate and reasonable security measures to protect and maintain the secrecy of patients and the organizations' information.

LEVEL:

All Employees of Metro RMCI Cancer Center (MRCCC)

DEFINITION OF TERMS:


Code of Professional Conduct. A necessary component to any profession to maintain standards for the individuals within that profession to adhere. It brings about accountability, responsibility and trust to the individuals that the profession serves.¹

POLICY:


- 1 Much of the information that comes into contact with the individuals mentioned above shall be considered confidential and may only be disclosed when the use of this information is needed to perform job duties. Confidential information comes in many forms and from several sources. It can be generated from the medical record, the computer system, computer-generated reports, hospital correspondence, conversations, and normal daily operations. Under no circumstances may the above resources be accessed for personal or non-work-related activities.

1.1 Verbal Communications

- 1.1.1 Patient information should not be discussed where others can overhear the conversation, (e.g. in hallways, rooms, elevators, in the cafeteria, on any form of public transportation, at restaurants or at social events. *(refer to Code Yellow policy)*

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- 1.1.2 Dictation of the patient's information should occur in locations where others cannot overhear.
- 1.2 **Written Information.** Confidential papers, reports, and computer printouts should be kept in secure areas. Please use your best judgment to determine what provides a secure environment in the respective work area.
- 1.3 **Computerized Information.** Protecting own computer-access, whether it is a unique log on and or personal security code, is important to maintain privacy, confidentiality, and an individual's accountability for access to hospital computer systems.
- 1.4 **Employee Conduct.** Workforce members with access to information about patients, employees, or business matters may only obtain information that is necessary for their job functions. Irregardless of the format in which this information is obtained, (e.g. verbal, written, or electronic). The following represent some examples of, but are not limited to, situations which violate confidentiality when accessed or discussed for personal or non-work-related purposes, or violate the patient's right to privacy:
- 1.4.1 Looking up any result (lab, x-ray, etc.), census information, or admission/discharge activity for or about a co-worker, relative, neighbor, etc.
 - 1.4.2 Accessing any information other than what is required for the job is a violation of this policy, even if the individual involved does not tell anyone else.
 - 1.4.3 Discussing specific cases at lunch, in the elevator, in the hallway or at home.
 - 1.4.4 Accessing the medical record for curiosity, whether it belongs to a patient, a co-worker, or yourself it is unacceptable to look up data

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(e.g., a friend's birthday, address, or phone number). Accessing one's personal medical record requires proper authorization from the Medical Record Section or your physician.

- 1.4.5 Giving information gathered during job duties to individuals who are not authorized to know such information.
- 1.4.6 Disclosing confidential information overheard or seen while performing job duties.
- 1.4.7 Disclosing patient billing information.
- 1.4.8 Disclosing other employee personnel information regarding disciplinary proceedings, compensation and benefits, etc.
- 1.4.9 Disclosing peer review, quality/risk management activities, credential files, or malpractice/legal documents and variance reports.
- 1.4.10 Discussing patient information with other healthcare practitioners in the course of work without using discretion to ensure that others who are not involved in the patient's care cannot overhear such conversations.
- 1.4.11 Failure to knock on a patient's door before entering the room.
- 1.4.12 Failure to use cubicle curtains when it is appropriate.


- 2 All eligible people defined in this policy shall sign the Hospital Confidentiality Agreement Form (see Annex A) and the Non-Disclosure Agreement for Guests (Annex B) indicating acceptance and support of this policy.

DOCUMENTATION:

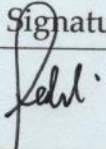
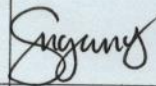

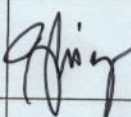
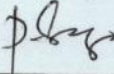
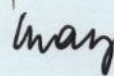
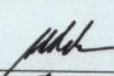
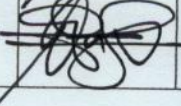
Revised Policy

DISSEMINATION:

- 1. Hospital Manual of Policies and Procedures
- 2. Hospital Communicator

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APPROVAL:

	Name/Title	Signature	Date
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Reviewed:	DENNIS C. ESCALONA, MN, FPCHA, FPSQua Quality Assurance Supervisor		10/04/2022
Recommending Approval:	NANCY B. HIZON, MS Psych, FPCHA Human Resources Division Officer		10/11/2022
	PAOLO G. SOGONO, MD, DPBRO Medical Director- MRCCC		10/14/2022
	MA. ANTONIA S. GENSOLI, MD, FPPS, FPCHA Vice President- Chief Medical Officer		10.20.22
	SOCORRO VICTORIA L. DE LEON, CPA, MBA, PhD, FPCHA Vice President- Chief Operating Officer		10/20/2022
Approved:	GENESIS GOLDI D. GOLINGAN President and CEO		11/11/22



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ANNEX A:



RIVERSIDE MEDICAL CENTER, INC.

Owner and operator of the Dr. Pablo O. Torre Memorial Hospital
A proud member of the Metro Pacific Hospital Holdings, Inc.

CONFIDENTIALITY AGREEMENT

I agree that while I am under the employ of The Riverside Medical Center, Inc., I shall not verbally or in writing divulge or disclose to another employee, person, company, or another organization, any confidential information belonging to my employer or relative to my employer's affairs or dealings that may come upon my knowledge except when authority has been entrusted to me to do so.

I shall not use for my own personal gain whatever confidential data or information that I may encounter within the period of my employment.

All records, data, reports and other documents that are considered confidential that I may obtain or come across with during the period of my employment are considered the property of the hospital/employer and I may not in anyway reproduce the same unless with authority or clearance from Top Management. Upon the end of my employment, these confidential documents shall be properly turned over to my direct superior with proper documentation, otherwise, I shall not be given an exit clearance by employer or this hospital.

Confidential information shall include all data and information, whether soft or hard copies, that have been classified as confidential such as financial statements, employees' 201 file and related records comprising of personal and employment files, masterfile update, payroll, pay slips, patient information and chart, patient treatment, suppliers' and contractors' quotations, employee's health records and other similar or related documents and information. If such documents are needed in carrying out my duties and responsibilities, I shall formally request for such information in writing and with approval of my direct superior.

If in the course of my employment, I happen to be custodian of any confidential document and another party shall request from my end to provide them with such document, I shall only provide the requested document upon receipt of a formal request with proper authorization. All requested confidential documents must be properly sealed before releasing to the requesting party.

I acknowledge that any violation of this Confidentiality Agreement shall be subject to disciplinary measures. This Confidentiality Agreement shall be binding on me even after my termination with my employer has ceased. Any breach of this Confidentiality Agreement shall warrant my dismissal from employment without prejudice to the filing of any civil/criminal case against me.

Signature over printed name

please use a color form

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