

Policy Number: 3.12  
Effective: 5/89

**SUBJECT**

**CONFIDENTIALITY**

**PURPOSE**

To define policies regarding confidential information which includes information gained by examination, treatment, observation, conversation or review of medical records, personnel records, and computerized data.

**FOCUS**

All Akron General.

**FORMS**

Confidentiality Policy Acknowledgement

**POLICY**

- I. Akron General Medical Center recognizes the inherent rights of all individuals to privacy. This includes patients and families, employees and physicians.
- II. Access to or disclosure of patient, physician, employee, payor, or managed care organization information will be granted only when such information is necessary to carry out job duties.
- III. Necessary exchange of confidential information shall be conducted in a manner which promotes privacy and prevents unauthorized disclosure. Discussion of confidential information in public places, such as elevators, cafeteria, snack shop, etc., is prohibited.
- IV. An employee's relationship to or familiarity with a patient does not justify intentional unauthorized access to information. As an example, unauthorized visits to hospitalized co-workers or review of medical records of employees, families or friends are prohibited.
- V. Unauthorized access, release, use or possession of confidential information by Akron General employees is considered a major work rule violation (reference HR Policy 9.7) and will result in disciplinary action, up to and including discharge. This includes violations of HIPAA regulations (reference Administrative Policy Manual).
- VI. Hospital policy regarding confidentiality is reviewed annually and affirmed by each employee at the time of his/her annual performance review.
- VII. Hospital departments may develop more specific departmental policies regarding confidentiality consistent with this policy.

Reviewed: 6/91    5/93    7/99    5/01    10/03    5/05

Revised: 5/89    7/96    5/02    \_\_\_\_\_    \_\_\_\_\_    \_\_\_\_\_

## CONFIDENTIALITY POLICY ACKNOWLEDGEMENT

I have read the Policy of Confidentiality, have had the opportunity to ask questions I may have and fully understand Akron General's expectations of me on this subject. I also understand AGMC's policy with regard to prevailing HIPAA regulations.

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Employee Name (please print)

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Employee Signature

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Employee ID#

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Date