



Confidentiality Statement
Non-Employee/ Student

Purpose of Policy

- A. To protect the privacy of any individual or organization associated with the institution and its affiliates.
- B. To maintain the confidentiality of all communications, information, and medical care records as it pertains to patients, physicians, and the institution and its affiliates.

Policy

- A. Information pertaining in any way to institutional operations is not to be disclosed to anyone, including fellow employees, unless there is a professional requirement or business necessity to do so.
- B. It is expected that users accessing the computer system will utilize only those necessary functions to complete work assignments, and will retain with strictest confidence all communications, information and records within the work area.
- C. Confidential communications, information, and records shall include, but not be limited to:
 - a. Patient and employee demographics, religion, financial and account status.
 - b. Employee health records, medical care program and employment information.
 - c. Patient diagnosis, care plan, current and previous medical records and any other type of communication regarding patient-specific information.
 - d. Computer reports, access, passwords and security codes.
 - e. Institutional business and financial records.
 - f. All verbal communications and conversations regarding patients, physicians, employees and the institution.
- D. The release of confidential information is a serious disciplinary issue. Each affiliating member/ employee must clearly understand their responsibility to preserve and maintain the confidentiality of institutional information. In the event of an unauthorized disclosure of confidential information, the individual at fault will be discharged from affiliation and may be subject to disciplinary action from your affiliating university/ program.
- E. Access to the computer system is done in accordance with the institution's security policy.
 - a. It is imperative that the code must not be revealed or shared with another user.
 - b. The security code will be deleted from the system immediately upon termination of affiliation.
 - c. Unauthorized use of institutional hardware or software is prohibited.

As an affiliating student/ professional/non-employee at Mohawk Valley Health System, I agree to abide by the confidentiality policy and will not disclose or discuss any communications, information or medical record data in accordance with this policy.

Signature/ Category

Print Name

Date



HIPAA Education Acknowledgement

I, _____, have reviewed Mohawk Valley Health System’s policies and procedures relating to the Health Insurance Portability and Accountability Act of 1996 (HIPAA). I understand the content and agree to uphold the principles of confidentiality for our patients/residents at all time.

I have attended the HIPAA Education program and understand that, as a non-employee of Mohawk Valley Health System, I must abide by the policies and procedures to protect the confidentiality of all protected health information. The access, release or disclosure of confidential information is strictly on a need to know basis (required to fulfill job responsibilities), and in accordance with law and regulation.

PROTECTED HEALTH INFORMATION INCLUDES, BUT IS NOT LIMITED TO:

- Patient, resident, and employee demographics, religion, financial and account status.
- Employee health records and medical care program.
- Patient diagnosis, care plan, current and previous medical records and any other type of information that may identify a patient.
- Computer systems reports, access, passwords, and security codes
- All verbal communication and conversations regarding patients.
- I further understand that in the course of performing assigned duties/tasks, I may have access to confidential patient medical information. Accessing this data for any reason other than legitimate business purposes is strictly prohibited.
- I also understand that failure to protect and uphold confidentiality of protected health information will result in disciplinary action, which may include termination of employment.

Signed: _____

Date: _____

Witness: _____

Date: _____



Attestation
Confidential HIV-Related Information

I received training regarding confidential HIV-related information and my responsibilities in regard to maintaining the confidentiality of HIV-related information obtained and maintained by Mohawk Valley Health System.

I also have read/been informed of and agree to follow Mohawk Valley Health System's HIV Confidentiality Policies and Procedures.

I understand that I may obtain confidential HIV-related information about patients or their contacts (spouse, sexual partner, needle sharing partner) or other individuals whose confidentiality is protected by law.

Only authorized personnel are allowed to access confidential HIV-related information about patients and only when reasonably necessary to perform their job duties and responsibilities.

Authorized personnel shall not:

- (1) examine documents or computer data containing HIV-related information unless required in the course of performing duties and responsibilities.
- (2) remove from Mohawk Valley Health System or copy such documents or computer data unless acting within the scope of assigned duties.
- (3) discuss the content of such documents or computer data with any person unless that person has authorized access and needs to know the information discussed.
- (4) illegally discriminate, abuse or harass any person to whom HIV-related information applies.

I agree not to disclose confidential HIV-related information to any person without a specific, written release from the individual per Mohawk Valley Health System's HIV Confidentiality Policy and Procedures.

I acknowledge that violation of confidentiality laws and rules may lead to disciplinary action, including suspension or dismissal from employment and criminal prosecution.

Name: _____

Signature: _____

Date: _____



Non-Employee Orientation Statement

Name: _____

Department/Location: _____

Position: _____ Start Date: _____

This form applies to all employees, contractors, consultants, temporaries, students and other workers conducting business and using the Mohawk Valley Health System and its client organizations.

- Mission, Vision & Corporate Structure
- The Patient Experience
- Cultural Diversity and Language Assistance
- Corporate Compliance
- Risk Management
- Quality Management & Process Improvement
- EMTALA
- HIPPA-Privacy-Security
- Patient Safety and Fall Prevention
- Incident Command
- Clinical Engineering & Equipment Management
- Infection Prevention
- Occupational Exposure or Injury
- Communication Through the Lifespan
- Stroke and Bariatric Patients
- Organ and Tissue Donation
- Pain Management
- Back Safety
- General Radiation
- Child and Elder Abuse and Neglect
- Awareness and De-escalation
- Reasonable Suspicion
- Workplace Violence and Harassment
- Smoking Policy
- HIV Attestation

STATEMENT:

I have successfully participated in Mohawk Valley Health System’s Non-Employee General Orientation and have received, read and understand the intent of the communications and policies presented including, but not limited to, all of the items listed above. I voluntarily agree to abide by these practices in order to adhere to the guidelines established by the Mohawk Valley Health System and all subsequent regulatory affiliations.

Rules of conduct are designed to protect the rights and interests of all employees and persons using healthcare facilities. Non-employees are required to comply with all healthcare and departmental policies, standards, rules, regulations and procedures. Disciplinary action is taken to formally notify a non-employee that he/she is not in compliance with a policy, standard, rule, regulation or procedure, and to give direction on correcting the behavior/performance.

A progressive process of corrective disciplinary measures has been established to give the non-employee an opportunity to modify his/her behavior before serious disciplinary action is warranted. The level at which a non-employee enters the disciplinary process is dependent upon the seriousness of the offense. In some cases, immediate suspension or discharge may be warranted.

Signature: _____ Date: _____

Received by Human Resources: _____



Non-Employee Orientation Post Test

Name: _____ Date: _____ Grade: _____

1. Courtesy and consideration are important issues in maintaining good customer relations. T___ F___
2. Confidentiality refers only to patient records and not to other employees or computer data. T___ F___
3. It is a New York State law that patients be informed of their rights upon admission to inpatient or outpatient services. T___ F___
4. MVHS must provide an interpreter for any patient who is in need of one for purposes of understanding their rights and making an informed consent to treatment. T___ F___
5. The mission of MVHS is to provide for excellence in healthcare for our communities. T___ F___
6. The values of MVHS include: Honesty, Respect, Excellence, Transparency and Safety. T___ F___
7. The patient experience is defined as the sum of all interactions, shaped by an organization's culture, that influence patient perceptions across the continuum of care. T___ F___
8. Medical record documentation is essential to record pertinent facts, findings and observations of patient's healthcare. T___ F___
9. In general, a person is allowed to participate in cultural and spiritual practices that do not break hospital policy, harm others, or greatly interfere with the beneficial course of medical therapy. T___ F___
10. Proper use of body mechanics can prevent injuries or weakening to specific areas of our body. T___ F___
11. When lifting an object from the floor, the lifter should always bend their knees and keep their lower back in. Never bend from the waist. T___ F___
12. Preventing spread of infection is an important part of Infection Control. The single most important step in preventing infections is handwashing T___ F___
13. Handwashing is optional if you wear gloves. T___ F___
14. Standard precautions apply only to contact with blood. T___ F___
15. A patient who is infected/colonized with VRE or MRSA should be placed on Contact Isolation. T___ F___
16. There are 3 kinds of transmission based precautions – Contact, Airborne, and Droplet. T___ F___
17. A patient with suspected or known tuberculosis should be placed on airborne precautions. T___ F___
18. Defective or broken equipment poses a safety hazard to our employees and patients. T___ F___

19. How can I tell if a piece of equipment is safe for use? _____
- All medical equipment is labeled with an inspection sticker and CE control number.
 - Each year the inspection sticker will come in a different color.
 - Stickers contain important safety information.
 - It is everyone's responsibility to ensure equipment is within the inspection period prior to use.
 - All of the above.
20. It is acceptable to use equipment with an expired inspection sticker as long as it works properly. T___ F___
21. Under New York State Public Health Law, confidential HIV-related information can only be released with a signed authorization. T___ F___
22. A Code A/Code Adam generally involves children under 14 years of age and can happen in any location throughout MVHS. T___ F___
23. The Incident Commander is in charge during a disaster. T___ F___
24. The first thought when you encounter an internal spill or a contaminated patient is to S.I.N. (Safety, Isolation, & Notify). T___ F___
25. Upon encountering a patient that is covered with a powder or liquid and asking for assistance, ask them to have a seat in the waiting room. T___ F___
26. Adults need to be treated with dignity and respect. Allow choices and independence as much as possible. T___ F___
27. Personal Protective Equipment (PPE) is protective equipment you need to do your job safely. T___ F___
28. Individuals seeking emergency medical services will receive medical screening in the Emergency Department regardless of ability to pay. T___ F___
29. The failure to correctly identify patients continues to result in medication errors, transfusion errors, testing errors, wrong person procedures and the discharge of infants to the wrong families. T___ F___
30. Visitors seen wandering in the hallways should be stopped and asked if they need assistance. T___ F___
31. A Hostile Work Environment can be created from unwelcome advances or comments of sexual nature. T___ F___
32. If a patient complains to you about another department, you do not need to follow up on it. T___ F___
33. Saying "it's not my job" is an acceptable behavior at MVHS. T___ F___
34. Discrimination based on race, sex, religion, national origin, disability, sexual preference or age whether intended or unintended is prohibited and maybe verbal, physical or visual. T___ F___
35. MVHS subscribes to an environment of the highest ethical standards. Integrity, honesty, truthfulness and professional behavior evidence these ethical standards. Who is responsible for up-holding our high ethical standards? _____
- Board of Directors
 - All employees
 - Yourself
 - All of the above

36. If you are aware of an issue that you believe violates a standard of the Code of Conduct, what should you do? _____
 A. Nothing.
 B. Talk about it with your friends.
 C. Discuss it immediately with your supervisor or contact the AlertLine.
 D. Hope that another employee will report the issue.
37. Code L is for patient elopement and should be called if the patient cannot be located within 10 minutes. T___ F___
38. Any episode of violent or aggressive behavior by a member of the MVHS team should be immediately reported to a supervisor. T___ F___
39. Performance Improvement means continuously measuring, assessing and improving the QUALITY of CARE delivered to patients with the ultimate goal of Eliminating Medical Errors and Improving Patient Outcomes. T___ F___
40. Safety within MVHS is only the responsibility of the managers. T___ F___
41. Glucometers need to be cleaned with hospital approved disinfectant after each patient use. T___ F___
42. Human Resources must receive an incident report within what time frame? _____
 A. 24 hours
 B. 72 hours
 C. 1 week
 D. 1 year
43. What does DMAIC stand for? _____
 A. Develop, Maintain, Act, Inquire, Correct
 B. Define, Measure, Analyze, Improve, Control
 C. Define, Minimize, Analyze, Improve, Correct
 D. Determine, Measure, Assess, Improve, Control
44. Non verbal indicators of pain include: _____
 A. Grimacing
 B. Moaning
 C. Groaning
 D. Rubbing a body part
 E. All of the above
45. Transplantable organs in the human body include: _____
 A. Heart and Lungs
 B. Pancreas and Intestine
 C. Kidneys and liver
 D. All of the above
46. Patients are more likely to share information if you ask them open-ended questions. T___ F___
47. Disruptive situations can arise at any time. We can prevent these episodes from becoming crisis situations with proper awareness and effective de-escalation. T___ F___
48. A patient placed on a High Fall Risk Level must have on an orange fall risk bracelet and must wear a yellow gown. T___ F___
49. An employee exhibiting behavior, conduct, or personal or physical characteristics of having used or consumed drugs or of being under the influence of alcohol while on company property or during working hours, shall be prohibited from working, pending the results of a substance test. T___ F___
50. The No Pass Zone means every team member can answer a call light and address the patients need within their scope and/or job description. T___ F___