



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 MVHS, 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.

Print Name

Signature

Date



HIPAA EDUCATION ACKNOWLEDGEMENT

I, _____, have reviewed MVHS'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 an employee/non-employee of MVHS, 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.

Print Name

Signature

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 the Mohawk Valley Health System (MVHS).

I also have read/been informed of and agree to follow MVHS'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:

- Examine documents or computer data containing HIV-related information unless required in the course of performing duties and responsibilities
- Remove from MVHS or copy such documents or computer data unless acting within the scope of assigned duties
- 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
- 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 MVHS'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.

Print Name

Signature

Date



Non-Employee Orientation Statement

Name: _____ Position: _____

School/Department: _____ Semester/Date of Hire: _____

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

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

STATEMENT:

I have successfully participated in MVHS New Employee/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 Network, 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. Employees/Non-employees are required to comply with all Healthcare and departmental policies, standards, rules, regulations and procedures. Disciplinary action is taken to formally notify an employee/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 employee/non-employee an opportunity to modify his/her behavior before serious disciplinary action is warranted. The level at which an employee/non-employee enters the disciplinary process is dependent upon the seriousness of the offense. In some cases, immediate suspension or discharge may be warranted

Print Name

Signature

Date



Non-Employee Orientation Review Questions

Name: _____ Date: _____ Score: _____

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 excellence in healthcare for our communities T____ F____
6. The Values of MVHS include: Integrity, Compassion, Accountability, Respect and Excellence 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. You should not share or post any information about patients on any social networking sites (Facebook, Instagram, Snapchat, Twitter) even without referring to their name. 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 hand washing. T____ F____
13. Hand washing is optional if you wear gloves. T____ F____
14. Examples of Bloodborne Pathogens are Hepatitis B & C and HIV. And the best defense against Transmission is standard precautions. T____ F____
15. MVHS **does not** place a patient who is infected/colonized with VRE or MRSA on Contact Isolation. T____ F____
16. If a patient is placed on a contact precaution, there will be a sign outside their room. Do not enter the room unless properly trained. 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 MVHS family and patients. T_____ F_____
19. How can I tell if a piece of equipment is safe for use? _____
- a) All medical equipment is labeled with an inspection sticker and control number.
 - b) Each year the inspection sticker will come in a different color.
 - c) It is everyone's responsibility to ensure equipment is within the inspection period prior to use.
 - d) 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 Amber involves a child abduction 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, Isolate and 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 ER regardless of ability to pay. This is known as EMTALA. 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 a 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 may be 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? _____
- (a) Board of Directors
 - (b) All employees
 - (c) Yourself
 - (d) 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 Red is for a Fire and you should respond by using the acronym: R.A.C.E. (Rescue, Alarm, Contain, Extinguish) 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. Any person/institution that suspects an adult or child is being abused must report their suspicions. T_____ F_____
42. Human Resources must receive an incident report within 24 hours T_____ F_____
43. MVHS's Quality Improvement Process DMAIC stands 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 /Groaning
 - (c.) Rubbing a body part
 - (d.) All of the above
45. Patients & Visitors are more likely to share information if you ask them open-ended questions. T_____ F_____
46. 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_____
47. A patient that is a high fall risk will be wearing an orange fall risk bracelet and a yellow gown. T_____ F_____
48. 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_____
49. Transplantable organs in the human body include: _____
- (a.) Heart and Lungs
 - (b.) Pancreas and Intestine
 - (c.) Kidneys and Liver
 - (d.) All of the above
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_____