

## Confidentiality Agreement

In the performance of functions for Glen Rose Medical Center you may have access to Confidential Information. Confidential Information is valuable and sensitive and is protected by law and by GRMC Policy. The intent of these laws and policies is to assure that Confidential Information will remain confidential - that is, that it will be used only by those with appropriate authority as necessary to accomplish the organization's mission.

Confidential Information is information concerning patients, participants of GRMC benefit plans and programs, customers, physician credentialing, peer review, quality review, committee records, personnel records, payroll records, salary and compensation information, logo and password information, employee health information and information related to operations and internal business affairs of GRMC that is not generally available to the public. You may learn of or have access to some or all of this Confidential Information through a computer system or through your volunteer activities.

Those requiring access to computerized information will be assigned a unique logon ID and password. These Logon IDs and passwords must be kept secure and confidential. The Unique logon ID and password are equivalent to a legal signature. Users will be held accountable for any access utilizing their unique logon ID.

You are required to conduct yourself in a strict conformance to applicable laws and GRMC policies governing Confidential Information. Access to Confidential Information is permitted only as authorized and as required for legitimate purposes in the performance of your volunteer position.

Protected Health Information (PHI) is information related to patients/residents and their healthcare, condition, treatment or payment. It extends to information that is transmitted or maintained in any form or medium, whether electronic, paper or oral. All workers or volunteers, whether directly involved in the care of the individual or providing support services, must use discretion when discussing PHI. PHI obtained should not be accessed or discussed unless absolutely necessary for work processes. Only PHI pertinent to the role of the volunteer in his/her function should be accessed and communicated per GRMC Policy. If PHI is being discussed or otherwise inappropriately disclosed, the incident should be reported to the supervisor or the Privacy Officer (CFO).

Violation of confidentiality can result in corrective action, up to and including termination. Release of PHI, without proper authorization could result in civil and/or criminal penalties.

I understand that my volunteer/job function may require access to Confidential Information and that it is my role to secure and protect the information. I agree to safeguard and retain the confidentiality of all Confidential Information. I understand the consequences of confidentiality violations as defined.

Signature: \_\_\_\_\_

Print Name: \_\_\_\_\_

Date: \_\_\_\_\_

