

Epic Healthcare Staffing

Policy on Confidentiality and Dissemination of Patient Information and Staff Member Verification

Given the nature of our work, it is imperative that we maintain the confidence of patient information that we receive in the course of our work. Epic Healthcare Staffing prohibits the release of any patient information to anyone outside the department except in limited circumstances and discussions or disclosures of protected health information (PHI) within the organization should be limited to the minimum necessary that is needed for the recipient of the information to perform their job. Acceptable uses of PHI within the organization include but are not limited to peer review, internal audits, quality assurance and billing. I understand Epic Healthcare Staffing provides services to patients that are private and confidential and that I am a crucial step in respecting the privacy rights of Epic Healthcare Staffing patients. I understand that it is necessary, in the rendering of Epic Healthcare Staffing services, that patients provide personal information and that such information may exist in a variety of forms such as electronic, oral, written or photographic and that all such information is strictly confidential and protected by federal and state laws that prohibit its unauthorized use or disclosure.

I have received training in the confidentiality policies and procedures set in place by Epic Healthcare Staffing listed on the back of this document and agree I will comply with such policies and procedures during my entire employment with Epic Healthcare Staffing. If I, at any time, knowingly or inadvertently breach the patient confidentiality policies and procedures, I agree to notify the Epic Healthcare Staffing HIPAA Privacy Officer Liaison immediately. In addition, I understand that breach of patient confidentiality or privacy may result in disciplinary action up to and including suspension or termination of my employment with Epic Healthcare Staffing. Upon separation of my employment for any reason, or at any time upon request, I agree to return any and all patient confidential information in my possession.

I have read and understand all privacy policies and procedures that have been provided to me by Epic Healthcare Staffing Department. I agree to all conditions of my employment set forth in this agreement.

Signature: _____ Date: _____

Printed Name: _____