CONFIDENTIALITY AGREEMENT

**KEYWORDS:** Confidentiality, patient information, secure, consent, conceal, spoken, compromise, confidential, information, confidence, strict, privacy.

**PURPOSE:** To ensure that St. Joseph’s staff and vendors adhere by the confidentiality practices set forth by St. Joseph’s Healthcare System. That persons giving sensitive and personal information feel secure and that they can trust that their privacy is being protected.

**SCOPE:** All St. Joseph’s Healthcare System facilities.

**LEGAL/REGULATORY CITES:** NJ Administrative Code 8:43-4:1 (a)(2)

**DEFINITIONS:** Entrusted with the confidence of another. Ensuring that information is accessible only to those authorized to have access and is protected throughout its lifecycle.

**POLICY:**

Patients who receive services from St. Joseph’s Regional Medical Center in any of its programs or facilities have a moral and legal right to expect that information pertaining to their admission, diagnosis and medical treatment, as well as personal and financial information, will be held in confidence. The unjustified disclosure of confidential patient information undermines the dignity of the patient and may cause him/her medical harm. The disclosure of patient information to physicians, nurses and other health care professionals and employees at St. Joseph’s shall be restricted to a need-to-know basis. Individuals who knowingly violate the confidentiality of patient information may be subject to disciplinary sanctions.

A) **DEPARTMENT RESPONSIBILITY:** Each department of St. Joseph's Regional Medical Center shall have a written policy that affirms the moral and legal obligation to protect the
Confidentiality of patient information. These policies shall include:

1. an explicit statement with respect to patient confidentiality within the department;
2. a mechanism for providing education pertaining to patient confidentiality;
3. a procedure for monitoring compliance with the department policy; and
4. a statement of appropriate sanctions when patient confidentiality is knowingly violated.

B) PATIENT CARE: All oral discussions of confidential patient information should be held in a setting that protects the privacy of patients and patient information. A discussion of confidential patient information should never be held in public areas, e.g. elevators, hallways, etc. Patient care conferences, i.e. Morning Report, Patient Case Conferences, Grand Rounds, Morbidity and Mortality Report, etc., should be conducted in a "closed" forum, i.e., open only to St. Joseph's Regional Medical Center health care professionals and students under their supervision when it is necessary to reveal confidential information for the purpose of providing patient care. Committee meetings should be conducted in a "closed" forum, i.e. open only to committee members when it is necessary to reveal confidential information at the meeting. Printed material containing confidential information should be collected and destroyed at the conclusion of Patient Care Conferences and committee meetings. Departments using grease boards for posting procedure schedules and patient room assignments must place the boards so that the board cannot be read from the public corridors. This does not restrict the use of information in controlled areas such as the Operating Room or Staff conference rooms.

C) EDUCATION: Confidential information that could identify a patient should be substantially altered, i.e. age, sex, race, etc. when Patient Care Conferences and committee meetings are conducted in an "open" forum, i.e. Open to people who are not St. Joseph's Regional Medical Center health care professionals or health care students under their supervision, so as to preclude identification of the patient. A case merely used to introduce a general topic for discussion should be substantially altered, a composite, or entirely fictitious. Written consent must be obtained from the patient prior to then use of identifying confidential information in an "open" presentation when altering this information would detract from the educational value of the case presentation and effective concealment of the patient's identity is not practical. A statement of the obligation to protect patient privacy should be made at conferences and meetings when confidential information is discussed.

D) MEDICAL RECORDS: Protecting the confidentiality of patient information whether these be written or computerized records is a special responsibility of professionals at St. Joseph's who are charged with collecting, maintaining, reviewing and storing patient records. The computerization of patient information poses new challenges for protecting patient information. The Medical Records Department and the Information Technology
Resource Department have a special responsibility for monitoring procedures which can maximize the protection of confidential patient information. Computerized patient information systems should enhance the accessibility of patient information without compromising the confidentiality of such information.

(See Confidentiality of Medical Records - Ref. # 1901)

E) DISCLOSURE OF PATIENT INFORMATION TO THIRD PARTIES:

The delivery of health care today requires the disclosure of patient information to "third parties" including State and Federal governmental agencies, insurance companies, case management companies, etc. The departments of Utilization Review and Quality Assurance, Patient Accounts, Medical Records and the Office of the Risk Manager have a special responsibility for the implementation of procedures which shall define the circumstances when and how patient information may be disclosed to "third parties". Such procedures shall also specify who has the authority to authorize the release of patient information to "third parties."

F) MEDIA DISCLOSURE: The Public Relations Department has the responsibility for the implementation of procedures pertaining to the disclosure of patient information to the media. All media inquiries, i.e. print, television, radio, etc. regarding patient information shall be referred to the Public Relations Department. On weekends, holidays and during evening media inquiries shall be referred to the administrator on-call.

(See Release of Information to the Media - Ref. # 1912).

G) EMPLOYEES: Employees of St. Joseph's Regional Medical Center who receive services from St. Joseph's Regional Medical Center in any of its programs or facilities have a moral and legal right to expect information pertaining to their admission, diagnosis and medical treatment, as well as personal and financial information, will be held in confidence. Maintaining confidentiality for hospitalized employees is particularly difficult since they are known by other hospital staff. Often well intentioned requests for information by concerned co-workers can constitute a breach of confidentiality. The urge to share information with others on staff who know the employee/patient can also lead to situations where confidentiality is reached. Due to the special challenges associated with protecting the confidentiality of hospitalized employees, all departments at St. Joseph's shall focus specific attention on this issue in their respective policies.

H) LEGAL AND ETHICAL ISSUES: When legal issues or questions pertaining to the confidentiality of patient information arise, the Offices of General Counsel or Risk Management should be consulted. When ethical issues or questions pertaining to the confidentiality of patient information arise, the Ethics Committee is available for consultation.