



Confidentiality Oath

Maintenance of professional ethics and community respect is the principle of confidentiality. All staff of Guiding Hands Coalition (referred to as “GHC” going forward) has a four-fold set of ethical responsibilities by which they are bound to the resident, GHC, the community, and themselves.

GHC’s client’s act in good faith, expecting their circumstances and personal matters to remain confidential, and we are obligated by law and ethics to abide by that. The following is presented to provide some guidelines concerning the matter of responsibility.

- 1.) “Confidential Information” means information provided by the facility that is not commonly available to the general public, or is required by law or regulation to be protected from disclosure to third parties not considered part of the GHC “workforce” as that term is defined by federal and state health information privacy regulations such as Health Information Portability and Accountability Act. Confidential information includes information contained in patient medical records and any other health information which identifies as a patient; quality assurance, research or peer review information; and information concerning GHC’s employees, services or business operations. Such information can be acquired by any means and in any form, written, spoken, or electronic.
- 2.) Information and details about a client’s case may be discussed for clinic purposes on a “need to know” basis only. That is, cases may be discussed in clinical and supervisory meetings in order that cases may be more appropriate and therapeutically managed.
- 3.) No identifying information about client’s (names, addresses, social security numbers) should be revealed except within GHC itself, except when an appropriate release of information is present.
- 4.) The case records that are kept on clients should only be used for clinical purposes and not for general perusal. Other agencies requesting the records of given clients’ records should first obtain release of information from the client. In no case should the records be automatically sent to another person or agency without first receiving a release of information from the client or legal guardian (consent form).

- 5.) Discussing the details of a case outside GHC (verbally, via email, Facebook, text, etc.) even though names, addresses, and social security numbers are not revealed, could also be considered a breach of confidentiality. That is, one might possibly describe in detail facts about the case and never mention who the person is or allude in any way to names or any type of descriptive data, and yet within this context, reveal enough information that the listener might possibly identify the client.
- 6.) The fact that a case has been made public through any news media does not alter the fact that this person still has confidentiality privileges within GHC itself. For example, if a client has been having difficulties with a given problem and is arrested, GHC confidentiality obligations remain unchanged.
- 7.) All staff agrees and will take an oath as a condition of employment with GH that in the event of termination of employment with GHC for any reason whatsoever, they will keep private and confidential all identifying information on all clients of whom they have become aware through their employment at GHC.

The following oath will be signed by the entire staff and kept on record in their employee file:

I, _____, will maintain and protect the privacy of the GHC client in my use and disclosure of the Confidential Information and I will not misuse or be careless with such information. I understand that any violation of this Agreement or GHC policies related to access, use or disclosure of Confidential Information, may result in significant legal ramifications for which I will be held solely responsible with respect to this Agreement.

During the course of my employment and the event of my termination of employment with GHC, for any reason whatsoever, I will keep private and confidential all identifying information on all residents of whom I have become aware through my employment at GHC.

I acknowledge I have reviewed all of the information above. I understand that compliance with the principles, policies and procedures expressed above is a condition of my participation and continued presence at Guiding Hands Coalition.

Date: _____ Signature: _____