



## Rogers Fire Department Standard Operating Procedures

<b>Policy Title:</b>	Confidentiality		
<b>Policy Number:</b>	110	<b>Volume:</b>	Administration
<b>Approved By:</b>	Tom Jenkins	<b>Last Updated:</b>	April 2015
<b>CFAI Reference:</b>	5G.7,	<b>CAAS Reference:</b>	106.07.01
<b>Revision Summary:</b>	Created – April 2009 Formatted – May 2012 Updated – January 2015 (release procedure) Updated – April 2015 (Additional Requests & Notice of Privacy Practices)		

### PURPOSE

The purpose of this policy is to provide information on maintaining confidentiality as it applies to emergency incidents and patient medical records.

### POLICY

As a primary medical care entity, the Rogers Fire department has a responsibility to maintain confidential treatment for our patients and their families. Likewise, Rogers Fire Department is frequently involved in scene investigations that generate sensitive information. Therefore this policy is established to strictly maintain confidentiality and protect health information.

All RFD Personnel shall be responsible for keeping all information pertaining to the condition of or any other aspect of patient care or any other emergency scene strictly confidential.

EMS reports are a portion of our patient's medical records. Medical records are confidential and must not be viewed by anyone other than the patient and the caregiver. The patient may give consent to others to view the information, however, that process shall take place through a formal and written information request conducted at the direction of Fire Department Headquarters.

Likewise, information concerning patient condition or any circumstances about a specific incident shall not be given to anyone who is not immediately involved in the response effort. Rogers Fire Department personnel shall not discuss specifics about patients and/or incidents with the news media or citizens without the explicit permission of a Chief Officer or the Incident Commander.

Patient medical records shall only be released 1) by court order or 2) upon request by and directly to the patient 3) by power of attorney on behalf of the patient.

## **Patient Care Report Release Procedure**

When a request for a patient medical record is received, the requesting party should be directed to the Administrative Assistant assigned to EMS. The administrative assistant is authorized to release a PCR directly to the court, patient, or patient's attorney when the request is accompanied by required documentation.

Documentation is considered sufficient when 1) court order – subpoena authorized by the court 2) patient – government issued photo identification 3) attorney – power of attorney signed by the patient.

When a request and supporting documentation meets the authorized criteria, the requesting party may be provided with a printed copy of the record. The documentation provided to support the request shall be copied and affixed to the original PCR as a record of release. In no circumstance shall access to the original file be granted.

Requests not accompanied by proper documentation or requests by any other party shall be forwarded to the Deputy Fire Chief designated as the Privacy Officer (A.K.A.: HIPAA compliance officer), or the Fire Chief.

## **Hospital Patient Care Reports**

The Arkansas Trauma System requires all participating receiving hospitals that receive a trauma patient via EMS to obtain an EMS report, commonly referred to as a "short form" or "PCR", patient care report for data collection. Such reports, and other statistical gathering tools, as required by the State of Arkansas, are allowed.

## **Additional Requests**

Patients may submit requests pertinent to their own Protected Health Information. Allowable requests may include: 1) Request for Access to PHI (Form 110.1) 2) Request for Restriction to PHI (Form 110.2) 3) Request for Alternative Communication of PHI (Form 110.3). Incomplete requests may not be considered.

Such requests shall be submitted in writing on the proper form, to the Privacy Officer for consideration. The disposition of submitted requests will be provided to the requesting person by the Privacy Officer.

## **Approval of Requests**

When requests are approved, the Administrative Assistant assigned to EMS shall place the request and all supporting documentation in the affected file. This shall serve as the record of access and will remain in the file for the life of the record.

## **Denial of Requests**

Requests may be denied by the Privacy Officer when:

- a. Information requested was compiled in reasonable anticipation of, or use in, a civil, criminal or administrative action or proceeding;
- b. Information requested was obtained from someone other than a healthcare provider under a promise of confidentiality and the access requested would be reasonably likely to reveal the source of the information;
- c. If a licensed healthcare professional has determined, in the exercise of professional judgment, that the access requested is reasonably likely to endanger the life or physical safety of the individual or another person;
- d. If the PHI makes reference to another person (other than a healthcare provider) and in the exercise of professional judgment, that the access requested is reasonably likely to cause substantial harm to that person.
- e. Submitted request is incomplete or incorrect.
- f. Insufficient evidence provided to determine legitimacy of requests on a patient's behalf.

## **Notice of Privacy Practices**

The Rogers Fire Department will maintain a current edition of its Privacy Practices available to the public. This will be posted in a readily accessible format within the Department's website. Physical or electronic copies of the Notice will be made available to requesting parties. Requests for copies may be satisfied by a member of the Administrative Assistant Staff.