



# Privacy & Security

## REMINDER

Thank you for Safeguarding our Patient's Information

## Protecting Patient Information Quick Tips

- Printers are often shared, review paper documents prior to giving them to patients – make sure they are only given their information
- Self-Check with the STAR Method- Stop and focus your attention on the task, Think and understand what you are about to do, Act and carry on the planned task, Review and verify that your results are what you expected
- Discard paper documents containing patient information in a confidential shredder bin, not in the recycle bin or regular trash
- If using a recycle bin to hold patient information for shredding, the bin must be secure and emptied into the confidential shredder bin at the end of the shift
- Use a fax coversheet when faxing patient information, and verify fax numbers, report misdirected faxes to the compliance department
- Ensure patient information is not left on counter tops
- In public areas, place documents with patient information face down or covered
- Posted patient list, census and or scheduled procedures in public areas should be kept secure
- For units that are not staffed 24 hours, patient records should be secured in locked storage cabinets or locked rooms
- When leaving a voice-mail message, only include the name of the person you are calling, your name, the facility name, and a call back number
- Lock workstations anytime you walk away from your computer, Locking your workstation protects patient information from inappropriate access and protects your reputation. Remember – all access under your login is attributed to you!
- Secure portable devices (laptops, tablets, pagers etc) and storage media (CDs, USB drives) containing PHI when not in use
- Safeguard your login ID/passwords
- Never access PHI that you do not need to perform your job
- Encrypt emails when sending PHI outside of the network
- Do not discuss patients, their care or hospital business where you can easily be overheard
- Always wear your ID badge

Report all incidents of inappropriate disclosure of patient information to the Compliance Department