



**The below is a direct excerpt from Clay County Public Health Center’s *Personnel Manual*. Although this directly refers to “employees”, volunteers, students, job shadows & interns are required to sign this confidentiality agreement and to maintain confidentiality & security of the information in compliance with the *Health Insurance Portability and Accountability Act (HIPAA)*. Volunteers, students, job shadows & interns maybe subject to legal action if violations occur.**

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**Employees:**

It is the responsibility of supervisors to provide employees with instructions regarding maintaining security of records, releasing information and releasing records.

It is the responsibility of all Clay County Public Health Center employees to assure the confidentiality and security of information and records within their control and to release information only to those agencies or individuals with an official need for the information in compliance with the Health Insurance Portability and Accountability Act (HIPAA) and state law. Refer to CCPHC’s *HIPAA Manual* for HIPAA procedures. Each employee is also required to sign the Employee ***Multi-Use: Confidentiality of Records*** form. Questions regarding release of information shall be referred to the employee’s supervisor.

A request for a legal opinion on release of information shall be submitted through administrative channels to the Clay County Public Health Center legal counsel.

A copy of such signed form shall be filed in the employee’s official personnel file. An employee revealing confidential information to unauthorized agencies or individuals shall be subject to disciplinary action up to and including discharge and, when in violation of applicable state and federal laws, may be subject to fine and/or imprisonment. An individual who terminates employment with Clay County Public Health Center and reveals confidential information acquired as an employee shall be subject to legal action.

**Contractors/Business Associates:**

There shall be a clause in each contract involving services to patients or clients that the contractor will maintain strict confidentiality of all patient or client information or records supplied to it by the Clay County Public Health Center or obtained as a result of contract activities. Contracting agents assume liability for all disclosures of confidential information by the contractor or the contractor’s employees.

**Researchers:**

Individuals granted access to Clay County Public Health Center’s records for research purposes shall include in the research protocol methods and assurances for maintaining confidentiality of information which identifies individuals. These assurances should include a statement that information that specifically identifies a client will not be subsequently disclosed without written permission of the client.

**Work Areas:**

All printed information of a confidential nature shall be removed from public view (placed inside a desk or file) when the employee is away from his / her work station and another authorized employee is not available to assure security of the information.

All printed information of a confidential nature shall be placed in locked files or other secure places when offices or work units are closed or left unattended.

Printed information to be discarded, such as poor quality copies or purged file materials, shall be shredded or otherwise destroyed to the extent that individuals cannot be identified.

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**Certification:**

I, the undersigned volunteer, student or intern, have received, acknowledge that I have read, understand and agree to comply with the Confidentiality Agreement as listed above. I also understand that, although volunteers, students or interns, are not listed in agreement, that I am being upheld to the same standards as CCPHC employees.

\_\_\_\_\_  
Volunteer, Student or Intern’s Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Volunteer Coordinator’s Signature

\_\_\_\_\_  
Date