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|  |  | **Blue Ridge Fire District**  **Policy and Procedure** | | |  | General Order Number  **C204** | |  |
|  |  | | | | | | |  |
|  | Subject:  **Health Information Protection and Portability Act** | | | Effective Date:  **March 21, 2015** | | | Total Pages:  **2** |  |
| Board Approval Date:  **March 21, 2015** | | | Resends: |  |
|  | Application:  **All District Personnel** | | *Signed into effect as authorized by the Board of Directors*  John Banning, Fire Chief | | | | |  |
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**PURPOSE**

To ensure that all Blue Ridge Fire District members understand the District’s concern for the respect of patient privacy and specifically Protected Health Information (PHI).

**II. SCOPE**

This policy applies to all members of the Blue Ridge Fire District including all employees, board members, volunteers, students, and trainees who have access to patient information. The guidelines below include work and activities that occur at fire stations, headquarters, in the field or office or at home. These guidelines also apply to all work situations or activities and must be used as applicable.

**III. POLICY**

It is the policy of the Blue Ridge Fire District to protect and maintain the confidentiality of Protected Health Information for all of its patients and employees.

**IV. DEFINITION**

For purposes of this policy, **District members** include employees, board members, volunteers, students and trainees.

**V. GUIDELINES**

1. The District recognizes that it is necessary to obtain and communicate personal health information in the rendering of fire and emergency medical care. This information may exist in a variety of forms including oral, radio transmission, electronic, written or photographic materials. All such information is strictly confidential and protected by federal and state laws.
2. The District provides services to patients that are private and confidential. Given the nature of Fire/EMS work, it is imperative that the confidentiality of patient information that is received both on active duty and in offices and quarters is maintained at all times.
3. The District prohibits the release of any patient or employee information to anyone outside the organization unless required for purposes of treatment, payment or healthcare operations.
4. Discussions of Protected Health Information (PHI) within the District will be limited to the *minimum necessary* to perform the job.
5. Acceptable uses of PHI within the District include, but are not limited to:

1. Exchange of patient information needed for the treatment of the patient

2. Release of basic employee information upon receipt of a written request

from a licensed practitioner

4. Billing and other essential healthcare operations

5. Internal audits

6. Quality Management activities

1. Each employee of the District represents a crucial step in respecting the privacy rights of all internal and external customers.
2. All District members must comply with all confidentiality policies and standard operating or administrative guidelines set in place by the District during their employment or association with the BRFD.
3. District members are prohibited from personally retaining any patient information they obtain while performing any services for patients. Upon request, District members must return any and all confidential patient information they may have in their possession.
4. If a member knowingly or inadvertently breaches patient confidentiality policies or guidelines at any time, the member must immediately notify the supervisor and/or the Fire Chief.
5. Failure to comply with District HIPAA policies will result in progressive disciplinary action up to and including termination or prosecution for civil/criminal penalties.