



**NURSING CONNECTION, LLC
11191 PALMETTO RIDGE DR
NAPLES, FL 34110
239-598-1784**

CONFIDENTIALITY STATEMENT

By Signing below, I hereby agree to uphold A Nursing Connection, LLC (ANC's) Confidentiality Policy, as explained to me during the orientation process, Specifically, I agree to:

- Maintain client confidentiality according to HIPAA standards and all other healthcare privacy legislation, even after my employment with ANC is terminated.
- Refrain from discussing any client information or ANC's business with anyone who does not work for the company, and who does not have a need to know about the information or business.
- Maintain the confidentiality or trade secrets, confidential or proprietary information regarding the company's clients or business.
- Refer to the Administrator any questions involving confidential client or business information by someone outside the company.

EMPLOYEE/CONTRACTOR NAME (PLEASE PRINT)

EMPLOYEE/CONTRACTOR SIGNATURE

TODAY'S DATE

**A NURSING CONNECTION, LLC
POLICY & PROCEDURE MANUAL**