TRINITY VALLEY COMMUNITY COLLEGE

Continuing and Workforce Education Department

Medical/Nursing Assistant Program and related courses

HIPAA/PRIVACY & CONFIDENTIALITY AGREEMENT

**As a student, I understand the significance of confidentiality with respect to information concerning myself, fellow students, and employees of TVCC and/or off campus clinical facility clients and staff. I agree to uphold these standards:**

1. Requirements of the Health Insurance Portability and Accountability Act ***(HIPAA)*** and any other Federal and State laws and organization policies regarding confidentiality for my patients, fellow students, instructors and/or staff and patients of cooperating medical facilities.
2. Any private or confidential information obtained in the educational environment will not be discussed outside of that environment and must be used in a professional manner treating all persons with respect.
3. Any disclosure of private or confidential information or unprofessional use of information is a violation of TVCC policy and is subject to disciplinary action, dismissal from the Medical/Nursing Assistant Program. Federal HIPAA regulation penalties can apply.

**Failure to uphold these standards can result in disciplinary action from TVCC.** Violation of Federal HIPAA laws can result in monetary penalty and/or imprisonment imposed by the government. (Any questions about this agreement can be asked in advance of signing. Please contact the dean’s office at 903-675-6212. Dean’s office is located in suite 115 in the Liberal Arts Building on the Athens TVCC campus.)

**I have read and agree to this policy:** (Supplemental explanatory information below and considered a part of this agreement.)

Printed Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Federal and State laws govern the collection, storage, transmission, and disclosure of personal data. Information is Privileged and Confidential regardless of format or how obtained: electronic, written, overheard or observed; therefore, any information obtained during classroom, lab simulation, or clinical experiences is NOT to be discussed outside of the learning experience. Privacy laws are based on the following:

1. Information about individuals needs to be limited to what is necessary to carry out functions of the business (TVCC and/or clinical facilities) collecting the information.
2. Once information is collected and stored, access to personal information is limited to employees, students and clinical staff who must have this information for the performance of their jobs.
3. Personal information (including opinions) cannot be released in any form outside of TVCC or the clinical facility-(discussed, social media, written, etc.)
4. When information is collected from a person, that person should have the opportunity to examine any information before it is released.

**Personal Information includes any of the following:**

**\*Name \* Address or zip code \*Email address \*Telephone numbers \* Fax numbers \* Date of birth \*Social Security number \*Birth Certificate information \*Driver’s License Number \* Vehicle identification number and license plate numbers \*Health Plan information, \*Photos \*Medical Record content \*course grade/performance \*personal relationship information associated with training \*other reasonable applicable information**