

# **CLIENT CONFIDENTIALITY & PATIENT RIGHTS**

**Inservice**

**Instructions: Please read, complete and return post-test.**

## **Confidentiality**

Confidentiality is the safekeeping of privileged information. This includes not only medical information of a patient, but also personal information or client/company information. Confidentiality applies not only to patients, but also to all employees of the company and to the agency itself. State and Federal Laws protect privacy and the disclosure of medical information. If you breach confidentiality, you may be breaking the law.

Breaches in confidentiality occur when private and protected information is improperly given out. This can be intentional or unintentional.

### **Breach of Confidentiality can occur the following ways:**

**Rumor** – Do not gossip about patients, employees or the agency. This includes starting rumors, adding to rumors and spreading rumors. Talking in public areas or where you can be overheard.

**Talking in public areas or where you can be overheard** – Public areas include elevators, restaurants, parking lots, the drive-through lane at McDonald's, hallways, public phones, etc. Announcing names on the intercoms in the office also can be a breach in confidentiality.

**Inquiries** – By giving information about patients, other employees or agency to those not directly involved with a situation, confidentiality may be breached. Never assume that a person, who is inquiring, is permitted to receive the information that he or she has requested. Ask the patient/employee/agency to whom information may be released. It is always best to refer any inquiries back to the patient/employee/agency.

**Written or recorded information/computers** – Using a patient's or employee's full name may breach confidentiality on calendars or boards, and by not shredding paper documents after use. Computer screens should be angled so others may not read what has been entered. Also, every employee who uses the computer must have a private access code to prevent unauthorized access to files.

**Faxing** – All faxes must be accompanied with a "Confidentiality" cover sheet.

Protecting confidentiality is everyone's responsibility. Remember that all information concerning a patient is to be held in the strictest confidence. This rule also applies to agency and other employee information. Some steps to take to keep confidentiality are:

- Remember that all information concerning a patient is to be held in the strictest confidence.
- Keep patient/employee files in a locked/secure area.
- Do not leave patient information lying around in the patient area.

## **Breach of Confidentiality (cont'd)**

### **Faxing (cont'd)**

- Use only patient numbers and initials as identifiers. Keep all accident/incident reports confidential.
- Transport patient information carefully and store records promptly.

## **PATIENT RIGHTS/RESPONSIBILITIES**

Each Patient has the right to the following:

- Be advised of who will pay for the services and how payment will be made.
- Be treated with consideration, respect, dignity, individuality, and privacy.
- Be assured that those who provide care are qualified to carry out the services.
- Have confidential treatment of his or her medical records.
- Participate in the planning of his or her care/treatment.
- Be informed in advance of care that will be given or of any changes in care.
- Be taught about his or her illness.
- Be informed by a physician of his or her medical condition.
- Refuse treatment.
- Be informed about applicable federal and state law and the agency's policy on advance directives.
- Voice grievances/complaints without fear of discrimination or reprisal, and to know that complaints will be investigated.
- Be provided with information regarding ethical dilemmas.
- Be informed about the home health agency hotline.
- Know that the agency will protect and promote patient rights.

You May Violate a Patient's Rights by Not:

- Treating the patient, his or her family, or his or her property/belongings with respect.
- Treating the patient as an individual.
- Closing doors or curtains, or by letting others stay in the room while care is being provided without patient permission.
- Fully explaining patient rights and responsibilities upon admission.
- Listening to patients (Remember, patients have the right to refuse care! You need to let the patient know what may happen because he or she has refused care/treatment.)
- Completing all the admission forms in their entirety.

## **PATIENT RIGHTS/RESPONSIBILITIES (cont'd)**

Each Patient Has the Responsibility To:

- Give accurate and complete health information.
- Assist with the development and maintenance of a safe environment.
- Inform staff about changes in health status.
- Voice concerns or problems and ask questions when something are not understood.
- Inform the agency when he or she will not be available for visits.
- Help develop, update, and comply with his or her plan of care.

If a patient does not comply with his or her responsibilities, then he or she could be discharged from the agency. The clinical supervisors, the administrator, and the physician will make the decision.

## **Advance Directive & Health Care Directive**

- At time of hospital and/or homecare admission as required by law, a health care provider must inform a client 18 years of age or older, with information about Advance Directives. Advance Directive is a general term to apply to both Health Care Directives and Durable Power of Attorney for Health Care Decisions. The U.S. Supreme Court decision (Cruzan) recognized that all people have a constitutional right to refuse any medical treatment, including ventilators and feeding tubes. Further, state laws authorize a person to name a person to make health care decisions for when he/she cannot. This document is intended to assure that a person's wishes are know and followed. A person needs to discuss the directive with family and physician additionally he/she may wish to share this with clergy, attorney and friends. The Advance Directive does not need to be notarized and prepared by an attorney. It may be changed or revoked at any time. The following descriptions outline additional information.
- **Living Wills**  
These are written instructions that explain your wishes regarding health care, should you have a terminal condition. They're called "Living Wills", because they effect while a patient is still alive.
- **Durable Power of Attorney**  
A written document, you can name a person (called a proxy) to make decisions for you if you become unable to do so. Advance Directives can protect people unable to communicate due to the following examples of extreme health conditions: Irreversible brain damage, or brain disease, which can affect the ability to think as well or communicate, permanent comatose state (or other unconscious states), which can leave on unconscious without hope of recovery and/or the diagnosis of a Terminal Illness where life expectancy is short.

## **PATIENT RIGHTS/RESPONSIBILITIES (cont'd)**

### **Advance Directive & Health Care Directive (cont'd)**

Below are examples of treatments that patients may express their feelings about:

**CARDIOPULMONARY RESUSITATION (CPR)** – Used to restore stopped breathing and/or heartbeat.

**INTRAVENOUS (IV) THERAPY** – Used to provide food. Water and/or medication through a tube placed in a vein, when patients can no longer eat normally.

**FEEDING TUBES** – Inserted through the nose, throat, etc., to provide nutrition, when patients can no longer eat normally.

**RESPIRATORS** – Machines used to keep patients breathing.

**DIALYSIS** – A method of cleaning patient's blood by machine, when kidney function is impaired.

**TREATMENT FOR PAIN RELIEF** – Requesting or refusing it.

#### **Points to consider regarding healthcare choices:**

- To die without pain and suffering
- Be able to make my own decisions
- Leave my family with good memories
- Act according to my religious beliefs and values
- Not burden my family with difficult decisions
- Be with loved ones at time of death

**\*NOTE:** Upon admitting clients to Homecare service, clients will be provided with a copy of "Advance Healthcare Directive and Durable Power of Attorney" brochure. We will instruct the client to inform family, etc., their intention regarding his or her right to have an advance directive/living will. A copy of the Advance Directive will be maintained in a patient medical record, appropriate agency personnel will be advised of the client's wishes.