


<p>Name of Policy: <u>Patient Rights, Responsibilities, Confidentiality and Conflict Resolution</u></p> <p>Policy Number: 3364-136-01-12</p> <p>Department: Respiratory Care</p> <p>Approving Officer: Chief Nursing Officer</p> <p>Responsible Agent: Director, Respiratory Care</p> <p>Scope: The University of Toledo Medical Center Respiratory Care Department</p>	 <p>Effective Date: April 8, 2019 Initial Effective Date: July 14, 1989</p>
<p> <input type="checkbox"/> New policy proposal <input checked="" type="checkbox"/> Minor/technical revision of existing policy <input type="checkbox"/> Major revision of existing policy <input type="checkbox"/> Reaffirmation of existing policy </p>	

(A) Policy Statement

The Department of Respiratory Care personnel will hold confidential privileged information as it relates to University of Toledo Medical Center patients, employees, and all departmental/facility operations in general. HIPPA regulations will also be followed. Department personnel will also resolve patient concerns and conflicts about care or services. All Respiratory Care staff will follow the policies and guidelines set forth in Hospital Policies 3364-100-60-01 Complaint Management, 3364-100-60-02 Patient Rights and Responsibilities, and 3364-100-60-04 Patient Education.

(B) Purpose of Policy

To provide guidelines for personnel in the Department of Respiratory Care for maintaining the privacy of confidential information, and to describe how to resolve patient concerns and documentation needed.

(C) Procedure

Respiratory Care personnel will adhere to University of Toledo Medical Center Policies.

1. Patient Complaint resolution will be followed as described in Hospital Policy 3364-100-60-01 utilizing the Patient and Visitor Concern Management Form.
2. Patient Rights and Responsibilities will be followed as described in Hospital Administration Policy 3364-100-60-02.
3. Patient Education will be followed as described in Hospital Administration Policy 3364-100-60-4.
4. Medical record information shall be regarded as patient/physician confidential and is only available to staff members as it directly pertains to the care of the patient, in accordance with UTMC Policies. HIPPA guidelines, as described in UTMC policies 3364-100-90-01, 02, 03, and 08 will be followed. Direct any questions about privacy regulations to the Supervisor or Director. If unable to answer, the question will be directed to the UTMC Compliance/Privacy Officer.
5. Personal information about employees including employment information, work schedules, phone number, and address, will only be referred to the Director's office, which will then be forwarded to the Human Resources Department.

