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CONFIDENTIALITY

POLICY

# Confidentiality

ISSUED

ON 02/

2008

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REVISED

ON 07/

2015

**This policy applies to:** All University faculty and staff

## **ABOUT THIS POLICY**

### **Policy Applies To**

Faculty, Staff

### **Policy Number**

108

### **Policy Group**

Human Resources

### **Issuing Authority**

Human Resources

### **Responsible Officer**

Kathy Miner

### **Contact Information**

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## **ADDITIONAL RESOURCES**

### **SMH Policy #6.2.1**

**(<https://www.urmc.rochester.edu/compliance-office/plans-policies/affiliate-policies.aspx>)**

### **HIPAA Privacy and Security Policies**

**(<https://sites.mc.rochester.edu/departments/hipaa/hipaa-policy-manual/>)**

## **RELATED POLICIES**

## **Table of Contents**

### **I. POLICY**

### **II. GUIDELINES**

### **III. PROCEDURES**

## **I. Policy**

The University has a responsibility to provide and maintain confidentiality for all faculty, staff, patients and students. The intent of this policy is to meet regulatory responsibility as well as ensure an environment that complements our mission as a provider of health care, research and education. All confidential information should be maintained in a manner that ensures complete privacy for those involved.

“Confidential information” includes, but is not limited to, medical, financial, or any personal identification information related to staff, faculty, patients, and students. Such information must be maintained as confidential regardless of its source. Sources may include, but are not limited to, medical records, physicians’ notes, student records, email, voicemail,

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