

Township of Lakewood
Department of Emergency Medical Services

Policy & Procedure
Privacy Rule

The Township of Lakewood Department of Emergency Medical Services is committed to conducting its business in strict compliance with HIPAA regulations. All staff will be required to be instructed in the new regulations and what steps are required to meet compliance.

Beginning April 14, 2003, **ALL** patients will be given a copy of the Notice of Privacy Practices. All patients will be given the opportunity to read the Notice of Privacy Practices and sign the acknowledgement form. If the Department of Emergency Medical Services is unable to provide the Notice of Privacy Practices at the time of the service, as in an emergency situation, the Notice of Privacy Practices will be provided as soon as reasonable after the service is provided. This could include leaving a copy of the Notice of Privacy Practices with the appropriate facility staff to be delivered to the patient at a later time. Some notable examples of when providing the Notice of Privacy Practices would not be feasible, are when the patient has a decreased or altered level of consciousness, the patient is a minor or the patient is in such a condition it is not reasonable to give them the Notice of Privacy Practices. **Any failed attempt to provide the Notice of Privacy Practices to the patient must be noted in the patient Acknowledgement of Receipt of Privacy Notice.** This documentation should include the medical condition(s) or circumstance(s) that prevented the Township of Lakewood Department of Emergency Medical Services from providing the patient with the Notice of Privacy Practices.

The Township of Lakewood Department of Emergency Medical Services is required to obtain a signed acknowledgement of the receipt of the Notice of Privacy Practices, except in emergency situations and when the patient's medical condition(s) prohibits them physically and/or mentally from signing. When the acknowledgement signature is not obtainable, the Township of Lakewood Department of Emergency Medical Services will demonstrate its good faith effort to obtain the signature by documenting the medical condition(s) that prohibited the patient from signing. If a patient refuses to sign the acknowledgement, the reason for the refusal must also be documented.

As policy, all documentation will be completed as soon as possible (this includes the run sheet, billing form and Acknowledgement of Receipt of Privacy Notice). These documents will be kept secure while in the ambulance and once logged into the run book will be secured either in the Chief's office or in a locked box provided for that purpose.

