



## Course Learning Outcomes for Unit VI

Upon completion of this unit, students should be able to:

1. Define confidentiality.
2. Define the Health Insurance Portability and Accountability Act (HIPAA).
3. Discuss ways to protect the confidentiality of the patient's written record, computerized records, and verbal considerations.
4. List areas of concern that health unit coordinators must always keep in mind to ensure patient confidentiality.
5. Identify legal repercussions for not following legal and ethical standards.
6. List five patient rights.
7. Differentiate between the two forms of advance directive.
8. Discuss patient responsibilities.

## Reading Assignment

**Chapter 11:**  
Confidentiality

**Chapter 12:**  
Patient Rights and Responsibilities

## Unit Lesson

The health unit coordinator is responsible for the management and coordination of several patient care related services. The handling and management of patient information is an area of primary responsibility for the health unit coordinator. As the patient's health information is being handled, the need for adherence to all confidentiality rules and regulations is unyielding. All communication must be managed with the upmost respect to the patient's confidential record. Not only is maintaining confidentiality important to the patient, it is also imperative to other health care providers and the health care organization.

In order to ensure confidentiality at all times, the health unit coordinator must observe several general practices. The health unit coordinator should know who has access to the patient's records and where these records are located within the health care organization. Additionally, when working within the patient's record, the health unit coordinator should only review and read information within the record that pertains to the current task at hand. Patient records should never be maintained in plain view of the public and verbal discussion of the patient's records must always be done quietly. As the health care industry continues to progress in the area of information technology, it is also important for the health unit coordinator to practice due diligence in regard to log on and log out procedures as records are accessed electronically. Lastly, the health unit coordinator would be wise to understand the health care organization's policies and procedures for handling patient health information.

Another important role of the health unit coordinator involves ensuring that patients understand their rights and responsibilities as they are admitted to the health care facility. Patients must not only know, but also

acknowledge, their rights and responsibilities as they participate in treatment. Typically, when patients are admitted to most health care facilities or organizations, they are informed of their rights and responsibilities regarding their care and treatment. Within the mental health care industry great care is taken to inform clients of their rights and roles as it relates to treatment planning and goal setting. I recall several years ago, as a mental health service manager, spending several days training new employees on various methods to use to assist them in helping clients understand their rights and responsibilities related to their treatment outcomes. Whether within the mental health or physical health care field, the patient plays a vital role in determining the outcome of treatment and the health unit coordinator facilitates the overall understanding of this concept.

In Chapter 11 and Chapter 12 you will review the primary responsibilities and roles of the health unit coordinator in reference to confidentiality and the patient's rights and responsibilities. Additionally, you will develop an understanding of government agencies and their management of patient health care services.

As the unit concludes you will also gain an understanding of the difference between a Living Will and a Power of Attorney for Health Care.

## Suggested Reading

### Health Information Privacy

<http://www.hhs.gov/ocr/privacy/>

### Article which describes the Emergency Medical Treatment and Active Labor Act (EMTALA)

<http://www.ncbi.nlm.nih.gov/pmc/articles/PMC1305897/>

### Advance Directives

<http://www.patientsrightscouncil.org/site/advance-directives-definitions/>

Please use the CSU Online Library to locate and read the following articles:

Blank, R. H. (2011, Summer). End-of-life decision making across cultures. *Journal of Law, Medicine & Ethics*, 39(2), 201+.

Burkle, C. M., & Cascino, G. D. (2011). Medicine and the media: Balancing the public's right to know with the privacy of the patient. *Mayo Clinic Proceedings*, 86(2), 201+.

Gordy, S., & Klein, E. (2011). Advance directives in the trauma intensive care unit: Do they really matter?. *International Journal of Critical Illness and Injury Science*, 1(2), 32.

Parrillo, A. V., & Stephens, J.H.(2011). HIPPA's Role in E-mail Communications between Doctors and Patients: Privacy, Security, and Implications of the Bill. *Health Educator*, 43(1), 31.

## Learning Activities (Non-Graded)

Click [here](#) to access the BHA 3401 Glossary. Please review the glossary before attempting the Unit VI Assessment.

Non-graded Learning Activities are provided to aid students in their course of study. You do not have to submit them. If you have questions contact your instructor for further guidance and information.