South Central Illinois Medical Reserve Corps

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Volunteer Statement of Confidentiality and Completion of HIPAA Training

As required by federal and state laws (Health Insurance Portability and Accountability Act [HIPPA], programs specific laws such as Control of Sexually Transmitted Diseases Code, HIV/AIDS Confidentiality and Testing Code, Rules and Regulations for the Control of Communicable Diseases, The Control of Tuberculosis, etc.) and all other codes and laws followed by Clinton County and Washington County Health Departments.

I hereby agree to hold in confidence all information received and/or acquired while completing my volunteer responsibilities with the Clinton County and Washington County Health Departments, the South Central Illinois Medical Reserve Corps, or while conducting any other business or activity for or on behalf of the Clinton/Washington County Health Departments and/or Medical Reserve Corps.

I will not currently, or in the future, divulge or in any way communicate information that may be considered as confidential by other individuals, organizations, nursing or health care professionals, or as outlined in federal and state rules and regulations. This information includes, but is not limited to, confidential and/or personal health information (PHI) about anyone who may be considered to be a patient, client, employee, volunteer, disaster evacuee, or emergency/event victim, or recipient of service from the Clinton/Washington County Health Departments and/or Medical Reserve Corps and any other agency or organization of Clinton and/or Washington County as well as confidential and/or PHI of any other affiliated agencies or counties.

I have read and fully understand this information contained in this form and have received training in HIPAA regulations.

In Witness Whereof, this oath is executed this \_\_\_\_\_\_\_\_\_day of \_\_\_\_\_\_\_\_\_\_,

20\_\_\_\_\_\_\_\_.

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Signature of Volunteer Print Name of Volunteer

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Signature of Parent/Guardian

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Signature of MRC Director/Witness Date

 Office of Emergency Preparedness and Response Medical Reserve Corps

 Clinton County Health Department 991 Franklin Street Carlyle, IL 62231

 PH (618) 594-2723 Fax (618) 594-3225 Cell (618) 335-6503

 Washington County Health Department 177 S. Washington Nashville, IL 62263 PH (618) 327-3644

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