

expectations and needs may change over time. Patient privacy must be respected during all aspects of care, including during the following:

- Clinical interviews
- Examinations
- Procedures
- Treatments
- Transport

Patients may desire privacy from others, including the following:

- Hospital staff
- Other patients
- Family members or others identified by the patient
- Other individuals (for example, accreditation or certification surveyors or other auditors)

In addition, patients may not wish to be photographed or recorded.

Clear communication between hospital staff and patients builds trust. Communication related to privacy expectations may be documented in the patient's plan of care as needed. Documentation of privacy expectation ensures continuity and consistency among the health care team members.

Health information is important for understanding patients and their needs and for providing care and services. The hospital respects such information as confidential and has implemented policies and procedures that protect such information from loss or misuse. The policies outline what and how information may be released and are consistent with laws and regulations.

Patient information may be shared for various reasons, including the following:

- Continuity of care
- Contagious diseases
- Billing or insurance purposes
- Medical research

Patient permission is obtained before sharing information, as required by laws and regulations.

Patients also have the right to access their own health information. When they have access to their health information, patients can make better decisions about their health care. Access to health information has benefits for patients, including the following:

- Allowing patients to review and monitor compliance with their treatment plans
- Fixing any errors that may be in their medical record
- Monitoring their progress in managing their disease(s)

Measurable Elements of PCC.01.02

1. Patient privacy is respected for all clinical interviews, examinations, procedures/treatments, and transport. (*See also* GLD.09.00, ME 3; HCT.01.03, ME 2; MOI.01.01, ME 1; MOI.01.02, ME 3)
2. Confidentiality of patient information is maintained according to laws and regulations.
3. The hospital has a process for patients to give permission for the release of information consistent with laws and regulations.
4. The hospital has a process for providing patients with access to their health information consistent with laws, regulations, and culture.
5. The hospital provides patients with access to health information, regardless of their ability to pay.

Standard PCC.01.03

The hospital provides patients with information regarding the safety and security of personal possessions.

Intent of PCC.01.03

The hospital communicates its responsibility, if any, for the patient's possessions to patients and families as part of its efforts to ensure the safety and security of personal possessions. The hospital determines its level of responsibility for any or all of the patient's personal possessions brought into the hospital and implements a process to account for the possessions and to protect them from theft or loss. The hospital informs patients and their families about the hospital's level of responsibility for personal possessions and its process for protecting them. Examples of levels of responsibility include the following:

- Only being responsible for items locked in safes in patient rooms
- Only being responsible for patient possessions held by hospital security

The hospital has a process to store patient possessions across the organization and in various conditions.

Examples include the following:

- Emergency patients
- Same-day surgery patients
- Inpatients
- Patients unable to make alternative safekeeping arrangements
- Patients incapable of making decisions regarding their possessions

Measurable Elements of PCC.01.03

1. The hospital has determined its level of responsibility for patients' possessions. (See also FMS.04.00, ME 2)
2. Patients receive information about the hospital's responsibility for protecting personal possessions.
3. Patients' possessions are safeguarded when the hospital assumes responsibility or when the patient is unable to assume responsibility.

Standard PCC.01.04

The hospital identifies its vulnerable populations and the risks to those populations.

Intent of PCC.01.04

Identification of a hospital's vulnerable populations and their risk factors helps to develop, implement, and evaluate population-based interventions to address the health disparities for those populations. Vulnerable populations are individuals at greater risk due to disparities in physical, economic, and social health status and often have health conditions exacerbated by inadequate health care. The hospital's predetermined list includes vulnerable populations that are applicable to the hospital's scope of services, determined by evaluation of the annual risk assessment performed, and in accordance with local laws and regulations. Vulnerable populations must include identification of the applicable vulnerable subpopulations. Examples of subpopulations under the populations in the predetermined list in ME 2 include but are not limited to the following:

- Persons with disabilities or chronic illnesses
 - People living with HIV/AIDS
- Socioeconomically disadvantage (low-income, homeless, uninsured/underinsured)
 - Certain geographical communities
 - Internally displaced persons (IDPs)
 - Stateless persons
 - National minorities
 - Poor migrants, refugees, asylum-seekers
 - Prisoners
- Aged/elderly
- Children/youth
 - Child abduction ("code pink")
 - Child corporal punishment