

STATEMENT OF UNDERSTANDING

HUMAN RESOURCES – EMPLOYEE RELATIONS

LAST NAME

FIRST NAME:

Middle Initial:

Employee ID Number:

UNMC CODE OF CONDUCT:

[UNMC Policy No. 8006](#) guides UNMC faculty, staff and students in carrying out daily activities within appropriate ethical and legal standards. Professional and ethical conduct emphasizing respect and dignity must be shown in all relationships. Reporting of potential misconduct is encouraged and there is no retaliation permitted for filing complaints.

NON-DISCRIMINATION and HARASSMENT POLICY AND SEXUAL MISCONDUCT POLICY:

I have reviewed the Non-Discrimination and Harassment Policy, [UNMC Policy No. 1099](#), and the Sexual Misconduct Policy, [UNMC Policy No. 1107](#) which state that discrimination and harassment are not allowed in the workplace and that UNMC has reporting and investigation procedures for reported discrimination, harassment, and sexual misconduct”

DRUG FREE WORKPLACE:

[UNMC Policy No. 1003](#) prohibits the unlawful manufacture, distribution, dispensation, possession, or use of alcohol and/or a controlled substance on UNMC property. The term “substance” refers to drug or chemical compounds that are controlled by local, state, or federal law. UNMC complies with the Drug-Free Workplace Act of 1988, as amended.

Members of the UNMC workforce must maintain the privacy and security of all patient and proprietary information in any form, including written information, electronic information and verbal communication.

PRIVACY, CONFIDENTIALITY AND INFORMATION SECURITY AGREEMENT:

1. I will comply with [UNMC Policy 6045](#), “Privacy, Confidentiality & Security of Patient & Proprietary Information” which I have read and understand.
2. I will comply with [UNMC policy 6051](#), "Computer Use and Electronic Information Security Policy" which I have read and understand.
3. I will access, use and disclose patient and proprietary information with others on an authorized “need to know” basis only to perform assigned duties.
4. I will not discuss confidential information in the presence of individuals who do not have a “need to know”.
5. I understand that audits of information are conducted to verify information is being accessed by authorized individuals only.
6. I will immediately report suspected privacy and information security violations to my department manager, the Privacy and/or Information Security Office, the Human Resources Department, or the Compliance Hotline.

COMPUTER ACCESS (SECURITY) AGREEMENT:

During the course of work at UNMC, I may be assigned a computer identification number and instructed to develop personal passwords. To maintain confidentiality of information maintained electronically:

1. I will comply with [UNMC Policy No. 6051](#), Computer Use and Electronic Information Security, which I have read and understand.
2. My computer user IDs and passwords will be memorized and not shared with anyone, at any time, for any reason, except in the cases necessary to facilitate computer maintenance and repairs.
3. I will not leave a terminal without first closing or locking it.
4. I will immediately contact my department manager, college administrator, applicable supervisor, the Help Desk or UNMC Human Resources-Employee Relations if I discover my user ID has been revealed or suspect any unauthorized access to confidential information.
5. I understand that UNMC information must be stored only on UNMC computer network drives, approved cloud storage solution or on an encrypted local computer drive.
6. If I use a portable device containing UNMC information, the device must be both password protected and encrypted.

1. I have read, understand and will abide by the policies outlined above. I understand that not abiding by these policies may result in scholastic action or disciplinary action up to and including termination of UNMC employment/dismissal.

2. I understand that UNMC expressly reserves the right to change, phase out or discontinue any of the programs, services, rules, procedures and any other policy or affecting employees.

Signature: _____ Date: _____