

# HCCA Charlotte Regional Conference 2018

Aubree Robinson, CHPC Greg Blackburn, CHPC Meredith Gartner, RN Simone Simpkins, JD, CHPC

Making healthcare remarkable

## Novant Health – A snapshot

Who? – We are an inclusive team of purpose-driven

people inspired and united by our passion to care for each other, our patients and our communities.

The Novant Health network consists of more than 1,500 physicians and over 26,000 employees that provide care at over 500 locations, including 14 medical centers and



hundreds of outpatient facilities and physician clinics.

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## Novant Health – A snapshot

What? Novant Health is a not-for-profit, integrated healthcare system that exists to improve the health of communities, one person at a time.

Where? We serve patients and communities in Virginia, North Carolina, South Carolina and Georgia.



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Agenda	
<ul><li>HIPAA/privacy assessments and education</li></ul>	
<ul><li>Proactive monitoring</li></ul>	
<ul><li>Incidents and responses</li></ul>	
■ Q&A	
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Privacy risk assessments and education	
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HIPAA/Privacy education	
General education	
We provide general HIPAA/privacy education in a live setting to physician clinics, acute care facilities and other departments	
throughout the organization. We cover the following topics:	
<ol> <li>Safeguarding PHI – locking computer, PHI destruction, social media, transporting PHI, voice level, paper PHI, email encryption and faxing/AVS/mailing PHI.</li> </ol>	
<ol> <li>Reporting incidents – requirement to report, methods of reporting and accounting of disclosures</li> </ol>	
<ol> <li>Accessing and disclosure of PHI – unauthorized access, minimum necessary, self-access, communicating with F&amp;F</li> </ol>	
4. Department specific topics and Q&A  N: NOVANT HEALTH	
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### HIPAA/Privacy education

#### **Education initiatives**

In addition to live education sessions, we provide other ways of dispensing HIPAA/privacy education across the organization.

 Computer based learning modules (CBL) – we currently have a library of topics that can be completed in under 10 minutes.
 We also use them for quick re-education tools for leadership to use as part of progressive discipline.

Topics include: accessing PHI appropriately, safeguarding PHI, minors, LE, transporting PHI, F&F, reporting incidents and privacy rights topics.

2. <u>Annual mandatory education</u> – delivered as part of a larger CBL that covers all organizational policies and procedures.

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### HIPAA/Privacy education

#### **Education initiatives**

3. Campaign – For two years we saturated the organization with a "Pause.Prevent.Protect." campaign. This included producing videos, posters, screensavers and education kits for leadership to use each month.

Here are some of the videos we produced:

- 1. <u>Unauthorized Access</u>
- 2. Social Media
- 3. AVS/disclosing PHI
- 4. Stolen device reporting



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### HIPAA/Privacy education

#### **Education initiatives**

- 4. <u>Privacy & Cyber Security Agents</u> an on-going follow-up to the PPP campaign. We are recruiting team members to "enlist" as a PCS Agent.
  - Each month the PCS Agents get a new mission from headquarters. Each mission contains a nugget of privacy or cyber security information.
  - The PCS Agent would then report & post the mission information to co-workers.
  - In six months of this program, we are reaching around 1800 team members each month.
  - > Agents are given prizes each month via drawing.

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### Privacy risk assessments

What to expect when you are NOT expecting the privacy office.

We are assessing via observation, testing and questioning:

- 1. Privacy rights of patients NPP, forms knowledge
- 2. Appropriate disposal of PHI methods vendor shred bins, TSC, trash cans, deskside shredders
- 3. Safeguarding electronic, paper and verbal PHI
- 4. Faxing safeguards coversheet, machines
- 5. Knowledge of privacy policies and procedures LE, F&F, self-access, how to report privacy incident
- \* 100 privacy risk assessments per year across organization

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# Proactive and reactive monitoring

### HIPAA requirements

HIPAA requires that each covered entity have a program for monitoring access

to patient records (see 45 CFR 164.308(a) and 164.312(b)).

Novant Health has a proactive and a reactive process in place to review access by team members.

The Privacy Office monitors, reviews and investigates improper use and disclosure of protected health information.



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#### Proactive monitoring at Novant Health

We utilize Fair Warning application. It combines EHR user logs and HR data.

We can monitor a variety of activity by customizing and selecting alerts to monitor the following:

- Snooping Activity: Co-worker, family member, household, neighbor, VIP
- Self Access
- Minor/Elder Access
- Deceased Patient Access
- Top User and Top Patient
- Peer Trending
- · And many more!



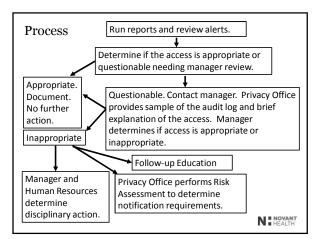
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### Proactive monitoring at Novant Health

Let's walk through an example...

- Alert received that a team member "user" who works at OBGYN Clinic A accessed information on a coworker "patient" on December 1, 2017.
- The "patient" had an encounter at OBGYN Clinic B on December 1, 2017.
- The "user" viewed the appointment desk, imaging orders, and lab orders for the "patient".

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Starting a proactive monitoring program	
4. Chaffing and any the control of	
Staff to perform the monitoring work.	
Socialize with leadership.     Educate team members.	
<ul><li>4. Start small.</li><li>Look at one geographic region or one hospital facility then</li></ul>	
expand coverage.	
5. Be mindful of other EHR Initiatives.	
Ex: rollout of new EHR	
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Benefits of proactive monitoring	
HIPAA compliant.	
Proof that Novant Health takes patient privacy seriously.	
3. "Makes me feel better knowing you all are watching my	
information."	
<ol> <li>"As much as I value the team member, I don't want someone on my team who engages in this type of activity."</li> </ol>	
<ol> <li>Self reporting when team member makes a mistake or accesses something that could be viewed as inappropriate in the course of their job.</li> </ol>	
Increase in team members reporting suspected cases of inappropriate access.	
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Incident response and management	
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# Reporting incidents

We have multiple avenues for reporting HIPAA incidents within Novant Health.

- 1. Privacy Office email
- 2. Privacy Office voicemail
- 3. Alert Line
- 4. Direct emails & calls to Privacy Office team members
- 5. e-RL event reporting module
- 6. Reporting tool for customer service

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### Investigation process

Here are some components to respond to incidents that arrive in the privacy office.

- Review of complaint/concern
- 2. Speaking with patients
- 3. Involvement of other departments
- 4. Time management and Organization



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Your Name	First & Last Name				
Your Contact Information	(###) ### - ####				
Date call was received	MM/DD/YYYY				
Caller's Name	First & Last Name				
Caller's Phone Number	(###) ### - ####				
Describe what you	Example: Two pages				
received.	stating that a patient was				
	seen at NHFMC ED for an				
140	x-ray. MM/DD/YYYY				
When did you receive the	MM/DD/YYYY				
billingstatement/letter?					
Whose name is on the	First, Middle, Last		1		
bill/letter?					
Is there a second patient	Example: The guarantor				
identifier on the bill/letter?	number is mmmmm.				
Do you know this patient?	Yes/No				
If so how?	Example: Former spouse				
<ul> <li>Was he/she a former</li> </ul>	who has since moved.				
resident at your					
address?					
Do you still have the	Yes/No	-			
documents?	,				
May I send you an	Yes/No				
envelopetoretum it? I will	123 Name Road				
need your mailing address.	City, State Zip				
If the person no longer has					
the information or does			1		
not agree to return it, ask:			1		
- What did you do with		■ ■ NOVANT	1		
the information?		NOVANT HEALTH	1		
What do you into ad to					
	-		_		

### Incident response

For confirmed incidents, specific steps are taken to complete the investigation.

- 1. Disciplinary action by HR
- 2. Risk assessment
- 3. Notification when necessary
- 4. Education for team members

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# The Novant Health Privacy Office

Our email: privacyoffice@novanthealth.org

When emailing questions or comments, please include "HCCA" in subject line so we'll know it is related to this conference.

# **Questions?**

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