

Vol. 13 No. 3, June 2019

# Compliance



## CAPSULES

### NURSE AIDE SITTERS ~ WELCOME!!

It was recently announced that eighty-four (84) Nurse Aide Sitter positions have been approved for NHRMC, with hiring and recruitment ongoing to fill these positions. This is great news for our patients and the organization!

In anticipation of new Nurse Aide Sitters and our desire to retain existing Nurse Aide Sitters, the Corporate Compliance/Privacy Department would like to take this opportunity to reiterate our **responsibilities to the privacy of our patients**. It is our goal to help educate and arm you with the knowledge you need to make the right decisions that respect our patients' **Right to Privacy**. The position of Nurse Aide Sitter comes with huge responsibilities. As with all positions, it is your responsibility to know established policies and procedures of the hospital, including HIPAA.

#### NURSE AID SITTERS' BASIC TASKS:

- When assigned as a one-on-one Sitter to a patient, you are an important component of the continuum of care, to ensure the safety of each patient is maintained and protect the well-being of patients at-risk for injury.
- Under the direction of the designated supervisor, the Sitter performs specific tasks to assist in department safety and function.
- The observation and care activities are individualized for each patient at the direction of the medical staff and will require performance of basic activities within the scope of NA I, to meet the daily needs and comfort of the assigned patient.
- While working as a Sitter, you are assigned one patient at a time and must maintain uninterrupted line of sight with this patient.

### NURSE AIDE SITTERS ~ WELCOME!! (CONTINUED)

#### PRIVACY BASICS REVIEW

☹️ **DO NOT** access the medical records of anyone not under your direct care; think of how you would want your information handled if you were the patient.

😊 **DO** remember to tap out or log out every time you leave a workstation. You are responsible for any activity performed under your login.

☹️ **DO NOT** disclose PHI to anyone without a business-related reason. This includes co-workers not assigned to the patient and patient family members who are not authorized to receive the information.

😊 **DO** use your medical record access appropriately. It is a privilege to be part of this organization and to care for our community.

☹️ **DO NOT** become a statistic on page 2 of this newsletter!

Corporate Compliance conducts ongoing privacy monitoring as well as investigating all direct reports and complaints. Disciplinary actions for HIPAA violations include:

- ✓ Written Warning
- ✓ Final Written Warning
- ✓ Termination

**The decision is yours to make!! Always respect our patients' privacy. This is a choice completely under your control!!!**

We want each employee to enjoy long and productive careers at NHRMC, so please choose **WISELY** and always be respectful of our patients' privacy.

You are performing an important duty in this organization. Each patient assigned to you requires your undivided attention and you should NEVER access information on other patients while working, nor should you access more information in your patient's record than is necessary to perform your job duties.

### VENDOR RELATIONS POLICY CHANGE

Corporate Compliance promotes our commitment to do the right thing and conduct all business activities legally and ethically. We ensure program requirements for applicable laws are implemented, including interpretation of those laws.

During recent years, several questions have been raised regarding vendor relations and what employees are permitted to receive from vendors. The Vendor Relations & Fundraising Policy defines appropriate vendor relations and what is permissible for NHRMC & PMH employees to accept in the form of a gift or favor.

**Effective March 2019, our policy has been updated to more clearly define the value of meals and/or beverages that are acceptable by vendors when certain other criteria are met.**

Employees may accept unsolicited meals and/or beverages served during documented educational sessions, including seminars, conferences, and grand rounds presentations. Acceptable meals will:

1. Be unsolicited and non-routine; and
2. Be held at a reasonable location (but never in patient care areas); and
3. If off-site, participation occurs on the employee's personal time; and
4. Be of reasonable value and value of meal (including beverage) is not excessive (i.e. cost of meals must comply with Standard Meal Allowances defined in NHRMC's Travel/Education/Business Expense Policy); and

Breakfast	\$10.00	(7:00 a.m.)
Lunch	\$15.00	(11:00 a.m.)
Dinner	\$25.00	(7:00 p.m.)

5. Accompany bona fide educational content and be documented (i.e. CEUs are provided or program is otherwise approved by Corporate Compliance); and

Corporate Compliance Hotline:  
1.800.348.9847 or  
[www.MyComplianceReport.com](http://www.MyComplianceReport.com)  
Access ID: "NHR"



## VENDOR RELATIONS POLICY CHANGE (CONTINUED)

6. *Be in compliance with the Pharmaceutical Representative Policy and Procedure.*

Any meals provided by vendors as part of an educational session should be modest and the amount of time allotted for meals or receptions should be clearly subordinate to the amount of time spent at the educational activities of the program.

The coordinator of the event from each department, is expected to collect receipt of meals/beverages from the vendor and provide a copy to Corporate Compliance. Please see the full "Vendor Relations & Fundraising Policy" located in PolicyStat for additional information.

## LEAVING HIPAA COMPLIANT MESSAGES

A question often received from physician's offices and hospital departments, is "whether it is okay to leave messages for patients at their homes on an answering machine or with a family member, to remind them of appointments?" The answer is **Yes**.

## LEAVING HIPAA COMPLIANT MESSAGES (CONTINUED)

The key to compliantly handling these situations is: **limit the amount of information disclosed, to reasonably safeguard the individual's privacy.**

The HIPAA Privacy Rule permits health care providers to communicate with patients, including leaving messages on their answering machines or leaving a message with a family member or other persons who answer the phone when the patient is not home. Unless you have obtained specific instructions or consent from the patient, it would be best to leave only the caller's name and number, the organization's name you are calling from and have the PATIENT call back to confirm an appointment.

**Also, if your office or department name could reveal sensitive information, (i.e. HIV Clinic), use a general location instead, i.e. Mr./Ms. doctor's office or NHRMC.**

## STATE POISON CONTROL CENTER COMMUNICATIONS

**Poison control centers** are health care providers for purposes of the HIPAA rule. The OCR considers the counseling and follow-up consultations provided by poison control centers with individual providers, regarding patient outcomes, to be treatment.

## STATE POISON CONTROL CENTER COMMUNICATIONS (CONTINUED)

Therefore, poison control centers and other health care providers can share protected health information about the treatment of an individual.

### PROCEDURE: How to Handle a Call from The State Poison Control Center

**FIRST:** The clinician who speaks with the center, should **confirm** who the individual is by taking the name of the caller, hanging up, then calling the State Poison Control Center back at **Ph. 1.800.222.1222** and ask for the individual who initially called.

**SECOND: Document** your conversation with the Poison Control Center in the patient's medical record.

### HIPAA STATS, April – May, 2019

	Violations	Inadvertent Breaches
NHRMC & PMH/HC	<b>8</b>	<b>8</b>
NHRMC PG	<b>3</b>	<b>6</b>
Business Partners	<b>0</b>	<b>0</b>

HIPAA violations are addressed according to the HR Policy, "Progressive Discipline."

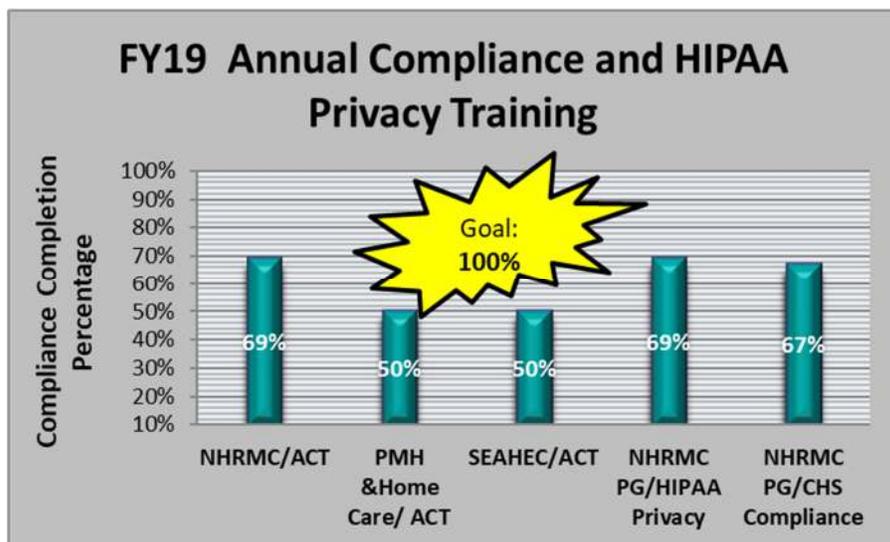


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# CAPSULES

## ANNUAL COMPLIANCE & PRIVACY EDUCATION FY 2019

FY 2019 mandatory computer-based learning modules are due for completion **by August 1, 2019**. FY19 completion rates for compliance and privacy modules are reported to the Compliance Committee and the Board.



## COMPLIANCE QUIZ FOR MOVIE TICKETS

**Email Your Responses to Stephanie Snyder by July 31, 2019**

- \_\_\_\_\_ access the medical records of anyone not under your direct care.
- Do not disclose PHI to anyone without a \_\_\_\_\_.
- The Standard Meal Allowances, provided by vendors for lunch and dinner are \_\_\_\_ & \_\_\_\_\_.
- One of the 6 criteria required for vendor provided meals is: it must accompany bona fide \_\_\_\_\_ & be documented (i.e. CEUs or approved by Corporate Compliance).
- \_\_\_\_\_ are health care providers for purposes of the HIPAA rule.

**Congratulations to Terry Adams, winner of movie tickets for March 2019 newsletter!**