

Hartman's
In-Service Education SourceBook Series



Understanding Your Responsibilities: Confidential and Private

Jill Holmes Long, RN, MA



HARTMAN PUBLISHING SOURCEBOOK

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Confidential and Private

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HARTMAN PUBLISHING INC.

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Notice to the Reader

Though the guidelines and procedures contained in this text are based on consultations with healthcare professionals, they should not be considered absolute recommendations. The instructor and readers should follow employer, local, state, and federal guidelines concerning healthcare practices. These guidelines change, and it is the reader's responsibility to be aware of these changes and of the policies and procedures of her or his health-care facility.

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FYI

In 1996 Congress passed Public Law #104-191 of the United States, known as The Health Insurance Portability and Accountability Act, and referred to as HIPAA. The goal of this SourceBook is to familiarize healthcare practitioners with the HIPAA mandates that affect bedside care and information sharing within any setting. The concepts that form the backbone of privacy and confidentiality are introduced so that the healthcare provider can be both proactive in protecting the privacy rights of the resident/client and, be competent in practicing confidentiality.

The key concept of privacy is this: each individual has a vested interest in his/her own personal information. Being able to choose **if** one will share information, **what** information to share, with **whom** to share this information with is the heart of privacy. Confidentiality is at the core of a positive relationship between healthcare providers and their clients.

Residents or clients who feel that their personal information might become public are apt to hedge their answers regarding personal history and health behaviors. In turn, fuzzy answers from a resident/client may blur the ability of a healthcare provider to offer the best practices available for the situation. However, when we secure from the resident/client an accurate history, in addition to a truthful account of current social behaviors including tobacco use, alcohol intake, drug use, and sexual behaviors, we attain the information which enables the best set of health management choices for our resident/client.

Since the correct diagnosis, together with an appropriate treatment and care plan, is based on the information shared by the resident/client, establishing a relationship of trust is essential to the delivery of good health care.

HIPAA Overview

HIPAA is divided into five sections or Titles. Each Title defines the standards to which all covered persons and organizations are to comply and, the sanctions possible for non-compliance. Currently, Title I deals with health care insurance portability or, the ability to carry health care coverage from one job to another is fully implemented.

Title II deals with fraud, administration, security and privacy issues became effective in 2001 with full implementation scheduled for 2003.

Titles III, IV, and V have not been written yet.

This landmark legislation guarantees that:

- Health information may be used and shared easily for the treatment and payment of health care
- Prohibits all covered persons and organizations from using/disclosing health information except as authorized by the patient
- Mandates disclosure of information to the subject individual upon request and for enforcing the rule
- Allows disclosure without an individual's authorization for national priority purposes, i.e. research, public health and oversight

- Creates a set of fair information practices including
- Adapting standard codes for information exchange (think of the Dewey decimal system used in libraries)
 - Authorization/consent/notice parameters
 - Ensuring access to information for the individual or legal representative
 - Security guidelines to protect the confidentiality of health information
- Limits the information shared/released to the minimum possible
- Permits disclosure of de-identified information
- Sanctions enforcement of both civil and criminal penalties
- Creates administrative requirements including the following:
 - Documentation of policies complying with HIPAA
 - Designation of a privacy official within the organization
 - Privacy training of all staff
 - Implementation of safeguards
 - A complaint mechanism and records system
 - A system of sanctions

HIPAA's administration simplification includes a set of standards that covers all individually identifiable health information created or maintained by health care providers, health plans and health care clearinghouses. The privacy rule was written specifically to address the transmission of individually identifiable health information via electronic means. However, the standards protect any identifiable information itself no matter what form the information is kept or transmitted in i.e., paper documents, on computer hard drive, storage disk. Protection of this information extends to two years beyond the death of the client/patient.

The Department of Health and Human Services has charged the Office of Civil Rights to implement and enforce the privacy regulation. The scope of HIPAA is vast. Administrative compliance requirements are exacting. References listed in the back of this SourceBook can assist you with your agency's need to comply.

Please note that limited permission is granted to photocopy the handouts for use only at the site originally purchasing this in-service.

Photocopying other parts of this in-service, including the lesson plan, is expressly prohibited.

To use the handouts, photocopy the number needed for your group. Consider using different colors of paper to organize the different handouts or to make some stand out.

Convert transparency masters to acetates for use with an overhead projector. You can do this by purchasing transparency film at an office supply store and photocopying the transparency masters onto the acetates, or you can have a copy company do it for you. If overhead projection is not convenient for your presentation area, you may wish to copy the information from the transparency masters onto a chalkboard or flip chart.

We hope you find this in-service helpful. And, as always, we welcome your comments and suggestions.

Happy Teaching!

LESSON PLAN

Introduction and Assessment

ESTIMATED TIME:

15–20 minutes

TOOLS:

Handout: Assessment A – “How Much Risk?”

Handout: Note-Taking Worksheet

Handout: Key Terms

LEARNING ACTIVITY:

Discussion

*Distribute Handout:
Assessment A*

Allow participants enough time to finish the assessment. Go over the assessment topics. Initiate a discussion among the class by asking for a volunteer from the class to explain why they choose to label any item with an L, M, H or X. Then, ask the class for a reaction to the explanation. Repeat the explanation and response steps for several of the items. It is not necessary to go over each item as long as the class discussion covers explanations and responses for each of the categories.

*Distribute Handout:
Note-Taking Worksheet*

Tell participants to take notes on the worksheet during all the lectures and discussion. This will help them learn and retain the information and provide them with a review of the information in the future.

*Distribute Handout:
Key Terms*

Tell participants to keep this handout and read it over. The key terms handout covers all terms in the learning objectives.

INTRODUCTION AND ASSESSMENT

Assessment A – How Much Risk?

Name:

Date:

This exercise is designed to increase your awareness of the range of information and issues in our daily lives that we might or might not share with other people. You are **not** required to actually tell anything about yourself in this exercise. For the purpose of this exercise, assume all the statements are or could be true about you.

Directions. Label each of the ideas below with an:

- | | |
|--|--|
| L: indicating LOW RISK or, you would tell/share this information with anyone | H: meaning HIGH RISK or, you would tell/share this information with only a very few select people or, |
| M: meaning MODERATE RISK or, you would tell/share this information only with your friends | X: meaning you would NOT tell/share this information with anyone |

1. how much money is in your bank account _____
2. your favorite and least favorite TV shows _____
3. how you feel about the death penalty _____
4. your religious affiliation and amount you participate _____
5. you always ask for refills on prescriptions _____
6. whether you've experienced domestic violence _____
7. your dream retirement _____
8. you've caused bruising on a patient in your care _____
9. your arrest record _____
10. what you like most about your body and why _____
11. whether you've been unfaithful to your significant other _____
12. the number of parking tickets you've gotten _____
13. you've put a baby up for adoption _____

(over)

14. the amount of beer, wine, or alcohol you drink daily _____
15. the best vacation you've had _____
16. whether and how often you have been tested for HIV _____
17. you have trouble reading _____
18. where and when you shop for your groceries _____
19. your child has been arrested _____
20. a detailed description of the last time you had sex _____
21. the story of how you met your spouse/mate/partner _____

INTRODUCTION AND ASSESSMENT

Note-Taking Worksheet

List five concepts of confidentiality.

1.
2.
3.
4.
5.

List one major personal right.

.....

List four types of abuse and neglect.

1.
2.
3.
4.

List three rights of society.

1.
2.
3.

List six positive points about electronic technology and health care.

1.
2.
3.
4.
5.
6.

What are the two types of security issues related to electronic information?

.....

10

List three types of electronic media.

1.
2.
3.

List eight HIPAA guidelines for verbal information.

1.
2.
3.
4.
5.
6.
7.
8.

List four HIPAA guidelines for hard copy information.

1.
2.
3.
4.

List four HIPAA guidelines for computer information.

1.
2.
3.
4.

Identify four types of information that are Protected Individually Identifiable Health Information for each of the following:

- Resident/Client Demographic Data
-
-
-