



Scarborough Fire Department Scarborough, Maine



Standard Operating Guidelines

Book:	Organization
Chapter:	Personnel, Policies and Procedures
Subject:	1361 - HIPAA Privacy Guidelines
Revision Date:	8/4/2006
Approved by:	<i>B. Michael Thurlow</i>

PURPOSE

To outline general guidelines for Scarborough Fire Department staff on how to deal with any health information about patients we come in contact with as a result of an EMS call.

Given the nature of our work, it is imperative that we maintain the confidence of patient information that we receive in the course of our work. Scarborough Fire Department prohibits the release of any patient information to anyone outside the organization unless required for purposes of treatment, payment, or health care operations. Discussions of Protected Health Information (PHI) within the organization should be limited. Acceptable uses of PHI within the organization include, but are not limited to; the exchange of patient information needed for the treatment of the patient, billing, peer review, internal audits, quality assurance activities, certain legal requirements and other essential health care operations.

POLICY

- A. The release of any and all written Protected Health Information (PHI) will be handled by the department's privacy officer (or designee) with the exception of normal day to day operations including treatment of patients, dispatching emergency calls, billing, data entry, or sending PHI from station to station for filing and reporting purposes.
- B. No employee will remove written PHI (run reports, services rendered sheets, etc.) from the work environment. No run reports shall be taken home to complete, they must be done before leaving the station or remain in a secured location in the station.
- C. This policy is in addition to other department policies such as but not limited to, the privacy training policy, patient access policy, and amendment and restriction of their PHI policy.
- D. The Privacy Officer and his designee, will be the only employees who will have a role in disseminating oral PHI for uses other than: operations, treatment, billing, Q.I., data entry and that required by law.
- E. No PHI will be faxed or e-mailed to another party unless approved by privacy officer.

SCOPE

This policy applies to any and all issues involving Protected Health Information generated by the functions of the Scarborough Fire Department when dealing with patients as a result of an EMS call.

PROCEDURE

- A. Each employee will take appropriate measures to avoid written PHI from being accidentally viewed by the general public, and employees who are not involved in the particular incident, and who have no need to access PHI. (This can be accomplished simply by turning run sheets upside down in the units, on desks or on “back-to-back” calls, place them inside the storage area of the EMS report clip board, etc.)
- B. Oral PHI from conversations will include only the necessary parties involved with that patient’s care and be stated in a voice level that minimizes non-essential persons from overhearing the conversation.
- C. Cell phone use will be encouraged whenever specific identifiable patient information may need to be relayed in lieu of using the radio.
- D. Each employee who has access to PHI through the department’s electronic CAD/records management system must assure measures are taken to avoid the accidental viewing of PHI. (i.e., screen savers with password protection; turn run reports upside down when not in use, etc.)
- E. Run sheets, Services Rendered Forms and other written PHI that needs transporting from station to station, will be done so in a labeled “inter-office” type envelope labeled “completed run reports” and marked “confidential”.
- F. Each EMS call resulting in patient contact, will require a copy of the Department’s Notice of Privacy Practices (NPP) to be either handed to the patient and signed for at the time of the call or a circling of the “YES” at the bottom of the Billing Authorization Form and an explanation stating why the NPP needs to be mailed.

DEFINITIONS

- A. PHI - Protected Health Information. May be written, electronic or oral.
- B. Written PHI may include but is not limited to: Run Reports, Services Rendered Sheets, EKG strips, hospital/nursing care notes and billing information, photographs, or any other forms that contain PHI
- C. DRS - Designated Report Sets including any written PHI as in above
- D. Oral PHI may include conversations or radio traffic
- E. Electronic PHI refers to any computer generated PHI
- F. HIPAA - Health Insurance Portability and Accountability Act
- G. Privacy Officer - The person responsible for oversee all aspects of HIPAA
- H. NPP - Notice of Privacy Practices

RESPONSIBILITIES

It is the responsibility of all Scarborough Fire Department employees to comply with the rules and regulations of this policy and HIPAA.

REFERENCES

US Department of Health and Human Services, “HIPAA rules and regulations – Privacy Act” – Part V, 45 CFR, parts 160 and 164, Standards for Privacy of Individually Identifiable Health Information: Final Rule.