Duty to Report Suspected Incidents, Duty to Cooperate with Investigation and Duty to Mitigate Harm

APPLICABILITY:

This policy applies to the following entities (collectively referred to as "UNC Health Care System" or "UNCHCS" in this policy):

- UNC Health Care System/UNC Medical Center*
- UNC Physicians Network
- UNC Physicians Network Group Practices
- Rex Healthcare / Rex Hospital
- Chatham Hospital
- Caldwell Memorial Hospital
- UNC Rockingham Health Care / UNC Rockingham Hospital
- Johnston Health
- Lenoir Memorial Hospital
- Margaret R. Pardee Memorial Hospital
- Nash Healthcare System / Nash Hospitals
- Wayne UNC Health Care

*UNC Medical Center includes all UNC Hospitals' facilities and the clinical patient care programs of the School of Medicine UNC-Chapel Hill (including UNC faculty physicians).

I. Description

UNCHCS shall make best efforts to mitigate any known harmful effects caused by the unauthorized use or disclosure of PHI, security incidents involving PHI, or any violation of HIPAA, the HIPAA Policies and Procedures, or other applicable state or federal laws governing information privacy or security, regardless of whether the privacy breach was caused by a member of its workforce, a contractor, a business associate, or other individual or entity. In an incident investigation conducted by UNCHCS it may be critical for the UNCHCS Privacy Office, or the UNCHCS Facility Privacy Officer to act quickly in order to avoid or mitigate any potential harm to patients. As a result, all members of the UNCHCS workforce who have knowledge relating to a suspected incident must fully cooperate in an investigation being conducted by the UNCHCS Privacy Office or
UNCHCS Managed Member Facility Privacy Office.

Included within the scope of this policy are the patient care programs of the UNC School of Medicine (UNC SOM). As a result, this policy shall apply to all UNC SOM personnel, including but not limited to faculty, staff, students, trainees, interns and volunteers who may be full-time, part-time, paid or unpaid who create, store, transmit, access or use any patient information in support of clinical purposes for UNCHCS or any other healthcare entity.

II. Policy

A. Duty of UNCHCS Workforce to Notify UNCHCS Privacy Office of a Privacy Incident. A member of the UNCHCS workforce (including workforce members of any UNCHCS Member) who commits a violation of UNCHCS Privacy Policy or becomes aware of a violation of UNCHCS Privacy Policy committed by another individual, (including another member of the workforce or a contractor or business associate) is required to immediately notify the UNCHCS Privacy Office or the UNCHCS Facility Privacy Office of the respective UNCHCS Facility where the workforce member is employed or located.

1. Notification may be by:
   a. UNCHCS Hotline (with an anonymous option for submission)
      ▪ http://hotline.unchealthcare.org/
      ▪ (1-800-362-2921)
   b. Notification directly to the appropriate privacy office as follows:
      ▪ The UNCHS Privacy Office main telephone number: (984) 974-1069
      ▪ Henderson County Hospital (Pardee) Privacy Officer: (828) 696-4251
      ▪ Johnston Health Privacy Officer: (919) 938-7121
      ▪ Nash Health Care System Privacy Officer: (252) 962-8130
      ▪ Lenoir Memorial Hospital Privacy Officer: (252) 522-7946
      ▪ Wayne Memorial Hospital Privacy Officer: (919) 731-6462

B. Duty of UNCHCS Workforce to Make Themselves Available for Investigation Interviews by UNCHCS Privacy Officials. Members of the UNCHCS workforce who have knowledge of a suspected privacy incident involving the PHI of any UNCHCS patient(s) or research subjects must take all reasonable actions to make themselves available for interview by the UNCHS Privacy Office (or facility privacy officer of the UNCHCS Member Facility where the individual works) at such times and locations as requested by the UNCHCS Privacy Office.

III. Definitions

Workforce – means employees, including temporary agency or contract employees, health care professionals, including faculty, medical students and interns, volunteers, trainees, and other persons whose conduct, in the performance of work for UNCHCS is under the direct control of UNCHCS, whether or not they are paid by UNCHCS.

IV. References

45 C.F.R. §§ 164.308(a)(6)(ii), 164.530(f)
V. Related Policies/Forms

Sanctions for Violations of Privacy Policies

Attachments: No Attachments

Approval Signatures

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<th>Step Description</th>
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<td>Jerylyn Williams: VP Chief Audit &amp; Comp Officer</td>
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<td>SYSTEM Site Administrator</td>
<td>Emilie Hendee: HCS-Sr Attorney</td>
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<td>David Behinfar: HCS-Privacy Dir</td>
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Applicability

Caldwell Memorial Hospital, Chatham Hospital, Johnston Health, Nash Health Care, UNC Health Care System, UNC Lenoir Health Care, UNC Medical Center, UNC Physicians Network, UNC Rex Healthcare, UNC Rockingham Health Care, Wayne Memorial Hospital