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Background

- Patient privacy is the foundation of healthcare
- Health Insurance Portability and Accountability Act (HIPAA) focuses on who can receive sensitive patient information and who cannot
- HIPAA affects and healthcare staff, especially nurses, who try to secure patient information
- Some patients are unable to provide consent on who can obtain information about their healthcare
- The line of communication can often become difficult to navigate for nursing staff especially when it comes to telecommunications
- With phone calls, it is next to impossible to ensure that the person on the other end of the phone is the person they say they are. This leaves nurses vulnerable to breaching HIPAA confidentiality. The need to increase security and protect both the nurses and patients is evident

Practice Change

Implementation of confidentiality card containing specific patient password to increase security of patient information being shared by RN over the phone

CC: Confidentiality Example Card



This Call Confidentiality card is designed to treamline phone calls between family of our patients and healthcare staff. As a family member, you will need this password to receive any information about your loved

Patient Name: Room Number:

> Northern Light Eastern Maine Medical Center 489 State Street Bangor, ME 04401 (207) 973-7000

- 2. Create:

- care.
- Patient privacy

- Ethics

Providing Patient Information and Maintaining Patient Privacy: A Project to Improve Telecommunication Confidentiality Between Nurses and Patient Families

Methods

(anticipated pre-survey: n=50) 1. Phase I - Pre Call Confidentiality Card-**Observational Survey in ICU**

a. Informational/educational materials on benefits of CC card and increased security of patient information in regards to telecommunication. b. CC Card; this CC Card will be placed in the patient's chart and presenting one to the patient and family. This card will be filled out by the patient or POA with a password to use when requesting medical information. Staff, including RNs, CNAs, and Unit secretaries, will be able to easily access the password without being part of a patient's direct

c. Conduct an observational survey in ICU/CCU to evaluate the effectiveness of CC card distribution among patients and families and the response to increased confidentiality -- Phase II.

Benefits

• Streamlined process of relaying information to their family members • Better security for the healthcare worker in regard to telecommunications and added protection against HIPAA violations • Upholding ANA standards and Code of

Sample Survey

Pre-survey

- 1. With the current policy, do you feel like you are protecting yourself and the patient's privacy when speaking to family members on the phone?
- 2. Do you think an easy form of next of kin identification, and associated policy, would be beneficial to you?
- 3. Do you think a patient would feel their health information is more secure with a standard telecommunications policy in place?
- 4. What do you think would be an ideal place for this next of kin information to be stored would be?

Post-survey

- 1. Did the communication cards give you an efficient way to access next of kin information, was the location of the cards convenient?
- 2. Were the patients receptive to the cards and having limited family members able to call the unit for information?
- 3. Was it easy to access and complete the cards?
- 4. How was the process of passing on the cards and associated information when the patient was transferred?





Summary/Discussion



- This project is designed to benefit both the patient and nursing staff as it will define clear expectations for telecommunications and the sharing of protected patient information
- This project will support HIPPA and the protection of patient information as it is shared over the phone to patient's caregivers
- This project will also protect nursing staff from sharing protected information with persons who may not be eligible to receive information about a patient

Confidentiality & Risks

- The anonymous survey and anecdotal notes will be transferred to electronic data and will be kept indefinitely.
- All paper data collected is anonymous and no information will link the collected data from EBP participants.
- Once the data on paper is transferred to electronic data, the data on paper will be destroyed. This electronic data will be secured on the NLEMMC server.

References

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