

**HIPAA (Medical Records)**

Organizations that house and/or utilize electronic Protected Health Information (ePHI) are required by the HIPAA Security Rule (45 CFR 164.316) to have sanctions in place if security policies and procedures are not followed.

Students enrolled at the college have the responsibility to protect ePHI from unauthorized access, disclosure, or security breaches. Failure to do so could result in potential harm to patients and/or Crouse Hospital.

Students enrolled at the College shall keep in confidence all materials related to the patient(s) that have been assigned to their care as designated by the clinical faculty.

Students, while preparing for, during, and following any clinical experience at the College may gather information related to assigned patient(s). The student shall not make public any information obtained either from the individual patient or their medical record.

No part of the medical record, including printed copies of the medical record or computer generated copies, shall be removed from the nursing units. No part of the medical record is to be printed at PCON.

The purpose of this policy is to indicate the proper sanctions if a student fails to comply with PCON ePHI security policies and procedures. If a violation does occur, students will be subject to the sanctions listed in this handbook. Students who access patient data for clinical purposes have the responsibility to understand what is required of them to protect patient data.

When a violation has been discovered or reported, an investigation will be conducted by members of the PCON Faculty and Leadership teams to determine if a violation has occurred and if so, the severity of the violation as well as those involved. All investigations will be documented and stored for record-keeping purposes.

**PCON reserves the right to implement any and all appropriate sanctions necessary after determining the level and severity of the violation through the investigation process.** PCON also reserves the right to review each violation and determine whether the student will be subject to a Police/FBI investigation as well possible fines/jail, dependent upon the investigation.

In the event it is discovered that any student violates confidentiality, the faculty member discovering the breach shall follow the following procedure.

**Reporting**

PCON students have the responsibility to report any known violation of ePHI. Failure to report a known ePHI violation may result in disciplinary action as unreported violations could have severe consequences to both the affected patient(s) and Crouse Hospital. Remember, reporting a violation on a fellow student can be made anonymously and your anonymity will be protected

**Violations**

There are three different levels of violations from minor to severe. Since not all violations are equal, different sanctions may be chosen depending on the severity of the violation as well the context of the violation itself.

### **Level 1 – Accidental or Inadvertent**

A student accidentally or inadvertently accessed ePHI that was not authorized or puts a patient's security at risk in an accidental manner. Examples include, but are not limited to:

1. A printed portion of the medical record is removed from the nursing unit
2. A computer-generated part of the medical record is printed at PCON
3. Leaving an unsecured workstation unattended
4. Accessing the wrong Electronic Medical Record (EMR) file
5. Connecting an unauthorized device to the Crouse Hospital network to obtain ePHI for student experience including theory, lab and/or clinical.
6. Uploading any identifiable ePHI to Moodle.

### **Level 2 – Intentional**

A student intentionally accesses and/or discloses ePHI without the appropriate authorization. The student was aware they were accessing unauthorized patient information. Examples include, but are not limited to:

1. Accessing your own patient file
2. Intentional, unauthorized access to family, friends, co-workers, public personality's, or other individual's ePHI files
3. Sending ePHI information via phone, email or fax
4. Intentionally assisting or allowing another individual to gain unauthorized access to ePHI. This includes, but is not limited to:
  - A. Giving another individual your unique username/password to access patient data
  - B. Logging into an EMR system under your unique username/password and allowing another individual to access ePHI

### **Level 3 – Deliberate with Intent to Harm**

A student deliberately accesses and/or discloses ePHI without the required authorization with intent to cause physical, emotional, or financial harm to another person or the company. Examples include, but are not limited to:

1. Accessing ePHI for a lawsuit, marital dispute, custody dispute, etc.
2. Accessing ePHI for intimidation or other discriminatory uses that could bring personal/financial harm to a patient/co-worker
3. Any attempt to maliciously gain access to Crouse Hospital Network resources for personal/financial gain, harm to a patient/co-worker, or financial/reputational damage to Crouse Hospital
4. Taking patient information for your own business or to give to a competitor

**Consequences:** Any violation will result in a documentation of the student misconduct.

**Level 1 Violation**

If it is determined that a student is responsible for a Level 1 violation, the student will be subject to the following:

First Event: The faculty member discovering the breach will complete a student misconduct form, counsel/educate the student, and Administrative Council will review and document the detail of the event in the student file via Sonis.

Second Event: The faculty member discovering the breach shall notify the Lead Faculty and complete a student misconduct form. The misconduct form will be brought to Administrative Council; student will receive a verbal warning with any further disciplinary action decided by Administrative Council.

Third Event: The faculty member discovering the breach shall notify the Lead Faculty and complete a student misconduct form. The misconduct form will be brought to Administrative Council; student will receive a written warning with any further disciplinary action decided by Administrative Council.

Fourth Event: The faculty member discovering the breach shall notify the Lead Faculty and complete a student misconduct form. The misconduct form will be brought to Administrative Council; the student will receive suspension vs. administrative dismissal at the discretion of the PCON Dean. Any incidents beyond four, will result in administrative dismissal from PCON at the discretion of the Dean of PCON.

**Level 2 Violation**

If it is determined that a student is responsible for a Level 2 violation, the student will be subject to the following:

First Event: The faculty member discovering the breach shall notify the Lead Faculty and complete a student misconduct form. The misconduct form will be brought to Administrative Council; student will receive a written warning with any further disciplinary action decided by Administrative Council.

Second Event: The faculty member discovering the breach shall notify the Lead Faculty and complete a student misconduct form. The misconduct form will be brought to Administrative Council; student will receive a suspension at the discretion of the Dean of PCON.

Third Event: The faculty member discovering the breach shall notify the Lead Faculty and complete a student misconduct form. The misconduct form will be brought to Administrative Council; student will receive a notice of immediate dismissal from the PCON at the discretion of the Dean of PCON.

**Level 3 Violation**

If it is determined that an employee is responsible for a Level 3 violation, the employee will be subject to the following:

First Event: The faculty member discovering the breach shall immediately notify the Dean of Pomeroy College of Nursing and/or designee. At the discretion of the Dean, the student will be administratively dismissed from the program. Depending on the severity of the violation, the student may also be subject to the following:

- 1) Possible Investigation by the Police and/or FBI.
- 2) Possible Fines and/or Jail for the student.