



		(X1) PROVIDER/SUPPLIER/CLIA ;DENTIFICATION NUMBER. 050228			(X3) DATE SUI COMPLET		
	ROVIDER OR SUPPLIER cisco General Hospital		S, CITY, STATE, ZIP C ve, San Francisco	ODE 5, CA 94110-3618 SAN FR	ANCISCO COUNTY		
(X4) ID PREFIX TAG	(EACH DEFICIENC	ATEMENT OF DEFICIENCIES Y MUST BE PRECEEDED BY FULL LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF (EACH CORRECTIVE ACTION REFERENCED TO THE APPRO	SHOULD BE CROSS-	(X5) COMPLETE DATE	
	of Public Health during visit: Complaint Intake Num CA00325831 - Substate Representing the Dep Surveyor ID # 25732, The inspection was line event investigated and findings of a full inspection of the complete representation of the consistent of the consistent whose meditor without author disclosed, and up hundred dollars occurrence of unlause, or disclosure information.	artment of Public Health: HFEN hited to the specific facility does not represent the ction of the facility. Code Section 1280.15(a) A y, home health agency, or rsuant to Section 1204, 1250, thall prevent unlawful or to, and use or disclosure of,	Ø1,	200 10/13/14			
Event ID:0	J8011	9/25/2014	3:14:37	PM			
LABORATO		GERISUPPLIER REPRESENTATIVE'S SIGN		TITLE (E7)	(X6) DATE	10/14	

By signing this document, I am acknowledging receipt of the entire citation packet. Page(s), 1 thru 5

Any deficiency statement ending with an asterisk (*) denotes a deficiency which the institution may be excused from correcting providing it is determined that other safeguards provide sufficient protection to the patients. Except for nursing homes, the findings above are disclosable 90 days following the date of survey whether or not a plan of correction is provided. For nursing homes, the above findings and plans of correction are disclosable 14 days following the date these documents are made available to the facility. If deficiencies are cited, an approved plan of correction is requisite to continued program participation

	MENT OF DEFICIENCIES (X1) PROVIDER/SUPPLIER/CLIA (X2) MULTIPLE CONSTRUCTION (X3) DATE COMP. A BUILDING 5 VYING 1				
	OVIDER OR SUPPLIER isco General Hospital		PRESS, CHY, STATE,	ZIP CODE cisco, CA 94110-3518 SAN FRANCISCO COUNTY	
(X4) ID PREFIX TAG	EACH DEFICIENCY	TEMENT OF DEFICIENCIES MUST BE PRECEEDED BY FULL SCIDENTIFYING INFORMATION)	IC PREFIX TAG	#RÓVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS- REFERÊNCED 10 THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
	statutes and regulat facility detected vio action to immediate violations from recu control that restricted with this section. T discretion to conside	ther related state and federions, the extent to which to lations and took preventatively correct and prevent parring, and factors outside the facility's ability to complete department shall have for all factors when deterministrative penalty pursuant 70751(b) Medical Reco	he ve ast its oly ull ng to	T22 DIV5 CH1 ART7-70751(b) Medical Record Availability	
	property of the hosp benefit of the paties hospital. The hos	cord against loss, defacement authorized persons.	he he he	Action(s): Before and after this 2012 privacy breach incident, hospital leadership has engaged in ongoing efforts via memos, emails, staff trainings, and employee annual update training to ensure that hospital staff are educated and knowledgeable about hospital and SFDPH privacy and security policies.	Ongoing
	failed to maintain Patient 1's medical 2(HW-2) inappropriate Care Record (LCR) she could obtain the purpose of serving s child custody case	and record review, the faciliprivacy and confidentiality record when Health Workely accessed the patient's Lelectronic medical record address of Patient 1 for the come kind of court papers in the This breach of medical an intentional and malicious	of eer ife so he a	The SFGH multidisciplinary <i>Privacy Committee</i> , composed of the SFGH Privacy Officer and staff from the SFGH Privacy Office, the SFGH Chief Medical Officer, the SFGH Chief Communications Officer, representatives from the SFGH Legal Affairs, Regulatory Affairs, Health Information Systems departments, as well as representatives from	Initiated July 12, 2011 and ongoing

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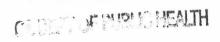
STATEMENT OF DEFICIENCIES AND PLAN DE CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER 050228	A BUILD B WING		(X3) DATE SURVEY COMPLETED 11/16/2012	
NAME OF ET	ROVIDER OR SUPPLIER	STREET ADDRESS	. C TY. STATE	ZIP CODE		
	cisco General Hospital			ncisco, CA 94110-3518 SAN FRANCISC	O COUNTY	
(X4) ID PREFIX TAG	(EACH DEFICIENCY	KTEMENT OF DEFICIENCIES MUST BE PRECEEDED BY FULL SC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECT (EACH CORRECTIVE ACTION SHOULD E REFERENCED TO THE APPROPRIATE DI	BE CROSS-	COMPLETE DATE
	care worker. Record review of Security and Electric signed by HW-2, in discuss or divulge information as required job duties." Record review of a Lat 9:00 A.M. indicate reports and note	health information by a health a 5/7/12 User Confidentiality, stronic Signature Agreement, indicates: "I will only access, confidential protected health ad for the performance of your CR Chart audit, dated 8/28/12 tes HW-2 viewed Patient 1's tes (Name and address), tues and HIV(AIDS) disclosure		both the SFGH and UCSF Risk Mar and Information Systems Departme monthly to review, discuss, and reco policy involving privacy compliance As reported in the 2567, HW-2 invo privacy breach had been oriented to responsibility to protect the confider patient protected health information to medical information privacy requi evidenced by user confidentiality ag We believe the employee's actions reckless behavior.	ents, meets commend issues. Ived in this to their intiality of (PHI) and irements as greements.	May 7. 2012
	Facility Privacy Office statements: "On 9/10/12 I was complaint alleging the Family Health Ce inappropriately access Information-name, ac diagnosis, medication papers."	notified that Patient 1 had a at an employee (HW-2) of the enter Clinic (FHC) had sed her PHI (protected health didress, lab values, medical s) so she could fill out court she received an envelope me but to the address of her		The SFGH Privacy Officer and the SPrivacy Analyst conduct *Privacy Rewithin the hospital and publish an efflyer quarterly called *Privacy Pulse* hospital staff about privacy security awareness, to validate staff knowler regarding privacy security and aware well as to identify issues requiring caction by managers. Findings are rethe Privacy Committee.	ducational to educate and dge reness, as corrective reported to	Initiated June 2012 and ongoing
	boy friend. The envelopments Health LCR but Patient 1 Patient 1 stated she	ope had a return address of the Clinic. The address is listed in stated it is not her address. recognized the hand writing on a and that she knows HW-2		MH-2 was placed on paid administr pending further investigation from H Resource services.		September 12, 2012

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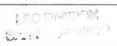
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OVIDER OR SUPPLIER	050228		(X2) MULTIPLE CONSTRUCTION A BUILDING B. WING		(X3) DATE SURVEY COMPLETED	
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isco General Hospital		STREET ADDRESS 1001 Potrero Ave		. ZIP CODE ncisco, CA 94110-3518 SAN FRAN	CISCO COUNTY	
(EACH DEFICIENCY	MUST BE PRECEEDED BY	FULL	ID PREFIX TAG	LEACH CONRECTIVE ACTION SHE	OULD BE CROSS-	(X5) COMPLETE DATE
because the boyfriend is the father of HW-2's child." "Patient 1 presented the envelope, still sealed, to a staff member on 5M. The staff member verified it was not sent by the 5M clinic. Patient 1 stated she was afraid to see the contents and asked the staff member to open it. The staff member discovered the contents were copies of court papers from HW-2 not paperwork related to medical care." "Patient 1 stated that HW-2 must have accessed her PHI to know that she is a patient of 5M."			A disciplinary hearing was held at which time HW-2 resigned their position with the city a county of San Francisco. Their services were deemed unsatisfactory and a permanent restriction was placed on their ability to secure future employment at San Francisco General Hospital and Trauma Center.		November 26, 2012	
		e accessed		specific privacy round for Fam	ily Health Center	November 28, 2012
1's PHI and the res HW-2 accessed and Patient 1's record: R	ults indicated that viewed the followin eports, Medications	on 8/28/12 g PHI from		licensing board.		December 14, 2012 December
unit, and her duties	to unit 4B, an in would not have req	patient care ulred her to		informational guide throughou	Family Health	15, 2012
"HW-2 remains on paid administrative leave pending a disciplinary hearing by Human Resources." Health Worker 2's (HW-2) action to access Patient 1's Life Care Record (LCR) without justification represents an intentional and malicious breach of protected health information and a violation of the Health and Safety Code 1280.15(a), and is				Director issued a memorandur providers emphasizing the imp	n to staff and ortance of	December 17, 2012
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	because the boyfrie child." "Patient 1 presented staff member on 5M was not sent by the was afraid to see the member to open it. the contents were HW-2 not paperwork re"Patient 1 stated the her PHI to know that st"I ran an audit report 1's PHI and the res HW-2 accessed and Patient 1's record: R and HIV(AIDS) status." "On the date in temporarily assigned unit, and her duties access Patient 1's med "HW-2 remains on pending a discipil Resources." Health Worker 2's (H1's Life Care Recorepresents an intenti protected health information.	because the boyfriend is the father child." "Patient 1 presented the envelope, still staff member on 5M. The staff member was not sent by the 5M clinic. Patient was afraid to see the contents and ask member to open it. The staff member the contents were copies of court pHW-2 not paperwork related to medical care." Patient 1 stated that HW-2 must have her PHI to know that she is a patient of 5M. "I ran an audit report on the LCR access 1's PHI and the results indicated that HW-2 accessed and viewed the followin Patient 1's record: Reports, Medications and HIV(AIDS) status." "On the date in question, HW-2 temporarily assigned to unit 4B, an in unit, and her duties would not have requaccess Patient 1's medical record that day." "HW-2 remains on paid administrated pending a disciplinary hearing to Resources." Health Worker 2's (HW-2) action to act 1's Life Care Record (LCR) without represents an intentional and malicious protected health information and a viole Health and Safety Code 1280.15(a), and is	child." "Patient 1 presented the envelope, still sealed, to a staff member on 5M. The staff member verified it was not sent by the 5M clinic. Patient 1 stated she was afraid to see the contents and asked the staff member to open it. The staff rnember discovered the contents were copies of court papers from HW-2 not paperwork related to medical care." "Patient 1 stated that HW-2 must have accessed her PHI to know that she is a patient of 5M." "I ran an audit report on the LCR access of Patient 1's PHI and the results indicated that on 8/28/12 HW-2 accessed and viewed the following PHI from Patient 1's record: Reports, Medications, lab values and HIV(A(DS) status." "On the date in question, HW-2 had been temporarily assigned to unit 4B, an inpatient care unit, and her duties would not have required her to access Patient 1's medical record that day" "HW-2 remains on paid administrative leave pending a disciplinary hearing by Human Resources." Health Worker 2's (HW-2) action to access Patient 1's Life Care Record (LCR) without justification represents an intentional and malicious breach of protected health information and a violation of the Health and Safety Code 1280.15(a), and is	because the boyfriend is the father of HW-2's child." "Patient 1 presented the envelope, still sealed, to a staff member on 5M. The staff member verified it was not sent by the 5M clinic. Patient 1 stated she was afraid to see the contents and asked the staff member to open it. The staff member discovered the contents were copies of court papers from HW-2 not paperwork related to medical care." "Patient 1 stated that HW-2 must have accessed her PHI to know that she is a patient of 5M." "I ran an audit report on the LCR access of Patient 1's PHI and the results indicated that on 8/28/12 HW-2 accessed and viewed the following PHI from Patient 1's record: Reports, Medications, lab values and HIV(A(DS) status." "On the date in question, HW-2 had been temporarily assigned to unit 4B, an inpatient care unit, and her duties would not have required her to access Patient 1's medical record that day" "HW-2 remains on paid administrative leave pending a disciplinary hearing by Human Resources." Health Worker 2's (HW-2) action to access Patient 1's Life Care Record (LCR) without justification represents an intentional and malicious breach of protected health information and a violation of the Health and Safety Code 1280.15(a), and is	REGULATORY OR LISC IDENTIFYING INFORMATION) A disciplinary hearing was held HW-2 resigned their position we county of San Francisco. Their was not sent by the 5M clinic. Patient 1 stated she was afraid to see the contents and asked the staff member to open it. The staff member discovered the contents were copies of court papers from HW-2 not paperwork related to medical care." "Patient 1 stated that HW-2 must have accessed her PHI to know that she is a patient of 5M." "I ran an audit report on the LCR access of Patient 1's PHI and the results indicated that on 8/28/12 HW-2 accessed and viewed the following PHI from Patient 1's record: Reports, Medications, lab values and HIV(AIDS) status." 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HW-2 was reported to their professional licensing board. The Family Health Center Nurse Manager posted SFGH Privacy and Security Tips informational guide throughout Family Health Center to eniforce staff awareness of privacy protection compliance. Health Worker 2's (HW-2) action to access Patient 1's Life Care Record (LCR) without justification represents an intentional and malicious breach of protected health information and a violation of the Health and Safety Code 1280.15(a), and is







STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		IX1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER:	A. BUILDING		3) DATE SURVEY GOMPLETED	ETED	
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NAME OF PI	ROVIDER OR SUPFLIER	STREET ADDRESS	CITY STAT	L, ZiP COUL			
San Fran	cisco General Hospital	1001 Potrero Av	e, San Fra	ncisco, CA 94110-3518 SAN FRANCISCO C	OUNTY		
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,	Penalty. Health and Safety Coo " A clinic, health fa	cility, agency, or hospice shall wful or unauthorized access to,		The FHC leadership, in collaboration w SFGH Privacy Officer, conducted a cas review with the FHC provider and nursi to reinforce employee legal responsibili protect the confidentiality of patient prothealth information (PHI).	ng staff ity to	st 28,	
	information to the a representative at the than five business unauthorized access,	ure of, a patient's medical frected patient or the patient's last known address, no later days after the unlawful or use, or disclosure has been nic, health facility, agency, or		The SFGH Privacy Committee reports privacy related issues e.g., privacy brea and staff education around privacy to h leadership at hospital Quality Council.	aches	ing	
	The CDPH verified affected patient(s) o of the unlawful or disclosure of the patient. The breach was detected.	he CDPH L & C District Office		Monitoring: The SFGH Privacy Officer and the SFG Privacy Analyst routinely conduct montaudits of the Lifetime Clinical Record of all employees of the City & County of Francisco Department of Public Health DPH) and of all employees of the Universal California, San Francisco (UCSF) who received care as patients at the hospital (emergency department, clinics, acute is skilled nursing) to verify if the LCR accessappropriate.	hly (LCR) f San (CCSF ersity of	ing	
				The SFGH Privacy Officer and the SFG Privacy Analyst routinely conduct month audits of the <i>Lifetime Clinical Record</i> of any patient as requested by manage verify of the LCR access was appropria	hly (LCR) rs to	ing	
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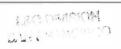
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(X1) PROVIDER/SUPPLIER/CLIA IEIENT/FICATION NUMBER 050228	(X2) MULTIPLE CONSTRUCTION A BUILDING B WING		(X3) DATE SURVEY COMPLETED 11/16/2012	
NAME OF CR	OVIDER OR SUPPLIER	STREET ADDRESS	C127 61411	SECONE		
	cisco General Hospital			ncisco, CA 94110-3518 SAN FRANCISCO) COUNTY	
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	Penalty. Health and Safety Cod " A clinic, health fa also report any unlaw or use or disclos information to the a representative at the than five business unauthorized access, detected by the clin hospice." The CDPH verified affected patient(s) or of the unlawful or disclosure of the patien	cility, agency, or hospice shall wful or unauthorized access to, ure of, a patient's medical ffected patient or the patient's last known address, no later days after the unlawful or use, or disclosure has been nic, health facility, agency, or that the facility informed the the patient's representative(s) unauthorized access, use or nt's medical information.		(e.g., media high profile cases, VIPs addition, if a patient requests with the their PHI has been breached, the SF Privacy Officer and the SFGH Privacy conducts audits of their Lifetime Clin Record (LCR). Questionable audit in investigated with the manager and eand action taken as indicated by the investigation. The total number of audits conducted month average between 25-30/mont Questionable audit results are investigation. The total number of audits conducted month average between 25-30/mont Questionable audit results are investigation. The SFGH Privacy officer presents are reported quarterly to the Privacy Committee. The SFGH Privacy Officer presents report regarding privacy issues to the Quality Council including results of quarterly audits. In addition, they reprincidents of non-compliance with DF SFGH privacy policies which occur of year at the next scheduled SFGH QCouncil. The Quality Council reports to the Governing Body Joint Conference.	e belief FGH cy Analyst inical results are remployee d per th. tigated d action on. Audit SFGH an annual e SFGH the bort any H and during the uality s annually	Ongoing
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STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION		(x1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: 050228	(X2) MULTIPLE CONSTRUCTION A. BUILDING B. WING		(X3) DATE SURVEY COMPLETED 11/16/2012	
	COVIDER OR SUFFLIER	STREET AUDRESS 1001 Potrero Av		. ZP CODE ncisco, CA 94110-3518 SAN FRANCIS	CO COUNTY	
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	Penalty. Health and Safety Coo " A clinic, health fa also report any unlar or use or disclos information to the a representative at the than five business unauthorized access, detected by the cli hospice." The CDPH verified affected patient(s) o of the unlawful or disclosure of the patient The breach was detected	cility, agency, or hospice shall wful or unauthorized access to, sure of, a patient's medical iffected patient or the patient's last known address, no later days after the unlawful or use, or disclosure has been nic, health facility, agency, or that the facility informed the result that the facility informed the result that the facility informed the result of the patient's representative(s) unauthorized access, use or nit's medical information.		Responsible Person(s): SFGH Privacy Officer		
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