The following reflects the findings of the Department of Public Health during a complaint/breach event visit:

Complaint Intake Number: CA00247036 - Substantiated

Representing the Department of Public Health:
Surveyor ID # 18929, Hoven

The inspection was limited to the specific facility event investigated and does not represent the findings of a full inspection of the facility.

Health and Safety Code Section 1280.15(a) A clinic, health facility, home health agency, or hospice licensed pursuant to Section 1204, 1250, 1725, or 1745 shall prevent unlawful or unauthorized access to, and use or disclosure of, patients' medical information, as defined in subdivision (g) of Section 56.05 of the Civil Code and consistent with Section 130203. The department, after investigation, may assess an administrative penalty for a violation of this section of up to twenty-five thousand dollars ($25,000) per patient whose medical information was unlawfully or without authorization accessed, used, or disclosed, and up to seventeen thousand five hundred dollars ($17,500) per subsequent occurrence of unlawful or unauthorized access, use, or disclosure of that patient's medical information.

T22 DIV5 CH12 ART5-79799(a)(8) Inmate-Patients' Rights
(a) Written policies regarding the rights and restrictions of inmate-patients admitted to a correctional treatment center shall be established and implemented, and made available to the inmate-patient and to the public. Inmate-patients will be afforded such rights as are commonly afforded to medical/mental patients and are consistent with jail or prison policies and procedures. Such policies and procedures shall ensure that each inmate-patient admitted to the correctional treatment center shall have the following rights and be notified of the treatment center's obligations.

(b) To be assured confidential treatment of personnel and medical records and to approve or refuse their release to any individual outside the correctional treatment center, except in the case of transfer to another health care facility, or as required by law or third party payment contract.

Based on document review and interviews, the facility failed to prevent an unlawful or unauthorized access to an I/P's medical information, when an employee (Employee A), who was not directly involved in the medical care of the I/P, accessed electronic medical records.

Findings:

On ______, the Department received notification from the facility of an incident involving inappropriate access of the electronic medical record of an I/P on ______ and ______, while the I/P was housed at the facility. The Incident was detected on ______.

Permanent Correction:

The following directives have been briefed:

A) Confidentiality of Inmate-Patients’ Medical Information - to all CTC Nursing personnel.

B) Breach of Confidentiality – to all Quality Management personnel.

Event ID: R0711 2/24/2012 3:44:30PM
and the Director of the Department where Employee A worked was notified on 11/10. The employee (Employee A) involved in the inappropriate access, responded to his director by email indicating, "It was a mistake. It won't happen again."

During an interview conducted with Employee B who supervised Employee A, on 11/10 at 11 a.m., he indicated that the employee worked in a clinic where he only treated female I/Ps. Employee A was not a staff member at the facility where I/P 1, a male inmate, was admitted.

An interview was conducted with Employee A, a dentist, on 11/10 at 11:20 a.m. The employee stated he thought he might be seeing the I/P as a patient, and was checking to see if there were any dental problems. He stated he did not remember accessing the record more than one time, he did not tell anyone about accessing the information, and he had no intention of doing any harm with the information.

An interview was conducted with Employee C on 11/10 at 2:30 p.m., she indicated that staff discovered the breach while doing a check of I/Ps "flagged" as high profile cases. She confirmed Employee A had accessed the electronic clinical record on two occasions.

A policy on Medical Record Access has been created with emphasis on the use, access and disclosure of medical records. Any unusual or unauthorized access to, or use of, a patient's medical information will be reported to the California Department of Public Health License and Certification no later than five business days after the unlawful or unauthorized access, use, or disclosure has been detected by the Department. Reporting will be conducted by either telephone with written confirmation or by telephone facsimile. A log book has been created and centralized in the CTC Nursing Office. In addition, the Quality Management Unit will report any discovered unauthorized entry into the medical record of CTC inmate-patients to the CTC Medical Director, CTC Administrator and CTC Director of Nursing.

Monitoring: A quarterly monitoring study will be conducted by Quality Management Unit to verify compliance with the accounting of use and disclosure of patient's medical record.

Person Responsible: CTC Director of Nursing, CTC Medical Director and CTC Administrator.