The following reflects the findings of the Department of Public Health during a COMPLAINT INVESTIGATION.

Complaint Number CA00155801

Inspection was limited to the specific complaints investigated, and does not represent the findings of a full inspection of the facility.

Representing the Department of Public Health:

RN, HFEN

This RULE: is not met as evidenced by:
Based on interviews and review of records, the facility failed to maintain the privacy and confidentiality of medical records, in the absence of authorization or consent for disclosure, in accordance with the Welfare and Institutions Code Section 5328(a), which stipulates that all information records obtained in the course of providing services to either voluntary or involuntary recipients of services shall be confidential.

Findings:
During an investigation at Sister Facility 2, audits were run from 1/1/04 through 6/30/06 on 109 patients' medical records. Through these audits, employees' breaches of patients' confidential clinical records at this facility (Facility 1) were discovered.

Documents entitled, "Privacy Notes", identified every patient whose clinical record had been breached, and listed the members within the facility's health care network who were responsible for the breaches, including employees from Facility 1.

Specific information regarding the actual number of patients whose clinical record information was breached, and the employees charged with those breaches, was requested of Employee 2 several times. A form entitled, "Inappropriate Access by NPH/NPI Employees during 1/1/04 to 6/30/06 for Privacy Audit 109" was eventually submitted and reviewed on 7/16/08.

That form identified four (4) employees who reportedly breached one (1) particular patient's clinical record. The document also disclosed that one (1) of those employees breached two (2) more patients' clinical records at Facility 1, and four (4) medical records of patients at Sister Facility 2. The information provided on the form, however, was not consistent with information contained in other facility documents furnished during this and previous investigations.

For example, a review of the "Privacy Notes" for the audit of 1/1/04 through 6/30/06, uncovered a patient whose medical record at Sister Facility 2 was breached by five (5) Facility 1 employees, although the only recorded contact the patient had within the health care organization was at Sister Facility 2 in 1992.
Another patient had been treated at Facility 1 and Sister Facility 2. Five (5) employees at Facility 1 accessed the patient's clinical record at this facility without a valid reason to do so. Moreover, those same employees were also able to access the patient's medical record at Sister Facility 2, even though they had no medical care issues with the patient.

F 621  T22 DIV5 CH2 ART6-71551(b) Medical Record Availability

(b) The medical record, including X-ray film, is the property of the hospital and is maintained for the benefit of the patient, the medical staff and the hospital. The hospital shall safeguard the information in the record against loss, defacement, tampering or use by unauthorized persons.

This RULE: is not met as evidenced by:

Based on interviews and review of records, the facility failed to safeguard patients' medical records against use by unauthorized individuals.

Findings:

On 7/3/08, at 1 p.m., during the investigation of the breach of a patient's clinical records at Sister Facility 2, Employee 2 disclosed that employees at this facility (Facility 1) were able to access the medical records of any patient who was seen or treated in any area within the affiliated health care organization, including two other hospitals and their ancillary outpatient services.

The health care organization's electronic "Master
Patient Index" (MPI) system enabled any employee to discover if a person was, or had ever been, a patient in any area within the facility's entire health care system, including treatment areas, outpatient services, and another hospital, by entering the name and "clicking on it," which allowed employees to obtain any patient's medical record number (MRN). It was previously established that any patient's electronic medical record could be accessed with a known MRN.

Employee 3 explained during a previous investigation that if a patient were treated at multiple facilities, once the MRN was entered electronically, all of the patient's available records would be displayed on the screen, and the option of choosing which record to view would be offered.

For example, a review of the "Privacy Notes" from the audit of patients from 1/1/04 through 6/30/06, uncovered a patient whose medical record from Sister Facility 2 was breached by five (5) employees from Facility 1, although the only recorded contact the patient had with the health care organization was at Sister Facility 2 in 1992.

Citing "shared contracted services," Employee 2 declared on 7/11/08, at 9:10 a.m., that employees at Facility 1 needed access to patients' medical records. She explained that both Facility 1 and Sister Facility 2 shared contracted services performed at various locations within the health care organization. Employees at each facility needed to be able to access patients' test results, treatments, therapies, etc., that were conducted at other locations, and were given access to the facility's global electronic master patient index (MPI).
<table>
<thead>
<tr>
<th>ID</th>
<th>PREFIX</th>
<th>TAG</th>
<th>SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)</th>
<th>PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)</th>
<th>COMPLETE DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>F 621</td>
<td>Continued From Page 4</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>