
Department: UW Medicine Compliance

Subject: PP-05 Complaints and Investigations Related to UW Medicine Privacy Practices

Policy Number: 05

Effective Date: September 28, 2007

Review Date: September 28, 2007

Policy:

UW Medicine is committed to ensuring patient privacy and to timely response to external and internal complaints or inquiries.

Patients and families have the right to file complaints alleging violations of the UW Medicine¹ privacy policies or state and federal law. In each UW Medicine entity where health care services are provided a *Notice of Privacy Practices*, that includes the right to make a complaint, is posted. UW Medicine has processes in place to allow individuals to submit a complaint regarding UW Medicine's privacy policies or UW Medicine's compliance with its privacy policies and the law.

Unauthorized access, use, and/or release of protected health information (PHI), the failure to maintain and safeguard patient health information, and/or a breach of confidentiality by a workforce² member will subject the individual to investigation, and where appropriate corrective or disciplinary action. (See UW Medicine Privacy Policy - *PP-06 Sanctions for the Failure to Follow Applicable Privacy and/or Security Policy or for a Breach of Patient Confidentiality or Information Security*). For investigations regarding potential breaches of information security, please see UW Medicine Information Security Policy: *SEC-10 - Incident Response and Investigations Related to Information Security*.

All UW Medicine workforce members are required to cooperate with investigations of suspected Privacy or Security Policy violations. If a UW Medicine workforce member does not cooperate with an investigation, the investigation will be completed without their information. If during the course of the investigation, it is found that the workforce member has used University resources for purposes that exceed de minimus³, it must

¹ For purposes of HIPAA, UW Medicine includes the following entities: University of Washington Medical Center and Clinics; Harborview Medical Center and Clinics; UW Medicine Neighborhood Clinics (University of Washington Physicians Network); UW Physicians Sports Medicine Clinic; Hall Health Primary Care Center; University of Washington Physicians; UW Medicine Eastside Specialty Center as well as certain services and activities that support UW Medicine that are performed by non-healthcare components of the University of Washington as defined within Privacy Policy PP-01 Use & Disclosure of Protected Health Information – Organizational Requirements. UW School of Medicine is subject to the UW Medicine Information Security Program.

² Faculty, employees, trainees, volunteers, and other persons who perform work for UW Medicine, and whose work conduct is under UW Medicine's direct control regardless of whether or not they are paid by UW Medicine.

³ Very limited personal use of University resources where: (a) there is little or no cost to the state, (b) the use is brief in duration, occurs infrequently, and is the most effective use of time or resources, (c) the use does not interfere with the performance of official duties, (d) the use does not disrupt or distract from the conduct of state business, (e) the use does not disrupt other state employees

be reported to Internal Audit. Please see University of Washington Policy, *AP 47.2 Personal Use of University Facilities, Computers, and Equipment by University Employees*.

UW Medicine entities investigate and attempt resolution of allegations of violations in a timely manner. The entity receiving the complaint documents the complaint and within ten (10) business days provides the individual with written confirmation that the complaint has been received. See “Sample Acknowledgement Letter” (Attachment A). The written confirmation must also establish a date for UW Medicine to respond to the complaint. The full investigation, including resolution, should not exceed thirty (30) business days from date a complaint is received. If a complaint requires additional time for resolution, the UW Medicine entity’s representative in consultation with the patient will make a new timeline for response.

UW Medicine will not intimidate, threaten, coerce, or retaliate against persons for filing complaints with Office for Civil Rights (OCR), for testifying, assisting or participating in investigations, compliance reviews, proceedings or hearings under Part C of Title XI of the Social Security Act, or for opposing real or perceived unlawful acts or practices provided the opposition is reasonable and does not involve a disclosure of PHI that would be prohibited under the law.

I. Process

A) How do individuals receive notice of their right to file a complaint?

Patients are notified of their right to file a complaint by the UW Medicine *Notice of Privacy Practices*, which is posted and available in each UW Medicine entity. The *Notice* includes directions on how to file a complaint. Additional examples of notification to patients may include, but are not limited to:

- The Patient Rights and Responsibilities brochure;
- Posters or signs on the units and in the clinics including the name and number of the unit or clinic manager and the Patient Relations Representative; **and**
- Posters or signs including contact information for OCR.

B) Where and how should the individual’s complaint be filed?

Privacy complaints may be submitted to UW Medicine in writing, by phone, or in-person. Complaints may also be filed with the UW Medicine entity’s Patient Relations Representative. Individuals can also submit privacy complaints to the U.S. Department of Health and Human Services, Office for Civil Rights (OCR).

Potential recipients of patients’ complaints:

and does not obligate them to make a personal use of state resources, and (f) the use does not compromise the security or integrity of state property, information, or software. Using University resources to conduct an outside business or for political purposes is strictly prohibited.

- 1) The UW Medicine Privacy Office;
- 2) The UW Medicine HIPAA Program Office;
- 3) The UW Medicine Compliance Office;
- 4) A UW Medicine entity; **or**
- 5) The U.S. Department of Health and Human Services• Office for Civil Rights (OCR).

C) Patient Privacy Investigations Authority

1. When the complaint or investigation involves a patient(s) who has been treated at only one UW Medicine entity, the Privacy Officer of that entity documents and responds to the complaint or investigation.
2. When the complaint or investigation involves a patient(s) who has been treated at multiple UW Medicine entities, the UW Medicine HIPAA Compliance Officer documents and manages the response to the complaint or investigation.
3. To the extent that a complaint or investigation involves the conduct of a School of Medicine workforce member, the investigating Privacy Officer must involve the SOM Compliance staff as appropriate.

D) How does UW Medicine respond to an individual’s complaint?

The UW Medicine Privacy Office will forward all patient privacy complaints to the appropriate UW Medicine entity in a timely manner. (See Procedure I.) Each UW Medicine entity’s Privacy Official must process all patient privacy complaints in a timely manner. Processing patient privacy complaints will include the following steps:

- Providing the complainant with an acknowledgement for each complaint received. Complaints from external sources receive the acknowledgement in writing. See “Sample Acknowledgement Letter” (Attachment A).
- Conducting an institutional risk assessment based on severity of breach and liability.
 - Contacting Health Sciences Risk Management for involvement in the investigation where appropriate.
 - If assessment for institutional risk includes potential media coverage, coordinate with UW Medicine Entity’s News and Community Relations Department;
- Overseeing investigation of suspected breach;
- Documenting all incidents and their disposition in the Privacy Event Database, if any;

- Providing complainant with a response letter that includes the findings of the investigation. See “Sample Resolution Letter” (Attachment B).
- For investigations that result in Sanctions, follow *PP-06 Sanctions for the Failure to Follow Applicable Privacy and/or Information Security Policy or for a Breach of Patient Confidentiality or Information Security*,
- Submitting reports to UW Privacy Officer, entity's Compliance Officer, the UW Medicine Confidentiality and Access Work Group, UW Medicine Confidentiality and Access Steering Committee, and HS Risk Management.

Each UW Medicine entity will respond to privacy complaints from OCR in a timely manner. (See Procedure II. below.)

E) How does UW Medicine document a patient’s complaint?

- UW Medicine entities document all complaints in accordance with the entity’s record retention policies and procedures, UW Record Retention Policies, and Washington State and Federal Law.
- Privacy complaints will be documented and tracked within each entity’s Privacy Event Database.
- Responses to a patient’s complaint will be filed in the patient’s designated record set⁴ via the Entity’s Privacy Official’s files.
- Records will be maintained for a minimum of 10 years from the last date of service to the patient or the last date the record was used by UW Medicine, whichever is later. Records related to treatment of minors shall be maintained for at least ten years and in no event less than three years from the date the patient achieves majority (18 years old). When a UW Medicine records retention policy requires retention for a longer period of time than the law requires, the record will be maintained consistent with the UW Medicine policy.

F) How can patients appeal the complaint investigation outcome?

- If a patient is not satisfied with the results of an investigation, the Privacy Official can refer the complaint for review by the UW Medicine Entity’s Grievance Committee.
- The UW Medicine Entity’s Grievance Committee shall draft a written response to the patient’s complaint and the response shall inform the patient of how to contact the U.S. Department of Health and Human Services • Office for Civil Rights (OCR) if the patient is still not satisfied with the outcome of the review.

⁴ See “definitions” section for further description of “designated record set”.

Procedures:

I. Making a Complaint Regarding UW Medicine’s Privacy Practices:

A) Making a privacy complaint to the UW Medicine Privacy Office or a UW Medicine entity:

Step	Action
1	<p>If the person making the complaint is an individual outside the UW Medicine workforce or a member of the UW Medicine workforce acting in his or her role as a UW Medicine patient, the complaint may be made to the UW Medicine Privacy Office or the UW Medicine entity’s Patient Relations Service Area.</p> <ul style="list-style-type: none"> a) The complaint may be oral or in writing, and either electronic or paper; b) The complaint must identify the subject of the complaint and describe the conduct believed to be in violation of UW Medicine privacy policies or procedures or the law; c) If the UW Medicine Privacy Office receives the complaint, it is directed to the appropriate Privacy Official; d) Patient Relations Service Area notifies Privacy Official; e) The entity’s Privacy Official provides the complainant an acknowledgement for the complaint received. Complaints from external sources receive the acknowledgement in writing. See “Sample Acknowledgement Letter” (Attachment A); f) Privacy Official will coordinate with Risk Management regarding investigation of the complaint; g) The UW Medicine entity’s Privacy Official will maintain documentation of all complaints received and their disposition in the Privacy Event Database; h) All complaints will be investigated as appropriate and responded to in a timely manner as provided in the UW Medicine entity’s policy; i) The UW Medicine entity’s Privacy Official provides a letter of disposition to the person making the privacy complaint, and a copy is filed in the patient’s designated record set via the Entity’s Privacy Official’s files; See “Sample Resolution Letter” (Attachment B); j) Privacy Official documents the sanction level and recommends disciplinary /corrective actions in formal report to Manager.
2	<p>If the person making the complaint is a member of the UW Medicine workforce, the complaint may be made to the UW Medicine entity’s Privacy Officer,</p> <ul style="list-style-type: none"> a) The complaint may be oral or in writing, either electronic or paper; b) The complaint must identify the subject of the complaint and describe the conduct believed to be in violation of UW Medicine policies or procedures or the law; c) If the UW Medicine Privacy Office receives the complaint, it is directed to the appropriate Privacy Official;

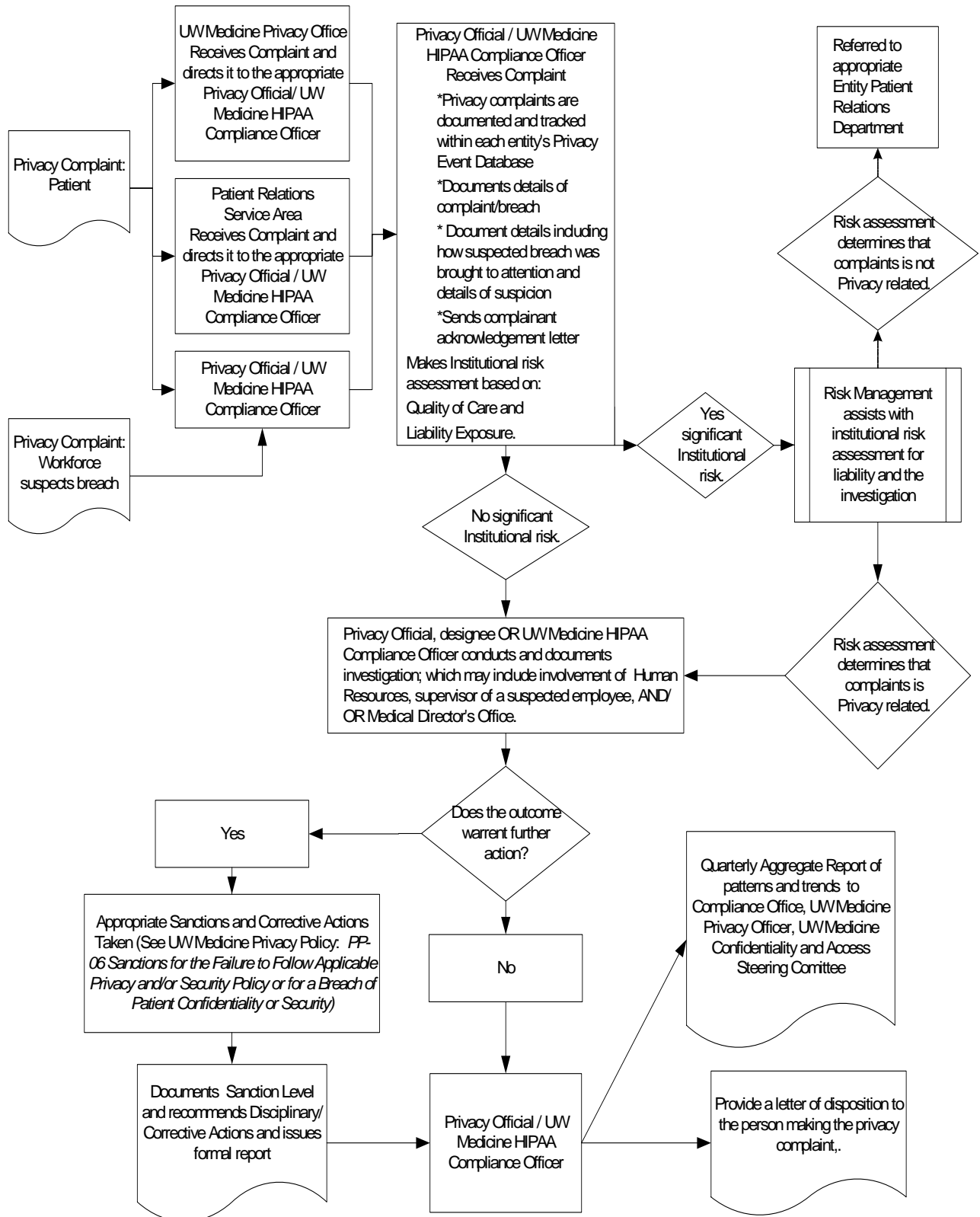
	<ul style="list-style-type: none"> d) The entity's Privacy Official provides the complainant an acknowledgement for the complaint received. Complaints from external sources receive the acknowledgement in writing. See "Sample Acknowledgement Letter" (Attachment A); e) Privacy Official will coordinate with Risk Management regarding investigation of the complaint; f) The UW Medicine entity's Privacy Official will maintain documentation of all complaints received and their disposition in the Privacy Event Database; g) All complaints will be investigated as appropriate and responded to in a timely manner as provided in the UW Medicine entity's policy; h) The UW Medicine entity's Privacy Official provides a letter of disposition to the person making the privacy complaint. See "Sample Resolution Letter" (Attachment B); i) Privacy Official documents sanction level and recommends disciplinary/corrective actions in formal report to Manager.
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Privacy Complaints Contact Numbers for UW Medicine:

University of Washington Medical Center & Clinics	(206) 598-5701
Harborview Medical Center & Clinics	(206) 744-9003
University of Washington Physicians' Network	(206) 520-5505
University of Washington Sports Medicine Clinic	(206) 543-1552
University of Washington School of Medicine	(206) 543-0300
UW Medicine Eastside Specialties Clinic	(206) 598-5701
University of Washington Hall Health Primary Care Center	(206) 685-1081
University of Washington Physicians	(206) 598-5701

Making a Complaint Regarding UW Medicine's Privacy Practices Procedures:

B) Responding to Privacy Practice Complaints Received From Individuals to UW Medicine



C) Making Privacy Complaints to U.S. Department of Health and Human Services • Office for Civil Rights (OCR):

Step	Action
1	<ul style="list-style-type: none"> ❑ Filed in writing, either electronic or paper, ❑ An indication that UW Medicine is the subject of the complaint, ❑ A description of the conduct believed to be in violation, ❑ Filed within 180 days of the date the complainant knew or should have known the alleged violation occurred.
2	<p>Complaints to the U.S. Department of Health and Human Services • Office for Civil Rights should be directed to:</p> <p style="padding-left: 40px;">Office for Civil Rights U.S. Department of Health & Human Services 2201 Sixth Avenue - Mail Stop RX-11 Seattle, WA 98121 (206) 615-2290; (206) 615-2296 (TDD) (206) 615-2297 FAX</p>

II. Responding to Privacy Practice Complaints Received From OCR

Step	Action
1	UW Medicine representative must accept the notice.
2	UW Medicine representative will immediately notify the UW Medicine entity's Compliance Officer, the appropriate Administrator, the Privacy Official, and the Attorney General's Office. The representative will provide each with a copy of the notice received from OCR. The entity's Privacy Official will be responsible for any further dissemination of the information.
3	UW Medicine entity's Privacy Official will develop and activate a response plan to include participation of the UW Medicine entity's Compliance Officer, the appropriate Administrator, the Privacy Official, and the Attorney General's Office.
4	UW Medicine entity's Privacy Official maintains records of the response according to the response and action planning.

Cross References:

Please see following list of UW Medicine entity specific policies and procedures regarding Patient Complaints and Responding to Complaints.

HHPCC

HH AD03-016 Patient Complaints
HH HIP-05 Patient Complaints related to Privacy

HMC:

5.14 Patient Complaints and Grievances

5.64 Patient Grievance Committee

UWMC:

5.33 Management of Patient Complaints and Grievances

References:

I. 45 CFR Part 160 and 164; Section 164.530(d); “Administrative Requirements - Complaints”, Section 160.306 "Complaints to the Secretary".

II. RCW 70.02.120: Notice of information practices—Display conspicuously.

UW Privacy Officer: _____ Date: _____

Kathryn Waddell, Executive Director, Health Sciences Administration
