



## Notice of Privacy Practices

### I. PURPOSE

- A. To describe the patient's right to be informed of the privacy practices of St. Francis Healthcare System of Hawai'i (SFHS), and of his/her privacy rights with respect to protected health information (PHI).
- B. To describe procedures for providing the Notice of Privacy Practices to SFHS patients.
- C. To describe responsibilities of SFHS associates to comply with terms of the Notice of Privacy Practices.

### II. POLICY

- A. The Notice of Privacy Practices ("Notice") includes the following information:
  - A list of the SFHS covered entities and service delivery sites to which the Notice applies;
  - Examples of the ways in which SFHS may use or disclose PHI;
  - An explanation of the patient's rights with respect to his/her PHI;
  - A statement that SFHS is required by law to maintain the privacy of PHI, provide patients with the Notice, and abide by the terms of the Notice;
  - A statement that the patient may complain to SFHS or to the Secretary of Health and Human Services about a perceived violation of his/her privacy rights;
  - How to contact the Privacy Officer for further information about the Notice;
  - The effective date of the Notice; and
  - Other statements or descriptions, as required by law.
- B. The privacy practices described in the Notice will be followed by:
  - St. Francis Hospice, Honolulu
  - St. Francis Home Care Services
  - All SFHS associates
- C. The Notice will be posted in a clear and prominent location within each admissions or registration area, and on the SFHS website. Copies of the Notice will also be available upon request from the Privacy Officer.
- D. SFHS will provide each patient with the Notice:
  - Prior to or on the date the patient first receives services;
  - As soon as reasonable and practical after an emergency treatment situation; or
  - Automatically, in an electronic format, if SFHS delivers its first service to the patient electronically.
- E. SFHS will make a good faith effort to obtain each patient's signature on the Notice of Privacy Practices / Acknowledgement Form to document that he/she received the Notice. If SFHS is unable to obtain the patient's signature, SFHS will document its good faith efforts to obtain the signature and the reason why its efforts were unsuccessful.
- F. SFHS reserves the right to revise its privacy practices and terms of the Notice. SFHS also reserves the right to make provisions of the revised Notice effective for all PHI maintained by SFHS, including PHI created or received prior to the effective date of the revised Notice.
- G. Whenever there is a material change to SFHS' privacy practices, SFHS will promptly revise the Notice and distribute the revised Notice as described in sections II.C and II.D above. Except when required by law, SFHS will not implement material changes to terms of the Notice prior to the effective date of the revised Notice.
- H. The Notice will be reviewed for accuracy at least every three (3) years.

### III. DEFINITIONS

**Associates:** Includes employees, temporary agency personnel, contracted services personnel, volunteers, students, trainees, and independent contractors who provide services to SFHS and/or its subsidiaries.

**Disclosure:** The release, transfer, provision of, access to, or divulging in any other manner of protected health information outside of SFHS.

**Protected health information (PHI):** Any information, identifiable to a patient, including demographic information, in any form or medium, that relates to the past, present or future physical or mental health or condition of a patient; the provision of health care to a patient; or the past, present or future payment for the provision of health care to a patient.

**Registrar:** The SFHS staff member who is responsible for admitting or registering patients for any SFHS program, service, department or facility.

**Use:** The sharing, employment, application, utilization, examination or analysis of protected health information within SFHS.

**Workforce:** Employees, volunteers, students, trainees, and other persons whose conduct, in the performance of work for SFHS, is under the direct control of SFHS, whether or not they are paid for that work by SFHS.

### IV. PROCEDURE

- A. At the point of admission or registration, the registrar will provide a copy of the SFHS Notice of Privacy Practices ("Notice") to the patient.
- B. The registrar will ask the patient to sign the Acknowledgement Form, and provide a copy to the patient. The original Acknowledgement Form will be filed behind the Face Sheet in the patient's medical record. The



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Acknowledgement Form will be retained in the patient's medical record for as long as the patient's medical record is retained by SFHS.

C. If the registrar is unable to obtain the patient's signature due to the patient's incapacity or unwillingness to sign, unavailability of the patient's personal representative, or for any other reason, the registrar will document his/her good faith efforts to obtain the signature. The registrar will complete the following information on the lower portion of the Acknowledgement Form:

- Date
- Actions and Results--A description of good faith efforts to obtain the patient's signature and the reason why efforts were unsuccessful
- Registrar's Signature
- Job Title

D. If, after receiving the Notice, the patient objects to or requests a restriction on use or disclosure of his/her protected health information, the registrar will ask the patient to complete and sign the Acknowledgment and Restriction Request Form. The patient's objection or restriction request will be addressed in accordance with the applicable SFHS policy (see section VI below).

E. The Privacy Officer will:

- List his/her name or title and telephone number in the Notice as the person to contact for further information;
- Review and when necessary, revise the Notice to reflect material changes in uses or disclosures, patient's rights, SFHS' legal duties, or other privacy practices described in the Notice;
- Ensure that except when required by law, changes to terms of the Notice will not be implemented prior to the effective date of the revised Notice;
- Coordinate the distribution of the current version of the Notice to each SFHS admissions or registration area and Information Desk;
- Coordinate with Information Services to post the current version of the Notice on the SFHS website; and
- Retain copies of each version of the Notice for six years from the date of its creation or the date when it was last in effect, whichever is later.

### V. FORMS

- Notice of Privacy Practices / Acknowledgement Form
- Notice of Privacy Practices / Acknowledgement and Restriction Request Form

### VI. REFERENCES / RELATED POLICIES

- Standards for Privacy of Individually Identifiable Health Information (HIPAA), Final Rule, 45 CFR Part 164, Subpart E, Section 164.520
- SFHS policy, SADM 1031, Use or Disclosure of Protected Health Information for Involvement in Patient's Care and Notification Purposes
- SFHS policy, SADM 1033, Use or Disclosure of Protected Health Information for Facility Directory Purposes
- SFHS policy, SADM 1036, Patient's Right to Request Restriction on Use or Disclosure of Protected Health Information
- SFHS policy, SADM 1040, Patient's Right to Request Alternate Methods of Communicating Protected Health Information