

PARTICIPATION AGREEMENT

This Agreement sets forth the terms applicable to your participation in an educational experience (the "Experience") at UConn Health.

Section 1: Policies and Procedures

You are required to follow and abide by <u>all</u> UConn Health policies and procedures applicable to your Experience. You must participate and complete all required orientation and training programs before beginning your experience. Your compliance is vital for ensuring the safety of patients and staff. Copies of UConn Health's policies and procedure are available at https://health.uconn.edu/policies/.

Section 2: Confidentiality

You must protect patient privacy and maintain the confidentially of medical records and data is extremely important. You are required to read and comply with UConn Health's Policy of Confidentially and will hold patient, personnel and UConn Health organizational information in confidence. This obligation to maintain confidentiality continues even after your Experience ends. You are required to report violations of UConn Health's Policy of Confidentially to UConn Health Privacy and Information Security Officers.

Section 3: Health Insurance

You are required to have health insurance to participate in an Experience and will be financially responsible for any medical expenses you incurred while participating in an Experience. By signing this agreement, you acknowledge your responsibility and agree to maintain health insurance for the duration of the Experience.

Section 4: Consent to Disclosure of Records

You acknowledge that UConn Health will need access to your educational records (e.g., transcript, disciplinary records, recommendations and immunization records) which are maintained by your educational institution and are subject to the Family Educational Rights Privacy Act of 1974 ("FERPA"). You consent to the disclosure of your educational records to UConn Health personnel, to the extent necessary, to secure or to undertake your Experience. Such information may be released orally or in the form of copies of written records. UConn Health will not share your records with any third party unless you provide written consent or as may be required by law.

Section 5: Photography

You authorize the University of Connecticut, including UConn Health ("University") to record photographs or likenesses of you on any medium and to use, reproduce, modify, distribute, and publicly exhibit such recordings, in whole or in part, without restriction. You further consent to the use of your name and biographical material in connection with such recordings. You waive any right you may have to inspect or approve any photographs or other likenesses of yourself.

Section 6: Employment Disclaimer

You acknowledge that your participation in an Experience at UConn Health will not be considered as an employee of UConn Health for any purpose. You will not be entitled to receive any compensation or

benefits available to UConn Health employees. You will not qualify for workers' compensation benefits, vacation, sick time, or any other benefit of employment.

Section 7: Violation of Terms and Dismissal

Full Name (print)

You acknowledge that your participation in an Experience at UConn Health is contingent upon you complying with the terms of this agreement. You understand that if you fail to comply with any term, UConn Health can terminate your Experience and dismiss you.

I hereby understand and consent to the terms and conditions as stated in this agreemen			
~~~			
Participant Signature	Date		
John Doe			



### Educational Experience Liability Release Form ("RELEASE")

I have chosen to participate an educational experience. I have been made aware of the risks of participating in the experience including, but not limited to, exposure to various instruments, devices, equipment, machinery malfunction, furnishing, pharmaceuticals, chemicals as well as blood and body fluids and other potentially infectious materials, radioactivity, fire, explosion, slip and fall, crush injury, electric shock. I further understand that such exposure can cause serious illness, bodily injury, death, property damage or other risks that may not be foreseeable.

I understand that the University of Connecticut, including UConn Health, and its trustees, officers, employees, and agents (collectively the "University") is not responsible for my safety and I am not required to participate in this experience, but that I want to do so, despite the possible dangers and risks and despite this RELEASE.

I therefore agree, in consideration of and return for the services, facilities, and other assistance provided to me as by UConn Health in this experience, to RELEASE State of Connecticut and the University from any and all liability, claims and actions that may arise from injury or harm to me, from my death or from damage to my property in connection with my participation in this experience. I further agree to save and hold harmless, indemnify and defend the State of Connecticut and the University from any claim by my family or me or by others arising out of my participation in this activity.

I also agree to indemnify and hold harmless the University from any and all claims, actions, suits, procedures, costs, expenses, damages and liabilities, including attorney's fees brought as a result of any injury I may cause to third parties during, or as a consequence of, my participation in the experience.

I acknowledge that this experience will require travel and understand and agree that I am solely responsible for my own transportation to and from the experience and accept all risks associated with travel, including but not limited to, transportation delays, fare changes, missed connections, injuries (including death), losses, weather, or other circumstances beyond the control of the University.

I acknowledge that this experience will require that I am current with immunizations and am in good health and free of any communicable disease (i.e. two measles and mumps immunizations, MMR, if born on or after January 1, 1957 — one vaccine after 1980; current immunization for rubella or an immune laboratory titer; a TB Skin Test, PPD, not more than one year old, or documentation of treatment and resolution of active or latent TB or documentation of a negative chest x-ray after a positive PPD; current varicella titer or verbal history of varicella/chickenpox; completion of a Hepatitis B vaccination series; adult Tdap; and up to date influenza immunization.) By signing this RELEASE, I am verify that I am current with immunizations, am in good health and free of any communicable disease.

I recognize that this RELEASE means I am giving up, among other things, rights to sue the State of Connecticut and the University for injuries, damages, or losses I may incur. I also understand that this RELEASE binds my heirs, executors, administrators, and assigns, as well as myself. I further understand and agree that no oral or written representations can or will alter the contents of this document.

I understand that this agreement shall be governed by the laws of the State of Connecticut (excluding its conflict of laws principles), which shall be the forum for any lawsuits filed under or incident to the experience.

### THIS IS A RELEASE OF YOUR RIGHTS. READ CAREFULLY BEFORE SIGNING.

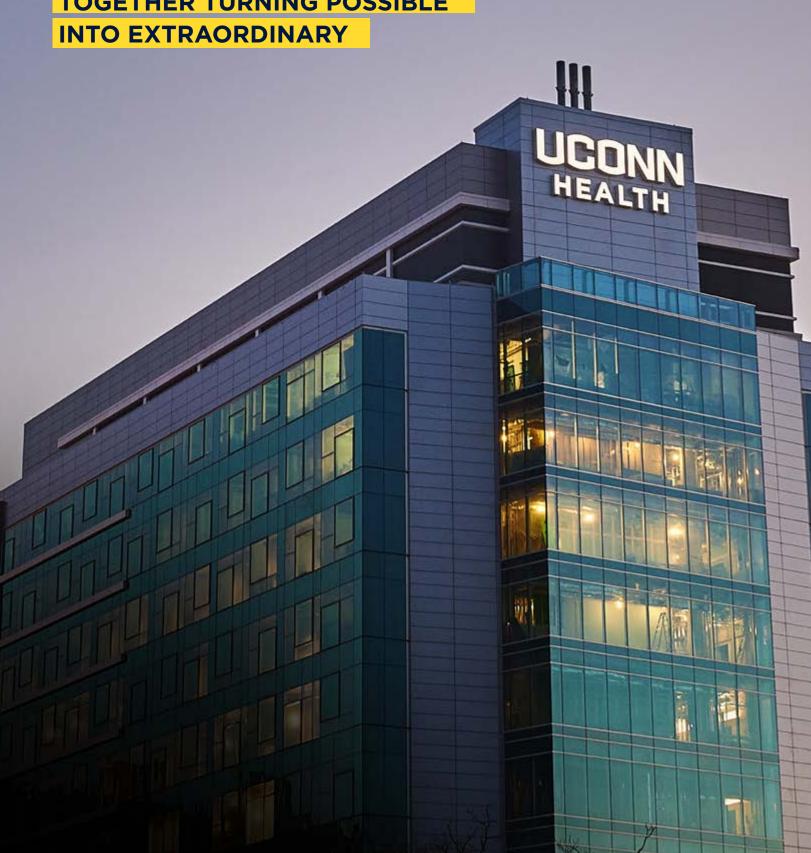
I have read this entire RELEASE, I fully understand it and I ag	gree to be legally bound by it.
Participant's Signature:	Date: <u>10   10   20</u> 20
Participant's Name: <u>John Doe</u>	<del></del>
If Participant is under 18 years old:	
Parent/Guardian's Signature:	_ Date:
Parent/Guardian's Name:	
By printing and signing my name, I attest that I am the pare I am authorized to act on behalf of and legally bind the part another parent/guardian is not required. I have also read the consent to the above statements.	icipant and that the signature or agreement of
Internal Use Only	
Date(s) of UConn Health Experience:	
UConn Health Host Signature:	
UConn Health Host Title:	

**Please note:** The hosting department will maintain this individual's record for a minimum of 5 years from date of termination, in accordance with the state of Connecticut's record retention policy.

Revised: 4/09, 5/10, 5/11, 5/12, 5/13, 2/14, 12/14, 5/15, 1/18.



**TOGETHER TURNING POSSIBLE** 



### New Employee Orientation UConn Health | April, 2020

Please note, this guide does not establish or imply contractual obligations. While every effort has been made to address the many related issues and ensure the accuracy of the guide, it is recognized that it may not be all-inclusive and does not constitute a legal document or a contract. This guide was prepared for informational purposes only and does not establish terms and conditions of employment. Changes to the guide will be communicated through normal communication channels and advance notice may not always be possible. Upon request, Human Resources will provide official interpretation of any section. If there is a conflict between this guide and the applicable statute, or other primary source. the primary source shall prevail.

Dev: 07/14 Human Resources

# **UCONN**HEALTH

263 FARMINGTON AVENUE FARMINGTON, CT 06034-4035 health.uconn.edu/human-resources 860.679.2426

For compliance purposes you must sign the self learning acknowledgement and submit it to Human Resources.



UConn Health is a vibrant, integrated academic medical center that is entering an era of unprecedented growth in all three areas of its mission; academics, research, and clinical care. A commitment to human health and well-being has been of utmost importance to UConn Health since the founding of the University of Connecticut Schools of Medicine and Dental Medicine in 1961. Based on a strong foundation of groundbreaking research, first-rate education, and quality clinical care, we have expanded our medical missions. over the decades. In just over 50 years, UConn Health has evolved to encompass more research endeavors, to provide more ways to access our superior care, and to innovate both practical medicine and our methods of educating the practitioners of tomorrow.

### health.uconn.edu

### **Welcome to UConn Health**

Welcome! You are an important addition to UConn Health and we are pleased you have chosen to be part of this very proud academic university health center with dedicated and talented employees who work hard in support of UConn Health's mission and goals. The knowledge and experience you bring will support patients, students, faculty and your fellow staff members. We are committed to providing a working, learning and patient environment that is inclusive and welcoming

This Self Learning Orientation is designed to provide you with the general knowledge and resources you will need in order to accomplish

your goals in your new position. Thank you for selecting UConn Health and joining us in our dedication to helping people achieve and maintain health lives and restoring wellness/health to maximum attainable levels. Now, please take a moment to watch Dr. Andrew Agwunobi, Chief Executive Officer and Executive Vice President for Health Affairs, welcome you to UConn Health and hear about how we consistently persue excellence and innovation in our great organization.



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### **About UConn Health**

A commitment to human health and well-being has been of utmost importance to UConn Health since the founding of the University of Connecticut schools of Medicine and Dental Medicine in 1961. Based on a strong foundation of groundbreaking research, firstrate education, and quality clinical care, we have expanded our medical missions over the decades. In just over 50 years, UConn Health

has evolved to encompass more research endeavors, to provide more ways to access our superior care, and to innovate both practical medicine and our methods of educating the practitioners of tomorrow.

Watch the video below and learn more about the great insitution you have chosen, UConn Health



#### **Policies & Resources**

#### health.uconn.edu/policies

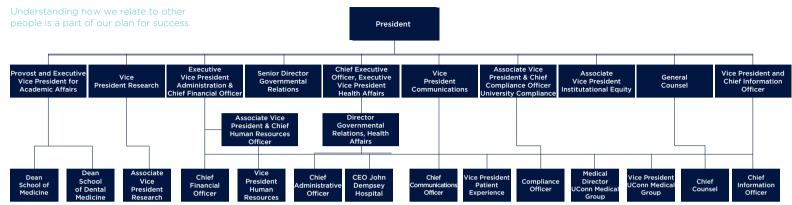
UConn Health policies website, health.
uconn.edu/policies, is where you will find all the official UConn Health policies that govern the daily activities of our UConn Health community. It is recognized that these policies are not all-inclusive and do not consistute a legal document or contract. The Offices of Compliance and Audit & Management Advisory Services are available for assistance with questions on any of the policies listed here.

Please note, violations of UConn Health policies may be cause for disciplinary action up to and including dismissal. A supervisor's failure to enforce a policy does not excuse an employee or non-employee from complying with it, nor does it prevent UConn Health from taking disciplinary action thereafter. As part of your orientation, you are required to read, understand, and comply with each of the UConn and UConn Health policies listed below. Click on each policy to open and review.

		Compliance	OIE	HR	IRB	IT	Police
Institutional	Rules of of Conduct	•	•	•	•	•	•
Healthy and Safe	Drug-Free Schools & Campuses Act and Drug-Free Workplace Act			•			•
Workplace	Attendance, Sick Leave Standards, and Procedures			•			
	Background and Sanctions Check	•		•			•
	Confidentiality			•			
	Smoke and Tobacco-Free Workplace						•
	Workplace Violence Prevention		•	•			•
	Effective Communication with Deaf and Hard Of Hearing Patients	•	•				
Non- Discrimination	Affirmative Action, Non-Discrimination and Equal Opportunity		•	•			
	HIV/AIDS Non-Discrimination		•	•			
	Persons with Disabilities		•	•			
	Discrimination, Harassment, and Related Interpersonal Violence		•	•			•
Use of State	Disposition of Public Records	•					
Resources	Electronic Monitoring					•	
	Acceptable Use, UConn Health	•				•	
Conflicts of	Employment and Contracting for Service of Relatives	•		•		•	
Interest and Research	Institutional Conflicts of Interest in Research	•					
Misconduct	Individual Financial Conflicts of Interest in Research	•					
	Review of Alleged Misconduct of Research	•			•		

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### **Building Relationships**



### Our Purpose. Clearly Defined.

#### Mission

Serve through healing, teaching, and discovery.

#### Vision

Leadership in clinical excellence through service, innovation, and education.

#### **Values**

Recognize and support excellence.

Realize the maximal potential of our students, faculty, and staff,

Promote professionalism, compassion, diversity, and social responsibility.

Promote innovation in discovery, education and health care delivery, and health promotion.

#### How Will I?



### re•mem•ber

/ri-mem-her/ verb

Partner with your leader to identify your initial assignments; the purpose of your work; how it fits into your department's overall mission and goals; and how you can begin making immediate contributions.

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### **Getting Around**



95 Farmington Avenue

(3 Talcott Notch Offices

1 230 Farmington Offices

Offices at The Exchange

230 Farmington Avenue

Farmington Campus

May 2016

### **Keeping Safe**

O UConn Musculoskeletal

Surgery Center

Outpatient Pavilion

O Dermatology Office

Institute, UConn Health

Wearing of employee identification badges while at UConn Health is a safety essential for all employees, faculty. students, volunteers, and contractors, You must wear your identification card at all times while on campus.

The Parking and Transportation Department can help you with any badge issues at:

Upper Campus - Main Building Room LG041 Tuesday 6:30 to10:30 am, Wednesday 11:30 am to 3:30 pm Thursday 6:30 to 10:30 am

Lower Campus - Administrative Services Building (3rdFloor Room D3500) Monday - Thursday 9:00am to 3:00pm Monday, Wednesday, or Friday, from 8 to 10:30 a.m. or 1:30 to 3:30 p.m.

### **Parking**

Office of the Chief Medical

A Jackson Laboratory for

Genomic Medicine

University Tower

The Parking and Transportation Department is committed to providing safe. convenient, and environmentally friendly parking and transportation solutions for the UConn Health community.

Visit health.uconn.edu/park for all your parking resources.



@ Emergency Department

atient/visitor parking Area 1 employee parking

Patient and Visitor Parking

Garage 3

Valet Parking

### **Environmental Health & Safety**



UConn Health's Environmental Health and Safety service unit of the Office for Research is dedicated to the health, safety and welfare of our research, medical, dental, and support communities in the fields of environmental safety, biological safety, chemical safety,

radiation safety. The Environmental Health and Safety unit is available for assistance with questions at 860.679.2723.

**Environmental Health and SafetyProcedures** 



### One More Step

Read and review the

Thank you for completing your UConn Health Self Learning New Employee Orientation. To attest to this training. please sign a copy of the self-learning acknowledgement and submit it to the appropriate, authorized UConn Health representative. Also contact your representative regarding additional training you may need to complete.

Welcome to UConn Health!

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# **Key Contacts**

Bursar 860.679.3945

health.uconn.edu/finance/bursar

Compliance, University 860.679.1969

university compliance@uconn.edu compliance.uconn.edu

Compliance, Healthcare 860.679.1802

compliance.officer@uchc.edu

health.uconn.edu/healthcare-compliance

Compliance, Healthcare Privacy 860.679.7226

privacyoffice@uchc.edu

privacy.uconn.edu/health/uconn-health

**Child Care Center** 860.679.2124

health.uconn.edu/creative-child-center

**Emergency Closings** 860.679.2001

health.uconn.edu/closing-and-cancellations

**Employee Assistance Program** 860.679.2877

health.uconn.edu/occupational-environmental/ employee-assistance-program

Harassment/Discrimination 860.679.3563

equity.uconn.edu

# **Emergency Alerts**

**Emergency Closings** 860.679.2001 | 860.486.9292

health.uconn.edu/closing-and-cancellations

The nature of UConn Health's activities requires that emergency closing decisions be made ONLY by UConn Health. General closing announcements from any other State office, including the Governor's office, do not constitute authorization for any UConn Health unit to close or any UConn Health employees to be absent from work. Unless officially notified in accordance with this policy, all UConn Health units must maintain normal operations. Call the UConn Health Hotline to find out the status of work that day. Correctional Managed Health Care staff are to follow policy 2001-01.

### **UConnAlert**

### alert.uconn.edu

UConnAlert is the on-demand mass notification service in use at UConn Health. It supplements our existing ways of notifying the entire UConn Health community of storm closings, construction-related disruptions, and other important news. All employees, students, residents, and others on campus automatically receive notifications via their available UConn Health e-mail address, work phone number, mobile number and home number.

Reference: Emergency Closing Policy, health.uconn.edu/policies/wp-content/uploads/ sites/28/2015/07/policy_2001_02.pdf

Information Technology

Help Desk 860.679.4400

health.uconn.edu/information-technology

**Logistics Management** 

860.679.1958

opa.uchc.edu

Police 860.679.2121

publicsafety.uconn.edu/police

### **HR Employee Resource Center**

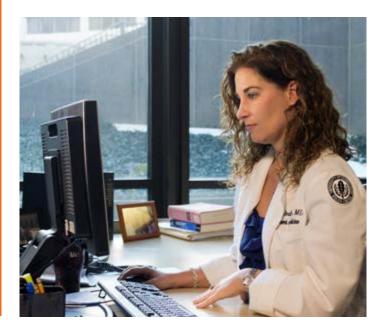
860.679.2426

HR-EmployeeResource@uchc.edu Monday through Friday, from 8 a.m. to 4:30 p.m.

The Center serves as a one-stop hub for various employee inquiries, providing prompt and thorough assistance to faculty, staff, and retirees. Dedicated Employee Resource Specialists answer employees' questions and provide information about health insurance, tuition programs, payroll deductions, supplemental benefits, pension contributions, and much more. If the question can't be answered immediately, employees will receive a status update within 24 hours.

# **Good Security Practices are Critical**

It is your responsiblity to keep UConn Health confidential data secure. Remember, UConn Health electronic messaging systems are not for personal use. Email spam and phishing pose extreme risk to UConn Health so do not click on unsolicited links or attachments in messages. When in doubt, call the IT Help Desk at 860-679-4400.





# Self Learning Orientation Acknowledgement

The UConn Health Self Learning Orientation is designed to introduce you to the UConn Health community and to provide you with valuable information to ensure a smooth transition into your role.

Please read and review the Self Learning Orientation document, and it's links, in its entirety. Upon completion, please sign the acknowledgement below.

Unpaid Educational School Sponsored Student Experience and Non-School Sponsored Experience: please return your signed self learning orientation acknowledgement to your host/preceptor.

**Contracted Vendors/non-employees:** please return your signed self learning orientation acknowledgement to your UConn Health contract/point person.

Please Note that for compliance purposes, you must sign the acknowledgement and submit it to the appropriate UConn Health contact before starting your assignment.

I have received, read and understand and will comply with all the information given in the UConn Health Self Learning Orientation document. The self-guided orientation includes an overview of the UConn Health, Compliance, Police, OSHA Bloodborne Pathogens/Personal Protective Equipment & Environmental Safety, and UConn Health policies and procedures including the UConn Health policy on Confidentiality. I understand that the performance of my duties I must hold patient, personnel and organization information in confidence. I recognize that I have a duty to report violations of this policy. I further understand that violations of any UConn or UConn Health policies are cause for disciplinary action up to and including termination. Further, I understand that I must complete any additional training as required by UConn Health.

Your signature on this document indicates that you have received, read, understood and will abide by all of the above information concerning UConn Health.

$\sim$	1011012020
Signed Signature	Date
John Doe	<u>UCHL Volunteer</u>
Print Name	Department
Authorized UConn Health Representative Signed Signature	e Date
Print Name	

# COMPLIANCE AND PRIVACY / SECURITY TRAINING

UCONN HEALTH

Unpaid Student Experience 2019 - 2020



# CONTENT

This training will provide you with an overview of the Office of University Compliance, relevant laws and policies, as well as important information related to privacy and security at UConn Health.

As you complete this training, click on the available links to view applicable policies and resources.

- Compliance at UConn Health
- 2 Information Privacy and Security
- Managing Confidential Information and PHI
- Protecting Electronic PHI (ePHI)

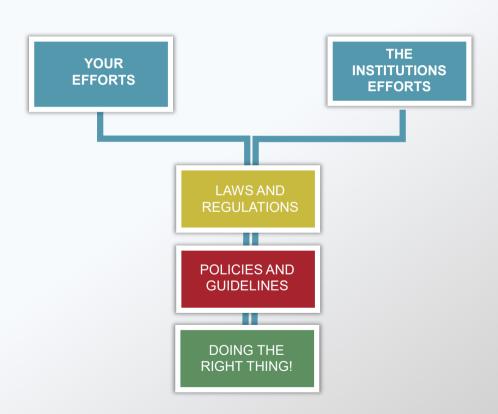
# 1) COMPLIANCE AT UCONN HEALTH

# 1 – Compliance at UConn Health

### WHAT IS COMPLIANCE?

In general, compliance is about your and the institutions efforts to ensure that relevant laws and regulations, as well as internal policies and guidelines are adhered to at all times.

Ultimately, compliance is about doing the right thing!



# 1 – Compliance at UConn Health

# **The Office of University Compliance**

At the direction of the Board of Trustees, the University of Connecticut established the Office of University Compliance to assist in its efforts to promote a culture of integrity and ethical behavior, as well as to adhere to the increasingly numerous and complex federal, state, and local regulatory requirements.

At UConn Health, compliance encompasses laws, regulations, policies and standards in areas such as patient care, billing, reimbursement, student and resident education, contracting, research and information privacy and security.

### WHAT WE DO

The Office of University Compliance has responsibility at all campuses, including UConn Health, and is committed to supporting the entire institution by:

- Serving as a resource regarding various ethics and compliance matters
- Providing ongoing training and education
- Coordinating compliance monitoring activities
- Developing and reviewing policies
- Identifying and investigating compliance concerns



### **UCONN HEALTH POLICIES**

Each of us has an individual responsibility to understand and adhere to ALL UConn Health policies and procedures, and to comply with Local, State and Federal laws and regulations.

As members of the UConn Health community, we are also expected to conduct ourselves in a manner that is consistent with UConn Health's standards and core values, which include:

- Knowledge
- Respect

Honesty

Professionalism

Integrity



# 1 – Compliance at UConn Health

### REPORTING COMPLIANCE CONCERNS

We each have an obligation to report known or suspected policy violations or compliance concerns.

While you are welcomed to report concerns to your supervisor or the appropriate contact person in your department, you also have the option to report concerns to the Office of University Compliance or anonymously via the confidential **REPORTLINE**.

The **REPORTLINE** is operated by a private company and is available to accept reports anonymously 24 hours a day, seven days a week.

### REPORTLINE



1-888-685-2637



Web reporting address:

<u>uconncares.alertline.com</u>/gcs/welcome



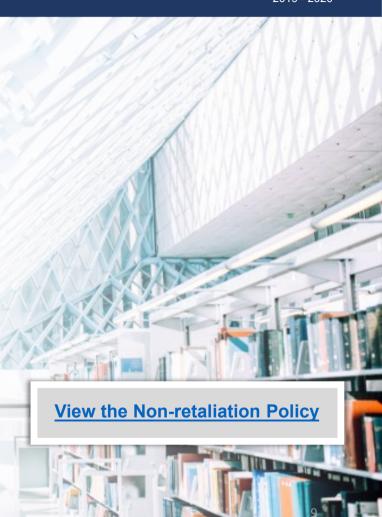
Available 24 hours a day, 7 days a week

# **NON-RETALIATION POLICY**

Retaliation against any individual who, in good faith, reports a concern or participates in the investigation of alleged violations is strictly forbidden.

The Non-retaliation Policy defines how UConn Health provides for the protection of any person or group within its community from retaliation.

Anyone who believes that they have been subjected to retaliation, should either contact the office to which the initial complaint was filed or the Office of University Compliance.



# 2) INFORMATION PRIVACY AND SECURITY

# **PRIVACY AND SECURITY**

As a student, you may encounter situations in which you have access to patient health information or other types of confidential information. You are obligated to ensure the privacy and security of all confidential information with which you come in contact.

This section will familiarize you with important privacy and security principles as well as UConn Health policies and procedures.

### **CONFIDENTIALITY POLICY**

Confidentiality applies to all types of information including:



Confidential information should only be accessed, used or shared when necessary to carry out your UConn Health responsibilities.

**View the Confidentiality Policy** 

## **HIPAA** - Health Insurance Portability and Accountability Act

### The HIPAA Privacy Rule

- established standards to protect all forms of health information created by health care providers, health care institutions and other "covered entities."
- gives patients certain controls over their health information

# The HIPAA Security Rule

- established standards to protect electronic health information (ePHI).
- outlines security procedures to ensure the confidentiality, integrity and availability of ePHI.

# HITECH - Health Information Technology for Economic and Clinical Health Act

HITECH resulted in significant changes to HIPAA Privacy and Security including widening the scope of privacy and security protections and providing incentives for health care information technology.

# **Protected Health Information (PHI)**

### PHI

PHI is any type of health information maintained or transmitted in any medium (verbal, paper, photographed, electronic, etc.) that can be linked to a specific individual by a unique "identifier."

### **ELECTRONIC PHI**

Electronic PHI (ePHI) is protected health information stored on computers, storage devices, or in any UConn Health electronic system

# Some individual identifiers are more obvious than others...

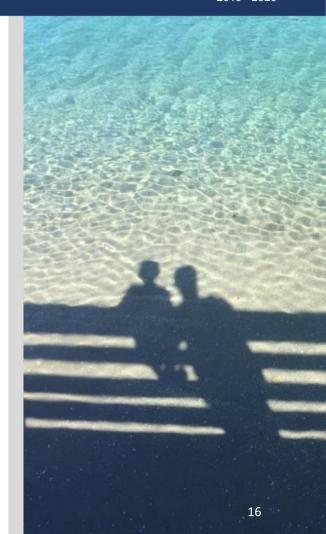
More Obvious	Less Obvious
Name	Vehicle identifiers e.g. license plate
Addresses including email/internet	Dates e.g. birth, death, admission
Zip code	URL and IP address
Phone and fax numbers	Device identifiers and serial numbers
Social security number	Codes related to the individual that can be translated into identifiable info
Medical record number	Any other unique number or characteristic
License numbers	
Account numbers e.g. bank, credit card	
Fingerprints	
Full/partial photo that could identify an individual	

## **De-identified information**

Information in which *all* identifiers are removed such that the information cannot be linked to any individual or be re-identified.

De-identified information is *not* considered PHI and, therefore, is not protected under the HIPAA Privacy rule.

Click here to view the Creation, Use and Disclosure of De-identified PHI Policy



# **HIPAA: Patients Rights**

Patients are entitled to:

Be informed of their rights under HIPAA and how their PHI will be used or disclosed.

Have access to or obtain copies of their health information.

Request corrections of information in their records.

Restrict certain disclosures of their information.

Receive an accounting of certain disclosures of their health information.

Be notified if the privacy or security of their information has been compromised.

# For more information about patient rights under HIPAA:

**Notice of Privacy Practices** 

Patient Right to Request Confidential Communications

Patient Right to View His/Her
Medical/Dental/Research and/or
Billing Record

Patient Right to Request
Restrictions on Use And
Disclosure of Protected Health
Information

Patient Right to Request Copies of His/Her
Medical/Dental/Research and/or
Billing Record

Accounting of Disclosures of Protected Health Information to Patients

Patient Right to Amend His/Her Medical/Dental/Research and/or Billing Record

## **Patient Authorization**

Patient permission to access, use or share their PHI is needed unless the purpose is related to Treatment, Payment for treatment, or "Healthcare Operations" such as quality improvement, training, performance evaluations, audits or as required by law. (These are sometimes referred to as the "TPO exceptions.")

Patient authorization may also be required to use or disclose other identifiable data such as patient photos or audio/video recordings.

Click here to view the Authorization for Release of Information Policy

Click here to view the Visual, Audio, or Other Recording of Patient Data Obtained Through Any Other Medium Policy



# **Minimum Necessary**

PHI that is accessed, used or shared for any purpose other than treatment, should be limited to the "minimum necessary" information needed to accomplish the task at hand.

Students at UConn Health may access and use the minimum necessary PHI consistent with clinical assignments or educational work under the supervision of an authorized faculty or staff teacher.

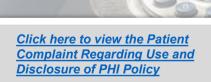
Click here to view the Minimum Necessary Data Policy Use of PHI in Education

# **Patient Complaints**

Patient complaints related to the privacy or security of their PHI should be directed to:

- Patient Relations Department 860.679.3176 or
- Office of Privacy Protection
   & Management
   860.679.7226 / privacyoffice@uchc.edu

Patients may also file a complaint with the Department of Health and Human Services Office for Civil Rights.



# 3) MANAGING CONFIDENTIAL INFORMATION AND PHI



# 3 – Managing Confidential Information and PHI

## **General Reminders**



Wear your UConn Health ID badge at all times to safely enter and exit restricted areas.



If you see anyone in your department without proper ID, ask questions or notify the department manager. Do not assume an individual has authorized access.



**Do not** hold a door open or allow anyone without proper identification to access a restricted area, especially if you do not recognize the person.



Notify UConn Health Police of any immediate safety concerns.

### **Verbal Communications**

Discuss PHI only with those that "need to know" for their assigned job or student functions.

Be sensitive to your surroundings:

Discuss PHI in a private area if possible.

Lower your voice in open areas.

Avoid discussions in public areas such as elevators and cafeterias, even if you think no one can hear you.

# 3 – Managing Confidential Information and PHI

# **Calling a patient**

Use the phone number **designated by the patient** — remember, it may be an alternate number.

Confirm that you are speaking with the patient or someone that has permission to communicate about the patient.

Do not leave PHI on answering machines or with individuals not authorized by the patient.

If leaving a message, provide only your name, that you are calling from UConn Health, who the message is intended for, and ask that the individual return your call.

<u>View the Telephone/Voicemail/Answering</u> <u>Machine Disclosure of PHI Policy</u>

## Someone calling about a patient

Unless a John Dempsey Hospital (JDH) patient "opts out," hospital directory information may be disclosed including:

- hospital room and telephone number to persons that inquire about that patient by name (except patients on the Psychiatric and Department of Correction units).
- a patient's religious affiliation to members of the clergy.

All inquiries about JDH patients must be forwarded to the UConn Health Information Desk or telephone operators.

All media requests for patient information must be forwarded to Health Marketing and Multimedia.



View the Directory Information:

<u>Disclosure of a Patient's</u>

Information Policy

View the Media
Relations Policy

## **Verifying Callers**

Before sharing any PHI, verify:

- the identity of the individual requesting information, including patients who call about themselves.
- that individuals other than the patient have the right to obtain the requested PHI.

Ask open ended questions such as "Can you please verify your address?" rather than "Is your address still....?"

If an individual's identity and/or legal authority cannot be verified, do not disclose any PHI and report the request to your supervisor.

Refer all law enforcement PHI requests (including those by UConn Health Police Department) to your supervisor.

<u>Click the view the Verification of Individuals or Entities</u>

Requesting Disclosure of Protected Health Information Policy



#### **Protecting PHI on Paper**



#### Do:

- Keep documents that contain confidential information in locked areas or cabinets.
- Keep notes/papers with PHI with you at all times if you must carry them and avoid taking into public areas.
   Shred as soon as possible.
- Dispose of paper with PHI in locked shredder bins only.



#### Do Not:

- Leave documents with PHI in your personal vehicle.
- Personally transport or ask a patient to transport a paper medical record from one UConn Health location to another.

Click here to view the Medical/Dental Patient Records:
Transportation of Paper Records and Other Media Records Policy

## 3 – Managing Confidential Information and PHI

## **Mailing/Handing Documents to Patients**

Check and initial each page before mailing or handing documents with PHI.

Use two forms of identification when preparing and when handing documents to a recipient.

Be careful with shared printers to avoid inadvertently including unrelated documents with those being mailed.

Click here to view the Handling Paper Communications
About Patients including PHI Policy

#### Faxing Confidential Information/PHI

- Confirm the correct fax number before faxing.
- Use UConn Health cover sheets for external and internal faxes.
- When faxing outside of UConn Health, always dial "9" followed by the number.
- Collect your papers when you leave a fax machine.
- If you send a fax to the wrong recipient/location or learn of a misdirected fax sent from UConn Health, inform your supervisor or the Office of Privacy Protection & Management immediately.
- If you receive a misdirected fax from another entity, notify the sender.

Click here to view the Faxing of PHI Policy



# 4) PROTECTING ELECTRONIC PHI (ePHI)

## **Using UConn Health Electronic Systems**

Electronic resources are university/state property and are to be used only for UConn Health-related business purposes.

Accesses to electronic patient information systems are monitored regularly.

UConn Health monitors usage of its electronic resources, there should be no expectation of privacy as it relates to your use of UConn Health systems and data.

Log off when you step away from a computer on which you have been working.

Click here to view the Information Technology Computer/Electronic Resource Use Policy

Click here to view the UCHC Information Security: Acceptable
Use Policy

Click here to view the UCHC
HIPAA Security Virus Protection
Policy

## **Password Security: The First Line of Defense**

Create strong but easy to remember passwords by using passphrases such as:

- Don't3fuzzy6Bus
- stop1Hut's2foam



Click here to view the UCHC Information
Security: Systems Access Control policy

Do not share your password with others or allow anyone to access electronic systems using your login information.

Never write your password on a piece of paper taped to your monitor or kept where it is accessible to others.

You will be held responsible for all accesses by another individual using your login information.

#### **HealthONE**

HealthONE is UConn Health's electronic medical record (EMR).

The EMR puts all inpatient and outpatient health care providers, physicians, nurses, pharmacists, and other clinical staff on one electronic platform and allows the entire care team to have immediate access to the same patient data.

HealthONE also allows UConn Health to exchange patient data with other health care institutions.

For more information:

http://uconnhealthexpress.uchc.edu/



#### **ePHI Privacy Reminders**

Before you click on, open, use or disclose PHI, ask yourself "Do I need this information to complete an assigned task?

- If the answer is "yes," it is likely OK.
- If the answer is "no," don't do it.

Unless related to your assigned student responsibility do not access, use or share PHI related to family, friends, employees, supervisors, and other students.

Electronic devices must be scrubbed of all UConn Health information, especially PHI, before removing from use.



#### **Mobile Computing Devices (MCDs)**

Any device used to access confidential UConn Health data or clinical network must have approved security controls.

Personal smartphones or tablets used for email or other UConn Health business must be registered and secured through IT's <a href="https://example.com/Bring-Your Own Device">Bring Your Own Device</a> (BYOD) program.

Report any lost or stolen mobile devices to the <u>UConn Health</u> <u>Police Department</u> immediately.

Click here to view the Mobile Computing

Device (MCD) Security Policy

## **Emailing Confidential Information/PHI**

Emails containing confidential information or PHI that are sent outside of the UConn Health network must be *encrypted*.

Communicate via email only with individuals that are properly authorized to receive the information.

Remember, recipient names may autopopulate the "To" or "cc" lines, so check all names to be sure you are sending to the correct individual(s). Click here to view the Electronic Communication of Confidential Data Policy

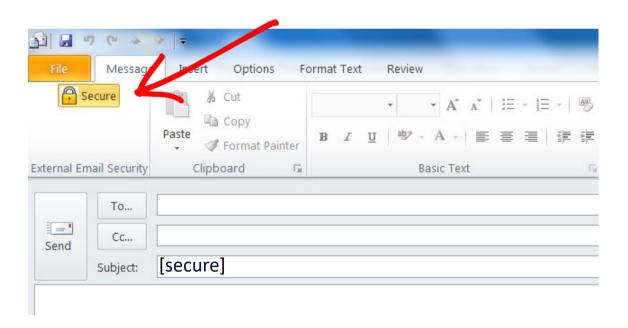
Click here to view the Email
Communication with Patients /
Research Participants Policy

Click here to view the Guidelines for Outlook Email Encryption

## To send an encrypted email

Click the secure icon in the upper left hand corner of the email message screen or

Type [secure] (brackets and the word) in the email subject line or body.



## **Encryption: Remember "SAFE"**

Stolen or lost devices are protected from data theft.

Access and transmit data securely.

Follows HIPAA regulations.

Ensures data integrity and maintains privacy.

#### **Texting and Social Media**

For texting, use one of the following UConn Health approved secure applications:

- Voalte Personal Communicator
- TigerText application

For instant messaging, use Skype for Business.

Report any texts sent without appropriate software immediately to your program director and the IT Security Office.

Information related to your UConn Health work should not be shared on social media. Someone may be able to identify a patient even when minimal identifying information is posted.



## **Social Engineering**

Social engineering describes a range of malicious activity designed to trick individuals into giving away personal information and/or installing harmful software onto their electronic devices or network.

#### Common scams:

**Phishing**: email that invites users to click on links leading to malicious websites in order to steal IDs and passwords.

**SMiShing** (SMS Phishing): uses SMS services to send bogus texts.

**Social Media Phishing**: phishing on social media sites like Facebook and LinkedIn.

**Vishing** (Voice Phishing): traditional phone scams.

**USB drop**: malware-infected USB thumb drives left on the ground waiting to be picked up and used by unsuspecting passers-by.



## How to spot a phishing expedition

The request is urgent and asks for some type of credentials.

There are penalties for not complying with the request.

Spelling errors in the message.

The email and signature are generic, such as "Thank you—The Helpdesk" and are missing logos, accurate phone numbers, names and titles.

The URL web address doesn't make sense and is unrelated to the supposed requesting party.

How to report suspicious email

#### **Helpful Resource:**

PhishAlarm is a tool which allows you to easily report suspicious email.

Click here to learn more about PhishAlarm.



#### Ransomware

Ransomware, usually loaded by clicking on email links or attachments, is malicious software designed to block access to a computer system until a sum of money (ransom) is paid.

Healthcare has been targeted by attackers and is especially vulnerable as ransomware can block access to electronic patient records.

Patient care services may be disrupted and the confidentiality of patient information is jeopardized.



#### **Protect Yourself and UConn Health**

- Be wary of suspicious emails, texts or phone calls that request confirmation of your personal information, offer help or direct you to act immediately.
- Stop and think before clicking on unsolicited links, attachments or downloads.
- Ask questions before acting on any request.
- Keep up to date with anti-virus and anti-spyware security.
- Never use USB drives or CDs that are free or found if you don't know the source of the device
- suspected phishing and other suspicious emails should be sent to servicedesk@uchc.edu

For more information: Cyber Security Awareness

## **Identity Theft**

There are certain "red flags" that signal possible ID theft such as:

Suspicious documents that appear to be forged or altered.

Inconsistent personal information such as address and phone number.

Individuals that are unable to provide identity authentication such as answers to challenge questions.

Trust your gut. If something doesn't seem right, contact your supervisor or the Office of Privacy Protection & Management.

#### **Privacy/Security Incidents**

If you know of, or suspect an improper access to or disclosure of PHI or a security risk such as hacking, immediately notify your program director and the appropriate office:

#### Office of Privacy Protection & Management:

860.679.7226

privacyoffice@uchc.edu

#### IT Help Desk

860.679.4400

helpdesk@uchc.edu

**REPORTLINE**: 888.685.2637 (completely anonymous)

Click here to view the Breaches of Privacy and Security of PHI and Confidential Information Policy

## **Privacy and Security Resources**

#### Office of Privacy Protection & Management

Rachel Rudnick, Chief Privacy Officer 860.679.7334

rrudnick@uchc.edu

#### **IT Security Office**

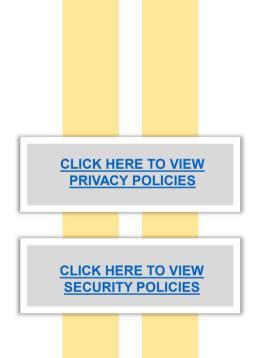
Carrie Gray, Director 860.679.2295

cagray@uchc.edu

#### IT Help Desk

860.679.4400

helpdesk@uchc.edu





# TRAINING QUESTIONS?

#### **Contact:**

Office of University Compliance

860.679.1969

UniversityCompliance@uconn.edu

#### Acknowledgement of UConn Health Confidentiality Policy

I have read, understood, and will comply with UConn Health's Confidentiality Policy.
Print Name: John Doc
Signature:
Date: 10/10/202



#### Unpaid Student Experience Training Attestation

#### Academic Year 2019-2020

By signing below, I acknowledge that:

- I have completed this training, which covered the following:
  - Compliance at UConn Health
  - Information Privacy and Security
  - Managing Confidential Information and PHI
  - Protecting Electronic PHI (ePHI)
- I have read, understood and will abide by the University of Connecticut Code of Conduct.
- I agree to abide by all policies referenced in this training.
- I have been informed about how to ask questions of or report concerns to the Office of University Compliance, the Office of Privacy Protection and Management, and/or the IT Security Office.
- I understand that University policy prohibits retaliation toward any individual asking questions of or reporting concerns to, the appropriate authority.
- I understand that violations of the University of Connecticut Code of Conduct and/or University/UConn Health policies may result in disciplinary measures, as appropriate.

Signature:
Printed Name: John Doc
Date: _/()  0 2020



## SAFETY CHECKLIST FOR UNPAID PARTICIPANTS WITH POTENTIAL EXPOSURE TO WORKPLACE HAZARDS

Applicant and Host Information				
Applicant Name: John Doe		Date of Birth: 7/8/99		
Host Name: Christopher Steele, Jacqueline Steele, and Henry Siccardi	Email address: juhndoegmail.com			
UConn Health Host Department/Division: Internal Medicine Outpatient Clinic				
Who will train and supervise the applicant? Christopher Steele, Jacqueline Steele, and Henry Siccardi				

#### **Exclusions:**

Any activities involving participants under the age of 18 must comply with the University's Minor Protection Policy and Procedures. The following additional restrictions also apply:

- Minors are prohibited from working or studying with or around radioactive material or radiation-producing equipment, biological
  agents, hazardous chemicals, power-driven equipment, or high voltage equipment.
- Minors are prohibited from directly working with laboratory animals. Minors cannot enter the vivarium.
- Minors observing animal experiments or potentially exposed to animals by otherwise working areas where animal work is performed
  must adhere to additional requirements at the discretion of the Office of Environmental Health and Safety.
- Minors are prohibited from entering sensitive locations, which may include clinical care areas, some research areas, and secured unites, at the discretion of Human Resources, the Office of Environmental Health and Safety and the department/unit manager.

#### **Instructions:**

As the host, you are accepting the responsibility for ensuring the safety of the participant named above while working under your supervision. Please discuss each item below with the individual. Your initials and signatures verify you have provided the information indicated.

Action	ı Item:	Yes	No
1.	Will the participant work in a laboratory? (If yes, contact the Office of Environmental Health and Safety).		х
2.	Will the participant work in a non-laboratory area with the potential for exposure to hazardous chemicals? (If yes, contact the Office of Environmental Health and Safety).		Х
3.	Will the participant work with or in an area with radioactive materials, equipment producing ionizing radiation, or lasers? If yes, contact the Office of Environmental Health and Safety as training must be completed).		Х
4.	Will the participant work with laboratory animals? If yes, contact the Office of Environmental Health and Safety).		Х
5.	Will the participant be exposed to human blood or infectious materials? (If yes, contact the Office of Environmental Health and Safety).		х
6.	Will the participant require personal protective equipment? (If yes, then the participant's supervisor must provide it, train the student in its proper use, and inform him/her about the tasks requiring such use).		Х

ction	ı Item:	Participa nt Initials	Host Initia
7.	Participants are prohibited from working with hazardous materials, including blood-borne pathogens, chemicals, and/or stored energy (e.g. steam, electricity, hydraulics). This is consistent with UConn Health <b>Policy 2002-52</b> .	radiation	JS
8.	Discuss safety procedures regarding:		
	a) Use of autoclaves	JD	JS
	b) Disposal of hazardous wastes, expected as directed by the Principal Investigator	JD	JS
	c) Work with hazardous chemicals except for those used in the quantities and manner approved by the	P.I.	JS
	<ul> <li>Activities or work with unfixed human materials and other potentially infectious materials that could potential exposure (splash, contaminated sharps, etc.) irrespective of any personal protective equipr</li> </ul>		J
	e) Use of lasers or systems containing lasers	JD	JS
	f) Work with radioactive materials and/or radiation producing equipment (i.e., x-ray)	JD	JS
	g) Other Department restrictions	JD	JS
9.	Discuss location and use of emergency eyewash and location of emergency shower (without shower activation). in case of contact with a hazardous material immediately flush that body area with copious amounts of water.	Stress that	J
10.	Brief participant on emergency evacuation procedures, the location of the laboratory assembly point, dialing of x for emergency assistance and location of fire pull stations.	7777 or 911	J
11.	Brief participant that in case of a spill that they are: to leave the immediate area, not clean it, and promptly seek from the Host or Office of Environmental Health and Safety.	assistance JD	JS
12.	Provide at no cost to the participant appropriate personal protective equipment. The participant should not be d with potential for a liquid splash of hazardous materials or airborne objects.	doing tasks	JS
13.	Discuss protective gloves and what glove to use and provide these at no cost.	JD	JS
14.	Emphasize that no food or drink is allowed in laboratory areas where chemicals, radioactive materials and human materials/infectious agents are used.		J
15.	Outline the authorized activities, the potential risks and the procedures and equipment that must be followed to those risks. Specific items covered may be listed below.	minimize	JS
	Volunteers will be interacting with patient's in waiting rooms. They should use ha	and ID	
	sanitizer or wash hands before and after interacting with a patient in the waiting	J <i>V</i>	
	room.		
16.	Designate yourself (and a staff member if possible) as responsible for supervising the participant and answering of NOTE: Participants under 18 cannot be unattended in the laboratory.	questions.	J
17.	Outline the UConn Health mandate for prompt reporting of any injury or exposure that may affect health. The apmust report this to BOTH the Host and Human Resources at x8367. Participants requiring medical evaluation or extreatment should visit the Emergency Department.		J

Keep a copy of form in participant file and return original form to the Office of Environmental Health and Safety

Host Signature	Date	Participant Signature	Date
Jacqueline Steele	8/30/19	$\sim$	10/10/2020