

Case Study in Managing Vendor Representative Access to Perioperative Area and Throughout the Hospital

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UI Hospitals and Clinics Overview

- Over 41,000 Patient Admissions/Year
- Over 800,000 Clinic Visits/Year
- 769 Inpatient Beds
- 7,200 Staff
- 1,400 Staff Physicians and Dentists
- 2,100 Health Professional Students in Training



Perioperative Area Overview

- 20,000 cases annually
- Level 1 trauma center
- 22 main suites with 6 ASC suites
- Rooms run from 07:00 16:00 with some designated trauma or extended
- Main OR and ASC each have separate charge nurse



Overview

- The HIPAA Issue
- Our Solution
 - Policy and procedure development and implementation
- The Outcome



The HIPAA Issue

- Need to control access to PHI throughout hospital
 - Pharmaceutical Reps
 - Medical Device Reps
 - Other business vendors
- Do they <u>need</u> access to PHI?
 - For some No
 - For others Yes



The HIPAA Issue

- Vendors who do *not* need access to PHI:
 - Limit their access to hospital
- Vendors who **do** need access to PHI:
 - How do you categorize them?
 - Member of workforce training, discipline
 - Visitor Obtain patient authorization
 - Business associate



- Treating vendor representatives as Business Associates
 - Not BA if need PHI for public health
 - Not BA if they do not need PHI
 - BA if need access to PHI because physician (or nurse) asks for their presence for training purposes
- HHS FAQ re: medical device company



Principles of Policy Creation

- Meet HIPAA expectations:
 - Confidentiality, Access Control
- Surgeon must identify which cases need a vendor
- Reduce vendor access to Surgeons
- Identify vendor presence in OR areas
- Reduce # of vendors in OR
- Transition behavior of staff



Policy Creation

- Think outside the box
- Change is difficult
- Make it work for your system
- Be practical



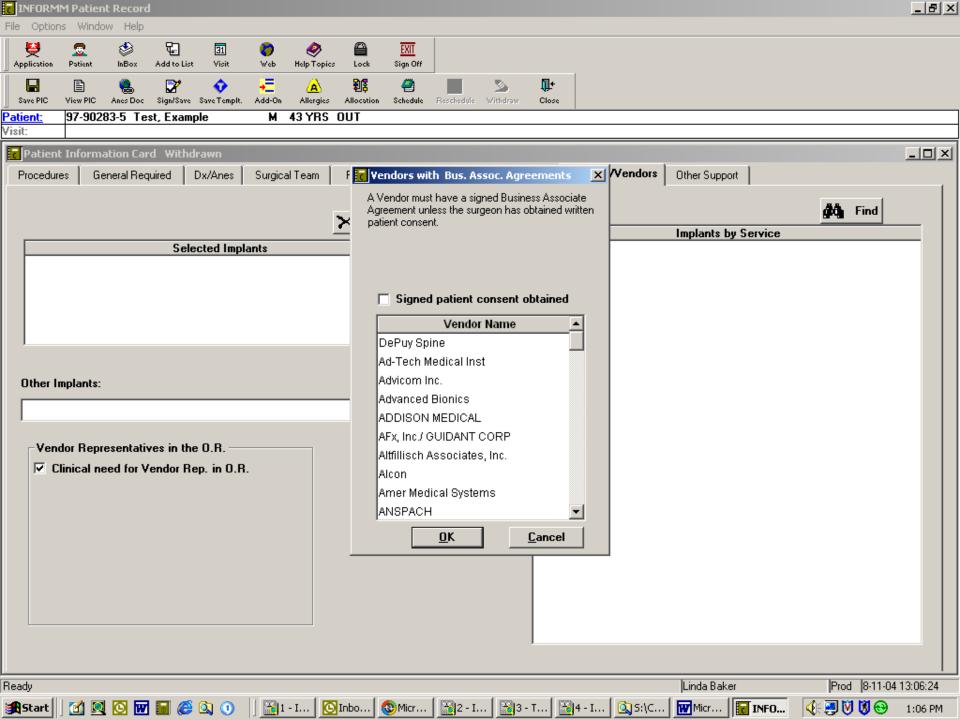
Company Representatives in Perioperative Division

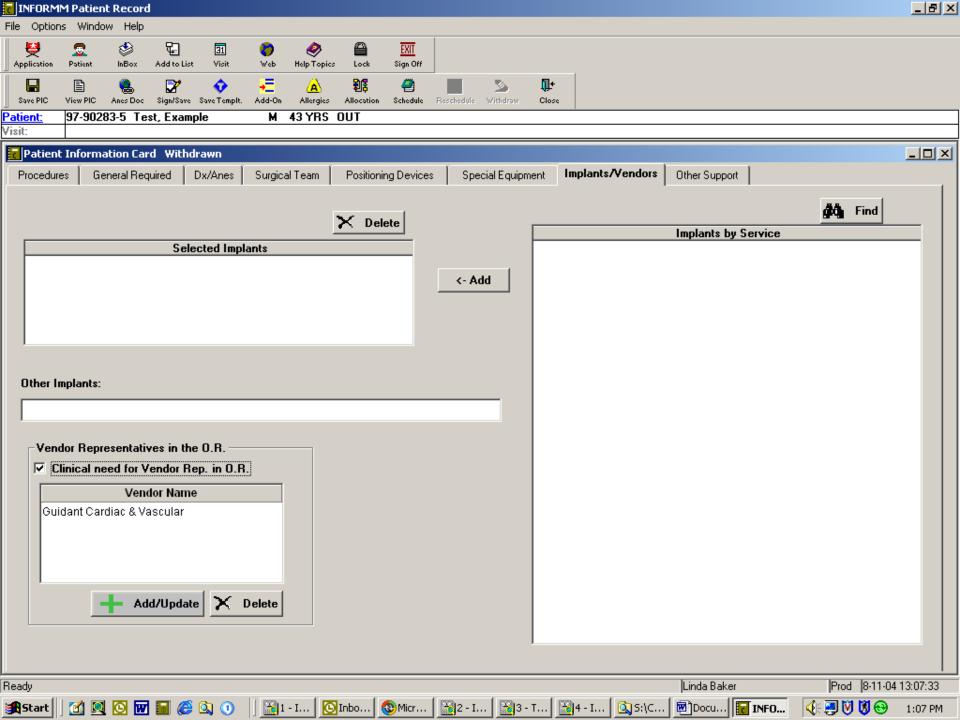
Approval for presence in perioperative care area may be granted **only if**:

a) Vendor company has a signed business associate agreement with UI Hospitals and Clinics

AND

- b) The surgeon has documented that there is a clinical need for presence of representative on Patient Information Card (PIC)
 - Representative will not be allowed in perioperative area if surgeon did not indicate a need for a representative







Company Representatives in Perioperative Division

If there is documentation on the PIC but no signed business associate agreement:

c)The surgeon must obtain written patient consent for the representative to be present during the procedure



Check-In/Out Procedures

- Representative signs in with the **Procurement**Services Department office prior to coming to perioperative area
- Procurement Services will:
 - a) Assure that representative has undergone orientation
 - b) Check OR schedule
 - c) Verify that company has a signed business associate agreement or that patient consent is required
 - d) Provide a dated name badge to representative
 - e) Provide white scrubs to representative



Check-In/Out Procedures

After checking in with Procurement Services:

- Change into surgical attire, with badge visible
- Sign in with charge nurse and identify surgeon you will be working with
- Go to assigned operating room, reps only allowed in assigned operating room
- Identify yourself to circulating nurse

Upon completion of work:

- Sign out with charge nurse
- Change into street clothes
- Sign out and leave badge with Procurement Services



Discipline

Discipline for failure to follow policy:

- **First Offense**: Faculty physician paged and asked to verify clinical need. Representative reminded of policy and letter sent to District Manager.
- Second Offense: Faculty physician paged to verify clinical need. Letter sent to department head and chair. Access will not be granted to representative until vendor's district manager meets with named UIHC staff.
- Third Offense: All offending vendor company rep privileges suspended for 1 year.



Change Culture of Vendors and Staff

- Mandatory meeting with vendors
 - Discussed policy changes, answered questions
- In-service for OR nursing
- Charge Nurses
- Communication with surgeons, surgical services and others



Implementation

- Compliance staff assisted in monitoring this process
- Compliance was in procurement services
- Compliance was in the OR
- Issues were dealt with on the spot
 - Check-in/out
 - Scrubs
 - Surgeon compliance





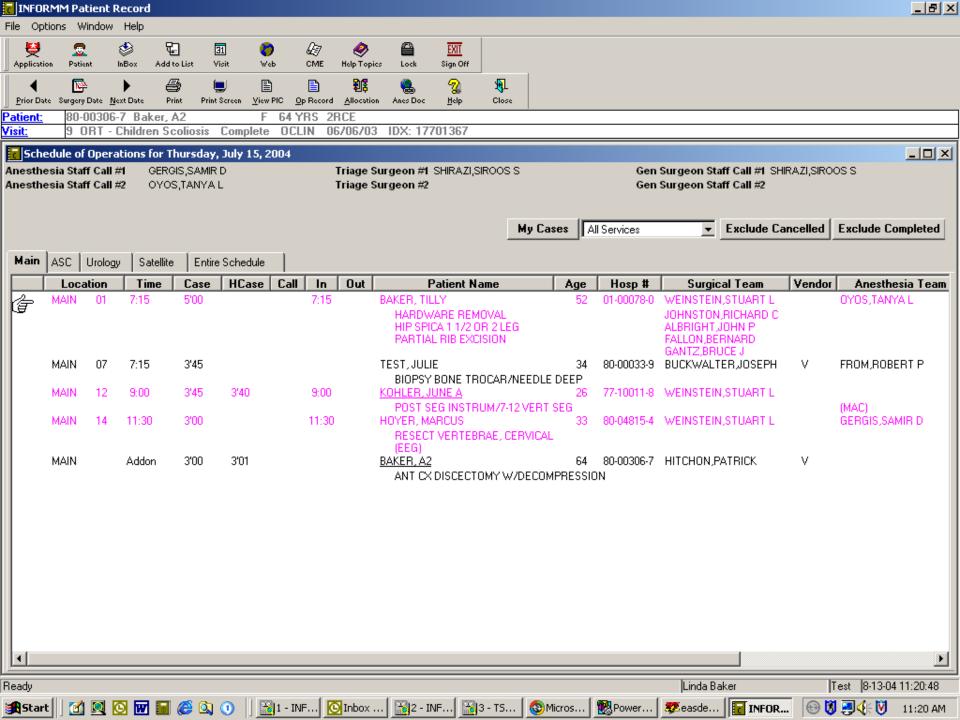
Overall Benefits

- HIPAA Compliance:
 - Confidentiality
 - Security
- Easier identification of external people
- Staff empowerment



Benefits

- HIPAA Compliant
- Controlling access
- Have listing of who is in OR daily
- Up to date listing of vendors that have BAA
- Physicians no longer solicited in OR
- Long term- device control and supply chain optimization





Still to Come

- Implementing in other clinical areas performing procedures
- New security system