

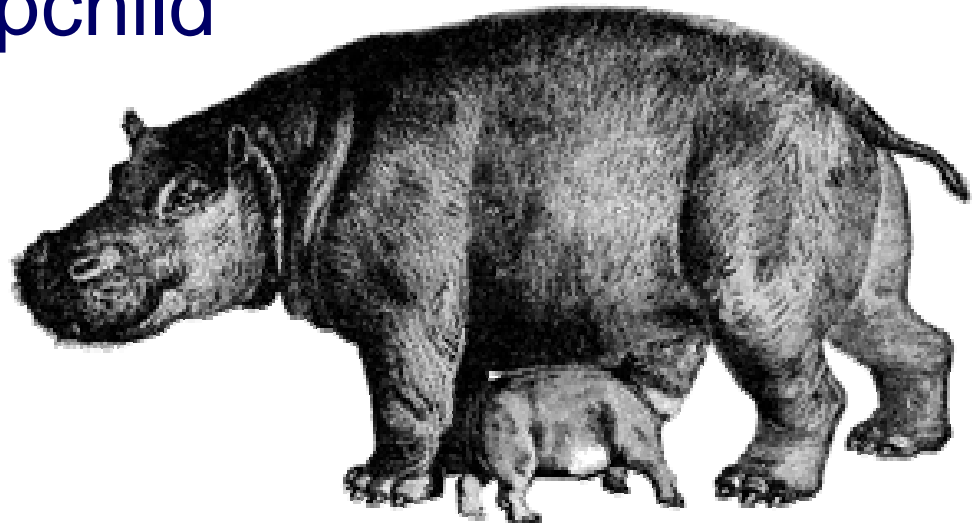


# HIPAA sensitivity: Moving Towards a HIPAA culture

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# Q: Why Am I Talking About Culture??

A: Because no one really pays much attention to this HIPAA “stepchild”



# What is HIPAA Compliance?

- HIPAA policies, procedures, processes and mechanisms:
  - Typically seen as an end in themselves, i.e. HIPAA compliance
  - Are really a means to an end:

***A HIPAAculture!***

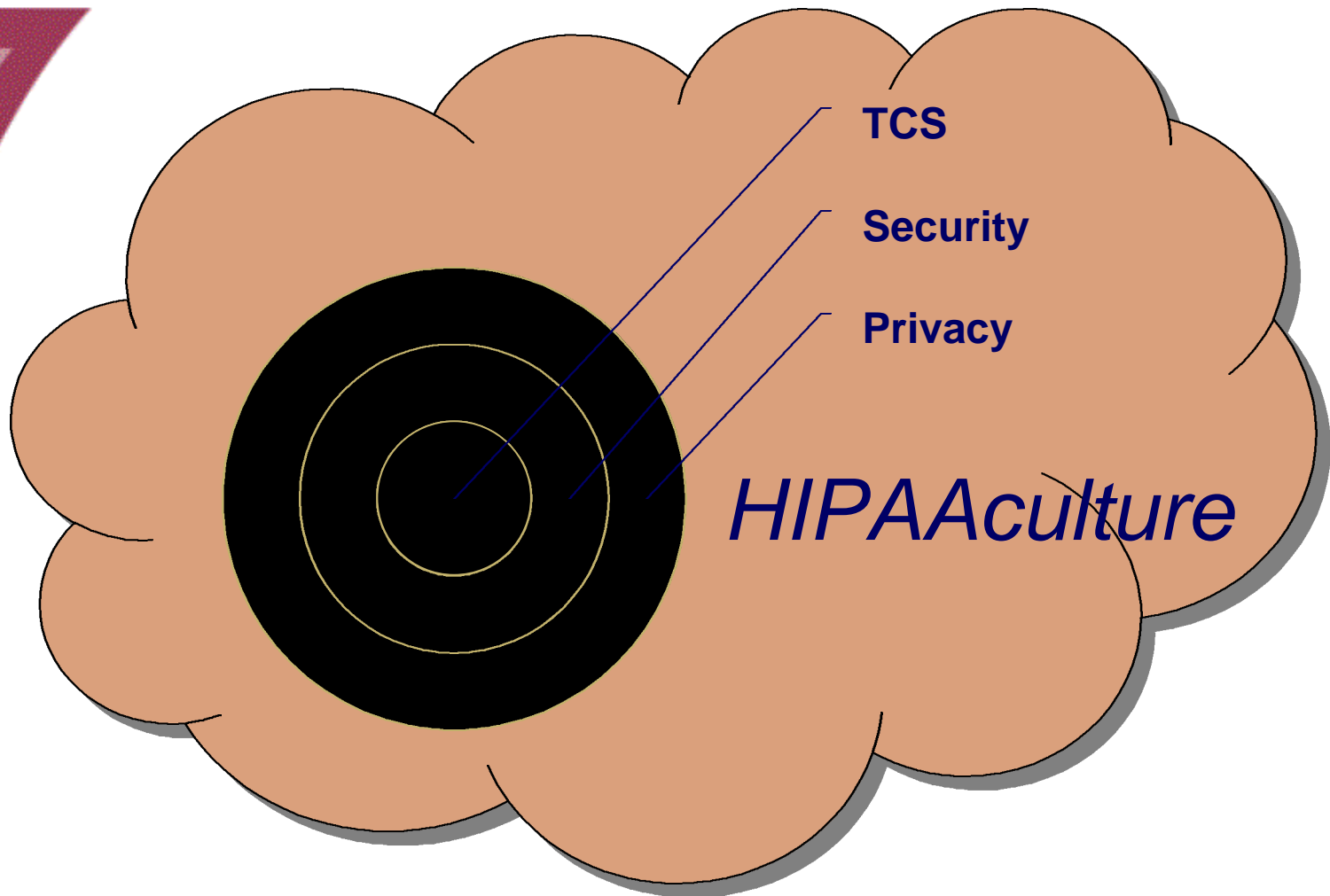




# HIPAAculture: “Touchy-Feely”, But Is Essential – and Requires Hard Work!



# Layers of HIPAA Compliance



# Perception is Everything...

- HIPAA has been **promulgated** as distinct rules, measures, safeguards:
  - Many “HIPAA people” **see** it this way
- Instead, must be **seen** as a blueprint to achieving change in behavior and culture – as well as technology change
  - **within** healthcare organizations, and
  - **across** the industry




# Industry Culture

- Access to information is valued by all – and often seen as a right
- Healthcare confidentiality is valued more in theory than in practice
  - Protective practices have received little industry attention or guidance
  - Healthcare workers have widely divergent views of what is to be secured and to whom this applies

# Why Culture Matters

- Culture: a hazy, slippery concept, but a very real aspect of life and work
- Resistant or inappropriate cultures are the most frequent reason for failure of organizational initiatives
  - Despite good reasons for change, an existing culture can undermine and derail implementation
- Culture must be pulling in same direction as the plan





Let's try to understand HIPAA  
culture change in real-world  
terms...

# What is a “HIPAAculture”?

- HIPAAculture: “where compliant behaviors and sensitivity to privacy and confidentiality become second nature and assumed”

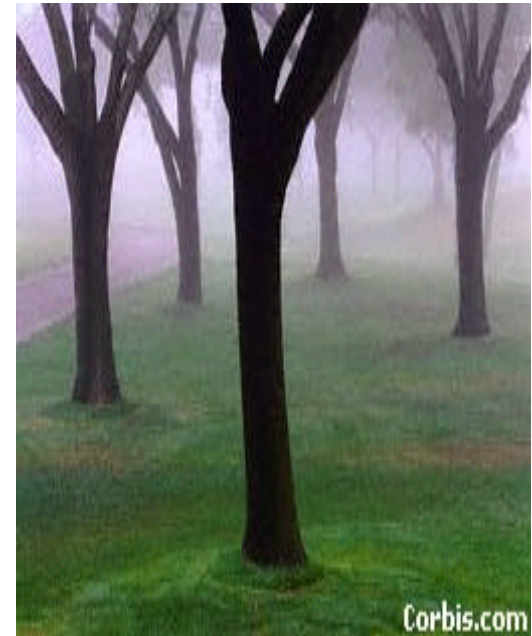
# “Field of Dreams”

- Everyone says HIPAA requires culture change, but few have a clue about achieving it
- “Build it and they will come” approach only works in the movies
- Rules, tools and sanctions provide a structure of information – how can they be translated into new behaviors?



# Or...Trees VS Forest?

- Organizations often focus on “planting trees” (policies, system changes, technical security fixes), without
  - **Envisioning** the “forest” (the needed culture)
  - **Assessing** how fertile the soil is (current culture)
  - **Preparing** the soil
    - Regular **care** and feeding





Successful HIPAA compliance  
**requires** a “change management”  
initiative

# Typical HIPAA Implementation Process:

- Focuses on “externals” ---
  - Establish Privacy and Security offices
  - Establish policies, procedures, forms, systems
  - Develop and execute training programs
  - Set up monitoring and audit systems
  - Investigate, report and respond to incidents
  - Enforce through sanctions
  - Document everything



# Goals of Typical Implementation Process:

- Provide all the “essential externals” named in the law – the visible manifestations that indicate compliance
- To meet letter of the law
- To prevent obvious exposure, fines, and legal action

# Compliance Starts – and Ends – with “Internal” Factors

- HIPAA mandates **behaviors** too!
- Behaviors within organization are guided by
  - **Shared values**, e.g. How much does the workforce – AND management -- care about patient privacy rights or securing data relative to other priorities?
  - **Perceptions**, e.g. Does workforce see that leaders are committed to privacy and data security?
  - **Beliefs**, e.g. We already do all that should be done to treat patients’ information confidentially.

# Related “Internal” Factors

- Organizational leadership commitment
- Individuals’
  - understanding of the law and reasons/need for it
  - Recognition of their responsibility and accountability



# Practical Implications...

## What is Our Culture Today?

- Conduct behavioral/cultural “gap analysis” across organization
- Give this assessment same priority as gap assessment of “externals”

# Practical Implications...

## Perform --

- A **survey** of management and workforce attitudes towards
  - Privacy and confidentiality issues
  - Regulatory compliance
  - “Corporate” initiatives, in general
  - Change
  - What’s “really” important to management
  - Other potential factors

# Practical Implications...

## Consider --

- What are our stated and unstated corporate missions?
- What are the missions of member groups?
- What features characterize our culture?
- What is our style of management?
  - proactive vs. “head-in-sand” or “wait and see”
  - Openness to change
  - Attitudes toward Federal/State regulation
  - CEO support or lack of it
  - Authoritarian vs. consensus driven

# Practical Implications...

## Consider --

- Built-in impediments to culture change, i.e. separate facilities, size, diversity?
- How do organization members communicate with each other?
- Politics
  - Strong, influential pockets?
  - Relations between clinical staff & management
  - Relations between HIPAA execs – Privacy and Security Officers, Compliance Officer, CIO, Director of HIM, Gen Counsel, etc
  - Strength/influence of executive sponsor, compliance staff, training staff



# Practical Implications...

## Consider:

- Where does PHI originate and flow into, through, and out of organization?
- How has enterprise handled past organizational changes?
  - Lessons learned?
- How does organization normally educate / train / develop staff?
  - What has worked / hasn't worked?

# Practical Implications...Where Do We Need to Go?

- What is the organization's "vision" of itself as a HIPAA-compliant enterprise?
- What are key elements of the new culture that must be in place to match that vision?
- What new values, perceptions and beliefs are required?
- What behaviors/habits are required?
- What knowledge is required?

# Practical Implications...**Connect the Dots**

- Apply cultural gap analysis results to overall HIPAA Plan and implementation strategy
- Throughout implementation, keep looking back at these needed/desired outcomes...you will find the answers expanding



# Six Steps to HIPAA Cultural Change

- Base change strategy on gap analysis
- Define flow of authority and influence, to reinforce executive decisions
- Design learning and motivation process
- Design management reinforcement and control process
  - Line managers must understand linkage between their activities and HIPAA compliance
  - Must measure and report



# Principles in Culture Change

- Provide a meaningful, clear corporate vision so that individuals see their behavior as contributing to something of value and importance.
  - Think: I'm building a cathedral – NOT I'm carving a stone (Henry Adams)
- Top leaders must be unequivocally identified with the vision

# Principles in Culture Change

- The gap between current reality and the corporate vision must be made clear to all.
  - Awareness efforts must demonstrate this, **and**
  - Day-to-day experience must support it
  - Reinforce the concept that a culture that got the organization where it is today, is not necessarily appropriate for where it wants to go tomorrow.
  - A breach in the vision will generate doubt and resistance

# Principles in Culture Change

- This gap perception is needed to evoke a “start-up” mentality
  - Staff feels a **need** to achieve a strong privacy/security-oriented environment, and
  - “Start-up” perspective inspires commitment, enthusiasm, resourcefulness, high productivity



# Principles in Culture Change

- Major cultural change **requires** competent leadership at the top – and participation by **all** managers
  - The higher the leader’s level of authority, the better the coordination and cooperation
  - Strategies should be set in partnership with middle and supervisory management
  - Project leader must be a genuine “force” who will drive the needed changes
    - Think “will-do” as well as “can-do”
  - All managers should be “plugged in” to implementation process and progress



# Principles in Culture Change

- Guided culture change requires:
  - Systemic approach – not piecemeal
  - Respecting “reasonableness” and “scalability”
  - “Hitting” hard and fast
    - Strong, firm message
    - Rapid momentum towards change
    - Consistent follow-through
- Don’t start until leadership is ready and willing (genuinely committed)

# Principles in Culture Change

- People more likely to change if they think there is a “win” for them or the organization, e.g:
  - New policies/procedures provide needed clarity
  - Everyone, eventually, is a patient. Patient info will be treated as staff would want theirs treated
  - Having a “HIPAAculture” should promote patient trust and willingness to share needed information
  - Forward-thinking, ethical public image
  - Will help enable eHealth initiatives

# Principles in Culture Change

- Imbedded beliefs, values and habits carry voltage
  - Change always means losing something
    - if only the familiar
  - Planning should include identifying who will be losing what, in order to plan for collisions
  - Leaders should expect to be experience pressure, stress from response

# Principles in Culture Change

- The most powerful learning comes from direct experience
  - E.G., learning to make right decisions is best gained by making decisions based on working thru small risks
  - Think “OJT” by departmental HIPAAgurus



# Principles in Culture Change

- Information is not education!
  - Learning HIPAA requirements and sanctions won't change behavior
- Behaviors and habits must change in order to change thinking and learning – not the reverse

# Principles in Culture Change

- Learning is rooted in the real world
- Awareness initiatives should
  - Acknowledge what's already being done to protect privacy rights and confidentiality
  - Make the leap between technical HIPAA language to everyday activities – tailored to staff
  - Help staff address and resolve real-world problems
  - Rely on case studies, examples – not principles and concepts
  - Encourage sharing of experiences
  - Provide readily available support and tools
  - Give “information” in small, easy-to-swallow bites

# Principles in Culture Change

- Staff more likely to change if asked to **take responsibility** for behavior and for developing required new skills
- Tools, resources must be made available how, when and where they work best, e.g.
  - HIPAA Resource Center
  - Intranet-based or other CBT
  - Departmental HIPAAgurus
  - HIPAAhotline
- Workers should be given new, identifiable and appropriate “HIPAA roles”
- Staff must be held accountable for performance



# Motivation and Reinforcement

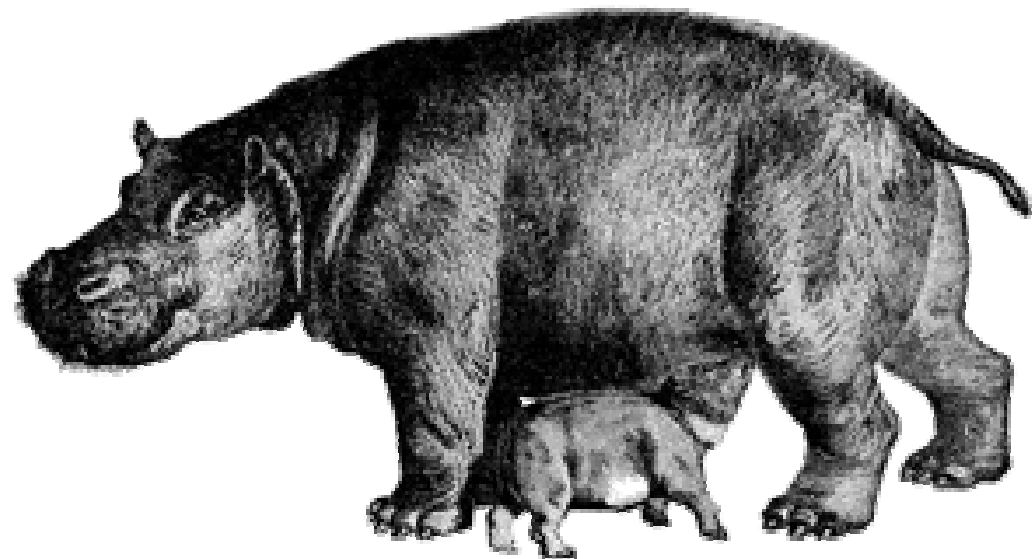
- Change requires both! Ideas to consider...
  - HIPAA “campaign” (posters, contests, teams, etc). Make HIPAA a “cause”.
  - HIPAA “communing” (online or email forums, regular “HIPAA sound-off” time in staff meetings, etc.)
  - HIPAA news / Q-As on Intranet or thru newsletter



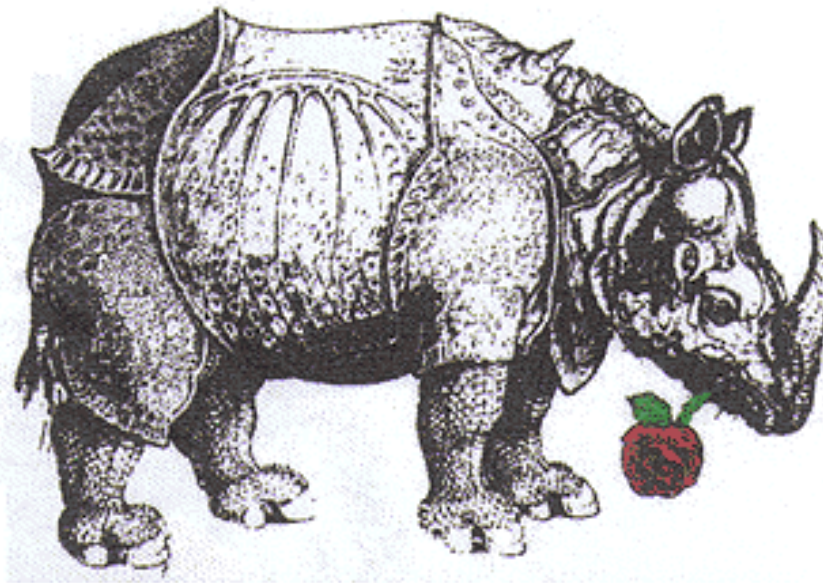
# Bonus Benefits of HIPAAculture

- Consumers and patients are attracted to and support organizations with values and styles they respect
  - Think Ben and Jerry's, the Body Shop, Amazon.com
- Employees more likely to work for, stay with, and work harder for organizations they can feel proud of

This “step child” of HIPAA  
needs its share of  
care and feeding




If it doesn't receive proper attention, we may be faced with another animal altogether!



Just Doo It.





# To learn more about cultural change management, begin with

- **The Classic: Managing Transitions,**  
by William Bridges, 1991
- **The Dance of Change,** by Peter  
Senge, 1991



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