



### **VIOLENCE IN THE WORKPLACE**

We hope that all healthcare workers go to work looking forward to taking care of patients and interacting with team members; however, most may not know that research shows healthcare employees experiences significant levels of violence. Data from the **Bureau of Labor and Statistics** revealed that in 2018, health care and social service workers were five times more likely to experience workplace violence than all other workers, and this group comprised 73 percent of all nonfatal workplace injuries and illnesses requiring days away from work.

Workplace violence is defined by the National Institute for Occupations Safety and Health (NIOSH) as "violent acts, including physical assaults and threats of assault, directed toward persons at work or on duty." Enforcement action is taken when the assault is physical, but verbal violence can cause trauma and stress as well that can impact employees' well-being.

Violence can be initiated through many different pathways:

- Domestic violence spilling into the workplace
- Disgruntled patients or family members
- Individuals seeking narcotics
- Co-worker disagreement
- Robbery

### IN THIS ISSUE

### VIOLENCE IN THE WORK-PLACE

**PAGE -1-3** 

# YOUR PATIENTS RIGHT OF ACCESS

PAGE 4-5

### **COMPLIANCE JOURNEY**

PAGE 6

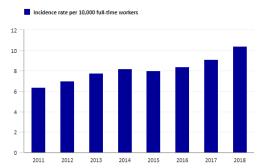
#### **ONLINE TRAINING**

PAGE 7

#### IT'S YOUR CALL

PAGE 8

Chart 1. Incidence rate of nonfatal workplace violence to healthcare workers, 2011-18





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# **VIOLENCE IN THE WORKPLACE**

Chart 2. Number of nonfatal workplace violence injuries and illnesses with days away from work, 2011-18

Currently there are no specific Federal OSHA standards addressing workplace violence, but employers under the <u>General Duty Clause</u>, are required to provide their employees with a place of employment that is "free from recognized hazards that are causing or are likely to cause death or serious physical harm." Employers should take time to consider how to protect and respond to situations that would fall under the definition of workplace violence.



Preparedness is the first step in preventing violence at work. In their document, <u>Preventing Workplace Violence</u>: A Road Map for Healthcare

<u>Facilities</u> OSHA outlines five core building blocks which when implemented should reduce the chance of a violent event.



# **VIOLENCE IN THE WORKPLACE**

- 1. **Management commitment and employee participation**. The leadership team must be fully engaged and committed to this program, set the example, and make this a priority. Employees are critical to the success of the program and their feedback about real life issues and their ability to report workflow processes will be valuable.
- 2. **Worksite analysis and hazard identification.** As with any program, understanding how work is performed and identifying associated risk must occur before policies can be developed. For instance, if a single employee arrives early each morning and parks in a dark parking lot, this creates an ideal situation for perhaps a robbery. What could be done to lower the risk? Looking at all workflow processes and asking what the inherent risk would be if the process is unchanged is a good first step in addressing potential violence risks.
- 3. **Hazard prevention and control.** The logical next step is addressing the identified hazards. This may occur through creation of policies, such as a No Tolerance of Violence policy and/or adding equipment such as additional lighting or a Panic Button so that front desk staff can alert others to a dangerous situation that may be in process.
- 4. **Safety and Health Training.** All workers MUST know what to look for and how to respond to potentially violent situations. Training should occur when the program is created and implemented, and then as needed to ensure each worker is educated on protection.
- 5. **Recordkeeping and program evaluation.** Any violent incident must be documented, including full details of the event. OSHA has specific record keeping requirements if anyone is injured. Law enforcement may also be involved in this process. Incident reports should be evaluated to determine if additional prevention measures should be employed to reduce the likelihood of future events.

If you are interested in creating a more robust prevention program, OSHA has created an excellent resource to assist. <u>Guidelines to Preventing Workplace Violence for Healthcare and Social Workers</u> information that is directed to healthcare environments and provides guidance along with a helpful checklist.

TMC is excited to announce that in conjunction with <u>National Safety Month</u> and to further provide information on this important topic we have partnered with Jerry McCormick for a live <u>webinar</u> on June 14, 2022. Jerry is a retired Police Captain and a national and international presenter on how to stay safe in unexpected or emergency situations.



# HIPAA COMPLIANCE

## **Your Patients' Right of Access**

The HIPAA Privacy Rule grants patients the right to access their health information in a way that is easy and affordable for them. Providers are required to give patients access to their health information. There are some exceptions, of course, so getting the process right can be as confusing as being in a house of mirrors.

Patients are entitled to receive all information a provider maintains about them in one or more designated record sets. A designated record set is any information the provider uses to make decisions about a patient and includes medical, dental, and billing information. It also includes any information in the patient's file received from other providers or the patient themselves and includes all electronic systems and paper files, not just the patient's information in an EHR system. A patient

may not always ask for their entire record, but it is always a requirement to provide what is requested.

The OCR has been focusing on investigating complaints from patients experiencing issues getting access to their own health information, the health information of their children, or those in their care for the past two and a half years. During that time, there have been 27 enforcement actions issued as part of these investigations that the OCR calls its HIPAA Right of Access Initiative. So far, the average penalty has been \$60,000, with the highest reaching \$200,000. Each comes with a one or two-year corrective action/monitoring plan.



A leading cause of the OCR's enforcements in the HIPAA Right of Access Initiative is the failure to provide all the information a patient has requested and is entitled to receive.

If you would like to learn more about this important subject, please join Abby Mitchell for "How Does Your Practice Respond to a Patient's Right of Access?" on May 5, 2022, at 12:00 PM Eastern.





HIPAA COMPLIANCE



There are a few circumstances where providers are permitted to deny a patient's request for records. Two of them are:

- √ When records contain psychotherapy notes, or psychotherapy notes are specifically requested, they can be omitted or the specific request for the notes can be denied. Psychotherapy notes are only those taken by a mental health professional during therapy sessions and are used to recall details and the provider's personal observations about the session specific to their personal analysis.
- √ Any information a provider's office has collected in preparation for or that will be used in a civil, criminal, or administrative action or proceeding can also be denied if requested by the patient.

However, the most common violation that has led to patient complaints and enforcements is a slow or lack of response to record requests. Some providers have ignored multiple requests from a patient for their health information for several years, which causes the patient to file a complaint and leads to an OCR investigation. Providers are required to respond to a patient's request as soon as possible, but no later than 30 days from the date of request. Under certain circumstances, the provider can notify the patient in writing that they will need a 30-day extension but must provide the patient with the reason for the extension, and the date the patient can expect their records.

It is easy to see how quickly this process can become complex. There are several other important considerations such as fees, the format of requests, or patient requests to review access denials, to name a few.

It's important to have the right resources to ensure your process follows the proper guidelines. TMC clients not only have immediate access to forms and guidance in our Client Portal but have a personal consultant as well as easy access to expert support by contacting Client Services.

# **COMPLIANCE JOURNEY**

### IT'S ALMOST HERE!

Something amazing is on the horizon at TMC! Your compliance journey is about to get even easier with us. Get ready for compliance expertise, delivered the way you need it.

Streamlined, focused, and brand-new, our renovated website will be a user-focused compliance experience.

Our team worked diligently to create a website with you in mind. We had a great time It was rejuvenating to get back in a creative space all together again! Making decisions of how to best find topics and help you find the best option for your compliance programs and the best way deliver it to you.

Finding your way around the renovated website will be a piece of cake! Your time is valuable, and we want you to find what you are looking for quickly. With this idea in mind, we have streamlined navigation where you will find things you need for your compliance program whether it is purchasing a new compliance program, adding on to what you already have, or evaluate what you need for your compliance. We have also simplified our TMC Client Portal. With just two clicks, you can find the eForms for your compliance manuals, officer webinars, and access our value-added services such as eSDS, online training, secondary labels, and our electronic manual. If you haven't already subscribed, you can get the latest newsletters with one click.

We are still putting on the finishing touches. Stay tuned for the exciting launch of our newly renovated website in just a few weeks!

We cannot thank you enough for your feedback on our website. You helped us create an improved experience. We listened, we saw, and we did it. Customer service is our priority so remember if you have questions, please do not hesitate to contact us at service@totalmedicalcompliance.com.

"Better user experience and steamlined navigaiton"





# **ONLINE TRAINING**

## **TMC Online Training**

We are always looking for better ways to serve you. Along with our newly renovated website, we are also continuing to improve our online training. In February's newsletter, we wrote about the new functions that allow admins to print certificates, assign courses in bulk, and access previous year's training data. We are now going to add a new and improved tutorial video next month.

The video will include basic functions and the new admin functions mentioned above. This video will walk you through:

- Adding users
- Assigning courses
- Printing certificates
- Running reports
- Accessing previous year's data
- Changing the expiry date on courses not started
- Resending welcome emails
- Editing users
- Deactivating users



We have already customized our login instructions on the online training home page. It provides help on the page if you are unable to login. Remember the home page for our online training login is different than our TMC Client Portal main website.

Customer feedback is always important to us, and we are listening! If you have a few minutes, please let us know what you think at info@totalmedicalcompliance.com.



# IT'S YOUR CALL

## IT'S YOUR CALL

## **OSHA:**

Q. Our healthcare facility checks COVID-19 community levels to monitor transmission rates in our county. Will the community levels determine the preventive steps for our office?

# **HIPAA:**

Q: How quickly do you have to reply to a patient's request for their records??

Click Here
For Blog Link







# MONTHLY COMPLIANCE COMMUNICATOR

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### **INSTRUCTIONS**

Print and post newsletter in office for staff review. Each member should sign this form when completed. Keep on file as proof of training on these topics.

### **IN THIS ISSUE**

### VIOLENCE IN THE WORK-PLACE

**PAGE -1-3** 

# YOUR PATIENTS RIGHT OF ACCESS

PAGE 4-5

#### **COMPLIANCE JOURNEY**

PAGE 6

#### **ONLINE TRAINING**

PAGE 7

#### **IT'S YOUR CALL**

PAGE 8