Safeguarding Paper with Protected Health Information

Safeguarding Paper PHI

It is the policy of SFGH to comply with state and federal laws governing the protection and confidentiality of PHI. This includes PHI in paper form.

- PHI should only be used, accessed, or disclosed in accordance with the hospital’s Policy 8.11 Authorization for Use and Disclosure of Protected Health Information.
- You should never take printed material containing PHI off campus without a specific business need.
- If you are transporting records to another department or campus, ensure the documents are secure and with you at all times.
- You should always take steps to safeguard paper PHI and prevent others from viewing the documents.

Mailing and Faxing Paper PHI

When mailing and faxing documents containing PHI, always:

- Double check all mailings. Ensure you have enclosed only the patient information that pertains to the person. Please ensure all mailings are correctly prepared for sending.
- To avoid breakage during shipment or mailing, do not overstuff the envelope or package as documents may fall out.
- When faxing PHI documents, you should always confirm the fax number to which you are sending the information.
- Always use a cover sheet. The cover sheet should not include any patient identifiers and should include a confidentiality statement.

Protect Paper PHI in your Workspace

When using PHI, you should avoid unnecessarily exposing documents containing PHI:

- Paper PHI should be placed face down, facing away from the view of others, or locked away when you are not working with the documents.
- Blank cover sheets should be placed over the front of paper charts and medical records that are located in a semi-public area (i.e., outside of patients’ exam room doors).
- Paper PHI should not be left unattended on photocopiers, printers, fax machines, or in common areas (such as conference rooms).
- To safely dispose unwanted paper PHI, it should be placed in secure shredding bins.

Report Loss, Theft, or Misdirected PHI

When PHI is lost, stolen, or disclosed to the wrong recipient (misdirected), you should:

- Notify your supervisor and the Privacy Officer immediately. For misdirected or mishandled documents, try retrieving it from the recipient who received it in error as soon as possible.
- The Privacy Officer will instruct and assist you to mitigate and remedy the loss, theft, misdirected or unauthorized disclosure of PHI. The Privacy officer will investigate the incident to determine whether a breach of PHI has occurred.
- In the case of theft, you should also notify the police.

Report a Privacy Breach

Report every potential breach of protected health information (PHI):

- Privacy Office: Maggie Rykowski (415) 206-4294
- NEW! Privacy Hotline: (855) 729-6040
- Email: Maggie.rykowski@sfdph.org or andera.sun@ucsf.edu
- Policy: Reference to Reporting a Privacy Breach Policy [#8.27]

The Privacy Office also provides consultation on all privacy-related questions. If you have any questions, please feel free to contact us.