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## Behavioral Health Services Monthly Director's Report January 2017

### 1. HEALTH INSURANCE PORTABILTY AND ACCOUNTABILITY ACT (HIPAA)

#### *HIPAA*

The Health Insurance Portability and Accountability Act was passed in 1996. HIPAA changed the way health information is shared in the health care market. What individual state laws once governed is now a federal law with corresponding regulations. Health care providers are impacted by HIPAA in virtually every aspect of work. HIPAA incorporates several legislative actions such as fraud and abuse laws, privacy and security of health information laws, enforcement provisions of group health plan regulations, etc. HIPAA governs the use and disclosure of protected health information (PHI) by covered entities and business associates.

#### *HIPAA Privacy Regulations*

Keeping patient information confidential has always been part of the ethical obligation of health care providers. However, an overriding theme to privacy regulations is to place control over health information in the hands of the individual who is the subject of the information. In addition to regulating the uses and disclosures of PHI, the privacy regulations also provides individuals with certain rights regarding their own PHI. These regulations were drafted with the intent of allowing free flow of information for the provision of health care. Privacy regulations can be broken down into two major categories: ways in which PHI can be used or disclosed and the right provided to individuals regarding their PHI. The ways PHI can be used or disclosed can be further divided into three sub categories:

1. Uses and disclosures without an individual's explicit permission
2. Permitted used and disclosures if the covered entity had given the individual an opportunity to object
3. Uses and disclosures only with the individual's explicit permission

### *Individual Rights under the Privacy Rule*

The federal privacy regulations under HIPAA grant individuals certain rights to be informed about and to control their PHI. Individuals are given, among others, the right to access, inspect and copy health information; request an amendment to PHI; request restriction and confidential communication; and receive an accounting of disclosures.

### *Other HIPAA Privacy Rule Information*

- The term minimal necessary is used in HIPAA to identify the amount of PHI that should be used or disclosed in a particular circumstance. Health care providers must only use and share the minimal amount of PHI needed to accomplish a task or activity.
- When PHI is being requested the health care provider must have a valid process in place to verify the identity of the party requesting the information.
- There are external parties such as vendors, contractors, legal counsel, that DPH may conduct business with on a daily basis. Before PHI can be shared with external parties, there must be a business associate agreement in place that, at a minimum, defines the function of the business associate and PHI restrictions.

### *Security, Privacy and Confidentiality*

As it relates to HIPAA security, privacy and confidentiality can be confusing. Security applies to the spectrum of physical, technical and administrative safeguards put in place to protect the integrity, availability and confidentiality of PHI and the systems in which it is stored. Privacy refers to the right of an individual to control his or her PHI and to keep it from being divulged or used by others against their wishes. Confidentiality means protecting PHI from other individuals and entities.

### *Privacy Violations*

Privacy violations perpetuates negative publicity and threatens the integrity of a health care provider. Unintentional privacy violations are subject to civil monetary penalties up to \$25,000. Intentional violations are subject to criminal penalties up to \$50,000 and one year in prison. The fine increases up to \$250,000 and ten years in prison for selling patient information.

## **2. ASSISTED OUTPATIENT TREATMENT (AOT)**

As seen in the Director's Report from November, Assisted Outpatient Treatment (AOT) celebrated a milestone and has completed one full year of implementation! The team has had an opportunity to analyze outcome data that was collected during our first year of implementation and we are excited to share some preliminary results.

We are pleased to report that there has been a statistically significant reduction in PES contacts when comparing pre and post AOT engagement. While there has not been a statistically significant difference for inpatient hospitalizations, we have a trend towards significance for a reduction in jail contacts. Given the intensive needs of this population and the small time frame of implementation, we are hopeful that we will continue to find positive results.

We look forward to continuing to support individuals referred to the program, as well as their families and support systems. As always, if you would like more information about AOT, please visit our webpage at [www.sfdph.org/aot](http://www.sfdph.org/aot). If you would like to make a referral to AOT, please contact us at 415-255-3936.

### 3. CHILDREN, YOUTH AND FAMILIES (CYF)

#### Chinatown Child Development Center

During the month of December, the Chinatown Child Development Center continued with annual tradition of hosting the agency's holiday party for over 100 children and families served throughout the year. The festive event this year was sponsored by the San Francisco Police Department, Del Monte Meat Company, Ng Ning Kee Book Stores, local community and businesses, which made this event possible. SFPD also helped to barbeque hot dogs and hamburgers for our clients and participants, and retired officer also dressed as Santa Claus to pass out presents of toys, games, books, puzzles and gift baskets for our low-income children and families. It was an honor to have our former staff/retirees to help and to participate in this traditional festivities as well. As the year comes to an end, we are particularly grateful and proud of what had been accomplished this year and we will continue to serve our clients and families with quality care, focus on service to our community, as well as set new goals for year 2017!

#### L.E.G.A.C.Y

L.E.G.A.C.Y held the last CAB meeting of the 2016 year, which had a good turnout. L.E.G.A.C.Y was also able to gather and transport clients to the EQRO for consumers on December 8<sup>th</sup> at 1380 Howard Street. The Girls' Empowerment Group that was taking place at CAT ended on December 14<sup>th</sup>.

L.E.G.A.C.Y provided outreach at the Family Resource Fair and facilitated a community meeting with Health Generations in Potrero Hill on December 12<sup>th</sup>. In substitution for Family Support Night (FSN), L.E.G.A.C.Y collaborated with the Family Mosaic Project and the SF Fire Department to host a Family Holiday Fair for the community, which was a success.

### 4. MSHA NEWS

#### Transgender Health Services goes to Inaugural USPATH

Transgender Health Services staff have been selected to present several mini symposiums at the first ever United States Professional Association for Transgender Health (USPATH), in Los Angeles, CA.

USPATH is a conference organized by the World Professional Association for Transgender Health (WPATH), with the intention to bring together all those who have a stake in improving and maintaining respectful, high quality, culturally competent health services for the Transgender community worldwide. Those who are in attendance include transgender community members and allies, medical and mental health providers, academic researchers, lawyers and others working to create evidence based care for transgender and gender non-conforming individuals.

The conference will be held Thursday, February 2 – Sunday, February 5. Transgender Health Services staff will be presenting ten (10) sessions, including a town hall on phalloplasty procedures, mental health

concerns related to gender affirmation among those served by the public health system, the benefit of hiring and utilizing peer navigators, and a workshop focusing on how the medical model for gender affirmation creates barriers for some communities of color.

#### 9<sup>th</sup> Annual Peer and Family Conference

The 9<sup>th</sup> Annual Peer and Family conference was held on December 16 at the San Francisco Main Library. The theme of the conference was entitled “Create Your Wellness Tools for 2017.” was held on December 16<sup>th</sup> at the SF Main Library. There were over 90 peers, family members and providers in attendance. The program featured a keynote speaker, Phillip Cha, with a screening of a documentary titled *Unheard Voices*. The conference also featured a panel presentation, six workshops, and community resources.

#### 4<sup>th</sup> Annual Trans Health and Wellness Fair

The fourth annual Trans Health and Wellness Fair was held on December 12, 2016. There were 110 attendees, including 30 agencies present. There was HIV testing, flu shots, and information on programming specifically targeting the Trans Community. In addition, the event was planned and staffed by peers. The purpose of the fair is to link Trans identified individuals into community services in a safe and culturally responsive environment. Agencies that participated included Glide, TransThrive, Community United Against Violence (CUAV), Project Inform, Mission Mental Health, Alliance Health Project/UCSF, Westside Crisis, and many more.

**Tell us your clinic story and we will add it to the upcoming Director’s Reports**

*Past issues of the CBHS Monthly Director’s Report are available at:*

<http://www.sfdph.org/dph/comupg/oservices/mentalHlth/CBHS/CBHSdirRpts.asp>

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