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Managing White Water: How Effective Compliance Programs Help Organizations Navigate Change

A White Paper for Healthcare and Behavioral Health Leaders on HIPAA and Compliance Program Effectiveness

By Rachel Seeger, Founder and Principal, North Country Communications, LLC



Executive Summary

Healthcare and behavioral health organizations operate in an environment of constant change. Regulatory requirements evolve, workforce challenges emerge, reimbursement models shift, and patient needs continue to grow in complexity.

Many organizations respond to these pressures by addressing issues as they arise. An audit finding prompts corrective action. A complaint triggers an investigation. A new regulation results in revised policies and procedures.

While those responses are necessary, they often focus on immediate challenges rather than the underlying conditions that create organizational risk.

Effective compliance programs provide something more. They help leaders strengthen operations, improve accountability, identify emerging risks, and navigate change with greater confidence. In today's environment, compliance is not merely a regulatory obligation. It is a strategic tool that helps organizations build resilience and prepare for the future.

For organizations subject to HIPAA and related requirements, this shift in perspective matters. A privacy and security program built only to respond to incidents leaves leaders reacting. One built to find root causes helps them anticipate.

This paper explores how healthcare and behavioral health organizations can use compliance programs to better understand organizational risks, support operational effectiveness, and successfully navigate periods of change.

Understanding Organizational White Water

I have often thought about organizational change through the lens of two simple images: foam on water and the challenge of navigating white water.

Years ago, I frequently discussed leadership and organizational change over coffee with a former colleague and mentor at the Centers for Disease Control and Prevention, the late Thom Blakeney. A veteran with a gift for practical wisdom, Thom had a way of cutting through complexity and getting to the heart of a problem. When challenges emerged, he would sometimes refer to them as "foam on water."

The phrase stayed with me.

When faced with change, foam is what we immediately notice. It is visible, urgent, and often demands our attention. In healthcare and behavioral health organizations, the foam may take the form of an audit finding, a policy failure, a staff complaint, a privacy incident, a regulatory citation, or a leadership transition.

The foam is real, and it must be addressed.

But the foam is rarely the whole story.

Beneath the surface are the currents that created it. Those currents may include inadequate oversight, outdated policies, insufficient training, operational gaps, poor communication, competing organizational priorities, or a failure to anticipate change.

Together, they create what I think of as organizational white water.

Organizations that focus exclusively on addressing the foam often find themselves responding to the same problems again and again.

Organizations that understand the underlying currents are better positioned to address the root causes, strengthen operations, and prepare for future challenges.

Managing Rough Waters

Many leaders assume that stability is the normal state of an organization and that change is the exception.

Increasingly, the opposite is true.

Healthcare and behavioral health organizations operate in an environment that often resembles white water more than calm water. New regulations, workforce pressures,

evolving service delivery models, technological innovation, changing payer expectations, and increased accountability create a constant state of motion.

Waiting for conditions to settle before making improvements is rarely realistic.

Successful organizations do not wait for calm water. They develop the systems, processes, and leadership capacity needed to navigate the uncertainty of white water.

Effective compliance programs play an important role in this effort.

They provide structure when circumstances are changing, visibility when risks are emerging, and accountability when difficult decisions must be made.

Looking Beneath the Surface

Organizations sometimes view compliance primarily as a mechanism for responding to specific events.

When something goes wrong, compliance steps in.

A complaint triggers an investigation.

A breach triggers notification requirements.

A survey finding prompts corrective action.

These responses are important, but they address symptoms rather than causes.

Strong compliance programs help organizations look beyond individual incidents and understand the underlying factors that contribute to risk.

They provide leaders with information about:

- Organizational vulnerabilities
- Policy and process gaps
- Emerging regulatory challenges
- Training needs
- Oversight responsibilities
- Operational effectiveness

Viewed this way, compliance becomes more than a regulatory function. It becomes a management tool that supports informed decision-making and continuous improvement.

What this looks like in practice

Consider a privacy incident: a misdirected email, a lost laptop, an employee who accessed a record without a business reason. The organization investigates, determines whether the HIPAA Breach Notification Rule applies, notifies those affected, and updates a policy. That is the foam, and it has to be handled well.

During my years at the HHS Office for Civil Rights, I saw how often the incident itself was not the real issue. Investigators looked past the event to the conditions behind it: whether the organization had conducted an accurate and thorough risk analysis, whether its policies matched how staff actually worked, whether workforce training went beyond a signed attendance sheet, and whether anyone with authority was watching. Those are the currents. An organization that fixes only the incident will likely face the same problem again, often with higher stakes.

For behavioral health providers, the currents are more complex. HIPAA, 42 CFR Part 2, and state privacy laws can all apply to the same record, and growth, new technology, or a change in leadership can quietly open gaps no one has examined.

Five Characteristics of Organizations That Navigate White Water Well

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The following characteristics are not unique to any one organization or regulation. They reflect the core elements of effective compliance programs described in federal guidance, including the HHS Office of Inspector General's General Compliance Program Guidance, and they apply directly to HIPAA privacy and security programs.

1. Leadership Commitment

Every effective compliance program begins with leadership.

Boards, executive teams, and organizational leaders establish expectations and set the tone for accountability.

Organizations are better equipped to navigate change when leaders actively engage in compliance oversight, discuss organizational risks, and dedicate appropriate resources to compliance activities.

Questions leaders should consider include:

- Are compliance responsibilities clearly defined?
- Does leadership regularly assess organizational risks?
- Does the governing board receive meaningful compliance information?
- Are compliance considerations integrated into strategic planning efforts?

In HIPAA terms, this includes designating a privacy official and a security official, and ensuring those roles have real authority and board visibility.

2. Practical Policies and Procedures

Policies should support operations, not simply satisfy regulatory requirements.

Many organizations accumulate policies over time that no longer reflect actual practice. Others struggle to maintain documentation that keeps pace with regulatory change.

Effective policies function much like navigational charts. They help organizations maintain a consistent course, even when conditions become uncertain.

Strong policy management includes:

- Regular review and revision
- Alignment with operational practices
- Clear accountability for implementation
- Accessibility for staff
- Ongoing communication and education

In HIPAA terms, policies and procedures should be documented, implemented, and periodically reviewed and updated, which is a higher bar than having them on the shelf.

3. Meaningful Training and Communication

Training should do more than document attendance. Organizations benefit most when education programs help staff understand expectations, recognize risks, and apply compliance principles to real-world situations.

Training contributes to stronger organizational performance when it:

- Addresses actual operational challenges
- Reflects organizational priorities
- Reinforces accountability
- Promotes consistent practices
- Builds confidence among leaders and staff

Effective training helps organizations recognize emerging risks before they become visible on the surface.

In HIPAA terms, workforce training on privacy and security is required when people join the organization and when policies or practices materially change, and the Security Rule calls for an ongoing awareness program. Annual refreshers are widely considered best practice, and investigators look at whether training reflects how people actually work.

4. Risk Assessment and Monitoring

Organizations cannot manage risks they do not understand.
For organizations subject to HIPAA, this is not only good practice. An accurate and thorough enterprise-wide risk analysis is a core requirement of the Security Rule, and it is often the first thing regulators look for after an incident.

Regular risk assessments help leaders identify developing currents before they become significant disruptions.

Assessment and monitoring activities can help organizations:

- Prioritize resources
- Evaluate controls

- Identify vulnerabilities
- Assess readiness for change
- Support ongoing improvement efforts

The goal is not to eliminate risk. The goal is to understand risk well enough to make informed decisions. In HIPAA terms, because operations and technology change, the risk analysis must be kept current, not filed away.

5. Continuous Improvement

Strong compliance programs evolve alongside the organizations they support.

New services, leadership transitions, organizational growth, regulatory changes, and shifting community needs all create new challenges.

Organizations that navigate white water successfully embrace continuous improvement as an ongoing process rather than a periodic event.

Continuous improvement includes:

- Program assessments
- Corrective action planning
- Performance monitoring
- Process evaluation
- Stakeholder feedback
- Strategic adjustment

Organizations that adopt this mindset are often better prepared for future challenges and opportunities. In HIPAA terms, this includes periodically evaluating whether privacy and security safeguards still fit the organization’s operations, and acting promptly when gaps are found.

Growth Creates New Currents

Growth is exciting.

It can also introduce new complexities.

Organizations that expand services, enter new jurisdictions, pursue acquisitions, increase staffing, or adopt new technologies often encounter new compliance obligations and operational risks.

Growth frequently changes the current beneath the organization's surface.

Strong compliance programs help leaders understand those changes, evaluate risks, and make thoughtful decisions before problems emerge.

By integrating compliance into planning and decision-making processes, organizations are better positioned to grow without losing visibility into the factors that support long-term success.

Conclusion: Navigating the Water Ahead

Thom Blakeney's "foam on water" and the challenge of navigating white water both remind us that what we see on the surface is not always what matters most. Leaders are often called upon to respond to visible challenges: an audit finding, a staffing shortage, a complaint, a policy gap, or a regulatory change. Yet these events are often symptoms of deeper organizational currents. Effective compliance programs help leaders look beneath the surface, understand those currents, and navigate change with greater confidence.

Healthcare and behavioral health organizations cannot eliminate change.

They cannot calm every rapid, predict every obstacle, or control every condition they encounter.

What they can do is build the systems, leadership capacity, and organizational awareness needed to navigate change effectively.

Leaders will always encounter visible problems that demand immediate attention. The temptation is to focus entirely on what is happening at the surface.

But lasting success depends on understanding the conditions beneath the surface and preparing for what lies ahead.

Effective compliance programs help organizations do exactly that.

They provide structure, visibility, accountability, and resilience.

A well-designed compliance program cannot prevent every challenge. But it can help leaders understand the current, navigate the white water, and move forward with confidence.

About North Country Communications

North Country Communications provides strategic compliance and advisory services to healthcare and behavioral health organizations, with a focus on HIPAA and 42 CFR Part 2 compliance. Founded by Rachel Seeger, a former senior advisor at the HHS Office for Civil Rights (2010–2023) and recipient of the HHS Secretary's Award for Meritorious Service, the firm brings an enforcement-informed perspective to risk assessment, policy development, training, and readiness for regulatory change. We help leaders and teams strengthen operations, manage risk, and navigate change through practical, tailored solutions that support long-term organizational success.

If your organization is growing, changing, or simply wondering what is beneath the surface, North Country Communications can help you find out. Contact us to schedule a free, confidential compliance readiness conversation.

https://www.northcountrycommunications.com
(518) 290-1230
(877) NORTH-20
info@northcountrycommunications.com