

	Security	Rio Grande Valley HIE	Policy: S7
	Effective Date 11/20/2015	Last Date Revised/Updated 11/20/2015	Date Board Approved: 11/20/2015
Subject: Administrative Safeguard – Security Awareness and Training			

FEDERAL REGULATION:

45 CFR 164.530(b)
45 CFR 164.308(a)(5)
Texas Health and Safety Code §181.101

POLICY:

RGV HIE trains all members of its workforce on the policies and procedures with respect to security awareness and protected health information required, as necessary and appropriate for the members of the workforce to carry out their function within RGV as follows:

- 1) Privacy training shall be provided to each member of the workforce upon initial orientation and prior to beginning their duties and in no case more than sixty days of their date of employment.
- 2) Security awareness training shall be provided to each member of RGV HIE workforce upon initial orientation and prior to beginning their duties and in no case more than sixty days of their date of employment.
- 3) Additional training shall be provided to each member of RGV whose functions are affected by a material change in the policies or procedures required, within a reasonable period of time after the material change becomes effective.
- 4) Each employee shall be required to attend refresher training regardless of whether changes have occurred in privacy and security laws and/or in RGV HIE policies.

RGV HIE documents that the training has been provided and the documentation retained in HR records for six years from the date of the training. The documentation includes the signature of the employee upon completion of training.

PROCEDURE:

All individuals given access to the handling of PHI under RGV HIE are required to attend training on the policies and procedures with respect to privacy and security awareness associated with protected health information required by HIPAA, as necessary and appropriate for the individual to carry out their function within the organization.

The Information Security Officer and Privacy Officer shall ensure that all employees and contract staff have the appropriate level of training so that all workforce members who access, receive, transmit or otherwise use electronic information or who set up, manage or maintain systems and workstations that access, receive, transmit or store electronic information are familiar with RGV's policies and procedures.

- HIPAA Training
 - New employees, trainees, and volunteers will be required to attend HIPAA mandatory training upon initial orientation and prior to the beginning of assigned duties.
 - Active employees, contract staff, and volunteers or individuals granted access to PHI under RGV HIE will be required to attend mandatory quarterly privacy training on HIPAA
- PHI Compliance
 - All employees, trainees, and volunteers granted access to PHI will receive the essential verbal or written information on HIPAA compliance requirements and access to view current RGV's HIPAA Policies and Procedures Manual.
 - Management staff overseeing employees or individuals granted access to PHI under RGV HIE, will be required to attend training on HIPAA compliance requirements and enforcement procedures annually and as necessary and appropriate to assist the Privacy Officer.
 - All employees, trainees, and volunteers granted access to PHI will be required to sign a written acknowledgement form indicating receipt and understanding of all materials covered during training, to include agreement to abide by all regulations under RGV HIE for HIPAA compliance prior to the beginning of assigned duties.
 - All employees, trainees, and volunteers promoted or reassigned to a position with access to PHI under RGV HIE will be required to attend mandatory HIPAA training on approval to access, prior to the beginning of assigned duties and annually thereafter.
- Security Awareness 164.308(a)(5)(i)
 - Security reminders 64.308(a)(5)(ii)(A)
 - RGV HIE shall provide security awareness training with all new hires before they are given access to ePHI.
 - RGV HIE shall provide periodic security mini-training through alerts, briefings and training updates when HIPAA Security law, regulations and guidance are updated.
 - RGV HIE shall develop and implement procedures to ensure that warnings are issued to the Workforce of potential, discovered or reported threats, breaches, vulnerabilities or other HIPAA security incidents (see RGV HIE Incident Report).
 - Protection from malicious software 164.308(a)(5)(ii)(B)
 - RGV shall develop and implement procedures for guarding against, detecting and reporting, new and potential threats from malicious code such as viruses, worms, denial of service attacks, or any other computer program or code designed to interfere with the normal operation of a system or its contents and procedures.
 - All employees, trainees, and volunteers shall attend training to identify and protect against malicious code and software and report such incidents to the Information Department.

- RGV shall notify employees, trainees, and volunteers of new and potential threats from malicious code such as viruses, worms, denial of service attacks, and any other computer program or code designed to interfere with the normal operation of a system or its contents and procedures.
- RGV shall ensure that any system that has been infected by a virus, worm or other malicious code is immediately cleaned and properly secured or isolated from the rest of the network.
- RGV HIE shall ensure a detection system is implemented on all workstations including a procedure to ensure that the virus detection software is maintained and up to date (see HIPAA Policy S12 - Workstation Use).
- RGV shall implement a mechanism to log, document, review and report failed login attempts on each system containing medium and high-risk ePHI (see HIPAA Policy S1 - Risk Analysis and Management).
- RGV shall develop and implement procedures for creating, changing, and safeguarding passwords ePHI (see HIPAA Policy S6- Information Access Management).

VIOLATIONS

Any individual, found to have violated this policy, may be subject to disciplinary action up to and including termination of employment.

**Rio Grande Valley Health Information Exchange
HIPAA Privacy & Security Training
Initial Employment Training Record**

Name _____

Dept / Program _____ Date _____

Job Title _____

I have been fully instructed as to compliance with HIPAA and its relationship to my job duties. I am aware of the importance of the State and Federal regulations for following safe work practices for the use and disclosure of private health information.

I have reviewed RGV's Privacy and Security Policies and Procedures and agree to abide by all the requirements as indicated. I understand that I am responsible for any and all access to the RGV HIE network resulting from the use of my individual access control and password. I fully understand that with any form of violation of policy, I will be subject to appropriate and applicable disciplinary actions, up to and including termination.

Signature _____ Date _____

For Administrative Use Only	
Date of Hire _____	Date of Beginning Assigned Duties _____

This training record shall be kept as part of the employee's personnel record for 6 years after the date of training