

JORDAN VALLEY EMS AUTHORITY POLICY

POLICY #: 103.4.5

SUBJECT: PRIVACY AND SECURITY TRAINING

CAAS STANDARD: 103.4

SCOPE: ALL EMPLOYEES AND VOLUNTEERS

PURPOSE:

To ensure that all members of Authority Staff -- including all employees, volunteers, students and trainees (collectively referred to as "staff members") -- who have access to patient information understand the organization's concern for the respect of patient privacy and are trained in the Authority's policies and procedures regarding Protected Health Information (PHI) and the security of e-PHI.

POLICY:

All current and new employees will be trained in privacy procedures in accordance with the procedure identified below. This policy applies to all Authority staff members. This includes those who have access to PHI or e-PHI, as well as those who do not ordinarily have access or a need to access to it.

PROCEDURE:

All current staff will be required to undergo privacy and security training in accordance with the HIPAA Privacy Rule and the HIPAA Security Rule.

1. All new staff members will be required to undergo privacy training in accordance with the HIPAA Privacy and Security Rules within a reasonable time upon association with the organization, as scheduled by the Privacy/Information Security Officer.
2. All staff members will be required to undergo privacy training in accordance with the HIPAA Privacy and Security Rules within a reasonable time after there is a material change to the Authority's policies and procedures on privacy practices and the security of patient information.
3. The Privacy and Security Training will be conducted by the Privacy/Information Security Officer or his or her designee.
4. All attendees will receive copies of the Authority's policies and procedures regarding privacy and security of e-PHI.
5. All attendees must personally complete the training and verify completion and agreement to adhere to the Authority's policies and procedures on privacy and security practices.
6. Training will be conducted via a video presentation or by instructor led training in a classroom environment. Periodic review of privacy practices may be conducted via video training, lecture or one on one review by a supervisor or FTO.
7. Topics of the training will include a complete review of the Authority's privacy and security policies and procedures and will include other information concerning the HIPAA Privacy and Security Rules, such as, but not limited to, the following topic areas:
 - a. Overview of the federal and state laws concerning patient privacy including the Privacy and Security Regulations under the Health Insurance Portability and Accountability Act of 1996 (HIPAA)
 - b. Description of protected health information (PHI) and electronic protected health information (e-PHI)
 - c. Patient rights under the HIPAA Privacy Rule
 - d. Staff member responsibilities under the Privacy and Security Rules

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- e. Role of the Privacy/Information Security Officer and reporting employee and patient concerns regarding privacy issues
- f. Importance of and benefits of privacy compliance
- g. Consequences of failure to follow established privacy and security policies
- h. Use of the Authority's specific privacy and security forms

POLICY HISTORY:

Implemented February 1, 2015