

Workforce Confidentiality

POLICY

To ensure that personal health information (PHI) is protected, the County will educate and train all employees on the privacy provisions of the Health Insurance Portability and Accountability Act of 1996. The County will support and require the following items.

COUNTY PRINCIPLES

- 1) All County employees and persons associated with the County are responsible for protecting the confidentiality of all PHI that is obtained, handled, learned, heard or viewed in the course of their work or association with the County.
- 2) PHI shall be protected during its collection, use, storage and destruction within the County.
- 3) Use or disclosure of personal health information is acceptable only in the discharge of one's responsibilities and duties and based on the need to know. Discussion regarding PHI should not take place in the presence of persons not entitled to such information or in public places.
- 4) The execution of an employee confidentiality agreement (**see Employee Confidentiality Agreement**) is required as a condition of employment/contract/association/ appointment with the County. All County employees and persons associated with the County are to sign the confidentiality agreement at the commencement of their relationship with the County. County employees are to sign a confidentiality agreement on an annual basis.
- 5) Unauthorized use or disclosure of confidential information will result in disciplinary action based on procedures as outlined in the Cedar County Employee Handbook.
- 6) All individuals who become aware of a use or disclosure of PHI that violates the HIPAA privacy provisions are to follow the County's reporting procedures.

PROCEDURE

- 1) An allegation of a breach of confidentiality of PHI may be made to the Cedar County HIPAA Privacy Officer. Any individual receiving an allegation of a breach of confidentiality or having knowledge or a reasonable belief that a breach of confidentiality of PHI may have occurred should immediately notify the County privacy officer.
- 2) The County privacy officer will decide whether to proceed with an investigation. It may be decided that a complaint does not require investigation if:
 - a) The length of time that has elapsed since the date of complaint makes an investigation no longer practicable or desirable.
 - b) The subject matter of the complaint is trivial or not made in good faith or is frivolous.
 - c) The circumstances of the complaint do not require investigation.
- 3) If the decision is made to proceed with an investigation, it is the responsibility of the County's privacy officer to investigate the allegation and consult appropriate resources to make a determination if a breach of confidentiality of PHI has been made.
- 4) If a breach of confidentiality of PHI has occurred, the appropriate disciplinary action will be taken.

- 5) All incidents of a breach of confidentiality of PHI will be documented and filed with the County's privacy officer.

Training

- 1) All new employees will receive privacy training as a component of their orientation to Cedar County.
- 2) All members of Cedar County's workforce will receive retraining if policies and procedures change and as necessary.
- 3) All privacy training provided to members of the workforce will be documented and maintained in personnel records.
- 4) Documentation of privacy training is maintained by the Privacy Officer according to the requirements of the Privacy Rule and filed in the personnel files as appropriate.
- 5) Annual confidentiality agreement will be distributed and signed on April 1 of each year and maintained by the Human Resources Coordinator.
- 6) New Hire HIPAA training will be done by the Privacy/Security Officer with cooperation of the Department Head and Human Resources Coordinator for scheduling of this training.