


COUNTY OF IMPERIAL
DEPARTMENT OF BEHAVIORAL HEALTH SERVICES

POLICY AND PROCEDURE MANUAL

SUBJECT: Sanctions for Violation of Privacy Policies	PROCEDURE: 01-33
SECTION: Administration	EFFECTIVE DATE: 4-14-03
REFERENCE: 45 C.F.R. Section 164.530	PAGE: 1 of 3
AUTHORITY: Behavioral Health Director as the Local Mental Health Director and Alcohol and Drug Administrator	SUPERSEDES: New Procedure
	APPROVED BY: 

PURPOSE: To establish a procedure for implementing sanctions for violations of Imperial County Behavioral Health Services (ICBHS) privacy policies.

SCOPE: The information in this document applies to all members of the workforce which includes employees, contract employees, volunteers, and trainees, etc., granted access to protected health information (PHI).

NOTES: Section 164.530 of the HIPAA Privacy Rules requires that ICBHS put into place several administrative measures. Section 164.530(3) requires ICBHS to establish and apply sanctions against members of the workforce who fail to comply with ICBHS' privacy policies and procedures or the HIPAA privacy standards.

DEFINITIONS: HIPAA: Health Insurance Portability and Accountability Act. The federal law passed in 1996 that provides national standards for health information.

Protected Health Information (PHI): Individually identifiable information relating to past, present, or future physical or mental health condition of an individual, provision of health care to an individual, or the past, present, or future payment for health care provided to an individual transmitted or maintained in any form or medium including oral, written, or electronic communication.

Workforce: Employees, volunteers, trainees, and other persons whose conduct, in the performance of work for

the covered entity, is under the direct control of such entity, whether or not they are paid by the covered entity. In this procedure, the term "employee" is used to refer to a member of the workforce.

PROCEDURE:

PERSON RESPONSIBLE

ACTION:

Investigative Team

1. Finds that ICBHS employee violated any ICBHS privacy policy.

ICBHS

2. Implements policy on disciplinary action. (See Policy 01-60, Sanctions for Violation of the Privacy Rule)
3. Determines severity of discipline according to:
 - a. Severity of the violation
 - b. Whether the violation was intentional or unintentional
 - c. If the violation indicates a pattern or practice of improper use or release of PHI.
4. Determines the degree of discipline.

Note: As described in Policy 01-60, Sanctions for Violation of the Privacy Rule, employees who violate the privacy policies are subject to criminal penalties as well as departmental discipline action up to and including termination.

5. Documents each instance of employee disciplinary action regarding PHI. Documentation is to include:

ICBHS (cont.)

- a. Name of employee
- b. Degree of violation
- c. Location of violation
- d. Date of violation
- e. Disciplinary action provided

6. Forwards documentation to the privacy officer.

Privacy Officer

7. Retains documentation for six (6) years from the date of its creation or the date it was last in effect, whichever is later, or such longer period required by state law or other federal law.

Forms used in this procedure:

None