



521 4th Street Havre Montana 59501 • Phone: 406-395-4305 • Fax: 406-395-5643 • www.bullhook.com

HIPAA Privacy and Security Training Policy

Policy 5012

Purpose:

The purpose of this policy is to define how Bullhook Community Health Center (BCHC) will meet the Health Insurance Portability and Accountability Act (HIPAA) privacy and security training requirements. As part of their job duties, BCHC's workforce (employees, temporary employees, interns, consultants, contractors, and students) may have access to Protected Health Information (PHI). This information may be in the form of data maintained by BCHC, partner or provider, or data that BCHC maintains and uses in our operations and processes. BCHC is committed to protecting the privacy and security of BCHC's patient information, and we will ensure that protection by providing HIPAA privacy and security training for all workforce members.

Scope:

This policy applies to BCHC workforce members, BCHC Board of Directors, and others who may have access to BCHC patient information of any kind, including information that is used for compliance activities, claims processing, research and quality improvement.

Policy:

BCHC's CEO will ensure that HIPAA privacy and security training is completed by all work force members. This training program is designed to educate workforce members and other appropriate individuals about their responsibilities regarding the protection of BCHC PHI. The training program includes refresher courses and other materials, in order to regularly remind workforce members about their obligation to safeguard the privacy and security of BCHC's PHI.

It is BCHC's goal to provide HIPAA training during the first week of employment. BCHC all-staff meetings and newsletters may also include HIPAA privacy and security updates on at least a quarterly basis.

Compliance with HIPAA Privacy and Security requirements as described in the training may be part of BCHC's methods of assessing each employee's performance.

Training Content Guidelines:

A. Periodic educational material regarding privacy and security of health information will be sent to or made available to all workforce members and other appropriate individuals. Educational information will be sent out each time a material change in any privacy or security policy or procedure is put into place.




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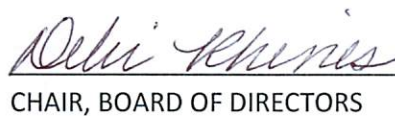
B. Privacy and security training may include the following:

1. Education regarding password protection and management;
2. The process of reporting breaches of the confidentiality and privacy policies;
3. Information regarding virus protection;
4. HIPAA Privacy and Security updates;
5. Information regarding physical safeguards for PHI protection.

C. Each workforce member will receive individualized training regarding the confidentiality and privacy requirements of his or her position, from their manager or another designated individual. This training will occur during the employees first two weeks of employment.

D. Documentation of privacy and security training attendance will be kept in the Workforce Member's HR file, or contractor file in the Executive offices. This documentation should include electronic documentation of training completion, emailed training acknowledgements and sign-in sheets from training at BCHC staff meetings.

 _____ Date: 4/13/2020
CHIEF EXECUTIVE OFFICER

 _____ Date: 4-13-2020
CHAIR, BOARD OF DIRECTORS

Date first adopted	06/24/2015
Date Revised/QI Board approval	06/24/2015, 03/25/2020
New date adopted/Board of Directors approval	07/13/2015, 04/13/2020