

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY POLICIES AND PROCEDURES MANUAL

Chapter:	9	Information Management	
Section:	4	Physical Safeguards	
Topic:	5	Workstation Use and Security	
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			<hr style="border: 0; border-top: 1px solid black;"/> <i>Board Chairperson Signature</i>
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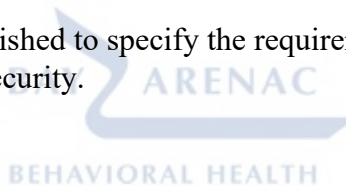
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Policy

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) to have physical safeguards in place at all workstations to protect confidential data, documents, or protected health information (PHI) and restricts access to such information to authorized personnel only.

Purpose

This policy and procedure is established to specify the requirements which govern proper workstation use and workstation security.



Education Applies to:

- All BABHA Staff
- Selected BABH Staff, as follows:
- All Contracted Providers: Policy Only Policy and Procedure
- Selected Contracted Providers, as follows:
 - Policy Only Policy and Procedure
- Other:

Definitions

Health Information: Any information, whether oral or recorded in any form, that is created or received by BABHA and relates to an individual's past, present, or future physical or mental health, or to the payment for such health care.

Individually Identifiable Health Information: Health information, including demographic information that identifies an individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual.

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Mobile Devices: A generic term used to refer to a variety of hand-held or plug-in devices that allow people to access and/or download data and information just as if they were using a conventional computer. This includes such devices as cell phones, smart phones, tablets, USB drives, flash drives, etc.

Protected Health Information (PHI): Individually identifiable health information transmitted by or maintained in an electronic media format (EPI) or transmitted or maintained in any other form or medium, including oral and/or paper.

Workstation: An electronic computing device. For example, laptops, desktop computers, thin clients, wireless devices, smart phones, tablets, or any other device that performs similar functions and has electronic media stored in its immediate environment. This includes any non-agency owned computing devices when they are used to access BABHA’s information systems for work-related purposes.

Workforce Member: Employees, volunteers, and other persons whose conduct, in the performance of work for a covered entity, is under the direct control of such entity, whether or not they are paid by the covered entity. This includes full and part time employees, affiliates, associates, students, volunteers, and staff from third party entities who provide service to the covered entity.

Procedure

I. Workstation Use

1. Workforce members will not connect any additional peripherals such as keyboards, printers, disc drives, solid state storage media, etc. without the approval of their supervisor. The supervisor must send an email to BABHA’s Information Systems (IS) Help Desk requesting authorization for any additional connections. The Help Desk will process the request.
2. Workforce members are not allowed to use mobile, remote, or other memory devices (such as smart phones, thumb/USB drives, etc.) that can store PHI unless an exception is

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made by their respective Senior Leadership Team (SLT) Director via an email to the Help Desk and concurrently to the BABHA Corporate Compliance Officer (CCO). If an exception is made, any mobile or remote device used must have the ability to encrypt the PHI and the encryption capability on the device must be activated.

3. Workforce members are expected to take all reasonable precautions to protect the confidentiality, integrity, and availability of PHI on their workstations. Whenever possible, display monitors should be situated so that PHI and/or sensitive agency information is inaccessible to unauthorized and/or public viewing.
4. Workforce members are prohibited from using agency computers for personal use (see BABHA Employee Handbook).
5. Workforce members are required to log-off of servers, workstations, applications, database systems, or other computer systems when they are leaving their offices for the day, are on ETO, or are on any other type of leave from employment.
6. Workforce members will take care to prevent the destruction of or damage to equipment, including food or drink spillage at their terminals.
7. Workforce members will store agency provided mobile devices in a secure temperature-controlled environment whenever possible when out of the office. Limiting equipment's exposure to extreme temperatures can greatly increase their lifespan and reliability.
8. Workforce members will ensure computers, laptops, mobile devices or other portable electronic media devices, or paper containing PHI, are not shared with others nor left unattended.
9. Staff must immediately report any lost or stolen equipment to the CCO, or designee, and concurrently to their immediate supervisor
10. Staff must immediately report any damaged or malfunctioning equipment to the Help Desk and concurrently to their supervisor

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II. Workstation Security

1. The IS department is responsible for installing all hardware, software and related computing services. All requests for software and hardware installations should originate from a supervisor or director via an email to the Help Desk for follow up (see BABHA Policy, C09-S03-T07 - Workforce Security – Access Clearance and Termination).
2. Anti-virus software is installed and regularly updated on workstations to prevent the transmission of malicious software (see BABHA Policy and Procedure, C09-S03-T13 – Security Awareness – Protection from Malicious Software).
3. All workstations and printers are to be located in a physically secure area. A physically secure area is one where unauthorized person do not have access to the information systems equipment.
4. For purposes of training, assisting in technical support, and administrative supervision, IS will utilize appropriate means of monitoring workstation activities of workforce members to ensure that BABHA’s computer equipment is being used in a proper manner.
5. IS is responsible for maintaining an inventory of all computer hardware which BABHA owns and can produce a computer inventory database report at the request of an SLT Director. IS staff will keep the computer inventory database current.
6. IS is responsible for moving all workstation and computing hardware or related components. Requests to move computer equipment must originate with a request to the Help Desk.

III. Output Devices

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1. When printing documents that contain PHI, workforce members must retrieve said documents within a reasonable time frame to prevent viewing by those without authorization or the need to know.
2. Workforce members will take reasonable steps to ensure all fax transmissions are received by the intended recipient by verifying fax numbers before sending.
3. Workforce members will retrieve all expected fax transmissions within a reasonable time frame to prevent viewing by those without authorization or the need to know.
4. Fax transmissions must include a cover sheet containing a confidentiality statement and contact information for any transmission containing PHI for rectifying an errant receipt. Staff should ensure the fax went through to the intended recipient by checking the returned transmission verification report.

Attachments

N/A

Related Forms

N/A

Related Materials

BABHA Policies and Procedures:

1. BABHA Employee Handbook
2. C09-S03-T07 - Workforce Security – Access Clearance and Termination

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3. C09-S03-T13 Security Awareness - Protection from Malicious Software
4. C09-S04-T02 – Facility and Physical Access Security
5. C09-S04-T07 – Electronic Devices and Media Controls – Movement, Re-Use, Data back-up and Disposal

References/Legal Authority

Physical Safeguards - HIPAA Section 164.310(b)



SUBMISSION FORM				
AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL /REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION - If replacement list policy to be replaced
M. Wolber J. Pinter T. Piorkowski	J. Pinter, CCO	01/21/14	Replacement & Revision	Revised to reflect HIPAA compliance and update to current practices and replaces C09-S04-T06
B. Kish	J. Pinter, CCO	02/16/15	No Changes	
B. Kish	J. Pinter, CCO	02/10/17	Revision	Triennial Review-Updated references to Employee Handbook
B. Kish	J. Pinter, CCO	9/13/19	Revision	Updated language to include security related to output devices and not leaving mobile devices unattended
B. Kish	J. Pinter, CCO	02/21/20	No Changes	Triennial Review
J. Bellinger	Karen Amon, CCO	03/10/2023	No Changes	Triennial Review