I. **Purpose:** To ensure that all members of University Physicians of Brooklyn, Inc.’s workforce receive training on the federal and state privacy requirements that will dictate healthcare privacy practices in New York after April 14, 2003, and on the policies and procedures implemented by UPB to ensure compliance with such requirements.

II. **Policy**

**A. Training-** UPB will provide appropriate training:

1. To each member of UPB’s workforce by April 14, 2003.
2. After April 14, 2003, to each new member of the workforce within a reasonable time after the individual joins the workforce.
3. To each member of the workforce whose functions are affected by a material change in the policies, procedures, standards or requirements within a reasonable time after the material change becomes effective.

**B. Documentation-** UPB will document the training provided and retain for a period of six (6) years from the date of creation.
III. Procedure

A. Current Employees (Prior to April 14, 2003)

1. Each practice will assist in identifying the roles and functions of its employees and the type of protected health information they have access to.
2. Appropriate role-based training will then be provided to the employees.

B. New Employees (After April 14, 2003)

1. All new employees will undergo a generic HIPAA education session during orientation.
2. The practice administrator will be responsible for coordinating the new employee’s additional training based upon his/ her individual role and applicable HIPAA policies and procedures.

C. Continuing Education

1. All employees will undergo an annual HIPAA education session.
2. Upon revision to policies, procedures, standards or requirements, the affected staff members will be re-trained.

IV. Responsibilities: It is the responsibility of all medical staff members and practice staff members to comply with this policy. Medical staff members include physicians as well as allied health professionals. Practice staff members include all employees, medical or other students, trainees, residents, interns, volunteers, consultants, contractors and subcontractors at the practice.

V. Reasons for Revision- Regulatory changes

VI. Attachments- None

VII. References- Standards for Privacy of Individually Identifiable Health Information, 45 CFR §164.530(b)