

**SUNY DOWNSTATE MEDICAL CENTER**  
UNIVERSITY HOSPITAL OF BROOKLYN  
POLICY AND PROCEDURE

No. HIPAA-11

**Subject:** HIPAA TRAINING

**Page** 1 **of** 6

**Prepared by:** Shoshana Milstein

**Original Issue Date** 12/02

**Reviewed by:** Doriel Forde  
Stephen Marrone

**Supersedes:** 12/02

**Approved by:** Kevin O'Mara

**Effective Date:** 12/07

**Approved by:** Anny Yeung, RN, MPA

**The JC Standards:**

Margaret Jackson, MA, RN

David Conley, MBA

Stanley Fisher, M.D.

Michael Lucchesi, M.D.

Debra D. Carey, MS

Ivan M. Lisnitzer

**Issued by:** Regulatory Affairs

---

**I. PURPOSE**

To ensure that all members of SUNY Downstate Medical Center's workforce receive training on the federal and state privacy requirements that dictates healthcare privacy practices in New York after April 14, 2003, and on the policies and procedures implemented by SUNY Downstate to ensure compliance with such requirements.

**II. POLICY**

**A. Training-** SUNY Downstate will provide appropriate training:

1. To each member of SUNY Downstate'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-** SUNY Downstate will document the training provided and retain for a period of six (6) years from the date of creation.

**III. DEFINITION(S)**

None

**IV. RESPONSIBILITIES**

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

**V. PROCEDURE/GUIDELINES**

By April 14, 2003, employees and residents employed by or rotating at Downstate Medical Center (DMC) received appropriate role based HIPAA training. Workforce members with access to protected health information (PHI) received training via DMC's online Health Care Compliance Strategies (HCCS) HIPAA training program. This program incorporates multiple tracks designed to provide appropriate HIPAA training according to each individual's specific role and function at Downstate. Workforce members without any access to PHI received HIPAA awareness training via a video. Thereafter, the following procedure will be effective:

**A. New Employee Training-** All new employees must complete training within two (2) weeks of receipt of their HIPAA training information.

1. **University Hospital of Brooklyn (UHB) Employees-** HIPAA training will be provided at Hospital Orientation conducted on a bimonthly basis.
  - a. The day before Hospital Orientation, the Benefits Department will fax the Office of Compliance & Audit Services (OCAS) a list of the new employees scheduled for Hospital Orientation.
  - b. OCAS will add these names to its HIPAA training database, will generate HIPAA training log- on ID's and will prepare a training packet for each individual. The training packet will include:
    - i. Individualized label containing the employee's log- on information;
    - ii. HIPAA Training Instructions Sheet containing the training compliance deadline; and
    - iii. HIPAA Pocket Guide- containing a summary of DMC's specific HIPAA Privacy policies & procedures.
  - c. OCAS will also create a list of those new employees who do not have access to patient information and who are required to attend the HIPAA Awareness Video session. The following departments do not have access to patient information:

- i. Academic Affairs;
- ii. Academic Computing Department;
- iii. Administrative Support Services;
- iv. Anatomy;
- v. Biochemistry;
- vi. Biomedical Communications;
- vii. Central Sterile Supply;
- viii. Central Transport;
- ix. Continuing Medical Education;
- x. Employee Assistance Program;
- xi. Environmental Services;
- xii. Facilities Maintenance & Development;
- xiii. Food & Nutrition;
- xiv. Human Resources/ Labor Relations;
- xv. Humanities in Medicine;
- xvi. Institutional Advancement & Development;
- xvii. Lab Animal Resources;
- xviii. Linen;
- xix. Management Systems;
- xx. Materials Management;
- xxi. Medical Library;
- xxii. Microbiology;
- xxiii. Planning;
- xxiv. State Purchasing Office;
- xxv. Student Affairs;
- xxvi. Union Representatives;
- xxvii. Unit Management;
- xxviii. University Affairs;
- xxix. University Police;
- xxx. Volunteer Services.

- d. On the day of Hospital Orientation, OCAS will provide the Online HIPAA Training List, the Video HIPAA Training List and the individualized HIPAA training packets to the Institute of Continuous Learning (ICL), the department responsible for conducting the orientation. ICL will distribute the packets to each individual required to complete the online training program and will obtain signature of receipt on the Online HIPAA Training List. These individuals will be instructed to report to the Learning Resource Center to access the computers and complete the training. ICL will also conduct the HIPAA Awareness video session for those employees who do not have access to patient information and will obtain signature of attendance on the Video HIPAA Training List.
- e. On the day following Hospital Orientation, ICL will fax OCAS the general orientation sign- in sheets, the Online HIPAA Training List and the Video HIPAA Training List containing the signatures of receipt. OCAS will review the general sign- in sheets to ensure that all attendees were captured and either received a HIPAA online training packet or attended the HIPAA Awareness video session. For those names for which a signature of receipt was not documented, OCAS will follow up with the respective department administrator and will provide the individual's HIPAA training log- on information and compliance training deadline via an email communication.

2. **University Physicians of Brooklyn (UPB) Employees-** For those UPB employees who do not attend Hospital Orientation, the following procedure will be followed:
  - a. On a monthly basis, the UPB Office will provide OCAS with a list of all new employees hired during that time-frame. This list will include the employee name, department and job title.
  - b. OCAS will review the list against its HIPAA training database to ensure that all individuals have been captured.
  - c. For those names not listed in the HIPAA training database, OCAS will generate log- on ID's and communicate the individual's training information with the respective department administrator via an email communication.
3. **Research Foundation (RF) Employees-** For those RF employees who do not attend Hospital Orientation, the following procedure will be followed:
  - a. On a monthly basis, the RF Personnel Office will provide OCAS with a list of all new employees hired during that time-frame. This list will include the employee name, department, job title and whether there is access to patient information.
  - b. OCAS will review the list against its HIPAA training database to ensure that all individuals have been captured.
  - c. For those names not listed in the HIPAA training, OCAS will generate the following and communicate, via email, with the respective department administrator:
    - i. Employees with access to patient information will receive a HIPAA online training program log- on ID and Instructions Sheet;
    - ii. Employees with no access to patient information will be provided with the opportunity to attend the HIPAA Awareness video presented at Hospital Orientation or to complete the HIPAA Awareness track of DMC's online training program.
4. **Agency Personnel-** For those agency personnel who do not attend Hospital Orientation, as is required by Human Resources policy, OCAS will ensure that these individuals are captured and that HIPAA training is provided via the following methods:
  - a. For clerical and administrative agency personnel, Human Resources will fax OCAS a copy of the memorandum titled, "Hospital Orientation- Agency Employees" containing the individual's name, department and reporting supervisor. OCAS will email the relevant HIPAA training information to the individual's respective supervisor if the agency employee does not report to the scheduled Hospital Orientation session.
  - b. For professional agency personnel, the agency will send the Office of Contracts & Procurement a weekly list delineating the names of the temporary personnel assigned to Downstate. OCAS will follow up with the respective departments to ensure completion of HIPAA training.

**B. Resident Training-** All residents must complete DMC's HIPAA training or provide acceptable documentation of HIPAA training completed at another institution.

1. On an annual basis, all incoming residents will receive a HIPAA training packet at the Graduate Medical Education (GME) Orientation. The HIPAA training packet will include the following:
  - a. Individualized label containing the resident's log- on information;
  - b. HIPAA Training Instructions Sheet containing a two (2) week training compliance deadline; and
  - c. HIPAA Pocket Guide- containing a summary of DMC's specific HIPAA Privacy policies & procedures.
2. Program Directors may opt to train its residents via a lecture- style presentation, in lieu of the online training program. It is the responsibility of the Program Directors to contact OCAS to schedule such a presentation and to ensure all of its residents are in attendance at the training session. Residents that do not attend the session will be required to complete the online training program.
3. DMC accepts training completed at another institution if the training was completed via the exact same Health Care Compliance Strategies (HCCS) online HIPAA training program. Residents who have completed such training may fax their Certificate of Completion to OCAS. OCAS will verify with HCCS to ensure that training has been completed and will notate the individual as compliant in its database.

**C. HIPAA Training Follow Up**

1. OCAS will track each new individual added to its training database and will determine whether or not training has been completed within the two (2) week time-frame.
2. For those individuals who have not completed the training after two (2) weeks, an initial reminder email will be sent to the department administrator providing notification of the delinquency and requiring training to be completed within another two (2) week time- frame.
3. Thereafter, a second reminder email will be sent to the department administrator.
4. Subsequently, a formal Director Notice will be hand- delivered to the department director/ administrator requesting that an attached Individual **Reminder Notice** be provided to the delinquent employee and signature of receipt maintained in the department's file.
5. If training is still not completed, a formal Director Notice will be hand- delivered to the department director/ administrator requesting that an attached Individual **Final Notice** be provided to the delinquent employee and signature of receipt maintained in the department's file.
6. Individuals who fail to complete the HIPAA training program after all of the above communications will be referred for appropriate disciplinary action to the responsible area; to the Office of Labor Relations, GME Office, UPB Office or RF Office.

**D. Department Specific Training-** OCAS will conduct department specific training, as necessary, to ensure compliance with the HIPAA requirements and to provide updated training on revised requirements or processes. These training programs will be in the form of:

1. In- service or refresher training sessions;
2. Front end Hospital Information System training to ensure the appropriate electronic capture of HIPAA related information;
3. Department specific training manuals containing a focused summary of relevant policies and procedures.

**E. Training Completion Certificates**

1. All individuals who complete DMC's online HIPAA training program will receive a computer generated Certificate of Completion for inclusion in the department's personnel file.
2. The Medical Board will receive Certificates of Completion for faculty members for inclusion in the individual's reappointment package.
3. Individuals who completed HIPAA training via a lecture style presentation will receive a customized Certificate of Completion from OCAS.

**VI. ATTACHMENTS**

None

**VII. REFERENCES**

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

	Revision	Required	Responsible Staff Name and Title
	Yes	No	Adeola O. Dabiri, Director of Regulatory Affairs
	Yes	No	
	Yes	No	
	Yes	No	