HIPAA-32: Workstation Use and Security Policy

Effective Date: 12-01-2015 Last Revised: 7-17-2017

Scope of Policy

This policy governs Information Workstation Use and Security for **TCS**. All personnel of **TCS** must comply with this policy. Demonstrated competence in the requirements of this policy is an important part of the responsibilities of every member of the workforce.

Assumptions

- **TCS** must comply with HIPAA and the HIPAA implementing regulations pertaining to workstation use, in accordance with the requirements at § 164.310(b) and § 164.310(c).
- □ The establishment and implementation of an effective workstation use policy is a crucial element in our overall objective of providing reasonable protections for individually identifiable health information, including Protected Health Information ("PHI", as defined by HIPAA).

Policy Statement

- □ It is the Policy of **TCS** to configure, operate, and maintain our information workstations in full compliance with all the requirements of HIPAA.
- Responsibility for the development and implementation of this workstation use and security policy, as well as any procedures associated with it, shall reside with the Security Officer, who shall ensure that this policy is maintained, updated as necessary, and implemented fully throughout our organization.
- Our objective in these efforts is to providing reasonable protections for individually identifiable health information, including Protected Health Information ("PHI", as defined by HIPAA).
- Specific procedures shall be developed to specify the proper functions, procedures, and appropriate environments of workstations that access individually identifiable health information, including Protected Health Information ("PHI", as defined by HIPAA).
- Specific procedures shall be developed to implement physical safeguards for all workstations that access individually identifiable health information, including Protected Health Information ("PHI", as defined by HIPAA), to restrict access to authorized users only.
- □ It is the Policy of **TCS** to fully document all workstation use-related activities and efforts, in accordance with our Documentation Policy and the requirements of HIPAA.

Procedures

- **TCS** will have secure work areas containing workstations with physical safeguards to minimize the possibility of unauthorized observation or access to PHI. Areas where sensitive information is regularly entered or utilized will be secured using barriers to prevent public viewing of PHI.
- □ Only appropriate and specified work functions will be performed at secure workstations.
- □ If the employee accessing the sensitive information must leave the workstation at any time, it will be his or her responsibility to exit the application and/or activate the screen lock controls to remove the information being access from the workstation screen. Any hard copy records containing PHI should also be turned over, covered or re-filed before leaving.
- Printers and fax machines, copy machines, and shredders will be located in the most secure areas available, and will not be located in or near areas frequented by *members* or the public. **TCS** will also provide appropriate security measures for portable workstations containing PHI.
- □ All means of entry to the rooms within which employee workstations are situated will be locked when not in use.
- Employees are trained on HIPAA related policies, including workstation use and security, at the time of orientation and annually thereafter.