



POLICY INFORMATION

Document # 300	Title: Assignment of HIPAA Security Officer	Original Effective Date: 9/2/2016
Safeguard: Security Administrative	Approved by: Dean Beth E. Foley	Date Reviewed: 10/20/2017 10/02/19

I. POLICY STATEMENT

This policy reflects Emma Eccles Jones College of Education and Human Service’s commitment to designate a Security Officer (SO) to maintain the confidentiality, integrity, and availability of its PHI.

II. DEFINITIONS

See HIPAA Privacy Policy 100

III. AUTHORITY AND RESPONSIBILITIES

CEHS has component units that are listed as a hybrid entity in accordance with USU’s HIPAA Hybrid Covered Entity Declaration. Only the Health Care Component/HCC (i.e., covered functions) of CEHS must comply with this policy. All references in this policy to “CEHS” shall be construed to refer only to the health care component of CEHS.

IV. PROCEDURES TO IMPLEMENT

The Security Officer responsibilities include, but are not limited to:

1. Create policies to ensure that CEHS information systems comply with all applicable federal, state and local laws and regulations.
2. Create and implement policies and procedures in collaboration with relevant CEHS stakeholders, to reduce the likelihood that CEHS information system(s) may compromise the confidentiality, integrity or availability of any electronic Protected Health Information (ePHI) held within the system(s).
3. Develop, document, and ensure dissemination of appropriate security policies, procedures, and standards for the users and administrators of CEHS information systems and the data contained within them.
4. Create policies and procedures for newly acquired CEHS information systems to have features that support required and /or addressable security implementation specifications.
5. Participate in the selection, implementation, and administration of significant CEHS security controls.

Emma Eccles Jones College of Education & Human Services

6. Provide CEHS workforce members regular security awareness and training. Maintain documentation of training completion.
7. Oversee periodic risk assessments of CEHS information systems and security processes.
8. Oversee annual risk assessment of HCCs to determine potential risks, threats and vulnerabilities.
9. Work with CEHS IT to regularly monitor and evaluate threats and risks to CEHS information systems. Maintaining documentation of audit processes and findings.
10. Develop and implement an effective risk management program.
11. Work with CEHS IT to create a process for monitoring and auditing records of CEHS information systems' activity to identify inappropriate activity.
12. Define workforce member roles and access levels into ePHI systems.
13. Maintain an inventory of all CEHS information systems that contain ePHI.
14. Create an effective security incident response policy and related procedures.
15. Ensure adequate physical security controls exist to protect CEHS's ePHI.
16. Ensure that security policies, procedures and controls support compliance with the HIPAA regulations.
17. Work with CEHS IT to evaluate new security technologies that may be appropriate for protecting CEHS's information systems.
18. Oversee Investigations of security incidents, mitigation of any known harmful effects of security incidents, implementation of appropriate safeguards to reasonably ensure similar incidents do no occur in the future and document security incidents and their outcomes.

The following individual is designated as the Security Officer:

Joni Black
Sorenson Legacy Foundation Center for Clinical Excellence
Emma Eccles Jones College of Education and Human Services
6405 Old Main Hill
Logan, UT 84322-6405
Phone: 435-797-0141
Joni.black@usu.edu

V. ATTACHMENTS

N/A

VI. REFERENCES

CEHS HIPAA Privacy Policy100
45 CFR 164.308(a)(2)

