

(was Administrative Policy 9-09-100)

Chapter: **DIRECTLY-OPERATED PROGRAM MANAGEMENT**
Title: **PRIVACY TRAINING**

Prior Approval Date: N/A
Current Approval Date: 12/6/07

Approved by: Donald J. Dalibonk 12/6/07
Executive Director Date

I. ABSTRACT

This policy establishes the standards and procedures of the Macomb County Community Mental Health Board (MCCMH) for compliance with the Privacy Rules of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) by establishing the requirements for workforce training in its privacy practices.

II. APPLICATION

This policy shall apply to the MCCMH administrative offices and to all directly-operated network providers of the MCCMH Board.

III. POLICY

It is the policy of the MCCMH Board to train all of its staff members (full and part time employees, independent contractors, interns, and volunteers) in its privacy practices.

IV. DEFINITIONS

A. None.

V. STANDARDS

- A. All MCCMH staff members shall be offered training on the MCCMH privacy rules and practices on or before the effective date of the HIPAA Privacy Rule.
- B. All new staff will be trained on Macomb County Community Mental Health Board's privacy practices and the HIPAA Privacy Rule within 90 days of employment.
- C. MCCMH shall train staff members in accordance with their role at MCCMH and their functions with regard to personal health information.
- D. All staff members who join MCCMH subsequent to the effective date of the HIPAA Privacy Rule shall receive their privacy training as part of their orientation to MCCMH.
- E. All privacy trainings presented shall be documented as to content and attendance.
- F. The training methods can vary with the content and may include workshops, self-study modules, on-line training, staff meetings, and so forth. The trainings should be completed within 30 days of the implementation date for material changes in MCCMH privacy practices.
- G. All handouts shall include information on how to contact the Privacy Officer and the Corporate Compliance Officer and where to get additional information.
- H. Staff members who fail to attend required privacy training shall be referred to the Deputy Director for appropriate action.

VI. PROCEDURES

- A. HIPAA training will be incorporated into the existing training modules the organization has established including:
 - The annual training plan
 - Orientation
 - Compliance Training

B. General Requirements

1. The MCCMH Privacy Officer and Compliance Officer must approve all training curriculum developed on privacy practices or the Privacy Rule.
 2. Attendees shall be provided evaluation forms to complete pertaining to initial privacy training.
 3. The MCCMH Compliance Officer shall keep copies of all attendance sheets, handouts, slides and curriculum, and evaluations will be kept in an administrative file.
- C. The MCCMH Privacy Officer, in consultation with the MCCMH Compliance Officer, shall develop and implement a new training plan when there are material changes to the organization's privacy practices or changes to the Privacy Rule. The training plan may focus on specific programs or may include the entire MCCMH administrative and direct service system staff depending on the scope of the changes involved.
- D. Whenever there are material changes to MCCMH privacy practices, the Privacy Officer, in consultation with the Compliance Officer, shall determine the workforce groups affected by the changes and coordinate the training for those groups.

VII. REFERENCES / LEGAL AUTHORITY

- A. Health Insurance Portability and Accountability Act of 1996 (HIPAA), P.L. 104-191
- B. 45 CFR § 164.530

VIII. EXHIBITS

- A. None.