

# GREATER COLUMBIA BEHAVIORAL HEALTH Policies and Procedures

Category: Privacy and Security  
Approved On: 03/27/2003  
Approved By: The Board of Directors  
Revised: 00/00/00  
Effective Date: 15 days from approval/ the last revision

**No: PS618.00**

**Title: Privacy Officer Job Responsibilities**

## **I. Duties:**

The Privacy Officer (PO) oversees all ongoing activities related to the development, implementation, maintenance of, and adherence to the organization's policies and procedures covering the privacy of, and access to, client health information in compliance with federal and state laws and the healthcare organization's information privacy practices.

Privacy Officer responsibilities are designated to be within the scope of the GCBH Contracts Coordinator II position.

### **A. Responsibilities:**

1. Serves in a leadership role to establish an organization-wide approach to the privacy of individually identifiable health information.
2. Coordinates the development of specific policies and procedures mandated by the Privacy Regulations, as well as any additional policies and procedures to effectively implement and comply with the regulations.
3. Drafts and maintains the Notice of Privacy Practices in coordination with management, Board of Directors, and legal counsel.
4. Provides guidance and assists in the identification, implementation, and maintenance of organizational information privacy policies and procedures in coordination with management, Board of Directors, and legal counsel.

5. Performs initial and periodic information privacy risk assessments and conducts related ongoing compliance monitoring activities in coordination with the organization's other compliance and regulatory efforts.
6. Serves as a resource for the organization to provide technical assistance when questions or issues arise regarding confidentiality or the application of the Privacy Regulations.
7. Oversees, directs, delivers, or ensures delivery of initial and ongoing privacy training and orientation to employees, volunteers, business associates, and other appropriate third parties. Initiates, facilitates, and promotes activities to foster information privacy awareness within the organization and related entities.
8. Develops, implements, and conducts ongoing compliance monitoring of all business associate agreements, to ensure all privacy concerns, requirements, and responsibilities are addressed in coordination with management, Board of Directors, and legal counsel.
9. Establishes a mechanism to track access to protected health information, within the purview of the organization and as required by law and to allow qualified individuals to review or receive a report on such activity.
10. Works with GCBH employees involved with any aspect of release of protected health information, to ensure full coordination and cooperation under the organization's policies and procedures and legal requirements.
11. Establishes and administers a process for receiving, documenting, tracking, investigating, and taking action on all complaints concerning the organization's privacy policies and procedures in coordination and collaboration with other similar functions and, when necessary, legal counsel.
12. Ensures compliance with privacy practices and consistent application of sanctions for failure to comply with privacy policies for all individuals in the organization's workforce, extended workforce, and for all

business associates, in cooperation with Personnel, the information security officer, management, and legal counsel as applicable.

13. Works with the Security Officer to assure a coordinated approach to the protection of confidential information. Reviews all system-related information security plans throughout the organization's network to ensure alignment between security and privacy practices, and acts as a liaison to the IS department.
14. Cooperates with the Office of Civil Rights, other legal entities, and organization officers in any compliance reviews or investigations.

**B. Qualifications:**

1. Familiarity and experience with federal, state, and local statutes and regulations concerning confidentiality and privacy of individually identifiable health information.
2. Ability to interface effectively with all parts of the organization, including senior management and Board of Directors.
3. Ability to effectively communicate both technical and legal information to non-technical and non-legal staff.
4. Demonstrated organization, facilitation, communication, presentation, planning, and management skills.

**II. Scheduled Review of this Policy:**

The review of the GCBH policies and procedures manual is on a two year cycle. The GCBH policy review and revision approval process is a three month process. This policy is scheduled to be reviewed every second year:

- A. by GCBH staff by April of odd years,
- B. by the Regional Advisory Board (RAB) by May of odd years,
- C. by the GCBH Board of Directors by June of odd years, and
- D. outside of the schedule if required.