

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
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No: PS619.00

Title: Sanction Policy

I. Introduction:

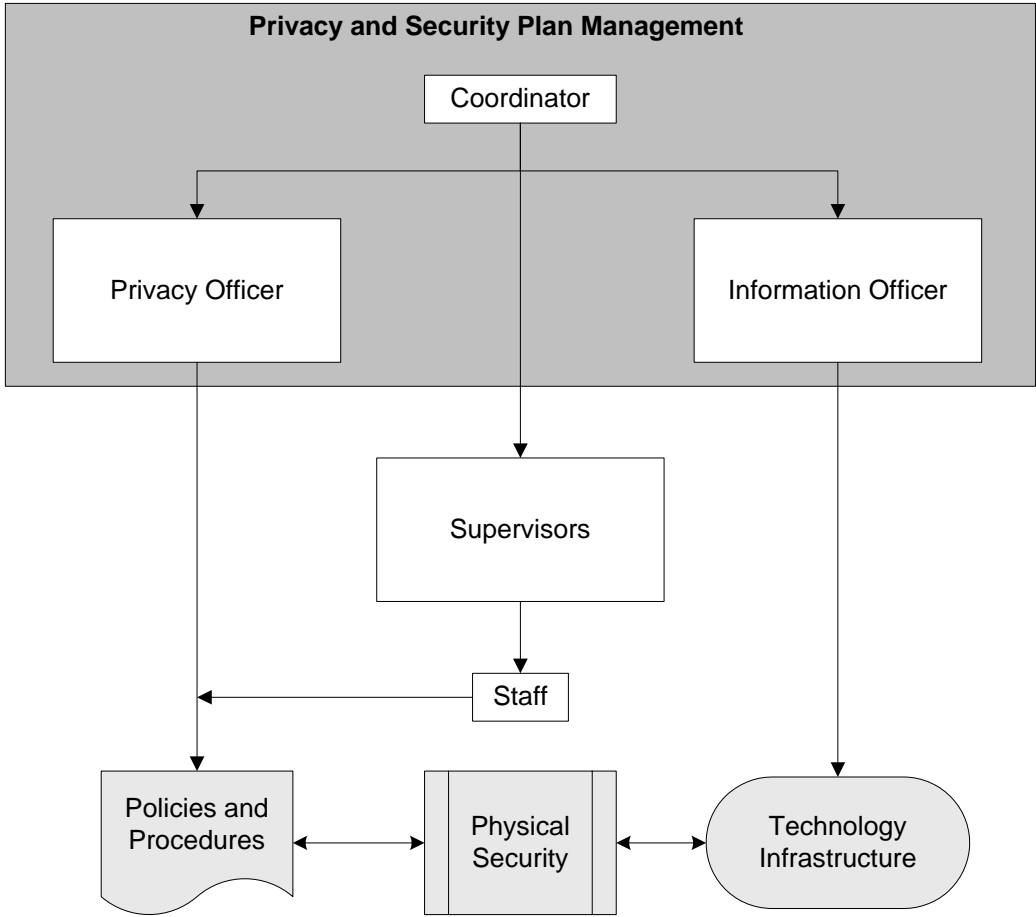
GCBH has adopted this Sanction Policy to comply with HIPAA to fulfill the organization's duty to protect the confidentiality and integrity of protected health information as required by law and professional ethics.

GCBH has adopted a Privacy and Security Plan requiring its employees to protect the integrity and confidentiality of health and other sensitive information pertaining to GCBH consumers. In addition, GCBH has adopted policies and standards to carry out the objectives of the Privacy and Security Plan. These policies note that all employees of GCBH must adhere to these policies, that GCBH will not tolerate violations of these policies, and that such violations constitute grounds for disciplinary action up to and including termination, and criminal prosecution.

Any employee of GCBH who believes another employee of GCBH has breached the agency's security policy or the policies and standards promulgated to carry out the objectives of the Security Policy or otherwise breached the integrity or confidentiality of patient or other sensitive information should immediately report such breach to his or her supervisor and/or to the Privacy Officer.

The following chart details the members of the management staff with primary responsibility for the Privacy and Security Plan:

Greater Columbia Behavioral Health Privacy and Security Plan Management Chain of Responsibility



The Privacy Officer will have primary responsibility for conducting a thorough and confidential investigation into the allegations. GCBH will inform the complainant of the results of the investigation and any corrective action taken. GCBH will not retaliate against or permit reprisals against a complainant. Allegations not made in good faith, however, may result in discharge or other discipline.

As noted in the GCBH employee handbook, GCBH has a progressive discipline policy under which sanctions become more severe for repeated infractions. This policy, however, does not mandate the use of a lesser sanction before GCBH terminates an employee. In the discretion of management, GCBH may terminate

an employee for the first breach of the agency's security policy or individual policies and standards if the seriousness of the offense warrants such action. An employee could expect to lose his or her job for:

1. a willful or grossly negligent breach of confidentiality,
2. willful or grossly negligent destruction of computer equipment or data, or
3. knowing or grossly negligent violation of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), its implementing regulations, or any other federal or state law protecting the integrity and confidentiality of patient information

An employee may lose his or her job for a negligent breach of GCBH's standards for protecting the integrity and confidentiality of patient information. For less serious breaches, management may impose a lesser sanction, such as a verbal or written warning, verbal or written reprimand, loss of access, suspension without pay, demotion, or other sanction. In addition, GCBH will seek to include such violations by contractors as a ground for termination of the contract and/or imposition of contract penalties.

Violation of GCBH's security policy or individual policies and standards may constitute a criminal offense under HIPAA and other federal laws, such as the Federal Computer Fraud and Abuse Act of 1986, 18 U.S.C. 1030, or state laws. Any employee or contractor who violates such a criminal law may expect that GCBH will provide information concerning the violation to appropriate law enforcement personnel and will cooperate with any law enforcement investigation or prosecution.

Further, violations of GCBH's security policy or individual policies and standards may constitute violations of professional ethics and be grounds for professional discipline. Any individual subject to professional ethics guidelines and/or professional discipline should expect GCBH to report such violations to appropriate licensure/accreditation agencies and to cooperate with any professional investigation or disciplinary proceedings.

This Sanction Policy is intended as a guide for the efficient and professional performance of employees' duties to protect the integrity and confidentiality of health and other sensitive information. Nothing herein shall be construed to be a contract between the employer and the employee. Additionally, nothing in this Sanction Policy is to be construed by any employee as containing binding terms and conditions of employment. Nothing in this Sanction Policy should be construed as conferring any employment rights on employees or changing their status from at-will employees. GCBH retains the absolute right to terminate any employee, at any time, with or without good cause. Management retains

the right to change the contents of this Sanction Policy as it deems necessary with or without notice.

Employees and agents of GCBH are expected to comply and cooperate with the organizations administration of this policy.

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.