

**MENTAL HEALTH & RECOVERY
SERVICES BOARD OF LUCAS COUNTY**

Privacy Training for Board Employees

**Effective Date: 7/1/14
Supersedes Date: 4/14/2003**

POLICY

It is the policy of the Mental Health and Recovery Services Board (MHRSB) of Lucas County to provide annual training to its employees on client confidentiality, HIPAA privacy and security regulations as a critical element in assuring compliance with protection of clients' PHI.

ACCOUNTABILITY

Executive Director, Privacy Officer

PROCEDURE

A copy of the MHRSB's HIPAA privacy and security policies will be provided to all new MHRSB members, employees, interns and volunteers within 14 days of hire or appointment.

- A. An overview of the MHRSB's Notice of Privacy Practices and the following policies will be included in annual workforce training:
 - a. Privacy practices
 - b. Use of client PHI for treatment, payment, and operations
 - c. Client rights and grievance procedures
 - d. Clients' right to confidential communication of PHI
 - e. Clients' right to request an amendment to their PHI
 - f. Clients' right to request restricted use/disclosure of PHI
 - g. Clients' right to access, inspect, and copy PHI
 - h. Clients' right to an accounting of disclosures
 - i. Client authorization for use and disclosure of PHI
 - j. Disclosure of PHI to business associates
 - k. Training for MHRSB employees
 - l. Privacy/security breach documentation, investigation, reporting, and notification procedures
 - m. Sanctions for breach of privacy and security of PHI
 - n. Security policies, including the storage, disposal, and transfer of PHI and facility access security, as well as secure communications

- B. The MHRSB's Privacy Officer will coordinate the process to document workforce training.

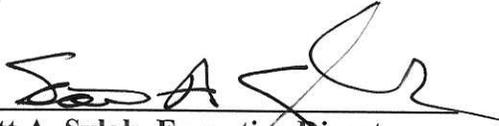
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- C. Material Changes in Policies: MHR SB administrative employees shall review and amend HIPAA privacy policies when needed, and MHR SB employees/contractors will receive an annual HIPAA privacy training. When an employee's functions are affected by a material change in the MHR SB's HIPAA privacy policies, he/she will be trained regarding the change before it takes effect.

Approved:



Scott A. Sylak, Executive Director

6/18/2014
Date