

SOUTHERN HIGHLANDS COMMUNITY MENTAL HEALTH CENTER

POLICY AND PROCEDURE MANUAL

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Policy 536 – Administrative Safeguards – Audit Controls and Internal Audit

I. PURPOSE

Southern Highlands Community Mental Health Center, in an effort to be compliant with the Privacy Rule of HIPAA's Administrative Simplification provisions, sets out, in this policy, the requirements for safeguarding PHI through audit controls and internal auditing.

II. POLICY

Southern Highlands Community Mental Health Center will establish and maintain ongoing processes to review records of systems activity, such as log-ins, file accesses, and security incidents, for PHI in all media. We will establish documented procedures for auditing this information for the purpose of identifying security breaches and for assuring that users comply with access controls. We will assign specific individuals or job functions that will be responsible for such internal audit activity.

We will also establish audit controls that will define users, data sources, data accessed, the consumer, the date and time of the access, and other information we consider appropriate.

We will also establish procedures to audit configuration management practices that have been established to assure that changes to hardware and software systems do not contribute to, or create, security weaknesses.

Access to audit logs will be limited to those assigned to the internal audit and control function as described above.

III. PROCEDURE

Planned Events List will be maintained in the Medical Records Room. Any unplanned events requiring access to PHI will be added to the list which will include data user, source, consumer, date and time of access.

Other policies and procedures to review that are related to this policy:

Minimum Necessary

Administrative Requirements – Training

Administrative Safeguards – Access Controls

Administrative Requirements - Documentation