

PATHWAYS CMH

PROCEDURE TITLE: HIPPA Sanction Policy and Procedure – Appendix 17 to Privacy Policy	CATEGORY: Recipient Rights
EFFECTIVE DATE: April 14, 2003	BOARD APPROVAL DATE: April 14, 2003
REVIEWED DATE: June 2013; July 11, 2014; May 5, 2015; April 22, 2016; April 15, 2017	REVISION(S) TO PROCEDURE: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
RESPONSIBLE PARTY/APPROVAL: Recipient Rights Supervisor or Designee/ Mary J. Swift, CEO	

PURPOSE:

It is the policy of the Pathways Board to protect the confidentiality and integrity of protected health information (PHI) and to provide progressive sanctions for substantiated failure to comply with any standards required by law, professional ethics, or accreditation standards.

This policy applies to all officers, employee, and agents of Pathways. In addition, Pathways and its departments have adopted procedures and standards to carry out the objectives of this policy. Each of these officers, employees, and agents of Pathways must adhere to these procedures and standards, and that such violations constitute grounds for disciplinary action up to and including termination, professional discipline, and criminal prosecution. This sanction policy shall be incorporated by reference into the Pathways Personnel Policy and Procedures

PROCEDURES:

1. Duty to Report:

Any officer, employee, or agent of Pathways who believes another officer, employee, or agent of Pathways has breached the organization's privacy and security policies, procedures, or standards should immediately verbally report such breach to his or her superior and to the Privacy Officer and/or Security Officer or their designee, as appropriate immediately and write an incident report within 24 hours. The report must be signed and dated. Failure to report a breach will result in the application of this sanction policy.

2. Duty to Investigate:

The Privacy and/or Security Officer or designees will conduct a thorough and confidential investigation into the allegations. The organization will inform the complainant of the results of the investigation and any corrective action taken. Pathways will not retaliate against or permit reprisals against a complainant. Allegations not made in good faith, however, may result in discharge or other discipline. The investigation will be done in accordance with the standards included in Michigan Mental Health Code Chapter 7A and will include the following:

- Statement of the allegation
- Statement of the issue

- Investigative findings
- Conclusion
- Suggested Remedial Action
- Distribute copies to Privacy and/or Security Officer, HR manager, employee's supervisor
- Summary report to the complainant
- Completed in 90 days

3. Sanction for a Substantiated Violation:

The Pathways Personnel Policy and Procedure shall be used to determine and apply appropriate sanctions. It is expected that the Pathways Personnel Policy and Procedures guidelines are:

- Progressive
- First offense versus repeated offender.
- Considers the seriousness of the offense.
- Differentiates between intentional and unintentional acts.
- Proportionate to the nature of the violation.
- Past practices in similar situations.

4. Duty to Report a Criminal Offense:

The Privacy and/or Security Officer or designee must report to and cooperate with appropriate law enforcement personnel any suspected breaches which are considered violations of federal, state or local law.

5. Duty to Report Violations of Professional Ethics:

The Privacy and/or Security Officer or designee must report to and cooperate with appropriate censure/accreditation agencies any suspected breaches which are considered violations of ethical standards.

Disclaimer: The Sanction Policy and Procedure is intended as a guide for the efficient and professional performance of employees' duties to protect the integrity and confidentiality of PHI. Nothing herein shall be construed to be a contract between the employer and the employee.

REFERENCES:

45 CFR Part 164 Section 530 (e) (1)