



WORKFORCE TRAINING POLICY

The Health Insurance Portability and Accountability Act of 1996 (HIPAA) requires that covered entities provide training to all of its workforce on the policies and procedures relating to protected health information as necessary and appropriate for the members of the workforce to carry out their function within the covered entity. Purdue's Office of Legal Counsel is responsible for the development of the HIPAA training materials and University-wide HIPAA policies and procedures. The covered components are responsible for developing policies and procedures at the department level, as needed, consistent with the HIPAA policies and procedures, reviewed and approved by the Office of Legal Counsel.

Ensuring that Training Occurs, Monitoring and Recording Training

The HIPAA liaison for each covered component is responsible to ensure that they are notified when new staff are hired, when visitors will be brought into the facility, and the scope of their work. The liaison will ensure that training occurs and is recorded, either in the Webcert system, personal spreadsheet, as needed, and that the appropriate confidentiality agreements are maintained. The training records are required to be maintained for a period of six years. Annually, soon after calendar year-end, the HIPAA liaison will provide to the Office of Legal Counsel a list of all staff and visitors trained and the dates of training during the previous year.

General Workforce

All workforce of covered components at Purdue will receive HIPAA training upon hire and annually. Training will occur prior to workforce having more than incidental access to PHI at the facility in which they are working. The training will include information addressing HIPAA privacy and security requirements, guidelines, policies and procedures and other information as necessary, to ensure that workforce are aware of their responsibilities and expectations for compliance with the HIPAA laws. HIPAA training received outside of Purdue is not recognized to certify that the workforce member has received sufficient HIPAA training. The workforce member is required to be knowledgeable about the Purdue HIPAA compliance implementation and policies and procedures, therefore, Purdue HIPAA training must be completed.

General HIPAA training information and HIPAA policies and procedures are linked to from the Webcert training site. Departments may have additional materials that are required and more specific to the services provided at the department level. Trainees will read all materials during training, watch a video, take a quiz and then agree to a confidentiality agreement. When this agreement is agreed to by the trainee a certification for the trainee is recorded in the database and maintained forever. The certification includes the date/time that certification was completed. Workforce are trained upon hire and retrained annually. Annual certification must occur every year any time during the calendar year. If the employee was hired within six months of the end of the year they do not need to recertify until the following calendar year.





Visiting Clinicians

Clinicians may visit from other institutions to receive experiential training or for observation. If they will be at the Purdue facility for less than 3 days during a six month period, a verbal reminder about maintaining the confidentiality of the PHI to which they may be exposed and signing Purdue's Confidentiality agreement, will be sufficient. Program directors should ensure that these clinicians have had HIPAA training at another facility prior to coming to Purdue for this purpose. If the clinician will be onsite at the Purdue facility for 3 days or more, they must review Purdue's PowerPoint, https://www.purdue.edu/legalcounsel/HIPAA% HIPAA training 20forms%202020/HIPAA%20Powerpoint%20-%202020 ibg%20slides.pdf, prior to access to patients or other PHI and they must sign the Confidentiality Agreement Clinical https://www.purdue.edu/legalcounsel/HIPAA%20forms%202020/ Programs. confidentialityagmtclinicalprog-2020.pdf. The Confidentiality Agreement must be given to the HIPAA liaison to maintain.

Contractors and Others with Incidental Access to PHI

Contractors, cleaning, maintenance staff, and others may have incidental access to PHI as they are working in locations where exposure to this information is possible. Access to PHI by these staff should be limited as much as possible and they should sign the Confidentiality Agreement Contractors at: https://www.purdue.edu/legalcounsel/HIPAA%20forms%202020/confidentialityagmtcontractors-2020.pdf. The agreement must be sent to the HIPAA liaison to maintain.

Shadowing

Shadowing by visitors that include non-clinical personnel, for example high school students, is not allowed at any Purdue covered component. Visitors may tour the facility where access is allowed to the general public, but these visitors are not allowed to access confidential areas of the building, like medical record rooms, exam rooms or offices where patients or other confidential information can be seen. Observations by clinical students is allowed and is addressed in the Visiting Clinicians section.

Faculty Project Work Participants

Faculty and staff at Purdue who are not covered workforce and who are not participating in clinical training as a trainee may not have access to protected health information in Purdue's covered components without obtaining a HIPAA authorization or approved research project, where applicable, with appropriate HIPAA documentation (e.g. authorization, IRB waiver, data use agreement). Questions about specific programs or activities should be shared with the Office of Legal Counsel to determine the appropriate procedures to be used given the circumstances.





Purdue Researchers

HIPAA training materials, targeted for use in training researchers, were developed by the Office of Legal Counsel and are available on the HIPAA website, https://www.purdue.edu/legalcounsel/HIPAA%20forms%202020/HIPAA%20Powerpoint%20-%202020_ibg%208lides.pdf. Purdue's IRB will recommend use of these materials or others that they deem appropriate for researchers who are receiving protected health information for use in their projects.

Student Affiliation Training

HIPAA training has been provided for students who will be receiving experiential training in covered entities outside of Purdue and their Purdue supervisors. It is the covered entity's ultimate responsibility to provide HIPAA training to those with access to PHI in their facility. However, HIPAA training materials are provided as covered entities and will on occasion request that students receive HIPAA training before arrival. The training materials can be accessed at: https://www.purdue.edu/legalcounsel/HIPAA/Training.html.

Other

HIPAA training materials are provided on the HIPAA website and onsite training for specific groups will be provided by the Office of Legal Counsel upon request.