POLICY:

- It is the policy of HCOP to ensure that all faculty, staff, and students are aware of HIPAA regulations and know how these regulations pertain to their professional role in all health care settings.

- It is the policy of HCOP to protect the privacy and confidentiality of all health information shared with us in our role as health care professionals.

- HCOP will develop and maintain policies and procedures in the HCOP HIPAA manual that provides guidance for how patient privacy and the security of health information will be maintained in all HCOP environments. HCOP will ensure that faculty and staff are aware of this manual and where this information is stored and how it can be accessed.

- HCOP will designate a HIPAA officer for the school, and the name and contact information of this person will be made available for faculty, staff, and students.

PROCEDURES:

HCOP faculty, staff, and student pharmacists will be required to complete HIPAA training annually.

For student pharmacists:

- Will annually complete an educational module that is provided by “The Pharmacists Letter”.
- Upon completion of the module, the student will print a certificate of completion and upload this documentation into CORE® for review by Clinical Affairs and Outreach’s Experiential Programs Office (EPO) staff.
- Students who do not upload this documentation by the designated deadline will receive an e-mail from an EPO staff member.
- These warnings will be sent at designated time intervals after the due date.
- If the student does not submit the required documentation after the second warning, the student will receive a “Professionalism Assessment”.
- This might lead to further action by HCOP’s Committee on Academic Requirements, Professionalism, & Student Success (CARPSS).

For HCOP faculty and staff and other students not part of the Pharm D curriculum:

- This training will be completed annually and delivered through the AU designated HIPAA training platform.
- Upon completion of this designated training, the HCOP faculty or staff member will follow departmental policies and procedures to report completion to their supervisor.
- If the employee does not complete the required training the employee’s supervisor will be notified and progressive discipline will occur.
- Progressive discipline might result in written reprimands and possible dismissal.
- Individual faculty, department heads and supervisors may be required to complete more than this training if required by the university or their practice site.
• This training does not encompass requirements for research and CITI training cannot be used as a substitute for this requirement.

HCOP Officer:

• The current HCOP HIPAA Officer is:

   Dr. Greg Peden,
   Executive Director of Clinical Health Services (CHS)
   2155 Walker Building, Auburn University Pharmaceutical Care Center (AUPCC)
   pedengc@auburn.edu | (334) 844-4099

This policy and procedure will be reviewed annually by the Clinical Services Advisory Committee (CSAC) and the HCOP Compliance Committee and updated to ensure HCOP’s continued compliance with HIPAA training for all HCOP faculty, staff, and students.