I. PURPOSE:
This policy is designed to describe circumstances where a member of the Workforce could face disciplinary actions for violations of Security policies. Disciplinary actions will follow the HR Policies of the applicable group but could include, but are not be limited to, such actions as: retraining, written warnings, suspension or termination from employment.

II. POLICY:
A. Members of the Workforce who violate ACE security policies will be subject to appropriate disciplinary actions up to and including termination.
B. The HIPAA Security Regulations require the component organizations of the ACE to reasonably and appropriately:
   1. Establish and implement a Human Resources process for the administration and documentation of sanctions applied to those members of the Workforce who have, either knowingly or accidentally, violated or failed to comply with policies and procedures relating to the Security and safeguarding of Electronic Protected Health Information, in compliance with the Security Rule.
   2. Communicate the Sanctions Policy to the Workforce within each of the component organizations in such manner as is deemed most appropriate by the covered entity. Methods of communication may include but not be limited to incorporating the policy into the employee handbook or Code of Conduct, providing access to policies electronically or in manuals, providing summary of policies by newsletter or electronically, etc.

III. DEFINITIONS: See document “SECURITY POLICY GLOSSARY FOR DEFINITIONS OF SPECIAL TERMS (ACE-0999).

IV. PROCEDURES:
A. Standards:
The policies and procedures of the Affiliated Covered Entity (ACE) relating to Information Security apply to all component organizations of the ACE and all members of the Workforce.

B. Responsibilities:
   1. The Senior Management of the Human Resources Departments of the component organizations of the ACE are responsible for administration and oversight of policies and procedures related to corrective action or disciplinary procedures appropriate to addressing alleged violations of HIPAA policies and procedures. This includes:
      a) Providing the Workforce with access to and/or interpretation of applicable HIPAA or related policies.
      b) Maintaining records of sanctions applied.
      c) Monitoring application of sanctions for consistency and fairness.
      d) Communicating the process for reporting violations of policies to the Workforce.
   2. Management personnel are responsible for reporting known policy violations, participating in reviews of alleged violations, and the administration of specific sanctions.
V. RESOURCES:
   A. Compliance Office
   B. ACE Security Official (804) 828-1990
   C. Information Security Contacts
   D. Human Resources departments of the ACE elements

VI. REFERENCES:
   B. VCU Health Systems – Glossary of HIPAA Terms
   C. VCU Health Systems Compliance Manual

APPROVED:

Signature on File

Dr. Sheldon M. Retchin, M.D., M.S.P.H.