CBHS Policies and Procedures

City and County of San Francisco
Department of Public Health
Community Programs
COMMUNITY BEHAVIORAL HEALTH SERVICES

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POLICY/PROCEDURE REGARDING: **BHS Electronic Record Security and Retention**

Approved By: Hillary Kunins; MD, MPH Director of Community Behavioral Health Services Effective Date: May 4, 2021	Manual Number: 6.00-03 References: BHS Policy 3.10-07 Security and Retention of BHS Medical Records BHS Policy 3.06-12 Responding to Court Order for Sealing Medical Records California Health and Safety Code Sect.123149, Title 22 Sect. 70751(g)(1)(2), and Code of Federal Regulation-482.24(c)(1)(I)(ii), 42 CFR Part2

Technical Revision. Replaces Policy 6.00-03 Dated December 2, 2010

Purpose: This policy defines security and retention of electronic records within BHS. It is meant to expound on the BHS Security and Retention of Behavioral Health Services Medical Records Policy (3.10-07) as it pertains to the maintenance of an Electronic Health Record system.

Scope: Applies to all Financial, Programmatic, and Medical Records stored in the electronic health record.

Policy: Behavioral Health Services (BHS) is committed to maintaining the integrity of electronic client records as well as program and staff information.

A. Access

1. California State law strictly prohibits the inappropriate review or viewing of patient medical information without a direct need for diagnosis, treatment, or other lawful purpose.
2. Access to electronic records is limited to authorized users in accordance with the Behavioral Health Services EHR Access Control Policy (6.00-06)
3. Ambulatory Care Applications Department maintains audit trails and logs regarding accessing clinical data.
   a. Random reviews may be conducted for inappropriate access including, but not limited to:
      i. Celebrity or notorious clients
      ii. Employees or Peers who may have electronic health records
4. Unauthorized access of BHS electronic records or data is prohibited and may result in disciplinary action up to and including termination of employment and may further result in civil or criminal action under the Welfare and Institutions Code, Sections 5330 and 942.

B. Security: Protected Health Information must be stored in Secure Servers, encrypted workstations and laptops (using an encryption solution such as Advanced Encryption Standards), or encrypted removable media devices.

C. Retention of electronic records: Retention of clinical information in the electronic health record is governed by the BHS Security and Retention of Medical Records Policy (3.10-07) with the following additions:

1. Electronic records are not routinely purged or destroyed
2. Court ordered sealing of medical records is conducted in accordance with the BHS policy on Responding to Court Order for Sealing Medical Records (3.06-12)
3. Electronic records are stored in centrally maintained databases in a controlled environment.

D. Electronic records backup occurs on a regularly scheduled basis

1. Data backup to disk is conducted locally to protect against loss in the event of systems or application failure.
2. Database backup is stored off-site at a secure, remote location to protect records from loss or damage in the event of a disaster.

E. Downtime procedures are defined and implemented at the program as well as at the IS system level to address anticipated downtime, system failure, procedures for continuity of business, and procedures for system recovery.

F. Data integrity

1. Client information is authenticated through a search mechanism (including aliases) prior to entry of any data in the electronic record and further validated against the State Medi-Cal system.
2. Duplicate client records are identified through the regular review of reports and client merges are handled by Health Information Management Services (HIMS)

G. Breaches: In accordance with the Major Privacy Breach Emergency Quick Reference Response Guide (B.2.0), report breaches to the Privacy Office.

Contact Person:
Ambulatory Care Applications Manager, 415 255-3566

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