

UNIVERSITY OF FLORIDA
INFORMATION PRIVACY POLICIES & PROCEDURES
HEALTH INFORMATION OPERATIONAL GUIDELINES

I. Student Data Access

A. POLICY

Rev: 02/01/2008

1. **The UF Privacy Office** must pre-approve all applications for access to the Shands HealthCare (SHC) Information Systems by students who require the access for completing academic course-work. The students must be:
 - a) *Enrolled in a UF Health Science Center College or an approved UF health-related program,*
 - b) *Pursuing an internship or clerkship rotation, or*
 - c) *Participating in UF research as a student, not as an employee or volunteer.*
2. **UF Students who are employed or volunteer** in jobs that require access to patient data must apply directly through the SHC Information Services Department for such access with the assistance of their employing or sponsoring department.
3. **Students must be sponsored and supervised** by a proctor or faculty member employed by the UF Health Science Center or the student's health-related program.
 - a) *The sponsor will be responsible for providing or obtaining written permissions for data uses when such permissions are required.*
 - b) *The sponsor will periodically review students' access rights to ensure they are only provided with the access needed to accomplish required academic tasks.*
 - c) *The sponsor will immediately notify the SHC Information Services administrator when a student's enrollment status changes or is terminated (within 10 days).*
4. **Student access is limited** to 12 continuous months at a time, with start and end-dates defined at the time of application.
5. **Students are granted defined levels of access** according to classifications established by SHC information systems. The UF Privacy Office approves all role-based functions including reading, creating, and transporting health information.
6. **Students** must follow the SHC Information Systems requirements when applying for access, including but not limited to:
 - a) *Signing a Shands Healthcare Confidentiality and Security Agreement, which should be filed in the student's record;*
 - b) *Supplying necessary personal information for authentication purposes, and*
 - c) *Participating in an orientation program for use of the SHC Information Systems prior to using the system.*
7. **Sponsors** provide the required information for each student at least three weeks, but not more than 60 days, prior to the access start date.

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8. **Documentation** within the SHC Information system that is created by students must be co-signed by the student's sponsor within 48 hours.
9. **Immediate disciplinary action** will be taken by the Health Science Center against students who misuse the SHC Information System or the data maintained in the system. Violations may result in permanent loss of access privileges. Sanctions for misuse or misconduct will be determined by the Privacy Office in collaboration with HSC colleges.
10. **Data** (and limited data, i.e., de-identified data) may only be transported specific to class assignments, with advance written approval of the student's sponsor, and following Privacy Office policies for removal of patient data. (See Privacy Manual: Operational Guidelines – Health Information and Record Management.) Other transport of identifiable personal or patient data for any reason will require Privacy Office approval.

B. DEFINITIONS

1. **Protected Health Information:** Individually identifiable health information that is:
 - a) *Transmitted by electronic media;*
 - b) *Maintained in any medium described in the definition of electronic media at §162.103; or*
 - c) *Transmitted or maintained in any other form or medium.*
2. **Personal Identification Information:** Any name or number that may be used, alone or in conjunction with any other information, to identify a specific individual. (See full definition in the Glossary – Appendix A.)
3. **Transport:** To convey from one place to another; to remove from the premises.

C. PRIVACY REQUIREMENTS

1. **Covered entities must do the following:**
 - a) *Ensure the confidentiality, integrity, and availability of all electronic protected health information the covered entity creates, receives, maintains, or transmits.*
 - b) *Protect against any reasonably anticipated threats or hazards to the security or integrity of such information.*
 - c) *Protect against any reasonably anticipated uses or disclosures of such information that are not permitted or required under the Privacy Rule.*
 - d) *Ensure compliance with the above by its workforce.*
 - e) *Implement policies and procedures that, based upon the entity's access authorization policies, establish, document, review, and modify a user's right of access to a workstation, transaction, program, or process.*

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D. PROCEDURES

1. Sponsors

- a) *Complete the Access Application form for any students who will need to use the Shands HIS network,*
 - (1) Apply at least two weeks, but not more than 60 days, in advance of the students' arrival on campus.
 - (2) If there are more students than will fit on one page, use a second form, completing all the information at the top for each page; do not alter the form or write on the back of the form.
- b) *Enter the following information for each student:*
 - (1) Sponsor's name, title, and contact information;
 - (2) Student's College, and specific Department, Division or Program;
 - (3) Student's Name and UF Identification number;
 - (4) Student's level: Graduate, Undergrad, etc.
 - (5) Date of the student's expected graduation or departure
 - (6) Date on which SHC Confidentiality Statement was signed
 - (7) Access start and end dates:
 - (a) Access start date must be a future date;
 - (b) Access periods may not exceed 12 months.
- c) *Keep a copy of the Access Application form along with the students' signed (Shands) Confidentiality Statements.*
- d) *Forward the original Access Application form only to the Privacy Office, using the addresses provided at the bottom of the form.*
 - (1) Do not send copies of the Shands Confidentiality Statements to the Privacy Office.
 - (2) Do not send Access Applications directly to the Shands IT Department unless specifically instructed to do so.
- e) *Notification: A notice that access has been granted, along with the corresponding logins and preliminary passwords, will be sent to the sponsor by e-mail within 3-5 business days after submitting the applications to the Privacy Office. If notice is not received within that time or if there is another problem, call the Privacy Office for assistance.*
- f) *If dates of access need to be changed, submit a new form to the Privacy Office with the updated information and a note of explanation about the change.*
- g) *After access has been granted, if the access needs to be terminated prior to the requested End Date, call the Shands IT Account Management Office directly; also send an email to both the Shands IT Department and the UF Privacy Office.*

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2. Trainees / Students

- a) *Complete UF's HIPAA & Privacy General Awareness Training and UF's Confidentiality Statement. The successful completion and registration of these two components are automatically entered in a database and can be retrieved by your sponsor as needed.*
- b) *Sign a paper copy of the Shands Confidentiality Statement (available at the following web address and fax or mail it to your sponsor: https://my.portal.shands.ufl.edu/portal/page/portal/PORTLET_STAGING/Services/Confidentiality%20and%20Security%20Agreement **Use your UF ID # in place of the requested Social Security Number.***
- c) *After acquiring access to the Shands HIS system, complete the Shands online HIPAA training module.*
- d) *Renewal: If you will need access to the HIS system for longer than 12 months, make a note of the date on which your current access will end, and remind your sponsor to submit a new Access Application before your access ends, so that your access will be uninterrupted.*

3. The UF Privacy Office will forward complete and approved Access Applications to the Account Management Department of Shands IT.

4. The Shands IT Account Management Department will return a copy of completed Access Applications to the Privacy Office and contact the Sponsor when access has been granted.

E. REFERENCES

1. **HIPAA:** 45 CFR §164.306 (Security standards: General rules), §164.308 (Administrative safeguards).

F. EXHIBITS

1. **Form: Student Data Access Application**
2. **Chart: Student Data Access**