

## **Oklahoma State University**

Title: Workstation Security	Policy #: SEC-10.02
Category: HIPAA Compliance	Authority: 45 CFR §
	HIPAA SECTION: §164.310(a)(2)(c)
Standard: Workstation Security	<b>Responsibility: Health Care Components</b>
Effective Date: 4/20/2005	Page 1 of 2
Approved By: OSU Legal Counsel	Revised: 7/1/2013

#### **PURPOSE:**

To ensure that all workstations that have access to EPHI are restricted to authorized users.

### **POLICY:**

OSU will implement physical safeguards for all workstations that access electronic protected health information, to restrict access to authorized users.  $\S 164.310(a)(2)(c)$ 

### **PROCEDURES**:

The ability to logon to a workstation is limited to those with an active Okey account. Local accounts, which bypass logging into the domain are not to be used on machines where ePHI is located.

All users of software that contain ePHI are to have their own individual accounts. Shared logins (multiple users logging in under one name) are not permitted under any circumstance.

The location of all workstations will be recorded and logged by IT or by the HIPAA Compliance Office. This record is to be kept up to date as possible, and will be reviewed on no less than an annual basis.

Any loss or theft of a workstation should be reported immediately to the HIPAA Compliance Office and IT.

All workstations that contain ePHI or have the ability to view ePHI are to have the operating system locked or shut down when unattended or not in use.

All workstations that have the ability to view ePHI, and have a reasonable expectation that patients, or other unauthorized viewers may be able to access PHI are to have a privacy screen on the monitor to help protect and prevent any unauthorized viewing or misuse.

### REFERENCE:

Workstation Use
Physical Access Controls



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