## **EMR Program – Privacy and Security Required Actions**

Clinic Name: \_\_\_\_\_

Physicians participating in the Saskatchewan EMR Program are required to complete certain actions as part of their privacy and security program.			
	Accountability	Yes / Complete	
1.	Have you appointed a Privacy Officer?		
	Privacy Officer Name		
	Privacy Officer Assistant Name		
	Lead Trustee Name		
2.	Have you appointed an individual responsible for ongoing EMR user account management (new user set up, changes to user privileges, de-activation of old user accounts)?		
	EMR Account Manager Name		
3.	Will individuals in your clinic have their own user account when using the EMR?		
4.	Has staff signed a confidentiality agreement?		
	If the answer is no, when are they going to be asked to sign?		
	Awareness and Education	Yes / Complete	
5.	Have staff members been made aware about privacy, <i>The Health Information Protection Act</i> (HIPA), and how to manage and secure personal health information?		
	If the answer is no, when are staff to receive education?		
6.	Is a patient privacy notice (or other communication materials) available that informs patients about privacy, security and information management practices?		
	Agreements	Yes / Complete	
7.	Has a written agreement been put in place with a knowledgeable computer professional for support services?		
8.	Are there signed agreements with Information Management Service Provider (IMSP) in place with third parties that process, store, archive or destroy records for the clinic, or that provide information management or information technology services. Do these agreements include privacy, security and confidentiality		





Date: \_\_\_\_\_

9.	Is there a signed clinic information sharing agreement among the trustees or a signed commitment at the beginning or the clinic policy manual?	
10.	Is there a signed clinic exit agreement among the physicians in the clinic establishing the terms for managing records if a physician ceases to practice at the clinic.	
	Safeguards	Yes / Complete
11.	Are unattended peripheral devices (e.g. printers, fax machines) located in secure areas that are not accessible to the public?	
12.	Are computer monitors situated or equipped in a manner that prevents unauthorized viewing?	
13.	Are procedures and technical controls (e.g. application time-out) in place to prevent screens from being viewed if the computer user leaves the computer?	
14.	Are on-site servers secured to the floor or wall, or located in a secure, not-publicly accessed room containing a locking door and no windows to the exterior of the building?  Describe location	
15.	Is personal health information that is stored on desktop computers, laptops or mobile storage (e.g. memory keys) devices encrypted?	
16.	Has up-to-date anti-virus protection been installed on workstations?	
17.	Are anti-virus controls always 'on' and enabled?	
18.	Do you subscribe to automated regular updates from your anti-virus software company?	
19.	Are firewalls installed on computers and/or in the clinic?	
20.	Are controls in place to manage "ADMINSTRATOR" passwords?	
21.	Have appropriate controls been set up to secure the local area network (LAN)?	
22.	Have wireless security settings been appropriately configured and enabled (e.g., restrict wireless transmission, encryption is used, etc.)?	
23.	Have you changed your wireless internet access password from the original ISP provided password?	



