Operational Policy

Policy title: Information Security and Privacy Awareness and Training Policy
Policy number: DHS|OHA 090-004
Original date: 05/17/2004
Last update: 04/01/2019
Approved: Kris Kautz, OHA Deputy Director
Don Erickson, DHS Chief Administrative Officer

Purpose
The Department of Human Services (DHS) and the Oregon Health Authority (OHA) are committed to protecting the agency’s information assets and systems. The purpose of this policy is to establish and sustain an appropriate level of protection for information and technology resources through security and privacy awareness training.

Description
This policy describes the responsibilities of DHS|OHA to ensure that staff are aware and trained in information security and privacy policies and practices. It also describes the responsibility of staff to know, understand, and comply with agency, state and federal law and requirements.

Applicability
This policy applies to all DHS|OHA staff including employees, volunteers, trainees, interns, contractors, and partners.

As keepers of the public trust, all agency employees have a responsibility to comply with state and agency policies, administrative rule, and state and federal law. The agency takes this responsibility seriously and failure to fulfill this responsibility is not treated lightly. Employees who fail to comply with state or agency policy, administrative rule, or state and federal law may face progressive discipline, up to and including dismissal from state service. Contractors and partners may face termination of the working relationship as well as federal sanctions.

Policy
1. DHS|OHA staff shall guard against improper use or disclosure of protected information through awareness and training, and regularly reviewing policies.
2. DHS|OHA shall develop, maintain, and implement an ongoing information security and privacy awareness and training program for authorized users of the agencies information assets and systems.
3. The information security and privacy awareness and training program shall include the following:
   a. Scheduled and unscheduled awareness assessments.
   b. Updates and reminders.
c. Insider threat awareness training including:
   A. How to recognize potential indicators of insider threat; and
   B. How to respond to suspected insider threat incidents.
d. Additional training related to protecting agency information assets and systems.

4. Records related to information security and privacy training shall be maintained and tracked by the Information Security and Privacy Office (ISPO) in accordance with record retention requirements.

5. All staff shall be aware of their responsibilities for the security and privacy of information assets and systems under agency, state and federal law and requirements.
   a. The importance of information security and privacy and the role of staff in protecting the information in DHS|OHA systems shall be discussed during new employee orientation.
   b. DHS|OHA staff shall complete information security and privacy training within 30 days of beginning employment and refresher training on an annual basis.
   c. DHS|OHA managers shall ensure that all members of the agency’s staff are aware of and have access to current versions of information security and privacy policies, processes, guidelines, and best practices.
   d. Supervisors are responsible for ensuring that staff who have access to protected information are informed of their responsibilities related to communication and storage of information regardless of format: hard copy, electronic or verbal.

6. DHS|OHA staff shall acknowledge they have been informed and are aware of DHS|OHA information security and privacy policies and their role in protecting DHS|OHA information assets and systems by signing form MSC 2400.

7. Any user of DHS|OHA information assets or systems who knowingly and willfully violates agency, state or federal law and requirements for improper use or disclosure of agency held information, including personally identifiable information, and protected health information, are potentially subject to criminal investigation and prosecution, civil litigation, or civil monetary penalties.

8. All DHS|OHA contracts shall contain language concerning awareness of information security and privacy policies and requiring adherence to DHS|OHA information security and privacy policies, processes, and guidelines.

9. Contractors, partners, business associates and other authorized users shall acknowledge their responsibilities for protecting information assets and systems through the terms of their contracts, memoranda of understanding, or other required documentation.

10. Neither DHS nor OHA as entities or any DHS|OHA employee will intimidate, threaten, coerce, discriminate against, or take any other form of retaliatory action against any individual for opposing, reporting, or testifying to an unlawful action or security incident.

References
45 CFR 160 & 164
OAR 125-055-0100 to 125-055-0130
OAR 166-300-0040(11)
OAR 407-014-0300 to 407-014-0320
OAR 943-014-0300 to 943-014-0465
Criminal Justice Information Systems Security Standards (CJIS)
Federal Information Processing Standards (FIPS) Publication (Pub) 200
Forms referenced
MSC 2400 DHS|OHA Policy and Procedure Summary

Related policies
DAS 107-004-052 Information Security
DAS-107-004-053 Employee Security
DHS|OHA 010-014 Agency Compliance with Statewide Administrative Policy

OHA 100-012 Enforcement, Sanctions, and Penalties for Violations of Individual Privacy

Contact
Information Security and Privacy Office (ISPO)
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This policy shall be reviewed at least once every year to ensure relevancy.

Policy history
Version 1 DHS090-004 established 05/17/2004
Replaced by joint policy
Version 1 DHS|OHA 090-004 established 3/11/15
Version 2 DHS|OHA 090-004 reviewed annually 03/04/16
Version 3 DHS|OHA 090-004 revised 12/20/2017
Version 4 DHS|OHA 090-004 reviewed annually 04/01/2019

Keywords
Annual, awareness, assets, authorized users, contracts, HIPAA, information assets, refresher, security, systems, training

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