

Job Description/Performance Evaluation

Title: Information Security Officer

Employer Evaluation

Employee Self Evaluation

Job Summary: The Information Security Officer is responsible for the development, implementation, and oversight of the Agency's security policies and procedures as they relate to patient/client health information. and any other confidential information.

Job Classification: Management

Lines of Authority: Chief Executive Office

Job Qualifications:

Education: Graduate of an accredited college/university with a degree in information management preferred.

Experience: Two years experience in the health care arena preferred

Skills: The ability to establish and maintain professional and effective relationships with all staff, the lay and professional public, the Board of Directors, the Agency's Business Associates, third party payors, and Medical Director, as appropriate. Knowledge of hospice operations and flow of PHI throughout the Agency's electronic information systems. Understanding of Federal and State laws and regulations pertaining to patient/client privacy rights, confidentiality, and security protections. Ability to represent the organization's information security interests with external parties who undertake to adopt or amend security legislation. Ability to develop effective training programs on information system security.

Environmental and Working Conditions: Works in an office environment. Ability to work a flexible schedule; ability to travel locally; some exposure to unpleasant weather.

Physical and Mental Effort: Sitting is required. No or very limited physical effort or risk required. Requires ability to handle stressful situations in a calm and courteous manner at all times. Requires working under some stressful conditions to meet deadlines and the Agency needs.

Essential Functions

Evaluation

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| Demonstrate an in-depth knowledge of, interpret, and ensure compliance with, all local, state, and federal laws relating to management of confidentiality and the HIPAA Security Rule, in order to develop and implement comprehensive security policies and procedures. | |
| Develop, implement, and maintain compliance with security policies, standards, procedures, and guidelines for the Agency. | |
| Direct and manage the operational and administrative activities associated with information management and security. | |
| Review the development, testing, and implementation of security plans, products, and controls. | |
| Identify and analyze IT security risk and exposure incidents on new and existing infrastructure; investigate the escalation of security events such as viruses and hacker intrusion to discover and develop and recommend appropriate solutions and corrective actions for IT security incidents. | |
| Ensure that the Agency's daily operations and actual practice conform to requirements as defined in the Agency's policies and procedures. | |
| Develop and conduct training on security regulations and ensure that all Agency management personnel, employees, and Business Associates receive adequate and appropriate training. | |
| Develop systems and processes for monitoring the Agency's Business Associate contracts. | |
| Serve as an internal and external liaison and resource between different departments and liaise with vendors regarding information security incidents, as appropriate to ensure the Agency's security practices are implemented, consistent, and coordinated. | |
| Cooperate with the Office of Civil Rights or other oversight agencies in any investigations of IT security violations or breaches. | |
| Other duties as assigned by the Administration. | |

Statement of Understanding: I have read the above job description and essential functions. I understand and agree to carry out these responsibilities as assigned. I understand and acknowledge that nothing contained in this job description may be construed as limiting the employer's right to discipline or terminate my employment at any time for failure to perform satisfactorily.

Employee Signature: _____ **Date:** _____

Employer Signature: _____ **Date:** _____

(For Job Description)

Evaluation Codes: 1-Does not meet job requirements/expectations 2-Occasionally meets job requirement

3 -Normally meets job requirements 4-Meets and occasionally exceeds job requirements 5-Regularly exceeds job requirements

Performance Evaluation Addendum

90 Day

Annual

Date On Site Supervisory Visit Completed: _____ (form attached).

Comments/Goals Met or Not Met for this evaluation period: _____

Employer/Employee Mutual Goals set for the next evaluation period: _____

Employee Comments/Response: _____

Employee Signature: _____ **Date:** _____
(For Employer Evaluation/Employee Self Evaluation)

Evaluator/Title: _____ **Date:** _____