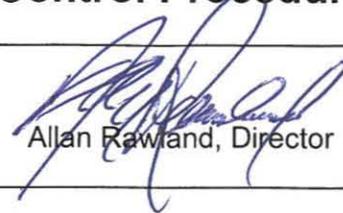


**The County of San Bernardino
Department of Behavioral Health**

Facility Physical Security and Access Control Procedures

**Effective
Approved**

07/01/10
12/06/10



Allan Rawland, Director

Purpose

To provide Department of Behavioral Health (DBH) staff with a protocol to follow to ensure protected health information (PHI) and personally identifiable information (PII) is secured in accordance with applicable agreements and regulations.

**Security
Access Card
Controls**

BH has implemented a card management system and a monitoring system to ensure the appropriate use of standard formatted Security Access Cards (SAC). SACs are used to control and validate access to facilities, as they are issued based on individual roles or functions as described in the following five (5) security access levels.

Access control includes visitor control and control of access to software programs and hardware infrastructure for maintenance, testing, revision and implementation. Temporary cards are issued to visitors and worn at all times. Visitors are escorted in restricted areas.

The five (5) security access levels are:

Level	Description
1	<u>General Employee and Visitor</u> : Authorized to access all interior and exterior doors within an assigned building during normal business hours Monday through Friday from 7:00 a.m. to 5:30 p.m.
2	<u>General Employee Extended</u> : Authorized to access all interior and exterior doors within an assigned building during extended hours, as identified and authorized by the Program Manager (6:00 a.m. to 10:00 p.m. unofficial standard)
3	<u>Program Managers, Information Technology (IT) Technicians and Storekeepers</u> : Authorized to access all interior and exterior doors in ALL facilities during normal business hours, Monday through Friday from 7:00 a.m. to 5:30 p.m.
4	<u>Program Managers, Regional Medical Doctors and Lead Child Psychiatrists</u> : Authorized unlimited access (24/7) to all interior and exterior doors within their primary or assigned building(s).
5	<u>Director, Medical Director, Deputy Directors, FPM Facility Managers</u> : Authorized unlimited access (24/7) to all interior and exterior doors in all DBH buildings.

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Responsibility and Procedure

Each card access site has a primary and secondary staff member assigned and trained as the Site System Administrator (SSA) and backup. SSAs must have a job classification of at least thirty-five (35). Responsibilities for the card access system are as follows:

Role	Responsibility
Deputy Director Administrative Services	<ul style="list-style-type: none"> • Overall responsibility for SACs • Ensures written formal policies and procedures are in place for SACs at all facilities • Ensures a backup policy and procedure is implemented in case of system failure, such as accessing a generator in an emergency as described in the Emergency Action Plan Policy
Human Resources	<ul style="list-style-type: none"> • Requests access system reports as needed • Retains Security Access Card completed forms
System Administrator (SA)	<p>The primary and secondary System Administrator is responsible for:</p> <ul style="list-style-type: none"> • Managing the access card system • Activating Security Level 2 and above SACs within three (3) business days • Ensuring an Authorization Form for Unlimited Access is completed and signed as appropriate • Issuing SACs once employee identity is verified for security Level 2 and above • Data entry to the access system • Issuing 2-day temporary SACs for all security levels in the Hospitality Lane Facility • Running access system reports as requested by Human Resources • Forwarding completed access card system forms to Payroll
Site System Administrator (SSA)	<p>The primary and secondary Site System Administrator (SSA) at each access card facility is responsible for:</p> <ul style="list-style-type: none"> • Tracking which staff have access to the building and ensure access is appropriate for staff respective duties • Requesting changes to metal key locks when keys are unaccounted for or lost • Reporting all security card access equipment problems to Facilities and Project Management via a Repair/Service Request

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Responsibility
and Procedure
(continued)

Role	Responsibility
Site System Administrator (SSA) (continued)	<ul style="list-style-type: none"> • Activating SACs only for security Level 1 within two (2) business days • Reviewing the Request for Access Card Authorization as complete • Issuing SACs once employee identity is verified for security Level 1 only • Ensuring an Employee Acceptance Acknowledgement Form for each new employee is initialed and signed • Issuing two (2)-day temporary SACs for all security levels in the assigned facility • Deactivating any level of returned SACs upon receipt of a Request to Remove Access Card or an Employee Unable to Return Access Card form • Retaining new and returned SACs • Forwarding completed access card system forms to Payroll • Investigating SACs inactive for ninety (90) or more days to determine if card should be disabled
Employee Supervisor	<ul style="list-style-type: none"> • Ensures employees are added and/or removed from the access system by: <ul style="list-style-type: none"> ○ Notifying SSA of a new hire at the earliest possible date of knowledge ○ Submitting to the SA a completed and signed Authorization Form for Unlimited Access as appropriate for security Level 2 and above ○ Submitting to the SSA a completed and signed Request for Access Card authorization form as appropriate for security Level 1 ○ Ensuring new employees sign an Employee Acceptance Acknowledgement form • Ensures staff wear temporary badges if assigned badges are not available • Immediately processes SACs for employees terminating DBH employment or transferring from the facility or who report a missing security access card by: <ul style="list-style-type: none"> ○ Completing a Request to Remove Access Card, including the reason to remove or de-activate the card

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Responsibility and Procedure
(continued)

Role	Responsibility
Employee Supervisor (continued)	<ul style="list-style-type: none"> ○ Notifying the SSA to remove the employee from the access system by submitting the above form ○ Collecting employee SACs immediately ● Processes unreturned SACs by: <ul style="list-style-type: none"> ○ Charging employees who do not return their cards upon leaving DBH or the County or who need to replace the card for any reason ○ Ensuring an Employee Unable to Return Access Card form is completed and sent to SSA ● Immediately notifying FPM when employment is terminated and employee has not returned metal key <p>Note: Access may be modified by a request from a Program Manager at any time.</p>
Employees	<ul style="list-style-type: none"> ● New Employees must sign an Employee Acceptance Acknowledgement form ● Must notify the supervisor immediately when the SAC is missing ● Surrender SAC upon leaving DBH employment
Payroll	<ul style="list-style-type: none"> ● Files copies of the completed SAC forms in employee's Official Personnel File ● Includes in the weekly HIPAA Report notice of all DBH staff changes as a security measure

Employee Identification Card Control

Employee Identification (ID) badges with photographs are issued for all DBH employees in accordance with County policy, which requires each employee to have and wear an approved County/DBH ID badge at all times while on duty, as follows:

- Display photo side out
- Not display photo side out where specific exemptions or prohibitions by the department apply
- Appropriately store the ID badge in a safe place when not in use
- Immediately report lost or stolen cards
- Surrender ID cards upon leaving DBH employment

The DBH Payroll Department, under the direction of the Deputy Director of Administrative Services, ensures, after appropriate confirmation of identity:

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Employee Identification Card Control (continued)

- New employees have initial ID badges issued at orientation or upon completion of new hire paperwork, including photograph
 - Replacement ID badges are issued when the original is damaged, lost or there is a job change
 - Appointments are made to issue ID badges to volunteers, WEX and interns
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Doors

Basic security tenets are applied to all facilities at all points of ingress or egress. External DBH facility doors remain closed at all times. DBH buildings where electronic client medical records are stored have some form of alarm system activated during non-business hours. Special security such as security cameras are also applied for restricted or high risk areas as described below. Also see Responsibility and Procedure.

Keypad Lock/Security Alarm Requirements

Codes on keypads/locks are changed at least every twelve (12) months or as indicated on the [Property Return Checklist for Separating Employees](#) once received by Payroll. A Supervisor or staff member in a classification approved for this level of responsibility and authority is in charge of keypad locks at a facility.

- A Program Manager must write a recommendation to the appropriate Deputy Director for approval to have someone other than a Supervisor open/disarm and close/arm a DBH building alarm system. The written recommendation is kept in the affected employee's file along with a signed [Employee Acceptance Acknowledgement](#) form
 - Each staff member or janitorial staff member is issued a unique alarm code
 - Door codes for keypad locks are given only to DBH staff, security personnel and landlords of leased facilities
 - WEX or other temporary workers are not given keypad lock or alarm codes
 - **Staff will not be alone in a facility at any time.** Only a supervisor or a classification approved for this level of responsibility and authority, on rare occasions, may be required to be on site without other staff present. This requires prior written authorization from the Program Manager or Deputy Director
 - A building check, employing the buddy system, is completed at the close of each business day to confirm the building is otherwise empty. Facility Security staff may accompany the Supervisor for the final building walkthrough
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Facility Physical Security and Access Control Procedures, Continued

Keypad Lock/Security Alarm Requirements (continued)

- Security staff will ensure everyone has safely departed the facility campus prior to locking the facility
- Alarms are set only after janitorial staff has exited the facility. Janitorial staff may re-enter using the appropriate janitorial code
- A list of telephone numbers to access primary and secondary contact persons after hours is issued to contracted alarm companies in accordance with Emergency and After Hours Access

Metal/Hard Keys

Supervisors are given keys to open and close facilities according to program needs, mandated security requirements and staff security, as follows:

- No other person than the supervisor is to have this key unless the program Manager has approved and written a justification
- Such approval will be attached to the Employee Acceptance Acknowledgement form (Attachment 2)
- Employees will surrender metal keys to the supervisor upon leaving DBH employment
- Appropriate key locks are changed when keys are lost or when a workforce member leaves without returning the key

Note: Supervisors will inform FPM immediately when an employee has terminated and not returned keys.

Note: See the Building Manager for additional information on metal/hard keys, such as for individual offices, desks, filing cabinets, etc.

Server Rooms (Data Centers) and Hardware Closets

All buildings containing electronic client medical records have some form of alarm system activated during non-business hours. Codes are provided as described above for Keypad Locks/Security Alarms. Server Room doors are kept secured at all times.

In addition, access to Server Rooms and Hardware Closets is restricted to authorized Information Technology (IT) employees as designated by the Business Applications Manager.

Each DBH program, office, and division also conducts an annual physical and system security risk assessment. This consists of an initial and periodic physical and technical security risk assessment according to the DBH [Facility Physical Security and Access Controls Policy](#).

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Facility Physical Security and Access Control Procedures, Continued

Server Rooms (Data Centers) and Hardware Closets (continued)

Access to Server Rooms and Hardware Closets is permitted as follows:

- Main servers are located away from all DBH sites at the County Information Systems Division, where high security protocols are followed
 - DBH server rooms are accessed only by specially assigned DBH IT technicians
 - Communication Switch Cabinets are accessible via SACs
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Physical Access to Workstations

Policies and procedures are listed in the References section below, which specify the proper functions to be performed, the manner in which those functions are to be performed, and the physical attributes of the surroundings of a specific workstation or class of workstation at which electronic PHI/PII, as defined in policy, can be accessed. These policies and procedures include physical safeguards for all workstations at which access electronic PHI/PII can be accessed to restrict access to only authorized users.

County policy prohibits employees from using County-owned equipment, materials or property for personal activities and/or profit unless specifically authorized by the Board of Supervisors as an element of compensation.

Management is to assure the physical characteristics are as follows:

- Locate and design Work Stations to restrict viewing at all locations where confidential information is managed
- House computer equipment in public or unsecured/open areas by attaching them to an immovable object by a security cable or equivalent device
- Situate computer monitors within work stations to obstruct the view by all but the user in locations where confidential information is managed
- Use clear, un-tinted privacy screens when computer monitors cannot be so situated
- Lock computers when not in use
- Shut down computers after hours

DBH respects and protects the privacy of DBH clients and safeguards medical records and confidential client information from physical damage in accordance with federal, state and related certification requirements, as follows. Employees are to:

- Secure confidential information before leaving the work area
 - Use shred boxes and bins for disposal of confidential information
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Facility Physical Security and Access Control Procedures, Continued

Physical Access to Workstations
(continued)

- Send inoperable, obsolete or unused electronic information media to locations designated by IT
- Store files in restricted area file rooms at the close of each business day or lock them in desks or side file cabinets
- Never leave files unattended during the workday
- Use a separate protocol when files must be moved, as described in [Medical Records Security Policy for Outpatient Services](#) and [Medical Records Requiring Special Handling Policy and Procedure](#)

Emergency and After Hours Access

No one other than authorized DBH staff is allowed access to restricted areas without escort. Policies and procedures have been established to allow facility access in support of restoration of lost data under the disaster recovery plan and emergency mode operations plan in the event of an emergency.

The following procedure is followed regarding contract alarm companies:

Step	Action
1	<p>The Building Manager notifies the contracted alarm company of DBH contact employee after-hours telephone numbers as follows:</p> <ul style="list-style-type: none"> • A primary and secondary contact is provided • Only employees with the authority to open DBH facilities are listed <p>Note: Managers in buildings with multiple managers meet to establish a rotating schedule for after-hours response and provide it to the Building Manager.</p>
2	<p>The Building Manager:</p> <ul style="list-style-type: none"> • Accesses the names and telephone numbers of after-hours repair companies from the FPM • Provides the names and telephone numbers to the primary and secondary contact employees
3	<p>The contracted alarm company has been advised to respond to after-hours building alarms as follows:</p> <ul style="list-style-type: none"> • Telephone the primary DBH contact employee on the supplied list • Telephone the secondary contact person on the supplied list when the primary person cannot be reached • Repeat the process until a DBH employee is contacted

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Facility Physical Security and Access Control Procedures, Continued

**Emergency and
After Hours
Access**
(continued)

Step	Action
4	<p>The contacted DBH employee, when notified of an alarm, advises the alarm company to:</p> <ul style="list-style-type: none"> • Contact local law enforcement to respond to the alarm • Call back only to advise when law enforcement reports there is a broken window or door and the building is otherwise clear <p>Note: DBH Employees do not respond in person to building alarms.</p>
5	<p>The contacted DBH employee responds as follows when the alarm company advises there is a broken window or door:</p> <ul style="list-style-type: none"> • Contact a local repair company from the FPM repair list to temporarily repair the broken window or door • Respond in person and remain until the temporary repair is completed • Ensure the building is locked and secured prior to leaving the facility <p>Note: Employees on the contact list who may need to respond to a repair as described above should check with their immediate supervisors regarding On-Call status and remuneration in accordance with the General Memorandum of Understanding.</p>
6	<p>The DBH employee who responds in person to an after-hours call when a repair is made notifies the Building Manager the next business day that a permanent replacement is needed for the temporary repair.</p>
7	<p>The Building Manager completes a Repair/Service Request Form for the permanent replacement.</p>
8	<p>FPM assumes responsibility for:</p> <ul style="list-style-type: none"> • Permanent repair oversight • Documenting the repair

References

Medi-Cal Privacy and Security Agreement Between the California Department of Mental Health and the County of San Bernardino, Department of Behavioral Health, Physical Security
Code of Federal Regulations 45, Section 164.310, Physical Safeguards
Public Records Act – Government Code, Sections 6250-6270
Health Insurance Portability and Accountability Act of 1996 (HIPAA) Privacy and Security Regulations 45 Code of Federal Regulations (CFR) Pts 160-164

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References
(continued)

The Confidentiality of Medical Records Act (CMIA), located in the Civil Code
Patients Access to Health Records Act (PAHRA), located in the Health and
Safety Code
Lanterman-Petris Short (LPS) Act, located in the Welfare and Institution
Code
Health and Safety Code, Division 109

**Related Policy
or Procedure**

County of San Bernardino Policy 08-11: [Security Centralization](#)
County of San Bernardino Policy 14-01: [Electronic Mail \(EMAIL\) Systems](#)
County of San Bernardino Policy 14-02: [Electronic Mail \(E-Mail\) Retention
and Destruction](#)
County of San Bernardino Policy 14-04: [Internet/Intranet Use Policy](#)
County of San Bernardino Policy 16-02: [Protection of Individually Identifiable
Health Information](#)
County of San Bernardino Policy 16-02SP1: [Protection of Individually
Identifiable Health Information](#)
Department of Behavioral Health [Code of Conduct](#)
DBH Standard Practice Manual BOP3025-1: [Facility Security and Access
Control Procedures](#)
DBH Standards Practice Manual COM0904: [Medical Records Security
Policy for Outpatient Services](#)
DBH Standards Practice Manual COM0908: [Medical Records Requiring
Special Handling Policy](#)
DBH Standards Practice Manual COM0908-1: [Medical Records Requiring
Special Handling Procedure](#)
DBH Standard Practice Manual HR4006: [Employee Separation Procedure](#)
DBH Standard Practice Manual IT5003: [Internet Access Policy](#)
DBH Standard Practice Manual IT5004: [Computer and Network Appropriate
use Policy](#)
DBH Standard Practice Manual IT5005: [Electronic Mail Policy](#)
DBH Standard Practice Manual IT5006: [Remote Access Policy](#)
DBH Standard Practice Manual IT5007: [Risk Assessment Policy](#)
DBH Standard Practice Manual IT5008: [Device and Media Controls Policy](#)
DBH Standard Practice Manual IT5009: [User ID and Password Policy](#)
DBH Standard Practice Manual SFT7022: [Emergency Action Plan Policy](#)
