OLIVE VIEW-UCLA MEDICAL CENTER HEALTH INFORMATION MANAGEMENT SERVICES POLICY & PROCEDURE

NUMBER: 1503 VERSION: 1

SUBJECT/TITLE: HIMS - ELECTRONIC SIGNATURES

POLICY: Scope and Applicability: This policy applies to any electronic transaction originated by any employee or contractor working for Olive View-UCLA Medical Center that involves providing approval, authorization, or certification, via the use of electronic signature.

This policy specifically applies to any such electronic transaction that:

- is being implemented as a replacement for (or component to) a paper form or document originated by an employee or contractor of the hospital.
- involves the use of data processing, data storage and data communications.
- **PURPOSE:** This policy establishes the criteria for the use and validity of electronic signatures associated with internal electronic transactions within Olive View-UCLA Medical Center. They are intended to ensure that departmental implementation of this technology is consistent throughout the hospital and compatible with the practices of the State and Federal regulatory agencies and members of the regulated community.

DEPARTMENTS: HEALTH INFORMATION MANAGEMENT SERVICES

DEFINITIONS:

- Electronic Signature A data element, entered into a computer by an authorized person that is used for noting ownership, authentication, approval, acceptance, or certification of another object (e.g. a document). Electronic signatures provide the same validation and authentication capabilities as hand written signatures.
- **PROCEDURE:** Olive View-UCLA Medical Center is committed to support the implementation of the use of electronic signatures to expedite the workload and reduce duplicative activities, consistent with applicable Federal and State laws regarding electronic record keeping and security. In doing so, confidentiality of patient health information shall not be compromised.

Use of electronic signature will be deemed as legally binding as a paper signature, provided each application is developed, implemented, and monitored in accordance with this policy.

Entries shall be dated, timed, and authenticated by electronic signatures which include the first initial, complete last name, and professional title. Dictated reports must denote date of dictation and date of transcription.

The authorized user shall review the content entries for accuracy and revise the data as necessary, prior to authentication by electronic signature. The author of each entry must authenticate his/her own entries and can not assign this responsibility to other persons.

Once an entry has been signed electronically, it can not be deleted or altered. If the signed entry is converted to another format, the electronic signature applies only to the original format. If errors are later found in the entry or if information must be added, this shall be done by means of an addendum to the original entry. The addendum should also be signed electronically and date/timed.

Passwords or other personal identifiers will be monitored carefully to assure that only the authorized individual can apply a specific electronic signature.

Users shall sign an Electronic Signature Authorization Form (Attachment I) attesting that the authorizing user is the only individual using/possessing the signature code, and an agreement not to share with anyone. The form shall be filed in the Medical Administrative Office.

Authorized users shall be required to attend scheduled educational and training sessions on the use of electronic signature prior to being issued an authorized signature code.

Responsibilities:

Department Chairs and Service Chiefs are responsible for:

• Reviewing current automated systems within respective organizations at least yearly to ensure applicability to this policy and to establish procedures to ensure full compliance with the requirements of the policy.

References:	
Approved by: Tillie Acosta (Medical Records Director I)	Date: 11/05/2010
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