OLIVE VIEW-UCLA MEDICAL CENTER INFORMATION SYSTEM DEPARTMENTAL POLICY & PROCEDURE

NUMBER: 1202 VERSION: 1

SUBJECT/TITLE: AUTHENTICATION BY ELECTRONIC SIGNATURE

POLICY: All electronic signatures utilized in ValleyCare facilities are password protected.

PURPOSE: To establish specific guidelines for maintaining practitioner confidentiality with

the implementation of the electronic procedure via the Hospital Information

System.

DEPARTMENTS: HEALTH INFORMATION MANAGEMENT, INFORMATION SYSTEMS

DEFINITIONS: Electronic Signature

PROCEDURE: When computer key signatures are used, the authorized individual whose

signature the computer key/password represents will have on file in the

Information Systems Department, a signed statement to the effect that he/she is

the only one who shall use the password or assigned code for the use of the

electronic report signature on the Hospital Information System.

The use of such a password or assigned code for the computer key shall not be

delegated to another individual.

All ValleyCare workforce members will be provided with information from the Information Systems Department on the confidentiality of the electronic signature

passwords and/or codes.

A signed statement will be requested from each and every member of the workforce who utilizes an electronic signature attesting to the fact that he/she

understands electronic signature authority and related responsibility.

Information Systems will maintain a file of the signed Signature/Electronic

Approval Authorization Form.

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References:	
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