



Department of Health, Housing & Human Services  
(H3S)

<b>POLICY TITLE:</b>	Review and Resolution of Privacy Complaints		
<b>POLICY ID:</b>	HP-04	<b>EFFECTIVE DATE:</b>	
<b>SECTION:</b>	H3S Directors Office	<b>REVISION DATES:</b>	
<b>CHAPTER:</b>	Privacy HIPAA	<b>NEXT REVIEW:</b>	
<b>CONTACT:</b>	H3S Privacy Coordinator	<b>Reviewed BY:</b>	County Counsel
<b>APPLIES TO:</b>	All H3S Workforce Members within the hybrid covered component	<b>REPLACES:</b>	
<b>APPROVED BY:</b>	Rich Swift	<b>DATE APPROVED:</b>	4/9/18

**I. PURPOSE:** The purpose of this procedure is to outline the responsibilities of H3S for the investigation, resolution and communication of any privacy complaints to the County Privacy Officer.

**II. POLICY:** Each Clackamas County covered component will provide a process for individuals to make privacy complaints concerning Clackamas County’s and the covered component’s compliance with federal privacy regulations. Each Clackamas County covered component will investigate all privacy complaints received and report them to the County Privacy Officer within 30 calendar days from receipt of complaint per the County’s HIPAA Policy.

A privacy complaint includes any complaint or statement of dissatisfaction, whether presented in person, by telephone, in writing, or electronically, made by any individual (including any County staff) regarding H3S’ privacy policies and procedures, our compliance with those policies and procedures, or compliance with the HIPAA Privacy Rule in general.

**III. DEFINITIONS:** See Clackamas County HIPAA Privacy Policy

**IV. PROCEDURE:**

**A. Who to Contact:** All privacy complaints received by H3S Divisions or work-units shall be immediately forwarded to the respective H3S Division Privacy Manager or emailed to [hipaa-privacy@clackamas.us](mailto:hipaa-privacy@clackamas.us) for investigation.

**B. Privacy Complaint Log:** H3S Division Privacy Managers shall maintain privacy complaint supporting documents using the designated privacy case management system and must include at minimum:

1. Complainant name and location (if county staff)
2. Date the complaint was received



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3. Copy of the written complaint, if any, or a general description of the verbal complaint
4. Brief description of complaint
5. Brief description of resolution
6. Copy of the written response provided to the individual making the complaint. This response should be signed by a department/division leader where the complaint arose.
7. Description of any system change, training, sanction or corrective action required in review of process
8. Date of Closure

C. Determination: Upon receipt of a privacy complaint, the H3S Division Privacy Managers shall first substantiate any possible violation of either County/H3S Privacy Policy and/or HIPAA in coordination with the County Privacy Officer and/or county counsel.

1. If it is determined that there is **no policy violation**, the complaint will be documented as unsubstantiated and a written response will be sent to the complainant.
2. If it is determined that **there is a policy violation**, the H3S Division Privacy Managers shall document the outcome as substantiated into the tracking system, as directed by the County Privacy Officer and/or county counsel. A written response will be sent to the complainant.

D. Timing of Resolution: Each Division has established a procedure for the escalation of client complaints to the H3S Privacy Coordinator. Complaints involving Protected Health Information must be handled and responded to within 30 calendar days of receipt or discovery.

E. Documentation Retention: The H3S Privacy Coordinator must retain copies of the documentation listed in section IV.B, above for a period of ten (10) years from the date the H3S Privacy Coordinator or designee provides the complainant a written response.

F. No Retaliation: It is the policy of H3S and its Divisions not to intimidate, threaten, coerce, discriminate against, or take other retaliatory action against any person for the exercise of any rights under HIPAA, including filing a complaint.



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G. Complaint as Breach: Any complaint that through investigation is determined to be a breach of unsecured PHI must follow the requirements of HP-17 Mitigation Plan

**V. REGULATIONS:**

45 CFR 164.530(d)

**VI. REFERENCES:**

HP-17 Mitigation Plan

Clackamas County HIPAA Privacy Policy

**VII. LINKS (TITLE & URL):**

[hipaa-privacy@clackamas.us](mailto:hipaa-privacy@clackamas.us)

Clackamas County Retention Schedules

**VIII. ATTACHMENTS:**

H3S/Division Client Complaint Forms