Research Information Security Incidents  
Atlanta VA Health Care System (AVAHCS)

1. OBJECTIVES:  
Outline policies and procedures for reporting research information security incidents in AVAHCS research.

2. DEFINITIONS:  

**VA Research:** Is research conducted by an investigator under a VA appointment (i.e., a compensated, work without compensation (WOC), or Intergovernmental Personnel Agreement (IPA) appointment) on VA time. The research must be approved by the Research & Development (R&D) Committee.

**Research Information Security Incidents:** Any unauthorized use, inappropriate access, loss, or theft of Protected Health Information (PHI); noncompliant storage, transmission, removal, or destruction of PHI; or theft, loss, or noncompliant destruction of equipment containing PHI.

Examples include but are not limited to:
- HIPAA Privacy Rule deficiencies:
  - Failure to obtain written HIPAA authorization from subject.
  - Subject signed wrong version of the HIPAA document and the correct version contains meaningful new information.
  - Disclosure to entity not listed on HIPAA authorization.
- Lost or stolen laptop, external drive, or flash drive containing PHI, III (Individually Identifiable Information), confidential information, or research data.
- Destruction of data.
- Uses and disclosures of PHI, III, or confidential information without a valid HIPAA authorization or waiver.
- Lack of Information submitted for System Security Office (ISSO)/Privacy Office (PO) review at time of R&D submission or inadequate ISSO/PO review.

3. PROCEDURES FOR REPORTING RESEARCH INFORMATION SECURITY INCIDENTS:

Immediately (i.e., within one hour of discovery), PIs and/or research staff must report any incident described above as a Research Information Security Incident to the AVAHCS:

a) Associate Chief of Staff for R&D  
b) Privacy Officer  
c) Information Systems Security Officer  

by sending a completed "Issue Brief Form" (located on the AVAHCS research website) to the following listserv:

**VHAATGResSecurityInc@va.gov**

If the initial report was done verbally, a written report must be completed within 5 business days. The PI is also responsible for notifying relevant investigators.