

**UNIVERSITY OF MAINE SYSTEM  
HIPAA POLICY #43  
SECURITY OF PHI – PHYSICAL SAFEGUARDS**

**I. Facility Access Controls**

The Covered Component shall implement policies and procedures to limit physical access to its electronic information systems and the facility or facilities in which they are housed, while ensuring that properly authorized access is allowed.

A. Contingency operations (Addressable). The Covered Component shall establish (and implement as needed) procedures that 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.

B. Facility security plan (Addressable). The Covered Component shall implement policies and procedures to safeguard the facility and the equipment therein from unauthorized physical access, tampering, and theft.

C. Access control and validation procedures (Addressable). The Covered Component shall implement procedures to control and validate a person's access to facilities based on their role or function, including visitor control, and control of access to software programs for testing and revision.

D. Maintenance records (Addressable). The Covered Component shall implement policies and procedures to document repairs and modifications to the physical components of a facility which are related to security (for example, hardware, walls, doors, and locks).

**II. Workstation Use**

The Covered Component shall implement policies and procedures that 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 that can access electronic PHI.

**III. Workstation Security**

The Covered Component shall implement physical safeguards for all workstations that access electronic PHI, to restrict access to authorized users.

**IV. Device and Media Controls**

The Covered Component shall implement policies and procedures that govern the receipt and removal of hardware and electronic media that contain electronic PHI into and out of a facility, and the movement of these items within the facility.

A. Disposal (Required). The Covered Component shall implement policies and procedures to address the final disposition of electronic PHI, and/or the hardware or electronic media on which it is stored.

B. Media re-use (Required). The Covered Component shall implement procedures for removal of electronic PHI from electronic media before the media are made available for re-use.

C. Accountability (Addressable). The Covered Component shall maintain a record of the movements of hardware and electronic media and any person responsible therefore.

D. Data backup and storage (Addressable). The Covered Component shall create a retrievable, exact copy of electronic PHI, when needed, before movement of equipment.