



Policy Number: 26
Effective: May 1, 2008
Revised: September 18, 2017,
December 10, 2020

Subject: Confidentiality of Client Information
& Access to Client Records

PURPOSE:

Camden County Developmental Disability Resources (CCDDR) shall have a policy for employees and Board members to maintain confidentiality of clients who receive services from CCDDR. Confidentiality is defined as the non-disclosure of private, personal information. State and Federal statutes regarding confidentiality protect information about individuals receiving services from the Department of Mental Health and CCDDR.

DEFINITIONS:

Personal Record: Any information or data recorded in any medium, including, but not limited to, handwriting, print, files, and computer-generated information.

Confidential Personal Information: Personal and identifiable records including:

- The name of the individual, the individual's parents or to the family members or guardian
- The individual's address and phone number
- A personal identifier such as the individual's social security number
- A list of personal characteristics, diagnostic data, etc. which would make the individual's identity known and easily traceable
- Other information that would make the individual's identity known and easily traceable

Disclosure/Dissemination: Permitting the release, transfer, or other communication of confidential or personal information orally, in writing, by electronic means, or by any other means to any party.

Access: Permitting any person/agency the opportunity to review confidential personal information – this includes the personal file, which is for the purpose of gathering information, program evaluation, copying reports, etc.

POLICY:

It is CCDDR's policy that files or personal information and records of clients served by CCDDR are the property of CCDDR and are maintained for service to persons being supported. It is the responsibility of all employees and Board members of CCDDR to ensure the integrity

of client confidentiality and protect personal information against loss, tampering, or use by unauthorized persons.

CCDDR staff members and volunteer staff will receive training on the issues of confidentiality prior to conducting responsibilities with clients.

Staff and volunteers will not share or disclose to outside entities personal information or Protected Health Information (PHI) about clients to outside persons without prior written authorization/consent from the client or the client's guardian. The authorization shall be in effect for no longer than one (1) year. Only information specific to the authorization is to be released.

Information with regard to adult clients who are their own guardians may not be shared with parents or other relatives of the clients without a signed authorization from the clients.

Client information will not be shared in public settings or in open meetings of the CCDDR Board of Directors.

In compliance with this policy, CCDDR staff shall:

- A. Adhere to the standards set forth in the Department of Mental Health Notice of Privacy Practices.
- B. Collect, use, and disclose client Protected Health Information (PHI) only in conformance with state and federal laws and current client/guardian authorizations, as appropriate. CCDDR staff will not use or disclose PHI for uses outside of treatment, payment, or health care operations (TPO) without a signed authorization from the client/guardian.
- C. Act as responsible information stewards and treat all PHI as sensitive and confidential. Consequently, CCDDR staff will:
 - Treat all PHI data as confidential in accordance with professional ethics, accreditation standards, and legal requirements
 - Not disclose PHI data unless the client (or the client's authorized representative) has properly consented to or authorized the release or the release is otherwise authorized by law
- D. Recognize that, although CCDDR as an agency "owns" the client record, the client/guardian has a right to inspect and obtain a copy of the client's PHI. In addition, clients or their guardians have a right to request an amendment to their record if they believe their information is inaccurate or incomplete. CCDDR will:
 - Permit clients or their guardian access to their record when their written requests are approved by our agency; however, if we deny their request, then we must inform the

- client/guardian that they may request a review of our denial
 - Provide client/guardian an opportunity to request the correction of inaccurate or incomplete PHI in their medical records in accordance with the law and professional standards
- E. CCDDR will document all disclosures of PHI for purposes other than treatment, payment, and health care operations for each client. We will provide this information to clients or their guardian upon request, so long as their requests are in writing.
- F. All CCDDR staff will adhere to any restrictions concerning the use or disclosure of PHI that clients or their guardians have requested and have been approved by CCDDR.
- G. All CCDDR staff must adhere to this policy. Violation of this policy is grounds for disciplinary action, up to and including termination of employment.

This confidentiality policy will be reviewed with staff upon hire, Board members upon appointment, and on an annual basis thereafter. This review will be signed and dated by the employee and/or Board member and placed in the employee's and/or Board members' file.

The following persons employed by CCDDR and the following agencies shall have authorized access to client clinical records within the CCDDR facility:

- All Administrative Staff, the TCM Administrative Assistant, and/or other designated employee(s)
- All Support Coordination staff shall have access to the record for those on their caseload, and, if circumstances warrant, other clients served by CCDDR
- Rolla Satellite Regional Office staff
- Health and Human Services staff
- Client's physician and/or dentist
- Social Security or Medicaid representatives for eligibility of benefits determination and for HCBS Compliance reviews

Under no circumstances will individual client records and personal information be accessible to persons not authorized as per this policy. Access to records will not be permitted without specific consent of the client or the client's legal guardian.

The Executive Director shall give persons being supported or the guardian of an individual being supported access to the individual's clinical record under the following conditions:

- The request shall be made in writing to the Executive Director – the request shall be kept in the individual's record
- The Executive Director may deny access to any personal information if access is determined to be inconsistent with the individual's care, treatment or habilitation – the reason for withholding the record shall be documented in the individual's file and a copy

- given to the person requesting the information
- The individual's record may be reviewed only in the presence of the Executive Director or designated CCDDR representative

Only information generated by the agency will be given to clients and/or the client's guardian. Information from other facilities/agencies should be requested directly from the original source.

All physical and electronic client records and information shall remain in CCDDR's care and custody for the applicable and/or minimum required time as required by Federal and/or State Law.

REFERENCES:

- 630.140 RSMo
- CARF Standards Manual
- CCDDR HIPAA Policies/Procedures
- DMH DOR 8.005
- DMH DOR 8.010
- 45 CFR Section 164.502 et seq.