

SECTION - MEDICAL/NURSING SERVICES
ADMINISTRATIVE DIRECTIVE NO. 580
(Replaces A.D. No. 580 dated 10/5/06)

Effective Date: February 14, 2007

**SUBJECT: PATIENT MEDICAL RECORDS: CONFIDENTIALITY AND INFORMATION
RELEASE, MAINTENANCE, RETENTION, AND DISPOSITION**

I. PURPOSE

To maintain the security of the Medical Record and the confidentiality of the information contained within the Medical Record.

II. AUTHORITY

Special Orders: 104.01, 261, 502.01, Welfare & Institutions Code 5328 – 5330, Title 22 Sections 71547(c), 73543 (b), Health & Safety Code Sections 120980, 121010, 121020.

III. POLICY

It is the policy of Coalinga State Hospital (CSH) to maintain Medical Records in accordance with all applicable regulations.

A. Medical Record:

CSH maintains a Medical Record (also called "Clinical Record" and "Patient Record") for every Individual admitted for care. The Health Information Management Director has responsibility for maintaining and controlling all Individual Medical Records. While charts are on the unit, the Program Director shares in this responsibility. Medical Records are stored in secure areas accessible only to authorized personnel and are safeguarded against loss, damage, tampering, and unauthorized use.

B. Confidentiality:

Staff of CSH shall protect the legal rights of the Individual and the facility. Medical Records are confidential. The release of such information is subject to statutory restrictions under Welfare and Institutions Codes 5328-5330. Unauthorized release of confidential information is subject to civil action. Authority to release information in any manner will be by written consent of the Individual, court order or subpoena. Authorizations are to be specific, dated, and show expiration date of authorization. Indiscriminate and/or unauthorized disclosure of Individual's information is not permitted. This includes all records, reports, computer printouts, photographs, fingerprints, telephone inquiries, correspondence, addressograph information, etc.

C. Medical Records never leave the facility unless specifically ordered by the court.

D. Maintenance, Retention & Disposition:

Medical Records that are deemed clinically active or pertinent are not to be designated for destruction. When Individual's records are designated for destruction, specified documents shall be maintained permanently and never destroyed. The minimal retention period for Medical Records, including x-ray film, shall be seven (7) years after the date of death or last discharge from the facility. Medical Records of minors shall be kept a minimum of one (1) year after such minor has reached the age of 18 years or not less than seven (7) years. The method of disposal of all materials containing confidential Individual information shall protect their confidentiality. Refer to California Department of Mental Health (DMH), Special Order 502.01.

E. Release of Medical Information:

The Health Information Management Director or designee has overall responsibility for release of medical information; questions concerning release of medical information should be directed accordingly. All reproduction of the Medical Record will be done under the jurisdiction of the Health Information Management Department (HIMD). Release of Medical Records, current or previous, will be in compliance with Sections 71547 (c) and 73543 (b) of Title 22. Scope of the regulation applies to any and all information pertaining to the care and treatment of the Individual. It is also designated and regulated by Sections 5328-5330 of the Welfare and Institutions Code as well as the State of California DMH guidelines.

F. Release of HIV Test Results:

In addition to the usual rules of confidentiality, California law places stringent confidentiality restrictions on release of the results of the Human Immunodeficiency Virus (HIV) test. Release of test results will be in compliance with Health & Safety Code Sections 120980, 121010 and 121020. Procedures concerning the confidentiality of test results are determined by state law and by DMH guidelines and Special Orders. Refer to Special Order 104.01.

IV. METHOD

A. Written Request with Authorization:

The HIMD is responsible for responding to written requests/authorizations for Medical Record information. Requests and authorizations are reviewed for validity and are logged; all communications, dates, and responses are recorded. Policies and procedures are maintained and updated as required by regulations or department policy. A valid authorization signed by the Individual or by the appropriate Individual representative is required for the release of medical information except in those situations where law or regulations have made a specific exception. The original consent form is filed in the Individual's Medical Record.

B. Patient-Designated Release - Approval of Health Care Professional:

Information may be released to any person designated by the Individual when a valid authorization has been signed. Such a release requires the approval of the professional person in charge of the Individual (or the professional person in charge of the facility), except for release to the Individual's attorney or the Patient Rights' Advocate. If the authorization is signed by the guardian, conservator of the person, attorney in fact, or by court order, such concurrence is not required.

C. Court Orders and Subpoenas:

HIMD is responsible for responding to court orders and subpoenas requiring the disclosure of Individual care information. The HIMD Director or designee bears a major responsibility for making sure that both the duties to protect and release are carried out. A variety of laws define the circumstances under which information is to be released in response to a subpoena or court order, and describe certain situations that require special handling.

D. Verbal (Telephone) Information:

Verbal release of Individual-specific information is to be limited to those circumstances when other methods of release cannot be used, such as an emergency situation. The identity and authority of the caller should be verified by returning the call, or a confirmatory fax on letterhead. Only that information required to satisfy the emergency should be released verbally.

E. Facsimile (Fax) Response for Releasing Health Information:

Fax transmission of health information is to be used only in urgent situations when the original record or mail-delivered copies will not arrive in a timely manner to meet the needs of immediate Individual care. A fax cover letter containing a confidentiality notice is to be used whenever information is released in this manner.

F. It should be documented in the chart that a follow up phone call was made to assure that the information was received by the appropriate party.

G. Reproduction of the Medical Record by Non-HIMD Personnel:

The HIMD and Program Management share joint responsibility to insure against unauthorized duplication and release of Medical Record documents. Departments/services, other than HIMD, listed on Attachment A, are authorized to photocopy and release copies of medical records on current Individuals in specified circumstances. HIMD conducts yearly surveys of those departments to verify and to note additions or revisions to the list of their authorized agencies.

H. Pre-Printed Confidentiality Statement:

Medical Record documents being released from the facility should contain a preprinted statement (bottom edge) which reads, "Confidential Patient Information, see Welfare and Institutions Code, Section 5328". If this language does not appear on the document, the photocopy is to be stamped before releasing it.

I. Individual's Access to Medical Records:

Refer requests to HIMD. Policy and procedures are detailed in A.D. 581 and Special Order 501.03.

V. EXCEPTIONS

A. A list of exceptions to confidentiality requirements can be found in Section 5328 of the Welfare and Institutions Code. All such requests should be referred to the HIMD Director or designee.

B. Law enforcement officers from outside agencies seeking information as to an Individual's confinement at CSH are to be referred to Hospital Police Services.

C. Information requests from the news media regarding significant events regarding Individuals receiving services shall be directed to the Public Information Officer (PIO). The PIO shall consider all requests from the media as public information requests and shall limit the release of information to that which is detailed in Special Order 261.

D. In addition to the above exceptions, all licensed staff has a duty to report knowledge of child abuse, elder and dependent adult abuse, and any serious threat of physical violence against an identifiable victim (A.D. 976).

VI. RECORDING OF INFORMATION RELEASED

A written entry shall be made in the Individual's record (Form MH5775, "Patient Record Review Log") describing the information that was released; the name and relationship to the Individual, or if to another source, the person or agency to whom the information was released; date and circumstances of the release. The entry shall include by what authority, the name, profession, and title of the person who authorized the release, whenever applicable. Additionally, it is recommended that any release of information by level-of-care staff be documented in the Interdisciplinary Notes.

VII. TRAINING/ORIENTATION

Orientation of new employees will include policies and procedures on the CSH guidelines on confidentiality as provided by HIMD. The Training Office in collaboration with HIMD will provide ongoing training.



W. T. VOSS
Executive Director

Cross-References:

- A.D. No. 154 Public Relations
- A.D. No. 581 HIPAA Patients' Access to the Medical Record
- A.D. No. 586 Medical Record Charts
- A.D. No. 976 Duty to Warn, Inform, and Report Abuse and Serious Threats
- Special Order 104.01 HIV Infection/AIDS Prevention and Management
- Special Order 261 Release of Information to the News Media Regarding Significant Events
Concerning Individuals Served at State Hospitals and Psychiatric Programs
- Special Order 501.03 Individual's Right of Access to Protected Health Information
- Special Order 502.01 Maintenance, Retention, and Disposition of State Hospital Consumer
Records

Attachment A – Listings of Departments/Services Authorized to Photocopy Medical Records

ATTACHMENT A

<p align="center">LISTING OF DEPARTMENTS/SERVICES WHO, IN SPECIFIED CIRCUMSTANCES, ARE AUTHORIZED TO PHOTOCOPY AND RELEASE COPIES OF MEDICAL RECORDS</p>

Department/Service Providing Photocopies	Reason(s) for Release & Agency Receiving Photocopied Medical Record Documents
Dental Clinic	Reason: Prescription information. Agency: Contracting Dental Lab.
Forensic Services	Reason: Memo of Understanding; Continuum of Care. Agency: Corrections; Parole; ConRep; Public Defender; District Attorney; Public Guardian; County Mental Health; City/County Jails.
Claims Management	Reason: Required for claims (Individual name & CO # lined out). Agency: Worker's Compensation Board.
Litigation Coordinator	Reason: Coordinate hospital's response to litigation, subpoenas, and court orders. For Keyhea and Calhoun hearings. Agency: DMH Legal Offices, attorney general, courts, private attorneys.
Nursing Staff/NOD	Reason: Emergency transfers and referrals. Agency: Receiving facility.
Outside Medical Appointment	Reason: Arrange appointment for individual care. Agency: Hospitals, doctor offices, and contracting specialists.
Pharmacy	Reason: Blood count information (Clozapine patients). Agency: Sandoz Registry
Public Health	Reason: Required; communicable disease information. Agency: Local and state health department, contracting specialists, hospitals.
Social Work Service	Reason: Discharge planning & continuum of care process. Agency: ConRep; Parole; Social Security & SSI.
Standards Compliance	Reason: Required upon request. Agency: Department of Health Services, Licensing & Certification Division.
Trust Office	Reason: Financial matters. Agency: SSI Claims; Social Security Administration; Veterans Administration.
Vocational Rehabilitation	Reason: Contract – various documents provided. Agency: Department of Rehabilitation.
Transfer Release Coordinator	Reason: Prepare for transfer to other state hospitals. Agency: Other state hospitals, courts, conservators, parole.