

**Benzie-Leelanau District Health Department
POLICY/PROCEDURE**

PROGRAM: School Health

SUBJECT: Confidentiality, Clinical Records, and
Release of Information

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EFFECTIVE DATE: September 1, 2022

REVISED: October 1, 2023

REVIEWED:

ISSUED BY: Michelle Klein, RN, MA, PH-C
Director of Personal Health

PURPOSE: To provide guidance to ensure confidentiality and privacy of participants in School-Based Health Services and to create a process to establish, maintain, retain, and release client records.

POLICY: All exchanges between BLDHD School Health Services staff and the client are considered privileged and confidential in accordance with Michigan’s Freedom of Information Act and the Michigan Revised Adjudicator Act and the Health Information Portability and Accountability Act (HIPAA), as applicable. This policy works in conjunction with the *Release of Protected Health Information Policy*.

PROCEDURE:

Confidentiality

1. No verbal or written information concerning a client can be provided to others, without the explicit written or verbal permission of the client. This includes, but is not limited to, information on whether the client is enrolled in the program, dates of visits, types of services, and referrals.
2. Parents and school staff may be notified of the time a student checked for services and time the student left, if information is needed for attendance purposes.
3. Communicable diseases must be reported to the local health department in accordance with applicable law.
4. Confidentiality may be broken when:
 - a. there is a reasonable suspicion that abuse or neglect has occurred which requires reporting according to state law; or
 - b. the student is thought to be suicidal; or
 - c. the student’s life is threatened; or
 - d. the student has committed a crime against health department staff or in the School-Based Health program; or
 - e. The student indicates harm to someone else.

5. HIV/AIDS confidential visit and testing information is kept in the client electronic record. The School Health program can refer students for confidential HIV/AIDS testing through BLDHD. Any client who requests anonymous testing will be assisted with scheduling an appointment where these services are offered.
6. Protected Health Information is defined in law and parents/guardians or minors will receive a copy of the BLDHD Notice of Privacy Practices upon completing a Consent Form. The receipt of this information is documented on the Parent/Guardian Consent or Minor Consent to care forms.
7. Client Rights, Confidentiality and Responsibilities are posted in the waiting room. This policy is reviewed with the client at their first visit for services and documented in the electronic health record.
8. All School Health staff, its subcontractors, and volunteers sign a Confidentiality Policy statement as required BLDHD Personnel Policies consistent with the HIPAA policy. This statement is maintained in the employee file or staff file on subcontracted employees or volunteers.

Clinical Records

9. Each client of the School Health Program has an established, electronic clinical record.
10. All providers at the School Health Program, including Mental Health Professionals, School Nurse, School Liaisons, Public Health Technicians, and the Medical Director utilize the electronic health record for all client documentation.
11. The Mental Health Professional, Medical Director, and School Nurse share information verbally and/or through review of the client's record as it pertains to the overall treatment and coordination of care for clients of the School Health Program.
12. If permission has been granted by the school, the School Nurse may access a student's school records for demographic information to facilitate communication and coordination of care.
13. All records are stored in locked files and in the electronic health record, which is password protected. During clinic hours, no tablets shall be left unattended, in an exam room or other unsecured area. All staff members use Flag L to lock computers and tablets when finished using a computer to ensure confidentiality and prevent computer access to client information by unauthorized individuals.
14. All information in the health record is confidential, consistent with applicable law. Access to health records is not permitted without the consent of the client. In a medically appropriate situation, certain health conditions are reportable to parents or guardians. These health conditions include cancer, chronic illness, illness requiring hospitalization, surgery, the need for extensive treatment, other life or limb threatening conditions, and serious infectious diseases of a highly contagious nature. Parents will be notified of these conditions in the presence of the client, unless the client chooses not to be present.
15. Documenting Collateral Contacts

- All phone calls and conversations relating to clients will be recorded in the medical record contact log, regardless of their perceived importance.

Retention and Purging of Records

- For records still in paper form, all active medical records will be retained in a locked cabinet in a locked health clinic within a larger building, in a locked room.
- Once eligibility has ceased (e.g no longer a student of the school) or the client is no longer accessing services, paper records will be scanned into the student's electronic medical record and the paper copies shredded.
- Paper files or documents should be scanned into the electronic medical record as soon as possible. Paper files/documents will be reviewed at least annually and if no longer needed and after they have been scanned into the electronic record, they can be shredded. Any files/documents that cannot be scanned electronically must be retained at the health department until child has not been seen in seven (7) years or until client is 22 years old, whichever is longer.
- Purged charts are filed alphabetically, recorded on the Inactive Log and sent for storage and subsequent shredding.

Release of Information

16. Refer to the *Release of Protected Health Information Policy* for information on releasing health records.
17. If the client refuses to provide verbal or written consent to allow a parent/guardian to access the medical record, but the parent/guardian insists on access, the parent/guardian must be allowed to access the medical record, excluding information related to confidential services. The client is notified prior to allowing access. Confidential services are listed below:
 - a. Clients requesting testing, diagnosis, and treatment for an STI.
 - b. HIV counseling and testing.
 - c. Pregnancy testing, prenatal and pregnancy related care and health care for the minor children of teen parents.
 - d. Clients requesting substance abuse services.
 - e. Clients age 14 and older requesting mental health services. Up to 12 visits or four (4) months of services (whichever comes first) shall be provided to youth age 14 years and over prior to requiring parental consent for continuation of services.
 - f. Clients requesting family planning services, such as reproductive health counseling, contraceptive counseling, or referrals to obtain contraceptives. Family planning services excludes abortion counseling, services, and referrals for abortion services and prescribing, dispensing, or otherwise distributing family planning drugs and/or devices.
 - g. Clients who are age 18 and older, emancipated minors, legally married, under court order, in the presence of a law officer when the parent cannot be promptly located, and/or members of the US Armed Forces provide consent for services themselves.
18. Release of Medical Information to the client:
 - a. Staff inquires as to the reasons a client desires his or her record(s).
 - b. Staff notifies the BLDHD Supervisor regarding the request the same day request received.
 - c. An appointment is set up for that person to view their record within three (3) working days.
 - d. Staff explains to the inquirer that 3-5 days is needed to prepare the record.

- e. A positive identification is made to verify identity. A driver's license, or photo ID may be faxed to the program site or the individual may present themselves with identification at the program site.
- f. The School Health Program staff member prints appropriate chart documentation from the electronic health record client to view.
- g. The information requested is viewed in the presence of center staff.
- h. If a copy of the information is requested, necessary copies will be made.

19. Release of Medical Information to the parent, or non-custodial parent:

- a. Staff inquires as to the reasons a parent of a client desires the client's record(s).
- b. Staff notifies the BLDHD Supervisor regarding the request the same day request is received.
- c. Staff notifies the client and attempts to obtain verbal or written consent from the client.
- d. If verbal or written consent from the client is obtained, an appointment is set up for the parent to view the record within three (3) working days. If the client is unwilling to provide consent, and the parent insists on access, the client will be notified that the record, excluding information related to confidential services, cannot be withheld from the parent.
- e. Staff explains to the inquirer that 3-5 days is needed to prepare the record.
- f. A positive identification is made to verify identity. A driver's license, or photo ID may be faxed to the program or the individual may present themselves with identification at the site.
- g. The School Health Program staff member prints appropriate chart documentation from the electronic health record.
- h. The information requested is viewed in the presence of center staff.
- i. If a copy of the information is requested, necessary copies will be made.
- j. In the event that the record (or information requested) contains information in which parental consent for treatment is not required, in accordance with applicable laws, this record/information will not be allowed to be viewed by anyone without consent of the minor.
- k. In accordance with applicable laws, upon proper identification, *non-custodial parents with joint custody or without custody will be allowed to view and obtain copies of their child's record, according to the above procedures. In this case, all efforts will be made to notify the custodial parent:*

Per Michigan Law 722.30: Access to records or information by noncustodial parent, Sec. 10: "Notwithstanding any other provision of law, a parent shall not be denied access to records or information concerning his or her child because the parent is not the child's custodial parent, unless the parent is prohibited from having access to the records or information by a protective order. As used in this section, "records or information" includes, but is not limited to, medical, dental, and school records, day care provider's records, and notification of meetings regarding the child's education".

- 20. Although Michigan law allows minors to consent and receive certain services confidentially, the health care provider is permitted, but not required, to inform the spouse, parent or guardian of the treatment given if needed. If the care provider intends to do so, the client should be made aware of the need for disclosure prior to treatment.
- 21. Parents/guardians and minors may authorize School Health Program staff to release information regarding treatment to the following: health center staff and its subcontractors, and other health care providers when needed to coordinate care; school staff when needed to coordinate services at school; and to third-party payers when needed for payment of services. This authorization is

obtained by the parent/guardian through their signature on Parent/Guardian Consent for Services; and by the minor for Confidential Services through their signature on the Minor Confidential Services Consent .

Record Audits

22. Mental health records will be monitored for purposes of peer supervision and quality assurance through peer chart reviews by Mental Health Professionals from the Benzie-Leelanau District Health Department or other contracted professional.
23. Except for peer review and quality assurance evaluations by clinic staff, under the supervision of the Medical Director, all charts audited for funding, and compliance, as required by the MDHHS or other state agencies, will have case identifying information removed. These records must remain on health department property.

REFERENCE:

Release of Protected Health Information Policy