

Wood County Board of Developmental Disabilities

PROCEDURE

Procedure #: 02-ALL-EI-0446(CR) **Subject:** Child Records: Early Intervention
Effective Date: 02-01-95 **Last Revision:** 02-26-2024
Person Responsible: Early Intervention Coordinator

Approvals/Date:

 2/28/24  2/26/24
 Superintendent, WCB/DD Date Department Director/Coordinator Date

The following definitions will apply:

Enrollee – Infant or toddler, age 0 – 2, who is enrolled in the Wood County Board of Developmental Disabilities Early Intervention program.

IFSP – Individual Family Service Plan

Personal or identifying information – Any materials relating to persons receiving services, including but not limited to files, case notes, individual service plans, individual plans, individual education plans, individual family service plans, medical reports, psychological evaluations, training plans, lesson plans, social security information, case lists, home addresses, telephone numbers, dates of birth, names, listings of services received, behavior support strategies, photographs, research projects participation, vocational evaluations, multi-factored evaluations, unusual incident reports and follow-up documentation, nature and level of disability, and information regarding communicable disease status, including HIV and Hepatitis B.

Minimum Necessary – When using or disclosing the protected health information (PHI) or when requesting the disclosure of PHI the Wood County Board of DD shall make reasonable efforts to limit the PHI to the minimum necessary to accomplish the intended purpose of the use, disclosure, or request.

Protected Health Information (PHI) – Individually identifiable health information as defined by HIPAA Privacy Regulations.

Consent to Release/Requested Information – A form that verifies consent for specific information to be requested from or released from or released to an authorized person. The authorization form must include the following information in order to be valid: 1) name of individual to whom the records pertain; 2) date of expiration (not to exceed one (1) year); 3) name of person/provider/agency requested to release information; 4) name of person/provider/agency to receive information; 5) specific information to be requested or released; 6) purpose of information released; 7) appropriate consent by signature and date (individual, parents of a minor, or guardian); and 8) witness signature and date of signature. Use of the Release Authorization form is required prior to the release of or request for any identifying information. The person issuing the appropriate consent may revoke this authorization with written or verbal notification at any time.

1. Paper and electronic records must be stored prior to July 15, 2019 in the appropriate document filing system. After July 15, 2019 records must be stored electronically and saved in the appropriate document filing system. Electronic will be accepted as the original record if it is the only form.
2. All services provided to a child/family will document date, duration, type of service and outcome.
3. The Consent for Release or Exchange of Information Form will be completed and signed prior to the release of or request for any identifying information. Any request shall be limited to the minimum necessary information. The Board may rely on the belief that the PHI requested is the minimum necessary to accomplish the purpose of the request when the request and disclosure is made to a public official who is permitted to receive the information, the request is from another HIPAA covered entity, or the request is from a professional at the Wood County Board of DD, or a business associate, and all such requests are represented as the minimum necessary. The individual will be given the opportunity to agree or object in a manner that is understandable to that individual to the release of all PHI, prior to the release of PHI. Personally identifiable information may be disclosed without written consent of the individual if the disclosure is for treatment, payment, or operations. A copy of the signed form shall be given to the person authorizing the release of PHI
4. Enrollees records shall be retained throughout the service delivery period. At the time services are terminated, records may be condensed for permanent retention/storage.
5. All employees of the Board are responsible for the confidentiality of all records and identifying information pertaining to the individuals served. Access to individual records may be granted for the express purpose of performing the functions and duties of their employment by the Board. Access to PHI will be granted based on the employee's job duties (Workforce Access to PHI), as determined by each Department Director. Any other use is prohibited and is deemed a breach of confidentiality. Any breach of confidentiality by a Board employee is subject to corrective action up to and including suspension or removal. The Wood County Board of DD will implement control measures to limit access for minimum necessary use and disclosure including computer access levels and passwords, limited access to files with sign-out procedures and locking file cabinets and areas during non-office hours.
6. All employees of the Board will immediately report to their supervisor any suspected breach of confidentiality or privacy violation and will complete an Unusual Incident Report within Brittco on the Incidents module, as per 5162.61 of the Revised Code, the Unusual Incident Report procedure, and the Abuse/Neglect procedure. The supervisor will take immediate action to prevent the continued unauthorized use of confidential information. The Privacy Officer, in conjunction with other appropriate staff, shall take

<p>action to mitigate the harmful effects of the privacy violation. The Privacy Officer shall document the violation in the employee's personnel file and retain such documentation in a Privacy Violation File. All employees shall be subject to progressive corrective action for any privacy violation or failure to report the same.</p>
<p>7. Procedures for Routine Disclosure: All routine disclosures for treatment, payment and operations shall involve the minimum necessary information.</p>
<p>8. Procedure for Non-Routine Disclosures: The Privacy Officer shall review the request for compliance with the minimum necessary requirements. If an employee or a business associate of the Board is the victim of a crime perpetrated by an individual served, the Board may disclose PHI to the appropriate law enforcement agency for the purposes of report the crime. The PHI which may be disclosed is limited to minimum necessary provisions.</p>
<p>9. Opportunity to amend record: Individuals who believe inaccurate information is in their record may request the department who maintains the information to amend the record. The Department Director who receives such a request will recommend to the Superintendent whether the record should be amended and a final decision made within 30 days of the original request for amendment. The Department Director shall inform the individual requesting amendment of the decision in writing, along with notifying them of their right to a records hearing. If a records hearing is desired, it shall be held within thirty (30) days after the Department Director received the request. The Department Director shall give note of hearing to the requestor at least ten (10) days in advance. The hearing shall be conducted by any party, as designated by the Superintendent. The requestor shall be afforded a full and fair opportunity to present evidence relevant to the issues and may be assisted by persons of their choice at their own expense. The hearing representative shall send a written summary of evidence and rationale for decision based solely on evidence presented at the hearing to the Superintendent within ten (10) days of the hearing.</p>
<p>10. Opportunity to Object: The Board may use and disclose certain PHI without the written consent or authorization to release the information from the individual. In these cases, the individual must be informed in advance and have the opportunity to agree, prohibit, or restrict the disclosure. The Board may orally inform the individual of the permitted uses and disclosures permitted by this policy. In some circumstances, the Board may use and disclose PHI without consent, authorization, or oral agreement, as outlined below. If this occurs, the agreement, prohibition or restriction must be documented in the individual's file.</p>
<p>11. The Board may disclose PHI to the individual's team, as indicated to their Individual Family Services Plan to notify or assist in notification of a family member, personal representative of the individual or another person responsible for the care of the individual. Should the individual be present and have the capacity to make health care decisions, the Board may use or disclose PHI if it obtains the individual's verbal agreement, permitting them to object. If the individual is not present and the opportunity to agree or object to the use of disclosure cannot be provided due to the individual's incapacity or an emergency, the Board may determine whether the disclosure is in the best interests of the individual and if so disclose on the PHI directly relevant and necessary. The Board may use professional judgment and the experiences with common practice to make reasonable inferences of the individual's best interest allowing a guardian/parent or person legally appointed by a court of law to act on behalf of the individual to pick up filled prescriptions, medical supplies, or other similar forms of PHI.</p>
<p>12. Documentation of the request and release of records will be documented in the child's record via EI Case Notes in Brittco.</p>

References: HIPAA (Health Insurance Portability and Accountability Act) Privacy Rule
 ORC 5126.61

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