DELWARE HEALTH AND SOCIAL SERVICES

POLICY MEMORANDUM NUMBER 5  
November 8, 2000

SUBJECT: CLIENT CONFIDENTIALITY

I. POLICY STATEMENT — PHILOSOPHY

It is the policy of Delaware Health and Social Services to recognize that when a client provides information about himself or herself to the Department, that individual is placing trust in each and every Department employee or agent thereof. Furthermore, this Client Confidentiality Policy is not only a legal requirement but is also written evidence of a commitment or promise to our clients that we will respect their privacy. This policy assures that a Department employee or agent will only have access to individual client information that he or she needs to know. It assures that we will not tolerate any unnecessary release of confidential information by anyone in the Department. It assures that we will educate our employees, agents, clients, and the public concerning the client’s right to confidentiality, the client’s right to restrict or limit dissemination of confidential information, and the client’s right to know the Department’s policies and procedures regarding access, disclosure and explanation or correction.

II. PURPOSE

Confidentiality is a highly complex subject. The purpose of this policy is to:

1. Maintain the Department’s ethical, professional, and legal obligation to protect clients from undue intrusion of privacy;
2. Safeguard recorded and unrecorded knowledge or information about individuals, while permitting the exchange of information required to provide and monitor quality services;

3. Permit the appropriate use and disclosure of essential oral and written information when such sharing is professionally judged to be in the best interest of the clients in its care, when there is a legitimate need to know, and with appropriate client consent;

4. Ensure that the Department’s handling of confidential information is consistent with applicable laws, rules, and recommended professional practice. These applicable laws, regulations, and guidelines can be found in the Reference Section; and

5. Set forth guidelines and procedures that complement federal and state mandates.

I. SCOPE

This policy applies to all employees within the Department and their facilities, bureaus, offices and other administrative entities. This policy also applies to Department agents including students, volunteers, contractors, foster parents, providers, researchers, or any others such as auditors, who may come in contact with client information.

If circumstances occur for which there is any doubt as to our authority to release confidential information and for which this policy does not offer guidance, the Department will obtain the advice of legal counsel prior to releasing the information.

II. DEFINITIONS

A. Agency: Delaware Health and Social Services or any subdivision within the Department.

B. Client: any individual named in any record maintained by the Department except employee-related records.
C. Confidential: the entrusting of information to another individual with the understanding that the information will not be disclosed.

D. Confidential Information: any item, collection or grouping of information which contains the name of an individual or any identifying number, symbol, other identifying characteristics, or any unique grouping of information which makes the individual as recognizable as if a name had been affixed.

E. Department: refers to Delaware Health and Social Services as an entity, including all Divisions and the Office of the Secretary.

F. Department Agent: anyone acting on behalf of the Department.

G. Disclosure: to communicate, transmit or otherwise convey any data to any individual or organization in any form, either written, verbal or otherwise. This includes the affirmative verification of another person’s communication of personally identifying information.

H. Guardian: any individual who has been appointed as a guardian of the person by a court of competent jurisdiction, and shall include an individual or agency which has been awarded legal custody by a court of competent jurisdiction.

I. Individual: a natural person, living or dead.

J. Informed Consent: agreement to an action after understanding what is involved.

K. Minor: any individual under the age of 18 years.

L. Need to Know Basis: when it is essential to have information regarding a client in order to provide necessary service linkage and treatment planning. Information obtained for one purpose may not be used for any other unrelated purpose.

M. Parent: an adoptive or biological parent who has not lost parental rights (i.e., parental rights have not been terminated).

N. Personally Identifiable Information: information that includes:
1. name; address; or personal identifiers, such as the social security number, certificate number, driver’s license number, or date of birth; or

2. a description or composite of personal characteristics, a record number or other information that would make it possible to identify the client or other family member with reasonable accuracy, either directly or by reference to other publicly available information.

A. Record: any item, collection, grouping, or information that is maintained by a Department agency and contains personally identifiable information, to also include electronic records.

B. System of Records: a group of any records under the control of any Department agency from which information is retrieved by an identifying name, number, or symbol, to also include electronic records.

I. PROCEDURES

A. Obtaining of Information by the Department

1. Accuracy: The Department shall make reasonable efforts to assure accuracy, completeness, relevancy and timely entry for all records. The Department shall maintain in its records only such information as is necessary to accomplish the agency’s purpose. All record entries shall be pertinent to the nature of the service and the needs of the client. Divisions shall establish procedures to insure accuracy, completeness, relevancy and timeliness of records.

2. Primary Source: Individuals or their legally authorized representatives shall be the primary source of information about themselves and their families. Within the guidelines of this policy and Division procedures, clients shall be invited to be involved in meetings where they are the main subject.

3. Privacy Protection: Client interviews shall be conducted in a manner which provides privacy. Clients shall not be filmed, taped, photographed or observed without their knowledge and written
consent, except where permitted by statute or the purpose of civil and/or criminal law enforcement.

4. Each client, patient, and/or resident shall be treated with respect and provided privacy when receiving health or social services. Case discussion, consultation, examination and treatment shall be confidential and conducted discreetly. Persons not directly involved in the service delivery shall not be permitted to be present during discussion, consultation, examination or treatment unless the client has given prior informed consent for such person(s) to be present. Indiscriminate disclosure of information is unethical.

5. Written Consent: When requesting information from sources outside of the Department, written informed consent must be secured from the individual adult to whom the records refer, a minor’s parent/guardian, or the legally authorized representative for the individual to whom the records refer except as provided by DHSS policy or state law.

6. Advising Informants About Policy on Confidentiality: Individuals from whom confidential information is elicited shall be informed of the Department’s authority, policy and purposes for such collection, and particularly the individual’s rights as contained in this policy in a language that is understood by the individual. (Attachment A: Confidentiality Notice to Clients)

A. Safeguarding of Information by the Department

1. Records Ownership: Records are the property of the Department.

2. Record Review: Each Division will establish procedures for safeguarding records.

3. Staff Access to Confidential Information: Department employees and agents shall only access confidential information that they have a legitimate need to know.

4. Confidentiality Training and Agreement: since any Department employee or agent may come into contact with confidential information, all such individuals will be made aware of this policy.
5. Disclosure Accounting: Each Division shall maintain a system of documentation and accountability for any disclosure of confidential information.

6. Storage: Written and electronically recorded confidential information shall be stored in a systematic and secure manner, to insure the security and confidentiality of records and to protect against potential threats to their security or integrity.

7. Retention and Disposal of Records: All staff shall follow Delaware Code and Department policy regarding record retention and disposal of records.

8. Record Removal: Records or parts thereof shall not be removed from Department offices unless prior authorization has been obtained.

9. Exclusions to Department Ownership of Records: Client information maintained by the following programs and/or services is not considered to be Department information and shall not be shared either within or outside the Department without prior written consent by the client: HIV/AIDS, ombudsman, alcohol and substance abuse, and sexually-transmitted diseases.

A. Releasing of Information by the Department

1. Circumstances When Disclosure Is Never Permitted: Unless requested under a statute, court order, or for criminal or civil law enforcement, the following information may not be disclosed to anyone.

   a. Other’s Rights: Information that would violate the confidentiality rights of others, including other family members, without their specific written consent. If it is not possible to remove confidential information that refers to others, and no written consent has been obtained from the affected person(s), a summary which excludes the confidential information shall be provided.

   b. Source’s Identity: Reports that would reveal the identity of a source who gave information under promise that their identity would be kept confidential.
c. Sealed Records: Information concerning termination of parental rights, adoptions and some custody matters are sealed. Individuals wishing to gain such information must petition the Family Court.

2. Disclosure as Permitted with Informed Written Consent: The Department shall not disclose or knowingly permit the disclosure of any information, by any means of communication, to any person or other organization except with written informed consent or pursuant to statute or for law enforcement purposes.

a. Consent Form: A consent-for-release-of-confidential-information form, at a minimum, must provide:

(1) the identity of the person about whom the information is being released;

(2) the identity of the program, unit or facility releasing the information;

(3) the type of information being requested and the purpose for its use;

(4) the identity and title of the person requesting the information;

(5) the time period for which the permission remains in effect;

(6) a revocation-of-consent statement;

(7) the signature of the person requesting the information and/or his/her parent or guardian, if appropriate, and the date of request; and

(8) the signature of the person about whom the information pertains and/or their parent/legal guardian, or their legally authorized representative, and date signed.

a. Voluntary Consent: The consent must be voluntarily given and the client can revoke consent at any time. Individual(s) shall
be informed if their decision concerning the release of information will result in denial, change, or termination of services.

b. Disclosure Not Required: A signed consent for release of information does not require the Department to release information. In the absence of legal counsel, individuals may inadvertently compromise their own due process or other legal protection. Therefore, Department employees and agents shall carefully consider the best interests of the client before complying with a request for information.

c. Verification of Identity: In the event that the identity of the requesting person cannot be verified, Department employees shall obtain appropriate documentation.

d. Release Limited to Primary Disclosure: Release of information by the Department shall be limited to that which was specifically generated by the Department or its agents.

e. Minors: When the individual to whom the record refers is a minor (less than 18 years old), a parent or guardian must sign the consent for release. The exceptions are:

(1) If the parent is unable or unwilling, a legal custodian may act on the child’s behalf, in his/her best interests and consistent with applicable law.

(2) If the program under which the minor is receiving services does not require parental consent in order to provide services, parental consent cannot be requested. In such cases, the minor must always sign the consent for release of information.

(3) Information about program attendance or the treatment of a minor age 12 years or older for pregnancy, sexually transmitted diseases, or alcohol abuse may not be released without the written consent of the minor. Parental consent cannot be requested.

(4) If the person is an emancipated minor, as defined by state law, parental consent cannot be requested.
a. Research: Researchers shall follow DHSS policy memoranda and guidelines concerning the protection of human subjects.

b. Inquiries from Public Officials, the Press or the General Public: Media, press, general public, legislative or other public officials’ requests for information shall be directed according to specific procedure outlined by the Department or Division.

c. Notice Prohibiting Redisclosure: Whenever a written disclosure of confidential information is made, the disclosure shall be accompanied by a written statement substantially as follows: “This information has been disclosed to you from records whose confidentiality is protected by federal and state laws. You are prohibited from making any further disclosure of this information.”

(1) Transmission of Electronic Facsimiles:
When a facsimile of confidential information is transmitted electronically, it shall be accompanied by a cover sheet with the agency’s name, address and telephone number and a confidentiality notice reading as follows:

This facsimile (this page and accompanying page[s]) is intended only for the use of the individual or entity to whom it is addressed and may contain information that is privileged, confidential and exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee or agent responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication, or the taking of any action in reliance on the contents of this information, may be strictly prohibited. If you have received this facsimile in error, please notify us immediately by telephone and return the original to us at the above address. Thank you.

1. Circumstances when Consent to Release is not Required: Consent to release information is not required in the following circumstances:
a. Medical Emergencies and Public Health or Safety: In medical emergencies or when necessary to protect or warn others of imminent threats to their safety, essential pertinent information shall be revealed.

b. State and Federal Laws: State law requires every individual to report suspected abuse to applicable agency(ies) in accordance with state and federal laws.

c. Involuntary Receipt of Protective Services: State law permits delivery of adult protective services to a person who lacks the capacity to consent.

d. Federal Laws: Federal law requires licensed nursing facilities to report suspected (impaired adult) abuse or neglect to the Division of Long-Term Care Residents Protection, as well as to the Division of Services for Aging and Adults with Physical Disabilities.

e. Exchange of Information Among Department Service Providers: Responsible exchange of information among Department employees consistent with the spirit of this policy may occur without written consent when:

(1) providing Department services and there is a need to know; or

(2) protecting the public health or safety.

a. Audit or Program Evaluation: Administrative audit or program evaluation does not require signed consent when:

(1) clients are identified only for the program being evaluated;

(2) no personally identifiable information is disclosed in any reports; and

(3) no records are copied or removed unless personally identifiable information is deleted or blocked out so as to be undecipherable.
a. Research: A signed consent is not required to provide information for research purposes if:

(1) approval is obtained following appropriate state and DHSS policies such as a Human Subjects Review Board clearance; or

(2) no records are copied or removed unless personally identifiable information is deleted or blocked out so as to be undecipherable.

a. CASA: The order that the court issues when appointing a Court Appointed Special Advocate (CASA or guardian ad litem) specifies permission to inspect and/or copy any records relating to the child and his or her family/guardian. However, each order shall be reviewed to determine the CASA authority.

b. Court Order: Information may be released to comply with a court order, provided that reasonable effort is made to notify the client of the order in advance of compliance; if notification of the client is not in violation of the court order and is in the best interest of the client or the Department.

c. Disciplinary Proceedings: When necessary, client records may be used to substantiate less than standard job performance or misconduct of Department employees. All identifiable information shall be removed.

d. Other Exceptions: The law permits some other fairly technical exceptions. For example, after a period of years, certain vital statistics records may become available for public inspection. In cases where uncertainty arises as to whether informed written consent is required, supervisory advice, advice of legal counsel, or a specific court order shall be obtained.

e. Notification of Client: If information is released under the procedures applying to CASA, court orders, or other technical exceptions, pertinent details of the reasons for the release shall be documented and written notification of this release shall be sent to the last known address of the person to whom the record refers.
4. Other Considerations

a. HIV/AIDS (Human Immunodeficiency Virus/Acquired Immunodeficiency Virus); No person may disclose or be compelled to disclose the identity of any person upon whom an HIV-related test is performed, or the results of such a test in a manner which permits identification of the subject of the test, except to the following person(s):

(1) the subject of the test or the subject’s legal guardian;

(2) any person with a written release (must be signed by the subject or guardian, which is dated and specifies to whom disclosure is authorized and the time period during which the release is effective);

(3) Department employees or agents who provide patient care or handle specimens of blood, body fluids, or other tissues, and have a medical need to know such information to provide health care;

(4) Health care workers providing medical care when the test result is necessary for emergency care or treatment;

(5) the Division of Public Health when part of an official report as may be required by regulation;

(6) a health facility or provider which procures, processes, distributes or uses blood, human body parts, or semen for the purposes of transplant or donation;

(7) health facility staff, committee accreditation or oversight review organizations conducting program evaluation;

(8) pursuant to laws relating to the investigation of child/impaired adult abuse;
persons allowed access to such information by court order, given certain restrictions; and

pursuant to laws relating to sexually transmitted diseases and their control.

a. Sexually Transmitted Diseases (STDs): All information and records held by the Division of Public Health relating to known or suspected cases of STDs, including infection with the virus causing AIDS shall be strictly confidential. Such information shall not be released or made public upon subpoena or otherwise, except the following:

1. Release is made of medical or epidemiological information for statistical purposes so that no person can be identified.

2. Release is made of medical or epidemiological information with the consent of all person(s) identified in the information releases.

3. Release is made of medical or epidemiological information to medical personnel, appropriate state agencies or state courts to the extent required to enforce the provision of 16 Delaware Code and related rules and regulations concerning the control and treatment of STDs, or as related to child abuse investigations.

4. Release is made of medical or epidemiological information to medical personnel in a medical emergency to the extent necessary to protect the health or life of the named party; or

5. Release is made during the course of civil or criminal litigation to a person allowed access to said records by a court order which is issued in compliance with the following provisions:

a. No court of this State shall issue such order unless the court finds that the person seeking the records and information has demonstrated a
compelling need for such records which cannot be accommodated by other means. In assessing compelling need, the court shall weigh the need for disclosure against the privacy interest of the subject and the public interest which may be disserved by the disclosure which deters future testing and treatment or which may lead to discrimination.

b. Pleadings pertaining to disclosure of such records shall substitute a pseudonym for the true name of the subject of the records. The disclosure to the parties of the subject’s true name shall be communicated confidentially, in documents not filed with the court.

c. Before granting any such order, the court shall provide the subject whose records are in question with notice and a reasonable opportunity to participate in the proceedings if he or she is not already a party.

d. Court proceedings as to disclosure of such records shall be conducted in camera unless the subject agrees that a hearing is necessary to the public interest and the proper administration of justice.

e. Upon issuance of an order to disclose such records, the court shall impose appropriate safeguards against unauthorized disclosure, which shall specify the persons who have access to the information, the purposes for which information shall be used, and appropriate prohibitions on future disclosures.

(6) No state or local health department officer or employee shall be examined in a civil, criminal, special or other proceeding as to the existence or contents of pertinent records for a person examined or treated for an STD or HIV infection by the Division of Public Health, or of the existence or contents of such reports received from a private health care professional or
private health facility, without the consent of the person examined and treated for such diseases, except where the information in such records is disclosed pursuant to the law.

a. Alcohol and Other Drug Information: All information maintained by alcohol and drug treatment programs is protected by federal laws. Such information may not be disclosed except under certain conditions as specified in federal law.

b. Minors: Information related to the medical examination, consultation, or treatment of a minor for sexually transmitted diseases and pregnancy-related conditions is considered confidential and shall not be released. Three exceptions apply:

1. reporting required by law;
2. child abuse investigation; and
3. mental health records.

D. Providing Clients Access to Their Records

1. Disclosure to Clients:

a. Right to Know: Individuals have a right to find out what records are maintained about them, how they will be used, and how they will be shared with others. Individuals have a right to review their records, including disclosure accounting specified in this policy. The only exception to this is that records developed in the investigation of waste, abuse, or fraud are not subject to review.

b. Procedures for Accessing Records: An individual or their legally authorized representative (or, in the case of a minor, a parent or guardian) must submit a written request. The requester’s identity must be verified and the records shall be reviewed in the presence of a Department professional. The requester may bring a support person or representative to the review and may take notes or have copies of these records made. A fee may not be charged to search for or retrieve Department records for this purpose. A fee may be charged for copies.
c. Record Review: When an individual reviews Department records, a Department professional shall carry out the review in a manner that protects the confidentiality of other individuals who may be discussed in the record(s). The professional may also help interpret and explain the record(s), answer questions, and monitor the review.

d. Assistance with an Interpreter: If the individual is deaf or blind, has no written language, or speaks in a language other than English, agency personnel may provide a qualified interpreter in the client’s native language or in the mode of communication usually used (e.g., sign language, Braille, or oral communication).

e. Disputed Information: When an individual disagrees with information in their record, they may provide a written statement to be included as a permanent part of their record. If the information has been released, the statement must be forwarded.

f. Deleted Information: If information has been deleted from a file and the file subsequently shared with a client, the client shall be informed that deletions have been made and their general nature, so as not to mislead as to completeness. The reasons for such actions shall be documented in the record.

2. When Disclosure to Client is not Permitted: The following information may not be disclosed, unless required by a subpoena or a valid court order.

a. Protected Information: Disclosure is not permitted when such disclosure would violate the confidentiality rights of others; when disclosure would reveal the identity of a source of information protected by confidentiality; or when disclosure involves records sealed by the Court, such as termination of parental rights, adoptions and some custody matters.

b. Disclosure Could Result in Harm to Client: If direct access to certain sensitive information is perceived to be potentially harmful, supervisory guidance shall be sought to determine an appropriate course of action. Information which could result in harm shall not be voluntarily released. The basis for any decision to refuse access to information shall be documented. In such cases, the person
shall be advised that such information may be disclosed to a qualified professional chosen by him or her if requested in writing.

c. Information Relevant to Anticipated Civil Action or Law Enforcement: Information compiled in reasonable anticipation of a civil action or proceeding or for enforcement of criminal laws shall not be released except as directed by the Attorney General’s office.

I. NONCOMPLIANCE

Failure to comply with any of the provisions of this policy and its procedures in any form could result in specific civil, criminal, and/or Department penalties.

II. IMPLEMENTATION

A. Any part of this policy which is found to be in conflict with federal or state laws shall be null and void; all other parts shall remain operative.

B. The Division of Management Services (Human Resources) shall be responsible for maintaining this policy and its revisions.

C. The Division of Management Services (Human Resources) shall be responsible for developing training guidelines for the Divisions.

D. This policy will become effective upon issuance.

[Signed] 11/08/00

__________________________
Gregg C. Sylvester, M.D.
Secretary
I. REFERENCES

A. Federal Laws and Rules Governing Confidentiality


B. Federal Regulations and Policies Concerning Confidentiality

7 CFR 272.1(c); 21 CFR 1316.21; 42 CFR Part 2, part 431 subpart F; 45 CFR 205.50, 303.21; 56 CFR 117; Rehabilitation Services Manual (U.S. Department of Education, Office of Special Education and Rehabilitation services Administration).

C. Delaware Code, Regulations and Policies Concerning Confidentiality

Section 972(b) of Title 10; Sections 707, 708, 726(b), 924, 925 and 1111 of Title 13; Section 4111 of Title 14; Sections 903, 905(b), 908, 1153(d)(e)(f), 3107 through 3112, 33121(f); 3122, 3123(b), 3126, 3127, 9113 of Title 16; Section 5161, Subchapter V (Mental Health Patients Bill of Rights) of Title 16; Chapters 7, 11 (Subchapter I), and 12 of Title 16; Section 3913 of Title 24; Sections 705(a), 4707(e), 4709, 5806(f)(g), 9001(b), 9003(6)(16) of Title 29; Sections 381 Article III(b)(c), 5203 Article VII(a) of Title 31; Delaware Uniform Rules of Evidence, Rule 503(a)(b)(c); Delaware Merit System Rules; DHSS Policy Memoranda 52, 55, 57, 58, 60, Guidelines for Deciding If Review by Human Subjects Review Board is Necessary.
ATTACHMENT A

DELAWARE HEALTH AND SOCIAL SERVICES
CONFIDENTIALITY NOTICE TO CLIENTS

We want you to know why we need to collect information about you and your family, the steps we take to protect your privacy, and your rights to know what information we will keep in our records.

Please ask us for more details if you have any questions.

Why do we keep records? Delaware laws authorize the Department to collect and keep information we need to carry out our duties. This information is important for planning how to best work with you and your family.

Who else may learn this information? For the most part, only Department staff are permitted to know this information, unless you give us written permission to share it with someone else. If you are working with a team of people from different agencies within the Department, information may be shared among the team. The law requires us to share information in some other situations, such as court orders; emergencies threatening health or safety; and investigation of waste, abuse, or fraud.

Will Department staff keep this information confidential? All of our staff sign a confidentiality agreement, which clearly describes their duty to protect the privacy of all of our clients. In addition, the ethical codes of physicians, psychologists, nurses, and social workers require them to keep information shared with them confidential.

Information shared with licensed physicians, psychologists and social workers cannot be subpoenaed, with the following exceptions: hospitalization proceedings; court ordered examinations; proceedings in which a guardian is sought, if the client’s condition is part of the client’s legal claim or defense; and alleged child/impaired adult abuse or neglect cases.

Where is information stored? When not in use, all written records about you are kept under lock. Some information about you may be stored on a computer system. We protect information stored in computers by “locking-out” all but the staff authorized to learn that information.

What are your rights? You have a right to find out what records we keep about you, how they will be used, and how they will be shared with others. You also have a right to review your records, except for certain confidential information and investigative files. If you object to or do not agree with the information in our records, you may ask us to change our records.
If we decide that we cannot change the records, you may give us your information in writing, and we will put it in the records.

What if you have other questions? Please ask the staff person working with you if you have any other questions. If you ask, we will give you a copy of our policy on confidentiality.

I have read the information on this page and/or had it read to me and explained in a language I can understand. I understand my confidentiality rights.

__________________________ ________________________
(CLIENT/GUARDIAN SIGNATURE) (DATE SIGNED)

__________________________ ________________________
(DEPARTMENT EMPLOYEE/AGENT SIGNATURE) (DATE SIGNED)
ATTACHMENT B

CONFIDENTIALITY AGREEMENT

All Department employees and agents who may have access to any client information have an ethical and a legal obligation to keep confidential all information received from and/or about persons with whom the Department is currently and/or was previously involved or otherwise has knowledge. All Department employees and agents are, therefore, required to sign this Confidentiality Agreement.

I hereby agree that I shall abide by this assurance of confidentiality and acknowledge and agree to the following stipulations:

1. I understand and support the Department’s firm commitment to the principle of confidentiality of client information.

2. I understand for the purposes of all Department policies on confidentiality that Department employees and agents should be defined as all current and former employees and agents.

3. I agree to keep confidential all information contained in Department records. In fulfilling my obligation to protect client privacy, I shall adhere to the requirements of federal and state laws, Department policy and the ethical standards of my profession.

4. I shall safeguard from unauthorized disclosure all information retrieved from any computerized client database as well as any password assigned to gain access to a client database.

5. I agree to consult with my immediate supervisor or the next level of management prior to disclosure if there is any question concerning the authority to release specific confidential information.

6. I understand that all information received from and/or about persons currently or previously involved with the Department is the property of the Department and that any such information will be relinquished to the Department upon my termination of employment.

7. I understand that violation of the privacy rights of individuals through unauthorized discussion, disclosure, dissemination, or access to personal
information could make me subject to Department disciplinary action as well as civil and/or criminal penalties.

8. I have read and understand all of the above statements.

________________________________________ ________________________
(DEPARTMENT EMPLOYEE/AGENT SIGNATURE) (DATE SIGNED)

________________________________________ ________________________
(WITNESS) (DATE SIGNED)
ATTACHMENT C

SAMPLE OF A CONSENT FOR RELEASE OF
CONFIDENTIAL INFORMATION FORM

______________________________    of    ___________________________________
(Requesting Individual)   (Service Provider/Program)

requests permission from

______________________________ to release certain confidential information
(Client/Guardian)

about ____________________________. This information will be released to:

(client)

Requester’s Name: ______________________ Address: ______________________
Organization: ______________________ Organization: ______________________
Position: ______________________ Phone: ______________________

Information to be released:

_______________________________________________________________________Purp
ose for the information: ________________________________________________
_______________________________________________________________________
_______________________________________________________________________

__________________________ and __________________________  must abide by the
(requesting individual)   (requesting organization)

following limitations regarding use of the information released:
My signature indicates that I know exactly what information is being disclosed and have had the chance to correct and change the information to make sure it is correct and complete. I am aware that this consent can be revoked in writing at any time.

My signature also means that I have read this form and/or had it read to me and explained in a language I can understand. All blank spaces have been filled in except for signatures and dates.

This consent ends (time period) unless revoked by me in writing before that time. This consent is effective immediately and shall stay in effect as stated.

(Client’s signature or “X”) (Date signed) (Witness/Date signed)

(Client’s guardian, if applicable) (Date signed) (Witness/Date signed)

(Releasing Department/Agency Representative) (Date signed)