

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Public Safety
Prison

SECTION: Administrative – Patient’s
Rights

POLICY # AD IV-3

PAGE 1 of 4

SUBJECT: Confidentiality

EFFECTIVE DATE: April 2014
SUPERCEDES DATE: April 2010

PURPOSE

To provide guidelines to insure confidentiality of the offender’s medical record and information therein.

POLICY

All information contained in an offender’s medical record shall be considered privileged and confidential, with the exception of information considered matters of public record. A statement of assurance of confidentiality shall be signed by Health Services staff upon employment. The term medical record includes both medical and mental health records.

REFERENCES

Health Services Policy and Procedure #CC13 Offender and Family Correspondence and Calls

PROCEDURE

An offender’s name, age, sex, race, offense for which convicted, court where sentenced, length of sentence, date of sentencing, date of arrival, date of transfer from prison, program placement and progress, conduct, grade, custody classification, disciplinary offenses and disposition, escapes and captures, dates regarding release, and the presence or absence of detainers shall be considered matters of public record.

- A. Each Health Services employee shall ensure confidentiality of offenders’ medical records. Only the health services staff having specific record responsibilities shall have access to the offender’s medical records. To insure that information in records is interpreted correctly, no other personnel shall have access to medical records. Individuals granted access to the medical records will sign a statement of confidentiality form agreeing to keep information from the record confidential.
- B. Upon written consent, the contents of an offender’s medical record may be released to the attending psychologist, psychiatrist or governmental agencies directly involved in providing mental health treatment and rehabilitation services to the offender. Even with written consent, clinical information shall not be released to non-mental health professionals, employers, and members of the news media.
- C. Facts regarding admission to and discharge from a mental health treatment facility, transfer to another facility, decision to terminate treatment against medical advice, and referrals and

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Public Safety
Prison

SECTION: Administrative – Patient’s
Rights

POLICY # AD IV-3

PAGE 2 of 4

SUBJECT: Confidentiality

EFFECTIVE DATE: April 2014
SUPERCEDES DATE: April 2010

appointment information for treatment after discharge or release may be provided to the offender’s next of kin or other designated person who has a legitimate role in the therapeutic services for the offender if the responsible professional determines that the disclosure is in the best interest of the offender. This information may be released without consent of the offender after notification that this information has been requested.

With either an oral consent made in the presence of a witness selected by the offender, or a written consent executed by the offender, information regarding the offender’s diagnosis, prognosis, medications prescribed, dosage of the medication prescribed, side effects of the medications prescribed, if any, and the progress of the offender may be released upon written request from the offender’s next of kin or other designated person determined to have legitimate role in the therapeutic services being provided. Both the offender’s consent and the release of this information shall be documented in the medical record. This consent for release shall be valid for a specified length of time (1 year) and is subject to revocation by the offender at anytime.

The responsible professional will:

1. With written consent of the offender, provide the information based upon the responsible professional’s determination that providing this information will be to the offender’s therapeutic benefit, or
2. Refuse to provide the information based upon the responsible professional’s determination that providing the information will be detrimental to the therapeutic relationship between the offender and the professional.
3. In response to written requests for clinical information not covered above, next of kin or other family members who have legitimate roles in therapeutic services for the offender, may authorize release of information (but may not obtain said information).

(G.S. 122C-53(b), (h) and 122C-55(j), (k), (r))

- D. Individuals involved in approved teaching, staff development, program evaluation and research projects may have access to offender health records, as long as the proper precautions are taken to disguise the identities of the offenders. Confidentiality statements should be signed.
- E. Confidential information within an offender’s medical record may be released without written consent to other individuals employed in the NCDPS only when and to the extent that the performance of their duties requires that they have access to such information.

HEALTH SERVICES POLICY & PROCEDURE MANUAL

North Carolina Department Of Public Safety
Prison

SECTION: Administrative – Patient’s
Rights

POLICY # AD IV-3

PAGE 3 of 4

SUBJECT: Confidentiality

EFFECTIVE DATE: April 2014
SUPERCEDES DATE: April 2010

- F. Confidential information will be released to the staff or attorneys of the Attorney General’s/Corrections Section when requested with no authorization required.
- G. If an individual is being considered for parole, the contents of his/her record will be made available to a mental health professional assigned to the Parole Commission.
- H. Even though the information obtained from the offender by the psychologist during treatment should remain confidential, the therapist may be asked to provide information to help make management decisions. The mental health professional must inform the offender of the limits of confidentiality. Information given to management should be limited, as much as practicable, to summaries of clinical data and recommendations regarding operational, security, and classification concerns.
- I. Confidential information shall be disclosed without the offender’s written authorization to the extent that the clinician reasonably determines that such disclosure is necessary to protect against clear and substantial risk of imminent serious injury, disease, or death being inflicted by the offender on himself/herself, or others, or a threat to the security of the unit. Material contained in the offender files may be released to approve federal and state law enforcement agencies when their representatives present proper credentials. Such agencies must agree to maintain the confidential nature of the material or information. Materials will be provided to the courts upon request.
- J. All standards applying to confidentiality shall also apply to those individuals and agencies providing contractual services to the NCDPS.
- K. Health Services recognizes the more restrictive nature of the federal regulations and shall comply with, and educate its employees in regard to, these regulations.
- L. The attached statement of assurance of confidentiality form shall be signed by all health services staff upon employment as part of the hiring process. The form shall be maintained in the employee’s personnel file.

Paula Y. Smith, M.D.

3/24/2014

Paula Y. Smith, MD, Chief of Health Services Date



North Carolina Department of Public Safety

Prisons

Pat McCrory, Governor
Frank L. Perry, Secretary

W. David Guice, Commissioner
George T. Solomon, Director

ASSURANCE OF CONFIDENTIALITY

I have read and understand the Department of Public Safety policies regarding confidentiality. I further understand the liability and potential penalties that could result from violations of these policies and hereby agree to protect and preserve the confidential nature of all offenders' medical and mental health information to which I have access.

I understand that the Department of Public Safety policy includes that unauthorized release of confidential information by departmental employee shall be cause for immediate dismissal or other appropriate disciplinary actions, up to and including dismissal.

POLICY

DC DPS, Chapter D-Public Communications, .0600 Access to Information/Offender Records

NC DPS, Health Services, VI. Medical Records, AD-VI-3, Release of Confidential Information

NC DPS, Health Services, IV. Patient's Rights, AD-IV-3, Confidentiality

Name-full name printed legibly

Signature

Title

Date

Distribution: Personnel Record (original form)
Chief of Mental Health Services
Deputy Medical Director
Dental Director
Psychological Program Manager
Nurse Supervisors
Social Work Director
Medical Records Manager
Pharmacy Director