

 <p style="text-align: center;">County of Sacramento Department of Health Services Division of Behavioral Health Services Policy and Procedure</p>	Policy Issuer (Unit/Program)	BHS-CMH-YDF
	Policy Number	02-03
	Effective Date	10/2009
	Revision Date	08/2019
Title: Confidentiality		Functional Area: Youths' Rights
Approved By:		
Matthew Quinley, LCSW Health Program Manager		Christopher Eldridge, LMFT Mental Health Program Coordinator

Background/Context:

Title 15, Section 1407 requires each juvenile facility that provides on-site health services, the health administrator, in cooperation with the facility administrator, to establish policies and procedures, consistent with applicable laws, for the multi-disciplinary sharing of health information. These policies and procedures shall address the provision for providing information to The Court, youth supervision staff and to probation. The nature and extent of the information shared shall be appropriate to treatment planning, program needs, protection of the youth or others, management of the facility, maintenance of security, and preservation of safety and order. Medical and behavioral/mental health services shall be conducted in a private manner such that information can be communicated confidentially consistent with HIPAA.

Purpose:

The objective of this policy and procedure is to detail the protocol Juvenile Justice Institutions Mental Health Team (JJIMHT) members will follow to ensure the confidentiality of youth detained in the Youth Detention Facility (YDF) and to provide other disciplines with information appropriate to treatment planning, program needs, protection of the minor or others, management of the facility, maintenance of security, and preservation of safety and order. All shared information shall be compliant with Health Insurance Portability and Accountability Act (HIPAA) regulations.

Details:

1. General Guidelines
 - A. All information obtained by JJIMHT members, including the fact the youth is in custody, is considered confidential. JJIMHT members are prohibited by law from disclosing information to a third party without the written consent of the youth and/or their legally responsible party, or as provided by law and/or applicable HIPAA provisions.
 - I. JJIMHT clinicians have a legal and ethical obligation to inform youth about the limitations of confidentiality within YDF during the initial interview or upon the first interview of a youth returning to custody.

- II. Clinicians conducting subsequent interviews may presume that a youth previously seen by JJIMHT has been informed of the limits of confidentiality or may repeat the notification if so desired.
 - B. The law allows for the disclosure of confidential information without a signed consent form in the following circumstances:
 - I. Internal program communication(s) between program personnel having a need for information in connection with their duties that arise out of the provision of assessment, treatment or referral for treatment.
 - II. To file a report of suspected child abuse and/or elder/dependent adult abuse. The disclosure shall be restricted to the minimum amount of information necessary to comply with the reporting law.
 - III. Medical emergency, information may be provided only to those medical personnel treating the individual.
 - IV. Court order
2. Written Responses to Probation
 - A. JJIMHT clinicians provide written responses which briefly describe the youth's condition (not diagnosis), the intervention utilized and treatment plan if there is one; make recommendations to the Supervising Probation Officer (SPO) to offer input and assist in problem solving with difficulties experienced by youth, housing needs, overall functioning of youth and mental health or behavioral obstacles to a youth's functioning, and in an effort to avoid any clinical deterioration of detained youth.
 - B. Confidential information should not be reported in the response to probation unless such inclusion will assist probation in keeping the youth or other youth physically safe and psychologically stable while in custody.
 - C. Responses should not include the names of any staff members or other youth. If a youth reports a concern involving staff or other youth, the information can be included without stating the name of the accused. The name(s) will be provided to the SPO if necessary for investigation purposes.
3. Institutional Assessment and Plan
 - A. JJIMHT clinicians provide written responses to probation requests related to the development of an institutional assessment and plan for youth held for 30 days or more.
 - B. The information provided is a statement of the youth's challenges, including, but not limited to identification of substance abuse history, educational, vocational, counseling, mental health and family reunification needs.
4. Special Needs Meeting
 - A. The JJIMHT Program Coordinator or his/her designee attends the weekly Special Needs Meeting, a multi-disciplinary staffing to discuss identified youth experiencing difficulties.
 - B. JJIMHT clinicians provide appropriate information for the development of an action plan which will focus on reduction of acute symptoms or other identified challenges and restore or achieve a level of functioning necessary to return the youth to full program on his/her unit.

5. Re-Entry Team Meeting
 - A. The JJIMHT Program Coordinator or his/her designee attends the weekly Re-Entry Team Meeting, a multi-disciplinary staffing for youth who are scheduled to be released back to the community.
 - B. The JJIMHT Program Coordinator or his/her designee provide written and verbal information related to the history of mental health disorders, use of psychotropic medication, history of mental health treatment, history of suicidality, history of self-injurious behavior, history of substance use and the need for referrals to mental health services following release into the community to ensure coordination of care.
6. Contact with Contracted Community Providers
 - A. The JJIMHT Program Coordinator or his/her designee contacts contracted providers from whom the youth are currently receiving services in an effort to coordinate care and provide continuity of care while the youth is detained.
 - B. The information shared is limited to that which is permissible, appropriate to treatment planning and coordination of care.

Related Policies:

BHS-CMH-YDF-08-01-Administrative, Technical and Physical Safeguards

BHS-CMH-YDF-08-02-DBHS Compliance Program

BHS-CMH-YDF-08-04-Documentation Guidelines

BHS-CMH-YDF-08-06-HIPAA Complaints and PHI/EPHI Breach Protocol

BHS-CMH-YDF-08-07-Record Management

BHS-CMH-YDF-08-09-Release of Protected Health Information

Contact Information:

Christopher Eldridge, LMFT, Mental Health Program Coordinator, (916)876-9339,
eldridgec@saccounty.net