JUVENILE COURT HEALTH SERVICES

«Facility»

Subject: **REQUEST FOR RELEASE OF INFORMATION (ROI)**	Original Issue Date: 9/20/11	Policy # **E-109**
	Supersedes	Effective Date: 1/13/2013

Departments Consulted: JCHS HIM Department JCHS Nursing Department Probation Department	Approved By: (Signature on File) Medical Director (Signature on File) Medical Records Director	Approved By: (Signature on file) Health Services Administrator

PURPOSE

To establish policy concerning processing release of information requests.

POLICY

JCHS will comply with all Federal, State, and local laws and regulations regarding requests for personal health information and authorized access to a youth's health information.

At all times, the confidentiality of the health record and its contents shall be maintained.

PROCEDURE
ROI Clerk:

Upon receipt of a request for release of information the ROI clerk will

- Place a date on all incoming ROI request.
- Review all ROI Request to ensure that all request received should be processed by the ROI Office.
- Count all incoming request received and report the count on daily report.

The requests will be entered into PEMRS SYSTEM under the Request Manager (see Request Manager procedure).

Telephone Inquiries

When responding to telephone inquiries the clerk

- Politely, answers all public inquiries
- Checks the Request Manager system to acquire the date the request was received and/or the date the request was completed. If the claim was not processed, always explain reason(s) why the ROI has not been processed. .
- Refer any problems to the immediate Supervisor.

If necessary, explain that all requests must be submitted in writing.

DISTRIBUTION: Juvenile Court Health Services Policy and Procedure Manual

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Verifying Requests for information

- When a ROI consent has been received with parents signature, match the parent/or legal guardian signature against the general consent authorization.

Procedure:

- If the signatures do not match, notify the requestor and determine whose signature appears on the Request for information.

Receiving faxes from outside facility

- Verify request and information needed.
- Call requestor verify consent signature authorization.

Enter the necessary information into the Request Manager portion

Go into the PEMRS System under the power chart section and open up the EMR records of patient, under notes, and select the folder for general consent to verify that requested information is for the minor named and the parent or legal guardian is on record for authorization. Place your initials next to the parent or legal guardian signature on the request and circle them to notify everyone that you have verified the signature.

Completing Request

- Review the Request and print out the pages of documentation that fulfill the request.
- Enter the final information into the Request Manager and close out Request that requested health information was sent out.
- Mail the requested material.

AUTHORITY

California Code of Regulations, Title 15, Article 8, Section 1408

REFERENCE

Health Information Management (Medical Records) Procedure Manual

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