



**DEPARTMENT OF MENTAL HEALTH
POLICY/PROCEDURE**

SUBJECT HUMAN IMMUNODEFICIENCY VIRUS (HIV) AND ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) CLINICAL DOCUMENTATION AND CONFIDENTIALITY	POLICY NO. 310.01	EFFECTIVE DATE 08/01/2000	PAGE 1 of 6
APPROVED BY: Original Signed by: MARVIN J. SOUTHARD Director	SUPERSEDES 202.20 08/01/2000	ORIGINAL ISSUE DATE 08/01/2000	DISTRIBUTION LEVEL(S) 1, 2

PURPOSE

- 1.1 To specify policy and procedures for Los Angeles County Department of Mental Health (LACDMH) directly operated programs regarding the documentation of Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS) information and the legal responsibility and handling of HIV and AIDS information contained in the clinical record.
- 1.2 To establish a model that LACDMH contract agencies can use as a guide in developing their own policies.

POLICY

- 2.1 Contract agencies shall adopt this policy or develop one of their own that addresses all of the issues contained in this policy.
- 2.2 Confidentiality of HIV test results or other HIV or AIDS information shall be ensured at the point of release of information and should not influence the completion of documentation. There shall be no restrictions on the documentation of HIV test results or other HIV or AIDS information in the clinical record. All information that is considered by a clinician to be relevant to quality care and treatment of a client must be documented in the clinical record (see Section 3.2.1). Mental health laws relevant to the release of HIV or AIDS information shall be rigorously followed (see Section 3.3).
- 2.3 The client must be informed prior to service delivery that HIV test records and/or other HIV and AIDS information pertinent to his/her care or treatment will be recorded in the clinical record, but protected from release in accord with current law.



DEPARTMENT OF MENTAL HEALTH POLICY/PROCEDURE

SUBJECT	POLICY NO.	EFFECTIVE DATE	PAGE
HUMAN IMMUNODEFICIENCY VIRUS (HIV) AND ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) CLINICAL DOCUMENTATION AND CONFIDENTIALITY	310.01	08/01/2000	2 of 6

- 2.4 Tests considered to be HIV tests for the purposes of this policy include any clinical test, laboratory or otherwise, used to identify HIV, a component of HIV or antibodies or antigens to HIV.
- 2.5 Pre and post-test counseling, as prescribed by Federal regulation, will be provided by the testing agency to any client for whom testing is ordered or performed. Such pre and post-test counseling is provided by a State certified HIV Test Counselor or physician who has been similarly trained.
- 2.6 When appropriate as part of the Department’s responsibility to protect the health and safety of others, LACDMH staff will refer the names of clients with reported positive HIV test results to the Los Angeles County Department of Health Services (LACDHS) for follow-up. When referral to LACDHS for notification of contacts is not possible, the appropriate clinical manager and the LACDMH Medical Director will be responsible for overseeing a process for notifying contacts.
- 2.7 Consistent with other LACDMH policy regarding the release of information, records for which there is a subpoena or a request for information must be reviewed by appropriate agency personnel prior to the release to ensure compliance with Section 3.3 of the Policy.

PROCEDURE

- 3.1 The procedures in this policy incorporate current laws/regulations into LACDMH policy. When these procedures are followed, staff will be in compliance with current testing, documentation and release of information activities for HIV test results and/or other AIDS or HIV information.
- 3.2 Documentation
 - 3.2.1 Staff Explanation of Documentation Policy



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SUBJECT	POLICY NO.	EFFECTIVE DATE	PAGE
HUMAN IMMUNODEFICIENCY VIRUS (HIV) AND ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) CLINICAL DOCUMENTATION AND CONFIDENTIALITY	310.01	08/01/2000	3 of 6

3.2.1.1 LACDMH considers the explanation to clients of its policy on documentation ultimately to be the responsibility of service delivery staff. While LACDMH wishes to afford as much protection as possible to its clients against the possibility of discrimination or stigma, it also must ensure that the quality of care offered or delivered to clients does not suffer due to the omission of relevant client information, including the client's HIV status and related HIV and AIDS information.

3.2.1.2 Staff must ensure that before services are delivered, the client understands that any shared information about him/her that is relevant to his/her care or treatment will be recorded in the clinical record. Service delivery staff should not make promises to keep shared information secret. Code words and other imprecise terminology regarding HIV status are not acceptable because they do not adequately communicate to other service staff important information about these serious conditions.

3.2.1.3 Both the LACDMH Consent for Service and the brochure "What People with HIV Infection Should Know" are tools that staff can use to facilitate client understanding of this issue.

3.2.2 Treatment Progress Notes

3.2.2.1 As with all other information shared by the client, service delivery staff must evaluate the information and decide which information is relevant to the care and treatment of a client. This information must be documented in the *Progress Notes* in the usual manner in the clinical record. When service delivery staff have any question about whether particular information is relevant to care or treatment, they should confer with their supervisors.



SUBJECT	POLICY NO.	EFFECTIVE DATE	PAGE
HUMAN IMMUNODEFICIENCY VIRUS (HIV) AND ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) CLINICAL DOCUMENTATION AND CONFIDENTIALITY	310.01	08/01/2000	4 of 6

3.2.3 HIV-related Medication/Prescription Notes and Laboratory Results

3.2.3.1 Physician notes relative to HIV-related medications/prescriptions should be documented in the same manner and place as other medical information. Laboratory results should be filed with all other laboratory results.

3.3 Release of Information

3.3.1 The release of AIDS and/or non-test HIV information is subject to existing mental health release of information laws. The release of HIV test information is specifically regulated and requires specific consent when transmitted outside of the LACDMH System of Care. It is essential that client records be carefully reviewed prior to **ANY** release of information to determine whether or not the record contains sensitive information that requires specific consent for release.

3.3.1.1 Managing chart content when a Consent for Release of Information exists:

3.3.1.1.1 When the record contains HIV-related information not covered by the consent and the client is available, the request should be discussed with him/her. The client can approve the release of HIV test information by signing the *Consent for Release of LACDMH Information*, Form MH 215. (Attachment 1)

3.3.1.1.2 If the client does not consent to the release or is not available, the information must be blocked out before the record is released and the release must be accompanied by a cover letter that explains that sensitive information, which requires special consent, has been blocked from the record.



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3.3.1.1.3 As an alternative to blocking information, it may also be possible to respond with summary information. However, a cover letter must still accompany the release that states that sensitive information for which a specific request is required was not included in the summary.

3.3.2 Release without Consent

3.3.2.1 Situations in which AIDS or HIV information or HIV test results may be released are very limited:

3.3.2.1.1 to the client's provider of health care for the purpose of emergency diagnosis, treatment or care of the client; and

3.3.2.1.2 to emergency personnel who, in the course of their work, may be exposed to AIDS or HIV.

3.3.2.2 When information is released to treatment personnel outside the provider without the client's consent, the release must be documented on Form MH 216, *Record of Release of Information without Client Authorization* (Attachment 2) and filed in the clinical record. Prior to release, licensed staff must first confirm the identity of the caller/requester in accordance with usual LACDMH practice. The release must be documented in the clinical record.

AUTHORITY

1. Los Angeles County Department of Mental Health Policy



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HUMAN IMMUNODEFICIENCY VIRUS (HIV) AND ACQUIRED IMMUNODEFICIENCY SYNDROME (AIDS) CLINICAL DOCUMENTATION AND CONFIDENTIALITY	310.01	08/01/2000	6 of 6

ATTACHMENTS (HYPERLINKED)

1. [Consent for Release of LACDMH Clinical Record Information, Form MH 215](#)
2. [Record of Release of Information without Client Authorization, Form MH 216](#)

REVIEW DATE

This policy shall be reviewed on or before August 1, 2005.