

Polk County Youth Services notice of privacy practices

This notice describes how medical information about the youth placed here may be used a disclosed and how it can be accessed. Please review it carefully. If you have any questions, please feel free to ask the staff person assisting you. If they cannot help you, they should notify our Privacy Contact person to assist you.

“Protective Health Information” is information about you that may identify you and that relates to your physical or mental health or condition and related healthcare services. It might include your diagnosis, medications along with information such as your age or address.

How we use your protected health information

TREATMENT: We may give doctors, nurses, pharmacists, or other health professionals youth’s health information to get treatment needed. For example if a youth is on medication to help behavior and it does not seem to be working or causes side effects, we would share information about the behavior with their doctor.

PLACEMENTS: In the event of transfer to another placement or home, we may share health information so that treatment can continue.

STAFF: We may share health information with our staff so that they can take care of medical and health needs.

OTHER CONCERNED PEOPLE: We may share health information with family, juvenile court officers, or social workers as needed to help get needed treatment. You can ask that any part of health information not be shared with others. We will try to follow your wishes, but may not be able to at times.

BUSINESS OPERATIONS: We may discuss health information to improve how we take care of youth. For example, if the staff makes a mistake we would talk about what happened so the mistake would not be made again.

PAYMENT: We may have to share health information with your Health Insurance Company or Medicaid to obtain payment for services. Your insurance information will be provided to our pharmacy, laboratory, and others outside our facility that provides health care for you while you are here. We have contracts with businesses and professionals we regularly do business with saying they will keep your health information private.

LAW ENFORCEMENT: Your health information may be shared with law enforcement if it is evidence in a crime or abuse.

GOVERNMENT OVERSIGHT AGENCIES: Such as the Food and Drug Administration, Medical Examiners, or the Dept. of Public Health. For example, if you

had a reaction to a medication we may report it to the FDA. If you have a contagious disease we may have to report it to the Dept. of Public Health.

WORKERS COMPENSATION: If an employee is injured by youth or catches a contagious disease from you, health information may be used in a worker's compensation claim.

When we will obtain a signed consent before releasing health information

RESEARCH: When health information is used for research and youth are identified by name we will obtain signed consent prior to using the information.

OTHER FACILITIES: We will be releasing health information to whoever is responsible for the youth after their release. If a facility or agency you are subsequently transferred to requests information, we will require they send a release signed by a parent or guardian.

SEXUALLY TRANSMITTED DISEASE/REPRODUCTIVE SERVICES

INFORMATION: We will release this information only to those who need it to provide treatment. As required by state law, sexually transmitted diseases will be reported to the health department. Health department staff will contact youth to get information about sexual contacts so they can be notified and treated. Contacts will not be given youth's name. This information will only be released otherwise with a consent signed by the youth.

MENTAL HEALTH INFORMATION: Will be released only with parent/guardian's signed authorization.

SUBSTANCE ABUSE INFORMATION: Will be released only with youth's signed authorization.