

# Medical Treatment/Medical Releases

(Revised 02/06/26)

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## Related Policies

Additional information can be found in the following policies:

- Adoptive Placement Process for Birth Parent Voluntary Relinquishment Cases
- AIDS/HIV - Testing Process
- Confidentiality - General
- Confidentiality Guide
- Court Reports Overview and Distribution
- ERMS and Record Management
- Health Examinations
- HHSA's HIPAA policy
- Hospital Holds
- Mental Health Treatment and Services
- PCC Intake
- Protective Custody Warrants (PCWs)
- Psychotropic Medications
- Types of Hearings - Detention/Initial

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## Forms

The following forms are referenced in this file:

- 04-24p County Of San Diego Health and Human Services  
Child And Family Wellbeing Consent for Examination and Treatment of  
A Child
  - 04-24Psp County Of San Diego Health and Human Services  
Child And Family Wellbeing Consent for Examination and Treatment of  
A Child (Spanish)
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**Forms (cont.)**

- 04-24C Order Authorizing Examination and Treatment-Court
- 04-24A-P Authorization to Use or Disclose Protected Health Information-All Providers
- 04-24A-Psp Authorization to Use or Disclose Protected Health Information-All Providers-All Providers (Spanish)
- 04-29 Authorization to Use or Disclose Protected Health Information-Single Provider
- 04-29sp Authorization to Use or Disclose Protected Health Information-Single Provider (Spanish)
- 04-29CFT Child and Family Team Release of Information
- 04-44 Declaration of Licensed Health Care Provider in Support of Order for Examination and Treatment of a Child in the Custody of the County of San Diego
- 04-86C Application for an Order for Medical/Dental/Surgical Treatment (CWS/CMS Template)
- [JV 220](#) Application for Psychotropic Medication (California Court website)
- [JUV-255](#) Petition for Medical Care, Mental Health Care, Dental Care, and/or other Remedial Care (San Diego Juvenile Court Website)
- JV-256 Order on Petition for Medical, Dental, Mental Health and/or other Remedial Care (Court Form)

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**Policy - Consent to Treat**

All children/youth removed/detained in out of home care must have a County of San Diego Health and Human Services Child and Family Well-Being Consent for Examination and Treatment of a Child (04-24P, 04-24Psp) or Order Authorizing Examination and Treatment-Court (04-24C) signed before treatment/medical examinations can be completed. Children removed prior to 11/16/13 may have existing Consent for Examination and Treatment of a Child (04-24P) or Order Authorizing Examination and Treatment-Court (04-24C) forms on file that allow them to receive general medical care. Children removed between 11/16/13 and 2/10/15 may receive general medical care based on the Special Matter Order in effect at the time of the removal.

If a child removed/detained prior to 2/10/15 needs an intake health exam or intake testing at Polinsky Children's Center (PCC), or Indian Health Clinic (IHC), then a new 04-24 must be signed before the exam can take place.

The 04-24P, 04-24Psp and 04-24C forms are required to be in the records of all children/youth in out-of-home care, including any facility operated by the Health and Human Services Agency of the County of San Diego, resource family home, or public or private institution. All signed forms will be uploaded in the Electronic Record Management System (ERMS) per the ERMS and Record Management policy.

Prior to seeking any Court Order, the SW must take reasonable steps to locate the parent(s) and obtain consent. As long as the parents' rights have not been legally terminated, the parent is able to authorize general care through a 04-24P or any general care medical/dental procedure via the treating medical/dental facilities required consent form. All efforts made must be documented in a CWS/CMS (soon to be CARES) contact.

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**Policy - Consent to Treat (cont.)**

The 04-24P is to be used for consent by parents for their children's general care while in custody. The 04-24C is to be used to gain consent for remedial care when a parent has refused or cannot sign the 04-24P. The 04-86C is to be used for specific medical/dental/surgical treatments listed on the form for children that are in custody (WIC 300 petition filed and/or dependents), not necessary for family maintenance cases.

Reasonable efforts will be made to inform the parent/guardian of all procedures and appointments and these efforts by either the SW or caregiver must be documented in CWS/CMS (soon to be CARES). The parent(s) have the right to be notified and present at the examination whether they have signed the consent, or the Court has signed the consent.

**NOTE:** Since the court must be informed of all significant events in the child's life, even if a parent authorizes a particular medical procedure, the Court and Attorneys for all parties must be notified via an ex parte.

The SW will need to complete the 04-86C for Judicial permission in order to provide permission to treat a child involved with the juvenile court, even if the parent(s) are available and consent to the procedure, for any the following:

- Surgery
- Abortions for children under 12
- General anesthesia (when for abortions, the request will be submitted to the Supervising Dependency Judge and may be submitted via ex parte)
- Blood transfusion
- HIV testing (For permission for HIV testing see AIDS/HIV-Testing Process.)
- Non-emergency surgery
- Spinal Tap

The only exception is that the 04-86C is not needed if the child is placed with/returned to their parent(s). An informational ex-parte is required to notify the Court and Attorneys for all parties in this instance.

Medical examinations, including those conducted at PCC or IHC will not be performed until there is a 04-24P/04-24Psp or 04-24C obtained and on file.

In the event of a medical emergency, the decision to treat in a life-threatening emergency is a **medical** decision. CFWB does not intervene nor give permission to treat children in the community (children **not** in custody), whose parents are responsible for their care. Should a life threatening emergency situation be encountered, please see the policies on Protective Custody Warrants (PCWs) and Hospital Holds.

An "Emergency" is a situation in which immediate services are needed for the alleviation of severe pain or immediate diagnosis and treatment of unforeseeable medical, surgical, dental or other remedial care which, if not immediately diagnosed and treated, would lead to serious disability or death [WIC 369(d)].

SWs must complete the JV220 for Psychotropic Medication. Refer to Psychotropic Medications for information regarding psychotropic medications authorization.

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**Procedure for Requesting Authorization for Treatment Not Covered on the 04-24**

The SW will do the following to request the court’s authorization to authorize a particular treatment **not** authorized on the 04-24.

Step	Action
1	Complete the 04-86C form, Application For Order For Medical/Dental/Surgical Treatment (CWS/CMS template) for types of treatment requiring judicial permission (listed on the form). Obtain the signature of the physician or dentist recommending the procedure/treatment. The 04-86C acts as an ex parte.
2	Send the completed 04-86C to the Court Unit.
3	When the signed copy is received back from the court, the Court Unit will upload the signed 04-86C in JELS. The Court Unit will send the printed copy to the SW through email and interoffice mail. The SW will follow the ERMS Record Management Policy and make a copy for the child’s caregiver. The 04-86C can be shown to medical personnel as needed.  <b>REMINDER:</b> SWs must also provide all medical information to the program HEP OA’s for entry into the HEP.

The 04-24P covers local anesthesia, allowing a parent to sign hospital forms authorizing the use of local anesthesia. The court has to authorize the use of general anesthesia, making the 04-86C form necessary for general anesthesia.

**Parents’ Right to Attend Initial Medical Examination**

At the time of all removals, SWs will advise the parent that they may be present for their child’s intake exam. The SW will request the parent’s signature on the 04-24P. If the parent signs, the parents must **initial** where indicated on the form that they either wished to be present for the exam or waive that the right to be present.

If the parent wants to be present for the intake examination, the SW will provide the PCC intake number to the parent. Intake will schedule the examination. The SW will inform the parent that the initial medical examination must occur within seven days of intake and admission to PCC, CANN, or any County of San Diego-affiliated assessment center and that the exam must occur at PCC. Should the parent fail to attend the scheduled examination within seven days, the exam will be conducted in the parent’s absence. As a 10-Day Temporary Shelter Care Facility, PCC has limited time to schedule appointments. It is important for SWs to encourage parents to keep the initial appointment so that a timely assessment can be completed prior to the child’s release from PCC.

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**Parents' Right to Attend Initial Medical Examination (cont.)**

A timely initial physical exam at PCC is important in order to assess the child's health and well-being while in temporary care. This allows clinic staff to immediately identify medical needs/risks and treat as needed. The exam also helps to keep other children and staff safe from potential health risks. As a 10-Day Temporary Shelter Care Facility, PCC has limited time to schedule the appointment and repeated no shows, cancellations, or reschedules may add to the delay. It is important for SWs to encourage parents to keep the initial appointment so that a timely assessment can be completed prior to the child's release from PCC.

If a parent wants to attend the intake physical exam, then it cannot occur at CANN because CANN is not able to safely accommodate it. Children Assessment Network North (CANN) can coordinate intake and change of placement of children coming into custody in North County including arranging for placement and transportation of children to an identified placement or PCC. CANN will perform a communicable disease screening only. The SCP will need to take the child for a health exam at a later date. After the SCP makes the medical exam appointment, the SW must ensure that the parent is notified of the date, address, and phone number of the appointment, as well as the right to attend. SW will document this in CWS/CMS.

If a child is transported from CANN to PCC, then the SW will arrange for the parent to be present at PCC for the initial screening exam if the parent wants to be present.

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**Child/Youth Consent**

Children/youth, at any age, are able to consent or decline health care related to the prevention or treatment of pregnancy and health care services for sexual assault. Children/youth have the right to confidentiality of medical and mental health records, including, but not limited to, sexual and reproductive health care and substance use disorder history and treatment.

For more information see Health Examinations policy.

Youth who are 12 years of age or older are able to consent or decline health care related to prevention, diagnosis or treatment of a communicable reportable disease; the prevention or treatment of a sexually transmitted infection; or outpatient mental health services and drug and alcohol abuse treatment. Dependent youth 16 and older are able to consent to receive medications for opioid use disorder from a licensed narcotic treatment program as replacement narcotic therapy and able to consent to replacement narcotic abuse treatment that uses buprenorphine from a licensed physician, surgeon or health care provider. Per WIC 16001.9(a)(24) SW's are authorized and required to provide dependents with age-appropriate, medically accurate information about reproductive health and the prevention and treatment of unplanned pregnancies and sexually transmitted infections. SW's are authorized to make sure that youth have access and information regarding these services. Documentation should be made in a CWS/CMS (soon to be CARES) contact when said educational information is supplied/given.

Youth 12 years and older are able to sign for the release of their information in relation to their drug/alcohol abuse treatment, outpatient mental health services and communicable reportable disease medical records (WIC 317(f)), as long as they have sufficient maturity and capacity to understand what they are signing. If you have any questions about whether a youth has sufficient maturity or capacity to consent, consult County Counsel.

**Child/Youth  
Consent (cont.)**

Should a youth consent to the release of information related to their treatment and care they have consented to, the Authorization to Use or Disclose Protected Health Information-Single Provider form 04-29 should be signed and dated by the youth, allowing the SW to obtain the information from designated service providers. The disclosed information would be used for the coordination of services for the youth. Prior to having the youth sign any version of an 04-29, the SW will review the form with the youth and inform the youth in an age appropriate manner:

- What information will be requested and why
- With whom it could be shared (including the CFT, Court, etc.)

How the information will be

- used – for assessment, placement, service planning, and recommendations
- Their right to revoke the release.

If a youth has questions about the 04-29 form or the consequences of signing it, you may also refer them to their attorney.

Should a youth consent to the release of their private information (medical, mental, drug and alcohol) by signing the Child and Family Release of Information form 04-29cft it can be shared with the Child and Family Team for the purpose of coordinating placement and case plan services.

**When to Use  
Which  
Authorization**

The SW will make every attempt to have a parent sign a consent to treat form for a child who is entering protective custody. When a parent is not able to or unwilling to sign the 04-24P form **and** medical treatment is necessary prior to the Detention Hearing, the SW will consult with CC.

The following table displays which form or authorization must be used for different scenarios:

If...	Then the SW Will...
<p>a parent is available to sign the 04-24P</p>	<p>Ask one parent to sign the form County of San Diego Health and Human Services Child and Family Wellbeing Consent for Examination and Treatment of a Child (04-24P) or (Spanish) (04-24Psp).</p> <p><b>NOTE:</b> Make sure the parent <b>initials</b> whether they want to be present at the intake examination or not. A check mark is not sufficient.</p>
<ul style="list-style-type: none"> <li>• the parents are <b>unavailable or unwilling</b> to sign the 04-24P, <b>AND</b></li> <li>• the Detention Hearing has not yet been held, <b>AND</b></li> <li>• the child needs medical care and/or behavioral health care.</li> </ul>	<ul style="list-style-type: none"> <li>• Consult with CC.</li> <li>• Obtain declaration from physician on why medical treatment is necessary on the 04-44 form Declaration of Licensed Health Care Provider in Support of Order for Examination and Treatment of a Child in the Custody of the County of San Diego.</li> </ul>

**When to Use Which Authorization (cont.)**

If...	Then the SW Will...
	<ul style="list-style-type: none"> <li>• Complete the Juvenile Court Form JUV- 255, Petition for Medical Care, Mental Health Care, Dental Care, and/or other Remedial Care (SW is the “Petitioner”) and sign it.</li> <li>• Complete the Juvenile Court Form JUV -256, Order on Petition for Medical, Dental, Mental Health and/or other Remedial Care completing page 1. and top of page 2 of the Order.</li> <li>• Submit the above three forms to the Court Unit (if weekend/after-hours see section below).</li> </ul> <p><b>IMPORTANT:</b> The SW must submit a phone number where he or she may be reached if the Judge has questions and be available to take the call.</p> <ul style="list-style-type: none"> <li>• Receive the signed documents after the Court Unit submits the Declaration, Petition and Order to a Duty Judge at Meadowlark Juvenile Court.</li> <li>• Send signed order to PCC Intake, Health Clinic and/or facility of examination/treatment (i.e. Rady’s Children’s Hospital).</li> </ul> <p><b>NOTE:</b> The Declaration/Petition/Order expires at the Detention Hearing. The SW must get the 04-24P or 04-24C signed at the Detention Hearing for ongoing medical care.</p>
<ul style="list-style-type: none"> <li>• the parents are <b>unavailable</b> to sign the 04-24P, <b>AND</b></li> <li>• the Detention Hearing has not yet occurred, <b>AND</b></li> <li>• the child does NOT need medical care</li> </ul>	<ul style="list-style-type: none"> <li>• Attach the 04-24C to the Detention Hearing Report or submit an ex-parte for the court to sign.</li> <li>• Document in the report what attempts have been made to obtain the parent’s signature on the 04-24P.</li> </ul> <p><b>NOTE:</b> If the parent is present at the Detention Hearing, the SW will ask the parent to sign 04-24P instead of requesting the court to sign the 04-24C.</p>
<ul style="list-style-type: none"> <li>• The parents are <b>unwilling</b> to sign the 04-24P <b>AND</b></li> <li>• the Detention Hearing has not yet been held, <b>AND</b></li> <li>• the child does NOT need medical care</li> </ul>	<ul style="list-style-type: none"> <li>• Wait until the Detention Hearing. The parent has a right to be heard re: their refusal to sign.</li> <li>• Document in the Detention Hearing Report what attempts have been made to obtain the parent’s signature on the 04-24P and why the parent objects to signing it.</li> <li>• Bring the 04-24P and 04-24C to court for the Detention Hearing.</li> <li>• If the parent continues to object to signing the 04-24P, then ask the court to sign the 04-24C.</li> </ul> <p><b>NOTE:</b> The child will not be allowed to have a medical exam until the 04-24 is signed.</p>

**When to Use Which Authorization (cont.)**

If...	Then the SW Will...
<ul style="list-style-type: none"> <li>the child will be going to PCC/CANN/IHC as part of a COP, <b>AND</b></li> <li>the child needs medical care</li> </ul>	<p>Check the electronic case file to see if a prior version of the 04-24P is available from the current dependency case and signed by a parent who still has parental rights intact.</p> <p>If <b>yes</b>, then use that form.</p> <p>If <b>no</b>, then:</p> <ul style="list-style-type: none"> <li>ask parent to sign a new 04-24P.</li> <li>If both parents are unable/unwilling, submit the 04-24C to court via ex parte, documenting what attempts have been made to obtain the parent's signature on the 04-24P or why the parent objected to signing the form, in addition to providing notice to all the parties on the case.</li> </ul>

**Procedure for Requesting Authorization for Treatment Not Covered on the 04-24**

If the parent refuses/is unable to authorize a particular treatment **not** authorized on the 04-24P the following steps are taken to request the court's authorization.

Step	Action
1	SW will complete the 04-86C form, Application for Order for Medical/Dental/Surgical Treatment (CWS/CMS template) for types of treatment requiring judicial permission (listed on the form). The 04-86C acts as an ex parte. This includes obtaining the physician's signature.
2	SW will send the completed 04-86C to the Court Unit.
3	<p>Court Unit will upload the signed copy to JELS when the signed copy is received back from the court. The Court Unit will send the original to the SW via county mail. The SW will have the signed form uploaded to ERMS and make a copy for the child's caregiver. Providers can be made aware of the 04-86C being signed and complete.</p> <p><b>REMINDER:</b> SWs must also provide all medical information to the regional Foster Care Nurse for entry into the HEP.</p>

**Agency Consent for Children with Acknowledged Relinquishments**

If a child needs emergency medical treatment, as described by a medical professional, and:

- has been voluntarily relinquished by their parent(s) and
- the termination of parental rights has been acknowledged by the State of California,

**Agency Consent for Children with Acknowledged Relinquishments (cont.)**

Then the Adoptions Program Manager is permitted to authorize any emergency medical treatment. Consult with county counsel if the consent is needed during business hours. For more information on relinquishments, see the Adoptive Placement Process for Birth Parent Voluntary Relinquishment Cases Policy.

**Weekend After-Hours Requests for Court Authorization for Pre-Detention Children/Youth**

If there is a need for an afterhours/weekend exam/treatment the following process will be followed for obtaining a court order for children/youth pre-detention hearing:

Step	Who	Action
1	SW	<ul style="list-style-type: none"> <li>• Call Hotline and request to speak to Duty PSS.</li> <li>• Email Declaration (04-44), Petition (JUV-255), and completed Proposed Order (JUV-256) to Hotline Duty PSS.</li> </ul>
2	Duty Hotline PSS	<ul style="list-style-type: none"> <li>• Forward SW email to the Duty Judge’s Court email address and cc Juvenile Court Admin.</li> <li>• Call the Duty Judge indicating that the Declaration, Petition and completed Proposed Order have been emailed to them.</li> </ul>
3	Duty Judge	Review the email and respond via email <b>OR</b> provide telephonic approval/denial
4	Duty Hotline PSS	<ul style="list-style-type: none"> <li>• Indicate approval or denial (if telephonic, complete telephonic approval section) on the Order on Petition for Medical, Dental, Mental Health and/or other Remedial Care (JUV-256).</li> <li>• Forward all forms back to:               <ul style="list-style-type: none"> <li>○ PCC intake, PCC Health Clinic and/or facility of examination/treatment</li> </ul> </li> <li>• the SW via email.</li> </ul>
5	SW	<p>On the next business day, submit the original Declaration (04-44), Petition (JUV-255) and Order (JUV-256) (that were approved telephonically or via email) to the Duty Judge for the Judge’s signature</p> <p><b>NOTE:</b> Duty Judges may not be a Meadowlark Judge. If the Duty Judge that provided email or telephonic consent is not available, submit to Meadowlark Juvenile Court.</p>

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**Drug Screening**

For children in need of a drug screening, the SW will attempt to obtain parental signature on the 04-24P and will inform intake at PCC that this is a drug involved case.

If the parent refuses to sign and a drug screening on the child is deemed medically necessary before the Detention Hearing takes place due to the child being potentially drug-exposed, the SW will submit the following to the Duty Judge at Meadowlark Juvenile Court (if weekend/ after hours, see section above:

- Declaration of Licensed Health Care Provider in Support of Order for Examination and Treatment of a Child in the Custody of the County of San Diego (04-44)
- Petition for Medical Care, Mental Health Care, Dental Care, and/or other Remedial Care (JUV 255)
- Order on Petition for Medical, Dental, Mental Health and/or other Remedial Care (JUV-256). Complete page 1 and the top of page 2.

If a drug screening is necessary from the Detention Hearing on, a signed 04-24P or 04-24C form is required.

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**Permanent Plan of APPLA**

If a child/youth has a permanent plan of APPLA and is placed with a relative, then WIC 366.27 allows the court to authorize that relative to "...provide the same legal consent for the child/youth's medical, surgical, and dental care, and education as the custodial parent of the child/youth."

If a child/youth has a permanent plan of APPLA and is placed with a foster parent, relative caretaker, or nonrelative extended family member, then WIC 366.27 allows the court to limit "the right of the child/youth's parent or guardian to make educational decisions on the child/youth's behalf", so that the current caretaker may exercise educational consent. This language is part of our post-PP recommendations and included on minute orders.

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**Children Currently in CFWB Custody and Information Sharing**

For children currently in CFWB custody, the current Special Matter Order (SMO) authorizing the release of health information still suffices for medical information sharing. The order states that that information concerning healthcare provided to a child in the custody of HHSA may be released to HHSA, the child's attorney, other health care providers, regional centers, and schools if needed for treatment, treatment planning, counseling and or educational purposes. This order does not include the release of confidential privileged information (ex. psychiatric treatment notes) but does include court ordered psychological evaluations, initial treatment plans and treatment plan updates requested by HHSA. Local Rule 6.6.10 also allows for the sharing of information related to health care, social services, mental health, education services, and wraparound services with providers of these services for children receiving court ordered services.

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**Information Sharing Forms**

The following table displays which forms to use when requesting information. For more information on sharing info see the confidentiality guide:

Purpose	Form Number	Form Title
Information shared signed by parent in ER/VS; used to get info on child from multiple providers	04-24A-P OR 04-24A-Psp	Authorization to Use or Disclose Protected Health Information – All Providers (9/14)  Spanish: Authorization to Use or Disclose Protected Health Information - All Providers (9/14)
Information share signed by parent in ER/VS or Court Dependency Case to get info about child or parent from one provider	04-29 OR 04-29sp	Authorization to Use or Disclose Protected Health Information – Single Provider (7/19)  Spanish: Authorization to Use or Disclose Protected Health Information– Single Provider (8/19)
Information share for any child in CFWB custody; used to get info on child only	SMO authorizing release of health information of children in the custody of the HHSA Or Individual legal statutes listed in the confidentiality guide	SMO authorizing release of health information of children in the custody of the HHSA (3/24)

**Policy on the Use of the 04-29**

Whereas the 04-24A-P gives a blanket authorization for all service providers to give information to CFWB, the 04-29 is used for individual specific providers.

The 04-29 may be used to obtain parent or child information. It may be useful in Voluntary cases or ER referrals (i.e. because a referral client may not want to release for all providers but would be willing to release information from one provider).

When using the 04-29 to gather information on a parent, the **SW is not permitted to have the parent sign a blank 04-29** and fill in the providers later. The parent must sign a completed form. By law, the parent must have this informed consent on which specific provider we are asking what specific information from. If the parent has multiple providers then multiple 04-29's must be done. The legalities of a blanket release for parents was researched and CC has advised that this is not a legal option for information from parents' providers. It must be provider specific.

**Obtaining Records from Rady Children’s Hospital (Including Non OPTUM Provider Chadwick Center Records)**

Procedures for obtaining confidential records, including Forensic examinations and interviews, from Children’s Hospital:

Step	Who	Action
1	SW	Call RCH Health Information Office.
2	SW	If the request is urgent (e.g., court hearing, possible removal of a child, etc.), ask that the request be expedited. Consider contacting the providers who worked directly with the child (i.e. the forensic interviewer or child abuse expert) for the request.
3	SW	<p>Fax, mail or drop off a request for medical records on County letterhead. Include:</p> <ul style="list-style-type: none"> <li>the child’s name and DOB</li> <li>which records are being requested (including dates, if known)</li> <li>that there is an active OCS investigation.</li> </ul> <p><b>Fax Number:</b></p> <p><b>Physical Address:</b> 5855 Copley Dr. Suite 101 San Diego, CA 92111</p> <p><b>Mailing Address:</b> Health Information 3020 Children’s Way San Diego, CA 92123</p>
4	Rady’s Health Information Office Staff	Once the request is received, call the SW within 1 to 5 days notifying him/her that the records are ready for pick-up. The SW (or CFWB designee) must pick up the records in person (at address in Step 3). The records cannot be faxed or mailed.

**NOTE:** Rady Children’s Hospital, including Chadwick Center, will not release confidential records to OCS when there is not an active OCS investigation. If a SW needs records when there’s no active OCS investigation, the SW will consult with CC regarding options.

**HIPAA**

Health providers must comply with the privacy regulations stated under the federal Health Insurance Portability and Accountability Act (HIPAA) of 1996. The mandated implementation date for the new privacy regulations was April 14, 2003. HIPAA’s privacy regulations have many requirements that protect the confidentiality of health information and provide individuals with significant rights with respect to their health information.

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**HIPAA (cont.)**

While it has been determined that most of CFWB is not a covered entity under HIPAA, CFWB forms requesting the release of PHI (Protected Health Information) must be HIPAA-compliant in order for covered entities to release PHI to CFWB staff. In addition, consent for treatment and release of PHI forms may not be combined under HIPAA.

Staff may review HHSA's HIPAA policy for additional information.

A combination of federal and state laws permits the disclosure of PHI to SW staff. HIPAA Privacy Regulation §164.512 permits disclosure of PHI to governmental agencies who are authorized to receive reports of child abuse and neglect.

HIPAA Privacy Regulation §164.502 permits disclosure of protected health information to the child's "personal representative" who is serving "in loco parentis."

Welfare and Institutions Code (W&IC) Section 361.2(e) reads in part, "when the court orders removal [of the child from the parent(s)] pursuant to Section 361, the court shall order the care, custody, control, and conduct of the child to be under the supervision of the social worker". Rights and responsibilities with regards to a child's health care needs are assigned to the Agency, thus the SW is entitled to receive medical and mental health information.

HIPAA and Personal Identifying Information (PII) are further covered in Confidentiality-General.

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**Notice of Privacy Practices**

HIPAA requires health providers to notify patients of their privacy policies and practices. SWs and caregivers may be asked to sign these documents on behalf of children. The caregiver or the SW may sign the notice of receipt of these documents for children under 12. Children 12 years and older may sign for themselves. A copy should be uploaded to ERMS.

**NOTE:** While caregivers may sign that they have received the notice on behalf of the child, only the parent or others who are legally authorized to obtain the child's health information are able to act on the policies outlined in the notice.

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**Alignment with SET Values**

This policy supports [SET Value 3](#) of Helping Children and Youth Achieve Their Full Potential and the priority to meet the youth's medical, dental and emotional needs.

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