



- 1. Do I need an Authorization to Release and Exchange Information (AREI) to refer a client to mental health services?**

*It is First 5 Alameda County's policy that if you share client information regarding HIV, mental health, alcohol and drug diagnosis and treatment, an AREI is required. The service provider does not need authorization to share or receive information limited to the client's mental health symptoms, such as "parent cries every day", "mother does not want to hold her baby," "caregiver seems anxious or withdrawn." In any case, it is best practice to first discuss with client the information to be shared.*
- 2. I am a health care provider. Can I share a client's HIV and mental health information with other health care providers?**

*It is First 5 Alameda County's policy that an AREI is needed to share HIV and mental health diagnosis and treatment with anyone. Without an authorization, you can only share general mental health symptomatology (e.g. mom seemed sad, mom has been crying everyday at home).*
- 3. Can CPS involvement or child abuse information be shared with a medical provider without authorization?**

*Yes.*
- 4. Is domestic violence considered a specially protected category which requires an authorization to share?**

*No. Mental health diagnoses can be found in the DSM IV. Domestic violence is not a listed mental health diagnosis.*
- 5. If the parent explicitly states they do not want to have information shared with their pediatrician, then the information should not be released?**

*The right to share information is held by the parent. Discuss with the parent exactly what you would share with a provider and the purpose of sharing this information. If the parent still does not wish to share information, you must honor that wish and document their preference in ECChange or Pathways.*
- 6. On the second page of the Authorization for Services (AFS), a parent checks the box to not share information with their pediatrician or OB/GYN. However, I need to notify the physician that I am involved with the case. I am not going to share case specifics other than there is a case manager involved with the family. Can I do that?**

*First, review and explain the purpose of the AFS once again with the parent. Explain to the parent the limited information you will share with her medical provider. Most parents will reconsider their position. If not, it is First 5 Alameda County's perspective that the right to share information is held by the parent. Therefore, the service provider should not share case information or their involvement with the case with the medical provider and this should be documented in ECChange or Pathways.*

**7. Should agencies use the First 5 Alameda County AREI or use their own?**

*Agencies can use their own AREI. Agencies can also use the First 5 Alameda County AREI as a template to create their own authorization. The AREI must have separate check boxes for HIV, Mental Health diagnosis and treatment and drug and alcohol diagnosis and treatment. All authorizations must be printed in 14 size font.*

**8. If there are multiple children in the household, do you need to have one authorization for each child?**

*Fill out an AREI for each child as the authorization is person-specific. If using the Home Visiting Authorization for Family Support Services, you can list up to three children on the form. Use one SART/Help Me Grow Authorization for Services per child.*

**9. Is First 5 Alameda County still collecting client authorizations?**

*No, First 5 Alameda County is not collecting our partnering agencies' client authorizations.*

**10. Why did the release of information change from 5 years to 1 year?**

*The AFS currently has a 5 year maximum. The AREI has a one year maximum by law.*

**11. If a case was closed and reopened, do I need to ask the parent/caregiver to sign new authorizations?**

*It depends on what services had been provided and the nature of the reason for reopening.*

*New authorizations are needed when the case was closed due to:*

- *Mutual understanding*
- *Original goals were met*
- *Family declines services*
- *or when a family calls back for new issues that have arisen*

*If the case was closed due to failed attempts to reach family, then family contacts service provider requesting services, a parent can initial and date the original authorizations.*

**12. How do I handle giving the family an authorization in a language I don't speak (how do I decide what to check off)? Do I check things on the English version and give them both?**

*Service providers should use authorizations in the family's preferred language. Authorizations are available in English, Spanish, Chinese, Vietnamese and Arabic. If the parent or guardian is low or non-literate, read and review the authorizations and answer any questions the parent or guardian may have. The parent or guardian should direct the service provider to check off appropriate sections and sign the authorization with complete understanding of the document. Provide the family a signed copy of the authorizations signed.*

*Contact interpreter services if the authorization is not available in the family's language. Use the English authorization as a guide to explain each section of the authorization with the interpreter. Again, answer any questions the parent or guardian may have. The parent or guardian should direct the service provider to check off appropriate sections and sign the English authorization with complete understanding of the document. Provide the family a signed copy of the authorizations signed.*

**13. Can we email ECChange case ID's?**

Yes.

**14. Are ECChange or Pathways case ID's considered Protected Health Information (PHI)?**

*No. PHI includes individually identifiable health information that is maintained or transmitted in any form, including oral communication that originates with or is received by a health care provider, that relates to the past, present or future physical or mental condition of an individual or to the provision of health care to an individual, and that identifies or could be used to identify the individual.*

**15. Does a Family Navigator (FN) need to obtain an AREI to share information about a parent's mental health status with the SART Linkage Line (SLL)?**

*FNs should limit the information shared with SLL to that type of information necessary to support linking the child or parent to appropriate services. The parent should be aware of what specific information will be shared and the purpose.*

*An AREI is needed to share specific mental health diagnosis and treatment between First 5 Alameda County and a community partner.*

*An AREI is not needed if:*

- *The FN is a F5AC employee*
- *The information describes mental health symptoms which do not include diagnosis or treatment such as "mom is sad" or "mom has lost interest in daily activities."*

*Providers can document in Pathways or ECChange that the child and/or parent/guardian is receiving services from a mental health agency for the purpose of linking and collaborating services. Providers should not detail the mental health, substance use or HIV diagnosis in these notes. For example, "Child is receiving behavioral services from Family Paths" or "Mother is receiving services from La Familia".*

**16. Should I shred or store the closed SART case records that I kept in a notebook?**

*Document the notes in Pathways and then destroy your original notes, unless your agency has a different protocol.*

**17. The AFS was signed, however there was a lapse in time between the next home visit or contact with the family. Can you continue to coordinate services and use the signed authorization to further the goals of the case?**

Yes

**18. Baby is born and mom consents to services with the Hospital Outreach Coordinator (HOC). CPS is involved and Grandma is now the caregiver. Do I need to get consents signed again? What if mom is not available and Grandma is the legal guardian?**

*If the legal parent or guardian signs First 5 Alameda County authorizations, this is sufficient. If the legal guardian or parent is not involved with the family, the service provider can use the Caregivers Authorization Affidavit, which is available on the First 5 Alameda County website for the caregiver to consent for services along with the AFS. This form allows the caregiver who lives with the infant/child, who is not the legal guardian, to consent for certain service such as family support services and family navigation. If the Grandma becomes the legal guardian, then she needs to sign a*

*new authorization.*

**19. Do we need both the Authorization and the Caregivers Authorization Affidavit signed?**

*Yes, the caregiver should sign both forms. If the parent or legal guardian is available to sign the authorizations, then a caregiver affidavit is not required.*

**20. What do you do when the mother states that they do not want a nurse or family advocate to see the child, yet the mother was not available a good bit of the time and the aunt is assuming the role of care giving and would like to receive services?**

*Ask your supervisor how your agency will address this situation.*

**21. At a visit to conduct an Ages and Stages Questionnaire, Grandmother, who is the primary caregiver, is present while the parents are at work. Does Grandmother sign the consents?**

*No, the legal guardian or parent must sign the authorization in this situation. The service provider should leave the authorizations, along with their contact information, with the Grandmother to give to the parents. If parents have questions about the authorizations, they can contact the service provider.*

**22. What about speaking to a probation officer about a client?**

*Best practice would be to obtain a signed AREI.*

**23. When the Hospital Outreach Coordinators make referrals, they complete the Authorization for Home Visiting Family Support Services with the client. Certain community partners also use their agency's consent for services and release of information. Is that okay?**

*Yes, if that is your agency's protocol.*

**24. When Brighter Beginnings enrolls a First 5 Alameda County client and we don't receive a HOC referral we use the First 5 Alameda County (ECC) authorizations. Our practice has been to use our agency's consents when we don't receive a HOC referral. Should we use both authorizations?**

*Yes, you should use both authorizations, especially if the Brighter Beginnings authorizations do not contain the opt-out information needed to enroll families in ECChange.*

**25. What information can I share with the RCEB and School Districts?**

*RCEB and School Districts are not healthcare providers and an AREI should be signed by legal guardians/parents to discuss family information to coordinate services.*

**26. What information should be documented in Provider Feedback Forms?**

*Information documented on the Provider Feedback Form is based on caregiver/parent authorizations. Service providers should discuss with parents and ensure their understanding of the information shared with providers.*

*For healthcare providers, information can be shared/released to coordinate services without additional consent.*

*For ECE providers, refer to parent authorizations, keep information focused on the child and provide limited information on the parents.*

**27. What kind of information can a SART FN share with a child care provider?**

*The information released should be focused on the child not the parent. Discuss the extent of the information being released with the parent beforehand.*

**28. What kind of information can a SART FN share with the child’s medical provider?**

*The information given to the provider should be discussed with the parent first. Be mindful that the Provider Feedback Form will be placed in the child’s medical chart.*

**29. What kind of authorization do I need to share an autism diagnosis?**

*Autism is a chronic developmental disorder; therefore, an authorization is not needed to share this information with a provider to coordinate services.*

**30. As a Family Navigator or Inclusion Coordinator, what can I document in the Referral Tab in Pathways?**

*Family Navigators can document information freely and professionally according to family needs, concerns, and services in the Referral Tab section in Pathways.*

**31. As a Family Navigator or Inclusion Coordinator, what can I document in the Service Log in Pathways?**

**(Difference between the Service Log and Provider Feedback Form)**

*Information should be documented to capture the services offered and provided to the families. For quality assurance and best practice, document the details of your work in the Referral Tab and be brief, in the Service Log.*

*Providers can document in Pathways or ECChange that child or parent is receiving services from a mental health agency for the purpose of linking and collaborating services. Providers should not detail the mental health, substance use or HIV diagnosis in these notes. For example, “Child is receiving behavioral services from Family Paths” or “Mother is receiving services from La Familia” is can be documented.*

**32. When a SART Clarifying Assessment has been completed, can First 5 Alameda County share this information with other agencies?**

*To share diagnosis and treatment information, the FN or SLL must have a release form signed by the parent/guardian so the information can be shared with other providers. An authorization is not needed to describe behavior or the mental health symptoms of a child between providers for the purpose of coordination of services. SART staff (FN or SLL staff) cannot pass along or share by in person, by mail or electronically written assessments completed by SART Clarifying Assessors to another agency or provider. Best practice would be to notify the Clarifying Assessors and/or parents/guardians of the need to share the documentation with another agency or provider for coordination of services.*

*Please direct additional questions or requests for clarification to Anna Gruver, First 5 Alameda County at [Anna.gruver@first5ecc.org](mailto:Anna.gruver@first5ecc.org) or 510-875-2455.*