**Purpose/Belief Statement**

We, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (**name of facility**), understand that parents/legal guardians put their trust in us to care for their child(ren). Parents/legal guardians share identification, demographic, health, developmental, and/or educational information about their child and family with us. We respect a family’s right to privacy and we commit to keeping their information confidential.

**Definitions**

Personal information that we will treat as confidential includes, but is not limited to:

* Identification and demographic information including names, addresses, phone numbers, email addresses, birth dates, social security numbers, and photographs/videos
* Health information including diagnoses (including allergies), medications, medical reports, immunization records, and results of health assessments, oral health examinations, and vision/hearing screenings
* Developmental and/or educational information, including service plans, conference reports, developmental screenings, autism spectrum disorder screening, psychosocial/behavioral assessments
* Private family information that is shared verbally or in writing

**Procedures/Practice**

We retain the following forms which contain personal information for as long as the child is enrolled and one year after the child is no longer enrolled:

* Application for Enrollment
* Emergency Medical Care Information
* Medical Action Plan for any child with health care needs such as allergies, asthma, or other chronic conditions that require specialized health services
* Medication Administration Permission and Record for any child receiving medications in child care
* Child Health Assessment/Medical Report­­
* Immunization Record
* Infant Sleep Position Waiver (if applicable)

We retain the following forms for a minimum of 30 days after record revised or replaced:

* Infant Feeding Plan
* Allergy postings

For a complete list of all the information that may be contained in a child’s file, see the Children’s File Checklist on the DCDEE website: <https://ncchildcare.ncdhhs.gov/Portals/0/documents/pdf/F/File_Checklist_Children_Center.pdf>

**Confidentiality**

Information in a child’s records and any other personal information concerning the child or family will not be made available to any person other than those described below, without the written consent of the parent/legal guardian. Employees will not disclose or discuss personal information regarding children and their families with, or in the presence of, any unauthorized person.

Information will be shared only with the child’s teacher/caregiver, other staff members who are involved in caring for the child, child care health consultants, other technical assistance providers, and accreditation or regulation inspectors only as required to meet the needs of the child or certification of the program’s operation. Except for unannounced inspections, the parent/legal guardian will be provided the name(s) and/or role(s) of the individual(s) who may be:

* observing indoor and outdoor environments when children may be present and
* reviewing children’s records to assist the facility in determining if files are complete and up to date.

**Storage of Records**

Children’s files containing confidential information will be stored \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (**describe secure method of storing children’s files**) and are kept secure by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (**name or title of responsible person**).

Copies of documents from a child’s file may be kept in:

* our Ready-To-Go Emergency File to provide care in emergencies
* classrooms to provide daily care
* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The copied documents may include:

* Application for Enrollment
* Medication Authorizations and Instructions
* Medical Action Plans (stored with emergency medications and transported with the child when out of the classroom)
* Emergency Contact Information (transported with the child when out of the classroom)
* Infant Feeding Plan

Copies of these documents stored in a classroom will be inaccessible to unauthorized persons, by the use of cover sheets, stored in a file cabinet or drawer, kept in a closed backpack with the medication (to accompany children when out of the classroom), or \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**(describe secure method of storing children’s files in the classroom or Ready-To-Go Files, if different).**

If an infant has a sleep waiver, a notice will be posted for quick reference near the infant’s crib that includes the infant’s name, the infant’s authorized sleep position, and the location of the signed waiver. No confidential medical information, including an infant’s medical diagnosis, will be shown on the notice.

Information about children’s special diets or food allergies will be posted in the food preparation area and in the child’s eating area.

**Release of Information**

Parent request: A parent/legal guardian may request, in writing, a copy of child’s records for their own use or for release to another service provider for the child. The request must specify:

* to whom the record is to be released,
* for what purpose, and
* what parts of the record are being released.

We will provide copies **[at no cost/for a fee of \_\_\_\_\_**]. We will retain the original records and the written request.

When appropriate, a copy of all relevant legal documents, court orders, etc. that define parental rights should be provided to our facility upon enrollment or when the order is issued. Access to records and information about the child will be limited to the parent(s)/legal guardian(s) specified.

Other Requests: For any release of information other than requests by the parent/legal guardian, such as for referral for external services, we will obtain written informed consent from the parent/legal guardian in their requested language before the information is released. Foreign language interpreters will be used whenever possible to inform parents/legal guardians about their confidentiality rights.

To comply with the federal Health Insurance Portability and Accountability Act of 1996 regulations, the child’s health care professional or other service agency may require that the parent/legal guardian sign a separate form giving permission to release confidential information to our facility.

**Exceptions**

* Reporting of communicable diseases: Certain serious communicable diseases are reportable in North Carolina because they are considered dangerous to the public health. NC law requires reporting cases or suspected cases of these diseases to the local health department. This information is then reported to the N.C. Division of Public Health. During such reporting, identifying information about the affected child, including name, age, and how to contact the family, will be included.

We may also be required to notify other staff and the families of any children who may have been exposed to a communicable disease. We will communicate this notification without identifying the diagnosed child.

* Reporting of child maltreatment: When there is suspicion of child maltreatment, personal information will be shared as required by state and local reporting agencies by any person who suspects abuse and/or neglect of a child, as stated in NC General Statute.
* Obtaining necessary emergency medical treatment: A statement authorizing the facility to obtain medical attention for a child, signed by the parent/legal guardian, will accompany the child whenever emergency medical treatment is required. Information about the child’s health care needs, relevant medical history, allergies, and medications (including Medical Action Plans) may be released to emergency personnel to ensure appropriate care.

**Application**

This policy applies to all enrolled children, families, visitors, volunteers, and staff\*.

**Communication**

Our facility will review this policy with parents/legal guardians, volunteers, and staff in writing and verbally. Copies of the policy are in staff and parent handbooks.

Staff\*

* All current staff members and newly hired staff will review the **Confidentiality Policy** before providing care for children.
* Staff will sign an acknowledgment form that includes the individual's name, the date the facility’s policy was given and explained, the signature, and the date the individual signed the acknowledgment.
* The child care facility shall keep the signed **Confidentiality Policy staff acknowledgment form** in the staff member’s file.

Parents/Legal guardians

* A copy of the policy will be given and explained to the parents/guardians of currently enrolled children upon adoption of this policy.
* A copy of the policy will be given and explained to the parents/guardians of newly enrolled children on or before the first day the child receives care at the facility.
* Parents/legal guardians will sign an acknowledgment form that includes the child’s name, date the child first attended the facility, date the operator’s policy was given and explained to the parent, the parent’s name, parent’s signature, and the date the parent signed the acknowledgment,
* The child care facility shall keep the signed **Confidentiality Policy parent acknowledgment form** in the child’s file.

**\*** For purposes of this policy, "staff" includes the operator administrative staff, and staff who may be counted in ratio, additional caregivers, substitute providers, and uncompensated providers.

**References**

Caring for Our Children, standard 9.4.1.3 Written Policy on Confidentiality of Records: <http://nrckids.org/CFOC/Database/9.4.1.3>

Caring for Our Children, standard 9.4.2.8 Release of Child’s Records: <http://nrckids.org/CFOC/Database/9.4.2.8>

NC Communicable Disease Branch, Surveillance and Reporting: <https://epi.publichealth.nc.gov/cd/report.html>

NC General Statute § 7B-301. Duty to report abuse, neglect, dependency, or death due to maltreatment: <https://www.ncleg.net/EnactedLegislation/Statutes/HTML/BySection/Chapter_7B/GS_7B-301.html>

NC Child Care Rules 10A NCAC 09 - .0801 Application for Enrollment, .1721 Requirements for Records, .0606, .1724 Safe Sleep Practices: <https://ncchildcare.ncdhhs.gov/Services/Child-Care-Rules-Law-and-Public-Information>

|  |
| --- |
| This policy was reviewed and approved by: |
| Director/Owner |
| Print name: | Date: |
| Signature: |
| DCDEE Child Care Consultant (recommended) |
| Print name: | Date: |
| Signature: |
| Child Care Health Consultant (recommended) |
| Print name: | Date: |
| Signature: |

Effective and Review Dates

|  |
| --- |
|  |
| Effective Date |

|  |  |
| --- | --- |
| Annual Review Dates | \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_  |

**Parent or Guardian Acknowledgement Form**

I, the parent or guardian of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(child or children’s name)** acknowledge that I have read and received a copy of the facility's Confidentiality Policy.

|  |  |  |
| --- | --- | --- |
|  |  |  |
| Date policy given/explained to parent/guardian |  | Date of child's enrollment  |
|  |  |  |
| Print name of parent/guardian |  |  |
|  |  |  |
| Signature of parent/guardian |  | Date |

**Staff Acknowledgement Form:**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **(name)** acknowledge that I have read and received a copy of the facility's Confidentiality Policy.

|  |
| --- |
|  |
| Date policy given/explained to staff  |
|  |  |  |
| Staff signature  |  | Date |