Policy: 14.11

Title: Social Services Block Grant Client Confidentiality

Approved by: [Signature]
Approval Date: 03/10/2021
Effective Date: 03/15/2021

Authority:
- Tenn. Code Ann. § 71-6-118
- 45 CFR 96.70 et seq. [Social Services Block Grants]
- 42 CFR §§1397

Application: SSBG employees and provider staff

Policy Statement

Agencies that contract with the Tennessee Department of Human Services must maintain client confidentiality.

Reason for Policy

The reason for this policy is to document requirements surrounding client confidentiality.

Policy

Maintaining Client Confidentiality

1. All Tennessee Department of Human Services (TDHS) employees and Social Services Block Grant (SSBG) providers must maintain strict standards of confidentiality regarding client identity and case information. All material, regardless of form, medium, or method of communication is considered confidential in accordance with state regulation and professional ethical standards.

2. Providers must take all necessary steps to safeguard confidentiality. Client records must be stored in a secure location regardless of medium. Physical records must not be removed from agency grounds and electronic records must be protected at all times.

Access to Client Information

When necessary, state and federal employees must be allowed to access client case information. At initiation of services, provider agency staff must inform all clients that their case records are subject to review by state and federal employees. Clients are to be reassured that both state and federal...
employees are obligated to maintain client confidentiality. SSBG is unable to provide services to clients who choose not to allow appropriate government review of their case information.

**Release of Client Information to Third Parties**

1. Sometimes a client will request their SSBG agency share confidential information with a third (3rd) party. Examples include but are not limited to medical personnel and family members assisting with care.

2. Client approval must be documented with the agency’s release of information form signed and dated by the client or their representative. If, for any reason, the client or representative cannot sign their name, their mark must be witnessed by a non-interested party. All release of information forms must indicate the person or organization to whom the information should be released and specify the type of information to be shared (e.g., medical, financial, case status, etc.).

3. All clients must be informed that they can revoke a release of information at any time. Agencies must provide the client with a mechanism for documenting the revocation of release.

**Supporting Documents**  None

**Retention of Records**  Pending

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<td><strong>Term</strong></td>
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**Supersedes**


**APPROVAL HISTORY**

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<tr>
<td>Clarence H. Carter</td>
<td>Commissioner</td>
<td>03/10/2021</td>
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**REVISION HISTORY**

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