

**CLIENT RECORDS POLICY**

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# 1. Purpose and Objective

1.1 Maharat Learning Center (MLC) is committed to ensuring the protection of client records/information and has developed this policy to define a consistent and effective approach for the protection, control, confidentiality and maintenance of client records/information.

1.2 The purpose of the MLC Client Records Policy is:

* To ensure that documentation of client information is performed in a manner that complies with mandatory regulatory and accrediting standards;
* Details the requirements for ensuring the confidentiality, security and integrity of client records/information;
* Specifies the essentials for maintaining client records/information to support planning and decision making, and enhance and improve the continuity of care.

1.3 The components of this Client Records Policy shall:

* Designate the essentials and responsibilities of initiating, auditing and maintaining client records;
* Protect the privacy and confidentiality of client records/information;
* Define the permissible communication with individuals requiring access to client records/information;
* Ensure client records/information is accessed and used solely for legitimate purposes;
* Protect against any reasonably anticipated threats or hazards to the security, confidentiality or integrity of client records/information.

# 2. Scope

2.1This policy is a companywide policy and is applicable to all staff and departments at MLC, including employees who have access to or handle client records/information.

# 3. Definitions and Abbreviations

3.1 **MLC:** Maharat Learning Center

3.2 **CEO/MD:** Chief Executive Officer/Managing Director

3.3 **PD:** Principal Director

3.4 **CDA:** Community Development Authority

3.5 **QCBD:** Quality Compliance & Business Development Manager

3.6 **HOD:** Head of Department

3.7 **ABA:** Applied Behavior Analysis

3.8 **MLA:** Maharat Learning Academy

3.9 **ENR:** Enrollment Number

3.10 **QIP:** Quality Improvement Plan

3.11 **TRA-SC –** Tool for Risk Assessment – Social Care

3.12 **IMPZ:** International Media Production Free Zone

3.13 **UAE:** United Arab Emirates

3.14 **BSP:** Behavior Support Plan

3.15 **FBA:** Functional Behavior Assessment

3.16 **IEP:** Individualized Education Plan

3.17 **ID:** Identification

3.18 **Confidentiality:**

1. The restricted access to data and information to individuals who have a need, a reason, and permission for such access.

2. An individual’s right to personal and informational privacy, including for his or her health care records.

3.19 **Enrollment Record Custodian:** person who has care, custody and control of enrollment records

3.20 **Informed Consent:** A process of communication between a client and Social Care services provider that results in the client’s authorization or agreement to undergo an assessment, intervention and/or care. It includes the principle that the Social Care services provider has a duty to inform his or her clients about the nature of a proposed assessment, intervention and/or care, the risks and benefits, the likelihood of success, alternative assessment, intervention and/or care and the risks involved, and the risks and benefits of not receiving or undergoing the assessment, intervention and/or care. A client, concerned for his or her own welfare and faced with a choice of whether or not to undergo the proposed assessment, intervention and/or care, may then balance the probable risks against the probable benefits.

3.21 **Representative:** in relation to a child (client), means:

* Where the client is under the age of 18 years – that client’s parent or guardian or;
* Where the client is unable to give authorization, or exercise his/her rights, a person appearing to be lawfully acting on the client’s behalf or in his/her best interests.

# 4. Policy

4.1 Creating and maintaining accurate and complete client records are a critical area of professional responsibility.

4.2 MLC shall initiate, maintain and secure client records/information in accordance with the procedures described in this policy and regulatory standards outlined by the Community Development Authority (CDA) Dubai Social Care Standards.

4.3 At a minimum, an Enrollment Record will be initiated for every client who enrolls for services at MLC, and who may be provided services by MLC. An Enrollment Record is a legal document and may serve as primary evidence if legal action is taken against the Center.

4.4 Only those members of staff who are specifically authorized by MLC may access client records or view client information that may be considered confidential. Enrollment Records may be accessed by senior members of the Social Care team and applicable members of the Administrative team as outlined in this Policy. Any breach of client confidentiality is regarded by the management of MLC as gross misconduct and may result in disciplinary action.

4.5 Client records are the property of MLC. Client records or parts thereof shall not be removed from the premises of MLC by any company employee except as required by applicable legal authorities of the United Arab Emirates (UAE). No telephone or verbal orders are to be made or accepted.

4.6 MLC shall ensure the availability of sufficient staff and other resources to maintain a sustainable client record-keeping system and to ensure client records are completed in a legible and timely manner in keeping with the requirements of this policy.

4.7 MLC shall ensure compliance to all regulatory requirements concerning the security, confidentiality and integrity of client records/information. Appropriate measures, as indicated herein have been taken to ensure the integrity and confidentiality of client records/information.The Center Manager and Quality Compliance and Business Development Manager (QCBD) shall oversee the client records review process to ensure record content is entered and completed in a timely, accurate, legible and authenticated manner.

# 5. Procedure

## 5.1 Client Records – Roles & Responsibilities

### 5.1.1 Chief Executive Officer/Managing Director

5.1.1.1 The Chief Executive Officer/Managing Director (CEO/MD) of MLC shall oversee and ensure compliance to all regulatory requirements concerning the security, confidentiality and integrity of client records/information.

### 5.1.2 Center Manager

5.1.2.1 The Center Manager of MLC has been allocated and is responsible to oversee the duties of the allocated Enrollment Record Custodians and is responsible for ensuring that security and confidentiality of client records is maintained within the scope of their job role and duties.

### 5.1.3 Enrollment Record Custodians

5.1.3.1The Enrollment Record Custodians assigned at MLC are the Center Manager and Client Relations Administrators.

5.1.3.2 Enrollment Record Custodians are responsible for, but not limited to:

* Initiating an Enrollment Record for every client.
* Registering clients on the Child-Pro CRM to assign a unique enrollment number (ENR).
* Logging Enrollment Records in/out in the Enrollment Records Logbook.
* Ensuring that all Enrollment Records are returned, logged back in, and stored safely into the locked file cabinets at the end of each day.
* Filing all necessary forms, papers and reports to the Enrollment Record (within 7 days of receipt of paper to be filed).
* As directed by the Center Manager, auditing of Enrollment Records and seeking rectification of corrective actions identified.
* Retrieval of records from offsite storage location (as detailed herein).

Further responsibilities of Enrollment Record Custodians are contained throughout this policy.

### 5.1.4 Social Care Staff

5.1.4.1 It is the responsibility of applicable Social Care staff, including but not limited to Behavioral Intervention & Learning Support personnel and Maharat Learning Academy (MLA) personnel, identified in this policy as those authorized to have access to the client records/information, to adhere to this policy.

5.1.4.2 It is the responsibility of all applicable personnel, and as applicable to the services rendered by the client, to ensure entries to the clients Enrollment Record and applicable departmental client records, forms/documents must be completed and/or signed in a legible and timely manner in keeping with the requirements of this policy.

### 5.1.5 Quality Compliance & Business Development Manager

5.1.5.1 The Quality Compliance & Business Development Manager (QCBD), with input from the Center Manager, has been assigned to manage and oversee the Enrollment Record review and audit processes to ensure record content is entered and completed in a timely, accurate, legible and authenticated manner.

## 5.2 Client Enrollment Records

### 5.2.1 Enrollment Record / Enrollment Number

5.2.1.1An Enrollment Record, pink in color, is initiated and maintained in written format and stored in hard copy format for every client enrolled for services at the Center.

5.2.1.2The Center shall assign each client with a unique Enrollment Number (ENR). At a minimum, both the client’s name (last name, first name) and the ENR must appear on the front of the Enrollment Record and on the top right hand corner of each page, including multi-page hard copy forms and documents in the Enrollment Record.

5.2.1.3Entries in the Enrollment Record (where applicable) should be dated, timed, legible and indelibly verified. The author of each must be identified and authentic. Authentication can be made by official stamp, signature, and/or written initials. Entries into the Enrollment Record must be made as close to the time of the client encounter as possible to ensure accuracy and comprehensiveness of data. In the interest of professional dignity, integrity, respect and good taste, Enrollment Records should be free from facetious remarks and uncomplimentary comments.

5.2.1.4Changes, corrections or other modifications made to written Enrollment Record entries is made by drawing a single line through the text to be changed such that the original information remains legible (~~example~~). Label the scored text as *“incorrect”*. The date, time, nature, reason and correction or other modified should be documented and initialed by the modifier.

5.2.1.5Original hard copy of consent forms, referral letters, insurance papers, laboratory, diagnostic, assessment reports, initial treatment plans/quarterly treatment plans and any other applicable papers will be retained in the Enrollment Record file. Only hard-copy forms approved by MLC may be used as per the Document Control Policy (QM014).

5.2.1.6Papers produced by MLC, including but not limited to, reports, letters, programs, treatment plans, IEPs, BSPs must be signed and dated (and stamped as applicable) by the applicable staff member before filing in the Enrollment Record.

5.2.1.7All active Enrollment Records are kept at the Center within locked filing cabinets. All active Enrollment Records must remain on the center premises at all times. Inactive Enrollment Records may only be removed from the Center for offsite storage, and are collected and stored by the allocated storage facility. Removal of any Enrollment Record or any part of it, from the Center is a major offense and may result in disciplinary action.

5.2.1.8Under no circumstances should any portion of the Enrollment Record be removed or destroyed, unless in accordance with this policy. The removal or destruction of portions of the Enrollment Record without authorization is a very serious offense. The loss of any portion of an Enrollment Record may imply that they were removed deliberately in order to suppress evidence of client care. In the event that legal action is brought by a party against the Center, this could have serious consequences.

5.2.1.9Enrollment Records may only be retrieved and signed out by designated Enrollment Record Custodians. The Enrollment Record Custodians are responsible for logging Enrollment Records in/out on the Enrollment Records Sign Out/In Log (QM010) and for ensuring that all Enrollment Records are returned, logged back in, and stored safely into the locked file cabinets at the end of each day.

5.2.1.10Enrollment Records shall be internally audited periodically to ensure compliance with this policy and ensure Enrollment Records are completed on in a timely, accurate, authenticated and legible manner.

### 5.2.2 Initiation of an Enrollment Record

5.2.1.1When a client attends the Center for their first appointment for any service(s), an Enrollment Record must be initiated and set up, and the client allocated an ENR.  It is important to receive the correct completed forms to set up the Enrollment Record and allocate an ENR.

5.2.2.2When an Enrollment Record is created, it must include the following blank forms (at a minimum and as required) to be completed by the client and/or the applicable member of Social Care personnel:

1. Enrollment Form (CR001)
2. Informed Consent Form (CR002)

5.2.2.3On attending the first appointment, Client Relations Administrators must provide the client with an Enrollment Form, Informed Consent Form, and ask the parents for their ID (Passport or Emirates ID) and the child’s ID (Passport or Emirates ID).

* **Enrollment Form** – the client must complete **ALL** sections of the Enrollment Form, and sign and date the form. When the client gives the form back, Client Relations Administrator must check the form it is completed in full (both sides), signed and dated, and add the ENR number to the form.
* **Informed Consent Form** – the client must sign and date this form.  When the client gives the form back, Client Relations Administrator must check it is completed in full, signed and dated.  The form should then be provided to the applicable Social Care staff member to sign and date. When the form is returned, it must be checked it is completed in full, signed and dated, and add the ENR number to the form.
* **Client and Parent ID** – when any new client attends the Center, Client Relations Administrator must request the parents for their ID and the child’s ID and takes a copy (either passport or emirates ID).  Add the client’s first name, last name and ENR number to all copies taken.

### 5.2.3 Generation of Enrollment Number

5.2.3. Client Relations Administrator are responsible to add the client’s details to the Child-Pro CRM system and generate a unique ENR for the client. This ENR, first name and last name is placed on the front of all Enrollment Records, and should be included with the first name and last name of the client on the upper right hand side of any and all pages of forms, papers, documents, assessments, checklist, reports, drawings or other information that pertains to the client that is placed in the Enrollment Record.

### 5.2.4 Content of Enrollment Records

5.2.4.1The Enrollment Record must contain sufficient information to identify the client, support any diagnosis, justify and document the course and results of services, assessments, interventions and/or care provided and promote continuity of care. This may include (but is not limited to):

* Client and Parent information: name, address, date of birth, nationality, contact numbers and email address.
* Enrollment Number (ENR).
* Any and all third party reports and supporting documents received from other healthcare facilities, educational facilities and parents.
* Client History – must be included on the Enrollment Form in the record which documents any medications or drugs patient is taking, any allergies or client conditions, client’s primary care physician.
* Informed Consent Form – form must be completed and signed by client or client’s representative and the primary Social Care staff member on his or her first visit to the Center.
* Referral forms, authorization forms, parent questionnaire and any other applicable forms relating to the course of service provision.
* Discharge forms, exit forms, referral forms, authorization forms and any other applicable forms relating to the course of care.
* A list of food, medication and/or other applicable allergies or ‘No Know Allergies’ should be written on the inside of the front cover of every Enrollment Record in red ink/marker pen.

5.2.4.2At MLC, each Enrollment Record has three tabs, and listed below is the forms/information that is filed within each tab. This is also the checklist the Enrollment Record Custodians use when filing additional papers to the Enrollment Record. Not all Enrollment Records will have everything listed below, however if such a form/paperwork/reports is received, it details where it should be filed. Each document must be placed in a plastic sheet-protector. One sheet protector should be used per document.

**1. Enrollment Forms** – this section will include client/parent identification and all Maharat Internal documents and forms EXCEPT Maharat Reports/Programs/Letters. Below you will find a list of documents which may be included (not exhaustive) in this section. Documents filed in this section must be filed in the order as listed below if such document exists for the client.

* Enrollment Form (CR001)
* Client/Parent Passport/ID
* Medication Authorization Form (CR032)
* Enrollment Agreement (for applicable service)
* Informed Consent Form (CR002)
* Outing Consent Form (CR022)
* Audio/Visual Consent Form (CR021)
* Information Receipt/Release Consent Form (CR006)
* Marketing Photography/Video Consent Form (MKT004)
* Services Discharge/Exit Form (QM022)
* Client Relations - Client Exit Form (CR027)
* Enrollment Checklists (for applicable service)
* Service Provision Variation Form (QM019)
* Post Intake Meeting Action Form (CR011)
* Intake Meeting Notes (ABA002)
* Parent Questionnaire (for applicable service)
* Referral Forms (CR025 / CR026)
* Supervision Team Timesheet (ABA018)

**2.** **Maharat Reports/Programs** – this section will include all reports and/or letters produced and provided by MLC including (but not limited to):

* Assessment Reports, Initial Programs, Program Updates, Progress Reports, Intake Reports, Exit Reports, School Observation Reports, BSPs, IEPs, FBAs and any other reports and/or letters produced and provided by MLC.
* Documents filed in this section must be filed in date order, most current on top.

**3.** **External Documents** – this section will include any and all third party reports and supporting documents received from other healthcare facilities, educational facilities and parents which may include:

* Any reports/assessments provided from outside source
* Any letters provided from outside source
* Any referral forms from outside source
* Documents filed in this section must be filed in date order, most current on top.

## 5.3 Departmental Client Records

### 5.3.1 Behavioral Intervention Client Logbooks

5.3.1.1Upon generation of an Initial Program for Behavioral Intervention services, a client logbook is created before the start of services. Logbooks and associated behavioral intervention forms are provided as part of the program and are used as a client record and data collection record for services. Client logbooks are white folders and both the client’s name (last name, first name) and the ENR must appear on the spine of the logbook.

5.3.1.2Logbooks for clients who have Center sessions only may be stored in the logbook storage cabinet located in the Client Records room. Clients who are scheduled for both home/school sessions and center sessions are responsible for transporting logbooks between their home/school and the Center.

5.3.1.3When retrieving or returning client logbooks and client materials from the logbook storage cabinet, behavioral intervention/learning support personnel must make a conscious effort to maintain the confidentiality, cleanliness and organization of the logbook/materials cabinets.  The cabinet shelves for logbooks and client materials are clearly labeled.  Client materials must be placed in a plastic box and the box is clearly labeled with the child’s name and enrollment number.

5.3.1.4 Behavior Technicians/Learning Support personnel are responsible for logging Client Logbooks in/out on the Logbook Sign Out/In Tracker (QM023) and for ensuring that all Client Logbooks are returned, logged back in, and stored safely into the logbook cabinets at the end of each session. The form is located in the client records room. Behavior Technicians/Learning Support personnel should follow the below procedure for signing out/in client logbooks:

* Technicians/Paraeducators are required to sign the log book out before each session
  + If a client has back to back sessions:
    - When the session is completed mention in the comments that the next staff member has received the log book
    - When taking over a session – sign the log book out in your name
* State the location of the session – MLC/Residence/School
* Completion of session – technician to sign log book in
  + If a client has residence/school sessions
    - Sign the tracker to evidence the log book has gone with the parents/guardian

5.3.1.5Behavioral intervention personnel are responsible for ensuring client logbooks and all program materials are prepared, maintained, updated and organized appropriately and in a timely manner.

5.3.1.6Behavioral intervention personnel are not permitted to leave the MLC premises with any client logbooks for any reason.  Upon conclusion of center-based sessions, Behavior Technicians must immediately return the client logbook to the logbook storage cabinet, unless such client receives both home and center sessions and will be taking the logbook with them.

### 5.3.2 MLA Client Logbooks

5.3.2.1Upon enrollment for the Maharat Learning Academy (MLA), a client logbook is created. MLA client logbooks and associated MLA forms are used as a client record and data collection record for MLA services. MLA client logbooks are white folders and both the client’s name (last name, first name) and the ENR must appear on the spine of the logbook.

5.3.2.2Logbooks for MLA clients is stored by the Learning Coordinator in the MLA classroom. MLA personnel must make a conscious effort to maintain the confidentiality, cleanliness and organization of the logbooks.

5.3.2.3MLA personnel are responsible for ensuring client logbooks and all MLA program materials are prepared, maintained, updated and organized appropriately and in a timely manner.

5.3.2.4MLA personnel are not permitted to leave the MLC premises with any client logbooks for any reason.

## 5.4 Security and Storage of Client Records

### 5.4.1 Security and Storage of Active Client Records

5.4.1.1MLC is committed to maintaining client records in a manner that ensures safety, confidentiality, accuracy and easy retrieval.

5.4.1.2Enrollment Records are stored safely in a designated, locked Client Records room to provide protection from loss, destruction, potential fire/water damage, tampering and unauthorized use and theft. Filing cabinets storing hard copy Enrollment Records are kept locked at all times.

5.4.1.3Enrollment Records are controlled by the Enrollment Record Custodians and are available to authorized personnel as well as the client or his/her representative upon written request to the Enrollment Record Custodians, at reasonable times and upon reasonable notice.

5.4.1.4Enrollment Records shall only be stored in the designated filing cabinets in order of the ENR. The Enrollment Record files are to be returned to the Enrollment Record Custodians who will ensure they are filed in the filing cabinets at the end of each day. No Enrollment Record files are to remain in any offices or the reception area overnight.

5.4.1.5 Behavioral intervention client logbooks are stored in the logbook storage cabinet located in the Client Records room. Logbooks for MLA clients are stored by the Learning Coordinator in the MLA classroom.

### 5.4.2 Security and Storage of Inactive Client Records

5.4.2.1 Clients who have been formally discharged, or who have not received any service(s) from the Center for a period of six months will be deemed inactive.

5.4.2.2Enrollment Records for inactive clients, logbooks for inactive clients, and records for active clients from previous years’ of behavioral intervention services are stored offsite and managed through a reputable, ISO 9001:2008 Certified third party agent, Derby Records Management, FZ LLC.

5.4.2.3The Center maintains a signed contract with Derby Records Management which includes the appropriate protection and safeguarding of confidential client records. Client records stored offsite are stored on the Derby Records Management premises, located in the International Media Production Free Zone (IMPZ) in Dubai, UAE and are individually identified with barcodes for easy and secure identification.

5.4.2.4Access to and retrieval of the client records stored offsite has been granted to the authorized agents for MLC, which includes the Enrollment Record Custodians.

5.4.2.5Client records stored offsite are provided with a barcode and indexed with file description and MLC Code for easy tracking and retrieval. Coding of files will follow the matrix provided below:-

* Inactive Enrollment Record:

*Client Last Name, Client First Name*

*ENR# - year – MLC/ER*

* Inactive Behavioral Intervention Logbook:

*Client Last Name, Client First Name*

*ENR# - year – MLC/ABALB*

* Inactive MLA Logbook:

*Client Last Name, Client First Name*

*ENR# - year – MLC/MLALB*

* Behavioral intervention records from previous years of intervention sessions (Active or Inactive clients):

*Client Last Name, Client First Name*

*ENR# - year – MLC/ABA*

5.4.2.6An Index Report of the client records stored offsite is generated by Derby Records Management and sent to the Center Manager and QCBD. The Index Reports will be saved on the company server in the ‘Client Relations’ folder which is only accessible by the QCBD, Center Manager and Client Relations Administrators.

5.4.2.7The following flowcharts describing the process for preparing, arranging collection and retrieval of offsite client records have been provided at Attachment A:

1. Preparing Client Records for Offsite Storage
2. Arranging Collection of Client Records for Offsite Storage
3. Retrieval of Offsite Client Records

## 5.5 Confidentiality of Client Records

### 5.5.1 Confidentiality Policy

5.5.1.1All client records and client information are strictly private and confidential. The access to and release of such records is done only in accordance with the provisions of this policy and with the provision of the CDA Social Care Standards and Privacy Rules. The Center has implemented stringent guidelines for the protection, control and exchange of confidential information in order to regulate a consistent, effective approach to the exchange of client records and to ensure client information is protected from unwanted disclosure and unauthorized use.

5.5.1.2Unless required by law, no information that discloses the Client’s or Parents identity will be released to anyone outside of the Client’s ‘circle of care’ without written consent from the Parents. Children eighteen (18) years of age and over will be asked which individuals should receive information on their progress. All information shared and discussed with Center Personnel is considered strictly private and confidential.

5.5.1.3Center Personnel may disclose information without consent only under the following circumstances, in the best interest of the child / individual(s) / family at stake. The following exceptions shall apply:

* If there is clear evidence of serious and imminent harm to oneself or to others.
* If there is reason to suspect abuse (sexual, emotional, or physical) or neglect of a child or vulnerable adult.
* If there is a report of misconduct, particularly of a sexual nature, by another professional.
* If the confidential records are deemed relevant and subpoenaed by a court of law or regulating body.

5.5.1.4Center personnel who come in contact with confidential client records and/or client information shall respect the confidentiality of the client records and/or client information in the following ways:

* Behavioral intervention/learning support personnel shall have only have access to client records of assigned clients only.
* All Center personnel shall refrain from discussing individual client information or progress with any party other than the parents, caregivers, and intervention team members of that client.
* All Center personnel shall refrain from discussing or disclosing any client information given by clients or their representatives to any third party without consent.
* Any anxieties or evidence of a sensitive nature shall remain confidential and will not be shared within the Center except with the client’s circle of care.

### 5.5.2 Breach of Confidentiality Policy

5.5.2.1In the event security or confidentiality of a client records and/or client information has been breached, the staff member discovering such breach shall immediately file an Incident Report to the Human Resources (HR) department and Quality Compliance & Business Development (QCBD) Manager utilizing an Incident Report Form (HSE004).

5.5.2.2The breach or violation of confidentiality shall be discussed in full detail with the client/clients representative as well as the pertinent staff and appropriate disciplinary action shall be taken, including but not limited to termination.

### 5.5.3 Staff Confidentiality Agreement

5.5.3.1Upon joining the company, all MLC staff are required to sign a Confidentiality Agreement (HR005) to agree and acknowledge that any information (written, verbal or other form) obtained during the performance of their duties must remain strictly private and confidential. This includes information about the company, employees, clients, families and other associate organizations, as well as any other information otherwise marked or known to be confidential. Furthermore, the Confidentiality Agreement outlines that staff must not disclose to any person or make known in any manner, any part of the confidential information and all the confidential information must be stored in a secure place so as to ensure that unauthorized persons do not have access to this information.

## 5.6 Release of Client Records

5.6.1 It is strictly forbidden to provide any client record/information without the explicit consent of the client/clients representative to any other party other than those permitted by law or regulation.

5.6.2 Anyone outside of MLC requesting the receipt, release, or exchange of client records or parts thereof, including but not limited to, the client/clients representative, schools, physicians, hospitals, and/or other therapy treatment centers, must be handled in accordance with the guidelines listed herein.

5.6.3 If the need for release, receipt of exchange of client records and/or client information is required or requested, a written consent and authorization is required prior to the release, receipt of exchange. Such consent and authorization is **only** obtained through the client/clients representative completing and signing a Maharat Information Receipt/Release Form (CR006). The form must be completed and signed before any release, receipt or exchange of information can take place.

5.6.4 Upon receipt of the Maharat Information Receipt/Release Form, one copy shall be placed in the Enrollment Record and one copy shall be provided to the third party to whom the information shall be released.

5.6.5 A client/clients representative has the right to be provided access to their own Enrollment Record at their request. Such requests are to be made in writing using the Maharat Information Receipt/Release Form, signed by the client/client representative. In the case of requests for a copy of the full Enrollment Record, this may require up to 3 days to complete.

5.6.6 Should there be a UAE Court Order warranting the release of the Enrollment Record, such information shall be released to the required party without consent of the client/client representative.

## 5.7 Retention of Client Records

5.7.1 MLC shall comply with and adopt the legislative/regulatory requirements of for Enrollment Records retention which are as follows:

* Enrollment Records shall be retained for a period of a minimum of ten (10) years after the date of last entry into the record for UAE Nationals and for Expatriates.
* For children, records shall be retained for a period of a minimum of ten (10) years after the person has reached the age of eighteen (18) years old.
* Enrollment Records of medico-legal cases shall be retained for a minimum of twenty (20) years and destroyed.
* The Enrollment Records of deceased patients shall be stored for 10 years and destroyed.

## 5.8 Transfer of Client Records

5.8.1 The Center shall always maintain the original Enrollment Record and transfer only a copy of it to others when authorized and consented as per the guidelines detailed herein.

5.8.2 Should a client/clients representative requests to transfer their Enrollment Records to a third party provider, a Maharat Information Receipt/Release Form must be completed and the Center shall provide a copy of the record only as per the guidelines detailed herein.

5.8.3 In case MLC plans to cease operation, all client records under its custody will and shall be maintained for a minimum of two years. During that period, MLC shall inform CDA about its decision and shall either keep the records with a designated custodian or shall transfer custody of the record to the client/clients representative after notification.

## 5.9 Destruction of Client Records

5.9.1 In accordance with the term periods specified in this policy, client records shall only be destroyed when they are in excess of the specified, minimum period of time.

5.9.2 Client Records shall be destroyed or disposed of by shredding, incineration, electronic deletion, or another equally effective protective measure as per the contract with Derby Records Management.

## 5.10 Audit of Enrollment Records

5.10.1 Enrollment Record audits shall be completed on a monthly basis as part of the Centers Quality Improvement Plan (QIP) to ensure completion in a timely, accurate, authenticated and legible manner.

5.10.2 All active Enrollment Records shall be audited on a six-monthly cycle (January to June and July to December), using the Enrollment Record Audit Checklist (QM024).

5.10.3 Enrollment Record audits may be completed by the Center Manager, Enrollment Record Custodians and QCBD. Additionally, the QCBD will periodically audit the audits completed by the Center Manager and Enrollment Record Custodians to ensure thoroughness and accuracy in reporting.

5.10.4 Should a corrective action be identified during the audit, the auditor should note the corrective action required on the Enrollment Record Audit Checklist. It is the responsibility of the auditor to immediately seek to rectify the needed action (where possible) by either:

* Notifying the applicable staff member of the corrective action required to be completed by them, or
* By contacting the applicable client/client representative to seek and request an action to be completed (such as signing a form that was missed during an appointment).

5.10.5 Applicable MLC personnel are responsible to complete corrective actions identified within 10 days of notification. When a corrective action has been completed and the error rectified, it should be noted on the Enrollment Record Audit Checklist by the auditor.

5.10.6 Results of the audit, including corrective actions identified and corrective actions rectified are reported by the Center Manager on a six-monthly basis as part of the QIP.

5.10.7 Results of the audit may be presented at Head of Department (HOD) Meetings, Operations Meetings, Administrative Meetings and Annual Meetings as requested and as applicable, and may be used to develop quality improvement, performance measures and training needs as required.

5.10.8 Should a senior member of the service provision team cease to be employed at MLC, the Enrollment Records of all his/her active client shall be audited at least 7 days before their last day of employment to ensure completeness and to identify and rectify any corrective actions identified before they departs.

5.10.9 Should a client be discharged or choose to terminate services, their Enrollment Records shall be audited at least 7 days before their last day of service to ensure completeness and to identify and rectify any corrective actions identified before the client departs.

# 6. Related Documents / References

|  |  |
| --- | --- |
| CR001 | Enrollment Form |
| CR002 | Informed Consent Form |
| CR006 | Information Receipt/Release Consent Form |
| CR011 | Post Intake Meeting Action Form |
| CR021 | Audio/Visual Consent Form |
| CR022 | Outing Consent Form |
| CR025 | Internal Referral Form |
| CR026 | External Referral Form |
| CR027 | Client Exit Form |
| CR032 | Medication Authorization Form |
| MKT004 | Marketing Photography/Video Consent Form |
| ABA002 | Intake Meeting Notes |
| ABA018 | Supervision Team Timesheet |
| HR005 | Confidentiality Agreement |
| HSE004 | Incident Report Form |
| QM010 | Enrollment Records Sign Out/In Log |
| QM014 | Document Control Policy |
| QM019 | Service Provision Variation Form |
| QM022 | Service Discharge/Exit Form |
| QM023 | Log Book Sigh Out/In Tracer |
| QM024 | Enrollment Record Audit Checklist |

# 7. Amendments

7.1 This policy will be reviewed every two years at a minimum, or as required.

# 8. Attachments

8.1 Attachment A: Flowcharts

8.2 Attachment B: Policy Authorization Page

# Attachment A - Flowcharts

**1. Preparing Client Records for Offsite Storage**

**2. Arranging Collection of Client Records for Offsite Storage**

**3. Retrieval of Offsite Client Records**

# Attachment B - Policy Authorization Page

|  |  |  |  |
| --- | --- | --- | --- |
| **Creation Date: January 2017 Created By: Dr. Hibah Shata, CEO/MD** | | | |
| **Revision Date** | **Edited By** | **Version Number** | **Next Review Date** |
| **January 2017** | **Karen Evans** | **V.1** | **June 2017** |
| **October 2018** | **Karen Evans** | **V.2** | **October 2020** |

**Approval Signatory:**

**Name: Dr. Hibah Shata**

**Designation/Title: Chief Executive Officer / Managing Director**

**Date: 01 October 2018**

**Signature:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Company Stamp:**