



POLICY DIRECTIVE

Policy:	DOC 4.5.58	PRIVACY OF CARE
Effective Date:	04/19/2021	Page 1 of 1
Revision Date(s):	04/24/2026	
Department Director Signature:	/s/ Eric Strauss, Director	
Medical Director Signature:	/s/ Dr. Paul Rees, MD	
Health Services Bureau Chief Signature:	/s/ Cynthia McGillis-Hiner, RN, MSN	

I. POLICY

The Department will ensure that discussion of offender information and clinical encounters are conducted privately.

II. APPLICABILITY

All Department secure facilities.

III. DEFINITIONS (see Glossary)

IV. REQUIREMENTS

A. General Requirements

1. Discussions of protected patient health information and clinical encounters are conducted privately, without being overheard or observed by offenders and non-health staff.
2. Privacy (for example, privacy screen, curtain, private area) should be afforded during physical exams, with special considerations for breast, rectal, pelvic, and external genital exams.
3. At minimum, verbal permission is obtained and consideration of gender-appropriate chaperone is made when a breast, rectal, pelvic, or external genitalia examination is indicated.
4. Ancillary staff including security personnel who are present, when necessary, must also maintain privacy when protected health care information is exchanged either written or verbally, or witnessed.
5. Instruction on maintaining confidentiality is given to security staff and interpreters who observe or hear health encounters.

V. CLOSING

Questions about this policy should be directed to the Health Services Bureau Chief.

VI. REFERENCES

- A. *P-A-07; National Commission on Correctional Health Services in Prisons, 2018*
- B. *MH-A-09; National Commission on Mental Health Services in Correctional Facilities, 2015*
- C. *Y-A-09; National Commission on Health Services in Juvenile Detention and Confinement Facilities, 2015*