

CENTRAL STATE HOSPITAL
POLICY

SUBJECT: RELEASE OF INFORMATION TO NEWS MEDIA AND ATTORNEYS;
AND PUBLICATION OF ARTICLES

ANNUAL REVIEW MONTH: May

RESPONSIBLE FOR REVIEW: Risk Management Director

LAST REVISION DATE: August 2009

I. **GENERAL**

Due to the stringent confidentiality requirements of state and federal laws, it is essential that the release of information be carefully controlled to ensure that the requirements of the laws are met. Therefore, no information concerning clients shall be provided to representatives of the news media except as provided by law. The submission of written materials to any party or parties outside the hospital must be approved by the Chief Executive Officer including professional and technical writings submitted to a publisher, theses, and dissertations based on the hospital which are written for academic credit.

- A. All requests for information from the media will be referred to the Department of Behavioral Health and Developmental Disabilities (DBHDD) Communications Office.
- B. Any CSH employee receiving a request for information from the media shall immediately contact the CSH Communications Director, the CSH Risk Management Director or Chief Executive Officer's office.
- C. Since employees' comments made in their official capacity may be attributed to the hospital, requests for any non-confidential information concerning the hospital will be referred to the CSH Communications Director, the Risk Management Director who will contact the DBHDD Communications Office. Service chiefs, department heads or office directors interested in media coverage of special events will make a request for media coverage to the CSH Communications Director the Risk Management Director.
- D. Members of the media should be escorted by the CSH Communications Director, the CSH Risk Management Director a

representative from the Chief Executive Officer's office while on the CSH campus. If a member of the media is identified on the CSH grounds without one of the above escorts, immediately contact the CSH Risk Management Director or Chief Executive Officer's office.

- E. Any outside group not affiliated with the media that would like to use images or information about Central State Hospital in a publication must first submit a written proposal to the CSH Communications Director, the CSH Risk Management Director or Chief Executive Officer's office. The requests will be reviewed on a case by case basis, and if permission is granted the outside party will sign a commitment form to allow the CSH Communications Director, the CSH Risk Management Director or Chief Executive Officer's office to review the publication prior to release.

II. RELEASE OF INFORMATION TO ATTORNEYS

In cases in which the hospital and/or staff members are involved in litigation, attorneys may request information from or interviews with employees. No information concerning clients may be released except as provided by law and Central State Hospital (CSH) Policy 4.29 - CONFIDENTIALITY. Employees have the right to speak with attorneys on their own time about non-confidential matters when requested. Employees have the right to refuse such interviews unless subpoenaed for a deposition. When a subpoena is received, the Risk Management Director should be contacted immediately and informed of the subpoena. The subpoenaed employee may request the hospital to provide counsel for such deposition. The Risk Management Director shall notify the Law Department through DBHDD Legal Services when any employee is subpoenaed for a deposition, and shall request representation when appropriate.

Employees who are contacted by opposing counsel shall contact the Risk Management Director should they have any questions regarding the pending litigation and/or opposing attorney's request for information/interview.

III. PUBLICATION OF ARTICLES

All written documents will be in full compliance with state and federal laws and CSH Policy #4.29, and other regulations of the hospital. The term publication shall apply to any of the following:

- A. Any document utilizing hospital data or descriptions of hospital services planned for submission to a publisher for publication.
- B. Any article submitted for publication based on the findings of a research project conducted at the hospital. See CSH policy and procedure 7.02/7.02A - RESEARCH.
- C. Any thesis or dissertation based on hospital data written for academic credit or to meet a requirement of an academic program.
- D. Any audio or video material that utilizes hospital data, descriptions of hospital services, or images of the CSH campus planned for use in materials that will be seen by an audience.

IV. **PUBLICATION GUIDELINES**

- A. Documents must be approved by the Chief Executive Officer prior to submission to a publisher or to an academic journal.

The approval process begins by submitting, as early as possible, a copy of the draft to the Risk Management Director, Chief Medical Officer and/or Chief Executive Officer. If necessary, they will assign the publication to a panel for review and recommend any necessary changes to the author(s). After final changes are made the panel will forward the publication to the Chief Medical Officer/Chief Executive Officer for his/her approval or disapproval.

- B. The following are the criteria used to judge a document's acceptability for approval and release:
 - 1. General information and statistics about the hospital shall be accurate.
 - 2. The document must comply with the Human Rights, Confidentiality and other policies of the hospital.
 - 3. Personal opinions are acceptable when they contribute to the purpose of the paper, when it is clear to the reader that they are opinions rather than facts and when they are not scandalous, abusive, or otherwise seem to be personal attacks on individuals.

Approved:

This policy has been approved by the CEO and CMO on 12/09.