# Janice Motoike, Ph.D., P.L.L.C.

# Protocol for the Secure Storage, Transfer, and Access to Client Records

Termination of Practice, Death, Disappearance, or Disability of Provider

### **Notification to Patients:**

If I terminate my practice I will notify current clients (clients seen within the past 60 days) of my contact information in person, by telephone, by letter, or, upon request, by email. Once my practice is terminated, clients may contact the Arizona Psychological Association and/or the Arizona State Board of Psychologist Examiners to request records.

My professional contact telephone number will continue for three to six months, unless circumstances prevent me from doing so. Client records will be maintained in a secure location, in locked storage, with another professional in her/his office, or at my private residence. If my practice termination is the result of death, disappearance, or disability, the professional executor for my practice shall be Tina Marie Rees, MA, LPC. My administrative executor is Pacifico Geronimo, Jr.

The Arizona Psychological Association and/or the Arizona State Board of Psychological Examiners will have my current contact information, for the period of time required by law and by profession to maintain records.

### Access to Medical Records:

Clients may request copies or access to their medical records as indicated in the psychological services agreement, if the time period required to maintain records has not yet expired (see below). Unless I am unable to do so due to physical disability, illness, and/or inability to travel, I will respond within 30 days, or as legally or ethically required.

## **Disposal of Records:**

I will dispose of medical records based on the time period set by current professional and/or legal requirements. Records will be destroyed so that no confidential information can be used. Clients may request to take possession of their original medical records. In doing so, they assume all responsibility and liability for maintaining the security and confidentiality of their records, including protection from theft, damage, or loss.

If I am unable to respond, I will arrange for access to the records to another professional who will respond on my behalf to requests for records in accordance with legal and professional standards.

If my practice is terminated due to death, disappearance, or disability, clients may make arrangements to pick up or otherwise take possessions of their original medical records, if the time period required to maintain records has not yet expired. In doing so, clients assume all responsibility and liability for maintaining the security and confidentiality of their records, including protection from theft, damage, or loss.

**Contact Information**: As of 12/21/2012

My office is located at: 428 S. Gilbert Rd. Ste. 109-M

Gilbert, AZ 85296-2263

(480) 313-3080

My professional executor is:

Tina Marie Rees, MA, LPC (602) 341-8241

331 S. Cooper Rd. Gilbert, AZ 85233

My mailing address is: 1955 W. Baseline Rd. Ste. 113-520

Mesa, AZ 85202-9016