Privacy Procedure





L-05: Request for Alternate Communications

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POLICY: See L-05 Client Request for Alternate Communications at www.cosdcompliance.org.

DEFINITIONS: See HHSA Policy L-30

PROCEDURES:

- A. Individuals must submit written requests for alternate communications using the approved County form (HHSA Form 23-05) or an alternate written request. A request via email or emailing a scanned form shall suffice.
- B. The County shall not require an explanation from the individual as to the reason for the request
- C. The County shall do its best to accommodate reasonable requests, but shall only approve requests from the individual authorized to make such a request (see HHSA Policy L-27).
- D. Some requests (such as those for unencrypted email or text message communication) may require the individual acknowledge in writing that there may be risks associated with the request. The approved County form (HHSA 23-05) includes this language, thus no additional acknowledgement is required if the initial request was made using this form.
- E. Any denials of requests for alternative communication shall be reviewed by the Agency Privacy Officer.

QUESTIONS/INFORMATION: HHSA Privacy Officer at 619-338-2808