

COMMUNITY VOICES CLINIC

Broughal and Donegan Family Centers

Important Clinic Guidelines

- The Community Voices Clinic provides free therapy services to families who cannot otherwise afford or access treatment.
 - The clinic is open 10:00 a.m. to 5:00 p.m. on Tuesdays (Broughal), 11:00 a.m. to 6:00 p.m. on Wednesdays (Broughal), and 9:00 a.m. to 4:00 p.m. on Thursdays (Donegan)
 - The clinic phone numbers are:
 - **Broughal and Donegan:** (610) 866 – 5041, ext. 40817
 - In case of emergency, do not use these numbers as they are not monitored outside of clinic hours. Please dial 9-1-1 or the crisis numbers that will be provided to you at your intake session.
 - If you need to cancel or change an appointment, please call and leave a message as soon as you can so that we may see another client.
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No Show Policy

- If you do not come to your scheduled appointment, you will not receive the treatment you and your family need! We have a list of clients waiting to be seen by the clinic staff, so it is important that our hours are used for providing services. Therefore:
 - Please call to cancel your appointment if necessary, even if it is at the last minute.
 - If you do not show for your appointment, please call the clinic to set up a new appointment.
 - If you do not show for three appointments in a row, we will remove you from our regular schedule and place you on the waiting list unless you contact us to reschedule.

We want to be able to help in any way possible, so please don't hesitate to ask about the clinic's policies.

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Patient's Rights and Responsibilities Statement

Patients' Rights

- Be treated with dignity and respect and acknowledged as an individual with unique health care needs.
- Be treated fairly regardless of race, color, national origin, religion, disability, gender, age, citizenship status, sexual orientation, or gender identify.
- Receive care in a clean and comfortable environment.
- Have cultural, ethnic, psychological, spiritual and personal beliefs, values and preferences, learning needs and language preferences acknowledged and respected.
- Know the name, education and title of the staff serving you.
- Consent to or refuse any care or treatment.
- Receive an understandable explanation of your health condition or status.
- Receive information in your language and free of charge.
- Have your medical and personal information treated confidentially.
- Involve family members and/or significant others in care decisions as you request and as appropriate.
- Be actively involved and make shared decisions in your treatment plan.
- Be encouraged to share questions and concerns.
- Receive services regardless of ability to pay and on a sliding scale basis.

Patients' Responsibilities

- Treat CVC staff with courtesy and respect, and show appreciation for their cultural, ethnic, psychosocial, spiritual and personal values.
- Be honest about your medical, dental, sexual and mental health history.
- Ask questions until you understand what you need to know about your health care.
- Express any concerns about your ability to follow the proposed plan of care.
- Accept the consequences and outcomes if you do not follow the care and treatment plan.
- Report any changes to your mental health provider.
- Provide feedback about your service needs and expectations.
- Respect clinic staff and property and comply with the clinics' rules and regulations.
- Keep appointments or cancel at least 24 hours in advance.
- Accurately represent and report your true financial situation and earnings.

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Your Information. Your Rights. Our Responsibilities.

This Notice of Privacy Practices describes how medical information about you may be used and released and how you can get access to this information. Please read it carefully.

Your Rights

Get a copy of your health records - We will give you a summary of your service records, usually within 30 days of your request. We can charge a fee for the copy of your records.

Correct your health records - You can ask us to correct your service records if you think they are wrong or incomplete. We can say “no” to your request, but we will tell you why in writing within 60 days.

Request confidential communication - You can ask us to contact you in a specific way (like call home instead of your cell phone) or to send mail to a different address. We will consider all reasonable requests and must say “yes” if you tell us you would be in danger if we do not.

Ask us to limit the information we share - You can ask us not to use or share certain health information for treatment or our operations. We are not required to agree to your request, and we may say “no” if it would affect your care. We will never share any substance abuse treatment records without your written permission.

Get a list of those with whom we’ve shared your information - You can ask for a list of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with, and why. We will list all the times we shared your information except for those about treatment and health care operations, and certain other disclosures (such as any you asked us to make). You can get a free list once a year, if you ask for another list within 12 months of the last list, we can charge you a fee.

Get a copy of this privacy notice - You can ask for a paper copy of this notice at any time.

Choose someone to act for you - If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information. We have to make sure the person has this authority and can act for you before we take any action.

File a complaint if you believe your privacy rights have been violated - You can complain if you feel we have violated your rights by contacting calling our Quality Management Program at 610-820-7605. You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/. We will not retaliate against you for filing a complaint.

Your Choices

You have both the right and choice to tell us to share information with your family, close friends, or others involved in your care and share information in a disaster relief situation. If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety. We can never share your information unless you give us written permission for marketing purposes or the sale of your information.

Our Uses and Disclosures

Lehigh University
Counseling Psychology Program

We may use and share your information as we: help manage the treatment you receive, run our organization, administer your treatment plan, help with public health and safety issues, do research, comply with the law, address workers' compensation, law enforcement, and other government requests, respond to lawsuits and legal actions.

CVC Responsibilities

We are required by law to maintain the privacy and security of your protected health information. We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information. We must follow the duties and privacy practices described in this notice and give you a copy of it. We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, on our web site.

HIPAA Privacy Officer: Frank A. Roth, Esq.

Telephone: (610) 758-3572

Fax: (610) 758-3802

Email: far4@lehigh.edu

Address: Lehigh University, Alumni Memorial Building Room 105, Bethlehem, PA 18015-3092