

**Orientation Information** 

# Welcome to Catholic Human Services!

Our mission is to enhance the lives of those we serve by provided hope-filled social, emotional, and spiritual support for all people living in our 21-county service area in northern Michigan. We are dedicated to providing you with quality treatment.

We offer a wide range of services to meet your needs, including:

- Individual, group, family and marital counseling
- Group and individual counseling for substance abuse and cooccurring disorders
- Peer Recovery Coaches
- Care Coordination Services

- Substance abuse prevention
- Employee Assistance Program
- Open adoption services
- Pregnancy counseling
- Older adult resources
- Senior volunteer programs
- Auricular (Ear) Acupuncture

If you need a service we do not provide, we will refer you to someone who does.

#### What You Can Expect From Us

We will treat you with courtesy and respect. You will not be discriminated against based on age, creed, sex, sexual orientation, gender identity, gender expression, marital status, national origin, religious beliefs, or financial status. We will respect your rights and will protect the privacy, confidentiality, and security of your personal information.

Our offices are open Monday through Friday from 8:30 a.m. to 5:00 p.m.; some are closed for the lunch hour from noon until 1:00 p.m. Appointments are made between these hours and by special arrangement. Some appointments and groups are offered in the evening.

Following admission to our services, our staff will conduct an assessment to review your concerns and identify your needs with you. Based upon the results of the assessment, your counselor will work with you to determine an individualized treatment plan based on your strengths, needs, abilities, and preferences to address your concerns.

You may be asked to participate in voluntary surveys so we may get your feedback about satisfaction and outcome results for our research and quality assurance needs. These may be during the course of services or after your completion. If you would like to provide input at any time, you may contact the Clinical Program Supervisor or the *Recipient Rights Advisor* listed on the last page of this document.

Once a person is admitted for services, we do not communicate with clients by Facebook or other social media apps for confidentiality reasons. Text messaging is authorized for use *only* in our DBT (Dialectical Behavioral Therapy) Program and for selected services with your permission. We will communicate with

you in person, by phone, regular mail (paper), or fax. We may send you email messages for teletherapy sessions, surveys, general information, and documents needing your signature.

We do not provide emergency or crisis services through email or texts. Please call 911 for emergencies or call/text the National Crisis Support Line at 988. You may also call our office to talk with an available clinician or after-hours crisis support.

# What We Expect From You

We ask that you show up for all of your scheduled appointments and/or groups on time and ready to participate. To participate in teletherapy sessions, you must have stable access to the internet and an email address to accept the meeting invitation to attend the teletherapy session. Please answer/return all calls you receive from us and contact us immediately if you are unable to connect to a teletherapy session. If you are unable to keep an appointment please call to cancel at least 24 hours in advance. We also ask that you pay for services at the time you receive the services.

If you show up for a session intoxicated we will ask you to leave the building (or teletherapy session). We will also ask you to leave if you threaten violence, have a weapon, illegal drugs, any other drug you are not authorized to be in possession of, or if you act violently toward people or property. Please observe that there is no use of tobacco or vaping products in any CHS office. Use of tobacco/vaping is allowed in designated areas outside the office building.

## **Know Your Rights**

We believe as someone receiving services from our program, you should know your rights.

#### You have the right to expect that Catholic Human Services staff members will not:

- Abuse or neglect you.
- Give out information about you without your permission.
- Require you to be part of any research if you don't want to.
- Place restrictions on you. We do not use any form of seclusion or restraint.

#### You have a right to know:

- $\circ$   $\,$  How much our services cost, and how much you must pay.
- When violation of program rules could lead to discharge.
- All about any drugs that are used in your treatment.
- If you, or information about you, will be used in any research or experiments.

#### You have the right to:

- All civil rights guaranteed by state and federal law.
- Suggest changes in our services.
- Express concerns or complaints, and expect us to look into them promptly.
- $\circ$  Refuse our services and be told what will happen if you do.
- Talk to your own doctor or lawyer.

Any requests you wish to make about these rights, or if you want more information on how to exercise these rights, ask to speak to the *Rights Advisor* or Clinical Supervisor.

# **Code of Ethics and Conduct**

We adhere to our own Code of Conduct and the professional Codes of Ethics for NASW (National Association of Social Workers), ACA (American Counseling Association), and NAADAC (National Association of Alcoholism and Drug Abuse Counselors). This means there are values, principles, and standards to guide the conduct of our staff in the following areas:

Commitment to clients
Clients who lack decision-making

capacity

- Privacy & confidentiality
- Cultural competence and social diversity
- Interruption of services
- Sexual harassment
- Self-determination
- Access to records

- o Payment of services
- o Informed consent
- $\circ$  Competence
- Conflicts of interest
- o Sexual relationships
- Physical contact
- o Derogatory language

If you have questions about our code of ethics please ask a staff member for clarification. If you feel at any time a violation of any standard has occurred you may report it to your *Recipient Rights Advisor or the Clinical Supervisor*.

## Your Responsibilities

- You are responsible for payment of your bill.
- You are responsible for knowing if your insurance company will pay for part or all of your bill.
- You are responsible for providing clear and accurate information about yourself.
- You are responsible for following the rules of your program.
- You are responsible for being considerate of the rights of staff or others who are recipients of services.
- You are responsible for being considerate of the rights of others who are recipients of services or are staff.

### **Payment for Services**

Fees for services are based on your current household income. To determine what you will be responsible to pay, all that we need is proof of income and a copy of your insurance card, if applicable.

We accept Blue Cross/Blue Shield, Medicaid, and other insurances. Federal and State grants, United Way, Catholic Services Appeals, and the Center for Substance Abuse Services provide other funding to help pay all or part of the fees for service.

Some services may not be billable to certain insurance companies based on the credentials of the clinician rendering the service. In this case, you will be responsible for the full fee established during the admission process. For returned-checks that do not clear for payment, a \$20.00 fee is charged.

Payment is expected at the time of service. If you are unable to pay, let your counselor know right away. If you have not paid for 2 or more hours of service (2 sessions), future appointments may be cancelled until payment is received.

It is our policy to hold all reports that you may have requested to be sent to the court, your physician, or other agencies or individuals until payment for your services has been received in full.

If you are unable to make it to a scheduled appointment, you are asked to cancel at least 24 hours in advance except in case of an emergency; otherwise you may be charged a fee for missed appointments. Please provide 24 hours' notice of cancellations.

# **Completing the Program**

Successful discharge from the program occurs when you have completed your program goals and have no outstanding account balance. You can speak to your counselor if you are unsure about what your goals are. Unsuccessful discharge may occur if:

- You violate program rules on two or more occasions within 30 days.
- You repeatedly miss scheduled sessions or fail to contact us within 30 days of your last session.
- You fail to make progress toward your identified goals.
- You refuse to make payments for services.
- You refuse to sign a revised fee agreement.

### **Services for Youth**

Catholic Human Services offers outpatient behavioral health and substance abuse services for youth, or "minors" (age 17 or younger). A minor may consent to outpatient substance abuse treatment without parental consent. Consent by parents or guardians is typically encouraged, when appropriate. In Michigan, minors may consent to 12 outpatient behavioral/mental health treatment sessions, or for 4 months without parental consent if they are age 14 or older.

Parental access to the minor child's treatment or other service information may be permitted under special circumstances. You can discuss with a counselor, clinical supervisor or the Rights Advisor for more information on consent for services, parental access to information, and billing for services to minors.

## **Telehealth Services**

CHS has telehealth services available upon request and has implemented HIPAA compliant, secure, encrypted software and connections. The client is responsible to ensure their own privacy during the sessions and wearing earbuds or headphones is encouraged. Although unlikely, there is risk to conducting sessions over the internet and client accepts this risk (from hackers or other internet security breaches). Recording or photographing sessions is prohibited and will result in immediate discharge from our program.

# **Peer Recovery Coaching**

We want all people struggling with substance use concerns to have the opportunity to work with a Peer Recovery Coach if they desire. When a person connects with a Peer Recovery Coach through our agency, the person connects with someone was has lived experience in addiction and has experienced long-term recovery. Peer Recovery Coaches provide understanding, compassion, training, and support to others who are in similar circumstances. As individuals in long-term recovery, Peer Recovery Coaches serve as role models and mentors and connect clients with appropriate community and recovery resources, as needed.

Peer Recovery Coaching at CHS is confidential and between the client and the peer recovery coach who is under the supervision of CHS Clinical Supervisor. Clients may share information with peer recovery coaches that they do not share with a clinician. At CHS all types of staff do his/her best to work together in support of a client's treatment plan. However, there may be times that clients and Peer Coaches engage in communication that is not relayed to the Clinician and it is important to respect the boundaries of each individual's role. Accepting a PRC is voluntary and can be discontinued at any time and will not impact receipt of other clinical services.

In order for a CHS Peer Recovery Coach to disclose information to *external* sources, a specific written form (consent authorization) is available to specify who is to receive information, the scope of the information disclosed, and when the authorization to disclose information expires. There are times when CHS Staff (including Peer Recovery Coaches) are authorized to release information without a written authorization. Please see "Notice of Privacy Practices" in this document for more information.

### **Care Coordination Services**

We are proud to share CHS has been selected to provide a broad array of care coordination services for individuals experiencing addiction to opiates and/or alcohol, typically initiated when someone starts counseling services at CHS and are eligible for Medicaid funding. Our Recovery Care Team can provide client-centered care coordination services across the entire health care system and there are no fees associated with this for those who enroll. Many clients suffering from addiction may benefit from Medication Assisted Treatment and our nurse can provide education and support to help explore this treatment option.

We want to help our clients who have chronic health conditions to better understand their condition and better manage problems with diabetes, asthma, or high blood pressure, for example. Our nurse will help refer clients to resources to help them get healthier based on individualized goals including getting support for losing weight, eating better, and to quit smoking. The nurse can assist with housing applications, food assistance resources, transportation or other concerns that may be a barrier to our client's engagement in counseling. If you are interested in more information about our Recovery Care Team, please talk with your therapist or any CHS staff person to arrange a consultation with our nurse.

#### Transportation to Healthcare Appointments Available as a Medicaid Benefit

For people who are actively enrolled in Medicaid, access to healthcare appointments (including outpatient sessions at CHS) is available by calling Medicaid at 1-888-616-4841 to arrange for a ride to appointments or funding to pay for mileage. Be aware the request must be made at least 48 hours before the planned appointment to qualify for assistance.

#### **Complaints**

If you have a concern or complaint, the best step is to notify a staff person at the front desk, your counselor, or ask to speak to a supervisor. You can also contact the *Rights Advisor*, whose contact information is listed at the end of this document. You can talk to the *Rights Advisor* if you have any type of concern or grievance.

If you believe there has been a violation of your rights, contact the Rights Advisor, who can help you complete the state form and explain the process to address your concerns. All other concerns are documented on the CHS concern/complaint form, and given to the Rights Advisor to follow up. There will be no retaliation, nor will we take action against you or change your services in any way after filing a complaint.

You will get a written answer from the CHS Rights Advisor to your rights complaint within 2 working days. If you are not satisfied with the written answer to your complaint, you have 15 working days to file an appeal to the Regional Rights Consultant. Your Rights Advisor will provide you with appeals forms or you can request one from the Regional or State Rights Coordinators. Within 30 working days the Regional Rights Consultant will give you a written answer to your appeal. If you don't agree with the written answer to your appeal, you can file another appeal to the State Rights Coordinator. You can also make an appeal to the federal Office for Civil Rights.

You will find the names, addresses and phone numbers of the CHS Rights Advisor, the Regional Rights Consultant, State Rights Coordinator, and the federal Office for Civil Rights on the last page of this document.

## HIV/Infectious Diseases

If you think that you might have been exposed to HIV, we want to encourage you to seek counseling and testing. It is possible for people to be infected for years and to look and feel healthy, but not know they are infected.

You may have been exposed to HIV and should be tested if you have:

- Shared needles or syringes or had sex with someone who has shared needles.
- Had unprotected sex.
- Received blood or blood products before 1985, or had sex with someone who has.

Upon intake, you will receive a list of places where you can obtain testing for HIV, TB, Hepatitis, and Sexually Transmitted Diseases. For more information, you can contact:

- Your local American Red Cross.
- The National AIDS Information Hotline: 1-800-342-AIDS. For Spanish-speaking persons, Linea Nacional de SIDA:
- $\circ$  1-800-344-7432. For deaf and hearing-impaired persons,
- TTY/TDD Hotline: 1-800-AIDS-TTY.
- Your doctor or health care provider.
- Your local or state public health department.

## Health and Safety

We are very concerned about the health and safety of everyone at our offices. Staff members receive annual training in emergency procedures, infection control, and evacuation from the buildings. Fire equipment and first aid supplies are available at all offices. Naloxone kits are also available to respond to opiate overdose.

## **Advance Directive**

Making choices is an important part of our lives. Health care choices are very important. Some day you may not be able to communicate what your health care choices are. An **Advance Directive** is a way to describe the choices you want made in the future. An advance directive is used when you are incapacitated and unable to make your own health care choices. For more information about advance directives you can contact your doctor, your local hospital, a legal professional, find more information at www.michigan.gov, or call Michigan Protection and Advocacy Services, Inc. 1-800-288-5923.

The choice to have an advance directive is completely up to you; services provided will not be changed by your choice. An advance directive gives your patient advocate authority to make your decisions only when you have been determined unable to make your own decisions by two doctors, or a doctor and a licensed psychologist. As an outpatient substance abuse treatment provider, CHS never determines when an advance directive should be enacted and all CHS staff are trained to call 911for any medical and psychiatric emergencies a client may experience while receiving care at our agency.

For more information, go to: <u>http://michigan.gov/mdch</u> and type "Advance Directives" in the search box.

## **Fetal Alcohol Spectrum Disorder**

Fetal Alcohol Spectrum Disorder (FASD) is a group of conditions caused by maternal alcohol use during pregnancy and is a medical diagnosis that may benefit from appropriate treatment and services. Any time during pregnancy a woman stops drinking increases the chance the baby will not be affected by alcohol. If you are pregnant and finding it difficult to stop drinking, please be honest with your clinician at CHS to help you with this.

Effects of FASD can include physical, behavioral, or emotional problems. Common indicators of FASD include: small head, height and/or weight for a child's age; behavioral concerns (for example: sleeping/eating problems, learning disabilities, speech and/or language delays, attention problems, and/or impulsiveness); or distinctive facial features (smooth space between nose and lip, short eye openings, and/or thin upper lip). We encourage all caregivers of children who may have experienced prenatal exposure to alcohol to talk about this with your clinician, contact the child's pediatrician, or contact any of these FASD Diagnostic Centers:

Ann Arbor: Michigan Medicine Pediatric Care--734-936-9777 Marquette: UP Health System--906-225-4777 Kalamazoo: Children' Trauma Assessment Center--269-387-7073

#### NOTICE OF PRIVACY PRACTICES

#### THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE READ IT CAREFULLY.

Your records and personal information are protected under federal regulations governing the privacy, confidentiality and security of personal health information (42 CFR, Part 2, and 45 CFR Parts 160 and 164). This means that Catholic Human Services may not say to a person outside of the program that you attend the program or receive services, or release confidential information without authorization. When you sign the "Fee Agreement" form, you are asked to give us permission to provide information for the purposes of billing, utilization review, and payment. Examples of these activities are: providing the date and type of service to your insurance or to Medicaid so we can be paid for the service, or providing other treatment information so that your insurance company or managed care company can evaluate your claim for payment.

You must give us written permission (or "authorization") to disclose your information. We use special forms for that purpose. You have the right to revoke the authorization at any time in writing, unless we have already taken action on it. Catholic Human Services staff (including Peer Recovery Coaches) are authorized to release information without your authorization when:

- The disclosure (giving the information) is allowed by a court order.
- The disclosure is made to medical personnel/emergency responders in a medical/mental health emergency or to qualified personnel for research, audit, or program evaluation.
- The disclose is to prevent imminent risk or threat of harm to the client or others.
- The disclosure is made about a crime committed at the program or against any person who works for the program or about any threat to commit such a crime.
- The disclosure is about suspected abuse or neglect, as required by state law.
- The disclosure is made to individuals outside our agency who have authority to conduct reviews or audits regarding funding, licensing, or accreditation requirements.

We are required by federal and state laws to protect the privacy, security, and confidentiality of your personal information. We are also required to provide you with this notice of our legal duties and privacy policies.

#### You have the following rights about protecting your personal and confidential information:

• Request a restriction on certain uses or disclosures of your personal information. We may not agree to your requested restrictions under certain circumstances.

- Request how and where we contact you about personal health information.
- See and copy your client record unless a clinical supervisor recommends otherwise. If the request is denied you have the right to another independent review of your request.
- Request an amendment (to correct information in your records).
- Request a list (or "accounting") of disclosures we have made.
- Receive a paper copy of this Notice upon request.
- Make complaints about our privacy practices.

Complaints or questions about this notice can be expressed to the CHS Rights Advisor. See page 8 of this document for contact information. You may also speak to a Clinical Supervisor, or another rights advisor listed on the back cover of this booklet.

Catholic Human Services may contact you by phone or regular mail to provide appointment reminders or to change appointments, to give you information about treatment recommendations or treatment alternatives, or to provide information about health-related services or benefits that may be of interest to you.

We are required to follow the laws and duties outlined in this notice. We may revise our privacy practices, change the terms of this notice, and make new notice provisions for all personal information we maintain. We will provide you with updated information verbally or in writing about any changes to this Notice.

Regional Rights Consultant	State Rights Coordinator
Tema Pefok	Jim Hoyt
Northern Michigan Regional Entity 1999 Walden Drive Gaylord, MI 49735	Licensing and Regulatory Affairs Bureau of Health Care Services State Licensing Section PO Box 30664 Lansing, MI 48909
Phone: 231.303.3061 Fax: 989.448.7078	Phone: 517.243.3092
	Consultant Tema Pefok Northern Michigan Regional Entity 1999 Walden Drive Gaylord, MI 49735 Phone: 231.303.3061

#### Crisis Hotline: 1-800-420-7506 or call/text 988 Available 24 hours a day, 7 days a week

#### FEDERAL RIGHTS COMPLAINTS

For complaints or appeals regarding confidentiality of information or discrimination, contact: U.S. Department of Health and Human Services, Office for Civil Rights, Region V, 233 North Michigan Avenue, Suite 240, Chicago, IL 60601. Phone: 312.886.2359.