

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 REVIEW IT CAREFULLY.

Effective Date of this Notice and Policy: April 14, 2003

1. **PURPOSE:** Parent-Child Center, Inc. and its professional staff, employees, and trainees follow the privacy practices described in this Notice. Parent-Child Center, Inc. keeps your mental health information in records that will be maintained and protected in a confidential manner, as required by law. Please note that in order to provide you with the best possible care and treatment all professional staff involved in your treatment and employees involved in the health care operations of the agency may have access to your records.

2. **WHAT ARE TREATMENT and HEALTH CARE OPERATIONS?**

Your treatment includes sharing information among mental health care providers who are involved in your mental health care services. For example, if you are seeing both a physician (psychiatrist) and a psychotherapist, they may share information in the process of coordinating your care. Treatment records may be reviewed as part an on-going process directed toward assuring the quality of Agency operations. Staff members designated by the Quality Improvement Committee may access clinical records periodically to verify that Agency standards are met.

3. **HOW WILL THE PARENT-CHILD CENTER, INC. USE MY PROTECTED HEALTH INFORMATION?**

Your personal record will be retained by Parent-Child Center, Inc. for approximately seven (7) years after your last clinical contact. After that time has elapsed, your practice records will be erased, shredded, burned or otherwise destroyed in a way that protects your privacy. Copies of service records that have been distributed to other entities may continue to exist and managed by their policies. Until the records are destroyed they may be used for the following purposes unless you request restrictions on a specific use or disclosure:

- Appointment reminders and notification when an appointment is cancelled or rescheduled;
- As may be required by law;
- For public health purposes such as reporting of child or elder abuse or neglect; reporting reactions to medications; infectious disease control; notifying authorities of suspected abuse, neglect, or domestic violence (if you agree or as required by law);
- Mental health oversight activities, e.g., Audits, inspections or investigations of administration and management of Parent-Child Center, Inc.;
- Lawsuits and disputes;

- Law enforcement (e.g., in response to a court order or other legal process) to identify or locate an individual being sought by authorities; about victim of a crime under restricted circumstances; about a death that may be the result of criminal conduct; about criminal conduct that occurred in the practice; when emergency circumstances occur relating to a crime;
- To prevent a serious threat to health or safety;
- To carry out mental health services and through transcription and billing services;
- To military command authorities if you are a member of the armed forces or a member of a foreign military authority;
- National security and intelligence activities;
- Protection of the President or other authorized persons for foreign heads of state, or to conduct special investigations.
- *Psychotherapy notes* that are kept separate from the record enjoy special protection and require authorization for release, with certain exceptions.
- *Psychotherapy notes* excludes medication prescription and monitoring, counseling session start and stop times, the modalities and frequencies of supportive housing services furnished, results of clinical tests, and any summary of the following items: diagnosis, functional status, treatment plan, symptoms, prognosis, and progress to date, employment, application, utilization, examination, or analysis of such information within an entity that maintains such information.
- Alcohol and drug abuse information has special privacy protections. Parent-Child Center, Inc. will not disclose any information identifying an individual as being a client or provide any mental health or medical information relating to a client's substance abuse mental health services unless: (i) the client consents in writing; (ii) a court order requires disclosure of the information; (iii) medical personnel need the information to meet a medical emergency; (iv) qualified personnel use the information for the purpose of conducting research, management audits, or program evaluation; or (v) it is necessary to report a crime or a threat to commit a crime or to report abuse or neglect as required by law.

4. YOUR AUTHORIZATION IS REQUIRED FOR OTHER DISCLOSURES. Except as described previously, we will not use or disclose information from your record unless you authorize (permit) in writing to do so. You may revoke your permission, which will be effective only after the date of your written revocation.

5. YOU HAVE RIGHTS REGARDING YOUR PROTECTED HEALTH INFORMATION. You have the following rights regarding your health information, provided that you make a written request to invoke the right on the form provided by Parent-Child Center, Inc.

- ***Right to request restriction.*** You may request limitations on your mental health information we may disclose, but we are not required to agree to your request. If we agree, we will comply with your request unless the information is needed to provide you with emergency mental health services.
- ***Right to confidential communications.*** You may request communications in a certain way or at a certain location, but you must specify how or where you wish to be contacted.
- ***Right to inspect and copy.*** You may have the right to inspect and copy your mental health information regarding decisions about your care; however, psychotherapy notes may not be



inspected and copied. We may charge a fee for copying, mailing, and supplies. Under limited circumstances, your request may be denied; you may request review of the denial by another licensed mental health professional chosen by Parent-Child Center, Inc. The Parent-Child Center, Inc. will comply with the outcome of the review.

- **Right to request clarification of the record.** If you believe that the information we have about you is incorrect or incomplete you may ask to add clarifying information. You may ask for a form for that purpose and the form will require certain specific information. Parent-Child Center, Inc. is not required to accept the information that you propose.
- **Right to accounting of disclosures.** You may request a list of the disclosures of your mental health information that have been made to persons or entities other than for mental health services or health care operations in the last eight (8) years, but not prior to April 14, 2003.
- **Right to a copy of this Notice.** You may request a paper copy of this Notice at any time, even if you have been provided with an electronic copy. You may print out a copy of this notice from any clinical website we provide.

6. REQUIREMENTS REGARDING THIS NOTICE.

Parent-Child Center, Inc. is required to provide you with this Notice that governs our privacy practices. Parent-Child Center, Inc. may change its policies or procedures in regard to privacy practices. If and when changes occur, the changes will be effective for mental health information we have about you as well as any information we receive in the future. Any time you come in to Parent-Child Center, Inc. for an appointment, you may ask for and receive a copy of the Privacy Notice that is in effect at the time.

7. COMPLAINTS.

If you believe your privacy rights have been violated, you may file a complaint with Parent-Child Center, Inc. or with the HHS Office of Civil Rights. You will not be penalized or retaliated against in any way for making a complaint.

Contact: Call Parent-Child Center, Inc. and ask to speak to the person/official responsible for privacy at 561-841-3500.

If you have a complaint; if you have any questions about this notice; if you wish to request restrictions on uses and disclosure for health care, mental health services, or operations; you may obtain any of the forms mentioned to exercise your individual rights described above.

