

## Client Rights and Responsibilities

## Right to a Paper Copy

You have a right to a paper copy of these notices. You may ask us to give you a copy at any time by contacting FamilyForward. You may also download a copy on our website at <a href="mailyforwardmo.org/privacy-policy">familyforwardmo.org/privacy-policy</a>.

FamilyForward firmly believes in the rights of the clientele it serves in its various programs and will act to protect these rights to the fullest possible extent, unless contradicted by governing laws, rules or regulations. The rights of a person served by FamilyForward, or their representative parent or legal guardian include:

- To be treated in a prompt, courteous manner in any contact with staff of FamilyForward and to be treated with respect and dignity as a human being.
- ▶ To have the same legal rights and responsibilities as any other person, unless limited by law.
- To have access to personal records for review, with procedures set forth by FamilyForward in accordance with HIPAA Policies and Procedures.
- ▶ To receive services regardless of gender, race, color, religion, marital status, national origin, disability, age, military or veteran status, sexual orientation, or gender identity, except where limited by law or licensing authority. (Note: FamilyForward does not provide services to minors without the consent of the representative parent or legal guardian unless allowed by law).
- To be free from physical, verbal, mental, and sexual abuse and neglect.
- To receive appropriate humane and high-quality services in a non-coercive manner which protects self-determination.
- To receive these services and supports in the least restrictive environment appropriate for the person's particular needs.
- To actively engage in service planning, as appropriate, and/or fully refuse service(s).
- To have access to the Policies and Procedures of FamilyForward, which pertain to services being received.
- ▶ To have personal records and information maintained confidentially and no information, verbal or written, released unless permission, in writing, is given by the person served, their representative parent or legal guardian, or in the case of a proper subpoena issued by a court of law. Such written permission must be documented in the client's file (in accordance with HIPAA Policies and Procedures).
- ▶ To have treatment, services, supports, rights and personal records, explained in a manner that is easily understood and, in a language or form of communication that can be understood by the person served, representative parent or legal guardian, or some other authorized representative.
- ▶ To access the Grievance Procedure of FamilyForward as a means of expressing or resolving a complaint or appeal at the time a complaint or appeal occurs, including any complaints or appeals related to limitations placed upon rights, complaints of abuse or neglect or any serious concern about services delivery.
- To protection and enhancement of the human, civil and statutory rights afforded by law, licensing, certification, or accrediting authorities.



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- ▶ To provision of positive treatments, supports, and services to person served, guided by the Policies and Procedures of FamilyForward consistent with protection and enhancement of human rights.
- To have any suspicion of abuse or neglect reported, as mandated by law.
- ▶ To refuse any treatment, medication, support or service plan component, if such is considered outside of the norm for treatment, medication, support or service, and to be informed of the possible consequences of such refusal.

As a client receiving services from FamilyForward, you have the following responsibilities:

- 1. To keep scheduled appointments, and provide 24-hour notice if an appointment must be cancelled.
- 2. To be open and honest in communicating relevant information that relates to you and your family as a client receiving our services.
- 3. To respect the rights of those providing and receiving services.
- 4. To participate in services in partnership with FamilyForward staff.

## **Notice of Privacy Practices**

This section is to explain the rules around the privacy of your own medical/health records and our legal duties regarding how to protect the privacy of your medical/health records that we create or receive. Generally, we are required by law to ensure that medical/health information that identifies you is kept private. The terms "medical" and "medical/health" in this section means information about your physical or mental conditions which make you eligible for our services, or which arise while we are serving you. For example, this may include psychological tests, psychiatric assessments, or medical or social assessments. When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you. You have the right to:

- ▶ Get an electronic or paper copy of your medical record. We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.
- Ask us to correct your medical record. You can ask us to correct health information about you that you think is incorrect or incomplete. We may say "no" to your request, but we will tell you why in writing within 60 days.
- Request confidential communications.
- Ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- Ask us to limit what we use or share. We are not required to agree to your request, and we may say "no" if it would affect your care. If you pay for a service, you can ask us not to share information for the purpose of payment or our operations with your health insurer. We will agree unless a law requires us to share that information.
- Get a list of those with whom we have shared health information for six years prior to the date you ask, who we shared it with, and why.
- Get a paper copy of this privacy notice. You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically.
- ▶ 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 will make sure the person has this authority and can act for you before we take any action.



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File a complaint if you feel your rights are violated by following the Grievance Procedure of FamilyForward. You can also 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, SW, Washington, DC 20201, calling 1.877.696.6775, or visiting <a href="https://hipaa/filing-a-complaint/index.html">hhs.gov/hipaa/filing-a-complaint/index.html</a>. We will not retaliate against you for filing a complaint.

We typically use or share your health information in the following ways:

- We can use your health information and share it with other professionals who are treating you.
- We can use and share your health information to run our organization, improve your care, and contact you when necessary.
- We can use and share your health information to bill and get payment or when audited by our funding sources and/or accrediting bodies.
- We can share health information about you when reporting suspected abuse, neglect, or domestic violence or preventing or reducing a serious threat to anyone's health or safety.
- We can use or share your information for health research.
- ▶ We can share information about you if state or federal laws require it, including with the U.S. Department of Health and Human Services if it wants to see that we are complying with federal privacy law.
- We can share health information with a coroner, medical examiner, or funeral director when an individual dies.
- ▶ We can use or share health information about you for workers' compensation claims.
- We can share information for law enforcement purposes or with a law enforcement official and for special government functions such as military, national security, and presidential protective services.
- We can share health information about you in response to a court or administrative order, or in response to a subpoena.

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. Uses or disclosures not covered in this Notice of Privacy Practices will not be made without your written authorization. If you provide us written authorization to use or disclose information, you can change your mind and revoke your authorization at any time, as long as it is in writing. If you revoke your authorization, we will no longer use or disclose the information. However, we will not be able to take back any disclosures that we have made pursuant to your previous authorization. Authorization from you is required for most disclosures of psychotherapy notes.

## **Grievance Procedure**

This procedure provides clientele, families and legal guardians served by FamilyForward, a means for discussion and resolution of matters pertaining to services received by the organization. A grievance is defined as an allegation by a client, representative parent or legal guardian, that certain incidents or events during treatment or support are having a negative impact on clientele, families and legal guardians, or if dissatisfied with services



received and delivered by FamilyForward or any agency or persons contracted with the organization.

Formal grievances are to be submitted in writing to the Privacy Officer within 10 calendar days of such incident involved in the grievance. Such will be presented to the Chief Executive Officer for review and decision. The Privacy Officer and Chief Executive Officer may call a meeting of all persons involved in the grievance. A written response or decision will be presented to the person or persons filing such grievance within 15 calendar days of such grievance.

Requests for an appeal of the decision may be submitted in writing within 10 calendar days of the decision. The complaint will be presented to the Board of Directors for review. A decision from the President of the Board of Directors will be given to said person or persons within 30 calendar days of informing the President of such grievance.

You are entitled to a copy of the full Grievance Policy. One will be provided to you at your request.

If you wish to exercise any of these rights or feel your privacy has been violated, please contact:

Jennifer Vorachack
Privacy Officer
FamilyForward
1167 Corporate Lake Dr
Saint Louis, MO 63132-1716
314.968.2350 ext. 5298
jennifer.vorachack@familyforwardmo.org

and Grievance Procedure, of Family Forward.		
Signature:	Date:	

I have received the Client Rights and Responsibilities, including Notice of Privacy Practices