

Thank you for choosing Woodland Centers, Inc.  
for your mental health and/or substance abuse  
service needs.

We are pleased to be able to serve you,  
and we are interested in your  
feedback.

Periodically, you will be asked to participate  
in a Consumer Satisfaction Survey  
or other performance improvement  
processes.

We hope you will take the opportunity  
to participate and to let us know how we can continue  
to offer high quality services to the communities we serve.

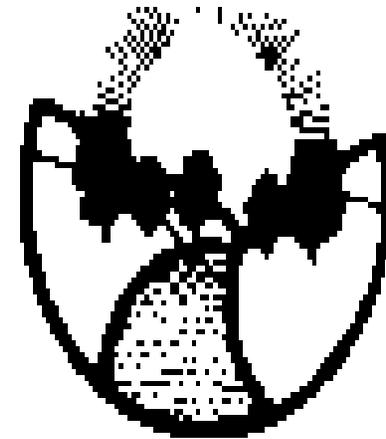
**Thank you!**

Woodland Centers, Inc. is an equal opportunity and affirmative action  
employer. We are funded in part by the Gallia-Jackson-Meigs Board of  
Alcohol, Drug Addiction, and Mental Health Services, and  
the United Way.



# CLIENT HANDBOOK

*Woodland Centers, Inc.*



Rights, Responsibilities, and  
General Information on Alcohol,  
Drug Addiction, and Mental  
Health Services  
2012-2013



WELCOME TO WOODLAND CENTERS, INC.

Woodland Centers, Inc. (WCI) is a private, non-profit community behavioral health center serving Gallia, Jackson, and Meigs counties since 1974. Our mission is to provide comprehensive mental health and substance abuse treatment services to support and promote improvement of the quality of life for residents of our three-county catchment area.

We operate three clinics:

Gallia

3086 St. Rt. 160  
Gallipolis, OH 45631  
740.446.5500

Jackson

500 Burlington Rd. #240  
Jackson, OH 45640  
740.286.5075

Meigs

112 E. Memorial Drive  
Pomeroy, OH 45769  
740.992.2192

We also provide a 24-hour Crisisline and toll-free number at **1.800.252.5554**. If you have questions about any of our services or wish to schedule an appointment, please call our toll-free number. Crisisline also provides crisis intervention, information/referral, and suicide prevention 24 hours a day, seven days a week.

Please read this Handbook carefully. It will help you understand the services we offer and your rights, responsibilities, and benefits as a client of WCI. We look forward to serving you.



**NOTES:**



# IMPORTANT NAMES AND PHONE NUMBERS:

**Therapist:** \_\_\_\_\_

**Psychiatrist:** \_\_\_\_\_

**Nurse:** \_\_\_\_\_

**Case Manager:** \_\_\_\_\_



**Clinic Phone Number:** \_\_\_\_\_

**Toll-Free Number: 1 (800) 252-5554**

**Crisisline: 1 (800) 252-5554**



**Next Appointment:** \_\_\_\_\_

**Information I need to bring with me:** \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



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## ABOUT WOODLAND CENTERS, INC.

### **Mission:**

Woodland Centers, Inc. is a community behavioral health agency that provides comprehensive services to support and promote improvement of the quality of life for the residents of Gallia, Jackson, and Meigs counties.

### **Vision:**

To make a positive difference in the overall behavioral health of the communities we serve by focusing on core programs and services; engaging in thoughtful outreach to our community partners; and managing our resources effectively and efficiently.

### **Strategic Goals:**

- To focus on our core programs and services: individual and group counseling, case management, crisis intervention, crisis stabilization, and med-somatic services.
- To do thoughtful outreach to meet the identified needs of our community partners where it makes sense given our financial and human resources.
- To manage our resources (fiscal, human, facilities) efficiently and effectively to support the goals identified above.

### **Certifications and Accreditation:**

Certified by the Ohio Department of Mental Health since 1974.

Certified by the Ohio Department of Alcohol and Drug Addiction Services since 2008.

Programs accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF) since 2006 for Adults, Children, and Adolescents include Crisis Intervention, Outpatient Treatment, and Case Management/Service Coordination for Mental Health and Substance Abuse. Adults Only: Crisis Stabilization Unit (Mental Health).



**FIRE:** Extinguishers are located throughout the building on the interior walls. If you see a fire, report it immediately to the closest staff member. An alarm will sound or you will hear the page CODE RED. You will leave the building and go to a designated area.

**EXIT:** Exit signs are located above each exit door. The emergency evacuation routes are posted in each hallway. Please take a moment to review the exit route when you are here.

**BOMB:** In the event of a bomb threat, you will hear CODE ORANGE over the paging system. We will evacuate the building in the same manner as if there is a fire drill. Proceed to the designated area and wait for further instructions from staff. Do NOT use cell phones during a Code Orange.

**TORNADO WATCH OR WARNING:** If the area is under a tornado watch, Woodland Centers staff will monitor the weather alerts. If a Tornado Warning is issued for a county, a CODE BLACK will be announced. Please follow the posted signs to the designated shelter in place offices without interior windows. Staff will inform you when conditions are safe to return to your appointment or the waiting room.

**INJURY:** If you are in need of First Aid, notify the nearest staff person. You will hear a CODE BLUE paged if there is a medical emergency. First Aid kits are located in each building; however, for anything other than a very minor injury or illness, staff will call the paramedics.

**THREAT OF VIOLENCE:** If there is a threat of violence in the building, agency staff does not use seclusion or restraint. Law enforcement authorities may be called immediately. Woodland Centers may use emergency interventions until law enforcement authorities arrive.

**CHEMICAL SPILL:** In the event of a chemical spill, you will hear the page CODE GREEN. Please follow the posted signs to the designated shelter in place offices without interior windows. Staff will inform you when conditions are safe to return to your appointment or the waiting room

**If you see any condition that you believe could be hazardous, please notify staff immediately.**



How can I reduce my risk? These recommendations on preventing HCV transmission are from the Federal government's Centers for Disease Control (CDC):

- Do not ever shoot drugs. If you do shoot drugs, stop and get into a treatment program. If you relapse, never reuse or share syringes, water or drug works, and get vaccinated against Hepatitis A and Hepatitis B.
- Do not share toothbrushes, razors, or other personal care articles. They may have blood on them.
- If you are a health care worker, always follow routine barrier precautions (Universal Precautions) and safely handle needles and other sharp objects that may have blood on them. Also, get vaccinated against Hepatitis B.
- Consider health risks if you are thinking about getting a tattoo or body piercing. You can get infected if the tools being used have someone else's blood on them, or the artist does not observe health practices such as hand washing and using disposable gloves.

Where can I get a Hepatitis test? You can get a Hepatitis test from your doctor or local health department.

### FIRE AND SAFETY INFORMATION

**Woodland Centers has procedures in place to protect the health and safety of clients and staff:**

- ⇒ **Woodland Centers maintains a tobacco-free environment in all its buildings and vehicles.**
- ⇒ **There are NO illicit drugs or weapons allowed in the agency's buildings or vehicles.**

**Please take a few minutes to review these procedures. In the event of an emergency, agency staff will also direct you in the procedures to follow.**

**Please let us know if you require any special accommodations if there is an emergency in the building.**

**The agency will hold periodic drills to ensure that our procedures are effective. If a drill occurs, please remain calm and follow staff instructions.**



## SERVICES

**Woodland Centers, Inc. provides both:**

- **General Outpatient Services** consisting of diagnostic assessment, individual/family/group counseling, medication management, and community psychiatric support services.
- **Emergency Services** which includes crisis intervention, pro-hospital screening, Crisisline, and crisis stabilization services.

Services are person-directed and person-centered which means that the client is actively involved in and has a significant role in planning and determining the direction of treatment which takes into account the client's unique strengths, needs, abilities, and preferences. Your own treatment plan may vary in size and complexity based on the type of service provided.

### Frequently Asked Questions:

How can I access services? Services can be accessed by calling the clinic locations or the 1-800-252-5554 Crisisline number. You will be asked several basic questions about your needs, and then schedule an appointment.

What is an intake? An intake is an assessment to get to know you and to assist you in determining your needs and making decisions about the types of treatment and services you need.

Who provides services? Services are provided by caring professionals including board certified psychiatrists, licensed psychologists, counselors, social workers, and other qualified staff.

What is the cost? Fees are determined by taking into consideration income and number of dependents. Health insurance policies may also cover expenses related to services. See page 6 for more information on fees and financial responsibilities.



## FINANCIAL RESPONSIBILITY

**Woodland Centers, Inc. is a non-profit organization. It is the philosophy of Woodland Centers, Inc. that the client's financial investment in his/her treatment process indicates a commitment toward a healthy lifestyle. Payment for services is expected at the time of visit.**

During your intake process, you will be asked to sign a Responsible Party Agreement to Pay form which acknowledges a contractual agreement for payment of services rendered. The information you provide will be used in determining your fees. The private pay fee(s) charged by Woodland Centers, Inc. are based on a sliding scale according to residency, the number of people in your household, and gross household income. My financial responsibility is not waived because I am court ordered.

If you have medical insurance, you must provide complete insurance information; otherwise you may be charged full fees. You are responsible for paying the deductible portion of your insurance coverage and all fees not covered by your insurance.

If you have a Medicaid card, you must provide a valid copy of your card at your initial visit. You are responsible for payment for any services not paid for by Medicaid.

If you have a balance on your account, failure to make monthly payments on your account or failure to abide by an agreed upon payment plan may result in your account being forwarded to a collection agency. You will be given prior written notification of this action at your current mailing address. This action is a last resort and will be utilized only when other options have not been successful.

Questions about payment for services or if you need to make payment arrangements, please contact to your clinician or to staff at the front desk of each clinic.



within 2 weeks of exposure, vaccination, use of protective gloves when cleaning up infected blood with household bleach, practice safe sex, and do not share razors, toothbrushes, or needles.

**Hepatitis C (HCV)** HCV is a virus that causes inflammation of the liver. This infections can lead to cirrhosis and cancer. The incubation period is 2 to 25 weeks (average 7 to 9 weeks). It is spread by contact with infected blood, contaminated needles, razors and tattoo or body-piercing tools, and infants born to an infected mother. HCV is not easily spread through sexual contact.

Symptoms: Same as HBV. Interferon and combination therapies have been used to treat HCV with varying success.

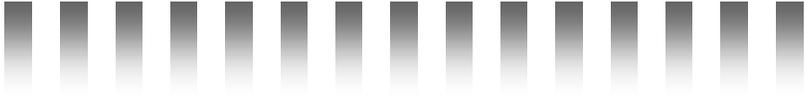
Who is at risk? Individuals are are at risk include those who received a blood transfusion before July 1992, health care workers, injection drug users, hemodialysis patients, infants born to an infected mother, and multiple sex partners.

Prevention: Ways to prevent include use of protective gloves when cleaning up infected blood with household bleach, practice safe sex, and do not share razors, toothbrushes, or needles.

Who should get tested? The sooner HCV is detected, the more quickly treatment can start. Treatment may show the progression of the disease and minimize its harmful effects. Unfortunately, because symptoms may take decades to develop, most people do not know they have HCV until the disease has progressed to a stage where significant, life-threatening liver damage has already occurred.

All of this reinforces the need to early diagnosis. You should definitely be tested for HCV is you answer yes to one or more of the following questions.

- Did you have a blood transfusion before 1992?
- Have you ever had a tattoo or body piercing?
- Have you ever injected drugs into your body?
- Have you have multiple sex partners?
- Does your partner have HCV?
- Is your partner in a high-risk group for HCV?
- Have you or your partner every been treated for a sexually transmitted disease?



## THE ABCs OF HEPATITIS

**Hepatitis A (HAV)** Hepatitis A is a virus that causes inflammation of the liver. It does not lead to chronic disease. The incubation period is 2 to 7 weeks (average 4 weeks). It is transmitted by fecal/oral route, through close person-to-person contact or ingestion of contaminated food and water.

**Symptoms:** In some people, there may not be any symptoms. Others may have light stools, dark urine, fatigue, fever, nausea, vomiting, abdominal pain, and jaundice.

**Vaccine:** Two doses of vaccine to anyone over 2 years of age.

**Who is at risk?** You are at risk if you have household or sexual contact with infected persons or living in an area with HAV outbreak, traveling to developing countries, engaging in anal/oral sex, and using intravenous drugs.

**Prevention:** Ways to prevent include immune globulin within 2 weeks of exposure, vaccination, washing hands with soap and water after going to the toilet, use of household bleach to clean surfaces contaminated with feces, such as changing tables, and practicing safe sex.

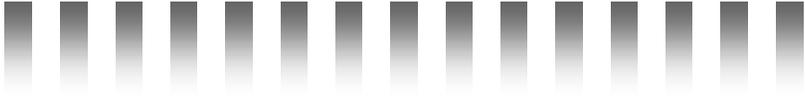
**Hepatitis B (HBV)** HBV is a virus that causes inflammation of the liver. The virus can cause liver cell damage, leading to cirrhosis and cancer. The incubation period is 6 to 23 weeks (average 17 weeks). It is spread by contact with infected blood, seminal fluid, vaginal secretions, contaminated drug needles, including tattoo/body-piercing tools, infected mother to newborn, human bite, and sexual contact.

**Symptoms:** You may not have any. Some persons have mild flu-like symptoms, dark urine, light stools, jaundice, fatigue, and fever. Antiviral medications have been used to treat the chronic disease with varying success.

**Vaccine:** Three doses may be given to persons of any age.

**Who is at risk?** You are at risk if you are having sex with infected persons or multiple partners, using intravenous drugs, engaging in anal/oral sex, hemodialysis patients. Others who are at risk include infants born to an infected mother, emergency responders, and health care workers.

**Prevention:** Ways to prevent include immune globulin



## CLIENT RIGHTS and Grievance Procedure

It is the policy of Woodland Centers, Inc. to protect and enhance the rights of persons served including freedom from abuse, neglect, financial or other exploitation, retaliation and humiliation by establishing specific rights of clients and procedures for responsive and impartial resolution of client grievances. All clients will be apprised of their rights, verbally and in writing, upon admission to the agency. A copy of the Client Rights and Grievance Procedure will be given and explained to the client. A copy will be posted in each facility operated by Woodland Centers, Inc. Additional copies are available from the front desk upon request.

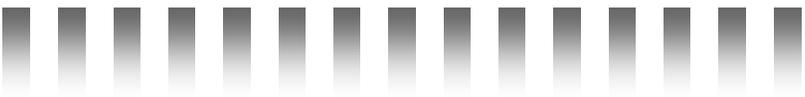
### **ALL CLIENTS OF THE AGENCY HAVE THE FOLLOWING CLIENT RIGHTS.**

1. The right to be treated with consideration and respect for personal dignity, autonomy, and privacy..
2. The right to service in a humane setting which is the least restrictive feasible as defined in the treatment plan.
3. The right to be informed of one's own condition, of proposed or current services, treatment or therapies, and of the alternatives.
4. The right to consent to or refuse any service, treatment, or therapy upon full explanation of the expected consequences of such consent or refusal. A parent or legal guardian may consent to or refuse any service, treatment or therapy on behalf of a minor client.
5. The right to a current, written, individualized service plan that addresses one's own mental health, physical health, social and economic needs, and that specifies the provision of appropriate and adequate services, as available, either directly or by referral.
6. The right to active and informed participation in the establishment, periodic review, and reassessment of the service plan.
7. The right to freedom from unnecessary or excessive medication.
8. The right to freedom from unnecessary restraint or seclusion.
9. The right to participate in any appropriate and available agency service, regardless of refusal of one or more other services, treatments, or therapies, or regardless of relapse from earlier treatment in that or another service, unless there is a valid and specific necessity which precludes and/or requires the client's participation in other services. This necessity shall be explained to the client and written in the client's



service plan.

10. The right to be informed of and refuse any unusual or hazardous treatment procedures.
11. The right to be advised of and refuse observation by techniques such as one-way mirrors, tape recorders, televisions, movies, or photographs.
12. The right to have the opportunity to consult with independent treatment specialists or legal counsel, at one's own expense.
13. The right to confidentiality of communications and of all personally identifying information within the limitations and requirements for disclosure of various funding and/or certifying sources, state or federal statutes, unless release of information is specifically authorized by the client or parent or legal guardian of a minor client or court-appointed guardian of the person of an adult client in accordance with rule 5122:2-3-11 of the Administrative Code.
14. The right to have access to one's own psychiatric, medical or other treatment records, unless access to particular identified items of information is specifically restricted for that individual client for clear treatment reasons in the client's treatment plan. "Clear treatment reasons" shall be understood to mean only severe emotional damage to the client such that dangerous or self-injurious behavior is an imminent risk. The person restricting the information shall explain to the client and other persons authorized by the client the factual information about the individual client that necessitates the restriction. The restriction must be renewed at least annually to retain validity. Any person authorized by the client has unrestricted access to all information. Clients shall be informed in writing of agency policies and procedures for viewing or obtaining copies of personal records.
15. The right to be informed in advance of the reason(s) for discontinuance of service provision, and to be involved in planning for the consequences of that event.
16. The right to receive an explanation of the reasons for denial of service.
17. The right not to be discriminated against in the provision of service on the basis of religion, race, color, creed, sex, national origin, age, lifestyle, physical or mental handicap, developmental disability, or inability to pay.
18. The right to know the cost of services.
19. The right to be fully informed of all rights.
20. The right to exercise any and all rights without reprisal in any form including



that you take all of your medicine!

If you stop taking medication too soon, it is a big problem. The TB germs that are still alive become even stronger. You may need stronger drugs to kill these "super" TB germs. This does not have to happen. If you take all of the medicine, the TB germs will die.

It is very important that you take your preventive treatment as your doctor recommends. It takes at least 6 months to a year to kill all of the TB germs. Remember, you will always have TB germs in your body unless you kill them with the right medicine.

### THE CONNECTION BETWEEN TB AND HIV

People infected with HIV (the virus that causes AIDS) are more likely to get other infections and diseases as well. TB is one of these diseases.

**Why is it important to know if I have TB and HIV infections?** People who have TB disease get TB infection first. A person can have TB infection for years without any signs of the disease. Without treatment, these two infections can work together to shorten the life of the person infected with both.

**Good news!** The good news is that people with TB infection can be prevented from developing TB disease, and people with TB disease can be cured. The first step is to find out if you are infected with the TB germ.

If you think you might have HIV infection, talk to your doctor about getting an HIV test. If you have HIV infection and TB infection, the sooner you start taking anti-TB medicine, the better your chances to stay healthy for many years.

If you have an HIV infection, it is very important to get tested for TB infection at least once a year. Anti-TB drugs are strong; they can prevent or cure TB disease even in people with HIV infection.

TB is one of the few diseases related to HIV infection that is easily prevented and cured with medication.

- Nursing home residents
- Prisoners
- Alcoholics and intravenous drug users
- People with medical conditions such as diabetes, certain types of cancers and being underweight
- Especially people with HIV infection (the virus that causes AIDS)

**What's the difference between TB infection and TB disease?** People with TB disease are sick from germs that are active in their body. They usually have one or more of the symptoms of TB. These people are often capable of giving the infection to others. Permanent body damage and death can result from this disease. Medicines that can cure TB are prescribed for these people.

People with TB infection (without disease) have the germ that causes TB in their body. They are not sick because the germ lies inactive in their body. They cannot spread the germ to others. However, these people may develop TB disease in the future, especially if they are in one of the high-risk groups listed under "Who gets TB?" Medicine is often prescribed for these people to prevent them from developing TB disease.

**How do I know if I have TB infection or TB disease?** A skin test is the only way to tell if you have TB infection. The test is "positive" if a bump about the size of a pencil eraser or bigger appears on your arm. This bump means you probably have TB infection.

Other tests can show if you have TB disease. An x-ray of your chest can tell if there is damage to your lungs from TB. TB germs may be tested deep inside your lungs. Phlegm ("flem") you cough up will be tested in a laboratory to see if the TB germs are in your lungs.

If TB germs are in your lungs or throat, you can give TB infection to your friends and visitors. They can get sick with TB disease. You should be separated from other people until you cannot spread TB germs. This should not take very long if you are taking your prescribed TB medicine.

**Where can I get a TB skin test?** You can get a TB skin test from your doctor or local health department.

**Can TB disease be cured?** Yes. Using special drugs that kill TB germs can cure TB disease. However, TB germs are strong. It takes at least 6–9 months of medication to wipe them all out. It is very important

continued and uncompromised access to service.

21. The right to file a *grievance*.
22. The right to have oral and written instructions for filing a grievance.

**All questions and complaints about Client Rights should be directed to:**  
**Client Rights Officer**  
**Woodland Centers, Inc.**  
**3086 State Route 160, Gallipolis, OH 45631**  
**(740) 446-5500**

## **CLIENT GRIEVANCE PROCEDURE**

Woodland Centers, Inc. gives the Client Rights Officer full support to take all necessary steps to assure compliance with all Client Rights and Grievance Procedures and to assist the client in the preparation and filing of a grievance. The Client Rights Officer is available at the address listed above Monday through Friday from 8:30 am to 5:00 pm.

### **QUICK REFERENCE**

1. Client Reports complaint. If the complaint is reported to a staff person other than the CRO, the staff person shall notify the CRO within one (1) working day of the complaint. If the CRO is not available, or is the subject of the grievance, notification will be given to the Executive Director.
2. Client Rights Officer (CRO) or designee collects information in the Grievance Log for the record. The client will also be informed that they can file a complaint with any of the outside entities listed below.
3. The CRO investigates the complaint and attempts to resolve the grievance within five (5) working days. If the grievance is resolved, a written statement of the results will be given to the grievant.
4. If the complaint is not resolved, the CRO will assist the client in filing a written complaint. The CRO will assist the client to meet with the Executive Director to hear the grievance within five (5) working days. If the grievance is resolved, a written statement of the



results shall be given to the grievant.

5. If the complaint is not resolved, it may be referred to a special committee of the Board or a Board representative. This action may allow an additional five (5) working days for resolution. If resolution is not reached, the client shall be advised in writing of the findings and referred to outside resources.
6. Woodland Centers will observe a time line not to exceed 20 days from the date of filing the written grievance.

**OUTSIDE ENTITIES ARE LISTED BELOW:**

- Gallia, Jackson, Meigs Board of Alcohol, Drug Addiction, and Mental Health Services, 53 Shawnee Lane, Gallipolis, OH 45631. (740) 446-3022
- Ohio Department of Mental Health, 30 East Broad Street, Suite 1180, Columbus, OH 43215. (614) 466-2596
- Ohio Department of Alcohol and Drug Addiction Services, 280 North High Street, Columbus, OH 43215-2550. (614) 752-8842
- Ohio Legal Rights Services, 8 East Long Street, 6th Floor, Columbus, OH 43266-0410. (614) 466-7264
- Attorney General's Office, Medicaid Fraud Control System, 30 East Broad, 17th Floor, Columbus, OH 43266-0410
- Governor's Office of Advocacy for People with Disabilities, 8 East Long Street, Columbus, OH 43266. (614) 466-9956
- US Department of Health & Human Services, Office for Civil Rights, Region V, 300 S. Wacker Drive, Chicago, IL 60606. (312) 886-5078
- Nursing Education and Nurse Registration Board, 65 S. Front Street, Room 509, Columbus, OH 43266. (614) 466-3947
- State Board of Psychology, 65 S. Front Street, Suite 507, Columbus, OH 43266. (614) 466-8088

**Upon request, all relevant information about the grievance may be provided to one or more of these organizations with whom a person has filed a complaint.**



HIV, social and medical health, drug treatment centers, and resources call: 1-800-332-AIDS, or 1-800-AIDS-TTY (for deaf and hearing impaired).

Many public libraries have books on AIDS as well as videos. Local health departments, AIDS Task Forces, and American Red Cross Chapters can provide information as well as pamphlets and booklets on AIDS.

**TUBERCULOSIS FACTS**

**What is TB?** TB is short for a disease called tuberculosis. Tiny germs that can float in the air spread TB. The TB germs may spread into the air if a person with TB disease of the lungs or throat coughs, sneezes, or sneezes. The people nearby can breathe TB germs into their lungs.

TB germs can live in your body without making you sick. This is called TB Infection. Your immune system traps TB germs with special germ fighters. Your germ fighters keep TB germs from making you sick. Sometimes the TB germs can break away, thus causing TB disease. The germs can then attack the lungs or other parts of the body. They can go to the kidneys, the brain, or the spine. In anyone has TB disease, s/he needs medical help. Without help, they risk death.

**What are the symptoms of TB?** Symptoms of TB of the lungs may include cough, chest pain and/or coughing up blood. If you get TB disease in another part of the body the symptoms will be different. Only a doctor can tell if you have the TB disease.

**No one gets TB any more, do they?** Yes! Approximately 8 million new cases occur in the world each year. Over 22,000 cases are reported in the United States each year. There are also an estimated 10–15 million people in the US who are infected with the TB germ who have the potential to develop TB disease in the future.

**Who gets TB?** Anyone can get TB, but some people are at higher risk., including:

- People who share the same breathing space (such as family members, friends, co-workers) with someone who has TB disease.
- Poor people.
- Homeless people.
- Foreign-born people from countries where a lot of people have TB.



## AIDS FACTS

**What is AIDS?** Aids is a disease that kills people. The name AIDS stands for Acquired Immune Deficiency Syndrome. Those four words mean that the body's defense system, which protects us from disease, is not working correctly. Because the defense system is not working correctly, the body is open to a number of illnesses that are normally not a threat to a healthy person.

**What causes AIDS?** AIDS is caused by a type of germ called a virus. This virus is named the Human Immunodeficiency Virus, also known as HIV. Some people refer to HIV as "the AIDS virus." We will use the term HIV to mean the virus which causes AIDS. Most people who have HIV in their bodies are not sick. They might not even know they have HIV. A person can be a "carrier" and pass on HIV to other people without either of them knowing it. Once you have HIV in your body, you will always have the chance of getting AIDS, and HIV will always stay in your body.

HIV enters the body through the blood stream by contact with blood, semen, or vaginal fluids. When someone has HIV, it is found in those three things. Not everyone with HIV has AIDS. Some people may become mildly ill and others show no signs at all, but can still spread the virus to others.

**How do you get HIV?** The good news is there are only a few ways to get HIV, including:

- By having sex with someone who has HIV. The virus is found in semen, blood, and vaginal fluids. It is passed through sex (anal, vaginal, and possibly oral). Use of a latex condom during sex helps to keep HIV from getting in your bloodstream.
- By sharing IV drug needles (works) with someone who has HIV. When needles are shared, blood is shared, too.
- If you are a woman with HIV, you can pass it on to your unborn child.
- By receiving blood, or blood products, from someone with HIV. In early 1985, blood banks began screening for AIDS, so this is mainly a problem for people who received blood before then.

**How can I learn more about AIDS?** Talk to your substance abuse program provider about this fact sheet or if you have more questions that you would like answered. The Ohio Department of Health has a toll free hotline number. For local information or safer sex, testing sites for



## PRIVACY and Protection of Your Personal Information

### **WHAT IS MY PROTECTED HEALTH INFORMATION?**

Anything from the past, present, or future about your mental or physical health or condition that is spoken, written, or electronically recorded, and is created by or given to anyone providing care to you; a health plan; a public health authority; your employer; your insurance company; your school or university; or anyone who processes health information about you.

### **WHAT RIGHTS DO I HAVE ABOUT MY PROTECTED HEALTH INFORMATION?**

You have the right to consent to the use and disclosure of your Protected Health Information for the limited purpose of diagnosing you and administering and paying for your treatment.

You have the right to authorize the sharing of your Protected Health Information for other purposes.

You have the right to see and copy your Protected Health Information. Normally, requests for copies will apply to information within the six months prior to the request, unless otherwise specified. Exceptions to this information are when the information is prepared for certain legal proceedings and when information is maintained by clinical laboratories.

You have the right to request that we amend or correct your Protected Health Information.

You have the right to be informed about and to share your Protected Health Information in a confidential manner chosen by you. The manner you choose must be feasible for us to do.

You have the right to restrict how we use and disclose your Protected Health Information. We do not have to agree with your restrictions, but if we do agree, we must follow your restrictions.

You have the right to obtain a copy of a record of certain disclosures of your Protected Health Information that we make. If you request a copy of the information, we may charge a reasonable fee for the costs of copying, mailing, or other supplies associated with your request.

You have a right to obtain a copy of the Privacy Notice.



We may change the terms of this Privacy Notice from time to time. You can always get a copy of the current Privacy Notice by requesting it from your service provider, the receptionist at the front desk, or the Client Rights Officer. A copy of this Privacy Notice can be viewed on the Woodland Centers, Inc. website at [wci.centersite.org](http://wci.centersite.org).

**CONSENT—What can be done with my information if I consent to disclose it for my diagnosis or to administer and pay for my treatment?**

**Treatment**—With your consent, we can share information about your health with other specialists so that you can receive the most appropriate treatment. For example, your counselor could share with your treating physician that you are depressed. The doctor could then prescribe medication to help you feel better.

**Payment**—With your consent, we can share information about when and for what purpose you were seen, so that we can be paid for treating you. For example, we could send a form to your insurance company stating when and for what condition you were seen. They can then send us payment to help cover your costs of being seen.

**Operations**—With your consent we can share information with other healthcare entities to ensure that you obtain the correct diagnosis. For example, if you require lab tests in order to continue to receive medication, the lab can send us information about your tests so that we can continue to prescribe and/or supply your medication.

**Can I revoke my consent?**

Yes. You can revoke your consent. You must do this in writing and bring it to us so that we can stop using and disclosing your Protected Health Information. We are permitted to use and disclose your Protected Health Information based on your consent until we receive your revocation in writing. However, if you revoke your consent, we reserve the right to provide further treatment to you, on the basis of your refusal to allow us to share your information for the purposes of treatment, payment, and healthcare operations.

**AUTHORIZATION—What can be done with my information if I authorize its disclosure for other purposes?**

With your permission, we can share your Protected Health Information for reasons other than to diagnose you and to administer and pay for your treatment. For example, you might agree to allow us to share your Protected Health Information with a drug company so that it can send you information about a new medication to treat your condition.

**Can I revoke my authorization?**

Yes. Your Protected Health Information can be shared without your prior consent or authorization:

1. In an emergency so long as an effort is made to obtain consent as soon as possible.
2. When required by law according to specific requirements: For public health activities; For health oversight activities; For law enforcement purposes; To a funeral director; For research purposes; For Worker's Compensation; To facilitate specialized government functions; To protect victims of abuse, neglect, or domestic violence; For judicial and administrative proceedings; To a coroner or medical examiner; For organ/tissue donation; To avert serious threats to health or safety; to correctional institutions; and

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- Recognize the limitations of behavioral and medical science.
  - Show respect for other consumers and providers.
  - Keep appointments or call as soon as you know that you must cancel.
  - Meet your financial obligations, along with helping us to decide if you are eligible for subsidy.
  - Follow the law.
  - Use the agency's internal complaint and appeal process to address concerns that may arrive.
  - Report wrongdoing and fraud to appropriate resources or legal authorities.
  - Take responsibility for maximizing healthy habits, such as exercising, not smoking, eating a healthy diet, and managing stress.

**ADVANCE DIRECTIVES**

Many people with a history of mental illness live in fear of what will happen if they lose their ability to make health care decisions. An Advance Directive Durable Power of Attorney for Health Care is a legal document that ensures you a voice in health care decisions when an attending physician determines you do not have the capacity to make informed health care decisions. When you develop an Advance Directive for Health Care, you name an agent (a trusted friend or family member) to act on your behalf. It is a proactive approach to making your own decisions about your care. An Advance Directive for Health Care may address such issues as:

- Choices of medication you may or may not want to take
- Choices of where treatment is provided
- Preferences about types of treatment
- Choices about discharge plans
- Choices about temporary care of children

Your primary provider can help you determine if an Advance Directive is right for you. You can log onto the Ohio Legal Rights website ([www.state.oh.us/olrs/POAHC.htm](http://www.state.oh.us/olrs/POAHC.htm)) to download and complete an Advance Directives form.

**CONSUMER EDUCATION ON AIDS/HIV, TB, and HEPATITIS**

If you are a consumer of substance abuse treatment services at Woodland Centers, this section contains additional information to be shared with you as required by the Ohio Department of Alcohol and Drug Addiction Services.

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11. The right of confidentiality of communications and all personally identifying information within the limitations and requirements for disclosure of client information under state and federal laws and regulations.
  12. The right to have access to one's own client record in accordance with program procedures.
  13. The right to be informed of the reason(s) for terminating participation in a program.
  14. The right to be informed of the reason(s) for denial of a service.
  15. The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, sex, national origin, disability or HIV infection, whether asymptomatic or symptomatic, or AIDS.
  16. The right to know the cost of services.
  17. The right to be informed of all client rights.
  18. The right to exercise one's own rights without reprisal.
  19. The right to file a grievance in accordance with program procedures.
  20. The right to have oral and written instructions concerning the procedure for filing a grievance.

## **CONSUMER RESPONSIBILITIES**

In a system that protects consumer rights, it is reasonable to expect and encourage consumers to assume certain responsibilities. Greater involvement by consumers in their care increases the likelihood of achieving the best outcomes in their ongoing recovery. You are encouraged to:

- Become involved in specific decisions about your care; tell us your problem and what you think might help your situation.
- Tell us about any changes in your life.
- Cooperate with care providers in developing and carrying out agreed upon treatment plans.



When there are substantial communication barriers and it is reasonable to believe that you are giving your consent or authorization.

### **What about other uses of my health information?**

Other uses and disclosures of health information not covered by this notice or the laws that apply to us will be made only with your written permission. If you provide us permission to use or disclose health information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose health information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosure we have already made with your permission, and that we are required to retain our records of the care that we provided to you. Woodland Centers, Inc. is not responsible for the misuse or re-release of your Protected Health Information by another individual or entity.

### **What will Woodland Centers do to protect my health information?**

We will maintain the privacy of your Protected Health Information as required by law. At your request, we will provide you with a copy of our policy on Privacy, Use, and Disclosure of Protected Health Information. We will follow the terms of the Privacy Notice currently in effect.

We reserve the right to change the terms contained in this Privacy Notice, including the right to change these terms retroactively. If we do this, it will affect all Protected Health Information maintained by us. We will notify you that we have changed the Privacy Notice by posting it in our offices, on our website, or by mailing it to you at the address you provide.

### **Who will follow this Privacy Notice?**

Any health care professional authorized to enter information into your medical records at Woodland Centers. All department, units, and clinics of Woodland that you may visit. Any member of a volunteer group that Woodland allows to help you while you are a client here. All employees, staff, and other personnel who may need access to your information. All entities, sites, and locations of Woodland follow the terms of this Notice and may share medical information with each other for treatment, payment, and/or healthcare operations as described in this notice.

### **What can I do if I have questions or want to complain about the use and disclosure of my Protected Health Information?**

All questions and complaints about the use and disclosure of your Protected Health Information can be sent to:

Client Rights Officer  
Or  
Kevan Mock, Privacy Officer  
Woodland Centers, Inc.  
3086 St. Rt. 160  
Gallipolis, OH 45631  
(740) 446-5500



## ALCOHOL and OTHER DRUG (AOD) TREATMENT SERVICES

### CONFIDENTIALITY of AOD RECORDS

For individuals who have received treatment, diagnosis, or referral for treatment from our alcohol or drug abuse programs, the confidentiality of alcohol or drug abuse records are protected by Federal law and regulations. As a general rule, we may not tell a person outside of the programs that you attend any of these programs, or disclose any information identifying you as an alcohol or drug user, unless:

- You authorize the disclosure in writing.
- The disclosure is permitted by a court order; or
- The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit or program evaluation purposes; or
- You threaten to commit a crime either at the alcohol or drug abuse program sites or against any person who works for our alcohol or drug abuse programs.
- You commit a crime either at the alcohol or drug abuse program sites or against any person who works for our alcohol or drug abuse programs.

A violation by us of the Federal law and regulations governing alcohol or drug abuse is a crime. Suspected violations may be reported to the United States Attorney in the district where the violation occurs. Federal law and regulations governing confidentiality of alcohol or drug abuse permit us to report suspected child abuse or neglect under state law to appropriate state or local authorities. Please see 42 U.S.C. 290dd-2 for Federal law and 42 C.F.R. Part 2 for Federal regulations governing confidentiality of alcohol and drug abuse records.

The Ohio Revised Code states that if you are receiving mental health and substance abuse services, you have the same rights as all other people living in the State of Ohio as well as additional rights and protections. It also makes sure you receive the treatment that is suited to your situation. These laws protect your rights while you are being treated. Information about you is kept confidential and private. It is up to you to make sure you know and understand what you are consenting or agreeing to share.

All questions or complaints concerning our privacy policy or the use and disclosure of your Protected Health Information may be sent to:

Privacy Officer Woodland Centers, Inc. 3086 State Route 160 Gallipolis, OH 45631 (740) 446-5500	U.S. Department of Health and Human Services 200 Independence Avenue, S.W. Washington, DC 20201 Toll Free 1-877-696-6775
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### NOTIFICATION OF APPOINTMENTS

Woodland Centers Inc. may contact you to provide appointment reminders. You may contact our Privacy Officer or the Clinic Director to request that you not be notified of appointments.



## AOD CLIENT RIGHTS

1. The right to be treated with consideration and respect for personal dignity, autonomy and privacy.
2. The right to services in the least restrictive, feasible environment.
3. The right to be informed of one's own condition.
4. The right to be informed of available program services.
5. The right to consent or refuse any service, treatment, or therapy.
6. The right to participate in the development, review and revision of one's own individualized treatment plan and receive a copy of it.
7. The right or freedom from unnecessary or excessive medication, unnecessary restraint or seclusion.
8. The right to be informed of and refuse any unusual or hazardous treatment procedures.
9. The right to be advised of and refuse observation by techniques such as one-way mirrors, tape recorders, televisions, movies, or photographs.
10. The right to consult with an independent treatment specialist or legal counsel, at one's own expense.