

Family & Children's Counseling Services Chemical Dependence Program Client Rights and Responsibilities

Welcome

Family & Children's Counseling Services is available to help you. We look forward to our mutual participation and cooperation in the counseling process. Each of us has certain obligations. These obligations are outlined below.

General

Access to our treatment services is free of discrimination by race, religion, sex, ethnicity, sexual orientation, national orientation, age or handicap. The agency recognizes and respects the personal dignity of the client. Your counseling sessions may be observed by or discussed with other clinical staff for the purpose of supervision, staff development, and to guide treatment planning and service provision for your care. Services are planned to meet individual needs.

Visits

When you visit the clinic, please register with the receptionist as soon as you arrive. We ask that you be on time for your appointment. Your counselor will not keep you waiting unless an emergency occurs. Your scheduled counseling session is time that has been especially reserved for you. If you do not come in as scheduled, it deprives others of this time and also increases our cost of providing services. Therefore, we ask for your cooperation in letting us know in advance of any appointment you will be unable to keep. Regular attendance is essential to derive the maximum benefit from your counseling.

Fees and Payment

Your health insurance may pay for counseling sessions you attend. Be sure to let our office know about any health insurance coverage you have. The standard fee is \$140.00 per visit. The fee is based on our actual cost of providing services. For clients without insurance, the per visit charge may be reduced from \$140.00 by a sliding scale schedule which considers a client's income, resources, and number of dependents. The sliding scale fee never exceeds \$140.00 per visit. Payment is due at each visit. No one is expected to pay more than can be afforded. No one is ever denied service because of the inability to pay.

Client Rights

Each person served by our agency has the right to:

- an individually designed plan of services based on individual needs which the client has participated in developing and updating, and which includes goals the client has agreed to work toward;
- a prompt and reasonable response to request for services and information about provider services on site, by referral, and how to access;
- be free of undue influence, coercion or personal involvement or financial transactions with any clinic staff member;
- receive services from a staff which is competent, caring, respectful of client dignity and integrity and of sufficient number to provide services adequately;
- be treated in a manner that recognizes and responds to a client's cultural identify, disability and/or gender or gender orientation;
- know the name, position, and function of his/her primary counselor responsible for his/her care and that of any other staff providing care to him/her and to communicate freely with agency management or medical staff;
- care by staff free from chemical dependence and whose work performance is not impaired;
- obtain current information regarding his/her diagnosis and treatment in terms understandable to the client;
- know the clinic's rules that apply to client conduct, and reasons for discharge in writing;

- receive services in a physical environment that is safe, sanitary, reflective of human dignity, conducive to effective treatment, free from presence of alcohol and/or other addictive substances and which appropriately safeguards the privacy and confidentiality of client/staff interaction;
- treatment that is consistent with the order of a physician after a personal examination, when an order is required;
- examine and receive an explanation of his/her bill, payments and charges and to obtain a receipt regardless of source of payment;
- confidentiality as required by Federal Regulations (42 CFR PART 2);
- participate in the program services voluntarily;
- voice a grievance, file a complaint or recommend a change in procedure and a right to a prompt, reasoned response and/or resolution from clinic management and to complain to the agency Board of Directors and the Office of Alcoholism + Substance Abuse Services (OASAS) without adverse consequences or retaliation;
- a copy of his/her records for a reasonable fee.

COMPLAINTS MAY BE MADE TO:

Agency Executive Director

Lisa Hoeschele
165 Main Street, Suite A
Cortland, NY 13045

OASAS Regional Office

State Office Building
333 E. Washington St.
Syracuse, NY 13202
(315) 428-4113

**If you need emergency assistance
when the agency is closed, please call:**

Cortland Regional Medical Center
(607) 756-3771 or 911

OASAS Client Advocate

(800) 553-5790

OASAS Commissioner

(518) 473-3460

Vulnerable Persons Central Registry

(855) 373-2122

Discharge Planning

As a result of the initial counseling session(s), ongoing counseling may be recommended. If you choose to accept treatment recommendations, as a patient enrolled in an outpatient chemical dependence program, the length of time in treatment is determined by the degree and rate of progress you make throughout the course of your counseling program. Discharge planning shall begin upon admission and shall be closely coordinated with your individual plan of services.

Client Rules

Each person receiving services is required to adhere to the following conduct rules:

- (1) Attend all scheduled appointments and group sessions.
- (2) Cooperate in the development and implementation of an individual treatment plan.
- (3) Refrain from the use of any mood altering substance including non-prescription drugs or alcohol while participating in treatment at Family & Children's Counseling Services.

- (4) Do not eat poppy seeds or food products with poppy seeds in it (i.e., muffins, salad dressing, etc.)
- (5) Behave in a socially acceptable manner while on agency premises.
- (6) All clients will dress appropriate to the season and for participation in treatment setting. Staff have final discretion of appropriate attire.
- (7) No cell phones
- (8) Complete Substance Abuse Testing as requested. This may include observed or non-observed Urine Samples and/or Blood Drawn toxicology testing if ordered by FCCS Medical Personnel.

Client Confidentiality

Federal and State law and regulations protect the confidentiality of alcohol and drug abuse client records maintained by Family & Children's Counseling Services. (See 42 U.S.C. §§ 290ee-3, 290ff-3 for Federal laws and 42 CFR Part 2 for Federal regulations.) The confidentiality of client records maintained by this program also adheres to the Health Insurance Portability and Accountability Act (HIPPA) of 1996 (see 42 U.S.C. § 1320d *et seq.*, 45 C.F.R. Parts 160 + 164). Violation of the Federal law and regulations by a program is a crime. Suspected violations may be reported to the FCS Privacy Officer by filling out a privacy complaint form in the district where the violation occurs. FCCS may not disclose information to any outside person or agency that would identify any individual as a patient unless:

- (1) The client consents in writing; OR
- (2) The disclosure is allowed by a court order; OR
- (3) The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit, or program evaluation; OR
- (4) The client commits or threatens to commit a crime either at the program or against any person who works for the program; OR
- (5) Federal law and regulations do not protect any information about suspected child abuse or neglect from being reported under State law to appropriate State or local authorities.

Under New York State law, HIV related information could only be given to persons allowed to have it by law or allowed to have it by a release that you sign. You can ask for a list of people who can be given confidential HIV related information without a release form. Confidential HIV related information is any information indicating that you had an HIV related test, HIV, HIV related infection, AIDS or any information which could reasonably identify you as a person who has had an HIV test or HIV infection. If you experience discrimination because of the improper release of HIV related information, you may contact the New York State Division of Human Rights at (212) 870-8624 or (315) 428-4633 (Syracuse Office). This agency is responsible for protecting your rights.

Acknowledgement

I have reviewed and understand the policies and procedures of the Family & Children's Counseling Services' Chemical Dependence Clinic. I have been provided a copy of the outpatient rules and regulations, including Client's Rights and a summary of the federal confidentiality requirements. This information has been discussed with me by Family & Children's Counseling Services Staff.