Love is powerful. It's what makes us ViaQuest.
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Introduction

Since 1999, ViaQuest Psychiatric & Behavioral Solutions (VPBS) has served thousands of individuals seeking help and support. Presently, VPBS provides services to individuals struggling with mental health issues, substance abuse, challenging behaviors and individuals with intellectual and developmental disabilities throughout Ohio.

VPBS believes that all individuals have the right to be accepted as unique and valued members of society. The goal of VPBS programming is to provide hope and an environment that supports individuals in achieving their maximum potential.

VPBS is focused on providing tailored care to individuals in a convenient and comfortable setting. We offer unique and individualized care to children, adolescents and adults with psychiatric and behavioral needs. We also offer specialized treatment for individuals with intellectual and developmental disabilities, those suffering from trauma and the aging population.

Our clients are supported by a team of mental health therapists, case managers, nurses, certified nurse practitioners, and psychiatrist to ensure the mental health of the whole individual is addressed.

MISSION

The purpose of ViaQuest is to serve:

> **Individuals** – by providing services that make a difference in their lives.
> **Employees** – by treating them with dignity and respect while providing opportunities for personal and professional growth.
> **Communities** – by doing the right thing.

VISION

ViaQuest will become the company of **CHOICE**.

VALUES

The values of ViaQuest are:

> **Customer Service** – We anticipate the needs of all our internal and external customers and provide solutions at the right time, in the right place and with the right attitude.
> **Humor** – We take our work seriously, but have fun doing it. Laughter heals.
> **Ownership** – Everyone makes a difference. We are proud of the passion we put into what we do.
> **Integrity** – We are genuine and honest about who we are. We do what we say we will do.
> **Creativity** – We are problem solvers. We are always looking for new ways to approach challenges. We provide unique solutions.
> **Excellence** – We will do whatever it takes to provide the highest level of care to the individuals we serve.
Services Overview

VPBS is certified by The Ohio Department of Mental Health and Addiction Services to provide mental health and substance abuse services including Community Psychiatric Supportive Treatment, Crisis Intervention Services, Therapeutic Behavioral Services and Psychosocial Rehabilitation and general services. General services include mental health and substance abuse assessments, counseling, and pharmacological management.

As part of our ongoing commitment to quality healthcare service delivery, VPBS retains the highest level of accreditation awarded by CARF (Commission on Accreditation of Rehabilitation Facilities) and is accredited to provide Outpatient Treatment and Case Management/Service Coordination.

Assessment Purpose/Process
Assessment will be on-going in an effort to determine the necessary services to meet your need. Your active participation in the development of goals and objectives will occur to help address your presenting problems. During the course of treatment, staff will work diligently with you to meet your goals and assist with a seamless transition to indicated services, additional resources and/or successful termination. With your consent and when appropriate, family members or other support persons will be actively involved in the assessment, development of treatment goals, ongoing evaluations of the services received, ongoing treatments, and the quality of care.

Behavioral Health Counseling/ TBS
VPBS can provide Behavioral Health Counseling and TBS services in both individual and group settings. Pharmacologic and Behavioral Health Counseling services can be provided in person or via secure video conferencing depending on the patient’s service location.

Pharmacologic Management
VPBS offers medication management services provided by Certified Nurse Practitioners (CNPs), licensed nurses, and psychiatrist. Our CNPs and psychiatrist are able to conduct psychiatric evaluations to determine medications needs to address symptoms. Clients are able to continue with medication management every 1-3 months based on assessed needs. VPBS nurses and CNPs also provide follow-up care and answers to medication questions that may arise and will always speak with clients about potential benefits and risks about any medication prescribed.

VPBS has aligned the medication management services with the other business lines at ViaQuest which specialize in serving individuals with intellectual and developmental disabilities. At this time we are currently only serving clients with IDD, deaf or hard of hearing and contracted long term care facilities.

If you are attending a psychiatry appointment please make sure you bring a list of all medications.

Pharmacogenetics
Our genetics play a large part in how our bodies react to medication. In fact, our genes can even impact medication dosages that work best, as well as predict what side effects or adverse reactions we could have. Through VPBS’s Pharmacogenetics program, we’re able to use genetics to take the guesswork out of medication management. Pharmacogenetics, is the practice of using an individual’s genetic profile, along with physical and environmental characteristics, to more accurately prevent, diagnose or treat disease, illness, pain or behavior. The pharmacogenetics program is provided to current/ongoing client’s only and can be utilized in medication treatment.

With a simple, noninvasive swab of the mouth, we are able to assess an individual’s metabolism and ability to process medications to determine the best therapeutic approach.
The results allow for a tailored treatment plan to be developed and can increase the likelihood of effective outcomes.

For safer, more accurate prescribing, Pharmacogenetics ensures that patients receive the most effective medication and dosage based on their genetic profile. VPBS’s personalized medicine program as the potential to benefit patients and their loved ones by:

- Improving quality of life, allowing patients to be more alert and engaged
- Providing more opportunities for quality time with loved ones
- Reducing drug interactions and possible side effects
- Eliminating the guesswork in prescribing the best medications and dosages for patients
- Reducing risk of falls, nausea and diminished quality of life due to medication complications
- Reducing hospital readmissions

Deaf and Hard of Hearing Services
VPBS has a specialized deaf and heard of hearing program to better service individuals with mental and behavioral health needs in the deaf community. This team is made up of deaf therapist and case managers as well as hearing therapist and case managers fluent in ASL. Our deaf services team is committed to:

- Providing safe, confidential, and nonjudgmental therapeutic services
- Creating a culturally sensitive therapeutic and Deaf-friendly environment for Deaf clients and their families
- Ensuring effective communication through American Sign Language
- Enhancing lives through empowerment and positive change
- Relying on a Deaf-centered framework of therapy and establishes a practice grounded in a Deaf-centered philosophy. VPBS is conscious of how Deaf people’s lives are shaped by their identities and experiences as members of this cultural and linguistic minority group.

Interpreting Services
VPBS strives to serve numerous populations in need of mental health services and offer services to individuals and their families and are committed to:

- Providing interpreters in Spanish, Chinese and numerous other foreign languages using a phone interpreter.

Pharmacy Services
In partnership with Genoa VPBS has established pharmacy services to better serve its clients. If interested in pharmacy services, please speak with VPBS staff to determine if pharmacy services are offered at your clinic.

Crisis Intervention Services
Crisis intervention services are only provided to current clients receiving one of the above services. Crisis Intervention is a face-to-face interaction responding to an emergent situation that may include the following: crisis assessment, immediate stabilization, and the determination of level of care in the least restrictive environment.

Treatment Risks/ Benefits
VPBS staff will discuss any potential risks and benefits of services with the client. There are some potential risks to treatment. These include experiencing negative feelings and emotions which result from discussing the difficult situations and life experiences that led to you seeking treatment. The potential benefits to treatment can include, but are not limited to, improved functioning in your life and decreasing symptoms that led you to seek treatment.

Confidentiality
VPBS takes the confidentiality of Protected Health Information (PHI) very seriously. To assure full compliance with the Health Insurance Portability and Accountability Act of 1996, the Privacy Rule, ARA, HITECH and Final Omnibus Rule collectively referred to as HIPAA all communications are confidential and can only be released with your consent or
as mandated by federal law. VPBS will not disclose information unless the client (or his or her parent/legal guardian or authorized representative) has properly permitted, consented to, or authorized the release, or the release is otherwise permitted by law. Legal cause to disclose information can include allegations or suspicion of abuse or neglect, threat of harm to self or others, a court order, or ODMHAS reportable situations.

Financial Obligations/Fees

Payment/Insurance
Payment is required at the time of service, including any applicable deductible and/or co-pay that you may have.

VPBS accepts cash, check, major credit cards, Medicaid, Medicare and some forms of commercial insurance. Please check with your clinic staff as to what forms of insurance VPBS currently accepts for the services you are receiving. Individuals are responsible for knowing what services their insurance covers. Clients are required to pay for any co-pays, deductibles and those electing to self pay, prior to their appointment/services. Any lapse in insurance or change in insurance carriers/plans which results in an outstanding balance is an individual’s responsibility and will be due prior to the appointment/service.

Private Pay/Sliding Fee Scale
VPBS has established a sliding fee schedule to assist those with no insurance and limited income, as well as those clients that lose their insurance during active service. This is done to allow our clients to still have access to quality mental health services.

The Ohio Revised Code and Federal Statutes dictate that changes in financial status be reported to VPBS within fifteen (15) business days of such change. Therefore, should your income status change during treatment you must notify VPBS by telephone or in person, and provide written documentation of such change in status.

Individuals that lose their insurance while actively a client of VPBS will automatically be switched to self-pay status with their new rate being established based on the sliding fee scale determined by your household income.

The VPBS Sliding Fee Schedule may change on occasion based on changes to associated government funding and our established usual customary rate for services.

Hours of Operation

Services are delivered Monday through Friday as well as evenings and weekends as arranged. Normal office hours are Monday through Friday 9:00 a.m. to 5:00 p.m., and may vary by Community Mental Health Center.

VPBS also recognizes the following holidays and as a result our Community Mental Health Centers will be closed on:
New Year’s Day
Martin Luther King Day
Good Friday
Memorial Day
Independence Day
Labor Day
Thanksgiving Day
Day after Thanksgiving
Christmas Day

VPBS provides ongoing training to its staff to better serve you. As a result, there may be days throughout the year where our Community Mental Health Centers may be closed because of in-service days. Appointments will not be scheduled on these days and we will post a notice of any anticipated in-service days.
Appointments/
Cancellations/
Treatment Compliance

We require that all clients provide at least a 48-business hour notice when you need to cancel or re-schedule an appointment. If a client has two consecutive no shows they will be discharged from services and sent a discharge letter that will include a list of other places in the community where the client might initiate services.

There are times when critical situations demand our immediate attention because of the nature of our work. At times, these sessions may be re-scheduled due to unforeseen events. If we need to re-schedule your appointment, we will make every effort to notify you as soon as possible.

If you arrive more than 15 minutes after your scheduled appointment time, your appointment may need to be rescheduled.

Orientation

You will be familiarized with the clinic that your appointments are located, including the locations of exits, fire escape routes, fire suppression equipment, tornado safe locations and first-aid kits. In addition, fire safety, severe weather and emergency response plans are posted throughout the clinic for your ongoing reference. In the event that you ever have any questions about fire safety, severe weather, or emergency response please speak with your clinic staff in order for them to assist you.

Program Policies/
Rules

Outcome Measurement

VPBS strongly believes that outcome measurements are useful in determining individuals progress during treatment. Outcome measurements reveal patient progress, treatment efficacy and whether desired outcomes are being met. As a result, you will be asked to complete Pre, Post, and ongoing treatment assessments that will highlight improvements in your well-being that were achieved throughout treatment and also to help alert our clinicians to any signs of relapse or regression.

Satisfaction Surveys

Clients may also be periodically asked to complete satisfaction surveys. The purpose of these surveys is to collect information on the satisfaction of your services to allow us to know how to better serve you. VPBS takes the results of these services seriously and is constantly striving to better serve you. You may see the anonymous results of these surveys posted in our Community Mental Health Center, on our website or on our social media pages. Clients will receive a post-discharge satisfaction survey when they are no longer receiving services at VPBS; it will help in improving services for future clients and making sure that VPBS remains the provider of choice. Thank you for your participation.

Behavior Management

Physical aggression and verbally threatening behavior are not permitted toward any VPBS staff or others in the building. In the event that physical aggression or any threatening behavior occurs, services may be suspended or terminated. Clients may be reassessed by a qualified clinician to determine whether services will be reinstated.

All VPBS staff members are trained in de-escalation and conflict-resolution techniques. When such non-aversive techniques have proven unsuccessful or are
inappropriate, it may be necessary for law enforcement to be contacted in order to maintain the health and safety of all involved.

**Seclusion & Restraint**

VPBS does not use seclusion, mechanical restraint, chemical restraint, or major aversive behavioral interventions. Physical restraint will be used to intervene only in situations of crisis intervention when a client poses a clear threat of personal harm to him/herself or to others or when extensive property damage which may result in injury is imminent. Only trained techniques of passive physical restraint will be utilized by a qualified person.

**Smoking, Alcohol & Drug Use**

VPBS prohibits smoking inside its clinics and/or agency buildings. Smoking outside of agency buildings must be done in designated areas and in conjunction with local ordinances. Use and/or possession of alcohol, and illegal drugs are strictly prohibited on VPBS property.

While VPBS staff are in a client’s home, please refrain from smoking while in session.

**Weapons**

Weapons of any kind are prohibited on VPBS property. Any violation of this policy will result in immediate law enforcement notification and any weapons confiscated will be turned over to local law enforcement agency for disposition. Weapons are to be locked up and put into a safe area when staff are providing services in the home.

**Controlled Substances**

If you are currently taking and/or plan to continue to take medications that include buprenorphine or methadone, you will not be prescribed controlled medications by a practitioner at ViaQuest. These medications require approval and prescription by a medical addiction specialist, which is not a service ViaQuest provides at this time. If you are taking one of these medications your practitioner can work with you to find non-controlled medication treatment options.

If you are currently taking and/or plan to continue to take controlled medications including, but not limited to: opiates (codeine, fentanyl, morphine, tramadol, oxycodone, oxymorphone, hydrocodone, hydromorphone), muscle relaxants (baclofen, carisoprodol, cyclobenzaprine, tizanidine), or sleep medications (zolpidem, suvorexant, eszopiclone, zaleplon), you may not be prescribed additional controlled medications. In general, if any of the above medications are used chronically (3 or more months), you will not be prescribed controlled medications. The decision will be made by VPBS practitioners on a case by case basis.

If you are currently taking controlled psychiatric medications such as benzodiazepines (alprazolam/Xanax, diazepam/Valium, clonazepam/ Klonopin, lorazepam/Ativan, temazepam/ Restoril) or stimulant ADHD medications (methylphenidate/Concerta, dextemethylphenidate/Focalin,amphetamine/ Adderall, lisdexamfetamine/Vyvanse, dextroamphetamine) you may not continue to receive them from ViaQuest. If your practitioner chooses to continue them he/she will need the following before your initial appointment to be able to prescribe said medication:

- Records from the provider previously prescribing that confirm the medication/dose you were receiving
- Confirmation that the prior prescriber is aware of and agreeable to transfer of care
- Confirmation from prior prescriber that the use of the controlled medication was appropriate and there were no abuse or dependence concerns

If controlled medications are prescribed by a VPBS practitioner, you will have to sign the Controlled Medication Agreement. Some of the guidelines are as follows:

- It is necessary to take medication(s) only as directed; failure to do so may result in medical concerns and or emergencies.
- Medication(s) refills require in person or telepsychiatry visits; they will not be refilled over the phone; they will not be refilled prior to when they are due.
Drinking alcohol while taking controlled medication(s) is potentially dangerous. It is possible to become addicted to controlled medications. A controlled medication(s) prescribed by a ViaQuest practitioner can only be refilled by said practitioner or his/her designee. It is necessary to notify your practitioner immediately if you are prescribed any controlled medication(s) from another provider. An OARRS report will be obtained each visit to ensure tracking of controlled medications and prescribers; if it indicates duplicate prescriptions or unsafe medication combinations, the controlled medication(s) may be discontinued. Your practitioner may order a urine drug screen (UDS) at any time throughout treatment

- A UDS positive for anything other than medications prescribed to you may result in discontinuation of the controlled medication(s). If a UDS is positive for illicit substances, the medication(s) may be immediately discontinued.
- A negative UDS for the controlled medication(s) prescribed to you may result in discontinuation of the medication(s).

If medication(s) is lost or stolen, you will have to wait until your next scheduled appointment for a new prescription or go to Urgent Care/ER as needed; your practitioner will not refill it until you are seen and a refill is due.

It is necessary that you attend all scheduled appointments and adhere to the cancellation policy. Two or more missed appointments outside of the cancellation policy may result in discontinuation of the controlled medication(s).

Please also remember:
Your practitioner will be able to inform you which medications are considered controlled vs. non-controlled.
A controlled medication can be stopped at any time if deemed medically appropriate by your practitioner.

The listed medications are representative of potentially problematic medications and are not comprehensive. There may be instances where medications not listed are unsafe to take in combination with controlled psychiatric medications. This will be determined by your practitioner and addressed accordingly.

In the event that controlled medications cannot or are not used, your practitioner will discuss non-controlled medication and treatment options.

The goal of VPBS is optimal treatment of your psychiatric symptoms within the confines of all relevant guidelines and laws and not to prevent barriers to care.

Please note all guidelines are designed to offer you the safest care and not intended to alienate, dissuade or offend you. These guidelines and the agreement will be reviewed with you annually to make sure VPBS practitioners are providing the best care.

### Dispensing & Administering Services

It is VPBS policy to NOT give sample drugs or store any type of medications within the clinic. VPBS qualified staff are able to provide injections that were prescribed during their appointments; client/caregiver will pick up prescription and bring to the office unopened for injection at designated time.

### Legal Disclaimer

Any individual served who violates the law is subject to legal prosecution to the fullest extent of the law.

### Role of Family

VPBS encourages families to take an active role in the treatment and support of their loved ones. With patient permission we highly encourage the participation of family members and significant others.
Role of Individual

Individuals served by VPBS have a duty to themselves to use this structured, supportive environment to work through any challenges they are currently experiencing or might have experienced in the past. Individuals are encouraged to be an active participant in their own treatment. Failure to actively participate in services may result in case closure until the individual is prepared to engage. Safety for yourself and others is a priority. Engaging in unsafe behaviors in the clinic and to staff may result in case termination.

- Clients are expected to participate in their treatment
- Clients are expected not to discuss things with others outside of session to keep confidentiality
- Clients are expected to be honest throughout treatment

Rights of Individuals Served

VPBS believes that everyone has the right to treatment, regardless of race, religion, sex, sexual orientation, ethnicity, legal status, age or disability. VPBS strives to make all reasonable accommodations to the individual’s physical, mental, or behavioral disabilities to the extent required by law, unless these accommodations would impose an undue hardship on the operation of the program or compromise community safety.

EVERYONE ALSO HAS:

- The right to be treated with consideration and respect for personal dignity, autonomy and privacy;
- The right to reasonable protection from physical, sexual or emotional abuse and inhumane treatment;
- The right to be free from financial or other forms of exploitation, retaliation, humiliation and neglect.
The right to be informed of the reason for denial of a service;

The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws;

The right to know the cost of services;

The right to be verbally informed of all client rights, and to receive a written copy upon request;

The right to exercise one’s own rights without reprisal, except that no right extends so far as to supersede health and safety considerations;

The right to file a grievance;

The right to have oral and written instructions concerning the procedure for filing a grievance, and to assistance in filing a grievance if requested;

The right to be informed of one’s own condition; and,

The right to consult with an independent treatment specialist or legal counsel at one’s own expense.

In addition to the notice of your rights above each of our Community Mental Health Centers has the rights of individuals served posted for your convenience.

> Provide free aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)

> Provides free language services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

> If you need these services, contact the front desk or your assigned service delivery person.

VPBS will take reasonable steps to ensure that persons with Limited English Proficiency (LEP) have meaningful access and an equal opportunity to participate in our services, activities, programs and other benefits. When language services are required, they will be provided free of charge and in a timely manner. VPBS will offer oral interpreters or written translators to individuals in need of language assistance and will post a nondiscrimination notice in various locations.

Expectations of Clients

Clients expectations are discussed during their first session to set boundaries and ground rules for visits provided in the client’s home, community, and in the office.

> Refrain from smoking cigarettes, using drugs, or drinking alcohol during the session

> Limit visitors and distractions during every session

> Refrain from using cell phones or having the TV/Radio on during session

> Place pets in safe area prior to staff getting to home

> Client will inform therapist or TBS of any unsafe conditions such as recent violence, bed-bugs or other bug infestations. Therapist or TBS may cancel scheduled appointment until infestation is resolved.
Love is powerful. It’s what makes us ViaQuest.

- Keep firearms secured
- Ensure a clean place for the therapist or TBS to sit during the session
- Ensure all members of the household are dressed appropriately
- Be on time for your appointment
- Provide 48-hours notice when canceling your appointment, if not it will be considered a no-show.
- If there are two no-show appointments in a 90-day period (late cancellation or failure to show for an appointment) then your case will be closed and we will advise you to seek out services at another agency.

Complaint & Conflict Resolution

Throughout the duration that an individual receives services from VPBS; he/she and involved external stakeholders will be provided with any assistance, requested or needed, to express complaints, conflict or dissatisfaction with services provided.

Complaints are permitted to be reported in person, over the phone, faxed, mailed, sent via electronic mail, or hand delivered. The individual filing the complaint may also exercise his/her right to complete the complaint by using the Complaint Form (on next page), calling the Client Advocate contact line at (614) 339-0851 or via the ViaQuest website at the following link: viaquestinc.com/client-complaint/.

Additional complaint forms can also be provided by office staff in each of our Community Mental Health Centers and will be readily available.

A client registering a complaint or a conflict shall be free from any interference, coercion, discrimination, retaliation or barriers to services as a result of the complaint or conflict being reported.

Alleged instances of abuse or neglect shall be reported and investigated in accordance with any relevant established ORC and OAC regulations.

VPBS staff are always willing to listen to you should you have a complaint, conflict, concern, feedback, problem, issue or comment. All complaints are reviewed by our Client Advocate/Quality Assurance Specialist who will assure that each complaint is investigated thoroughly.

You may also file a complaint with:
- Disability Rights Ohio: 1-800-282-9181
- Child Abuse/Neglect: Ask for local Children’s Services Agency contact information
- Ohio Department of Mental Health & Addiction Services: 1-877-275-6364, TTY: 1-888-636-4889
- Adult/Child Protective Services: 1-866-635-3748

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:
- U.S. Department of Health and Human Services
  200 Independence Avenue, SW
  Room 509F, HHH Building
  Washington, D.C. 20201
  1-800-368-1019, 800-537-7697 (TDD)

Reporting Abuse And Neglect

An abusive act is any action which may cause or causes actual physical or emotional harm or injury to a participant, or any act which willfully deprives a participant of his or her rights. Any action which may cause or causes physical or emotional harm or injury which is not accidental in nature constitutes abuse. Actions such as hitting, striking, or kicking, restraining improperly or without authorization, and other such actions, are strictly prohibited. Acts such as teasing, humiliating, degrading, or intentionally ignoring an individual’s needs, while not physical in nature, are no less painful; and they also may constitute emotional abuse.

Neglect is a failure on the part of a caregiver, professional, or staff person to adequately provide for the safety and security needs of the individual being served, and this may be through action or inaction.

All alleged, suspected, or actual major unusual incidents (adults) and critical incidents (children) shall be reported to the appropriate authorities as required by law. All VPBS employees are mandated reporters and must report any of the above as required by law.

Important Contacts

**For Scheduling, Cancellations and Records Requests:**
ViaQuest Psychiatric & Behavioral Solutions of Ohio
525 Metro Place North, Suite 100
Dublin, Ohio 43017
Telephone: (614) 339-1649

**For VPBS Service Complaints**
ViaQuest Psychiatric & Behavioral Solutions
Attention: Gabriellale Bryson
300 North Massillon Road, Suite 200
Akron, OH 44333
Telephone: (614) 339-0851
www.viaquestinc.com/client-complaint

**Disability Rights Concerns:**
Disability Rights Ohio Office 50 W. Broad Street, Suite 1400
Columbus, OH 43215-5923
1-800-282-9181

**Ohio Department of Mental Health and Addiction Services: Toll-free line for Consumers & Families Only:**
1-877-275-6364
TTY: 1-888-636-4889

**Adult/Child Protective Services**
Ohio Department of Job and Family Services, Child Protection:
855.642.4453
https://www.odjfs.state.oh.us/oleg-form/CaseSpecific.asp
Complaint or Conflict Notification Form

Individual Name

Date

Person Assisting with Form (if applicable)

Location of Complaint

Names of Involved Individuals/Witnesses

**Complaint or Conflict:** (What led to issue and description of issue)

 Attach additional page(s) if needed

**Notified:**

**FOLLOW-UP/RESOLUTION** (a copy of this form must be provided to the individual within 5 days of receipt, along with verbal indication of the resolution)

Employee Position/Title

Date
HIPAA Notice of Privacy Practices & Acknowledgment

THIS NOTICE OF PRIVACY PRACTICES (THE “NOTICE”) DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW THIS NOTICE CAREFULLY.

This Notice applies to ViaQuest Psychiatric & Behavioral Solutions. The purpose of this Notice is to describe how ViaQuest Psychiatric & Behavioral Solutions may use and disclose your protected health information (“PHI”) in accordance with the Health Insurance Portability and Accountability Act of 1996 (“HIPAA”), the Health Information Technology for Economic and Clinical Health Act (the “HITECH Act”) and the HIPAA Omnibus Final Rule (the “Final Rule”). This Notice also describes the obligations of ViaQuest Psychiatric & Behavioral Solutions with respect to your protected health information, describes how your protected health information may be used or disclosed to carry out treatment, payment or healthcare operations, and describes your rights to control and access your protected health information. ViaQuest Psychiatric & Behavioral Solutions has agreed to the provisions set forth in this Notice.

We are required to provide this Notice to you pursuant to HIPAA.

The HIPAA Privacy Rule protects only certain medical information known as “protected health information.” Generally, protected health information is health information, including demographic information, collected from you or created or received by a health care provider, a health care clearinghouse, a health plan, or your employer on behalf of a group health plan, from which it is possible to individually identify you and that relates to:

(a) your past, present, or future physical or mental health or condition;
(b) the provision of health care to you; or
(c) the past, present, or future payment for the provision of health care to you.

1. Responsibilities of ViaQuest Psychiatric & Behavioral Solutions
   ViaQuest Psychiatric & Behavioral Solutions is required under HIPAA to maintain the privacy of your protected health information. Protected health information includes all individually identifiable health information transmitted or maintained by ViaQuest Psychiatric & Behavioral Solutions that relates to your past, present or future health, treatment or payment for health care services. ViaQuest Psychiatric & Behavioral Solutions must abide by the terms of this Notice, and must provide you with a copy of this Notice upon request.

2. How ViaQuest Psychiatric & Behavioral Solutions May Use and Disclose Your Protected Health Information.

The following categories describe the different situations in which ViaQuest Psychiatric & Behavioral Solutions is permitted or required to use or disclose your protected health information:

For Treatment. ViaQuest Psychiatric & Behavioral Solutions may use or disclose your protected health information to facilitate medical treatment or services by providers. ViaQuest Psychiatric & Behavioral Solutions may disclose medical information about you to providers, including doctors, nurses, technicians, medical students, or other hospital personnel who are involved in taking care of you.

For Payment Purposes. ViaQuest Psychiatric & Behavioral Solutions has the right to use and disclose your protected health information to facilitate medical treatment or services by providers. ViaQuest Psychiatric & Behavioral Solutions may disclose medical information about you to providers, including doctors, nurses, technicians, medical students, or other hospital personnel who are involved in taking care of you.

For Payment Purposes. ViaQuest Psychiatric & Behavioral Solutions has the right to use and disclose your protected health information to facilitate medical treatment or services by providers. ViaQuest Psychiatric & Behavioral Solutions may disclose medical information about you to providers, including doctors, nurses, technicians, medical students, or other hospital personnel who are involved in taking care of you.

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Health Care Operations. ViaQuest Psychiatric & Behavioral Solutions has the right to use and disclose your protected health information to perform functions necessary for the operation of ViaQuest Psychiatric & Behavioral Solutions. For example, ViaQuest Psychiatric & Behavioral Solutions may combine health care information about many of our patients to decide what additional services we should offer, what services are not needed, and whether certain new treatments are effective. ViaQuest Psychiatric & Behavioral Solutions may also disclose information to doctors, nurses, therapists, technicians, aides, students and other ViaQuest
Psychiatric & Behavioral Solutions personnel for review and learning purposes. ViaQuest Psychiatric & Behavioral Solutions may remove information that identifies you from the health care information so others may use it to study health care and health care delivery without learning the identity of any specific patient.

Appointment Reminders. ViaQuest Psychiatric & Behavioral Solutions may use and disclose health care information to contact you as a reminder that you have an appointment with ViaQuest Psychiatric & Behavioral Solutions.

Treatment Alternatives. ViaQuest Psychiatric & Behavioral Solutions may use and disclose health care information to tell you about or recommend possible treatment options or alternatives that may be of interest to you.

Health-Related Benefits and Services. ViaQuest Psychiatric & Behavioral Solutions may use and disclose health care information to tell you about health-related benefits or services that may be of interest to you.

To the Individual. ViaQuest Psychiatric & Behavioral Solutions may disclose your own protected health information to you.

Individuals Involved in Your Care or Payment for Your Care. ViaQuest Psychiatric & Behavioral Solutions may release health care information about you to a friend or family member who is involved in your health care. ViaQuest Psychiatric & Behavioral Solutions may also give information to someone who helps pay for your care. In addition, we may disclose health care information about you to an entity assisting in a disaster relief effort so that your family can be notified about your condition, status and location. This release requires written or oral consent from you.

Research. Under certain circumstances, ViaQuest Psychiatric & Behavioral Solutions may use and disclose health care information about you for research purposes. For example, a research project may involve comparing the health and recovery of all parties who received one type of treatment to those who received another for the same condition. All research projects, however, are subject to a special approval process. This process evaluates a proposed research project and its use of health care information, trying to balance the research needs with patients’ need for maintaining privacy of their health care information. Before we use or disclose health care information for research, the project will be approved through a research approval process. However, ViaQuest Psychiatric & Behavioral Solutions may, disclose health care information about you to people preparing to conduct a research project, to help them look for patients with specific health care needs, so long as the health care information they review does not leave our control. We will almost always ask for your specific permission if the researcher will have access to your name, address or other information that reveals who you are.

Business Associates. ViaQuest Psychiatric & Behavioral Solutions may contract with certain service providers (“Business Associates”) to perform various functions on behalf of ViaQuest Psychiatric & Behavioral Solutions. To provide these services, the Business Associates may receive, create, maintain, use or disclose protected health information. ViaQuest Psychiatric & Behavioral Solutions and each Business Associate will enter, or have already entered into, an agreement requiring the Business Associate to safeguard your protected health information as required by law and in accordance with the terms of this Notice.

Required by Law. ViaQuest Psychiatric & Behavioral Solutions may use or disclose your protected health information to the extent required by federal, state or local law. For example, ViaQuest Psychiatric & Behavioral Solutions may disclose your protected health information when required by national security laws or public health disclosure laws.

Lawsuits and Disputes. ViaQuest Psychiatric & Behavioral Solutions may disclose your protected health information in response to a court or administrative order. Your protected health information may also be disclosed in response to a subpoena, discovery request or other lawful process if efforts have been made to tell you about the request or to obtain an order protecting your protected health information.

Certain Government Agencies and Officials. ViaQuest Psychiatric & Behavioral Solutions may disclose your protected health information to (i) government agencies involved in oversight of the health care system, (ii) government authorities authorized to receive reports of abuse, neglect or domestic violence, (iii) law enforcement officials for law enforcement purposes, (iv) military command authorities, if you are or were a member of the armed forces, (v) correctional institutions, if you are an inmate or in under the custody of a law enforcement official and (vi) federal officials for intelligence, counterintelligence, and other national security activities.

Public Health and Research Activities; Medical Examiners. ViaQuest Psychiatric & Behavioral Solutions may also disclose your protected health information (i) for public health activities or to prevent a serious threat to health and safety, (ii) to organizations that handle organ donations, if you are an organ donor, (iii) to coroners, medical examiners and funeral directors as necessary, and (iv) to researchers, if certain conditions regarding the privacy of your protected health information have been met.
1. Love is powerful. It’s what makes us ViaQuest.

2. Disclosures to the Secretary of the U.S. Department of Health and Human Services. ViaQuest Psychiatric & Behavioral Solutions may be required to disclose your protected health information to the Secretary of the U.S. Department of Health and Human Services to investigate or determine ViaQuest Psychiatric & Behavioral Solutions’ compliance with the HIPAA Privacy Rules.

3. Your Rights with Respect to Your Protected Health Information.

The following summarizes your rights with respect to your protected health information:

Right to Request a Restriction on Uses and Disclosures of Protected Health Information. You have the right to request a restriction or limitation on the use and disclosure of your protected health information if you believe that the use or disclosure of such information is likely to cause substantial harm to you. The request must be in writing and specify the limitation requested, the effective date (if any), and the information to be limited.

Right to Request Confidential Communications. You have the right to request confidential communications. Confidential communications are communications that are conducted in a manner that is more likely to maintain the privacy of your health information than the method of communication normally used by ViaQuest Psychiatric & Behavioral Solutions.

Right to Inspect and Copy Your Protected Health Information. You have the right to inspect and copy your protected health information. You may also request a copy of your health information in an electronic format, but you may be charged a fee for the cost of providing the copy.

Right to Amend Your Protected Health Information. You have the right to request the amendment of your health information if you believe that it is inaccurate or incomplete. If the correction is denied, you have the right to place a statement in your record indicating that you disagree with the correction.

Right to Receive an Accounting of Disclosures of Your Protected Health Information. You have the right to receive an accounting of disclosures made of your protected health information by ViaQuest Psychiatric & Behavioral Solutions. You may receive an accounting of disclosures made within a specified period (e.g., 12 months). The accounting will include the date of the disclosure, the recipient of the disclosure, and a brief statement of the purpose for the disclosure.

Workers’ Compensation. ViaQuest Psychiatric & Behavioral Solutions may disclose your protected health information to comply with workers’ compensation laws and other similar programs that provide benefits for work-related injuries or illnesses.

Military and Veterans. If you are a member of the armed forces, ViaQuest Psychiatric & Behavioral Solutions may release health care information about you as required by military command authorities. We may also release health care information about foreign military personnel to the appropriate foreign military authority.

Other Uses and Disclosures with Written Authorization. Disclosures and uses of your protected health information that are not described above may be made by ViaQuest Psychiatric & Behavioral Solutions with your written authorization. Even if ViaQuest Psychiatric & Behavioral Solutions is authorized to use or disclose your protected health information, you may revoke that authorization, at any time in writing, except to the extent that ViaQuest Psychiatric & Behavioral Solutions has taken action relying on the authorization.

ViaQuest Psychiatric & Behavioral Solutions will not be able to take back any disclosures of your protected health information that have already been made with your authorization.

4. Your Rights with Respect to Your Protected Health Information.

The following summarizes your rights with respect to your protected health information:

Right to Request a Restriction on Uses and Disclosures of Protected Health Information. You have the right to request a restriction or limitation on the use and disclosure of your protected health information if you believe that the use or disclosure of such information is likely to cause substantial harm to you. The request must be in writing and specify the limitation requested, the effective date (if any), and the information to be limited.

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ViaQuest Psychiatric & Behavioral Solutions will not be able to take back any disclosures of your protected health information that have already been made with your authorization.
Uses and Disclosures that Require Your Authorization. The following uses and disclosures will be made by ViaQuest Psychiatric & Behavioral Solutions only with your authorization:

- Uses and disclosures for marketing purposes, including subsidized treatment communications;
- Uses and disclosures that constitute the sale of PHI;
- If ViaQuest Psychiatric & Behavioral Solutions maintains psychotherapy notes, the use and disclosure of such notes will only be made upon the authorization from you; and
- Other uses and disclosures not described in this Notice.

You may revoke your authorization at any time, so long as the revocation is in writing. Once we receive your written revocation, it will only be effective for future uses and disclosures. It will not be effective for any information that may have been used or disclosed in reliance upon the written authorization and prior to receiving your written revocation.

Right to Opt-Out of Fundraising Communications. If ViaQuest Psychiatric & Behavioral Solutions conducts or engages in fundraising communications, you shall have the right to opt-out of such fundraising communications.

Right to Receive a Paper Copy of this Notice. You have the right to receive a paper copy of this Notice upon request, even if you agreed to receive this Notice electronically. To obtain a paper copy of this Notice, contact the Privacy Officer 525 Metro Place North, Suite 300 Dublin, Ohio 43017 614-339-0851.

Right to Be Notified of a Breach. You have the right to be notified in the event that ViaQuest Psychiatric & Behavioral Solutions (or a Business Associate) commits or discovers a breach of secured protected health information.

To Exercise Your Individual Rights. To exercise any of your rights listed above, you must complete the appropriate form. To obtain the required form, please contact the Privacy Officer at 525 Metro Place North, Suite 300 Dublin, Ohio 43017 614.339.0851.

4. Filing a Privacy Complaint with ViaQuest Psychiatric & Behavioral Solutions or the U.S. Dept. of Health and Human Services.

If you believe that ViaQuest Psychiatric & Behavioral Solutions has violated your HIPAA privacy rights, you may submit a complaint to ViaQuest Psychiatric & Behavioral Solutions or to the Secretary of the U.S. Department of Health and Human Services. Privacy complaints to ViaQuest Psychiatric & Behavioral Solutions should be sent to Privacy Officer, 525 Metro Place North, Suite 300 Dublin, Ohio 43017. Complaints to the Secretary should be sent to the U.S. Department of Health and Human Services, Hubert H. Humphrey Building, 200 Independence Ave. S.W., Washington, D.C. 20201. ViaQuest Psychiatric & Behavioral Solutions will not penalize or retaliate against you for filing a complaint.

5. Changes to this Notice.

ViaQuest Psychiatric & Behavioral Solutions reserves the right to change the provisions of this Notice and to apply the changes to all protected health information received and maintained by ViaQuest Psychiatric & Behavioral Solutions. If ViaQuest Psychiatric & Behavioral Solutions makes a material change to this Notice, a revised version of this Notice will be provided to you within thirty (30) days of the effective date of the change at your address of record.

6. Effective Date.

This Notice becomes effective on 9/23/13.
Acknowledgment by Client or Personal Representative of Receipt of Handbook & Notice of Privacy Practices

I acknowledge receiving or being offered a copy of the Handbook and Notice of Privacy Practices (NPP) given to me by VPBS.

I understand this NPP explains how VPBS is permitted to Use and Disclose my Protected Health Information and that the Handbook outlines applicable policies and expectations of receiving services from VPBS.

I understand I should keep the Handbook and NPP and refer to it if I have questions.

Name of Client (Print)

Print name of Individual’s Personal Representative and Relationship to Individual (If applicable)

Signature by Individual or Individual’s Personal Representative

Date

OFFICE STAFF USE ONLY IF ACKNOWLEDGMENT NOT SIGNED

The following attempt(s) were made to obtain a written Acknowledgment of Receipt:

☐ Handbook and NPP given to Individual, who refused to sign.
☐ Handbook and NPP was mailed to Individual’s home address as stated in records.
☐ Handbook and NPP was mailed to an alternate address, at Individual’s request.
☐ Handbook NPP was faxed or emailed to Individual, at Individual’s request.

Other reason(s) why written acknowledgment not obtained:

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________

____________________________________________________________________________________________________________
Love is powerful. It’s what makes us ViaQuest.

For more information and a list of locations, please visit our website:
www.ViaQuestInc.com

A Full Spectrum of Care:
Home Health  Care Coordination  Hospice
Pharmacogenetics  Behavioral & Mental Health
Developmental Disabilities
Veteran & Diversity Inclusion Services

ViaQuestInc.com
Honored To Serve Veterans
Proud To Be Veteran-Owned

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