



## Client Orientation Handbook

Welcome to View Point Health! We strive to provide the best service to everyone with a Total Care Perspective. We are one of 25 agencies created by the state of Georgia to provide a safety net of care for behavioral health, substance use, and developmental disabilities. **View Point Health provides individual and group counseling, medication management, recovery and crisis stabilization services.**

This booklet is intended to give you important information about View Point Health.

Please keep this booklet handy, and feel free to ask any questions you might have about us and the services we provide. Our website is [MyViewPointHealth.org](http://MyViewPointHealth.org)

### **OUR VISION:**

Building healthy lives and healthy families through high quality comprehensive care

### **OUR MISSION:**

To promote overall health and improve quality of life by ensuring the delivery of effective behavioral and physical health care that meets the needs of communities we serve

## View Point Health Services

<b>Outpatient Services</b>			
 <b>Lawrenceville Center</b> 175 Gwinnett Drive Lawrenceville, GA 30046 Main: 678-209-2411	 <b>Norcross Center</b> 5030 Georgia Belle Court Suite 2036 Norcross, GA 30093 Main: 678-209-2745	 <b>Newton Center</b> 8201 Hazelbrand Road Covington, GA 30014 Main: 678-209-2601	 <b>Rockdale Center</b> 977-A Taylor Street Conyers, GA 30012 Main: 678-209-2655
<b>Intellectual and Developmental Disability Services</b>		<b>Specialty Programs (Children and Adolescents)</b>	
 <b>Independent Enterprises</b> 175 Kirkland Road Covington, GA 30016 Main: 678-209-2555	 <b>The Clubhouse</b> 640 Hillcrest Road Lilburn, GA 30047 Main: 678-209-2550	 <b>STRIVE Clubhouse</b> 1775 Access Rd., Ste A Covington, GA 30014 Main: 678-209-2377	
<b>Specialty Programs (Adult)</b>			
<b>GRAN Recovery Center</b> 215 Kirkland Road Covington, Ga 30016 Main: 678-209-2770	<b>Assertive Community Treatment (ACT)</b> 2799 Lawrenceville Hwy Suite 102 Decatur, GA 30033 Main: 678-209-2530	<b>Assertive Community Treatment (ACT)</b> 175 Gwinnett Drive Suite 360 Lawrenceville, GA 30046 Main: 678-209-2337	<b>Intensive Case Management</b> David O. Crews Center 1020 Lakes Parkway Suite 130 Lawrenceville, GA 30043 Main: 678-209-2526
<b>Beacon Place/Five Points Day Services</b> David O. Crews Center 1020 Lakes Parkway Lawrenceville, GA 30043 Main: 678-209-2484	<b>New Rock Day Services</b> 101 Kirkland Road Covington, GA 30016 Main: 678-209-2575	<b>Supported Employment Program</b> David O. Crews Center 1020 Lakes Parkway Lawrenceville, GA 30043 Main: 678-209-2477	<b>Court Services</b> 175 Gwinnett Drive Lawrenceville, GA 30046 Main: 678-209-2505
<b>Crisis Services</b>			
<b>Adult Crisis Stabilization Unit</b> Lawrenceville, GA 30045 Main: 678-209-2411		<b>Adolescent Crisis Stabilization Unit</b> Decatur, GA 30032 Main: 678-209-2710	
<b>Housing</b>			
<b>MH Residential Services - Main: 678-209-2485</b> <b>IDD Residential Services – Main: 678-209-2555</b>			

## **Hours of Operation:**

Normal office hours are 8:00am to 5:00pm, Monday through Friday. However, some programs are open after hours, so please check with your specific center.

## **After-hours or Crisis Situation?**

- Please contact the Georgia Crisis & Access Line at **1-800-715-4225**
- For Medical Emergencies or police, please dial **911**
- For Poison Control Emergencies, dial 1-800-222-1222

## **Pharmacy Services:**

View Point Health provides pharmacy services through Genoa Healthcare Pharmacy. The Genoa pharmacies are located at our Lawrenceville and Rockdale Centers. Genoa is able to fulfill all of your medication needs on-site to ensure that you are provided with the best possible mental health services around. For any questions about your prescriptions, or to order refills, call Genoa.

- Genoa @ Lawrenceville Center: 678-993-0687
- Genoa @ Rockdale Center: 678-209-2673

## **Genoa Pharmacy: Hours of Operation**

Monday-Friday: 8am - 5pm

Closed during Lunch: 12:00pm - 1:00pm

***\*\*Important to know: View Point Health doesn't give any gap refills, or accept automatic refill requests from pharmacies. If you do not have any refills left that means you need to see the doctor for a prescription.\*\****

## **Physical Healthcare:**

If you have physical health needs, or want to find a local, community based Primary Care doctor, here are some resources.

- **Conyers, Decatur & Stone Mtn:** Oakhurst 678-210-2700 [oakmed.org](http://oakmed.org)
- **Lawrenceville:** Hope Clinic 770-685-1300 [hopeclinicgwinnett.info](http://hopeclinicgwinnett.info)
- **Lawrenceville & Norcross:** Four Corners Primary Care 770-806-2928 [fcphealth.com](http://fcphealth.com)
- **Norcross:** Good Samaritan 678-280-6630 [goodsamgwinnett.org](http://goodsamgwinnett.org)
- **Norcross:** The Bridge Atlanta Medical Center 770-806-0162 [bridgeamc.org](http://bridgeamc.org)

## Client Guidelines & Responsibilities

### Developing Your Plan of Care:

You will first be assessed by an intake clinician who will discuss the reason you are seeking services. A treatment plan to address your needs, including referrals to other services, will be completed. The intake clinician will also help you get set up with your first treatment appointments.

You will receive information regarding our program rules and guidelines once you meet with your clinician. The length of time in our services varies for each individual and program, and we encourage you to remain in treatment as long as is recommended.

You will work with your treatment team to develop a plan that is specific to your unique needs and circumstances. Your participation is crucial to this process.

If your treatment is mandated by an outside agency (like the court or probation), we will send them any reports they request from us.

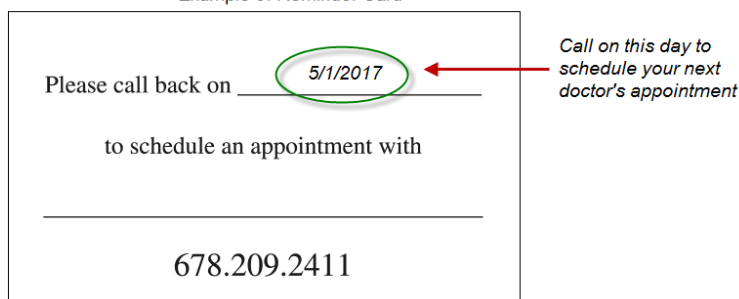
In addition, if you move out of the area, we may connect you to another community mental health center that is closer to you.

Your honest input and feedback are important to us, and helps us provide you with better service. While you are in services, we will ask you to complete client satisfaction surveys. We appreciate your assistance in completing these surveys so we may know how to best help you and other people we serve.

### Scheduling Appointments:

We schedule our doctor appointments a little differently than what you may be used to. At View Point Health, we only schedule doctors' appointments ONE week out. We call this ***Just in Time*** scheduling. It means that when you leave your doctor's appointment, the front desk will give you a reminder card for the day you need to call Centralized Scheduling to make your follow-up appointment. When you call Centralized Scheduling, they will schedule you to see the doctor within one week.

Example of Reminder Card



Please call back on 5/1/2017 to schedule an appointment with \_\_\_\_\_

678.209.2411

*Call on this day to schedule your next doctor's appointment*

To make an appointment call Centralized Scheduling @ **678.209.2411**

## **Attendance:**

The time of your appointment is reserved for you, so it is very important that you arrive for your appointment on time, **or** call 24 hours in advance if you need to reschedule. We have a No Show policy at View Point Health:

- **Therapy appointments:** If you miss 2 consecutive therapy appointments for any reason without giving 24 hours' notice, you will be asked to attend group therapy before being allowed to resume individual therapy sessions.
- **Doctor appointments:** If you miss a doctor's appointment for any reason without giving 24 hours' notice, **no further appointments will be scheduled.** Instead you will be provided with walk-in clinic hours for a med refill with an available doctor.

**\*\*Important to know:** Arrive EARLY for your appointments. Some doctors will not be able to see you if you are late for your appointment. You may be asked to reschedule, **OR** you may choose to sit and wait to see if we can fit you in later that day. So, please, **BE EARLY FOR ALL YOUR APPOINTMENTS!!**

### **Some Frequently Asked Questions**

Q: What if I forget to make a doctor's appointment and I ran out of meds?

**Answer:** Call Centralized Scheduling at 678-209-2411 so they can get you scheduled!

Q: What if I ran out of medications but it's not time yet for me to see the doctor?

**Answer:** You probably have refills so call your Pharmacy for a refill. If you are OUT OF REFILLS that means you need to see the doctor – so call Centralized Scheduling to get an appointment!

Q: What if I missed my doctor appointment? (I forgot, I slept in, I didn't have a ride, my ride didn't show).....

**Answer:** Because you were a "No Show" you won't be allowed to make an appointment. You can walk-in to your doctor office and we'll try to fit you in that day. There is NO guarantee though, and you may have to wait a while so bring a book or your smartphone.

Q: What if something unexpected happened and I had to call to cancel my appointment for that day?

**Answer:** Same day cancelations are still considered a No Show, so you will only be allowed to see a doctor as a walk-in.

Q: It was my first time appointment with the doctor, and I didn't show/missed it. What do I do?

**Answer:** Because the first doctor appointment is a longer one, you cannot walk-in, nor can it be rescheduled. You will need to speak to the Center Director.

## **Phone calls:**

If you are having a medical emergency please call 911. If you need to speak to your clinician or the nurse/doctor please **call 678-209-2411** and ask to speak with someone at your center. All calls will be handled by our office staff. For all medical calls, the nurse will contact you as soon as possible.

***\*\*Important to know: We do not do any phone refills; you must be seen by a doctor if you are out of refills and need a new prescription\*\****

## **Agency Fees:**

Our fees are established by the State of Georgia on a sliding scale based on your family size and household income.

Until proof of income is received, you will be charged 100% and then we can adjust the fee when proof of income is provided. We accept cash, checks, and most credit cards.

We accept Medicare and Medicaid, and some insurance plans – but not all. So it's up to you to call your insurance company to find out if your services are covered "in network". If we are NOT a provider with your insurance, ask them if they will allow you to come here for "Out Of Network" services. This means you will pay us the full cost of the services at your appointment and then file with your insurance company to be repaid.

## **Your Rights:**

*As a client of View Point Health you have the right to ....*

- Consent to or refuse services
- Receive care suited to your needs
- Participate in planning your own individual treatment plan
- Receive treatment regardless of race, ethnic origin, religion, creed, gender, handicap, or sexual orientation
- Receive services that respect your dignity, and are free of physical abuse, verbal abuse, neglect, retaliation and humiliation
- Be informed of the benefits, risks and costs of your treatment
- Receive prompt and confidential services, regardless of ability to pay
- Review and obtain copies of your records, unless the physician or other authorized staff determines it is not in your best interest

*A more detailed version of Client Rights is available; ask for a copy at the front desk*

## **Ethical Standards:**

View Point Health is committed to following high ethical standards in conducting business and providing you with services. Employees of View Point Health are expected to adhere to high moral and ethical standards.

- Your welfare must be the overriding concern of each staff member; your dignity must be respected at all times and upon all occasions.
- Your information will be held in the strictest confidence and will not be released without your permission or as provided by law.
- You will only be billed for services rendered.
- View Point Health staff are prohibited from engaging in business transactions with you for money or exchange of goods or services. Staff are not allowed to borrow from or lend money to you.
- View Point Health staff are prohibited from giving gifts to or receiving gifts from you.
- View Point Health staff are prohibited from dating or engaging in socially or sexually intimate relationships with you.

## **Client Concerns/Complaints:**

If you feel that any of your rights have been violated or denied, please take the following steps:

- Talk with your clinician to discuss your concerns.
- If you cannot reach a solution with your clinician, or if you do not feel comfortable talking with them about your concerns, ask to speak to Center Director or program supervisor.
- If your concern/complaint has still not been resolved, then you may wish to file a formal complaint with the **Client Assistance Program @ 678-209-2382**. A representative will be glad to hear your concerns and assist you with the clients' rights' process.

***Be assured that your complaint will not result in retaliation or barriers to service.***

## **Your Responsibilities:**

*As a client of View Point Health you are responsible for...*

- Actively participating in services and following your treatment plan
- Paying an established fee
- Respecting the rights & privacy of others
- Following all VPH policies on safety
- Being on time for your appointments
- Notifying us 24 hours in advance when you are unable to keep appointments
- Notifying us of any important changes such as finances, address change or new insurance information

## **Confidentiality:**

**We want to gain your trust and protect your privacy!**

Staff, volunteers, or interns will not talk to anyone or send out information about you unless you sign a Release of Information. The Release should be very exact about what, why, and how much information needs to be shared. There are certain times when we will be unable to maintain the confidentiality of your records. **Some examples** are: if there is a medical emergency; if you are in danger of hurting yourself or others; in a criminal investigation; if your records are subpoenaed or court-ordered. Courts may request/receive information about you if you are involuntarily admitted, *without a Release*, unless you are receiving treatment for substance abuse. Furthermore, we are mandated to report any suspected child/adult abuse to Protective Services. (For additional privacy information please see the Notice of Privacy Practices at the end of this packet.)

If you have concerns about issues regarding confidentiality, be sure to talk to your clinician or someone in the **Client Assistance Program @ 678-209-2382**.

## **Safety and Security:**

We want to maintain a safe and secure environment for you. It is everyone's responsibility to follow all agency safety policies and procedures.

If you have a special need or disability, please let us know so that we can provide accommodations and ensure that you are comfortable and are receiving quality care!

Familiarize yourself with Exit Signs in the building. In case of fire, severe weather or disaster, a View Point Health Safety Officer will direct you to a safe location.



#### View Point Health is TOBACCO-FREE

We are committed to protecting the whole health of clients, staff, and visitors. Therefore, we have prohibited the use of tobacco products and electronic cigarettes on all premises. Help us be Tobacco-free!

#### NO WEAPONS or ILLICIT DRUGS POLICY

To protect the safety and health of our clients, staff, and visitors we prohibit the possession of any weapons in treatment areas or illegal substances on all properties of View Point Health. If you bring a weapon beyond treatment areas, or have illegal drugs in your possession you have broken the law and law enforcement will be notified.

#### EXCESSIVE DISRUPTION POLICY

View Point Health will not tolerate any verbally or physically abusive, threatening or disruptive behavior from individuals at any of our facilities. Failure to follow this policy may result in suspension and/or termination from services.

### **SSI Disability Information Requests:**

While applying for Social Security Disability, insurance benefits or FMLA may be necessary for you to access benefits, they are not medically necessary for your treatment. If you have applied for social security benefits under the Social Security Disability Insurance Program or the Supplemental Security Income ("SSI") program, View Point Health will not complete SSI Questionnaires or similar forms about your treatment unless you have (a) been in services with View Point for a minimum of ninety (90) consecutive days and (b) been examined by a View Point medical doctor at least once during that time period. *Even if these conditions are met, View Point health reserves the right not to fill out such documentation.*

### **Transition and Discharge Planning:**

As you begin making progress towards your treatment goals, you will work with your clinician to transition to the least intensive mix of services that you need to ensure your ongoing health and wellbeing. Your clinician will work with you to develop a plan for discharge and will assist you in connecting with community programs that can provide you with ongoing support.

***\*\*Important to know: It is our policy to close client charts that have been inactive for 90 days. That means that if you aren't seen for a service in 90 days, your chart will be closed. You can always come back to services by walking in during Open Access hours to have your chart reopened.***

<b>COMMUNITY RESOURCES</b>	
National Alliance for the Mentally Ill 1-800-950-6264 <a href="http://www.nami.org">www.nami.org</a>	National Mental Health America 1-800-969-6642 <a href="http://www.nmha.org">www.nmha.org</a>
National Clearinghouse for Alcohol/Drug Info 1-800-729-6686 <a href="http://www.health.org">www.health.org</a>	Narcotics Anonymous (national help-line) 1-678-405-0840 <a href="http://www.na.org">www.na.org</a>
Alcoholics Anonymous— 24 hour line 1-404-525-3178 <a href="http://www.aa.org">www.aa.org</a>	Georgia’s Council on Developmental Disabilities 1-404-657-2126 <a href="http://www.gcdd.org">www.gcdd.org</a>
National Down Syndrome Society (NDSS) 1-800-221-4602 <a href="http://www.ndss.org">www.ndss.org</a>	
Additional resources and community activities can also be found on View Point Health’s website at <a href="http://www.myviewpointhealth.org">www.myviewpointhealth.org</a> Your clinician will assist with referrals to other agencies to address your individual needs.	

Notes:

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

---

## **NOTICE OF PRIVACY PRACTICES**

THIS NOTICE DESCRIBES HOW MENTAL HEALTH AND MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY

### **Our Commitment to Protect Your Mental Health and Medical Information**

You have a right to privacy with respect to your past, present, and future mental health and medical information. View Point Health is required by law to protect your information and to provide you with this Notice of our legal duties and privacy practices with respect to your protected health information. You have the right to receive a paper copy of this Notice.

We are required to follow the privacy practices described in this Notice, though we reserve the right to change our privacy practices and the terms of this Notice at any time. In the event this Notice is revised, you may request a paper copy of the revised notice or view the revised notice at the above web address.

### **How We May Use and Disclose Your Protected Health Information**

We use and disclose protected health information for a variety of reasons. In general, our use and disclosures fall within the following three categories: treatment, payment, and health care operations.

**Treatment** – We will use your protected health information and disclose it to others as necessary to provide treatment to you. For example, members of our clinical staff may access your record in the course of your care, or share information in the process of coordinating your care. Such staff members include physicians, psychologists, nurses, and other mental health professionals. Additionally, disclosure to another facility, community health center, or private practitioner may become necessary for your continued treatment.

**Payment** – We will use or disclose your protected health information as necessary to arrange for payment of services provided to you. For example, information about your diagnosis and the services we provide to you may be included in a bill that we send to a third-party payer.

**Health Care Operations** – We will use or disclose your protected health information in the course of operating View Point Health centers or for the health care operations of another organization that has a relationship with you. For example, our quality assurance staff reviews records to ensure that our high standards of treatment delivery are reached consistently. In addition, View Point Health may contract with outside companies, or "business associates", such as consultants, accountants, lawyers, and medical transcriptionists, to provide services that may involve the use of your protected health information.

Unless you instruct us otherwise, we may also send appointment reminders, information about treatment options and other health-related benefits that may be of interest, and other similar materials to you.

### **Uses and Disclosures Requiring Your Authorization**

We are generally prohibited from using or disclosing your protected health information for purposes other than treatment, payment, and health care operations without your written authorization, unless the use or disclosure is within one of the categories described below. In addition, we generally may not use or disclose psychotherapy notes written by your mental health provider without your written authorization, even for treatment, payment and health care operations. You have the right to revoke your authorization in writing at any time, except to the extent that we have already undertaken an action in reliance upon your authorization.

### **Uses and Disclosures Not Requiring an Authorization**

By law, we may use or disclose certain of your protected health information without an authorization in the following circumstances:

**When required by law** – We may disclose protected health information when a law requires that we report information about suspected abuse, neglect, or domestic violence, or relating to certain criminal activity, or in response to a court order. We must also disclose protected health information to authorities that monitor our compliance with these privacy requirements.

**For public health activities** – We may disclose certain protected health information to public health agencies as permitted or required by law.

**For health oversight activities** – We may disclose certain protected health information to certain government agencies for oversight activities authorized by law.

**Judicial and Administrative Proceedings** – We may disclose protected health information in response to a court or administrative order. We may also disclose protected health information in certain cases in response to a subpoena, discovery request, or other lawful process, subject to your notice and opportunity to object.

**Relating to deceased individuals** – We may disclose certain protected health information related to death to pursuant to a valid subpoena of a coroner or medical examiner.

**To avert a serious threat to health or safety** – We may disclose protected health information, in order to avoid a serious threat to your health or safety and the health and safety of the public or another person.

**For specific government functions** – We may disclose protected health information as required by military authorities, to correctional facilities in certain situations, to government benefit programs relating to eligibility and enrollment, and for national security and intelligence reasons, such as protection of the President.

**Appointment Reminders** – General information will be used to contact you and remind you of appointments with View Point Health.

## **Uses and Disclosures of Alcohol/Drug Treatment Records**

At View Point Health, personally identifying information related to the treatment of substance abuse has special legal privacy protections as outlined in the federal law 45 CFR Part 2. We will not disclose any information identifying you as a consumer of our services or provide any mental health or medical information relating to substance abuse treatment except in certain circumstances, including but not limited to: (1) you consent in writing; (2) a court orders disclosure of the information after a show cause hearing as required under Georgia Law; (3) medical personnel need the information to meet a medical emergency; (4) qualifying personnel use the information for the purpose of conducting research, management audits, or program evaluation; or (5) it is necessary to report a crime or threat to commit a crime or to report child abuse or neglect as required by law. As applicable, you will be provided an additional notice regarding the confidentiality of substance abuse information.

## **Contact Information Regarding Our Privacy Practices**

If you have questions, concerns, or complaints about our privacy practices, or if you disagree with a decision regarding access to your information, please contact the Privacy Officer, View Point Health, P.O. Box 687, Lawrenceville, Georgia 30046, 1-678-209-2411. You may also file a grievance with the U.S. Department of Health and Human Services, 200 Independence Avenue, SW, Room 509F, HHH Building, Washington, D.C. 20201, 1-877-696-6775. You will not be penalized for filing a complaint or grievance.

## **Your Rights Regarding Your Protected Health Information**

You have the following rights with respect to your protected health information:

To obtain access to your protected health information – You generally have the right to see and obtain copies of your protected health information upon written request. We may deny you access to review or copy your protected health information. If your request is denied, we must provide you with a reason for the denial and explain any right to have the denial reviewed. If we grant your written request for copies of your protected health information, we will advise you in advance of any fees we may impose for the costs of copying and mailing.

To request restrictions on uses and disclosures – You have the right to ask that we limit how we use or disclose your protected health information. We will consider your request, but are not legally bound to agree to the restriction. If we do agree to any restriction, we will put the agreement in writing and abide by it except in the case of emergency situations. We cannot agree to limit uses and disclosures that are required by law.

You may request that we not disclose your medical information to any persons or entities that may be responsible for paying all or any portion of the charges you incur while a patient of View Point Health. If you pay all such charges in full at the time of such request, we are required to agree to your request.

To receive confidential communications – You have the right to request that we communicate with you by using an alternative address or by alternative means. We must agree to your request as long as it is reasonable for us to comply.

To an accounting of disclosures – You have the right to receive upon written request an accounting of when, to whom, for what purpose, and what content of your protected health information has been released for the past six years. This list will not include the following instances for disclosure: for treatment, payment, and health care operations; to you, to your family, or for a facility directory; or pursuant to your written authorization. The list of disclosures will not include any certain other disclosures, such as those made to law enforcement officials or correctional facilities, for national security purposes, or disclosures made before April 14, 2003. There will be no charge for the first accounting you request within a 12 month period. For additional lists within the same period, we will advise you in advance of any fees we may impose.

To request an amendment – If you believe that your protected health information is incorrect or incomplete, you have the right to request in writing that we amend the information. Your request must include the reason you are seeking a change. We may deny your request if (1) we did not create the information or the information is not part of our records; (2) the information is not permitted to be disclosed; or (3) the information is correct and complete. Any denial must be in writing and must state the reasons for the denial and explain your right to submit a statement of disagreement and to have your statement (and any rebuttal), along with your request and the denial, appended to your record.

## **INVESTIGATIONS OF BREACHES OF PRIVACY**

We will investigate any discovered unauthorized use or disclosure of your protected health information to determine if it constitutes a breach of the federal privacy or security regulations governing unsecured protected health information. If we determine that such a breach has occurred, we will provide you with notice of the breach and advise you what we intend to do to mitigate the damage (if any) caused by the breach, and about the steps you should take to protect yourself from potential harm resulting from the breach.