



# Welcome!

Coleman is a nationally recognized nonprofit organization offering behavioral health, residential, employment and supportive services to counties across the state of Ohio. Read more about our history and services at [ColemanServices.org](http://ColemanServices.org).

## Mission

We Foster Recovery, Build Independence, and Change Destinies.

## Vision

We aspire to improve the health and mental wellness of our communities through compassionate, evidence-based services and support.

## Services

(Varies by location. Please ask regarding availability.)

- Diagnostic Assessment
- Counseling (Individual, group)
- Case Management
- Crisis Services
- Community Support Services
- Vocational Development
- Peer Support
- Psychiatry
- Residential Services

## Diagnostic Assessment

When you start getting help at Coleman, you'll first take a Diagnostic Assessment. This is a way to figure out how you're doing and what kind of services you might need. During this assessment, we'll look at your goals, strengths, and what you need help with. We'll gather information about your health, family, and social history.

To understand your condition better, we'll use special codes from the International Classification of Diseases or the American Psychiatric Association's guidelines. A qualified person, like a Psychiatrist, Licensed Psychologist, Nurse Practitioner, Physician's Assistant, or a Licensed Counselor/Social Worker, will give you this diagnosis.

## Individual Service Plan

You and your provider will work together to make an Individual Service Plan (ISP). This plan will outline the support, activities, and resources you need to reach your personal goals. The ISP is created through a planning process where you share your ideas and information.

It will focus on your strengths, needs, abilities, and preferences that came up during your diagnostic assessment. You can also ask family members, guardians, or other helpers to be involved in creating this plan with you.

## Individual Service Plan Review

You and your treatment team will regularly check and update your Individual Service Plan (ISP). If your needs, conditions, or goals change, the plan will be updated. The reason for these updates is to make sure you can smoothly move to a different level of care when needed.

## Additional Information on Individual Service Plans

- Your involvement in creating your ISP is important for successful treatment and reaching your goals with your treatment team.
- You will take part in any decisions about your treatment or services.
- You can ask for family members or other helpers to be part of your treatment plan.
- You will be told of any legally required appointments, sanctions, or court notifications.
- We don't use rewards or incentives to motivate you during treatment. You will meet the clinician who will help coordinate your services.

## Personal Safety Plan

Many people work with their provider to create a "Safety Plan." This plan is made at the start of treatment along with the Individual Service Plan and is updated regularly. The Safety Plan helps you express what you want if you need more care.

## Transitions/Changes in Level of Care

A transition plan will be made with you early in your treatment. This plan explains how your care will change between different levels and the services you will receive. The five levels of care for people with serious mental health issues are:

1. Outpatient
2. Recovery
3. Rehabilitation
4. Sub-Acute
5. Inpatient

As your level of care changes, you and your treatment team will update your service plan and goals.

## Discharge

Your treatment at Coleman may end for several reasons, such as:

- You have reached your treatment goals and no longer need services.
- You or your treatment team decide that another provider would be a better fit for you.
- You do not pay what you owe or do not follow the rules (see below).
- You move out of Coleman's service area.
- You choose to end treatment.

## Health & Safety Concerns

### Nicotine Products

Coleman wants to keep everyone safe and healthy, including the people we help, our workers, and our visitors. To support this idea, we have a rule that our places are nicotine-free. This means that using any nicotine products, like cigarettes, cigars, chewing tobacco, pipes, and e-cigarettes, is not allowed inside Coleman buildings or on our property and vehicles. The only exceptions are special areas that are marked with signs.

### Weapons

At Coleman, no one is allowed to bring a handgun, firearm, or any other type of weapon onto the property or in vehicles used for Coleman business, even if they have a license to carry it. This rule applies whenever you are meeting with a Coleman staff member, whether in the office or out in the community. The only exceptions are law enforcement officers, security guards, or others who have written permission from the CEO or the VP of HR to carry a weapon on the property.

### Legal/Illegal Drugs and Substances

You are not allowed to use or have illegal drugs on Coleman property or in vehicles used for Coleman business. This includes making, sharing, or using controlled substances that are obtained illegally. To support those in recovery, legal substances that can be misused, like alcohol or marijuana, are also not allowed on Coleman property or in vehicles used for Coleman business. This rule applies whenever you are meeting with a Coleman staff member, whether in the office or out in the community.

### Recording Devices

To protect the privacy of everyone at the facility and who interacts with staff, recording devices like smartphones, cameras, audio recorders, and wearable recording gadgets are not allowed unless you have permission from CHS administration first.

## Prescription Medication

You might be asked to bring your medications to an appointment with a psychiatrist or nurse. Sometimes it is helpful to go over all your medications. You are responsible for keeping track of your medications while you are in the office or in a vehicle for Coleman business.

## Seclusion or Restraint

Coleman as an organization **does not** use seclusion or restraint.

## Knowing Your Care Site

Please get to know the place where you receive your care. This means looking for emergency exits, fire safety equipment, and first aid kits. If you have any questions, feel free to ask your treatment team.

## Advance Directives

If you have a living will, a do-not-resuscitate order, or any other advance directive, please let your provider know. If you want more information about how to create an advance directive, you can talk to your treatment team.

## Response to People Who May Be at Risk

If you miss your scheduled appointment or we haven't heard from you, and you are considered "at risk," we will take steps to make sure you are okay. This may include calling you and your family or visiting your home.

## Expectations of Coleman

Coleman staff are trained to provide services safely and effectively. Every employee learns about client rights, ethics, safety, and professional behavior. All clients should receive the best care possible. To make sure of this, we expect all clinical staff to:

- Provide only the services that are necessary and helpful for your condition.
- Work within their job responsibilities, licenses, and regulations.
- Keep professional boundaries, diagnose patients carefully, use effective techniques based on knowledge, get your permission for treatment, and care about your relationships with your family. They will also document your treatment properly and consult with others when needed.

## Expectations of You

For everyone's safety and well-being, we ask you to follow our program rules:

- Participate in all treatment sessions and dress appropriately.
- Treat Coleman staff and property with respect.
- Follow all health and safety guidelines.
- Avoid using alcohol, nicotine, or other drugs while with Coleman staff. Give at least 24 hours' notice if you need to reschedule or cancel an appointment.

## Restrictions/Suspensions of Service

If you do not follow these expectations, you may not be able to continue with some or all services at Coleman. If this happens, your treatment team will inform you in writing about:

- The reasons for the restrictions or suspension of services
- What the restrictions or suspension involve Your right to an appeal using the Coleman grievance procedure
- What you need to do to get your rights or privileges back This information will be included in the treatment plan

If you have a disagreement about any restrictions, you can contact the Client Advocate at 567-242-6367 for help. If you were referred for treatment, we may let the referral source know about the behavior that led to your discharge.

## Financial Information

### Fees for services

If you receive services at Coleman, you are responsible for paying for them. We use a sliding fee scale to determine how much you will pay. Our staff will help you figure out your fees based on your income and can assist you with using insurance or enrolling in other programs to help with costs, if available.

It's important to bring proof of your household income and a way to verify where you live. This will help us accurately place you on the sliding fee scale. We accept Medicaid, Medicare, and other types of insurance.

### Insurance

Coleman staff work with many insurance companies. If there aren't any in-network providers available at Coleman, staff will discuss other options with you or help

you find a referral to another provider in your network. We encourage you to contact your insurance company to find out exactly what services they will cover.

## General Information

### Business Hours

Office hours are posted on the door and vary by location. If you have any questions, just ask your provider.

### After Hours

Crisis services are available 24/7. If you have a mental health emergency, **please call 988** or the local crisis hotline number your provider gave you.

### Wait Lists

Sometimes, there may be a wait list for certain services. If there is a wait list for a service recommended for you, we will let you know. Please talk to your care team to see if waiting is the best choice for you or if you should look for a different service or provider.

### Changing Appointments

Please give us 24 hours notice if you need to change an appointment. You can call our front desk to reschedule.

### Canceling Appointments

If you call less than 24 hours before your appointment for Counseling or Psychiatry, it will be considered a "no show." After two "no shows" within 90 days, you may be discharged from services. We will notify you to remind you of your upcoming appointments.

### Consent for Treatment

All clients at Coleman need sign a Consent for Treatment form. The form allows Coleman to provide mental health and addiction services. It also ensures that clients receive a written copy of our Notice of Privacy Practices, Client Rights and Responsibilities, and Client Grievance procedures. The consent informs clients that the local Mental Health and Recovery Services Board can have access to their information to pay claims or check on healthcare services. Clients decide if they want to involve family members or important people in their treatment.

### Gathering Feedback from Clients

Coleman has different ways to ask for your feedback about our services, staff, and the office and waiting areas. You can fill out written questionnaires at your location to share your thoughts, or someone may call you to ask about your satisfaction. We also encourage you to talk with your treatment team, supervisors, or the client advocate if you want to share how you feel about our services.

### Use of OARRS (Ohio Automated Rx Reporting System)

OARRS is a tool used to keep track of how controlled prescription drugs are given to patients. To follow the rules, Coleman may check OARRS before prescribing medication.

### Drug Screening

We may ask for your permission for drug screening to help with your treatment. Your provider may order this as part of your care before your treatment starts or at random times

### Technology Assistance

Coleman uses technology to help your care team to focus more on you and less on the computer screen. This help is through a secure mobile app that assists the provider to document your visit. After your visit, your provider will review the draft note before adding it to your medical record. If you prefer, you may decline using this technology during your care. Just tell your care team that you'd prefer not to participate.

Headquarters

5982 Rhodes Rd, Kent, OH 44240

800-673-1347

# 24/7 Crisis Support – Call or Text 988

# Notice of Nondiscrimination and Accessibility



Coleman Health Services complies with applicable Federal civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity). Coleman Health Services does not exclude people or treat them differently because of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity).

## Coleman Health Services:

- Provides 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, speak with your care team or call the Client Advocate at 567-242-6367.

If you believe that Coleman Health Services has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex (including pregnancy, sexual orientation, and gender identity), you can file a grievance with:

Rebekah Dembski, Client Advocate  
5982 Rhodes Rd, Kent, OH 44240  
567-242-6367

You can file a grievance in person or by mail, fax, or email. If you need help filing a grievance, the Client Advocate is available to help you.

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)

Complaint forms are available at <https://www.hhs.gov/ocr/complaints/index.html>.

# Coleman Health Services

## Notice of Availability of Language Assistance Services

### English

ATTENTION: If you speak a language other than English, free language assistance services are available to you. Appropriate auxiliary aids and services to provide information in accessible formats are also available free of charge. Speak to your provider.

### Español (Spanish)

ATENCIÓN: Si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. También están disponibles de forma gratuita ayuda y servicios auxiliares apropiados para proporcionar información en formatos accesibles. Hable con su proveedor.

### 中文 (Chinese)

注意：如果您说[中文]，我们将免费为您提供语言协助服务。我们还免费提供适当的辅助工具和服务，以无障碍格式提供信息。或咨询您的服务提供者。

### Deutsch (German)

ACHTUNG: Wenn Sie Deutsch sprechen, stehen Ihnen kostenlose Sprachassistentendienste zur Verfügung. Entsprechende Hilfsmittel und Dienste zur Bereitstellung von Informationen in barrierefreien Formaten stehen ebenfalls kostenlos zur Verfügung. Sprechen Sie mit Ihrem Provider.

### العربية (Arabic)

تنبيه: إذا كنت تتحدث اللغة العربية، فستتوفر لك خدمات المساعدة اللغوية المجانية. كما تتوفر وسائل مساعدة وخدمات مناسبة لتوفير المعلومات بتنسيقات يمكن الوصول إليها مجانًا. اتصل على أو تحدث إلى مقدم الخدمة".

### Deitsch (Pennsylvania Dutch)

Acht: Wann du Deitsch shwetzcht und vun du eppa vetchts ess Deitsch schwetzcht les uns vissa und mau kenna eppa griche ess eich helfa kann und kust eich nix fa des hilfe.

### РУССКИЙ (Russian)

ВНИМАНИЕ: Если вы говорите на русский, вам доступны бесплатные услуги языковой поддержки. Соответствующие вспомогательные средства и услуги по предоставлению информации в доступных форматах также предоставляются бесплатно. или обратитесь к своему поставщику услуг.

### Français (French)

ATTENTION : Si vous parlez Français, des services d'assistance linguistique gratuits sont à votre disposition. Des aides et services auxiliares appropriés pour fournir des informations dans des formats accessibles sont également disponibles gratuitement. Parlez à votre fournisseur.

### Việt (Vietnamese)

LƯU Ý: Nếu bạn nói tiếng Việt, chúng tôi cung cấp miễn phí các dịch vụ hỗ trợ ngôn ngữ. Các hỗ trợ dịch vụ phù hợp để cung cấp thông tin theo các định dạng dễ tiếp cận cũng được cung cấp miễn phí. Trao đổi với người cung cấp dịch vụ của bạn.

### Oromo (Cushite)

XEEYYANNOO: Afaan Ingiliffaan ala afaan biraa yoo dubbattan tajaajilli gargaarsa afaanii tola siif kennama. Gargaarsi gargaaraa fi tajaajilli sirrii ta'ee fi odeeffannoo bifa dhaqqabamaa ta'een kennuunis bilisaan ni argama. Bilbili ykn dhiyeessaa kee waliin haasa'i.

### 한국어 (Korean)

주의: [한국어]를 사용하시는 경우 무료 언어 지원 서비스를 이용하실 수 있습니다. 이용 가능한 형식으로 정보를 제공하는 적절한 보조 기구 및 서비스도 무료로 제공됩니다. 전화하거나 서비스 제공업체에 문의하십시오.

### Italiano (Italian)

ATTENZIONE: se parli Italiano, sono disponibili servizi di assistenza linguistica gratuiti. Sono inoltre disponibili gratuitamente ausili e servizi ausiliari adeguati per fornire informazioni in formati accessibili. Parla con il tuo fornitore.

### 日本語 (Japanese)

注: 日本語を話される場合、無料の言語支援サービスをご利用いただけます。アクセシブル(誰もが利用できるよう配慮された)な形式で情報を提供するための適切な補助支援やサービスも無料でご利用いただけます。までお電話ください。または、ご利用の事業者にご相談ください。

### Nederlands (Dutch)

LET OP: als je Nederlands spreekt, zijn er gratis taalhelpdiensten voor je beschikbaar. Passende hulpmiddelen en diensten om informatie in toegankelijke formaten te verstrekken, zijn ook gratis beschikbaar. Spreek met je provider.

### українська мова (Ukrainian)

УВАГА: Якщо ви розмовляєте українська мова, вам доступні безкоштовні мовні послуги. Відповідні допоміжні засоби та послуги для надання інформації у доступних форматах також доступні безкоштовно. зверніться до свого постачальника».

### Românesc (Romanian)

ATENȚIE: Dacă vorbiți o altă limbă decât engleza, aveți la dispoziție servicii gratuite de asistență lingvistică. De asemenea, sunt disponibile gratuit ajutoare și servicii auxiliare adecvate pentru furnizarea de informații în formate accesibile. Vorbiți cu furnizorul dumneavoastră

It is the policy of Coleman Health Services that each client served has all the following rights as per Ohio Administrative Code 5122-26-18:

1. The right to be treated with consideration and respect for personal dignity, autonomy and privacy;
2. The right to reasonable protection from physical, sexual and emotional abuse, inhumane treatment, humiliation, neglect and financial or other exploitations;
3. The right to receive services in the least restrictive, feasible environment;
4. The right to participate in any appropriate and available service that is consistent with an individual service plan (ISP), regardless of the refusal of any other service, unless that service is necessary for clear treatment reasons and requires the person's participation;
5. The right to give informed consent to or refuse any service, treatment or therapy including medication absent an emergency, as well as in the composition of the service delivery team; as well as the right to give informed consent or refuse to give informed to consent to a release of information and to withdrawal that consent
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 to freedom from unnecessary or excessive medication, and to be free from restraint or seclusion unless there is an immediate risk of physical harm to self or others;
8. The right to be informed and the right to refuse any unusual or hazardous treatment procedures;
9. The right to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies, photographs or other audio and visual technology. The right does not prohibit an agency from using closed-circuit monitoring to observe seclusion rooms or common areas which does not include bathrooms or sleeping areas;
10. The right to confidentiality of communications and personal identifying information within the limitations and requirements of disclosure for client information under state and federal laws and regulations;
11. The right to have access to one's own client record unless access to certain information is restricted for clear treatment reasons. If access is restricted, the treatment plan shall include the reason for the restriction, a goal to remove the restriction, and the treatment being offered to remove the restriction;
12. The right to be informed and a reasonable amount of time in advance of the reason for terminating participation in a service and to be provided a referral, unless the service is unavailable or not necessary;
13. The right to be informed of the reason for denial of a service;
14. The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, gender identity, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local or state or federal laws;
15. The right to know the cost of services;

16. The right to be verbally informed of all client rights, and to receive a written copy upon request;
17. The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations;
18. The right to file a grievance, and have that grievance investigated and a resolution determined for any infringements of rights;
19. The right to have oral and written instructions concerning the procedure for filing a grievance, and assistance in filing a grievance if requested.
20. The right to be informed of one's own condition; and
21. The right to consult with an independent treatment specialist, legal counsel, self-help support services or advocacy support services at one's own expense.

If you have any questions, concerning your Client Rights, please contact:

**Rebekah Dembski, Client Advocate**

**5982 Rhodes Road Kent, Ohio 44240**

**Monday – Friday 9:00-4:30 pm**

**(567) 242-6367**

### **Process for Filing a Complaint/ Grievance**

Any person applying for or receiving services from Coleman Health Services has the right to file a complaint/grievance with the Client Advocate. The Client Advocate (formerly Client Rights Officer) is the individual designated with the responsibility of assuring compliance with the client rights and grievance procedure rule.

You may submit, at any time, a grievance to the Client Advocate. The Client Advocate is available Monday through Friday from 9:00am – 4:30pm at 567-242-6367. If the Client Advocate is unavailable, the duties and responsibilities are appropriately delegated. All communications will be responded to within 1 business day.

Complaints or concerns may be made to the Client Advocate by telephone, in writing, or by making an appointment to meet with the Client Advocate in person. Should you or another person wish to file a formal grievance, Coleman staff or the Client Advocate can help you put your concerns in writing. All grievances must be in writing, signed, and dated by you or the individual filing the grievance on your behalf. The written grievances must also include the date, approximate time, a description of the incident / situation, and the names of the individuals involved.

The Client Advocate will acknowledge receipt of the grievance in writing within three (3) business days and a description of the process that will follow.

The Client Advocate will investigate the grievance by discussing your concerns with staff who are directly involved, reviewing appropriate documents and processes, and/or other outreach, as needed, to assist in the resolution of the complaint or grievance.

For grievances, The Client Advocate will provide you with written notification and an explanation of the resolution of formal grievances within twenty (20) business days unless this time has been negotiated between the grievor and the Client Advocate.

If you are unhappy with the outcome of the grievance, you may appeal the grievance with the Chief Compliance Officer or his/her designee.

At any time, you may file a grievance with your local mental health and recovery board or any of the organizations listed below:

Federal & State Agencies	
Ohio Department of Behavioral Health (DBH) 30 E Broad Street, 36th Floor Columbus, Ohio 43215 614.466.2596	Disability Rights Ohio 200 Civic Center Drive, Suite 300 Columbus, Ohio 43215 (614) 466-7264 or (800) 282-9181
Attorney General's Office Health Care Fraud Unit 30 E Broad Street, 14 <sup>th</sup> Floor Columbus, Ohio 43215 (614) 466-4986 or (800) 282-0515	Office for Civil Rights US Department of Health and Human Services 233 North Michigan Avenue, Suite 240 Chicago, IL 60601 (312) 886-1807
Ohio Recovery Housing 17 S High Street Suite 799 Columbus, OH 43215 T: 614-453-5133 F: 614-228-0740 E: info@ohiorecoveryhousing.org	Ohio Legal Rights Service 88 East Long Street, 5 <sup>th</sup> Floor Columbus, Ohio 43266 (800)282-9181
Ohio Civil Rights Commission 1111 East Broad Street, 3 <sup>rd</sup> Floor Columbus, Ohio 43205 (614) 466-2785	Ohio Department of Job and Family Services 30 East Broad Street, 32 <sup>nd</sup> Floor Columbus, Ohio 43215 (614) 466-1213 or (855) 642-4453
Ohio Department of Medicaid 50 West Town Street, Suite 400 Columbus, Ohio 43215 (800) 324-8680	Social Security Administration Civil Rights Complaint Adjudication Office P.O. Box 17788 Baltimore, MD 21235-7788

County Mental Health Boards	
MHRS Board of Allen, Auglaize & Hardin Counties 529 South Elizabeth Street Lima, Ohio 45805 (419) 222-5122	MH & R Board of Ashland County 1605 County Road 1095 Ashland, Ohio 44805 (419) 281-3139
Ashtabula MH & R Board 4817 State Road, Suite 203 Ashtabula, Ohio 44004 (440) 992-3121	MH & R Board of Belmont, Harrison & Monroe Counties 99 North Sugar Street St. Clairsville, Ohio 43950 (740) 695-9998
Crawford and Marion Counties Board of ADAMHS 105 Washington Street Suite 203 Bucyrus, Ohio 44820 (740) 387-8531	Jefferson County Prevention and Recovery Board 524 Madison Avenue Steubenville, Ohio 43952 (740) 282-1300
MHDAS Board of Logan & Champaign 1521 North Detroit Street PO Box 765 West Liberty, Ohio 43357 (937)465-1045	Mahoning County MH & R Board 222 West Federal Street, Suite 201 Youngstown, Ohio 44503 (330) 746-2959
Paint Valley ADAMH Board 394 Chestnut Street Chillicothe, Ohio 45601 (740) 773-2283	MH & R Board of Portage County 155 E Main Street PO Box 743 Kent, Ohio 44240 330.673.1756
MH & R of Richland County 87 East First Street, Suite L Mansfield, Ohio 44805 (419) 774-5811	Stark County MH & R Board 121 Cleveland Avenue, SW Canton, Ohio 44702 (330) 455-6644
County of Summit ADM Board 1867 W. Market Street, Suite B2 Akron, Ohio 44313 (330) 762-3500	Trumbull County MH & R Board 4076 Youngstown Rd SE Suite 201 Warren, Ohio 44484 (330) 675-2765
ADAMHS Board of Tuscarawas & Carroll Counties 119 Garland Drive SW New Philadelphia, Ohio 44663 (330) 364-6488	MH & R Board of Wayne & Holmes Co 1985 Eagle Pass Wooster, Ohio 44691 (330) 264-2527

Professional Boards	
Ohio Professional Chemical Dependency Board 77 South High Street, 16 <sup>th</sup> Floor Columbus, Ohio 43215 (614) 387-1110 or (800) 686-1595	Ohio Psychiatric Association 3510 Snoufer Road, Suite 101 Columbus, Ohio 43235 (614) 763-0400
Ohio CSWMFT Board 77 South High Street, 16 <sup>th</sup> Floor Columbus, Ohio 43215 (614) 466 -0912	State of Ohio Board of Nursing 77 South High Street, Suite 1830 Columbus, Ohio 43215 (614) 466-8808
State of Ohio Medical Board 30 E Broad Street, 3 <sup>rd</sup> Floor Columbus, Ohio 43215 (614) 466-8808 or (800) 554-7717	National Association of Social Workers 750 First Street, NE Suite 800 Washington, DC 20002 (800)742-4089

Accrediting Bodies
CARF 6951 East Southpoint Rd Tucson, AZ 85756 (888)281-6531

# **Your Information. Your Rights. Our Responsibilities.**

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## **Notice of Privacy Practices of Coleman Health Services**

*This notice describes:*

- HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED
- YOUR RIGHTS WITH RESPECT TO YOUR HEALTH INFORMATION
- HOW TO FILE A COMPLAINT CONCERNING A VIOLATION OF THE PRIVACY OR SECURITY OF YOUR HEALTH INFORMATION, OR OF YOUR RIGHTS CONCERNING YOUR INFORMATION

YOU HAVE A RIGHT TO A COPY OF THIS NOTICE (IN PAPER OR ELECTRONIC FORM) AND TO DISCUSS IT WITH THE PRIVACY OFFICER AT 800-673-1347, [PRIVACYOFFICER@COLEMANSERVICES.ORG](mailto:PRIVACYOFFICER@COLEMANSERVICES.ORG) IF YOU HAVE ANY QUESTIONS.

*In this notice, your health information means your substance use disorder and mental health patient record.*

## **Your Rights**

You have the right to:

- Consent to most uses and disclosures of your health information
- Ask us to limit the information we share
- Get a copy of this privacy notice
- Discuss this notice with someone in our program
- Get a list of those with whom we've shared your electronic records\*
- Get a list of health care providers who have received your information through certain third parties
- Choose in advance whether to receive fundraising communications
- File a complaint if you believe your privacy rights have been violated

## **Your Choices**

With your consent, we can use and share your information as we:

- Treat you
- Run our organization
- Bill for our services
- Fulfill your requests to share information with your consent
- Prevent multiple program enrollments
- Report about court-referred treatment
- Report to prescription drug monitoring programs

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\* The compliance date for this requirement will be set when the same right is revised in the HIPAA Privacy Rule.

## Our Uses and Disclosures

We may use and share your information without your consent as we:

- Communicate within our program and with our contractors
- Help with medical emergencies
- Help with public health
- Report crimes (and threats of crimes) on our premises and suspected child abuse and neglect
- Aid scientific research
- Respond to audits and evaluations of our program
- Assist cause of death inquiries
- Respond to court orders

In all these circumstances, we must protect your information and limit how we use and share it.

## Your Rights

**When it comes to your health information, you have certain rights.** This section explains your rights and some of our responsibilities to help you.

### Provide consent when we use or share your information for most purposes

- You may provide a single consent for all future uses or disclosures for treatment, payment, and health care operations purposes.
- You may provide consent for more limited purposes (for example, to only disclose information to another health care provider for your treatment); however, doing so may affect the services we can provide you or how you pay for services.
- You may provide a general consent to share your information through certain third parties, such as a health information network or a research institution, where your treating health care providers can access it.

### Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our health care operations after you have provided consent for all those purposes. We are not required to agree to your request, and we may say “no” if, for example, it could affect your care. If we agree to your request, we may still share this information in the event that you need emergency treatment.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our health care operations with your health insurer. We will say “yes” unless a law requires us to share that information.

### Get a copy of this privacy notice

You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

### **Discuss this notice with someone in our program**

You can ask questions or obtain more information about this notice and our privacy practices by calling or emailing the contact person at the top of this notice.

### **Choose in advance about fundraising**

You have the right to a clear and obvious notice in advance of, and a choice about whether to receive, fundraising communications for our program.

### **File a complaint if you feel your rights are violated**

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- You can file a complaint with the U.S. Department of Health and Human Services' Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting <https://www.hhs.gov/hipaa/filing-a-complaint/index.html>.
- We will not retaliate against you for filing a complaint.

## **Your Choices**

### **How do we typically use or share your health information?**

With your consent, we typically use or share your health information in the following ways.

#### **Treat you**

We can use your health information and share it with other professionals who are treating you.

*Example: A doctor treating you for a chronic condition asks a doctor at our program about your health condition and medications you are taking, for example, to avoid complications.*

#### **Run our organization**

We can use and share your health information to run our program, improve your care, and contact you when necessary.

*Example: We use health information about you to manage your treatment and services.*

#### **Bill for your services**

We can use and share your health information to bill and get payment from health plans or other entities.

*Example: We give information about you to your health insurance plan so it will pay for your services.*

**With your consent, we may also use and share your information in the following ways:**

- To whomever you name in a consent to share your information
- To prevent multiple enrollments in withdrawal management or maintenance treatment programs
- To report participation in treatment required by the criminal justice system
- To report prescribed substance use disorder treatment medications to a state prescription drug monitoring program when required by law

**You can choose someone to act for you.**

- If someone has authority to act as your personal representative, such as if someone has your medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

## **Our Uses and Disclosures**

### **How else can we use or share your health information?**

We are allowed or required to share your information in certain ways without your consent – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes.

#### **To communicate within our program and with contractors**

We can share your information within our program, with an organization that has administrative control over our program, and with contractors who help us run our program.

#### **For medical emergencies**

We can share your information during a bona fide medical emergency with the personnel and health care providers responding to your emergency, even when you are unable to consent because of the emergency.

We can also share your identifying information to assist the federal Food and Drug Administration in notifying you or your doctor about unsafe products you may be using.

#### **Help with public health**

We can share health information that does not identify you for certain situations such as:

- Preventing disease
- Reporting adverse reactions to medications

### **Aid scientific research**

We can use or share your information to conduct or help with health research. Researchers cannot include any patient identifying information in their reports about the research.

### **Respond to management and financial audits and program evaluations**

We can use or share your information to improve the quality of our services, obtain needed credentials, and cooperate with oversight agencies for activities authorized by law, as long as those who view or receive the information agree to destroy or return the information when they are finished and agree not to use it against you.

### **Assist with cause of death inquiries**

We can share patient identifying information about a deceased patient as required or allowed by laws that collect information relating to cause of death.

### **Report suspected child abuse and neglect**

We will only report the information required by law.

### **Prevent or reduce crime in our program**

We may report to law enforcement when a patient commits or threatens to commit a crime within our program or against our staff.

## **Redisclosure According to HIPAA**

When you consent to uses and disclosures for all future treatment and payment purposes and to run our business, we may share your information with other substance use disorder treatment programs, doctors' offices, and health care businesses for those activities. If the person who receives it is subject to HIPAA, then they are allowed to use and share your information again without your consent for the purposes that HIPAA allows. Your information still cannot be used in legal proceedings against you unless (1) you consent or (2) based on a Part 2 court order and a subpoena (or similar legal requirement).

## **Legal Proceedings and Court Orders**

We must follow certain procedures before using or sharing your information for investigations and legal proceedings.

- We will not use or share your information or provide testimony about your information in any civil, administrative, criminal, or legislative proceedings against you without your written consent or a court order.

- We will only respond to a court order to use or share your health information if it is accompanied by a subpoena or other similar legal mandate requiring us to comply.
- We will only use or share your information in proceedings against you based on a court order after we have received notice and an opportunity to be heard or you tell us that you have received notice.
- We may use or share your information to respond to legal proceedings against our program based on a court order and you may not be notified in advance. You have the right to seek to overturn or change the court order after you learn about it.

## **Our Responsibilities**

- We are required to obtain your consent for most uses and sharing of your information.
- We are required by law to maintain the privacy and security of your information.
- We must let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described in this notice unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

## **Changes to the Terms of this Notice**

We are required to follow the terms of this notice that are currently in effect. We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request in our office and on our web site.

## **Effective Date**

This notice is effective as of 2/16/2026

# Hepatitis A, B, and C: Learn the Differences

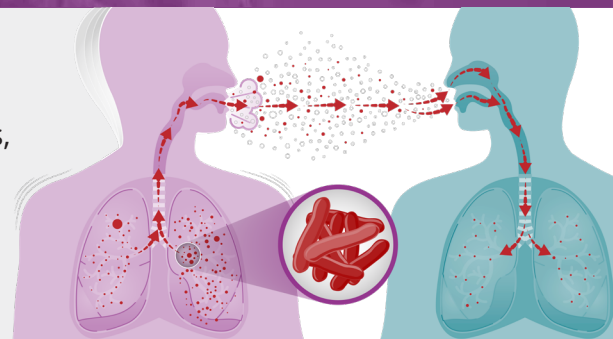
	<b>Hepatitis A</b> caused by the hepatitis A virus (HAV)	<b>Hepatitis B</b> caused by the hepatitis B virus (HBV)	<b>Hepatitis C</b> caused by the hepatitis C virus (HCV)
<b>How is it spread?</b>	HAV is found in the feces (poop) of people with hepatitis A and is usually spread by close personal contact (including sex or living in the same household). It can also be spread by eating food or drinking water contaminated with HAV.	HBV is found in blood and certain body fluids. The virus is spread when blood or body fluid from an infected person enters the body of a person who is not immune. HBV is spread through having unprotected sex with an infected person, sharing needles or “works” when shooting drugs, exposure to needlesticks or sharps on the job, or from mother to baby during birth. Exposure to infected blood in ANY situation can be a risk for transmission.	HCV is found in blood and certain body fluids. The virus is spread when blood or body fluid from an HCV-infected person enters another person’s body. HCV is spread through sharing needles or “works” when shooting drugs, through exposure to needlesticks or sharps on the job, or sometimes from an infected mother to her baby during birth. It is possible to transmit HCV during sex, but it is not common.
<b>Who should be vaccinated?</b>	<ul style="list-style-type: none"> <li>• People who wish to be protected from HAV infection</li> <li>• All children at age 1 year (12–23 months)</li> <li>• Unvaccinated children age 2–18 years</li> <li>• Men who have sex with men</li> <li>• Users of street drugs (injecting and non-injecting)</li> <li>• People who travel or work in any area of the world where HAV infection is common</li> <li>• People who will have close contact with an international adoptee, from a country where HAV infection is common, during the first 60 days following the adoptee’s arrival in the U.S.</li> <li>• People with chronic liver disease, including HCV</li> <li>• People working with HAV in a laboratory</li> <li>• People with HIV infection</li> <li>• People in a healthcare setting that targets services to people who use drugs or in a group home or day care facility for developmentally disabled people</li> <li>• People who are homeless or in temporary housing (such as a shelter)</li> </ul>	<ul style="list-style-type: none"> <li>• All infants, children, teens, and adults ages 0 through 59 years</li> <li>• All adults age 60 or older with risk due to <ul style="list-style-type: none"> <li>• Sexual exposure (e.g., sex partners of HBsAg-positive people; sexually active people who are not in monogamous relationships; people seeking treatment for a sexually-transmitted infection: men who have sex with men)</li> <li>• Percutaneous or mucosal exposure to blood (e.g., current or recent injection-drug use; household contacts of HBsAg-positive people; residents and staff of facilities for developmentally disabled people; healthcare and public safety workers with reasonably anticipated risk for exposure to blood; all dialysis and pre-dialysis patients; dialysis, and pre-dialysis patients; patients with diabetes at the discretion of the clinician)</li> <li>• Other factors (e.g., anticipated travel to countries with high or intermediate endemic hepatitis B; people with HCV infection; chronic liver disease, including but not limited to people with cirrhosis, fatty liver disease, alcoholic liver disease, autoimmune hepatitis, alanine aminotransferase [ALT] or aspartate aminotransferase [AST] level greater than twice upper limit of normal; HIV infection; incarceration)</li> </ul> </li> </ul>	<p>There is no vaccine to prevent HCV. Testing for HCV is recommended for the following groups of people.</p> <ul style="list-style-type: none"> <li>• All adults age 18 years and older</li> <li>• Pregnant women</li> <li>• Injecting drug users</li> <li>• Recipients of clotting factors made before 1987</li> <li>• Hemodialysis patients</li> <li>• Recipients of blood or solid organ transplant before 1992</li> <li>• Infants born to HCV-infected mothers</li> <li>• People with undiagnosed abnormal liver test results</li> <li>• People with HIV infection</li> </ul> <p>Although HCV is not commonly spread through sex, individuals having sex with multiple partners or with an infected steady partner may be at increased risk of HCV infection.</p>
<b>Symptoms</b>	Viral hepatitis symptoms are similar no matter which type of hepatitis you have. If symptoms occur, you might experience any or all of the following: jaundice (yellowing of the skin and whites of the eyes), fever, loss of appetite, fatigue, dark urine, joint pain, abdominal pain, diarrhea, nausea, and vomiting. Very rarely, a recently acquired case of viral hepatitis can cause liver failure and death. Note: For all types of viral hepatitis, symptoms are less common in children than in adults. Symptoms are least likely for people with HCV infection.		
	<b>Incubation period:</b> 15 to 50 days, average 28 days	<b>Incubation period:</b> 45 to 160 days, average 90 days	<b>Incubation period:</b> 14 to 180 days, average 45 days
<b>Chronic infection</b>	There is no chronic infection. Once you have had HAV infection, you cannot get it again. About 15 out of 100 people infected with HAV will have prolonged illness or relapsing symptoms over a 6–9 month period.	Chronic infection occurs in up to 90% of infants infected at birth; in about 30% of children infected at ages 1–5 years; and less than 5% of people infected after age 5 years. In the U.S., about 2,000 people die each year from hepatitis B. Death from chronic liver disease occurs in 15%–25% of chronically infected people. People who have chronic HBV infection have a much higher risk of liver failure and liver cancer.	Chronic infection occurs in 75%–85% of newly infected people and 70% of chronically infected people go on to develop chronic liver disease. In the U.S., about 20,000 people die each year from HCV. People who have chronic HCV infection have a much higher risk of liver failure and liver cancer. Chronic HCV-related liver disease is the leading cause for liver transplant.
<b>What treatment?</b>	<ul style="list-style-type: none"> <li>• There is no treatment for HAV other than supportive care.</li> <li>• Avoid alcohol. It can worsen liver disease.</li> </ul>	<ul style="list-style-type: none"> <li>• People with chronic HBV infection should have regular medical monitoring for signs of liver disease or liver cancer. Several antiviral medications are available to treat individuals with chronic HBV infection. Liver transplant is the last resort, but livers are not always available.</li> <li>• Avoid alcohol. It can worsen liver disease.</li> <li>• No medication treats recently acquired HBV infection.</li> </ul>	<ul style="list-style-type: none"> <li>• Over 90% of HCV-infected people can be cured of HCV infection with 8–12 weeks of oral therapy (see <a href="http://www.cdc.gov/hepatitis/hcv/hcvfaq.htm#d1">www.cdc.gov/hepatitis/hcv/hcvfaq.htm#d1</a>). There are medications for the treatment of chronic and acute HCV infection (see <a href="http://www.hcvguidelines.org">www.hcvguidelines.org</a>).</li> <li>• Get vaccinated against hepatitis A and B.</li> <li>• Avoid alcohol. It can worsen liver disease.</li> </ul>
<b>How is it prevented?</b>	<ul style="list-style-type: none"> <li>• Get vaccinated! Vaccines to prevent HAV infection have been available in the U.S. since 1995.</li> <li>• Always wash your hands with soap and water after using the toilet, changing a diaper, and before preparing or eating food.</li> <li>• For a recent exposure to someone with HAV or if travel is soon (leaving in less than 2 weeks) to an area of the world where hepatitis A is common, see your healthcare provider about your need for vaccination or a dose of immune globulin (IG).</li> </ul>	<ul style="list-style-type: none"> <li>• Get vaccinated! Hepatitis B vaccination is the best protection. Two or three shots are given over a period of one to six months, depending on brand.</li> <li>• Mothers should be tested for hepatitis B (HBsAg blood test) during pregnancy; infants born to HBV-infected mothers should be given HBIG (hepatitis B immune globulin) and vaccine within 12 hours of birth.</li> <li>• Tell your sex partner(s) to get vaccinated too, and always follow “safer sex” practices (e.g., using condoms).</li> </ul>	<ul style="list-style-type: none"> <li>• There is no vaccine to prevent HCV infection.</li> <li>• HCV can be spread by sex, but this is not common. If you are not in a mutually monogamous relationship, use latex condoms correctly and every time to prevent the spread of sexually transmitted diseases. (The efficacy of latex condoms in preventing HCV infection is unknown, but their proper use may reduce transmission.)</li> </ul>



# What You Need to Know About Tuberculosis

Tuberculosis (TB) is a disease caused by germs that are spread from person to person through the air. TB usually affects the lungs, but it can also affect other parts of the body, such as the brain, the kidneys, or the spine.

Not everyone infected with TB germs becomes sick. As a result, two TB-related conditions exist: latent TB infection (or inactive TB) and TB disease. If not treated properly, TB disease can be fatal.



## The Difference Between Inactive TB and Active TB Disease

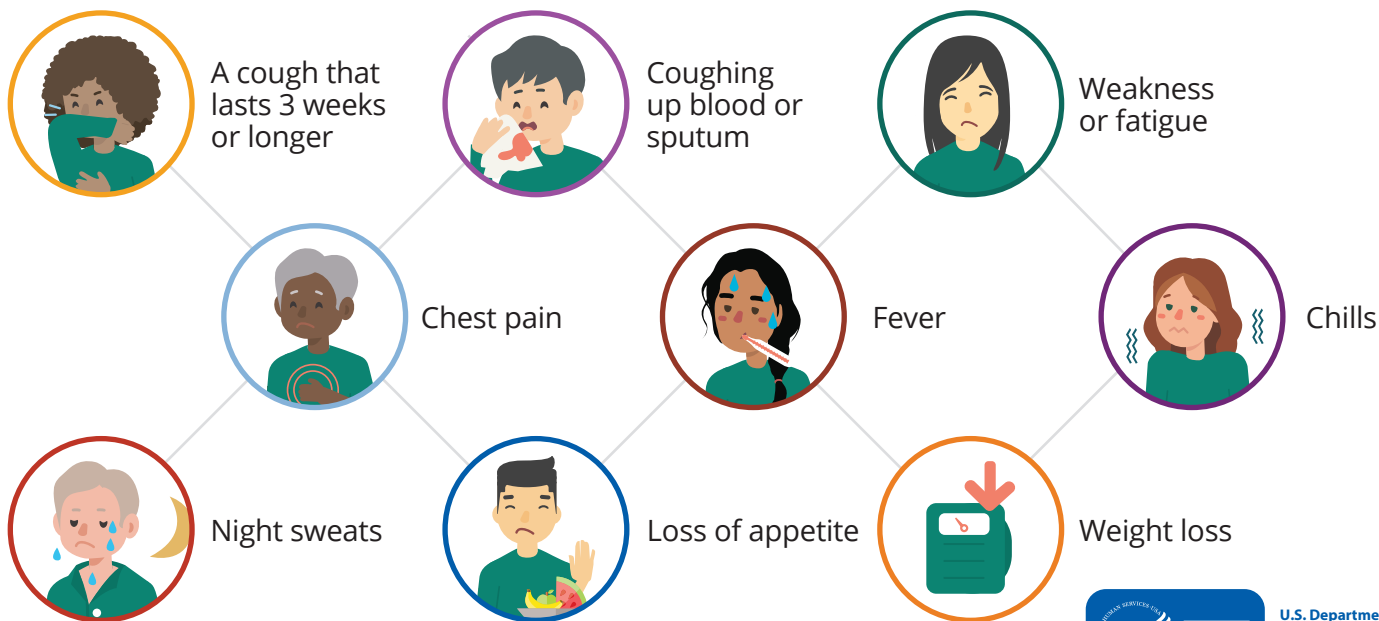
### A Person With Inactive TB

- Has a small amount of TB germs in their body that are alive but inactive.
- Has no symptoms and does not feel sick.
- Cannot spread TB germs to others.
- Usually has a positive TB blood test or TB skin test indicating TB infection.
- Has a normal chest x-ray and a negative sputum smear.
- Needs treatment for inactive TB to prevent active TB disease.

### A Person With Active TB Disease

- Has a large amount of active TB germs in their body.
- Has symptoms and feels sick.
- May spread TB germs to others.
- Usually has a positive TB blood test or TB skin test indicating TB infection.
- May have an abnormal chest x-ray, or positive sputum smear or culture.
- Needs treatment for active TB disease.

**If your body cannot stop TB germs from growing, you develop active TB disease. Symptoms of active TB disease include:**



U.S. Department of Health and Human Services  
Centers for Disease Control and Prevention

## Testing for TB



Getting tested and treated for TB can protect yourself, your family and friends, and your community. There are two types of tests for TB infection: the **TB blood test** and the **TB skin test**.

### **+** A Positive Test For TB Infection

You have TB germs in your body. Your doctor will do other tests to determine if you have inactive TB or active TB disease. These tests may include a chest x-ray, and a test of the sputum you cough up.

### **-** A Negative Test For TB Infection

A negative test means you likely do not have inactive TB or active TB disease.

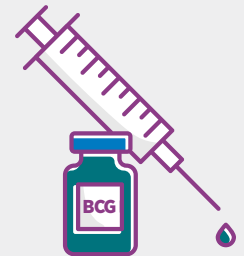
#### **Your doctor may do more tests if:**

- You have symptoms of active TB disease, like coughing, chest pain, fever, weight loss, or tiredness.
- You have HIV infection.
- Your exposure to TB germs was recent.

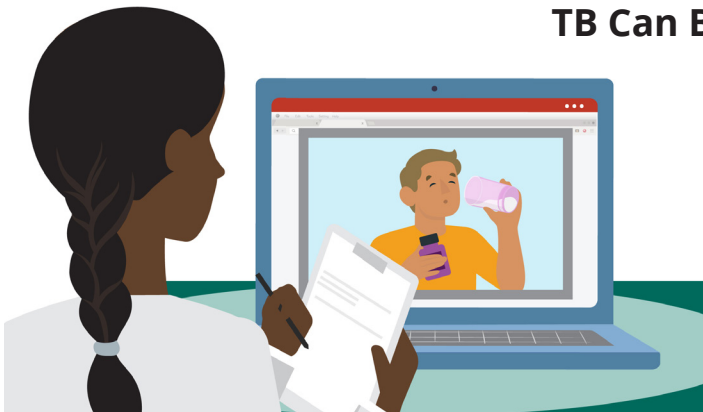
## Tell Your Doctor if You Received a TB Vaccine

TB blood tests are the preferred test for people who have received the bacille Calmette-Guérin (BCG) TB vaccine. Unlike the TB skin test, TB blood tests are not affected by BCG vaccination.

Many people born outside of the United States have received the BCG TB vaccine. BCG vaccination does not completely prevent people from getting TB. A positive reaction to a TB skin test may be due to the BCG vaccine itself or due to infection with TB germs.



## TB Can Be Treated



TB germs can live in your body for years without causing symptoms. If you have inactive TB, treating it is the best way to protect you from getting sick with active TB disease.

If you have been diagnosed with active TB disease, you can be treated with medicine. You will need to take and finish all of your TB medicine as directed by your doctor or nurse. This is to help you feel better and prevent other people from getting sick.

The best way to remember to take your medicines for active TB disease is by receiving directly observed therapy (DOT). Through DOT, you will meet with a health care worker every day or several times a week either in-person or virtually. The health care worker will make sure that the TB medicines are working as they should.

# How and When to Use Naloxone for an Opioid Overdose

Naloxone saves lives because it can quickly restore normal breathing to a person whose breathing has slowed or stopped as a result of overdosing on prescription opioid medications, heroin, or drugs that are adulterated and contaminated with an opioid like fentanyl (e.g., cocaine, methamphetamine).<sup>1</sup>



## What are the signs of an opioid overdose?

During an overdose, a person's breathing can be dangerously slowed or stopped, causing brain damage or death. It's important to recognize the signs and act fast, even before emergency workers arrive. Signs of an overdose may include:<sup>2,3</sup>

- Small, constricted "pinpoint pupils"
- Limp body
- Falling asleep or loss of consciousness
- Slow, shallow breathing
- Choking or gurgling sounds



Naloxone (Narcan®) temporarily reverses the effects of overdose from drugs made from opium or opioids, including:<sup>1</sup>

- heroin
- morphine
- oxycodone (OxyContin®)
- methadone
- fentanyl
- hydrocodone (Vicodin®)
- codeine
- hydromorphone
- buprenorphine

**If you give naloxone to a person who has not taken an opioid medicine, it will not hurt them.**<sup>1</sup> To learn about training on how to give naloxone, visit [getnaloxonenow.org](https://www.getnaloxonenow.org).

## Side effects of naloxone

Naloxone can (but does not always) cause withdrawal symptoms, unpleasant physical reactions, when an individual stops using a substance that they depend on. Withdrawal symptoms may be uncomfortable but are not life-threatening.<sup>1</sup>

Withdrawal symptoms may include:

- Fever
- Nausea
- Feeling restless or irritable
- Fast heart rate
- Sweating
- Vomiting
- Shaking

## What to do if you think someone has overdosed on opioids

1. Call 911 immediately.
2. Give naloxone as quickly as possible, if available. Do not wait for emergency workers to arrive before giving naloxone.
3. Try to keep the person awake and breathing.
4. Lay the person on their side to prevent choking.
5. Stay with the person until emergency workers arrive.
6. Naloxone is a temporary treatment. More than one dose might be needed under some circumstances, especially if an overdose event involves illicitly manufactured fentanyl and fentanyl-related substances.<sup>4</sup>

**Remember, naloxone is a safe medicine. By carrying naloxone, you can save a life.<sup>5</sup> After naloxone is used or if it is expired, make sure to let your clinician or pharmacist know so you can get more.**



For more information and resources on naloxone, visit [cdc.gov/overdose-prevention/hcp/toolkits/naloxone](https://www.cdc.gov/overdose-prevention/hcp/toolkits/naloxone), and for drug overdose prevention, visit [cdc.gov/overdose-prevention](https://www.cdc.gov/overdose-prevention).

<sup>1</sup><https://www.drugabuse.gov/publications/drugfacts/naloxone>

<sup>2</sup><https://www.samhsa.gov/medication-assisted-treatment/medications-counseling-related-conditions/opioid-overdose>

<sup>3</sup><https://harmreduction.org/issues/overdose-prevention/overview/overdose-basics/recognizing-opioid-overdose/>

<sup>4</sup><https://store.samhsa.gov/sites/default/files/d7/priv/sma18-4742.pdf>

<sup>5</sup><https://www.hhs.gov/surgeongeneral/priorities/opioids-and-addiction/naloxone-advisory/index.html>