



NORTHEAST  
KINGDOM  
**HUMAN**  
SERVICES

*We're all about **being human.***

# Consumer Guide

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YOUR GUIDE TO SERVICES AT NKHS



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This Consumer Guide was created to help you become familiar with the programs, practices, and services of Northeast Kingdom Human Services (NKHS). More detailed information regarding specific agency policies is available upon your request. You will learn more about our procedures and practices as you meet with our staff, and your provider may also give you additional information.

## Agency Overview

### **Our Mission:**

To empower individuals, families, and communities by promoting hope, healing, and support.

### **Our Vision:**

To be leaders in rural health and human services by offering programs that are innovative, flexible, and comprehensive.

### **Our Values:**

**Leadership:** We have a clear vision for where we are going and how we are going to get there.

**Trust:** We build trust through honesty and consistency.

**Creativity:** We inspire imagination and innovation by breaking down barriers and encouraging collaboration.

**Community:** We promote and build "healthy" and "vibrant" communities.

**Integrity:** We do what is right and deliver what we promise.

**Excellence:** We strive to exceed expectations.

**Passion:** We care for an individual, organization, and community.

**Advocacy:** We promote the interests of individuals and communities we serve.

***St. Johnsbury Office: 2225 Portland Road St. Johnsbury, VT***

***PO Box 368 St. Johnsbury, VT 05819***

***(802) 748-3181 toll free - 800-649-0118***

***Derby/Newport Office: 181 Crawford Road Derby, VT***

***PO Box 724 Newport, Vermont, 05855***

***(802) 334-6744 toll free – 800-696-4979***

***General Information (802) 334-6744***

## **Who We Serve**

Over 500 employees provide case management, community and home supports, residential care, psychiatry, medication management, individual therapy, group therapy, vocational supports, school based counseling, emergency care, and respite services for 3400+ clients annually who may be challenged by conditions affecting mind, body, and spirit. We offer outreach and consultation services to communities, schools, and businesses in our service area. Crisis intervention services are available twenty-four hours a day every day of the year by contacting either the Derby or St. Johnsbury office. Services are provided regardless of an individual's ability to pay.

## **Client Access**

Our Client Access Teams are the trained receptionists willing and ready to help you or your loved ones when they walk in the door. They understand that the first visit may be overwhelming and intimidating. They are there to help make the process feel safe and welcoming. It is not easy to ask for help. At NKHS we understand, and we are here to support and assist and to make it easy.

At Northeast Kingdom Human Services, our Client Access Teams are the first faces you see when entering our buildings, and the first voices you hear when calling our offices. Nothing is more important than feeling welcomed upon a first visit, or a 100th visit – whether coming in the front door, or calling to speak with one of our receptionists. We pride ourselves on our Access Teams' professional, supportive, friendly, empathetic, and resourceful ways. We strive to make a difference in whether or not a first visit or phone call will lead to a second. The Team is passionate about our mission. The simple kindness and a helping hand on the front end can make such a difference in someone's life. Knowing that this team could very well mean the difference between someone pursuing services at NKHS or opting out is, in itself, an incentive to provide a customer service model that is second to none! Whether coming in to do registration paperwork, scheduling an appointment with one of our clinicians, looking to speak with a case manager, or coming into the office for an interview in pursuit of employment with NKHS...the Client Access Team is here and ready to welcome you!

# Intellectual and Developmental Disability Services (IDDS)

The mission of the Division of Developmental Services is to help individuals with disabilities lead normal and complete lives and to be accepted, valued and contributing members of their families and communities. Helping all individuals live, work, and play as respected members of society not only allows for a higher quality of living overall, but it saves tax-payer dollars.

The Derby and St. Johnsbury offices provide comprehensive services to individuals with developmental/intellectual disabilities, Autism, and other pervasive developmental disorders. Our community-based services are individualized, flexible, and designed to assist people with disabilities live in their own homes and to be productive members of society.

## Eligibility for Services

There are three eligibility criteria that an individual must meet to receive any Developmental Disabilities (DD) services:

- 1) Residency:** Be a resident of Vermont. This means being physically present in Vermont with the intention to remain in Vermont and to make one's home in Vermont (in the case of a child, at least one custodial parent shall be a resident of Vermont.)
- 2) Financial:** Be found eligible for Medicaid or private pay if other areas of eligibility are met.
- 3) Clinical:** Be found eligible based on diagnosis of having a developmental disability. The Designated Agency arranges for clinical eligibility determination.

Personal support and case management services assist individuals with personal care and safety, skill development, vocational support, personal choice, and self-determination. Staff provides eligibility determination, individualized life planning, information and referral, family support, and resource allocation. Staff focus on building natural supports for individuals with disabilities.

## **Home and Community Based Services (HCBS)**

The primary funding source for adults with developmental disabilities is home and community-based services (HCBS) funded under the Global Commitment to Health Medicaid Waiver. HCBS services are tailored to the individual's specific needs and based on an individualized budget and person-centered plan.

### **Clinical Services**

Clinical Services include assessment, therapeutic, medication or medical services provided by clinical or medical staff. These services are medically necessary clinical services that cannot be accessed through the Medicaid State Plan.

### **Community Supports**

Community Supports assist individuals to develop skills and social connections and may include teaching and/or assistance in daily living, support to participate in community activities, and building and sustaining healthy personal, family, and community relationships.

### **Crisis Services**

Crisis Services are time-limited, intensive, supports provided for individuals who are currently experiencing, or may be expected to experience, a psychological, behavioral, or emotional crisis.

### **Home Supports**

Home Supports provide services, supports, and supervision for individuals in and around their residences up to twenty-four hours a day, seven days a week (24/7). Services include the assistance and resources to improve and maintain opportunities and experiences for individuals to be as independent as possible in their home and community. Home support settings may be in the home of a shared living provider or a home that is staffed by a service provider (see below) on a full-time basis. Supports may also be provided in the person's own home.

### **Staffed Homes**

Staffed Homes are specialized residences for one or two individuals who require significant support to help manage their emotional, behavioral, and/or medical needs. Staffed homes provide individualized supports, by trained agency staff, twenty-four hours per day.

## **Residential Care Home/Therapeutic Community Residences**

Residential Care Homes/Therapeutic Community Residences are state licensed group living arrangements designed to meet the needs of people who cannot live independently and, often, require a greater level of care and support than can typically be provided through other home support options. Despite the group setting, services are provided to meet each individual's specific needs and may include help managing medical issues, emotional and behavioral supports, and/or assistance with daily activities such as eating, walking, toileting, bathing, and dressing. Residential Care Homes and Therapeutic Community Residences provide nursing oversight and, under certain conditions, may be able to provide a nursing home level of care.

## **Respite Support**

Respite Support assists family members and home providers to help support individuals with disabilities who live with them. Supports are provided on a short-term basis because of the absence of or need for relief of those persons normally providing the care to individuals.

## **Service Coordination**

Service Coordination assists individuals in planning, developing, choosing, gaining access to, coordinating, and monitoring the provision of needed services and supports for a specific individual. Representative Payee services are also available on a case by case basis.

## **Supported Employment**

Supported Employment provides a full range of services which enable transition age youth and adults with disabilities to access and succeed in competitive employment of their choosing.

## **Flexible Family Funding**

Flexible Family Funding for eligible families of adults and children with developmental disabilities helps pay for any legal good or activity that the family chooses, such as respite, assistive technology, home modification, individual and household needs, or recreational activities. These income-based funds, determined by a sliding scale, are used at the discretion of the family.

## **Targeted Case Management**

Targeted Case Management is a Medicaid state plan service that provides case management services to individuals who do not receive home and community based services (HCBS.)

## **The Bridge Program**

The Bridge Program provides support to families of children and young adults under age 22, who have developmental disabilities, to access and coordinate needed medical, educational, social, or other services.

## **Adult Family Care**

Adult Family Care is a 24-hour Home and Community Based Service shared living option for Vermont's Long-Term Care Medicaid Choices for Care (CFC) Program. This option is available through CFC to participants in the highest and high needs groups. Adult Family Care provides participants with person-centered supports in a home environment that is safe, family oriented, and designed to support autonomy and maximize independence and dignity. Adult Family Care services are provided in the residence of the Home Provider who provides care and support to no more than two people unrelated to the Home Provider.



# **Behavioral Health Services**

## **Adult Outpatient Program**

Our Adult Outpatient Program includes comprehensive assessment and evaluation and incorporates the use of standardized measures to support the clinician and consumer in identifying strengths and needs. Services are trauma informed, strengths based, and consumer driven. In addition to providing individual and family counseling and psychiatry, we also have collaborations with community partners to provide consultations, trauma evaluations, risk assessments and psychotherapy services.

NKHS' staff of professionals is dedicated to improving the quality of life for adults with serious mental illness or severe emotional disturbances, as well as for those who struggle with addictive disorders. NKHS provides a full continuum of care to adults in the community who are experiencing stressors of daily life, acute emotional distress, serious and persistent mental illness, and co-occurring substance use disorders. This support is offered through both outpatient and community-based services and is tailored to each adult's needs. Adult Mental Health Services at NKHS include Community Rehabilitation Therapy (CRT), Outpatient Services, Substance Use, and Crisis Services. NKHS promotes the philosophy of individualized recovery through the care we offer our community members.

Adult outpatient mental health and substance abuse programs were integrated in 2008, in order to provide unified, holistic, and seamless access to assessment and treatment for people with co-occurring disorders. The overall objective of this integration was to provide best practices through co-occurring assessment, intervention, treatment, and recovery. This integration included forming one clinical team consisting of psychiatrists, psychiatric nurse practitioners, psychologists, social workers, dually licensed/co-occurring capable clinicians from Adult Outpatient, CRT, and Children's Services.

### **Agency and Community-based Services and Screenings:**

- Individual and group therapy
- Co-Occurring Counseling (Substance Abuse, Gambling and other disorders)
- Comprehensive co-occurring assessment on all adult outpatient clients including placement criteria
- Dialectical Behavior Therapy (DBT), stress management, anger management, and Seeking Safety groups
- Intensive Outpatient Program
- Psychological evaluations on a referral basis
- Psychiatry on a referral basis
- Medication evaluation, management, and consultation with primary care physicians and hospitals on a referral basis

- Eldercare community and office care
- Correctional services – offender re-entry, SFI, and Family Treatment Court
- Impaired Driver Rehabilitation Program
- Rocking Horse Program- Parenting class geared for parenting and pregnant women
- Public Inebriate assessment and diversion bed
- Reach Up case management and therapy

## **Elder Care**

NKHS Eldercare program serves homebound people over 65 or younger, if disabled, and homebound. We offer an in person or virtual assessment and follow up visits to address mental health and/or substance use issues and case management needs.

Referrals to the Elder Care program come from the Council on Aging, the VNA, hospitals, primary care physicians, and directly from clients and families. Our staff help address issues of self-neglecting behaviors, hoarding, isolating behaviors, depression, anxiety or stress, and other mental health related symptoms.

## **Reach Up**

The Reach Up Service Coordinator works with the State of Vermont Reach Up Program as well as other outside agencies such as NECKA, Umbrella, and other community partners depending on the individual's needs. Service Coordination is based on individual goals and can be flexible to assist the person in reaching their goal of independence.

Referrals for Reach Up are received from Economic Services. Reach Up assistance can also provide minimal financial assistance to families who meet identified income levels. Reach Up case managers help participants set goals that will one day enable them to no longer need the Reach Up assistance, being able to provide for their families on their own.

## **Impaired Driver Rehabilitation Program (IDRP)**

If you are convicted of driving under the influence in the state of Vermont you must complete the Impaired Driver Rehabilitation Program (IDRP) to reinstate your privilege to drive. The State of Vermont utilizes Prime for Life as its educational program.

### **To register for IDRP or for more information**

You may sign up for Weekend IDRP by:

- Calling (802)-748-3181
- Visit our website [nkhs.org](http://nkhs.org)

If it is determined that treatment is required, you will complete a treatment program with a licensed counselor. The IDRP program evaluator will provide additional information about the process and requirements at your intake evaluation.

Other requirements or suspensions may need to be satisfied before your privilege to drive can be reinstated. In these instances, contact the Vermont Department of Motor Vehicles (DMV) at 802-828-2050.

If you received your DUI in another state, you must check with them to see if they will accept Vermont's program.

## **Emergency Services**

At NKHS, we offer services around the clock, 365 days per year. We have emergency services teams and specialty teams who are on call and ready to assist in individual or community wide crises. These screeners evaluate people in crisis in the office, at local hospitals and in clients' homes. When screeners evaluate a person in crisis, offering the least restrictive environmental aspects while keeping the individual and community safe are a priority. The client's own natural supports are incorporated into a safety plan. When the person and/or family members require additional support, the NKHS Cadre Team can assist directly in the home. Some of the NKHS Cadre team are able to provide peer-support through their own lived and shared experiences. Peer Support and WRAP (Wellness Action Recovery Plans) are integral to our care plans and supporting the whole individual in an empowering, respectful way.

NKHS Emergency Services provides immediate assistance to individuals in crisis 24 hours a day. Our clinicians respond to all calls as requested. NKHS Emergency Services also helps arrange more intense levels of care as needed, such as a hospital or short-term crisis bed.

## **Enhanced Emergency Services**

Enhanced Emergency Services employs full-time Mental Health Crisis Specialists working alongside Vermont State Police. These positions are able to respond directly with state police, providing immediate support to the community and law enforcement, and increasing collaboration between the two responders' roles.

## **CARE Bed**

The CARE Bed is a two-bed crisis unit with 24-hour staffing, seven days a week, now in its 15th year of operation. There is one staff person to two clients but can accommodate a one-to-one capacity, if needed. The CARE Bed provides an alternative to hospitalization or a step-down option, if appropriate, for clients in a mental health crisis, and its overall mission is to serve and retain clients within their own community.

## **The National Suicide Prevention Lifeline 1-800-273-TALK or 988**

The National Suicide Prevention Lifeline is a national network of local crisis centers that provides free and confidential emotional support to people in suicidal crisis or emotional distress 24 hours a day, seven days a week. NKHS and the Lifeline are committed to improving crisis services and advancing suicide prevention by empowering individuals, advancing professional best practices, and building awareness.

Effective July 16, 2022, **988** became the new three-digit dialing code that routes callers, texts and chats to the National Suicide Prevention Lifeline. When people call, text, or chat 988, they will be connected to trained counselors that are part of the existing National Suicide Prevention Lifeline network. These trained counselors will listen, understand how your problems are affecting you, provide support, and connect you to resources if necessary.

*The Lifeline phone number (1-800-273-8255) will always remain available to people in emotional distress or suicidal crisis.*



## **Community Rehabilitation and Treatment (CRT)**

The CRT program is designed to serve consumers who suffer from severe and persistent mental illness. The role of CRT staff is to assist consumers with day-to-day functions in an effort to facilitate community reintegration and increase independence. It is CRT's mission to fully support consumers in the community, while serving as ambassadors for addressing and breaking down stigma of mental illness. CRT staff are often crucial liaisons between the consumer and a variety of community partners such as primary care doctors, family members, landlords, etc. This effort helps the consumer to achieve a higher level of holistic health and functioning. The CRT program works to create bridges between the consumer and the community as a whole in an effort to improve quality of life and increase independence for each consumer served.

## **CRT Eligibility for Services**

Adults who are eligible for Community Rehabilitation and Treatment (CRT) are defined as individuals 18 years of age or older with schizophrenia, other psychotic disorders, and seriously debilitating mood disorders, who meet *each* of the following three criteria.

1. Mental Health Diagnosis - A person must have a qualifying mental health diagnosis such as schizophrenia, other psychotic disorder, or seriously debilitating mood disorders.
2. Treatment History - A person must have a need for substantial treatment supports.

3. Functional Status - Qualification requires functional impairment in social, occupational, or self-care skills as a result of the eligible mental health disorder.

***For more details on eligibility and qualifications, please contact NKHS at (802) 748-3181 or (802) 334-6744***

The Community Rehabilitation Treatment (CRT) program provides comprehensive community-based support services and assists adults that have been diagnosed with a serious mental illness. Symptoms may be substantially disabling, and long-term or short-term. The CRT program helps individuals and their families to develop skills and supports important to living the life they want for themselves.

The CRT team applies supports the PACT Model (Program of Assertive Community Treatment) as well as DBT (Dialectical Behavioral Therapy) informed case management, and the Supported Employment model.

The following services are offered:

- Service Planning and Coordination
- Community Support and Integration (individual and groups)
- Representative Payee
- Housing Support and Coordination
- Psychiatric assessment and medication management
- Wellness Recovery Action Plan (WRAP) services and additional peer supports
- Crisis Supports
- Family-based Intervention/Supports
- Physical Health Coordination
- Wellness Activities
- Individual and Group Psychotherapy
- Employment Coordination and Support

## **Child, Youth, and Family Services**

Child, Youth, and Family Services provides comprehensive services based on assessment of the individualized and unique needs of children and families.

We strive to provide services that are strengths-based, family-driven, and trauma-informed.

These services include light to intensive case management, individual and family counseling, psychiatry, crisis intervention, respite, community skills, transitional services, consultation, education, and training.

### **Child, Youth, and Family Support and Stabilization**

The Child, Youth, and Family Support and Stabilization Department consists of the following programs to meet the specialized needs of individuals and families. These programs are comprised of targeted services that support children and their families, to achieve positive outcomes, and promote healing - Early Childhood Program (CIS), Home and Community Support and Stabilization Program, and Outpatient Program.

#### **Early Childhood Program**

Early Childhood Program includes our involvement, as a community partner, in the State of Vermont's approach to support services - Children's Integrated Services (CIS). CIS encompasses four components including Maternal Health Nursing and Family Support, Early Child Family Mental Health, Early Intervention, and Specialized Child Care Services.

#### **Home and Community Support and Stabilization Program**

Home and Community Support and Stabilization Program works with ages six through 21 and provides trauma-informed, strengths based, and consumer-driven care to youth and their families. Services are provided in the home, in the community, and in office settings, and include individualized and comprehensive assessment and evaluation, intensive case management, community skills, respite, crisis intervention, education and training, and consultation and referral.

NKHS works with other partners – including pediatrician offices and the Department of Children and Families (DCF).

## **The School Based Services Department**

The School Based Services Department is comprised of a number of clinicians and case managers that work collaboratively with our schools to provide services to youth in a school setting. These services include:

### **School Based Services Program**

This program provides trauma-informed case management and counseling services in a variety of school settings. Services address the social and emotional needs of youth, and work toward building resiliency, strengthening efficacy, and building skills for addressing any identified mental health needs.

### **Behavior Intervention (BI) Program**

This program offers services to school-aged youth with emotional/behavioral disorders, developmental trauma, Autism Spectrum disorders, other mental health needs, and/or developmental or learning disabilities with significant social and behavioral needs. The program works collaboratively with schools, families, and communities to provide the best therapeutic support each child needs to be successful. BI staff provide children with strength-based and positive behavioral programming that creates the opportunity for skill building needed to be self-sufficient and contributing members of their school and general communities.

# Information Disclosure

## **Consent and Agreement to the Use and Disclosure of Protected Health Information (PHI) for Treatment, Payment or Healthcare Operations (TPO)**

I understand that as part of my care, Northeast Kingdom Human Services (NKHS) originates and maintains records describing my health history, symptoms, examination and test results, diagnoses, treatment, and any plans for future care or treatment. I understand that this information serves as:

- A basis for planning my care and treatment
- A means of communication among the professionals who contribute to my care
- A source of information for applying my diagnosis and information to my bill
- A means by which a third-party can verify that services billed were actually provided
- And a tool for routine healthcare operations such as assessing quality, reviewing the competence of health care professionals and the services that are offered and for performing specially approved research studies.

I understand that NKHS is a Designated Agency by the Secretary of the Vermont Agency of Human Services (AHS) and that AHS may access my health information as necessary to fulfill its legal responsibilities under Vermont Law. I have been provided with a Notice of Privacy Practices that provides a more complete description of information uses and disclosures (release of, or access to, your information). I understand that I have the right to review the notice prior to signing this consent. I understand that NKHS reserves the right to change their notice and practices. However, prior to a material change taking effect, NKHS will publish an announcement of the change at every Agency facility and on its website.

I understand that my records are subject to confidentiality imposed by state and federal regulations. I also understand that alcohol and drug abuse client records are protected by 42CFR part 2, and that records may not be released or disclosed without my written consent unless otherwise provided for in the regulations.

I understand that NKHS may transfer my health information to other treatment providers electronically, and that NKHS may also be making my information available through Vermont's health information exchange to treating providers to whom I've provided consent.

By signing this form, I consent to NKHS' use and disclosure of protected health information about me (1) for treatment, payment, and health care operations consistent with NKHS' Notice of Privacy Practices and (2) for the purpose of fulfilling AHS' responsibilities as granted and permitted under Vermont law. I understand that I may revoke this consent in writing, except to the extent that NKHS has already taken action based upon my prior consent.



## **Notice of Privacy Practices**

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully. If you have any questions about this notice, please contact our Privacy Officer at (802) 334-6744.

### ***WHO WILL FOLLOW THIS NOTICE***

This notice describes the practices of Northeast Kingdom Human Service (NKHS) and that of:

- Any health care professional authorized to enter information into your health record.
- All divisions and programs of NKHS.
- Any volunteer we allow to help you while you are receiving services from NKHS.
- All employees, staff and other personnel.
- All NKHS entities, sites, and locations follow the terms of this notice. Staff members at these entities, sites, and locations may share health information with each other for treatment, payment, or operations purposes as described in this notice.

### ***OUR PLEDGE REGARDING HEALTH INFORMATION***

We understand that health information about you and your health is personal. We are committed to protecting your privacy and health information about you. We create a record of the care and services you receive at NKHS. We need this record to provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care generated by NKHS, whether made by NKHS personnel or your personal doctor. Your personal doctor may have different policies or notices regarding the doctor's use and disclosure of your health information created in the doctor's office or clinic.

This notice will tell you about the ways in which we may use and disclose health information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of health information.

We are required by law to:

- Make sure that health information that identifies you is kept private;
- Give you this notice of our legal duties and privacy practices with respect to health information about you;
- Follow the terms of the notice that is currently in effect;
- Notify you following a breach of your protected health information; and
- Comply with any state law that is more stringent or provides you greater rights than this notice.

## ***HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU***

The following categories describe different ways that we use and disclose health information. For each category of uses or disclosures we will explain what we mean and try to give some examples. Not every use or disclosure in a category will be listed.

**For Treatment.** We may use or disclose health information about you to provide you with treatment or services. This includes the potential sharing of information about you to doctors, nurses, clinicians, case managers, interns, or other NKHS personnel, or to people outside of NKHS who are involved in your care. For example, a clinician might be treating you for a mental health problem and need to talk with one of our psychiatrists or another clinician who has specialized training in a particular area of care. We may also disclose information about you to people outside NKHS who are involved in your health care.

**Electronic Exchange of Your Health Information.** In some instances, we may transfer health information about you electronically to other health care providers who are providing you treatment or to the insurance plan providing payment for your treatment. Your health information may also be made available through the Vermont Health Information Exchange (VHIE). The VHIE is a health information network operated by Vermont Information Technology Leaders (VITL), Inc. and your treating health care providers may only access your health information through the VHIE if you have provided specific written consent for their access, unless you are in need of emergency treatment. For information about the VHIE, see [www.vitl.net](http://www.vitl.net).

**For Payment.** We may use and disclose health information about you so that the treatment and services you receive at NKHS may be approved by, billed to, and payment collected from a third party such as an insurance company. For example, we may need to give your health plan information about counseling you received at NKHS so your health plan will pay us or reimburse you for a counseling session. We may also tell your health plan about a treatment you are going to receive to obtain prior approval or to determine whether your plan will cover the service/ treatment.

**For Health Care Operations.** We may use and disclose health information about you for NKHS operations. These uses and disclosures are necessary to run NKHS and make sure that all individuals receiving services from us receive quality care. For example, we may use health information to review our treatment and services and to evaluate the performance of our staff in serving you. We may also combine health information about many consumers to decide what additional services we should offer, what services are not needed, and whether certain new treatments are effective. We may also disclose information to doctors, nurses, clinicians, case managers, interns, and other NKHS personnel for review and learning purposes.

We may also combine the health information we have with health information from other mental health agencies to compare how we are doing and see where we can make improvements in the services we offer. We will remove information that identifies you from this set of health information so others may use it to study health care and health care delivery without learning who the specific consumers are.

NKHS is a Vermont designated Community Mental Health Agency and is obligated under our contracts with various departments within the Vermont Agency of Human Services to provide certain services. As a result, these departments may access health information related to these contracted services for the purpose of obtaining treatment for clients, or for making payment, or for its health care operations.

**Appointment Reminders.** We may use and disclose information to contact you as a reminder that you have an appointment.

**Alternative Treatment and Benefits and Services.** We may use and disclose information about you in order to obtain and recommend to you other treatment options and available services as well as other health-related benefits or services.

**Fundraising Activities.** Should the need arise where information about you or where your participation is desired for NKHS' fundraising activities, NKHS would obtain your authorization. No information would be released for this purpose without your authorization

**Research.** Under extremely limited circumstances, we may use and disclose health information for research purposes. For example, a research project may involve comparing the health and recovery of all consumers who received one medication to those who received another, for the same condition. All research projects are subject to a special approval process. This process evaluates a proposed research project and its use of health information, trying to balance the research needs with consumer's need for privacy of their health information. Before we use or disclose health information for research, the project will have been approved through this research approval process. We may, however, disclose health information about you to people preparing to conduct a research project; for example, to help them look for consumers with specific health needs, so long as the health information they review does not leave NKHS. We will always ask for your specific permission if the researcher will have access to your name, address, or other information that reveals who you are, or will be involved in your care at NKHS.

**As Required by Law.** We will disclose medical information about you when required to do so by federal, state, or local law. In Vermont, this would include: victims of child abuse; the abuse, neglect, or exploitation of vulnerable adults; or where a child under the age of sixteen is a victim of a crime; and firearm-related injuries. Under certain circumstances, the Departments within the Vermont Agency of Human Services who we

contract with are mandated to access health information in order to carry out their responsibilities.

**To Avert a Serious and Imminent Threat to Health or Safety.** We may use and disclose health information about you when necessary to prevent a serious and imminent threat to your health and safety or the health and safety of the public or another person. Any disclosure, however, would only be to someone able to help prevent the threat.

### ***SPECIAL SITUATIONS***

**Military and Veterans.** If you are a member of the armed forces, we may release health information about you as required by military command authorities.

**Workers' Compensation.** We may release health information about you as authorized for workers' compensation or similar programs as authorized by Vermont law. These programs provide benefits for work-related injuries or illnesses.

**Public Health Risks.** We may disclose health information about you for public health activities. These activities generally include the following:

- To prevent or control disease, injury, or disability;
- To report deaths;
- To report child abuse or neglect;
- To report abuse, neglect, or exploitation of vulnerable adults; any suspicion of abuse, neglect, or exploitation of the elderly (age 60 or older), or a disabled adult with a diagnosed physical or mental impairment, must be reported;
- To report reactions to medications or problems with products;
- To notify individuals of recalls of products they may be using;
- To notify an individual who may have been exposed to a disease or may be at risk for contracting or spreading a communicable disease or condition.

**Health Oversight Activities.** We may disclose health information to a health oversight agency, such as the Vermont Agency of Human Services Departments who we contract with, for activities authorized by law. These oversight activities include, but are not limited to, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws.

**Legal Proceedings and Disputes.** If you are involved in a lawsuit or a dispute, we may disclose health information about you in response to a court order.

**Public Health Officials and Funeral Home Directors.** We may release information to a coroner or medical examiner. This may be necessary, for example, to identify a

deceased person or determine the cause of death. We may also release health information to funeral directors thereby permitting them to carry out their duties.

**Individuals in Custody.** If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release health information about you to the correctional institution or law enforcement official pertaining to care provided while you are in custody. This release would be necessary (1) for the institution to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.

### ***USES OF HEALTH INFORMATION REQUIRING WRITTEN AUTHORIZATION***

Other uses and disclosures of health information not covered by this notice or the laws that apply to us, will be made only with your written authorization. Examples of this may include disclosures to lawyers, employers, the Vermont Office of Disability Determination Services or others who you know, but who are not involved in your care. Additionally, uses and disclosures of protected health information for our fundraising activities, marketing purposes, and disclosures that constitute a sale of protected health information require authorization. Also, psychotherapy notes maintained by your treating provider can only be disclosed with your written authorization. If you provide us permission to use or disclose health information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose health information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of the services that we provided to you.

### ***YOUR RIGHTS REGARDING INFORMATION ABOUT YOU***

Any assistance (physical, communicative, etc.) you need to exercise your rights will be provided to you by NKHS. You have the following rights regarding information we maintain about you:

**Right to Review and Copy.** You have the right to review and copy health information that may be used to make decisions about your care. This may include both health and billing records.

To review and copy health information that may be used to make decisions about you, you must submit your request in writing to our Records Department. If you request a copy of the information, we may charge a fee for the costs of copying, mailing, or other supplies associated with your request. If you seek an electronic copy in a specific form or format of any portion of your electronic health record, and NKHS is unable to readily

produce the copy in that form or format, we will work with you to provide an alternative form or format for the electronic copy.

We may deny or limit access to your request to inspect and copy in certain very limited circumstances. If you are denied or limited access to health information, you may request that the decision be reviewed. Another health care professional chosen by NKHS will review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.

**Right to Amend.** If you feel that health information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for NKHS.

To request an amendment, your request must be made in writing and submitted to our Records Department. In addition, you must provide a reason that supports your request. We may deny your request for an amendment if it is not in writing or does not include a reason to support that request. In addition, we may deny your request if you ask us to amend information that:

- Was not created by us, unless the person or entity that created the information is no longer available to make the amendment;
- Is not part of the designated record set kept by or for NKHS;
- Is not part of the information which you would be permitted to inspect and copy; or,
- Was determined accurate or complete by NKHS.

**Right to an Accounting of Disclosures.** You have the right to request an "accounting of disclosures." This is a list of the disclosures we made of health information about you which were required by law and/or were not authorized by you.

To request this list or accounting of disclosures, you must submit your request in writing to our Records Department. Your request must state a time period, which may not be longer than six years. Your request should indicate in what form you want the list (for example, on paper, electronically). The first list you request within a 12-month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred.

**Right to Request Restrictions.** You have the right to request a restriction or limitation on the health information we use or disclose about you for treatment, payment, or health care operations. We are not required to agree to your request

unless your request is to limit disclosures to a health plan for the purpose of carrying out payment or health care operations that are not otherwise required by law and you or someone on your behalf other than your health plan has paid for those services in full at the time the health services are provided. However, if we do agree, we will comply with your request unless the information is needed to provide you emergency treatment.

You also have the right to request a limit on the health information we disclose about you to someone who is involved in your care or the payment for your care, like a family member. For example, you could ask that we not use or disclose information about a counseling session you received.

To request restrictions, you must make your request in writing to our Records Department. In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure, or both; and (3) to whom you want the limits to apply, for example, disclosures to your spouse.

**Right to Request Confidential Communications.** You have the right to request that we communicate with you about health matters in a certain way or at a certain location. For example, you can ask that we only contact you at work or by mail. To request confidential communications, you must make your request in writing to our Records Department. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

**Right to a Paper Copy of This Notice.** You have the right to a paper copy of this notice. You may ask us to give you a copy of the current notice at any time. To obtain a paper copy of this notice, contact the NKHS Privacy Officer at (802) 334-6744.

**Security of Health Information.** We have in place appropriate safeguards to protect and secure the confidentiality of your health information. Due to the nature of community based human service practices, NKHS representatives may possess your health information outside of NKHS. In these cases, NKHS representatives will ensure the security and confidentiality of the information in a manner that meets NKHS policy, State and Federal Law.

**Specific requirements for electronic notice.** A covered entity that maintains a web site, which provides information about the covered entity's customer services or benefits, must prominently post its notice on the web site and make the notice available electronically through the web site.

## ***CHANGES TO THIS NOTICE***

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for health information we already have about you as well as any information we receive in the future. We will post a copy of the current notice in all NKHS facilities. The notice will contain an effective date. Should we make a material change to this notice, we will, prior to the change taking effect, publish an announcement of the change at every NKHS facility.

## ***COMPLAINTS***

If you believe your privacy rights have been violated, you may file a complaint with NKHS or with the Secretary of the Department of Health and Human Services. To file a complaint with NKHS, call (802) 334-6744 or (802) 748-3181 and ask to speak with our Compliance Officer. Complaint forms are available at each location including the reception area at NKHS' main offices. You also have the right to file a verbal complaint. You will not be penalized for filing a complaint.

The Secretary of the Department of Health and Human Services can be contacted through their regional office at Office of Civil Rights, U.S. Department of Health and Human Services, Government Center, J.F. Kennedy Federal Building - Room 1875, Boston, Massachusetts 02203, voice phone (800) 368 1019, fax (617) 565-3809, TDD (800) 537 7697.

***If you need help understanding NKHS' Notice of Privacy Practices,  
please contact the Privacy Officer at (802) 334-6744***



## **A Guide to Services at NKHS**

The purpose of this notice is to tell you about Northeast Kingdom Human Services and to answer some of the questions you may have about our services.

Northeast Kingdom Human Services is a private, non-profit community mental health center that provides services in the areas of mental health, intellectual /developmental disabilities, and substance abuse/addictions. We serve individuals and families in need throughout Caledonia, Essex, and Orleans Counties.

### **Your Rights as a Client**

We believe we can better assist you, if you are aware of your rights and responsibilities concerning decisions that affect your treatment.

#### ***Consumers shall have the following rights***

1. The basic civil and legal rights accorded all citizens.
2. The right to treatment regardless of race, creed, gender, gender identity, age, national origin, political belief, disability, sexual orientation, or infectious disease.
3. The right to a humane mental health treatment environment and freedom from abuse and punishment.
4. The right to receive prompt and adequate treatment, rehabilitation and/or psycho educational services appropriate to condition and provided according to commonly accepted professional standards.
5. The right to understand service and treatment options.
6. The right to participate in the development of treatment plans and, if requested, to include family, friends and significant others from an identified natural support network in the treatment discussion.
7. The right to exercise control over treatment plans, actions, decisions, wishes and requests, as would any other person of comparable age. Consumers will not be exposed to rules or regulations that are excessive or inappropriate.
8. The right to the least restrictive conditions necessary to achieve treatment gains. The consumer has the right not to be subjected to adverse treatment procedures without his/her expressed and informed consent or that of a legal guardian (if relevant.)

9. The right to be informed of condition and progress.
10. The right to have the NKHS treatment record and all information gained during treatment (written or oral) kept confidential, except where state law or court order requires disclosure.
11. The right to be free of unnecessary or excessive medication and to be informed of the effects and side effect of any medication prescribed by the NKHS staff.
12. The right to refuse medication with the following exceptions:
  - a. After a court hearing and final commitment orders.
  - b. If the consumer's behavior is such that it is necessary to use medication to prevent physical or emotional harm to the consumer or other persons in an emergency situation.
13. The right not to be subjected to external research without express and informed consent of the individual and/or their guardian. Consent given may be withdrawn at any time by either consumer or guardian.
14. The right to petition the court for review of any civil commitment order in accordance with the provision of the law.
15. The right to due process with regard to grievances.
16. The right to be informed in a manner consistent with the person's level of understanding of the rights specified herein. The consumer or guardian will acknowledge, in writing, receipt of this rights' information.
17. You have the right to know your therapist's qualifications and experience. You also have the right to have a list, provided by the Office of Professional Regulation, of specific practices that constitute acts of unprofessional conduct.

**We encourage clients** to know their rights, to ask questions, and to make suggestions about their treatment. In the event that you are not satisfied with some aspect of our services, we encourage you or your advocate to discuss this with your assigned staff or contact the Division Chief of the program in which your services are being provided. If you are not satisfied that the issues have been resolved, or are uncomfortable with the results, there is a grievance and appeal process available. The appropriate forms are available from the receptionist.

## **Your Responsibilities as a Client**

### ***Consumers shall have the following responsibilities***

1. You have a responsibility to give us complete information about your problems and pertinent circumstances.
2. You have a responsibility to play an active role in your treatment.
3. There are times when medication may be an appropriate treatment option. Medications are best used in conjunction with psychotherapy, as part of a medically supervised treatment plan. If medication is prescribed, you should be careful to follow the directions given. You have a responsibility to take medications prescribed, only as directed. Keep all medications out of the reach of children.
4. You have a responsibility to respect the confidentiality of other clients, and not to disclose to anyone outside Northeast Kingdom Human Services any information received in the course of participating in group, family, or couple treatment.
5. You are responsible to provide Northeast Kingdom Human Services with current and accurate insurance cards, or other verification of insurance, for photocopying or scanning.
6. You have a responsibility to pay your bill promptly.

### **Fees**

No one will be denied emergency treatment by Northeast Kingdom Human Services because of the inability to pay, based upon your provided financial information. However, clients who fail to fulfill their financial obligation to NKHS and request additional non-emergent care may not be approved for additional services until financial arrangements have been made.

It is the policy of the Board of Directors of Northeast Kingdom Human Services to maintain a secure and prudent financial operation in order to facilitate and support the rendering of quality mental health, intellectual/developmental health care and substance abuse/addictions services. Although partially supported by federal, state, and local sources, Northeast Kingdom Human Services is a private, non-profit organization receiving a substantial portion of revenue from the collection of fees for services provided to the community. Providing services costs money. To remain financially viable, Northeast Kingdom Human Services must collect reimbursement for services rendered.

## Collection of Fees

Every client seen at Northeast Kingdom Human Services will be responsible for co-pay and/or a portion of his/her charges for each date of service. The type of health insurance determines what the client will pay out-of-pocket for services.

At the time of service, reception personnel will collect all current co-pay or self-pay amounts, plus any outstanding self-pay balances from prior dates of service.

If a client has insurance coverage, the carrier will be billed for the charges. Clients that do not have health insurance coverage will be evaluated at intake for immediate eligibility for the sliding scale and/or given a Medicaid application. Acceptable proof of income is needed for submission to the Billing Department.

***If you find yourself with an outstanding balance, please contact our Billing Department to discuss possible payment arrangements.***

## Sliding Fee Scale

We have a limited amount of subsidy dollars to provide certain services to county residents who cannot afford to pay our full cost of service. You will need to keep these financial considerations in mind as you and your therapist plan your treatment. The sliding fee charged to the client is set using a standard percentage ranging from 15% to 100% of the standard charge. Gross household income and qualifying dependents will determine eligibility.

There are some circumstances where the sliding fee scale is not available and charges will be based on the full fee for services. These are:

1. When the client chooses not to use the mental health or intellectual and developmental disability service options available through his/her health insurance.
2. When the client does not inform Northeast Kingdom Human Services of insurance or changes to insurance in a timely manner.

Why do we ask for your gross annual income? We need this information to determine where your income/family size fall on our sliding fee scale. We use this sliding scale fee in the following scenarios:

- Consumer/client does not have insurance
- Consumer/client has not yet met their deductible
- Consumer/client's insurance coverage is interrupted

- When a service provided to a consumer/client is not covered by their insurance, such as Community Supports or Service Planning and Coordination, that can be face-to-face or on the telephone.

These services are not covered by most private insurance companies. These are services provided to assist individuals and their families with access to community supports and develop social skills necessary to improve overall function.

These services may include assisting individuals and families in coordinating and monitoring services and supports needed.

*If you have any questions about a balance due, or would like to discuss setting up a payment plan, we can arrange for you to speak with a representative from our Business Office.*

### **Payment Involving Mandated Services**

Northeast Kingdom Human Services will permit the use of the sliding fee scale in circumstances where services are mandated by an organization such as courts, schools, probation and parole, DCF, court diversion, etc. Reports that are required by the referral source (such as to verify that referral requirements or conditions have been met) may not be released until full payment of any balance is made.

### **Delinquent Accounts**

Monthly payments are required on all accounts. Clients with outstanding balances will receive monthly statements.

### **Appointments**

Initial appointments can be made by calling Northeast Kingdom Human Services in Newport, (802) 334-6744, or in St. Johnsbury, at (802) 748-3181. If you are more than fifteen minutes late to your appointment, your therapist may be unable to see you and may need to reschedule your appointment.

### **Missed Appointments**

Northeast Kingdom Human Services is invested in your well-being and believes it is important for you to be consistent in treatment so progress can be made towards your identified treatment goals. A missed appointment, without adequate notice, results in someone else having to wait longer for an appointment.

- Clients are expected to call 24 hours in advance if they cannot make a scheduled appointment.
- After the third late cancel/no show, the Agency may determine it necessary to cancel any standing future appointments with you.

- Your therapist may be directed to cancel individual treatment; however, you may be offered an alternative service such as group therapy. Emergency services will always remain available.

### **Authorizations for Release of Information**

Please be advised that any releases you have signed will remain valid until their original expiration dates, which are typically one year from the date you sign them, even after your case is closed, unless revoked in writing.

### **Permission to Conduct Follow-Up**

In order to evaluate our programs, NKHS periodically contacts individuals who have used our services. In order to assist with this evaluation, NKHS may contact you after leaving treatment by means of a mailed or electronic questionnaire. All applicable confidentiality protections will remain in effect.

### **Regular Office Hours**

Monday through Friday 8:30 am – 5:00 pm

Except on holidays

The 24-hour Emergency Phone Number in St. Johnsbury is (802) 748-3181; in Newport is (802) 334-6744.

Northeast Kingdom Human Services has a 24-hour per day emergency number for residents of Caledonia, Essex, and Orleans Counties who are experiencing a mental health crisis. When our offices are closed your call will be routed to an answering service. The operator will take your call and the NKHS Emergency worker will get in touch with you as quickly as possible.

## **Service Agreement**

This agreement is to assure that you understand the policies in effect at NKHS (Northeast Kingdom Human Services, Inc.). Your signature(s) on this form constitutes informed consent for assessment and other services offered by NKHS trained professional staff.

1. Accomplishing change during service provision is a mutual task. Both NKHS staff and you will work together to achieve an agreeable result.
2. During the course of service many issues may be important. Often subjects that may seem irrelevant will be discussed. Some issues that could possibly be dealt with include: personal adjustment, parenting skills, extended family, relationship difficulties, previous services, interests, marital adjustment, personal/family history, child rearing practices, hygiene, sexual adjustment, employment, living arrangements, employment history, health, nutrition, hospitalizations, drug/alcohol usage, available resources, finances, legal involvement, etc. Care should be exercised so that you disclose only what and as much as you wish NKHS staff members to know.
3. A team approach is used by NKHS. Information necessary to facilitate effective assessment and/or service provision may be shared between NKHS staff. Videotaping, audio taping and/or one-way mirror observation may be used to allow the NKHS team the best possible access in offering assistance, supervision, or education. If used, these methods would be applied only with your written consent to assure that you receive the highest quality services.
4. Your clinical record may be reviewed for certain purposes by representatives of Federal and State agencies such as: The National Institute of Mental Health, National Institute of Alcohol Abuse and Alcoholism, the Vermont Department of Mental Health, Division of Alcohol and Drug Abuse Programs, and Vermont Department of Children and Families. Law requires that this information shall remain confidential and be used by these agencies for review purposes only. Evaluators of programs and services from NKHS may also, at times, use clinical records for review purposes.
5. If you are a client of our substance abuse services or a client with a substance abuse problem, your records and your confidentiality are further protected by Federal Regulation 42CFR part 2. Specific written consent is required to release information about you.
6. Information you share with NKHS staff is confidential. It will not be revealed outside NKHS without your consent. The rare exceptions to this policy are vital emergencies and/or legal situation(s):

- Court order for disclosure
  - You commit or threaten a crime while on the premises or against NKHS personnel
  - All Staff members are required by law to report:
    - a. Suspected child abuse to the Vermont Department of Children and Families
    - b. Suspected abuse of the elderly or handicapped to the Department of Aging and Independent Living
    - c. If it is disclosed during our work with you that an individual, group, or property is at risk of injury or destruction, it must be reported to the police and/or the individual(s) who are threatened.
    - d. If it becomes necessary, in NKHS' opinion, to protect the individual's safety by emergency hospitalization (commitment proceedings), we are obligated to discuss relevant information with the courts and/or Vermont Psychiatric Care Hospital or its designee.
7. All customers have a legal right to appeal actions by NKHS staff. If you have a concern, please let your assigned staff or an NKHS supervisor know about it. All adults who will be involved in service must sign this agreement. Signature by parents/legal guardians constitutes consent for services to minors.
8. Any special condition, requirements, or exceptions agreed to.



# Consumer Complaint, Grievance and Appeal Process

You can file a complaint with any NKHS staff

You have the right to file a grievance or appeal if you are dissatisfied with your treatment or services. NKHS cannot treat you poorly or deny you services as a result of filing a grievance or an appeal.

## What is a Complaint?

You have a right to file a grievance without retaliation

There may come a time when you are not satisfied with your service and you want to address your concerns. You can speak with any staff member about a complaint you have. A complaint will be handled within NKHS. If you are not satisfied with the NKHS response, you can then file a formal grievance. You do not need to file a complaint before filing a grievance.

- You are dissatisfied about aspects of interpersonal relations - rudeness, failure to be respected, staff not conducting themselves properly or the quality of care you are receiving.
- The complaint is resolved in one response by NKHS staff.
- Complaints may be made orally or in writing by the consumer to any NKHS staff.

You can ask any staff for information or assistance

## What is a Grievance?

A grievance is a way to report an issue with the quality of your services. Grievances are reported to the Department of Mental Health or to DAIL.

Examples might include:

- Staff was rude to you
- You received poor service
- Service is not meeting your needs
- You don't have choices in your services
- You disagree with a rule or a policy
- You disagree with what is in your treatment plan

***There is no time limit to file a grievance.***

There is no time limit to file a grievance

You have 60 days to file an appeal

## What is an Appeal?

An appeal is a way to report your disagreement with a decision or an action. This is different from a grievance.

- You are denied a service
- You are denied entry to a program
- You do not agree that something should be re-moved from your services.

***You have 60 days to file an appeal.***

## How Do I File a Grievance or an Appeal?

You may file a grievance or appeal orally or in writing. Any staff who provides your services can assist you. A form is not required, but if you choose, you can

use the Grievance Form available from NKHS. You may also contact the Grievance and Appeals Coordinator at NKHS.

**When Will I Hear Back?** NKHS must acknowledge your grievance or appeal, in writing, within 5 days. Grievances must be resolved, with written notification, within 90 days. Appeals must be resolved, with written notification, within 30 days. If your rights are being violated, NKHS is not following timelines, or you need further assistance, please contact the Department of Mental Health at 802-241-0090.

**Where Can I Get More Information?**

Nick Hunt, NKHS Compliance Officer and Grievance Appeals Coordinator  
(802) 334-6744. Email: [NHunt@NKHS.net](mailto:NHunt@NKHS.net)

**NKHS Website:** NKHS.org

**Department of Mental Health website:**

<http://mentalhealthvermont.gov/about/grievance>

## Client No Show Policy

NKHS is invested in your well-being and believes it is important for you to be consistent and active in your treatment so progress can be made towards your identified treatment goals. This communication is intended to provide a clear explanation of NKHS's practice in the instance of clients not showing up for their scheduled appointments.

Please pay special attention to the following practices:

1. ***No Shows/Late Cancellations:*** Clients are expected to call 24 hours in advance if they cannot make a scheduled appointment. If you fail to keep the appointment, and do not provide 24 hour notice, this will be considered a no show/late cancel.
2. ***Additional No Shows/Late Cancellations:*** After a second no show/late cancel, please discuss the situation with your provider at your next scheduled appointment. After the third late cancel/no show, the Agency may determine it necessary to cancel any standing future appointments with you. Repeatedly missing scheduled appointments may result in your therapist determining that you are not making an active commitment to treatment and therefore making the decision to close you as an active NKHS client. If this happens, you will receive a letter in the mail letting you know that you have been discharged from the Agency. Depending on your individual needs, your provider may choose to offer you an "alternate service". This offer shall also be provided to you in a mailed letter.
3. ***Inclement Weather/Snow:*** If there are poor road conditions due to bad weather on the day of your appointment and you know you will not be making it in, please call as soon as you have decided that you will not be keeping your appointment. During inclement weather days, a call in will not be counted as a late cancel/no show unless no phone call has been made.
4. ***Late Arrival:*** If you are more than fifteen minutes late to your appointment, your provider may be unable to see you and may need to reschedule your appointment.
5. Remember, if you are seeing a psychiatrist and a therapist or case manager at NKHS, you need to maintain engagement with a therapist or case manager.

**THE NUMBER TO CALL FOR CANCELLATIONS** in Newport is (802) 334-6744, in St. Johnsbury is (802) 748-3181.

NKHS Crisis Services remain available 24 hours a day. You can access Crisis Services by calling the above numbers.

# Medicaid Services

**Take steps to assure you have medical insurance coverage!**

Medicaid and Qualified Health Plan enrollment assistance is available through the local hospitals or Vermont Health Connect Customer Support Center.

## **Community Connections**

St. Johnsbury, VT  
802-748-7256

## **North Country Hospital**

Newport, VT  
802-334-3210, ext. 7606

## **Customer Support Center**

Vermont  
1-855-899-9600  
Monday – Friday 8 a.m. to 5 p.m.

**Remember!** The following information is needed to enroll or re-enroll:

- Social Security numbers and birth dates for all household members
- Paystubs
- Taxes
- Proof of immigration status if not an American Citizen

## **Controlled Substance Agreement**

The purpose of this agreement is to protect your access to controlled substances and to protect our ability to prescribe medications for you. This agreement may be modified at the discretion of your prescribing clinician and upon mutual agreement.

1. All prescriptions for controlled substances must come from Northeast Kingdom Human Services unless specific authorization is obtained. All controlled substances must be obtained from the same pharmacy. If you need to change pharmacies you must notify NKHS. Prescriptions for controlled drugs will be given directly to you at NKHS, phoned to the pharmacy or mailed to the pharmacy. Prescriptions will NOT be mailed directly to you.
2. I am expected to inform NKHS of any new medication or medical conditions and to inform my Primary Care Provider of any changes in medications by NKHS.
3. I may not share, sell, trade, or exchange my medication for money, goods, services, etc., or otherwise permit others to have access to these medications. I agree to keep these medications in a secure, preferably locked location.
4. I will not attempt to get psychiatric medications from any other health care provider without telling them that I am taking psychiatric medication prescribed by NKHS.
5. I agree to provide NKHS legal releases sufficient to allow the prescribing provider to discuss all diagnostic details and treatment details with my pharmacist or other professionals who provide my health care.
6. Unannounced, random urine or blood tests may be required by NKHS to determine my compliance with this agreement. Tests may include screening for illegal substances. Presence of unauthorized substances may prompt referral for assessment for addictive disorder. Refusal of testing may subject me to prompt termination of the controlled medication.
7. I will not alter my medication in any way (such as crushing, chewing tablets, snorting or injecting crushed medication). I may be asked to bring my medications to NKHS or to my pharmacy for pill counts.
8. Using illegal substances (i.e., cocaine, heroin, marijuana, crystal methamphetamine, ecstasy, ketamine, etc.) while being treated with controlled substances is a serious treatment issue and may prompt changes in your treatment. This may result in stopping prescription of any controlled substances.
9. I understand that changing date, quantity, or strength of my medications, or changing a prescription in any way is a violation of the law. If NKHS becomes

aware of a law violation it may be reported to the patient's pharmacy. Further, NKHS will cooperate with law enforcement as allowed in any subsequent investigation.

10. I will discontinue all previously used psychiatric medications, unless told to continue them by NKHS. I will keep NKHS informed of all medications I may receive from other providers—this includes the Emergency Department at a hospital, if being treated. I also agree to inform other providers that I am under a controlled substance agreement with NKHS.
11. Females only: If I plan to become pregnant or believe I am pregnant, I will notify my OB provider and NKHS. I am aware that there is a risk of birth defects when a pregnant woman takes some psychiatric medications, including anti-anxiety medications and ADHD medications.
12. No early refills will be given. Refills will not be given out early if I run out, lose my prescription, damage my prescription, or if it or my medicine is stolen. Refills may not be given if I miss an appointment.
13. I agree to take my medication in the exact way it is prescribed, not to increase the rate of consumption on my own. I am responsible for taking it as prescribed and to keep track of the amount remaining. No unauthorized increases in medication will be tolerated.

## **Dominion Diagnostics Acknowledgement**

To all clients of Northeast Kingdom Human Services, Inc.:

Dominion Diagnostics provides all diagnostic laboratory-urine drug testing services for Northeast Kingdom Humans Services, Inc.

Dominion Diagnostics is a medical laboratory that is a participating provider in Vermont Medicaid and will directly bill Vermont Blue Cross/Blue Shield and many other private insurers in Vermont.

Dominion Diagnostics bills your insurance company directly for tests ordered by Northeast Kingdom Human Services, Inc. If you have a laboratory co-payment or deductible as part of your insurance plan, you will be billed for these co-pay/deductible costs.

If you do not have insurance coverage, and your fee for treatment is reduced by Northeast Kingdom Human Services, Inc., you will be billed directly by Dominion Diagnostic for lab services at a discounted rate. If at any time you need to discuss payment or have questions regarding your lab bill, please call us toll free at 1-877-734-9600.

In order for Northeast Kingdom Human Services, Inc. to participate in the Dominion Diagnostics program, we will be sharing your information electronically with Dominion Diagnostics.

# **Health and Safety**

## **Weapons**

At NKHS firearms, knives, explosives, and other instruments or materials considered to be lethal or capable of inducing severe bodily injury shall not be brought into any NKHS premise, including personal vehicles while parked on NKHS property, or while being used in the line of duty, to NKHS.

## **Smoking**

Smoking is prohibited in all NKHS facilities. Additionally, Employees and Consumers are discouraged from smoking anywhere on owned or operated NKHS premises.

Smoking is prohibited in one's automobile and in NKHS vehicles when transporting individuals that receive services or during any NKHS activity or program where consumers are present, whether on or off NKHS premises.

## **Illegal or Illicit Drug Use**

The illegal possession, use, or distribution of controlled substances, including alcohol, is prohibited at NKHS.

## **Health and Safety of Staff and Clients**

NKHS follows all Center for Disease Control (CDC), Vermont Occupational Safety and Health Agency (VOSHA) and State recommended guidelines to ensure the physical and mental health safety of staff and clients. At times, best practice guidelines will be implemented to ensure the unique needs of those providing and accessing services at NKHS are met.

## **Custody/Guardianship Documentation**

Custody is obtained by biological parents or is a family court order that allows someone to care for a minor child.

Guardianship is a court order which allows similar powers to a parent or another person with custody. Guardianship may be used when both parents pass away or when both parents do not have the physical or mental capacity to care for their child any longer. Guardianship can also be used in the case of an adult who, due to illness, injury, or disability, is unable to care for himself or herself.

NKHS is required to obtain documentation of any court ordered custody or guardianship order in order that is in place for an individual receiving services to disclose information and allow for decision making abilities on behalf of the individual receiving services.



Without this documentation, NKHS will only communicate with the individual receiving services and cannot disclose information to any other parties or provide treatment other than requested by the individual.

For more information please visit <https://www.vermontjudiciary.org/probate/adult-guardianships> for Adults (over 18 years of age)

Or <https://www.vermontjudiciary.org/probate/minor-guardianships> for children

## **Advance Directives**

We each have the right to make our own health care decisions. An advance directive ensures your end of life and other critical healthcare decisions will be honored.

An advance directive is what many people think of as a living will, or a durable power of attorney for health care. An advance directive is a written document that outlines your wishes for medical treatment in the future, including if you are no longer able to make those decisions.

### ***HAVING AN ADVANCE DIRECTIVE GIVES YOU:***

- Peace of mind, knowing that your choices are secure and will be available to your family and doctors even if you become ill away from home.
- The serenity of knowing that you will be able to “speak” to your family and doctors through your Advance Directive about your personal philosophy and help them make the decisions you want without feeling guilt or remorse.
- The security of confidential, 24-hour access to your choices by hospitals and health care providers across the country.

NKHS will request a copy of your Advance Directives if you have one in place. If you do not and wish to create one, NKHS staff will support you!

More information can be found at <https://www.healthvermont.gov/systems/advance-directives>

## **Professional Qualifications**

NKHS can provide up to date information about the qualifications and work experience for each of our professional staff. This information is available upon request to anyone seeking or currently utilizing NKHS services.



## NKHS Program Standing Committees

**The mission of NKHS is to empower individuals, families, and communities by promoting hope, healing, and support.**

Every challenge is unique. At NKHS individuals and families identify their own goals and receive support from professionals to identify the best path to achieving those goals. Services are tailored to the individual.

**Adult Services** will help clients find recovery and well-being whether the concern is depression, anxiety, grief and loss, bi-polar disorder, addiction, or any combination of other significant mental health or addiction issues.

**Intellectual/Developmental Disability Services** relies on a consumer-centered approach to identify the goals and types of support needed to help individuals with intellectual/developmental challenges using their unique strengths. Services take into account the whole person, addressing medical and mental health needs, tailored to the individual.

**Children, Youth & Family Services** understands families may have concerns for a child of any age with stressful behaviors, limited attention in the classroom, or risky behaviors. NKHS relies on a family-centered approach to work with families and children to achieve their vision of optimum child development, leading to a healthy adulthood.

### **Program Standing Committees**

Disclosed clients, their family members, and/or community members who have an interest in any of these service divisions could volunteer to be on a Program Standing Committee.

Meetings are held once a month for 60 to 90 minutes. Meetings are currently being held by Zoom conference due to the pandemic. We hope to meet in person again soon. Please contact one of the committee representatives if you are interested in attending.

If you or a family member are interested in serving on a Standing Committee, please call one of our toll-free or local numbers. We are available to answer questions and provide you with further information. We can provide reimbursement for mileage to attend the meetings. Light refreshments are also available at the meetings.

St. Johnsbury	802-748-3181	Toll free	800-649-0118
Derby	802-334-6744	Toll free	800-696-4979

### **Program Standing Committee Meeting Schedule:**

#### ***Children's Standing Committee***

First Monday of the month: 12:00 - 1:00 p.m.

#### ***Addiction Services Standing Committee***

Second Monday of the month: 9:00 - 10:30 a.m.

#### ***Adult Mental Health Standing Committee***

Fourth Wednesday of the month: 3:30 - 5:00 p.m.

#### ***Intellectual/ Developmental Disability Services Standing Committee***

Fourth Wednesday of the month: 9:00 - 10:30 a.m.

## Other Services



### **Genoa Healthcare (866)-763-2250**

NKHS has collaborated with Genoa to provide on-site pharmacies at both our Newport and St. Johnsbury locations.

The on-site, full-service pharmacy is staffed by a pharmacist and certified technician(s). The pharmacy team is dedicated to staff and consumers and are available for questions or prior authorizations. Genoa is proud to serve NKHS clients, employees, their families, and the surrounding community with their prescription and immunization needs.

Genoa offers:

- Full-service pharmacy, fills all medications
- Pharmacy team that integrates with center staff
- Pre-filled pill organizer
- Delivery/mail options
- Prior authorization assistance
- Refill synchronization
- Reminder calls

Please contact Genoa Healthcare directly for assistance.

Newport location: (802) 239-1593

St. Johnsbury location: (802) 227-2293

## 802 QUILTS


[www.802quits.org](http://www.802quits.org)

(800) 784-8669



VERMONT DEPARTMENT OF HEALTH  
1-800-QUIT-NOW (784-8669) [802Quits.org](http://802Quits.org)

Your chances of quitting are much better when you have a customized quit plan. Start now. Positive, supportive help. Free and confidential. Call, enroll online, text and more. You can quit. Help is here. **1-800-QUIT-NOW**. Free support. Types: By phone, in person, online.



**YOU CAN QUIT.  
WE CAN HELP.**

802Quits helps Vermonters like you take the first steps at living tobacco-free. Get free patches, gum and lozenges.

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**3 WAYS TO HELP YOU QUIT**

802Quits provides you with advice, tips, tools and text support to help you quit tobacco, including e-cigarettes, YOUR WAY.

**QUIT HELP BY PHONE**

Call 1-800-QUIT-NOW to connect with a Quit Coach.

**IN-PERSON QUIT HELP**

Find a workshop with your local Vermont Quit Partners.

**ONLINE QUIT HELP**

Connect with former smokers and others taking steps to live tobacco-free.

**SUCCESS IN THE 802**

"I started smoking because my grandfather and uncle did. I looked up to them. Last year, my daughter looked at me and said, 'When I get big, I want to smoke like you.' She's only 3 years old. At first I laughed, but then I felt horrible. That's why I quit."

**Jeremy**  
Randolph, VT


**FREE GUM AND PATCHES**

Get free patches, gum or lozenges to help you quit smoking. You can double your chances of quitting successfully when you combine them with help by phone, in-person or online.

**A QUICK TIP**

To distract yourself during a craving, try to wrap a rubber band tightly around a ping pong ball. It's harder than you think!

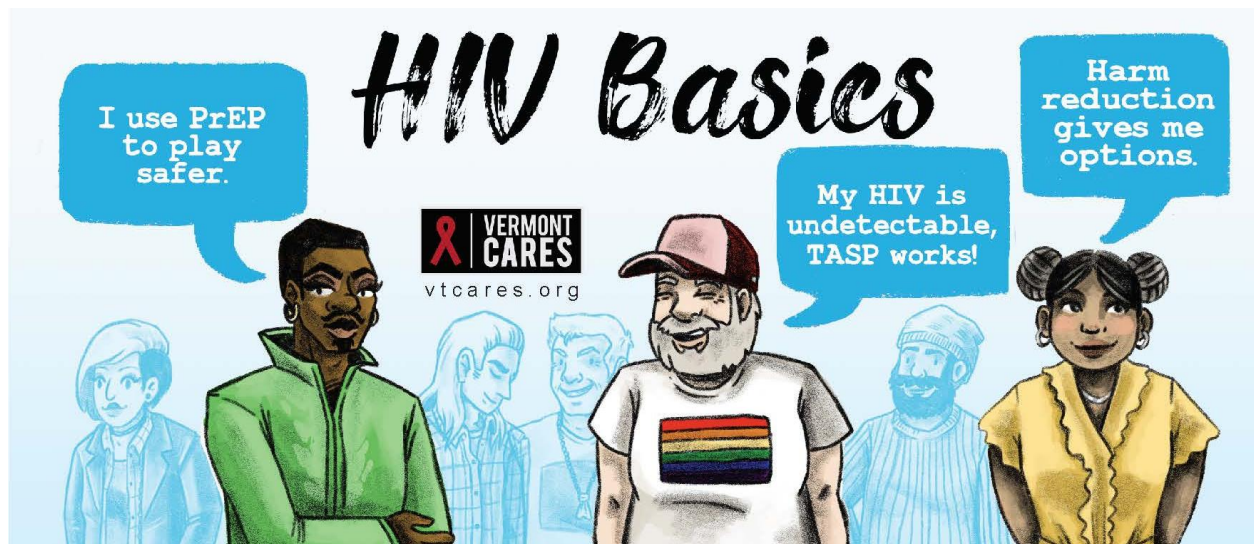
For more information, stories and tips, go to [802quits.org](http://802quits.org).



**YOU CAN QUIT.  
WE CAN HELP.**

05-2018





## HIV - Treatable & Preventable

The Human Immunodeficiency Virus (HIV) attacks CD4/helper cells/T-cells. This creates opportunity in the body for other infections to take hold; like pneumonia, cancer, tuberculosis, flu, meningitis, and Sexually Transmitted Infections (STIs.)

## HIV Is Passed Through These Body Fluids...

- Blood
- Semen (Cum)
- Pre-cum (pre-seminal fluid)
- Vaginal/Front Hole Fluid
- Breast milk
- Anal Fluid

...And also there must be:

- HIV present in the fluid
- A detectable HIV viral load
- Entry into the other person's blood stream through a cut, sore, or mucous membrane (genitals, anus, eyes, nose, mouth)

Medication is better than ever... and you can become undetectable!

### Undetectable = Untransmittable

Through medication, people with consistent undetectable viral load for 6 months do not transmit HIV. Ask your healthcare provider for more information.

## Call Us For Support

### VERMONT CARES

1-800-649-2437

Burlington, St. Johnsbury, Montpelier, and Rutland, VT + Mobile

### Pride Center of Vermont

802-860-7812

Burlington, VT

Vermont Diversity Health Project | VDHP.org

### HIV/HCV Resource Center

603-448-8887

Lebanon, NH

### AIDS Project of Southern Vermont

802-254-8263 | Brattleboro, VT

802-447-8007 | Bennington, VT

## Know your Status?

We Offer Free HIV and HCV Fingertick Testing!

\*\* You can also get a blood draw test through a healthcare provider!



vtcares.org



opendoormidd.org



## Talk To your Partners About Sex

how frequently do you hookup? how do you meet your partners?

when were you last tested for STIs?

do you give (top) or receive (bottom) or both?\*

\*bottoming increases exposure

what are your safer sex practices?

any sexual health issues or concerns?



**Language:** "Clean", "Dirty", and "Drug / Disease Free (DDF)" perpetuate HIV stigma. Use consent and non-shaming language to discuss sexual practices.

## The Primary Ways HIV Spreads in the US are...



Sexual exposure



Sharing injecting equipment

## HIV and Harm Reduction

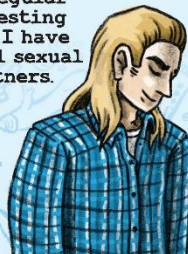
- Take PrEP\*
- Use condoms/barriers
- Lube, lube, lube!
- Change positions while playing
- Choose sex activity like masturbation, oral sex, or massage
- Get tested for and treat STIs
- Limit casual sex partners
- Maintain body awareness (avoid pain or discomfort)
- Know your limits for substance use and drinking
- Use and promote Syringe Service Programs (SSP)
- Rotate injection sites and veins
- Use your own new kits and supplies and don't share
- Personalize syringes so you know which are yours
- Drink plenty of water
- Test for Hepatitis C (HCV) when you test for HIV

I'm living with HIV and take my meds daily to prevent passing the virus.

Printed April 2021



I use PrEP\* and regular STI testing since I have several sexual partners.



I enjoy exchanging hand jobs - no sex fluids are swapped.

\*PrEP is a medication for HIV negative people



I never share my injection equipment and always keep condoms on hand just in case.







Talk with us.



On July 16, 2022, Vermont joined the rest of the United States in launching **988**, the new three-digit number for the National Suicide Prevention Lifeline. This service provides compassionate, accessible care and supports for anyone experiencing mental health related distress. The chat feature will be available through the Lifeline's website located at [988Lifeline](https://988lifeline.org/) (<https://988lifeline.org/>)

## ABOUT 988.

- Vermont's Suicide Prevention Lifeline answers calls, chats, and texts that come from residents throughout the state.
- Vermont has two Certified Lifeline Centers. These centers are staffed and run by two designated agencies: Northeast Kingdom Human Services and Northwestern Counseling and Support Services.
- Lifeline counselors receive extensive training and are there to listen and support callers through their distress while providing coping skills.
- Vermont's Lifeline Center calls, texts, and chats are backed up by neighboring states and the national network. If a local center isn't immediately available, the individual will be routed quickly to another counselor.
- Access is available 24 hours a day, seven days a week.

## WHAT YOU NEED TO KNOW

- The National Suicide Prevention Lifeline 1-800-273-8255 remains live and can still be used.
- Vermont Lifeline counselors are trained to reduce stress, provide emotional support, and connect you with anyone in distress to local resources.
- Over 95% of calls do not result in the need for in-person response. If an in-person response is requested or required, the counselor may transfer to another service which could involve a crisis response team or law enforcement.
- More information about public messaging will be provided by SAHMSA and Vibrant Emotional Health in the coming months.
- If you or someone you know is in imminent danger, call 911.



**The National Suicide Prevention Lifeline is now: 988 Suicide and Crisis Lifeline**



## Additional Resources

Vermont Department of Mental Health:

[www.mentalhealth.vermont.gov](http://www.mentalhealth.vermont.gov)

Vermont Department of Disabilities, Aging & Independent Living:

[www.mentalhealth.vermont.gov](http://www.mentalhealth.vermont.gov)

Vermont Agency of Human Services:

[www.humanservices.vermont.gov](http://www.humanservices.vermont.gov)

Advance Directives:

[www.vtethicsnetwork.org](http://www.vtethicsnetwork.org)

Vermont Department of Children & Families:

<http://dcf.vermont.gov/>

Vermont Center for Independent Living

<http://www.vcil.org>

North Country Hospital

<https://NorthCountryHospital.org>

Northeastern Vermont Regional Hospital

<https://nvrh.org>

Rural Edge

<https://ruraledge.org>

Northeast Kingdom Community Action

<https://www.nekcavt.org>

Northeast Kingdom Learning Services

<https://neklsvt.org>

NAMI

<https://namivt.org>

Facing Suicide VT

<https://facingsuicidevt.com>

## **Agency Contact Information**

### **St. Johnsbury Office:**

2225 Portland Road St. Johnsbury, VT  
(802) 748-3181  
Toll free 1-800-649-0118

#### *Mailing Address:*

PO Box 368 St. Johnsbury, VT 05819

### **Derby/Newport Office:**

181 Crawford Road Derby, VT  
(802) 334-6744  
Toll free 1-800-696-4979

#### *Mailing Address:*

PO Box 724 Newport, Vermont, 05855

General Information (802) 334-6744