

THE FAMILY INTEGRITY PROGRAM PARENT HANDBOOK



*Important information regarding your rights
and responsibilities as a parent working with the
St. Johns County's Family Integrity Program*



"Our Community – Our Children"

We are the Family Integrity Program and we look forward to working with you and your family. We are here to help you and your family.

The purpose of this handbook is to give you general information about the Family Integrity Program, provide information about service providers in the community, and share how the Family Integrity Program will work with you.

Your Dependency Case Manager will go over this handbook with you. Your Dependency Case Manager will answer your questions to the best of their ability.

You will be asked to sign a paper that states you received this handbook and that you understand your rights and responsibilities while working with the Family Integrity Program.



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Department of Health and Human Services

The Family Integrity Program (FIP) is an agency within the St. Johns County Department of Health and Human Services. Other agencies that work within the Department of Health and Human Services are the FIP Diversion Program, Social Services and the Housing & Community Development Department.

Mission

Fostering encouragement, care, hope, and opportunities for individual recovery, achievement, and quality of life.

Vision

- We envision...
 - A model of Health and Human Services where individuals choose their own path of self-discovery and recovery...

- Where...
 - Adults will live, work, learn, and participate fully in their communities.

- Where...
 - Children and their parents or caretakers will live, learn, and thrive with their families and friends.

Family Integrity Program: Mission and Vision

Mission

The Family Integrity Program mission is to work in partnership with the State of Florida and the Local community to develop, implement and manage a highly effective, culturally competent, strength-based, community-based system of care for abused and neglected children and their families.

Vision

- ◆ We envision...
 - A model of Health and Human Services where individuals choose their own path of self-discovery and recovery...

- ◆ Where...
 - Adults will live, work, learn, and participate fully in their communities.

- ◆ Where...
 - Children and their parents or caretakers will live, learn, and thrive with their families and friends.

Your Dependency Case Manager
and
Family Integrity Program Contact Information

My name is _____ . I am your
Dependency Case Manager.

My phone number is: (904) 209 - _____.

My e-mail address is: _____@[sjcfl.us](mailto:_____@sjcfl.us)

My Supervisor's Name is _____ . Their phone
number is: (904) 209 - _____.

The Program Manager of the Family Integrity Program is Michelle Weisheit. Her
phone number is (904) 209-6115.

The Family Integrity Program office is located at:

200 San Sebastian View, Suite 2100

St. Augustine, FL 32084

Main Phone Number: (904) 209-6080

Office Hours: 8:00 AM to 5:00 PM Monday - Friday

Family Integrity Program Website address: <https://www.sjcfl.us/FIP>

Who, How, and What?

Question: Who is the Family Integrity Program?

Answer: The Family Integrity Program is the St. Johns County child safety agency responsible for protective services and out-of-home placement for children living in St. Johns County who have been found to need “intervention” or “protection” according to the guidelines in the Florida State Statutes.

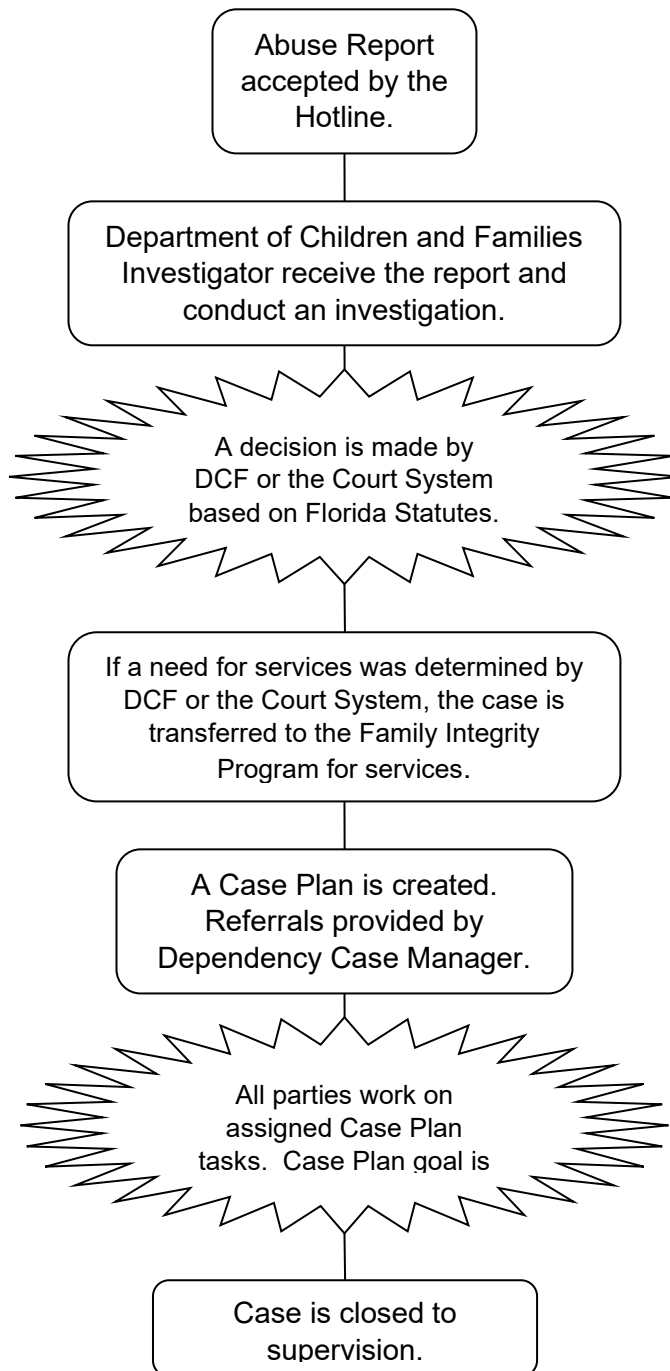
Question: How did the Family Integrity Program become involved with me?

Answer: The Family Integrity Program received your case from the Department of Children and Families. The Court System and/or the Department of Children and Families made the initial decision regarding how your case will proceed.

Question: What will the Family Integrity Program do?

Answer: Every family is assigned a Dependency Case Manager. A set of tasks for all parties (the Family Integrity Program, the parents, any caregivers, the children, and service providers) will be developed in order to address the identified safety concerns to the children identified by the Department of Children and Families’ investigation. This set of tasks is called a “Case Plan.” The ultimate goal in any case supervised by the Family Integrity Program is to safely keep the children in their home with a parent while providing assistance or to safely reunify a child with their parent once the identified safety concerns have been addressed. If a child who has been removed from the custody of their parent can not safely return to the custody of one of their parents, the Family Integrity Program must explore all options to help that child find another permanency option. This could mean that guardianship is granted to a relative or non-relative or that adoption will be pursued.

Basic Case Path



Your Rights

If you have any questions, please ask your Dependency Case Manager to explain these rights. It is important that you understand all of your rights. Please be aware that you have the right to refuse treatment, medication, or services unless those rights have been limited by an order of the Court. If you refuse to participate in the approved agency programs, your Dependency Case Manager will explain the possible consequences for not cooperating with your Case Plan.

Rights

- ◆ You have the right to be heard.
- ◆ You have the right to make suggestions about your case.
- ◆ You have the right to attend Court Hearings and to be represented by an attorney.
- ◆ You have the right to receive services that will help you meet your Case Plan goal.
- ◆ You have the right to be treated with respect.
- ◆ You have the right to have your information treated in a confidential manner.
- ◆ You have the right to request an appointment with your Dependency Case Manager.
- ◆ You have the right to visit with your child as long as the Court's order is obeyed.
- ◆ You have the right to receive copies of Judicial Review reports sent to the Court.
- ◆ You have the right to receive copies of information about your child's medical, dental, mental health appointments and school performance.
- ◆ You have the right to participate in your child's activities (i.e. school functions, special occasions, medical and mental health appointments) in accordance with any restrictions imposed by the Court's order.
- ◆ You have the right to help make decisions about your child's needs and activities.

- ◆ You have the right to submit a concern or complaint to the Family Integrity Program and to expect that you receive an answer in a reasonable amount of time.

Your Responsibilities

We want you to understand what is expected of you while you are working with the Family Integrity Program. Please understand that it is very important you remain in contact with your Dependency Case Manager so that we can all work together to achieve the Case Plan goal.

Responsibilities

- ◆ You are responsible for staying in touch with your Dependency Case Manager. This includes meeting face to face with your Dependency Case Manager at least once every 30 days. Appointments with your Dependency Case Manager need to be set in advance and can occur at the Family Integrity Office, in your home or at a location agreed upon within the community.
- ◆ You are required to contact your Dependency Case Manager every 14 days.
- ◆ You are responsible for providing your Dependency Case Manager with current contact information. This includes home information, work information, and an alternate contact source if possible.
- ◆ You are responsible for being honest with all the information that you share with your Dependency Case Manager.
- ◆ You are responsible for treating all parties to the case with respect.
- ◆ You are responsible for attending all Court Hearings, scheduled meetings, and appointments.
- ◆ You are responsible for working on your Case Plan tasks to the best of your ability.
- ◆ You are responsible for asking questions if you do not understand something.
- ◆ You are responsible for obeying the Court's order.

- ◆ You are responsible for contacting your Dependency Case Manager if you are having problems with your visitation schedule.
- ◆ You are responsible for providing information to your Dependency Case Manager about the tasks you have completed on your Case Plan.
- ◆ You are responsible for providing information about people or services that you think may help you successfully complete your Case Plan.
- ◆ You are responsible for the safety of yourself and your children.

**** PLEASE NOTE: If you “stop by” the office without notice, your case manager may not be able to meet with you, as they are often in Court, out in the field, at training, etc. You will be able to speak with an available staff member who will then share information with your Dependency Case Manager concerning your office visit. ***

Complaints

The Family Integrity Program understands that there may be times that you disagree with issues of your case. We welcome your participation in your case and want to provide you with the help you need to achieve your Case Plan goal. A complaint process has been designed to help you resolve any complaints you may have while working with the Family Integrity Program.

Complaints should be handled in the following manner:

1. When you have a complaint, you first need to talk about it with your Dependency Case Manager. Your Dependency Case Manager will work with you to find a possible solution.
2. If talking to your Dependency Case Manager did not help, please contact their Supervisor. Your Dependency Case Manager's Supervisor information is provided on page 5 of this Handbook.
3. If, for whatever reason, your complaint has not been addressed or you need further assistance with your issue, you can contact Michelle Weisheit, Program Manager, at (904) 209-6115. The Program Manager will look into your complaint and provide you with an answer in a reasonable amount of time.
4. If your complaint still has not been addressed or you need further assistance with your issue, you can contact Shawna Novak, Director of Health and Human Services (HHS), at (904) 209-6089. The HHS Director will look into your complaint and provide you with an answer in a reasonable amount of time.
5. If you have contacted all of the appropriate staff at the Family Integrity Program and you have not had your concern addressed, you can contact the Assistant County Administrator, Sarah Taylor, at (904) 209-0549. The Assistant County Administrator will investigate the complaint and provide a resolution.

Possible Case Plan Tasks

Your Case Plan will be designed to meet your needs and to help you accomplish your Case Plan goal. Listed below are possible Case Plan tasks that you may be required to complete. This is not a complete list of possible tasks as each Case Plan is designed to meet your specific needs. The specific tasks assigned and agreed upon will be to ensure behavioral change occurs and that there is an increase in protective capacities to ensure your child's safety.

- ◆ Parenting
- ◆ Mental Health Evaluation and Compliance with any Recommended Treatment
- ◆ Substance Abuse Evaluation and Compliance with any Recommended Treatment
- ◆ Random Drug Testing
- ◆ Domestic Violence Victim's Counseling
- ◆ Domestic Violence Batterers Intervention Program
- ◆ Anger Management
- ◆ Family Counseling
- ◆ No Contact with identified people (those who present risk to you or your child)
- ◆ Supervised Visitation
- ◆ Payment of Child Support
- ◆ Safe and Stable Housing
- ◆ Stable Employment/Income
- ◆ Sex Offender Counseling
- ◆ Participation in Counseling recommended for your child
- ◆ Participation in Child Sexual Victim Counseling
- ◆ Providing for your Child's Daily Well-Being
- ◆ Maintaining a Respectful Relationship with all Parties Involved in Your Case
- ◆ Participation in your Child's Comprehensive Behavioral Health Assessment (CBHA)

Service Providers

As part of your Case Plan, you may be required to work with different agencies in St. Johns County. Listed below are some of the frequently used service providers in St. Johns County. Please remember that these services may change their location/contact information over time. This is not the complete list of the service providers in St. Johns County. You will need to work with your Dependency Case Manager to identify which agency will best suit your needs and still meet the goal of the Case Plan task.

Supervised Visitation/Exchanges:

- ◆ Kids Bridge: 238 San Marco Ave., St. Augustine, FL 32084. 904-824-8810
- ◆ Family Resource Connection: 904-451-4241 (Dennis); 309 Main St., Palatka, FL 32177. 386-385-5093 (MAIN); info@familyresourcefl.org

Anger Management/BIP:

- ◆ Epic Behavioral Healthcare: 1400 Old Dixie Hwy., St. Augustine, FL 32084. Phone: 904-829-2273
- ◆ Kids Bridge: 238 San Marco Ave., St. Augustine, FL 32084. 904-824-8810; BIPKIDSBRIDGE1@GMAIL.COM
- ◆ Family Resource Connection: 904-451-4241 (Dennis); 309 Main St., Palatka, FL 32177. 386-385-5093 (MAIN); info@familyresourcefl.org
- ◆ Court Ordered Counseling, LLC (Emma Hayes): 904-349-7123, emmahayes.hayes@gmail.com

Parenting:

- ◆ Family Resource Connection: 904-451-4241 (Dennis); 309 Main St., Palatka, FL 32177. 386-385-5093 (MAIN); info@familyresourcefl.org

- ◆ The Playful Family, Inc.: 616 State Rd 13 N, Unit 12, Fruit Cove, FL 32259; 904-217-7384
- ◆ Healthy Families/CHS: 3027 San Diego Rd., Jacksonville, FL 32207. Phone: 904-480-2795
- ◆ Healthy Start: 904-616-6097; Referral form: [Coordinated Intake & Referral Form](#)
- ◆ Fatherhood Initiative: 904-551-1820; Referral form: [TEAM Dad Form](#)

Family Functional Therapy/In-Home Support Services:

- ◆ STRIVE (through BAYS): 904-420-2848 or STRIVE_SJ@bayskids.org

Substance Abuse treatment:

- ◆ SMA Healthcare: 1880 San Sebastian View, St. Augustine, FL 32084. Phone: 904-209-6200
- ◆ Epic Behavioral Healthcare: 1400 Old Dixie Hwy., St. Augustine, FL 32084. Phone: 904-829-2273
- ◆ Discover and Recover (peer support and therapy): 3501 N Ponce De Leon Blvd C2, St. Augustine, FL 32084; 904-495-0625

ABA therapy:

- ◆ Positive Behavioral Supports: 12724 Gran Bay Pkwy West, #410, Jacksonville, FL 32258. Phone: 855-832-6727; Email: kcrowell@teampbs.com
- ◆ Strategies, Inc.: 4647 S. Clyde Morris Blvd., #501, Port Orange, FL 32129. Phone: 386-767-3752; Email: info@strategiesincaba.com
- ◆ All Therapies Supports: No physical address listed. Phone: 386-316-3004; Fax: 386-220-8281; Email: alltherapies@yahoo.com

For both adult and children's mental health therapy:

- ◆ SMA Healthcare: 1880 San Sebastian View, St. Augustine, FL 32084. Phone: 904-209-6200
- ◆ Epic Behavioral Healthcare: 1400 Old Dixie Hwy., St. Augustine, FL 32084. Phone: 904-829-2273
- ◆ Positive Behavioral Solutions: Phone: 901 Douglas Ave., #100, Altamonte Springs, FL 32714. Phone: 321-972-4265; Fax: 407-215-9436; Email: info@pbsfl.org and referrals@pbsfl.org
- ◆ Social Care Services: 8833 Perimeter Park Blvd., #201, Jacksonville, FL 32216. Phone: 904-294-5329; Fax: 904-485-8460; Email: socialcareservices@gmail.com
- ◆ Charlie Health (virtual sessions only): 1-866-600-9578; Referral: [Professional Referrals for Charlie Health | Charlie Health](#)

For medication management:

- ◆ SMA Healthcare: 1880 San Sebastian View, St. Augustine, FL 32084. Phone: 904-209-6200
- ◆ Social Care Services: Social Care Services: 8833 Perimeter Park Blvd., #201, Jacksonville, FL 32216. Phone: 904-294-5329; Fax: 904-485-8460; Email: officestaffscs@gmail.com
- ◆ Nemours Pediatrics Acute Telemental Health Program (PATH): Ages 2-17 meant to address crisis needs and see children until they get established with a long-term provider: 904-697-3600

Targeted Case Management:

- ◆ Children's Home Society: 3027 San Diego Rd., Jacksonville, FL 32207. Phone: 904-493-7744

For more comprehensive or specific types of psychiatric evaluations:

- ◆ Florida Counseling and Evaluation Services Phone: 6950 Phillips Hwy., #11, Jacksonville, FL 32216. Phone: 904-239-3677; Fax: 904-866-4029
- ◆ Community Behavioral Services Phone: 1543 Kingsley Ave., #18A, Orange Park, FL 32073. Phone: 904-269-3324; Fax: 904-264-2302; email: frontdesk@communitybehavioralserv.com
- ◆ Yount Psychological Services: 301 S Tubb St Suite A1, Oakland, FL 34760; 407-734-2552; office@yountpsych.com

11 Rules of Discipline

These are the eleven rules of discipline as written by Stephen J. Bavolek, Ph.D., Family Development Resources, Inc. You can learn more about their resources by visiting their website at www.nurturingparenting.com

1. Help the child learn appropriate behavior by involving them in direct experiences which will teach them the desired behaviors and have them observe you behaving in the manner you want them to behave.
2. Behaviors need consequences following them to help children learn right from wrong.
3. What you pay attention to is what you get more of.
4. Punishments are used to help children change inappropriate behavior, and only work effectively when used in conjunction with rewards to reinforce appropriate behavior.
5. Punishments are NEVER used to abuse, injure or cause harm, or the threat of harm to children.
6. Time-out will only work when time-in is quality time. If time-in is not quality time, the child is already in time-out emotionally.
7. Time-out should be used sparingly and for teaching purposes for younger children. There are other forms of punishment that are more effective for older pre-teens and adolescents.

8. The punishment must fit the behavior. It must also be reasonable, respectful, and related to the incident.
9. The goal of punishment is to be meaningful and quick. Punishments of long duration provide little motivation to do better.
10. If you misuse it or abuse it, you lose it for awhile, then get another chance to use it. One of the goals of discipline is to teach appropriate behavior. If children never get another chance, how are they going to learn?
11. If you break it, you pay for it. If you mess it up, you clean it up. Restitution is an excellent way to teach children there are consequences for their inappropriate behavior.

Other Points to Remember:

- ◆ Discipline is NOT supposed to be harsh, critical, include rigid rules, or include spanking.
- ◆ Praise is the most powerful of rewards as it helps the child feel good about themselves.
- ◆ Spanking, slapping, and punching are NOT acceptable forms of punishment.

Advanced Discipline for Teens

Discipline for teens as written by Michael H. Popkin, Ph.D. in his book *Active Parenting of Teens, Third Edition* includes the more advanced skills of Natural and Logical Consequences as well as the FLAC Method which is available in his book.

Natural Consequences

Remember that a key aspect of responsibility is accepting that what happens to us is a result of our choices.

Responsibility = Choice + Consequences

Natural Consequences: The results that occur from a teen's behavior without any interference by a parent.

Natural consequences are powerful teachers. We have all learned important life lessons from the consequences of our own direct experience without parents or others intervening in any way. Natural consequences work well with teenagers because they allow the parents to act as a sympathetic third party rather than the disciplinarian. In order for natural consequences to be effective, avoid two temptations:

1. Don't rescue your teen on a regular basis from the natural consequences of his actions.
2. Don't say "I told you so" or otherwise lecture your teen on his mistake. It's better to say, "Gee, _____, I know that's frustrating." Then let the natural consequence do the teaching.

When You Can't Use Natural Consequences to Teach

There are three circumstances in which a responsible parent cannot allow Mother Nature to take her toll:

1. When the natural consequences may be dangerous. For example, the natural consequence of experimenting with drugs can be addiction or even death.
2. When the natural consequence is so far in the future that the teen is not concerned about it. For example, the natural consequence of not doing school work may be not graduating, not getting into one's college of choice, or fewer career options.
3. When the natural consequence of teen's behavior affects someone other than the teen. For example, your teen returns your car with the gas gauge on empty, and you run out of gas. In such a situation, the parent owns the problem and must take action to prevent such natural consequences from occurring. In this case, allowing a natural consequence may not be your best discipline choice.

Logical Consequences

In cases in which you cannot rely on natural consequences, you'll need to set your own consequences. The consequence that you set needs to be logically related to your teen's misbehavior in order to teach your teen responsibility. For this reason, we call these "logical" consequences.

Logical Consequences: Discipline that is logically connected to a misbehavior and is applied by an authority to influence a teen to behave within the limits of the situation.

Example:

- ◆ When Sean continually forgets to bring his dirty dishes into the kitchen after snacking in the den, he loses the privilege of taking food out of the kitchen.
- ◆ When Susan forgets to put gas in Mom's car when she borrows it, she is not allowed to use the car for a week.
- ◆ Logical consequences are not the same thing as punishment, even the teen won't like either. Some of the differences are:

LOGICAL CONSEQUENCES

- ◆ logically connected to the misbehavior
- ◆ intended to teach responsibility
- ◆ given in a firm and calm way
- ◆ respectful
- ◆ allow the teen to participate

PUNISHMENT

- ◆ arbitrary retaliation for misbehavior
- ◆ intended to teach obedience
- ◆ often delivered with anger and resentment
- ◆ disrespectful
- ◆ dictated by authority

How to use Logical Consequences

Many parents unintentionally turn a would-be logical consequence into a punishment, and then they wonder why their teens respond with anger, rebellion, or a power struggle. To be sure you're giving a logical consequence and not a punishment, follow the below guidelines. This may seem like a lot to remember at first, but as you practice, they'll become second nature.

GUIDELINES FOR USING LOGICAL CONSEQUENCES

1. Ask your teen to help decide the consequence.
2. Put the consequence in the form of a choice:

Either/or choice	when/then choice
------------------	------------------

 - ◆ Either/or choices: "Either _____ or _____. You decide."
 - ◆ When/then choices: "When you have _____, then you may _____."
3. Make sure the consequence is logically connected to the misbehavior.
 - ◆ Not Logical: "Either be home by six o'clock or lose the privilege of watching TV for a week."
 - ◆ Logical: "Dinner is served at seven o'clock. Either be here on time or eat it cold, but at 7:30 we're clearing the table."
a
4. Give choices you can live with.
5. Keep your tone of voice firm and calm.

6. Give the choice one time, then enforce the consequence.

7. Expect testing (it may get worse before it gets better).

8. Allow your teen to try again after experiencing the consequences.

Some helpful websites that offer educational resources to parents are:

- ◆ <https://www.childwelfare.gov/topics/Preventing/promoting/parenting>
- ◆ <https://www.empoweringparents.com>
- ◆ <http://parenting-ed.org>

How You Can Help Other Families

You have the opportunity and ability to help make changes!

The Family Integrity Program is audited by the Department of Health and Human Services Quality Assurance Department. One of the responsibilities of the Quality Assurance Department is to gather information from the people who work with our agency and provide that information to the Family Integrity Program. This information is used to guide the Family Integrity Program in making necessary changes so that we can serve our clients in a more effective manner.

Your opinion is important and can help improve the services being provided to families living in St. Johns County. During your involvement with the Family Integrity Program, a Quality Assurance Department staff member may send you a survey electronically or contact you by telephone. Your name and your specific answers will be kept confidential from Family Integrity Program staff. The information that you provide will be collected and added to the answers from other parents and your feedback will be provided to the Family Integrity Program in one report.

The Family Integrity Program will then use this data to improve staff training or to change processes within the Family Integrity Program. As a result, your thoughts and opinions are very important!

We thank you in advance for your help and honesty!

HIPAA Privacy Notice

The Federal Health Insurance Portability and Accountability Act (HIPAA) of 1996 provides privacy protection of an individual's verbal, written, and electronic health information.

The Family Integrity Program will comply with all HIPAA requirements in order to protect your health information.

Please see the attached brochure concerning your rights in regard to the Federal Health Insurance Portability and Accountability Act (HIPAA) of 1996.

Family Integrity Program- Notice of Privacy Practices

This notice describes how health information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

I. We have a legal duty to safeguard your protected health information (PHI).

We are legally required to protect the privacy of your health information. We call this information “protected health information”, or “PHI” for short. It includes information that identifies you and that has been created or received by us about (1) your past, present, or future health or condition(s); (2) the provision of health care to you; or (3) the payment for this health care.

We are providing you with this notice about our privacy practices that explains how, when, and why we use and disclose your PHI. With some exceptions, we may not use or disclose any more of your PHI than is necessary to accomplish the purpose of the use or disclosure.

We are legally required to follow the privacy practices that are described in this notice. However, we reserve the right to change the terms of this notice and our privacy policy at any time. Any changes will apply to the PHI we already have. If we make an important change to our policies, we will promptly change this notice, post a new notice in the main lobby area of the program, and have copies available for distribution.

You can request a copy of this notice from the Family Integrity Program at any time.

Note to parents/guardians: If you reading this notice as your child’s personal representative, this notices describes our privacy practices with respect to your child. Please let us know if you have any questions.

II. How we may use and disclose your PHI.

We use and disclose PHI for many different reasons. For some of these uses or disclosures, we need your specific authorization, while for others, we do not. Below, we describe the different categories of our uses and disclosures.

A. We may use and disclose PHI for the following reasons without a written authorization.

1. For treatment, payment, or health care operations.

- a. **For treatment.** We may disclose your PHI to physicians, nurses, mental health professionals, and other health care personnel who provide you with health care services or are involved in your care. For example, we may disclose your PHI to your licensed mental health counselor for treatment purposes.
 - b. **To obtain payment for treatment.** We may use and disclose your PHI in order to bill and collect payment for the treatment and service provided to you. For example, if a service we provide is billable to a third party insurance company or to Medicaid, we may submit the information to them that is necessary for payment.
 - c. **For health care operations.** We may disclose your PHI in order to operate our program. For example, we use your PHI to evaluate the quality of the health care services you received.
2. **When a disclosure is required by law.** For example, we are required to make disclosures about victims of abuse, neglect, or domestic violence to the appropriate agency.
3. **For public health activities.** For example, we are required to report information pertaining to certain diseases to local health authorities.
4. **For health oversight activities.** For example, we will provide the necessary information to assist a government agency conducting an investigation or inspection of our health care activities.
5. **For judicial and administrative proceedings or for certain law enforcement purposes.**
For example, we may provide PHI in response to an order of the court, or we may provide limited PHI in response to a law enforcement official's request for such information for the purpose of identifying or locating a suspect, fugitive, material witness, or missing person.
6. **To avert a serious threat to health or safety.** For example, we may disclose PHI if in good faith we believe it is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.
7. **For specific government purposes.** For example, we may disclose PHI if we believe it is a matter of national security.

- B. Other uses and disclosures of your PHI not listed above, and permitted by the laws that apply us, will be made only with your written authorization. If you choose to sign an authorization to disclose your PHI, you may revoke (i.e., take back) it in writing at any time, except to the extent that we have already taken action based on the original authorization.

iii. You have the following rights with respect to your PHI:

- A. The right to request limits on uses and disclosures of your PHI. We are not required, however, to agree or comply with your request.
- B. The right to choose how we send PHI to you. You have the right to ask that we send information to you to an alternate address (e.g., your work address rather than your home address) or by alternate means (e.g., email instead of regular mail). We must agree to your request so long as we can easily provide it in the format you requested.
- C. The right to see your PHI. In most cases you also have the right to look at or get copies of your PHI that we have, but your request must be made in writing. If we don't have your PHI, but know who does, we will tell you how to get it. We will respond to you within 30 days after receiving your written request. In certain cases, we may deny your request. If we do, we will tell you, in writing, our reasons for the denial and explain your right to have the denial reviewed. Instead of providing the PHI you requested, we may provide you with a summary or explanation of the PHI as long as you agree to that in advance.
- D. The right to receive an electronic copy of electronic records. If we maintain PHI in an electronic format, you have the right to request this PHI be sent to you or another entity in electronic format. If we are not able to send in electronic format, we will comply with the request by producing a hard copy of the requested PHI.
- E. The right to correct or update your PHI. If you believe that there is a mistake in your PHI, or that a piece of important information is missing, you have the right to request that we correct the existing information or add the missing information. You must provide the request and your reason for the request in writing. We will respond within 60 days of receiving your request. If we approve your request, we will make the change to your PHI, tell you that we have done so, and tell others that need to know about the change. We may deny your request in writing if the PHI is (i) correct and complete, (ii) not created by us, (iii) not allowed to be disclosed, or (iv) not part of our records. Our written denial will state the reasons for the denial and explain your right to file a written statement of disagreement. If you don't file a written statement of disagreement, you may alternatively ask that your original request and our denial be attached to all future

disclosures of your PHI.

- F. The right to receive notification if and when your PHI is breached. A breach is when there is an unauthorized acquisition, access, use or disclosure of PHI which compromises the security or privacy of this information.
- G. The right to get a list of the disclosures we have made. You have the right to get a list of those instances in which we have disclosed your PHI. The list will not include uses or disclosures made to you; those related to treatment, payment, or health care operations; those that were authorized by you; those made for national security purposes; or in certain circumstances, those made to correctional institutions or for other law enforcement custodial situations.

Your request must be made in writing and you must specify the time period for which you want to receive a list of disclosures. This time period may not be longer than six years and may not include dates prior to July 1, 2003. We will respond within 60 days of receiving your request. The list we will give you will include the date of the disclosure, to whom the PHI was disclosed (including the address if known), a brief description of the PHI disclosed, and a brief statement of the reason for the disclosure.

- H. The right to get this notice by email. You have the right to get a copy of this notice by email. Even if you have agreed to receive the notice via email, you also have the right to request a paper copy of this notice.

IV. How to express concerns about our privacy practices.

If you think that we may have violated your privacy rights, or you disagree with a decision we made about access to your PHI, you may file a complaint with the person listed in Section V below. You also may send a written complaint to the Secretary of the Department of Health and Human Services, 200 Independence Avenue, S.W., Washington, D.C. 20201. We will take no retaliatory action against you if you file a complaint about our privacy practices.

v. Contact information about this notice.

If you have any questions about this notice or any complaints about our privacy practices, or would like to know how to file a complaint with the Secretary of the Department of Health and Human Services, please contact our offices at (904) 209-6080 or by traditional mail at 200 San Sebastian View, Ste. 2300, Saint Augustine, FL 32084. An administrative employee will assist you in this matter.

vi. Effective date of this notice

This notice is effective as of July 1, 2003. It was last updated June 26, 2015

Communication Assistance

“FIP will provide assessment and appropriate auxiliary aids to persons with hearing impairments and/ or interpreters to persons with hearing impairments where necessary to afford such persons an equal opportunity to participate in or benefit from programs, services. Examples include internet and taped materials, interpreters, readers, listening devices, television decoders, captioned films and other assistive devices for persons with impaired hearing. Persons with hearing impairments shall receive reasonable accommodations in accessing services through the use of auxiliary aids and/or qualified interpreters at no cost to themselves.”

“FIP will provide appropriate auxiliary aids to persons with disabilities and interpreters to persons with Limited-English Proficiency where necessary to afford such persons and equal opportunity to participate in or benefit from programs and services. Braille and taped materials, interpreters, readers, listening devices, television decoders, captioned films and other assistive devices for persons with impaired hearing or vision or with limited-English proficiency. Persons with disabilities or limited English proficiency shall receive reasonable accommodations in accessing services through the use of auxiliary aids and/or qualified interpreters at no cost to themselves.”

Your assigned case manager will consult with you concerning your preferred communication mode, if applicable. If you would like a copy of the Health and Human Service’s Auxiliary Aids Plans for the Deaf and Hard of Hearing or Disabilities and Limited English Proficiency, please speak with your Dependency Case Manager or call FIP offices at (904) 209-6080.

Questions?

If you have any questions after reading this information, please contact your Dependency Case Manager or call the Main Office Number at (904) 209-6080.

Key Case Information

Date child removed/Date services began: _____

Arrest Date: _____

Case Plan Conference Date and Time: _____

Case Plan Goal(s)

Pre-Trial Date: _____

Mediation Date: _____

Trial Date: _____

Disposition Date: _____

Judicial Review Dates:

Date of Home Study: _____

Date Home Study Approved: _____

Date of Reunification: _____

Projected Date for Case being closed: _____

Your Notes and Other Things to Remember

Please use these next pages to write down information about your case or questions that you may have for your Dependency Case Manager.

Notes, cont.

Signature Sheet

Please read this page closely. Ask your Dependency Case Manager to answer any questions that you may have about this Handbook or the Family Integrity Program at this time. You will be asked to sign and date one of the lines at the bottom of this page.

We need to make sure that you have been given this Handbook and that you understand your Rights and Responsibilities. Understanding your Rights and Responsibilities will help you reach your goal as quickly as possible.

By Signing Below I agree that:

I have received the Family Integrity Program Parent Handbook. I have had a chance to go over the Handbook with my Dependency Case Manager. I have received answers to any questions that I may have at this point in time. I understand that the Family Integrity Program is here to help me and wants to help me reach my Case Plan goal. I have read or been read my Rights and Responsibilities; I understand the Family Integrity Program procedure for Complaints; and I have been provided with a copy of The Federal Health Insurance Portability and Accountability Act (HIPAA) of 1996.

Signatures:

Parent	Date
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Parent	Date
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Other Participant	Date
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Dependency Case Manager	Date
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