



**Fee Schedule by Service – effective 01/01/19**

*Free health insurance is available for qualified children and teens through Denali KidCare.*

*We recommend all clients apply for this beneficial assistance program. If you need assistance or have questions please contact your counselor or Directing Clinician.*

Assessment, Integrated .....	485.00	each
Assessment, Mental Health.....	420.00	each
Assessment, Substance Use .....	225.00	each
Assessment, Psychiatric .....	550.00	each
Alaska Screening Tool (AST) .....	42.00	each
Therapeutic Behavioral Health Service, Individual .....	120.00	per hour
Therapeutic Behavioral Health Service, Group .....	100.00	per hour
Therapeutic Behavioral Health Service, Family .....	120.00	per hour
Psychotherapy, Individual .....	140.00	per hour
Psychotherapy, Group.....	100.00	per hour
Psychotherapy, Family .....	140.00	per hour
Psychotherapy, Multi-family Group.....	140.00	per hour
Case management .....	100.00	per hour
Crisis Intervention Short-term.....	124.00	per hour
Pharmacologic management.....	140.00	each
Psychological testing and evaluation.....	140.00	per hour
Residential Substance Use Treatment (ARCH).....	430.00	per day

**SLIDING FEE SCALE IS AVAILABLE**

It is available to all customers not eligible for Denali KidCare, even those with insurance. To apply, please provide:

your most recent tax return (only the first two pages) <u>OR</u> 1 month of paystubs AND the number of people in your household
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Call our Billing Department at 907-279-9627 with questions.

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

# ASSIST PROGRAM DESCRIPTION

## **General Description**

Volunteers of America Alaska provides outpatient treatment services for individuals ages 0-65 who struggle with mental illness, substance abuse, and co-occurring mental health disorders. Assist consists of outpatient, intensive outpatient and aftercare programs. Volunteers of America Alaska is accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF).

## **Referral/Assessment**

Each individual is evaluated by the Assessment Specialist and may be reviewed by a placement committee. Each individual is carefully assessed and placed in an appropriate level of care depending on their individual needs.

## **Admission Criteria**

### **A. Admission Criteria**

1. Primary presenting problem of mental illness, substance abuse, or co-occurring mental health disorders.
2. Individuals between 0 and through 65 years of age.

### **B. Exclusions**

1. This program may not be appropriate for individuals who have a history of extreme violence towards self or others.

## **Program Descriptions – Types of Outpatient Programs Offered**

### **Outpatient Substance Use (OP SU) - Children and Adolescents**

The Outpatient Program is an educational component for youth who struggle with substance abuse issues. This program consists of one group per week for 12 weeks and weekly attendance at Community Night. Group sessions are held Wednesdays from 4:00-6:00pm. Community Nights are held Wednesday from 6:30-7:30. The second half of community night is optional normally; a total of 3 individual sessions will be scheduled as the youth progresses through the program, although sometimes more individual sessions are required. Random UA's may be required.

### **Outpatient Substance Use (OP SU) - Adults**

The Outpatient Program is an educational component for adults who struggle with substance abuse issues. This program consists of one group per week for 5-12 weeks. Individual sessions will be scheduled on a weekly basis or as needed through the program. Random UA's may be required.

### **Outpatient Mental Health and Family (OP MH) - Children, Adolescents or Adults**

Mental Health and Family Therapy is individual and/or family therapy designed to address the mental health concerns and diagnoses derived from an assessment. The frequency and duration of sessions is determined by the assigned master's level clinician in collaboration with the client and family, based upon perception of need, acuity level, and assessment results. The mental health clinician coordinates on-site psychiatric assessments and medication management appointments with VOA consulting psychiatrist as needed. Random UA's may be required.

### **Outpatient Co-Occurring (OP CO) - Children, Adolescents or Adults**

This program may be a combination of the educational components for individuals who struggle with substance abuse issues and a mental health disorder. Group and individual counseling or therapy sessions will be scheduled on a weekly basis or as needed through the program. Random UA's may be required.

### **Individualized Program (INDV) - Children, Adolescents or Adults**

This Individualized outpatient program is offered to children, adolescents or adults whose needs cannot be met through our typical levels of care. Clients may attend weekly individual sessions with a primary counselor, the mental health therapist, or may be offered groups in accordance to their need. Random UA's may be required.

### **Continuing Care Substance Use (CC SU) - Children, Adolescents or Adults**

Volunteers of America Alaska strongly believes that treatment is an ongoing process and therefore places a strong emphasis on aftercare. Aftercare is offered to clients involved in the ARCH and Assist programs. The aftercare counselor interfaces with all program components to facilitate a smooth transition from primary treatment. The aftercare program consists of weekly participation in one group per week and one individual session. Additional support may be offered in the form of family therapy. Random UA's may be required.

### **Continuing Care Mental Health (CC MH)- Children, Adolescents or Adults**

Aftercare is offered to clients involved in the Assist programs. The aftercare counselor interfaces with all program components to facilitate a smooth transition from primary treatment. Mental Health and Family Therapy is individual and/or family therapy designed to address the mental health concerns and diagnoses derived from an assessment. The frequency and duration of sessions is determined by the assigned master's level clinician in collaboration with the client and family, based upon perception of need, acuity level, and assessment results. The mental health clinician coordinates on-site psychiatric assessments and medication management appointments with VOA consulting psychiatrist as needed. The aftercare program consists of weekly participation. Random UA's may be required.

### **Continuing Care Co-Occurring (CC CO)- Children, Adolescents or Adults**

Aftercare is offered to clients involved in the ARCH and Assist programs. The aftercare counselor interfaces with all program components to facilitate a smooth transition from primary treatment. Group and individual counseling or therapy sessions will be scheduled on a weekly basis or as needed through the program. Additional support may be offered in the form of family therapy. Random UA's may be required.

### **Family Therapy Only (FAM)- Children, Adolescents or Adults**

Family Therapy only is individual and family therapy designed to focus on the family dynamics to address the mental health concerns and diagnoses derived from an integrated assessment. The frequency and duration of sessions is determined by the assigned master's level clinician in collaboration with the client and family, based upon perception of need, acuity level, and assessment results. The mental health clinician coordinates on-site psychiatric assessments and medication management appointments with VOA consulting psychiatrist as needed.

### **Transition to Independence Process (TIP) - Adolescents and Young Adults (14-20)**

TIP is an outpatient community-based model that serves transition aged clients who are experiencing severe emotional and/or behavioral difficulties. TIP engages clients through services that are strength-based and client driven. The TIP model also connects the client with a Transition Facilitator who prepares them for progression into adult roles with a focus on employment and career, education, living situation, personal effectiveness/wellbeing, community-life functioning, and safety net of support. Clients must be between the ages of 14-20, have a serious emotional disturbance and/or substance use disorder, and reside in the Anchorage or Mat-Su Borough area. TIP can be a stand-alone outpatient program, be in addition to another outpatient program or in addition to an intensive outpatient program.

### **Intensive Outpatient Substance Use (IOP SU) - Children and Adolescents**

The Intensive Outpatient Program consists of 9 to 12 contact hours per week in the form of individual, group and family counseling for a period of approximately 12 weeks. Youth appropriate for this program requires increased structure and frequent counseling in order to maintain abstinence while in an outpatient setting. Groups are held 5 times per week and are up to 2 hours in duration. Individual sessions are scheduled one time per week. Family involvement through family counseling sessions, community night, and community night groups is strongly encouraged. Random UA's are required.

### **Intensive Outpatient Co-Occurring (IOP CO) - Children and Adolescents**

The Intensive Outpatient Program consists of 9 to 12 contact hours per week in a combination of counseling and psychotherapy sessions that may be individual, group, or family sessions for a period of approximately 12 weeks. Youth appropriate for this program requires increased structure and frequent counseling in order to maintain abstinence while in an outpatient setting. Groups are held 5 times per week and are up to 2 hours in duration. Individual counseling sessions are scheduled one time per week. Psychotherapy individual and group sessions will be scheduled according to the needs of the individual. Family involvement through family counseling or therapy sessions, community night, and community night groups. Random UA's are required.

### **Family Involvement for Intensive Outpatient Services**

Volunteers of America Alaska views chemical dependency as a disease that impacts the entire family. Family involvement plays a critical role in the treatment process. Treatment of the individual is enhanced when treatment and information are extended to the family. We encourage family members to take an active role in their child's treatment by communicating with his/her counselor and attending family services such as family sessions, family night, and parent support group. Volunteers of America Alaska employs a family support coordinator who is available to help parents and families through the treatment process.

The family program consists of a 12 week series for clients and their family members. This group provides an opportunity for family members to receive support from others with similar experiences, learn about the various aspects of substance abuse and chemical dependency and recovery, and to begin the healing process for all family members. This group will be held once a week at the Assist Office.

## Program Description – Partnerships

### **Covenant House Partnership**

Volunteers of America Alaska partners with Covenant House to offer adolescents ages 12-21 who reside within Covenant House Alaska needed services. Clients can request services or be identified by Covenant House Alaska staff as having a potential substance issue and will be referred to the Volunteers of America clinician for an assessment. The Volunteers of America clinician may identify these adolescents through interactions within Covenant House, as well. Each adolescent is placed in an appropriate level of care depending on their individual needs. Clients are offered weekly individual sessions, group sessions, psychotherapy sessions and case management services to meet their needs. Clients may also be eligible to receive TIP services.

### **Christian Health Alliance Partnership**

Begich Middle School – Provide integrated assessments, drug and alcohol education, crisis intervention and individual mental health and substance use counseling to the students of Begich Middle School. Students are taught life and coping skills, feelings and behavior management skills to improve the functioning in their life within and outside of the school setting. Case management and care coordination are also provided to support the student and their family, as well as link them to needed resources and positive social activities in their home community.

### **Program Restrictions:**

All program expectations are reviewed during intake. Treatment expectations include providing UA's, demonstrating cooperative, non-threatening and reasonable behavior, maintaining abstinence and showing up for services.

Refusal to participate and/or treatment violations in program expectations will result in the following actions:

- Possible removal from the program until further notice
- Case conference
- Parent's, probation, court or any other involved parties may be notified

The means by which a client regains his/her rights to be reinstated back into any of our programs will be determined by clinical staff, with an agreement of conditions of all parties involved.

### **Program Components:**

#### **Treatment planning**

Parent/guardians, referral representatives, client, and the Assist program staff will be involved throughout the treatment planning process. An individualized treatment plan will be developed for each youth by the primary counselor with input from the client and the parent/guardian. The treatment plan will address presenting problems to include substance abuse issues, co-occurring mental health disorders, family issues, academic progress, relapse prevention and community support. The treatment plans will be reviewed with the client and his/her parents/guardian. The client is expected to actively participate in the achievement of the goals noted on the treatment plan. Clients will be given the support needed to do so.

#### **Therapeutic Interventions (Interventions, Sanctions, Incentives)**

The treatment plan will outline therapeutic interventions that will be including during the treatment process. Interventions may include individual, group and family sessions, mental health services, case management and outside referrals. Additional interventions may be assigned by the treatment team as needed. All interventions are individualized for each client. Incentives are used throughout the Assist program to reward attendance to program activities and progress in treatment. If a client is unable to comply with program expectations, is interfering with the treatment of others, and is engaging in unsafe behaviors steps will be taken to help the client manage his/her behaviors. This could include modification of the treatment plan, behavioral contracts, referrals for additional services, or possible staffing for discharge. Clients will be given an opportunity and to change their behaviors an engage in the treatment process.

#### **Attendance**

Consistent attendance is critical to a successful treatment experience for this reason, there are no unexcused absences allowed. Each program component has a specific number of excused absences allowed. If an individual is unable to meet the attendance requirements, he/she may be discharged and given a referral to a more appropriate program. They may be re-screened for re-admission to Assist, or ARCH, if appropriate. Excused absences for groups and individual sessions will need to be made up.

In the **Outpatient Program** a client can have a maximum of two (2) excused absences from group and one (1) for individual sessions.

In the **Intensive Outpatient Program**, a client can have a maximum of five (5) excused absences from groups and two (2) for individual sessions.

**IOP Point System:** The IOP Program is on a point system. Clients are responsible for earning at least the minimum number of points necessary to move to a lower level of care, or graduate. The benefit of the point system is that clients have the ability to move through treatment at a quicker pace, if they choose too.

**Continuing Care Program:** A client can have a maximum of one (1) excused absence from group and one (1) from individual sessions. Excused absences for group and individual sessions will need to be made up.

**Individual Program:** A client can have a maximum of two (2) excused absences.

**Mental Health and Family Therapy:** A client can have a maximum of two (2) excused absences.

**Transition to Independence Process:** A client can have a maximum of one (1) excused absence from an individual session and one (1) absence from any groups that are assigned.

**Covenant House Partnership:** Due to the transient nature of this treatment population there are no attendance requirements. Every effort is made to keep clients engaged in services.

**24 hour notice** is required for all canceled appointments. Missed appointments without prior notification may be billed.

**Office Hours and Access to After-Hour Services**

The Assist office is open from 9 to 5:30. Messages can be left for counselors after hours. Clients needing emergency services after hours are to call 911 or go to the Providence Hospital Psychiatric Emergency Room, Alaska Native Medical Center, or Northstar Hospital.

**Financial Responsibility**

At the time of intake, a payment plan will be developed for each family. This fee is based on a sliding fee scale according to ability to pay. Medicaid and insurance are accepted.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness (Staff) Signature

\_\_\_\_\_  
Date

## ASSIST PROGRAM RULES

1. Arrange for transportation, come on time, and attend all scheduled sessions. If unable to make any appointments or activities please cancel at least 24 hours in advance.
2. You can only be 5 minutes late, or 15 minutes if you call in prior to session time, in order to still be allowed into session. Being late should be the exception not the rule!
3. No drugs or drug paraphernalia is permitted in the building or on the premises. This includes hemp items, tobacco products, alcohol, and all other drugs.
4. Smoking is not permitted on the same block as the building. The session you attended that day will be counted as an absence if you do so.
5. Weapons or items used to simulate knives, guns or other items intended to threaten or harm are not allowed at the Volunteers of America programs.
6. No clothing with profanity/vulgarity or clothing advertising alcohol, tobacco or other drugs, violence, or sex. Low-cut blouses or see-through shirts are not to be worn. No bandannas, rags, gloves, chains, or gang-related decorative articles are to be worn.
7. You must have at least 24 hours of clean time in order to be in session.
8. Outer garments, including coats, jackets, hats, hoods, sunglasses, backpacks, and purses are not permitted in group rooms or in individual sessions. Please leave these items in the front office.
9. Cell phones, beepers, or electronic equipment must be completely turned off during groups and individual sessions. If an electronic device goes off during a group or individual session on even one occasion, you will need to leave it at the front desk for the remainder of your program.
10. When in group, there is no leaning back in chairs and chairs must remain within the group circle.
11. No food, gum, or beverages (including water) are allowed in individual and group sessions. Food items with the exception of candy and soda can be brought into the first half of family night.
12. No gossiping about your peers, while you are in or out of the program. Confidentiality of others should be kept at all times.
13. No romantic relationships with peers also involved in treatment.
14. No swearing, hate language or sleeping in session.
15. Participation is expected in all program activities.
16. Attendance is essential. The allowed number of absences is noted in the Program Description for each program.

If there is more than the allowed number of absences, the client will be staffed for discharge and may need to be assessed for readmission or referral.

17. Refusal to follow the program expectations will result in the following actions:
  - Possible removal from the program until further notice
  - Parent's, probation, court or any other involved parties may be notified
  - Case conference will be held with parents/guardians, probation and other involved entities

The means by which a client regains his/her rights to be reinstated back into any of our programs will be determined by clinical staff, with an agreement of conditions of all parties involved.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness (Staff) Signature

\_\_\_\_\_  
Date



## Client Rights

Volunteers of America of Alaska make it a priority to safeguard the rights of the persons served.

1. Each client has a right to the provision of services in a manner that is sensitive to the person's age, gender, social preferences, culture, religion, spiritual beliefs, language, sexual orientation, socioeconomic status, psychological characteristics, physical situation, or disability.
2. Each client has a right to be treated with dignity and respect; free from neglect and abuse (physical punishment, sexual abuse, and psychological abuse); including humiliating, threatening, and exploiting actions and/or retaliation.
3. Each client will be free from any abuse for financial gain to include misuse of funds received from or held for the client or taking advantage of the relationship with the person served.
4. Each client has a right to confidential maintenance and privacy of all information pertaining to the client and the right of prior written approval for the release of identifiable information. No information that would directly reveal your treatment status may be disclosed to anyone outside the agency without your informed, written consent as governed by local, state, and federal laws (exception as outlined in privacy notice: subpoenas from a court of law or when there is reasonable concern that harm may come to you or others).
5. Each client has a right to informed consent, informed refusal, and/or expression of choice regarding service delivery, releases of information, concurrent services, and involvement in research projects and composition of the service delivery team. If involved in a research project guidelines and ethics will be adhered to at all times.
6. Each client has the right to withdraw consent for services and/or seek services at another agency and to do so without pressure or intimidation.
7. Each client has a right to be involved in all aspects their treatment including participation in formulating, evaluating, and periodically reviewing his or her individualized written treatment plan, including requesting specific forms of treatment, being informed why requested forms of treatment are not made available, refusing specific forms of treatment that are offered, being informed of treatment prognosis, to be provided information in a timely manner for decision making, and communicated in a language and format that you understand.
8. Each client has the right to timely case reviews and referral to internal and external services.
9. Each client has the right to access or referral to legal representation, self-help groups, and advocacy support services.
10. Each client is entitled to all their legal rights. Each client has the right to be informed of all agency rules and regulations related to your service, and provided treatment with the least restrictive intervention possible.
11. Each client has the right to initiate a complaint or conflict resolution about your services and to be informed of the agency's grievance procedure. Additionally, all clients have the right to an investigation and resolution of alleged infringement of rights.
12. Each client has the right to receive prompt and adequate medical treatment.
13. Each client has the right to provide input on programming, rules, and quality of care through regular evaluations.
14. Each client has the right to review with a staff member at a reasonable time, their treatment record and request amendments as stated within the guidelines of federal law and Volunteers of America-Alaska procedures; however, information confidential to other individuals may not be reviewed by the client.
15. Each client may request a written summary of your treatment, which should include discharge and transition plans.
16. Each client will be informed by the prescribing physician of the name, purpose, and possible side effects of medication prescribed (when applicable) as part of the client's treatment plan at the community behavioral health services provider.

I acknowledge that I have reviewed, and understand the client rights listed above.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date



**VOLUNTEERS OF AMERICA ALASKA  
SUMMARY OF CODE OF ETHICS**

ARCH and Assist programs are committed to providing ethical and professional care to the person served. The ethical standards of the National Association of Alcoholism and Drug Abuse Counselors (NAADAC) have been adopted and posted in each facility. Staff must present themselves in a professional manner and take reasonable steps to promote the health, safety and well being of each person. In summary, the following ethical behaviors are expected:

1. **Non-discrimination:** Individuals will be treated with dignity and respect; with a commitment to the recognition of diversity in culture, age, gender, religion, language, sexual orientation, economic status, and/or ability.
2. **Responsibility:** Individuals are required to adhere to the policies and practices of the organization which are designed to support responsible behavior of staff in the safety and professional care of the person served.
3. **Competency:** The organization identifies and recruits personnel that demonstrate the skills and characteristics needed to be successful in delivering programs and services to accomplish the expected outcomes. Professional boundaries must be maintained at all times.
4. **Legal and moral standards:** Staff will uphold legal and accepted moral codes which pertain to professional conduct, treatment standards, and the law.
5. **Public statements:** Statements made to clients, the public, or other professionals concerning alcoholism and drug abuse, its natural history, and treatment options shall be based on substantiated / scientific facts.
6. **Publication credit:** All published and presented treatment materials will assign and credit the work on which the publication is based.
7. **Client welfare:** The health, safety, welfare and best interests of the person served guide the counseling relationship.
8. **Confidentiality:** Protects the privacy of clients and the disclosure of confidential information with consent.
9. **Client relationships:** Relationships are therapeutic in nature and must not be jeopardized by relationship outside of treatment or business relationships with the person served or family.
10. **Inter-professional relationships:** Colleagues are treated with respect, courtesy, and fairness and extend these courtesies to other professionals.
11. **Remuneration:** Financial arrangements are made through the agency in accord with professional standards that safeguard the person served.
12. **Societal obligations:** Staff advocate for changes in policy and legislation to afford opportunity and choice for all persons whose lives are impaired by the disease of alcoholism and other forms of drug addiction.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

## CLIENT GRIEVANCE POLICY

It is the policy of Volunteers of America to address all client grievances in a timely and uniform manner. When a problem arises which a client and/or family member feels is unacceptable the following appeal process is available.

**Procedure:**

1. The Grievance Policy will be reviewed with the client and his/her parents at intake in a manner that is understandable.
2. Client and their parents are encouraged to talk to their primary counselor about any concerns they may have. It is possible that a misunderstanding has taken place and can be cleared up if the persons involved are aware that a problem exists.
3. If an agreement cannot be achieved then a client can put the grievance in writing, preferably within three days. An impartial person will be assigned to provide assistance with this process upon request. The grievance will be forwarded to the clinical supervisor (assist) and the clinical director (ARCH).
4. Grievance Forms and envelopes are available at the reception area of the facility upon request.
5. The Clinical Supervisor or Clinical Director will respond in writing to the client / parent with a decision within five days of receipt of client's written complaint.
6. If an agreement cannot be achieved, the client may contact the Treatment Services Director within five days and ask for a case review. At that time, parents, appropriate case workers, probation officers and VOA staff will schedule a meeting with the client to resolve the situation. Every effort will be made to have this meeting within seventy two hours dependent upon the availability of caseworkers, client, parents and probation officer.
7. If the situation remains unresolved, the issue will be forwarded to the President/ CEO for consideration.
8. If a resolution is not reached, the Division of Behavioral Health will be contacted and requested to mediate the situation.
9. Grievances will be reviewed at each Quality Assurance Committee meeting to assess for trends and areas needing performance improvement.
10. Clients are guaranteed no retaliation, barriers to service, or consequences as a result of filing a grievance.

\_\_\_\_\_  
Client Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Legal Guardian Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

## VOLUNTEERS OF AMERICA ALASKA CONSENT FOR THE RELEASE OF CONFIDENTIAL INFORMATION

### Follow-Up Surveys

Volunteers of America-Alaska is committed to providing quality treatment to our clients. It is important that the ARCH and Assist programs are effective and meet the needs of those we provide services for. To help ensure this VOA conducts follow-up surveys with our clients at intake, three months, discharge, and six and twelve months post treatment. The data from these surveys further allow us to make changes and improvements to the ARCH and Assist programs. The surveys will be completed in our facility while clients are in the treatment program. After discharge follow up survey information will be collected by phone or by mailing the survey to the client's home address. Please be assured that confidentiality guidelines will be followed and information is for program evaluation only.

I have read the above information and I give my consent for Volunteers of America to contact me for follow up surveys, up to 18 months after I leave the program. I give my consent for Volunteers of America to contact my legal guardian for my location if I am unable to be reached after I have left treatment.

Date of Authorization: \_\_\_\_\_

I, \_\_\_\_\_ / \_\_\_\_\_  
Client Name Date of Birth

authorize Volunteers of America-Alaska (Assist/ARCH) and to communicate with and disclose to one another the following information verbally, written, and/or facsimile: (**Client MUST** initial each category that applies).

My name and other personal identifying information	My location to include phone number and physical address
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To the following individuals: (**Client MUST** initial each category that applies).

Parent or Legal Guardian	State Social Worker
Probation Officer	Other (must specify):

The disclosure of the information in this consent is for the purpose of:  
(**Client MUST** initial category that applies)

Collection of Follow-Up Survey Data
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I understand that the information to be disclosed includes information pertaining to drug/alcohol abuse, treatment and rehabilitation. \_\_\_\_\_ (**Client MUST** initial)

I understand that my records are protected under the federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient records, 42 C.F.R. Part 2 and the Health Portability and Accountability Act of 1996 (HIPAA), 45C.F.R., Parts 160 and 164, cannot be disclosed without my written consent unless otherwise provided in the regulations. I also understand that I may revoke this consent in writing at any time except to the extent that action has been taken in reliance on it, and that in any event this consent expires automatically as upon obtaining 12 month follow up survey.

I understand that generally Volunteers of America, Alaska may not condition my treatment on whether or not I sign a consent form, but that in certain limited circumstances I may be denied treatment if I do not sign a consent form.

Signature of Client:		Date:	
Witness:		Signature of Parent/Legal Guardian:	

## Tuberculosis (TB) and Hepatitis Fact Sheet

### Tuberculosis Facts

#### What is Tuberculosis (TB)?

TB is caused by bacteria that get breathed into the lungs. The bacteria grow and multiply in the lungs and cause sickness (active TB), of the body fight the infection and put it to sleep (latent TB). Latent TB can become active again later in life if not detected and killed with medications.

#### How do I get it?

The bacteria are easily spread from one person to another when the infected person coughs. People most at risk are those who come from places where there is a lot of TB, who live in close quarters with others, or who have weak immune systems. Examples include people from certain areas of the world, prisoners, drug addicts, people in homeless shelters, and people infected with HIV.

#### How do I know if I have TB?

People with active TB are usually sick. They cough for several weeks, are tired, and may cough up blood or sputum. They also may have fevers, weight loss, and loss of appetite, along with other signs of illness. People infected with latent TB are not sick and have no symptoms.

#### If I am not sick, how do I get tested for latent TB?

A nurse can give a simple injection in the forearm, called a PPD. The forearm is then looked at by a nurse 48 – 72 hours later. If the body has been exposed to TB, it will cause a skin reaction on the person's arm. This reaction means that the person needs to be checked further to look for TB in the body. Usually a chest x-ray will be done, and the person will be interviewed by a nurse. A person with a PPD skin reaction and latent TB, (not sick) will probably be advised to take medicine to kill the bacteria and be cured.

#### How often do I need to be tested for TB?

School nurses check all students every year. The PPD test may be done more often. It may be done every 3-6 months for people who work in hospitals or prisons. People moving into treatment centers are tested before they enter.

#### What if I have more questions?

Please talk to your school nurse or family health care provider. You may want to look at the information on the internet written by the Centers for Disease Control (CDC) at: <http://www.cdc.gov>.

### Hepatitis Facts

#### What is Hepatitis C (Hep C)?

Hepatitis C is caused by a virus that is spread from one person to another.

#### How do I get it?

Hepatitis C is transmitted when blood or body fluid from an infected person enters the body of a person who is not infected. People who are most at risk for being infected with hepatitis C are injection drug users, and people who received blood products before blood was tested for the virus. Hepatitis can also be transmitted from a mother to her infant, through dirty tattoo or body piercing needles, and from having unprotected sex.

#### Aren't there other kinds of hepatitis?

Yes. Hepatitis means inflammation of the liver. It may be caused by infection with a virus like hepatitis C virus. Hepatitis could also be a result of other illness, infections, chemicals, drugs, or abuse, like alcoholism.

#### What are Hepatitis A and Hepatitis B?

**Hepatitis A** is a virus that makes a person ill for several weeks/ It is preventable with good hand washing and safe food preparation, and there is a vaccine. It is commonly spread from one person to another from dirty hands. An infected person, who does not wash his or her hands when going to the bathroom, spreads the infection by touching food that is then eaten, or by shaking hands with another person who does not wash his hands before he eats.

**Hepatitis B** is spread like HIV and Hepatitis C, through infected blood and body fluids. It is also preventable by vaccine and by avoiding risks that lead to contact with infected blood and body fluids. All Alaska students have to have the Hepatitis A and B vaccines to get into school as of 2001.

#### How do I keep from getting Hepatitis C?

There are no vaccines to protect people from this infection. To keep from getting Hepatitis C, do not use injection drugs or share needles. Consider the risk of piercing and tattooing. Never share personal hygiene items that might have blood on them (i.e. razors or toothbrushes). Avoid sexual contact that may expose a person to blood or body fluids. Get more information. Log onto: <http://www.cdc.gov> and look at Hepatitis C or ask your medical provider.

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Signature of Person Receiving Services

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Date