

Diana Valdez, PhD, LPC

1701 River Run, Suite 1107, Fort Worth, TX 76102 • (817) 332-1425 • dianavaldezphd@gmail.com

Welcome to the psychotherapeutic services of Diana Valdez, PhD & Associates, PA. The following notice is an introduction to your rights and responsibilities as a client at the clinic.

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. This notice also serves to obtain your consent for clinical policies and procedures. Please review it carefully.

Diana Valdez, PhD & Associates, PA is required by law to maintain the privacy of your health information and to provide you with notice of its legal duties and privacy practices with respect to your health information. If you have questions about any part of this notice or if you want more information about our privacy practices please contact Dr. Diana Valdez, 817-332-1425.

Effective April 14, 2003:

I. How We Protect Your Health Information

We protect your health information by:

- ❖ Treating all of your health information that we collect as confidential.
- ❖ Stating confidentiality policies and practices in our clinic staff handbooks, as well as disciplinary measures for privacy violations.
- ❖ Restricting access to your health information only to those clinical staff that needs to know your health information in order to provide our services to you.
- ❖ Maintaining physical, electronic, and procedural safeguards to comply with federal and state regulations guarding your health information.

II. Conditions That Require Release of Health Information

Our clinic maintains records of client health information in a confidential file system. The client files remain the property of Diana Valdez, PhD & Associates, PA but the information belongs to you. We protect the privacy of your health information.

Uses and Disclosures Requiring Authorization

We may use or disclose mental health information outside treatment or healthcare operations when your appropriate authorization is obtained. An authorization is written permission above and beyond the general consent that permits only specific disclosures. In those instances when we are asked for your private information we will obtain a written authorization from you before releasing this information. You may revoke such authorizations at any time provided each revocation is in writing.

Uses and Disclosures with neither Consent nor Authorization

Diana Valdez, PhD & Associates, PA may use or disclose your mental health information without your consent or authorization in the following circumstances:

- ❖ Abuse – If we have reason to believe that a minor child, elderly person or person with a disability has been abused, abandoned, or neglected, we must report this concern or observations related to these conditions or circumstances to the appropriate authorities.
- ❖ Health Oversight Activities – If the Texas State Board of Examiners of Professional Counselors is investigating a clinician that you have filed a formal complaint against, the clinic may be required to disclose protected health information regarding your case.
- ❖ Judicial and Administrative Proceedings as Required – If you are involved in a court proceeding and a court subpoenas information about the professional services provided you and/or the records thereof; we may be compelled to provide the information. Although courts have recognized a clinician-client privilege, there may be circumstances in which a court would order the clinic to disclose personal health or treatment information. We will not release your information without attempting to notify you or your legally appointed representative.
- ❖ Professional Harm – If you disclose sexual contact with another mental health professional with which you have had a professional relationship, we are required to report this violation to the licensing board. You have the right to anonymity in the filing of the report.
- ❖ Serious Threat To Health or Safety – If you communicate to clinic personnel an explicit threat of imminent serious physical harm to yourself or others and we believe you may act on that threat, we have a legal duty to take the appropriate measures, including disclosing information to the police. In both cases, we will disclose only what we feel is the minimal amount of information necessary.
- ❖ National Security – We may be required to disclose to military authorities the health information of armed forces personnel under certain circumstances. We may be required to disclose to authorize federal officials health information required for lawful intelligence, counterintelligence, and other national security activities. We may be required to disclose mental health information to a correctional institution or law enforcement official having lawful custody of protected mental health information of an inmate or client under certain circumstances.
- ❖ Research and Training: Any research conducted here is subject to an institutional review board that serves to safeguard your privacy and health. You will be informed if a research project is being conducted at this site.