PRIVACY POLICIES AND PROCEDURES

Confidentiality and privacy are the cornerstones of the mental health professions. Clients expect their communications with therapists and their treatment records to generally be kept confidential, and not be released to others without their written authorization. One purpose of the **Privacy Policies and Procedures** is to inform and educate clients that there are exceptions to the general rule of confidentiality. Many of these exceptions have existed for years, and many are the result of laws and regulations being passed by state legislatures and by the federal government (essentially statements of public policy). Office policies and procedures, as well as professional ethical standards, shape the delivery of psychotherapy so that privacy and confidentiality are maintained, consistent with Colorado law and the federal "Privacy Rule".

1. Patti Ashley, Ph.D., L.P.C., as an independent private practitioner, is responsible for developing and implementing these policies and procedures, which are effective April 14, 2003, and will remain in effect until replaced.
2. All documentation of consents, authorizations, **Privacy Policies and Procedures**, and client requests for records or amendments to records will be maintained, as well as complaints received and their disposition.
3. Client records will be kept in a secured location outside of the delivery office. Privacy for therapy sessions and telephone conversations with clients and third party business associates will be protected.
4. Information and records concerning a client may be disclosed as described in the **Privacy Policies and Procedures** and **Informed Consent and Release**, and in accordance with applicable law or regulation. Generally, written authorization from the client will be obtained in advance of releasing information to third parties for purposes other than treatment, and health care operation, unless disclosure is required or permitted by law.
5. Subject to limitations outlined by law, clients have the right to request restrictions on the use and disclosure of protected health information; however, therapists are not obligated to agree to requested restrictions if deemed not in the best interest of the client.
6. If an adverse party subpoenas mental health records, psychotherapist-client privilege will be asserted on behalf of the client. Thereafter, action will be in accordance with the client or client's attorney's wishes, unless ordered by a court or other lawful authority to release records, or portions thereof.
7. Client's records are kept for a minimum of seven (7) years from the date of last treatment; records of a minor are kept for a minimum of seven (7) years, or until the client is twenty-one (21) years old, whichever is longer. After those minimums, client records may be destroyed in a manner that protects client privacy and confidentiality.
8. Clients will verify permission to receive correspondence at their residence (ex. claim forms, bills) and calls or messages at their residence or elsewhere (ex. to change appointment time or date, or to discuss matters related to their treatment).
9. If protected mental health information about a client is shared with third party business associates (as part of mental health care options), a written contract with the client and the business associate, which contains terms that will protect the privacy of the information, will be executed.
10. The duty of confidentiality and the psychotherapist-client privilege survive the death of a client.
11. If information is transferred electronically, steps will be taken to ensure the communication or transfer of information is protected and maintains confidentiality.

These policies and practices are in support of the privacy of your health information. Please contact me if you have questions or concerns about the privacy practices. You may submit a written complaint to the U.S. Department of Health and Human Services.

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