

Understanding Your Rights While Receiving Supports From Triangle Comprehensive Health Services, Inc.



Welcome to Triangle Comprehensive Health Services, Inc.

Triangle Comprehensive Health Services, Inc. is an endorsed provider, with offices in Goldsboro and Youngsville, North Carolina. Services offered have been approved by each contracting MCO and are tailored to meet the needs of the individuals we support. We have been in business for 30 years, and we are run by an Advisory Board. Our Advisory board is made up of 5 people from different cities in North Carolina. Our board makes major decisions about how Triangle Comprehensive Health Services, Inc. operates, and our staff put those decisions into actions. Triangle Comprehensive Health Services, Inc. also has an Executive Director, Debra Barfield, who manages all of our staff. The Executive Director works in both of our offices.

Triangle Comprehensive Health Services, Inc's mission is to provide quality service to individuals who experience mental illness, developmental disabilities, and/or substance abuse to assist them in attaining their maximum potential as members of their community. Triangle Comprehensive Health Services, Inc's vision is that through positive collaborative working relationship with our community resources, persons served and all stakeholders, we will become a provider of choice for the services that we offer.

Our Philosophy is that everything we do is done in the best interest of those we serve to ensure their needs are properly met. We will demonstrate and maintain high ethical standards in our day-to-day operations and in relationships with cohorts and clients to ensure our clients receive the highest quality of care we can provide. We value the individuality, dignity, and self-worth of those we serve. Therefore, we will conduct ourselves in a manner consistent with our mission, philosophy and ethics statements to provide optimal services to everyone we serve.



Your Information. Your Rights. Our Responsibilities.

Notice of Privacy Practices

This notice is effective 6/3/2025

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.**

Your Rights

You have the right to:

- Get a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communication
- Ask us to limit the information we share
- Get a list of those with whom we have shared your information
- Get a copy of this privacy notice
- Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

Your Choices

You have some choices in the way that we use and share information as we:

- Tell family and friends about your condition
- Provide disaster relief
- Include you in an agency directory
- Provide IDD/mental health services
- Market our services and sell your information

Our Uses and Disclosures

We may use and share your information without your consent to:

- Treat you
- Run our organization
- Bill for your services
- Help with public health and safety issues
- Comply with the law
- Respond to organ and tissue donation requests
- Work with a medical examiner or funeral director
- Address workers' compensation, law enforcement, and other government requests
- Respond to lawsuits and legal actions
- And any other exceptions detailed in NC General Statute 122C 53-56 or in 45 CFR 164.512 of HIPAA

Your Rights

When it comes to your health information, you have certain rights.

Basic client rights according to the North Carolina General Statutes:

It is the policy of the State to assure basic human rights to each consumer. These rights include the right to dignity, privacy, humane care and freedom from mental and physical abuse, neglect and exploitation.

As a consumer of services, you have many rights. Because you have many decisions to make understanding your rights will help you get the best possible care. Triangle Comprehensive Health Services, Inc is committed to providing you with the best possible care and to make you aware of your rights as a consumer. If after you read this handbook and you have additional questions, please do not hesitate to contact a staff member for any answers you may need. TCHS staff can be contacted toll free at 919 705-1020.

Knowing your rights can help you:

- Make better decisions about your care
- Resolve any problems that may occur

Also, you always have the right to ask questions and get the information you need to make the best decision for you!

You have the right to be told about any rules you need to follow. This information will be shared with you when you begin receiving services.

You have the right to be treated with respect and dignity at all times and TCHS insists that every consumer is treated accordingly.

Your rights will be explained so that you are able to understand them. Please ask questions if you are confused about your rights.

We will explain all rules that you are expected to follow and possibly (what will happen) for choosing to not follow the rules.

Everyone at TCHS should be courteous, attentive and sensitive to your needs and values. You have the right to have your personal business maintained. Unless you (or your legally responsible person) consent (give permission) for us to share information, we won't talk to anyone about you or your treatment.

All consumers have a right to live in a safe and comfortable environment and to receive the services that suits your unique needs.

You have the right to be as independent as possible and to be taught the independent life skills that you need to help you become as independent, as possible.

You have the right to be informed consent. "Informed Consent" means that you will be given all of the information that you need before you make a decision about your care.

This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Please notify our TCHS Clinical Supervisor by writing a request.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.
- There are certain situations in which we are not required to comply with your request. Under these circumstances, we will respond to you in writing, stating why we will not grant your request and describing any rights you may have to request a review of our denial.

Ask us to correct your record

- You can ask us to correct health information about you that you think is incorrect or incomplete.
- If you wish to add an amendment to the clinical record yourself, that must be done in the presence of a TCHS staff member. The TCHS staff member may add an additional response to your amendment but only in your presence.
- We may say “no” to your request, but we will tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home, or office phone) or to send mail to a different address.
- You may request alternative communications by notifying TCHS Clinical Supervisor in your area in writing.
- We will say “yes” to all reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say “no” if it would affect your care. However, even if we agree to your request, in certain situations your restrictions may not be followed. These situations include, but are not limited to: emergency treatment, disclosures to the Department of Health and Human Services, and uses and disclosures describes in the previous section to this notice.
- You may request a restriction by notifying TCHS Clinical Supervisor in writing.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say “yes” unless a law requires us to share that information.

Get a list of those with whom we have shared information

- You can ask for a list of the times we have shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We will

provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

- We are not required to include disclosures:
 - For your treatment
 - For billing and collections of payment for your treatment
 - For our health care operations
 - Authorized by you, or which are made to individuals involved in your care
 - Allowed or required by law when the use and/or disclosure relates to certain specialized government functions
 - As part of a limited set of information, this does not contain certain information which would identify you.

Get a copy of this privacy notice

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We may disclose information about you to a relative, or any other person you identify, if that person is involved in your care and the information is relevant to your care. Where the client is a minor, we may disclose information about the minor to a parent, guardian, or other person responsible for the minor, except in limited circumstances. We may also disclose information about you to a relative or other person involved in your care if there is an emergency, and we need to notify someone of your location or condition.
- You may request that we do not disclose information to persons involved in your care. We will generally comply with your request, unless there is an emergency, or the client is a minor. If the client is a minor, we may or may not be able to comply with your request.
- We will make sure the person has this authority and can act for you before we take any action.
- Sometimes when a person's illness makes it difficult for them to recognize the need for help, it is up to someone else who cares about the person to seek help and petition for what is called involuntary commitment (forced hospitalization). You are entitled to many rights when under an involuntary commitment petition please make sure you ask staff at the facility to explain these rights to you.
- If you have another consumer advocate, you may contact them when you desire.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights, or you want to complain to us about our privacy practices by contacting TCHS Executive Director, Debra Barfield, 206 A Malloy Street Goldsboro, NC 27534, 919-705-1020, email tchs1705@yahoo.com.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue SW, Room 509F, HHH Building, Washington DC 20201.
- You can also call the Local MCO.

- Alliance Health 1-800-510-9132
- Trillium Health 1-877-685-2415
- If you file a complaint, we will not retaliate or take any action against you or change our treatment of you in any way.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases, we never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

Our Uses and Disclosures

How do we typically use or share your health information?

We typically use or share your health information in the following ways.

Treat you

- We can use your health information and share it with other professionals who are treating you.
- This may include communication with other health care providers regarding your treatment. For example, we may use and disclose information when you need a referral for other health services or to receive authorization to begin services.

Run our organization

- We can use and share your health information to run our agency, improve your care, and contact you when necessary. Example: We use health information about you to manage your services.
- We may use and disclose information about you in performing business activities, which we call “health care operations.” Health care operations allow us to improve the quality of care we provide and reduce health care costs. An example of the way we may use or disclose information about you for health care operations includes, but is not limited to, the following: reviewing and improving the quality, efficiency and cost of care that we provide to you and our other patients.

- Reviewing and evaluating the skills, qualifications, and performance of health care providers taking care of you, cooperating with outside organizations that assess the quality of the care others and we provide. These organizations might include NC Division of Mental Health/ Developmental Disabilities/ Substance Abuse Services; Area Mental Health Authorities; or the NC Division of Medical Assistance.
- Health Care operations also include resolving grievances within our organization and reviewing activities and using or disclosing information in the event that control of our organization changes significantly.

Bill for your services

- We can use and share your health information to bill and get payment from health plans or other entities. Example: We give information about you to your health insurance plan, so it will pay for your services.
- Generally, we may use and give your medical information to others to bill and collect payment for the treatment and services provided to you. Before you receive scheduled services, we may share information about these services with your insurer that services are covered.

How else can we use or share your health information?

We are allowed or requires to share your health information in other ways – usually in ways that contribute to the public good, such as public health. We have to meet many conditions in the law before we can share your information for these purposes. For more information:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues

- We may disclose information about you to a relative, or any other person you identify, if that person is involved in your care and the minor to a parent, guardian, or other person responsible for the minor, except in limited circumstances. We may also disclose information about you to a relative or other person involved in your care if there is an emergency situation, and we need to notify someone of your location or condition. You may request that we do not disclose information to persons involved in your care. We will generally comply with your request, unless there is an emergency, or the client is a minor. If the client is a minor, we may or may not be able to comply with your request.

We can share health information about you for certain situations such as:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone’s health or safety

Other Circumstances in which TCHS may use and disclose information about you

We may use and/or disclose information about you for a number of circumstances in which you do not have to consent, give authorization or otherwise have an opportunity to agree or object. Those circumstances as written in General Statute 122C-52 through 122C-56, which include but are not limited to:

Comply with the law

- We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we are complying with federal privacy law.
- For example, when a disclosure is required by federal, state, or local law or other judicial or administrative proceedings.

Respond to Organ and tissue donation requests

- We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director

- We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you:

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
 - For example, we may disclose information about you in order to comply with laws that require the reporting of certain types of wounds or other physical injuries, or in reporting of missing persons.
- With health oversight agencies for activities authorized by law
- For special government functions, such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

- We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Other circumstances:

- When the disclosure relates to the victims of abuse, neglect, or domestic violence;
- When the use and/or disclosure is for health oversight activities. For example, we may disclose information about you to the state or federal health oversight agency, which is authorized, by law, to oversee our operations or to assure the public health.
- When the use and/or disclosure is to avert a serious threat to health or safety. For example, we may disclose information about you to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.
- When the use and/or disclosure relates to correctional institutions and other law enforcement custodial situations. For example, in certain circumstances, we may disclose information about you to a correctional institution having lawful custody of you.

- Whenever there is reason to believe that the client is eligible for educational services through a governmental agency, a facility shall disclose client identifying information to the Department of Public Instruction. Disclosure is limited to that information necessary to establish, coordinate, or maintain educational services. The Department of Public Instruction may further disclose client identifying information to a local school administrative unit as necessary.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request, in our offices.

We reserve the right to change the terms of this notice and to make new notice provisions by first:

1. Posting the revised notice in our office
2. Making copies of the revised notice available upon request (at any of our offices)

If you would like further information regarding your rights or regarding the uses and disclosures of your health information, you may contact: Triangle Comprehensive Health Services, Inc, 206 A Malloy Street, Goldsboro, NC 27534, 919-705-1020 Ext 105.

CONSENT

Triangle Comprehensive Health Services, Inc is a Tailored Care Management Agency.

The overall goal of Tailored Care Management is improved health outcomes for you. Care Management has been designed with the following guiding principles:

- Broad access to care management for all members.
- A dedicated care manager taking an integrated, whole-person approach.
 - You will receive integrated, whole-person care management from a dedicated Care Manager with expertise and training in addressing behavioral health, I/DD, and TBI needs in addition to physical health needs and unmet health-related resource needs.
 - You may have an assigned Extender to assist you and the Care Manager in achieving positive outcomes.
- Person and family-centered planning.
 - Care planning will be person-centered and will consider your unique needs. Your family members and others that you request can serve as part of your care team.
- Multi-disciplinary approach.
 - Your care manager will lead a multidisciplinary care team to provide whole-person care management that addresses all of your needs, spanning physical health, behavioral health, I/DD, traumatic brain injuries (TBI), pharmacy, long-term services and supports (LTSS) and unmet health-related resource needs.

Tailored Care Management will:

- Be available to you as long as you are enrolled in a Tailored Plan;
- Include frequent in-person interactions between you and TCHS Care Manager; and
- Place an emphasis on your outcomes and population health management.

To be an effective, integrated, and well-coordinated care management agency TCHS will utilize a Care Management data system that will efficiently exchange your health information and use that information to monitor and respond to medical and nonmedical issues that could impact you. TCHS Care Manager will complete a comprehensive assessment to identify your needs, strengths, and unmet health issues. Your Care Manager will use this assessment to work with you and your care team to develop an appropriate person-centered plan that includes goals in the plan to help you achieve the outcomes you have chosen. You, or the person legally responsible for assisting you with making decisions, will decide if you agree to have Tailored Care Management offered by TCHS.

Person Centered Planning

The individual support plan (ISP) is used to meet your needs, identify strengths, help and treatment. Your planning meeting will occur at a time and a place that is convenient to you as scheduled by your care manager. You can invite people of your choice to the meeting.

You have the right to have your ISP-short range goals prior to the implementation of your services at TCHS. You are expected to help develop your ISP and to only sign it if you agree with the contents of the plan. It is important that you remember that this is your plan, not a plan for TCHS. Your plan will be done every year by your care manager. Your TCHS care manager will review your progress. You and your care manager will develop your ISP-short range goals and you will be given a copy upon completion. If you need another copy, ask any employee and

they will have the care manager or Tailored Care management Supervisor provide you with another copy.

You have the right to know the possible side effects of medication and to be free from unnecessary medication. Medication will not be used as a punishment or for the convenience of the staff. You may refuse to take medication or refuse to take part in any other treatment or procedure.

You may exercise all of your constitutional rights as a United States citizen

You may review your service record unless a professional determines that it would be harmful to you. If this happens, you may select another professional (of your choice) to review your record for you.

You have the right to seek and receive medical treatment if you are sick or injured while under the care of TCHS employee.

You will have the cost of your services explained to you, unless you receive a Medicaid and/or State funded service. Therefore there is no cost to you.

If you must be ended from services with TCHS or if you desire to change to another provider, you have the right to have a discharge summary provided to you shortly after you leave TCHS. It is TCHS desire to see each consumer succeed, so we will help coordinate your discharge plans with another provider, with your consent. It is your right to receive transition planning should you need or request additional/other services.

You have the right to contact a private professional of your choice.

Emergency Care Process: In the event of a medical emergency, we will ask you to designate a contact person as well as a physician. This emergency contact consent will be in lieu of any other authorizations, if any, you have granted, or not granted to the designated contact person. TCHS will be held harmless against any liability caused by taking any emergency procedures and/or contacts.

Crisis On-Call: Crisis on-call care management staff are available after hours and holidays. The crisis on-call line is: 919-705-1020 and 919-554-9873.

Confidentiality: In accordance with state and federal laws, information maintained about you at TCHS will be protected from unauthorized disclosure. No information will be sent to your employer, family members, friends, or anyone else, unless it is discussed with you ahead of time and permission is obtained. See Notice of Privacy Practices for specific information. Disclosure is permitted without consent under state and federal laws for situations which may be applicable to you such as: in the interest of public safety (life threatening situations), in response to a court order, and where the state laws require that information be disclosed (e.g., suspected child/adult abuse, communicable diseases) and any other exceptions detailed in NC General Statute 122C 53-56 or in 45 CFR 164.512 of HIPAA.

Accounting of Release/Disclosure of Information: The N.C. Division of Mental Health, Developmental Disabilities, and Substance Abuse Services require reporting of non-identifying information. This information is stored in a computerized record system for statistical, program planning, evaluation, and funding purposes. Violation of the federal and state laws and regulations by a program is a crime. Suspected violations may be reported to the U.S. Attorney in

the district where the violation occurs. Information regarding privacy practices is included in this handout. The doctrine of informed consent will be explained to you, so you will know the contents to be released, the need for information, and that there are statutes and regulations protecting the confidentiality of authorized information. TCHS hereby assures that this consent is truly voluntary. You may revoke, in writing this consent at any time except to the extent that action based on this consent has been taken. Refusal of consent cannot be used as sole grounds for termination of services unless the service/treatment offered is the only viable service option available.

Disclosure to Health Information Exchanges and the Electronic Health Record and Guiding Care:

TCHS participates in the North Carolina Health Information Exchange Network, called NC HealthConnex, which is operated by the North Carolina Health Information Exchange Authority (NC HIEA). We may share your protected health information, or PHI, with the NC HIEA and may use NC HealthConnex to access your PHI to assist us in providing health care to you. We are required by law to submit clinical and demographic data pertaining to services paid for with funds from North Carolina programs like Medicaid and State Health Plan. We may also share other patient data with NC HealthConnex, you must opt out by submitting a form directly to the NC HIEA. Forms and brochures about NC HealthConnex are available online at www.NCHealthConnex.gov.

You may also contact our Executive Director at 919-705-1020 ext. 105. Again, even if you opt out of NC HealthConnex, we still will submit your PHI if your health care services are funded by State programs. Your patient data may also be exchanged or used by the NC HIEA for public health or research purposes as permitted or required by law. For more information on NC HealthConnex, please visit www.NCHealthConnex.gov/patients.

We use an Electronic Health Record (OnTarget by Abound Health Group) to store all of our clinical records. OnTarget is an integrated EHR for I/DD and mental health providers.

Guiding Care (CHN) is also a platform that we use for clinical operations. These two systems are HIPPA compliant.

Acknowledgement of Abuse/Neglect Reporting Requirements: All health and human services professionals are required by state laws to report suspected abuse or neglect to the appropriate authorities. If you have any questions about this, please feel free to ask for a better understanding before you sign this document. Your signature on the consent acknowledgement form confirms acknowledgement of this information.

You have the right to contact Disability Rights North Carolina. This is a statewide agency designated under federal and state law to protect and advocate for the rights of persons with disabilities. If you would like more information concerning Disability Rights North Carolina, please ask your staff with TCHS or go to <https://disabilityrightsncc.org/>

YOUR RIGHTS AND RESPONSIBILITIES

You have the right to:

- Be educated and informed about your rights
- Learn more about the organization providing your services
- Be free from abuse, neglect, and exploitation
- Live, work, and receive services in a safe and clean place
- Choose where you live and work and who you spend time with
- Make personal choices and decisions
- Succeed and make mistakes
- Be treated with dignity and respect
- Be free from labels
- Communicate and be listened to
- Exercise your rights as a citizen of the United States
- Vote
- Use public services and resources in the community in the least restrictive environment suitable to your individual needs.
- Own property and have your property treated with respect
- Receive services regardless of your ability to pay
- Have an ISP and Short Range Goals developed by you and your care manager.
- Refuse to participate in any kind of survey, services or treatment
- Have all information kept confidential unless you sign a release
- You have the right to appeal any changes in the services you receive

AND

While you are receiving supports from TCHS you have the right to:

- Not be denied supports or services because of race, ethnicity, gender, age, disability, sexual orientation, religious preference, political affiliation, or economic status
- Receive a timely response from us if you request a support or service
- Be fully informed of the supports or services you will receive, along with the possible benefits, risks, and alternatives
- Be informed of within a reasonable time of any anticipated ending of supports or services;
- participate in any decision to change agencies or choose other arrangements should supports or services be ended;
- Request a change in support or service provider without fear of reprisal or discrimination
- Receive the best possible supports that are appropriate for your age and interests provided by qualified employees
- Know the names and responsibilities of employees supporting you
- Have the opportunity to communicate with us at all reasonable times
- Have all personal and confidential information kept private
- Be involved in making plans for your life and your support and services
- Accept or refuse supports, planned treatments or interventions and prescribed medications, and be informed about the possible consequences (refusal of consent cannot be used as sole grounds for termination of services unless the service/treatment offered is the only viable service option available)
- Review your service record

- Make changes in your service record per our policy
- Receive information about any fees for supports and services before receiving those supports and services, per our policy
- Have medical services and make decisions about those services
- Be educated about your medication
- Be free from search and seizure
- Not be suspended or expelled from receiving supports and services without the proper notice
- Make suggestions for improvements in our supports
- Make a complaint and make recommendations regarding TCHS's rights and responsibilities policy for service recipients
- Contact an advocate
- And any other exceptions detailed in NC General Statute 122C 53-56 or in 45 CFR 164.512 of HIPAA

IN ADDITION TO HELPING UNDERSTAND THE ABOVE...

TCHS is dedicated to informing you of additional rights that are in place for all people across the world. These rights are called The Universal Declaration of Human Rights. The staff of TCHS will assist you understanding these and help you exercise them as you need to.

- All human beings are born free and equal in dignity and rights.
- Everyone is entitled to all rights without discrimination of any kind
- Everyone has the right to life, liberty, and personal security
- No one shall be held in slavery
- No one shall be subjected to torture or to cruel, inhuman or degrading treatment or punishment
- Everyone has the right to recognition everywhere as a person before the law
- All are entitled without any discrimination to equal protection of the law
- Everyone has the right to legal help when your rights are violated
- All people are free from arbitrary arrest, detention, or exile
- All people have the right to a fair, public trial by people who are not influenced by others
 - Everyone is innocent until proven guilty in a public trial
 - No one shall be punished for something an action that was not a crime when the action was completed

- Everyone has the right to ask for protection of their privacy, home, family, and correspondence
 - All people have the right to move about in their country
 - All people have the right to lead their country and to return
- All people have the right to move to another country if they feel persecuted in their own
 - This right is not applicable if one is moving to another country because they have broken the laws of their own country
- Everyone has the right to be a citizen of a country
 - Everyone has the right to leave one country and become a citizen of another
- All people have the right to marry, have a family, and, if they choose, to dissolve the marriage
 - No one shall force another person into marriage
 - The family is to be protected by the government
- Everyone has the right to own things
 - No one shall have their property taken from them without good reason
- All people have the right to choose their beliefs and the freedom to practice their religion
- Everyone has the right to think as they choose and to say what they choose without being forbidden to do so
 - Everyone has the right to organize and/or attend any peaceful gathering
 - No one shall be forced to attend or join a gathering
- All people have the right to participate in the public affairs of their country, directly or through every representative.
 - All people have equal access to join public service
 - All people have the right to vote in a free and equal election
- Everyone has the right to a social security
 - Everyone has the right to work in a job of their choice
 - Everyone has the right to equal pay for equal work without discrimination

- Everyone who works has the right to a salary that will allow them to provide for their family
- Everyone has the right to join together in groups to defend their interests
- Everyone has the right to reasonable work hours and times for rest and leisure and occasional paid holidays
 - All people have the right to an adequate standard of living including food, clothing, housing, medical care and social services and the right to security in the event of unemployment, sickness, disability, widowhood, old age, or other lack of livelihood and circumstances beyond their control
 - All pregnant women and babies have the right to special medical care regardless of their marital status of the mother
 - Everyone has the right to at least free elementary education
 - Everyone should be taught to develop their talents and to respect all people
 - Parents have the right to decide how and what their children will be taught
- All people have the right to participate in the cultural life of their community
 - All people have the right to have their works as artists, writers or scientists protected and to be able to benefit from them
- All people will have the respect of their rights enforced by a local or worldwide “order”
 - Every person has duties to their community to reach their free and full potential
 - Limitation of rights shall only be placed on a person when they are violating the rights of others
 - No person may exercise these rights and freedoms contrary to the purposes and principles of the United States
- No person or society may interrupt any of these rights

Along with rights comes responsibilities. We expect you to take your responsibilities seriously - it is like holding up your end of the bargain in life. You have the responsibility to:

- Ask questions and seek information that will help you make decisions
- Speak up for yourself
- Tell someone if you are being hurt or mistreated
- Strive to be your best
- Be honest
- Treat others with dignity and respect
- Honor the rights of others
- Respect other people's property and privacy
- Communicate your interests and wishes
- Obey the laws of your city, state, and country
- Pay taxes when you earn money
- Give back to your community

AND

While you are receiving supports from TCHS you have the responsibility to:

- Provide us with complete information concerning past illnesses, medications, allergies, current problems/symptoms/needs, preferences, and other pertinent information
- Participate in the comprehensive assessment process
- Tell us about your personal choices
- Help make the plans for your supports
- Participate to understand your health issues and participate in developing goals to the best of your ability
- Make suggestions for improvements in your supports
- Participate in the supports you have helped plan including required contacts and visits with care management staff
- Tell us about changes in your life or your feelings, or changes needed in your Person-Centered Plan
- Accept the responsibility and possible consequences for refusing any supports or services
- Ask questions about your support if you do not understand
- Treat your support staff with the same dignity and respect you would like to be treated with
- Be positive and work toward your goals
- Speak up if something is wrong or if you are dissatisfied with something we are doing
- Ask for help when you need it

What about TCHS's responsibilities? Our commitment to you:

As your care management agency, we will make every effort to ensure:

- That our staff are knowledgeable and respectful
- That our supports are the highest quality
- That we will always try to improve, and
- That we will listen to you

In addition, while you are receiving Tailored Care Management from TCHS, our employees will:

- Sign a statement saying they have received a list of your rights
- Provide Tailored Care Management to you based on rules and requirements of the state of North Carolina
- Complete all required training for Tailored Care Management
- Honor and respect your preferences, needs and involvement in making plans for your life
- Clearly and consistently communicate information to you about supports or services you will receive in a way that you can reasonably be expected to understand
- Not restrict your rights unless it is necessary to do so as allowed by NC General Statute 122C-62 (b) or (d) and policy of TCHS.

Grievance procedure

What if you have a concern or problem with our supports?

If you have a concern or problem with our supports, we want to know about it and try to find a solution. We encourage you to always talk to us about your supports and how you feel about our services. We will make it our priority to listen to your concerns and try to work out any issues.

If talking with us does not help, you can use our “grievance procedure” to take a more formal approach. A “grievance” is a concern or complaint you have that has not been solved by talking with us. You have the right to file a grievance or complaint. We believe in your right to do this, and we will help you file a grievance or complaint if you need that help, even if the grievance or complaint is against us. This is the process we have set up for you to use when you have a grievance or complaint:

Step one

Talk to the person providing your supports and work with them to try to find a good solution. If you are not satisfied.

Step two

Talk to the employee’s supervisor. You may contact the supervisor by calling 919-705-1020 Ext. 102. The supervisor has 5 days to try to find a good solution. If you are still not satisfied.

Step 3

Talk to the Executive Director, Debra Barfield. You may contact the Executive Director by calling 919-705-1020 Ext. 105. The Executive Director has 5 days to try to find a good solution. If you are still not satisfied.

Step four

At this point the Executive Director may create a special “Grievance Committee” to hear your concern or complaint. The “Grievance Committee” will hear your concern or complaint and they have five days (to try to find a good solution). If you are still not satisfied.

At any time:

You may call Disability Rights North Carolina at 1-877-235-4210 or the local LME/MCO/Tailored Plan and talk with them about your concerns or complaint, or you may use other resources in your community. If you need assistance making this connection, any staff of TCHS will assist you. This process has been set up to give you a way to get help in solving a problem with our supports when you feel we are not listening or responding to you. You will not get in trouble or for talking about a concern or complaint or for filing a grievance. If you have to

use this process, we will assist you or help you find someone who can assist you. You can be sure that every step we will try to find good solution.