

This pamphlet is to let you know what to expect from the services you and your child will be receiving from Hispanic Family Counseling. It will also tell you what your rights are and what you need to do to make treatment a success.

If you have any questions, you can contact your Primary Clinician, who is responsible for coordinating your services while in treatment at Hispanic Family Counseling, Inc.:

Name: _____

Phone #: _____

If you are in crisis and your clinician is not available, you can call the crisis hotline: (407) 425-2624. In the event of an emergency (danger to self or others), call 911.

COMPLAINT OR GRIEVANCE PROCESS:

If you have a concern that cannot be resolved by speaking with your clinician directly, please contact the Director of Operations at the main office:

Orlando Office: Richard Centeno
Phone: (407) 382-9079
Email: rcenteno@hisfafam.com

If your concern is not resolved by the Director of Operations, you may file a formal grievance. Grievance forms are found in the waiting room of our offices or on our website. You may also simply write your grievance in a letter and mail it to the main office at Orlando.

Grievances should be sent to:
Denisse Lamas, Executive Director
6900 S. Orange Blossom Trail, Suite 402
Orlando, FL 32809
Email: referrals@hisfafam.com



**CLIENT
RIGHTS**

OFFICE HOURS:

Monday-Thursday, 9 am-5 pm
Friday, 9 am-noon

Orange/Seminole/
Osceola:

1707 Orlando Central Pkwy, Suite
480 Orlando, FL. 32809
Phone: (407) 382-9079
Fax: (407) 964-1274
referrals@hisfafam.com
www.hisfafam.com

WHAT TO EXPECT:

1. Our focus is on helping the whole family, so your family should plan to participate in family sessions.
2. Sessions are scheduled on a regular basis, one to two times per week, depending on the seriousness of the issues.
3. Treatment is usually 6 months, but it can be shorter or longer, depending on you and your family's motivation and progress.
4. Physical restraint or forced seclusion will not be used as a treatment intervention.
5. Within the first month, you and your family will work with your clinician to develop a treatment plan, which will list your goals and ways to reach those goals.
6. Some funders require a licensed staff to meet with you to do another assessment within the first month of treatment.
7. Every 3 months, you, your family, and your clinician will discuss your progress on the treatment plan goals and decide if changes are needed on the plan.
8. By the end of treatment, you should have met your goals on your treatment plan. Your family should also have learned some ways to help you to do your best, including using positive motivation strategies.
9. At the final session, your clinician will make sure that you are prepared with any services that you will still need after our treatment ends. You will also be asked to evaluate the success of your treatment and provide input about your satisfaction with our services.
10. Several months after treatment ends, you may be contacted as a follow up to make sure you are still doing well.

YOUR RIGHTS:

1. **Respect:** You and your family will be treated with respect by all Hispanic Family Counseling staff.
2. **Anti-Discrimination:** Your religious and cultural beliefs will be respected. You will not be treated differently based on your age, disability, race, sex, or ethnic group.
3. **Terminating Services:** You may decide to stop any or all services at any time.
4. **Confidentiality:** Information about you will not be shared with other people without your permission (or your parent's, if you are under 18). There are exceptions to this rule, including if we have report suspected abuse or neglect, if we believe someone's life is in danger, or if a judge orders it. Information shared by a child in an individual session may be shared with a parent, if the clinician feels it is necessary.
5. **Records:** You may read and have copies of your chart information. We might require that we be present to explain what is written, however.
6. **Suggestions/Complaints/Grievances:** You may give input to the agency about how you are treated by the staff and the process. If you make a complaint or file a grievance, your services will not be terminated or affected in a negative way.
7. **Person-Centered Treatment:** You will choose your own goals and have input into treatment strategies. This is your treatment, so you have the final word about what interventions it includes and what you want to accomplish.
8. **Abuse:** To report abuse or neglect, call the Abuse Hotline: 1-800-96-ABUSE or (800) 962-2873

YOUR RESPONSIBILITIES:

1. **Attendance:** You and your family are expected to keep your scheduled appointments or call your clinician ahead of time to reschedule.
2. **Participation:** You and your family are expected to participate in treatment and follow through with the strategies agreed upon during treatment sessions. Family sessions are required if school-based treatment is being provided.
3. **Notification:** You are expected to inform your clinician if your address/phone number or legal/custody status changes.
4. **Payment:** You are responsible for any charges, including co-payments or deductibles, not paid by your insurance.

AGENCY RIGHTS AND RESPONSIBILITIES:

1. All agency staff will behave in a professional manner, including being trustworthy, respectful and discrete.
2. We will provide consistent, high quality treatment to you and your family. If a session has to be canceled, the clinician will notify you in advance.
3. We will keep an accurate written record of the treatment we provide.
4. With your consent, we will communicate with others involved in your treatment in order to ensure that all of us are working together for your benefit.
5. We have the right to terminate services if you fail to follow through on your responsibilities (listed above) or if we believe that maximum benefit has been reached. If your treatment is discontinued and you still want help, we will give you a referral to another agency.