



**LAKE AREA RECOVERY CENTER** at The Donahoe Center for Human Services  
2801 C. Court  
Ashtabula, OH 44004  
440-998-0722  
[www.larc.cc](http://www.larc.cc)

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**We Want You To Know...**

## CLIENT HANDBOOK

The Lake Area Recovery Center (LARC) is a private, non-profit tax exempt corporation established to provide substance abuse related services to residents of Ashtabula County, Ohio. The agency established in 1967 to provide alcohol-related services. Its purpose was broadened in 1972 to include drugs other than alcohol. At that time, the agency was named the Ashtabula County Council on Alcoholism and Drug Abuse, Incorporated, better known as CADA. In 1985, the name was change to Lake Area Recovery Center (LARC).

Our purpose is to provide treatment services for those who suffer from substance use disorder and other criminogenic behaviors.

Lake Area Recovery Center (LARC) is committed to being a state of the art, national model of effective, quality, culturally sensitive treatment of substance use disorder and criminogenic behavior. We will continue to be a trendsetter on the cutting edge of the field. Our services shall remain accessible and available to those in need.

We believe that substance abuse related problems are not insurmountable and that they can be successfully treated. We also believe that treatment efforts are most successful when our clients are well informed.

This handbook was designed to answer the questions most commonly asked about LARC treatment policies and procedures.

If you have any questions regarding the information presented in this booklet, or if you have other questions or concerns not covered here please, discuss them with your counselor.

Fees at our agency are based upon the actual cost of providing various services. LARC's admission policies are not based upon the ability to pay. In no instance should you consider postponing or terminating treatment because of financial or payment difficulties. The agency operates on a sliding fee scale based on your monthly income, and in many instances arrangements can be made for payment by third party sources (i.e. insurance, Medicaid, etc.).

Payment for our driver intervention program, Aware, is due in full and is required for participation with the exception of Medicaid, and SSI recipients.

If you have any questions concerning this information or any other questions regarding financial arrangements ask to see or call our billing office and someone will assist you.

Cordially,

Michael Murphy  
Executive Director

## CLIENT RIGHTS/GRIEVANCE POLICY

### POLICY:

Clients will be given care within the least restrictive conditions necessary. The dignity and privacy of clients shall be respected at all times. All services provided shall be consistent with human dignity and quality care.

#### A. All Lake Area Recovery Center Clients/Consumers have:

1. The right to be treated with consideration and respect for personal dignity, autonomy, and privacy.
2. The right to reasonable protection from physical, sexual or emotional abuse and inhumane treatment.
3. The right to receive services in the least restrictive, feasible environment.
4. The right to participate in any appropriate and available service that is consistent with an individual service plan (ISP), regardless of the refusal of any other service, unless that service is a necessity for clear treatment reasons and requires the person's participation.
5. The right to give informed consent to or to refuse any service, treatment or therapy, including medication absent an emergency.
6. The right to participate in the development, review and revision of one's own individualized treatment plan and receive a copy of it.
7. The right to freedom from unnecessary or excessive medication, and to be free from restraint or seclusion unless there is immediate risk of physical harm to self or other.
8. The right to be informed and the right to refuse any unusual or hazardous treatment procedures.
9. The right to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies, photographs or other audio and visual technology. This right does not prohibit an agency from using closed-circuit monitoring to observe seclusion rooms or common areas, which does not include bathrooms or sleeping areas.
10. The right to confidentiality of communications and person identifying information within the limitations and requirements for disclosure of client information under state and federal laws and regulations.
11. The right to have access to one's own client record unless access to certain information is restricted for clear treatment reasons. If access is restricted, the treatment plan shall include the reason for the restriction, a goal to remove the restriction, and the treatment being offered to remove the restriction.
12. The right to be informed a reasonable amount of time in advance of the reason for terminating participation in a service, and to be provided a referral, unless the service is unavailable or not necessary.
13. The right to be informed of the reason for denial of a service.
14. The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, gender, nation origin, sexual orientation, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws.
15. The right to know the cost of service.
16. The right to be verbally informed of all client rights, and to receive a written copy upon request.
17. The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations.
18. The right to file a grievance.
19. The right to have oral and written instructions concerning the procedure for filing a grievance, and to assistance in filing a grievance if requested.
20. The right to be informed of one's own condition.
21. The right to consult with an independent treatment specialist or legal counsel at one's own expense.

PROCEDURE FOR FILING A GRIEVANCE:

- A. Any individual inquiring about client/consumer rights or the grievance procedure will be given a copy of this policy and an oral explanation of this procedure by the Clients/Consumer Rights Officer, Sandy Shaw.
- B. The Client/Consumer Rights Officer is located at Lake Area Recovery Center, 2801 C Court, Ashtabula, Ohio 44004 Telephone Number: 440-998-0722  
Hours: Monday through Friday - 8:30 to 5:30
- C. The grievance shall be presented to the Client/Consumer Rights Officer. The Client/Consumer Rights Officer has full authority and is responsible for accepting and overseeing the process of grievance filed by a client or other person or agency on behalf of a client. The Client/Consumer Rights Officer will assist in any way necessary in completing the filing of the grievance. This includes writing the grievance as dictated by the client if needed or desired.
- D. Should the Client/Consumer Rights Officer be the subject of the grievance the Executive Director will be responsible for accepting and overseeing the process of any grievance filed by a client or other person or agency on behalf of a client.
- E. The Client/Consumer Rights Officer will provide written acknowledgement of the grievance to the grievant and see the client within three (3) business days (Monday through Friday) and will assist the grieved in filing the grievance, investigation of the grievance on the griever's behalf, and agency representation for the griever at any and all meetings and/or hearings, if desired by the griever.

The written acknowledgement will include the date the grievance was received, a summary of the grievance, an overview of the grievance investigation process, a timetable for completion of the investigation and the notification of resolution and the treatment /prevention provider contact name, address and telephone number.

- F. Should a person be dissatisfied with services, feel their rights have been violated, they should discuss the problem with staff member providing the direct service (prevention or treatment). If not satisfied they must submit the grievance to the Human Resource Officer of the grievance to the staff provider or the Client/Consumer Rights Officer.

If the client feels that a staff member has engaged in any alleged unethical behavior or feels a staff member demonstrates any level of incompetence, they should submit the grievance to the Executive Director of LARC. At this time they should be advised of their right to have the Client/Consumer Rights Officer present for this discussion, and their right to have the Client/Consumer Rights Officer present during all proceedings, should the problem not be satisfactorily resolved.

- 1. The grievance must include the date, time, description, and names of individuals involved in the incident/situation being grieved.
  - 2. The written grievance must be signed and dated by the client and/or by the individual filing the grievance on behalf of the client
- G. If the problem is not resolved, the client may make a verbal or written request to meet with the counselor's supervisor. This meeting will occur within three (3) working days.

- H. The supervisor must then submit, in writing, of any action taken or recommendations made to the Executive Director within one (1) working day of the meeting.
- I. If still unresolved, the Recovery Center Executive Director will meet with the grieved involved staff member and Client/Consumer Rights Officer within five (5) working days.
- J. The Executive Director is the final agency arbitrator and shall make a written report available to involved staff, client, (or grieved if different), and Client's Rights Officer. The grieved will receive written notification and explanation of the resolution within twenty-one (21) calendar days of receipt of the grievance. If any extenuating circumstances require the extension of this response, the reasons will be documented in the employee file and the client will be given written notification of the reasons for the extension within the twenty-one day period.
- K. Should the grieved not be satisfied by the resolution, or at any time before or during the formal grievance process, they may initiate further grievance procedures through one of the following: Refer to included resource list.
- L. Upon request, information about the grievance will be provided to one or more of the outside entities included in our "Resource Agencies" list.
- M. Should the grievance involve alleged breach of confidentiality under federal regulations, and the procedure outlined above has not resolved the problem to the griever's satisfaction, a formal complaint may be filed with the U.S. Attorney for the judicial district, in which the violation occurs.
- N. Records of all client grievances (including a copy of the grievance; documentation reflecting the process used and resolution/remedy of the grievance; and documentation, if applicable, of extenuating circumstances for extending the time period for resolving the grievance beyond twenty one days) will be maintained for a minimum of two years from the date of the original filing of the grievance.

#### RESOURCE AGENCIES

##### Outside Entities

- 1. Ashtabula County Mental Health and Recovery Services Board  
4817 State Road, Suite 203  
Ashtabula, Ohio 44004  
(216) 992-3121
- 2. OhioMHAS  
Office of Licensure and Certification  
30 East Broad St., 7<sup>th</sup> Floor  
Columbus, Ohio 43215  
(614) 466-3445
- 3. Disability Rights Ohio  
50 West Broad Street, 14<sup>th</sup> Floor  
Columbus, OH 43215-2999  
(800) 282-9181

4. Attorney General's Office, Medicaid Fraud Control Section  
30 East Broad Street  
17th Floor  
Columbus, Ohio 43266-0410  
(614) 466-4320
5. Governor's Office of Advocacy for People with Disabilities  
8 East Long Street,  
7th Floor  
Columbus, Ohio 43266-0410  
(614) 466-9956
6. U.S. Department of Health & Human Services  
Office for Civil Rights  
Region V  
233 N Michigan Ave, Suite 240  
Chicago, IL 60601  
(312) 886-2359
7. Counselor & Social Worker Board  
65 South Front Street, Suite 210  
Columbus, OH 43266-0329  
(614) 466-0912
8. State Medical Board  
65 South Front Street, Suite 510  
Columbus, OH 43266  
(614) 466-3934
9. Nursing Education & Nurse Registration Board  
65 South Front Street  
Room 509  
Columbus, OH 43266  
(614) 466-3947
10. State Board of Psychology  
65 South Front Street, Suite 507  
Columbus, OH 43266  
(614) 466-8808
11. Ohio Civil Rights Commission  
680 Rockefeller Building  
614 West Superior Avenue  
Cleveland, OH 44113  
(216) 579-2800
12. Ohio Civil Rights Commission  
220 South Parsons Avenue  
Columbus, OH 43215  
(614) 455-5928
13. Ohio Credentialing Board  
740 Lakeview Plaza Blvd.  
Suite K  
Worthington, Ohio 43085  
(614) 847-0330

## CIVIL RIGHTS

It is the policy of the Lake Area Recovery Center to treat all clients without regard to race, ethnicity, age, color, religion, sex, national origin, sexual orientation, socio-economic status, disability or HIV infection, whether asymptomatic or symptomatic, or AIDS. The same requirements are applied to all client placements without regard to race, ethnicity, age, color, religion, sex, national origin, sexual orientation, socio-economic status, disability or HIV infection, whether asymptomatic or symptomatic, or AIDS. There is no distinction in eligibility for, or in the manner of providing client services. All services are available without distinction to all clients and visitors regardless of race, ethnicity, age, color, religion, sex, national origin, sexual orientation, socio-economic status, disability or HIV infection, whether asymptomatic or symptomatic, or AIDS. All persons and organizations having occasion either to refer clients for services or to recommend the Lake Area Recovery Center are advised to do so without regard to the potential client's race, ethnicity, age, color, religion, sex, national origin, sexual orientation, socio-economic status, disability or HIV infection, whether asymptomatic or symptomatic, or AIDS.

The person designated to coordinate compliance with section 504 of the Rehabilitation Act of 1973 (nondiscrimination Against the Handicapped is the Administrative Director, who be reached at Lake Area Recovery Center, 2801 "C" Court, Ashtabula, Ohio, (440) 998-0722.

Any person who feels that they have been discriminated against because of their race, color, national origin, disability, age, sex or religion, has the right to file a complaint:

Executive Director  
Ashtabula County Mental Health and Recovery Services Board  
4817 State Road Suite 203  
Ashtabula, Ohio 44004

Additional assistance in filing a complaint may be obtained from:

Ohio Department of Alcohol and Drug Addiction Services  
Civil Rights Office  
Two Nationwide Plaza, 12th Floor  
Columbus, Ohio 43215-2537  
Telephone: (614) 466-9011

Office for Civil Rights  
Department of Health & Human Services  
233 N. Michigan Avenue, Suite 204  
Chicago Illinois 60601  
Telephone: (312) 886-2359  
TDD/TDY: (312) 353-5693

LAKE AREA RECOVERY CENTER

**CONFIDENTIALITY OF ALCOHOL AND DRUG ABUSE AND CLIENT RECORDS**

The confidentiality of alcohol and drug abuse records maintained by this program is protected by federal law and regulations. Generally, the program may not say to a person outside the program that a client attends the program, or disclose any information identifying a client as a drug or alcohol abuser unless:

- 1) The client consents in writing;
- 2) The disclosure is allowed by a court order that meets the requirements of 42 CFR Part 2.
- 3) The disclosure is made to qualified medical personnel in a medical emergency; or
- 4) The disclosure is made to qualified personnel for research, audit, or program evaluation.

Violation of the federal law and regulations by a program is a crime. Suspected violations may be reported to appropriate authorities in accordance with federal regulations.

Federal law and regulations do not protect any information about a crime committed by a client, either at the program or against a person who works for the program, or about any threat to commit such a crime.

Federal laws and regulations do not protect any information about suspected child abuse or neglect from being reported under state law to appropriate state or local authorities.

See 42 U. S. C. 290 dd-3 and 42 U. S. C. 290 ee-3 for federal laws and 42 CFR part for federal regulations.

I also understand that, in accordance with the Ohio Revised Code Section 2305.51, if I disclose specific information regarding my intent to seriously harm a specific individual or structure, my counselor is obligated to warn that entity of my intent.

**I have been informed of and also received a copy of the above information concerning the confidentiality of alcohol and drug abuse client records and I have received a copy of Lake Area Recovery Center's Notice of Privacy Practices which explains release of information relative to the Health Insurance Portability and Accountability Act (HIPAA).**



# Lake Area Recovery Center NOTICE OF PRIVACY PRACTICES

Effective April 14, 2003

**THIS NOTICE DESCRIBES HOW TREATMENT INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GAIN ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY. WE ARE REQUIRED BY THE HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA) TO GIVE YOU THIS NOTICE.**

**IF YOU HAVE ANY QUESTIONS ABOUT THIS NOTICE, PLEASE ASK A STAFF PERSON OR CONTACT OUR PRIVACY OFFICER.**

Protected Health Information (PHI) is information that may identify you and that relates to health care services provided to you, the payment for health care services provided to you or information about your physical or mental health condition in the past, present or future.

We are required to abide by the terms of this Notice of Privacy Practices, but reserve the right to change the Notice at any time. Any change in the terms of this Notice will be effective for all PHI that we are maintaining at that time. If a change is made to this Notice, a copy of the Notice will be provided to all individuals being treated by Lake Area Recovery Center at that time. A copy will also be posted on our premises as well as on our website.

## **PERMITTED USES AND DISCLOSURES**

### **Treatment, Payment and Health Care Operations**

Federal law allows a health care provider to use and disclose PHI for the purposes of treatment, payment and health care operations, without your consent or authorization. Examples of the uses and disclosures that we, as a health care provider, may make under each section are listed below:

- **Treatment.** We may use and disclose protected health information about you to provide you with treatment or services. We may disclose this information to doctors, nurses, office staff or other people who are involved in taking care of you.
- **Payment.** We may use and disclose protected health information to obtain reimbursement for the treatment provided to you. We may also use this information to obtain prior authorization for proposed treatment or to determine if your plan will cover the treatment. We also will share this information with our billing service and our collection agency as needed to facilitate reimbursement from you or your insurance company.
- **Health Care Operations.** We may use and disclose protected health information to support functions of our agency related to treatment and payment such as medical records, case management and quality assurance. In addition, we may use your treatment information to evaluate staff performance, to help us to determine what additional services we should offer and other management and administrative duties.

### **Other Uses and Disclosures Allowed Without Authorization**

Federal law also allows a health care provider to use and disclose Protected Health Information (PHI) without your consent or authorization in the following ways:

- For appointment reminders
- To recommend possible treatment options or alternatives that may be of interest to you
- To tell you about health-related benefits or services that may be of interest to you
- In an emergency treatment situation
- If there are substantial communication barriers and we determine that your consent to receive treatment is clearly inferred from the circumstances
- When required by Federal, state or local law

- To the Secretary of Health and Human Services or any employee of HHS as part of an investigation to determine our compliance with the HIPAA Privacy Rules
- To our Business Associates - outside entities that we have contracted to perform specific services such as billing, collection and doctors utilized to review our selected treatments – Business Associate agree to safeguard your information
- To Federal or state agencies that oversee our treatment activities.
- For public health reasons in order to prevent or control disease, injury or disability, suspected abuse or neglect, etc.
- To prevent or lessen a serious and imminent threat to the health or safety of a person or the public
- If required by law, to a person who may have been exposed to a communicable disease or may be at risk for contracting or spreading the disease or condition
- In response to a court or administrative order or in response to a subpoena, discovery request or other lawful purpose
- If asked to do so by a law enforcement official as part of law enforcement activities, in investigations of criminal conduct, in response to court orders, in emergency circumstances or when required to do so by law
- If you are an inmate of a correctional facility
- As authorized to comply with Workers' Compensation laws and other similar legally established programs
- If you are a member of the armed forces or a member of the National Security and Intelligence communities, we may be required by military command or other government authorities to release information about you

The examples of permitted uses and disclosures listed above are not provided as an all inclusive list of the ways in which PHI may be used. They are provided to describe in general the types of uses and disclosures that may be made.

## **OTHER USES AND DISCLOSURES**

Other uses and disclosures of your PHI will only be made upon receiving your written authorization. You may revoke an authorization at any time by providing written notice to us that you wish to revoke an authorization. We will honor your request to revoke as of the day it is received to the extent that we have not already used or disclosed your PHI in good faith with the authorization.

## **YOUR RIGHTS IN RELATION TO PROTECTED HEALTH INFORMATION**

### **Right to Request Restrictions on Uses and Disclosures**

You have the right to request the health care provider to limit its uses and disclosures of PHI in relation to your treatment, payment and health care operations or not to disclose your PHI for these reasons at all. You also have the right to restrict the use or disclosure of your PHI to your family members or personal representatives. Any such request must be made in writing to the Privacy Contact listed in this Notice and must state the specific restriction requested and to whom that restriction would apply.

Lake Area Recovery Center is not required to agree to the restriction that you request. However, if it does not agree to the requested restriction, it may not violate that restriction except as necessary to allow the provision of emergency medical care to you.

### **Right to Receive Confidential Communications**

You have the right to request that communications involving PHI be provided to you at an alternative location or by an alternate means of communication as long as the request is reasonable. Any such request must be made in writing to the Privacy Contact listed in this Notice.

### **Right to Inspect and Copy your Protected Health Information**

You have the right to inspect and copy treatment information that affects decisions about your care. This primarily consists of medical and billing records but by law does not include psychotherapy notes.

To inspect and copy treatment information from your records, you must submit your request in writing to the Privacy Contact listed in this Notice. If you request a copy of the information, we may charge a fee for the costs of copying, mailing or other supplies.

If your request for access is denied, you may have a right to have that decision reviewed by another health care professional chosen by Lake Area Recovery Center. The person conducting the review will not be the person who denied the request. We will comply with the outcome of the review.

### **Right to Amend Protected Health Information**

If you feel that the treatment information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment as long as the information is kept.

To request an amendment, your request must be submitted in writing to our Privacy Contact and must include a reason that supports your request.

If your request for amendment is denied, you have the right to have a statement of disagreement included with the PHI and the health care provider has a right to include a rebuttal to your statement, a copy of which will be provided to you.

### **Right to Receive an Accounting of Disclosures**

You have the right to receive an accounting of all disclosures of your PHI that the health care provider has made, if any, for reasons other than disclosures for treatment, payment and health care operations, as described above, and disclosures made to you or to your personal representative. Your right to an accounting of disclosures applies only to PHI created by the health care provider after April 14, 2003 and cannot exceed a period of six (6) years prior to the date of your request. Requests for an accounting of disclosures of your PHI should be directed to the Privacy Contact listed in this Notice.

### **Right to Receive a Paper Copy of this Notice**

You have the right to receive a paper copy of this Notice upon request. This right applies even if you have previously agreed to accept this Notice electronically. Requests for a paper copy of this Notice should be directed to any employee of the health care provider or specifically to the Privacy Contact listed in this Notice.

## **COMPLAINTS**

If you believe your privacy rights have been violated, you may file a written complaint with Lake Area Recovery Center Privacy Contact or the Secretary of Health and Human Services. **You will not be penalized for filing a complaint.**

## **PRIVACY CONTACT**

You may contact the Lake Area Recovery Center Privacy Officer at

Privacy Officer  
Lake Area Recovery Center  
2801 C Court  
Ashtabula, OH 44004

Telephone: 440-998-0722

FAX: 440-992-1699

Email: [privacy@larc.cc](mailto:privacy@larc.cc)

## FREQUENTLY ASKED QUESTIONS

### **WHO IS ELIGIBLE FOR LARC SERVICES?**

LARC services are available to any Ashtabula County resident who indicates a need for drug or alcohol related services. (Services are available to non-county residents on an emergency or availability of services basis, depending on financial ability).

### **WHAT ABOUT EMERGENCY SERVICE AND AFTER HOUR CALLS?**

Emergency services are available on a 24-hour, 365 day a year basis. A LARC staff member is on call during all non office hours to personally handle drug or alcohol emergencies at the Ashtabula County Medical Center (ACMC) and for other LARC client emergencies. Call LARC at 440-998-0722 twenty four hours a day.

### **IS THERE A FEE FOR SERVICE?**

Yes. Fees are based upon the actual cost of providing various services. LARC currently has set fees for all our services. However, in no instance should you consider postponing or terminating treatment because of financial or payment difficulties, as LARC's admission policies are not based upon ability to pay. In many instances, arrangements can be made for payment by third party payers (i.e. insurance, welfare, etc.). LARC can often make arrangements for payment with their sliding fee schedule, based on the household income. The Aware Program is a self pay program and payment in full is required with the exception of Aid to Dependent Children, 551, General Relief, and Medicaid recipients.

### **WHY ARE DWI FEES HANDLED DIFFERENTLY? WHY MUST I PAY FOR DRIVER INTERVENTION SERVICES BEFORE I COMPLETE THE COURSE?**

If you have come to LARC for the DWI program you are here because a court determined that you violated the law. You were fined, and as an alternative to jail, you chose to attend this program. In most cases, your fine was reduced as a result to your agreement to participate in the program.

Payment must be made as part of your DWI program contract before registration to the program because, unfortunately, many DWI referrals refuse to pay once the services have been received.

If you are in need of counseling services in addition to the DWI program, these services are available regardless of ability to pay.

## FREQUENTLY ASKED QUESTIONS

### **WHAT ABOUT CONFIDENTIALITY?**

Federal law prohibits disclosure of alcohol and drug related information without client consent. LARC strictly adheres to these regulations. Should you be referred by your employer, another human service agency, a friend, or anyone else, LARC cannot release any information concerning you or your treatment. Only by your signing a release of information and specifying what information you wish to release can we permit anyone to receive information concerning your status as a client.

### **WHAT ABOUT SERVICES FOR MY FAMILY?**

Counselors that are accustomed to dealing with the numerous family problems related to substance abuse are on the staff at LARC and have many years of experience dealing with all types of situations.

Counseling can be provided for all family members, both as a family unit and as individuals. All families are encouraged to participate in treatment programs.

### **WHAT ABOUT SELF-HELP GROUPS SUCH AS ALCOHOLICS ANONYMOUS, AL-ANON, ALA-TEEN, AND NARCOTICS ANONYMOUS?**

All LARC clients are encouraged to attend meetings and to participate actively in at least one of these self-help groups, in addition to the counseling services available at LARC. LARC's services are not designed to be required on a long-term basis, however, the fellowship of these groups can help you sustain your recovery on a continuing basis.

All LARC counselors are familiar with and supportive of the philosophy and practices of AA, NA, and the other self-help groups.

Meeting times are listed in the back portion of this handbook. If you would like to be put directly in touch with a member of any of these groups, ask any staff member.

### **WHAT IF I AM REFERRED TO LARC BY THE COURTS, PROBATION OR PAROLE OFFICER?**

At LARC you receive the same treatment and have the same rights as another client. However, if you should cease treatment without the approval of the proper authorities, it is our responsibility to notify the referring authority.

## FREQUENTLY ASKED QUESTIONS

### **WHAT SHOULD I DO IF I MISS A PREVIOUSLY SCHEDULED APPOINTMENT?**

If you will miss your appointment, you must notify the agency 24 hours in advance. This allows us to use that time-period most effectively by scheduling another client that may be in need of our services at that time. There DWI program participants must follow rescheduling instructions in the DWI program contract.

### **CAN LARC MEET ALL THE NEEDS I MAY HAVE?**

No, at some point during your treatment, LARC may not be able to meet specific needs you may have. At that time it may be necessary, while you remain a LARC client, to refer you to another agency in addition to continuing treatment at LARC or to transfer you formally if our services are not appropriate for you. The following is a partial listing of possible referral agencies. If you have any questions, please bring them to the attention of your counselor.

ASHTABULA COUNTY JOBS AND FAMILY SERVICES  
PO BOX 1650  
Ashtabula, OH 44005-1650  
(440) 998-1110

CHILDREN SERVICES BOARD  
P.O. Box 1175  
Ashtabula, OH 44005-1175  
(440) 998-1811

COMMUNITY COUNSELING CENTER  
2801 Donahoe Drive  
Ashtabula, OH 44004  
(440) 998-4210



www.CDC.gov/hepatitis

July 27, 2007

## Hepatitis B Fact Sheet

<b>DESCRIPTION</b>	<p>Hepatitis B is a serious disease caused by a virus that attacks the liver. The virus, which is called hepatitis B virus (HBV), can cause lifelong infection, cirrhosis (scarring) of the liver, liver cancer, liver failure, and death.</p> <p>Hepatitis B vaccine is available for all age groups to prevent hepatitis B virus infection.</p>			
<b>SIGNS &amp; SYMPTOMS</b>	<p>About 30% of persons have no signs or symptoms. Signs and symptoms are less common in children than adults.</p> <table border="1" data-bbox="462 703 1349 804"> <tr> <td data-bbox="462 703 857 804"> <ul style="list-style-type: none"> <li>• jaundice</li> <li>• fatigue</li> <li>• abdominal pain</li> </ul> </td> <td data-bbox="857 703 1349 804"> <ul style="list-style-type: none"> <li>• loss of appetite</li> <li>• nausea, vomiting</li> <li>• joint pain</li> </ul> </td> </tr> </table>		<ul style="list-style-type: none"> <li>• jaundice</li> <li>• fatigue</li> <li>• abdominal pain</li> </ul>	<ul style="list-style-type: none"> <li>• loss of appetite</li> <li>• nausea, vomiting</li> <li>• joint pain</li> </ul>
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<b>CAUSE</b>	<ul style="list-style-type: none"> <li>• Hepatitis B virus (HBV)</li> </ul>			
<b>TRANSMISSION</b>	<ul style="list-style-type: none"> <li>• Occurs when blood from an infected person enters the body of a person who is not infected.</li> <li>• HBV is spread through having sex with an infected person without using a condom (the efficacy of latex condoms in preventing infection with HBV is unknown, but their proper use might reduce transmission), by sharing drugs, needles, or "works" when injecting drugs, through needles/ticks or sharps exposures on the job, or from an infected mother to her baby during birth.</li> </ul> <p>Persons at risk for HBV infection might also be at risk for infection with hepatitis C virus (HCV) or HIV.</p>			
<b>RISK GROUPS</b>	<ul style="list-style-type: none"> <li>• Persons with multiple sex partners or diagnosis of a sexually transmitted disease</li> <li>• Men who have sex with men</li> <li>• Sex contacts of infected persons</li> <li>• Injection drug users</li> <li>• Household contacts of chronically infected persons</li> </ul>	<ul style="list-style-type: none"> <li>• Infants born to infected mothers</li> <li>• Infants/children of immigrants from areas with high rates of HBV infection (country listing)</li> <li>• Health-care and public safety workers with exposure to blood (View current post-exposure prophylaxis recommendations)</li> <li>• Hemodialysis patients</li> </ul>		
<b>PREVENTION</b>	<ul style="list-style-type: none"> <li>• Hepatitis B vaccine is the best protection.</li> <li>• If you are having sex, but not with one steady partner, use latex condoms correctly and every time you have sex. The efficacy of latex condoms in preventing infection with HBV is unknown, but their proper use might reduce transmission.</li> <li>• If you are pregnant, you should get a blood test for hepatitis B. Infants born to HBV-infected mothers should be given HBIG (hepatitis B immune globulin) and vaccine within 12 hours after birth.</li> <li>• Do not shoot drugs; if you shoot drugs, stop and get into a treatment program; if you can't stop, never share drugs, needles, syringes, water, or "works", and get vaccinated against hepatitis A and B.</li> <li>• Do not share personal care items that might have blood on them (razors, toothbrushes).</li> <li>• Consider the risks if you are thinking about getting a tattoo or body piercing. You might get infected if the tools have someone else's blood on them or if the artist or piercer does not follow good health practices.</li> </ul>			

	<ul style="list-style-type: none"> <li>• If you have or had hepatitis B, do not donate blood, organs, or tissue.</li> <li>• If you are a health-care or public safety worker, get vaccinated against hepatitis B, and always follow routine barrier precautions and safely handle needles and other sharps (view current post-exposure prophylaxis recommendations).</li> </ul>
<b>VACCINE RECOMMENDATIONS</b>	<ul style="list-style-type: none"> <li>• Hepatitis B vaccine has been available since 1982.</li> <li>• Routine vaccination of 0-18 year olds</li> <li>• Vaccination of risk groups of all ages</li> </ul>
<b>LONG-TERM EFFECTS WITHOUT VACCINATION</b>	<p>Chronic infection occurs in:</p> <ul style="list-style-type: none"> <li>• 90% of infants infected at birth</li> <li>• 30% of children infected at age 1-5 years</li> <li>• 6% of persons infected after age 5 years</li> </ul> <p>Death from chronic liver disease occurs in:</p> <ul style="list-style-type: none"> <li>• 15%-25% of chronically infected persons</li> </ul>
<b>CONTRAINDICATIONS TO VACCINE</b>	<ul style="list-style-type: none"> <li>• A serious allergic reaction to a prior dose of hepatitis B vaccine or a vaccine component is a contraindication to further doses of hepatitis B vaccine. The recombinant vaccines that are licensed for use in the United States are synthesized by <i>Saccharomyces cerevisiae</i> (common baker's yeast), into which a plasmid containing the gene for HBsAg has been inserted. Purified HBsAg is obtained by lysing the yeast cells and separating HBsAg from the yeast components by biochemical and biophysical techniques. Persons allergic to yeast should not be vaccinated with vaccines containing yeast.</li> </ul>
<b>TREATMENT &amp; MEDICAL MANAGEMENT</b>	<ul style="list-style-type: none"> <li>• HBV infected persons should be evaluated by their doctor for liver disease.</li> <li>• Adefovir dipivoxil, interferon alfa-2b, pegylated interferon alfa-2a, lamivudine, entecavir, and telbivudine are six drugs used for the treatment of persons with chronic hepatitis B.</li> <li>• These drugs should not be used by pregnant women.</li> <li>• Drinking alcohol can make your liver disease worse.</li> </ul>
<b>TRENDS &amp; STATISTICS</b>	<ul style="list-style-type: none"> <li>• Number of new infections per year has declined from an average of 260,000 in the 1980s to about 60,000 in 2004.</li> <li>• Highest rate of disease occurs in 20-49-year-olds.</li> <li>• Greatest decline has happened among children and adolescents due to routine hepatitis B vaccination.</li> <li>• Estimated 1.25 million chronically infected Americans, of whom 20-30% acquired their infection in childhood.</li> </ul>





www.cdc.gov/hepatitis  
 March 6, 2008

### Hepatitis C Fact Sheet

<b>SIGNS &amp; SYMPTOMS</b>	80% of persons have no signs or symptoms.																						
	<ul style="list-style-type: none"> <li>• jaundice</li> <li>• fatigue</li> <li>• dark urine</li> </ul>	<ul style="list-style-type: none"> <li>• abdominal pain</li> <li>• loss of appetite</li> <li>• nausea</li> </ul>																					
<b>CAUSE</b>	<ul style="list-style-type: none"> <li>• Hepatitis C virus (HCV)</li> </ul>																						
<b>LONG-TERM EFFECTS</b>	<ul style="list-style-type: none"> <li>• Chronic infection: 75%-85% of infected persons</li> <li>• Chronic liver disease: 20% of chronically infected persons</li> <li>• Cirrhosis: 1%-5% of infected persons may die</li> <li>• Leading indication for liver transplant</li> </ul>																						
<b>TRANSMISSION</b>	<ul style="list-style-type: none"> <li>• Occurs when blood from an infected person enters the body of a person who is not infected.</li> <li>• HCV is spread through sharing needles or "works" when "shooting" drugs, through needles/ticks or sharps exposures on the job, or from an infected mother to her baby during birth.</li> </ul>																						
<b>Recommendations for testing based on risk for HCV infection</b>	<p>Persons at risk for HCV infection might also be at risk for infection with hepatitis B virus (HBV) or HIV.</p> <p>Recommendations for Testing Based on Risk for HCV Infection</p> <table border="1"> <thead> <tr> <th>PERSONS</th> <th>RISK OF INFECTION</th> <th>TESTING RECOMMENDED?</th> </tr> </thead> <tbody> <tr> <td>Injecting drug users</td> <td>High</td> <td>Yes</td> </tr> <tr> <td>Recipients of clotting factors made before 1987</td> <td>High</td> <td>Yes</td> </tr> <tr> <td>Hemodialysis patients</td> <td>Intermediate</td> <td>Yes</td> </tr> <tr> <td>Recipients of blood and/or solid organs before 1992</td> <td>Intermediate</td> <td>Yes</td> </tr> <tr> <td>People with undiagnosed liver problems</td> <td>Intermediate</td> <td>Yes</td> </tr> <tr> <td>Infants born to infected mothers</td> <td>Intermediate</td> <td>After age 12-18 mos.</td> </tr> </tbody> </table>		PERSONS	RISK OF INFECTION	TESTING RECOMMENDED?	Injecting drug users	High	Yes	Recipients of clotting factors made before 1987	High	Yes	Hemodialysis patients	Intermediate	Yes	Recipients of blood and/or solid organs before 1992	Intermediate	Yes	People with undiagnosed liver problems	Intermediate	Yes	Infants born to infected mothers	Intermediate	After age 12-18 mos.
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<b>PREVENTION</b>	<ul style="list-style-type: none"> <li>• There is no vaccine to prevent hepatitis C.</li> <li>• Do not shoot drugs; if you shoot drugs, stop and get into a treatment program; if you can't stop, never share needles, syringes, water, or "works", and get vaccinated against hepatitis A &amp; B.</li> <li>• Do not share personal care items that might have blood on them (razors, toothbrushes).</li> <li>• If you are a health care or public safety worker, always follow routine barrier precautions and safely handle needles and other sharps; get vaccinated against hepatitis B.</li> <li>• Consider the risks if you are thinking about getting a tattoo or body piercing. You might get infected if the tools have someone else's blood on them or if the artist or piercer does not follow good health practices.</li> <li>• HCV can be spread by sex, but this is rare. If you are having sex with more than one steady sex partner, use latex condoms* correctly and every time to prevent the spread of sexually transmitted diseases. You should also get vaccinated against hepatitis B.</li> <li>• If you are HCV positive, do not donate blood, organs, or tissue.</li> </ul>									
<b>TREATMENT &amp; MEDICAL MANAGEMENT</b>  <u>AASLD Practice Guideline: Diagnosis, Management, and Treatment of Hepatitis C.</u>	<ul style="list-style-type: none"> <li>• HCV positive persons should be evaluated by their doctor for liver disease.</li> <li>• Interferon and ribavirin are two drugs licensed for the treatment of persons with chronic hepatitis C.</li> <li>• Combination therapy, using pegylated interferon and ribavirin, is currently the treatment of choice.</li> <li>• Combination therapy can get rid of the virus in about 5 out of 10 persons for genotype 1 and in up to 8 out of 10 persons for genotype 2 and 3.</li> <li>• Drinking alcohol can make your liver disease worse.</li> </ul>									
<b>STATISTICS &amp; TRENDS</b>	<ul style="list-style-type: none"> <li>• Estimated number of new infections per year has declined from an average of 240,000 in the 1980s to about 19,000 in 2006.</li> <li>• Most infections are due to illegal injection drug use.</li> <li>• Transfusion-associated cases occurred prior to blood donor screening; now occur in less than one per 2 million transfused units of blood.</li> <li>• Estimated 4.1 million (1.6%) Americans have been infected with HCV, of whom 3.2 million are chronically infected.</li> <li>• The risk for perinatal HCV transmission is about 4%.</li> <li>• If coinfecting with HIV the risk for perinatal infection is about 19%.</li> </ul>									

\* The efficacy of latex condoms in preventing infection with HCV is unknown, but their proper use may reduce transmission.

# HIV

*HIV* stands for human immunodeficiency virus. This is the virus that causes AIDS. HIV is different from most other viruses because it attacks the immune system. The immune system gives our bodies the ability to fight infections. HIV finds and destroys a type of white blood cell (T cells or CD4 cells) that the immune system must have to fight disease.

## **How HIV Is and Is Not Transmitted**

HIV is a fragile virus. It cannot live for very long outside the body. As a result, the virus **is not transmitted** through day-to-day activities such as shaking hands, hugging, or a casual kiss. You cannot become infected from a toilet seat, drinking fountain, doorknob, dishes, drinking glasses, food, or pets. You also cannot get HIV from mosquitoes.

HIV is primarily found in the blood, semen, or vaginal fluid of an infected person. HIV is transmitted in 3 main ways:

- Having sex (anal, vaginal, or oral) with someone infected with HIV
- Sharing needles and syringes with someone infected with HIV
- Being exposed (fetus or infant) to HIV before or during birth or through breast feeding

HIV also can be transmitted through blood infected with HIV. However, since 1985, all donated blood in the United States has been tested for HIV. Therefore, the risk for HIV infection through the transfusion of blood or blood products is extremely low. The U.S. blood supply is considered among the safest in the world.

## **Risk Factors for HIV Transmission**

You may be at increased risk for infection if you have

- injected drugs or steroids, during which equipment (such as needles, syringes, cotton, water) and blood were shared with others
- had unprotected vaginal, anal, or oral sex (that is, sex without using condoms) with men who have sex with men, multiple partners, or anonymous partners
- exchanged sex for drugs or money
- been given a diagnosis of, or been treated for, hepatitis, tuberculosis (TB), or a sexually transmitted disease (STD) such as syphilis
- received a blood transfusion or clotting factor during 1978–1985
- had unprotected sex with someone who has any of the risk factors listed above

## Preventing Transmission

Your risk of getting HIV or passing it to someone else depends on several things. Do you know what they are? You might want to talk to someone who knows about HIV. You can also do the following:

- Abstain from sex (do not have oral, anal, or vaginal sex) until you are in a relationship with only one person, are having sex with only each other, and each of you knows the other's HIV status.
  - If both you and your partner have HIV, use condoms to prevent other sexually transmitted diseases (STDs) and possible infection with a different strain of HIV.
  - If only one of you has HIV, use a latex condom and lubricant every time you have sex.
- If you have, or plan to have, more than one sex partner, consider the following:
  - Get tested for HIV
    - If you are a man who has had sex with other men, get tested at least once a year.
    - If you are a woman who is planning to get pregnant or who is pregnant, get tested as soon as possible, before you have your baby.
  - Talk about HIV and other STDs with each partner before you have sex.
  - Learn as much as you can about each partner's past behavior (sex and drug use), and consider the risks to your health before you have sex.
  - Ask your partners if they have recently been tested for HIV; encourage those who have not been tested to do so.
  - Use a latex condom and lubricant every time you have sex.
  - If you think you may have been exposed to another STD such as gonorrhea, syphilis, or *Chlamydia trachomatis* infection, get treatment. These diseases can increase your risk of getting HIV.
  - Get vaccinated against hepatitis B virus.
- Even if you think you have low risk for HIV infection, get tested whenever you have a regular medical check-up.
- Do not inject illicit drugs (drugs not prescribed by your doctor). You can get HIV through needles, syringes, and other works if they are contaminated with the blood of someone who has HIV. Drugs also cloud your mind, which may result in riskier sex.
- If you do inject drugs, do the following:
  - Use only clean needles, syringes, and other works.
  - Never share needles, syringes, or other works.
  - Be careful not to expose yourself to another person's blood.
  - Get tested for HIV test at least once a year.



- Consider getting counseling and treatment for your drug use.
  - Get vaccinated against hepatitis A and B viruses.
- 
- Do not have sex when you are taking drugs or drinking alcohol because being high can make you more likely to take risks.

To protect yourself, remember these ABCs:

**A=Abstinence**

**B=Be Faithful**

**C=Condoms**

### **Symptoms of HIV Infection**

The only way to know whether you are infected is to be tested for HIV. You cannot rely on symptoms alone because many people who are infected with HIV do not have symptoms for many years. Someone can look and feel healthy but can still be infected. In fact, one quarter of the HIV-infected persons in the United States do not know that they are infected.

### **HIV Testing**

Once HIV enters the body, the body starts to produce antibodies—substances the immune system creates after infection. Most HIV tests look for these antibodies rather than the virus itself. There are many different kinds of HIV tests, including rapid tests and home test kits. All HIV tests approved by the US government are very good at finding HIV.

### **Finding a Testing Site**

Many places offer HIV testing: health departments, doctors' offices, hospitals, and sites specifically set up to provide HIV testing.

You can locate a testing site by visiting the [CDC HIV testing database](#) or by calling CDC-INFO (formerly the CDC National AIDS Hotline) at 1-800-CDC-INFO (1-800-232-4636) 24 Hours/Day. You do not have to give any personal information about yourself to use these services to find a testing site.



# Elimination



## Tuberculosis: General Information

### What is TB?

Tuberculosis (TB) is a disease caused by germs that are spread from person to person through the air. TB usually affects the lungs, but it can also affect other parts of the body, such as the brain, the kidneys, or the spine. A person with TB can die if they do not get treatment.

### What Are the Symptoms of TB?

The general symptoms of TB disease include feelings of sickness or weakness, weight loss, fever, and night sweats. The symptoms of TB disease of the lungs also include coughing, chest pain, and the coughing up of blood. Symptoms of TB disease in other parts of the body depend on the area affected.

### How is TB Spread?

TB germs are put into the air when a person with TB disease of the lungs or throat coughs, sneezes, speaks, or sings. These germs can stay in the air for several hours, depending on the environment. Persons who breathe in the air containing these TB germs can become infected; this is called latent TB infection.

### What is the Difference Between Latent TB Infection and TB Disease?

People with *latent TB infection* have TB germs in their bodies, but they are not sick because the germs are not active. These people do not have symptoms of TB disease, and they cannot spread the germs to others. However, they may develop TB disease in the future. They are often prescribed treatment to prevent them from developing TB disease.

People with *TB disease* are sick from TB germs that are active, meaning that they are multiplying and destroying tissue in their body. They usually have symptoms of TB disease. People with TB disease of the lungs or throat are capable of spreading germs to others. They are prescribed drugs that can treat TB disease.

### What Should I Do if I Have Spent Time with Someone with Latent TB Infection?

A person with latent TB infection cannot spread germs to other people. You do not need to be tested if you have spent time with someone with latent TB infection. However, if you have spent time with someone with TB disease or someone with symptoms of TB, you should be tested.

### What Should I Do if I Have Been Exposed to Someone with TB Disease?

People with TB disease are most likely to spread the germs to people they spend time with every day, such as family members or coworkers. *If you have been around someone who has TB disease, you should go to your doctor or your local health department for tests.*

### How Do You Get Tested for TB?

There are two tests that can be used to help detect TB infection. The Mantoux tuberculin skin test is performed by injecting a small amount of fluid (called tuberculin) into the skin in the lower part of the arm. A person given the tuberculin skin test must return within 48 to 72 hours to have a trained health care worker look for a reaction on the arm. A second test is the QuantiFERON®-TB Gold test. The QuantiFERON®-TB Gold test is a blood test that measures how the patient's immune system reacts to the germs that cause TB.

#### **What Does a Positive Tuberculin Skin Test or QuantiFERON®-TB Gold Test Mean?**

A positive tuberculin skin test or QuantiFERON®-TB Gold test only tells that a person has been infected with TB germs. It does not tell whether or not the person has progressed to TB disease. Other tests, such as a chest x-ray and a sample of sputum, are needed to see whether the person has TB disease.

#### **What is Bacille Calmette-Guérin (BCG)?**

BCG is a vaccine for TB disease. BCG is used in many countries, but it is not generally recommended in the United States. BCG vaccination does not completely prevent people from getting TB. It may also cause a false positive tuberculin skin test. However, persons who have been vaccinated with BCG can be given a tuberculin skin test or QuantiFERON®-TB Gold test.

#### **Why is Latent TB Infection Treated?**

If you have latent TB infection but not TB disease, your doctor may want you to take a drug to kill the TB germs and prevent you from developing TB disease. The decision about taking treatment for latent infection will be based on your chances of developing TB disease. Some people are more likely than others to develop TB disease once they have TB infection. This includes people with HIV infection, people who were recently exposed to someone with TB disease, and people with certain medical conditions.

#### **How is TB Disease Treated?**

TB disease can be treated by taking several drugs for 6 to 12 months. It is very important that people who have TB disease finish the medicine, and take the drugs exactly as prescribed. If they stop taking the drugs too soon, they can become sick again; if they do not take the drugs correctly, the germs that are still alive may become resistant to those drugs. TB that is resistant to drugs is harder and more expensive to treat. In some situations, staff of the local health department meet regularly with patients who have TB to watch them take their medications. This is called directly observed therapy (DOT). DOT helps the patient complete treatment in the least amount of time.

#### **Additional Information**

CDC. Questions and Answers About TB (2007).  
[www.cdc.gov/tb/faqs/default.htm](http://www.cdc.gov/tb/faqs/default.htm)