

University of Rochester Psychological Service Center (URPSC)

435 Meliora Hall, Department of Psychology, Rochester, NY 14627 TEL 585-275-HOPE (4673) URPSC@rochester.edu

University of Rochester Psychological Service Center (URPSC) PRIVACY INFORMATION YOUR HEALTH / CLINIC RECORDS

This document explains how your or your child's health information may be used and shared, and how you can see or get a copy of it. **Please read it carefully.**

<u>Important Note</u>: URPSC is a training clinic for doctoral (Ph.D.) students in the Clinical Psychology Program. URPSC is a part of the Department of Psychology, but it is not part of Strong Memorial Hospital or any other University of Rochester hospital. We do not bill insurance companies, so we do not have to follow federal HIPAA privacy rules. But we take your privacy seriously. To protect your information, we follow New York State law, professional ethics, and Departmental standards for approved training clinics.

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights, including how to access, correct, or limit the use of your health information.

See or get a copy of your health information

- You may ask to see or get a paper or electronic copy of your health information records.
- We will give you a copy or summary within 30 days. There is no charge for this request.

Ask us to correct your health information

- If you think something in your record is wrong or missing, you can ask us to fix it.
- We may not be able to make every change, but we will explain why in writing within 30 days.

Ask us to contact you in a certain way

- You can tell us how you want us to reach you (for example, by cell phone instead of email, or by mailing to a different address).
- We will provide guidance on acceptable communication methods and limitations of electronic communication, such as phone, email, or text. We will not use social media for contact.
- We will agree to all reasonable requests.

Limit how your health information is used or shared

- You can ask us not to use or share certain information.
- We may not always be able to honor your request, especially if it could interfere with your treatment. If that happens, we will explain the reason in writing.

Get a paper copy of this notice

- You may request a paper copy of this notice at any time, even if you got it electronically.
- We will give you one right away.

Revised 2025.10.01 1 of 3



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Choose someone to act for you

- If you have a legal guardian or someone with health care power of attorney (POA), that person can use your rights.
- We will check their legal authority before taking action.

File a complaint if you feel your rights are violated

- You can talk with your graduate clinician or the Clinic Director about your concern.
- If it is not resolved, you can file a complaint with the URMC Integrity Helpline: (https://www.urmc.rochester.edu/compliance-office/integrity-hotline or 585-756-8888).
- We will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your preferences

- You can choose if we share information with family, close friends, or others involved in your care.
- You can choose if we share information in an emergency or disaster.
- If you cannot tell us your wishes (for example, if you are unconscious), we may share information if we believe it is in your best interest or to prevent serious harm.

We never share your health information unless you give us written permission for:

- Marketing purposes
- 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:

Training clinic context

Because URPSC is a training clinic, your care is provided by graduate students under the close supervision of licensed psychologists. This means your case may be discussed in supervision and team meetings to ensure you receive the highest quality care.

- <u>Supervision</u>: Clinical supervisors may review your case and/or sessions to provide oversight and guidance to trainees.
- <u>Session Recording</u>: Sessions may be audio or video recorded for training and supervision, with your consent. Recordings are stored securely and destroyed after use.
- <u>Treatment Team</u>: Your case and/or sessions may be discussed during treatment team meetings, where faculty supervisors and other trainees collaborate to provide high-quality care.
- <u>Education</u>: De-identified case information may be used for teaching or training, consistent with University and state requirements. Clients may choose to opt out of research or teaching use of de-identified information if they wish.

Revised 2025.10.01 2 of 3



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Treat you

• We may use your information with other providers involved in your care. <u>Example</u>: Your clinician may consult with another provider to coordinate treatment.

Run our clinic

We may use your information to manage services and contact you if needed.
<u>Example</u>: Way may use records to improve treatment planning.

Bill you for services

We can use your health information to process payments.
<u>Example</u>: We may share limited details with University billing staff. Because we do not bill insurance, your information is never shared with insurance companies.

Other required uses

We may also share your information in the following situations:

- Reduce risk of harm
 - Reporting suspected abuse, neglect, or domestic violence
 - Preventing or reducing a serious threat to anyone's health or safety
- Comply with the law
 - o We will share health information about you if state or federal laws require it
- 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

Telehealth

- If you receive services via telehealth, there are specific risks, including technical issues and limits to confidentiality.
- You are responsible for ensuring a private, secure location during telehealth sessions.
- Emergency procedures during telehealth sessions will follow the same protocols as in-person sessions.

Our Responsibilities

We take your privacy seriously. To protect your information, we follow New York State law, professional ethics, and Departmental standards for approved training clinics. We are required to protect the privacy and security of your health information. We will notify you if a breach occurs, and we will not share your health information without your written consent unless required by law.

Changes to the Terms of This Notice

We may change the terms of this notice, and the changes will apply to all health information we have about you. The new version will be available in our office and on our website.

Revised 2025.10.01 3 of 3