ChristianaCare

SCHOOL-BASED HEALTH CENTER

Odessa High School
570 Tony Marchio Drive
Townsend, DE 19734
Phone: 302-842-2640

Dear Parents/Guardians**:**

The Odessa School-Based Health Center (SBHC) is a partnership between ChristianaCare, Appoquinimink District, and the Delaware Division of Public Health. This letter is an invitation to sign up your child, ages 12 and above in the SBHC.

Health care in the SBHC is provided by a multi-disciplinary team. An Advanced Practice Clinicians, a Licensed Clinical Social Worker/ Licensed Professional Counselor of Mental Health, and a Registered Dietitian provide care at your child's school.

To sign up your child in the SBHC:

- Up-to-date insurance information is needed if your child is insured. No co-pay, co-insurance or deductible will be charged to you and no one will be turned away based on ability to pay.
- Please review, fill out and sign the attached Consent Form.
- Fill out attached **Student Registration Form** and **Health History Form**
- Return completed enrollment/registration forms to the SBHC

SBHC services offered:

Counseling (individual, family, and group)	HIV testing
Health education/risk reduction	Reproductive Health Services (with parent permission)
Crisis intervention and suicide prevention	Physicals (sports, school, or pre-employment)
Nutrition/weight management	Health screenings
Pregnancy testing	Immunizations
Diagnosis and treatment of sexually transmitted infections (STDs)	Diagnosis and treatment of minor illnesses/injuries

Please know that your child's pediatrician or family doctor is still your child's main doctor. SBHC does not take the place of your child's pediatrician or family doctor, and SBHC doctors and Advanced Practice Clinicians will work with your child's main doctor to care for your child. The SBHC offers services that may round out the care provided by your main doctor. When appropriate, and with your permission, we will try to share medical information with your child's doctor to prevent any duplication of health care services, and to take the best care of your child. If your child does not have a doctor, we can help you find one.

The SBHC staff thanks you for your time. Together with you and your child's main doctor, we will work towards keeping your child healthy and in school. Please encourage your child's pediatrician or family doctor to call the SBHC with questions. If you have questions or need more information, please call the Odessa High School at 302-842-2640.

DELAWARE HEALTH AND SOCIAL SERVICES
Division of Public Health

Privacy Office
4000 Nexus Drive, Avenue North – Suite NW3-100,
Wilmington, DE 19803
Telephone No.: 302-623-4468, Fax No.: 302-428-2475

Effective Date: September 23, 2013
Last Revised Date: September 27, 2021

HIPAA Notice of Privacy Practices (NPP): Please Review It Carefully!

This Summary NPP or Notice is about Your Information, Your Rights, and Our Responsibilities. It describes how your information may be used and disclosed by ChristianaCare, and how you can get access to it. ChristianaCare takes our patients' privacy seriously. We know that your medical information is very personal. We do our best to protect the privacy of your medical information. We will only use and disclose the minimum necessary information for the intended purpose and as required by law. You can ask for a copy of our detailed NPP or access it on our website www.christianacare.org/privacy.

Our Responsibilities	To serve you, we create and receive personal information about your health. This information is called Protected Health Information (PHI), and it comes from you, your physicians, hospitals, and other healthcare service providers involved in your care. For members of the ChristianaCare Health & Welfare Benefits Plan (benefits plan), PHI may come from your employer, other insurers, Health Maintenance Organizations (HMOs) or third-party administrators (TPAs), as applicable. Your PHI can be in oral, written, or electronic format. We are required by law to: • maintain the privacy and security of your PHI. • enter into a Business Associate Agreement with third parties who participate in your treatment, payment, and our health care operations that requires the business associate to protect the privacy and security of PHI. • notify you promptly if we determine inappropriate use or disclosure of your PHI has occurred that compromises the privacy or security of your information. • use and disclose your information, as described in this Notice, unless you tell us we cannot in writing. If you change your mind at any time, you must tell us in writing. • follow the duties and privacy practices described in this Notice and give you a copy of it.
Who will follow this Notice?	• All ChristianaCare organizations, facilities, and medical practices • Any doctor, health care professional, or other person caring for you • All people who work for ChristianaCare • All ChristianaCare volunteers • Any business associate needing health information, so they can provide services for ChristianaCare
Your Information	
We may store the following information about you:	The information we may store includes, but is not limited to: • Clinical Data: Diagnoses/Conditions, Lab Results, Medications, Other Treatment Information • Demographic Data: Address/Zip Code, Date of Birth, Driver's License, Name, Social Security Number, Other Identifiers • Financial Data: Claims Information, Credit Card/Bank Account Number, Other Financial Information, Name, and Driver's License Information
Our Uses and Disclosures	
We may use and disclose your information for purposes of:	This section describes how we may use and give out medical information about you. Although this list does not contain every possibility, all of the ways that we are allowed to use and give out information without your permission will fall within one of the categories listed in this section. We may use and disclose your information for the following situations, including, but not limited to: • Helping to manage the health care treatment you receive • Coordinating your care among various health care providers • Collecting standardized assessment information to complete a Home Health Assessment on admission • Billing for your health services and managing our health care operations • Conducting research

	• Complying with the law or helping with public health and safety issues • Responding to organ and tissue donation requests, medical examiners, and funeral directors • Addressing workers' compensation, law enforcement, and other government requests • Responding to lawsuits and legal actions • Administering your health plan, as applicable for benefits plan members • Provisioning of services and programs for benefits plan members • Conducting marketing and fundraising activities
Your Choice	
You have some choices in the way that we use and share your information for purposes of:	You may choose how we use and share your information for the following situations, including, but not limited to: • Responding to treatment-related questions from your family and friends • During disaster relief • Communicating with you through mobile and digital technologies • Marketing our services and products
Your Rights	
Your rights include:	When it comes to your health information, you have certain rights. This section describes your rights and our responsibilities to help you. Your rights include, but are not limited to, the following: • Getting a copy of your health and claims records • Requesting correction of your health and claims records • Getting a list of those with whom we have shared your information • Asking us to limit the information we share • Requesting confidential communication • Requesting a copy of this privacy Notice • Filing a complaint if you believe your privacy rights have been violated • Choosing someone to act on your behalf
Special Situations	
We are allowed or required to share your information in other ways without your permission. The following uses and disclosures are considered special situations: for research purposes; for law enforcement purposes; to help avoid a serious threat to public health or safety; responding to public health authorities; for home health assessments; responding to organ and tissue donation requests; to coroners, medical examiners, and funeral directors; to the military; for workers' compensation; for health oversight activities; for lawsuits and disputes; to correctional institutions; for national security and intelligence activities; and additional restrictions on use and disclosure. For more information, see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.	
Health Information Exchange	
ChristianaCare participates in several Health Information Exchanges (HIEs) and Health Information Networks (HINs). The HIEs and HINs coordinate information sharing among their members for treatment, payment, and health care operations. Through these exchanges, ChristianaCare can share your health information with your other providers ensuring timely delivery of vital health information to your health care providers. We participate in the following HIEs: Delaware Health Information Network (DHIN); Chesapeake Regional Information System for our Patients (CRISP); Healthshare Exchange of Southeastern Pennsylvania Inc. (HSX); and CommonWell Health Alliance (CommonWell). Patients may opt-out of an electronic HIE on the HIE's website.	

Changes to this Notice. We have the right to change this Notice. All changes to the Notice will apply to the information we already have about you, as well as any information we receive in the future. We will post a copy of the current Notice in the hospital and on our website www.christianacare.org/privacy. The effective date of the current Notice will be posted at the top of the Notice. If we make material changes to this Notice, we will provide you with the updated Notice at your next visit.

How to contact us. If you have any questions about this Notice, or if you need to make a request to the Privacy Officer, please contact us at ChristianaCare c/o Privacy Officer, 4000 Nexus Drive, Avenue North, Suite NW3-100, Wilmington, DE 19803, or 1-302-623-4468, or email us at privacyoffice@ChristianaCare.org. A detailed Notice of our Privacy Practices is available upon request.