



GREAT PLAINS ACCESS TO RECOVERY

Consent Form for Participation in Treatment and Recovery Support Services, Program Evaluation, and Data Collection

Introduction

You are being offered alcohol and/or substance use treatment and/or recovery support services as part of Great Plains Access to Recovery (GPATR), a grant funded by the Substance Abuse and Mental Health Service Administration/Centers for Substance Abuse Treatment of the U.S. Department of Health and Human Services. The Great Plains Tribal Chairmen's Health Board is responsible for the management and evaluation of this program. We have prepared this form to provide you with all the information you will need to make an informed decision about your participation in the program. Feel free to ask questions during any point of the explanation.

You are being asked to participate in an evaluation of the treatment and/or recovery support services you are being given as part of Great Plains Access to Recovery, to see if these services help people reduce or stop their use of alcohol or drugs. The services are for clients, who are 15 years old or older, and who are seeking treatment and/or recovery support services for alcohol and/or substance use. The evaluators are collecting information from people who get these services to help us understand how well it works for people.

*The services and evaluation are **voluntary**. Your treatment or receipt of recovery support services will not be affected by choosing not to participate in evaluations or going to appointments from service providers. However if the project is not able to collect data required by SAMHSA, the services you receive will not be paid for by the project. If you decide not to take part in the program, you will still receive a referral for treatment and/or recovery support services if you want one, however, the referral will not be paid for if you are not participating in the GPATR program.*

Why is this project being done?

GPATR is designed to give you choices among services such as counseling, treatment programs, traditional healing and ceremonies, cultural activities, educational groups, and faith-based services. You also have a choice among the people and agencies providing the services. It will provide a care manager to coordinate your services and help you make choices. It will expand the number and types of services in your area.

The evaluation is being done to find out if the treatment and/or recovery support services work to lower drug and alcohol use. Helping people cut down on drinking or use of drugs can sometimes help them in other ways. To see if these services help people, the evaluators will ask you some questions now and then again in five or six months, to see if you think the services helped you.

How many people will take part in the program and evaluation?

The GPATR program plans to provide treatment and/or recovery support services to approximately 3,500 people each year for the next four years throughout South Dakota, North Dakota, Iowa and Nebraska. A total of over 13,000 people will receive services through a voucher system.

How does the voucher system work?

A voucher is issued for services that you select. You will not get the money directly: it will go to the agency or person who provides the service. The providers will bill GPATR directly for the services that you receive. The providers must be registered with GPATR, in compliance with GPATR standards, and in good standing in your community. Your care manager will assist you in determining where, when and what services you will access. The first step is to obtain a screening and assessment for Recovery Support Services, where you will learn about the program in depth.

What is involved in the assessment?

When you meet with a GPATR representative for the first time, he or she will screen you to see if you are eligible for the GPATR program. During that meeting, you will be informed about the program, and will be asked questions about your drinking and drug use and your ideas about what you think will help you in leading a happy life. The person doing this assessment will give you the names of care managers in your area. You will choose one person to be your care manager. You can switch care managers if you want to, but in order to be in the GPATR program, you must be working with a care manager.



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The assessment person will help you choose your first services. If you want recovery support services to begin with, and then choose to obtain clinical services, you can do this. The choice is yours. Your care manager will help connect you with the service providers and will contact GPATR offices with any requests or changes to your vouchers.

If you want clinical services such as counseling or treatment, you will need a recent clinical assessment. GPATR can refer you to a clinical assessment, or you may prefer to obtain one on your own and have the results released to GPATR. GPATR requires that you have a clinical assessment within two months of being vouchered for clinical services.

What is involved in the program evaluation?

If you agree to be in the project evaluation, the answers that you give today will be sent to an evaluation team. They will use information about you only for this evaluation. This includes information about your use of alcohol or drugs, age, gender, and tribal affiliation.

If you seem to need services for alcohol or drug use, you will also be asked about such things as where you and your family live, physical or mental health problems, treatment received, sexual activity, recent arrests and time spent in jail or prison, your education, if you work, and income. You will be asked for your permission to let the evaluation team use this information for the evaluation.

GPATR representatives, working with the evaluation team, will contact you in about five months for an hour interview. They will ask you questions regarding your satisfaction with the program and services you received and questions about alcohol and drug use. If you agree to be contacted for this five month follow up interview, you will be asked for your name, address, phone number, and some other contact information, so that the GPATR evaluators can contact you. If you do the five month follow up interview, you will receive a \$20 gift card for your time.

The evaluation team is asking your permission to let them use information that we collect today, including your answers to questions about your health, including questions about your alcohol and drug use, and some other information. We will also collect information about any treatment and/or recovery support services you receive through Great Plains Access to Recovery.

If you agree to let the evaluators use this information, we will ask for your name and other contact information. The evaluators will use this information to help them locate you in five months for the interview. They will also use it to connect information from the answers you give today and to the interview in five months.

How long will I be in the GPATR program?

The length of time that you will receive services will be based primarily on initial and ongoing assessments of your needs, and other treatment-related factors. The overall grant ends on September 31, 2015, so no services will be provided under this grant after this date.

Your permission for the evaluators to contact you ends December 31, 2015. By that date, the evaluators will remove your name and other information that identifies you from their records. They will keep the evaluation records without your name and other identifiers indefinitely to use in final evaluation reports and to share with other evaluators.

What are the risks?

There may be risks associated with receiving treatment and/or recovery support services, including emotional and psychological discomforts, and loss of privacy. While it is possible that your confidentiality could be broken, strict measures are in place to protect your confidentiality. There are already federal laws which protect the confidentiality of substance abuse treatment clients and anyone who breeches this confidentiality may be liable for a fine. All records will be kept in locked filing cabinets in secured offices.

The evaluation does not involve medical tests or procedures. The person who speaks with you today and the evaluators will try to prevent any physical injury or emotional problems that could result from this evaluation. Since this evaluation does not involve any medical procedures, the risk for any physical injury seems to be very low.

You may be asked questions about sensitive topics such as drug and alcohol use, sexual activity, HIV testing, or mental health. You may skip any question you do not want to answer.



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Are there benefits to taking part in the program and evaluation?

All participants in this program may benefit directly from the clinical treatment and recovery support services they receive, as well as through increased pride in knowing that they are participating in an effort to help improve counseling and recovery for other Native American people. Information from the evaluation may help others learn if these kinds of services help people reduce or stop their use of alcohol or drugs.

What other options are there?

This evaluation is voluntary. If you don't want to take part in the evaluation, you can still get the treatment and recovery services provided by this grant. If you want more help with drug or alcohol problems but decide not to receive any services through Great Plains Access to Recovery, you will be given the name of someone else to talk to. If you choose to do this, those services will not be paid through Great Plains Access to Recovery.

What would prevent me from being in the evaluation?

You can decide whether or not you want to be in this evaluation. Nothing stops you from being in the evaluation if you want to take part, even if you never received services.

What are the costs?

If you agree to be in the GPATR program, there are no costs to you. If you get a referral to treatment or recovery services as part of this project, these services are free. If you agree to be in this evaluation and are interviewed in five months you will receive a \$20 gift card for your time at the time of your follow-up interview.

What about confidentiality?

Federal and state laws require that intake workers, treatment providers, and the evaluation team protect the privacy of your records. When reports on the evaluation are written, your information will be combined with information from other people. Evaluation reports won't use any names or other information that would identify you personally.

There are exceptions to confidentiality. If you say something that makes us suspect that abuse or neglect has occurred to a child or an elderly person, we have to report that to Child Protective Services or Adult Protective Services. Also, if you tell us that you want to hurt yourself or someone else, we have to report that so you can get help.

This evaluation is funded by the Substance Abuse and Mental Health Service Administration/Centers for Substance Abuse Treatment of the U. S. Department of Health and Human Services. The evaluation team will give your answers to Substance Abuse and Mental Health Service Administration/Centers for Substance Abuse Treatment, but they will not give them your name, address, or any contact information about you. The Substance Abuse and Mental Health Service Administration/Centers for Substance Abuse Treatment plans to use this information to see if the project is helping people. They could release your answers combined with the answers of people who are also part of this evaluation. Your answers will not be connected to your name, address, or any other identifying information about you.

What are my rights as a participant?

*If you choose so, you will receive a copy of the consent forms for your records. If you have questions about your rights as a person taking part in the evaluation, you may call the GPATR Project Director or GPATR Treatment Coordinator at **605-721-1922**. You don't have to give your name if you call.*

Can I stop participation in the program and/or evaluation?

*You can change your mind and leave the program and evaluation at any time. To leave the program or evaluation, write to GPATR Project Director, GPTCHB, 1770 Rand Road, Rapid City, SD 57702 or contact your care coordinator, or call **605-721-1922**. The evaluation team will remove your information from the evaluation records and will not use it in any reports prepared after they hear from you, nor will they contact you for the five month follow up data collection. If you withdraw from the evaluation, you won't lose any benefits or services from any treatment or recovery support provider.*

What if I have a complaint or grievance?

*If you have any concerns about a service provider, business partner, or representative of GPATR, you may contact the GPATR Project Director, GPTCHB, 1770 Rand Road, Rapid City, SD 57702 or contact your care manager, or call **605-721-1922**. You may make an anonymous complaint regarding fraud, waste, or abuse. It is important that you provide*



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enough information so that the complaint can be investigated. All complaints will be investigated. A complete list of complaint and grievance policies and procedures is available on the GPATR website

If you have a complaint about unethical practices including inappropriate sexual advances or activities by a clinical provider, please contact the person's credentialing organization. A list of phone numbers is available at the GPATR office. 605-721-1922.



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Signature page for Client Consent and Legal Rights

I have read the information in the consent form or it has been read to me. The program and evaluation has been explained to me, and all of my questions have been answered to my satisfaction. I agree to each of the items checked yes below:

- Yes No *I agree to be in this program and to receive treatment and/or recovery support services*
- Yes No *I understand that I may withdraw from services at any time with no penalty.*
- Yes No *I understand that I can receive services without participating in the evaluation.*
- Yes No *I agree to be in this evaluation and the evaluators may use the personal information I give in the interview for evaluation purposes.*
- Yes No *The evaluators may also contact me in about five months time and ask for an interview. I can decide at that time whether to be interviewed.*
- Yes No *The evaluators may collect information about treatment and recovery support services I receive through Great Plains Access to Recovery.*
- Yes No *I give my permission for the evaluators to try to find me through the names and contact information I provide, as well as by contacting assessment, treatment, and recovery support service providers to ask for updated contact information for me.*
- Yes No *I give my permission for GPATR to give my name to GPATR business partners who will contact me and conduct the evaluation interview.*

I am voluntarily signing this form. I will be given a copy of this consent form. I am not giving up any of my legal rights by signing this form. There is no penalty if I decide not to take part or leave the evaluation.

PRINT NAME OF CLIENT: _____

Signature of Client

Date

Signature of Person Conducting Intake into Evaluation

Date

Copies to: Client
GPATR

Please fax the completed and signed page 5 to GPATR Offices: 605-716-3127. Please put the original in the client file and give a copy to the client.