

Therapy Privacy Practices

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Notice of Privacy Practices

Your Information. Your Rights. Our Responsibilities.

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

Effective date: August 7, 2026

Your Rights

You have rights regarding your protected health information. Subject to applicable law and permitted exceptions, you may:

Request access to and obtain a copy of your paper or electronic health record.

Ask to correct or amend health information you believe is incorrect or incomplete.

Request confidential communications by alternative means or at alternative locations.

Ask for restrictions on certain uses or disclosures; some requests must be honored when required by law.

Request an accounting of certain disclosures.

Receive a paper copy of this notice.

Choose a personal representative who is legally authorized to act for you.

File a privacy complaint without retaliation.

Your Choices

For certain uses and disclosures, you may tell us your preferences or provide written authorization. Uses or disclosures requiring authorization will not occur without it unless another law permits or requires the disclosure. You may revoke an authorization in writing, subject to actions already taken in reliance on it.

How We May Use and Share Information

We may use and disclose protected health information for treatment, payment, and health care operations as permitted by law. Examples include coordinating care with another treating provider, billing for services, and conducting necessary practice operations. We may also disclose information when required or permitted by law, such as for certain public-health activities, abuse or neglect reporting, health oversight, judicial or administrative proceedings when legally authorized, law-enforcement purposes under applicable standards, or to prevent or lessen a serious and imminent threat when permitted by law.

California law may provide additional privacy protections for mental health information. When a more protective state law applies, the more protective requirement will be followed.

Psychotherapy Notes

Psychotherapy notes, if maintained separately from the medical record, receive additional federal protection. Most uses or disclosures of psychotherapy notes require your written authorization unless a specific legal exception applies.

Substance Use Disorder Information

Federal law includes heightened protections for records created or maintained by federally assisted substance use disorder programs subject to 42 CFR Part 2. If this practice creates or receives information that is protected by Part 2, applicable Part 2 requirements will be followed. This statement does not mean that this practice is itself a Part 2 program.

Our Responsibilities

Maintain the privacy and security of protected health information as required by law.

Notify affected individuals when required if a breach compromises the privacy or security of information.

Follow the duties and privacy practices described in the notice currently in effect.

Provide you with a copy of this notice and revise it when material privacy practices change.

Privacy Contact and Complaints

Privacy contact: Jennifer Griffith, LCSW, 949-989-5340, jennifer.griffith.lcsw@gmail.com. You may contact the practice if you have questions or believe your privacy rights have been violated. You may also file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights. You will not be retaliated against for filing a complaint.

Acknowledgment of Receipt

I acknowledge that I received or was offered a copy of this Notice of Privacy Practices.

