# **Frequently Asked Questions**

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GOLDEN CRESCENT-MOMS

# Frequently Asked Questions

## About Program Consent & Release of Information

Release of information and consent forms can sometimes be confusing for both the Navigator and the Participants. Understanding what they are used for and what the participant's rights are is very important in helping decide which form(s) a participant may or may not want to sign.

In the case of the Program, the standard Consent form must be signed before a Participant will be enrolled and before any services or information other than about the Program may be offered.

The Media Consent form is encouraged but is not required. If a Participant does NOT agree to sign the Media Consent form, their chart needs to be starred as having NOT signed the Media Participant Consent Form. If they elect to participate in any public events, this needs to be discussed again. The Program will not use any form of media taken with any Participant who elects not to sign the Media Consent Form.

The following Frequently Asked Questions about Consent forms are written from the perspective of a Participant asking the Questions and the Navigator providing information.

#### What is a release of information form?

A standard Release of Information (ROI) / Consent Form is a form you sign to allow one provider to release information to another provider for yourself or your child(ren). Usually, there is a place on the form to indicate what information can and cannot be shared. For example, you may sign a release of information form allowing your prenatal care provider to share the results of your annual exam with your primary care provider.

#### What is a consent form?

A consent form is a form a doctor or community service provider might ask you to sign to give them permission to: collect information from you, use information you provide, provide a specific service to you, or explain the risks of a certain procedure. You may be asked to sign a consent form for yourself or your child(ren).



#### What does it mean if I sign a release of information or consent form?

Signing a release of information form gives a doctor or service provider permission to share specific information with another provider. The form should include the specific information to be shared. Signing a consent form gives a doctor or service provider permission to do something (a procedure, collect or share information, etc.), and/or indicates you understand the risk(s) involved in a procedure. Your signature on a consent form means you understand what is being asked and any possible risks to you or your child(ren).

#### When (or where) might I be asked to sign a release of information or consent form?

Your doctor or community service provider might ask you to sign one of these forms when you are a new Participant/client, a new service is offered, a new procedure needs to be done, or you ask them to share your information with someone for you.

#### Why would I want to sign a release of information or consent form?

Doctors and other providers usually cannot share your information without your permission. For example, if you change doctors you will need to sign a release of information form for your old doctor to share your records with your new doctor.

#### Do I have to sign a release of information or consent forms?

You do not have to sign a release of information or consent form if you do not want to. However, signing these forms can benefit you. If you don't understand the form, ask what it is for and why it is needed.

#### Can I change my mind after I sign a release of information or consent form?

Yes, you can let the provider know you want to remove or revoke your permission.

#### Can I ask questions?

YES! If you do not understand what information will be shared, who it will be shared with, or why it is needed—ASK these questions. You have every right to know before making a decision.



### Services

#### What services does the home visiting program offer?

Our program provides comprehensive support including prenatal and postpartum care, education on contraception, pregnancy support, infant development, mental health resources, navigation to behavioral health services, and assistance with accessing community resources.

#### What can I expect during a home visit?

During a home visit, a Maternal-Child Health Navigator will assess your needs, provide education and resources, help you navigate healthcare services, and offer support tailored to your specific situation. Each visit is personalized to ensure you receive the care and assistance you need.

#### How often will the Maternal-Child Navigator visit me?

The frequency of visits is flexible and based on your individual needs. Visits can be scheduled weekly, bi-weekly, or monthly, depending on the level of support you require.

#### Is there a cost associated with the home visiting program?

No, our home visiting program is free of charge for eligible participants.



#### Can the Maternal-Child Health Navigator help me with other services, like housing or employment?

Yes, the Maternal-Child Health Navigator can provide referrals and assistance with accessing various social services, including housing, employment programs, and education resources. They will work with you to address any barriers you may face.

#### How can the program support my mental health and well-being?

The program offers access to mental health resources, including counseling and support groups. The Maternal-Child Health Navigators are trained to provide emotional support, and they can help you connect with behavioral health services.

#### Can I involve my family in the home visits?

Absolutely. We encourage the involvement of family members or other support persons in the home visits to ensure a comprehensive support network. This can include partners, parents, or other trusted individuals.

#### What if I need to reschedule a visit?

If you need to reschedule a visit, please contact your assigned Maternal-Child Health Navigator as soon as possible. We understand that plans can change, and we will work with you to find a convenient time for the rescheduled visit.



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Date (M/D/Y):



## Time:

Staff Initials (First Initial/Last Initial):

Participant Name/ID:

Notes:

File Upload:

