



**Rights and Responsibilities of the Individual
Policy and Procedure Manual**

Revised: 09/10/2024

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI. 01.01.01
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Rights of the Individual Served

PURPOSE:

To establish protocols for patient/client rights throughout their encounter with Jones Wellness Center.

POLICY:

1. It is the policy of Jones Wellness Center that clients and family members are to be educated on their rights and responsibilities.
2. Jones Wellness Center upholds the following client rights:
 - a. Individuals served are to be treated in a respectful manner that supports his or her dignity.
 - b. Jones Wellness Center respects the cultural and personal values, beliefs, and preferences of the client.
 - c. Jones Wellness Center respects the individual's right to personal privacy.
 - d. Individuals served have access to and may request amendment to his or her health information and to obtain information on disclosures of their information.
 - e. Jones Wellness Center informs the client of the individual's rights.
 - f. Individuals have the right to be informed of the emergency medical protocols.
 - g. In accordance with Federal and State law and regulation, Individuals have the right to be informed of Jones Wellness Center's rules and regulations. If the individual is disoriented or lacks capacity to understand rights at the time of entry, he or she is informed again when he or she is able to understand.
 - h. Additionally, Jones Wellness Center follows regulations set forth by the State of Texas for Client Rights which includes:
 - You have the right to accept or refuse treatment after receiving this explanation.
 - If you agree to treatment or medication, you have the right to change your mind at any time (unless specifically restricted by law).
 - You have the right to a humane environment that provides reasonable protection from harm and appropriate privacy for your personal needs.
 - You have the right to be free from abuse, neglect, and exploitation.
 - You have the right to be treated with dignity and respect.
 - You have the right to appropriate treatment in the least restrictive setting available that meets your needs.
 - You have the right to be told about the program's rules and regulations before you are admitted, including, without limitation, the rules and policies related to restraints and seclusion. Your legally authorized representative, if any, also has the right to be and shall be notified of the rules and policies related to restraints and seclusion.
 - You have the right to be told before admission; the condition to be treated; the proposed treatment; the risks, benefits, and side effects of all proposed treatment and medication; the probable health and mental health consequences of refusing treatment; other treatments that are available and which ones, if any, might be appropriate for you; and the expected length of stay.
 - You have the right to a treatment plan designed to meet your needs, and you have the right to take part in developing that plan.
 - You have the right to refuse to take part in research without affecting your regular care.
 - You have the right not to receive unnecessary or excessive medication.
 - You have the right to have information about you kept private and to be told about the times when information can be released without your permission.

- You have the right to be told in advance of all estimated charges and any limitation on the length of services of which the facility is aware.
- You have the right to receive an explanation of your treatment or your rights if you have questions while you are in treatment.
- You have the right to make a complaint and receive a fair response from the facility within a reasonable amount of time.
- You have the right to complain directly to the Texas Department of State Health Services at any reasonable time.
- You have the right to get a copy of these rights before you are admitted, including the address and phone number of the Texas Department of State Health Services.
- You have the right to have your rights explained to you in simple terms, in a way you can understand, within 24 hours of being admitted.

PROCEDURE:

1. Upon admission to the facility, clients will be provided a client handbook which outlines their basic client rights and grievance protocol.
 - a. Acceptance of the handbook and orientation to their basic client rights and grievance procedures is to be noted in the progress notes.
2. Individuals who do not speak English or have a physical or other type of disability are to be brought to the attention of the Founder who is responsible to ensure translation services (translated written material, recorded material, etc.)
3. Upon hire, staff is provided an employee handbook which outlines Jones Wellness Center's description of basic client rights and grievance protocol.
 - a. Documentation indicating employees received the handbook and acknowledged awareness of the client's basic human rights and grievance protocol is to be maintained in the personnel file.

CLIENT RIGHTS

1. Jones Wellness Center incorporates basic human rights into all provision of services.
2. Individuals receiving mental health services at our treatment facilities are guaranteed the protection of fundamental human, civil, constitutional, and statutory rights.
 - a. In accordance with State of Texas standards, clients receiving services shall have rights which include, but are not limited to, the following:
3. ***RIGHT TO INDIVIDUAL DIGNITY***
 - a. The individual dignity of the client must be always respected upon all occasions, including any occasion when the client is admitted, retained, or transported.
 - b. Mental health clients who are not accused of a crime or delinquent act may not be detained or incarcerated in jails, detention centers, or training schools of the state, except for purposes of protective custody in strict accordance with this chapter.
 - c. A client may not be deprived of any constitutional right.
 - d. You have the right to be treated with dignity and respect at all times and upon all occasions.
 - e. Free from abuse, financial or other exploitation, retaliation, humiliation, or neglect.
4. ***RIGHT TO NONDISCRIMINATORY SERVICES***
 - a. Service providers may not deny a client access to mental health services solely on the basis of race, gender, disability, ethnicity, age, sexual preference, and human immunodeficiency virus status, prior service departures against medical advice, disability, or number of relapse episodes.
 - i. Service providers may not deny a client who takes medication prescribed by a physician access to mental health services solely on that basis.

- b. Each client in treatment must be afforded the opportunity to participate in the formulation and periodic review of his or her individualized treatment or service plan to the extent of his or her ability to participate.
- c. It is the policy of the state to use the least restrictive and most appropriate services available, based on the needs and the best interests of the client and consistent with optimum care of the client.
- d. Each client must be afforded the opportunity to participate in activities designed to enhance self-image.

5. *RIGHT TO QUALITY SERVICES*

- a. Each client must be delivered services suited to his or her needs, administered skillfully, safely, humanely, with full respect for his or her dignity and personal integrity, and in accordance with all statutory and regulatory requirements.
- b. These services must include the use of methods and techniques to control aggressive client behavior that poses an immediate threat to the client or to other persons.
 - i. Such methods and techniques include the use of restraints, the use of seclusion, the use of time-out, and other behavior management techniques.
 - ii. When authorized, these methods and techniques may be applied only by persons who are employed by service providers and trained in the application and use of these methods and techniques.
 - iii. The department must specify by rule the methods that may be used and the techniques that may be applied by service providers to control aggressive client behavior and must specify by rule the physical facility requirements for seclusion rooms, including dimensions, safety features, methods of observation, and contents.

6. *RIGHT TO COMMUNICATION*

- a. Each client has the right to communicate freely and privately with other people within the limitations imposed by service provider policy.
- b. Because the delivery of services can only be effective in a mental health free environment, close supervision of each client's communications and correspondence is necessary, particularly in the initial stages of treatment, and the service provider must therefore set reasonable rules for telephone, mail, and visitation rights, giving primary consideration to the well-being and safety of clients, staff, and the community.
 - i. It is the duty of the service provider to inform the client and his or her family if the family is involved at the time of admission about the provider's rules relating to communications and correspondence.

7. *RIGHT TO CARE AND CUSTODY OF PERSONAL EFFECTS OF CLIENTS*

- a. Each client has the right to possess clothing and other personal effects.
- b. The service provider may take temporary custody of the client's personal effects only when required for medical or safety reasons, with the reason for taking custody and a list of the personal effects recorded in the client's clinical record.

8. *RIGHT TO EDUCATION OF MINORS*

- a. The service provider shall coordinate with local education agencies to ensure that education and training is provided to each minor client in accordance with other applicable laws and regulations and that parental responsibilities related to such education and training are established within the provisions of such applicable laws and regulations.
- b. Nothing in this chapter may be construed to relieve any local education authority of its obligation under law to provide a free and appropriate education to every child.

9. *RIGHT TO CONFIDENTIALITY OF INDIVIDUAL RECORDS*

- a. The records of service providers which pertain to the identity, diagnosis, and prognosis of and service provision to any individual client are confidential in accordance with this chapter and with applicable federal confidentiality regulations and are exempt from the provisions of s. 611.002 of the State Constitution.
 - i. Such records may not be disclosed without the written consent of the client to whom they pertain except that appropriate disclosure may be made without such consent:
 1. To medical personnel in a medical emergency.
 2. To service provider personnel if such personnel need to know the information in order to carry out duties relating to the provision of services to a client.
 3. To the secretary of the department or the secretary's designee, for purposes of scientific research, in accordance with federal confidentiality regulations, but only upon agreement in writing that the client's name and other identifying information will not be disclosed.
 4. In the course of review of records on service provider premises by persons who are performing an audit or evaluation on behalf of any federal, state, or local government agency, or third-party payor providing financial assistance or reimbursement to the service provider; however, reports produced as a result of such audit or evaluation may not disclose client names or other identifying information and must be in accord with federal confidentiality regulations.
 5. Upon court order based on application showing good cause for disclosure. In determining whether there is good cause for disclosure, the court shall examine whether the public interest and the need for disclosure outweigh the potential injury to the client, to the service provider-client relationship, and to the service provider itself.
 - ii. The restrictions on disclosure and use in this section do not apply to communications from provider personnel to law enforcement officers which:
 1. Are directly related to a client's commission of a crime on the premises of the provider or against provider personnel or to a threat to commit such a crime; and
 2. Are limited to the circumstances of the incident, including the client status of the individual committing or threatening to commit the crime, that individual's name and address, and that individual's last known whereabouts.
 - iii. The restrictions on disclosure and use in this section do not apply to the reporting of incidents of suspected child abuse and neglect to the appropriate state or local authorities as required by law.
 1. However, such restrictions continue to apply to the original mental health client records maintained by the provider, including their disclosure and use for civil or criminal proceedings which may arise out of the report of suspected child abuse and neglect.
 - iv. Any answer to a request for a disclosure of client records which is not permissible under this section or under the appropriate federal regulations must be made in a way that will not affirmatively reveal that an identified individual has been or is being diagnosed or treated for mental health.
 1. The regulations do not restrict disclosure that an identified individual is not and never has been a client.
 - v. Minors:
 1. Since a minor acting alone has the legal capacity to voluntarily apply for and obtain mental health treatment, any written consent for disclosure may be given only by the

- minor client. This restriction includes, but is not limited to, any disclosure of client identifying information to the parent, legal guardian, or custodian of a minor client for the purpose of obtaining financial reimbursement.
2. When the consent of a parent, legal guardian, or custodian is required under this chapter in order for a minor to obtain mental health treatment, any written consent for disclosure must be given by both the minor and the parent, legal guardian, or custodian.
- vi. An order of a court of competent jurisdiction authorizing disclosure and use of confidential information is a unique kind of court order.
 1. Its only purpose is to authorize the disclosure or use of client identifying information which would otherwise be prohibited by this section.
 - a. Such an order does not compel disclosure.
 - b. A subpoena or a similar legal mandate must be issued in order to compel disclosure.
 - c. This mandate may be entered at the same time as, and accompany, an authorizing court order entered under this section.
 - vii. An order authorizing the disclosure of client records may be applied for by any person having a legally recognized interest in the disclosure which is sought.
 1. The application may be filed separately or as part of a pending civil action in which it appears that the client records are needed to provide evidence.
 2. An application must use a fictitious name, such as John Doe or Jane Doe, to refer to any client and may not contain or otherwise disclose any client identifying information unless the client is the applicant or has given a written consent to disclosure or the court has ordered the record of the proceeding sealed from public scrutiny.
 - viii. The client and the person holding the records from whom disclosure is sought must be given adequate notice in a manner which will not disclose client identifying information to other persons, and an opportunity to file a written response to the application, or to appear in person, for the limited purpose of providing evidence on the statutory and regulatory criteria for the issuance of the court order.
 - ix. Any oral argument, review of evidence, or hearing on the application must be held in the judge's chambers or in some manner which ensures that client identifying information is not disclosed to anyone other than a party to the proceeding, the client, or the person holding the record, unless the client requests an open hearing.
 1. The proceedings may include an examination by the judge of the client records referred to in the application.
 - x. A court may authorize the disclosure and use of client records for the purpose of conducting a criminal investigation or prosecution of a client only if the court finds that all the following criteria are met:
 1. The crime involved is extremely serious, such as one which causes or directly threatens loss of life or serious bodily injury, including but not limited to homicide, sexual assault, sexual battery, kidnapping, armed robbery, assault with a deadly weapon, and child abuse and neglect.
 2. There is a reasonable likelihood that the records will disclose information of substantial value in the investigation or prosecution.
 3. Other ways of obtaining the information are not available or would not be effective.

4. The potential injury to the client, to the physician-client relationship and to the ability of the program to provide services to other clients is outweighed by the public interest and the need for disclosure.

10. *RIGHT TO COUNSEL*

- a. Each client must be informed that he or she has the right to be represented by counsel in any involuntary proceeding for assessment, stabilization, or treatment and that he or she, or if the client is a minor his or her parent, legal guardian, or legal custodian, may apply immediately to the court to have an attorney appointed if he or she cannot afford one.

11. *RIGHT TO HABEAS CORPUS*

- a. At any time, and without notice, a client voluntarily retained by a provider, or the client's parent, guardian, custodian, or attorney on behalf of the client, may petition for a writ of habeas corpus to question the cause and legality of such retention and request that the court issue a writ for the client's release.

12. *LIABILITY AND IMMUNITY*

- a. Service provider personnel who violate or abuse any right or privilege of a client under this chapter are liable for damages as determined by law.
- b. All persons acting in good faith, reasonably, and without negligence in connection with the preparation or execution of petitions, applications, certificates, or other documents or the apprehension, detention, discharge, examination, transportation, or treatment of a person under the provisions of this chapter shall be free from all liability, civil or criminal, by reason of such acts.

13. *Additionally:*

- a. You have the right to privacy and security in the treatment environment.
- b. You have the right to be involved in all aspects of your care and services, including participating in the formulation of your individualized treatment plan, review of this plan on a regular basis, and continuity of care.
- c. You have the right to access the most appropriate, least restrictive level of treatment based upon your needs and best interests.
- d. You have the right to participate in activities designed to enhance your self-esteem.
- e. You have the right to quality services suited to your needs, administered skillfully, safely, humanely, and with full respect for your dignity and personal integrity.
- f. You have the right to be informed of the program's rules and expectations for the client's behavior.
- g. You have a right to confidentiality. Your presence in mental health treatment, and the records of your treatment, is protected under 42 CFR, Part 2, Code of Federal Regulations.
- h. You have the right to confidentiality and privacy of your protected healthcare information. Your protected healthcare information is protected under HIPAA.
- i. You have the right to be fully informed of the services available to you, including the cost of those services. You have the right to examine and receive an explanation of your bill.
- j. You have the right to refuse treatment to the extent permitted by law, and to be informed of the consequences of this right.
- k. You have the right to a competent treatment team that strives for the highest standards of ethical practice.
- l. You have the right to file a grievance if you believe that your rights as a client have been violated without any kind of retaliation.
- m. You have the right to contact the local licensing/governing authority if you believe your rights have been violated. Nobody will be discouraged or prevented from doing so.
- n. All our staff acting in good faith, reasonably, and without negligence in connection with the preparation or execution of petitions, application, certificates, or other documents or the

apprehension, detention, discharge, examination, transportation, or treatment of a person under the provisions of this chapter shall be free from all liability, civil or criminal, by reason of such acts.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI. 01.01.03
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Individual Understanding Information

PURPOSE:

To ensure effective communication with all people presenting to Jones Wellness Center in compliance with Title 45 Code of Federal Regulations, Part 80.

POLICY:

The policy of Jones Wellness Center is to ensure meaningful communication with Limited English Proficiency (LEP) patients/clients and their authorized representatives involving their medical conditions and treatment. The policy also provides for communication of information contained in vital documents, including but not limited to, waivers of rights, consent to treatment forms, financial and insurance benefit forms, etc.

PROCEDURE:

1. Jones Wellness Center will take reasonable steps to ensure that persons with LEP have meaningful access and an equal opportunity to participate in our services, activities, programs and other benefits.
2. All interpreter services and other aids needed to comply with this policy shall be provided without cost to the person being served, and patients/clients and their families will be informed of the availability of such assistance at point of facility or program access and is available free of charge.
3. Language assistance will be provided at Jones Wellness Center through the use of the Language Line, a telephonic interpretation service.
 - a. Jones Wellness Center will define the language assistance available to patients and clients and be responsible for ensuring that staff is provided notice of their internal policies and procedures.
 - b. Staff that may have direct contact with LEP individuals will be trained in the use of the Language Line.
4. Jones Wellness Center will conduct a regular review of the language access needs of our population, as well as update and monitor the implementation of an adherence to this policy and procedure as necessary.
5. Obtaining a Qualified Interpreter
 - a. Jones Wellness Center uses a contracted language line service for all interpreting services (at patient's expense). Employees of Jones Wellness Center are not utilized to interpret for patients unless the situation is emergent in nature or the staff member has recognized certification as a medical interpreter.
 - b. For LEP persons requiring interpretive services, all clinical service departments are responsible for arranging for the use of the Language Line depending on the situation.
 - c. The following agencies can provide qualified interpreter services.
 - d. Some LEP persons may prefer or request to use a family member or friend as an interpreter.
 - i. However, family members or friends of the LEP person will not be used as interpreters unless specifically requested by that individual and after the LEP person has understood that an offer of the use of the Language Line at no charge to the person has been made by Jones Wellness Center.
 - ii. Such an offer and the response will be documented in the person's file.
 - iii. If the LEP person chooses to use a family member or friend as an interpreter, issues of competency of interpretation, confidentiality, privacy, and conflict of interest will be considered.
 - iv. If the family member or friend is not competent or appropriate for any of these reasons,

- the Language Line will be provided to the LEP patient.
- e. Children and other clients or patients will not be used to interpreting, to ensure confidentiality of information and accurate communication.
- 6. Providing Written Translations
 - a. Jones Wellness Center has forms on file that are in English.
 - b. Jones Wellness Center will provide translation in other languages, if needed, as well as written notice of availability of translation, free of charge, for LEP individuals.
- 7. Providing Notice to LEP Persons
 - a. Jones Wellness Center will inform LEP patients about the availability of interpreting services, free of charge, by providing written notice in the lobby.
- 8. Monitoring Language Needs and Implementation
 - a. Jones Wellness Center assesses changes in demographics, types of services or other needs that may require reevaluation of this policy and procedure.
 - b. The efficacy of the procedures will be regularly assessed.
 - c. The assessment is inclusive of, but not limited to, mechanisms for securing interpreter services, equipment used for the delivery of language assistance, complaints filed by LEP persons, feedback from patients, staff and community organizations.
 - d. Agencies that receive federal funding **must** provide interpreters according to the law.
 - e. If a client is denied language access services, they may file a complaint with:
 - i. Federal Coordination and Compliance Section – NWB
Civil Rights Division, U.S. Department of Justice
950 Pennsylvania Avenue, N.W. Washington, D.C. 20530
(888) 848-5306 - English and Spanish (Ingles y Español)
(202) 307-2222 (voice)/(202) 307-2678 (TDD)
www.justice.gov/crt/about/cor/complaint.php
 - f. Private institutions:
 - i. If language access services are not provided, and the client is not referred to a more appropriate organization, you may file a grievance with Jones Wellness Center, the State of Texas, or the Joint Commission.
 - ii. The contact information should be posted in a conspicuous area where you find the grievance procedures.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI.01.02.01
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Collaboration on Decisions for Care

PURPOSE:

To establish guidelines for the decision-making process for client care.

POLICY:

1. It is the policy of Jones Wellness Center to involve the client in making decisions about his or her care, treatment, or services.
2. Effective behavioral health care requires the involvement of individuals served, and their families or surrogate decision-makers where necessary.
 - a. An understanding of the care, treatment, or service goals, of how various activities support these goals, and of unexpected outcomes or issues will enhance decision making and assist in preventing or resolving problems in care, treatment, or services.
3. Jones Wellness Center respects the right of the client to refuse care, treatment, or services, in accordance with law and regulation.
4. When an individual refuses care, treatment, or services, Jones Wellness Center fully informs the individual about its responsibility, in accordance with professional standards, to terminate the relationship with the individual upon reasonable notice, or to seek orders for involuntary treatment or other legal alternatives.
5. When a client is unable to make decisions about his or her care, treatment, or services, or chooses to delegate decision making to another, the organization involves the surrogate decision-maker in making these decisions.
6. When a surrogate decision-maker is responsible for making care, treatment, or services decisions, the organization respects the surrogate decision-maker's right to refuse care, treatment, or services on behalf of the client, in accordance with law and regulation.
 - a. The client has the right to involve his or her family in decisions about care, treatment, or services. When there is a surrogate decision-maker, he or she can exercise the right to involve the family on behalf of the client, in accordance with law and regulation.
7. Jones Wellness Center accommodates the right of the client to request the opinion of a consultant.
8. Jones Wellness Center accommodates the right of the client to request an internal review of his or her plan of care, treatment, or services.
9. Jones Wellness Center has an established process for resolving disagreements about therapeutic issues.
10. Jones Wellness Center provides the client or surrogate decision-maker with information about the outcomes of care, treatment, or services that the individual needs in order to participate in current and future behavioral health care decisions.
11. Jones Wellness Center informs the client or surrogate decision-maker about unanticipated events that relate to sentinel events as defined by The Joint Commission.

PROCEDURE:

1. Upon admission to Jones Wellness Center, individuals are assigned a Psychotherapist.
2. The Psychotherapist is responsible for meeting with the client to formulate the initial treatment plan, complete the biopsychosocial and discuss the recommendations for treatment, care and services.
3. It is the responsibility of the Psychotherapist to discuss the inclusion of the individual's significant other in the treatment planning process.
4. A Release of Confidentiality, signed by the client, is required prior to contact with significant others.
5. With the consent of the client:
 - A. The client and the significant others are to be informed of the individual's right to participate in the treatment planning process.

6. Documentation of the individual and/or family (significant other) sessions are to be recorded in the medical record.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI.01.03.01
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Informed Consent

PURPOSE:

To establish guidelines for Jones Wellness Center to ensure individuals have the opportunity to participate fully in decisions about his or her care.

RESPONSIBILITY

It is the responsibility of the Founder to ensure this policy is implemented and disseminated to all clinical staff.

POLICY:

1. It is the policy of Jones Wellness Center to have a written policy on informed consent that is in line with the Informed Consent provided to our clients.
2. Obtaining informed consent presents an opportunity to establish a mutual understanding between the client and the staff about the care, treatment, or services that the individual will receive.
 - a. Informed consent is not merely a signed document.
 - b. It is a process that considers the needs and preferences of the individual and is in compliance with law and regulation.
 - c. Utilizing the informed consent process helps the individual to participate fully in decisions about his or her care, treatment, or services.
3. If an individual refuses to give informed consent and is posing a threat to himself or herself or others, the organization may be permitted, in accordance with law and regulation, to take an alternative course of action, including providing care, treatment, or services without informed consent.
4. If an individual refuses to give informed consent and is not posing a threat to himself or herself or others, they will not admit to their services.
5. Jones Wellness Center requires general consents for:
 - a. Consent to Treatment:
 - i. To inform the individual of the specific care, treatment, and services available.
 - ii. Fees for services and rights and responsibilities towards care.
6. Jones Wellness Center requires informed consent for:
 - a. The Release of Confidential Information, i.e. presence in treatment, sharing of medical records, etc.
 - b. Delegation for Healthcare Directives
 - c. Referral for Services
 - d. Prescribed Medication
 - e. The specific care, treatment, or services provided to each client that require informed consent
 - f. Circumstances that would allow for exceptions to obtaining informed consent, such as situations involving threat of harm to self or others, child abuse, or elder abuse
7. The informed consent document and process includes a discussion about the following:
 - a. The proposed care, treatment, or services for the client.
 - b. The goals and potential benefits and risks of the proposed care, treatment, or services.
 - c. Reasonable alternatives to the individual's proposed care, treatment, or services.
 - i. The discussion encompasses risks and benefits related to the alternatives and the risks related to not receiving the proposed care, treatment, or services.
8. **Circumstances that would allow for exceptions to obtaining Informed Consent:**
 - a. Typically, information shared by an adult to a health care provider is considered to be confidential

- unless the health care provider receives permission to share that information.
 - i. If the person receiving the information is not another health care provider, permission or authorization to share information should be in writing and signed by the patient.
- b. State, tribal, and federal mandatory reporting laws create exceptions to the requirement to maintain patient confidentiality. These mandatory reporting laws include:
 - i. Child abuse reporting
 - ii. Elder/vulnerable adult abuse reporting
 - iii. Infectious disease reporting
 - iv. Injury reporting
 - v. Tarasoff/Duty to Warn if a patient is threatening themselves or others
- c. [Adolescents may be able to obtain confidential care under specific circumstances:](#)
 - i. Pregnancy testing and prenatal care, other than abortion
 - ii. Non-prescription contraceptives such as condoms or over-the-counter emergency contraception
 - iii. STI testing and treatment (for reportable STIs such as Chlamydia, Gonorrhea, HIV, Syphilis)
 - iv. Counseling and treatment for suicide prevention or substance abuse
 - v. Inpatient mental health care, if the minor is age 16 or older
 - vi. Counseling and treatment for suspected abuse or neglect
- d. Disclosures to parents or a guardian may be limited if one is a suspected perpetrator of the assault or abuse, or if disclosure would endanger the child.
- e. Certain types of care can have higher levels of privacy protection:
 - i. Mental health treatment
 - ii. HIV/AIDS treatment

PROCEDURE: SEE SPECIFIC POLICIES AND PROCEDURES:

Admission/Assessment-General Consents

Confidentiality: Release of Confidentiality

Ancillary Services

Medication Services

Notice of Privacy Practices

Notice of Photography/Surveillance (see policy below)

See Policy RI.01.02.01: Collaboration on Decisions for Care regarding when a surrogate decision maker may give informed consent

See informed consent in the EMR for clarification.

Consent to Treatment/Consent to Treatment

POLICY:

It is the policy of Jones Wellness Center to have each client sign a Consent to Treatment/Consent to Treatment. The consent form is to be signed upon admission, prior to the provision of services.

PROCEDURE:

1. Upon admission to Jones Wellness Center all clients are to sign the Consent to Treatment form.
2. The form is maintained in the electronic medical record and contains the following information:
 - a. Description of services to be provided;
 - b. Assignment of primary psychotherapist;
 - c. Acknowledgement of responsibility to develop therapeutic goals;
 - d. Acknowledgement of responsibility to participate in treatment;
 - e. Acknowledgement of responsibility to abide by rules and regulations;
 - f. Acknowledgement of confidentiality requirements;

- g. Acknowledgement of responsibility to read the client handbook; and
 - h. Acknowledgement of responsibility for financial costs.
3. The Consent to Treatment is included in the EMR.

Consent for Release of Information

POLICY:

It is the policy of Jones Wellness Center to have each client sign a Consent to Release Information. The Consent form shall include information required in 42 Code of Federal Regulations, Part 2. The form may only be signed if the form is complete.

PROCEDURE:

Upon Admission:

1. Upon admission to Jones Wellness Center clients will be requested to identify individuals/organizations to which they wish Jones Wellness Center to acknowledge their affiliation or share information.
2. A Consent to Release Information form is to be completed for each identified individual or organization.
3. Signed releases are to be maintained in the electronic medical record (EMR).

Throughout Services:

1. Throughout the treatment episode, individuals may require services which are not provided by Jones Wellness Center.
2. Jones Wellness Center will assist the clients to access recommended services through a case management approach.
3. A Release of Confidentiality is completed prior to contact and acknowledgement of the clients' affiliation with Jones Wellness Center.
4. The Release for Confidential Information is included in the EMR.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI. 01.03.01, EP3
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Consent for Recordings

PURPOSE:

To establish written guidelines for the use of recordings, films, or other images of the client for purposes other than his or her care.

RESPONSIBILITY:

It is the responsibility of the Founder to ensure this policy is implemented. It is the responsibility of the Founder to ensure the policy is disseminated throughout Jones Wellness Center and consistently implemented for each client.

POLICY:

1. It is the policy of Jones Wellness Center that no sessions (including telehealth) are recorded.

Photographic Images of clients:

1. It is the policy of Jones Wellness Center that we will not utilize client photos, videos, or audio recording for promotional or any other use outside of patient identification purposes.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI. 01.03.05
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Research, Investigations, and Clinical Trials

PURPOSE:

To establish guidelines for Jones Wellness Center's participation in research, investigations, and clinical trials

RESPONSIBILITY:

It is the responsibility of the Founder to ensure this policy is implemented. It is the responsibility of the Founder to ensure the policy is disseminated throughout Jones Wellness Center and consistently implemented for each client.

POLICY:

1. It is the policy of Jones Wellness Center not to engage in research, investigations and clinical trials.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI. 01.04.01
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Staff Information: Assignment of Psychotherapist

PURPOSE:

To establish a process to ensure Jones Wellness Center respects the right of the client to receive information about the staff responsible for his or her care, treatment, or services.

RESPONSIBILITY:

It is the responsibility of the Founder to ensure this policy is implemented. It is the responsibility of the Founder to ensure the policy is disseminated throughout Jones Wellness Center and consistently implemented for each client.

POLICY:

1. It is the policy of Jones Wellness Center to ensure Jones Wellness Center respects the right of the client to receive information about the staff responsible for his or her care, treatment, or services.
2. A Psychotherapist is assigned to each individual admitted for services.

PROCEDURE:

1. Upon admission, each individual admitted for services is assigned a Psychotherapist.
 - a. The client is provided with the Psychotherapist's name, or the person who will be primarily responsible for their care, treatment, and services.
 - b. Additionally, the client is provided with the names and titles of the people who are involved in their treatment plan and services.
2. The assignment of the Psychotherapist is documented on the Treatment Plan.
3. The Treatment Plan is reviewed and acknowledged by the client signature.
4. The Treatment Plan is maintained in the EMR and a copy is provided to the client upon request.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI. 01.06.03
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Free From Exploitation

PURPOSE:

To establish policies and procedures promoting the rights of persons served.

RESPONSIBILITY:

1. It is the responsibility of the Founder to ensure this policy is implemented.
 - a. It is the responsibility of the Founder to ensure the policy is disseminated throughout Jones Wellness Center and consistently implemented for each client.
2. It is the responsibility of all staff to protect each client from potential abuse, neglect, and exploitation.

POLICY:

1. It is the policy of Jones Wellness Center to ensure each client is protected from abuse, financial exploitation, retaliation, humiliation and neglect.
2. Sexual abuse or harassment may include any gestures, verbal or physical, that reference sexual acts or sexually or objectively the individual sexually.
3. Fiduciary abuse refers to any exploitation of the persons served or taking advantage of the provider relationship with the person served.

PROCEDURE:

1. At no time are clients abused or neglected while under the care and treatment of Jones Wellness Center.
2. Upon admission to Jones Wellness Center, clients are provided with a copy of their rights as clients.
3. Staff are educated in all areas of Client Rights, Abuse/Neglect/Trauma/Exploitation Awareness and Reporting, as well as Incident Reporting.
4. Abuse is considered:
 - a. Physical punishment or without holding food or water is not permitted. Clients may be given consequences as well as rewards as part of their treatment program; however, consequences will not be abusive.
 - b. Clients will not be punished in any way for exercising any of their rights including freedom of speech and freedom to refuse treatment.
 - c. Clients witnessing a client being abused are expected to report such abuse to the Founder immediately.
 - d. Clients will not be financially exploited: Only appropriate and necessary charges will be applied.
 - e. Examples of abuse or neglect may include physical roughness, verbal threats, harassment, humiliation, unnecessary or excessive restriction, hazardous conditions or inadequate care.
 - f. Clients are entitled to access the phone at any time for reporting abuse. They are not to be subjected to retaliation for reporting suspected abuse or filing a grievance with reasonable cause.
5. Abuse may be reported to:
 - a. State Agency: Contact information can be found where important documents are posted for clients and staff.
6. A thorough investigation of all reported abuse will be immediately conducted.
7. An incident report will be completed on each incident.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI 01.06.03
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: ABUSE INVESTIGATION

PURPOSE:

To ensure the safety and wellbeing of the clients and staff by following State of Texas and the Joint Commission guidelines on client rights and the reporting of abuse, neglect, trauma, and exploitation.

RESPONSIBILITY:

It is the responsibility of the Founder to ensure this policy is implemented. It is the responsibility of the Founder to ensure the policy is disseminated throughout Jones Wellness Center and consistently implemented for each client.

POLICY:

1. It is the policy of Jones Wellness Center to report alleged or suspected abuse, neglect or exploitation of a patient if abuse, neglect, or exploitation is alleged or suspected to have occurred before the patient was admitted or while the patient is not on the premises and not receiving services from Jones Wellness Center's facility's employee or personnel member.
2. The mandated reporter shall report the alleged or suspected abuse, neglect, or exploitation of the patient and shall inform the Founder about the report.

PROCEDURE:

1. It is the responsibility of the Founder to ensure the State of Texas Department of Social and Health Services (DSHS) (1-800-252-5400) is notified of suspected abuse, neglect, etc.
2. The Founder is to be immediately notified of any incident which results in a report to the DSHS.
3. Staff on duty are to immediately develop an internal incident report.
4. The Founder is to review the internal incident report and report to the Local Law Enforcement, County Sheriff's Department and the State of Texas Health and Human Services, if applicable based on the incident.
5. The report is to include:
 - a. Agency's Name, address, license number;
 - b. Name of Founder
 - c. The client's name and date of birth;
 - d. Date and time of occurrence;
 - e. Description of incident;
 - i. The names and addresses of the adult and any persons having control or custody of the adult, if known.
 - ii. The adult's age and the nature and extent of the client's vulnerability.
 - iii. The nature and extent of the client's injuries or physical neglect or of the exploitation of the client.
 - iv. Any other information that the person reporting believes might be helpful in establishing the cause of the client's injuries or physical neglect or of the exploitation of the adult's property.
 - f. Actions taken by staff; and
 - g. Notification of emergency contact.
6. Report is to be made to the DHS and when applicable.
7. Incident is to be logged onto Jones Wellness Center's Incident Report Log and included in Jones Wellness Center's quality management activities.
8. Monthly, quarterly and annual analysis of incident reports are to be developed and included as part of the performance improvement activities.

ABUSE REPORTING

PURPOSE:

To ensure the safety and wellbeing of the clients served.

RESPONSIBILITY:

It is the responsibility of the Founder to ensure this policy is implemented. It is the responsibility of the Founder to ensure the policy is disseminated throughout Jones Wellness Center and consistently implemented for each client.

POLICY:

1. It is the policy of Jones Wellness Center that when a founder has a reasonable basis, to believe abuse, neglect, or exploitation has occurred on the premises or while a client is receiving services from facility's employee or personnel member, the Founder shall:
 - a. Conduct an investigation and if applicable, take immediate action to stop the suspected abuse, neglect, or exploitation.
 - b. Report the suspected abuse, neglect, or exploitation of the client according to state statute.
 - c. Document:
 - i. The suspected abuse, neglect, or exploitation; and
 - ii. Any action taken according to the perceived incident.
 - d. Maintain the documentation for at least 12 months after the date of the report.
 - e. Initiate an investigation of the suspected abuse, neglect, or exploitation and document the following information within five working days after the report:
 - i. The dates, times, and description of the suspected abuse, neglect, or exploitation;
 - ii. A description of any injury to the client related to the suspected abuse or neglect and any change to the client's physical, cognitive, functional, or emotional condition;
 - iii. The names of witnesses to the suspected abuse, neglect, or exploitation; and
 - iv. The actions taken by the administrator to prevent the suspected abuse, neglect, or exploitation from occurring in the future.
 - f. Maintain a copy of the documented information and any other information obtained during the investigation for at least 12 months after the date the investigation was initiated.

PROCEDURE:

1. It is the responsibility of the Founder to ensure the DSHS, local law enforcement and the Texas Health and Human Services is notified of suspected abuse, neglect, etc.
2. The Founder is to be immediately notified of any incident which results in a report to the Texas Health and Human Services, local law enforcement and the DSHS.
3. Staff on duty are to immediately develop an internal incident report.
4. The Founder is to review the internal incident report and report to the DSHS.
5. The report is to include:
 - a. Agency's name, address, and license number;
 - b. Name of Founder;
 - c. The clients' name and date of birth;
 - d. Date and time of occurrence;
 - e. Description of incident;
 - i. The dates, times, and description of the suspected abuse, neglect, or exploitation;
 - ii. A description of any injury to the clients related to the suspected abuse or neglect and any change to the client's physical, cognitive, functional, or emotional condition;
 - iii. The names of witnesses to the suspected abuse, neglect, or exploitation;
 - iv. The actions taken by the Founder to prevent the suspected abuse, neglect, or exploitation from occurring in the future;

- v. Any action taken according to the perceived incident; and
 - vi. Notification of emergency contact.
- 6. Make report to:
 - a. **State of Texas – Child Protective Services (DSHS) -1-800-252-5400 or [online](https://www.txabusehotline.org/Login/Default.aspx) at <https://www.txabusehotline.org/Login/Default.aspx>**
- 7. Maintain the documentation for at least 12 months after the date of the report.
- 8. Incident is to be logged onto Jones Wellness Center's incident report log and included in Jones Wellness Center's quality management activities.
- 9. Monthly, quarterly and annual analysis of incident reports are to be developed and included as part of the performance improvement activities.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI. 01.06.05
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: ENVIRONMENT OF DIGNITY AND POSITIVE SELF-IMAGE

PURPOSE:

To establish guidelines for creating an environment which preserves dignity and contributes to the positive self-image of those served.

RESPONSIBILITY:

It is the responsibility of the Founder to ensure this policy is implemented. It is the responsibility of the Founder to ensure the policy is disseminated throughout Jones Wellness Center and consistently implemented for each client.

POLICY:

1. It is the policy of Jones Wellness Center to ensure the environment preserves dignity and contributes to the positive self-image of those served.
2. Jones Wellness Center ensures the environment minimizes distractions that interfere with therapeutic activities.
3. All the facilities promote an environment that promotes awareness of day, time and season.

PROCEDURE:

1. It is the responsibility of the operations department to ensure the facilities promote an environment which preserves dignity and contributes to the positive self-image of those served.
2. Facilities are to be acquired and maintained in accordance with all applicable regulatory requirements with routine inspections and maintenance.
3. Facilities have designated, confidential areas for therapeutic services.
4. All facilities are equipped with natural lighting and individuals served have access to the outdoors when the weather permits.
5. Wall clocks and calendars are provided throughout the living areas.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI 01.06.07
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Exercise Citizenship Rights

PURPOSE:

To establish protocols to ensure individuals served with citizenship privileges to exercise these privileges, including their voting privileges.

POLICY:

It is the policy of Jones Wellness Center to ensure individuals served with citizenship privileges to exercise these privileges, including their voting privileges.

RESPONSIBILITY:

It is the responsibility of the Founder to ensure this policy is implemented. It is the responsibility of the Founder to ensure the policy is disseminated throughout Jones Wellness Center and consistently implemented for each client.

PROCEDURE:

1. Upon admission individuals are assigned a Psychotherapist who are responsible for their care and coordination of services.
2. Individuals who would like to access their citizenship privileges, i.e. voting, application for food stamps, etc. are to schedule an appointment with their psychotherapist to arrange supervision and transportation.
3. Requests and facilitation of appointment in the community are to be documented in the EMR.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI. 01.07.01
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Grievance Policy: Complaints

PURPOSE:

To ensure clients are afforded their basic human rights.

RESPONSIBILITY:

It is the responsibility of the Founder to ensure this policy is implemented. It is the responsibility of the Founder to ensure the policy is disseminated throughout Jones Wellness Center and consistently implemented for each client.

POLICY:

1. It is the policy of Jones Wellness Center to ensure clients rights are conspicuously posted on the premises in each facility and that at the time of admission, a client or the clients ' representative receives a written copy of their clients rights.
2. A copy of client's rights is posted on the clients' bulletin at the entry of the facility and included in the client's handbook.
3. Clients rights include but are not limited to the following:
 - a. All clients are to be treated with dignity, respect, and consideration.
 - b. A client is not subjected to:
 - i. Abuse;
 - ii. Neglect;
 - iii. Exploitation;
 - iv. Coercion;
 - v. Manipulation;
 - vi. Sexual abuse;
 - vii. Sexual assault;
 - viii. Seclusion;
 - ix. Restraint;
 - x. Retaliation for submitting a complaint to the Texas Health and Human Services or another entity;
 - xi. Misappropriation of personal and private property by the behavioral health inpatient facility's personnel members, employees, volunteers, or students;
 - xii. Discharge or transfer, or threat of discharge or transfer, for reasons unrelated to the client's treatment needs, except as established in a fee agreement signed by the client or the client's representative; or
 - xiii. Treatment that involves the denial of: food, the opportunity to sleep, or the opportunity to use the toilet.
 - c. Is allowed to:
 - i. Associate with individuals of the client's choice;
 - ii. Receive visitors;
 - iii. Have privacy in correspondence, communication, visitation, financial affairs, and personal hygiene; and
 - iv. Unless restricted by a court order, send and receive uncensored and unopened mail.
 - d. A client or the client's representative:
 - i. Except in an emergency, either consents to or refuses treatment.
 - ii. May refuse or withdraw consent for treatment before treatment is initiated, unless the treatment is ordered by a court according to Texas Statutes, is necessary to save the client's life or physical health; or is provided according to law.

- iii. Except in an emergency, clients are informed of proposed treatment alternatives, associated risks, and possible complications.
- iv. Is informed of the following:
 - 1. Jones Wellness Center's policy on health care directives, and
 - 2. The client complaint process.
- v. Except as otherwise permitted by law, provides written consent to the release of information in the client's:
 - 1. Medical record or
 - 2. Financial records

PROCEDURE:

- 1. It is the responsibility of the Founder or designee to ensure a poster with the following is posted in conspicuous areas throughout the facility or in a main area where all posting are shared.
 - a. The contact information for all agencies will be available and current and will include email, phone, and mailing address when applicable.
- 2. Upon admission to the facility, clients will be provided a client handbook which outlines their basic client rights and grievance protocol. Acceptance of the handbook and orientation to their basic client rights and grievance procedures is to be noted in the progress notes.
 - a. If and when appropriate, the grievance and complaint procedures will also be shared with the client's advocate, guardian, or family member(s).
- 3. Upon hire, staff are provided Jones Wellness Center's client rights and grievance protocols. Documentation indicating employees received this information will be acknowledged and documented. Additionally, clients will receive training on the 'why' behind the need for client rights. This will be documented.
- 4. Grievances are to be tracked and incorporated into the continuous quality management protocol.
- 5. Grievance Protocol:
 - a. Grievance forms are maintained in the lobby and grievance/compliant/suggestion box is available in the lobby.
 - b. Completed grievance forms are to be placed in a grievance/compliant/suggestion box.
 - c. Clients are notified that their complaint has been received.
 - d. The Founder is to review the grievance within 3 days and provide a written notification of the decision to the appellant.
 - e. If the grievance is not resolved internally, the individual may contact Texas Health and Human Services and/or Joint Commission. The Founder is to log and track the grievance until resolved or concluded by actions of Jones Wellness Center's governing body.
 - f. A copy of the grievance is submitted to the Founder for inclusion in Jones Wellness Center's quality assurance activities. The grievances are logged, tracked and analyzed for trends at a minimum of every quarter.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RL01.07.03
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Protective and Advocacy Services-Client Advocate

PURPOSE:

To establish guidelines to ensure all individuals served by Jones Wellness Center have a personal advocate if the need becomes appropriate.

RESPONSIBILITY:

It is the responsibility of the Founder to implement this policy and procedure. It is the responsibility of each Founder to disseminate this information to employees under their direction.

POLICY:

It is the policy of Jones Wellness Center to assist in the securing of a personal advocate for any client served by Jones Wellness Center should the need for one become necessary. Additionally, clients will be provided with resources.

PROCEDURE:

1. If a client feels that they are unable to make decisions for themselves in their own best interests, outside of the therapeutic decisions, they may approach their primary psychotherapist and discuss the need for assistance; level of care requires assessment for continued stay.
2. When a staff member has knowledge or reasonable cause to suspect that a client may no longer be able to look after their own interests, either personal or financial, they will report their findings to the Founder for additional investigation.
3. Upon further consultation with the client the findings will be shared with the Founder and a plan of action outlined.
4. If it is felt by the Founder, after further assessment of the client, that the patient is not competent to make the decisions necessary for his/her own financial and personal wellbeing s/he will instruct the Founder to contact the 'guardian ad litem' office for assistance.
5. The appointed patient advocate, guardian ad litem, may be responsible for decisions regarding financial expenditures, housing arrangements, legal issues, and participate in treatment planning on behalf of the client in the absence of an agreed upon family member.
6. In the event a client needs an advocate while in treatment, the patient will be connected with or referred to a patient advocate.
 - a. Clients will be informed of this at the time of admission.
7. Clients will be provided with an advocacy list of local and community resources in their area and will receive assistance from the psychotherapist to be put in touch with or enrolled in those services.
8. If it is found that there may be a need for a client to obtain guardianship services, the Founder will oversee the review process independent of considerations used in their treatment care planning.
 - a. If the Founder is the Psychotherapist of the client, Jones Wellness Center will use a third party to conduct the service review process.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI.01.07.07
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Clients Working in Treatment

PURPOSE:

The purpose of this policy is to not have any client work for Jones Wellness Center while in treatment.

RESPONSIBILITY:

It is the responsibility of the Founder to implement this policy and procedure. It is the responsibility of the Founder to disseminate this information to employees under his/her direction.

POLICY:

1. It is the policy of Jones Wellness Center to not have clients work for the facility while in treatment under any circumstances. If in any such event this did occur then the work would be voluntary, justified in the treatment plan, and all wages, if any, would be in accordance with applicable wage and disability laws and regulations.

TITLE: RIGHTS AND RESPONSIBILITIES OF THE INDIVIDUAL	REFERENCE: RI.02.01.01
REVIEW AND APPROVAL: 09/10/2024	SUBJECT: Patient Responsibilities

PURPOSE:

To establish protocols to ensure the individuals served are informed about his or her responsibilities related to his or her care, treatment, or services.

RESPONSIBILITY:

It is the responsibility of the Founder to ensure this policy is implemented. It is the responsibility of the Founder to ensure the policy is disseminated throughout Jones Wellness Center and consistently implemented for each client.

POLICY:

1. It is the policy of Jones Wellness Center to ensure the individuals served are informed about his or her responsibilities related to his or her care, treatment, or services.
2. The quality and safety of care, treatment, or services is enhanced when individuals served are partners in the behavioral health care process. In addition, organizations are entitled to reasonable and responsible behavior on the part of individuals (and where necessary, their families).
3. The topics that are discussed may include the following:
 - a. Providing information about present complaints, past and current functioning, hospitalizations, medications, and other matters related to their behavioral and physical health.
 - b. Sharing expectations of and satisfaction with Jones Wellness Center.
 - c. Asking questions when they do not understand their care, treatment, or services or what they are expected to do.
 - d. Following instructions for their plan of care, treatment, or services, and expressing concerns about their ability to follow the proposed plan of care, treatment, or services.
 - e. Accepting consequences for the outcomes of care, treatment, or services if they do not follow the planned care, treatment, or services.
 - f. Following Jones Wellness Center's policies and procedures.
 - g. Showing respect and consideration of Jones Wellness Center's staff and property, as well as other individuals and their property.
 - h. Meeting financial commitments

PROCEDURE:

1. Upon admission to Jones Wellness Center, individuals are provided the acknowledgments, consents, and the client handbook that contain rules and regulations which outline the following:
 - a. Grievance protocol
 - b. Rules and regulations
 - c. Responsibility to participate in treatment
 - d. Consent for Treatment: Documents the fee for service
2. Written acknowledgement from the patient that responsibilities were explained is maintained in their client record.
3. Jones Wellness Center's Grievance Policy is posted on the bulletin board.
4. Upon discharge, individuals are requested to complete a satisfaction survey to provide feedback on Jones Wellness Center's provision of services.