

Outpatient Behavioral Health Services



Over 30 years of *People Helping People*

Douglas County CSB

CLIENT HANDBOOK

Revised Date: April 2019



WELCOME

Douglas County Community Behavioral Health Center is your local community mental health agency, designated by the Department of Behavioral Health and Developmental Disabilities (DBHDD) to serve community members of the greater Region 1 and Douglas County.

If you are reading this, you most likely have accessed our services to meet the needs of a family member, a friend and/or yourself. Someone new asking for help often has trouble determining what help they need, how it will be paid for and what services are available to them. It can be a scary experience to even make that first phone call. I commend you for making that phone call or for coming in to seek help. Douglas County Community Behavioral Health Center is committed to providing you with the support you need, while being sensitive to the variety of backgrounds and cultural differences among us.

When someone requests help, they often know what the problem is, but are unclear as to how to resolve it. Once you come into the Douglas County Community Behavioral Health Center for care, you will be assigned a primary care manager. The care manager is there to deliver care, coordinate needed services at the agency, and assist you with any other needs you may have. It's as easy as calling our local telephone number to get assistance.

I hope your experience with us reduces any barriers that you may have and allows you to get care in a way that is helpful to you and your loved ones.

Sincerely,

MonRaye S. Lightford
Director of Operations

This client handbook contains brief descriptions of the treatment planning opportunities in the various programs/services offered by Douglas County Community Behavioral Health Center.

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The Douglas County Community Behavioral Health Center adheres to the Civil Rights Act of 1964. Our eligibility criteria for acceptance and participation in programs are the same for everyone without regard to race, color, national origin, age, gender, sexual orientation or disability.

NOTICE OF PRIVACY PRACTICES

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.

If you have any questions about this notice, please contact our Privacy Officer at (770) 949-8082.

Who Will Follow This Notice

This notice describes our practices and that of:

- Any health care professional authorized to enter information into your health record.
- All divisions and programs of the Agency.
- Any volunteer we allow to help you while you are receiving services from the Agency.
- All employees, staff and other personnel.
- All Agency entities, sites and locations follow the terms of this notice. Staff members at these entities, sites and locations may share health information with each other for treatment, payment or operations purposes as described in this notice.

OUR PLEDGE REGARDING HEALTH INFORMATION

We understand that health information about you and your health is personal. We are committed to protecting your privacy and health information about you. We create a record of the care and services you receive at the Agency. We need this record to provide you with quality care and to comply with certain legal requirements. This notice applies to all of the records of your care generated by the Agency, whether made by Agency personnel or your personal doctor. Your personal doctor may have different policies or notices regarding the doctor's use and disclosure of your health information created in the doctor's office or clinic.

This notice will tell you about the ways in which we may use and disclose health information about you. We also describe your rights and certain obligations we have regarding the use and disclosure of health information.

We are required by law to:

- Make sure that health information that identifies you is kept private;
- Give you this notice of our legal duties and privacy practices with respect to health information about you;
- Follow the terms of the notice that is currently in effect;
- Notify you following a breach of unsecured protected health information; and
- Comply with any state law that is more stringent or provides you greater rights than this Notice.

HOW WE MAY USE AND DISCLOSE HEALTH INFORMATION ABOUT YOU

The following categories describe different ways that we use and disclose health information. For each category of uses or disclosures we will explain what we mean and try to give some examples. Not every use or disclosure in a category will be listed.

For Treatment: We may use or disclose health information about you to provide you with treatment or services. This includes the potential sharing of information about you to doctors, nurses, clinicians, case managers, interns or other Agency personnel, or to people outside of the Agency who are involved in your care. For example, a clinician might be treating you for a mental health problem and need to talk with one of our psychiatrists, another clinician, who has specialized training in a particular area of care. We may also disclose information about you to people outside the Agency who are involved in your health care.

Electronic Exchange of Your Health Information: In some instances, we may transfer health information about you electronically to other health care providers who are providing you treatment or to the insurance plan providing payment for your treatment. Your health information may also be made available through the Georgia Health Information Exchange (“GHIE”). The VHIE is a health information network operated by VITL, Inc. and your treating health care providers may only access your health information through the VHIE if you have provided specific written consent for their access, unless you are in need of emergency treatment. For information about the VHIE, see www.vitl.net.”

For Payment: We may use and disclose health information about you so that the treatment and services you receive at the Agency may be approved by, billed to, and payment collected from a third party such as an insurance company. For example, we may need to give your health plan information about counseling you received at the Agency so your health plan will pay us or reimburse you for a counseling session. We may also tell your health plan about a treatment you are going to receive to obtain prior approval or to determine whether your plan will cover the service / treatment.

For Health Care Operations: We may use and disclose health information about you for Agency operations. These uses and disclosures are necessary to run the Agency and make sure that all individuals receiving services from us receive quality care. For example, we may use health information to review our treatment and services and to evaluate the performance of our staff in serving you. We may also combine health information about many consumers to decide what additional services we should offer, what services are not needed, and whether certain new treatments are effective. We may also disclose information to doctors, nurses, clinicians, case managers, interns and other Agency personnel for review and learning purposes.

We may also combine the health information we have with health information from other mental health agencies to compare how we are doing and see where we can make improvements in the services we offer. We will remove information that identifies you from this set of health information so others may use it to study health care and health care delivery without learning who the specific consumers are.

Douglas County Community Behavioral Health Center is a Georgia designated Community Mental Health Agency and is obligated under our contracts with various departments within the Georgia Agency of Human Services to provide certain services. As a result, these Departments may access health information related to these contracted services for the purpose of obtaining treatment for clients, making payment or for its health care operations. Douglas County Community Behavioral Health Center contracts and participates in one or more Accountable Care Organizations (ACO) which assists it in evaluating and coordinating care to patients.

Appointment Reminders: We may use and disclose information to contact you as a reminder that you have an appointment.

Alternative Treatment and Benefits and Services: We may use and disclose information about you in order to obtain and recommend to you other treatment options and available services as well as other health-related benefits or services.

Fundraising Activities: Should the need arise where information about you or where your participation is desired for the Agency's fundraising activities, the Agency would obtain your authorization. No information would be released for this purpose without your authorization

Research: Under extremely limited circumstances, we may use and disclose health information for research purposes. For example, a research project may involve comparing the health and recovery of all consumers who received one medication to those who received another, for the same condition. All research projects are subject to a special approval process. This process evaluates a proposed re- search project and its use of health information, trying to balance the research needs with consumer's need for privacy of their health information. Before we use or disclose health information for re- search, the project will have been approved through this research approval process. We may, however, disclose health information about you to people preparing to conduct a research project; for example, to help them look for consumers with specific health needs, so long as the health information they review does not leave the Agency. We will always ask for your specific permission if the researcher will have access to your name, address or other information that reveals who you are, or will be involved in your care at the Agency.

As Required by Law: We will disclose health information about you when required to do so by federal, state or local law. In Vermont, this would include: victims of child abuse; the abuse, neglect or exploitation of vulnerable adults; or where a child under the age of sixteen is a victim of a crime; and firearm-related injuries. Under certain circumstances, the Departments within the Georgia Agency of Human Services who we contract with are mandated to access health information in order to carry out their responsibilities. We are required to disclose your health information to you and to anyone you request by written authorization to receive it.

To Avert a Serious and Imminent Threat to Health or Safety: We may use and disclose health information about you when necessary to prevent a serious and imminent threat to your health and safety or a serious risk of danger to an identifiable person or group of persons. Any disclosure, how- ever, would only be to someone reasonably believed to be able to help prevent the threat.

SPECIAL SITUATIONS

Military and Veterans: If you are a member of the armed forces, we may release health information about you as required by military command authorities.

Workers' Compensation: We may release health information about you as authorized for workers' compensation or similar programs as authorized by Georgia law. These programs provide benefits for work-related injuries or illnesses.

Public Health Risks: We may disclose health information about you for public health activities.

These activities generally include the following:

- To prevent or control disease, injury or disability;
- To report deaths;
- To report child abuse or neglect;
- To report abuse, neglect or exploitation of vulnerable adults; any suspicion of abuse, neglect, or exploitation of the elderly (age 60 or older), or a disabled adult with a diagnosed substance use or mental impairment, must be reported;
- To report reactions to medications or problems with products;
- To notify individuals of recalls of products they may be using;
- To notify an individual who may have been exposed to a disease or may be at risk for contracting or spreading a communicable disease or condition

Health Oversight Activities: We may disclose health information to a health oversight agency, such as the Georgia Agency of Human Services Departments who we contract with, for activities authorized by law. These oversight activities include, but are not limited to, audits, investigations, inspections, and licensure. These activities are necessary for the government to monitor the health care system, government programs, and compliance with civil rights laws. We may disclose health information about you without your permission to the Secretary of the U.S. Department of Health and Human Services and/or Office of Civil Rights when they are conducting a compliance review, investigation or enforcement action or for a mandatory report of a health information breach.

Law Enforcement: We may disclose your health information to law enforcement officials as required by law or to comply with a court order or search warrant. We may also disclose limited information to law enforcement officials to report a crime committed on our premises or for identifying a missing person or a suspect to assist in a criminal investigation.

Legal Proceedings and Disputes: If you are involved in a lawsuit or a dispute, we may disclose health information about you in response to a court or administrative order.

Public Health Officials and Funeral Home Directors: We may release information to a coroner or medical examiner. This may be necessary, for example, to identify a deceased person or determine the cause of death. We may also release health information to funeral directors thereby permitting them to carry out their duties.

Individuals in Custody: If you are an inmate of a correctional institution or under the custody of a law enforcement official, we may release health information about you to the correctional institution or law enforcement official pertaining to care provided while you are in custody. This release would be necessary (1) for the institution to provide you with health care; (2) to protect your health and safety or the health and safety of others; or (3) for the safety and security of the correctional institution.

USES OF HEALTH INFORMATION REQUIRING WRITTEN AUTHORIZATION

Other uses and disclosures of health information not covered by this notice or the laws that apply to us will be made only with your written authorization. Examples of this may include disclosures to lawyers, employers, the Georgia Office of Disability Determination Services or others who you know, but who are not involved in your care. Additionally, uses and disclosures of protected health

information for our fundraising activities, marketing purposes, and disclosures that constitute a sale of protected health information require authorization. Also, Psychotherapy notes maintained by your treating provider can only be disclosed with your written authorization. If you provide us permission to use or disclose health information about you, you may revoke that permission, in writing, at any time. If you revoke your permission, we will no longer use or disclose health information about you for the reasons covered by your written authorization. You understand that we are unable to take back any disclosures we have already made with your permission, and that we are required to retain our records of the services that we provided to you.

Community Health Teams / Community Care Collaborative: These teams were created under the Georgia Blueprint for Health and are designed to create alliances between healthcare providers, local and state agencies and community support organizations who are committed to improving quality of life through coordination of services. These services may be financial, substance use, emotional or educational in nature. Your treating health care providers may only share your health information with a CHT / CCC if you have provided specific written consent for sharing.

YOUR RIGHTS REGARDING INFORMATION ABOUT YOU

Any assistance (substance use, communicative, etc.) you need to exercise your rights will be provided to you by the Agency.

You have the following rights regarding information we maintain about you:

Right to Review and Copy: You have the right to review and copy health information that may be used to make decisions about your care. This may include both health and billing records. We must respond to your request within thirty days of our receipt of your request unless we notify you in writing during this period of reasons that delay our response. If so, we may take up to an additional thirty days or a total of sixty days from our receipt of your request to respond to it.

To review and copy health information that may be used to make decisions about you, you must submit your request in writing to our Records Department. If you request a copy of the information, we may charge a reasonable, cost-based fee for copying, mailing, or supplies associated with your request. If you seek an electronic copy in a specific form or format of any portion of your health record, and the Agency is unable to readily produce the copy in that form or format, we will work with you to provide an alternative form or format for the electronic copy.

We may deny or limit access to your request to inspect and copy only in certain very limited circumstances. Should you be denied or provided only limited access to your health information because it was determined that permitting you access might endanger or substantially harm you or another person, you may request that the decision be reviewed. The Agency will choose a different health care professional to review your request and the denial. The person conducting the review will not be the person who denied your request. We will comply with the outcome of the review.

Right to Amend: If you feel that health information we have about you is incorrect or incomplete, you may ask us to amend the information. You have the right to request an amendment for as long as the information is kept by or for the Agency.

To request an amendment, your request must be made in writing and submitted to our Records Department. In addition, you must provide a reason that supports your request.

We may deny your request for an amendment if it is not in writing or does not include a reason to support that request. In addition, we may deny your request if you ask us to amend information that:

- Was not created by us, unless the person or entity that created the information is no longer available to make the amendment;
- Is not part of the designated record set kept by or for the Agency;
- Is not part of the information which you would be permitted to inspect and copy; or,
- Was determined accurate or complete by the Agency.

Right to an Accounting of Disclosures: You have the right to request an “accounting of disclosures.” This is a list of the disclosures we made of health information about you which were required by law and/or were not authorized by you. The list of disclosures will not include disclosures made for the purposes of treatment, payment for treatment services or health care operations related to the treatment services.

To request this list or accounting of disclosures, you must submit your request in writing to our Records Department. Your request must state a time period, which may not be longer than six years. Your request should indicate in what form you want the list (for example, on paper, electronically). The first list you request within a 12-month period will be free. For additional lists, we may charge you for the costs of providing the list. We will notify you of the cost involved and you may choose to withdraw or modify your request at that time before any costs are incurred.

Right to Request Restrictions: You have the right to request a restriction or limitation on the health information we use or disclose about you for treatment, payment or health care operations. We are not required to agree to your request unless your request is to limit disclosures to a health plan for the purpose of carrying out payment or health care operations that are not otherwise required by law and you or someone on your behalf other than your health plan has paid for those services in full at the time the health services are provided. However, if we do agree with a requested restriction or limitation, we will comply with your request unless the information is needed to provide you emergency treatment.

You also have the right to request a limit on the health information we disclose about you to some- one who is involved in your care or the payment for your care, like a family member. For example, you could ask that we not use or disclose information about a counseling session you received.

To request restrictions, you must make your request in writing to our Records Department. In your request, you must tell us (1) what information you want to limit; (2) whether you want to limit our use, disclosure or both; and (3) to whom you want the limits to apply, for example, disclosures to your spouse.

Right to Request Confidential Communications: You have the right to request that we communicate with you about health matters in a certain way or at a certain location. For example, you can

ask that we only contact you at work or by mail. To request confidential communications, you must make your request in writing to our Records Department. We will not ask you the reason for your request. We will accommodate all reasonable requests. Your request must specify how or where you wish to be contacted.

Right to a Paper Copy of This Notice: You have the right to a paper copy of this notice. You may ask us to give you a copy of the current notice at any time. To obtain a paper copy of this notice, contact the Agency Privacy Officer at (802) 728-4466.

Security of Health Information: We have in place appropriate safeguards to protect and secure the confidentiality of your health information. Due to the nature of community based human service practices, Agency representatives may possess your health information outside of the Agency. In these cases, Agency representatives will ensure the security and confidentiality of the information in a manner that meets Agency policy, State and Federal Law.

Specific requirements for electronic notice: A covered entity that maintains a web site that provides information about the covered entity's customer services or benefits must prominently post its notice on the web site and make the notice available electronically through the web site.

CHANGES TO THIS NOTICE

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for health 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 all Agency facilities. The notice will contain an effective date. Should we make a material change to this notice, we will, prior to the change taking effect, publish an announcement of the change at every Agency facility.

COMPLAINTS REGARDING HIPAA PRIVACY RIGHTS

If you believe your privacy rights have been violated, you may file a complaint with the Agency or with the Secretary of the Department of Health and Human Services. To file a complaint with the Agency, call (802) 728-4466 and ask to speak with our Privacy Officer. All complaints must be submitted in writing. Complaint forms are available at each location including the reception area at the Agency's main office. You will not be penalized for filing a complaint.

OUR AGENCY

Douglas County Community Behavioral Health Center was founded as one of many mental health agencies organized by Georgia Statute developed in 1990's..

DCCSB's programs serve children and families, individuals coping with behavioral challenges, emotional stress, mental illness, alcohol and other drug problems. Services are confidential and include, but are not limited to, counseling, psychiatric services, consultations, short term crisis intervention, education for families related to emotional and behavioral challenges, evaluations, respite care, housing, assistance in obtaining disability benefits, help with finding and keeping employment, outreach and home-based services, alcohol and drug treatment, a walk-in clinic and a 24 hour emergency service system.

Douglas County Community Behavioral Health Center provides community mental health services focused on community integration, mental health wellness, enhanced functioning and improved quality of life. Our agency is committed to providing quality care and extending its services to near-by communities to ensure a continuum of care. Douglas County Community Behavioral Health Center respects the different cultures and diversity in our region and works to build off of those strengths to grow healthy communities.

OUR MISSION

Douglas County Community Behavioral Health Center is a community based non-profit organization that provides acute and long-term behavioral health care services. We strive to be client-sensitive, cost-effective, and outcome-based.

OUR GOALS

- To provide behavioral health care that responds to client needs, treats individuals with dignity, and is recognized as effective by clients and purchasers.
- To maintain ongoing fiscal viability of the agency through careful financial management and planning.
- To integrate a commitment to ongoing quality improvement throughout the organization.
- To strategically position the agency for the future behavioral and substance use health care environment.
- To provide leadership in the efforts to reform the healthcare system so that the needs of Clara Martin Center clients are adequately addressed.

CODE OF CONDUCT

Douglas County Community Behavioral Health Center has a Code of Conduct, which outlines standards of professional behavior for all members of our workforce and Board of Trustees. As stated in the Douglas County Community Behavioral Health Center policy on Code of Conduct, all Agency Representatives shall uphold the highest professional, ethical and business standards while conducting Agency business and/or while representing the Agency in the community. The Code of Conduct has been broken into the six sections listed below:

1. Respect and Dignity
2. Competence
3. Ethical and Legal Standards
4. Confidentiality
5. Communication and Reporting
6. Investigation, Sanctions and Investigation

Each section addresses these standards in more detail through highlighting practice guidelines for Agency Representatives to follow.

Should you have any questions regarding our Code of Conduct, or if you wish to receive a full copy, please contact our Corporate Compliance Officer at 802-728-4466.

ADVANCE DIRECTIVES

Douglas County Community Behavioral Health Center can provide interested clients with resource information regarding advance directives. An advance directive is an opportunity for you to state what you want to happen in the future regarding your health care. This includes information on Durable Power of Attorney and Living Wills. Please let your care provider know if you are interested in receiving this information.

CLIENT FEE INFORMATION

Upon intake, a fee arrangement will be determined based upon program assignment, insurance information and income.

CLIENT RIGHTS

As a client of Douglas County Community Services Board, you have the right to:

1. The basic civil and legal rights accorded to all citizens.
2. Treatment, regardless of race, color, national origin, age, sex, or disability.
3. A humane psychiatric and substance use treatment environment, freedom from emotional abuse, substance use abuse, sexual abuse, punishment, fiduciary abuse, retaliation, humiliation, and neglect.
4. Ethical treatment that meets the standards of the Agency and of the discipline of the person(s) providing treatment/training.
5. Receive prompt and adequate treatment and/or rehabilitation services appropriate for your condition according to commonly accepted professional standards.
6. Participate in the development of your treatment plan. Where appropriate, family/significant others shall have the opportunity to participate in your treatment plan development. Discharge planning will be initiated at the earliest point in the treatment planning process.
7. Exercise control over your own actions, decisions, wishes and desires as any other person of comparable age.
8. The least restrictive conditions necessary to achieve the purpose of treatment. You have the right not to be subjected to adverse treatment procedures without the express and informed consent of you or your guardian.
9. Be informed of your condition and progress.
10. Have your treatment record and all information about you kept confidential except where state law or court order requires disclosure. Consents and authorizations for release of information will be in accordance with Douglas County Community Behavioral Health Center policies on privacy and confidentiality.
11. The right to request the receipt of protected health information by alternative means or at alternative locations for the purpose of confidential communications. The reasonableness of the request will in part be judged by the administrative difficulty and expense of complying with the request.
12. Be free of unnecessary or excessive medication.
13. Be informed of the effects/side effects of your medication.
14. Refuse medication with the following exception: Except after a court hearing and final commitment order.
15. Not to be subjected to experimental research without express and informed consent of you and/ or your guardian. If consent is given, you may withdraw it at any time. All research that the Douglas County Community Behavioral Health Center participates in will adhere to ethical and clinical research guidelines.
16. Petition the court for review of any civil commitment order, in accordance with the provisions of the law.
17. Be informed in a manner consistent with your ability to understand the rights specified herein. Your signature (or your guardian's) will serve as acknowledgment of receipt of this information.
18. Due process with regard to grievance.
19. Refuse to provide authorizations for the use and disclosure of protected health information; except if the treatment is research-related or if the health information is to be created for the purpose of disclosure to a third party.
20. Resource information for legal services for appropriate representation.
21. Resource information to self-help and advocacy support services.
22. Investigation and resolution of alleged infringement of rights.
23. Informed consent or refusal or expression of choice regarding service delivery, release of information, concurrent services, composition of service delivery team and involvement in research project.

CLIENT COMPLAINT/GRIEVANCE AND APPEALS PROCESS

The Douglas County Community Behavioral Health Center is interested in improving the quality of care provided to our clients and communities and would like to identify and resolve sources of dissatisfaction. It is the policy of Douglas County Community Behavioral Health Center that anyone who receives services or does business with the Douglas County Community Behavioral Health Center has the right to fair consideration of his/her complaint/grievance at any time.

In order to ensure that clients and staff are aware of the complaint process and the grievance/appeals process, the Agency will visibly post notices of this policy in all of its locations. Any client or interested person may obtain a Client Complaint form from any staff member or receptionist located at any of the Douglas County Community Behavioral Health Center locations. An interested party may be a client, guardian or family member, advocate, human service professional or concerned citizen. There are two complaint processes that can be followed and that determination is made by the Grievance and Appeals Coordinator. Complaints made by a client (who has Medicaid) or their guardian may follow the Douglas County Community Behavioral Health Center complaint process and/or the Georgia Department of Mental Health Grievance and Appeals process. Any interested party who would like to file a complaint will follow the Douglas County Community Behavioral Health Center complaint process and not necessarily the Georgia Department of Mental Health Grievance/Appeals process. Pursuant to the client complaint/grievance/appeal policy, no client or guardian shall be subject to retaliation for bringing problems to the attention of management. Every client, or guardian, or interested party may freely institute a grievance without fear of threats, reprisal, or harassment by the Agency.

These client complaint/grievance/appeal procedures will be explained to all clients during the initial intake appointment.

1. When an informal resolution of a complaint is not successful, staff will inform clients or interested party of the formal complaint/grievance/appeal procedures.
2. All complaints and/or grievance/appeals proceedings shall be confidential unless the client elects to waive his/her confidentiality.
3. Any client or interested party (who has the explicit written consent of the client having a complaint) can file a complaint or grievance.
4. The Douglas County Community Behavioral Health Center complaint form should be completed as thoroughly as possible.
5. Upon receipt of the Douglas County Community Behavioral Health Center complaint form, the Grievance and Appeals Coordinator or his/her designee will begin a thorough investigation, which may include interviews with the person submitting the complaint/grievance, appropriate staff members, or supervisors.
6. Within five (5) working days of receiving the complaint, the Grievance and Appeals Coordinator or his/her designee will acknowledge the complaint either by phone, in person, or if the situation meets the criteria for the Georgia Department of Mental Health Grievance/Appeals process, an acknowledgment letter will be sent to the client.
7. The Grievance and Appeals Coordinator or his/her designee will look into the situation and in a timely manner, notify the client or guardian of the results of the investigation.
8. If the complaint was handled through the Douglas County Community Services Board's complaint process and did not meet the criteria for the Georgia DMH Grievance/Appeals process and the results are not satisfactory to the individual, a next step can be an agency grievance hearing.
9. Within ten (10) working days of a request for an agency grievance hearing after a complaint has been responded to, a panel will be brought together. The panel will consist of individuals judged to be impartial and fair by the client and the agency. This panel will be called the Douglas County Community Behavioral Health Center Grievance Committee.
10. The DCCSB Grievance Committee will meet and review all information and take oral comments from the complainant and other involved parties. No lawyers will be present.
11. The DCCSB Grievance Committee will give a report in writing within five (5) working days after convening. The report may agree with the complainant and may result in whatever action is necessary, or may agree with the previous investigation results, or may take some other action that is seen as a compromise. Any decision rendered that is in violation of state or federal regulations or laws can be overturned by the Executive Director.
12. For more information regarding the complaint or the grievance/appeals process, the agency Grievance and Appeals Coordinator may be consulted.

CLINICAL PROGRAMS

ACCESS PROGRAM

The mission of the Access Program is to ensure appropriate response to all requests for services and ensure availability of timely access to appropriate care. It is our goal to link all those who contact us for assistance with a resource that matches their needs and desires for support and/or treatment.

The Access Program is an entry point into most services that the Douglas County Community Behavioral Health Center offers and has a direct link with In-Patient Services as well in situations that warrant immediate response. Both the Access Program and In-Patient Program staff are cross trained to respond to needs in order to streamline client's entry into services.

Objectives

- Link clients with area resources both internally and externally, always with an eye toward an appropriate level of care as well as individualized needs
- Assist with overcoming payment and insurance barriers to treatment, evaluating immediate, intermediate and long-term care needs
- Provide screening and referral services to all individuals, couples and families who contact, or are referred to, our agency
- Ensure availability of services at multiple sites, on multiple days and at different times
- Provide a smooth transition for all new referrals to enter our agency
- Help facilitate linkage to primary care providers and ensure coordination of care that encompasses both mental health and substance use health care needs

Clinical Services

- Screening
- Referral to internal services as well as external resources
- Walk-in Clinic
- Emergency Services

Eligibility Criteria

- Anyone contacting our agency is eligible for screening, referral and emergency services
- All community members in the Douglas County Community Behavioral Health Center service area can access walk-in services

ADULT OUTPATIENT PROGRAM

The Adult Outpatient Program delivers outpatient mental health services to adults and promotes health and wellness by offering individualized supportive services.

Objectives

- Provide outpatient treatment in a variety of sites to meet the needs of our clients
- Assist individuals in increasing functioning and improving the quality of their life through stress and symptom management, development of coping skills and processing of emotions
- Develop individualized plans of care to meet specific needs including treatment for

- multiple diagnoses or co-occurring substance abuse issues
- Provide services that are gender, culture and trauma sensitive
- Work collaboratively with other providers to ensure continuity of care

Clinical Services

- Assessment
- Individual, Couples or Family Therapy
- Psycho-educational Groups
- Case Management Support and Outreach
- Psychiatric Evaluation, Medication Review and Monitoring
- Psychiatric Consultation to Primary Care Physicians
- Care Coordination with Primary Care and outside providers

Evidence Based Practice Treatment

- Integrated Dual Diagnosis Treatment: Individual and Group
- Dialectical Behavioral Treatment Programming
- Wellness Recovery Action Plan groups
- Seeking Safety
- Mindfulness

Eligibility Criteria

- Must be 18 years of age or older
- Must have a mental health diagnosis
- Must have the ability to pay for services received, and must live in our service delivery area to be eligible for our sliding fee scale

Therapy

Based upon the individual and clinical needs, individuals are assigned to a therapist that will best match the needs of the individual. Our staff offers specialized evidenced based treatment in areas such as: Cognitive Behavioral Therapy, Solution Focused Therapy, Dialectical Behavioral Therapy, Trauma Focused Treatment, and Brief Therapy.

Group Therapy

Group therapy can be an ideal choice for addressing concerns and making positive changes in one's life. Groups are designed to target a specific problem, such as depression, panic disorder, social anxiety, chronic pain or substance abuse. Other groups focus more generally on improving social skills, helping people deal with a range of issues such as anger, shyness, loneliness and low self-esteem.

Skills Group

is a comprehensive cognitive-behavioral treatment that was originally developed to treat chronically suicidal individuals suffering from borderline personality disorder (BPD) or for individuals who may be struggling with issues related to emotion dysregulation and quality of life instability. The treatment includes a weekly skills group, weekly individual counseling and phone coaching. Participants are asked to sign a contract agreeing to stay in the treatment program for a select amount of time to be determined between the individual and their clinician. Modified DBT Skills group- This group teaches the 4 modules from the DBT program but unlike DBT skills group, the Modified group is only a weekly 1.5 hour group and the individual is not required to have an individual DBT clinician. Participants are not required to sign a contract.

Case Management

Short-term case management can be available to adults, 18 years or older, who are either already engaged in outpatient services or those in the process of connecting with outpatient services. Services are focused on supporting clients to address immediate needs that might be causing a barrier to treatment.

Psychiatric Services

The Adult Outpatient Program offers psychiatric services, which includes psychiatric assessment, medication prescribing, review and follow along, for individuals that are consistently engaged in therapeutic services in the program. Our psychiatrist also utilizes a consultation model in which our psychiatrist provides an evaluation, will stabilize the individual's medications and refer the individual back to their primary care provider for follow along care.

CHILD AND FAMILY PROGRAM

The mission of the Child & Family Program at the Douglas County Community Behavioral Health Center is to provide high quality, comprehensive, and integrated prevention and community based services to children and their families. Our team fosters resilience, inspires change, helps families recover from difficult events and promotes healthy family systems. The Child and Family Program operates with the understanding that children and adolescents live within families and communities. Prevention and treatment is planned in collaboration with families and appropriate community members/professionals. All services are intended to enhance the functioning of the family system. Our services are part of a comprehensive and coordinated array of community resources intended to form a “wrap around” safety net of support for every family in need in our region of Vermont. Each “wrap around” is designed to meet the unique needs of the child and their family.

Objectives

- The Child and Family Program operates with the understanding that children and adolescents live in families and in communities.
- Prevention and treatment is planned in collaboration with families and appropriate community members and provided to the family.
- All services are intended to enhance the functioning of the family system.
- Our services are part of a comprehensive and coordinated array of community resources intended to form a “wrap-around” safety net of support for every family in need in our region of Georgia.

Evidence Based Practice Treatment

- Attachment Therapy
- Motivational interviewing
- Cognitive Behavioral Therapy (CBT)
- Trauma Informed (ARC - Attachment, Regulation and Competency)
- Co Occurring treatment
- Resiliency model
- Seeking Safety

The Child and Family Program provides these services from our Randolph, Chelsea and Bradford sites. Clinic and school-based (school year) services as well as respite and social support services are available on a regular basis. Emergency services are available seven (7) days per week, 24 hours a day.

Eligibility Criteria

- Adolescents ages 13-18 can be seen once at the Douglas County Community Behavioral Health Center without the consent of a guardian.
- Adolescents ages 13-18 can be seen a maximum of three times in order to resolve a crisis without the consent of a guardian.
- All other treatment of minors requires the consent of a guardian.
- Children and adolescents needing services for a developmental disability are referred to Upper Valley Services, the local provider for these services.

General Outpatient Services (ages 6-15)

Within outpatient services, youth and their families receive individual and family therapy, community supports, case management, group programming, and summer group programming. While general outpatient services are focused on ages 6-15, the services below are available to any and all children within the larger Child and Family Program.

- **Therapy** – based upon the individual clinical needs, youth are assigned to a therapist that will best match the needs of the youth/family. Our staff offer specialized evidence based treatment in areas such as: Attachment Therapy, Play Therapy, Art Therapy, Trauma Focused Treatment, Brief Therapy, Cognitive Behavioral Therapy and Solution Focused Therapy.
- **Group Programming** – The Child and Family Program designs group curriculum with the population and community needs in mind. Group programming addresses: emotion regulation, social skills, interpersonal relationship skills, family groups, parenting groups, substance abuse education groups, and specific targeted skills groups.
- **Summer Group Programming** – Skill building and the need for supports continues even when school lets out for the summer. We design skill based curriculum for groups that are delivered in the community that incorporate healthy, fun activities into the acquisition and practice of skills.
- **Case Management** – Based upon the needs of the child and family, case management can provide either short term or more intensive supports to address needs outside of the therapy office. This can include parenting supports (either in the home or in the office), resource finding and referrals to additional services, and coordination with other professionals and community based supports.
- **Community Supports** – Child and Family clinicians provide community based supports designed for children in need. These supports assist with taking the children into the community to use a hands on approach in learning skills. Children are able to learn skills,

including social, communication, peer interaction, emotional, and behavioral. Children learn to implement the skills within a community context while receiving support and coaching at the same time.

- **Child Psychiatric Services** – The Child and Family Program offers limited psychiatric services to those individuals with higher acuity of psychiatric needs. Our child psychiatrist utilizes a consultation model, in which our psychiatrist stabilizes the youth’s medications and then refers the youth back to their pediatrician. The pediatricians are encouraged to use the psychiatrist to consult on any further questions or medication changes.

Transition Age Youth (TAY) (Ages 16-22)

The Transition Age Youth program provides services to youth 16-22 years of age, utilizing the Resiliency Model to meet clients “where they are at.” Providing therapeutic services and supports in the youth’s environment help adolescents and young adults succeed. TAY supports the adolescent or young adult in developing and maintaining caring relationships by being held to high expectations, and giving them opportunities to participate and contribute to their community.

- **Jump on Board for Success (JOBS)** – Employment support program that provides job supports to youth ages 16-22 with severe emotional disturbances who are out of school, or are at risk of dropping out of school, issues with substance abuse, homelessness, substance use or other abusive behaviors, or other concerning behaviors. JOBS supports young adults on preparing, securing, and maintaining employment. Due to funding changes, JOBS services are currently only provided in the Randolph Region.

Substance Abuse Services

Substance abuse treatment, education and skills based services are embedded into all of our programming. The Douglas County Community Behavioral Health Center is a co-occurring treatment agency that provides comprehensive treatment to address both substance abuse and mental health together. Services are provided in individual and family therapy, as well as group therapy modalities.

School Services Program

The mission of the School Services Program is to provide a continuum of student centered supports and interventions that allow students with mental health challenges to be successful student learners. With a focus on prevention and early intervention, the goal of school services is the promotion of wellness for all students in their educational, family and community environments.

School Services include Behavioral Consultation, Behavioral Intervention, School Based Clinicians, and Alternative School Programming.

- **Behavioral Consultation** is a new addition to our School Services program menu of services. We are now able to provide individualized behavioral consultation to schools for identified students or classrooms.
- **Behavioral Intervention** provides highly individualized programs for youth and their families living with significant emotional and behavioral disorders in the school setting. Often youth who receive these services are at risk of hospitalization or of being placed in a residential program. Through the use of Behavioral Consultation, a trained Behavioral Interventionist, Clinical Case Manager in conjunction with a close collaboration with the education- al team, the majority of youth are able to maintain their placement in their homes, school and community.
- **School Based Clinicians** provide mental health treatment to students, as well as education and support to school staff within the schools. School Based Clinicians are

integrated into the school team and are able to provide daily supports to youth struggling with emotional and behavioral disorders.

COMMUNITY SUPPORT PROGRAM

The Community Support Program (CSP) assists individuals with mental health issues in achieving and sustaining the highest quality of life consistent with their abilities, needs, personal ambitions, and available resources. The program strives to instill wellness to individuals living in the community.

Objectives

- To insure that individuals in the CSP program are treated with dignity and respect, provided opportunities to work, learn, have recreational opportunities, and live in the community based on their personal choices
- To insure that services provided are individualized and emphasize health, wellness and recovery
- To insure wherever possible, services be used that are based on evidence-based treatment models
- To insure that treatment goals are directed by the individual
- To teach individuals how to handle the stressors they face in life
- To minimize the usage of psychiatric hospitalizations
- To minimize the usage of involuntary treatment, either in the inpatient or outpatient settings
- To identify all diagnoses, both mental illness and substance abuse, and to treat both concurrently and within the same treatment team
- To provide an understanding of mental illness, of medications, and of feelings
- To support individuals in gaining self-confidence to improve their living situation

Eligibility Criteria

The Community Support Program serves adults, 18 years and older, who meet the specific eligibility criteria set forth by the Georgia Department of Mental Health. The criteria must be met in three categories: diagnostic criteria, recent treatment history and level of impaired role functioning. Although persons with a primary diagnosis of Developmental Disability, head injuries, Alzheimer's disease, or Organic Brain Syndrome frequently have similar treatment needs, they are not included in this definition.

Specific Programmatic Criteria

Most clinical services are available to all clients in the CSP Program if they are clinically indicated by the individualized service plan developed in collaboration between the client and the treatment team. All CSP clients, regardless of need, are assigned to a primary case manager and are seen at least yearly by a member of the medical team.

Clinical Services

- Case Management, Outreach
 - Community-based supports
 - Social support services/socialization skills
 - Assistance with activities of daily living
 - Community integration
- Service Planning and Coordination
 - Assistance with acquiring benefits and the application process

- Housing support services
- Difficulty of Care Program and Wellness Recovery Action Plan support services
- Assistance with accessing medical and dental services
- Psychiatric Evaluation, Medication Review and Monitoring
- Individual Counseling
- Recovery and Wellness Groups
 - Women’s group, writing group, art group, cooking group, health and nutrition group, fitness group, gardening group, walking group
- Peer Supports
- Emergency Services

Evidence Based Practice Treatment

- Integrated Dual Diagnosis Treatment: Individual and Group
- Dialectical Behavioral Treatment Programming
- Wellness Recovery Action Plan groups
- Seeking Safety
- Family Psycho-education and Support groups
- Individual Placement and Supports (IPS) model for Vocational Services

Vocational Services/Outreach

The agency’s Supported Employment program assists adults within the agency’s Community Support Program to identify, achieve and maintain vocational goals, including paid employment, in collaboration with community employers.

- Assistance with preparing for employment
- Assistance with job development
- Assistance with on-going job support

Health and Wellness Program

Philosophy: that substance use health is an important component of overall health. Individuals are encouraged to engage in activities that promote substance use as well as mental health. The program has a designated nurse who works to promote substance use health on 4 levels.

1. On an individual level:
 - Personalized health coaching
 - Diet and exercise planning
 - Wellness plan development
 - Social integration in the community
2. On a group level:
 - Social integration fitness groups- Curves, VTC, walking group
 - Health and nutritional support
 - Smoking cessation supports
 - Peer support and encouragement
3. On a program level:

- Coordination of Wellness Plan with Case Managers and support staff
 - Provide education on health issues
 - Assist in coordinating health activities.
4. On a community level:
- Coordination with and other health care providers in the community
 - Advocate for client to promote wellness
 - Communicate regarding health needs of clients
 - Foster an integrated approach to wellness for CSP clients.

An updated client handbook from the Department of Mental Health (DMH) can be found on their website: mentalhealth.vermont.gov/manuals – click on Community Rehabilitation Treatment Client Handbook.

CRIMINAL JUSTICE PROGRAMS

The mission of the Criminal Justice Program is to provide effective assessment and treatment services to people who have been or are currently involved with the court or corrections system. Our aim is to enhance their ability to function effectively in the community, re-enter the community success- fully and reduce the risk of committing additional crimes. We implement ethical and best practice models of treatment to help meet these goals.

Objectives

- Deliver specialized outpatient services in our Randolph, Bradford and Wilder sites.
- Provide psychosocial assessments, individual therapy, specialized group therapy, family education, and support groups consistent with best practices.
- Provide programming that is gender, culture and trauma sensitive.
- Develop collaborative relationships with clients to help them reach identified treatment goals.
- Incorporate interdisciplinary treatment planning to help clients take full responsibility for their crimes and gain the support needed to function successfully in the community.
- Collaboration with community resources to ensure clients receive continuity of care and all services needed to function effectively in their communities.

Clinical Services

- Screening
- Assessment
- Individual Therapy
- Group Therapy
- Sex Offender Treatment Groups
- Domestic Violence Accountability Program
- Anger Management
- Victim’s Support
- Case Management

Evidence Based Practices:

- Relapse Prevention Model

Community Based Sex Offender Treatment

The goal of the program is to decrease the risk of re-offense and promote healthy lifestyles through individual and group therapy. The program meets program standards set forth by the Georgia Center for the Prevention and Treatment of Sexual Aggressors. The Georgia Center for the Prevention and Treatment of Sexual Aggressors provides the clinical supervision.

Eligibility Criteria

- Must be age 18 or older
- Must be willing to sign specialized program treatment agreement
- Must accept responsibility for their crime of conviction

Domestic Violence Accountability Program

The program adheres to the Standards of Batterer's Intervention Programs set forth by the Georgia Coalition for Domestic Abuse. The goal of the program is to reduce the risk to engage in emotional or substance use abuse towards intimate partners.

Eligibility Criteria

- Must be age 18 or older.
- Must have means to pay for services.
- Must accept full responsibility for their crime of conviction.
- Must acknowledge they need help due to past abuse within intimate partner relationships.

Anger Management

The anger management program aims to provide clients with skills necessary to identify and effectively manage emotions that may lead them to engage in threatening or assaultive behavior.

Reentry Case Management

Reentry Case Management is a service provided to individuals who have been affected by substance abuse and reentering the community after incarceration and/or being supervised by Hartford Probation and Parole. Case management includes, but is not limited to; assistance and referrals for housing, transportation, benefits, employment, child care, education, health care, food, clothing, supportive counseling, connection with self-help groups, etc. This role provides stabilization to these individuals with the hope to reduce recidivism.

SUBSTANCE ABUSE PROGRAM

The mission of the Substance Abuse Program is to promote healthy lifestyles by reducing the harmful effects of alcohol and other drugs on the client, family and community.

Objectives

- Provide comprehensive treatment which addresses the needs of both the person with a substance concern and the people affected by the substance concern
- Identify clients who have co-occurring mental illness and help them develop goals and a treatment plan individualized to meet their needs
- Recognize abuse of alcohol and/or other drugs as a progressive disease that affects the psychiatric, emotional, substance use, social, and spiritual health of the person. It often impacts any system he/she interacts with including their family, friends, workplace and community

- Provide outpatient treatment in a variety of sites to meet the needs of our clients
- Provide education, consultation services, and support to family and friends of clients and other community organizations
- Work collaboratively with other providers and community organizations to provide continuity of care to our clients

Clinical Services

- Assessment and Referral to appropriate level of care
- Outpatient Services: Individual, Group and Family Therapy
- Medication Assisted Therapy
- Aftercare Recovery Services
- Psychiatric Evaluation, Medication Review and Monitoring
- Psycho-educational Groups
- Case Management

Evidence Based Practices

- Harm Reduction
- Motivational Enhancement Therapy
- Abstinence Based Treatment
- Trauma Informed
- Dual Diagnosis Treatment

Intensive Outpatient Program –

The goal of Quitting Time is to help clients with substance dependence maintain abstinence from alcohol and/or drugs and enhance their skills to prevent relapse. The program is offered in the evening and morning to accommodate needs of the clients. It meets three days per week for approximately six weeks. Upon completion of the intensive part of the program, recommendations are made for the client's continued needs in treatment – generally outpatient group.

Eligibility Criteria

- Must meet the intensive outpatient level of care as determined by the American Society of Addiction Medicine (ASAM) Placement Criteria.
- Must have a substance use disorder
- Must be age 18 or older
- Is not in acute withdrawal or are in need of a higher level of care such as residential treatment
- Must be willing to work towards abstinence

Outpatient Recovery and After Care Group

The goal of Recovery Group is to enhance relapse prevention skills and broaden client understanding of recovery as a lifestyle change.

Motivational Group and Early Recovery Group

The goal of Motivational Group is to help clients develop increased awareness of the impact of alcohol

and/or drug use has had in their lives. In addition, we hope to help increase their level of motivation to make healthier and safer decisions regarding their substance use. The groups meet once each week. This group also meets CRASH recommendations for ongoing counseling towards license reinstatement.

Co-occurring Group

The goal of this group is to improve the health and self-care of clients with co-occurring substance use disorder and mental illness. The groups meet once per week.

Seeking Safety Group

The seeking safety group is a present-focused therapy to help people attain safety from trauma/Post Traumatic Stress Disorder and substance abuse. The group is gender specific and consists of 25 topic areas related to trauma and substance abuse.

Adolescent Outpatient Counseling

The goal of the adolescent counseling is to help participants develop increased awareness of the impact alcohol and/or drug use has in their lives. In addition, Clara Marting Center hopes to help increase their level of motivation to make healthier and safer decision regarding their substance use. The groups meet once each week.

Eligibility Criteria

- Must meet the outpatient level of care as determined by the American Society of Addiction Medicine (ASAM) Placement Criteria.
- Must be 12 years of age or older.
- Those between the ages of 12-18 are allowed by federal regulation to be admitted to our outpatient program if they wish to receive help for their own substance abuse problem.
- Children under the age of 12 must have parental consent to obtain treatment.
- Must have a substance use disorder.

ABUSE, NEGLECT, EXPLOITATION

Abuse is any action that threatens a child (under the age of 18) or a vulnerable adult's substance use or emotional health or welfare. Some examples include, but are not limited to:

- Locking a child (under the age of 18) or a vulnerable adult in their bedroom
- Telling a child (under the age of 18) or a vulnerable adult they are stupid
- A caregiver hitting a child (under the age of 18) or a vulnerable adult

Neglect is the purposeful or failure of a parent, guardian or caregiver to provide adequate care to a child (under the age of 18) or a vulnerable adult. Adequate care may include providing necessary goods and/or services or following a written plan of care needed to maintain health and safety of a child (under the age of 18) or a vulnerable adult. Some examples include, but are not limited to:

- A caregiver not intervening to prevent a child (under the age of 18) or a vulnerable adult from experiencing verbal abuse from a neighbor
- A caregiver not reporting a significant increase in seizures to a supervisor, nurse or physician
- A caregiver not ensuring that a child (under the age of 18) or a vulnerable adult has adequate food to eat
- A caregiver failing to administer prescribed medication to a child (under the age of eighteen) or a vulnerable adult

Exploitation is a misuse of a child (under the age of 18) or a vulnerable adult's money, property or body. Some examples include, but are not limited to:

- An individual making a child (under the age of 18) or a vulnerable adult work for no pay, such as delivering newspapers
- Engaging in sexual intercourse with a child (under the age of 18) or a vulnerable adult
- A neighbor convincing a vulnerable adult to sign over their car registration to the neighbor because of the assistance they have provided the vulnerable adult with yard care.

What you need to do if you suspect abuse, neglect or exploitation:

Report to Douglas County Community Services Board: Suspected abuse, neglect or exploitation of a child (under the age of

18) or a vulnerable adult should be reported to your clinician or anyone at the Douglas County Community Behavioral Health Center including Linda Chambers, Executive Director. If it is a child (under the age of 18) you may report to Department of Children and Families. If the suspected abuse neglect or exploitation is of a vulnerable adult, you may report to Adult Protective Services. Douglas County Community Behavioral Health Center staff are mandated reporters and must report to DCF and APS when they learn of abuse, neglect or exploitation.

FACILITY CODE OF CONDUCT

The Facility Code of Conduct outlines the standards of behavior for all clients and staff of the DCCSB. Everyone is asked to:

- Ensure a safe environment for recovery, including respect for others and property
- Maintain a respectful relationship with all staff, peers and community members at all times
- Promote an atmosphere of politeness and consideration while in our communities and at work.
- Encourage respectful and dignified interactions among peers, staff and others by supporting each other in your day-to-day activities.
- Have the responsibility to promote the most positive reputation possible through our relationships with individuals, communities, and each other to further the mission of the Agency and those we serve and respect the reputation, philosophy and mission of the organization.
- Work to ensure that the legal rights of everyone served are not violated or denied and that human rights are respected.
- Respect each other's differences, diversity and individuality and personal boundaries.
- Avoid any situation or action that may create or appear to create a conflict of interest with other clients or the community. It is the expectation that individuals will disclose outside relationships that could interfere with treatment.
- Review any situations that may cause conflict with other clients or the community.
- All client information is confidential and will be respected. The expectation of confidentiality applies both during the client's term of service and continues for all time following termination of service.

The Agency reserves the right to intervene in any circumstances that violates this code to ensure safety in the facility and in the care delivery system.

TOBACCO AND DRUG FREE ENVIRONMENT

It is the policy of the Douglas County Community Behavioral Health Center to provide a healthy, safe and tobacco free environment for its clients, visitors and employees.

Georgia law requires that there will be no use of tobacco products within the facilities at any time.

- Use of tobacco products, which includes e-cigarettes, will not be allowed at Douglas County Community Behavioral Health Center outpatient facilities.
- All materials used for smoking, including cigarette butts and matches, must be extinguished and disposed of in appropriate containers when provided.
- If a facility has a designated area for smoking it will be equipped with cigarette extinguishing containers in a designated area. The designated area will be at least 25 feet from the building.

- Visitors will be informed of the tobacco and drug free environment policy through signs. Clients will be notified at the time of intake.
- No alcohol and/or illegal drugs are allowed on the premises.
- Violation of the above policy will result in the staff; visitor or client being asked to leave the premises.
- Police will be called if danger to public safety is evident.
- Prior to re-admission to a program, the client must meet with the treatment provider and agree to specific terms for re-admission.

WEAPONS POLICY

It is the policy of the Douglas County Community Behavioral Health Center that weapons will not be allowed on any Agency property. The word “Weapons” includes any item that can be or is perceived to be potentially harmful to another or any object that can be construed as a weapon.

- Guns are not allowed on the premises of any Douglas County Community Behavioral Health Center facility. The only exception to this policy is for law enforcement personnel.
- Knives are not allowed on the premises of any Douglas County Community Behavioral Health Center facility.
- Anyone who enters the premises with a weapon will be asked to leave to remove the weapon from the Agency.
- If a staff person believes someone has a weapon that could be of potential harm, he/she will ask the person to leave the Agency in order to remove the threat. The staff member, if possible, will consult with another staff member to assist in taking action(s).
- If the individual refuses to leave and imminent danger is present, the staff member will call the police immediately.

RECORD REVIEW

Any information regarding you and your treatment record will be kept confidential except for Federal, State or Agency review purposes. Your clinical record may be seen by representatives of federal agencies concerned with mental health and alcohol and other drugs, the Georgia Department of Mental Health Services, the Georgia Office of Alcohol and Other Drug Abuse Division of the Agency of Human Services and evaluators from within the agency.

Law requires that this information remain confidential and be used only for review purposes. If you would like information released by our agency on your behalf, a release of information is required in accordance with the Douglas County Community Behavioral Health Center poli

