

Participant Orientation and Information Guide

Improving Lives Counseling Services, Inc.
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President

ImprovingLivesCounseling.com

Outpatient services: Children and Adults

We are accredited by The Joint Commission. They may be contacted at:

JointCommission.org

The Mission of Improving Lives Counseling Services, Inc. is to provide effective professional behavioral health counseling to children and youth having adjustment disorders and/or serious emotional problems and to families of these children in Oklahoma. We recognize that children and youth may also have learning disorders and /or physically handicapping or contributing conditions and consider these needs in treatment services.

We seek to achieve participant and family involvement in, and satisfaction with, our services toward the outcomes of increased and improved levels of functioning within the home, school, and in the community, plus to prevent or decrease removals from the home to more intensive levels of care through the pragmatic implementation of an interdisciplinary approach.

We seek to make our services available to these persons at times and places outside the work day as well as within the core work day by using flexible work time and flexible employees; to provide effective services in an efficient business holding to the highest ethical business and marketing practices plus to expand services by community needs for business and services growth.

It is the goal of Improving Lives Counseling, Inc. to offer our participants the highest quality mental health services possible in a safe and therapeutic environment which maintains the client's rights and dignity while developing personal responsibility plus self-esteem through gains in self-understanding and problem/symptom management evidenced by decreased removals from the home and family, plus ongoing client/family satisfaction with services received.

Improving Lives Counseling, Inc. is a private, for-profit corporation. Our organizational goal is to have a strong efficient and effective organization with appropriate fiscal planning, protection, and reserves; to have and keep qualified, experienced, and capable employees; to fully utilize the services provided and to have service slots available to meet and exceed budget projections plus profit expectations; to establish and maintain strong customer satisfaction; to use participant Grievances, Complaints, or Recommendations as a tool toward constant improvement of the organization as a whole.

Improving Lives Counseling Services, Inc. CLINICAL SERVICES:

Assessment: We work with the individuals and family to determine strengths, abilities, needs, preferences, limitations, and problems to best help the person seeking admission to services. Assessments are face-to-face. With your consent, we may ask for assessments to be done by other providers as well.

Crisis Intervention: We intervene and help stabilize situations if you have overwhelming circumstances, traumatic incidents, and behavior management in the home and school. Our goal is to help a person or family regain control and to prevent injury or out-of-home care.

Treatment Plan Development and Review: We develop an individual plan with the family plus the person being served, setting objectives to help build a more successful life. As the person receiving services reaches the objectives, more effective behaviors and abilities are developed. We review the plan periodically with the participant and family looking at achievements, current needs, and readiness for change.

Psychological Testing: We may refer a client under services for testing so the results can help our Treatment Team develop an appropriate treatment plan.

Individual Counseling: Our counselors provide caring, capable, and sensitive counseling to individuals who are experiencing emotional, behavioral, and relationship problems. We aid persons to develop coping skills for depression, anxiety, panic, anger management, or the stress of prior abuse. Counseling may be located in our office, school, or in the family home. Educational needs are addressed in the school while other needs are provided in counseling sessions.

Group Counseling: Small group therapy settings use group support and cooperation with others; work together to use problem-solving techniques for dealing with violence, abuse, depression, impulse control, difficulties in education, etc. The goal is that person gains alternative solutions to use in the home, school, and community to promote a better life through the use of their new skills.

Family Therapy: Family counseling allows family members to communicate problems in a controlled and arbitrated environment and promotes respect within the family unit which has varied roles and differing opinions.

Rehabilitative Treatment Services (child/adolescent): “Rehab” for children and adolescents help persons gain or re-gain skills for everyday living by practicing. Lack of these skills causes difficulties which lead to behavioral problems in the home, school, or community. Our goal is that the individual uses alternative ways of dealing with problems; have more positive behaviors; increase self-esteem; and realistically face life’s challenges.

Follow-up: We provide contact with the client/parent(s)/custodial person(s) after services are rendered to learn of the client’s continued success, the outcome of our services, and to offer refresher or reminder therapy if it is needed.

Target Populations:

- I. **Children, youth, adolescents (persons under the age of 18) and their families** who currently or at any time during the past year have had a diagnosable mental, behavioral, or emotional disorder including 'severe emotional disorder' (SED); or a serious mental illness that resulted in functional impairment within the home, school or community. Examples are: problems in achieving and/or maintaining developmentally appropriate and expected behaviors in one or more areas of: role and task performance; cognition; communication; behaviors toward self and others; mood; and emotions. Adjustment disorders and functional impairments are included. Serious mental illness means a person who meets criteria for a psychiatric disorder, risk of deterioration and/or placement outside the home (inpatient, residential, or fosterage) without focused services; with impairment in personal care, social relations, and expected school functioning.

- II. **Persons over age 18** who request services and who meet the criteria previously stated in DSM-IV-TR for an adjustment disorder, personality disorder, serious or severe mental illness, or emotional disturbance.

- III. **Not Appropriate for services are:**
 1. Persons whose primary diagnosis is mild, moderate, severe or profound mental retardation *with no behavioral health diagnosis*;

 2. Persons with **acute** behavioral, mental health disorder, or substance abuse disorder requiring twenty-four hour skilled /medical care;

 3. Violent persons, immediately dangerous to self/others;

 4. Persons requiring an on-site attendant who do not have a mental health provider;

 5. Persons residing in a nursing facility or Mentally Retarded (ICF/MR) where facilities provide rehabilitation care within that program.

We expect the persons we serve to be satisfied with the services provided; that the individual feels that services are/were provided in a courteous and culturally sensitive manner within the requirements of confidentiality and with treatment goals and objectives stated as steps attainable by the individual, plus agreeable with the individual.

CODE OF ETHICS of Improving Lives Counseling Services, Inc.:

1. We follow the Policies, Procedures, and Plans of Improving Lives Counseling Services, Inc. (the Agency);
2. We hold ourselves responsible for providing quality services efficiently and effectively;
3. We hold ourselves responsible to provide services through ethical business practices; we represent our services and our business responsibly and honestly. Every employee must act within the conduct requirements of our Personnel Policy and Compliance Policy;
4. We respect the privacy and confidentiality of the person(s) who participate in the program;
5. We listen to and treat with respect the opinions, views, and actions of others;
6. We are trained and qualified to do our work; we continue to learn more by training;
7. We hold ourselves responsible for the requirements of accessibility, participant satisfaction, and ethical practices;
8. We believe the person(s) receiving services and professionals who provide services are partners; both receive dignity and respect;
9. We believe the goal of services is to increase a person's self-sufficiency, self-esteem, and quality of life in the community;
10. We use rational-emotive, solution-oriented, reality-based therapies; we do not use aversive therapies.

THE RIGHTS OF PARTICIPANTS:

ODMHSAS OAC Title 450 Ch. 15, Sub Chap.9, 450:17-11-1; 450:17-11-2 amended 13 OK reg 229 **TITLE 450:** 15-1-1 thru 15-3-26 as amended 15 OK REG:

These are the rights of each person receiving services: Each individual receiving services either voluntarily or involuntarily has access to, and enjoys, all rights, benefits and privileges guaranteed by the Constitution of the United States and the State of Oklahoma, and the federal and state statutes; except those specifically lost through due process of law. Any member of the public may request copies of information, rules, forms, and other public records in accordance with the Oklahoma Open Records Act of 51 OS, 24.A.2 through 24.A.5 and 450: 1-1-7.

1. All participants have the right to be treated with respect and dignity. This shall be construed to protect and promote human dignity and respect for individual dignity.

2. Each participant has the right to receive services in a safe, sanitary, and humane living environment.
3. All participants have the right to receive services in a humane psychological environment protecting them from harm, abuse, and neglect.
4. Each participant has the right to receive services in an environment that provides privacy, promotes personal dignity, and provides opportunity for the participant to improve his/her functioning.
5. Each participant has the right to receive services without regard to his/her race, religion, sex, ethnic origin, age, degree of disability, handicapping condition, legal status, and/or ability to pay for the services.
6. No participant shall be physically, sexually, verbally, or otherwise abused by staff of a facility. Neither shall any participant be permitted to suffer physical, sexual, or verbal abuse by other participants/consumers and/or visitors. A facility or staff of a facility shall neglect no participant.
7. Each participant has the right to be provided with prompt, competent, appropriate treatment that offers the individual a realistic prospect of improvement. Participants/consumers shall be afforded treatment by sufficient numbers of duly qualified facility personnel that meet applicable licensing and/or certification and/or accreditation standards; who conform to the applicable rules of ODMHSAS; and who are able to care for and treat participants. Participants shall receive treatment that is individualized to their illness/condition and needs.
 - a. Every participant shall be afforded the opportunity and encouragement, to be actively involved in their treatment, and may consent or refuse to consent to the proposed treatment.
 - b. The participant's right to consent, or right to refuse consent, may be abridged for those participants adjudged by a court of competent jurisdiction, and in emergency situations defined by law.
 - c. An adult (age 18 or over) participant who consents to the involvement of a family member or significant other(s) shall have those persons actively involved in their treatment.
 - d. The custodial parent/legal guardian of minors, and the legal guardian of adults for whom a guardian has been appointed by a court, shall be afforded the opportunity, and encouraged, to be actively involved in the participant's treatment.

8. Participant related information held by facilities that are either contained in the medical record, or which would identify a specific participant by name (including but not limited to census forms, Medicaid/Medicare forms), are confidential and additional confidentiality protections are present for participants being treated for substance abuse. Therefore, information regarding participants is confidential and cannot be released without the written permission of the individual or legal guardian. A person 14 years of age and older must sign a consent for treatment and/or release of information for specific reasons and to a specific individual/agency.

There are exceptions to the requirements of strict confidentiality. These are conditions and circumstances under which participant information may be reviewed or released without the participant's consent or knowledge. These conditions include: accrediting and/or certifying and/or licensing groups/agencies; the order for release of participant information by a court of competent jurisdiction; the minimum information needed to initiate and/or continue treatment between and among facilities operated by or contracting with ODMHSAS which have executed a Qualified Service Agreement; that a participant is not competent and a guardian has been appointed by a court of competent jurisdiction; or statutory requirement such as reporting: child abuse, elderly, and/or incapacitated adult abuse; reporting of communicable diseases to an outside entity.

9. Each participant has the right to refuse to participate in any research project or medical experiment without informed consent of the participant, as defined by law. A refusal to participate shall not affect the services available for the participant.
10. A participant shall not be forced to perform labor which contributes to the operations and maintenance of the facility for which the facility would otherwise employ an individual; the participant may voluntarily perform labor that would be consistent with his/her treatment plan, and which does not require an excessive amount of time. Performance of such labor shall in no way be made a condition for discharge or privileges.

A participant, who chooses to perform labor which contributes to the operation and maintenance of the facility and who takes the place of an employee, shall be compensated in accordance with applicable federal and state minimum wage laws for his/her labor. Labor constituting bonafide work therapy which is part of the participant treatment plan, labor of a personal housekeeping nature, labor oriented to improving community living skills, shall not be included under the term labor as discussed in this section and shall be exempt from the requirements of compensation.

Tasks performed as work therapy which are part of the participant's treatment plan may be compensated at the discretion of the facility. Payment to participant(s) performing labor or work therapy shall not be

applied by the facility to offset the cost of maintenance of the participant(s) in the facility unless the individual participant authorizes such payment to offset said costs in writing.

11. Each participant has the right to request the opinion of an outside medical or psychiatric consultant, at the expense of the participant; and/or the right to an internal facility consultation, at no cost to the participant.
12. A participant shall have a right to assert grievances with respect to an alleged infringement of his/her rights, and shall have the right to have such grievances considered through a fair, timely, and impartial grievance procedure. Each facility has policies and procedures for the grievance process. Grievance may be asserted through the Participant Advocate of the facility. Any grievance may also be asserted through the facility, the consumer council, or the ODMHSAS Advocate General, 900 E. Main, Norman, OK 73070, (405)573-6605.
13. No participant shall be retaliated against, coerced, and/or treatments altered either solely or partially because of his/her having asserted a grievance regarding his/her rights as stated in the OAC Title 450; any state/federal statute, the Constitutions of the State of Oklahoma and the United States.
14. **A.** An individual participant committed to treatment prior to June 1977, whose legal competency has not since been restored, shall, prior to discharge, be examined by a physician to be determined if s/he is presently mentally competent. If the person is competent, the examining physician shall execute a certificate of restoration of competency in triplicate and place one copy in the participant's clinical record; give one copy to the participant; and submit a final copy to the district court committing the participant.
B. Every participant who has applied for social security benefits, whose award is contingent upon a physician's statement regarding the ability of the participant to manage his/her affairs, is entitled to have such physician's statement returned to the Social Security Administration promptly to avoid unnecessary delay in the processing of the social security application and loss of benefits.

You are responsible to:

1. Be courteous to other participants and the staff;
2. Be present and attend scheduled sessions;
3. Talk to your counselor honestly and openly;
4. Work with programs to get benefit from them;
5. Tell your clinician of any changes in your personal situation (address, phone, income, benefits, change of family members, etc.);
6. Give others the same confidentiality you want yourself;
7. Be alcohol and drug free; inform your counselor if any medications are prescribed for you;
8. Keep IMPROVING LIVES a weapon-free and violence-free setting;

9. Provide information/forms as needed for Service costs;
10. Learn all safety requirements and use them daily;
11. Learn and follow all Emergency Plan Practices.

FREQUENTLY ASKED QUESTIONS:

What is treatment planning and review? You/legal guardian and your counselor develop a plan of treatment and goals for the client. The steps you complete toward meeting your goals and successfully completing your program of services are called objectives. Objectives are behaviors and skills learned and practiced, and lead to accomplishing the goals of treatment. Your plan is reviewed with you as services are provided, with changes made as necessary. One parent must sign this treatment plan unless you are age 18 years of age or over. Treatment planning and review is also a review of our ‘readiness to have less frequent or different services or to have no Improving Lives services. Planning what you need to accomplish for discharge from services starts when you begin treatment. People in services are ‘discharge ready’ when they have met 80% of the established goals and objectives.

What if I have an emergency? We have a 24-hour number for you and your family to call. If you have a medical emergency, our trained staff will help direct you to needed emergency care. We do not pay for ambulance transport. We ask for consent to contact your personal physician in any medical emergency.

What if I need, or have, prescribed medication? Your private personal physician may prescribe medications for you. You may decide to have medications from the local mental health center. We will ask for your consent to consult with your physician regarding your progress on any medication problems we might notice. We do not administer medications.

What do these services cost? Improving Lives Counseling can accept most third party (insurance, Medicaid) payments and ‘private pay’ individuals. Please ask for your specific coverage and help us by bringing your medical card, HMO, or insurance card. We will go over this individually with you and/or your parent/legal guardian. Fees for services are available; you can have a copy of these by request.

What if I have a complaint or grievance, or a recommendation to improve services? First, talk to your therapist about your concerns. Agreement and resolution are usually made there. If you cannot agree on a solution between you, present your complaint, grievance, or recommendation in writing to any Improving Lives staff member who will forward it to the Executive Director. You can have help to

write this if you ask for it. All complaints or grievances are taken seriously. A meeting will be held to resolve the problem. You will attend and you can have someone else to come with you to help you. If the problem was not resolved agreeably at this meeting, you can send your grievance to an outside agency for review or use the court system. Complaint, grievance, and recommendation forms are available in all facilities of Improving Lives Counseling, Inc.

SAFETY INFORMATION:

1. When schools close for weather problems, IMPROVING LIVES SERVICES may close. Call us @ 918-960-7852, which is also the 24-hour phone line.
2. Learn and follow all the safety training we provide: Know where the safety places are and what to do in case of emergency. Ask us about I.C.E. (In Case of Emergency) phone numbers if you have a cell phone!
3. Report any exposure to ANY contagious, infectious, or transmissible diseases (the kinds of diseases that can pass from one person to another). If you are exposed to a contagious disease, report this as soon as possible to your clinical worker. Examples of a contagious condition are: chicken pox, measles, mumps, influenza (flu), ringworm, scabies, lice, MRSA, tuberculosis, hepatitis C, cytomegalovirus [CMV], blood/other body secretions, or any sexually transmitted disease such as gonorrhea, syphilis, Chlamydia, HIV/AIDS. You will be confidentially helped to protect yourself and others through your local County Health Department or personal physician.
4. The best precaution against contagious, infectious, or transmissible diseases is to avoid them.
5. Use the Universal Precaution of keeping clean and washing well with soap and water often. Some conditions are contagious by breathing the air when a person has coughed; others require physical contact. HIV/AIDS is transmitted through sharing needles, and shared body secretions, including blood (from a transfusion). Your County Health Department or your personal physician can arrange testing for HIV/AIDS. This includes counseling and education for you. Your clinical worker will help you with a referral for testing if you ask and are over age 13. Persons under the age 13 must have the request made by a parent or legal guardian. Persons who have a condition, which is controlled, may take part in group and individual counseling. Confidentiality of the condition is mandatory. Your worker(s) will use rubber/plastic gloves in cleanup of substances that might contain risk secretions; they will also clean the areas with a bleach compound. You are NOT to cleanup vomit or personal body secretions but to advise an adult worker about it.

Hours of Service: Appointments are scheduled around the school day. Services are provided in varied locations and at varied times. Core hours are 8:15 A.M to 4:30 P.M. with early evening and Saturday services provided.

My appointment or days of participation are: _____

My counselor and 'primary contact' is:

Printed Name: _____ Phone: _____

Please Keep This and Refer To It Periodically!
Welcome to Improving Lives Counseling Services, Inc.!