

ths

# Participant Handbook

Fostering Healing & Recovery



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**STATEMENT OF CLIENT RIGHTS**  
**CLINICAL - INDIVIDUAL**  
**WAC 388-877-0600**

Washington State Law provides certain rights to clients, prospective clients and legally responsible others seeking services from a certified behavioral health treatment facility. You have the right to:

- (a) Receive services without regard to race, creed, national origin, religion, gender, sexual orientation, age or disability;
  - (b) Practice the religion of choice as long as the practice does not infringe on the rights and treatment of others or the treatment service. Individual participants have the right to refuse participation in any religious practice;
  - (c) Be reasonably accommodated in case of sensory or physical disability, limited ability to communicate, limited English proficiency, and cultural differences;
  - (d) Be treated with respect, dignity and privacy, except that staff may conduct reasonable searches to detect and prevent possession or use of contraband on the premises;
  - (e) Be free of any sexual harassment;
  - (f) Be free of exploitation, including physical and financial exploitation;
  - (g) Have all clinical and personal information treated in accord with state and federal confidentiality regulations;
  - (h) Review your clinical record in the presence of the administrator or designee and be given an opportunity to request amendments or corrections;
  - (i) Receive a copy of agency grievance system procedures upon request and to file a grievance with the agency, or behavioral health organization (BHO), if applicable, if you believe your rights have been violated; and
  - (j) Lodge a complaint with the department when you feel the agency has violated a WAC requirement regulating behavior health agencies.
- (2) THS ensures the applicable individual participant rights described in subsection (1) of this section are:
- (a) Provided in writing to each individual on or before admission;
  - (b) Available in alternative formats for individuals who are blind;
  - (c) Translated to the most commonly used languages in the agency's service area;
  - (d) Posted in public areas; and
  - (e) Available to any participant upon request.
- (3) All research concerning an individual whose cost of care is publicly funded is done in accordance with chapter 388-04 WAC, protection of human research subjects, and other applicable state and federal rules and laws.
- (4) In addition to the requirements in this section, THS, as an agency providing services to Medicaid recipients ensures an individual seeking or participating in behavioral health treatment services, or the person legally responsible for the individual is informed of their Medicaid rights at time of admission and in a manner that is understandable to the individual or legally responsible person.
- (5) The grievance system rules in WAC 388-877-0654 through WAC 388-877-0675 apply to an individual who receives behavioral health services funded through a federal Medicaid program or sources other than a federal Medicaid program.

Please ask your behavioral health provider if you would like more information about your/your child's rights. You have the right to request policies and procedures of the behavioral health organization (BHO) and community behavioral health agencies as they pertain to your rights.

Please be aware that Therapeutic Health Services (THS) must legally inform appropriate authorities where there are serious threats of suicide, serious threats of harm to others, all instances of suspected child abuse, incest, neglect and abuse to dependent and vulnerable adults.

**STATEMENT OF CLIENT RIGHTS**  
**INDIVIDUAL RIGHTS SPECIFIC TO MEDICAID RECIPIENTS**  
**WAC 388-877-0680**

(1) Medicaid recipients have general individual rights and Medicaid-specific rights when applying for, eligible for, or receiving behavioral health services authorized by a behavioral health organization (BHO).

(a) General rights that apply to all individuals, regardless of whether an individual is or is not a Medicaid recipient, include:

- (i) All applicable statutory and constitutional rights;
- (ii) The participant rights provided under WAC 388-877-0600; and
- (iii) Applicable necessary supplemental accommodation services in chapter 388-472 WAC.

(b) Medicaid-specific rights that apply specifically to Medicaid recipients include the following. You have the right to:

- (i) Receive medically necessary behavioral health services, consistent with access to care standards adopted by the department in its managed care waiver with the federal government. Access to care standards provide minimum standards and eligibility criteria for behavioral health services and are available on the behavioral health administration's (BHA) division of behavioral health and recovery (DBHR) website.
- (ii) Receive the name, address, telephone number, and any languages offered other than English, of behavioral health providers in your BHO.
- (iii) Receive information about the structure and operation of the BHO.
- (iv) Receive emergency or urgent care or crisis services.
- (v) Receive post-stabilization services after you receive emergency or urgent care or crisis services that result in admission to a hospital.
- (vi) Receive age and culturally appropriate services.
- (vii) Be provided a certified interpreter and translated material at no cost to you.
- (viii) Receive information you request and help in the language or format of your choice.
- (ix) Have available treatment options and alternatives explained to you.
- (x) Refuse any proposed treatment.
- (xi) Receive care that does not discriminate against you.
- (xii) Be free of any sexual exploitation or harassment.
- (xiii) Receive an explanation of all medications prescribed and possible side effects.
- (xiv) Make a mental health advance directive that states your choices and preferences for mental health care.
- (xv) Receive information about medical advance directives.
- (xvi) Choose a behavioral health care provider for yourself and your child, if your child is under thirteen years of age.
- (xvii) Change behavioral health care providers at any time for any reason.
- (xviii) Request and receive a copy of your medical or behavioral health services records, and be told the cost for copying.
- (xix) Be free from retaliation.
- (xx) Request and receive policies and procedures of the BHO and behavioral health agency as they relate to your rights.
- (xxi) Receive the amount and duration of services you need.
- (xxii) Receive services in a barrier-free (accessible) location.
- (xxiii) Medically necessary services in accordance with the early periodic screen, diagnosis and treatment (EPSDT) under WAC 182-534-0100, if you are twenty years of age or younger.
- (xxiv) Receive enrollment notices, informational materials, materials related to grievances, appeals, and administrative hearings, and instructional materials relating to services provided by the BHO, in an easily understood format and non-English language that you prefer.

(xxv) Be treated with dignity, privacy and respect, and to receive treatment options and alternatives in a manner that is appropriate to your condition.

(xxvi) Participate in treatment decisions, including the right to refuse treatment.

(xxvii) Be free from seclusion or restraint used as a means of coercion, discipline, convenience or retaliation.

(xxviii) A second opinion from a qualified professional within your BHO area at no cost, or to have one arranged outside the network at no cost to you, as provided in 42 C.F.R. § 438.206(3).

(xxix) Receive medically necessary behavioral health services outside of the BHO if those services cannot be provided adequately and timely within the BHO.

(xxx) File a grievance with the BHO if you are not satisfied with a service.

(xxxi) Receive a notice of action so that you may appeal any decision by the BHO that denies or limits authorization of a requested service, that reduces, suspends, or terminates a previously authorized service, or that denies payment for a service, in whole or in part.

(xxxii) File an appeal if the BHO fails to provide services in a timely manner as defined by the state, or act within the timeframes provided in 42 CFR § 438.408(b).

(xxxiii) Request an administrative (fair) hearing if your grievance or appeal is not resolved in your favor.

(xxxiv) Services by the behavioral health Ombuds office to help you in filing a grievance or appeal, or to request an administrative hearing.

(2) A behavioral health agency licensed by the division of behavioral health and recovery (DBHR) and certified by DBHR to provide mental health and/or substance use disorder services must ensure the Medicaid rights described in subsection (1)(b) of this section are:

(a) Provided in writing to each Medicaid recipient, and if appropriate, the recipient's legal representative, on or before admission;

(b) Upon request, given to the Medicaid recipient in an alternative format or language appropriate to the recipient and, if appropriate, the recipient's legal representative;

(c) Translated to the most commonly used languages in the agency's service area; and

(d) Posted in public areas.

Please ask your behavioral health provider if you would like more information about your/your child's rights. You have the right to request policies and procedures of the behavioral health organization (BHO) and community behavioral health agencies as they pertain to your rights.

Please be aware that Therapeutic Health Services (THS) must legally inform appropriate authorities where there are serious threats of suicide, serious threats of harm to others, all instances of suspected child abuse, incest, neglect and abuse to dependent and vulnerable adults.

## CONFIDENTIALITY

The confidentiality of mental health participant's records maintained by Therapeutic Health Services is protected by Federal and State regulations. Generally, THS may not say to a person outside the program that a participant attends the program, or disclose any information identifying a participant is enrolled in mental health services unless:

1. The participant consents in writing;
2. The disclosure is allowed by a court order; or
3. The disclosure is made to medical personnel in a medical emergency or to qualified authorized personnel for research, audit, or program evaluation.

Violation of the Federal and State regulations by a program is a crime. Suspected violations may be reported to appropriate authorities in accordance with Federal regulations.

Federal and State regulations do not protect any information about a crime committed by a participant either at the program or against any person who works for the program or about any threat to commit such a crime.

Federal and State regulations do not protect any information about suspected child abuse or neglect from being reported under State law to appropriate State or local authorities. (See 42 U.S.C. 290dd-3 and 42 U.S.C. 290ee-3 for Federal laws and 42 CFR part 2 for Federal regulations).

**There are three important situations in which THS must and will release Information about you without your written authorization:**

**MEDICAL EMERGENCY:** If a physician or hospital calls the clinic and states a need to know information about a participant in order to provide that person emergency medical services, we will release information about the participant, limiting our release to only the information necessary for care. This usually means information concerning psychiatric (psychotropic) medications.

**COURT ORDER:** If THS is presented with a properly drawn court order, we must obey that order and give all information required by that order.

**CHILD ABUSE/NEGLECT:** In a situation where any staff member has reason to believe that a participant is currently abusing or neglecting a child, THS is required by state law to report the situation to Children's Protective Services (CPS). Our report may have to include information about the participant's treatment at this agency.

**HOMICIDAL/SUICIDAL:** In situations where staff members have reasons to believe that participants may harm themselves or others, THS is required by state and federal laws to report this intent to the local law enforcement or MHP's.

**SECLUSION AND RESTRAINT:** THS does not engage in seclusion or restraint of any treatment participants.

NOTICE OF PRIVACY PRACTICES  
King County Behavioral Health Organization

*Effective Date: April 1, 2016*

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. This notice also describes how substance use disorder information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Section 1 describes your rights; Section 2 describes our uses & disclosures for health information; Section 3 describes our uses & disclosures for substance use disorder Information; Section 4 describes our responsibilities; and Section 5 is additional information.

**Section 1: Your Rights**

**When it comes to your information, you have certain rights. This section explains your rights and some of our responsibilities to help you.**

**Get a copy of health information**

- You can ask to see or get a copy of your health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

**Ask us to correct health information**

- You can ask us to correct your health information if you think it is incorrect or incomplete. Ask us how to do this.
- We may say “no” to your request, but we’ll tell you why in writing within 60 days.

**Request confidential communications**

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will consider all reasonable requests and must say “yes” if you tell us you would be in danger if we do not.

**Ask us to limit what we use or share**

- You can ask us not to use or share your health information for treatment, payment, or our operations. We are not required to agree to your request and we may say “no” if it would affect your care.
- We cannot share your substance use disorder information for treatment or payment purposes without your written consent.

**Get a list of those with whom we’ve shared information**

- You can ask for a list (accounting) of the times we’ve shared your health information for six years prior to the date you ask, who we shared it with and why.
- We will include all the disclosures except for those about treatment, payment and health care operations and certain other disclosures (such as any you asked us to make). We’ll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

**Get a copy of this privacy notice**

- You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

**Choose someone to act for you**

- If you have given someone health care power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

**File a complaint if you feel your rights are violated**



- You can complain if you feel we have violated your rights by contacting us using the information on page 3.
- You can file a complaint with the King County Department of Community and Human Services Privacy Officer by sending a letter to 401 Fifth Avenue, Suite 400, Seattle, WA 98104 or with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue S.W., Washington, D.C. 20201, calling 1-877-696-6775 or visiting [www.hhs.gov/ocr/privacy/hipaa/complaints/](http://www.hhs.gov/ocr/privacy/hipaa/complaints/).
- We will not retaliate against you for filing a complaint.

## Section 2: Our Uses and Disclosures of Health Information

How do we typically use or share your health information?

### Help manage the health care treatment you receive

- We can use your health information and share it with professionals who are treating you, coordinating your care or assisting with housing placement (if you don't have housing).

*Example: A provider sends us information about your treatment services so we can arrange for coverage or to coordinate additional services.*

### Run our organization

- We can use and disclose your information to run our organization and contact you when necessary.

*Example: We use health information about you to develop better services for you.*

### Pay for your health services

- We can use and disclose your health information as we pay for your health services.

*Example: We share information about you with the Washington State Department of Social and Health Services and Health Care Authority for payment of the services you receive.*

How else can we use or share your health information? **We are allowed or required to share your information in other ways. Usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see:**

[www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html).

### Help with public health and safety issues

We can share health information about you for certain situations such as:

- Preventing disease.
- Reporting adverse reactions to medications.
- Reporting suspected abuse, neglect, or domestic violence.
- Preventing or reducing a serious threat to anyone's health or safety.

### Do research

We can use or share your information for health research.

### Comply with the law

We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

### Respond to organ and tissue donation requests and work with a medical examiner or funeral director

- We can share health information about you with organ procurement organizations.
- We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

### Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you:

- For workers' compensation claims.
- For law enforcement purposes or with a law enforcement official.
- With health oversight agencies for activities authorized by law.
- For special government functions such as military, national security, and presidential protective services.

### Respond to lawsuits and legal actions

We can share health information about you in response to a court or administrative order, or in response to a subpoena.

## Other Uses and Disclosures

Disclosures for psychotherapy notes, disclosures for marketing purposes and disclosures that constitute a sale of protected health information require your authorization. Other uses and disclosures not described in this Notice will be made only with your written authorization.

### Section 3: Our Uses and Disclosures of Substance Use Disorder Information

The confidentiality of substance abuse disorder information is protected by regulations that are stricter than the regulations for more general health information. For example, we cannot share your substance use disorder information for treatment or payment purposes without your written consent.

We are allowed or required by federal law to share your substance use disorder information without your written consent in the following ways:

- To medical personnel in a medical emergency.
- To appropriate authorities to report suspected child abuse or neglect.
- To report suspected criminal activity.
- For research, audit or evaluations.
- As allowed by a court order.
- Pursuant to an agreement with a qualified service organization.

Other uses and disclosures of your substance use disorder information not described in this Notice will be made only with your written consent.

Violation of the federal law and regulations by a program is a crime. Suspected violations may be reported to appropriate authorities in accordance with federal regulations.

### Section 4: Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

Changes to the Terms of this Notice

We can change the terms of this notice, and the changes will apply to all information we have about you. The new notice will be available upon request and on our web site and we will mail a copy to you. For more information see:

[www.kingcounty.gov/healthservices/MentalHealth.aspx](http://www.kingcounty.gov/healthservices/MentalHealth.aspx).

### Section 5: Additional Information

For more information see:

- [www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html](http://www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html).
- [42 U.S.C. 290dd-3](#) and [42 U.S.C. 290ee-3](#) for Federal laws and [42 CFR part 2](#) for Federal regulations.

**King County Department of Community and Human Services**

**Behavioral Health and Recovery Division**

**Privacy Officer (206)-263-9000**

**401 Fifth Avenue Suite 400, Seattle, WA 98104**

**THERAPEUTIC HEALTH SERVICES**  
**CODE OF ETHICAL CONDUCT**

THS has developed a Code of Ethical Conduct in conjunction with the Standards for Ethical Conduct to provide guidance to THS personnel in carrying out their daily activities. Staff members sign a copy of the appropriate Code(s) as a part of orientation and these signed copies are retained in their personnel files. Copies of the THS Standards of Ethical Conduct follow this section.

**General Ethical Principles**

**The following principles are the foundation for the Code:**

1. THS personnel shall treat participants without discrimination and with respect, dignity and professionalism without regard to race, age, gender, religion, national origin, medical condition, physical or mental disability, ancestry, marital status, sexual orientation, citizenship, ability to speak English, or veteran status.
2. THS personnel shall adhere to all applicable standards of professional practice and ethical behavior in carrying out the business of THS including the areas of marketing and human resources, and shall not feel forced to take part in unethical, improper or illegal conduct.
3. THS personnel are encouraged to report their concerns if they believe that participant care is at risk or the ethical and business standards defined in the Code have not been met. There will be no retaliation against THS personnel who, in good faith, report suspected non-compliance or raise concerns about compliance issues.

**All staff members of THS are expected to perform their duties in an ethical and professional manner.**

I hereby affirm that:

- I am committed to providing the highest quality service for those who seek help.
- I shall evidence a genuine interest in all participants, and do hereby dedicate myself to the best interest of my participants.
- At all times I shall maintain a professional relationship with all participants.
- I shall maintain confidentiality of all records, materials, and knowledge concerning participants of THS.
- I shall not in any way discriminate between participants based on race, religion, national origin, creed, age, gender, handicaps, or personal attributes.
- I shall respect the rights and viewpoints of other staff members and participants.
- I shall continuously strive for self-improvement.
- I have an individual responsibility for my own conduct.

## Program Code of Ethics

THS is committed to providing a safe treatment environment for participants and staff. Participants in THS programs will conduct themselves as responsible members of the neighborhood and community. As a condition of the program, all participants will observe certain standards of conduct.

Engaging in any of the following behaviors can result in termination of a participant's treatment. These behaviors, as witnessed or verified by staff, include but are not limited to:

- A. Actions which may result in *immediate* treatment termination (no medically-assisted withdrawal, no more doses, no more access to program premises, no appeal, and no readmission to the program for a minimum of 1 year) with no exceptions:
- Any conduct (physical, verbal or nonverbal) which harms or threatens the health or safety of any THS staff member, participant, volunteer, or any other person who is on THS property or is participating in a THS activity.
  - Theft or damage to the clinic, staff, or participant property.
  - Bringing any kind of weapon onto the program site.
  - Distributing or selling alcohol or any controlled substance (legal or illegal) at THS or in its visible vicinity.
- B. Actions which *may* result in program discharge (see client orientation manual for more details):
- Diversion of a dose of methadone or Antabuse.
  - THS prohibits the use of all tobacco products within 25 feet of any THS building or THS grounds.
- C. Off-Premises Conduct
- Participants are not to engage in any behavior or activities that have a direct and significant quality-of-life impact on community residents or businesses.

The prohibited behaviors and activities include, but are not limited to:

- Fighting or other physical violence
- Creating a public nuisance due to noise
- Theft
- Intentional destruction of property
- Littering
- Urinating in public
- Criminal trespass
- Loitering, which is defined as remaining in the same place for any length of time without a specific legitimate reason for being there.

Any participant breaking these rules will be referred to the Behavior Review Board for disciplinary action. Repeated violations may result in program discharge.

## Participants Grievances

\*For more information or clarity on this policy, please consult your clinician.

Possible subjects for grievances include, but are not limited to, the quality of care or services provided, aspects of interpersonal relationships such as rudeness of a provider or employee, or failure to respect the mental health participant's rights. Participants may request a formal grievance at any time. If the participant so chooses he or she may receive assistance with the grievance process from:

- A provider who is acting on the participant's behalf, and/or
- The Ombuds office by contacting directly or through referral from a provider, and/or
- Any other individual of his/her choosing.

THS follows the following steps regarding grievances:

- The participant files a grievance with either THS or with King or Snohomish Counties.
- The grievance may be filed either by phone or in writing. Grievances that are initiated by phone must be followed with a written statement of the grievance within seven calendar days.
- The written statement should include, at a minimum:
  - Participant's name;
  - How best to contact him/her;
  - Nature of the grievance, the word "grievance," and
  - Requested resolution to the grievance.
  - The statement shall be signed by the participant (or parent or guardian).
- If no written statement is received on time following a verbal filing, the grievance shall not be continued. However, the participant may file another grievance on the same matter.
- The date of receipt of a grievance is the first business day on which a verbal or written grievance is received by either the KCBHO Participant Services or the provider. If a phone message or letter initiating a grievance arrives on a non-business day, the date of receipt is the next business day.

THS shall acknowledge the receipt of the grievance

- Within one business day of the receipt of the grievance:
- If the participant filed the grievance verbally, he/she shall be both phoned and mailed a letter verifying that the grievance has been received, noting the date of receipt, and informed he/she must also submit a written statement of the grievance; and
- If the participant filed the grievance in writing, he/she shall be mailed a letter verifying that the grievance has been received, noting the date of receipt.

The written acknowledgement shall include:

- The date of receipt of the grievance;
- A description of the grievance process, including timelines and opportunities for participant input; and
- A description of the participant's right to continue services through the grievance process (including provider and KCMHP levels), at the participant's request if the participant is currently receiving services, within certain limits.

THS shall:

- Inform both the participant and King or Snohomish County in writing of its decision about the grievance:
- As expeditiously as the participant's mental health condition requires, and
- No more than 30 calendar days from the date of its receipt;
- Along with this written decision, inform the participant that further review at the county level is available, if requested within five calendar days, and shall provide instructions on how to make this request.

## National Consensus Statement on Mental Health Recovery

Mental Health recovery is a journey of healing and transformation enabling a person with a mental health problem to live a meaningful life in a community of his or her choice while striving to achieve his or her full potential.

### The 10 Fundamental Components of Recovery

- 
- |                                       |                    |
|---------------------------------------|--------------------|
| 1. Self-Direction                     | 6. Strengths-Based |
| 2. Individualized and Person-Centered | 7. Peer Support    |
| 3. Empowerment                        | 8. Respect         |
| 4. Holistic                           | 9. Responsibility  |
| 5. Non-linear                         | 10. Hope           |
- 

#### Background:

Recovery is cited, within *Transforming Mental Health Care in America, Federal Action Agenda: First Steps*, as the "single most important goal" for the mental health services delivery system.

To clearly define recovery, the Substance Abuse and Mental Health Services Administration within the U.S. Department of Health and Human Services and interagency Committee on Disability Research in partnership with six other Federal agencies convened the National Consensus Conference on Mental Health Recovery and Mental Health Systems Transformation on December 16-17, 2004. Over 110 expert panelists participated, including mental health consumers, family members, providers, advocates, researchers, academicians, managed care representatives, accreditation organizations representatives, State and local public officials, and others. A series of technical papers and reports were commissioned that examined topics such as recovery across the lifespan, definitions of recovery, recovery in cultural contexts, the intersection of mental health and addictions recovery, and the application of recovery at the individual, family, community, provider, organizational, and systems levels. The following consensus statement was derived from expert panelist deliberations on the findings.

Mental health recovery not only benefits individuals with mental health disabilities by focusing on their abilities to live, work, learn, and fully participate in our society, but also enriches the texture of American community life. America reaps the benefits of the contributions individuals with mental disabilities can make, ultimately becoming a stronger and healthier Nation.

Recovery is a movement in helping Therapeutic Health Services gear their services to the needs of the community. Participants know when they are better and can be a partner with us in deciding when they are recovered. Our community and more importantly our participant's community can be a vital element to our consumer's long term recovery. In order for Therapeutic Health Services to truly benefit our community, we must get our participant's input about what programs and assistance they need and change our programs to meet those needs. Recovery is an on-going state that has ups and downs and may not have a specific end point. Participants and their families must be equal partners in the work we do in order for it to be successful. People have a natural ability to recover and usually do recover.

## DISCHARGE TRANSITION CRITERIA AND PLANNING PROCEDURES

The purpose of a discharge plan is to prepare the participant served for a seamless transition through levels of care and as he/she completes a treatment program and transitions back into the community

- 1) Discharge/Transition planning is initiated at the time the individual treatment plan is developed with active participation of the person served.
- 2) The discharge/transition plan will be completed with each person leaving the Program to ensure continuity of service. The plan will:
  - a. Identify the person's current:
    - i. Strengths
    - ii. Needs
    - iii. Abilities
    - iv. Preferences
  - b. Be developed with input and participation of:
    - i. The family, when appropriate or permitted.
    - ii. A legally authorized representative when appropriate or permitted.
    - iii. Personnel
    - iv. Referral source, when appropriate and permitted.
    - v. Other community resources, when appropriate and permitted.
  - c. Includes information on the person's medication, when applicable.
  - d. Includes referral source information.
  - e. Includes information on options available if symptoms recur or if additional services are needed.
- 3) A copy of the plan is given to the person served at the time of discharge.

### **THS (Rainier Branch) Drop-In Center Rules & Regulations**

The THS (Rainier Branch) Drop-In Center is located at the Rainier Branch of Therapeutic Health Services (5802 Rainier Avenue South, Seattle, WA 98118). Decisions regarding how the Rainier Branch Drop-In Center is managed are developed in partnership with THS Staff and THS Participants. All participants enrolled at any THS branch is welcome to visit the Drop-In Center. The rules, regulations, and consequences below was developed and approved by THS participants:

1. No foul language allowed.
2. Participants are expected to treat others with respect.
3. No illegal substances allowed.
4. Drop-in Center Hours are from 8am to 2:30pm, Monday through Friday.
5. Participants are allowed in the Drop-in Center after 2:30pm if supervised by THS staff.
6. Participants are expected to clean up after themselves in the Drop-In Center.
7. Participants are expected to be dressed appropriately in the Drop-In Center.
8. Smoking is permitted 25 feet from the entrance of the Drop-In Center. No smoking is allowed on THS property.
9. All THS participants are members of the Drop-In Center.
10. THS staff has the right to refuse services to any participant who violates any of these rules above.

Consequences related to breaking any of the rules and regulations of the THS/Rainier Branch Drop-In Center:

- 1<sup>st</sup> Violation:** Verbal Warning  
**2<sup>nd</sup> Violation:** You will not be allowed to visit the Drop-In Center the following day you are at the Drop-In Center.  
**3<sup>rd</sup> Violation:** You will be banned from the Drop-In Center for 30 days.

Further violations will be discussed with THS/Rainier Leadership Team to determine if the participant will be banned permanently from the Drop-In Center.

Participants who break any of the Drop-In Center's Rules and Regulations at a function sponsored by the Drop-In Center (Example: Juneteenth) will not be allowed to attend the next Drop-In Center function (Example: Harvest Feast).

## Services at THS

Therapeutic Health Services (THS) provides quality treatment for children, youth and families challenged with chemical dependency and mental health disorders. THS was founded in 1972 to meet the growing need for accessible, culturally relevant, and affordable behavioral health services within King County.

At THS, we believe in treatment that deals with the whole person and every aspect of his or her life. Our approach includes a full range of integrated support services such as information/referral, parenting education, vocational rehabilitation, acupuncture, childcare, and day treatment.

THS operates seven locations located in King and Snohomish counties. Our clinicians provide a complete range of primary and supplemental services, including chemical dependency and mental health treatment, language and cultural expertise, family and community support, vocational services, crisis intervention, parenting and communications classes, nutritional education, alternative therapies, housing assistance, and community education. Our staff includes licensed Mental Health counselors, Certified Social Workers, Children Specialists, Certified Chemical Dependency Counselors, physicians, nurses/advanced RN practitioners, acupuncturists, psychiatrists, and psychologists.

Chemical Dependency Treatment	
Assessment and Evaluation	Outpatient and Intensive Outpatient Treatment
Opiate Substitution Treatment	Individual, Group, and Family Counseling
Co-Occurring Disorder Treatment	Pregnancy and Family Recovery Program
Cognitive Behavioral Therapy Groups	Medication Management
Relapse Prevention	DUI, Deferred prosecution, Court Ordered

Mental Health Treatment	
Assessment and Evaluation	Individual, Group, and Family Counseling
Case Management	Psychiatric Evaluation
Medication Management	Children's Assessment and Treatment
Children's School-based Intervention	Day Treatment Activities

Additional Services	
Acupuncture	Child Care
Pre-Vocational and Vocational	Information and Referral



THERAPEUTIC HEALTH SERVICES  
HEALTH & SAFETY INFORMATION

We are committed to your health and well-being and want to provide a safe and healthy treatment environment. Please read the basic safety and emergency procedures below and if you have any questions, please come to the front desk and ask for the Health and Safety Representative.

1. In case of any an emergency, please ensure that you have your current address, phone number and an emergency contact in your most current treatment plan.
2. To achieve a safe environment we have emergency procedures that may result in a drill - fire, earthquake, natural gas leak, chemical spill or bomb threat.
3. In the event of a drill or real emergency, "Attention All Patients, Staff and Visitors" will be announced over the loud speaker and repeated twice. Then the announcement of a drill or actual event will occur. Please calmly exit the building at the closest exit. (We have exit maps posted throughout the facility. Please review them as you access services so that you will know the nearest exit in the event of a drill or actual emergency). Staff will be assisting in the safe evacuation of the building. Patients, staff and visitors will meet outside the facility in the parking lot.
4. THS has a seclusion and restraint policy in the event that a THS client or another individual becomes violent. THS will call 911, staff and clients will be directed to evacuate the area and/or building depending upon the nature of the event, staff will not restrain violent patients or others. Violence or threats of violence will not be tolerated and may result in immediate termination of treatment at THS.
5. Should you witness or be involved in an accident in our facility, please let a staff person know immediately. We'll assist you with obtaining any medical aid you may need and will ask you to complete an "accident report" to ensure that you receive any necessary follow-up care.
6. 24 Hour access for clients in crisis is available via the Crisis Clinic 365 days per year. Individuals and/or clients concerned about a client experiencing an "after clinic hours" emergency can call any THS Branch location and obtain the Crisis Clinic phone number from the THS after hour's voice mail message (this number is also listed in the phone book).

PLEASE REVIEW OUR HEALTH & SAFETY BOARD, PROVIDED FOR YOUR INFORMATION. LOCATED IN THE MEDICAL SERVICES QUEUING AREA, SAFETY INFORMATION IS PROVIDED/ UPDATED QUARTERLY TO REFLECT VARIOUS HEALTH & SAFETY INFORMATION. WE BELIEVE THIS WILL BE HELPFUL FOR OUR PATIENTS. IN ADDITION, ANY CONCERNS, QUESTIONS, OR SUGGESTIONS YOU HAVE REGARDING HEALTH AND SAFETY MAY BE ADDRESSED TO THE BRANCH MANAGER OR HEALTH AND SAFETY REPRESENTATIVE AT YOUR BRANCH.

THANK YOU FOR PARTICIPATING IN THERAPEUTIC HEALTH SERVICE'S HEALTH AND SAFETY PROGRAM.

## After Hours Crisis Response Plan

**IF YOU ARE HAVING A LIFE-THREATENING EMERGENCY, CALL 911 OR GO DIRECTLY TO THE NEAREST EMERGENCY ROOM.**

1. **If Therapeutic Health Services is closed, and you feel that you are in crisis:**
  - (King County) Crisis Clinic 24 hours/day: 206-461-3222/ 866-427-4747/206-461-3219 (TTY)
  - (Snohomish County Everett Branch Participants) Volunteers of America Care Crisis Line 24 hours/day: 425-258-4357/1-800-584-3578
2. **The Alcohol/Drug Hotline from 8am to 10pm: 206-722-3700/ 800-562-1240 (Washington State); 206-722-3724 (TTY)**
3. **For 24 hour support with problem gambling**
  - Call 1-866-789-1511
  - Visit <http://www.warecoveryhelpline.org/>

**Washington Warmline: 1-877-500-WARM (9276)**

## HIV/AIDS Risk Intervention Education Information

### What is HIV?

HIV stands for Human Immunodeficiency Virus. HIV is the virus that causes AIDS. HIV harms the body's immune system. This makes it hard to fight off infection. HIV lives in blood and body fluids (semen, vaginal fluids, and breast milk).

### What is AIDS?

AIDS stands for Acquired Immunodeficiency Syndrome. It is a disease in the last stage of an HIV infection. AIDS is a medical condition where the immune system cannot function properly and protect the body from disease. As a result, the body cannot defend itself against infections. A normal body can usually fight off these infections through a healthy immune system, but if you are HIV positive, HIV slowly destroys the immune system to the point where your body cannot heal itself.

### HIV is passed from one person to another by:

- Having sexual intercourse without a condom with someone who has HIV. This means vaginal and/or anal sex.
- Sharing needles or syringes with someone who has HIV.
- A woman with HIV can pass it to her baby through pregnancy, birth or breastfeeding.

### How can I protect myself and others?

- Choose to not have sex. Use a condom for vaginal and anal sex.
- Do not share needles or other injection equipment.
- Have sex with only one person who you know does not have HIV.
- If you are pregnant and have HIV, talk to your doctor about treatment that can reduce the risk of giving HIV to your baby.
- Alcohol and drug use is associated with high-risk sexual behaviors and injection drug use, two major modes of HIV transmission. Because alcohol and/or drug use typically impairs judgment, one way to reduce your risk of contracting HIV/AIDS is to stay clean and sober.

### Why should I test for HIV?

- HIV is a serious illness. Health experts recommend that everyone between 13 and 64 be tested for HIV. People who know they are infected and get health care have a much better chance of staying healthy and protecting their partners from getting HIV.
- If you have HIV, there are treatments that can help you stay healthy.
- If you have HIV, there are steps you can take to avoid passing the virus to others.
- If you have HIV and are pregnant or thinking of getting pregnant your doctor will help you with treatment that can protect your baby.
- If you do not have HIV, there are things you can do to avoid getting it.

Resources	
Organization	Contact
Lifelong AIDS Alliance	206-328-8979
HIV/AIDS Program (King County)	206-296-4649
HIV/AIDS Services, Snohomish County Health District	425-339-5251

Behavioral Health Organization Resources		
Organization	Address	Contact
King County Behavioral Health Organization (Serving King County BHO) <a href="http://www.metrokc.gov/dchs/mhd/mhp/guide/htm">http://www.metrokc.gov/dchs/mhd/mhp/guide/htm</a>	401 5 <sup>th</sup> Avenue, Ste. 400 Seattle WA 98104-1598	206-263-9000 1-800-790-8049 <b>Ombuds Services</b> 1-800-790-8049 #3 <b>24 hour Crisis Line</b> 1-866-427-4747
North Sound Mental Health Administration Behavioral Health Organization (Serving North Sound BHO; Island, San Juan, Skagit, Snohomish and Whatcom Counties) <a href="http://www.nsmha.org">http://www.nsmha.org</a>	117 N. 1st Street, Suite 8 Mount Vernon, WA 98273-2858	360-416-7013 or 1-800-684-3555 <b>Ombuds Services</b> 1-888-336-6164 or 360-416-7004 <b>24 hour Crisis Line</b> 1-800-584-3578 <b>Regional Access System for Outpatient Services for North Sound Region</b> 1-888-693-7200
State of Washington Department of Health	HSQA Complaint Intake Post Office Box 47857 Olympia, WA 98504-7857	Email: HSQAComplaintIntake@doh.wa.gov
Rights and Advocacy Organizations		
Organization	Address	Contact
Washington Protection and Advocacy System (WPAS)	180 West Dayton, Suite 102 Edmonds, WA 98020	425-776-1199 800-562-2702 425-776-1649 800-905-0209 TTY 425-776-0601 FAX
NAMI Greater Seattle	802 NW 70th Street Seattle, WA 98117	206-783-9264 <b>Hour Help Line</b> 800-782-9264
NAMI-Eastside	16225 Northeast 87th St. Redmond, WA 98052	425-885-6264
King County Office of Civil Rights	400 Yesler Way, Rm 260 Seattle, WA 98104-2683	206-296-7592 206-296-7596 TTY 206-296-4329 FAX
Legal Voice (NW Women's Law Center)	1200 5th Ave, Suite 600, Seattle, WA 98101	206-621-7691 866-259-7720 206-521-4317
King County Bar Association		206-267-7100 206-267-7099 FAX
Washington State Human Rights Commission	711 S. Capitol Way, Ste. 402 Olympia, WA 98504	1-800-233-3247
Aging and Disability Services Administration		1-800-562-6078 1-800-737-7931 TTY
Washington State Ombudsman		1-800-562-6028

King County Authorized Community Mental Health Providers		
Organization	Address	Contact
Asian Counseling & Referral Services	3639 MLK Jr. Way S, Seattle, WA 98144	206-695-7600 <b>Alternate Languages Available:</b> Cambodian, Cantonese, Chiuchow, French, H'mong, Ilocano, Japanese, Korean, Lao, Mandarin, Mien, Samoan, Tagalog, Taglish, Thai, Taiwanese, Toishanese, Vietnamese
Children's Hospital & Regional Medical Center	4800 Sand Point Way NE, Seattle, WA 98105-0371	206-987-5572 New Patients: 206-987-2000 <b>Alternate Languages Available:</b> American Sign Language, Interpreters by request
Community House Mental Health	431 Boylston Avenue E., Seattle, WA 98102-4903	206-322-2387 <b>Alternate Languages Available:</b> Spanish
Community Psychiatric Clinic	11000 Lake City Way NE, Seattle, WA 98125-6748	206-461-3614 <b>Alternate Languages Available:</b> Chinese, French, German, Japanese, Spanish, Tagalog
Consejo Counseling & Referral Services	3808 S. Angeline Street, Seattle, WA 98118-1712	206-461-4880 <b>Alternate Languages Available:</b> Spanish
Downtown Emergency Service Center	515 3rd Avenue, Seattle, WA 98104	206-464-1570 <b>Alternate Languages Available:</b> Spanish
Evergreen Healthcare	2414 SW Andover St D-120, Seattle, WA 98106	206-744-9600 <b>Alternate Languages Available:</b> French, Ilocano, Spanish, Tagalog
NAVOS Mental Health Solutions	2600 SW Holden St., Seattle, WA 98126-3505	206-933-7000 <b>Alternate Languages Available:</b> Interpreters for any language available on request
Sea-Mar Community Health Center	1000117th Place S., Seattle, WA 98168	206-766-6976 <b>Alternate Languages Available:</b> Spanish, Interpreters by request including ASL
Seattle Children's Home	2142 10th Avenue W., Seattle, WA 98119-2899	206-283-3300 <b>Alternate Languages Available:</b> American Sign Language, Greek, Spanish, Vietnamese
Seattle Counseling Service for Sexual Minorities	1216 Pine St., Suite 300, Seattle, WA 98101	206-323-1768 <b>Alternate Languages Available:</b> Cambodian, Chinese, Korean, Laotian, Russian, Spanish, Vietnamese, Language Line for inbound calls and interpreters for sessions
Sound Mental Health	1600 E. Olive St., Seattle, WA 98122-2799	206-302-2200 206-302-2209 TTY <b>Alternate Languages Available:</b> American Sign Language, Interpreters by request
Valley Cities Counseling & Consultation	33301 1st Way South, Federal Way, WA 98003-6252	253-661-6634 <b>Alternate Languages Available:</b> (All Languages) 1-800-682-8242
Valley Cities Counseling & Consultation	325 W. Gowe St., Kent, WA 98032	253-520-9350
YMCA Mental Health Services	909 Fourth Avenue, Seattle, WA 98104	206-382-5340 1-800-760-5340 <b>Alternate Languages Available:</b> Language Link & Interpreters for ASL



## YOUTH AND FAMILY

1901 Martin Luther King Jr. Way South, Seattle, WA 98144 (206) 322 -7676

### New Client Orientation

Welcome to Therapeutic Health Services, Youth and Family. We have been providing culturally relevant services in the Central District since 1973. In 2006, Youth and Family Services merged with Therapeutic Health Services, where we continue to provide a continuum of care for youth and young adult treatment as a “branch” of the larger organization. As a new client there are a few things we would like you to know.

### Hours of Operation

We are open Monday through Thursday from 9:00 am to 6:00 pm and Fridays from 9:00 am to 5:00 pm. We are closed on holidays.

### 24 Hour Crisis Services

Therapeutic Health Services provides crisis intervention for all clients enrolled in the Prepaid Health Plan (PHP). When the agency is closed crisis services are provided through the Crisis Clinic at 206-461-3222. If you call Youth and Family Services after hours you will hear a recording with instructions on how to access crisis care.

### Appointments

It is important to keep all of your appointments. But we know there are times when things come up and you are unable to come in. In that case we ask that you give us 24 hours’ notice so we can schedule other clients. If you miss three scheduled medical appointments you will not be given a new scheduled appointment. Instead you will be asked to come in on “standby.” You will be seen if time permits. If you are not seen you will then receive a scheduled appointment.

### Program Evaluation

Therapeutic Health Services wants to hear from you at the start of your service, review and at the end of your services. The information is then used to improve the quality of our services. At the intake you will receive a “Client Rights” document and instructions on how to file a grievance. This is another way for you to tell us how we are doing.

### Non- Discrimination Policy

It is the policy of THS to provide all treatment to clients without regard to race, color, creed, religion, national origin, sex, age, marital status, sexual orientation, the presence of physical, mental or sensory handicaps, mental illness, military status, HIV/AIDS, developmental disability, criminal background or political beliefs.

### Intake /Assessment

All new clients will be required to complete a screening with the Intake Coordinator. An intake/assessment appointment will be scheduled upon completion of a screening. The assessment process takes about 90 to 120 minutes. After the assessment, you will be assigned to a counselor. It is important that you have your insurance or medical coupon information available to be verified at the screening process. Failure to do so will increase the time it takes for services to begin. A sliding fee agreement can be arranged if you do not have other coverage.

