

CLIENT INFORMATION GUIDE



Enriching lives through wellness, recovery, and hope

Welcome to Southwest Counseling Service

Administrative/ Mental Health

1124 College Drive
Rock Springs, WY 82901
Phone: (307) 352-6680
Fax: (307) 352-6676

Recovery Services

2300 Foothill Boulevard
Rock Springs, WY 82901
Phone: (307) 352-6677
Fax: (307) 352-6614

Bridges Program

2706 Ankeny Way
Rock Springs, WY 82901
Phone: (307) 352-6689
Fax: (307) 352-6692

Green River

175 Riverview Drive
Green River, WY 82935
Phone: (307) 872-3205
Fax: (307) 872-3207

Pinedale Office

120 S. Cole
PO Box 1588
Pinedale, WY 82941
Phone: (307) 367-6445
Fax: (307) 367-6447

www.swcounseling.org

Updated 10/28/2015

**Working Together to Provide
Quality Care**

SCS Code of Ethics for the Treatment of Clients

SCS Code of Ethics are for all SCS employees to adhere to. The code offers a set of values, principles and standards to guide decision-making and conduct when ethical issues arise. In addition, licensed professional staff also adheres to their own professional code of ethics.

1. **Competency:** SCS employees will provide services and represent themselves as competent only within the boundaries of their education, training, license, and/or certification, or receive supervision from individuals who are competent in those interventions and techniques.
2. **Sexual Relationships:** SCS employees will under no circumstances, engage in sexual activities or sexual contact with clients, with whom they have had a therapeutic relationship current or past. SCS employees will not sexually harass clients, colleagues vendors or visitors of SCS.
3. **Physical Contact:** SCS employees will not engage in physical contact with clients and colleagues when there is a possibility of psychological or physical harm as a result of the contact. SCS employees who engage in appropriate physical contact are responsible for setting clear, appropriate and culturally sensitive boundaries that govern such physical contact.
4. **Abuse:** Under no circumstances will SCS employees engage in the physical abuse, physical punishment, sexual abuse, sexual harassment, psychological abuse, or fiduciary abuse of clients.
5. **Conflict of Interest:** SCS employees will be alert to and avoid conflicts of interest that interfere with the exercise of professional discretion and impartial judgment. SCS employees will inform clients when a real or potential conflict of interest arises and take reasonable steps to resolve the issue in a manner that makes the clients' interests primary and protect clients' interests to the greatest extent possible. In some cases, protecting clients' interests may require termination of the professional relationship with proper referral of the client. SCS employees will not engage in dual or multiple relationships with clients or former clients in which there is a risk of exploitation or potential harm to the client. In instances when dual or multiple relationships are unavoidable, SCS employees will take steps to protect clients and are responsible for setting clear, appropriate, and culturally sensitive boundaries.
6. **Informed Consent:** SCS employees will provide services to clients with a valid informed consent which includes purpose of the services, potential risks related to the services, relevant costs, reasonable alternatives, clients' rights to refuse or withdraw consent and the time frame covered by the consent.
 - In instances when clients are not of legal age or lack the capacity to provide informed consent, SCS employees will protect clients' interests by seeking permission from an appropriate third party.
 - In instances when clients are receiving services involuntarily, SCS employees will provide information about the nature and the extent of services relative to the clients' right to refuse services.
7. **Confidentiality:** SCS employees will protect confidentiality of all information obtained in the course of professional services except when legally allowed.

Your Responsibilities

1. Your appointment time is valuable. Please provide 24-hour cancellation of your appointment. If you do not cancel your appointment or provide 24-hour notification, unless an emergency, your appointment will be considered a no-show. After two no show appointments in a three month period, you will be required to utilize open access for future appointments. Open access appointments are scheduled on a first come first serve basis. Support staff is able to provide the times of open access for the clinician you are seeing. Following two consecutive kept appointments you will be able to schedule appointments.
2. Your sliding fee scale payment is expected at each time of service.
3. You are to actively participate in your treatment.
4. SCS facilities are smoke and tobacco free. If you use these products, you must be outside SCS facilities and a minimum of 25 feet from SCS facilities.
5. Drugs/alcohol are not allowed on SCS properties. Prescription and over the counter medications are permitted as long as they are properly labeled or in original container.
6. No weapons are allowed on SCS properties.
7. To maintain the confidentiality of any and all persons I come in contact with while at Southwest Counseling Service.

Language Assistance and Reasonable Accommodation

SCS can assist you if you have a need for language assistance or SCS can make reasonable accommodations if you require supportive services or assistance due to impairment or disability.

Feedback

Your feedback is always appreciated. You may at any time give feedback to your treatment team. Additionally, SCS may request your help to fill out surveys to improve services.

Grievance and Appeal Process

If you have a complaint or believe your rights have been violated, you may file a complaint with SCS. We encourage you to resolve this issue at the lowest level; however, if your concerns continue to be unsolved SCS has an informal and formal grievance procedure. Contact the front desk for a copy of grievance procedures. SCS reserves the right to change our privacy practices and to alter the Privacy Practices. If you have any questions about this notice or would like to obtain additional information regarding your rights under this Privacy Notice, please contact:

Southwest Counseling Service
Privacy Officer
2300 Foothill Boulevard
Rock Springs, WY 82901 (307) 352-6677

Welcome to Southwest Counseling Service

Southwest Counseling Service (SCS) information guild will provide you with important information about being a client of SCS. During your first visit, we will provide you with information about our professional relationship with you.

Consent for Treatment and Financial Agreement & Fee for Service

SCS requires your consent to provide treatment to you and your family. Minors will require the consent of their parents or legal guardian to enter into a treatment relationship.

SCS receives funding from the Wyoming Department of Health resulting in a sliding fee for services; however, the funding provides only a part of the funding required to operate SCS. The balance must come from the individuals receiving services. Full fee for individual services, family, couple therapy is \$200/hour. Full fee for Psychiatrist and Advanced Nurse Practitioner is \$300/hour. SCS will adjust your individualized fee based upon your gross annual income and number of dependents in your household. **You will need to provide proof of income by providing a current pay stub, a copy of your last W-2, or your most current income tax return. You can provide this information at the first visit or within five days of the first visit to receive this benefit.**

You must provide proof of income to receive the benefit of the sliding fee scale. If you choose not to, your fee will be at the highest level for services.

Payment of your sliding fee is required at the time of service. Payment plans are available if you require this. No person will be denied services based solely on their inability to pay for services. A \$10 no show fee will be charged for appointments cancelled with less than 24 hours notice.

If you have health insurance, SCS will bill your insurance company at the full hourly rate before any state or federal funds are used to subsidize your treatment. You will remain responsible for deductibles and co-payments up to your adjusted fee. If your adjusted fee plus insurance payment exceeds SCS's full fee, you will receive a refund as long as charges for all services are paid. Otherwise, overpayments will be applied to other outstanding dates of services. **If you choose not to use your insurance, you will be billed at SCS's full fee.**

If your health insurance requires pre-authorization or a referral for services, please coordinate this with your insurance coverage. Full fee may be charged until all referral requirements are satisfied. Some insurance companies reimburse for selected, eligible providers. SCS cannot guarantee that the provider you see will be eligible for reimbursement by your insurance company though we will do our best make these arrangements.

Confidentiality of Services-Privacy Practices

When you become a client of SCS, you will provide us with information about yourself, your health and your mental health/substance abuse issues. At your first session, a clinical assessment is completed by the clinician followed by a treatment plan that outlines your goals and objectives to improve your behavioral health issues. Each time you receive services, your treatment is documented. SCS is required to protect your confidential information. SCS is also required to accommodate reasonable requests that you make to communicate protected health information. Any time SCS use or discloses your protected health information, SCS must follow the terms of the Health Insurance Portability and Accountability Act (HIPAA).

1. SCS and its professional staff, employees, volunteers and interns follow the privacy practices in this notice and in the Agency's Policies and Procedures. Your treatment may include sharing information among mental health care providers who are involved in your treatment. For example, your clinician may staff your case with a supervisor to ensure that you receive the most appropriate service possible. SCS maintains and protects your information.
2. SCS will limit the use of, disclosure and request of your protected health information; however, there are limitations to this.
3. SCS may use and disclose your protected health information to obtain payment for health care services we have provided to you. For example, we may provide your health insurance carrier the minimum necessary information such as dates of service, procedure codes and diagnosis codes in order to process your insurance claim.
4. SCS may use or disclose your protected health information for our health care operations. For example, we may use or disclose your protected health information to perform assessments, quality assurance reviews, perform risk assessment and peer review to monitor for compliance and quality of care that we provide.
5. SCS will receive your written authorization prior to using or disclosing any protected health information unless required or permitted by law to use or disclose your information. You have the right to revoke any authorization previously granted.

Emergency Services

Emergency Services are available 24 hours a day, 7 days a week.
Call 352-6680; 352-6677 or 875-5515.

Your Rights

1. You have the right to impartial access to treatment, regardless of race, religion, sex, sexual orientation, age, disability, culture, source of financial support, type of mental or substance abuse disorder, criminal history, drug of choice or medical status. If you have any concerns regarding the provision of services or (employment on the basis of handicap), you may contact the Human Resource Manager (504 Coordinator) at 352-6677.
2. You have the right to the respect of your personal dignity and privacy in the provision of all care and treatment. You have the right to treatment without fear of any type of abuse, harassment, punishment, financial or other exploitation, retaliation, humiliation, or neglect. SCS does not use seclusion or restraint.
3. You have the right of confidentiality, including being a client of SCS. Information is shared among SCS staff on a need-to-know basis for the purposes of treatment planning and quality assurance. Client information will be released only with a client's informed written consent except as outlined below:
 - Abuse or harmful neglect of children, the elderly or disabled or incompetent individuals is known or reasonably suspected;
 - The validity of a will of a former patient or client is contested;
 - Information is necessary to defend against a malpractice action brought by the patient or client;
 - An immediate threat of physical violence against a readily identifiable victim is disclosed to the person licensed or otherwise authorized to practice under this act;
 - In the context of civil commitment proceedings, where an immediate threat of self-inflicted harm is disclosed to the person licensed or otherwise authorized to practice under this act;
 - The patient or client alleges mental or emotional damages in civil litigation or otherwise places his mental or emotional state in issue in any judicial or administrative proceeding concerning child custody or visitation;
 - The patient or client is examined pursuant to court order; or in the context of investigations and hearings brought by the patient or client and conducted the board where violations of this act are at issue.
 - For health oversight activities such as regulatory agencies, investigations, audits and inspections.
 - For specialized government functions such as intelligence and national security.
 - To coroners, medical examiners and funeral directors.
 - As required for mandated persons served, regardless of discharge outcome.