

Policy & Client Rights Statement

It is Piedmont Counseling Services policy to provide respectful and humane treatment to all clients. As a recipient of these services, we would like to explain your rights and privileges. Included in this document is the process to report a violation or suspected violation of your rights and privileges.

Your rights as a patient

1. *Complaints.* Report all violations, complaints or suspected violations to any staff member or to Brian Everett, LPC, President of WellSpring Renewal Services at 478 960-5475 or in person at Stanislaus Commons, Suites 207 Vineville Avenue, Macon, Ga. 30204.
You will receive a response within 24-48 hours.
2. *Suggestions.* You are invited to suggest changes in any aspect of the services we provide.
3. *Civil Rights.* Your civil rights are protected by federal and state laws.
4. *Cultural/spiritual/gender Issues.* You may request services from someone with training or experiences from a specific cultural, spiritual, or gender orientation. If these services are not available, we will help you in the referral process.
5. *Treatment.* You have the right to take part in formulating your treatment plan.
6. *Denial of Services.* You may refuse services offered to you and be informed of any potential consequences.
7. *Record Restrictions.* You may request restrictions on the use of your protected health information; however, we are not required to agree with the request. Records concerning services provided under certain contractual agreements with external agencies may be governed by that agency's policies. If this is the case, you will be informed at the time of initiating services.
8. *Availability of Records.* You have the right to obtain a copy and/or inspect your protected health information; however we may deny access to certain records in which we will discuss this decision with you. Records concerning services provided under certain contractual agreements with external agencies may be governed by that agency's policies. If this is the case, you will be informed at the time of initiating services.
9. *Amendment of Records.* You have the right to request an amendment in your records; however, this request could be denied. If denied, your request will be kept in the records. Records concerning services provided under certain contractual agreements with external agencies may be governed by that agency's policies. If this is the case; you will be informed at the time of initiating services.
10. *Medical/Legal Advice.* You may discuss your treatment with your doctor or attorney.
11. *Disclosures.* You have the right to receive an accounting of disclosures of your protected health information that you have not authorized. Records concerning services provided under certain contractual agreements with external agencies may be governed by that agency's policies. If this is the case, you will be informed at the time of initiating services.

Your rights to receive information

1. *Medications Used in Your Treatment.* We will provide you with information describing any potential risks of medications prescribed by any physician contracted through PCS for provision of services.
2. *Costs of Services.* We will inform you of how much you will be required to pay.

3. *Termination of Services.* You will be informed as to what behaviors or violations could lead to termination of services at our clinic.
4. *Confidentiality.* You will be informed of the limits of confidentiality and how your protected health information will be used. Records concerning services provided under certain contractual agreements with external agencies may be governed by that agency's policies. If this is the case, you will be informed at the time of initiating services.
5. *Policy changes.* You will be informed in writing in the event of any changes in policies or procedures affecting services received by you.

Our ethical obligations

1. We dedicate ourselves to serving the best interest of each client.
2. We will not discriminate between clients or professionals based on age, race, creed, disabilities, handicaps, preferences or other personal concerns.
3. We maintain an objective and professional relationship with each client.
4. We respect the rights and views of other mental health professionals.
5. We will appropriately end services or refer clients to other programs when appropriate.
6. We will evaluate our personal limitations, strengths, biases, and effectiveness on an ongoing basis for the purpose of self-improvement. We will continually attain further education and training.
7. We hold respect for various institutional and managerial policies, but will help improve such policies if the best interest of the client is served.

Patient's responsibilities

1. You are responsible for your financial obligations to the clinic as outlined in the PCS Billing Procedures.
2. You are responsible for following the policies of the agency.
3. You are responsible to treat staff and fellow clients in a respectful, cordial manner in which their rights are not violated.
4. You are responsible to provide accurate information about yourself.