



## CLIENT HANDBOOK



Welcome to Arisa Health. Arisa Health brought together four of Arkansas' leading behavioral health providers to form the state's premier integrated behavioral health system. Member affiliates integrate the staff and services of Counseling Associates, Mid-South Health Systems, Ozark Guidance Center and Professional Counseling Associates. This handbook will help you get to know us and the services we provide. If you need more information or have additional questions, please let us know.

### MISSION

We lead with exceptional care that nurtures health and well-being for all.

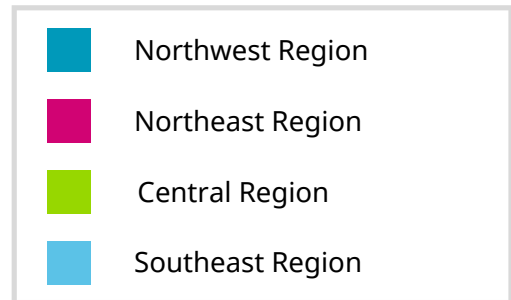
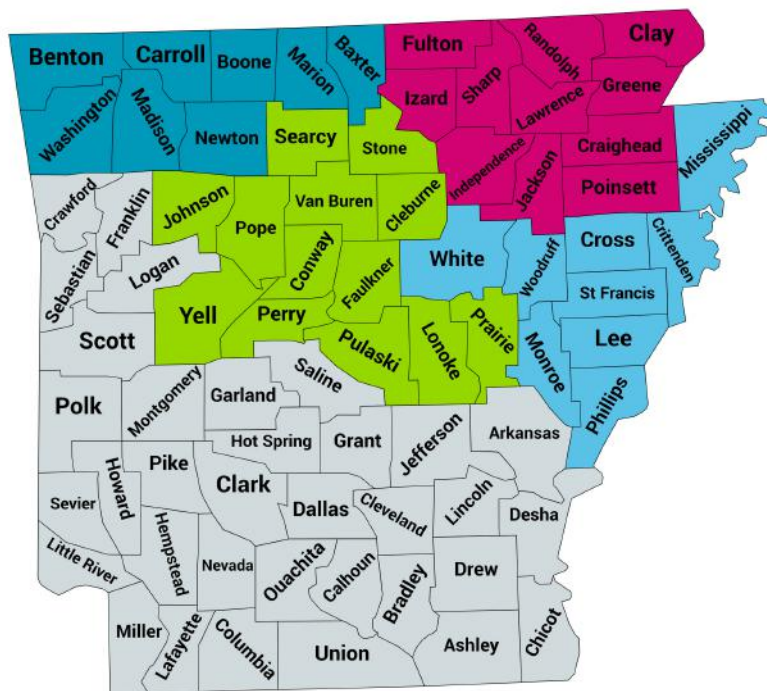
### VISION

Transforming communities one life at a time.



# INTRODUCTION

Arisa Health provides a wide array of behavioral health and primary care services to adults and children in multiple sites throughout 41 counties across Arkansas. Arisa Health and its affiliates are accredited by CARF (Commission on Accreditation of Rehabilitative Facilities) and are approved by the state of Arkansas Department of Human Services to provide behavioral health and substance use services. Arisa Health is organized into four regions:



## CLINIC LOCATIONS, DAYS, AND HOURS OF OPERATION

We have several clinic locations across Arkansas, at least one in each of the 41 counties served by Arisa. The exact address of each clinic can be found on our website at [www.arisahealth.org](http://www.arisahealth.org).

Augusta	Batesville	Bentonville	Berryville
Blytheville	Brinkley	Cabot	Cherokee Village
Clarksville	Clinton	Conway	Corning
Danville	DeValls Bluff	Fayetteville	Forrest City
Harrison	Heber Springs	Helena	Huntsville
Jasper	Jonesboro	Lonoke	Marianna
Marshall	Melbourne	Morrilton	Mountain Home
Mountain View	Newport	North Little Rock	Paragould
Pocahontas	Perryville	Rogers	Russellville
Salem	Searcy	Siloam Springs	Springdale
Trumann	Walnut Ridge	West Memphis	Wynne
Yellville			

The cities with clinic locations are shown in the table to the left. Most of our clinics are open Monday-Friday from 8:00am to 5:00pm. Some clinics operate a few days a week and some clinics have shortened or extended evening hours. Most services will be provided face-to-face, and some services may be available via telehealth. If you have any questions about the days and times clinics are open, please contact us.

## CRISIS LINE INFO BY COUNTY

- Pulaski, Lonoke, and Prairie Counties:  
1-800-592-9503
- Washington, Benton, Carroll, Madison, Baxter, Boone, Marion, & Newton Counties: 1-800-234-7052
- Conway, Faulkner, Johnson, Perry, Pope, Yell Counties: 1-800-844-2066
- Cleburne, Searcy, Stone, Van Buren Counties: 1-800-592-9503
- Craighead, Clay, Randolph, Poinsett, Lawrence, Mississippi, Greene Counties: 1-800-356-3035
- Lee, Phillips, Crittenden, Cross, Monroe, St. Francis Counties: 1-800-382-3117
- Fulton, Independence, Izaard, Jackson, Sharp, Woodruff, White:  
1-800-592-9503
- **Non-Emergency Warm Line:**  
**1-833-236-2131**



## EMERGENCY CRISIS SERVICES

If you are experiencing a life-threatening emergency, call 911 or go to your nearest emergency room. If you are experiencing a mental health crisis, you can present to one of our clinics during business hours and we will help you. You can also call our crisis line phone number for the county where you live OR call 988 to connect directly to the national Suicide & Crisis Lifeline.

## BUILDING ORIENTATION AND SAFETY

When you arrive at our offices, Customer Support Representatives will greet you and provide you with information regarding the clinic. Information regarding the layout of the building including clinical areas, waiting rooms, restroom facilities, and front desk/check out will be provided to you.

Please take a few minutes to review the following procedures for handling a variety of emergency situations. In the event of an emergency or drill, staff will direct you regarding the procedures to follow. There are also Emergency Protocol booklets located throughout each clinic that can be referenced for additional information.

*EXIT SIGNS AND EMERGENCY EVACUATION ROUTES:* Each building has Exit signs. The emergency evacuation routes are posted throughout the building. Please familiarize yourself with the exits and emergency routes in case of an emergency.

*FIRE:* An alarm will sound if there is a fire. Please follow staff instructions for exiting the building and meeting in the designated area. Occasionally, you may be present in the clinic when a fire drill occurs. Please treat the fire drill the same way as if there was an actual fire.

*BOMB THREAT:* In the event of a bomb threat, you may hear the fire alarm sound. We will evacuate the building in same manner as if there is a fire.

*TORNADO WATCH/WARNING:* If the area is under a tornado watch, staff will monitor the weather alerts. If a Tornado Warning is issued, a Tornado Warning will be announced in the clinic. Please follow posted signs and staff instructions and proceed to the designated area. Staff will notify you when it is safe to return to offices or leave the clinic. Occasionally, you may be present in the clinic when a tornado drill occurs. Please treat the tornado drill the same way as if there was a tornado warning.

*INJURY:* If you need basic First Aid, notify a staff person. There are first aid kits stored throughout each clinic. Staff will call paramedics when the injury is serious enough to warrant an ambulance or if you request one be called.



*THREAT OF VIOLENCE:* If there is a violent or threatening situation, staff will attempt to resolve the issue to the best of their ability. Law Enforcement may need to be called and restraint/seclusion may be used in specific programs. You will receive information on restraint/seclusion if those procedures are used in your program.

**Orientation:** Orientation is the first step in receiving care at Arisa Health. The purpose is to clearly explain what you can expect from us and what we will expect from you. It's based on your unique needs and the services to be provided. Some people involved in your service coordination include customer support representatives, mental health professionals (MHP), qualified behavioral health providers, and peer specialists. In most instances, your MHP is the primary contact for care coordination. Upon enrollment to specific programs, you will be provided with an additional orientation that is specific to that program, usually on your first day in the program. The orientation will include things like hours of operations, specific services/activities offered, safety guidelines for that location, specific rules/consequences/expectations/responsibilities, etc. It is also a time to answer any questions you may have about the service or program.

## SERVICES

We help people recover from life's difficulties, work toward their personal goals, and improve their quality of life. We believe that everyone is unique. No two people recover from challenges in the same way. We will respect you as a person and help you find your own path to recovery and wellness. We will focus on "what matters to you" rather than "what is the matter with you." By helping you clarify what matters most to you, we believe this will provide the ongoing motivation to make whatever changes are necessary in all aspects of your life and health. Our treatment focuses on the "whole person," including your mind, body, spirit, surroundings, relationships, abilities, and self-care practices. Arisa accepts Medicaid, PASSEs, Medicare, private insurance, self-pay, and other funding sources if you qualify. The following is a list of services that Arisa can offer. The list is not meant to be all-inclusive, so if you have questions about services we can offer, please reach out.



**Admission:** Some Arisa clinics offer “Same-Day Access” which means that we can see you today for admission. No appointment would be necessary. Depending on the clinic location, we have open access times available for “walk in” appointments. You will be seen by the first available MHP for an assessment. Please call us to determine our same-day access schedule and if you can be seen as early as today to begin services.

**Assessment/Treatment Plan:** During your first visit, you will review and sign Consent to Treat forms that review risks and benefits of treatment, telehealth services offered, required disclosures and other important information. An MHP will complete an Assessment and you will be asked things like how you are feeling, your family’s history, and your psychiatric and medical history. This Assessment will be used to develop a diagnosis, treatment plan, and service recommendations. You will identify goals in your own words to develop a treatment plan with your MHP; however, the plan is yours and should reflect your preferences and goals. Your treatment plan will be reviewed and updated periodically, and we will ask that you provide input to the plan each time. We will also discuss the types of services, number of sessions, and costs of services, so that you can make an informed decision about how to proceed.



**Psychological Testing/Evaluation:** These services use a standardized set of psychological tests for evaluation, diagnostic or therapeutic purposes. All tests must be administered, scored, and interpreted by a qualified professional.

**Individual/Family Therapy:** These will be sessions in which your MHP will work with you to develop skills needed to achieve your goals. These sessions will include opportunities for you to process situations and identify and explore skills to better manage your symptoms. Because we believe that therapy is a vital part of recovery, we ask that you commit to see your MHP regularly. In some cases, therapy services may be provided outside of the clinic, such as in your home, via telehealth, or at school.

**Group Therapy:** These are therapy services provided in a group setting with two or more individuals, and usually there are no more than 12 people per group. Typically group therapy sessions occur once a week. Group therapy focuses on identifying and changing thoughts, emotional responses, and behaviors and often allows people to receive support and encouragement from other group members.

**Psychiatric Services:** A psychiatrist or qualified nurse practitioner is available for an assessment to determine whether medications could be beneficial for you. Should medications be prescribed, your prescriber will continue seeing you to help manage your medications and these appointments may be available via telehealth.

**Primary Care Services:** A full range of medical care that includes comprehensive screening, chronic disease management, treatment of new, non-life threatening conditions and coordination and referral to specialists. Services are provided both in the clinic and also via telehealth when appropriate.

We focus on treating the whole person by recognizing the strong link between mind and body. Our goal is to improve the patient experience through an approach to overall physical and mental well-being.



**Children's Services:** We have many services that are geared specifically to children, such as child and youth support and behavioral assistance. These services are designed specifically for children and/or their caregivers. Your MHP may discuss these types of services that could benefit you and/or your family.

**Crisis Services:** Crisis intervention is used to stabilize a person in crisis and provide services in the least restrictive environment. Arisa provides emergency services by MHPs and other professionals 24 hours a day. We may reach out to you for follow-up after a crisis.

**Court-Ordered Treatment:** Some individuals are required by the legal/court system to participate in treatment. The court may be notified if you no-show, miss or cancel appointments. Additionally, the court may request access to your records, and we will follow our Notice of Privacy Practices regarding records releases.

**Adult Life Skills, Life Skills, Group Life Skills:** These services are provided to help support and provide access to and teach skills to improve your progress in treatment.

**Rehab Day Services:** Rehab Day Services are for individuals who need community support. There are specific criteria to be involved with Rehab Day services, and your MHP may recommend you receive them.

**Peer Support:** Peer Support services are provided by those with lived experience with a mental illness and/or a substance use disorder. Peer Support, Youth Support and Family Support are available based on the needs of persons served.

**Residential Services:** We have a program for adult clients who are referred by the Arkansas State Hospital and are court ordered for treatment. These are our Therapeutic Community programs.

**Substance Abuse Services:** Substance abuse services are available in a variety of settings across Arisa Health, including outpatient, partial day, and residential. You may receive services for substance abuse only or you may receive services for both substance abuse and mental health.

**Partial Day:** Partial Day Treatment is a structured daily program that requires the client's participation in the treatment regimen determined at the assessment appointment.

**Residential Services:** We have residential programs for clients who have substance abuse problems that cannot be treated through outpatient or partial day services. These programs are only for adults aged 18 and above.

**Additional Services:** We may be able to offer additional services not listed here. If you have questions about the services we offer or if we can offer a specific service, please ask us. If you need access or referral to legal entities for appropriate representation, self-help support services, and advocacy support services, please contact a member of your treatment team.

## TRANSITION/DISCHARGE

You may leave, change services, or discontinue services whenever you choose (except if there are specific legal reasons to receive treatment). Transition, discharge, and follow up planning will begin at the beginning of your treatment and will continue to be reassessed throughout the treatment process. This is a collaborative effort between you and your treatment team. There are transition and discharge criteria for each program. Once you have progressed through treatment to the extent that services are no longer needed or recommended, your treatment team will assist with any referrals or follow up care to help ensure your continued success.



## TREATMENT POLICIES

**Information Updates:** Please let us know if any information about you changes such as your insurance coverage, your address, phone number, email address, or emergency contact. It is important that we keep the most up to date information in our system for you so that we can contact you.



**Appointments/Cancellations/No-Shows:** Keeping your appointments is a key factor in the success of your treatment. If you need to cancel an appointment, call as soon as possible to let us know. Appointments not cancelled at least 24 hours in advance are considered a no-show. If you no-show for one appointment or late-cancel two appointments you will be placed in the “cancel protocol,” meaning you must be temporarily “worked in” to available appointment times rather than being able to reserve a time that is most convenient for you.

**Reminder Calls/Texts:** We utilize a reminder service for appointments. We will try to remind you two days before your upcoming appointment. If you do not confirm your appointment time, we will send another reminder. You do have the choice to opt out of receiving reminders. If you choose to do this, let us know.

**Late Arrival:** Please call if you believe you are going to be late for your appointment so that we can determine if you can still be seen. Clients are asked to arrive at least 15 minutes prior to their scheduled appointment to allow time for check-in and complete any required paperwork updates. If you arrive more than 5 minutes late to an appointment, you may need to reschedule. Please consult with your provider about specific guidelines at the location where you receive treatment.



**Family Involvement:** Family involvement is encouraged to the extent that it is desired by you and is allowed by your insurance. If you are an adult and want your family to participate in treatment, be sure to sign a Release of Information form and talk to your MHP about how you would like them involved. For clients under 18, there is an expectation that families will be involved in the child’s treatment.

**Safety/Loss of Privileges/Care Restrictions:** Arisa strives to provide the safest and most supportive environment to you, other clients, associates and visitors. Arisa may choose to terminate your care or treatment based on any of the following: 1) lack of continued progress in treatment, or pattern of non-compliance with treatment recommendations; 2) aggressive, hostile, rude, belligerent, or threatening behavior to associates, other clients, or

visitors; 3) conflicts of interest or dual relationships that significantly impair the therapeutic process and 4) no other Arisa provider or program can adequately and safely meet your needs. Other programs may have specific loss of privileges that are discussed with you at the time you enter the program.

**Non-Violent Practices/Emergency Intervention Procedures:** It is our belief that clients, associates, and other clients benefit from an environment that is free from threats to their safety. Recognizing that there are times when clients may show fear, anger, or pain which may lead to agitation or aggression, it is acknowledged that therapeutic intervention may be required to ensure the safety of all persons involved. Arisa associates are expected to respond to persons served who are agitated, aggressive, or assaultive in a manner that ensures the safety of staff and other persons served. This may require the use of Crisis Prevention Institute (CPI) methods of de-escalation and/or calling law enforcement authorities.

In some programs, such as Therapeutic Day Treatment and Therapeutic Communities, restraints and seclusions are used only in emergency situations when there is imminent risk of danger to self or others. You will be notified if the program you are attending is allowed to use restraints and/or seclusions in an emergency.

**Tobacco:** All Arisa facilities and grounds are tobacco-free environments. You will be notified if you are in a program with an exception to this policy. We are also able to offer tobacco cessation resources. Please ask us about these if you have an interest.

**Weapons:** In accordance with the Concealed Handgun Law, carrying of handguns and/or other weapons is strictly prohibited on all Arisa property.

**Alcohol and Drugs:** Alcohol, illegal drugs, and drugs not prescribed to you are not permitted on any Arisa property.

**Transportation:** Arisa is not responsible for transportation to and from medical appointments. There may be limited exceptions to this. We can help arrange transportation if needed or requested by you for your appointments. We may also be able to offer you an appointment via telehealth if transportation is a barrier.

**Medical Services:** Arisa is not responsible for the cost of medical services provided to you or children in our programs. We can help arrange medical services if needed, requested by you or in an emergency. We may be able to offer you access to primary care at an Arisa clinic if that is convenient for you.

**Prescription and Over the Counter Medication:** Properly identified, state compliant labeled, and medication specifically prescribed to you may be brought to Arisa in some instances. It may only be administered by you (the client) or a physician or nurse. Arisa requires certain clients to participate in medication compliance packaging. Common over the counter medications may be provided in certain programs. We do not accept over the counter medications from an outside source or from you.

**Inclement Weather:** During inclement weather, please consider your safety and ability to travel to our clinics. If we close, we will attempt to make notifications via our phone lines/messaging system, local news channels, website, and social media. Appointments may be switched to telehealth during inclement weather. Please call our clinic to determine if your provider is available in person or via telehealth.

**Payment:** We ask that you make your payment at the time you receive services or when scheduling a service. In the event you are unable to pay your entire bill, arrangements for a payment plan can be made. Arisa Health does not exclude any person from treatment due to inability to pay; ongoing participation in care may require seeking other funding sources to cover the cost of your services and/or a signed financial agreement.

- You are responsible for payment of any copays, deductibles, coinsurance, balances, and services not otherwise paid by your insurance.
- You are responsible for obtaining any necessary referrals required for treatment. Without a PCP referral, you may be responsible for the cost of services provided to you or your child.
- A discounted sliding fee charge may be available based on income and family size. Arisa staff can help you determine if you qualify.
- You are responsible for notifying us of any changes in income, family size, or insurance.
- If full or agreed upon payment isn't received at the time of service, future appointments will not be scheduled until payment is made. Crisis services will continue to be available as needed.
- You authorize the release of any necessary medical information to process your insurance claims for you. This is a courtesy to you, and we make every effort to check eligibility and place you with a covered provider/service, but this isn't a guarantee of payment. Please keep in mind that your insurance is a contract between you and your carrier, and we will ultimately look to you for payment.

**Medicaid:** Arkansas Medicaid requires that you complete all necessary forms, consents, and may require an Independent Assessment to receive services. In some instances, Medicaid requires a referral from your Primary Care Physician (PCP) to receive services. Children in services may be required to complete a yearly well-child check appointment with their PCP. Families of children are required to participate in family therapy to ensure the best treatment outcomes.



## ADDITIONAL SUPPORTIVE INFORMATION FOR SUBSTANCE ABUSE CLIENTS

### **HIV/AIDS and Sexually Transmitted Disease (STD) Information:**

Please visit this website for more information regarding HIV/AIDS and STD Information. If you would like this information printed for you, please let us know.

<https://www.cdc.gov/std/hiv/stdfact-std-hiv-detailed.htm>

### **Tuberculosis (TB) Fact Sheet:**

Please visit this website for more information regarding TB. If you would like this information printed for you, please let us know.

<https://www.cdc.gov/tb/publications/factsheets/general.htm>

### **The ABCs of Hepatitis**

Please visit this website for more information regarding Hepatitis. If you would like this information printed for you, please let us know.

<https://www.cdc.gov/hepatitis/index.htm>

### **Pregnant Women and Drug Use**

Please visit this website for more information regarding pregnancy and drug use. If you would like this information printed for you please let us know.

<https://www.cdc.gov/reproductivehealth/maternalinfanthealth/substance-abuse/substance-abuse-during-pregnancy.htm>

## ADDITIONAL INFORMATION AND RESOURCES

**Advance Directives:** An advance directive is a document that lets us know what your preferences are for treatment, in the event you are unable to tell us. If you do not have one, additional information is available for you. Please ask us for it.



**Mandated Reporting:** All Arisa providers are mandated reporters and are bound by policies and procedures, as well as law, to report any instances of suspected abuse or neglect of a child or vulnerable adult.

**Boundaries:** It is important to us to provide you the best quality care in an ethical and caring way. Boundaries are limitations we place on our staff's relationships with clients to practice ethical standards and to provide the best quality care. Associates may only have professional relationships with clients as defined within their job responsibilities and may not have personal relationships with clients. These limits apply to associate relationships with all clients and former clients.

- Special favors: Associates may not accept or give special favors.
- Gifts: Associates may not give or accept gifts.
- Personal or financial gain: Associates may not enter any type of financial or business relationship with you.
- Self-disclosure, Socializing and Friendship: Associates may not socialize with you unless the interaction is specifically part of a program function. Associates may not "friend" a client on social media (Facebook, etc.)
- Physical Contact and Sexual Relations: Associates may never have sexual relations with you even if it does not involve physical touch.

**Access to Records:**

Our Notice of Privacy Practices is available on our website and is posted in each clinic. You have the right to obtain copies of your records or request your records be sent to others. You must first complete a Release of Information and specify what records can be released and to whom. There are charges associated with releasing these records.

The charges are as follows:

- Client to Self: Email \$6.50 (limited to 25Mb);
- Client to Self: Pick Up \$6.50 (up to 20 pages, additional fees start at page 21);
- Client to Personal Representative Email: \$6.50 (Limited to 25Mb);
- Client to Others: Email \$15.00 (Limited to 25Mb); Fax \$15.00 (Maximum 25 pages); Mail \$6.50 (up to 20 pages, additional fees start at page 21) plus Shipping

Forms of Payment Include: Money Order, Debit/Credit Card (There is a \$3.50 processing fee for the use of debit/credit card). Payable only to Tina Lee, ROI Spec. A.M.R.S.

# CLIENT RIGHTS AND RESPONSIBILITIES

## *Your Rights:*

- To have informed consent and expression of choice regarding: service delivery, release of information, concurrent services, and the composition of the service delivery team.
- To refuse certain treatment or medicine unless required by law to receive it.
- To receive care that respects personal dignity, cultural and personal values, beliefs, and privacy.
- To receive treatment based on individual characteristics, needs, abilities, and preferences regardless of your race, religion, gender, sexual orientation, ethnicity, age, or disability.
- To have information about your treatment kept confidential with the limits of the law. This includes what is said to staff members and what is recorded in your medical record.
- To receive care that is needed, if available.
- To know the name and qualifications of the staff member(s) who are helping.
- To know why treatment is changed from one staff person to another.
- To know why a referral to a new program is made.
- To understand why a referral away from Arisa Health is needed.
- To access your health record and pertinent health information in sufficient time to facilitate your decision making.
- To request an amendment to your health information.
- To obtain information on disclosures of your health information.
- To be told about:
  - Treatment and any rules that must be followed, including privacy rights, use of crisis procedures, seclusion, restraint, special treatment interventions, and/or restrictions of rights (and reinstatement of those rights).
  - Discharge plans.
  - Treatment choices when they are available.
  - Risks and benefits of the treatment that seems best.
  - Risks, benefits, and side effects of medicine.
  - When a law requires a staff member to recommend treatment that is not requested or wanted.
  - Professional standards that require changes in the treatment plan.
  - The cost of treatment and if there are other ways to pay for treatment.
  - Service limits.
- To have information presented in way that is clear and understandable to you. This includes translation services as necessary and communication needs of those with vision, speech, hearing, language, and cognitive impairments.

- To help decide what treatment is needed. For clients under the age of 18, a family member or legal guardian will be asked to help.
- To be informed if treatment is recorded, videoed, or observed.
- To give or withhold written consent if treatment is recorded.
- To have the right to ask for a second opinion at your own expense
- To have a surrogate decision-maker involved in your care decisions.
- To ask for treatment plan review by staff members of Arisa Health.
- To be involved in research if you want to participate; and agree in writing to participate after you have been told about the research. You will be told about possible risks and benefits. Adherence to research guidelines and ethics will be followed. You have the right to refuse to take part. If you do not participate, it will not change your ability to get treatment from Arisa Health.
- To review rules and regulations of Arisa Health.
- To ask for help with referrals.
- To be informed about outcomes of care and serious unanticipated events.
- To be free from psychological, physical, sexual and verbal abuse, neglect, and exploitation (including financial), harassment, coercion, and/or intimidation.
- To be free from retaliation and humiliation.
- To access or receive referral to legal entities for appropriate representation, self-help support services, protective and advocacy services.
- To exercise citizenship privileges including arrangements to vote (foster and residential care).
- To an investigation and resolution of alleged infringement of rights.
- If you have a concern or complaint that cannot be resolved at the level of care you are in, please contact the client advocate in your area.

*Your Responsibilities:*

- Taking an active role in the outcome of your care. This is done in part by providing, to the best of the your ability, accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other matters relating to psychiatric health; reporting unexpected changes in your condition to the responsible practitioner; reporting whether you comprehend a contemplated course of action and what is expected; actively developing and participating in your plan of care; and complying with use of medication as prescribed.
- Participating in the development of and following agreed upon treatment plan.
- Keeping appointments and notifying the responsible practitioner when you are unable to do so.
- Assuring that the financial obligations of care are fulfilled as promptly as possible.

- Following applicable policies affecting your care and conduct.
- Being considerate of the rights of others and for assisting in the control of noise, smoking, and number of visitors.
- Being respectful of the property of other persons and of Arisa Health.
- Refusing or not following approved treatment may result in a notice to terminate the relationship between the client and the client's treatment team.

*Client rights for pre-school and school aged children are available upon request.*

## CLIENT RIGHTS AND RESPONSIBILITIES - SUBSTANCE USE DISORDER SERVICES

*In addition to the above, specific rights exist for clients seeking substance use treatment.*

- To be fully informed, as evidenced by a client's written acknowledgment, of the rights, responsibilities, rules and regulations that apply to the client's conduct and the consequences of non-compliance with treatment.
- To the receipt of adequate and humane services, regardless of sources of financial support.
- To the receipt of services within the least restrictive environment possible.
- To receive an assessment that is used to develop an individual comprehensive treatment plan.
- To participate in the planning of his/her treatment plan and to treatment based on same.
- To a periodic staff review of your treatment plan.
- To access or amend your record in accordance with the HIPAA laws.
- To an adequate number of competent, qualified and experienced professional clinical staff to implement and supervise the treatment plan.
- To be informed of treatment alternatives or alternative modalities.
- To be encouraged and assisted throughout treatment to understand and exercise his/her rights as a client and a citizen, including:
  - The right to report any cases of suspected abuse, neglect, exploitation of clients being served in the program, in accordance with applicable State law and abuse reporting procedures.
  - The right to a grievance and appeal process.
  - The right to recommend changes in policies and services.
- To be informed regarding the financial aspects of treatment, including the consequences of nonpayment of required fees.
- To be informed of the extent to and limits of confidentiality, including the use of identifying information for central registry and/or program evaluation purposes.
- To receive a copy of consent for a release of confidential information after the form is signed by you.
- To not be used for the solicitation of funds or other contributions to the program.



- To communicate with family and significant others outside the program including:
  - To conduct private telephone conversations with family and significant others, unless otherwise justified in the client's case record and explained to the client.
  - To send and receive mail in uncensored condition. Mail may be inspected in the presence of a staff member.
- To be informed if visitors are expected at the program.
- To appeal treatment decisions made by staff in accordance with the program's grievance policy.



## CONFIDENTIALITY

Arisa's Notice of Privacy Practices is available on our website and is posted at each clinic. This details how and when we can disclose your protected health information. Please let us know if you would like a copy of the notice.

## SATISFACTION SURVEYS

At least once a year, Arisa conducts client satisfaction surveys. We ask that you participate in this process as your answers to the survey questions help us improve. Once you are discharged from services, we may also send you a survey to complete about the services you received. You are not required to participate in any survey. Your participation or lack of participation or how you answer survey questions will not impact your ability to continue to receive services or impact your ability to receive services in the future.

## GRIEVANCES/COMPLAINTS/APPEALS

Clients may appeal treatment decisions, restrictions, or recommendations at any time by contacting the Client Advocate. Any person served, next of kin, family member, or legal representative of clients may file a grievance as a formal notice of dissatisfaction regarding facility operations, treatment services, and/or staff actions. All opinions, suggestions and grievances that are seriously and conscientiously submitted will be evaluated with the intent of improving services, facilities, programs, and operations.

### **How to file a Grievance or Complaint:**

1. Try to solve the issue through open communication with the person by contacting the staff involved and notifying them of a problem. You may also ask to speak to a supervisor. If your problem is still not resolved, you can make a formal grievance by contacting the Client Advocate in the region where you receive services. Staff can assist you with this process if you need help.
2. Our organization will investigate your grievance and work to get it resolved. Once we have done this, we will contact you by phone or in writing to let you know what we have found. We will try to settle your grievance as soon as possible and to your satisfaction.
3. You have the right to file a complaint/grievance if there is evidence of discrimination because of race, color, creed, religion, gender identification, age, sex, sexual orientation, place of national origin, or compliance with the Americans with Disabilities Act.

#### **Client Advocates by Region:**

Jan Chism: 870-238-1135 (Southeast Region)  
Annette Hufstedler: 870-972-4000 (Northeast Region)  
Erin Willcutt: 479-968-1298 (Central Region)  
Jared Sparks: 479-750-2020 (Northwest Region)

