BERKELEY COMMUNITY MENTAL HEALTH CENTER ORIENTATION INFORMATION



WELCOME TO THE BERKELEY COMMUNITY MENTAL HEALTH CENTER!

<u>Hours</u>: Mon - Fri 8:00am – 6:00pm

AFTERHOURS EMERGENCY: (843) 761-8282 –or– 911

<u>Deaf/Hard of Hearing:</u> 1-800-647-2066 <u>Рноме:</u> (843) 761-8282, or 1-888-202-1381

<u>ADDRESS:</u> 403 Stoney Landing Rd., Moncks Corner, SC 29461

WEBSITE: www.BerkeleyMentalHealth.org

TODAY, YOUR RECOVERY BEGINS!

We are so glad that you chose to receive your specialty treatment from us. The dedicated staff of this Center is committed to helping you achieve every health goal you set for yourself. We can't wait to meet you and join you on this journey to health and recovery! This packet provides you with some of the basics to get you started, but if you ever need help just ask any member of the staff. *We're here to help!*

OUR MISSION

The men and women of the Berkeley Community Mental Health Center in partnership with patients, families, and their diverse communities, will support the recovery of citizens with mental illness.

OUR VALUES

- Respect for the Individual
- Support for Local Care
- Professionalism and a Commitment to Quality

This Orientation Booklet is only a brief introduction to the types of Services and Programs we offer. Please ask a staff member or visit our website for more information!

information!

OUR PRIORITIES

The Center will give priority to adults and children with serious mental illnesses and serious emotional disturbances and will fulfill its legislative mandates. We will work cooperatively with other agencies, both public and private, to assure continuity of services based on the needs of the individual.



CODE OF PROFESSIONAL CONDUCT

The Professional staff of the Berkeley Community Mental Health Center adheres to a strict code of professional and ethical conduct. This code is posted in every office of our center. We have an obligation to protect you from discrimination, professional abandonment, conflicts of interest, exploitation, abuse, and financial impropriety. We will be honest with you and protect your rights and confidentiality.

YOUR TREATMENT

Today, you will participate in an assessment to determine the types of difficulties that you are having and how these things are affecting your life. You are encouraged to invite people important to you to the assessment appointment

Based on the findings of the assessment, a team of professionals will be assigned to work with you to develop a Plan of Care that lists your goals and the steps we will help you take to accomplish them. You may meet with a counselor for Individual, Family or Group therapy, depending on your needs. We believe a combination of these treatments helps people recover faster, and your agreement to participate in therapy is required for you to receive medications.

If you have been court ordered to treatment, we have a legal obligation to report your progress in treatment to the court periodically.

You will be scheduled to meet a Doctor or Nurse Practitioner who will meet with you to determine if medications may help your symptoms. You will meet with a Nurse between Prescriber visits to make sure your medications are still helpful.

You may also be connected with one of our Care Coordinators, Employment or Peer Support Specialists for extra support during your treatment.

Our Center uses a Level of Care system to match your current needs with the right amount and types of treatment. If needed, you will receive additional services to help you. As your

symptoms and functioning improves, you will step-down to a lower level of care (fewer sessions per week or month) and when your treatment goals are accomplished, your treatment will end.

Of course, if symptoms ever come back, you can return to the Center for treatment.

Recovery is possible! Mental Illness can be treated!

PATIENTS' RIGHTS

- 1. As an individual receiving mental health services, you are entitled to certain rights as an integral part of the healing process.
- 2. You have the right to be treated with dignity, consideration and respect and free from exploitation by any employee.
- 3. You have the right to participate in the formulation of your treatment plan, the right to information concerning treatment including alternatives, and the right to request re-evaluation of treatment.
- 4. You have the right to refuse treatment to the extent permitted by law after being informed of the consequences of this action.
- 5. You have the right to have your records treated in a confidential manner except where the laws require disclosure.
- You have the right to read your records if requested.
 A professional staff member will be present to interpret and answer questions.
- You have the right of self-referral. You do not have to be referred to the Center by another agency or person.
- A single assessment interview with an individual 16 or 17 years old is possible without parental/guardian consent and without cost.
- 9. You have the right to request an explanation of charges and examine your bill, as well as, request a re-evaluation if there is a change in your financial status.

If you feel your rights have been violated or you have a request/complaint, please contact:

Berkeley Community Mental Health Center Patient Advocate

P.O. Box 1030

Moncks Corner, SC 29461

Telephone: (843) 761-8282 or 888-202-1381 or DMH 1-866-300-9330

- 10. If you feel any of your rights have been violated or have a request/complaint about the Center, it is your right to report the violation and to express the request/complaint.
- 11. You have the right to make complaints/comments or express your beliefs without fear of losing services or negative reaction from staff.



Confidentiality

State and Federal laws protect your privacy and the confidentiality of your medical record. The Mental Health Center follows all of these laws to keep your personal information and the things you talk about in treatment safe.

Be aware that in some instances, that staff are required by law to release information: Any time someone is in immediate, serious danger, any time a child or a vulnerable person is being abused or neglected, in medical emergencies, and when a court orders us to (this includes if you have been court ordered to treatment.)

To ensure confidentiality, photography and recording are prohibited on Center grounds.

Please review the HIPAA Notice of Privacy Practices at the end of this packet for more information.

WHAT IS EXPECTED OF YOU AS A PATIENT?

- 1. It is important for you to keep your scheduled appointments. If you are unable to keep an appointment, please call the Center to cancel that appointment and reschedule.
- 2. You will work with your counselor and doctor to meet your goals. We need you and your family to talk openly with us about your problems, ideas, concerns and feelings so we can help you. Participate in your treatment plan and work with your counselor or doctor to get the most out of your treatment.
- 3. Because we are a full-service Mental Health Provider, you will be able to receive all the services you need from our center. Because of this, we request that you not participate in treatment services with outside providers during your treatment here.
- 4. Throughout your treatment, you will continually work on a discharge/transition plan with your counselor and/or doctor.
- 5. Please let staff know if you do not understand something that they are saying.
- 6. If you are going to run out of medications that we prescribe you, please let the staff know 7 days ahead of time, so we can make sure you don't run out.
- 7. Please let the staff know if you need help with physical challenges (wheelchairs, walkers, an interpreter, assistance with hearing, vision, etc.)
- 8. Treat other people in the Center with dignity and respect.
- 9. Please tell a staff person if you see anything that could hurt someone while you are at the Center.
- 10. Be Safe. If your behavior becomes dangerous to the safety of yourself or others, we may need to modify your treatment plan for safety purposes. We want you to be a part of this process, but if you disagree with the treatment plan, you may request that a clinical supervisor review it.
- 11. Obey the law. Weapons, alcohol and street drugs are prohibited on Center property.

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- 12. If you use tobacco products or e-cigs, they are only to be used in designated areas outside of the building. Talk to your counselor about how we can help you quit tobacco products.
- 12 You are expected to pay for your services on the day they are provided. We will work with you and your insurance carrier to develop a payment plan if you need it. If your financial situation changes, let us know.
- 13 Please do not leave children alone in the Center. A responsible adult must supervise children at all times. The staff at the Center is not responsible for supervising children.
- 14. All Patients and Visitors of the center must be accompanied by a staff member anytime they are not in the lobby.

Service Name	Minutes/Unit	Rate/Unit
Crisis Intervention	15 min	\$50.00
MH Assessment by Non-Physician	30 min	\$89.00
Individual Therapy	Encounter	\$88.00 - \$265.00
Family Therapy (patient present/not present)	Encounter	\$263.00/\$264.00
Group Therapy	Encounter	\$84.00
Psychosocial Rehabilitation Services (rates based on staff credentials)	15 min	\$10.00 - \$26.00
Initial Psychiatric Diagnostic Evaluation (PDE) by MD	Encounter	\$601.00 - \$661.00
Subsequent PDE – MD	Encounter Encounter	\$125.00 - \$397.00 \$66.00 - \$195.00
Subsequent PDE – APRN	21100 011101	+00100 +170100
Nursing Services	15 min	\$48.00
Injection Administration	15 min	\$25.00
Injectable Medication Administration	Billed by Medication	N/A
MH Service Plan Development by Non- physician	15 min	\$44.00
Service Plan Development/Interdisciplinary Team	Encounter	\$88.00
Care Coordination	15 min	\$42.00
Peer Support Service	15 min	\$15.00

HOW WE BILL OUR SERVICES

We are required to charge fees and collect payment for the services we provide. We will bill your insurance carrier for you, but you will be responsible for any deductibles, copayments, or remaining balance. Please talk with one of our account specialists if you would like to discuss a payment plan. Please be aware that South Carolina law demands that if you do not pay your bill with the center, your South Carolina Tax refund can be garnished until your fees are paid.

SAFETY AT THE CENTER

Our first priority is to the safety and comfort of our patients and visitors.

Evacuation Routes are posted and Fire Extinguishers/First-Aid kits are hung throughout the center. In the event of an emergency, staff members will guide you to the nearest exit.

For safety reasons, we may ask to search any of your personal **belongings** that you bring to the center.

Medications that you bring to the center or that the center provides to you are for your use only. Keep them in a cool, dry, safe place out of the reach of others.

Alcohol, drugs, firearms or weapons of any kind are not permitted on the property. Local law enforcement may be called if weapons or illegal substances are brought to the center. Individuals who are intoxicated will not be eligible to receive counseling services on that date.

It is NOT the policy of the Berkeley Community Mental Health Center to seclude or restrain patients. However, in a psychiatric emergency when a person's behavior may be dangerous to him/herself or someone else, the staff will act to keep everyone safe. Law enforcement may help in these situations. Children may be temporarily held to prevent themselves from harming themselves or others, and we ask for the parent/guardian to be involved in this process. Any questions you have about safety can be answered by a staff member.

The Center is sensitive to the rights of patients to receive services in a **safe**, **dignified environment**. We strive to adjust your environment to meet your needs for safety, confidentiality and dignity at all times. You may be restricted from participation in some situations to keep you and others around you safe. If for safety reasons, your or your children's rights have to be restricted, you may regain those rights by requesting your treatment team and/or patient advocate review and approve the restoration of those rights.

If you see something you do not think is safe, please let staff know right away! Poison Control Hotline: 1-800-222-1222

ADVANCE DIRECTIVES

The purpose of an Advance Directive for Mental Health Treatment document is to empower you to make your treatment preferences known should you become incapacitated or otherwise unable to make psychiatric decisions for yourself. It can help to improve communication between you and your doctor, you and other staff, and you and your family members involved in your recovery. Having a psychiatric advance directive may even shorten a hospital stay or help you avoid one altogether. Talk to your Counselor about developing an Advance Directive.