



Welcome New Patient!

My staff and I would like to personally thank you for choosing Integrity Rehab for your therapy needs. We are pleased to assist you along your path to recovery. Our top priority is helping you achieve your optimum health.

We recognize that ultimately it's your choice where to go for rehabilitation, so we're determined to provide you with the best therapy experience around. Integrity Rehab's staff and past patients have even recommended our services to their own family members. We make every effort to ensure that your experience lives up to our name and reputation of integrity.

Your first physical therapy appointment will take 60 minutes. Please feel free to invite someone to accompany you to your appointments if doing so will make you feel more comfortable. This initial evaluation/treatment of your condition may include:

- Review of your medical history.
- Measurement of your pelvic floor muscle function with biofeedback equipment. These instruments record your muscle activity and help evaluate and treat your pelvic floor muscles.
- Musculoskeletal and pelvic floor muscle exam. This may include an internal assessment of your pelvic floor muscles.
- Exercise instruction for pelvic floor and other muscle groups as indicated.

Return visits for therapy will be scheduled at regular intervals to measure your progress and modify your exercise program as needed. These appointments are important in order to progress your treatment program.

If prior to your evaluation you have any questions about insurance, scheduling or treatment, please give us a call. We look forward to providing you with healthcare to improve your condition very soon.

Sincerely,

Jeanice Mitchell, MPT, BCB-PMD
Licensed Physical Therapist
Board Certified Biofeedback - Pelvic Muscle Dysfunction

Email: jmitchell@integrityrehab.net

Phone: 254-699-3933



New Patient Policies

Please scroll down and review policies A through J. You will be asked at your appointment to sign that you have read and understand all policies.

A. Policy on Cancelled and Missed Appointments

We make every attempt to schedule patients in the following manner:

- 1) Times which are most convenient for them
- 2) Placing them with the appropriate clinician
- 3) Placing them with the same clinician(s) for consistency

To do so, we must be able to rely on patients to attend appointments as scheduled, unless adequate notice is given. Therefore, our policy on cancelled/missed appointments is as follows:

- Any appointment cancelled with less than **24 hours notice will result in a \$25.00 fee**. Exceptions will be made at our discretion for instances of illness, family emergency, etc. This fee can NOT be billed to your insurance company. You are 100% responsible for this fee.
- **Any missed appointment (without 24 hours notice) will result in a \$25.00 fee.**
- Arriving 10 minutes late (or more) for an appointment may be considered a forfeit of the appointment (at the clinician's discretion)
- Two consecutive missed appointments (without notifying us) will result in removal from the schedule and possible discharge from therapy at Integrity Rehab
- Three cumulative (total) missed appointments or cancellations will result in removal from the schedule and possible discharge from therapy at Integrity Rehab.
- In extenuating circumstances, you may appeal to the Clinic Administrator at jmitchell@integrityrehab.net.

We appreciate your courtesy and cooperation. If you have any questions or concerns, please do not hesitate to discuss them with the Clinic Administrator.

B. Child Policy

Adults Participating in Rehab:

1. Children are NOT permitted in the gym area or in private treatment rooms.
2. You may **NOT** bring more than two children to the clinic at one time and they must have adult supervision at **ALL** times in the front lobby. Any child under 13 yrs of age will require adult supervision.
3. You may bring a friend to watch your child during your appointment, but they both must sit in the waiting area during your therapy session.
4. Children must be well behaved. If at any time the staff feels that your child is being disruptive, you may be asked to leave for that day.

Families with Children in Rehab:

1. Siblings are permitted in the gym or private treatment rooms with adult supervision only.
2. Siblings are NOT permitted on therapy equipment.
3. You may bring a friend to watch your child's siblings during the appointment, but they all must stay in the waiting area during your child's therapy session.
4. Children and siblings must be well behaved. If at any time the staff feels that your child is being disruptive or destructive, you may be asked to leave for that day.

It is our purpose to assist you in achieving your goals through therapy in order to return to full function, but we must do so in a safe and productive environment. Please make it your priority to ensure the safety of yourself, your child, our patients, and our staff. If the child policy is not followed appropriately or if your child interferes with your therapy, you may be asked to re-schedule your visit for another time when you can make arrangements for childcare.

Thank you for your time and understanding.

C. Cell Phone Policy

Please refrain from using your cell phone during your therapy session, as we at Integrity Rehab would like to promote a relaxing and healing environment for our patients. Cellular phones may also create interference with electronic equipment in the clinic.

We appreciate your courtesy and cooperation. If you have any questions or concerns, please do not hesitate to discuss them with the Clinic Administrator.

D. PF-1000 Notice of Privacy Practices

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION.

PLEASE REVIEW IT CAREFULLY.

Uses and Disclosures

Treatment. Your health information may be used by staff members or disclosed to other health care professionals for the purpose of evaluating your health, diagnosing medical conditions, and providing treatment. For example, results of laboratory tests and procedures will be available in your medical record to all health professionals who may provide treatment or who may be consulted by staff members.

Payment. Your health information may be used to seek payment from your health plan, from other sources of coverage such as an automobile insurer, or from credit card companies that you may use to pay for services. For example, your health plan may request and receive information on dates of service, the services provided, and the medical condition being treated.

Health care operations. Your health information may be used as necessary to support the day-to-day activities and management of Integrity Rehab. For example, information on the services you received may be used to support budgeting and financial reporting, and activities to evaluate and promote quality.

Law enforcement. Your health information may be disclosed to law enforcement agencies to support government audits and inspections, to facilitate law-enforcement investigations, and to comply with government mandated reporting.

Public health reporting. Your health information may be disclosed to public health agencies as required by law. For example, we are required to report certain communicable diseases to the state's public health department.

Other uses and disclosures require your authorization. Disclosure of your health information or its use for any purpose other than those listed above requires your specific written authorization. If you change your mind after authorizing a use or disclosure of your information you may submit a written revocation of the authorization. However, your decision to revoke the authorization will not affect or undo any use or disclosure of information that occurred before you notified us of your decision to revoke your authorization.

Additional Uses of Information: Appointment reminders. Your health information will be used by our staff to send or call you with appointment reminders.

Information about treatments. Your health information may be used to send you information that you may find interesting on the treatment and management of your medical condition. We may also send you information describing other health-related products and services that we believe may interest you.

Fund-raising. Unless you request us not to, we will use your name and address to support our fund-raising efforts. If you do not want to participate in fund-raising effort, please check off the following box.

Please do not use my information for fund-raising purposes.

Individual Rights. You have certain rights under the federal privacy standards. These include:

- The right to request restrictions on the use and disclosure of your protected health information

- The right to receive confidential communications concerning your medical condition and treatment
- The right to inspect and copy your protected health information
- The right to amend or submit corrections to your protected health information
- The right to receive an accounting of how and to whom your protected health information has been disclosed
- The right to receive a printed copy of this notice

Integrity Rehab Duties. We are required by law to maintain the privacy of your protected health information and to provide you with this notice of privacy practices.

We also are required to abide by the privacy policies and practices that are outlined in this notice.

Right to Revise Privacy Practices. As permitted by law, we reserve the right to amend or modify our privacy policies and practices. These changes in our policies and practices may be required by changes in federal and state laws and regulations. Upon request, we will provide you with the most recently revised notice on any office visit. The revised policies and practices will be applied to all protected health information we maintain.

Requests to Inspect Protected Health Information. You may generally inspect or copy the protected health information that we maintain. As permitted by federal regulation, we require that requests to inspect or copy protected health information be submitted in writing. You may obtain a form to request access to your records by contacting receptionist or Lisa Lott. Your request will be reviewed and will generally be approved unless there are legal or medical reasons to deny the request.

Complaints. If you would like to submit a comment or complaint about our privacy practices, you can do so by sending a letter outlining your concerns to:

**Jeanice Mitchell
Integrity Rehab
PO Box 10340
Killeen, TX 76547**

If you believe that your privacy rights have been violated, you should call the matter to our attention by sending a letter describing the cause of your concern to the same address.

You will not be penalized or otherwise retaliated against for filing a complaint.

Contact Person. The name and address of the person you can contact for further information concerning our privacy practices is:

**Jeanice Mitchell
Integrity Rehab
PO Box 10340
Killeen, TX 76547
254-699-3933**

Effective Date

This notice is effective on or after July 20, 2003.

E. Advance Directives Policy

POLICY

Integrity Rehab recognizes the importance of patients participating in planning care and of their right to accept or refuse treatment. Integrity Rehab will provide all patients with the Integrity Rehab's advance directives policy before the start of care:

- The Integrity Rehab recognizes that all persons have the fundamental right to make decisions about their own medical treatment. This includes the right to accept or refuse care, treatment or services.
- The Integrity Rehab recognizes that when the patient is not legally responsible, the surrogate decision maker has the right to refuse care, treatment and services on the patient's behalf.
- Valid advance directive will be followed to the extent permitted and required by law.
- Integrity Rehab will request from the patient a copy of his/her Advance Directive to ensure Integrity Rehab staff understands patient wishes.
- In the absence of an advance directive, Integrity Rehab will provide care according to the Plan of Care established by the physician and in consultation with patient/responsible party.
- Integrity Rehab will not condition the provision of care or discriminate against the patient based on whether or not an advance directive has been established.
- The patient has the right to revoke or change an advance directive at any time. The patient will need to notify Integrity Rehab of any changes made.
- If Integrity Rehab cannot, for any reason, carry out the patient's advance directive, they will notify the patient/caregiver and, if necessary, assist the patient to find an alternate provider.
- Integrity Rehab will communicate directive to all staff participating in patient care.
- If Advance Directive does not identify the patient's wish to withhold resuscitation and there is no physician order to do so, Integrity Rehab staff will initiate CPR in event of Cardio Pulmonary Arrest.

F. Employee Drug Testing Policy

Integrity Rehab & Home Health promotes a drug-free environment and reserves the right to randomly test employees for drugs and/or alcohol. Employees are not allowed to work if they are impaired by drugs, alcohol, or controlled substances.

Purpose:

- To provide public information material on the drug testing of employees.
- To assure that staff are not impaired while working.
- To establish a system for identifying, reporting, and investigating problems if they occur.

Special Instructions:

- The drug testing policy will be provided to any person requesting the information.
- Employees will be informed both verbally and in writing of the drug testing policy.
- On admission, patients will be given a copy of the drug testing policy.
- **Patients will be encouraged to notify the clinic if a staff member shows signs of impairment on the job.**
- Employees who refuse to submit to drug and/or alcohol testing will be terminated.
- **The Administrator or designee may require drug and/or alcohol testing at random, at the request of a patient, when an employee shows signs of impairment or after any accident or occurrence that result in an injury on the job as defined by OSHA.**
- Positive results will be referred to the Administrator or designee for disposition and follow-up.
- Disciplinary action may include counseling, suspension, rehabilitation, peer review, referral to the licensing board, or termination.
- Documentation will be kept confidential except as required by the law.

G. Human Resources Code Chapter 102 Rights of the Elderly

Sec. 102.001. DEFINITIONS. In this chapter:

(1) "Convalescent and nursing home" means an institution licensed by the Texas Department of Human Services under Chapter 242, Health and Safety Code.

(2) "Home health services" means the provision of health service for pay or other consideration in a patient's residence regulated under Chapter 142, Health and Safety Code.

(3) "Alternate care" means services provided within an elderly individual's own home, neighborhood, or community, including:

(A) Day care;

(B) Foster care;

(C) Alternative living plans, including personal care services; and

(D) Supportive living services, including attendant care, residential repair, or emergency response services.

(4) "Person providing services" means an individual, corporation, association, partnership, or other private or public entity providing convalescent and nursing home services, home health services, or alternate care services.

(5) "Elderly individual" means an individual 60 years of age or older.

Added by Acts 1983, 68th Leg., p. 5159, ch. 936, Sec. 1, eff. Sept. 1, 1983. Amended by Acts 1985, 69th Leg., ch. 264, Sec. 25, eff. Aug. 26, 1985; Acts 1991, 72nd Leg., ch. 14, Sec. 284(20), (30), eff. Sept. 1, 1991; Acts 1995, 74th Leg., ch. 76, Sec. 8.101, eff. Sept. 1, 1995; Acts 1997, 75th Leg., ch. 475, Sec. 1, eff. Sept. 1, 1997.

Sec. 102.002. PROHIBITION.

(a) A person providing services to the elderly may not deny an elderly individual a right guaranteed by this chapter.

(b) Each Integrity Rehab that licenses, registers, or certifies a person providing services shall require the person to implement and enforce this chapter. A violation of this chapter is grounds for suspension or revocation of the license, registration, or certification of a person providing services.

Added by Acts 1983, 68th Leg., p. 5159, ch. 936, Sec. 1, eff. Sept. 1, 1983. Amended by Acts 1985, 69th Leg., ch. 264, Sec. 26, eff. Aug. 26, 1985; Acts 1997, 75th Leg., ch. 475, Sec. 1, eff. Sept. 1, 1997.

Sec. 102.003. RIGHTS OF THE ELDERLY.

a) An elderly individual has all the rights, benefits, responsibilities, and privileges granted by the constitution and laws of this state and the United States, except where lawfully restricted. The elderly individual has the right to be free of interference, coercion, discrimination, and reprisal in exercising these civil rights.

(b) An elderly individual has the right to be treated with dignity and respect for the personal integrity of the individual, without regard to race, religion, national origin, sex, age, disability, marital status, or source of payment. This means that the elderly individual:

- (1) Has the right to make the individual's own choices regarding the individual's personal affairs, care, benefits, and services;
- (2) Has the right to be free from abuse, neglect, and exploitation; and
- (3) If protective measures are required, has the right to designate a guardian or representative to ensure the right to quality stewardship of the individual's affairs.

(c) An elderly individual has the right to be free from physical and mental abuse, including corporal punishment or physical or chemical restraints that are administered for the purpose of discipline or convenience and not required to treat the individual's medical symptoms. A person providing services may use physical or chemical restraints only if the use is authorized in writing by a physician or the use is necessary in an emergency to protect the elderly individual or others from injury. A physician's written authorization for the use of restraints must specify the circumstances under which the restraints may be used and the duration for which the restraints may be used. Except in an emergency, restraints may only be administered by qualified medical personnel.

(d) A mentally retarded elderly individual with a court-appointed guardian of the person may participate in a behavior modification program involving use of restraints or adverse stimuli only with the informed consent of the guardian.

(e) An elderly individual may not be prohibited from communicating in the individual's native language with other individuals or employees for the purpose of acquiring or providing any type of treatment, care, or services.

(f) An elderly individual may complain about the individual's care or treatment. The complaint may be made anonymously or communicated by a person designated by the elderly individual. The person providing service shall promptly respond to resolve the complaint. The person providing services may not discriminate or take other punitive action against an elderly individual who makes a complaint.

(g) An elderly individual is entitled to privacy while attending to personal needs and a private place for receiving visitors or associating with other individuals unless providing privacy would infringe on the rights of other individuals. This right applies to medical treatment, written communications, telephone conversations, meeting with family, and access to resident councils. An elderly person may send and receive unopened mail, and the person providing services shall ensure that the individual's mail is sent and delivered promptly. If an elderly individual is married and the spouse is receiving similar services, the couple may share a room.

(h) An elderly individual may participate in activities of social, religious, or community groups unless the participation interferes with the rights of other persons.

(i) An elderly individual may manage the individual's personal financial affairs. The elderly individual may authorize in writing another person to manage the individual's money. The elderly individual may choose the manner in which the individual's money is managed, including a money management program, a representative payee program, a financial power of attorney, a trust, or a similar method, and the individual may choose the least restrictive of these methods. A person designated to manage an elderly individual's money shall do so in accordance with each applicable program policy, law, or rule. On request of the elderly individual or the

individual's representative, the person designated to manage the elderly individual's money shall make available the related financial records and provide an accounting of the money. An elderly individual's designation of another person to manage the individual's money does not affect the individual's ability to exercise another right described by this chapter. If an elderly individual is unable to designate another person to manage the individual's affairs and a guardian is designated by a court, the guardian shall manage the individual's money in accordance with the Probate Code and other applicable laws.

(j) An elderly individual is entitled to access to the individual's personal and clinical records. These records are confidential and may not be released without the elderly individual's consent, except the records may be released:

(1) To another person providing services at the time the elderly individual is transferred;
or

(2) If the release is required by another law.

(k) A person providing services shall fully inform an elderly individual, in language that the individual can understand, of the individual's total medical condition and shall notify the individual whenever there is a significant change in the person's medical condition.

(l) An elderly individual may choose and retain a personal physician and is entitled to be fully informed in advance about treatment or care that may affect the individual's well-being.

(m) An elderly individual may participate in an individual plan of care that describes the individual's medical, nursing, and psychological needs and how the needs will be met.

(n) An elderly individual may refuse medical treatment after the elderly individual:

(1) Is advised by the person providing services of the possible consequences of refusing treatment; and

(2) Acknowledges that the individual clearly understands the consequences of refusing treatment.

(o) An elderly individual may retain and use personal possessions, including clothing and furnishings, as space permits. The number of personal possessions may be limited for the health and safety of other individuals.

(p) An elderly individual may refuse to perform services for the person providing services.

(q) Not later than the 30th day after the date the elderly individual is admitted for service, a person providing services shall inform the individual:

(1) Whether the individual is entitled to benefits under Medicare or Medicaid; and

(2) Which items and services are covered by these benefits, including items or services for which the elderly individual may not be charged.

(r) A person providing services may not transfer or discharge an elderly individual unless:

(1) The transfer is for the elderly individual's welfare, and the individual's needs cannot be met by the person providing services;

(2) The elderly individual's health is improved sufficiently so that services are no longer needed;

(3) The elderly individual's health and safety or the health and safety of another individual would be endangered if the transfer or discharge was not made;

(4) The person providing services ceases to operate or to participate in the program that reimburses the person providing services for the elderly individual's treatment or care; or

(5) The elderly individual fails, after reasonable and appropriate notices, to pay for services.

(s) Except in an emergency, a person providing services may not transfer or discharge an elderly individual from a residential facility until the 30th day after the date the person providing services provides written notice to the elderly individual, the individual's legal representative, or a member of the individual's family stating:

- (1) That the person providing services intends to transfer or to discharge the elderly individual;
- (2) The reason for the transfer or discharge listed in Subsection (r);
- (3) The effective date of the transfer or discharge;
- (4) If the individual is to be transferred, the location to which the individual will be transferred; and
- (5) The individual's right to appeal the action and the person to whom the appeal should be directed.

(t) An elderly individual may:

- (1) Make a living will by executing a directive under the Natural Death Act (Chapter 672, Health and Safety Code);
- (2) Execute a durable power of attorney for health care under Chapter 135, Civil Practice and Remedies Code; or
- (3) Designate a guardian in advance of need to make decisions regarding the

individual's health care should the individual become incapacitated.

Added by Acts 1983, 68th Leg., p. 5159, ch. 936, Sec. 1, eff. Sept. 1, 1983. Amended by Acts 1997, 75th Leg., ch. 475, Sec. 1, eff. Sept. 1, 1997.

Sec. 102.004. LIST OF RIGHTS.

(a) A person providing services shall provide each elderly individual with a written list of the individual's rights and responsibilities, including each provision of Section 102.003, before providing services or as soon after providing services as possible, and shall post the list in a conspicuous location.

(b) A person providing services must inform an elderly individual of changes or revisions in the list.

Added by Acts 1983, 68th Leg., p. 5159, ch. 936, Sec. 1, eff. Sept. 1, 1983. Amended by Acts 1997, 75th Leg., ch. 475, Sec. 1, eff. Sept. 1, 1997.

Sec. 102.005. RIGHTS CUMULATIVE.

The rights described in this chapter are cumulative of other rights or remedies to which an elderly individual may be entitled under law.

Added by Acts 1997, 75th Leg., ch. 475, Sec. 1, eff. Sept. 1, 1997.

H. Disaster / Emergency Information

POLICY

Integrity Rehab will develop and maintain a written disaster preparedness plan describing the process for disaster readiness and emergency management. The outcome of this plan is to insure the safety and well-being of patients and employees during periods of a disaster/emergency that disrupts clinic services.

A disaster is defined as any natural or man-made event that significantly disrupts the environment of care. A disaster also requires extra assistance beyond those needed to respond to everyday emergencies.

- A natural disaster would include adverse conditions such as floods, tornadoes, hurricanes, blizzards, storms, earthquakes, etc.
- Man-made or human-generated disasters include war, chemical, biological,

radiological, and nuclear terrorism, transportation accidents, group violence, food or water contamination, deforestation, building collapse,

- Hazardous materials that are released could pose a potential risk to life, health, or property.
- Terrorist acts using weapons or/and chemical, biological, radiological, and nuclear agents have one key element in common – violence or the threat of violence.
- Internal emergencies may result from the disaster/emergency, such as loss of communications systems, loss of utilities, and staffing shortages.

PREPAREDNESS

1. Verbal and written information will be given patients as to the process in the event of a disaster or emergency.
2. Suggested personal emergency supplies needed in case of disaster
 - a. A 3-day supply of water (1 gallon per person per day) and food that will not spoil.
 - b. One change of clothing and protective footwear per person, and one blanket or sleeping bag per person.
 - c. A first-aid kit that includes your family's prescription medications.
 - d. Emergency tools including a battery-powered radio, flashlights, and plenty of extra batteries.
 - e. Candles and matches
 - f. An extra set of car keys and a credit card, cash, or traveler's checks, picture identification, proof of address
 - g. Sanitation supplies, including toilet paper, soap, feminine hygiene items, and plastic garbage bags
 - h. Special items for infant, older adult, or disabled family members
 - i. An extra pair of eyeglasses
3. For further "Family Disaster Planning" brochures contact FEMA at 1-800-480-2520 (www.fema.gov) or The American Red Cross Chapter at (254) 200-4400 (www.redcross.org)

RESPONSE

1. The Disaster Preparedness Plan will be implemented as soon as the Integrity Rehab becomes aware of the existence of an emergency or disaster.
2. In the event of an emergency or disaster, listen to your radio or television for up to date information. In case of power failure use your battery powered radio for news and instructions.
3. Integrity Rehab will do all within their ability to maintain communication and coordinate services with patients.
4. The Administrator will be designated the Emergency Supervisor. They will initiate patient triage and determine the level of care and emergency needs of all patients served by the clinic.
5. Patient Care Staff will be contacted as soon as possible via telephone to receive assignments based on patients needs.
6. Patients will be called to find out their needs and will be given information regarding staff visit availability.
7. Follow information given on the DISASTER/EMERGENCY PREPAREDNESS PLAN.

I. Abuse, Neglect and Exploitation Policy

POLICY

It is the policy of this Integrity Rehab that all employees and independent contractors shall report suspected signs of abuse, neglect and/or exploitation of a patient to an Integrity Rehab supervisor and the appropriate State Integrity Rehab.

PURPOSE

To protect the health, safety and welfare of the Integrity Rehab's patients and families.

DEFINITIONS

ABUSE

- "Abuse" means: The negligent or willful infliction of injury, unreasonable confinement, intimidation, or cruel punishment with resulting physical and/or emotional harm or pain.
- Sexual abuse, including any involuntary or non-consensual sexual conduct that would constitute an offense under Section 21.08, Penal Code (indecent exposure) or Chapter 22, Penal Code (assaultive offenses) or sexual exploitation.

NEGLECT

- The absence, omission, or failure to provide essential services, including medical services, which are necessary to avoid physical or emotional harm or pain or the failure of a caretaker to provide such goods or services.

EXPLOITATION

- The illegal or improper act or process of a caretaker, family member, or other individual who has an ongoing relationship with a person using the resources of such person for monetary or personal benefit, profit or gain without the informed consent of such person.

DOMESTIC VIOLENCE

- An act by a member of the family or household against another member of the family or household that is intended to result in physical harm, bodily injury, assault, or sexual assault or that is a threat that reasonably places that member in fear of imminent physical harm, bodily injury, assault or sexual assault, but does not include defensive measures to protect oneself.

PROCEDURE

- All Integrity Rehab employees and contractors have the responsibility to report immediately any signs of suspected abuse, neglect or exploitation of an individual by another Integrity Rehab employee or contractor, family member or caregiver or other licensed professional to the Integrity Rehab's Administrator, Supervising Nurse or designee, who will in turn notify the appropriate State agencies.

COMMON INDICATORS

The following are a list of common indicators for abuse/neglect in children and adults. The presence of these findings is an indication that the situation needs further investigation and **should be used only as a guide:**

- **Common indicators of abuse/neglect in children:**

- ✓ Unexplained or poorly explained physical injuries (bruises, burns)
 - ✓ Vaginal and/or anal soreness, tears, bruises, frequent UTI's
 - ✓ Inappropriate sexual behavior in prepubescent children
 - ✓ Self inflicted injuries and suicide attempts
 - ✓ Aggression and impulsive destructive behavior
 - ✓ History of nightmares, sleep disorders, enuresis, encopresis
 - ✓ Failure to thrive symptoms that are not explained by family's socioeconomic status
 - ✓ Resisting or flinching during physical examination
- **Common indicators of abuse/neglect in dependent adults:**
 - ✓ Unexplained or poorly explained physical injuries
 - ✓ Reluctance to speak freely when caregiver or family members present.
 - ✓ Poor personal hygiene, pressure ulcers, medication noncompliance
 - ✓ Symptoms of dehydration or malnutrition
 - ✓ Symptoms of depression
 - ✓ Suicidal ideation/attempts
 - ✓ Unexplained withdrawals from patient funds

**ABUSE HOTLINE OF THE TEXAS DEPARTMENT OF FAMILY & PROTECTIVE SERVICES
(PRS) 1-800-252-5400**

SERVING VICTIMS OF DOMESTIC VIOLENCE & SEXUAL ASSAULT KILLEEN-254-634-1184 TOLL FREE 1-888-799-SAFE

J. Patient and Clinic Responsibilities

PATIENTS and/or FAMILIES/PARENTS/GUARDIANS HAVE THE RESPONSIBILITY:

- To carry out the plan of care, as instructed, to arrive at the highest possible level of health and level of wellness and independence.
- To treat clinic personnel with courtesy without discrimination as to race, color, creed, national origin or handicap.
- To provide the clinic with current accurate information regarding health care needs and reimbursement information essential to provision of services.
- To participate to the extent possible in decisions regarding the development, implementation and revision of the health care plan.

- For informing the clinic on a timely basis of any dissatisfaction or questions about clinic services.
- For providing written consent to for release of information which is essential to the provision of our reimbursement of services.
- For prompt payment in accordance with their financial responsibility or for informing the clinic on a timely basis of any difficulty in payment and requesting arrangement for a satisfactory payment schedule.
- To inform the clinic administrator of physician appointments, medication or other changes in the plan of care so that the therapists may provide the most current and up to date health care plan.

UNANTICIPATED INTERRUPTION IN SERVICE:

- The clinic uses its best effort to provide uninterrupted services. However, sometimes interruptions are unavoidable. During interruption of essential services, the patient, family, and/or parent/guardian agree to provide for or arrange back-up care as necessary. The clinic will assist in arranging an appropriate emergency facility.

THE CLINIC HAS THE RESPONSIBILITY:

- To provide therapy services under the direct orders of a physician. Clinic personnel may not take orders from a patient, family, and/or parent/guardian regarding patient care treatments, procedures, medications, etc.
- Scheduling services through the clinic office. The patient, family, and/or parent/guardian are encouraged to contact the clinic administrator for questions, concerns, input, and schedule requests.
- Most payer sources do not cover therapy services while the patient is in the hospital. The clinic is not responsible for the care of a patient while he/she is hospitalized unless otherwise arranged by the payer source.
- Therapy programs do not intend for the therapist to take the place of the parent/guardian or caregiver.

Patient Rights

Therapy patients have the right to be notified in writing of their rights before treatment is initiated. In the case of a patient adjudged incompetent, the rights of the patient are exercised by the person appointed by law to act on the patient's behalf. In the case of a patient who has not been adjudged incompetent, any legal representative may exercise the patient's rights to the extent permitted by law. Therapists have a responsibility to protect and promote the rights of their patient.

The patient has the right to:

- Exercise his or her rights as a patient of the clinic.
- Have assistance in understanding and exercising his or her rights.
- Be informed in advance of the care to be furnished, the plan of care, expected outcomes, barriers to treatment, and any changes in the care to be furnished.

- Receive verbal and written information regarding advance directives before care is provided.
- Refuse care and services.
- Participate in the planning of his or her care or treatment and in planning changes in the care or treatment.
- Mutual respect and dignity.
- Have his or her person and property treated with consideration and full recognition of his or her individuality and personal needs.
- Appropriate care regardless of race, color, religion, national origin, sex, age, or handicap.
- Freedom from physical, mental, sexual, and verbal abuse, neglect or exploitation.
- Confidentiality of personal and medical records as well as information about his or her health, social, and financial circumstances.
- Request a change in caregiver without fear of reprisal or discrimination.
- Voice grievances regarding treatment or care. See “Complaint/Grievance Process” form (in admission folder) for specific instructions.
- Be informed in advance of the extent to which payment may be expected from the patient, third-party payers, and any other source of funding known to the clinic.
- Financial information related to services.
- Have access, upon request, to all bills for service the patient has received regardless of whether they are paid out-of-pocket or by another party.
- Rights of the elderly (over age 60). See Human Resources Code, Chapter 102 in the admission folder.