

115 E. 16th Street | Idaho Falls, ID 83404 | t. 208.523.6727 | f. 208.523.6729

# **INFORMED CONSENT**

IHCC provides all participants access to Informed Consent documents. Participants acknowledge they have been educated about Informed Consent on the admission form, and may access a copy in one of the following ways:

- Request a written copy
- Request an emailed copy
- Access the electronic version through our webpage at <a href="htt://www.ihccinc.com">htt://www.ihccinc.com</a>

The Informed Consent document addresses the following issues:

## What are my "rights" when receiving Services from IHCC?

#### I have the right to the following:

- To obtain services
- To refuse services
- To choose my service provider
- To be involved in the development of my treatment/care plan and agree with the elements on my plan
- To make changes to my treatment/care plan
- To meet with my provider at times and dates that are convenient and acceptable to me
- To have family members involved in my treatment
- To receive the most effective evidence-based treatment
- To ask my provider about my services and how they are provided
- To receive services that are ethically provided
- To be informed of the cost of my services
- To ask questions when I do not understand information or processes
- To receive services that are high in quality and consistent with my individual choices, interests, needs, and current standards of practice
- If applicable, to receive skill-training activities that are conducted in natural settings where I would commonly learn and utilize the skill (home, community, etc.)
- The right to make informed choices about opportunities, treatment, and training in my life
- To be interacted with in a respectful manner and to be recognized as the primary decision maker in my care
- To access the appropriate reports and records to support and ensure informed decision making and continuity of care
- To have my confidentiality protected
- To choose how I want to be contacted. For example, I can choose to receive or not to receive text messages, phone calls, or emails and I have the right to inform you of my choice
- To prompt and accurate completion of notes and records
- To contact the Program Director for any concerns or dissatisfaction with services:
  - o Dustin Potter (208) 523-1130

## What are my responsibilities in receiving Services?

- To be involved in my care and the development of my treatment plan.
- To follow through with recommendations from my provider and participate in my care



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# Integrated Services Center

- To keep appointments with my therapist, doctor, and service providers and inform them in advance if I am unable to keep an appointment
- To notify my therapist, doctor, and service providers of any changes that may affect my rehabilitation and/or services (change in income, loss of Medicaid, etc.)
- To maintain confidentiality (not talk about) regarding other clients I may know
- To give 30 days' notice if possible, to my assigned staff if I want to change to another agency (this will allow time to process all paperwork and make sure there is a smooth transition)

## What are the responsibilities of my Provider?

- To participate in the development of my plan and care goals, at my request
- To allow me to be the primary decision maker
- To maintain confidentiality about me and my services
- To not exchange information about me or my plan with others unless I have signed an information release and given written consent
- To give me a 30-day notice if they will no longer work with me
- To help me find a new agency if that becomes a need
- To provide training, education, and role modeling in the following areas:
  - 1) Options for treatment and types of services I can use
  - 2) Ways I can participate in my treatment
  - 3) Coping strategies for dealing with behavioral health issues
- To provide skill building services in my natural environment (where I usually spend my time) if applicable
- To be available if a crisis arises. IHCC will provide 24-hour on call crisis assistance
  - 1) The crisis phone number is available on our office voice message as well as below:
    - IHCC Crisis Line (208) 589-IHCC (4422)

#### Nature of Services offered by IHCC:

IHCC offers an integrated program, addressing patient's needs both medically and behaviorally. We offer the following services:

#### Primary Medical Care

IHCC provides medical care by a licensed medical provider for day-to-day healthcare needs. The provider acts as the first contact and principal point of continuing care for patients, and coordinates other specialist care that the patient may need.

#### **Behavioral Medicine**

IHCC can provide support to address behaviors that affect your health. For example, weight management can be addressed through behavioral therapy in conjunction with medical support in order to reduce risks associated with diabetes, or a patient may want to work on smoking cessation. This is a service we can provide to our primary care patients.

#### Medication Management

Pharmacological management is utilized to help increase functioning and increase a patient's ability to participate successfully in daily life and meet individual goals. A provider prescribes medications based on reported symptoms, assessment and diagnosis, and treatment planning.



#### Psychotherapy:

Treatment methods using a specialized, formal interaction between a qualified professional and an individual, family or group in which a therapeutic relationship is established, maintained, or sustained to understand unconscious processes, or intrapersonal, interpersonal, and psychosocial dynamics, or the diagnosis and treatment of mental, emotional, and behavioral disorders, conditions, and addictions. Treatment may be provided face to face or under special circumstances, may be provided through a HIPAA compliant electronic exchange system called Telemental Health.

## Neuropsychological or Psychological Testing:

Standardized evaluations and tests to determine diagnosis and effective treatment recommendations.

#### Case Management:

Support with linking and coordinating the participant to services and monitoring the effectiveness of services.

#### Targeted Care Coordination:

Specific to members of the Youth Empowerment Services program to facilitate the Child Family Team meeting and link, monitor and coordinate all services.

## Community Based Rehabilitation Services (CBRS):

Community Based Rehabilitative Services will provide you with a "CBRS Worker" who will work on skill training and coping exercises with you. Your input in the development of your CBRS plan is valuable and a core basis for the delivery of services. "Empowerment" is the central concept of CBRS and our agency will work to provide you with the tools to help you support yourself. We will work with you to develop coping skills and to become a "survivor" on the road to recovery. The focus of CBRS is on strengths rather than weaknesses, people rather than illnesses. Your CBRS Worker will help teach you skills to overcome deficits and to reduce stress in order for your illness to become less symptomatic and for you to become more independent and functional.

## Peer Support Services:

A Certified Peer Support Specialist (CPSS) is someone who has been or is diagnosed with a mental health diagnosis and is in the process of recovery themselves. They have knowledge of what you may be dealing with and can offer support in ways that are meaningful, safe, and supportive. They have completed a certification process in order to qualify to deliver this service. The focus of Peer Support is on recovery and resiliency. They will offer assistance in setting recovery goals through the development of a Recovery Plan. You will develop this plan together and it will address your recovery goals, relapse actions, and empowerment tools to help you maintain stability and resilience in your recovery journey. A peer support specialist can attend appointments with you if you would like them to, help you communicate and collaborate with your other treatment providers, and offer support when you are struggling and need encouragement to meet your goals. The Peer Support Specialist will not be able to delivery clinical level treatment as this is the role of your counselor. They are not allowed to help in the administration of medications, or provide services consistent with the role of a case manager. A Peer Support Specialist is not a taxi service, is not allowed to provide any monetary support or accept any monetary transactions, and will not be responsible for dictating tasks assigned by other staff members. The Peer Support Specialist is there to support you, not direct you, and can be a valuable part toward long term recovery.

## Family Support Services:

A certified Family Support Partner is someone who has lived experience raising a child with a social emotional disorder, and in some cases, a co-existing developmental disorder. They have a level of understanding of the stress a parent can feel when trying to navigate the system of care, advocate for their child, and cope with difficult behaviors. A Family Support Partner can help parents by providing information regarding treatment options in the community, effective strategies for communicating with the treatment team, and techniques and tips for helping to manage stressful behavioral concerns. The Family Support Partner can help advocate for the needs of the child and provide a level of empathy and support that can only be gained through lived experience. The role of



the Family Support Partner is to support and teach family members so they can advocate for themselves on behalf of the child. The Family Support Partner is not to replace the parent in seeking services, monitoring the effectiveness of services, or implementing behavioral programming. The focus of this service is on recovery and resiliency and teaching families to be independent and confident in supporting their child with a social emotional disorder.

# Respite Care (Children Only):

Respite care is a short-term service to provide care giver relief. It is intended to de-escalate stressful situations and may be offered up to 72 hours at one time in the home or up to 10 hours at one time in the community or facility. In order to access respite care, families must participate in Youth Empowerment Services and complete an assessment and treatment plan through the Department of Health and Welfare, and be actively utilizing outpatient mental health services.

# Crisis Response and Intervention

A crisis is defined as someone considering self-harm to self or others, disorientation, a compromised ability to function, and/or an inability to self-calm. If you or your family member meet this criteria, we can provide telephonic crisis response to provide support, active listening, and referrals to care; or a crisis intervention face to face session to provide counseling, ensure the safety of the client, and provide referrals for continued care. After a crisis response or intervention, our team will follow up with you within 24 hours to ensure your needs have been met.

## **Benefits of receiving Services:**

- Provide preventative services to help maintain a healthy mind and body
- For patients receiving primary care services and mental health services, having all of your records and treatment under one roof allows for greater coordination of care between providers
- Identify individual goals and track outcomes through the process of treatment and recovery planning and reviews
- Learn additional skills to help increase ability to function independently and successfully
- Develop an increased ability to manage symptoms effectively
- Receive support in attending appointments and managing medications to help reduce symptoms
- Receive completed assessment and evaluation reports, lab and imaging results if applicable, and diagnostic summary information
- Manage symptoms with the benefit of pharmacological management if applicable
- For Telemental Health delivered services, access to care is available for those unable to travel or participate in traditional face to face settings
- To de-escalate potential life-threatening situations through crisis response and intervention

## **Risks of receiving Services:**

- Mental Health Services will result in a diagnosis of a mental illness (adult) or Social Emotional Disorder (children), or other neurocognitive disorder which may or may not be a benefit for some individuals and families
- Dependency on mental health services may occur resulting in a fear of "graduating" from the program
- Closure of service if non-compliant with appointments and plan
- Services may bring up past issues dormant in the subconscious mind which may cause trauma to the individual
- Side effects associated with medication will be disclosed and discussed. However, tolerance of medication is individualized and changes in medication due to negative side effects may be experienced.



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- If you choose to limit your participation (miss appointments, cancel appointments, and deny additional services) you may not see growth, therefore limiting your ability to reach your goals for recovery. Your symptoms of mental illness may decompensate further.
- For Telemental Health services, there may be technical difficulties which impede the ability to receive the service. Although IHCC uses a HIPAA compliant software system to deliver confidential Telemental Health services, as with any electronic platform, there may be a risk of breach of data and personal information.

## After Hours Accessibility and Communication

IHCC's office hours are Monday through Friday from 9:00-5:00. If you have an emergency after normal business hours, the following options are available to you:

- For life threatening emergencies, contact 911 immediately
- For non-life-threatening emergencies:
  - Participants may contact our 24-hour crisis line at (208) 589-IHCC (4422) for assistance.
  - If you get a voice mail message upon calling the crisis phone, your phone call will be returned within 15 minutes if you have left a message with your name and return phone number

IHCC will provide feedback regarding what is deemed an emergency versus routine service at your intake and ongoing sessions as applicable. In the event you leave a message with the office after hours, your call can be expected to be returned prior to 10:00 AM the following business day. For emergency/crisis contact via the crisis line(s), your call will be returned immediately if you leave a message.

## **Referral for Other Services:**

In the event IHCC does not provide the service, we will provide choice and refer you to an agency that does provide the service. Some examples of services you may be referred out to are:

- Occupational Therapy
- Speech Therapy
- Physical Therapy
- Partial Care Services
- Nursing Services

Participants have a choice in who provides their services and have the right to refuse service at any time. By signing the Admission paperwork for IHCC, participants identify their choice in utilizing IHCC for their primary care and/or outpatient mental health services.