

A fresh start isn't  
a new place,  
it's a new mindset.

**Fresh Start Therapeutic Services**

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## **Orientation to Services**

Each person receiving services will receive an orientation to their rights and the type of services available during the initial intake assessment, but also ongoing throughout the delivery of services. Written orientation material will be provided explaining the following:

1. Rights and responsibilities of the person served
2. Grievance and appeal procedure
3. An explanation of the organization's services and activities to include:
  - a. types of services
  - b. assessment/intake process
  - c. expectations while in care
  - d. treatment planning
  - e. hours of operation
  - f. access to after-hour services
  - g. confidentiality policy and mandated reporting
  - h. requirements for transition from services and follow-up upon termination of services
  - i. provision for not establishing social media-based relationships with staff.
4. Health and safety policies

## **Services Offered**

Fresh Start Therapeutic Services (FSTS) Outpatient Mental Health Clinic (OMHC) and Psychiatric Rehabilitation Program (PRP) services provide office and community-based support to children and adults that need mental health care. FSTS provides individual, family, and couples therapy by licensed clinicians. Services are provided to clients ages 5 and above. FSTS accepts cash, all major credit cards, and the following major insurance networks: CareFirst BlueCross BlueShield, Aetna, Cigna, and Maryland Medicaid, with applications pending to accept United Healthcare and Medicare for payment of therapy services. FSTS currently offers individual, couples, family, group, and art therapy; as well as school-based therapy to students within several Harford County Public Schools.

PRP services are an extension to therapy services and our role is to support the psycho-therapeutic aspect of an individual's mental health treatment by addressing what happens internally, mentally, and emotionally. Our rehabilitation services enlighten youth and adults on their immediate and long-term needs and goals, identifies and highlights what their strengths and needs are, and helps to bring resolve to psychiatric symptoms. Services are provided to

clients ages 5 and above. FSTS accepts cash and Maryland Medicaid for payment of PRP services.

The focus of our services is to assist the client with identifying and accepting mental health barriers, help in the establishment of new goals, improve the understanding of feelings and attitudes, and support independence and healthy living through the learning of new ways of dealing with problems.

### **PROGRAM OUTLINE:**

At the referral stage a client is screened for eligibility of services. Administrative staff collect basic demographic information (name, address, telephone number, email address, gender, race, insurance information, services requested and reason for wanting services). This information is entered into the Electronic Health Record and an appointment is scheduled. Client is electronically sent consents and information regarding client rights and responsibilities. Clients can invite anyone the client feels comfortable with participating in the treatment process to the intake assessment. This may include family members, friends, family friends, etc.

**Assessment** – Client will undergo a series of assessments at the beginning of the treatment process with FSTS. Questions are asked about life and family history, educational and vocational history, physical and mental health history, any substance abuse history and living situation along with other questions about the client’s background. Strengths, needs, abilities, cultural and religious preferences are also considered. The results of these assessments will help us to work with the client to determine the course of the client’s treatment plan.

**Individualized Treatment Plan** - Based on the results of the assessments and based on the client’s/client’s parent or guardian/client’s support network wants to accomplish while receiving services, therapist will create an Individualized Treatment plan in collaboration with the client. Although the goals and objectives created will be measurable and time-specific, there is no set time for the course of treatment as the client’s needs may change as time goes on and treatment goals and objectives may be modified according to the client’s needs and desires.

As soon as possible after the start of treatment, we will begin to talk about the process for discharge from our services. We want to make sure we do everything we possibly can to ensure that your wellness journey continues after discharge. After the completion of the assessment, clients are assigned to a therapist who implements treatment services outlined in treatment plan.

### **Frequency of services:**

Services are provided at a frequency based on the client’s preferences and the therapist’s clinical judgment. This means that clients can be seen as often as once a week, or as little as once a month. Frequency is not set in stone and can change based on what is going on in the

client's life, and simply requires a conversation to take place between the client and the client's therapist. Duration of services can be as brief or long as the client needs, as there is no limit on duration of services. Every 4 months, the therapist and client must update the treatment plan to prove necessity and continuation of therapy services.

PRP services are provided a minimum of 6 hours a month for adults and a minimum of 3 hours a month for children. Duration of services can be as brief or long as the client needs, as there is no limit on duration of services. Every 6 months, the treating therapist must submit a referral to approve necessity and continuation of PRP services.

### **Transition, and Discharge Procedure**

The concept of completion of services should be initiated at the initial assessment with a client, providing information on services that will best assist the client to resolve areas of concern and projecting expected length of treatment. Treatment should involve the client being aware of benefits to treatment and risks of termination of services. When indicated, transition planning is initiated with the client/guardian at the earliest possible point in the individual planning and service delivery to assure a smooth transition from services. Transition from services can occur for a number of reasons, to include planned discharge, or transition to a different level of care.

1. Whenever possible, the organization and the client/guardian will jointly plan for termination of services. Termination or discharge occurs when the person or family:
  - a. Achieves their service goals or is otherwise ready to discontinue services
  - b. Needs a different level of service or intensity of care
  - c. Needs a different type of services
  - d. No longer wants the organization's service
  - e. No longer meets eligibility criteria
  - f. Refuses to meet program standards or requirements
  - g. Has needs that exceeds the agency's resources; or
  - h. Is otherwise incapacitated and/or physically unable to receive services.

When leaving care, a written discharge plan shall be provided to the individuals who participate in the development of the discharge plan, when permitted. Upon involuntary termination from service, the discharge plan will be mailed to the address on file.

Discharge may also occur in the event of a client who poses a risk to the safety and well-being of self or others and that cannot be managed in an outpatient care setting. Clients will be made aware, in writing, of discharge, and any recommendations for additional services (like other levels of care/programs). When a person is discharged or removed from a program for aggressive/assaultive behavior, follow-up occurs to ensure linkage to appropriate care within seventy-two (72) hours post discharge.

### **Feedback**

Clients, family/friends of clients, and stakeholders are encouraged to provide feedback. Feedback can be offered in various ways such as verbally, in writing, electronically through the various surveys on our website, or through the Suggestion Box located in the lobby area of the office. Please ask staff if you have any questions or need assistance with leaving feedback. Surveys can be completed anonymously. Data from surveys are compiled semiannually and discussed with staff during a monthly staff meeting.

### **Telemedicine: What to Expect**

Fresh Start Therapeutic Services offers you HIPAA-compliant telemedicine services through our Electronic Health Record (EHR) AdvancedMD. Links for telemedicine sessions are sent directly to the email address you provided when signing up for services.

### **What is Telemedicine?**

Telemedicine is the exchange of medical information from one site to another via electronic communications. The telemedicine service offered to you will allow you to have a meeting with your therapist or other program staff via secure and interactive video equipment. You will be able to speak in real-time during your telemedicine appointment.

### **Is Telemedicine Safe?**

Yes, all telemedicine sessions are safe, secure, encrypted, and follow the same privacy (i.e., HIPAA) guidelines as traditional, in-person medical appointments. Your telemedicine appointments will always be kept confidential. In addition, telemedicine appointments are not audio or video recorded.

### **Can I Choose Not to Participate?**

Of course. Please discuss your comfort and availability to participate in telemedicine visits with your treatment team (i.e., therapist, PRP Counselor, etc.).

### **Things to Remember about Your Telemedicine Appointment:**

1. You will schedule your telemedicine appointments the same way you schedule an appointment with your therapist.
2. As with your traditional, in-person appointments it is your responsibility to call your therapist to cancel an appointment if you are unable to attend your telemedicine appointment. Cancellations should be made at least 24 hours prior to the appointment time.



## **PATIENT RIGHTS AND RESPONSIBILITIES**

I want to encourage you, as a client of Fresh Start Therapeutic Services (FSTS), to speak openly, take part in your treatment choices, and promote your own safety by being well informed and involved in your care. Because I want you to think of yourself as a partner in your care, I want you to know your rights as well as your responsibilities during the course of your treatment.

### **Your Rights**

- You have the right to receive considerate, respectful, and compassionate care in a safe setting regardless of your age, gender, race, national origin, religion, sexual orientation, gender identity or disabilities.
- You have the right to receive care in a safe environment free from all forms of abuse, neglect, or mistreatment.
- You can expect full consideration of your privacy and confidentiality in care discussions and treatments.
- You have the right to receive information from health providers and to discuss the benefits, risks, and costs of appropriate treatment alternatives. You should receive guidance from your health providers as to the optimal course of action. You are also entitled to be advised of potential conflicts of interest that your health providers may have, and to receive independent professional opinions.
- You have the right to make decisions regarding the health care that is recommended by your health provider. Accordingly, you may accept or refuse any recommended treatment.
- You have the right to terminate treatment at any time. The only thing you will be responsible for is notifying the treatment team of your decision to seek services elsewhere. With a signed release, you can authorize your records to be transferred.
- You have the right to access protective and advocacy services in cases of abuse or neglect.
- You have the right to agree or refuse to take part in medical research studies. You may withdraw from a study at any time without impacting your access to standard care.
- You have the right to make an advance directive and appoint someone to make health care decisions for you if you are unable. If you do not have an advance directive, I can provide you with information and help you complete one.
- You can expect that all communication and records about your care are confidential unless the law permits disclosure. You have the right to see or get a copy of your medical records.
- You have the right to give or refuse consent for recordings, photographs, films, or other images to be produced or used for internal or external purposes other than identification, diagnosis, or treatment. You have the right to withdraw consent up until a reasonable time before the item is used.
- You have the right to voice your concerns about the care you receive.

### **Your Responsibilities**

- You are expected to provide complete and accurate information, including your full name, address, home telephone number, date of birth, insurance carrier and member number, and employer when it is required.
- You should provide FSTS with a copy of your advance directive if you have one.
- You are expected to provide complete and accurate information about your health and medical history, including present condition, past illnesses, hospital stays, medicines, vitamins, herbal products, and any other matters that pertain to your health/mental health, including perceived safety risks.
- You are expected to ask questions when you do not understand information or instructions. If you believe you cannot follow through with your treatment plan, you are responsible for telling your provider.
- You are expected to actively participate in your treatment plan and to keep your provider informed of the effectiveness of your treatment.
- You are asked to please leave valuables at home and bring only necessary items for treatment.
- You are expected to treat all staff, other patients, and visitors with courtesy and respect; abide by all rules and safety regulations; and be mindful of noise levels and privacy.
- You are expected to be sober/free from alcohol and/or substance use when meeting with program staff.
- You are expected not to use alcohol or illegal substances while on company premises or during company sponsored activities.
- You have the responsibility to keep appointments, be on time, and call your provider if you cannot keep your appointments.
- You are expected to follow one of these actions in the event of an emergency based on the severity of your psychiatric and medical needs:
  - Call 911 or go to the nearest hospital emergency room
  - Call a 24-hour crisis hotline (Baltimore City 410-433-5175, Baltimore County 410-931-2214, Anne Arundel County 410-768-5522, Harford County 410-638-5248)

**Cultural competence:**

FSTS will demonstrate cultural competency by designing and delivering services in a manner that will be most effective and respectful given the cultures of the individuals served. FSTS will deliver services that are relevant despite a person's culture, race, religion, socioeconomic status, language spoken, disability, etc. FSTS staff will do so by ensuring clients are involved in every aspect of service delivery and treatment planning. FSTS is also committed to training staff in delivering culturally sensitive and competent services.

**Cultural competence for clients and stakeholders:**



FSTS seeks to manifest its cultural competence in valuing diversity, having the capacity for regular self-assessment, being conscious of the dynamics amongst different cultures, sharing cultural knowledge, and adapting practices to promote cultural diversity. During orientation to services, clients will learn about FSTS' commitment to ensuring staff respect and respond to client's cultural preferences. FSTS will also stress the importance of this being reciprocal between staff, clients, and stakeholders. FSTS will also seek to work with organizations and stakeholders who are culturally diverse, and have policies in place to promote cultural competence among its staff, clients and stakeholders.

### **Compliance Plan**

This Corporate Compliance and Integrity Plan has been adopted by Fresh Start Therapeutic Services (FSTS). The purpose of this Plan is to provide standards by which employees of FSTS must conduct themselves in order to protect and promote agency-wide integrity and to enhance FSTS's ability to achieve FSTS's mission.

FSTS is committed to the establishment, implementation, and maintenance of a corporate compliance program that emphasizes (1) prevention of wrongdoing-whether intentional or unintentional, (2) reporting an investigation of questionable activities and practices without consequences to the reporting party, and (3) timely correction of any situation which puts the organization, it's leadership or staff, funding sources or consumers at risk.

FSTS' current Corporate Compliance Officer is Torrey Parker and all grievances or concerns of service delivery or employee wrongdoing should be directed to Ms. Jackman at (443) 313-3240, or via email at [tparker@freshstarttx.org](mailto:tparker@freshstarttx.org).

### **Filing Rights Complaints**

The Clinical Manager and/or Compliance Officer shall:

1. Date, number, and record each rights complaint when it is received and send an acknowledgment, along with a copy of the complaint, to the complainant within five (5) business days. If the Clinical Manager and/or Compliance Officer determines that no investigation of the rights complaint is warranted, it shall notify the complainant within five (5) business days.
2. Assist the client or other individual with the complaint process, if necessary.
3. Inform the client or other individual of the option of mediation, and under what circumstances and when it may be exercised.
4. Accept complaints that are filed anonymously and protect information that may lead to identification of the anonymous complainant or informants.

5. When the Clinical Manager and/or Compliance Officer determines that the rights complaint is outside Clinical Manager and/or Compliance Officer's jurisdiction, it may inform the complainant of other agencies they may contact and assist if requested by the complainant.
6. An employee who is aware that a client or other individual wants to file a rights complaint shall either assist that person in filing the complaint in a timely manner or refer them to the Clinical Manager and/or Compliance Officer.

### Investigation

All employees, contractors, volunteers, and trainees shall cooperate fully with investigations from other authorized investigative bodies, respond to all questions put forth upon request, verbally or in writing, and provide accurate and honest information.

The Clinical Manager and/or Compliance Officer shall:

1. Initiate investigation of apparent or suspected rights violations in a timely and efficient manner, subject to delays involving Protective Services, licensing entities, etc., or pending action by external agencies including law enforcement. Investigation shall be initiated immediately in cases involving alleged abuse, neglect, serious injury, or the death of a client that involves an apparent or suspected rights violation, subject to possible delays referenced above.
2. Conduct investigations in a manner that does not violate employee rights as defined by related employment law.
3. Complete the investigation not later than thirty (30) calendar days after receiving the rights complaint, subject to possible delays referenced above.

### Status Report

The Clinical Manager and/or Compliance Officer shall issue a written Status Report every fourteen (14) calendar days during the course of the investigation. The report shall be submitted to the complainant and the respondent. The Clinical Manager and/or Compliance Officer shall submit a written Investigative Report to the respondent upon completion of the investigation. Issuance of the written Investigative Report may be delayed pending completion of investigations that involve external agencies, including law enforcement, etc.

### FSTS Appeals

FSTS does not have an Appeals Committee. If the complainant, client, if different than the complainant, and his/her legal guardian are dissatisfied with the action taken to remedy the recipient rights violation, he/she may file a former complaint to the appropriate community agency within FSTS' jurisdiction. The Clinical Manager and/or Compliance Officer may assist the complainant, client, and/or his/her legal guardian with determining which agency is best to send such complaint.

### Mediation

At any time after the Clinical Manager and/or Compliance Officer completes the Investigative Report, the parties may agree to mediate the dispute. A mediator shall be jointly selected to facilitate a mutually acceptable settlement between the parties. The mediator shall be an individual who has received training in mediation and who is not involved in any manner with the dispute or with the provision of services to the client.

### Privacy of Client Information

FSTS will not convey to any person outside the agency that a person attends or receives mental health services from FSTS or disclose any information regarding participation in such services unless:

1. The client signs a release of information.
2. There is a court subpoena or court order for such information.
3. The clients state a specific threat to harm him/herself or others.
4. Knowledge of abuse or neglect of a child requires mandatory reporting to state and/or local authorities.
5. The disclosure is made to medical personnel in a medical emergency.
6. The disclosure is made to qualified personnel, with client's signed permission, for evaluation purposes; or
7. The disclosure is made as a result of an audit, in which confidentiality expectations extend to the auditing body.

In the case of minors (under the age of eighteen), permission to release information must be signed by the parent/legal guardian. Information is only to be released when an Authorization for Release of Information form is signed by the client and/or legal guardian and witnessed by program staff. All requests for information that occurs when a person is deceased will require probate court mandate or subpoena prior to releasing any client information.

Federal law and regulations do not protect any information about a crime committed by a client either at the agency or against any person who works for the agency, or about any threats to commit such a crime. In addition, FSTS will comply with all health information regulations as required by the Health Insurance Portability and Accountability Act of 1996 (HIPAA). Upon intake, all clients will receive written information pertaining to Notice of Privacy Practices which clarifies when information can or cannot be released per federal HIPAA requirements.

### Client Access to Records

FSTS will ensure that clients are informed of their access to records. All requests to review client records must be made in writing with appropriate state-authorized identification. The review will be carried out in a manner that protects the confidentiality of other family members and other individuals whose contacts may be contained in the record. Records are not immediately

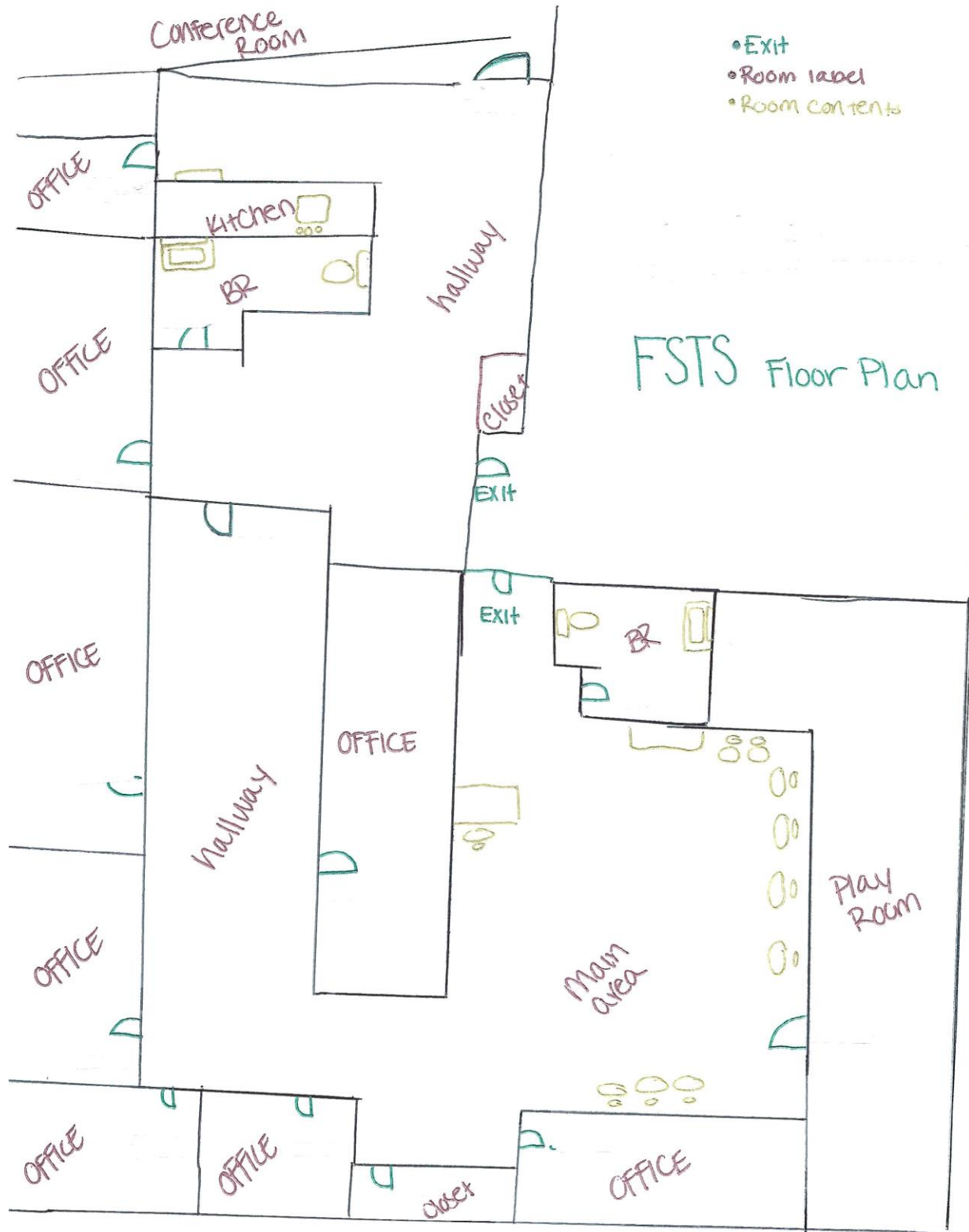
available for review. Upon receipt of a written request to review a record, FSTS staff will produce an appropriately redacted record within 5 business days. Requests to copy material in the record must be made in writing. FSTS will have fourteen (14) days from written notification to prepare the requested copies.

### **Emergency Evacuation Procedures**

FSTS will have an emergency evacuation plan. The agency will conduct an unannounced test at least annually to ensure the safety of clients and staff during an emergency. The Emergency Evacuation Plan will be included in the Health and Safety Manual and will be distributed to staff and clients during orientation. The plan will be updated yearly. FSTS' Office Manager will act as the agencies Health and Safety Office and a Health and Safety Team will be developed upon program expansion.

The evacuation routes shall be posted in each office and common area. During an emergency or drill, the office manager ensures that all individuals evacuate the building when the signal is sounded. Individuals should be directed away from the building (300' for fire and 1,000' for bomb) after evacuating. The gathering/meeting location is the farthest end of the building parking lot for fire, and across the street at the public library for bomb threat.

The Office Manager accounts for all staff and clients after evacuating. As needed, the Office Manager will communicate the location of the temporary shelter.



### **High-Risk Assessment**

All incidents of high-risk behavior, either at intake or during service will be assessed utilizing the appropriate FSTS High Risk Assessment according to the following protocol:

1. All clients presenting with active suicidal/homicidal ideation, aggression, or threat to elope will be immediately assessed face-to-face by the appropriate FSTS licensed clinical staff member. If the local crisis mental health program can conduct the assessment faster, they may complete the assessment for FSTS.
2. All clients with a history of a recent (within the past month) suicide/homicide ideation or gesture will be interviewed and assessed within forty-eight (48) hours or one (2) business day whenever possible. This may not be possible if a client is unavailable, refuses assessment, or the program is closed for a weekend or holiday.
3. All reports of any of the other above listed high-risk behaviors will be interviewed either face-to-face or over the phone within three (3) business days.

### **Medication Use**

Fresh Start Therapeutic Services (FSTS) does not administer medications to any clients at any time. FSTS staff are prohibited from handling client's medications at any time. This includes staff having client's medications in the staff members' possession as well as staff dispensing (handing) client's medication. Staff are permitted to ask the client whether they are compliant with taking medication as prescribed and document as appropriate in client's chart.

### **Handling of Client's Personal Property**

FSTS is unable to provide storage for a client's belongings while he/she receives services in the office. Clients are encouraged to keep his/her belongings with them while receiving services, as FSTS staff will not be responsible for securing property, or for any mishaps (i.e., theft, destruction, etc.) that may happen to personal property while on the premises. FSTS prohibits the following items being brought onto the premises by clients, personnel, or visitors:

- Illegal Drugs
- Legal Drugs
- Prescription Medication (only the amount needed during the time of visit should be brought onto FSTS premises.)
- Weapons
- Other items that are not permitted

When FSTS adopts exclusions regarding particular kinds of personal property, it shall list the specific items excluded and shall notify clients of these exclusions at the time of admission. All exclusions shall be in writing. Any client in possession of contraband (i.e., drugs, weapons, etc.) will be asked to leave the premises immediately.

### **Tobacco/Substance Use**

Tobacco and vaping products may only be used outside of the building in marked areas. Use of substances (illegal drugs, marijuana, alcohol, misuse or abuse of prescription medication, etc.) is prohibited on the premises of Fresh Start Therapeutic Services. Use of substance while on FSTS premises may lead to police intervention and/or discharge from the program.

### **Discipline, Restraint/Seclusion**

Disciplinary methods should stress praise and encouragement for desired behavior rather than punishment. All rules and expectations shall be explained to clients in a manner appropriate to his/her age and understanding during his/her initial orientation and prior to any disciplinary action for violations of such rules. A client shall not be punished for actions over which he/she has no control; rather the client should be praised for appropriate behavior and be encouraged to exercise some influence over problematic behavior. Staff will not subject clients to verbal abuse or swearing; to derogatory remarks about clients, their families, their races, their religion, or their ethnic or cultural backgrounds; gender, sexual identity, sexual orientation; or to threats of physical violence or removal from the program.

FSTS forbids the use of physical restraint for children or youth, as well as adult clients. FSTS prohibits the use of prone restraints. Prone restraint is defined as all items or measures used to limit or control the movement or normal functioning of any portion, or all, of an individual's body while the individual is in a face-down position. Prone restraint includes physical or mechanical restraint. Under no circumstances shall staff use any form of chemical or mechanical restraint on a client. No client will be subject to seclusion.

### **Social Media**

It is the policy of FSTS that staff are prohibited from establishing social relationships with clients via social media. Clients are encouraged to follow FSTS' official social media pages (Facebook, Instagram, etc.) and website in order to remain abreast of company happenings.