



## **COMPREHENSIVE COMMUNITY SERVICES**

### **ADOLESCENT HANDBOOK**



**Office Number: 1-423-349-4070 and Crisis Line 423-349-4070**  
**Administration Hours: 8:30am-4:30pm**  
**Program Hours: 24 hours**



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## Health & Safety



CCS is committed to the safety of all individuals and we support the right to a hazard free environment when receiving services. Exit routs maps, and emergency phone numbers are posted throughout the facility. Fire extinguishers and suppression equipment is located in plain sight in all location and is in working condition. First Aid kits and spill kits are located in designated areas.

### Emergency Plan Education for clients & Posting of Emergency Plans:

The location of exits, exit plans, first aid kits, and fire extinguishers are clearly posted in the office.



## Drug Free & Safe Environment

CCS is a drug-free facility. Smoking and illicit drugs are not allowed in the building). Weapons are also not allowed.

## ALTERNATIVES TO RESTRICTIVE INTERVENTION

It is the policy of CCS is to refrain from using any kind of seclusion or restraint as a behavioral intervention in the course of treatment for any client. Staff will summon external law enforcement personnel in behavioral emergencies.

CCS shall provide services/supports that promote a safe and respectful environment. These include:

- (1) using the least restrictive methods;
- (2) promoting coping and engagement skills
- (3) providing choices of activities meaningful to you

## YOUR RIGHTS





## **As A Client**

It is the policy of Comprehensive Community Services is to provide quality services in an environment in which the needs of persons served are met through the protection of individual interests. Such an environment is based on respect of the dignity of the person served as an individual who is provided care in a courteous and compassionate manner. The dedication of each employee to the components outlined in this policy is essential in achieving our goal of protection of individual rights and interests.

Procedures:

### **I. CLIENT RIGHTS:**

As a client of CCS, you have the right:

All persons receiving services from Comprehensive Community Services shall retain all rights, benefits and privileges guaranteed by Federal, State, and local law, except those specifically lost through the due process of law.

To be treated with dignity and respect and have courteous, compassionate care

To be free from physical, verbal and emotional abuse, neglect, exploitation and discrimination

To have reasonable personal privacy when you receive care

To be informed about your care and to be involved in your care planning

To submit complaints without fear of retaliation and have them addressed timely

To refuse services and be informed of the impact toward your care

To be informed of any changes in your care, including the type, amount, and frequency

To participate fully, or to refuse to participate, in community activities

Not to be required to make public statements which acknowledge gratitude to the agency

Not to be required to perform in public gathering

Identifiable photographs will not be used without written and signed consent by the service recipient or guardian

To not be denied adequate food, treatment/rehabilitation services, religious activities, mail or other contacts as punishment.

To not be confined to his/her room or other place of isolation as punishment. (This does not preclude requesting the service recipients to remove themselves from potentially harmful situations in order to regain self-control).

To be treated in a professional, courteous, and caring manner that respects and appreciates differences related to race, ethnicity, national origin, gender, sexual orientation, religion, personal values, age, disability, and economic or veteran status.

To request the health care provider of your choice or change your healthcare provider, as well as to request a second opinion or referral.

To receive complete information regarding diagnosis, treatment, and prognosis of your health concern in language you can understand. We will provide confidential interpreters when needed.

To receive information you need to participate in decisions about your care, and to give consent before any diagnostic or treatment procedure is performed.

To decline treatment, to the extent permitted by law, and to be informed of the consequences of making this decision.



To expect that personal privacy (which includes medical and financial information) will be respected and confidentiality protected to the greatest extent permitted by law. We do not release information outside of CCS (including to parents, parole officers, potential employers, schools) without your written permission, except upon court order, as required by law (as in the case of certain communicable diseases and reports of child abuse), or as required, in our judgment, to protect you or others from physical danger. (Please talk with the Billing Specialist about your options for ensuring the confidentiality of your bills.)

To ask for and receive an explanation of any charges billed by CCS.

To review any treatment records created and maintained by CCS regarding care and treatment.

Persons served have the right to be treated with courtesy and dignity, and are at all times entitled to respect for their individuality, and the recognition that their strengths, abilities, needs, and preferences are not determinable on the basis of a psychiatric diagnosis.

Persons served have the right to receive services conducted in a manner reflecting quality professional and ethical standards of practice, and shall be apprised of the organization's code of ethics/conduct.

Persons served have the right to receive services without discrimination based on race, color, sex, sexual orientation, age, religion, national origin, domestic/marital status, political affiliation or opinion, veteran's status, physical/mental handicap or ability to pay for services.

Persons served have the right to be treated in an environment free from physical abuse, sexual abuse, physical punishment, or psychological abuse by threatening, intimidating, harassing, or humiliating actions on the part of staff.

Persons served have the right to be fully informed of the services to be provided, the right to consent to services, and the right to refuse services (with the exception of legally mandated services) without fear of retribution or loss of rights.

Persons served have the right to privacy during facility visits. Individuals and/or group visits are permitted only when the purpose of the visitation is education or professional in nature. Planning for outside visitors shall provide for limited interruption of consumer routine, therapeutic or rehabilitative programs, and related activities. Persons served will be given notice of such visitation.

*Modified:* CCS client do not receive visitations.

*Justification:* Adolescent clients receive family counseling and legal counseling from Case Manager/Probation Officer. They also can earn weekend home passes after 30 days of successful treatment. This right has been modified in order to create an addiction free environment and to support effective treatment.

Persons served, or the consumer's legal guardians, have the right to review the consumer's record at any reasonable time upon request, including prior to an authorized release, and shall be afforded the assistance of an appropriate clinical employee in cases where a reasonable concern exists of a possible harmful effect to the consumer through the misinterpretation of information in the record.

Persons served, along with family or significant other(s), when appropriate, have the right to participate in their treatment and treatment planning. Persons served have a right to a full and complete explanation of the nature of treatment and any known or potential risks involved therein.

Persons served have the right to an individualized, written treatment plan to be developed promptly following admission, treatment based on the plan, periodic review and reassessment of needs, and appropriate revisions of the plan including a description of services that may be



needed following discharge from services.

Persons served have the right to request and receive outside (other than Comprehensive Community Services employees) professional consultation regarding their treatment at their own expense.

Legally competent persons served have the right to refuse treatment, except in emergency situations or other circumstances required by law. Persons served shall not be denied treatment, services, or referral as a form of reprisal, excepting that no individual provider shall be obligated to administer treatment or use methods contrary to his or her clinical judgment.

Persons served shall have access to written information about fees for services and their rights regarding fees for services, and will not be refused services due to an inability to pay.

Persons served have the right to an explanation if services are refused for any reason including admission ineligibility or continued care ineligibility, and have the right to appeal such decisions.

Persons served have the right to be free of any requirement by the facility that they perform services which are ordinarily performed by facility staff.

Persons served have the right to send personal mail unopened and to receive mail and packages which may be opened in the presence of staff when there is a reason to believe that the contents thereof may be harmful to the other consumers or others.

*Modified:* All incoming mail received at the residential facility will be opened in the presence of staff.

*Justification:* This right has been modified in order to prevent the admission and circulation of drugs within the residential facility.

Persons served have the right to retain and use personal clothing and appropriate possessions including books, pictures, games toys, radios, arts and crafts materials, religious artifacts, toiletries, jewelry and letters.

*Modified:* Persons served can not wear clothing that promote the use of drugs, drug culture or clothing that contain obscenities.

*Modified:* Persons served can not read materials, electronic medium or watch television shows that promote the use of drugs or drug culture.

*Modified:* Persons served can not bring or use personal radios.

*Justification:* This right has been modified in order to create an addiction free environment and to support effective treatment.

Person served have the right to be afforded privacy and freedom for the use of bathrooms when needed.

Persons served have the right to vote, make contracts, buy or sell real estate or personal property, or sign documents, unless the law or a court removes these rights.

Persons served have the right to be informed of appeal procedures, initiate appeals, have access to grievance procedures, receive a grievance appeal decision in writing, and appeal a grievance decision to an unbiased source.

Persons served have the right to be protected from the behavioral disruptions of other persons served.

Information about Declarations of Mental Health Treatment are provided and you will be given the opportunity to develop one if it is desired.

The right to see any provider in an emergency.

The right to see any provider that has been approved by a referral is explained to the member.

The right to refuse audio and-or video techniques to record or observe the member's activities during treatment is explained to the member.



Persons served have the right to informal complaint and/or formal grievance regarding practices or decisions that impact their treatment or status without fear or concern for reprisal by the organization or its staff, and have the right to have this process clearly communicated to them upon entry to services and throughout participation in services.

Persons served have the right to refuse to participate in research without loss of services, and participate in research on a voluntary basis only with full written informed consent.

Persons served have the right to access guardians, self-help groups, advocates, Comprehensive Community Services and legal services at any time. Access will be facilitated through the person responsible for the consumer's service coordination.

Persons served have the right to be treated in the least restrictive environment, be provided evidence-based information about alternative treatments, have access their to their records, have equal access to treatment regardless of race ethnicity, gender, age, sexual orientation and sources of payment.

**As a client of CCS, you have the responsibility:**

To provide accurate and complete information about current and past health issues, medications (including over-the-counter products and dietary supplements), and allergies or sensitivities, and other matters pertaining to your health

To ask questions ensuring you understand diagnosis, treatment, expected outcome, and instructions

To follow through on treatment plan you and your counselor make together, including taking medications and following your aftercare plan.

To keep your appointment, or change, or cancel it in a timely manner, to allow others in need to have access to a care provider.

To inform your care provider about any living will, medical power of attorney, or other directive that could affect your care.

To provide a responsible adult to transport you to the residential facility and home after your treatment has been completed.

To have insurance that meets CCS requirements, understand what your insurance does and does not cover, and provide information about your insurance as needed for processing claims, or be a authorized recipient of a grant that will provide payment for your treatment.

To accept personal responsibility for paying all charges billed to you that are not covered by your insurance or grant.

To be respectful of others, including CCS staff, volunteers, and clients.

Persons served have the responsibility to attend services without the use of alcohol or illicit drugs

To communicate with your care provider, or any CCS staff member if you have concerns or suggestions about the care you receive here, up to and including filing a verbal or written grievance to ensure your concerns are heard. See a supervisor to help with this. We want to work with each of you to provide you and those that follow you with the best possible service.

The need to receive treatment from in-network providers is explained to the member.

You must inform staff if you have any insurance (TENNCare or other).





## **Complaints and Appeals**

You will be given assistance and time to file an appeal for your insurance claim.

You will be notified of appeal rights when adverse actions (denial, reduction, suspension, delay, or termination of services) occur.

Grier notices are mailed or hand delivered to the member or appropriate representative (if applicable.)

Services are continued or reinstated if requested within two business days of notice of provider initiated termination of inpatient hospital stays.

## **Grievance Procedures**

You have the right to voice grievances to the staff of the agency, to the owner of the agency, and to outside representatives of your choice with freedom from interference coercion, discrimination or reprisal.

Any question or specific concerns regarding service recipient's rights or to report a complaint may be directed to any of the following:

Your Agency Compliance Officer	Phone # <u>1-423-928-6581</u>
TN State Office of Licensure & Review	Phone # <u>1-866-777-1250</u>
Disability Law and Advocacy Center of TN	Phone # <u>1-800-342-1660</u>
TN Department of Human Services – Adult Protection Services	Phone # <u>1-888-277-8366</u>

## **Opportunities for Involvement and Input**

The success of the mental health, developmental disabilities and substance abuse service system relies on active participation from concerned individuals. As a consumer or family member of a consumer, your contribution is especially important and welcomed.

### **There are a number of ways you can be involved:**

- ∨ Participate on the consumer and family advisory committees.
- ∨ Participate in focus groups and provide feedback on policies
- ∨ Participate in the development of monitoring tools that measures the quality of services and outcomes (consumer survey).
- ∨ Become a peer support specialist.
- ∨ Serve on a rights committee.
- ∨ Advocate at local, state and national levels either individually or with an established group.

CCS will assist any consumer or family member who wishes to participate on any board or committee.

### **To Request Special Accommodations:**

If you need help or accommodations to participate in services, you may request Accessibility



and Accommodations. If you need to request an accommodation on behalf of yourself or a family member or a friend, you can contact CCS.

**Assistance including:**

- ∇ Assistance with TTY.
- ∇ Sign language interpretation.
- ∇ Interpretive services if you do not speak English.
- ∇ Assistance for the visually impaired.

**Code of Ethics**

It is the policy of CCS that all persons employed by the company including full and part-time employees, contractors, students, volunteers, and members of the governing authority are expected to perform their designated functions in a manner that reflects the highest standards of ethical behavior. We expect the same of our clients.

**Fee for Service**

CCS charges fees for services provided to Clients. Clients are made aware of the agency's fee policies at admission.

Clients are also responsible for any fees that are incurred while participating in treatment that fall outside of the lines of the initial financial agreement between the Client and CCS.

Examples include:

- Over the counter medications
- Prescribed medications
- Vending purchases
- Personal toiletries

The fee may be waived for Clients participating in fully funded programs or subsidized by a third party payer that prohibits charging a Client fee. CCS believes the setting and collecting of fees is a clinical issue. A Client's willingness to accept the set fee and to make timely payment reflects his/her understanding and valuation of the therapeutic process.

**Insurance**

A client with private insurance pays an administration fee of \$100. If the specified fee produces a hardship and a barrier to treatment, then staff shall contact the Director for review and approval.

If a Client's insurance company fails to pay, the Client is responsible for the shortfall. A client who has insurance, but chooses not to use it or, whose insurance will not pay for treatment, is responsible for paying the full fee on a sliding fee schedule.



## Sliding Fee Scale

For Clients who do not have insurance or entitlements, CCS accepts less than full reimbursement from those who qualify for the sliding fee scale based on residency, household income and number of dependents.

The Admissions Team assesses the Client’s qualification for the sliding fee scale and considers extraordinary expenses such as medical costs, child support, garnishments, etc. when setting the fee. The fee for service is determined during this assessment and the Client is asked to sign a Fee Agreement to confirm his/her willingness to accept the responsibility for payment.

A fee that is set by the Admissions Team, which is outside of the established guidelines, must be approved by Director.

A financial assessment that yields a no financial responsibility (zero fees) from the client must be reviewed and approved by the Finance Director.

### Attachment 5: Suggested Sliding Fee Scale

#### TDMHDD- Division of Alcohol and Drug Abuse Services Suggested Sliding Fee Scale

\*Based on 150% of the 2009 Health and Human Services Federal Poverty

Guidelines Fee Scale Family Size

Adjusted Monthly Income 1 2 3 4 5 6 7

8 9 Plus

Low to High Percentage of Rate to be Charged to the Consumer for Services Received

\$0 to \$1,354

\$1,355 to \$1,655

\$1,656 to \$1,956 5%

\$1,957 to \$2,257 10% 5%

\$2,258 to \$2,558 20% 10% 5%

\$2,559 to \$2,859 30% 20% 10% 5%

\$2,860 to \$3,160 40% 30% 20% 10% 5%

\$3,161 to \$3,461 50% 40% 30% 20% 10% 5%

\$3,462 to \$3,762 60% 50% 40% 30% 20% 10% 5%

\$3,763 to \$4,063 70% 60% 50% 40% 30% 20% 10% 5%

\$4,064 to \$4,364 80% 70% 60% 50% 40% 30% 20% 10% 5%

\$4,365 to \$4,665 90% 80% 70% 60% 50% 40% 30% 20% 10%

\$4,666 to \$4,966 100% 90% 80% 70% 60% 50% 40% 30% 20%

\$4,967 to \$5,267 100% 100% 90% 80% 70% 60% 50% 40% 30%

\$5,268 to \$5,568 100% 100% 100% 90% 80% 70% 60% 50% 40%

\$5,569 to \$5,869 100% 100% 100% 100% 90% 80% 70% 60% 50%

\$5,870 to \$6,170 100% 100% 100% 100% 100% 90% 80% 70% 60%

\$6,171 to \$6,471 100% 100% 100% 100% 100% 100% 90% 80% 70%

\$6,472 to \$6,772 100% 100% 100% 100% 100% 100% 100% 90% 80%

\$6,773 to \$7,073 100% 100% 100% 100% 100% 100% 100% 100%

90%

\$7,074 and higher 100% 100% 100% 100% 100% 100% 100% 100%



## **Fee Revision**

A Client may, during the course of treatment, appeal for a time limited fee revision. This appeal, if granted, is reviewed and signed by the Agency Director and the Finance Director.

## **Payment of Fees**

The front desk staff collects client fees at the time service is provided. The Receptionist enters the payment in the Client's fee maintenance record. A schedule of charges and payments is available to Clients upon request.

## **Program Plan**

The process used to design your individual plan of supports, service(s) or treatment and includes the following important points:

1. Your planning meeting occurs at a time and place that is convenient for you.
2. You can invite the people you want to your meeting.
3. You get the information you need and ask for from the people at your meeting.
4. The people at your meeting listen to you and respect your opinions and wishes.
5. The people at your meeting work together so you can be more independent and more involved in your community.
6. Consider the team's suggestions if you do not agree with the plan.
7. You are satisfied with the final plan.
8. You sign and receive a copy of the plan.

The plan must be written using language that you understand. Complex words and phrases, medical terms, and abbreviations will not be used.

## **Discharge/Transition Planning**

It is the policy of CCS to initiate the process of transition/discharge planning early in an individual's entry into programming. Transition planning will facilitate transfers to less intense levels of care within the organization or to community resources. You will be contacted after transition or discharge to gather information about your status and to determine the effectiveness of our services.



## **Infection Control**

CCS minimizes occupational exposure to communicable disease or infection that spread through the following routes of transmission: (1) Direct contact as a result of close contact to skin and body secretions/fluids; (2) Indirect contact that occurs when organisms from an infected host are transmitted to a someone else via an inanimate object; (3) Droplet transmissions that occurs when infectious agents in droplets are expelled from respiratory secretions by coughing, sneezing, or talking; (4) Airborne spread that usually results from organisms spread from a distance of more than several feet between the source and the receiver.

### **Available Resources**

Brochures and information on the prevention and treatment of AIDS/HIV and Hepatitis is available for all consumers at their request.

### **Universal Precautions and Sanitary Procedures:**

**Rules of Universal Precautions:** All clients will observe the rules of universal precautions. All blood or other potentially infectious materials shall be considered infectious regardless of the perceived status of the source individual. Under circumstances in which differentiation between body fluid types is difficult to detect, all body fluids shall be considered potentially infectious materials.

## **EDUCATIONAL INFORMATION ON HIV/AIDS, TB, Hepatitis & Other Infectious Diseases**

### **Viral Hepatitis C Fact Sheet**

#### **SIGNS & SYMPTOMS**

80% of persons have no signs or symptoms jaundice, fatigue dark urine, abdominal, pain loss of appetite nausea

#### **TRANSMISSION**

Recommendations for testing based on risk for HCV infection

Occurs when blood or body fluids from an infected person enters the body of a person who is not infected.

HCV is spread through sharing needles or “works” when “shooting” drugs, through needle sticks or sharps exposures on the job, or from an infected mother to her baby during birth.

Persons at risk for HCV infection might also be at risk for infection with hepatitis B virus



(HBV) or HIV.

**PREVENTION**

There is no vaccine to prevent hepatitis C.

Do not shoot drugs; if you shoot drugs, stop and get into a treatment program; if you can't stop, never share needles, syringes, water, or "works", and get vaccinated against hepatitis A & B.

Do not share personal care items that might have blood on them (razors, toothbrushes). Consider the risk if you are thinking about getting a tattoo or body piercing. You might get infected if the tools have someone else's blood on them or if the artist or piercer does not follow good health practices.

HCV can be spread by sex, but this is rare. If you are having sex with more than one steady sex partner, use latex condoms\* correctly and every time to prevent the spread of sexually transmitted diseases. You should also get vaccinated against hepatitis B.

If you are HCV positive, do not donate blood, organs, or tissue.

**Viral Hepatitis B**

**SIGNS & SYMPTOM**

Fact Sheet

About 30% of persons have no signs or symptoms.

Signs and symptoms are less common in children than adults

- |                   |                   |             |
|-------------------|-------------------|-------------|
| *Jaundice         | *loss of appetite | *fatigue    |
| *nausea, vomiting | *abdominal pain   | *joint pain |

**CAUSE**

Hepatitis B virus (HBV)

Death from chronic liver disease occurs in:

- 15-25% of chronically infected persons

**TRANSMISSION**

- Occurs when blood or body fluids from an infected person enters the body of a person who is not immune.
- HBV is spread through having sex with an infected person without using a condom (the efficacy of latex condoms in preventing infection with HBV is unknown, but their proper use may reduce transmissions), sharing needles or "works" when "shooting" drugs, through needle sticks or sharps exposures on the job, or from infected mother to her baby during birth.

**RISK GROUPS**

- Persons with multiple sex partners or diagnosis of a sexually transmitted disease
- Men who have sex with men
- Sex contacts of infected persons
- Injection drug users
- Household contacts of chronically infected persons
- Infants born to infected mothers



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- Infants/children of immigrants from areas with high rates of HBV infection
- Health care and public safety workers
- Hemodialysis patients

## **PREVENTION**

- Hepatitis B vaccine is the best protection.
- If you are having sex, but not with one steady partner, use latex condoms correctly and every time you have sex. The efficacy of latex condoms in preventing infection with HBV is unknown, but their proper use may reduce transmission.
- If you are pregnant, you should get a blood test for hepatitis B; infants born to HBV-infected mothers should be given HBIG(hepatitis B immune globulin) and vaccine within 12 hours after birth.
- Do not shoot drugs; if you shoot drugs, stop and get into a treatment program; if you can not stop, never share needles, syringes, water, or “works”, and get vaccinated against hepatitis A and B.
- Do not share personal care items that might have blood on them (razors, toothbrushes).
- Consider the risks if you are thinking about getting a tattoo or body piercing. You might get infected if the tools have someone else’s blood on them or if the artists does not follow good health practices.
- If you have or had hepatitis B, do not donate blood, organs or tissue.
- If you are a health care or public safety worker, get vaccinated against hepatitis B, and always follow routine barrier precautions and safely handle needles and other sharps.

## VACCINE RECOMMENDATIONS

- Hepatitis B vaccine available since 1982
- Routine vaccination of 0-18 year olds
- Vaccination of risk groups of all ages (see section on risk groups)

## **ADMISSION POLICY**

CCS Adolescent Residential Treatment Center will accept only those youths who are classified with a primary or secondary substance abuse disorder.

Individuals demonstrating substance abuse disorders will be admitted to treatment regardless of race, creed, sex, national origin, religion, or source of payment for care. In addition to determination of substance abuse disorders, the following requirements are necessary for an individual to begin or remain in treatment.

1. Evidence of chemical dependency by history
2. Disruption in community and family support
3. Motivation for rehabilitation
4. Some insight of the effects of chemical dependency on self and life’s functioning
5. An inability to maintain abstinence on an outpatient basis and need for structured continual Rehabilitation regime.
6. Are ages 13 to 19 and have parental/responsibility party permission for admission
7. Are ages 13 to 18 and are court ordered to attend.

8. Can perform all activities of daily living
9. Are able to make verbal commitment to rehabilitation
10. Are not in imminent danger to self or others

May exhibit a psychiatric disorder if treated with psychotropic medications (s) and monitored by a psychiatrist. If a client(s) falls into this category, a psychotropic treatment plan will be developed as part of the overall treatment plan.

Room assignments will be made based on gender. No one of the opposite gender will be allowed to share bedrooms. Other room assignments will be made without regard to race, creed, national origin, religion, or source of payment of care.

CCS respects the confidentiality of all clients information. We expect you to strictly comply with the rules of confidentiality and not discuss treatment issues, residential unit issues and other clients with anyone outside the treatment center staff. To protect client confidentiality, what you see here, what is said here, please leave here.

If you are represented by an attorney or are in state custody, you will be allowed contact with your attorney or your court ordered youth services officer/counselor.

Expulsion: A client may be expelled from services in the event that he/she presents such a threat to others that it is felt that it is not in the best interest of all that the client continues to receive care from the agency (please see list below). If discharged from any program within CCS, the client may resubmit for re-entry into the program. The Treatment Team discusses this option and makes the final decision and recommendation. The following information is used in making their decision (the referring sources information regarding client, client's desire to abide by the rules of program and the time between the offense and re-entry – which is 30 days).

## **PROGRAM RULES**

Any rule violation or unacceptable behavior will not be tolerated and could result in



discharge

1. Alcohol, drugs, mind altering substances and drug paraphernalia are strictly prohibited.
2. Discussion of drug and alcohol use should be limited to those times approved by staff. There should be no inappropriate talk in this area.
3. Clients are not allowed to use or have in possession any tobacco products or paraphernalia.
4. Family members or visitors are not allowed to possess or use tobacco products while on the property. Those bringing tobacco products or contraband on the premises will be prosecuted and asked to leave the property.





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5. Magazines are not to be brought into the facility by clients or their visitors
6. Sexual acting out is not permitted. Clients will refrain from all sexual contact and activity between clients whether written, verbal, and physical. Uses of sexual gestures are not allowed.
7. Clients are not allowed to possess pornography, sexually explicit magazines, or sexually explicit materials advertising alcohol or other drugs. Items found will be confiscated and destroyed immediately.
8. Fighting and assaultive behavior will not be tolerated. This includes verbal and physical treats. All incidents of fighting or assaultive behavior will be addressed.
9. Profanity or vulgar language is prohibited at all times; written or oral by the clients.
10. Clients should be under staff supervision at all times. Never leave an area without staff permission.
11. Clients should leave your room each morning dressed properly and with all needed items. Clients are not allowed to re enter their bedrooms until bedtime.
12. No food or drinks are allowed outside the cafeteria.
13. Clients must sleep in his/her own bed with a top and bottom sheet. Beds must be properly made up each morning. Sheets must be washed weekly. No sleeping in street clothes. Sleeping without clothes is not permitted.
14. Prompt attendance to all scheduled activities is mandatory unless excused by the staff. Leaving a scheduled activity without permission of the staff is not permitted.
15. Residents may be excused from scheduled activities for physical illness by staff or the nurse.
16. There will be no lying down or sleeping anywhere from wake-up until bedtime without prior permission. (i.e. putting your head down on the desk, sleeping or not paying attention during class or group).
17. All adolescents enrolled in this program will attend school on a daily basis.
18. Adolescents can only wear clothing that is provided by the facility.
19. All medications must be placed in the clinic. All medications must be approved before being placed in the client and all prescriptions must be given by a staff member.
20. No horseplay, rough housing or practical jokes. No making unnecessary noises (i.e. beating on the furniture or other surfaces, whistling, singing, chanting, rapping, humming, belching, expelling gas or any other noise which is annoying or distracting to staff or other clients, whether in class or in group.
21. Adolescents are not allowed to refuse assignments, complete a chore, or any other task as requested by the staff.
22. Adolescents will use the restroom facilities in a timely manner as so it won't interfere with group sessions, class, or other activities.
23. Adolescents are not to tamper with CCS property such as the equipment or doors.



## ADDITIONAL REQUIREMENTS

### Bedtime:

Sunday-Saturday in your room by 9:00p.m., and lights out at 10:00p.m.

### Hygiene:

Residents are expected to maintain proper hygiene at all times. Residents must shower and wash their hair daily.

### Meals:

Residents must take all meals in the dining room. Food is not allowed in other areas of the building. Clients should pay attention to their noise level and behavior during meals in order to protect the rights of others eating in the dining room

### Handicap Accessible:

CCS maintains accessible restrooms, water fountains, cafeteria, and parking spaces for handicapped persons.

### Grounds:

Residents wishing to go outside on the grounds must receive permission from staff.

### Borrowing and lending:

There will be no borrowing or lending of items or money allowed at any time.

### Damage:

Accidental damage must be reported immediately. Staff will determine how accidents will be defined. Repairing or replacing damage will be required. Deliberate destruction of property will result in punitive consequences and may be grounds for termination.

Restitution may be required and taken from personal funds or allowance. (Including but not limited to, a door knob, lock, window, or furniture).

### Smoking:

Adolescents are not allowed to smoke, use tobacco products or E-cigarettes at anytime during their program at CCS.

### Language:

Inappropriate language and verbal abuse of peers and/or staff will not be tolerated.

### Privileges:

Privileges are earned by responsible behavior and progress in the program. Privileges which are abused, may be lost. Regaining lost privileges may entail permission from the staff, the clients attitude toward change, the program and work on achieving objectives in the treatment plan.

### Mail:

The outgoing and incoming mail of clients is not censored except that mail suspected of containing unauthorized, injurious, or illegal material or substances is opened by the addressee in the presence of designated personnel. Your address while you are a client with



us will be:

Your Name,  
c/o CCS Treatment Program,  
6145 Temple Star Road,  
Kingsport Tennessee 37660

Family members may phone the center at (423) 349-4070 to speak with staff as long as a release of information is signed.

Visitors:

No Visitation is allowed. Family counseling sessions will be coordinated and required if possible.

Personal Hygiene Products:

The center will provide all personal hygiene products. No shampoo, conditioner, mousse, or other products may be brought into CCS.

Telephone:

Residents are eligible for phone calls upon admission. Calls will be restricted Monday, Wednesday and Friday 10 minutes each.

Home Passes:

Passes will be given on weekends only when approved by CCS/guardian and Probation Officer/Judge.

Progress in school and completion of all program requirements are required in order to advance through your treatment program. Those not completing assignments or step work as expected will be left on their current level and may have privileges restricted until their work is complete.

Mail may be censored for contraband if the Treatment Team determines that it is needed as part of your treatment plan.

Significant others must be approved by the Treatment Team prior to family counseling.

All students are required to attend and complete Substance Abuse/Co-occurring disorders and education requirements according to current schedule.

### **ALLEGED OR SUSPECTED ABUSE OR NEGLECT**

CCS reports all instances of suspected abuse and neglect to the appropriate protective services department in accordance with Tennessee statute. The statute provides immunity from civil or criminal liability for persons making reports of abuse in good faith.

A. In the case of persons under eighteen years of age who by report or appearance provide



COMPREHENSIVE COMMUNITY SERVICES

- B. evidence to warrant suspicion that they have been abused or neglected, staff will seek validation with their direct supervisor and immediately contract the Department of Human/Social Services.
- C. Staff will document verbal/written or evidence that results in suspicion of abuse/neglect