

# CLIENT HANDBOOK

*Your Guide to David Lawrence Center  
Services & Customer Satisfaction*

*Restoring and Rebuilding Lives*



**DAVID LAWRENCE CENTER**

*Mental Health & Substance Abuse Services*

6075 Bathey Lane, Naples, Florida 34116  
Voice (239) 455-8500 fax (239) 455-6561 •  
[www.davidlawrencecenter.org](http://www.davidlawrencecenter.org)

**David Lawrence Center focuses on *Restoring and Rebuilding lives* by providing compassionate, highly skilled, affordable mental health and substance abuse services that are available to all.**

## **Your Rights & Responsibilities**

### **ACCEPTANCE OF SERVICES**

#### **You have the RIGHT to:**

- Be treated with dignity and respect
- No person shall, on the basis of race, color, religion, national origin, sex, age, or disability be excluded from participation in, be denied the benefits of, or be subjected to unlawful discrimination under any program or activity.
- Have cultural, psychosocial, spiritual and personal values, beliefs and preferences respected
- Have the least restrictive means of treatment with maximum potential benefit
- Have an experienced professional staff person assigned especially to help work with you in addressing problems
- A personalized (individualized) assessment of your needs
- Have family participate in treatment planning throughout the duration of treatment
- Have care within a reasonable time based on clinician assessment and within the scope of services provided
- Have another opinion regarding services provided
- Designate or have designated a surrogate decision-maker if incapable of understanding treatment or if unable to communicate wishes regarding care
- Discharge when treatment objectives have been reached and/or maximum benefit from Center services has been reached
- Provide input into program policies and services through customer satisfaction surveys and/or, suggestion boxes, grievance process, and/or through participation in the Consumer Advisory Board
- Identify, provide and/or receive information on Advance Directives

### **INFORMATION ABOUT YOUR TREATMENT**

#### **You have the RIGHT to:**

- Be informed both verbally and in writing of your rights
- Be informed both verbally and/or in writing, if your rights are

- being withheld
- Quality treatment
- Informed consent to treatment
- Be informed of any actions, procedures, or decisions that may affect you and your treatment at the Center
- Participate in the development and review of treatment/service and discharge planning
- Be informed of payment obligations for services rendered

NOTE: Organizations that receive money from the federal government have to take reasonable steps to help people who have trouble with English.

## **RIGHTS OF MINORS**

- Minors have the right to be educated about their diagnosis, medications and treatment planning.
- Minors have the right to enter voluntary substance abuse treatment without parental consent. Chapter 397.601(4)(a) F.S.

## **SAFE & THERAPEUTIC ENVIRONMENT**

**You have the RIGHT to Center facilities that are:**

- Comfortable
- Safe
- Physically accessible
- Promote dignity
- Ensure privacy
- Contribute to a positive outcome of treatment
- Be free from neglect, abuse, exploitation, or any form of corporal punishment
- Report complaints or file a formal grievance
- Receive patient safety information and education

## **MEDICATION**

**You have the RIGHT to:**

- Have medication prescribed to you only as medically necessary
- The administration of medication only by order of a Physician, nurse practitioner, and/or physician assistant
- Receive an appropriate explanation of the purpose, expected benefits, dosage, frequency, possible side effects, and the possible long-term effects of any medication prescribed, in language you can understand
- Consideration of your opinion and reactions to medication
- A regular review of your medication for adjustment, possible side effects, and possible discontinuation
- Have current records kept noting your medication history, allergies, and adverse medication reactions

- Refuse medication, except when it is court-ordered, or when it is necessary to prevent serious physical harm to yourself or to others

## **REFUSAL OF SERVICES**

### **You have the RIGHT to:**

- Refuse any form of service unless the service has been ordered by a court, or in an emergency situation when needed to prevent harm to yourself or others. If you are not receiving services voluntarily (not your own choice) you have a right to a lawyer, court hearing, and an appeal of that court hearing decision by a higher court of law, if you wish. If you cannot afford a lawyer, the court will appoint one for you.
- Be informed that without services, your situation may get worse
- Refuse to be filmed, photographed or taped without your written permission
- Refuse to take part in experimental studies or research without your written permission
- Request release and/or discharge from any program or DLC service

## **INFECTION CONTROL PRACTICES**

The Center has established and implemented a strong and comprehensive Infection Prevention and Control Program, helping to facilitate wellness and an overall healthy lifestyle for staff, clients and visitors. The Center follows guidelines and recommendations set by the Center for Disease Control.

The first line of defense is consistent and appropriate hand-washing. Hand-washing and Cover Your Cough instruction signs are posted throughout Center restrooms as a reminder to all staff, clients and visitors of the steps for proper hand-washing and preventing the spread of infection.

### **To prevent the spread of infection, please contact the Center prior to your appointment if you are experiencing:**

- Nausea, Vomiting, and/or Diarrhea
- Flu-like symptoms; general malaise, body aches, etc
- Drainage of the ears and/or eyes
- Fever of 100.4 or higher
- Known exposure to contagious disease(s)
- Open wounds, drainage, sores
- Productive Cough, with either bloody, brownish, green and/or yellowish sputum
- Rash of unexplained origin

Every effort will be made to accommodate your needs and promptly

reschedule your appointment once the illness is resolved. In addition, we encourage you to please contact your primary health care provider to arrange for prompt medical care.

For clients admitted to Residential Programs, additional infection prevention and control strategies may be implemented, to include screening and/or offering laboratory tests and appropriate treatment options to address the illness or infection.

## **FILING A WRITTEN GRIEVANCE**

Any client, family member or legal representative of a client may file a grievance as a formal notice of dissatisfaction. If you wish to lodge a formal complaint and/or are unhappy with the services you are receiving, please share your concerns with us. The grievance procedure involves a series of steps offering the possibility of a satisfactory resolution at each step. The filing of a grievance will never adversely affect the quantity or quality of services provided to an individual. There will be no form of retaliation related to the filing of a grievance and/or formal complaint. We request that you use the following steps for filing a written grievance:

- Grievance Forms are readily available in each of our program areas. Please complete the form and return it to any reception area or to any David Lawrence Center staff member. We will be happy to assist you in completing the form, if requested.
- The grievance form will be given to a Grievance Representative within three working days. This person will review the grievance and contact appropriate staff who are involved and can help resolve the grievance. You will then be contacted by a staff member within a reasonable period of time who will work with you to help resolve the grievance. If you have any questions concerning your grievance, call (239) 354-1483.
- If the previous steps have taken place and you are still not satisfied with the results, you may contact Florida Abuse Hotline at 1-800-96-ABUSE or the District Medicaid office at 1-888-419-3456 or contact: Department of Children and Families, Office of Civil Rights, 1317 Winewood Blvd. Bldg. 1, Rm. 110, Tallahassee, FL 32399-0700 or U.S. Dept. of Health & Human Services, Office of Civil Rights, Atlanta Federal Center, Suite 3B70, 61 Forsyth Street, SW, Atlanta, GA 30303-8909.

## **ADVANCE DIRECTIVES**

Upon admission to services, client will be asked by staff if they have initiated Advance Directives (Living Will/Healthcare Surrogate). It is the responsibility of the client/family to present a copy of the Advance Directive document to David Lawrence Center staff. Advance Directives will be implemented according to applicable laws.

## **ABOUT YOUR BILL**

The Center is required by the Florida laws governing Community Behavioral Healthcare Centers to pursue client fees. We will offer reduced fees for all programs sponsored by the State of Florida, depending on client eligibility. The way in which the Patient Accounts Department will handle your account depends on the type of insurance, payment, and financial information you have provided us at the time of registration or admission. In order to qualify for a reduced fee, Financial Specialists will review documentation of income and determine an appropriate discount from the full-based fee. Customers are responsible for deductibles, co-insurance or non-covered charges unless otherwise indicated. You will receive statements from us advising you of the status of your account. If you move, call Patient Accounts with your new address. If you disagree with the benefits paid by your insurance provider, please contact that provider.

**Medicare:** The Center is a Medicare Part-B provider and may be reimbursed for professional services only. Inpatient costs such as room and board are not reimbursable under Medicare. The Center will accept assignment of benefits and bill Medicare on behalf of a customer.

**Medicaid:** The Center is a Medicaid provider and will accept Medicaid rate as payment in full for covered services. Medicaid requires a co-payment for most services, except for services to children and to pregnant women. Certain services may be subject to limitations or not covered under Medicaid.

**Commercial Insurance:** The Center accepts assignment of benefits and will bill the insurance provider on behalf of a customer. The Center has contracts with several Managed Care Groups. You will be responsible for all deductibles, co-payments and non covered services.

## **TOBACCO FREE ENVIRONMENT**

The David Lawrence Center is committed to the promotion of a tobacco-free environment. Therefore, Clients are not permitted to use any tobacco products in or on David Lawrence Center programs or property.

## **SERVICE LOCATIONS AND PHONE NUMBERS**

### **David Lawrence Center - Main Campus**

6075 Bathey Lane  
Naples, FL 34116

Emergency Services & Crisis Stabilization  
Seven days a week. 24 hours a day. (239) 455-8500

Administration / Switchboard  
Monday through Thursday,  
except holidays, 8:00 a.m. - 5:00 p.m.  
Friday 8:00 a.m. – 3:00 p.m. (239) 455-8500

Access & Urgent Care (239) 455-8500  
Crossroads (Adult Chemical Dependency Residential) (239) 354-1429  
Detox (239) 354-1446  
Nurses Helpline (239) 304-3516  
Adult Medical Services (239) 354-1480

### **Immokalee Satellite Services**

425 N. First Street  
Immokalee, FL 34142

Adult and Children's Outpatient Services (239) 657-4434

### **Horseshoe Drive Satellite Services**

2806 South Horseshoe Drive  
Naples, FL 34104

Community Services (239) 263-4013

David Lawrence Center is licensed and sponsored by the State of Florida Department of Children and Families (DCF) and is accredited by the Joint Commission on Accreditation of Healthcare Organizations.



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