

Lifestyle Center for Counseling & Nutrition

Treatment Policy and Procedures

Bill of Rights

1. You have the right to be treated with dignity and respect.
2. You have the right to make complaints and to have complaints heard and adjudicated promptly.
3. You have the right to practice the religion of your choice or to abstain from religious practices.
4. You have the right to participate in the development and review of your treatment plan.
5. You have the right to receive treatment in the least restrictive setting within the clinic or facility necessary to accomplish the treatment goals.
6. You have the right to be discharged from treatment as soon as you no longer need care or treatment.
7. You have the right not to be subjected to any harsh or unusual treatment.
8. You have the right to refuse medication.
9. You have the right to know about the training, education, and qualifications of your treatment Provider(s).

Confidentiality/HIPPA Rights (please read carefully)

All information provided by you is considered privileged unless you specifically sign a ***Release of Information Form***. Information shared with your therapist will not be disclosed to anyone outside the Center's professional staff without your written permission, except when: 1) doing so might result in physical harm to yourself or others, 2) case records are subpoenaed by a court of law, or 3) child or elder abuse is suspected which must be reported as required by Florida law. In the event my therapist considers my behavior to be harmful, I understand the necessary steps for informing included telling the appropriate people involved (e.g. guardians for minors of potential victims) about my plans to assure that no one comes to harm. If I am under the age of 18 years, my parents may be informed about my treatment; which would involve communication about general information related to my progress in treatment.

Treatment Planning

I give my consent to treatment at Lifestyle Center for Counseling & Nutrition. I agree to participate in creating and maintaining my treatment goals and plan for care, and understand my treatment plan may be modified as my treatment progresses. I understand that it is difficult to predict the duration of therapy, and that treatment length for different issues and goals will become a part of my course for therapy, and may be adjusted depending on my current circumstances.