



CONSUMER ORIENTATION ACKNOWLEDGEMENT

As a consumer of Pathways, Inc., upon admission I have been instructed in or given written materials regarding:

- Rights and responsibilities of the person served.
- Notice of Privacy Practices
- Grievance and appeal procedures.
- Ways in which input is given.
- The organization's:
 1. Confidentiality policies.
 2. Intent/consent to treat.
 3. Behavioral expectations of the person served.
 4. Transition criteria and procedures.
 5. Discharge criteria.
 6. Response to identification of potential risk to the person served.
 7. Access to after-hour services.
 8. Standards of professional conduct related to services.
 9. Requirements for reporting and/or follow-up for the mandated person served, regardless of his or her discharge outcome.
- An explanation of any and all financial obligations, fees, and financial arrangements for services provided by the organization.
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- The program's health and safety policies regarding:
 1. The use of seclusion or restraint.
 2. Use of tobacco products.
 3. Illegal or legal drugs brought into the program.
 4. Prescription medication brought into the program.
 5. Weapons brought into the program.
- Missed Appointment Policy

- The program rules and expectations of the person served which identifies the following:
 1. Any restrictions the program may place on the person served.
 2. Events, behaviors, or attitudes and their likely consequences.
 3. Means by which the person served may regain rights or privileges that have been restricted.
- Familiarization with the premises, including emergency exits and/or shelters, fire suppression equipment, and first aid kits.
- Education regarding advance directives, if appropriate.
- Identification of the purpose and process of the assessment.
- A description of:
 1. How the person-centered plan will be developed, how a crisis/suicide prevention plan is created, and how a Psychiatric Advance Directive is followed.
 2. The person's participation in goal development and achievement.
 3. The potential course of treatment/services.
 4. How motivational incentives may be used.
 5. Expectations for legally required appointments, sanctions, or court notifications.
- Identification of the person(s) responsible for service coordination

Client ID: _____

Consumer Name

Signature of Consumer

Signature Parent/Guardian

Witness Signature

Date: _____