



# Client Handbook

**(505) 438-0010**

**[www.TheLifeLink.org](http://www.TheLifeLink.org)**

***WELCOME TO THE LIFE LINK***

***WE ARE GLAD YOU ARE HERE AND THANK YOU FOR CHOOSING US.***

## **Hours of Operation and Crisis Services After Hours**

**Our business hours are Monday through Friday 8am- 5pm.** If you are interested in enrolling in services, drop in hours are available Monday through Thursday from 8am- 11am on a first come first serve basis at our main building located at 2325 Cerrillos Road, Santa Fe NM. We encourage you to call ahead to confirm the current drop-in schedule and availability. Clinical hours also include evening appointments for both group and individual counseling. If you experience a crisis during business hours, caring professionals are available to help and if needed, connect you with a local medical provider.

**Outside of business hours, call or text 988 for mental health or substance abuse support and emergencies.**

This service is available every day, 24 hours a day. More information at [988nm.org](http://988nm.org).

**Esperanza Family Shelter has a 24-hour crisis line for victims of family violence (505-473-5200)**

**Solace has a 24-hour crisis line for victims of sexual assault (505-986-9111)**

**For active duty and veterans, Crisis Line Vets4Warriors - 1 (855) 838-8255 or go to [www.vets4warriors.com](http://www.vets4warriors.com)**

**For Native Youth Crisis Text Line go to [www.wernative.org](http://www.wernative.org)**

**For Crisis Line for LGBTQ+ Youth - 1 (866) 488-7386, text 678-678 or visit [www.thetrevorproject.org](http://www.thetrevorproject.org)**



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## ● **The Life Link History and Mission**

The Life Link has been helping individuals and families in the Santa Fe area improve their quality of life since 1987. The Life Link opened with three women volunteers in an eleven-unit rundown motel, providing temporary housing to homeless individuals and families. The Life Link is a registered non-profit organization overseen by a board of directors, and a licensed Community Mental Health Center supported through city, county, state, and federal funding, program fees and private donations.

**Our Mission:** The Life Link is committed to improving individual and community health through breaking cycles of chronic homelessness, mental illness, trauma, exploitation, and addiction. We help individuals and families in the Santa Fe area through emergency assistance, housing, community support services, and educational programs. We also provide effective outpatient treatment services for a variety of addiction and mental health needs, including medication management.

## ● **Description of Services, Programs and Locations**

Our programs include:

- Rent and utility assistance.
- Comprehensive Community Support Services to promote independent living within the community.
- Aftercare for survivors of human trafficking.
- Psychiatric services, including medication management and Suboxone treatment.
- Outpatient substance abuse, mental health and trauma treatment including individual counseling, group counseling, and Intensive Outpatient Treatment Program.
- Employment search and preparation services.
- Supportive housing.
- Psychosocial rehabilitation services (Santa Fe Clubhouse), including recovery and coping skills.
- Peer support program in which peers offer information and support.
- Sojourners Advocacy, drop-in center for women and their children.

These programs are located in Santa Fe, NM as follows. The Main Building (2325 Cerrillos Road): intake, comprehensive community services, psychiatry, Suboxone program, and administrative offices. Las Alas Building (1331 Declovina St.): group and individual counseling services and enrollment for court ordered individuals. The Santa Fe Clubhouse (1318 Luana St.): psychosocial program and the Sojourners Advocacy Building (1424 4th St.).

Our staff includes licensed behavioral health and social work professionals, independently licensed clinicians, psychiatrists, psychologists, community support workers, certified peer supporters workers, and administrative personnel who are dedicated to helping you achieve your goals. We can also provide you with information about other community resources, including emergency shelters, food, clothing, health and dental care, children's services, and financial assistance. Our programs are accredited by the Commission on the Accreditation of Rehabilitation Facilities (CARF).

## ● **Notice of Privacy Practices.**

*This notice describes:* how private health information (PHI) about you may be used and disclosed, your rights with respect to your health information and how to report a complaint if you think your private health information (PHI) has been used or shared in a way that violates your privacy or rights.



The Life Link is legally required to protect the privacy of your health information. Our commitment is governed by two key federal laws: (1) The Health Insurance Portability and Accountability Act (HIPAA), which protects all of your health information. This policy covers records about your mental health care- including diagnosis, treatment, and referrals, as long as they do not involve substance use or recovery services. (2)The Confidentiality of Substance Use Disorder Patient Records (42 CFR Part 2) provides *additional* and stricter protections for records related to substance use disorder diagnosis, treatment, and referral for treatment, including integrated records (mental health and substance abuse combined). For substance abuse or combined mental health and substance abuse (also known as “integrated”) treatment and services, the primary governing rule is 42 CFR Part 2 and HIPAA is the secondary. 42 CFR Part 2 is more stringent than HIPAA. In other words, these records are more private.

*How We May Use and Disclose Your Private Health Information (PHI):*

Purpose	Mental Health Only Records (HIPAA)	Substance Abuse and Integrated Records (Combined Mental Health and Substance Abuse) (42 CFR Part 2 & HIPAA)
For Treatment: provision, coordination and management of healthcare and related services.	We may share your PHI with doctors, therapists, and outside staff and agencies involved in your care.	Under 42 CFR Part 2, your consent is required before any information related to your services can be shared with outside providers for treatment purposes
For Payment: activities necessary to obtain reimbursement for services provided to you.	We may use and disclose your PHI to obtain payment from insurers or third parties, as well as audits from payors.	42 CFR Part 2 requires your written consent before your information can be shared. Without your consent, The Life Link staff cannot help you apply for coverage or bill your insurance for services. As a result you may be responsible for payment. However, you will be asked to sign a consent to disclose this information for the purpose of payment.
For Health Care Operations: necessary administrative, financial, legal and quality improvement activities.	We may use your PHI for administrative activities, quality improvement, and staff training.	42 CFR Part 2 requires your consent to share your information with any other agency, <i>unless</i> you have signed a single future consent referenced in Section B.
Public Health and Safety	We may disclose information as required by law (e.i., to report communicable diseases, child abuse, or prevent a serious threat).	We can report child abuse or an imminent threat, but must be careful not to disclose that you are a 42 CFR Part 2 patient unless required by a specific court order.



<p>Legal Proceedings / Law Enforcement</p>	<p>We may disclose information in response to a court order, subpoena, or administrative demand.</p>	<p>42 CFR Part 2 provides the strongest protection. We cannot use or disclose your Substance Abuse/Integrated Records (or testimony about them) in any civil, criminal, administrative, or legislative proceedings <i>against you</i> without your specific written consent or a specific court order.</p>
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*Uses and Disclosures That Require Your Specific Written Consent:* (1) Treatment, Payment, and Health Care Operations (TPO) for mental health, substance abuse/integrated records: Under the updated 42 CFR Part 2 regulations regarding substance abuse or integrated records, you may consent to a single written consent for all future uses and disclosures of your substance use disorder treatment records for treatment, payment, and health care operations. This consent remains valid unless you revoke it in writing. You may also choose to provide more limited consent for specific disclosures only. (2) Psychotherapy, Substance Abuse or Integrated Psychotherapy Notes: These notes document or analyze a conversation during a counseling session, are stored separately from a client’s medical record, and are protected like HIPAA and 42 CFR Part 2. We cannot share these notes without your separate, specific written consent. A TPO consent does not include the permission to disclose psychotherapy notes. (3) Marketing/Sale of Information: We must obtain your specific written consent for any marketing activities or the sale of your PHI. It should be noted that The Life Link DOES NOT sell your PHI nor does it use client’s PHI for marketing or fundraising without proper consent.

*Other Considerations:* We will not condition treatment on you signing an authorization / acknowledgement, but we may be forced to decline you as a new patient or discontinue you as an active patient if you choose not to sign the acknowledgement of this notice of privacy practices or revoke it. All of our Business Associates follow the same strict laws and regulations regarding the privacy of client’s PHI. In addition, we only share “the Minimum Necessary” to accomplish the recipient’s lawful purposes of any use and disclosure. If you were mandated to treatment through the criminal legal system (including drug court, probation, or parole) and you sign a consent authorizing disclosures to elements of the criminal legal system such as the court, probation officers, parole officers, prosecutors, or other law enforcement, your right to revoke consent may be more limited. In the case of records containing substance use or integrated treatment records, or testimony relaying the content of such records, shall not be used or disclosed in any civil, administrative, criminal, or legislative proceedings against you unless based on your specific written consent or a court order. Records shall only be used or disclosed based on a court order after notice and an opportunity to hear is provided to you (the patient) and/or the holder of the record, where required by 42 USC § 290dd-2 and 42 CFR Part 2. A court order authorizing use or disclosure must be accompanied by a subpoena or other similar legal mandate compelling disclosure before the record is used or disclosed. Federal law (42 CFR Part 2) prohibits the recipient of your substance use or integrated disorder records from making any further disclosure of this information unless further disclosure is expressly permitted by your written consent or as otherwise permitted by 42 CFR Part 2. In some limited situations allowed by law, we may use or share your health information without your consent for the following purposes: when required under federal, state or local law; when necessary in emergencies to prevent a serious threat to your health and safety or the health and safety of other persons, including information about a crime committed on The Life Link premises or against an agency employee; when necessary for public health reasons (i.e. prevention or control of disease, injury or disability, reporting information such as adverse reactions to medications, ineffective or dangerous medications or products, suspected abuse, neglect or exploitation of children, disabled adults or the elderly, or domestic violence); for federal or state government health-care oversight activities (i.e. civil rights laws, fraud and abuse



investigations, audits, investigations, inspections, licensure or permitting, government programs, etc.); for judicial and administrative proceedings and law enforcement purposes (i.e. in response to a court order, by providing PHI to coroners, medical examiners and funeral directors to locate missing persons, identify deceased persons or determine cause of death); for Worker's Compensation purposes (i.e. we may disclose your PHI if you have claimed health benefits for a work-related injury or illness), for intelligence, counterintelligence or other national security purposes (i.e. Veterans Affairs, U.S. military command, other government authorities or foreign military authorities may require us to release PHI about you); and to create a collection of information that is "de-identified" (i.e. it does not personally identify you by name, distinguishing marks or otherwise and no longer can be connected to you).

*Your rights:* you have the right to a copy of this notice, in printed or electronic format, and to discuss it with The Life Link staff if you have any questions or concerns; you have the right to inspect and obtain a copy of your health information. We generally respond to requests for records within 30 days; you have the right to request restrictions of disclosures, for purposes of treatment, payment, and healthcare operations, including if you have previously provided written consent. We are not legally required to agree to your request for a restriction. If we believe it is not feasible due to operational, technical, or regulatory reasons, or if it would affect your care, we may decline it. If we do agree to a restriction, we will honor that agreement unless the information is needed to provide you with emergency treatment; you have the right to make an amendment to your records, if you believe it is inaccurate; however we may deny your request for amendment if we believe the medical information to be accurate; you have the right to request an accounting of certain disclosure we have made, if any, of your health records; you have the right to request and obtain restrictions of disclosures to your health plan for those services for which you have paid in full; you have the right to elect not to receive communications from The Life Link to fundraise on its own behalf; you have the right to be notified in the event of a breach of your protected health information; and you have the right to revoke any authorization you have provided to use or disclose your health information except to the extent that action has already taken place in reliance on such authorizations. You may revoke a consent by submitting a request in writing to The Life Link's Medical Records Manager or Compliance Officer or you may request reasonable accommodation for an alternative revocation process by contacting our Compliance Officer.

*The Life Link's duties:* The Life Link is required by law to maintain the privacy of records, to provide patients with notice of its legal duties and privacy practices with respect to records, and to notify affected patients following a breach of unsecured records. The Life Link is required to abide by the terms of the notice currently in effect. The Life Link reserves the right to change the terms of its notice and to make the new notice provisions effective for records that it maintains.

*Complaints:* If you believe your privacy rights have been violated, you have the right to file a complaint with the Secretary of the U.S. Department of Health and Human Services. You may do so by contacting the HHS Office for Civil Rights or accessing <https://www.hhs.gov/hipaa/filing-a-complaint/index.html>. A patient is not required to report an alleged violation to the Secretary or The Life Link but may report to either or both. In order to file a complaint with our agency, contact The Life Link's Compliance Office using contact information at the beginning of this document. The Life Link will not retaliate against you for filing a complaint.

Any changes to this Notice of Privacy Practices will be available by accessing our website [thelifelink.org](http://thelifelink.org) or can be obtained by requesting it to any The Life Link employee.



- **During the intake process you will have the opportunity to review several consents. You have the right to choose whether or not to agree with them. Each one includes information on potential consequences of not agreeing and are listed below.**

In order to revoke any of these consents, you can provide written revocation to The Life Link's Compliance Officer via a letter signed and dated specifying which consents are being revoked. You can also speak to your provider or front desk staff for assistance.

- 1. Informed Consent and Client Service Agreement.** I voluntarily consent to engage in behavioral health services at The Life Link and acknowledge that no guarantees or promises have been given regarding the results of these services. I understand that developing a service plan with my providers, and regularly reviewing our work toward meeting my recovery goals, are in my best interest. I agree to play an active role in this process and attend sessions on time and follow attendance policies. Consenting to treatment is required to engage in any The Life Link service.
- 2. Consent for Uses and Disclosures of Treatment Information for the Purpose of Treatment, Payment and Operations (TPO).** I understand that my substance abuse treatment records, if applicable, are protected under federal law, including 42 CFR Part 2 and HIPAA, and any applicable state laws. I authorize The Life Link staff to share my health information for the purposes of treatment, payment and operations. This involves but is not limited to communicating with other healthcare providers and agencies involved with my care, bill appropriate funding sources for reimbursement of my services, share my information with business associates involved in the operations of the agency and utilize The Life Link team approach in my treatment. I understand The Life Link will strive to keep any information disclosed to the minimum necessary to accomplish those tasks, including sharing information internally with those directly involved in my care. Our business associates must comply with all federal and state confidentiality laws. The details of these disclosures are described in our agency's Notice of Privacy Practices. I understand that if HIPAA covered entities and business associates receive records of treatment, payment and healthcare operation purposes, the records may be re-disclosed in accordance with HIPAA, except for use or disclosures for civil, criminal, administrative, or legislative proceedings against me. Unless I revoke this consent, this consent will take effect immediately and will expire upon revocation. I understand that I have the right to not sign this consent form or decline it. I have the right to revoke this consent in writing at any time, except to the extent that action has been taken in reliance upon it. I understand that refusal to consent may result in fragmented care, inability to coordinate my care with other providers and inability to seek payment for services (thus making myself financially responsible).
- 3. Email and Texting Authorization.** I consent to communicating with The Life Link via email and/or text messages, such as receiving reminders of appointments and/or other communications with my providers. I understand that more secure methods of communication, like landline phone and fax or encrypted email, are always preferred to non-encrypted (insecure) email and phone calls and/or text messaging for more sensitive protected health information (PHI). Under specific circumstances and if you choose to, insecure email and/or text messaging communication containing PHI may take place between The Life Link and myself. Staff will send the minimal necessary information, in other words just enough information to accomplish what is needed. It is my responsibility to keep The Life Link informed of changes in my contact information. I understand that whenever feasible, The Life Link staff will use encrypted emails when sending my private health information, making the transmission secure. I comprehend that if I choose to decline this consent I will not receive appointment reminders nor will I be able to communicate by text or email with my providers.



- 4. Telehealth Consent.** I consent to participate in telehealth services at The Life Link. I understand that telehealth is the practice of delivering services via technology assisted media or other electronic means between a provider and a client who are located in two different locations (such as by phone or video). I understand The Life Link services are primarily offered in person, but may occasionally be conducted via telehealth. I understand the importance of being in a private and safe environment when attending a telehealth appointment. If attending a telehealth group, I must ensure that others cannot hear what is being said by other clients. I understand that my provider may determine that in person services may be clinically-indicated or the better format for me and may request that we change formats. I understand that there are risks, benefits, and consequences associated with telehealth, including but not limited to disruption of transmission by technology failures, interruption and/or breaches of confidentiality by unauthorized persons, and/or limited ability to respond to emergencies. If during a telehealth session we encounter technical difficulties resulting in service interruptions I can call the main Life Link phone number at (505) 438-0010 for assistance. I need to let my provider know what my location is during a telehealth appointment in order to be able to address emergencies effectively. I understand that my provider may need to communicate with my emergency contact and/or appropriate authorities in case of an emergency. I comprehend that declining this consent will lead to being unable to receive any services by phone or video.
- 5. Consent to Bill for Services and Statement of Financial Responsibility.** I acknowledge that The Life Link will submit for reimbursement for services to my insurance and may assist me in applying for insurance coverage if I don't have any. Nevertheless, I am ultimately and fully responsible for all charges for the services I receive, including co-payments, deductibles, and services not reimbursed by my insurance. I agree to update The Life Link on any changes in my coverage. I authorize any third party to pay directly and solely to The Life Link any and all coverage for services at The Life Link. I acknowledge that failure to provide The Life Link with the information necessary to bill any applicable third party payor will result in my being designated as financially responsible for fees related to services provided. I further grant The Life Link permission to release and disclose any and all health records including alcohol and substance abuse records covered under 42 CFR, part 2 necessary for purposes of registration, determining eligibility, and billing my insurance company or other third party payment programs in which I am enrolled, and release The Life Link and any related entities, employees and Directors from any and all liability related to or arising from any such release or disclosure. The information used for the above purpose will be kept strictly confidential in accordance with all federal and state confidentiality laws. I understand that I may revoke this consent at any time: however, if I revoke my signed consent or decline to sign this consent, I may no longer be eligible for coverage by my insurance company, or other third party payment programs and could be declined as a The Life Link client if I don't pay for services myself.
- 6. Informed Consent for the Use of Artificial Intelligence (AI) for Completion of Documentation.** Artificial Intelligence (AI) is a tool that uses computer software to perform tasks that typically require human intelligence, like writing, summarizing information, providing insights, organizing data or providing administrative support. I understand that all AI tools used at The Life Link adhere to industry HIPAA standard security practices in order to protect your privacy. Furthermore, no AI tool is used to make final decisions about my care, treatment or diagnoses. I understand that benefits of using AI in documentation is that it allows my provider to spend less time on administrative tasks and more time focused on my care and helps create more complete and accurate records of my services. The potential risks of using AI in documentation are potential for error or bias. To reduce this risk, providers are trained to carefully review the documentation created by AI and ensure accuracy. This is why my provider is ultimately in charge of my records and reviews its content for accuracy. Only my provider or authorized care team members



have access to any AI-generated content. No recordings or session content are stored or reviewed by third parties beyond what is outlined here. I have the right to voluntarily consent, decline or later revoke this consent at any time. I have the right to request more detailed information about AI software utilized by contacting The Life Link's Compliance Officer. AI software will not use any of my data to train its model or for any purpose other than creating my documentation.

## ● **Scheduling Appointments and Reminders**

You can make appointments for individual counseling with the receptionist at Las Alas (ext. 022). Appointments for Community Support Services are made with the Community Support receptionist in the main building or directly with the provider. Appointments with the psychiatrist are scheduled with the doctor's receptionist in the main building (ext. 081). Please make a note of the date and time of your appointment or ask for a card with that information.

24 hours and one hour before a scheduled appointment, an automated system will send reminder text and/or phone messages to your phone number(s) on file.

## ● **No-Shows and Cancellations**

It is very important that you keep your scheduled appointments, as there are many people who need services. To cancel an appointment, please call at least 24 hours in advance at 505-438-0010 or contact your provider directly. Missing your first appointment without canceling in advance, not showing 2 times in a row, or canceling appointments very often, will lead to being removed from the schedule. You will be placed on stand-by status or you may need to wait for some time before being scheduled again. If you are court ordered to engage in treatment, 2 consecutive "no shows" or a total of 3 "no shows" during the program will result in automatic referral back to the court for noncompliance. For all counseling groups, if you miss 3 or more sessions, you will be asked to restart the program from the beginning. You can request to be re-referred to services at any time after discharge due to lack of attendance.

## ● **Paying for services**

We accept various forms of payment including Medicaid, Medicare, Turquoise Care, private health insurance and self-pay. If you don't have health insurance, staff can assist you with applying for coverage or can provide you related information. You also may be required to pay a copay, depending on your insurance or funding source. The Life Link's fees are based on the client's insurance rates. In the absence of insurance, rates are aligned with Medicaid fees or sliding scale. If you have questions regarding payments or billing, please speak to a receptionist or a provider.

## ● **Treat First (Onboarding)**

The "Treat First" process is a form of onboarding The Life Link services where a new client can get case management services immediately and speak to a therapist. This is offered Monday through Thursday 8 to 11am, first come first serve. After a maximum of 4 appointments, the person decides if they want to have ongoing services and schedule an Intake Assessment.

## ● **The Purpose of Intake and Assessment**

The purpose of the Intake Assessment is to:

- Describe and explain the services and programs available at The Life Link;
- Get information, including your personal history to make informed choices about services;
- Give appropriate assessment instruments and diagnosis;



- Identify areas of concerns or problems; and
- Begin to create individualized treatment and discharge/transition plans.

When appropriate and if you choose to, family members or other support persons may come with you and participate in the interview. Information about your education, family, health history, cultural and spiritual preferences, past and current problems, your strengths, and other important topics are collected during the Intake Assessment appointment. You have the right to review this form. When you complete this assessment, the intake process is considered complete and you can be referred to most ongoing services, such as community support services, counseling and more, depending on your preferences and needs.

## ● **The Purpose and Development of Your Service/Treatment, Crisis/Safety & Discharge/Transition Plans**

You will be asked to develop a Service or Treatment Plan that will help guide all aspects of your behavioral health care needs. The Service Plan is designed to maximize your strengths and abilities, address your behavioral health, document specific goals and interventions, outline what you need to do to meet these goals, and document your progress in meeting your goals and objectives. The Service Plan is reviewed frequently.

When you and your provider create a Service Plan, you will also begin to discuss discharge/transition and crisis plans. Transition and discharge planning will help with referrals and transfers to services within the organization or to community resources, as well as to support your progress and goals. Crisis and Safety Plans are tools to help you plan for what to do in a mental health or substance abuse crisis or challenge.

### ● **Your Rights and Responsibilities**

When you receive services from The Life Link you have the **right** to:

- Be treated with respect.
- Be free from abuse, financial or other exploitation, retaliation, humiliation, or neglect.
- Receive services in a safe and clean environment.
- Choose the services you want to access from The Life Link, except for court ordered treatment.
- Receive services that are respectful of your cultural background or group, no matter what your race, color, ethnicity, national origin, sex, gender identity, gender expression, sexual orientation, age, religion, domestic/marital status, political affiliation or opinion, veteran or military status, physical/mental disability or income, etc.
- Involve family members or significant others in your treatment, if you choose to.
- Expect the people working with you to never physically, verbally or sexually abuse you.
- File a complaint if there is a problem with your services, and have the problem resolved in a timely manner without retaliation.
- Develop a recovery service plan with your provider that you agree to work on.
- Refuse to participate in any kind of survey or research.
- Expect all information to be kept confidential according to legal and ethical standards.
- Have your opinions about your care heard and used to improve our services.
- Request reasonable accommodations.
- Access your medical records in a timely manner.

When you receive services from The Life Link you have the **responsibility** to:

- Be courteous to other clients and The Life Link staff.



- Attend your appointments on time.
- Change or cancel appointments at least 24 hours in advance.
- Tell your provider about your strengths, needs, abilities and preferences as honestly as you can.
- Tell your provider if you have any special needs.
- Ask questions about anything you don't understand.
- Actively participate in your service planning and in meeting your goals.
- Inform your provider if you wish to discontinue services.
- Attend services without being impaired by alcohol or illicit drugs.

### ● **We Believe in the Value of Diversity**

Our agency embraces diversity and multiculturalism in all of its forms and is committed to understanding, respect and cultural competence. We believe that our communities are enriched by the unique differences found among its diverse cultures. We encourage and promote a culture where personal and cultural backgrounds are utilized effectively to enhance the growth of clients and our organization. We strive for increasing sensitivity, appreciation and communication between all forms of diversity.

We celebrate the diversity of everyone we serve. We welcome people of all ages, color, disability, ethnicity, family or marital status, gender identity or expression, language, national origin, physical and mental ability, political affiliation, race, religion, sexual orientation, socio-economic status, veteran status, and other characteristics that make a person unique.

### ● **Access to Services**

The Life Link services are available to any person regardless of culture, race, color, ethnicity, national origin, sex, gender identity (including gender expression), sexual orientation, age, religion, domestic/marital status, political affiliation or opinion, veteran or military status, physical/mental disability or income. Our facilities are fully ADA (Americans with Disabilities Act) compliant. Please notify your intake professional or any staff of any accommodation you need to fully access services.

### ● **Client and Stakeholder Involvement and Participation in the Outcomes Process**

We value and welcome your opinion of our services. We want to know how you feel we are doing and how we can improve our services. We use this information to plan, expand, and improve programs to meet individual and community needs. Please give us your feedback, and be assured that we will act on your complaints or suggestions. We offer the following ways to tell us what you think:

- Client satisfaction surveys.
- Suggestion boxes in the waiting areas.
- Client involvement on our Board of Directors.
- Comments, complaints, and grievances.
- Feedback from stakeholders, referral sources, and the community in general.

We also assess clients status before, during, and after treatment to evaluate the needs of clients as well as the impact of services.

### ● **The Life Link Code of Conduct, Including Violence**

The Life Link promotes a safe and nonviolent workplace. **We want everybody to feel safe here.** Violence or threats of violence by staff or clients will not be tolerated. It is the policy of The Life Link that all full and part-time employees, contractors, interns, volunteers, and administration are expected to perform their jobs



in a manner that reflects the highest standards of ethical behavior. Security staff is on site after working hours and on weekends and holidays. During business hours, maintenance staff serve as security guards.

Staff is expected to follow the ethical standards required by their specific licensing and certification boards. All employees' actions shall reflect a competent, respectful, and professional approach when serving our clients, their families and/or representatives, working with other providers of services, and interacting within the communities we serve.

We will not tolerate any type of violence or aggression on our premises, thus we ask you to be courteous and respectful of others, including other clients, staff and visitors. Failure to comply with this request, could lead to being asked to leave the property and may result in the restriction or closure of all services, and a referral to another organization. Assistance with the removal of the individual will follow The Life Link's Policy and Procedures on Workplace Threats and Violence and may include law enforcement. Please note that we do not employ seclusion or restraint techniques.

### ● **Reasonable Accommodations**

You can make a formal request for reasonable accommodation by completing our "Accommodation Request Form" or providing a letter with the following information: date of request, name of client, accommodation(s) requested, reason for the request, duration of request, supporting documentation (if applicable), and the name and signature of the person completing request for accommodation. Applications can be completed by the client, advocate or The Life Link service staff and submitted to The Director of Operations for review. Reasonable accommodation(s) will be granted in accordance to the Americans with Disabilities Act (ADA). The Life Link is not required by law to provide the precise accommodation requested, as long as an effective accommodation is provided. Final decisions take into consideration the applicant's needs as well as undue hardship to the agency or other clients.

### ● **Grievances and Appeal Process**

In order to protect your rights and ensure that you receive the highest quality of services, The Life Link administration and all staff are committed to upholding the highest Code of Ethics and professional conduct. Day-to-day issues affecting you will hopefully be resolved informally between yourself and your primary staff member responsible for your service coordination (Community Support Worker, Therapist or other staff). If the problem or complaint is not resolved to your satisfaction, complaints and feedback can be written and placed in the input boxes in the reception areas. They will be retrieved regularly by Quality Improvement Staff, who will log and take any action necessary, and respond back to you with a timely response or resolution, if the complaint form has contact information. Complaints, suggestions and positive comments are analyzed in a report that includes actions taken and recommendations for policy or procedural changes, and is shared with the Executive Management Team.

However, if you believe that your rights have been violated by a staff member or the organization, you are encouraged to make a complaint and/or file a grievance, and to pursue a fair solution to your concern(s). If you want to make a formal or informal grievance or complaint, ask the receptionist to put you in contact with the relevant supervisor. Afterwards, the issue could be escalated to a higher level within the organization by notifying our Director of Operations via a formal oral or written complaint and having every effort made to resolve the issue fairly. You will not be denied services as a result of any grievance or complaint and The Life Link will never retaliate against you.



If the resolution is not satisfactory, you may file a formal grievance. During a formal grievance procedure, you have the right to the following:

- 1) Help from a representative of your choice.
- 2) To review any information obtained in investigating the grievance, unless it would violate the confidentiality of another person served.
- 3) To present testimony of witnesses who are involved in the grievance.
- 4) To be told of the complete findings and recommendations, except those that would violate the confidentiality of another person.

### ● **Critical Incident Reporting**

The Life Link is required by law to report to the Department of Health and/or your health insurance company when something happens that represents actual or potential serious harm to the wellbeing of you or others. Examples of critical incidents are abuse, neglect, exploitation, injuries of unknown origin, death, behavioral or medical health emergencies, and/or environmental hazards.

Anyone can make a formal complaint to the NM Department of Health at 1-800-752-8649 for abuse, neglect, exploitation, and injuries of unknown origin. Complaints related to their care can also be made with their insurance by contacting them directly, by calling the customer service number on the back of their insurance card.

### ● **Bringing or Being Impaired by Licit/Illicit Drugs and/or Alcohol**

The Life Link provides a drug-free workplace for its employees and clients. Alcoholic beverages or illegal drugs are not allowed on the property. If you bring either of these items with you or are impaired by legal or illegal drugs and/or alcohol when you attend an appointment, you may be asked to take a drug or alcohol test and/or asked to leave or re-schedule. If your appointment is via telehealth, the session can be canceled. If on premises, staff may ask for your car keys if you drove, or ask you to call someone for a ride home to assure your safety and that of others.

Consuming cannabis is not allowed on premises, even if the person carries a Medical Cannabis Card.

To protect the health and safety of you, other clients, and visiting children, personal prescription drugs and over the counter medications may be brought onto The Life Link premises, but must be kept in a secure place. A secure place may be either on one's person or bag not visible or accessible to others. This policy applies to personal over-the-counter (OTC) drugs, prescription drugs, and drug-related items (e.g. syringes, pipes). This policy applies to clients, staff, and visitors.

### ● **Smoking and Use of Nicotine Products**

Smoking tobacco, use of e-cigarettes or chewing tobacco is not allowed in our buildings. If smoking or using e-cigarettes, use the designated locations. You must be at least 25 feet from the building. Ash containers are located near the main entrances.

### ● **Weapon Policy**

The Life Link provides a violence-free workplace for its employees and clients. **No weapons are allowed in the building(s) or on The Life Link properties.** A weapon is defined as any implement capable of inflicting bodily harm and/or which is used or worn in a threatening manner. If staff members think a person or visitor is in possession of a weapon on the property, they will tell the person of our policy prohibiting possession of such items and ask them to remove the weapon from the property. Failure to comply with this request will result in



that individual having to leave the premises, the police may be contacted and could lead to the interruption or termination of The Life Link services.

## ● **Fire, Safety, and Emergency Precautions**

It is the policy of The Life Link that a designated safety officer is available during all hours of operation. First aid kits are located at all reception desks and other program locations such as the Santa Fe Clubhouse. Emergency evacuations plans are posted in the facility.

- o ABC type fire extinguishers are mounted and/or placed at easily identifiable and accessible locations throughout all buildings.
- o Smoke detectors have both audible and visual alarm indicators.
- o Emergency evacuation and fire safety exit plans are clearly posted.

Fire emergency plans are as follows:

- 1) In the event of the discovery of a fire, a staff member will evacuate all individuals from the immediate area, via the use of stairs. Elevators are not to be used and all doors must be closed to contain the fire. To expedite the evacuation process, all ambulatory clients and visitors are evacuated first, followed by staff members who will assist all others in evacuation. The fire alarm will be activated and 911 called.
- 2) If the fire is small, staff may attempt to contain it by using a fire extinguisher.
- 3) All persons will be evacuated and assembled at a location that is pre-determined by each facility as the evacuation assembly area, where staff will account for all persons served and visitors.
- 4) The senior staff or Plant Manager will provide any special information to arriving emergency personnel such as size and location of fire and location of any flammable or explosive items, and will relinquish control of the situation to the local authorities.
- 5) The fire department will be the final authority in determining building re-entry.
- 6) After the immediate danger is past, the staff member in charge of the site will determine the necessity for relocation of persons served and/or staff members.

Items 3, 4, 5 and 6 also apply to evacuations caused by other circumstances, such as violence or other unsafe situations. In these cases, the final authority determining building re-entry could vary, i.e. police or security personnel.

## ● **Mental Health or Psychiatric Advance Directive**

A mental health or psychiatric advance directive is a written document that describes your directions and preferences for treatment and care during times when you are having difficulty communicating and making decisions, such as during a psychiatric crisis. The advantages to having a mental health advance directive are: you have more control over what happens to you during periods of crisis and providers and others will know what you want even if you have challenges expressing yourself. Your The Life Link provider can give you more information or help you find answers to your mental health advance directive questions.

Anything that might be involved in your treatment can be a part of a mental health advance directive. For example: selection of mental health treatment providers and institutions, approval or disapproval of diagnostic tests, programs of medication and mental health treatment, and other directions related to mental health treatment.

You have the option of naming an agent who is at least 18-years old, knows you and knows what you want and can inform treatment providers about your preferences and can advocate for you. By law, your agent cannot be your doctor, your community support worker, or your provider unless that person is also your spouse, adult



child, or sibling. If you name an agent, that person must be given a copy of your advance directive. After that, it is up to you who you give a copy to. Think about giving one to your current mental health provider, your lawyer (if you have one) and trusted family members. Bring a copy if you are being admitted to a mental health facility. Any treatment provider who gets a copy is required to make it a part of your medical record.

There are instances in which your mental health advance directive may not be followed. Some examples are: your requested interventions are infeasible, medically ineffective, or unavailable; the facility or provider is not licensed or authorized to provide the requested treatment when following your directive would violate state or federal law or your instructions would endanger others

As long as you have capacity, you can change or revoke your mental health advance directive at any time. If you are incapacitated, you can only change or revoke if you have specified an ability to do so in your mental health advance directive. Changes need to be made in writing. Be sure to notify everyone who has a copy if you revoke it or make any changes. Where there is a conflict between a mental health advance directive and any previous directive (such as a living will), the newer document will have legal priority. To reduce confusion, it is probably best to have one person act as your mental health advance directive agent and durable power of attorney.

***If you have any other questions about The Life Link or our services, we are here to help.***

**We look forward to working with you!**