

# Cornerstone Behavioral Healthcare

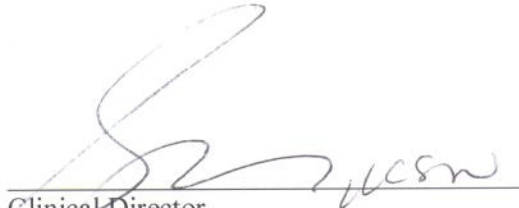
## CS.7.A.5 and OP.5.A.5 Client Input and Signatures

Cornerstone Behavioral Healthcare's services are client-centered. All clients and/or guardians are required to participate and sign treatment/service plans and other documentation (e.g. Consolidated Demographics, Annual HIPAA Signature Page, and other required documents), in a timely and clinically appropriate manner.

The following is a list, in chronological order of importance, of ways we allow client signatures:

1. Face to face with the client to review, complete, and approve their treatment/service plan and other documentation
2. By U.S Postal mail
3. Electronically through a HIPAA approved signature program
4. Under special conditions, with an appropriate documented reason and reviewed by Clinical Supervisor, we will accept email, text, or verbal. The client's name and date must be visible and legible. On the plan, please include the verbiage "I have reviewed and approved the plan"

Input, "voice and choice", will be represented in all aspects of care. Client input will be gathered in assessment, care planning, and all treatment provided. Clients need to participate in completing required documentation, within the specified timeframes. Assistance will be provided in a sensitive, clinically appropriate, and private way. Signatures will be obtained on documents to acknowledge client input and consent.

  
Clinical Director

3/31/23  
Date