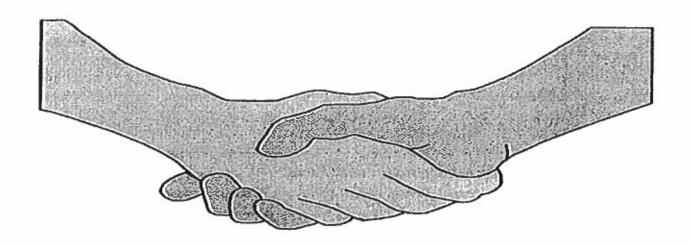
APPLESEED COMMUNITY MENTAL HEALTH CENTER, INC.* CONSUMER RIGHTS And RESPONSIBILITIES



CLIENT RIGHTS OFFICER:

Amy Adams LPCCS 2233 Rocky Lane Ashland, Ohio 44805

(419) 281-3716

Available: M-F 8:00 A.M. - 4:30 P.M.

YOUR RIGHTS AND RESPONSIBILITIES AS A CONSUMER AT APPLESEED

Appleseed's Consumer rights policy conforms with Section 5122-26-18 of the Ohio Administrative Code, stating that each Consumer has all of the following rights:

THE RIGHT...

- 1. to be treated with consideration and respect for personal dignity, autonomy and privacy.
- 2. to reasonable protection from physical, sexual or emotional abuse and inhumane treatment.
- 3. to receive services in the least restrictive, feasible environment.
- 4. to participate in any appropriate and available service that is consistent with an individual service plan (ISP), regardless of the refusal of any other service, unless that service is a necessity for clear treatment reasons and requires the person's participation.
- 5. to give informed consent to or to refuse any service, treatment or therapy, including medication absent an emergency.
- 6. to participate in the development, review and revision of one's own individualized treatment plan and receive a copy of it.
- 7. to freedom from unnecessary or excessive medication, and to be free from restraint or seclusion unless there is immediate risk of physical harm to self or others.
- 8. to be informed and the right to refuse any unusual or hazardous treatment procedures.
- 9. to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies, photographs, or other audio and visual technology. This right does not prohibit an agency from using closed-circuit monitoring to observe seclusion rooms or common areas, which does not include bathrooms and sleeping areas.
- 10. to confidentiality of communications and personal identifying information within limitations and requirements for disclosure of client information under state and federal laws and regulations.
- 11. to have access to one's own client record unless access to certain information is restricted for clear treatment reasons. If access is restricted, the treatment plan shall include the reason for the restriction, a goal to remove the restriction, and the treatment being offered to remove the restriction.
- 12. to be informed a reasonable amount of time in advance of the reason for terminating participation in a service, and to be provided a referral, unless the service is unavailable or not necessary.
- 13. to be informed of the reason for the denial of a service

YOUR RIGHTS AND RESPONSIBILITIES AS A CONSUMER AT APPLESEED CONTINUED......

- 14. to not be discriminated against for receiving services on the basis of race, ethinicity, age, color, religion, gender, national origin, sexual orientation, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status or in any manner prohibited by local, state, or federal laws.
- 15. to know the cost of services.
- 16. to be verbally informed of all client rights, and to receive a written copy upon request.
- 17. to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations.
- 18. to file a grievance.

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- 19. to have oral and written instructions concerning the procedure for filing a grievance, and to assistance in filing a grievance if requested.
- 20. to be informed of one's own condition,
- 21. to consult with an independent treatment specialist or legal counsel at one's own expense.

TO FILE A GRIEVANCE: Contact Amy Adams, Client Rights Advocate, who is available weekdays from 8:00 A.M. to 4:30 P.M. at 2233 Rocky Lane 281-3716. The consumer advocate is Amy Adams.

Clients have the right to file a grievance with outside organization, including the following:

- The Client Rights Officer for the Mental Health and Recovery Board of Ashland County is David Ross who is available weekdays from 8:30 A.M. to 4:00 P.M. at 52 W. Main St., phone 281-3139.
- Ohio Department of Mental Health & Addiction Services
 Kathryn Remer
 30 East Broad St, 36th floor
 Columbus Ohio 43215-3430
 877-275-6364
- Disability Rights Ohio
 200 Civic Center Dr, Suite 300
 Columbus, Ohio 43215
 614-466-7264

A Grievance Form can be obtained from any staff member or the Designated Client Rights Officer.

Each allegation of neglect and/or abuse by agency staff of a person served, regardless of source, shall be investigated.

The agency shall report any allegation of neglect or abuse to the Mental Health and Recovery of Ashland County Board within 24 hours of the event occurring and shall communicate the results of the investigation to the Mental Health and Recovery Board.

All notifications required by law shall be made to appropriate authorities in situations that involve child or adult abuse or any explicit threats to harm self or another.

RESPONSIBILITIES OF THE CLIENT AND FAMILY:

- Provide complete and honest information about health care status.
- Follow the treatment plan you have helped create with the therapist or treatment team.
- Complete treatment assignments that you and your therapist agree will aid your progress.
- Understand how to gain access to care in routine and emergency situations.
- Know your health care benefits or have a family member be aware of those benefits.
- Attend appointments unless prevented by an emergency.
- Follow appointment cancellation procedures required by the agency.
- Be considerate of the rights of others receiving treatment and agency staff.
- Be aware of the client's rights and grievance procedures.

Revised 09/05/2018