# Topic: Rights & Responsibilities

(Original plan developed by April 2010 Community Orientation Skills Development Workshop participants in Ft. Wayne, IN, and further developed by the Cultural Orientation Resource Center)

## Activity: Rights & Responsibilities of Clients

Objective	Clients and resettlement agencies will have a better mutual understanding of the rights and responsibilities of both parties.		
Lesson Time	1 hour		
Materials	<ul> <li>Statement on rights and responsibilities of clients and resettlement agencies, one per participant (see sample included, courtesy of Catholic Charities Diocese of Fort Wayne, South Bend, IN)</li> <li>Writing implements, one per participant</li> </ul>		
Discussion Questions	<ul> <li>What do clients and resettlement agencies agree on regarding rights and responsibilities?</li> <li>What do clients and resettlement agencies disagree on regarding rights and responsibilities?</li> <li>How can both parties work together on these issues?</li> </ul>		
Practice	1. Distribute statements and writing implements to each participant, using interpretation as needed.		
	<ol> <li>Read through the statements, stopping after each new idea. Check for understanding by presenting questions to participants on the points of the statement. Discuss points of confusion or differing views.</li> </ol>		
	<ol> <li>Participants sign off on each point to demonstrate their understanding or agreement. (Note: If participants cannot come to an agreement, a lengthier discussion, possibly involving additional parties, may be necessary.)</li> </ol>		
Cultural Notes	Explain terminology as necessary.		
Discussion Questions	<ul> <li>Do you feel that you can uphold these responsibilities? If so, how will you do so?</li> <li>Do you feel that you are a partner in this statement?</li> <li>Do you have questions about whether the agency will meet its responsibilities?</li> <li>Do you like having this document?</li> </ul>		
Variations	1. This can be a part of intake or initial orientation and can be included in the client file.		
	2. This can provide a good practice session on the use of signatures in the U.S., and a discussion about the importance and legalities of providing a signature can be addressed.		

# Sample Client Rights & Responsibilities

Courtesy of Catholic Charities of the Diocese of Fort Wayne-South Bend, Inc., May 2010

# **Client Rights**

The rights of clients include but are not limited to:

- 1. Being treated in a professional and respectful manner at all times, while receiving services in a nondiscriminatory manner.
- 2. Services will not be denied based on religious or spiritual beliefs.
- 3. Knowing the names and credentials of their service providers.
- 4. Having confidentiality of records and communications to the extent provided by law, except when to do so could cause injury to themselves or others.
- 5. Obtaining information about the risks and benefits, costs and length of services they will receive, and receiving a copy of billing information.
- 6. When a client has difficulty understanding or reading the primary language used in the practice setting, the client has the right to be provided communication in writing and orally in the client's primary language. Methods of communication provided to a client may include as applicable: an interpreter; telephone amplification, sign language services, or other communication methods for deaf or hearing impaired persons; communication assistance for persons with special needs who have difficulty making their service needs known; and consideration of the client's literacy level.
- 7. Review client's record, by appointment, to the extent allowed by law (minors with parent or guardian consent).
- 8. Having privacy during treatment.
- 9. To receive a schedule of applicable fees prior to service delivery, including what may be charged, changed, refunded, waived, or reduced, the manner and timing of payment, and the consequences of non-payment.

# Responsibilities as a Client

Clients of the agency have responsibilities that include:

- 1. Provide truthful and accurate information as a basis of receiving services and participating in service decisions.
- 2. Active participation in the development of their care, treatment, and service plan and decisions while advising staff of changes in their situation that might affect their service plan (i.e. change of address/phone number).
- 3. Keeping scheduled appointments.
- 4. Paying for services that charge fees. Clients may be sent to collection for non-payment.
- 5. Clients are expected to observe and respect the privacy of other clients in any agency facility.
- 6. Clients are expected to respect the staff in any agency facility.

# Agency Rights to Refuse Services

The agency will not tolerate offensive, threatening, or hostile behavior towards staff or other individuals. Therefore, the agency reserves the right to refuse services based on physical and/or verbal abuse, or the use of threats towards staff or others.

# **Client's Right to Refuse Service**

- Services of the agency are offered on a voluntary basis, except those that may be mandated by court order. Any voluntary client of the agency shall have the right to refuse any or all services that may be offered. Any non-voluntary client of the agency shall be informed in writing of the requirements for participation in agency services. Clients are informed of the consequences of the refusal of services which can result in discharge.
- 2. Employees of the agency are prohibited from using coercive or threatening means to force a client to comply with therapy. Clients who refuse treatment will have the issue(s), the suggested therapy, and reason(s) for refusal documented in the case record.

## **Discharge and Termination of Services**

Reasons for discharge of termination of services:

- Involuntarily discharged clients: The client is unavailable for services due to a move, change in location, no contact from client, and/or no response to staff phone calls and letters. If the client refuses to meet program requirements such as refusing to schedule further sessions, has a history of not showing, late cancellations, or the client has not responded to any letters requesting that the client contact the agency to indicate continued interest in services, services may be terminated.
- 2. The client no longer meets eligibility criteria specified by each program or has problems beyond the capacity of the program to adequately address the client's needs.
- 3. Verbal and/or physical abuse or the use of threats towards staff or others.
- 4. Non-payment for rendered services.
- 5. Cases may be closed when a client has reached stated goals and believes that services are no longer needed, the assessment is completed, or the client has been referred to another source, or refuses to comply with and/or accept treatment/services presented by staff. Clients have a right to be informed of the consequences of refusal of treatment. As well, cases may be closed when treatment/services have been completed as described in the specific program manual. The client no longer wants or needs program services or may have decided to self-refer to another agency.

If an individual is no longer considered appropriate for the program, they will be provided with a written reason within five working days of the date service was terminated.

#### Service to Minors without Parental Consent

The agency will not serve minors without the consent of the parent(s) or legal guardian(s) with the exception of one-time emergency assessment interviews for the child's protection.

#### **Complaints and Appeals**

The agency makes every attempt to provide services of a professional quality without undue delay, while respecting the client's rights as a person.

If you are dissatisfied for any reason with the services you have received or the decisions made by the agency in the course of providing services for you or your family, we have developed this process to help you find a resolution to your concerns.

- 1. Request a meeting with the staff person who was or is providing service to your family to discuss your concerns. Please request the meeting within five working days after the incident. The staff person will schedule a meeting within five working days of receiving the request.
- 2. If you are not satisfied with the results of the discussion, you may document your concerns in a written statement. This statement should include the date or dates of the incident(s) of concern, the individuals involved, a description of the event(s), where it took place, your statement of how the matter was handled, and what action might be taken to address your concerns.

Please send your request to:	Name and/or Title Agency Name Address City, State, Zip Code

This document must be sent within five working days of your meeting with the staff member. The agency will provide you with a written response within five working days after receiving your statement.

3. If you are not satisfied with the response of the agency, you may submit a similar statement to the head of the agency. Your statement should be sent within five working days after you have received the agency's response. The head of the agency will provide you with a written response detailing the final decision regarding your appeal within five working days of receiving your statement.

## **Mandatory Child Abuse Reporting**

The agency follows the policy regarding child abuse reporting, which is as follows: Pursuant to state law (citation), all cases of suspected child abuse or neglect **must** be reported to the local Child Protective Services office or law enforcement agency.

#### **Behavior Support and Management Policy/Practice**

The agency does not believe in using physical intervention on clients. The agency prohibits the use of restrictive behavior management interventions by service recipients, peers, and staff. If a person becomes a danger to him/herself, or to another person, the appropriate authorities will be contacted.

## **Duty to Warn**

Clients should be informed that any disclosures regarding future criminal acts are subject to reporting. If such a disclosure is made, staff must consult with their supervisor; and the appropriate authorities may be contacted.

# **Privacy Act Notice**

In compliance with appropriate acts and laws (citations), this notice describes how information about you may be used and disclosed and how you may obtain access to this information. Please review it carefully.

## Our commitment to your privacy:

The agency is dedicated to maintaining the privacy of your personal information (i.e. health, education, etc.) as part of providing professional care. We are required by law to keep your information private. We will use the information that we obtain from you or from others in relation to you, mainly to provide you with necessary services, to arrange payment, and/or for other business activities which are called, in the law, health care operations.

If we or you want to use or disclose (send, share, release) your information for any other purpose, we will discuss this with you and ask you to sign a form prior to obtaining, disclosing, or releasing information. This may require a parent or legal guardian's authorization.

It is our goal to always keep your information private but there are times when the law requires us to use or share it. For example:

- 1. When there is a serious threat to your health and safety or the health and safety of another individual or the public. We will only share information with a person or organization that is able to help prevent or reduce the threat.
- 2. Some lawsuits, legal or court proceedings, or worker's compensation and similar benefit programs.
- 3. If a law enforcement official or the law (as in mandatory reporting) requires us to do so.

Your rights regarding your personal information:

- 1. You may ask us to communicate with you about your health and related issues in a particular way or at a certain place which is considered more private by you.
- 2. You have the right to ask us to limit what we tell people involved in your care, such as family members and friends.
- 3. You have the right to review your file upon request, with a staff member present; however, some records are protected by law and are not available. Some documents may not be reviewed if it could be psychologically harmful for you. Contact your counselor/case manager if you need documents copied from your file. There is a fee for copies.
- 4. If you believe the information in your records is incorrect or important information is missing, you may ask us to make changes (called amendments) to your records. You must make this request in writing and explain the reason for the changes.
- 5. You have the right to file a complaint if you believe your privacy rights have been violated. You may file a complaint with the agency Assistant Director and/or with the Secretary of the Department of Health and Human Services.

If you have any questions regarding this notice or our privacy policies, please contact the agency using the contact information provided.

Also, you may have other rights which are granted to you by the laws of our State and these may be the same or different from the rights described above. Someone will be happy to discuss these situations with you either now or as they arise.

#### Acceptance of this Document

I have been informed of my rights and responsibilities. I acknowledge by signing this form that I have received a copy of the agency's handbook which includes:

- Mission
- Locations & Hours of Operation
- Client Rights and Responsibilities
- Responsibilities as a Client
- Client Right to Refuse Services
- Discharge and Termination of Services
- Service to Minors without Parental Consent
- Complaints and Appeals
- Mandatory Child Abuse Reporting
- Behavior Support and Management Policy/Practice
- Duty to Warn
- Privacy Act Notice

Signature of client or personal representative/guardian	Date
Printed name of client or personal representative/guardian	Date
Signature of client or personal representative/guardian	Date
Printed name of client or personal representative/guardian	Date
*Printed name of client if under the age of 18	Date
Signature of agency employee	Date

