



SOUTHEAST MENTAL HEALTH SERVICES

711 Barnes Avenue, La Junta, CO 81050

100 Kendall Drive, Lamar, CO 81052

CLIENT'S RIGHTS & RESPONSIBILITIES

Southeast Mental Health Services (SEMHS) wishes to inform you of your rights & responsibilities as a willing client. Your clinician will tell you your rights and/or answer any questions about these rights during your first two (2) visits.

1. You have a right to be treated with courtesy, respect and dignity by all staff as a respected client at Southeast Mental Health Services. SEMHS prohibits unlawful discrimination based on race, color, religion, national origin, gender, age, disability, gender expression, health status, sexual orientation, marital status, or social economic status. You have the right to receive culturally appropriate and competent services from staff.
 - ❖ It is your responsibility to treat the staff at Southeast Mental Health Services with courtesy, respect & dignity as well.
2. You have a right to receive services which fit your own needs, the right to participate in the development of mutually agreed upon treatment goals and the right to actively participate in decisions regarding your health care. You have a right to be treated in the least restrictive setting as long as SEMHS has the on-hand resources. Please ask your clinician what least restrictive setting means. You have a right to have your treatment plan reviewed every 180 days by your clinician and supervisor involved in carrying out your treatment plan.
 - ❖ It is your responsibility to tell your care manager what you need.
3. You have a right to have your care manager tell you about the available treatment options and alternatives, and any medication that may be used, including the benefits, risks, and side effects. This information will be presented to you in a format appropriate to your condition and ability to understand, as well as in an alternative format if you have a visual, reading, or other limitation that may keep you from understanding the information communicated to you. You have a right to refuse treatment, to the extent allowed by the law, as a willing client of Southeast Mental Health Services unless there becomes an emergency in which you may be dangerous to yourself or others, or gravely disabled due to a mental illness, or in those cases where a court order requires your participation in receiving services.
 - ❖ It is your responsibility to tell your care manager when you do not understand or disagree with your treatment plan or want to change it.
 - ❖ It is your responsibility to tell your care manager when you want to find out more information about services, when you experience any risks or side effects from medication, when you want to end treatment or change clinicians.
 - ❖ It is your responsibility to take medications as agreed upon between you and your prescriber.
 - ❖ It is your responsibility to come to appointments on time and call the office if you will be late or not able to keep your appointment.

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4. Southeast Mental Health Services is committed to protecting your Protected Health Information (PHI) which is the health and treatment information that becomes part of your client record. Complete information regarding how we may use and disclose information about you, either with or without your permission, can be found in our Notice of Privacy Practices given to you during the initial intake process. If you feel your privacy rights have been violated, you may contact the Compliance Officer or the Client Advocate at Southeast Mental Health Services.

- ❖ It is your responsibility to report it if you feel your privacy has been violated.

5. You have several rights regarding your Protected Health Information (PHI):

- a. The right to inspect and request a copy of the health information that may be used to make decisions about your care. A reasonable fee to cover the costs of copies will be charged to you.
- b. The right to ask for the PHI to be amended if you feel the information is not complete or not correct.
- c. The right to request a restriction or limitation on the PHI disclosed about you.
- d. The right to request an accounting or list of disclosures of PHI made about you.
- e. The right to request to be contacted at a certain telephone number and/or address.

- ❖ It is your responsibility to ask if you don't understand these rights.

- ❖ It is your responsibility to give advanced notice in writing to your care manager, Client Advocate or Compliance Officer so you can look at your PHI.

- ❖ It is your responsibility to tell your care manager which telephone number and/or address you want to be contacted at.

6. You have a right to file a complaint concerning the denial of services or treatment. The Client Advocate at Southeast Mental Health Services will inform you of the rules and help you with the grievance process. The services you receive will not be at risk and you will not be punished for filing a complaint. You can contact the Client Advocate, Kristie Roe, at 711 Barnes Ave, La Junta, Colorado, or at one of the following phone numbers: 1-800-511-5446 or 719-384-5446. If you are not satisfied with the outcome of your complaint, you may contact the Office of Member and Family Affairs at 1-800-804-5040.

- ❖ It is your responsibility to start the complaint process by talking to the Client Advocate.

7. As part of the admission process at SEMHS, you will be asked to sign a form called, Consent for Treatment and Acknowledgement of Information Received, which will tell you about your clinician's professional degree and credentials.

- ❖ It is your responsibility to ask about the professional degree if you want to know more.

8. If it is necessary to change your clinician, you will be given reasons for the change (if professionally appropriate) and SEMHS staff will seek your cooperation so the transfer process from one clinician to another will go smoothly.

- ❖ It is your responsibility to ask questions about the change taking place and cooperate with the transfer to a new clinician.

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9. You have the right to end your treatment at Southeast Mental Health Services unless you are under an involuntary treatment certification. You may ask your clinician what involuntary treatment certification means. SEMHS also has the right to end services provided to you for clinical reasons or in special circumstances that will be fully explained to you at the time of your services ending.
 - ❖ It is your responsibility to ask questions if you do not understand why treatment is ending.

10. You have the right to have an Advanced Directive. You have a right to receive services whether or not you have an Advanced Directive.
 - ❖ It is your responsibility to ask your clinician or the Client Advocate if you need help in developing an Advanced Directive.
 - ❖ You can contact the Client Advocate, Kristie Roe, at 711 Barnes Ave, La Junta, Colorado, or at one of the following phone numbers: 719-384-5446 or 1-800-511-5446.