

Southeast Health Group
Southeast Wellness Center
Client Rights & Responsibilities

Southeast Wellness Works (WW) wishes to inform you of your rights & responsibilities as a willing client. Your provider 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 Wellness Works. WW prohibits unlawful discrimination based on race, color, religion, national origin, gender, age, disability, veteran status, gender expression, health status, sexual orientation, marital status, or social economic status.
 - ❖ It is your responsibility to treat the staff at Southeast Wellness Works 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 WW has the on-hand resources. Please ask your provider what least restrictive setting means. You have a right to have your treatment plan reviewed every 180 days by your provider and supervisor involved in carrying out your treatment plan.
 - ❖ It is your responsibility to tell your provider what you need.
 - ❖ It is your responsibility to provide information, to the best of your ability, to WW treating providers that is necessary to ensure effective behavioral healthcare for you.
 - ❖ It is your responsibility to contact WW, if you are experiencing a mental health or substance abuse emergency.
3. Minors fifteen (15) years of age and older have the right to consent to outpatient and inpatient behavioral health services with or without the consent of a parent or legal guardian.
4. Minors between the ages of twelve (12) and fourteen (14) years of age have the right to consent to outpatient treatment services. A licensed or registered mental health professional may provide outpatient psychotherapy services to a minor who is between the ages of twelve (12) and fourteen (14) years old, at the minor's request, with or without consent of the minor's legal guardian, if the mental health professional determines that psychotherapy services are clinically indicated and necessary to the minor's well-being. The mental health professional may advise the minor's legal guardian of services provided with the consent of the minor or a court in specific circumstances, unless notifying the legal guardian would be inappropriate or detrimental to the minor's care and treatment. The mental health professional may notify the legal guardian, without the minor's consent, if the minor communicates an intent to commit suicide. The mental health professional may notify the legal guardian, without the minor's consent, if the minor communicates a clear and imminent intent or threat to inflict serious bodily harm on themselves or others. The mental health professional may notify the legal guardian, without the minor's consent, if their professional opinion the minor is unable to manage their own care or treatment.
5. You have a right to have your provider 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 Wellness Works 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 inform your provider when you do not understand or disagree with your treatment plan or want to change it.
- ❖ It is your responsibility to tell your provider 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 providers.
- ❖ 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.

6. Southeast Wellness Works 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 Wellness Works, (719) 384-5446.

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

7. 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 laboring costs may 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 provider, Client Advocate or Compliance Officer so you can look at your PHI.
- ❖ It is your responsibility to tell your provider which telephone number and/or address you want to be contacted at.

8. You have a right to file a complaint concerning your 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, Kristi Roe, at 711 Barnes Ave, La Junta, CO, or at one of the following phone numbers: (800) 511-5446 or (719) 384-5446. If you are not satisfied with the outcome of your complaint, you may contact the Health Colorado Member and Engagement Specialist at (888) 502-4185.

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

9. As part of the admission process at WW, you will be asked to sign a form called, Consent for Treatment and Acknowledgement of Information Received, which will tell you about your provider's professional degree and credentials.
 - ❖ It is your responsibility to ask about the professional degree if you want to know more.
10. If it is necessary to change your provider, you will be given reasons for the change (if professionally appropriate) and WW staff will seek your cooperation so the transfer process from one provider 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 provider.
11. You have the right to end your treatment at Southeast Wellness Works unless you are under an involuntary treatment certification. You may ask your provider what involuntary treatment certification means. WW 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.
12. 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 provider or the Client Advocate if you need help in developing an Advanced Directive.
 - ❖ You can contact the Client Advocate, Kristi Roe, at 711 Barnes Ave, La Junta, Colorado, or at one of the following phone numbers: 719-384-5446 or 1-800-511-5446.