



Client Rights and Grievances

All Family Pride clients are informed of these rights:

- 1) The right to be treated with consideration and respect for personal dignity, autonomy, and privacy;
- 2) The right to reasonable protection from physical, sexual, or emotional abuse, neglect, and inhumane treatment;
- 3) The right to receive services in the least restrictive, feasible environment;
- 4) The right to participate in any appropriate and available service that is consistent with an individual service plan (ISP), regardless of the refusal of any other services, unless that service is a necessity for clear treatment reasons and requires the person's participation;
- 5) The right to give informed consent to or to refuse any service, treatment, or therapy, including medication absent an emergency;
- 6) The right to participate in the development, review, and revision of one's own individualized treatment plan and receive a copy of it;
- 7) The right 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) The right to be informed and the right to refuse any unusual or hazardous treatment procedures;
- 9) The right 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 or sleeping areas;
- 10) The right to confidentiality of communications and personal identifying information within the limitations and
- 11) requirements for disclosure of client information under state and federal laws and regulations;
- 12) The right 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;
- 13) The right to be informed a reasonable amount of time in advance of the reason for terminating participation in a ser-vice, and to be provided a referral, unless the service is unavailable or not necessary;
- 14) The right to be informed of the reason for denial of a service;
- 15) The right not to be discriminated against for receiving services based on race, ethnicity, 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;

- 16) The right to know the cost of services;
- 17) The right to be verbally informed of all client rights, and to receive a written copy upon request;
- 18) The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations;
- 19) The right to file a grievance;
- 20) The right to have oral and written instructions concerning the procedure for filing a grievance, and to get assistance in filing a grievance if requested;
- 21) The right to be informed of one's own condition; and,
- 22) The right to consult with an independent treatment specialist or legal counsel at one's own expense.

All grievances must be put into writing; the grievances may be made verbally to the client rights officer who shall be responsible for preparing the written text of the grievance. The written grievance should include the date, approximate time, description of the incident, and names of the individual(s) involved in the incident/situation being grieved. The client, the person submitting the grievance for the client, or the client advocate (through attestation) must sign and date the document to confirm that the written grievance accurately reflects the client's concerns.

Within three working days of receiving the grievance, the program will provide to each grievant a written acknowledgment that includes a) the date the grievance was received; b) a summary of the grievance; c) an overview of the grievance investigation process; d) a timetable for completing the investigation and notification of the resolution; and 3) the treatment provider's contact name, address, and telephone number.

Within twenty calendar days of receiving the grievance, the program will make a resolution decision on the grievance. Any exceptions that extend this period will be documented in the grievance file and written notification will be given to the client or person filing grievances on behalf of the client.

Records of client grievances are maintained for two years from the date of resolution and include: a copy of the grievance, documentation reflecting the process used, resolution/remedy of the grievance, and documentation, if applicable, of extending the period for resolving the grievance beyond the twenty calendar days.

Family Pride Client Rights Officers:

Angela L. Daugherty, MSSA, LISW-S
Executive Director
521 Fifth Ave, Suite A
Chardon, OH 44024
(440) 286-1553

Sherri Sullivan, LPCC
Director of Clinical Services
1110 Lake Ave
Ashtabula, OH 44004
(440) 536-5680

Alternate Client Rights Officer:

Jill Portman, MBA, EA
Director of Administration
521 Fifth Ave, Suite A
Chardon, OH 44024
(440) 286-1553

Clients, or anyone filing on their behalf, may file a grievance with any external organization at any time, including but not limited to the following:

Ohio Department of Mental Health and Addiction Services
30 East Broad Street, 36th Floor
Columbus, OH 43215-3430
(614) 466-2596

Ashtabula County Mental Health & Recovery Services Board
4817 State Rd, Suite 203
Ashtabula, OH 44004
(440) 992-3121

Geauga County Board of Mental Health & Recovery Services
13244 Ravenna Rd.
Chardon, OH 44024
(440) 285-2282

The Lake County ADAMHS Board
1 Victoria Place, Suite 205
Painesville, OH 44077
(440) 350-3117

Disability Rights Ohio
200 Civic Center Dr., Suite 300
Columbus, OH 43215-2999
(800) 282-9181

Office for Civil Rights
US Department of Health and Human Services
200 Independence Ave, SW
Washington, DC 20201
(800) 368-1019