

Bell, Clay. Harlan, Jackson, Knox, Laurel, Rockcastle and Whitley Counties
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Joint Commission Accredited

## **OUR COMMITTMENT**

The staff of Cumberland River Behavioral Health is committed to assisting clients and their families in receiving the care, treatment and services they need and understanding their responsibilities while in treatment.

## **CLIENT RIGHTS**

As a client of Cumberland River Behavioral Health, you have the right to:

- Receive appropriate treatment without regard to disability, race, color, religion, national origin, sex, age, pregnancy, sexual orientation, gender identity, marital status, citizenship, or victimization status.
- Receive treatment in the least restrictive environment available.
- Actively participate in the development of a treatment plan that is specific to your needs, including discharge plan and/or follow up services.
- Actively participate in any review or revision to your treatment plan.
- Ask questions if you do not understand something about your care, treatment or services or if you do not understand what is expected of you.
- Be told about the risks, side effects, and benefits of all treatment procedures.
- Be told about the risks, side effects, and benefits of all your medications.
- Be told about all aspects of your treatment plan in a language or method in which you thoroughly understand.
- Receive services and/or treatment from knowledgeable, qualified and competent persons in a professional manner.
- Be treated with dignity, consideration and respect at all times and to be served in a prompt and courteous manner.
- Have access to your medical record to the extent permitted by law and in accordance with Cumberland River Behavioral Health's policies.
- Receive a second opinion, at your own expense, from an outside consultant, or other professional, about your treatment plan.
- Refuse treatment, service and/or medications to the extent permitted by law.
- Have information regarding your treatment and/or participation, including your medical records, be kept confidential and not disclosed except as may be required by law.
- Have your bill explained to you.
- Be given information outlining Cumberland River Behavioral Health's Client Grievance Procedure, receive a written copy of the grievance process and be assured that filing a complaint or grievance will not compromise your treatment.
- Receive a complete assessment to include a pain screen and receive appropriate referrals for treatment.
- Have appropriate and legal medical advance directives honored if known to Cumberland River Behavioral Health and documented in your clinical record.

## **CLIENT RESPONSIBLITIES**

As a client of Cumberland River Behavioral Health, you are responsible for:

- Actively participating in the development of your treatment plan.
- Following through with your treatment plan instructions.
- Informing your service provider of any problems you have in following your treatment plan.
- · Keeping your scheduled appointments.
- Being in the building at least 10 minutes prior to your appointment with clinical staff.
- Notifying your service provider at least one day in advance of any appointment cancellations or requests for change of an appointment time.
- Making outside arrangements for child care for your scheduled appointment for children
   12 years of age or younger.
- Asking questions if you do not understand something about the care, treatment or services you are given.
- Paying attention to the care you receive and any medications you are prescribed. If you
  have any question about whether you are receiving the right care or medication, you
  should speak up immediately.
- Educating yourself about your diagnosis, the medical tests you are undergoing and your treatment plan.
- Sharing your expectations for treatment and advising our staff if you are not satisfied with the treatment you receive.
- Asking a trusted family member or friend to be your advocate if desired.
- Knowing what medications you are taking and why you are taking them.