

## **RIGHTS & RESPONSIBILITIES OF PATIENTS**

As a patient of South Arkansas Regional Health Center, our primary concern is to safeguard, promote and protect your basic fundamental rights granted to you and inform you of your responsibilities and our expectations while you are receiving services by our agency. This will help you and will help us ensure that everyone is treated fairly and equitably.

### **YOUR RIGHTS**

- To have access to services without discrimination on the basis of: age, religion, disability, culture, gender, sexual orientation, language, sex, race, color, national origin, political affiliation, socioeconomic status, or veteran status as stipulated in Title VI of the Civil Rights Acts of 1964.
- To continue to have legal rights to which all citizens are entitled to the extent permitted by law.
- To have your personal dignity recognized and respected at all times to be free from; any fiduciary abuse (exploitation for financial gain or misuse of funds of the person served), physical abuse, sexual abuse (gestures, verbal or physical that reference sexual acts, sexuality or objectify the individual sexually), neglect, or psychological abuse including harassment, humiliating, threatening or exploitative actions or any type of physical punishment.
- To be properly informed and exercise informed consent to participate in decisions about your condition, treatment team and treatment services that are responsive to my strengths, needs, abilities, preferences, wants, desires and aspirations or to refuse treatment or services at any time. This includes RSPMI services.
- To contribute input and participate in developing my individualized treatment plan which is implemented and reviewed by my primary assigned therapist.
- To be informed of the risks, side effects, effectiveness, and benefits of medications used and any alternative procedures or to refuse specific medications or treatment procedures to the extent permitted by law.
- To initiate a complaint, or if not resolved to your satisfaction, a grievance procedure. This includes RSMI services. Refer to Grievance procedure below.
- To be informed of the cost of services, sources of reimbursement for service provision and any limitations. This includes all RSPMI and non-RSMPI services.
- To have personal privacy and confidentiality of information and access to your protected health information within the limits prescribed by law and the operational requirements of the agency, specifically the Health Information Portability and Accountability Act (HIPPA) as indicated and specified in our Notice of Privacy Practices.

### **YOUR RESPONSIBILITIES**

- To provide accurate and complete information about your presenting problem, reasons for being here, treatment needs and preferences, previous treatment, medical and social history and any other information to better assist us in providing appropriate services and quality of care in response to your information provided.

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- To actively participate in the decisions and development of your individualized treatment plan and in the manner agreed upon in the plan of care.
- To report any changes in your condition, situation, treatment needs or preferences to your primary assigned therapist, counselor, doctor, or case manager.
- To express to your primary assigned therapist if you are displeased with your treatment, wish to transfer to another therapist or be released from treatment.
- To be responsible for your own actions if you refuse treatment or do not follow your agreed upon treatment plan of care.
- **To keep scheduled appointments and cancel appointments, if necessary, at least 24 hours in advance.**
- To not initiate or discuss your problems, course of care, or service provision with any professional of the agency in public unless prearranged and agreed upon with the individual in advance.
- To be considerate of all other patients and staff of the agency and to treat each with respect and dignity.
- To make documented arrangements with the agency business office for payment of charges for services and to pay for services rendered in the agreed upon manner. This includes all RSPMI and non-RSMPI services.

## **RESTRICTIONS**

SARHC does not restrict the rights of clients. At times, however; due to a client's behavior, SARHC may suspend certain services. If/when this occurs, the treatment team will explain to the client the specific behavior leading to the suspension of services and how to regain complete services will be clearly described.

## **OUR RESPONSIBILITIES**

All staff, whether full-time, part-time, temporary, contractual, intern, or volunteer are expected:

- To consistently and continuously safeguard, promote and protect your basic fundamental rights granted to you, as listed above, while you are receiving services by our agency.
- To continuously demonstrate our commitment to be aware, recognize, be sensitive, and respond accordingly to the diversity in the population served as reflected by the following unique factors or characteristics; cultural, language, gender, sexual orientation, spiritual beliefs/religious practices, socioeconomic and /or legal status, and to do so throughout your course of care.
- To provide a source of referrals to legal entities for representation and access to community self-help groups or client advocacy services.
- To respect and abide by all agency and/or programmatic policies, procedure, and South Arkansas Regional Health Center's Code of Ethics. (A copy is available upon request.)