

Align Counseling LLC 780 Commercial St S, Ste. 104 Salem, OR 97301 phone 971-901-2731 fax 971-901-3065

RIGHTS AND RESPONSIBILITIES

YOUR RIGHTS

Per Oregon Revised Statute 309-019-0115

The right to services and supports that are consistent with the assessment and service plan, culturally competent, provided in the most integrated setting in the community, and under conditions that are least restrictive to the your liberty, that are least intrusive to you, and that provide for the greatest degree of independence;

To be treated with dignity and respect regardless of age, gender, race, ethnicity, culture, religion, economic status, disability, or language spoken;

Participate in the development of a written service plan, receive services consistent with that plan, and participate in periodic review and reassessment of service and support needs, assist in the development of the plan, and receive a copy of the written service plan;

Have all services explained, including expected outcomes and possible risks;

You have the right to Confidentiality and compliance with HIPAA, Federal Confidentiality Regulations (42 CFR, Part 2), and state confidentiality regulations as specified in ORS 179.505 and 192.518 through 192.530.

Give informed consent in writing prior to the start of services, except in a medical emergency or as otherwise permitted by law. Minor children may give informed consent to services in the following circumstances: Under age 18 and lawfully married, are age 16 or older and legally emancipated by the court or are age 14 or older for outpatient services only;

Request to transfer to another therapist or stop services at any time.

Inspect your service record in accordance with ORS 179.505;

Receive prior notice of transfer, unless the circumstances necessitating transfer pose a threat to health and safety;

Be free from abuse or neglect and to report any incident of abuse or neglect without being subject to retaliation;

Be free from participation in experimentation, seclusion and restraint;

Be informed at the start of services and periodically thereafter of the rights guaranteed by this rule;

Be informed of the policies and procedures, service agreements and fees applicable to the services provided, and to have a custodial parent, guardian, or representative assist with understanding any information presented;

Have family and guardian involvement in service planning and delivery;

Be notified in a timely way if we must cancel your appointment;

Be given our best effort to understand and give you information about your condition and set up services that closely meet your needs or if you decline a service how it could affect your health;

Have a friend, family member, or advocate with you at appointments;



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Have information about the "Declaration for Mental Health Treatment" and "Advance Directive" for health care decisions and what's involved in those processes, when legally an adult;

File grievances, including appealing decisions resulting from the grievance;

Exercise all rights described without any form of reprisal or punishment.

YOUR RESPONSIBILITIES

Treat your mental health provider and staff with respect;

Be actively involved in creating your treatment plan;

Ask questions about anything you don't understand;

Use information you have received to decide about your care before care is given;

Follow treatment plans you have agreed to;

Keep appointments with your provider;

Be on time for your appointments and call ahead of time when you are going to be late;

Call a minimum of 24 hours prior to your appointment when you are unable to keep an appointment (please see attendance policy);

Give your provider accurate information about your mental health situation and for your file;

Keep your address and phone number up to date;

Help your provider get your previous mental health records;

Use urgent, emergency services, and on-call pagers/telephone numbers appropriately;

To ask questions about your diagnosis, your treatment, and anything else you do not understand.