



- CLIENT RIGHTS & GRIEVANCE PROCEDURE / CLIENT RESPONSIBILITIES -

PURPOSE:

To establish a system to inform clients of their rights and responsibilities.

1. To ensure staff awareness of Client Rights and responsibilities.
2. To ensure that all services are delivered consistent with Client Rights and Responsibilities.
3. To establish a process for clients to formally file and address grievances against the organization.

POLICY:

Harbor will advise all clients and workforce members of its Client Rights and Grievance Procedure/Client Responsibilities Policy and will ensure that all services are delivered consistent with clients' rights. Clients will be advised of the grievance procedure and their right to file a grievance against the organization.

A designated Harbor workforce member will serve as Harbor's Client Rights Officer. This person will be responsible for processing grievances. The Client Rights Officer will receive full support to take all steps necessary to implement and maintain Harbor's Client Rights and Client Grievance Procedures. There will also be back up Client Rights Officers trained to perform the duties of the Client Rights Officer should she or he be unavailable (i.e. vacation etc.).

Clients have the right to informally discuss their concerns and complaints. Explaining the situation to a staff member or the Client Rights Officer often resolves the issue. If it is not resolved or the client requests to file a formal grievance, the formal grievance will be processed timely with a letter of resolution to the client.

Records of written grievances will be maintained for three (3) years. Records will include: (1) a copy of the grievance, (2) documentation of the process used and grievance resolution, (3) copy of the acknowledgement letter, if applicable, (4) a copy of the resolution letter and, (5) documentation of extenuating circumstances for extending the time period for resolution beyond twenty (20) calendar days, if applicable.



ACCOUNTABILITY:
All Workforce Members

DEFINITIONS:

Grievance: A formal request, initiated either verbally or in writing, by a client, ex-client or any other person or provider on behalf of a client for further review of an unresolved, written complaint or a complaint containing allegations regarding the denial, exercise or violation of any client's rights.

Complaint: A formal request, initiated either verbally or in writing, by a client, ex-client or any other person or provider on behalf of a client for further review of a complaint that does not contain allegations regarding the denial, exercise or violation of any client's rights.

PROCEDURE:

1. At admission or intake, Harbor's Policy on Client Rights and Grievance Procedure/Client Responsibilities will be explained to each client in a way that is understandable and clients will be offered/given a copy. In case of emergency or crisis, clients will be verbally informed of their immediate pertinent rights, such as the right to consent to or refuse the offered treatment/service and consequences of the agreement or refusal. Provision of a copy of the Policy on Client Rights and Grievance Procedure/Client Responsibilities may be delayed to a subsequent appointment.
2. Clients or recipients of the type of mental health services specified as "community services" such as information and referral, consultation service, mental health education service, training service, may have a copy and explanation of the clients rights policy upon request.
3. The Client Rights Policy/Client Rights Statement and Client/Grievance Procedure/Client Responsibilities will be posted in the waiting room or in a place conspicuous to clients or will be maintained in a manual readily accessible to clients at each Harbor site and on the website.

At the intake appointment clients receiving community employment services will receive a copy of the Program's Consumer's Guide which includes a list of Rights. The Rights and other information in the Guide will be reviewed with each.

4. Clients, who are served in a program for longer than one year, will be informed of their rights annually.
5. Workforce members must be familiar with the Client Rights Policy and Grievance Procedure/Client Responsibilities and upon request be able to



explain any and all aspects of client rights and the grievance procedures including the name and availability of the client rights officer and the grievor's right to file a grievance. Workforce members including contract staff, volunteers and student interns will have received a copy of the Client Rights and Grievance Procedure and have agreed to abide by them. Documentation will be maintained in their personnel file.

6. The Client Rights Officer or back-up Client Rights Officer will acknowledge each grievance via telephone or electronically (if the grievance is filed electronically) in a timely manner. For a formal grievance, written acknowledgement will be provided within three business days from receipt of the grievance. The acknowledgement will include: 1) the date the grievance was received, 2) a summary of the grievance, 3) an overview of the grievance investigation process, 4) timetable for completion of investigation and notification of resolution, and 5) name of the Client Rights Officer and his/her address and telephone number. The Client Rights Officer will attempt to bring an early resolution to the grievance within twenty (20) calendar days from the date of receipt or sooner. The Client Rights Officer will provide a written summary to the client or third party filing the grievance on the client's behalf (with the client's permission) of the resolution once it has been established. If the complaint is not resolved within twenty (20) business days, the grievor will be notified in writing of the extenuating circumstances surrounding the delay. Documentation of written notification and complaint summary/resolution letter will be maintained by the Quality Improvement Department for at least three years from the date of resolution.
7. If restrictions are placed on a client's rights or privileges, to promote maximum integration and inclusion of the client, Harbor will regularly evaluate the restrictions. In such circumstances, it will be explained to the client in such a manner that he/she fully understands the purpose or benefit of such restrictions and the methods required to reinstate such restrictions or privileges.
8. The Client Rights Officer will assure the keeping of records of grievances received, the subject matter of the grievances, and the resolution of the grievances, and will prepare an annual summary for review by agency governance in accordance with rule 5122-26-03 of the Administrative Code. The annual summary will include the number of grievances received, type of grievances, resolution status of grievances, trends developed over time, actions or follow-up to be taken, and areas needing performance improvement. Upon request, agency records on grievance activity, as appropriate, will be available for review by the local county funding board, the Ohio Department of Mental Health and Addiction Services and the Commission on Accreditation of Rehabilitation Facilities.



9. Managers/Supervisors will educate new employees regarding Harbor's Client Rights and Grievance Procedure/Client Responsibilities Policy during orientation and regular supervision.
10. The Client Rights Officer will create and update, as applicable, an electronic training regarding client rights and responsibilities and workforce members' responsibilities. All workforce members will be required to complete this training upon hire, contractual agreement, volunteer services agreement, as applicable and document the completion of this training in the Learning Management System. The Client Rights Officer will also be available during normal business hours to answer any staff questions and provide additional training regarding clients rights, as needed.
11. Workforce members are expected to ensure the protection of Client Rights. Failure to do so will result in appropriate discipline.
12. Client Grievance Procedure can be found in Attachment E of this policy.



CLIENT RIGHTS

In accordance with Department of Behavioral Health and Commission on Accreditation of Rehabilitation Facilities (CARF) each client has all of the following 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, inhumane treatment, humiliation, and financial or other exploitation;
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 service, 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. You have the right to adherence to research guidelines and ethics when you are involved, if applicable;
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 requirements for disclosure of client information under state and federal laws and regulations;

11. The right to have access to one's own client record unless access to certain information is restricted for clear treatment reasons. You have the right to access pertinent information in sufficient time to facilitate decision-making. 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;
12. The right to be informed a reasonable amount of time in advance of the reason for terminating participation in a service, and to be provided a referral, unless the service is unavailable or not necessary;
13. The right to be informed of the reason for denial of a service;
14. The right not to be discriminated against for receiving services on the basis of 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;
15. The right to know the cost of services;
16. The right to be verbally informed of all client rights, and to receive a written copy upon request;
17. The right to exercise one's own rights without retaliation or reprisal, except that no right extends so far as to supersede health and safety considerations;
18. The right to file a grievance;
19. The right to have oral and written instructions concerning the procedure for filing a grievance, and to assistance in filing a grievance if requested.
20. You have the right to an investigation and resolution if there is an alleged infringement of your rights. Efforts will be made to resolve the complaint in an adequate time frame that allows for prompt consideration by you;
21. The right to be informed of one's own condition;
22. You have the right of other legal rights; and,
23. The right to consult with an independent treatment specialist, self-help support services, advocacy support services, or legal counsel at one's own expense.



Attachment B

Resident Rights
(Applicable to residents in Class 2 Licensed Residential Facilities only)

Each resident has all of the following rights:

1. The right to be verbally informed of all resident rights in language and terms appropriate for the resident's understanding, prior to or at the time of residency, absent a crisis or emergency.
2. The right to request a written copy of all resident rights and the grievance procedure.
3. The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations.
4. The right to file a grievance.
5. The right to be treated at all times with courtesy and respect, and with consideration for personal dignity, autonomy and privacy.
6. The right to receive services in the least restrictive, feasible environment.
7. The right to receive humane services in a clean, safe, comfortable, welcoming, stable and supportive environment.
8. The right to reasonable protection from physical, sexual and emotional abuse, neglect, and exploitation.
9. The right to freedom from unnecessary or excessive medication and the right to decline medication
10. The right to be free from restraint or seclusion.
11. 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 a facility from using closed-circuit monitoring to observe areas in the facility other than bathrooms or sleeping areas, or other areas where privacy is reasonably expected.



12. The right to confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of resident information under state and federal laws and regulations.
13. The right to have access to one's own record.
14. The right to be informed of one's own condition.
15. The right not to be discriminated against on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental disability, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws.
16. The right to practice a religion of his or her choice or to abstain from the practice of religion.
17. The right to visit the facility alone or with individuals of the prospective resident's choosing.
18. The right to be informed in writing of the rates charged by the facility as well as any additional charges, and to receive thirty days' notice in writing of any change in the rates and charges.
19. The right to continued residency unless the facility is no longer able to meet the resident's care needs, the resident presents a documented danger to other residents, staff or visitors, or the monthly charges have not been paid for more than thirty days.
20. The right not to be locked out of the facility at any time.
21. The right not to be locked in the facility at any time for any reason.
22. The right to consent to or refuse services, or if the resident has a legal custodian, the right to have the legal custodian make decisions about services for the resident.
23. The right to consult with an independent treatment specialist or legal counsel at one's own expense.
24. The right to communicate freely with and be visited at reasonable times by private counsel and, unless prior court restriction has been obtained, to communicate freely with and be visited at reasonable times by a personal physician, psychologist or other health care providers, except

that employees of a board, a provider, personnel of the Ohio protection and advocacy system, or representatives of the state long-term-ombudsman program may visit at any time when permitted by the Revised Code.

The right to communicate includes receiving written communications, which may be opened and inspected by facility staff in the presence of the resident recipient so long as the communication is then not read by the staff and given immediately to the resident.

25. The right to meet with staff from the Ohio department of mental health and addiction services in private.
26. The right not to be deprived of any legal rights solely by reason of residence in the facility.
27. The right to personal property and possessions:
 - a. The right of an adult resident to retain personal property and possessions.
 - b. The right of a child resident to personal property and possessions in accordance with one's health and safety considerations, and developmental age, and as permitted by his/her parent or guardian.
28. The right of an adult resident to manage his/her own financial affairs, and to possess a reasonable sum of money.
29. The right to use the common areas of the facility.
 - a. Adult residents shall have right of access to common areas at all times.
 - b. Children and adolescent residents shall have the right of access to common areas during routine non-sleeping hours in accordance with facility expectations, e.g. school attendance, homework, implementation of natural and logical consequences, etc.
30. The right to engage in or refrain from engaging in activities:
 - a. The right of an adult to engage in or refrain from engaging in cultural, social or community activities of the resident's own choosing in the facility and in the community.
 - b. The right of a child or adolescent to access cultural and social activities.

31. The right to meet or communicate with family or guardians, and visitors and guests:

(a) The right of an adult:

1. To reasonable privacy and the freedom to meet with visitors and guests at reasonable hours.
2. To make and/or receive confidential phone calls, including free local calls.
3. To write or receive uncensored, unopened correspondence subject to the facility's rules regarding contraband.

(b) The right of a minor:

1. To visitors and to communicate with family, guardian, custodian, friends and significant others outside the facility in accordance with instructions from the minor's parent or legal guardian.
2. To write or receive mail subject to the facility's rules regarding contraband and directives from the parent or legal guardian, when such rules and directives do not conflict with federal postal regulations.

32. The right to be free from conflicts of interest; no residential facility employee may be a resident's guardian, custodian, or representative.

33. The right to receive thirty days prior written notice for termination of residency except in an emergency when the resident presents a documented danger to other residents, staff or visitors.



CLIENT RESPONSIBILITIES

Our workforce members encourage you to be an active participant in your care/services. To help us work together effectively, we would like you to be familiar with your responsibilities as a client or as the responsible party for a client. Should you have questions, please ask any member of our staff.

Client Responsibilities:

It is the responsibility of the client - or when applicable, the client's parent, legal guardian or authorized representative's responsibility - to:

1. **Provide Accurate Information:** Share complete and accurate information about present complaints, past illnesses, hospitalizations, medications, and other matters relating to the client's well-being, behavioral and physical health to assist with accurate diagnosis and appropriate treatment/services.
2. **Participate in Treatment Planning and Services:** Actively participate in developing and following the Individual Service Plan. Ask questions when services or recommendations are unclear. Communicate concerns or barriers to following the plan developed.
3. **Follow Treatment Recommendations:** Follow agreed-upon treatment plan, medical recommendations, including prescription orders, and understand that outcomes may be affected if the plan is not followed.
4. **Reporting Safety Concerns:** Report perceived risks, safety concerns or unexpected changes in condition as soon as possible.
5. **Respecting others:** Treat staff, other clients, and property with respect and follow agency rules. Unsafe or inappropriate behavior on Harbor property or during Harbor services may result in termination of services.
6. **Understanding Insurance and Financial Responsibility:**
 - a) Learn about your insurance coverage and benefits. Make sure services are scheduled with in-network providers and that any required referrals or authorizations are obtained.
 - b) Provide Harbor with accurate insurance information and notify us of any changes and/or termination of insurance and benefits.
 - c) Pay any agreed-upon costs timely, including copays, deductibles, or services your insurance does not cover.
7. **Keeping Appointments:** Attend scheduled appointments on time and provide at least 24 hours' notice when canceling. Missed appointments without proper notice may result in a fee.



CLIENT RIGHTS OFFICER CONTACT INFORMATION

The Client Rights Officer is:

Alena Burns

Mailing Address:
3909 Woodley Road
Toledo, OH 43606

Telephone:
419-214-1363

Site Location by Appointment only:
4334 Secor Road
Toledo, OH 43606

Mrs. Burns can be reached Monday - Friday from 8:00 AM – 4:30 PM.



Client Grievance Procedure

1. To begin the grievance process, you may advise any Harbor personnel, verbally or in writing that you wish to complain about some problem with the organization's treatment of you. This complaint may include, but is not limited to:
 - a) Denial of services
 - b) Abuse and/or neglect
 - c) Inadequacy of services
 - d) Payment of fees
 - e) Discrimination in the provisions of services
 - f) Any other complaint regarding the manner in which services are offered or delivered
2. You may initiate a grievance within any reasonable time period from the date the grievance occurred.
3. Often complaints can be resolved informally. If it is not resolved in an acceptable manner or you want to file a formal grievance, it must be in writing. Grievance forms are available at each front desk or a copy can be emailed upon request. You may submit a completed grievance form to any staff member who will forward it to the Client's Rights Officer. You can also provide the information, verbally or in writing, to any staff member or the Clients Rights Officer, who can complete the written grievance form on your behalf.
4. The grievance should include: date of the incident, approximate time, description of the incident in detail, and names of individuals involved in the incident/situation being grieved. A written grievance form must be dated and signed by the griever or by the person filing on behalf of the client.
5. The Client Rights Officer can assist with client complaints and filing a written grievance. The Client Rights Officer for Harbor is available Monday through Friday from 8:30 a.m. to 4:30 p.m. The Client Rights Officer's contact information is attached - see Attachment D. If the Client Rights Officer is not available at the time of your call, please leave a voice mail message and your call will be returned promptly.
6. Grievances may not be made anonymously, but grievances can be submitted confidentially to the Client Rights Officer via postal mail or voicemail. The Client Rights Officer will keep submissions and subsequent investigations confidential upon request.



7. The Client Rights Officer will acknowledge your grievance in a timely manner via telephone or electronically (if the grievance is filed electronically) and/or in writing, as required by law.
8. The Client Rights Officer assists clients in exercising their rights, investigates grievances on behalf of the client, provides agency representation for the griever at the agency hearing on the grievance if desired by the griever, and monitors the organization's implementation of the state administrative code and regulations concerning client rights. If the griever requests an agency hearing, the Client Rights Officer will schedule a hearing with the appropriate department manager, the appropriate Executive Leadership Member, the Client Rights Officer, and the staff member the grievance is about, if appropriate. The Client Rights Officer is responsible for explaining the grievance process from the original filing of the grievance to the final resolution which includes reasonable opportunity for the griever and/or the griever's designated representative to be heard by an impartial decision-maker.
8. If the Client Rights Officer is providing direct service to you in another capacity, and you wish to file a grievance against the Client Rights Officer, or you wish assistance from a different advocate, you may request or Harbor will appoint someone else to assist you. If you wish to file a grievance against the Chief Executive Officer (CEO), you may contact the Chief Quality Officer at 419-214-1377. This individual will investigate grievances filed against the CEO and may request assistance from members of the agency's Quality Care Council. The Chief Quality Officer, will advise and keep the President of Harbor's Board of Directors, apprised of the process and resolution or outcome of the grievance. Additionally, you may contact the University of Toledo College of Law Legal Clinic, 2801 W. Bancroft Avenue, Toledo, Ohio 43606, 419.530.4236; and/or Advocates for Basic Legal Equality (ABLE), 525 Jefferson Avenue, Suite 300, Toledo, Ohio 43604, 419.255.0814. You may also obtain private legal counsel at your own expense.
9. The Client Rights Officer will attempt to bring about an early resolution to your complaint within twenty (20) business days from the date of receipt or sooner. The Client Rights Officer will provide a written summary to you of the resolution once it has been established. If the complaint is not resolved within twenty (20) business days, you will be notified in writing of the extenuating circumstances surrounding the delay. Documentation of this written notification and summary/letter of resolution will be maintained by the Quality Improvement Department for at least three years from the date of summary/resolution.
10. Harbor ensures that no retaliation or barriers to service will be tolerated in response to a grievance filed by a client or third party. If you have any concerns about client care/services and safety that have not been addressed, you are encouraged to contact an agency manager.



11. If the complaint is not resolved during the grievance process in an acceptable manner, or if you prefer, you have the right to initiate a grievance outside the organization. You may contact:

County Board Mental Health Agencies:

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| <ul style="list-style-type: none">• <u>Lucas County Mental Health & Recovery Services Board</u>
333 N Summit St., Toledo, OH 43604
(419) 213-4600 |
| <ul style="list-style-type: none">• <u>Wood County Alcohol, Drug Addiction & Mental Health Services Board</u>
745 Haskins Road, Suite H, Bowling Green, Ohio 43402
(419) 352-8475 |
| <ul style="list-style-type: none">• <u>Mental Health and Recovery Services Board of Seneca, Ottawa, Sandusky and Wyandot Counties</u>
1200 N. OH-5, Tiffin, Ohio 44883
(419) 448-0640 |

State of Ohio and Regional Offices:

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| <ul style="list-style-type: none">• <u>Ohio Department of Behavioral Health</u>
30 East Broad Street, 33rd Floor, Columbus, Ohio 43215-3430
(877) 275-6364 Fax: (614) 485-9739
liccert@dbh.ohio.gov• Client Advocate, Ohio Department of Behavioral Health
30 East Broad Street, 36th Floor, Columbus, Ohio 43215-3430
(877) 275-6364 or (614) 466-7228
Phone (TTY): (888) 636-4889 |
| <ul style="list-style-type: none">• <u>Disability Rights Ohio</u>
200 Civic Center Drive, Suite 300
Columbus, Ohio 43215
(614) 466-7264 or (800) 282-9181 |
| <ul style="list-style-type: none">• <u>U.S. Dept. of Health & Human Services Office for Civil Rights-Region 5</u>
233 N. Michigan Ave., Suite 240
Chicago, IL 60601
(312) 886.2359 |



For individuals in Wood County residential homes (Class 2), complaints may also be reported to:

- State Long-Term Care Facilities Ombudsperson
246 N. High Street, First Floor
Columbus, OH 43215-2406
(800) 282-1206
- Regional Ombudsperson (Northwestern Ohio)
525 Jefferson Avenue, Suite 300
Toledo, Ohio 43604
(419) 259-2891

Additionally, if the workforce member is licensed, the licensing board may be contacted to file a complaint. The board's contact information is available below.

<ul style="list-style-type: none">• <u>State Board of Psychology of Ohio</u> 77 S. High Street Suite 1830 Columbus, OH 43215-6108 (614) 466.8808 Toll Free (877) 779.7446
<ul style="list-style-type: none">• <u>State Medical Board of Ohio</u> 30 E. Broad Street, 3rd Floor Columbus, Ohio 43215-6127 (614) 466.3934
<ul style="list-style-type: none">• <u>State of Ohio Board of Nursing</u> 8995 East Main St., Reynoldsburg, Ohio 43068 (614) 466.3947
<ul style="list-style-type: none">• <u>Ohio Counselor, Social Worker, and Marriage and Family Therapist Board</u> 77 S. High St., Columbus, OH 43215 50 West Broad Street, Suite 1075 Columbus, Ohio 43215-5919 (614) 466.0912

If you choose to initiate a complaint with one or several of these outside agencies, Harbor will provide the agency(s), to which you have initiated the complaint, with all relevant information about the grievance.

12. Harbor is always interested in receiving comments and suggestions regarding its services. Even if you do not have a complaint, we invite you to write or call with suggestions or comments regarding our services.