

## RIGHTS AND RESPONSIBILITIES FOR CLIENT PARTICIPATION

As a recipient of services from HOPE HAVEN, you are guaranteed certain basic rights and responsibilities. It is important that you know and understand them.

## **CLIENT BILL OF RIGHTS**: As a client of Hope Haven, you have certain rights:

- 1. To receive treatment and other program services in quantity and quality that is unaffected by your race, sex, creed, color, handicap, national origin or ability to pay;
- 2. To meet with the Hope Haven professional(s) providing your services and other staff members, with reasonable notice, to discuss your treatment plan and rate of progress;
- 3. To develop a treatment plan conjointly with Hope Haven professional(s) providing your services;
- 4. To know the Rights and Responsibilities that you will be expected to observe.

## **POLICIES**: In order to serve you, it is necessary that:

- 1. A mutual agreement must be made between you and the Hope Haven professional(s) providing your services as to your goals as a client of the program.
- 2. The patient has the right to every consideration of privacy. Case discussion, consultation, examination, and treatment should be conducted to protect each patient's privacy. In turn, each patient has the same responsibility to protect the privacy of other patients receiving treatment at Hope Haven.
- 3. All scheduled appointments must be met; it is your responsibility to reschedule appointments whenever this becomes necessary. You will be assessed a cancellation fee for appointments that are not canceled with 24-hour notice.
- 4. If you fail to keep your appointment with no advance notice, you will be assessed a \$35 no-show fee, which must be paid before scheduling another appointment. If you fail to keep two consecutive appointments with no advance notice, your services will be discontinued. Your medical records will be forwarded upon your request.
- 5. Fees are based on the type of services provided and your ability to pay. Payment arrangements are established before initial appointment scheduling. You are responsible for payment of fees as established with Hope Haven.
- 6. Payment will be expected at each appointment before you receive services. If you expect any difficulty in paying your assessed fee at each time of service, it is your responsibility to make alternative financial arrangements with Hope Haven **before** the date of your appointment. Failure to do this may result in your appointment being rescheduled. Failure to pay as arranged may result in the discontinuance of services.

<u>RULES</u>: At all program sites and during all program activities, Hope Haven prohibits clients from participating in physical violence; overt sexual behavior; possession, use, or sale of alcohol or drugs, excluding the use of legally prescribed medications. Individuals with a communicable disease must seek treatment from a physician to be enrolled in programs/services. Hope Haven is a non-smoking campus. The sale and use of tobacco products are strictly prohibited in buildings or on Hope Haven grounds. Possession of any weapon, other than in a locked vehicle in the parking lot, is prohibited except for law enforcement personnel.