

## **Legacy Behavioral Health Residential Services**

### **Individual Rights and Responsibilities**

Services to individuals must be given without discrimination based on political affiliation, religion, race, color, gender, mental or physical handicap, national origin, or age.

#### ***Individual Rights***

- I have the right to reasonable access to care, regardless of race, religion, gender, sexual orientation, national origin, age, disability, or ability to pay.
- I have the right to considerate and respectful care with recognition of my personal dignity, values, and beliefs.
- I have the right to be informed of any of the organization's rules and regulations that may apply to me.
- I have the right to receive information to assist me in participating in and making decisions about my care. If I am a minor, my parents or guardians have the right to receive information and participate in making decisions about my care.
- I have the right to individualized, humane, and quality services in the least restrictive setting, regardless of my ability to pay. There will be a plan for these services, based on my needs, reviewed periodically, and implemented by qualified and competent service providers.
- I have the right to participate in the consideration of any ethical issues that may arise during my care.
- I have the right to personal privacy and that information will be kept confidential. I understand that there are certain conditions under which information may be released without my consent. These include but are not limited to: (1) Court Orders, (2) Health Emergency, (3) threatened harm to self or others, (4) Physical or Sexual Abuse as required of a mandatory reporter.
- I have the right to receive a copy of the Notice of Privacy Practices of Legacy Behavioral Health Services, wherein these rights are described. I have the right to have someone act as my representative and make decisions on my behalf if I am unable to do so.
- I have the right to receive information in a manner and language that I can understand.
- I have the right to receive information and education about my needs for service.
- I have the right to receive services that protect my health and safety.
- I have the right to refuse any service, treatment, or medication to the extent permitted by law.
- I have the right to review my records and may request copies of my record.
- I have the right to exercise all civil, political, personal and property rights to which I am entitled as a citizen.
- I have the right to remain free from physical restraint or seclusion unless an emergency requires such.
- I have the right to remain free of neglect and physical or verbal abuse.
- I have the right to private conversation, reasonable access to a telephone, uncensored mail, and visitors. I have the right to keep my personal belongings and money with me.
- I have the right to file a complaint with no fear of harassment or retaliation.
- I have the right to request a copy of the most recently issued report by Department of Community Health

***Individual Responsibilities***

- I have the responsibility to share pertinent information with my service providers.
- I have the responsibility to be considerate and respectful of others.
- I have the responsibility to share personal values and beliefs that need consideration.
- I have the responsibility to abide by any rules and regulations that may apply to me.
- I have the responsibility to participate in and make decisions about my care.
- I have the responsibility to adhere to my treatment plan and recommended services.
- I understand if I do not adhere to my treatment plan and recommended services, I may be discharged from receiving services.
- I have the responsibility to participate in the development of my service plan and all aspects of services received.
- I have the responsibility to notify my service provider of any ethical issues that arise.
- I have the responsibility to understand that all information regarding me is kept confidential unless I sign a release of information.
- I have the responsibility to designate a representative decision-maker as needed.
- I have the responsibility to notify my service provider if I do not understand the language being used.
- I have the responsibility to notify my service provider if I am concerned about my health and safety, and I am responsible to follow all health and safety rules.
- I have the responsibility to stay informed about any aspect of my illness, condition, or need for Services.
- I have the responsibility to make decisions to either comply or refuse medications or services.
- I have the responsibility to request, if I choose, to review my record.
- I have the responsibility to notify my service provider of any incompetence or legal actions.
- I have the responsibility to abide by all rules and regulations and act appropriately.
- I have the responsibility to understand that weapons, guns, illegal drugs, and alcohol are NOT permitted on LBHS property. I understand that law enforcement will be called if violated.
- I have the responsibility to notify my service provider if I feel I have been neglected or abused.
- I have the responsibility to respect the privacy of others.
- I have the responsibility to file a complaint if I feel that my rights have been restricted or denied.

If at any time I feel that my rights have been violated or if I have any concerns or questions, I may contact:

•Heather Hatchett Chairperson, Consumer Rights, Responsibilities and Ethics Committee 3120 N. Oak St. Ext. Ste. C, Valdosta, GA 31602 229-671-6109

•Department of Community Health2 Peachtree Street, NW, Atlanta, GA 30303 404-656-4507

•Georgia Department of Behavioral Health and Developmental Disabilities (DBHDD), Office of External Affairs, 2 Peachtree Street, 24th Floor, Atlanta, GA 30303404-657-5964

I have read, reviewed, and understand the Individuals' Rights and Responsibilities

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Individual Signature / Date

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Staff Signature / Date