

Client Rights and Responsibilities

For Assistance Contact the Clients Rights and Privacy Officers 216-283-4400 ext. 2290 ● 13422 Kinsman Road, Cleveland, Ohio 44120 ● 9 AM to 5:30 PM, Monday - Friday

You Have the Right to:

- Be treated with consideration and respect for personal dignity, autonomy and privacy;
- Reasonable protection from physical, sexual or emotional abuse and inhumane treatment;
- Receive services in the least restrictive, feasible environment;
- 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;
- Give informed consent to or to refuse any service, treatment or therapy, including medication absent an emergency;
- Participate in the development, review and revision of one's own individualized treatment plan and receive a copy of it;
- 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;
- Be informed and refuse any unusual or hazardous treatment procedures;
- Be advised and 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;
- Confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of client information under state and federal laws and regulations;
- Have access to one's own client record unless access to certain information is restricted for clear treatment reasons. 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;
- 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;
- Be informed of the reason for denial of a service;
- 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;
- Know the cost of services;
- Be verbally informed of all client rights, and to receive a written copy upon request;
- Exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations;
- File a grievance;
- Have oral and written instructions concerning the procedure for filing a grievance, and to assistance in filing a grievance if requested;
- Be informed of one's own condition; and,
- Consult with an independent treatment specialist or legal counsel at one's own expense.

You Have the Responsibility to:

- Provide accurate and complete information about all matters pertaining to your health, including medications and past or present medical problems
- If you refuse treatment recommendations, you must accept the consequences of your decisions
- Notify a member of the behavioral health care team if you do not understand information about your condition or treatment
- Report changes in your condition or symptoms to a member of your behavioral health care team
- Act in a considerate and cooperative manner and respect the rights and property of others
- Follow Murtis Taylor Human Services Systems' rules and regulations
- Keep your scheduled appointments or cancel them in advance if at all possible
- Treat staff and other clients with courtesy and respect without regard to age, gender, race, sexual preference, disability, religion or national origin
- Cooperate with agency directions, rules, and regulations to the best of your ability
- Keep the agency informed of changes in status affecting your Medicaid eligibility
- Refrain from swearing or using abusive language
- Avoid initiation of, or participation in, any situations involving violent, harmful, threatening or abusive behaviors
- Respect and safeguard agency property, equipment and supplies
- Not offer gifts, tips or bribes to any staff
- Communicate problems or concerns to appropriate staff

Grievance Procedure

INTERNAL GRIEVANCE PROCESS:

1. File a grievance with the Client Rights Officer, Beckie Kenney, at 216-283-4400 ext. 2290, 13422 Kinsman Road, Cleveland, OH 44120, Monday through Friday 9:00 AM to 5:30 PM. The grievance must be in writing and you must sign and date it. The Client Rights Officer will take all necessary steps to assure compliance with the grievance procedure. If needed, the Client Rights Officer can assist you with writing the grievance and will attest to its authenticity.
2. The written grievance must clearly state the nature of the complaint. It should include the date and time of the incident as well as the names of all individuals involved, and a description of the incident. You have the opportunity to file a grievance within a reasonable period of time from the date the grievance occurred; however, you are encouraged to bring your complaints as soon as possible to a Client Rights Officer. The agency will assure you prompt accessibility to the Client Rights Officer.
3. The Client Rights Officer will send a written acknowledgement of the receipt of your grievance within 3 business days of its receipt by Murtis Taylor Human Services System. It will include the date your grievance was received, a summary of your grievance, an overview of the grievance investigation process, a timetable for completion of the investigation and notification of the resolution. It will also provide the treatment provider contact name, address, and telephone number.
4. The Client Rights Officer will investigate the grievance on your behalf; seeking a resolution to your grievance.
5. Resolution to your grievance must be made within twenty business days from the time your grievance was filed. If applicable, any extenuating circumstances to extend this time period will be documented in the grievance and written notification will be given to you.
6. If all involved parties are able to reach a resolution, the written resolution will be given to you and the process will be concluded.
7. If a resolution is not reached, then the Client Rights Officer will arrange for you to present your grievance to the Executive Team, which is composed of at least three of Murtis Taylor Human Services System's Chief Officers (President and CEO, Chief Operating Officer, and Chief Financial Officer)
8. The Executive Team will meet with you to discuss your concerns. If you wish, you may have assistance from the Client Rights Officer or outside representation during your meeting. The Executive Team will also speak with staff involved and may request to speak to any witnesses.
9. After the meeting, the Executive Team will send to you, in writing, their findings and explanation of the resolution to your grievance. If the grievor is other than the client, the resolution may be sent to that person only with the permission of the client
10. If you are in a program funded by the Mental Health Addition Services Board, the resolution must be made within twenty-one calendar days.
11. If you choose to take your grievance to an outside organization, Murtis Taylor Human Services System will provide you with a mailing address and telephone numbers to additional outside organizations.

EXTERNAL GRIEVANCE PROCESS:

You may file a grievance with these outside organizations to further pursue your concerns:

- 1) Alcohol, Drug Addiction & Mental Health Services Board of Cuyahoga County, Client Rights Officer or Consumer Relations Specialist, 2012 West 25th St., 6th Floor, Cleveland, OH 44113 Phone: 216-241-3400;
- 2) Ohio Department of Mental Health and Addiction Services, 30 East Broad Street, 11th Floor, Columbus, OH 43215 Phone: 614-466-7228;
- 3) Disability Rights Ohio, 200 Civic Center Drive, Suite 300, Columbus, OH 43215 Phone: 614-466-7264;
- 4) U.S. Department of Health & Human Services, Civil Rights Regional Office, 233 North Michigan Avenue, Suite 240, Chicago, IL 60601 Phone: (800) 368-1019

Murtis Taylor Human Services System may also provide you with additional outside organizations upon request.

Language Services

Interpretation Services are available through INDY Translations. Deaf and Hearing Impaired Interpretation Services are available through Cleveland Hearing and Speech Center. To receive these services please ask the front desk, your Case Manager or call 216-283-4400 ext. 2459 or 216-283-4400 ext. 2413

Spanish	Mandarin/Chinese	Russian	Vietnamese
Hablamos Español	我們講普通話	Мы говорим на русском	chúng ta nói tiếng việt
Pregunta a la recepción o su Administrador de Casos	詢問前台或您的個案經理	Попросите стойка или ваш менеджер	Yêu cầu bàn làm việc hoặc trường hợp trước người quản lý

Emergency Contacts

Employees or guest learning of an occurrence that might endanger persons served or personnel should immediately call the following numbers, as appropriate:

- Local Responders, Police Fire and Paramedics: 911 Poison Control: 800-222-1222 • Building and Safety Services Director or Staff: 216-283-4400 ext. 2253
- Site Security: 13422 Kinsman Rd.: 216-283-4400 ext. 2259; 3010 Project Ave.: 216-283-4400 ext. 2126; 900 East 105th St.: 216-283-4400 ext. 2789; 6005 Terrace Ave.: 216-283-4400 ext. 2367; 9500 Detroit Ave.: 216-283-4400 ext. 2720

Revised and effective: 11/16/2018 Reviewed and Approved by Beckie Kenney, Director of Quality Improvement



Mission

Partnering with you to achieve a better quality of life and a healthier community through engagement, teamwork and commitment