JACKSON RECOVERY CENTERS

## PATIENT RIGHTS

Jackson Recovery Centers, Inc. is dedicated to assisting persons with addiction and mental health problems achieve and maintain an improved quality of life. We want to advise you of your right to respect, dignity and quality of care while you are a patient. You have the right to:

- ***Consent to Treatment*** – You have the right to consent to or decline treatment. We will provide you with information on the nature of treatment and the potential risks and benefits of treatment to allow you to make a decision about consent to treatment. Each patient has the right to refuse to participate in any research project without compromising his/her access to facility services
- ***Confidentiality and Privacy***- All patient records maintained at this agency will be held confidential as protected by State and Federal Law. We can not talk to anyone outside of JRC about anyone that is a patient at JRC unless:
  1. You give consent in writing by signing a release.
  2. A Court Order is issued ordering JRC to release information regarding a patient.
  3. We disclose information to medical personnel in a medical emergency or to qualified personnel for research, audit, or program evaluation.

  Federal Law does not protect any information about a crime committed by a patient either at the Center or against any person who works for the Center, or any threat to commit such a crime. Federal law does not protect any information about suspected child or dependent adult abuse or neglect from being reported under State Law to appropriate State or Local authorities. (See 42 U.S.C. 290dd-3 and 42 U.S.C. 290ee-3 for Federal Laws and 42CFR Part 2 for Federal Regulations.) Therefore, if this information is disclosed JRC is obligated to report such information to proper authorities.
- ***Complete and Current Information*** - JRC will keep you informed of your ongoing substance abuse and/or mental health assessment, recommended treatment and goals in language you understand. This will include your treatment fees and your account status. You may review your own treatment record by asking your therapist.
- ***Participation*** - You will be directly involved at all times in the development of your treatment goals. You may also provide input on your preferences about your therapist and other treatment staff.
- ***Education*** – You will be provided with drug and alcohol specific information as well as educational information on a wide variety of topics specific to your needs and preferences. This will include information on mental health disorders and treatment options. Current information about TB, HIV, AIDS and a listing of AIDS testing sites will be available to you in a confidential manner. We can refer you to an AIDS testing site at your request
- ***Grievance and Problem Resolution*** - JRC encourages you to express any concerns to the staff working with you in the treatment process, and we will investigate and resolve these concerns in a timely manner. Please discuss any concerns with your therapist. If you feel that your needs still are not met, request to make a formal grievance and speak with the Clinical Supervisor. If you still have concerns, address them with the Program Director. If you find the response unsatisfactory, please contact the Vice-President of Clinical Services. We value your input and will never retaliate or punish you for voicing concerns.
- ***Freedom from abuse, exploitation, retaliation, humiliation or neglect*** – We respect the dignity and integrity of our patients. Physical, emotional, and sexual abuse or harassment of or any person ids prohibited as described in the Code of Ethics. We will not humiliate you or neglect your needs, and we will not exploit you financially or otherwise. If you have a complaint or question about these rights, we will not threaten you or retaliate against you.
- ***Individualized Treatment*** - We will respect your individual needs and preferences. We will not discriminate against you based on color, race, gender, national origin, sexual orientation, religion, disabilities or mental health status.
- ***Crisis Intervention and Special Procedures*** – You have the right to full information regarding the potential use of crisis intervention techniques, including techniques such as physical restraint.
- ***Referral*** - You will be referred to other services within JRC or in the community to meet your individual needs. This may include referral to self-help or advocacy services, legal representation, and other resources in the community.
- ***Professional Ethics*** - All employees of JRC are to conduct themselves in a professional manner and follow our Code of Ethics. This Code of Ethics is posted in each facility. If you believe an employee of JRC has violated these ethics, please report it to your therapist, Clinical Supervisor or higher authorities.

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**PATIENT RESPONSIBILITIES**

Along with the rights listed above, there are patient responsibilities, which are necessary for quality care. They are as follows:

- ***Attendance*** – Please keep all scheduled appointments and cancel outpatient appointments within 24 hours of the appointment.
- ***Confidentiality*** - It is expected that you keep all information that other patients share with you confidential.
- ***Respect*** - Please treat peers and staff with respect at all times.
- ***Participation*** - You are invited to fully participate in the treatment process. You may be asked to complete assignments, and participate in individual, group, and family sessions. Your family will be invited to participate in the treatment process at some point of your treatment.
- ***Follow-up*** - For research purposes, Jackson Recovery Centers may release to the Iowa Consortium for Substance Abuse Research and Evaluation your name and other information necessary to contact you for a follow-up (by phone or by letter) interview regarding your treatment here. Patients are randomly selected from data we report to the State of Iowa. This follow-up may occur up to one year after your treatment here. These records are protected by Federal Confidentiality Regulations and cannot be disclosed to any other source without your specific written consent.
- ***Financial Obligation*** - We will do what we can to assist in getting third party pay and in helping with your request for a sliding fee scale based on your income. It is your responsibility to provide current income and insurance/Title XIX information throughout treatment and to pay your fee per an established payment plan. If you have questions about your account please call our business office at 712-234-2300 or 1-800-472-9018.
- ***Hours of Operation-*** Outpatient services are available both days and evenings. A schedule of treatment services will be given to you if you choose to participate in treatment. In an emergency, call the Connecting Point at 712-234-2300, available 24 hours a day.

*We are glad you have chosen Jackson Recovery Centers and that you have chosen this time in your life to make changes. We look forward to providing you with excellent care.*

**I have reviewed my rights and responsibilities as part of my orientation to Jackson Recovery Centers Inc., and have been informed of my rights as stated above. I have reviewed this and understand I can request a copy at any time. I understand that I will continue to receive orientation information and be notified if there are any changes in the overall information.**

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**Patient Signature** **Date**