



## STATEMENT OF CLIENT RIGHTS

**All clients of The Counseling Center of Wayne & Holmes Counties are entitled to courteous, confidential, and professional treatment. In addition, all individuals receiving services from the agency have specific rights as defined in Ohio law.**

### CLIENT 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, and inhumane treatment;
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. *The Counseling Center does not use restraint or seclusion procedures.*
8. The right to be informed and the right to refuse any unusual or hazardous treatment procedures;
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. 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 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. The right to be informed of one's own condition; and,
21. The right to consult with an independent treatment specialist or legal counsel at one's own expense.

**Any client (or guardian) who believes that their rights have been violated may file a grievance. Information about filing a grievance and the Grievance Reporting form is available from any staff member and on our website – <https://www.ccwhc.org/for-patients#Forms>**

**In addition, Megan Solsman, Compliance Officer/Patient Rights Officer/Client Advocate is available to file a grievance or for assistance with filing a grievance. She may be reached at 330.264.9029, Monday – Friday from 8:00 am –4:00 pm. Office Location: 2285 Benden Dr, Wooster, OH, 44691.**



## GRIEVANCE PROCEDURE

### I. GENERAL

- A. The following definitions are for client rights and grievances in rule 5122-24-01 of the Administrative Code:
1. "Client advocate" means the individual designated by a provider with responsibility for assuring compliance with the client rights and grievance procedure rule as implemented within each provider or board and shall have the same meaning as client rights officer or client rights specialist.
  2. "Grievance" means a written complaint initiated either verbally or in writing by a client or by any other person or provider on behalf of a client regarding denial or abuse of any client's rights.
  3. "Reasonable" means a standard for what is fair and appropriate under usual and ordinary circumstances.
- B. The Counseling Center will have the following:
1. Written client rights policy that lists all of the client rights identified in this rule;
  2. Written client grievance procedure;
  3. Policy for maintaining for at least two years from resolution, records of client grievances that include, at a minimum, the following:
    - a) Copy of the grievance,
    - b) Documentation reflecting process used and resolution/remedy of the grievance; and,
    - c) Documentation, if applicable, of extenuating circumstances for extending the time period for resolving the grievance beyond twenty business days.
- C. The Counseling Center post of Client Rights
1. The client rights policy and grievance procedure shall be posted in each location in which services are provided, unless the certified agency location is not under the control of the provider, i.e., a shared location such as a school, jail, etc. and it is not feasible for the provider to do so.
  2. The client rights policy and grievance procedure shall be posted in a conspicuous location that is accessible to persons served, their family or significant others and the public.
  3. When a location is not under the control of the provider and it is not feasible for the provider to post the client rights policy and grievance procedure, the provider shall assure that copies are available at the location for each person that may request a written copy.

### II. PROVISION OF CLIENT RIGHTS

- A. The Counseling Center will explain and maintain documentation in the client's individual patient record an explanation of rights to each person served prior to or when beginning assessment or treatment services.
- B. In a crisis or emergency situation, or when the client does not present for services in person such as through a hotline; The Counseling Center may verbally advise the client of at least the immediately pertinent rights only, such as the right to consent to or to refuse the offered treatment and the consequences of that agreement or refusal. Full verbal explanation of the client rights policy shall be provided at the first subsequent meeting.
- C. Clients or recipients of referral and information service, consultation service, and prevention service as described in Chapter 5122-29 of the Administrative Code may have a copy and explanation of the client rights policy upon request.
- D. Explanations of rights shall be in a manner appropriate for the person's understanding.
- E. All staff shall be required to follow the client rights policy and client grievance procedure. There shall be documentation in each employee's personnel file, including contract staff, volunteers and student interns that each staff member has received a copy of the client rights policy and the client grievance procedure and has agreed to abide by them.
- F. Residential Rights can be found in the Residential Grievance Policy and Procedure.



The  
COUNSELING CENTER  
of Wayne & Holmes Counties

#### IV. CLIENT GRIEVANCE PROCEDURE

1. To file a grievance with the agency or assistance with filing a grievance, please contact:

Megan Solsman

Compliance Officer/Patient Rights Officer/Client Advocate

Email : [msolsman@ccwhc.org](mailto:msolsman@ccwhc.org)

Phone : (330) 264-9029

Office Location: 2285 Benden Dr. Wooster, OH 44691

Availability: Monday – Friday 8am – 4 pm

2. Grievances are to be completed in writing or made verbally with the client advocate who will prepare a written statement of the grievance.
3. The written grievance must have the following information:
  - a) Date of the incident
  - b) Approximate time of the incident
  - c) Description of the incident and names of those involved or situation being grieved
  - d) Date and signature of client or individual filing the grievance on behalf of the client 1. Or an attestation by the client advocate that the written grievance is a true and accurate representation of the clients grievance.
4. The Compliance Officer will provide written acknowledgement of receipt of the grievance to each grievant within three business days from receipt of the grievance. The written acknowledgement shall include:
  - a) Date grievance was received;
  - b) Summary of the grievance;
  - c) Overview of grievance investigation process;
  - d) Timetable for completion of investigation and notification of resolution;
  - e) Treatment provider contact name, address and telephone number. 1. The Counseling Center will make a resolution on the grievance within twenty business days of receipt of the grievance. Any extenuating circumstances indicating that this time period will need to be extended will be documented in the grievance file and a written notification will be sent to the client;

**If complaint is regarding the Compliance Officer, the CEO or designee will be assigned for investigation. Please contact (330) 264-9029 for assistance.**



B. The client has the option to file a grievance with outside organizations, that include, but are not limited to, the following, with the mailing address and telephone numbers for each stated:

1. Mental Health and Recovery Board of Wayne & Holmes Co.  
Address: 2200 Benden Dr, Wooster, OH, 44691  
Phone: (330) 264-2527
2. Ohio Department of Behavioral Health (OhioDBH)  
Address: 30 East Broad Street, 36th Floor Columbus, Ohio 43215  
Phone: (614) 466-2596
3. Disability Rights- Ohio  
Address: 200 S. Civic Center Dr. #300 Columbus, OH. 43215  
Phone: (800) 282-9181
4. U.S. Department of Health and Human Services, civil rights office  
Address: Centralized Case Management Operations  
U.S. Dept. of Health and Human Services  
200 Independence Ave., SW  
Room 509F HHH Bldg.  
Washington, D.C. 20201  
Phone: 1-877-696-6775