

Arizona's Children Association

Client Rights, Responsibilities and Client Grievance Procedure Behavioral Health Clinical Services

All individual clients and their families have the right to receive this statement in their primary language, have it fully explained to them and to receive assistance in the use of grievance procedures when requested. Additional assistance will be obtained, as needed, for the hearing or visually impaired. Clients have the right to receive assistance from a family member, designated representative, or other individual in understanding, protecting, or exercising the client's rights. If enrolled by the Arizona Health Care Cost Containment System (AHCCCS) as an individual who is seriously mentally ill, a client also has the right to receive assistance from human rights advocates provided by AHCCCS or AHCCCS's designee in understanding, protecting, or exercising the client's rights.

At Arizona's Children Association the word "client" is used in place of "patient."

Clients of Arizona's Children Association (AzCA) are afforded the following rights:

1. To be treated with dignity, respect and consideration; which includes courtesy, respect for the client's cultural, psychosocial, spiritual and personal values, beliefs and preferences and his/her right to self-determination;
2. To not be subjected to:
 - a. Abuse;
 - b. Neglect;
 - c. Exploitation;
 - d. Coercion;
 - e. Manipulation;
 - f. Sexual abuse;
 - g. Sexual assault;
 - h. Restraint or seclusion;
 - i. Retaliation for submitting a complaint to any entity; AzCA will not discharge nor discriminate, in any way, against any client by whom, or on whose behalf, a complaint has been submitted or who has participated in a complaint investigation process; or
 - j. Misappropriation of personal and private property by an AzCA employee, volunteer, or intern;

3. No client and/or parent/guardian shall be denied the benefits of, or be otherwise subjected to discrimination, or be excluded from participation in programs and activities provided by (AzCA) on the grounds of:
 - a. race,
 - b. color,
 - c. ethnicity,
 - d. national origin,
 - e. culture,
 - f. language,
 - g. gender,
 - h. age,
 - i. sexual orientation/preference,
 - j. gender identity and expression,
 - k. disability,
 - l. diagnosis,
 - m. marital status,
 - n. religion,
 - o. veteran status,
 - p. any other protected status, or
 - q. source of or ability to pay;
4. To receive treatment that supports and respects the client's individuality, choices, strengths and abilities;
5. To receive privacy in treatment and care for personal needs;
6. Except in an emergency, to give consent for treatment and services;
7. To refuse or withdraw consent for treatment and services before treatment is initiated;
8. To be informed of alternatives to a proposed psychotropic medication and associated risks and possible complications of a proposed psychotropic medication;
9. To view their own medical record upon written request in accordance with A.R.S. §§ 12-2293, 12-2294, 12-2294.01, 36-507(3), 36-509 and 36-3283(D); and may also request amendment, obtain copies and receive an accounting of disclosures regarding his or her own clinical/service information as permitted by applicable law and administrative code;
10. To provide written consent for the release of the client's medical and/or financial records, except as permitted in A.R.S. §§ 12-2292, 12-2294, 12-2294.01, 36-509 and 36-3283(D);

11. To receive a referral to another health care institution if AzCA is not authorized or not able to provide physical health services or behavioral health services needed by the client; clients may also request the opinion of outside consultants at their own expense, or request a case review of their individual treatment plan, however, AzCA reserves the right to prescribe a treatment program it considers appropriate for the client;
12. To informed participation in the development of, or decisions concerning treatment, care and services;
13. To be informed of AzCA's policy on health care directives;
14. To be informed of the client complaint and grievance processes;
15. To consent to photographs of the client before the client is photographed, except as part of the intake process for AzCA identification and administrative purposes, as provided by A.R.S. § 36-507(2). To be informed and consent when audio or video recording will be used in the treatment process, including how and for what purpose such recordings will be used, and how and when such recordings will be destroyed except for video recordings used for security purposes that are maintained only on a temporary basis. Clients may rescind this consent for photographing, recording or filming used by the agency in any internal or external way except as noted above. AzCA reserves the same rights to be informed when a client or guardian wishes to audio or video record any service;
16. To participate or refuse to participate in research or experimental treatment;
17. To receive assistance from a family member, representative, or other individual in understanding, protecting, or exercising the client's rights;
18. To be informed of all fees that the client is required to pay and of the agency's refund policies and procedures, consequences of non-payment, and the limitations, if any, placed on the duration of service by outside funding sources before receiving service, except for a behavioral health service provided to a client experiencing a crisis situation; and
19. To be free from discharge or transfer, or threat of discharge or transfer for reasons unrelated to the client's treatment needs, except as established in a fee agreement signed by the client or the client's parent, guardian, custodian, or agent.

Client responsibilities include:

1. Providing relevant information as a basis for receiving services and participating in service decisions;
2. Asking for clarification or additional information if you do not understand the services or treatments being provided or outlined in your treatment plan; and

3. Notifying AzCA of any changes to your address, phone number, insurance information and insurance eligibility.

In addition to the client rights and responsibilities listed above, the client also has the right to know the rights afforded to Arizona's Children Association (AzCA) which include, the right to:

1. Accept clients who can utilize and benefit from its services;
2. Discharge any client upon reasonable notice when it is determined by AzCA that they are no longer able to effectively provide a treatment program and/or the client's conduct places the safety of self or others in jeopardy. Any additional program-specific behavioral expectations will be provided to the client upon intake; and
3. Be informed of expectations regarding behavioral conduct which could result in termination of services, including behavior or threats of behavior which places the safety of themselves or others in jeopardy, intoxication and disruptive behavior.
4. Be informed when a participant (client, guardian, any third party, etc.) wishes to audio or video record services. AzCA does not allow services to be recorded by the participant. AzCA reserves the right to discontinue services if the participant refuses to stop recording upon the staff members' directive.

CONFLICT OF CARE

When there are differences in service planning processes, procedures, admission, discharge and transfer issues and other choices among the staff itself, or between the guardian, family members, referral source or client and the service team the conflict is addressed to the appropriate Program Director. If the issue is not resolved at the Program Director level, it will be sent to the Chief Executive Officer (CEO). The decision at this level is final. Each client has the right to request the opinion of a consultant at his or her expense.

FURTHER INFORMATION

Clients have the right to review the following information at the agency or the Arizona Department of Health Services:

- Arizona Administrative Code for Health Services, Title 10;
- the report of the most recent inspection of the premises conducted by the Department of Health Services;
- any plan of correction in effect as required by the Department; and
- any other plan of correction in effect as required by any accrediting body of the agency.

If the licensee has submitted a report of inspection by a nationally recognized accreditation agency in lieu of having an inspection conducted by the Department, the most recent report of inspection conducted by the nationally recognized accreditation agency.

For more information of your rights and responsibilities, you may want to review the Consumer Bill of Rights and Responsibilities developed by the President's Advisory Commission on Consumer Protection and Quality in the Health Care Industry.

GRIEVANCE PROCEDURE

Step One: Within 2 working days of receiving a request from a client to use the grievance procedure the therapist or other staff receiving the complaint will document the complaint on the Incident Report Form and attach any additional information from the client. At this time, the client is also given another copy of this grievance procedure.

- a. The Incident Report Process is implemented: the client and those named in the grievance must meet within 5 working days of having initiated the Incident Report to attempt resolution. If resolved, no further action is needed. Documentation of such will be entered on/attached to the Incident Report, entered in the record and given to the client.
- b. If the client is not satisfied with the results of step one, he/she will request within 5 working days of the previous meeting, to proceed to Step Two. The request is addressed to the Program Director.

Step Two: Within 7 working days of the client's request, the Program Director will review the grievance, provide opportunity for complainant to be heard and respond, in writing, to the client and include a copy of the response in the case record. If the client is not satisfied with the results of Step Two, he/she will request, in writing, within 5 working days of receipt of the above letter to proceed to Step Three. The request is addressed to the Compliance Officer.

Step Three: Within 10 working days of receipt of the client's request, the CODQ will review the grievance and respond, in writing, to the client with a copy of the response in the case record. If the client is not satisfied with step three, he/she will request, in writing, within 7 working days of receipt of the above letter to proceed to step four. The request is directed to the Chief Executive Officer.

Step Four: Within 14 working days of receipt of the client's request, the Chief Executive Officer will review and address the complaint. The findings of the Chief Executive Officer are final and will be communicated to the client in writing. *

The Compliance Officer will summarize and present aggregate data to the Compliance Committee quarterly, and Program Committee of the Board of Directors annually, for their review and recommendations.

* Grievances may also be addressed to the following and/or any other funding source related to

their service including the applicable AHCCCS Health Plan (see below):

Arizona Department of Health Services
Bureau of Behavioral Health Facilities Licensing
150 N. 18th Ave. Suite 450, Phoenix, AZ 85007
Telephone (602) 364-3030 Fax: (602) 364-4801
Online: <https://app3.azdhs.gov/PROD-AZHSComplaint-UI>

Arizona Health Care Cost Containment Services (AHCCCS)
Division of Health Care Advocacy & Advancement
Website: <https://www.azahcccs.gov/AHCCCS/HealthcareAdvocacy/>

701 E. Jefferson Street, Phoenix, AZ 85034
Telephone: 800-421-2124 or (602) 364-4585

Arizona Center for Disability Law:

Phoenix:

5025 E. Washington St., Ste. 202
Phoenix, AZ 85034
(602) 274-6287
(800) 927-2260
FAX: (602) 274-6779

Tucson:

177 North Church Ave., Ste. 800
Tucson, AZ 85701
(520) 327-9547 (Voice)
(800) 922-1447
FAX: (520) 884-0992

Email: center@disabilitylaw.org

AHCCCS Complete Care Health Plans:

Health Plan	Phone Numbers	Web Address	Address
Arizona Complete Health	(888) 788-4408 TTY – 711	https://www.azcompletehealth.com/contact-us.html	333 E Wetmore Rd., Ste. 500 Tucson, AZ 85705
Banner University Family Care	(800) 582-8686 TTY – 711	https://www.bannerufc.com/acc/about-us/contact-us	5255 E. Williams Circle, Ste 2050 Tucson, AZ 85711
Molina Complete Care	(800) 424-5891 TTY - 711	https://www.molinahealthcare.com/members/common/en-US/abtmolina/compinfo/contactus-az.aspx	4801 E Washington St Ste 100, Phoenix, AZ 85034
Mercy Care	(602) 263-3000 (800) 624-3879 TTY/TDD- 711	https://www.mercycareaz.org/contact-us.html	4750 S 44 th Pl., Ste. 150, Phoenix, AZ 85040
Blue Cross Blue Shield of Arizona Health Choice	(800) 322-8670 TTY - 711	https://www.azblue.com/contact-us	8220 N 23 rd Ave. Phoenix, AZ 85021
United Healthcare Community Plan	(800) 348-4058 TTY – 711	https://www.uhc.com/communityplan/contact-us/medicaid	1 E Washington St., Ste. 900 Phoenix, AZ 85004