

Independent Haven
Service Recipient Rights for Clients Using SLS Services

Document No. 610.00A

Client name: _____

This packet contains information regarding your rights while receiving services and supports from Independent Haven, information on restriction to your rights and information of where you can go if you have questions or need additional information.

____ I received the following information in writing at service initiation and it was reviewed with me within five working days of when I started to receive services and every year after that.

- a. A copy of my rights under the law, MN Statues 245D.04
- b. An explanation of what my rights are and that I am free to exercise my rights; and that Independent Haven must help me exercise my rights and help protect my rights.

Date services were started: _____ Date I received this information: _____

____ This information was provided to me in a way that I understand. If I needed the information in another format or language, it was given to me in that format or language.

____ If my rights are or will be restricted in any way to protect my health, safety and well-being, the restriction has been explained to me and I understand Independent Haven must document and implement the restriction as required by law to make sure I get my rights back as soon as possible

Are there any restrictions placed on my rights? Yes _____ No _____

- If Yes, see Rights Restriction document

____ I understand that I may contact the agencies below if I need help to exercise or protect my rights:

Office of the Ombudsman for Mental Health and Developmental Disabilities
121 7th Place E, Suite 420
Metro Square Building
St. Paul, MN 55101
Phone: (651) 757-1800 or 1 (800) 657-3506
Fax: (651) 797-1950
Website: www.ombudmhdd.state.mn.us

Minnesota Disability Law Center
430 1st Ave N, Suite 300
Minneapolis, MN 55401
Email: mndlc@mylegalaid.org
Website: <http://www.mndlc.org>

____ I want _____ (insert name of person chosen by client) to help me exercise my rights. Independent Haven has this person's contact information in my record.

Independent Haven

Service Recipient Rights for Clients Using SLS Services

By signing this document, I am agreeing that I have read and understand what I have checked above.

Client/Legal Guardian

Date

The right to terminate or refuse services:

You have the right to refuse or end services. If you choose either of those options, the service provider will inform you of the results of ending or refusing services.

The right to know service limits:

You have the right to know, in advance, any limits to the services you are to receive. Those limits to services include but are not limited to the following. For a complete list, please reference your Client Services Handbook:

- Independent Haven does not develop or support Emergency Use of Manual Restraints.
- Independent Haven does not perform personal cares for clients including bathing, dressing or grooming.
- Independent Haven buildings are not handicap accessible at most locations.
- Independent Haven does not perform medical procedures including; tube feedings, dressing changes, injections, blood sugar monitoring, C-PAP, or oxygen.
- Independent Haven does not provide services to support clients who are physically aggressive.
- Independent Haven does not provide chemical dependency services.
- Independent Haven does not provide sex offender services.

The right to know initiation, service suspension and service termination terms:

You have the right to know the Independent Haven's policy on beginning services. You also have a right to know why Independent Haven could suspend or terminate your services. If Independent Haven wants to stop providing you services, they must give you written notice. The reason for service suspension or termination includes but is not limited to the following:

- You no longer need services provided by Independent Haven.
- You require services that Independent Haven does not provide.
- You choose not to participate positively in the rules of Independent Haven, established goals, and Independent Haven policies.
- You are in need of Emergency Use of Manual Restraints.
- You need assistance with activities of daily living.
- You need staff to perform medical procedures.
- You need in-patient chemical dependency services.
- You need a handicapped accessible housing and are living at a site that is not accessible.
- You have been physically aggressive toward staff or other clients.
- You have been sexually inappropriate with other clients, staff or community members.

The right to know service charges:

The charges are as described in your Customized Service Agreement.

The right to know funding source:

Independent Haven

Service Recipient Rights for Clients Using SLS Services

You have the right to know who pays for your services and if you or your family has to pay any amount. Service payment is covered by the State of Minnesota through your waiver. You and your family are responsible for paying for outings, personal items, electricity, cable, rent, phone, pharmacy, and medical bills not covered by insurance.

The right to take part in planning your services.

You have the right to take part in planning and evaluating the services that will be provided by Independent Haven.

The right to have your preferences considered:

You have the right to have services provided to you in a way that respects you and considers your preferences.

The right to continuity of care:

You have the right to have Independent Haven help coordinate your care if you transfer to another provider to ensure continuity of care.

The right to trained staff:

You have a right to have staff that is trained and qualified to provide you services under Independent Haven's service abilities.

The right to private records:

You have a right to have your personal, financial, service, health and medical information kept private and be notified if these records have been shared. You have a right to know Independent Haven's policy about keeping your information private.

The right to see your records:

You have a right to see your records within 15 business days upon request. Fees may be charged for copies of the record consistent with MN Statutes §144A.4794 and with the Minnesota Department of Health annual statement of maximum charges for copies of records, found at www.health.state.mn.us/divs/hpsc/dap/notices.html. If a client, or the client's legal guardian, wishes to review the client's record but does not need a copy, a nurse or residential supervisor will be present while the client reviews the original records.

The right to be free from maltreatment:

You have a right to be free from abuse, neglect or financial exploitation by Independent Haven or its staff.

The right to be treated with respect:

Staff will treat you with respect. They must allow you to do things you enjoy, speak with you in a way you understand, and be respectful of your cultural background.

The right to refuse to participate in an experiment:

You do not have to participate in any experiment or research unless you want to. Staff must give you information in a way you understand and put your choice in writing.

Independent Haven

Service Recipient Rights for Clients Using SLS Services

The right to be free from manual restraints:

You have a right to be free from staff trying to control your behavior by physically holding you or using a restraint to keep you from moving, giving you medication that you do not want to take or that is not prescribed for you, or putting you in a time out or seclusion.

The right to be free from prejudice and harassment:

You have the right to be free from prejudice and harassment regarding your race, gender, age, disability, spirituality and sexual orientation.

****The right to friends:**

You can choose your own friends. You have the right to talk to and spend time with your friends.

****The right to personal privacy:**

You have the right to be alone in the bathroom and bedroom.

****The right to engage in chosen activities:**

You have a right to choose and participate in activities you enjoy.

The right to have your grievances heard:

If you have a problem, you have a right to have others hear about it. Please see Grievance Policy & Procedure for more information.

The right to additional assistance: If you believe you are not getting the help you need, you can contact your case manager, guardian, or an advocate. The names and telephone numbers of people you can contact are:

Case Manager: _____

Legal Guardian: _____

Office of Ombudsman: 612-296-3848

The right to stand up for your rights:

If you believe any of your rights are being violated, you, your family, or your Legal Guardian has the right to insist on your rights. Independent Haven will not retaliate or restrict you from standing up for your rights.

MAARC 1-844-880-1574

Office of Ombudsman 612-296-3848

Legal Aid 612-332-7301 or 612-338-0968

****These rights may be restricted as directed in the client's CSSP and CSSPA.**

Rights Restrictions

Rights restrictions are allowed only if determined necessary to ensure your health, safety and well-being. Any restriction of your rights must be documented in your CSSP or CSSPA. The restriction must be implemented in the least restrictive alternative manner necessary to protect you and provide you

Independent Haven

Service Recipient Rights for Clients Using SLS Services

support to reduce or eliminate the need for the restriction in the most integrated setting and inclusive manner. A restriction of your rights may be implemented only after you have given your approval. You may withdraw your approval of the restriction of your right at any time. If you do withdraw your approval, the right must be immediately and fully restored. You may be evaluated to ensure Independent Haven is the appropriate placement.

Independent Haven's requirements around Rights Restrictions

Independent Haven must document the following information:

- The justification for the restriction based on an assessment of what makes you vulnerable to harm or maltreatment if you were allowed to exercise the right without a restriction.
- The objective measures set as conditions for ending the restriction.
- A schedule for reviewing the need for the restriction based on the conditions for ending the restriction to occur semiannually from the date of initial approval or more frequently if requested by the client or the client's legal guardian, and the case manager.
- Signed and dated approval for the restriction from you or legal guardian.