

KELLY'S HOME THERAPY SERVICES, LLC

Houston, TX 77062-2527

Phone: 281.309.1981 FAX: 832.284.4732

Patient Rights and Responsibilities

Your Rights As A Patient

We at Kelly's Home Therapy Services believe that the protection and support of the basic human rights of freedom of expression, decision and action are important to the healing and well-being of our patients. Therefore, we strive to treat patients with respect and with full recognition of human dignity. Decisions regarding mental health care treatment will not be based on race, creed, sex, national origin, age, disability, or sources of payment. As a patient of Kelly's Home Therapy Services:

1. You have the right to a reasonable response to your request and need for treatment or service, within the capacity, its stated mission, and applicable laws and regulations.
2. You have the right to be informed about which mental health care professionals are responsible for your care.
3. You have the right to the information necessary for you to make informed decisions, in consultation with your therapist, about your mental health care including information about your diagnosis, the proposed care and your prognosis in terms and a manner that you can understand before the start of your care. You also have the right to take part in developing and carrying out your plan of care.
4. You have the right to reasonable access to care.
5. You have the right to care that is considerate and respectful of your personal values and beliefs. We strive to be considerate of the ethnic, cultural, psychosocial, and spiritual needs of each patient and family.
6. You have the right to have your family take part in your care decisions with your permission.
7. You have the right, to the extent permitted by law, to have your legal guardian, next of kin, or a surrogate decision maker appointed to make decisions on your behalf in the event you become unable to understand a proposed treatment or procedure, are unable to express your wishes regarding your care, or you are a minor. The person appointed has the right, to the extent permitted by law, to exercise your rights as a patient on your behalf.
8. You and your appointed representative have the right to take part in ethical questions that arise during your care.
9. You and your legal representative have the right to access the information contained in your record in a timely manner subject to state and federal law.
10. You may request an explanation of your bill.
11. You have the right to personal privacy and for your information to be kept confidential within the limits of the law.
12. You have the right to receive care in a safe setting.
13. You have the right to be free from abuse or harassment.
14. You have the right to be free from seclusion and restraints for behavior management except in emergencies as needed for your safety when less restrictive means may have been ineffective.

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15. You have the right to participate in the development and implementation of his or her plan of care.
16. A patient has the right to prompt resolution of complaints and/or grievances from either the patient and his or her family.
17. A patient has the right to an environment that preserves dignity and contributes to a positive self image.
18. A patient has the right to be free from mental, physical, sexual and verbal abuse, neglect and exploitation, or harassment.
19. A patient has the right to access protective and advocacy services.
20. A patient has the right and need for effective communication.

Your Responsibilities

You have the responsibility to...

- Provide information about present and past illnesses, hospitalizations, medications and other matters relating to your mental health history.
- Have members of your family authorized to review your treatment.
- Ask questions if you do not understand procedures.
- Sign a written acknowledgement that you have received the applicable Notice of Privacy Practices.
- Provide accurate information needed for processing your insurance coverage.
- Be responsible for payment of all services, either through your third party payers (insurance company) or by personally making payment for any service that are not covered by your insurance policy(s) including second opinions or consultations.

You may also file a complaint concerning a therapist to:

Texas State Board of Examiners of Professional Counselors

1100 West 49th Street
Austin, Texas 78756-3183
(512) 834-6658

Signature

Date