



Clients Rights

Prisma Community Care

I. Introduction

This document applies to all clients/patients receiving services in all program areas, including Ryan White Part A, C, and D Programs.

This document complies with all Arizona Outpatient Treatment Center regulations and requirements.

This document serves as official Prisma Community Care policy and is established, documented and implemented to protect the health and safety of our clients/patients. The Deputy Director of Prisma Community Care is the Administrator responsible for implementation of this Policy and Procedures.

This document serves as notification to staff, clients/patients/regulators/and the general public of Prisma Community Care policies regarding clients rights, responsibilities and grievance procedures.

The Clients Rights and Responsibilities section of this document must be conspicuously posted on the premises of Prisma Community Care at all times. This document is posted in the Prisma Community Care reception area on a wall to the left of the reception area.

At the time of admission, all clients/patients or their representative must receive a written copy of this document and policy. All clients/patients receiving services at Prisma Community Care are asked to sign a copy of this document confirming you have been given a copy of this document, and understand the document.

Annually, all individuals receiving services at Prisma Community Care will be asked to sign this document again and the signed document is maintained in the client/patient health record.

II. Confidentiality of Client Information

Prisma Community Care and its employees will protect client confidentiality in accordance with state and federal laws.

Staff and volunteers receive annual training on client confidentiality, agency policy regarding confidentiality, and training to ensure compliance with HIPAA regulations.

All clients will be educated on their right to confidentiality and will be provided with a document, for their completion, that expressly describes the circumstances under which their client information can be released and to whom.



Information that is kept confidential includes all written notes in client records including, but not limited to, intake form(s), measurement tool(s), service documentation form(s) and your status as a client at Prisma Community Care. Each client is expected to also keep confidential any information about others who are accessing services at Prisma Community Care. Some exceptions apply to confidentiality. A staff member may break confidentiality in any of the following situations:

Harm to Self: If a staff member has reason to believe that you may hurt yourself (including suicidal statements or actions), the staff member is required to intervene to make sure you receive appropriate care. This may include notifying law enforcement and / or paramedics.

Danger to Others: If a staff member knows that you have an intention and/or a plan to harm a specific person and that person has been named and identified then the staff member is required by law to notify the police and take responsible steps to warn the intended victim.

Unable to Care for Yourself: If a staff member knows that you are unable to take basic care of yourself and your safety, then the staff member is required to alert paramedics and/ or police that you are gravely disabled and may need to be hospitalized for up to (3) days.

Abuse of a Child, Elderly Person, or Disabled Person: If during the course of your care you disclose that a child, elderly person, or disabled person is currently, or has been physically, sexually, or emotionally abused, then staff members are required by law to file a report with the Department of Social Services, Adult Protective Services, and / or Child Protective Service.

III. Culturally and Linguistically Competent Service Delivery

Prisma Community Care staff and providers will provide appropriate services and referrals in an equitable and non-judgmental manner to all clients.

Prisma Community Care staff and providers will offer language assistance to clients with limited English proficiency and/or other communication needs, at no cost to the client, to facilitate timely access to all health care and services.

Prisma Community Care staff and providers will inform clients of the availability of language assistance services clearly and in the client's preferred language, verbally and in writing.

Prisma Community Care staff and providers will provide easy-to-understand print and multimedia materials and signage in the languages most commonly used by the populations in the service area.

Prisma Community Care staff and providers will take into account and be responsive to cultural differences with the provision of direct client services.

Prisma Community Care will provide appropriate cultural competency/sensitivity training to all direct service staff.

IV. Continuity of Service Delivery



Prisma Community Care will document referral relationships with other providers and service agencies, including Ryan White, and non-Ryan White, HIV/AIDS, health, and social services available within the RWPA Eligible Metropolitan Area and surrounding communities.

Prisma Community Care will establish and maintain a written referral process for all clients needing services outside of the Providers' agency.

V. Client Satisfaction

Prisma Community Care will compile and report client satisfaction data, consistent with the Quality Management program.

Prisma Community Care will develop an improvement process, as needed, based on the outcome of the Client Satisfaction Survey.

VI. Statement of Clients Rights

All clients have the right to receive effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs. In addition, clients have the right:

To be treated with dignity, respect, and consideration.

Not to be discriminated against based on disability, mental or physical health (including substance abuse), HIV or other diagnoses, source of payment, age, ancestry, immigrant status, national origin, race, creed, color, sex, gender, sexual orientation, gender orientation, marital or parental status, religion, political affiliation or belief, ex-offender status, unfavorable military discharge, membership in activist organization, or any other basis prohibited by law.

To receive treatment that:

Supports and respects the client's individuality, choices, strengths, and abilities

Supports the client's personal liberty and only restricts the client's personal liberty according to a court order; by the client's general consent; or as permitted in this document

Is provided in the least restrictive environment that meets the client's treatment needs

Not to be prevented or impeded from exercising the client's civil rights unless the client has been adjudicated incompetent or a court of competent jurisdiction has found that the client is unable to exercise a specific right or category of rights.

To receive privacy in treatment and care for personal needs.

To be informed of the patient complaint/grievance process included in this document and to submit grievances to agency staff members and complaints to outside entities and other individuals without constraint or retaliation.



To have grievances considered in a fair, timely, and impartial manner.

To seek, speak to, and be assisted by legal counsel of the client's choice, at the client's expense.

To receive assistance from a family member, the patient's representative, or other individual in understanding, protecting, or exercising the client's rights.

If enrolled by the State or the Regional Behavioral Health Authority as an individual who is seriously mentally ill, to receive assistance from human rights advocates provided by the Department of Health Services or the Department's designee in understanding, protecting, or exercising the client's rights.

To have the client's information, medical and financial records kept confidential and released only with written consent to the release of information or as permitted under Federal Statute (HIPAA), State Statute (R9-10-1009) and in accordance with Prisma Community Care Notice of Privacy Practices.

To privacy in treatment, including the right not to be fingerprinted, photographed, or recorded without general consent, except:

For photographing for identification and administrative purposes as provided by R9-101008-(B)(3)(e) which states that clients have, the right to consent to photographs of the patient before the patient is photographed, except that a patient may be photographed when admitted to an outpatient treatment center for identification and administrative purposes.

For video recording used for security purposes that are maintained only on a temporary basis

To review, upon written request, the client's own record during the agency's hours of operation or at a time agreed upon by a Director, as stated and mandated in Arizona Regulation R9-101008(c)(4).

To receive referral to another health care institution if Prisma Community Care is not authorized or is not able to provide physical health services or behavioral health services needed by the patient.

To be informed of all fees that the client is required to pay and of the agency's refund policies and procedures before receiving service, except for behavioral health service provided to a client experiencing a crisis situation.

To receive a verbal explanation of the client's condition and the proposed treatment, including the intended outcome, the nature of the proposed treatment, procedures involved in the proposed treatment, risks or side effects from the proposed treatment, and alternatives to the proposed treatment.

To be offered or referred for the treatment specified in the client's treatment plan;



To receive continuity of care whenever possible and to receive a referral to another health care institution if Prisma Community Care is not authorized or not able to provide physical health services or behavioral health services needed by the patient.

To be free from:

Abuse, Neglect, Exploitation, Coercion, Manipulation, Sexual abuse, Sexual assault, Restraint, or seclusion

Retaliation for submitting a complaint to the Department of Health Services or another entity

Misappropriation of personal and private property by any Prisma Community Care personnel, member, employee, volunteer or student

To participate or have the patient's representative participate in the development of, or decisions concerning treatment except in an emergency, to either consent to or refuse treatment.

To refuse or withdraw consent for treatment before treatment is initiated.

Except in an emergency, to be informed of alternatives to and possible complications of a proposed psychotropic medication or surgical procedure.

To be informed of Prisma Community Care's policy on health care directives.

To refuse to perform labor for an agency, except for housekeeping activities and activities to maintain health and personal hygiene.

To be compensated according to state and federal law for labor that primarily benefits the agency and that is not part of the client's treatment plan.

To participate or refuse to participate in research or experimental treatment.

To consent in writing, refuse to consent, or withdraw written consent to participate in research or treatment that is not a professionally recognized treatment.

To refuse to acknowledge gratitude to the agency through written statements, other media, or speaking engagements at public gatherings.

To receive services in a smoke-free facility, although smoking may be permitted outside the facility.

To have access to current health information: The client has the right to full access to information from the health care provider about current FDA approved or other proven treatments. The client has the right to full access to information from all service providers about social and support services.



The client has the right to know the identities, titles, specialties, and affiliations of all service providers, as well as anyone else, involved in the client's care. The client has the right to know about the service provider's rules and regulations that are pertinent to the care or type of care the client receives. Any biases or conflicts of interest the service provider may have will be disclosed.

Clients must be advised of the risk and benefits of any proposed treatment considered to be experimental in nature.

Client Name _____

Client Signature _____ Date _____