**PATIENT BILL OF RIGHTS**

A. You have the right to considerate and respectful care that includes consideration of the psychosocial, spiritual, and cultural variables that influence the perceptions of illness.

B. You or your legally designated representative has the right to be informed about your illness, possible treatment, and likely outcome(s) and to discuss this information with your providers. You have the right to know the names and roles of people treating you.

C. You have the right to have an advance directive, such as a living will or health care proxy. These documents express your choices about your future care or name someone to decide if you cannot speak for yourself. If you have a written advance directive, you should provide a copy to your family and your provider.

D. You have the right to privacy. Autism Services And Programs (ASAP), your provider, and others caring for you will protect your privacy.

E. You have the right to expect that treatment records are confidential unless you have given permission to release information, or reporting is required or permitted by law. When ASAP releases records to others, such as insurers, it emphasizes that the records are confidential. You have the right to review your behavioral health records in the company of a professional, but they remain the property of ASAP.

F. You or your legally designated representative has the right to review your medical records and to have the information explained, except when restricted by law.

G. You have the right to expect that ASAP will give you necessary health services to the best of its ability. You have the right to be informed of the effectiveness of treatment, and to know of possible risks, side effects or alternate methods of treatment. You have the right to have the choice of a clinician and to change clinicians if desired. You have the right to refuse treatment, or to ask for a second opinion, or an alternative course of treatment, and to be informed of the medical consequences of your actions.

H. You have the right to consent or decline to take part in research affecting your care. If you choose not to take part in research treatments or procedures, you will receive the most effective care ASAP otherwise provides.

I. You have the right to express a complaint concerning your care and receive a response without your care being compromised. You have a fair, fast, and objective review of any complaint against ASAP. This includes waiting times, actions of staff/contractors and adequacy of service facilities.

J. You have the right to receive care in a safe setting, free from abuse or harassment including access to protective services.

K. Each patient will be designated a behavior health care professional to provide his/her support needs. ASAP believes maintaining personnel continuity is essential to establishing a good patient working relationship and continuum of care.

L. Guardians will be briefed on the treatment progress and how they can aid in implementing behavioral support plans. If necessary, training on the correct behavioral modification strategies will be provided to ensure the positive patient outcomes.

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PATIENT NAME PATIENT/GUARDIAN SIGNATURE DATE