

Contents

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This free booklet is available from:

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Introduction

Part 1 Civil & Legal Rights

Part 2 Individual Rights
Dignity & Respect

Part 3 Safe and Humane
Living Environment

Part 4 Treatment Rights

Part 5 Medications

Part 6 Outpatient Rights

INTRODUCTION

Anyone who is voluntarily or involuntarily admitted to a **mental health facility** or receives services from a **community mental health center** in Alaska can use this book.

This booklet tells what some of your rights are, such as:

1. The right to be treated with Dignity
2. The right to good psychiatric treatment
3. The right to protection from discrimination
4. The right to have your questions answered

No booklet can answer all your questions. For example, this booklet won't tell you about your rights in the actual court commitment process. You'll need to call your attorney for that information. If you have other questions call the Disability Law Center at 1-800-478-1234.

Part 1

CIVIL AND LEGAL RIGHTS

CIVIL AND LEGAL RIGHTS RETAINED DURING COMMITMENT

- * Patients admitted to, or receiving services from, a mental health facility, whether voluntarily or involuntarily, are entitled to the legal rights guaranteed by the constitutions and laws of the United States and the State of Alaska.

For example, you have the following rights:

- * The right to due process and equal protection of the law.
- * The right to be treated in the least restrictive environment possible.

- * The right to talk to an attorney.

- * The right to give consent or refuse regarding mental health medical treatment.

- * The right to enter into a divorce.

- * The right to sell, lease, or convey real property.

- * The right to register to vote.

- * The right to have a driver's license.

- * You also retain a right to be free from any specifically taken restrictions and conditions of a commitment order that are not automatically expected as a condition of a commitment period.

RIGHT TO BE FREE FROM UNNECESSARY RESTRICTIONS

You may not be discriminated against because you were committed to a mental health facility, received an evaluation, or received mental health treatment. Both Federal and Alaska law prohibit discrimination on this basis when you are: applying for a job; working at a job; buying a house; or, keeping or applying for licenses and permits.

RIGHT TO BE INFORMED OF YOUR RIGHTS AND TO HAVE THEM POSTED

Every patient must receive a written copy of his or her rights under state and federal mental health laws after being admitted to a mental health facility. Your rights must be explained to you in a language you can understand.

A copy of your rights must also be posted in all units or wards and all other appropriate locations.

RIGHT TO HAVE CONFIDENTIAL RECORDS MAINTAINED

The mental health records are complete and confidential for every patient. As a patient, you must give written permission before the facility can allow your records to be released to anyone. However, according to law, your records can be released without your permission under certain conditions: your records can be used by health professionals for your evaluation, treatment, or appropriate referral; your records can be assigned to represent you in research projects; your records can be used to take measures to prevent future hospitalization; or to the insurance company for your assistance program on your behalf.

RIGHT OF ACCESS TO PATIENT ADVOCATE OR LAWYER

Bethel: 543-3357

(Each office has

Statewide toll-free
1-800-478-1234

You have the right to talk with an advocate from client advocacy organizations, or any other qualified advocate to help you understand your rights. This includes the right to have private conversations with your advocate or attorney.

You have the right to contact your attorney or the Disability Law Center of Alaska at no cost. The Disability Law Center protects and advocates for the rights of individuals labeled mentally ill.

You can reach the Disability Law Center of Alaska at the following numbers:

Anchorage: 344-1002

Juneau: 586-1627

Fairbanks: 456-1070

Part 2

THE RIGHT TO DIGNITY AND RESPECT

RIGHT TO BE TREATED WITH DIGNITY

You have the right to be treated with dignity and respect while you are receiving services from any Alaska mental health care facility.

RIGHT TO PRIVACY

You are entitled to the maximum amount of privacy consistent with the effective delivery of services to you.

RIGHT TO FREEDOM FROM SEARCHES

You have the right to be free from searches of your possessions without probable cause.

Part 3

RIGHT TO A SAFE AND HUMANE LIVING ENVIRONMENT

You have the right to a safe and humane psychological and physical environment while you are at a mental health facility. The facility must provide for your safety and comfort. It must also promote dignity and ensure appropriate privacy with regard to your personal needs.

RIGHT TO VISIT AND RECEIVE VISITORS

You are entitled to the same right to visit and receive visitors at reasonable times as patients at any public hospital. However, the treatment team responsible for your treatment has the authority to impose certain written

restrictions on your purposes.

Any order denying individuals must be for such denial a specific, limited amount of time. Any restriction must be periodically reviewed. You have the right to have a telephone with or be visited

RIGHT TO PRIVATE TELEPHONE CONVERSATIONS

You have the right to access to a telephone and receive private calls, the same as in a hospital. However, the person responsible for your treatment has the authority to impose limited written restrictions on your telephone treatment purposes.

restrictions must be periodically reviewed.

RIGHT TO SEND AND RECEIVE MAIL

You have the right to send sealed mail without restriction. You have the right to ready access to letter writing materials and postage, which you may request from unit staff.

You have the right to receive unopened mail, without restriction, from your attorneys, private doctors, other professional persons, courts and government officials. You also have the right to receive sealed mail from others.

If there is reason to believe your mail may contain contraband (an illegal item) or a dangerous item, you may have to open the mail in the presence of an appropriate person.

RIGHT TO WEAR YOUR

You have the right to wear your personal clothing and personal possessions, unless they are dangerous to you or others who might have access to them. The time of administration of the facility is necessary to make sure they won't get lost or returned to you.

HYGIENE AND GROOMING

You have the right to wear your own hair style or

The facility may require you to follow reasonable grooming standards.

RIGHT TO READ BOOKS OF YOUR OWN CHOICE

You have the right to read books and materials of your own choosing, unless the professional person in charge of your treatment determines that particular materials pose a threat to your safety or well being or that of other patients.

RIGHT TO KEEP AND SPEND YOUR MONEY

You have the right to keep and be allowed to spend a reasonable amount of your own money for your needs and comforts.

PATIENT FINANCES

If you are a patient at API, your money will be put into an individual patient account in your name. You will be allowed to keep a limited amount of money with you on the unit for incidental spending. Hospital rules

allow you to request a scheduled week account. If you need for additional account, you can request assistance to fill

RIGHT TO PRACTICE YOUR RELIGION

You have the right to practice the religion of your choice. You must make reasonable accommodations for this religious worship.

Religious worship on you or require

RIGHT TO EDUCATION

As an individual with a disability, you have the right to an education and appropriate services if you are age of 18. In some cases, you may be eligible from 19 years to 22 years of age also eligible.

RIGHT TO ADEQUATE DIET

You have the right to be provided with a nutritionally sound and medically appropriate diet. The facility is required to conduct a nutritional evaluation of you within the first week after you are admitted.

If you have special medical or religious dietary needs, the facility must provide for them. The facility must take appropriate steps to correct any nutritional deficiencies found during your nutritional evaluation.

RIGHT NOT TO BE PHOTOGRAPHED EXCEPT FOR CONFIDENTIAL IDENTIFICATION UNLESS YOU WANT TO

A facility may photograph you for identification when you are admitted there. These photos are confidential.

You or your guardian must give consent for any photographs to be taken.

RIGHT TO REGULAR EXERCISE

You have the right to regular exercise. The facility must provide opportunities and facilities for exercise and recreation.

RIGHT TO INTERACT WITH OTHER PATIENTS OF THE SAME SEX

You have the right to interact with other members of the same sex. There is an order of preference for interaction if not otherwise specified in the treatment plan at that time.

PATIENT LABOR

You can not be required to perform labor which involves the operation and maintenance of the facility, but you can voluntarily perform such labor and the facility must reimburse you for it.

You may be required to perform therapeutic tasks which do not involve the facility's operation and maintenance if the task is part of your treatment plan.

If the task is something the facility would otherwise have to pay someone to do, you must be paid for it.

Part 4

TREATMENT RIGHTS

RIGHT TO APPROPRIATE TREATMENT

You have the right to appropriate treatment under conditions that are supportive of your personal liberty. Your liberty can not be restricted except as reasonably necessary for your treatment or for the protection of you or others from physical injury.

RIGHT TO BE FREE FROM UNNECESSARY PHYSICAL RESTRAINT AND SECLUSION.

Physical restraints (soft ties) or seclusion (locked quiet room) may not be used unless you are likely to physically harm yourself or others

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among adequate
restraints, includ
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must be visited
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medical record
reason for use
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authorizing staff

RIGHT TO VOLUNTARY

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hours in which to evaluate you before filing for involuntary commitment.

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be discharged.

PAYMENT RIGHTS

You or your family may be billed for some or all of your treatment, according to ability to provide for payment. If you are transported to a facility for involuntary commitment, your return transportation will be paid for.

RIGHT TO TREATMENT

You have the right to an in-depth treatment plan for your treatment from the time of your admission. The plan should include:

1. specific goals directed toward your symptoms and problems;
2. frequent monitoring of progress and adjustment of treatment, as necessary, in the event of a complication;
3. frequent monitoring of your condition to determine when you are ready for involuntary commitment, if necessary;

RIGHT TO CONSENT TO TREATMENT

You have the right to give or withhold consent to your treatment if you are capable of giving informed consent, unless the situation is a crisis or an impending crisis.

RIGHT TO EARLY DISCHARGE

4. a plan for when you go home that fits your needs for social, family and treatment supports.

4. Reasons this was considered :
5. What, if any services are available.
6. Why specific services were not included

RIGHT TO PARTICIPATE IN PLANNING YOUR TREATMENT

You have the right to participate in the on-going planning of your mental health services. If you request, your family members, your guardian, a mental health professional who has worked with you before, your lawyer, other representative, or close friends must be involved in planning. You may request specific forms of therapy. You must receive an explanation, in terms you can understand, of:

1. Your general condition and prognosis,
2. Treatment goals and objectives,
3. Any bad effects of the treatment,

Your treating physician should not withhold any of your services.

RIGHT TO APPROPRIATE DISCHARGE

Planning for your discharge should begin when you have the right to develop and discharge plan. The facility must

plan. The plan must include an agreement by agencies and individuals in your home community that will give you a network of services and support with the least restriction necessary. If you are indigent you shall receive suitable transportation to your permanent residence, or another suitable place. If you are transported to a facility for involuntary commitment, your return transportation will be paid for.

RIGHT TO BRING GRIEVANCES

You have the right to bring grievances about your treatment, care or rights to an impartial group in the facility. You must be informed of the existence and contents of the grievance procedure. A staff member must assist you with your complaints.

RIGHT TO PROMPT AND ADEQUATE MEDICAL TREATMENT

You have the right to prompt and adequate medical treatment for any physical ailment.

The facility must provide for your psychiatric and medical treatment.

DIET MAY NOT BE USED AS PUNISHMENT

You can not be denied food as a punishment.

RIGHT NOT TO BE SUBJECT TO UNNECESSARY EXPERIMENTATION

You have the right not to be used in experimental treatment or research without your informed, voluntary, written consent.

Alaska law prohibits experimental treatment involving any significant risk of physical or psychological harm to you.

If you believe you are being neglected or threatened while you are in treatment, you should report it. You are protected if you report neglect.

You may report any or all of the following:

- * A hospital or facility providing treatment, preferably one providing your treatment
- * The Patients Rights Advocate (PRA), API, or similar organizations at the facility
- * Disability Law Center
- * The local police
- * Other local advocacy organizations in your area such as the Alaska Council on the Mentally Ill, Mental Health Consumers of Alaska, and Alaska Mental Health Institute

RIGHT TO BE FREE FROM ABUSE AND NEGLECT

You have the right to be free from abuse and neglect or the threats of abuse and neglect while you are receiving services at any mental health facility in Alaska. Abuse and neglect of persons labeled mentally ill is prohibited by law.

* The state ombudsman

Telephone numbers are listed at the end of this manual for the Disability Law Center of Alaska, the Alliance for the Mentally Ill, Mental Health Consumers of Alaska, and the Alaska Mental Health Association.

Part 5

MEDICATIONS

RIGHT TO FREEDOM FROM UNNECESSARY OR EXCESSIVE MEDICATION

You have the right to be free from unnecessary or excessive medication.

USE OF MEDICATIONS

Listed below are general rules which apply to medications prescribed for you while you are a patient at API or other designated mental health facility.

Medication can be given only with a doctor's written order.

Medications must be reviewed at least weekly and the order must have a maximum 30 day termination date.

Medications may be used as a form of punishment.

Medications may be used for the convenience of staff.

Medications may be used to substitute for a treatment plan.

INFORMED CONSENT IN THE USE OF MEDICATIONS

You have the right to refuse or consent to take any medication. If you do not consent to take a medication, you will not be forced to take it. If you do consent to take a medication, you will be given information about the medication, its purpose, and the risks and benefits. You will be given the opportunity to ask questions and to withdraw your consent at any time. If you do not consent to take a medication, the court will not order you to take it. If you do consent to take a medication, the court will not order you to take it involuntarily. If you do not consent to take a medication, the court will not order you to take it involuntarily. If you do consent to take a medication, the court will not order you to take it involuntarily. If you do not consent to take a medication, the court will not order you to take it involuntarily. If you do consent to take a medication, the court will not order you to take it involuntarily.

RIGHT TO BE GIVEN ALL INFORMATION ABOUT MEDICINE

If medication is prescribed in your treatment plan, you must be given the following information:

1. an explanation of your diagnosis and prognosis, or your major symptoms, with and without the medication;
2. the purpose of the medication, possible benefits and side effects, such as Tardive Dyskinesia and other conditions, ways to treat side effects, and recommended ranges of dosages;
3. a review of your medication history and previous side effects from medication;
4. an explanation of interactions with other drugs, including alcohol and street drugs;

5. information about treatments and nontreatments;

6. a statement of your right to withhold consent for withdrawal of notice that you refuse treatment.

COURT ORDERED MEDICATION

If your doctor believes you are incapable of giving informed consent or there will be a risk to your health in this situation, the fact that you are on medication does not require you to order for medication. You should contact a lawyer at the time of the hearing.

lawyer will be appointed if you cannot afford one.

QUESTIONS YOU MAY WANT TO ASK ABOUT MEDICINE

You have the right to know the name of the medication that you are asked to take, what its purpose is, and what side effects can occur with the medication.

You may want to ask some of these questions:

- * Why should I take this medication?
What will happen if I don't take it?
- * Can I be treated without medication?
Can I have a second opinion?
- * What is the name of the medication prescribed for me?

- * How is it supposed to work?
How soon will I notice an effect?
- * How is it supposed to be taken?
What are the "side effects" of this medication? Will it affect my medical or physical condition?
- * Are there side effects?
If so, when will they occur?
How long will they last?
- * Is it similar to, or different from, medication I was taking before?
- * How much should I take?
How often?
Before or after meals?
What should I do if I forget to take it?
What should happen if I took too much?
- * Is it all right if I drink alcohol or use tobacco when taking this medication?
- * Is there any food or other medication I should avoid while taking this medication?

- * Are there other medications I should avoid when taking this medication?
 - * Will this medication affect my interest in sex? Will this medication affect any other activities, such as driving, etc.?
 - * (For women) Will this affect my menstrual periods? Should I take the Pill while taking this medication? If I get pregnant while taking this medication, could it have any affect on my baby? Should I take it while nursing?
 - * Is there anything else I should know about this medicine? How often will you review with me what the medication is doing?
 - * How long will I need to take this medication? How soon may I take this medicine?
 - * If I take this medication for a long time, what can it do to me?
- * What is tardive c
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 - * What will happer
medication? Ca
it?
 - * Can I become ac
medicine?

Part 6

OUTPATIENT RIGHTS

LEGAL RIGHTS RETAINED

If you are receiving mental health treatment at a community mental health center, you have the legal rights and responsibilities guaranteed to all other U.S. and Alaska persons under the Constitution and statutes of the United States and the State of Alaska.

CLIENT BILL OF RIGHTS

Every community mental health center in Alaska must post a notice of client rights. This list of rights must include:

1. Your right to participate in planning your treatment plan. This includes your ability to:

- * ask for speci
- * be notified w therapy are r
- * refuse specif
- * be informed your treatme

2. Your right to revi record with a sta
3. Your right to be i prescribing phys purpose, and po the medication p your treatment p
4. Your right to reqi copy of a summa including follow-t
5. Your right to con is discussed on t

CONFIDENTIALITY

You have the right to have all records and information about your treatment at a community mental health center kept confidential. Generally, the community mental health center can release information and records about your treatment only if you, or your authorized representative (such as a legal guardian), sign a written release of information.

- * a person authorized to act on your behalf in order to obtain records
- * a designated representative if the client is incompetent
- * direct health care services, medical or psychiatric emergency and

The written release of information must include your name, the beginning and end dates of the authorization, the specific information to be released, the name (or names) of the authorized recipient(s) of the information, and your signature or the signature of your authorized representative.

- * mental health services if mental health providers are evaluating or treating you at the community mental health center
- * insurance or health care providers, to obtain services or to process a claim

There are a few situations in which the community mental health center can release information without your written consent. These include, but are not limited to:

INFORMED CONSENT PROCEDURES

A community mental health center must obtain written and “informed” consent from you before conducting experimental treatments, nonstandard treatment, or having you participate in education or demonstration programs, such as the use of audio visual equipment or one-way mirrors.

“Informed” means you have been given complete information about the treatment or program, its potential risks and benefits, and the reason(s) the community mental health center believes this treatment or program would be beneficial to you.

WHO TO CALL ABOUT YOUR RIGHTS

Disability Law Center of Alaska
615 E. 82nd Avenue, Suite 101
Anchorage, Alaska 99518
(907) 344-1002 or (800) 478-1234

Juneau office:
230 South Franklin, Suite 209
Juneau, Alaska 99801
(907) 586-1627

Fairbanks office:
250 Cushman, Suite 3H
Fairbanks, Alaska 99701
(907) 456-1070

Bethel office:
P.O. Box 2303
Bethel, Alaska 99559
(907) 543-3357

Mental Health Consumers of Alaska
101 East 9th Avenue, Suite 3-A
Anchorage, Alaska 99501
(907) 277-3817

Alaska Alliance for the
110 W. Fifteen Ave.,
Anchorage, AK 995
(907) 277-1300

AK Mental Health As
4050 Lake Otis Park
Anchorage, AK 995
(907) 563-0880