

Greater Cincinnati Behavioral Health Services

Type:	Agency Policy and Procedure
Topic:	Clients Rights
Owner:	GCBHS Client Rights Officer
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Approved By:	Executive Leadership Team and Board of Directors

Policy Statement: It is the policy Greater Cincinnati Behavioral Health Services (GCBHS) to ensure, protect and promote the rights of all clients applying for services or being served by the organization. GCBHS will demonstrate this commitment by communicating these rights in a way that is meaningful to its clients, family members and other stakeholders, and responsive to their unique and specific cultural and diversity issues. **Under no circumstances will physical abuse, corporal punishment or psychological abuse or neglect be tolerated by employees of GCBHS in their interactions with clients of the agency. Staff will abide by appropriate work conduct as outlined in the Agency Code of Ethics for all personnel.**

Purpose: The purpose of this policy and procedure is to protect and enhance the rights of persons applying for or receiving services of GCBHS by establishing specific rights for clients and procedures efficient, impartial resolution of their grievances.

Procedure:

1) Client Rights Officer

The organization will appoint a Client Rights Officer (CRO) or designee. The role of the CRO is to accept complaints and grievances from clients or other persons or agencies on behalf of a client and to oversee the process and ensure compliance with the grievance procedure. The CRO should take all necessary steps to assure compliance with the grievance procedure. The CRO coordinates investigations, fact-finding, and resolution of complaints and grievances. He/she brings individuals together to work toward consensus and a resolution of the situation. If agreement is not reached or if the client remains unsatisfied, the client and CRO will meet with an impartial person to hear the grievance, and if this does not resolve the issue, the Client Rights Officer coordinates the process of connecting the client to appropriate outside resources. The CRO also maintains appropriate records and completes reports to outside agencies such as the Hamilton County Community Mental Health Board. The Human Resources Director functions as the CRO in the event that the grievance is filed against the CRO. The current Client Rights Officer is Angela Johnsen. (Client Concern Line: 513-354-5285; available Monday through Friday 8:30AM to 5PM at the Madison office). For clients in Clermont Recovery Center MAT, Tamara Altman is also available as a client advocate on site, Mon – Thur 8:30AM-6PM and Fri 9-12.

2) Distribution

GCBHS has an extensive client orientation process for clients entering all programs. At intake, client rights will be reviewed orally and in writing with clients. Clients are given

a list of their rights and a review of the grievance procedure. Clients needing assistance will be accommodated, and the clinical supervisor will ensure client rights information is reviewed with clients in cases of emergency or crisis-related services.

Client rights and grievance procedure and Concern Line information shall be posted in a conspicuous location in each building operated by GCBHS. GCBHS will distribute a copy of the policy, summary, and grievance procedure to anyone upon request. Some programs may have additional clients' rights that will be reviewed at intake to that program.

Additionally, clients' rights and grievance procedures will be reviewed annually with all clients by staff when developing an annual service plan (also called "ISP" or "MAP"). Staff will explain all aspects of the client rights and grievance procedure at any time, upon request, and the agency will distribute a summary of client rights at least annually.

All clients and stakeholders may have a copy and explanation of the clients' rights policy upon request.

3) **Staff Training**

GCBHS staff will respect and advocate for the rights of all clients regardless of culture, age, gender, sexual orientation, spiritual beliefs, socioeconomic status, or language. GCBHS will orient all staff, including direct service and non-direct service staff, consultants, volunteers, or interns, on the client rights and grievance procedure, and ensure each person receives a copy of the procedure. Personnel files shall include documentation that all personnel have agreed to abide by this policy. Staff training will occur during GCBHS's employee orientation presentation and program orientation, and through regular agency updates.

Upon request, all staff members are expected to explain all aspects of client rights and grievance procedures to clients. Staff have an obligation to inform complainant of their right to file a grievance and to inform the complainant of the Client Concern Line and the process for communicating a complaint or grievance.

4) **Complaint/Grievance Procedure**

There is no time limit for a client to communicate a complaint or grievance to GCBHS. If a long period of time has elapsed, however, this may impede the CRO's ability to investigate the situation adequately. Upon receipt of a complaint or grievance, the procedures for reviewing a complaint as well as the time frames will be explained in a manner that is understandable to the client. All complaint/ grievance resolution information will be provided to clients in a manner that is understandable. When a client files a complaint or grievance, it shall not result in retaliation or barriers to service.

All GCBHS staff members are responsible for communicating any allegation of abuse or neglect to the GCBHS CRO within 24 hours of discovery of the event. Additionally, allegations of abuse and neglect will be reported as an Incident Report according to reporting procedures. In situations that involve reports of abuse, any additional notification required by law shall be made to the appropriate authorities (e.g. Children's Services).

The CRO will conduct the entire process in an impartial manner, remaining open and

able to advocate for the client throughout. For any formal grievance proceedings, the CRO is available as an advocate for the griever. Resolution will be sought within 20 business days of the formal grievance. If resolution does not occur by this time, the CRO will document and explain to the client the reasons for the delay. A client may approach outside entities at any time with a grievance.

Level I—Complaints may be written or oral or referred by other staff or other client advocates. Written complaints or grievances should be forwarded to the Client Rights Officer at The Madison Rd. office, second floor during business hours. Concerns can also be communicated by phone via the GCBHS Client Concern Line (513-354-5285). This line is monitored daily by the CRO or a designee. The CRO will first attempt to have the client resolve complaints with GCBHS staff directly within 5 days of the initial complaint. If necessary, the CRO will assist this process by communicating with staff and supervisor, and/or by meeting with the parties involved, and/or by reviewing records to investigate the client's complaint.

Level II—If not resolved, the client may choose to continue to pursue the situation as a formal grievance. The CRO will assist the client in gathering and writing the grievance, and signing and dating the written statement. The written grievance will include the date and approximate time of the incident involved, the names of individuals involved, the details of what occurred, the right(s) the client feels were violated, and what the client feels would resolve or improve the situation.

The CRO provides written acknowledgement to the client that their grievance has been received within three days of receipt of the grievance, including the date the grievance was received, a summary of the grievance, an overview of the grievance investigation process, a timetable for completion of the investigation and notification of resolution, and the treatment provider contact name, address and phone number.

The CRO will then investigate the grievance, gather facts, speak with all parties and attempt a quick resolution. A meeting may be held, led by the CRO, to reach an agreement and resolution. (The CRO will seek information outside the organization only if the specific information needed was not available within the organization.) All attempts will be made to resolve the situation within 20 days of the client filing the formal grievance. If the issue is resolved to the satisfaction of the griever, the CRO will provide the griever with a statement of results and the process ends within 3 days of the completion of this process. A copy is also given to the staff member and his/her supervisor. The client may request that additional entities outside the organization receive copies of the statement of results.

Level III—If not resolved, the griever is advised by the CRO and referred to outside entities. The CRO will assist the client in contacting the outside sources. GCBHS will also provide relevant information about the grievance to outside agencies upon request.

5) Record Keeping:

The CRO is responsible for record keeping. For client concerns, records will include the date of contact, summary of client concerns, and steps taken to resolve the situation.

For grievances, records will include all written documentation related to that grievance, including the original written grievance, documentation reflecting process used and

resolution/remedy of the grievance; and documentation, if applicable, of extenuating circumstances for extending the time period for resolving the grievance beyond twenty business days.

This information will be readily available for completion of an annual report to be sent to the appropriate local, state or federal authorities, and will also be available for review by these authorities upon request, and will be maintained for at least two years after the date of resolution.

An annual report will identify the number of grievances, subject matter, and resolutions and provided to the Governing Board. Files will be maintained by the CRO in a locked cabinet, and/or on the GCBHS computer network under appropriate password and access limitations to protect confidentiality. An annual review of complaints and grievances will be conducted to determine if any trends are apparent or specific to program and/or staff members. Results of this review will be utilized to inform strategic planning and organizational improvement.

6) Rights of GCBHS Clients:

Clients of GCBHS are protected by a wide range of client rights, including but not limited to the list of rights on the final page of this procedure. Additional specific rights in the Ohio Revised Code or related to specific services are distributed at intake. This policy including the rights of GCBHS clients are posted in all facilities and available upon request.

Additional Resources for Client Rights Information and Advocacy

GCB Client Concern Line: 513-354-5285

Assistance Program
(for Vocational Rehabilitation)
30 E. Broad St., Suite 1201
614-466-9956
1-800-228-5405
Fax: 614-752-7497

Ohio Dept of Behavioral Health Services
30 E. Broad St., 33rd floor
Columbus, Ohio 43215
(614) 466-3445 (local)
1-888-636-4889 TTY

Hamilton County
Mental Health and Recovery Services Board
2350 Auburn Avenue
Cincinnati, OH 45219
(513) 946-8635

Clermont County
Mental Health and Recovery Board
2337 Clermont Center Dr.
Batavia, OH 45103
513-732-5400

Mental Health Recovery Board
Serving Warren and Clinton Counties
201 Reading Rd.
Mason, OH 45040
513-695-1695

Disability Rights Ohio
200 S. Civic Center Dr. #300
Columbus, Ohio 43215
800-828-9181
614-466-7264
1-800-282-9181
Fax: 614-644-1888

U.S. Dept. of Health & Human Services
Office for Civil Rights - Region V
233 N. Michigan Ave – Suite 240
Chicago, IL 60601
312-886-2359

Ohio Counselor & Social
Work Board
50 W. Broad St. #1075
Columbus, OH 43215
614-466-0912

State of Ohio Medical
Board
30 E Broad St
Columbus, OH 43215
(614)466-3934

For Clients in Clermont Recovery Center MAT Program

Tammy Altman (M-Th, 8:30-
6 and F 9-2)
Clermont Recovery Center
1088 Wasserman Way # C,
Batavia, OH 45103
513-735-8100

For clients in Recovery
Housing: Residents may
contact the GCBHS Client
Concern Line
Or contact Ohio Recovery
Housing at 614-453-5133

Rights of Persons Served by Greater Cincinnati Behavioral Health (as of January 2026)

- 1) The right to be treated with consideration and respect for personal dignity, autonomy and privacy;
- 2) The right to reasonable protection from physical, sexual or emotional abuse, neglect, and inhumane treatment – this includes the right to freedom from abuse, financial or other exploitation, retaliation, humiliation or neglect;
- 3) The right to receive services in the least restrictive, feasible environment;
- 4) The right to participate in any appropriate and available service that is consistent with an individual service plan (ISP), regardless of the refusal of any other service, unless that service is a necessity for clear treatment reasons and requires the person's participation;
- 5) The right to give informed consent to or to refuse any service, treatment or therapy, including medication absent an emergency;
- 6) The right to participate in the development, review and revision of one's own individualized treatment plan and receive a copy of it, and to expression of choice regarding the composition of the service delivery team (within agency capacity);
- 7) The right to freedom from unnecessary or excessive medication, and to be free from restraint or seclusion unless there is immediate risk of physical harm to self or others;
- 8) The right to be informed and the right to refuse any unusual or hazardous treatment procedures, or any involvement in research projects;
- 9) The right to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies, photographs or other audio and visual technology. This right does not prohibit an agency from using closed-circuit monitoring to observe seclusion rooms or common areas, which does not include bathrooms or sleeping areas;
- 10) The right to confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of client information under state and federal laws and regulations;
- 11) The right to have access to one's own client record unless access to certain information is restricted for clear treatment reasons. If access is restricted, the treatment plan shall include the reason for the restriction, a goal to remove the restriction, and the treatment being offered to remove the restriction;
- 12) The right to receive pertinent information in sufficient time to facilitate the individuals' decision making.
- 13) The right to be informed a reasonable amount of time in advance of the reason for terminating participation in a service, and to be provided a referral, unless the service is unavailable or not necessary;

- 14) The right to be informed of the reason for denial of a service;
- 15) The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws;
- 16) The right to know the cost of services;
- 17) The right to be verbally informed of all client rights, and to receive a written copy upon request;
- 18) The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations;
- 19) The right to file a grievance;
- 20) The right to have oral and written instructions concerning the procedure for filing a grievance, and to assistance in filing a grievance if requested;
- 21) The right to an investigation and resolution of alleged infringement of rights;
- 22) The right to be informed of one's own condition; and,
- 23) The right to consult with an independent treatment specialist or legal counsel at one's own expense;
- 24) The right to access guardians, conservators, self-help programs and advocacy services.

Client rights driver intervention programs participants also have these rights (as of January 2026):

Each client participating in a driver intervention program has these rights:

- 1) The right to be treated with consideration and respect for personal dignity, autonomy and privacy;
- 2) The right to reasonable protection from physical, sexual or emotional abuse and inhumane treatment;
- 3) The right to give informed consent to or to refuse any service;
- 4) The right to be free from restraint or seclusion unless there is immediate risk of physical harm to self or others;
- 5) The right to be informed and the right to refuse any unusual or hazardous procedures;
- 6) The right to be advised and the right to refuse observation by others and by techniques

such as one-way vision mirrors, tape recorders, video recorders, television, movies, photographs or other audio and visual technology. This right does not prohibit an agency from using closed-circuit monitoring to observe seclusion rooms or common areas, which does not include bathrooms or sleeping areas;

- 7) The right to confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of client information under state and federal laws and regulations;
- 8) The right to have access to one's own client record;
- 9) The right to be informed of the reason for terminating participation in a service;
- 10) The right to be informed of the reason for denial of a service;
- 11) The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental handicap, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws;
- 12) The right to know the cost of services;
- 13) The right to be verbally informed of all client rights, and to receive a written copy upon request;
- 14) The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations;
- 15) The right to file a grievance;
- 16) The right to have oral and written instructions concerning the procedure for filing a grievance, and to assistance in filing a grievance if requested;
- 17) The right to be informed of one's own condition; and,
- 18) The right to consult with an independent treatment specialist or legal counsel at one's own expense

Residents in our Recovery Houses have these Rights (DBH 5122-31-19 as of August 2026):

- 1) The right to be verbally informed of all resident rights in language and terms appropriate for the resident's understanding, prior to or at the time of residency, absent a crisis or emergency.
- 2) The right to request a written copy of all resident rights and the grievance procedure.
- 3) The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations.
- 4) The right to file a grievance.

- 5) The right to be treated at all times with courtesy and respect, and with consideration for personal dignity, autonomy and privacy.
- 6) The right to receive behavioral health services and/or medical services from a provider of one's own choosing.
- 7) The right to receive support in a clean, safe, comfortable, welcoming, stable, and supportive environment.
- 8) The right to reasonable protection from physical, sexual and emotional abuse, exploitation, and inducement.
- 9) The right to freedom from unnecessary or excessive medication and the right to decline medication.
- 10) The right to be free from restraint or seclusion.
- 11) The right to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies, photographs or other audio and visual technology. This right does not prohibit a residence from using closed-circuit monitoring to observe areas in the residence other than bathrooms or sleeping areas or other areas where privacy is reasonably expected.
- 12) The right to confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of resident information under state and federal laws and regulations.
- 13) The right to have access to one's own record or documentation.
- 14) The right not to be discriminated against on the basis of race, ethnicity, age, color, religion, gender, national origin, sexual orientation, physical or mental disability, developmental disability, genetic information, human immunodeficiency virus status, or in any manner prohibited by local, state or federal laws.
- 15) The right to practice a religion of one's choice or to abstain from the practice of religion.
- 16) The right to be informed in writing of the rates charged by the residence as well as any additional charges and to receive at least thirty days' notice in writing of any change in the rates and charges.
- 17) The right to be informed in writing of who is responsible for paying the rates and to receive thirty days' notice in writing of any changes in payer.
- 18) The right to receive thirty days' prior written notice for termination of residency except in an emergency when the resident presents a documented danger to other residents, staff, visitors, or oneself.
- 19) The right to exercise one's rights under Ohio landlord/tenant laws.
- 20) The right not to be locked out of the residence at any time.
- 21) The right not to be locked in the residence at any time for any reason.
- 22) The right to consult with legal counsel at one's own expense.
- 23) The right to communicate freely with and be visited at reasonable times by a personal physician, psychologist, or other health care providers, except that employees of a board or provider or the personnel of the Ohio protection and advocacy system may visit at any time when permitted by the Revised Code.
 - a. The right to communicate includes receiving written communications, which may be opened and inspected by recovery housing residence

staff in the presence of the resident recipient so long as the communication is not read by the staff and given immediately to the resident.

- 24) The right to meet with staff from the department of behavioral health in private.
- 25) The right not to be deprived of any legal rights solely by reason of residence in the recovery housing residence.
- 26) The right to personal property and possessions, unless prohibited by house policy.
- 27) The right of an adult resident to manage one's own financial affairs and to possess a reasonable sum of money.
- 28) The right to use the common areas of the recovery housing residence.
- 29) The right to engage in or refrain from engaging in activities, unless required by house policy.
- 30) The right to meet or communicate with family or guardians, visitors, and guests: The right of an adult:
 - i. To reasonable privacy and the freedom to meet with visitors and guests at reasonable hours so long as it confirms with the house visitor policy.
 - ii. To make and/or receive confidential phone calls, including free local calls.
 - iii. To write or receive uncensored, unopened correspondence subject to the recovery housing residence's rules regarding contraband.
- 31) The right to be free from conflicts of interest; no recovery housing residence employee may be a resident's guardian, custodian, or representative.

Residents of Kemper House also have these rights (as of January 2026)

- 1) The right to be verbally informed of all resident rights in a manner that the resident will understand.
- 2) The right to request a written copy of all resident rights and the grievance procedure.
- 3) The right to exercise one's own rights without reprisal, except that no right extends so far as to supersede health and safety considerations.
- 4) The right to file a grievance in accordance with name of house policy.
- 5) The right to be treated with courtesy and respect at all times, and with consideration for personal dignity, autonomy and privacy.
- 6) The right to confidentiality of communications and personal identifying information within the limitations and requirements for disclosure of resident information under state and federal laws and regulations.
- 7) The right to have access to one's own record.

- 8) The right not to be discriminated against on the basis of race, ethnicity, age, religion, gender, national origin, sexual orientation, physical or mental disability, developmental disability, genetic information, human immunodeficiency virus status or in any manner prohibited by local, state or federal laws.
- 9) The right to practice a religion of his or her choice or to abstain from the practice of religion.
- 10) The right to be informed in writing of the rates charged by the recovery house, as well as any additional charges.
- 11) The right not to be locked out of the recovery house at any time.
- 12) The right not to be locked in the recovery house at any time for any reason.
- 13) The right to consult with an independent treatment specialist or legal counsel at one's own expense.
- 14) The right to privately meet with staff from the Ohio Department of Mental Health and Addiction Services.
- 15) The right not to be deprived of any legal rights, including landlord tenant rights and fair housing rights solely by reason of residence in the recovery house.
- 16) The right to personal property and possessions, unless prohibited by house policy.
- 17) The right to full explanation regarding the loss or restriction of housing privileges, and methods to reinstate the privileges.
- 18) The right to request and receive in a timely manner a written receipt for any payments made or statement of account that details any expenses, charges and payments made.