



## **CLIENT RIGHTS**

1. I understand I have the right to treatment, and that I am voluntarily seeking services.
2. I have the right to individual privacy and respect. My addiction or other problems do not diminish my intrinsic worth as a human being.
3. There will not be any prejudicial treatment as a result of age, sex, race, religion, or cultural background.
4. I have the right to know my diagnosis, evaluation, goal of treatment, and the methods recommended to attain this goal. In fact, I will be involved in establishing my treatment goals.
5. If I am not satisfied in any way with answers or treatment given, I have the right and responsibility to discuss these with the Director.
6. I understand my right to confidentiality includes the following:
  - A. That my presence in therapy is not to be disclosed to anyone without my permission.
  - B. No portion of my clinical records may be disclosed to anyone without my permission.
  - C. That my condition, progress, or any other information concerning me may not be disclosed to anyone without my permission.
  - D. By law, all suspected cases of child, disabled, or elder abuse/neglect must be reported to the Department of Children & Families.
  - E. Therapist is required to warn individuals whose lives are known to be in danger.
7. I have the right to report client abuse by calling the DCF Substance Abuse & Mental Health office at (813) 337-5700 or Disability Rights at (800) 342-0823

## **CLIENT EXPECTATIONS**

1. Maintain regular and consistent attendance.
2. Show evidence of motivation to change and to participate.
3. Remain alcohol and drug free (including products containing alcohol, such as mouthwash), or work at a specifically developed Responsible Drinking Treatment Plan.
4. Treatment will be extended if unable to maintain abstinence or comply with other treatment expectations. **YOU ARE RESPONSIBLE TO MEET THE TIME DEADLINES ON YOUR TREATMENT PLAN.**
5. For D.U.I. related substance abuse counseling you are expected to:
  - A) Attend counseling regularly
  - B) Go to self-help meetings
  - C) Stay sober
6. Be responsible for payment at time of services.
7. Integrity provides free copies of customary reports- mailed or faxed copies are \$5.00 up to 5 pages, and \$1.00 per page thereafter.
8. Generally accepted hygiene practices are encouraged and a copy of infection control policies is available.
9. There shall be no violence or threats of physical violence in group settings.
10. Other individuals' confidentiality must be respected. No discussion of other individuals outside the group setting is acceptable.
11. These rules were designed to foster the safety and trust necessary for a positive therapeutic environment.
12. Prescription drug use must be reported and verified by your prescribing doctor.

Client signature: \_\_\_\_\_

Date: \_\_\_\_\_