

## **CLIENT/SERVICE PROVIDER RIGHTS AND RESPONSIBILITIES**

## Responsibilities and rights of the client:

- 1. I agree to show up for all appointments, or contact my Service Provider one (1) day in advance if I am unable to come to an appointment, except in case of sudden illness or emergencies.
- 2. I agree to actively participate in my service plan.
- 3. I agree to follow through with assigned activities in a timely manner, as agreed upon between the Service Provider and myself.
- 4. I agree to inform the Service Provider if I am not satisfied in any way with the services received.
- 5. I agree to commit to providing <u>honest and accurate information</u> to the Service Provider to the best of my ability and knowledge.
- 6. I am entitled to a safe, confidential environment. Everything said here remains here. (Exceptions: Staff is required by law to report to the proper authorities if you plan to harm yourself or someone else or if child or adult abuse is suspected).
- 7. I am entitled to be treated with respect, receive appropriate services and equal communication access.

## Responsibilities of the Service Provider:

- 1. I agree to show up for all appointments, or contact my client one (1) day in advance if I am unable to come to an appointment, except in case of sudden illness or emergencies.
- 2. I agree to provide any materials needed to fulfill the goals in the Service Agreement Plan.
- 3. I agree to communicate/educate in a manner consistent with the communication/learning style of the consumer.
- 4. I agree to assist with any community contacts needed to fulfill the goals outlined in the Service Agreement Plan.
- 5. I agree to maintain contact with other DHHSC Service Providers and Community Services as outlined on the signed Release of Confidential Information forms in order to fulfill the goals on the Service Agreement Plan.

You have the ultimate responsibility for your own actions and choices. The Service Provider is here to assist you in making your own decisions for how you want to live your life more independently. The Service Provider does not have the ability to change your life for you. Only you can do it!

DHHSC staff has explained/I have ${\sf r}$	r <b>ead</b> and I	i understand m	y rights and	responsibilities	as a
DHHSC client as they are written.					

Client Printed Name / Signature / Date	
Service Provider Printed Name / Signature / Date	



## STANDARDS OF CONDUCT

All individuals receiving services at any Deaf and Hard of Hearing Service Center (DHHSC) facilities and/or events are expected to utilize services and programs available using appropriate manners and acceptable behavior.

The following rules are examples of behaviors that are deemed **unacceptable**:

- Excessive use of foul language or words that is demeaning, intimidating, or offensive to other people.
- Evidence or the appearance of use of alcohol or illegal drugs that negatively influence the individual's ability to receive services.
- Evidence or expressed intent to destroy, damage, or steal DHHSC property and/or materials.
- Ongoing conflicts, obsessions, or harassment of DHHSC staff, clients, and volunteers.
- Inappropriate sexual behavior (verbal/signed or physical) towards a DHHSC employee or other individuals at DHHSC.
- Sale of drugs and/or fighting (physical or verbal/signed) at DHHSC events.
- Delivery of a direct or implied threat to DHHSC staff, clients, or volunteers.
- Statements that show intent or implied intent to harm self or others.
- Erratic, nervous, extreme, aggressive, or potentially violent behaviors.
- DHHSC is an alcohol/drug and smoke-free environment.
- DHHSC is also a scent-free environment. Please refrain from using perfumes and colognes.
- Shoes and shirts must be worn at all times.
- Smoking is not allowed on DHHSC premises or at DHHSC events. All smoking must be conducted at least 50 feet away from any entrance/exit doors.

If these rules are not respected at any time DHHSC reserves the right to refuse provision of services at that time and may possibly suspend or deny provision of future services and/or access to future programs and events.

In the event that any individual does not adhere to the above rules, DHHSC will ask the individual to immediately vacate the DHHSC facility and/or event. If the individual shows any resistance or chooses not to respect DHHSC's request to leave, we reserve the right to contact the police for assistance. In extreme cases where threats are considered "life or death", DHHSC reserves the right to: call the police for further assistance and to file any and all appropriate charges; initiate an emergency evacuation of the facilities; and to close the office for services if necessary.

DHHSC wants to serve you and appreciates your cooperation to help make our facilities and events a safe place for everyone.

DHHSC staff has explained/I have read and	I understand my responsibility as a DHHSC
client to follow the standards of	of conduct as they are written.

Client Printed Name / Signature / Date

Service Provider Printed Name / Signature / Date