

ELMBROOK FAMILY COUNSELING CENTER, LLP
13000 W. Bluemound Rd. #300
Elm Grove, WI 53122
262-785-9188

BILL OF RIGHTS

All persons receiving services at Elmbrook Family Counseling Center, LLP are guaranteed certain rights:

- 1.) You have the right to expect prompt, competent and professional assessment and treatment services.
- 2.) You have the right to understand and give informed consent to all assessment and treatment services.
- 3.) You have the right to refuse any recommended assessment or treatment service at any time.
- 4.) You have the right to discuss your assessment or treatment plan at any point in your program you may have questions.
- 5.) You have the right to have records of your assessment and/or treatment services kept confidential. (Except in certain unusual circumstances specified by law, no information about you can be released without your signed consent.)
- 6.) No session may be tape recorded or otherwise observed without your prior consent.
- 7.) You have the right to discontinue services at any time.
- 8.) If at any time you feel dissatisfied or feel your rights have in any way been violated, you may follow the following grievance procedure:
 - a.) Present your concerns within 60 days to your therapist or doctor. You may present your concern orally, in writing or any other method of communication.
 - b.) If still not satisfied, with an appointment, discuss you concerns with the therapist's supervisor.
 - c.) If still not satisfied, with an appointment, discuss your concerns with the Clinic Director.
 - d.) If still not satisfied, the Clinic Director will assist you in presenting your grievance to a Client Rights Specialist.
- 9.) You may gain access to your records if you deem it necessary by complying with the following procedures:
 - a.) Discuss with your therapist.
 - b.) Request access in writing to the Clinic Director.
 - c.) Arrange a time in advance to review your record in the presence of the Clinic Director.
 - d.) Any copying of records is at your expense.
- 10.) As with any legitimate grievance or received violation of your rights, you have access to county and state agencies, licensing boards, professional organizations and the courts for legal action if our procedures prove unsatisfactory to you.

These rights are presented to you to ensure your understanding of our intent to provide the best competent and professional services available. We hope to serve you in a spirit of mutual cooperation for your benefit. *If you understand your rights and our intention, please sign and the following statement:*

I understand my rights as presented above and agree to receive services at Elmbrook Family Counseling Center, LLP in a spirit of mutual cooperation.

Signature	Date	Signature	Date

Signature	Date	Signature	Date