

Client Rights

A client has the following rights under Arizona Revised Statutes 36-504 through 36-514:

- At all mental health services hearings persons shall have the right to an analysis of their psychological condition by an independent evaluator.
- Persons undergoing evaluation or treatment pursuant to the mental health services law shall not be denied any civil right, including but not limited to, the right to dispose of property, sue and be sued, enter into contractual relationships and vote. Court-ordered treatment or evaluation pursuant to this law is not a determination of legal incompetency, except to the extent provided for related to emergency medical care.
- A person who is or has been evaluated or treated in an agency for a mental disorder shall not be discriminated against in any manner, including but not limited to: seeking employment, resuming or continuing professional practice or previous occupation, obtaining or retaining housing, or obtaining or retaining licenses or permits, including but not limited to, motor vehicle licenses, motor vehicle operators and chauffeurs licenses and professional or occupational licenses.
- Every person undergoing evaluation or treatment has the right not to be fingerprinted.
- Every person undergoing evaluation or treatment has the right not to be photographed without consent of the person and the person's attorney or guardian, except that the person may be photographed upon admission to an agency for identification and administrative purposes of the agency. Photographs shall be confidential and shall not be released by the agency except pursuant to court order.
- Every person has the right to examine the written treatment program and the medical record, unless the attending physician or the physician's designee who is a health professional determines that such an examination is contraindicated or the requirements of section 12-2293, subsection B are met (listing other limited reasons that records may not be released). If the attending physician or the physician's designee denies such an examination, this determination shall be noted in the patient's medical record.
- Every person has access to individual storage space for his private use while undergoing evaluation or treatment.
- Every person may wear the person's own clothing, keep and use the person's own personal possessions including toilet articles and to keep and be allowed to spend a reasonable sum of the person's own money for the person's own needs and comfort. The director of the agency may deny the patient's rights under this paragraph if necessary to protect the safety of the patient or others. The denial shall be based on a written determination and entered into the patient's clinical record and that information shall be made available on request to the person or the person's attorney or guardian.
- When a patient is admitted on an inpatient basis to a mental health treatment agency pursuant to section 36-540, relating to court ordered treatment, the articles of personal property which cannot be used by the patient at the institution shall be placed under the control and management of the patient's guardian or conservator and, if none, of the patient's spouse or next of kin. If this is not an option the mental health treatment agency shall provide reasonable facilities for the storage of the patient's personal property. Upon application by any interested person, the court shall enter an appropriate order for the protection of the proposed patient's property where no other alternatives exist to prevent the immediate loss or destruction of that property.
- A health care entity must keep records and information contained in records confidential and not as public records, except as provided in this section. Records and information contained in records may only be disclosed to:
 - Physicians and providers of health, mental health or social and welfare services involved in caring for, treating or rehabilitating the patient.
 - Individuals to whom the patient or the patient's health care decision maker has given authorization to have information disclosed.
 - Persons authorized by a court order.
 - Persons doing research only if the activity is conducted pursuant to applicable federal or state laws and regulations governing research.
 - The state department of corrections in cases in which prisoners confined to the state prison are patients in the state hospital on authorized transfers either by voluntary admission or by order of the court.
 - Governmental or law enforcement agencies if necessary to: Secure the return of a patient who is on unauthorized absence from any agency where the patient was undergoing evaluation and treatment, report a crime on the premises, or avert a serious and imminent threat to an individual or the public.
 - Persons, including family members, actively participating in the patient's care, treatment or supervision. A health care provider may only release information relating to the patient's diagnosis, prognosis, need for hospitalization, anticipated length of stay, discharge plan, medication, medication side effects and short-term and long-term treatment goals. A health care provider may make this release only after the treating professional or that person's designee interviews the patient or the patient's health care decision maker and the patient or the patient's health care decision maker does not object, unless federal or state law permits the disclosure. If the patient does not have the opportunity to object to the disclosure because of incapacity or an emergency circumstance and the patient's health care decision maker is not available to object to the release, the health care provider in the exercise of professional judgment may determine if the disclosure is in the best interests of the patient and, if so, may release the information authorized pursuant to this paragraph. A decision to release or withhold information is subject to review pursuant to section 36-517.01. The health care provider must record the name of any person to whom any information is given under this paragraph.
 - A state agency that licenses health professionals pursuant to title 32, chapter 13, 15, 17, 19.1 or 33 and that requires these records in the course of investigating complaints of professional negligence, incompetence or lack of clinical judgment.
 - A state or federal agency that licenses health care providers.
 - A governmental agency or a competent professional, as defined in section 36-3701, in order to comply with chapter 37 of this title.
 - Human rights committees established pursuant to title 41, chapter 35. Any information released pursuant to this paragraph shall comply with the requirements of section 41-3804 and applicable federal law and shall be released without personally identifiable information unless the personally identifiable information is required for the official purposes of the human rights committee. Case information received by a human rights committee shall be maintained as confidential. For the purposes of this paragraph, "personally identifiable information" includes a person's name, address, date of birth, social security number, tribal enrollment number, telephone or telefacsimile number, driver license number, places of employment, school identification number and military identification number or any other distinguishing characteristic that tends to identify a particular person.
 - A patient or the patient's health care decision maker pursuant to section 36-507.
 - The department of public safety by the court to comply with the requirements of section 36-540, subsection N.
 - A third party payor or the payor's contractor to obtain reimbursement for health care, mental health care or behavioral health care provided to the patient.
 - A private entity that accredits the health care provider and with whom the health care provider has an agreement requiring the agency to protect the confidentiality of patient information.

- The legal representative of a health care entity in possession of the record for the purpose of securing legal advice.
 - A person or entity as otherwise required by state or federal law.
 - A person or entity as permitted by the federal regulations on alcohol and drug abuse treatment (42 Code of Federal Regulations part 2).
 - A person or entity to conduct utilization review, peer review and quality assurance pursuant to section 36-441, 36-445, 36-2402 or 36-2917.
 - A person maintaining health statistics for public health purposes as authorized by law.
 - A grand jury as directed by subpoena.
- If a patient of a mental health treatment agency works, this work shall be in the patient's interest. If the primary purpose of this work is to benefit the mental health treatment agency or any agency of the state, the patient shall be employed and paid in accordance with law. If the purpose of the work is therapeutic, the patient may or may not be paid as circumstances indicate.
 - Subject to his right to refuse psychiatric and medical treatment pursuant to sections 36-512 and 36-513 and pursuant to rules of the division every person undergoing evaluation or treatment pursuant to this chapter shall receive physical and psychiatric care and treatment, delivered in a manner that allows the person's family members or guardian to participate in his care and treatment when appropriate, for the full period he is detained. The agency providing care and treatment shall keep a clinical record for each person which details all medical and psychiatric evaluations and all care and treatment received by the person.
 - An agency administering the care and treatment shall provide and make available to the guardian, if one exists, upon request: A written treatment program based on the individual needs of the person, careful and periodic reexaminations of each person by appropriate professional persons, including a physician, reexaminations shall be made once each ninety days and the results shall be a part of the person's medical record, a full physical examination once a year, adequate medical treatment in the light of present medical knowledge in accordance with the results of these examinations.
 - An agency administering inpatient care and treatment, in conjunction with the community treatment agency, shall, prior to the release of a patient, prepare a plan for the patient's care after release including arrangements for a place to live, and an adequate program for necessary treatment and maintenance, and provide the plan to the patient's guardian if one exists. The community treatment agency shall make a good faith effort to initiate treatment with a patient released from an inpatient facility.
 - A person undergoing evaluation or treatment has a right to refuse any and all medical treatment unless ordered by the court, except that when, in the written opinion of the attending physician, a true medical emergency exists and medical care and treatment including surgical procedures are necessary to save the life, physical health, eyesight, hearing or member of the person, the medical director of the agency may give consent to such medical care and treatment if time will not permit the obtaining of appropriate judicial authority. The patient's guardian, if one exists, shall be notified by the medical director of the giving of emergency medical care immediately.
 - A person undergoing evaluation pursuant to article 4 of this chapter shall not be treated for his mental disorder unless he consents to such treatment, except that seclusion and mechanical or pharmacological restraints may be employed in the case of emergency for the safety of the person or others. A person undergoing treatment pursuant to article 5 of this chapter shall not be subjected to seclusion or mechanical or pharmacological restraints except in case of emergency for the safety of the person or others or as a part of a written plan for the treatment of the patient, prepared by staff members responsible for his care and pursuant to regulations promulgated by the department. All instances of seclusion or restraint shall be properly recorded in the patient's medical record and the use shall be governed by written procedures of the agency caring for the patient and are subject to the rules and regulations of the department.
 - Every person detained for evaluation or treatment pursuant to this chapter shall have the following additional rights:
 - To be visited by the person's personal physician, guardian, agent appointed pursuant to chapter 32 of this title, attorney and clergyman or any other person, subject to reasonable limitations as the individual in charge of the agency may direct.
 - To have reasonable access to telephones between the hours of nine a.m. and nine p.m. to make and receive confidential calls. In addition, a person who is confined pursuant to this title is allowed to make two completed local telephone calls within two hours of initial confinement. Long distance calls are allowed if the patient can pay the agency for them or can properly charge them to another number. The agency may restrict the telephone privileges of a patient if it is notified by the person receiving the calls that the person is being harassed by the calls and wishes them curtailed or halted. Restriction of telephone privileges shall be entered into the patient's clinical record and the information therein shall be made available on request to the person, and that person's attorney, guardian or agent appointed pursuant to chapter 32 of this title.
 - To be furnished with reasonable amounts of stationery and postage and to be permitted to correspond by mail without censorship with any person.
 - To enjoy religious freedom and the right to continue the practice of the person's religion in accordance with its tenets during the detention, except that this right may not interfere with the operation of the agency.

A client has the following rights under R9-20-203:

- To be treated with dignity, respect, and consideration;
- Not to be discriminated against based on race, national origin, religion, gender, sexual orientation, age, disability, marital status, diagnosis, or source of payment;
- To receive treatment that:
 - Supports and respects the client's individuality, choices, strengths, and abilities;
 - Supports the client's personal liberty and only restricts the client's personal liberty according to a court order; by the client's general consent; or as permitted in this Chapter; and
 - Is provided in the least restrictive environment that meets the client's treatment needs;
- Not to be prevented or impeded from exercising the client's civil rights unless the client has been adjudicated incompetent or a court of competent jurisdiction has found that the client is unable to exercise a specific right or category of rights;
- To submit grievances to agency staff members and complaints to outside entities and other individuals without constraint or retaliation;
- To have grievances considered by a licensee in a fair, timely, and impartial manner;
- To seek, speak to, and be assisted by legal counsel of the client's choice, at the client's expense;
- To receive assistance from a family member, designated representative, or other individual in understanding, protecting, or exercising the client's rights;
- If enrolled by the Department or a regional behavioral health authority as an individual who is seriously mentally ill, to receive assistance from human rights advocates provided by the Department or the Department's designee in understanding, protecting, or exercising the client's rights;
- To have the client's information and records kept confidential and released only as permitted under R9-20-211(A)(3) and (B);
- To privacy in treatment, including the right not to be fingerprinted, photographed, or recorded without general consent, except:
 - For photographing for identification and administrative purposes, as provided by A.R.S. § 36-507(2);
 - For a client receiving treatment according to A.R.S. Title 36, Chapter 37;

- For video recordings used for security purposes that are maintained only on a temporary basis; or
 - As provided in R9-20-602(A)(5);
- To review, upon written request, the client's own record during the agency's hours of operation or at a time agreed upon by the clinical director, except as described in R9-20-211(A)(6);
 - To review the following at the agency or at the Department:
 - This Chapter;
 - The report of the most recent inspection of the premises conducted by the Department;
 - A plan of correction in effect as required by the Department;
 - If the licensee has submitted a report of inspection by a nationally recognized accreditation agency in lieu of having an inspection conducted by the Department, the most recent report of inspection conducted by the nationally recognized accreditation agency; and
 - If the licensee has submitted a report of inspection by a nationally recognized accreditation agency in lieu of having an inspection conducted by the Department, a plan of correction in effect as required by the nationally recognized accreditation agency;
 - To be informed of all fees that the client is required to pay and of the agency's refund policies and procedures before receiving a behavioral health service, except for a behavioral health service provided to a client experiencing a crisis situation;
 - To receive a verbal explanation of the client's condition and a proposed treatment, including the intended outcome, the nature of the proposed treatment, procedures involved in the proposed treatment, risks or side effects from the proposed treatment, and alternatives to the proposed treatment;
 - To be offered or referred for the treatment specified in the client's treatment plan;
 - To receive a referral to another agency if the agency is unable to provide a behavioral health service that the client requests or that is indicated in the client's treatment plan;
 - To give general consent and, if applicable, informed consent to treatment, refuse treatment or withdraw general or informed consent to treatment, unless the treatment is ordered by a court according to A.R.S. Title 36, Chapter 5, is necessary to save the client's life or physical health, or is provided according to A.R.S. § 36-512;
 - To be free from:
 - Abuse;
 - Neglect;
 - Exploitation;
 - Coercion;
 - Manipulation;
 - Retaliation for submitting a complaint to the Department or another entity;
 - Discharge or transfer, or threat of discharge or transfer, for reasons unrelated to the client's treatment needs, except as established in a fee agreement signed by the client or the client's parent, guardian, custodian, or agent;
 - Treatment that involves the denial of:
 - Food,
 - The opportunity to sleep, or
 - The opportunity to use the toilet; and
 - Restraint or seclusion, of any form, used as a means of coercion, discipline, convenience, or retaliation;
 - To participate or, if applicable, to have the client's parent, guardian, custodian or agent participate in treatment decisions and in the development and periodic review and revision of the client's written treatment plan;
 - To control the client's own finances except as provided by A.R.S. § 36-507(5);
 - To participate or refuse to participate in religious activities;
 - To refuse to perform labor for an agency, except for housekeeping activities and activities to maintain health and personal hygiene;
 - To be compensated according to state and federal law for labor that primarily benefits the agency and that is not part of the client's treatment plan;
 - To participate or refuse to participate in research or experimental treatment;
 - To give informed consent in writing, refuse to give informed consent, or withdraw informed consent to participate in research or in treatment that is not a professionally recognized treatment;
 - To refuse to acknowledge gratitude to the agency through written statements, other media, or speaking engagements at public gatherings;
 - To receive behavioral health services in a smoke-free facility, although smoking may be permitted outside the facility; and
 - If receiving treatment in a residential agency, an inpatient treatment program, a Level 4 transitional agency, or a domestic violence shelter:
 - If assigned to share a bedroom, to be assigned according to R9-20-405(F) and, if applicable, R9-20-404(A)(4)(a);
 - To associate with individuals of the client's choice, receive visitors, and make telephone calls during the hours established by the licensee and conspicuously posted in the facility, unless:
 - The medical director or clinical director determines and documents a specific treatment purpose that justifies restricting this right;
 - The client is informed of the reason why this right is being restricted; and
 - The client is informed of the client's right to file a grievance and the procedure for filing a grievance;
 - To privacy in correspondence, communication, visitation, financial affairs, and personal hygiene, unless:
 - The medical director or clinical director determines and documents a specific treatment purpose that justifies restricting this right;
 - The client is informed of the reason why this right is being restricted; and
 - The client is informed of the client's right to file a grievance and the procedure for filing a grievance;
 - To send and receive uncensored and unopened mail, unless restricted by court order or unless:
 - The medical director or clinical director determines and documents a specific treatment purpose that justifies restricting this right;
 - The client is informed of the reason why this right is being restricted; and
 - The client is informed of the client's right to file a grievance and the procedure for filing a grievance;
 - To maintain, display, and use personal belongings, including clothing, unless restricted by court order or according to A.R.S. § 36-507(5) and as documented in the client record;
 - To be provided storage space, capable of being locked, on the premises while the client receives treatment;
 - To be provided meals to meet the client's nutritional needs, with consideration for client preferences;
 - To be assisted in obtaining clean, seasonably appropriate clothing that is in good repair and selected and owned by the client;
 - To be provided access to medical services, including family planning, to maintain the client's health, safety, or welfare;
 - To have opportunities for social contact and daily social, recreational, or rehabilitative activities;
 - To be informed of the requirements necessary for the client's discharge or transfer to a less restrictive physical environment; and
 - To receive, at the time of discharge or transfer, recommendations for treatment after the client is discharged.