

- To be treated with respect and dignity at all times.
- To have the information about the services we provide explained to you in a way you can easily understand, and in a timely manner to support you in your decision making.
- To receive services regardless of your race, religious belief, marital status, national origin, sexual orientation, gender identity, gender expression, disability, age, genetic information or veteran status, or any other protected class.
- To have input in, and receive the services and supports that makes sense for you. You have the right to consent to or refuse services or concurrent services, unless you have a guardian.
- To have input in regard to the service team who will be working with you.
- To be free from abuse, neglect, humiliation or any type of exploitation or retaliation.
- To receive a copy of the Request for Change form and assistance with filling out that form if you need or want it.
- To know the rules, services and supports of Preferred Family Healthcare.
- To have the records and information about you and the services we provide to you be confidential and private.
- To have timely access to your records and to authorize who will have access to those records.
- To have your questions or complaints answered fairly without punishment or retaliation for asking.
- To refuse participation in any research, or if involved in research the right to those projects adhering to relevant guidelines and ethics.
- To access or receive a referral to legal counsel or appropriate representation and to self-help or advocacy services.
- To request investigation and resolution if you believe your rights are not being honored.
- The same legal rights and responsibilities as any citizen, unless you have a guardian or your rights are legally restricted.

## WHAT ARE YOUR RESPONSIBILITIES?

- Talk to your service team about problems that come up.
- Ask for changes that you want. You can ask your staff, your team leader or coordinator, your director or you can use the Request for Change process.
- Be involved in developing and designing your service plan.
- We ask you to treat the staff and others working with you with respect and adhere to program rules and guidelines.

## HOW DO YOU ASK FOR CHANGE?

1. Talk to your staff and ask for what you want. You can request assistance from an advocate to help communicate the changes you want.
2. Use the Request for Change process to identify the changes you want. Give that form to your service team. If you need assistance in filling out the form, help will be provided to you.
3. When you ask for a change, your service team will try to find a way to make the changes you want. If this is not possible they will explain why. If you are not satisfied with the answer you receive, you can file an appeal.
4. To appeal your Request, please contact the Director in your local area.
5. If you feel your rights have been violated and/or want to file a formal complaint, contact:

**Call toll free:**  
1-855-450-5770

**Email:**  
[corporatecompliance@pfh.org](mailto:corporatecompliance@pfh.org)

**Mail:**  
PFH Corporate Compliance  
P.O. Box 1277  
Springfield, MO 65801

**Preferred Family Healthcare is committed to protecting your rights at all times!**

*Preferred Family Healthcare is a dynamic and caring organization committed to providing integrated care to assist individuals in achieving overall health and wellness.*