

C O U N S E L I N G
& F A M I L Y S E R V I C E S

COUNSELING & FAMILY SERVICES
BIRTHPARENT CLIENT RIGHTS AND RESPONSIBILITIES

Counseling & Family Services provides services to persons in need regardless of race, sex, physical handicap and inability to pay. Client(s) must "Initial" each of the statements above indicating your review and understanding of each.

CLIENT RIGHTS

- You have the right to expect that staff will utilize all of their professional expertise in working with you.
_____, _____
- You have the right to participate in the development of a treatment plan, if appropriate. You have the right to request a review of the plan at any time, _____, _____
- You have the right to confidentiality. Counseling & Family Services will not disclose any material from your record without your written consent. There are exceptions to this rule if you are dangerous to yourself or others, if you have abused or neglected a child or an elderly person. (For more complete information concerning confidentiality, see the Agency's Confidentiality Rights form.) _____, _____
- You have the right to review your records with the exception of certain adoption records. You should understand that for treatment purposes the caseworker may consult other CFS staff members and consultants. _____, _____
- You have the right to cancel a scheduled appointment for good cause. _____, _____
- You have the right to receive services in an emergency and, at times, if the Agency is not open for services. Your caseworker may give you numbers to call at those times. Additionally, you may call the Agency at (309) 676-2400 and receive phone instructions if you have an emergency and need to talk with someone.
_____, _____
- You have the right to express dissatisfaction with services. Grievances will be handled by CFS administrative staff up to the level of the Executive Director. We do encourage you to discuss concerns with your caseworker as most issues can be resolved in that manner. You may request a copy of the Agency's grievance procedure at any time. _____, _____
- You have the right to refuse counseling and/or participate in the adoptive process.
_____, _____
- You have the right to contact the Department of Children and Family Services or the Guardianship and Advocacy Commission, Protection and Advocacy, Inc., and the Department of Mental Health, as appropriate regarding services provided you. CFS staff will assist you in this process if necessary.

_____, _____

- You have the right to be treated with respect by all Agency staff: All staff should act professionally, treat you with courtesy and respect your physical and personal boundaries. _____, _____
- Any restrictions of the above client rights shall be documented in the client's record. In addition, you, your parent or guardian and/or the Department of Children and Family Services will be notified of the restriction. _____, _____
- You shall not be denied, suspended or terminated from services or have services reduced for exercising any of your rights. _____, _____.

BIRTHPARENT RESPONSIBILITIES

- We/I will communicate our counseling needs to our caseworker as well as possible. _____, _____
- We/I will participate in voluntary counseling services we have requested at Counseling and Family Services in order to address our concerns regarding our/my unplanned pregnancy. _____, _____
- We/I will discuss with our Counseling & Family Services caseworker any concerns regarding the services we are receiving. _____, _____.
- We/I will submit all required documentation and supporting information when required. _____, _____
- We/I will choose to exercise our option to meet with a prospective adoptive family. _____, _____
- We/I will choose to exercise the option to maintain continuing contact, per the non-legally binding continuing contact agreement signed between parties at placement. _____, _____
- We/I recognize the agency is not a legal authority and that we may seek and pay for independent counsel. _____, _____