

**YOUR RIGHTS AS A VERMONTER DIAGNOSED
AS HAVING A MENTAL ILLNESS**

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INTRODUCTION

If you are receiving some type of mental health treatment and/or have been diagnosed as mentally ill you lose no civil or human rights. Many people incorrectly believe they lose their rights because of a mental illness diagnosis or because they are being held for treatment. Because people often do not know what their rights are this booklet is written to provide you with information so that you can know, exercise and protect them.

You need to know what your rights are in order to exercise them. Exercising your rights means taking action when you believe you are being treated unfairly by anyone, and doing what is necessary to make sure your rights are upheld. Knowing, exercising, and protecting your rights is essential to self-advocacy.

For example, you should know that you cannot be sent to Vermont State Hospital or another designated facility unless you are clearly a danger to yourself or others.

Unless you are subject to a court Order of Non-Hospitalization, if someone says to you, "Take your medication or you'll be sent to the State Hospital," you will know that this cannot be done unless you are clearly endangering yourself or someone else. Knowing your rights is one of the first steps in self-advocacy.

This booklet contains a section entitled "Protecting Your Rights" that contains the names and phone numbers of organizations that can help you with self-advocacy if you feel you could use some assistance.

Keep in mind that although you may have been diagnosed as mentally ill you are not required to seek treatment, to accept treatment, or to live in a manner other than you choose.

If you decide to seek treatment or to accept treatment that is offered, whether in a public or private setting, you do not have to continue with it.

Essentially you are free to live your life like anyone else. If you find yourself confined or otherwise restricted as a result of a legal proceeding (for example, committed to Vermont State Hospital), you still retain certain rights.

Although this booklet will give you information about your rights, there is far more to protecting and exercising your rights than is found here. This booklet is only one resource, a tool for you to use in your advocacy effort. It is not intended to be a substitute for legal advice. When using this book keep in mind that like all written material this book contains information that may change and that the people to whom you are expressing your rights may not know or agree with them. If you believe your rights are being violated and decide you could use some support and assistance with your advocacy, you may wish to contact one or more of the organizations listed under the "Protecting Your Rights" section.

Questions To Ask Professionals:

1. Will you work with me to develop a crisis plan?
2. Do you support the recovery movement?
3. Will you honor advanced directives?
4. Do you educate your patients about the side effects of medications?
5. What information do you give your patients to make informed decisions?

Ask questions which are relevant to you, to your beliefs and to your life.

ABOUT SELF-ADVOCACY

Self-advocacy involves helping oneself to access the services, rights and support systems you choose. Believing in yourself, learning all you can about your situation or issue, and deciding what you want to accomplish is the beginning of self-advocacy. It is essential that you decide what your needs and priorities are and seek out the help and information you can use to support your efforts.

If you choose treatment one way of advocating for yourself is to take part in the design and implementation of that treatment. You may want to interview prospective doctors and/or counselors. Ask the professional what their response would be if you went into crisis, what their knowledge of the consumer run alternatives is, whether they practice informed consent when prescribing medication, and under what circumstances would they commit you to an institution? These are only a few examples of questions you may want to ask. Ask questions which are important to you. Even if you are using a form of financial

assistance and are being assigned to a psychiatrist or other professional you still may be able to choose someone else within the mental health organization. To do this you must know why you want a different professional and state it clearly.

Another way to advocate for yourself is to find out about the consumer/survivor movement or to "come out" about your experiences. There is a strength in peer support which can help to end isolation. There are many different groups meeting across Vermont. For more information on peer groups and other support contact Vermont Psychiatric Survivors at 1-800-564-2106.

Another common form of self-advocacy is the process of filing a grievance against an individual or organization. It is important to do this in writing and to describe the facts of your complaint directly and clearly. Be sure to indicate what you want the outcome to be. If you are grieving against an institution or an organization there may be a formal grievance procedure in place for you to follow. If there is no written grievance

procedure you can address your grievance to the supervisor of the individual or group you are grieving against. Always keep a copy for your records. If you do not receive a response you may want to seek help.

At times it is useful to enlist outside advocacy or legal assistance. If you are self-advocating but find yourself blocked or uncertain as to the next step, Vermont Protection & Advocacy may be able to help.

Self-advocacy calls for taking one step at a time. Even when it feels like things are at a standstill you should push forward and not give up. The following ideas may be helpful to your self-advocacy effort.

◆ **BELIEVE IN YOURSELF.**

You are worth the effort it takes to protect your interests and your rights. You can do it.

◆ **REALIZE YOU HAVE RIGHTS.**

You are entitled to equality under the law. Inform yourself by using resources and asking questions. Insist on clear explanations and remember that service

providers are public servants who work for you.

◆ **DISCUSS YOUR CONCERNS.**

Talk directly with your service providers, and if you choose, bring along people you trust for support.

◆ **GET THE FACTS.**

Get the facts in writing and problem solve by being informed. Ask for written policies or regulations and hold agencies accountable for the decisions they make.

◆ **USE THE CHAIN OF COMMAND.**

Make sure that a supervisor or someone else with authority has an opportunity to work with you on the problem and resolution. Warning: Do not let the chain of command become an excuse for frustrating your attempts to be treated fairly.

◆ **KNOW YOUR APPEAL RIGHTS.**

Request grievance procedures, including information on appeal rights within and outside the agency, and pursue if not satisfied.

◆ **BE ASSERTIVE AND PERSISTENT.**

Keep after what you want and follow up. Do not be intimidated.

◆ **USE YOUR COMMUNICATION SKILLS.**

Have a plan outlining your concerns. Stay calm and express yourself clearly. Be a listener, because what you hear may be significant.

◆ **ASK FOR HELP AND OBTAIN INFORMATION.**

Link up with advocacy organizations such as Vermont Protection & Advocacy or Vermont Psychiatric Survivors for rights information and support. These organizations can be your tools. Use them.

◆ **FOLLOW UP.**

Agencies are accountable for their decisions. Do not give up. You are entitled to know and exercise all your options.

As Karl Smithson stated in MY FAITH:

" The solution for people with major problems in crisis is not more programs, but personal relationships among people who have the courage to care; who open their hearts to the suffering of others and respond to that pain by sharing it and taking concrete action to get rid of it.

The primary purpose of empowering the down and out is not to give them a home or food or clothes. To set people on fire and ignite their spirit - to give them back their fighting spirit should be the primary purpose of empowerers.

For our most prized possession is our fighting spirit."

TIPS FOR FILING A GRIEVANCE:

1. Choose whether you want your grievance to be oral or written, or both.
2. If you are doing an oral grievance, ask the organization or agency to assist putting it in writing.
3. Clearly describe the facts of your complaint.
4. What do you want as an outcome? Example: an apology, new case worker, etc.

YOUR RIGHTS IN THE COMMUNITY

You have the same rights as any other citizen guaranteed and protected by federal and state laws, the Bill of Rights and all other applicable rights documents. It does not matter if you are diagnosed as mentally ill.

While Receiving Treatment

You have the right to receive available treatment and services that you believe best suit your individual needs.

You have the right to refuse treatment, medication, and any other type of service offered to you by anyone, including mental health professionals. If someone attempts to impose treatment and/or medication on you, and you refuse, a legal proceeding at which you have the right to legal representation must take place. A judge will then decide whether you are competent to make your own decisions concerning your treatment. If, however, you are behaving in a way that obviously endangers yourself or other people, you risk

being admitted to Vermont State Hospital or another designated facility on an emergency basis without a hearing (see Involuntary Admission to Vermont State Hospital). Threatening or attempting to commit suicide and physically assaulting someone else are examples of danger to yourself and others.

You retain your right to refuse treatment, including medication, even if you are subject to a court Order of Non-Hospitalization for treatment. However, this order can be revoked if a mental health professional files a request for revocation and a court approves it after a hearing. If this occurs, you may be returned to Vermont State Hospital or other designated facility. There is a risk involved when you refuse treatment or medication, but if you are convinced it is a risk you wish to take, you can.

You have the right to be informed about your treatment and medications so you can make informed decisions regarding your treatment. This means that you are to be given an explanation of the treatment being offered to you in a manner that you

can understand, and you should be able to ask questions if you are not sure about what is being said. Information you should be given includes why a particular medication is being prescribed, what kind of benefits should result from using it, and what adverse or bad effects (side effects) may result from using it.

You should be told why a particular method of treatment is being recommended, how it will benefit you and how successful it has been for others with similar conditions. Are there other available alternative medications and treatment methods that may benefit you? Are there other providers of mental health services available to you and how do you arrange for these services? Essentially, like a consumer of a product, you want to know everything you can about the product before you buy it.

You have the right to review your treatment plan at any time and to request changes according to your needs and wishes.

You have the right to a treatment environment that is humane and that assures you privacy as well as freedom from harm.

You have the right to review your treatment plan at any time and to request changes according to your needs and wishes.

You have the right to change your mind about treatment or medication you may have previously agreed to.

You have the right to know all rules or regulations that are connected with any treatment you are considering or are receiving, particularly those that may affect your living environment.

You have the right to be treated with dignity and respect at all times. In many ways, most of your rights are connected with concepts of dignity and respect. You have the right not to be insulted or harassed. Your rights have been violated if you are prevented from participating in a decision that affects your life because your

opinion is not taken seriously, or if you are made to feel humiliated because your ideas are not the same as everyone else's.

If you feel you are not being treated with respect there are ways for you to express your grievance, some of which are listed in this booklet. If you feel that your own efforts are not succeeding, you should consider getting some help by contacting one of the groups listed in this booklet, or someone else you trust.

SECLUSION AND RESTRAINTS

Restraints can be used only in emergency situations, when you are in immediate danger of serious bodily harm to yourself or others. Using restraints or seclusion as a punishment or a threat in order to make you do something against your will is called *coercion* and is illegal. If you are put into restraints or seclusion, within a certain time frame, a doctor must issue a written order. Even if used in an emergency, you can challenge their use after the fact. Restraints or seclusion as part of a treatment plan or method of treatment can also be challenged.

You should be aware that physical resistance to the use of a restraint or seclusion is often used to justify the methods after their use.

In this type of situation, you should consider contacting one or more of the organizations listed under "Protecting Your Rights."

Any time you believe that your rights are being violated or denied you should take action. If you wish to take legal action, you can contact a private attorney, Vermont Protection & Advocacy, or the Mental Health Law Project. You can voice your complaint directly to the Commissioner of Developmental and Mental Health. You can take the initiative.

Records and Your Rights

A record of your treatment is kept by the mental health providers involved with your treatment. These records are confidential and only you have the right to give permission to another person to look at your records. If you are unable to act in your

own behalf a court may appoint a guardian to uphold your interests and rights, including the release or retention of records.

You have the right to see your records upon request and to receive a copy for free or at cost based on current per page copy cost. Rules regarding copies of records are subject to change, and there are often some restrictions, particularly with psychiatric records. If you are experiencing difficulty accessing your records, you should contact Vermont Protection & Advocacy.

You have the right to protect the confidentiality of your records by refusing to give permission or to sign forms that allow others to see your records. All information about you is confidential and may not be discussed with others without your permission. This includes discussions between your doctor, therapist and other professionals, friends, family, advocates, other residents where you live, or clients/patients where you are receiving treatment.

There are, however, certain legal circumstances that may affect your right to confidentiality. For example, if you become involved in a child custody case where your mental health as a parent is questioned and you wish to pursue the case, you may be required to release certain parts of your mental health records. If you are a prosecuting witness in a criminal case and you wish to present evidence, the defendant may ask you to present your mental health records in order to call into question your believability. However, under most circumstances your records are confidential. Often only a judge or his/her appointee will look at these records and then only to decide whether anything contained in them might be helpful to the defendant.

Since the law is generally in a state of change, you should consider consulting an attorney if you have any concerns or questions regarding the confidentiality of your records. Your records are not confidential in a mental health proceeding for involuntary commitment to a hospital; however, these records are sealed by the

court and are not allowed to be available to the public.

Non-Emergency Involuntary Treatment

When you are living in the community a person can file an application in the local family court to treat you involuntarily. The state does not have to prove you need to be in the hospital unless you are required to accept treatment because there is a very real possibility you will seriously harm yourself or someone else.

When the state does not prove its case, the court cannot order treatment and is required to dismiss the petition. When the state proves its case, the court can order you to accept outpatient treatment (this is called an Order of Non-hospitalization, or ONH).

You have the same rights at a community based hearing as you have at a regular commitment hearing (see "Civil Commitment").

If you are accused of violating the conditions of your court order for outpatient treatment, you are entitled to another hearing before you may be placed in a more restrictive setting. At the hearing the court can dismiss the order, change the conditions of your order, or order your admission to Vermont State Hospital or another designated facility until the order expires.

You must be released at the end of the order unless the state has filed an application for continued treatment before the expiration of the original order, and a court has issued its renewal order.

Refusing Medication and Treatment in the Community

You may not be medicated in the community against your will without a court order. Even if you are on an Order of Non-Hospitalization for treatment that includes medication, it is against the law to hold you down and medicate you. When you refuse medication while on an Order of Non-Hospitalization, the mental health provider must request a court order for your

medication to be continued or for you to be hospitalized.

If you are not committed to the Vermont State Hospital or another designated facility, you may not be treated against your will without a court decision. Following application you are entitled to a hearing with full due process rights, including the right to adequate notice, appointed counsel, witnesses, cross-examination of the state's witnesses, testimony on your own behalf, and written findings and conclusions.

Contact one or more of the organizations listed in this booklet to discuss this so you will be prepared should you face this type of situation. If you are involved in this situation, you may wish to call Vermont Legal Aid, and/or Vermont Protection & Advocacy.

**You and Your
Durable Power of Attorney
(DPOA)**

PRIVATE PSYCHIATRIC FACILITIES

Admission to private hospitals or other private psychiatric facilities on a voluntary basis is an option you may choose to pursue. You may be asked to sign an agreement to abide by the rules of the facility while you reside there. It is the facility's right to impose reasonable rules. The facility may not, however, infringe on your rights.

Some private facilities are also what is known as a "designated facility". This allows for certain aspects of involuntary treatment to take place there. This may include a person being "held" involuntarily at the facility for up to 72 hours.

It is your right to express complaints. The staff may not retaliate or "get even" with you if you make a reasonable complaint. It is illegal for a staff member to try to intimidate you or attempt to prevent you from making a complaint.

A Durable Power of Attorney (DPOA) is an important legal document that allows a person to appoint their own agent to make health decisions for them if they are declared 'incompetent,' as well as give other advance instructions.

Once you have chosen your agent - remember to choose carefully - discuss your preferences with him or her. When you sit down to discuss and write out your DPOA, making either a video or audio tape of the proceedings is a good idea. A DPOA can include advance instruction on a wide range of issues, from medication preferences to whom to assign temporary guardianship of your children.

For assistance with completing a DPOA contact Vermont Protection & Advocacy.

It is also your right to leave the facility at any time. You may not be kept there against your will, and you may not be forced to "agree" to stay against your will. A facility's typical practice when a patient refuses or no longer wants treatment which involves loss of freedom is to inform you that if you leave

you may not return at all or for a period of time. You may also be discharged "Against Medical Advice" (AMA).

AMA generally is the result of your deciding that you need no further assistance and want to leave but the staff believe that you are not well enough to leave the facility. Note that some private facilities include "notice" language in the admissions papers, however, requiring that you give "X" number of days notice before you leave. Typically these vary from two days to four days.

Staff may point out that if you leave, you risk potential involuntary treatment because they believe you meet an involuntary treatment standard of being a threat to yourself or others. There is a difference between pointing out a risk and threatening you with an action. Staff may not use the risk of involuntary treatment as a threat to you, this is coercion. Ask what, if anything, staff members will do if you decide to leave AMA. You will then need to decide if the risk, based on the information you have, is worth it.

You have the right to cancel any agreement about treatment you may have made at the facility. Again, you will need to weigh the risks of canceling with your feelings and beliefs. You have the right to be directly involved with all aspects of your treatment plan and to disagree with any part of it.

Summary of Residents' Rights in Residential Care Homes

State regulations govern the operation of residential care homes and are enforced by the Vermont Department of Aging and Disabilities, Licensing & Protection Division. Resident rights are included in the regulations. The regulations are subject to change but your basic rights will essentially remain in tact even after revision of the regulations. Contact the Division of Licensing and Protection for up-to-date information with respect to your rights at a residential care home or nursing home.

When you live in a residential care home you do not lose any of your civil or human rights. **You have the right to be treated with consideration, respect and dignity,**

and you have the right to privacy. Your personal needs must be attended to with discretion. Your personal needs may include such things as a special diet, including a vegetarian diet, or reasonable accommodations that make the home accessible for you.

You have the right to be free from mental and physical abuse, and free from physical and chemical restraints (medication) except with your consent, unless court ordered, and as authorized by a physician. You have the right to be free from physical and chemical restraints imposed for purposes of discipline or convenience. Any use of restraints is subject to specific procedure and medical direction.

You have the right to choose your own personal physician and to obtain a second opinion. You are entitled to be informed about your medical condition and to participate in planning your medical treatment, and you do not have to participate in any experimentation or research. You have the right to refuse care or treatment; this includes the right to

discharge yourself from the facility. Your medical records must be treated confidentially and you may refuse or approve their release to anyone outside of the facility.

You have the right to be informed in writing, prior to or at the time of admission, of services available and charges for those services. (Any rate changes require 30 days written notice). You must be informed in writing about Medicaid and Medicare eligibility and what is covered under those programs. If a language barrier exists, reasonable accommodations must be made to communicate this information to you.

You have a right to a 30-day advance written notice that you will be evicted or discharged from the residential care home (but only 14 days notice if you fail to pay rent), except for medical reasons authorized in writing by your physician and agreed to by you, or for emergency situations involving the Licensing Agency. The thirty days must include an entire rental period (for example, if rent is

due on the 1st of January and you get a notice on the 2nd, the eviction cannot be effective until the 1st of March, because a whole rental period will not have passed by February 1st). This does not apply to discharge resulting from a change in the level of your care. You have a right to a 72-hour advance notice if you are going to be moved within the facility. Otherwise, your rights as a tenant are the same as any other tenant's, and are governed by Vermont's landlord-tenant law.

You have the right to retain personal clothing and possessions as space permits, unless to do so would infringe on the rights of others or create a fire or safety hazard.

You have the right to refuse to perform work without pay for the care home operator. If you choose to perform specific tasks that others would be paid to perform, you must receive reasonable compensation (find out what the current minimum wage is). You can volunteer to help out at the home but cannot be required to do so.

You have the right to have visitors within reasonable visiting hours which shall be posted and available to all residents and visitors. Your spouse may visit and you must be assured a private meeting place. If you and your spouse both live in the facility, you have the right to room together. You have the right to organize family or resident councils and to meet in privacy with staff attending only upon request.

You have the right to associate, communicate and meet privately with persons of your choosing, and the right to participate in social, religious, or community activities of your choice.

You have the right to send and receive personal mail unopened and uncensored, including any SSI checks you may be receiving.

You have the right to use the home's telephone, except when restricted because of excessive toll charges or abuse of the right (such as obscene or threatening calls). Restrictions on telephone use must be in writing and must

be explained. You may, at your own expense, maintain a personal telephone in your own room.

You have the right to complain or voice a grievance without interference, coercion or punishment. You have the right to review current and past state and federal survey and inspection reports of the facility, and to receive a copy of such reports upon request.

You have the right to manage your personal finances. The operator may manage your finances only if you make a request in writing, in which case you should receive at least a quarterly report of your financial transactions. You may revoke the written request at any time. Quite often, as a condition of living in a community care home, you may be asked to sign such a request. If you do not want to turn over this right, and your refusal to agree is not being honored, you may wish to call an advocacy organization for assistance.

Each home must have an established written policy regarding the rights and

responsibilities of residents, which must be presented to you prior to or at the time of your admission, in a language you can understand. The home must adhere to its policy.

Each home must have an established grievance procedure available to all residents. The resident grievance procedure must include, but not be limited to, a method by which each resident filing a complaint will be made aware of the Vermont Ombudsman Program, and that the ombudsman may be contacted as an alternative or in addition to the home's grievance mechanism. Vermont Protection & Advocacy may also be contacted.

You have the right to return to the first available bed in the facility after being discharged from a hospital, provided the facility can meet your medical needs and other residents will not be adversely affected. The facility must hold your bed for at least ten (10) days if you are hospitalized.

CIVIL COMMITMENT

Word about Involuntary Admission

Vermont's mental health law provides for involuntary admission (commitment) to any "designated facility" and until recently the only designated facilities to which people have been committed have been Vermont State Hospital and the Brattleboro Retreat. However, the Department of Developmental and Mental Health Services in the past few years has designated other hospitals throughout Vermont to admit individuals involuntarily for up to 72 hours, and has also designated some of these hospitals for longer periods of commitment. The hospitals now designated to hold people involuntarily for 72 hours are: *Fletcher Allen Health Care in Burlington, Central Vermont Medical Center in Berlin, Windham Center in Bellows Falls, and the Rutland Regional Medical Center in Rutland.* The Windham Center and Rutland Regional Medical Center are also designated for commitment of people for up to ninety days and potentially for one year, although at the

present time these hospitals have yet to be used for commitments that long.

If you are subjected to involuntary admission, your rights with regard to the procedure for admitting you are the same no matter which facility you are taken to. Your rights while in the facility are the same no matter which facility you are in. You will have the right to legal representation, which in this circumstance will most likely be provided by the Mental Health Law Project. You also have the right to contact other organizations for assistance such as Vermont Protection & Advocacy.

Involuntary Admission to Vermont State Hospital or other Designated Facility

If you are taken to Vermont State Hospital or another designated facility against your will, it means that an "interested party" (applicant), such as a responsible family member, friend, health care professional or law enforcement officer, has filed an emergency application to have you taken there, or a judge has issued a warrant for emergency examination.

Unless a mental health professional and a law enforcement officer take you into custody for examination, a doctor's certificate is needed in addition to the application. Both must state why you need an emergency examination and why the doctor and applicant believe you are mentally ill and dangerous to yourself or others. The application and certificate must show only current information, and explain why the situation is an emergency.

After an application and doctor's certificate are completed, any law enforcement officer or mental health professional can take you into "temporary custody" and transport you to the hospital.

Only mental health professionals or law enforcement officers may apply for emergency admission without a doctor's certificate. To do so they must have reasonable grounds to believe that you are mentally ill and that you present an immediate risk of serious injury to yourself or others based on personal observation.

If a doctor's certificate cannot be obtained, you can be taken into custody while permission is obtained from a judge who must issue a warrant for an emergency examination. Permission must be sought immediately upon taking you into custody. The judge must agree that there is probable cause to believe you are mentally ill, pose a serious threat of harm to yourself or others, and that a doctor's certificate is unobtainable. If the judge grants the warrant you will be taken to the hospital.

When you are brought to a hospital, either on a warrant for immediate examination or an emergency application, you have many due process rights.

◆ **Without a Doctor's Certificate.**

You are entitled to an exam by a physician immediately after you arrive at the hospital. If the doctor agrees that you need to be admitted against your will, you will be held at the hospital for emergency observation. After that, the same steps will apply to you as apply to those who are admitted with a doctor's certificate, including examination by a psychiatrist

within one working day after admission (see below).

If the doctor does not agree that you need admission, you must be released immediately and returned to your home or other reasonable place of your choosing.

◆ **With a Doctor's Certificate.**

You have a right to an exam by a psychiatrist as soon as possible but no later than one working day after admission.

If the psychiatrist does not agree that you need to be admitted, you must be released immediately and returned to your home or other reasonable place of your choosing.

If the psychiatrist decides you need to be admitted against your will, an application for involuntary treatment must be filed in the family court within 72 hours of your admission. After 72 hours you must be released if an involuntary treatment application has not been filed with the family court.

◆ **Your Rights Before a Hearing.**

Even before your hearing, you have a right to appropriate medical and psychiatric treatment, but you may refuse treatment as well.

You may not be refused any reasonable communication, by telephone or otherwise, in order to tell people of your situation.

The hospital must ask you whom you want notified of your hospitalization, such as friends, family, or advocates, and must notify those people and tell them how to contact and visit you. It is also your right not to notify anyone, or to wait until a later time. However, when the family court schedules your hearing it is required to notify your guardian or any person having custody of you (if applicable) and any person the court believes has concern for your welfare.

◆ **Probable Cause Hearing.**

You are entitled to a probable cause hearing, but you must ask for it within 5 days of your admission. This hearing allows

you to challenge the facts that were relied on for your admission.

The court is required to hold the probable cause hearing within 3 working days after the time you ask.

At the hearing you are entitled to legal representation. You are also entitled to cross-examine the state's witnesses and to testify on your own behalf. If the court does not find probable cause to believe that you were mentally ill or dangerous at the time you were admitted, you must be released immediately. If probable cause is found you will be returned to the hospital to await your next opportunity to go before a judge.

◆ **Hospitalization Hearing.**

You are entitled to a hearing on the state's application for involuntary treatment within 10 days after the application is received (20 days if a psychiatric examination is filed). You can ask to delay your hearing until you are ready or the hospital agrees to release you.

For your hearing, you are entitled to representation by an attorney, to obtain an independent psychiatric opinion, to cross-examine the state's witnesses, to present witnesses of your own and to testify on your own behalf. You have the right not to attend your hearing. Because of a recent Vermont Supreme Court decision, mental health hearings are NOT automatically closed to the general public. It is possible that someone who has a specific interest in your hearing or even a news reporter may be permitted by the court to attend. The court has the power to exclude someone from your hearing, and it is up to the court to decide whether to do this. You may also have anyone there you want, within reason.

The state must prove that you are both mentally ill and a danger to yourself or to others. The state must also prove that Vermont State Hospital or another designated facility can provide adequate treatment, and is the least restrictive setting which can provide treatment.

If the state demonstrates that you are mentally ill and a danger to yourself or

others, but fails to convince the court that only hospitalization will be appropriate for you, the court may require you to accept treatment outside a hospital.

The court may order an absolute discharge, which means you must be released immediately and returned to your home.

Finally, the court may order you committed to the Vermont State Hospital or another designated facility for up to 90 days. The court must give a preference to a hospital nearest to your home, unless you request otherwise or there are compelling reasons not to.

◆ **Appeals.**

You have the right to appeal an order committing you to Vermont State Hospital or another designated facility or for any other treatment. The appeal must be filed within 30 days of the court's order. The appeal is heard by the Vermont Supreme Court. You should be aware that the appeal process usually takes a long time (eight months to two years) and you should discuss with a qualified attorney the

benefits of an appeal before you seriously pursue it.

◆ **Habeas Corpus.**

You have the right, either on your own, or through your attorney, to challenge the legality of your detention at the Vermont State Hospital or a designated hospital. A petition for writ of habeas corpus generally challenges procedural irregularities which could invalidate the hospital's authority to hold you.

For example, if the application for emergency examination did not include a doctor's certificate, if you were taken into custody before the application for emergency exam was made, or if the state failed to file the commitment case within 72 hours after you have been admitted and evaluated by a psychiatrist, you may have the basis for a habeas petition. If you prevail on a habeas petition, you will be entitled to discharge from the hospital. However, it is important to remember that habeas corpus is NOT a substitute for appeal. Under current Vermont law, it may be very difficult to succeed on a habeas

petition if you have already been committed by a court. Therefore, the best time to challenge the procedures which led to your hospitalization is soon after you were admitted and sometime before your commitment hearing.

◆ **Applications for Continued Treatment.**

If the hospital staff believes you need treatment beyond the commitment of 90 days, the hospital must apply to the court, before expiration of the initial commitment order, for a continuation of treatment, or release you. You have the same rights that you have at your initial commitment hearing.

If the state does not prove you need continued hospitalization, you must be released immediately.

If the state can convince a court that you still need treatment but cannot prove that the hospital is the least restrictive setting, the court can release you on an Order of Non-Hospitalization for up to (1) one year.

◆ **Applications for Discharge.**

At any time subsequent to 90 days after the state's application for continued treatment has been granted, you have the right to apply for discharge. Your hearing rights are the same as when you were committed.

If the court agrees with you, you must be discharged. If the court agrees with the state, you cannot apply for discharge again for 6 months.

◆ **Conditional Discharges.**

The Head of the Vermont State Hospital or another designated facility may release you at any time on a conditional discharge. The court cannot order a conditional discharge.

Usually conditions of discharge are negotiated with you, your advocate and your treatment team. There is some disagreement as to the ultimate length of a conditional discharge. The state has taken the position that a discharge can be as long as "6 and 6" meaning for 6 months, renewable for 6 months.

Any conditional discharge longer than 60 days must be accompanied by a specific reason for its imposition. A conditional discharge can extend no longer than 6 months. Often the discharge states that it will be in effect for 90 days, renewable for 90 days.

In order to renew the discharge, the Head of the Vermont State Hospital or another designated facility must be contacted by a care provider, and the discharge renewed before the end of the first 90 day period. If the request arrives after the 90 day period, it cannot be renewed and you will no longer be required to follow the order.

If you have been released from a designated facility on a conditional discharge, you have probably (although not necessarily) been referred to one of the ten community mental health centers around Vermont. They will monitor the "conditions" of your discharge, usually including medications and/or therapy. If you do not abide by the conditions, or if you appear to become dangerous, revocation of your discharge may be sought by request to the head of the

designated facility from which you have been released. Unless there is an emergency you must be afforded a full court hearing before you may returned to the hospital. Even in an emergency (i.e. you are dangerous) you must receive a hearing as soon as practicable after you return to the hospital.

◆ **Orders of Non-Hospitalization.**

At any hearing for involuntary hospitalization, the state must prove you need treatment in a hospital. If the court finds that you do require treatment, it must consider the least restrictive alternative for that treatment, meaning treatment outside a hospital, usually at a community mental health center. The court will then issue an Order of Non-Hospitalization. The order requires that you abide by a particular treatment plan, usually including medication and counseling, for a period of up to 90 days, which is the same period for which you might have been hospitalized.

If the state believes your Order of Non-Hospitalization ought to be extended beyond

90 days, it must apply to the court in an Application for Continued Treatment (see above). The state must return to court, and you may exercise all your due process rights (full hearing, attorney, cross-examination, etc.) to oppose the extension. If the state succeeds, the court may place you on an Order of Non-Hospitalization for up to one (1) year. The state must file an application for continued treatment at the end of each year you are subject to the order and each time must prove to the court that you continue to need the order. If the state does not file an application before your order expires, then you are automatically released from the order. You may also file an application for discharge from the order as described above (see “Applications for Discharge”).

During the period of your Order of Non-Hospitalization, if the people designated to treat you believe you are not following the order or believe that the order is no longer adequate to meet your treatment needs, they may go back to the court and ask that you be returned to the hospital. Before returning you to the hospital, the court

must hold a hearing and you will be appointed an attorney to represent you. The state must prove that you are in violation of the Order of Non-Hospitalization or that the order is no longer providing you with adequate treatment. If the state is requesting that you be returned to the hospital, it must also prove that hospitalization is the only adequate place for you to go at the time. The court has the option of keeping the same order in place (and not returning you to the hospital), changing the conditions of the order so that it is adequate to meet your treatment needs, or ordering your return to the hospital. The court can return you to the hospital for the period of time remaining on your order. For example, if 4 months had passed since an order for 1 year had been issued by the court, then the court could order you hospitalized for the remaining 8 months.

We recommend you contact someone at Vermont Legal Aid or Vermont Protection & Advocacy if you are having problems with your Order of Non-Hospitalization.

Summary of In-Patient Rights at Vermont State Hospital and Other Designated Facilities

You have the right to a hearing and legal representation. If you are sent to a hospital involuntarily, you have a right to a hearing and legal representation. Vermont Legal Aid has an office in the Vermont State Hospital and is automatically appointed as counsel for individuals hospitalized involuntarily. You have the right to hire a private attorney if you choose. You have the right to consult with your attorney in private.

You have the right to confidentiality. Under Vermont law, your admission to Vermont State Hospital or another designated facility must remain confidential. Your admission and your records cannot be discussed with anyone outside of the hospital without a release signed by you or your court-appointed guardian, if you have one (see "Guardianship," below). Your case must be discussed discreetly by all parties involved. Also, your case cannot be discussed with other patients without your

consent. However, your records are not confidential in any later civil commitment proceeding.

You have the right to refuse medication and you have the right to request specific medication. You can refuse any medication prescribed for you by your doctor. You can exercise this right unless your behavior poses a clear and present danger to yourself or others. Only if an emergency exists can you be given medication involuntarily.

You have the right to be fully informed by your attending physician as to the nature of any procedures or treatment, the medical risks, the probable duration of incapacitation, if any, and any alternatives available to you. You have the right to know the name(s) of the person responsible for treating you.

You have the right to request that your doctor prescribe a specific kind of medication, although your doctor is not obligated to do so. If the doctor refuses,

you may request a second opinion. Again, you may refuse to take the medication.

You have the right to adequate treatment. Adequate treatment includes humane and respectful physical, emotional, psychological and spiritual care. You must be treated with respect and consideration at all times, and your personal dignity must be maintained under all circumstances.

You have the right to participate in the development of any treatment goals or plans and to request specific treatment. Insist on discussing any and all aspects of your treatment with everyone involved. You have the right to know the names and professional status of all individuals providing treatment to you, particularly your attending physician, and the professional relationship among individuals who are treating you. You have the right to expect continuity of care while in the hospital and the right to be informed of any continuing health care requirements upon discharge.

You have the right to be fully informed at all times as to the status of your treatment. You must be furnished with complete and current information in clear, understandable language. You are entitled to an interpreter (sign or foreign language) if a language barrier presents a continuing problem to understanding your care and treatment.

You have the right to refuse treatment. If you do not agree with some aspect of your treatment, such as medication, a particular counselor or method of counseling, or participation in some form of activity, you may refuse. The hospital must obtain court permission to treat you if you have refused.

You do not have to participate in any experimentation. The gathering of data for research purposes is voluntary, and if you choose to participate, you must give your informed consent.

You have the right, upon request, to have a person of your own sex present during certain portions of a physical

examination, treatment, or procedure which is being performed by a person of The opposite sex, and the right not to Remain disrobed any longer than is required for accomplishing any medical procedure.

You have the right to wear appropriate personal clothing and religious or other symbolic items as long as they do not unduly interfere with your treatment. The hospital must respond to your reasonable requests regarding such concerns as special diet needs (i.e. vegetarian) or room changes.

You have the right to receive an itemized, detailed and understandable explanation of charges, regardless of the source of payment. You must be informed as to what hospital rules and regulations apply to you as a patient.

You have the right to send and receive mail, unopened and uncensored.

You have the right to communicate by Phone. There is a phone on each ward Where you can make calls.

You have the right to have visitors.

Visiting hours are 10 a.m. to 8 p.m. daily at Vermont State Hospital. You may visit other wards and have other people visit your ward during these hours.

You have the right of access to your records.

If you want to look at any part of your chart during your hospitalization, you need to put the request in writing to your doctor. A member of your treatment team will review your chart with you. Unless someone reasonably feels that reviewing your records might be harmful to you (cause you to attempt suicide or become violent, for example), you are entitled to see them and to have copies made.

You have the right to a grievance hearing.

If you believe your rights are being violated, or if you have a complaint about your treatment at the hospital, you can have a hearing before the Head of the Vermont State Hospital or your designated facility where you have been admitted to express your concerns. The Head of the Vermont State Hospital or the other designated

facility will give you a written decision regarding your complaint. If you are dissatisfied with this decision, you can have your complaint heard by the Commissioner of Developmental and Mental Health Services. The Commissioner will also give you a written decision after hearing the facts from both you and the hospital.

A summary of the hospital's obligations, written in clear language, must be given to you upon admission, and also must be posted conspicuously at each nurse's station. Failure to comply with any of these provisions may constitute a basis for disciplinary action against the hospital or a physician.

Emergency Involuntary Treatment Rights

When you are an in-patient at Vermont State Hospital or another designated facility, you have the right to refuse treatment and/or medication. However, in an emergency, you may be secluded, restrained and/or medicated against your will. An emergency means “a significant change in a

patient's condition or past behavior resulting in the imminent threat of serious bodily harm to the patient or others, so that action is immediately necessary to protect the patient or others, and it is impractical to first obtain consent.”

Even in an emergency, you are entitled to receive the least amount of seclusion, restraint or medication necessary to prevent harm to yourself or others. The hospital staff and treating psychiatrist are required to file a certificate of need justifying the involuntary treatment. Within twenty-four hours, the hospital medical director is required to review the certificate and make a separate determination that the involuntary treatment was justified because less intrusive and restrictive measures had been tried or would not have been effective.

Every certificate of need must be sent to Vermont Legal Aid. Your representative reviews these and will contact you to discuss your right to file a grievance regarding your treatment. You can also contact Vermont Protection and Advocacy if you wish help in filing a grievance, or you

can do so on your own without representation.

Non-Emergency Involuntary Medication Rights

Hearing Rights. You retain the right to refuse medication even if you are committed to Vermont State Hospital or another designated facility. If your treating doctor decides you need medication, and the state believes it can prove you are not competent to refuse, you are entitled to a hearing with full due process rights, including the right to adequate notice, appointed counsel, witnesses, cross-examination of the state's witnesses, and testimony on your own behalf.

The judge or hearing officer must issue a written decision which you are entitled to receive. Once you have an opportunity to review it with your attorney, you have a right to appeal a decision which orders involuntary medication.

Sometimes when you appeal the court may issue a stay of the order. This means that

the hospital cannot medicate you against your will until the appeal is decided. If the court does not grant a stay, you can be medicated while you are pursuing your appeal.

Medication Review. If a request to medicate you has been granted, the medical director is required to interview you every thirty days. The results of this interview must be placed on your chart. The purpose of the interview is to determine if you are now competent. If the medical director determines you are competent, you have the right to refuse medication. Ask your treating physician at the hospital if you want to see the results of your review. If you have problems seeing your review, contact Vermont Legal Aid or Vermont Protection & Advocacy.

Treatment Review Panel. The Vermont State Hospital is required to meet four times a year with an established Treatment Review Panel.

You have the right to appear before the panel and request a review of your

treatment. You may request the review by contacting the Treatment Review Panel, Vermont Legal Aid, or Vermont Protection & Advocacy.

RIGHTS IN THE CORRECTIONAL SYSTEM

If you are in prison in Vermont you have all the rights that other mental health clients have with some exceptions. For example, if you have been placed in the Vermont State Hospital or another designated facility for a portion of your incarceration and the court determines at a hearing that you do not need to be there, you would be returned to a correctional facility rather than being released.

Sometimes the Corrections Department will agree to parole conditions that are similar to a conditional discharge or an Order of Non-Hospitalization. If you violate your orders, you are usually returned to prison.

If an emergency exists while you are in prison, you can be sent to Vermont State Hospital or another designated facility on an application for emergency examination. As

with anyone brought to Vermont State Hospital or another designated facility involuntarily, you will be contacted by Vermont Legal Aid, you will have an attorney and you have the same hearing rights.

Sometimes, an individual in prison will request treatment at Vermont State Hospital or another designated facility. The Department of Corrections has an agreement with Department of Health to provide treatment. If that happens, you are on furlough status. You will be placed on the Maximum Security Unit, Brooks I, if your request is granted.

As an individual in the Corrections system, you may ordinarily refuse treatment (except in an emergency situation), but you do not have a right to a hearing. The hospital authorities may elect not to oppose your right to refuse medication, but they have the option of returning you directly to prison without a hearing.

You do have the right to receive mental health services in the facility where you are

detained. Mental health treatment within correctional facilities is generally provided by individuals and agencies whose services are contracted by the Department of Corrections. Therefore, although you have the right to request mental health services, you may not have the opportunity to request a specific community mental health treatment provider. If you wish to obtain mental health treatment, you should be able to obtain assistance through the medical service component of the prison. If you are unable to obtain assistance, contact Vermont Protection and Advocacy, or the Prisoners Rights Office at 828-3194 and request their assistance.

Observation/Competency Evaluations.

Individuals charged with crimes must be competent to stand trial. Generally, this means you must have the ability to communicate with your attorney, to understand the charges against you and to assist in your own defense.

If there is a question about your competency, the court can order a pretrial

evaluation. That evaluation can take place in the community, in a jail, or at Vermont State Hospital, or another designated facility.

When your evaluation occurs at Vermont State Hospital or another designated facility, you are usually housed on the Maximum Security unit. You can be held for up to (60) sixty days. You are not entitled to leave the unit except by permission of the Commissioner of Developmental and Mental Health Services. You are still represented by your Public Defender or private attorney. However, if you have questions or concerns, Vermont Legal Aid or Vermont Protection and Advocacy can assist you.

NOTES AND QUESTIONS:

Criminal Commitments ("4822 Hearings").

If you have been found not competent to stand trial, the court must conduct a hearing to determine if you need treatment. Your legal rights at that hearing are the same as those of clients admitted involuntarily to Vermont State Hospital or another designated facility.

Commitment to the hospital is not automatic. The court must determine whether appropriate treatment is available in the community, and may place you on an Order of Non-Hospitalization.

If you are committed to Vermont State Hospital, or another designated facility, the order can be for no more than 90 days. You may, like other clients, file an application for discharge at the end of the 90 day period.

At the end of the 90 day period, the hospital must either return you to prison or file an application for continued treatment. You are

entitled to the same rights as any other client at the initial hospitalization hearing.

Guardianship

You or any responsible adult with a direct interest in you, such as a relative, friend, or physician, can file a petition for appointment of a legal guardian.

The petition is filed with a probate court and asks that the court determine your competence to make decisions in all or a limited number of areas. Should the court decide that you are unable to manage either your personal or your financial affairs, a guardian will be appointed to manage these things for you.

Should the court decide that you are capable of managing some aspects of your personal and financial affairs, but not all, a "limited guardian" will be appointed. A guardian might be appointed to oversee your medical care, or your finances, for example. Any competent individual, at least 18 years of age, which the court finds best qualified, can be appointed as your

guardian. But if you reside in a residential care home, employees or operators of the home cannot be appointed your guardian. As you will see below, you may legally oppose the appointment of any guardian if you do not feel you need one, and you may oppose the appointment of a particular person as guardian. Unless there are important reasons not to, courts almost always prefer to appoint a person you feel most comfortable with as guardian.

When a petition is filed, you have the right to legal representation. The court must inform you of where you can get legal representation if you cannot afford it.

You have the right to review the petitions and all relevant documents with your attorney and to be informed about what to expect at the hearing.

You have the right to have the hearing conducted in a safe setting which will not harm your mental or physical health, to testify on your own behalf, to introduce evidence, and to present your witnesses

and cross-examine any opposing witnesses.

You have the right to appeal the court's decision.

Should the court appoint a limited or total guardian, you retain all legal and civil rights except those specifically granted to the guardian. Any action taken by a guardian on your behalf must be in a manner which is least restrictive of your personal freedom. An appointed guardian does not have the authority to have you placed in the Vermont State Hospital or another designated facility, or residential care home, without following the same procedure that any other interested party would have to follow. If you are admitted to Vermont State Hospital, or another designated facility, your guardian will be notified.

Should the court decide that you are not in need of a guardian, the petition will be dismissed and all records of the proceeding will be sealed.

Guardian Ad Litem

If you become involved in a court action and your ability to communicate for your own best interests is called into question, the court can appoint a guardian ad litem for you. A guardian ad litem ("guardian for the litigation") is someone, preferably a lawyer, who communicates to the best of her or his ability what you would communicate if you could do so. She or he only acts on your behalf for the duration of the proceeding.

An inability to communicate effectively might be the result of a physical affliction (e.g., Alzheimer's disease, traumatic injury) or certain phases of mental illness (e.g., psychotic episode, disorientation as a result of acute depression). The guardian ad litem's duty is to try to determine what you would want if you could understand the situation, and then present what he or she thinks would be your position. Anyone involved with the case may inquire into your ability to communicate--a judge, you, your lawyer, a friend, or another party to the action.

Before a court may appoint a guardian ad litem in your case, it must find you "incompetent," which means unable to communicate effectively. You have the right to contest a court's proposed appointment. The mere fact that you may have been diagnosed as mentally ill or mentally retarded or that you may be institutionalized does not mean that you are incompetent. If you think you do not need a guardian ad litem, tell your attorney and tell the court. You may have to do some convincing. Even after an appointment you may protest, and if your guardian ad litem believes you, she or he has a duty to make that belief known to the court.

It is important to remember that it is the court's duty to permit you the maximum freedom, in the action, consistent with your abilities.

Representative Payee

If you are receiving Social Security or SSI benefits, and Social Security officials believe that you are incapable of properly maintaining your finances, a representative

payee may be appointed. A representative payee is usually a friend or relative appointed to manage your financial affairs. Representative payees must account for all expenditures made on your behalf to the Social Security Administration and to you.

Application for appointment of a payee is made through the Social Security office. Normally your attending physician would submit a statement that you are incapable of managing your financial affairs, although it is not legally necessary.

If a representative payee is appointed and you do not feel you need one, Social Security may request an evaluation from your current physician. The evaluation must indicate to Social Security that you are capable of managing your own finances. You may also request that a different payee be appointed if you do not believe your finances are being properly maintained by your present payee. If you presently have a payee, but decide you no longer want one, you may apply to the Social Security Administration to be your own payee. The simplest means is to obtain written

confirmation (on an official form) from a physician that you no longer need a payee.

AMERICANS WITH DISABILITIES ACT OF 1990

The federal Americans with Disabilities Act provides civil rights protection for people with disabilities with regard to employment, public accommodations, transportation, state and local government services and telecommunications. For more information, see Protecting Your Rights section of this booklet.

Employment. Employers may not discriminate against an individual with a disability who is otherwise qualified for the job. Employers can ask about your ability to perform a job but cannot ask if you have a disability, nor can they subject you to tests which screen out people with disabilities. They must provide "reasonable accommodation" such as modified schedules, special equipment, job restructuring and other aids to people with disabilities, so long as these accommodations do not cause

"undue hardship" on the employer. You can bring complaints to the Equal Employment Opportunity Commission or a private attorney. Remedies include back pay, court orders to stop the discrimination, and legal fees.

Public Accommodations. Any public service such as a hotel, restaurant, store, bank, doctor's office, school or day care, may not discriminate against a person with a disability. Reasonable changes in policy, practice and procedure must be made, as well as provision of auxiliary aids or services, in order to avoid discrimination, unless "undue burden" would result. Physical barriers must be removed or alternative methods of providing service must be offered if readily achievable. New construction and alterations to facilities must be accessible. You may bring a private lawsuit to stop discrimination, or you can file a complaint with the U.S. Attorney General.

Transportation. You must be provided with comparable transportation services if you cannot use fixed route bus services,

unless "undue burden" would result. New buses ordered after August 26, 1990 must be accessible. All trains must have one accessible car per train by August 26, 1995. You may file complaints with the Department of Transportation, the U.S. Attorney General's office, or bring a private lawsuit.

State and Local Governments. All government facilities, services and communications had to be accessible. You may file complaints with the U.S. Attorney General's office or bring a private lawsuit.

Telecommunications. Telephone companies must offer telephone relay services to people using telecommunication devices for the deaf (TDDs) or similar devices. You may file a complaint with the Federal Communications Commission or bring a private lawsuit.

State Laws. There are also state laws that provide protection for people with disabilities with regard to employment and public accommodations. If you feel you have been discriminated against because of

your disability, or perceived disability, you can file a complaint with the Civil Right's Division of the Vermont Attorney General's Office, or Vermont's Human Rights Commission listed under "Protecting Your Rights."

THE FAIR HOUSING AMENDMENTS ACT OF 1988

The Fair Housing Amendments Act (FHAA) guarantees that individuals with disabilities (which includes psychiatric as well as physical disabilities) have the right to housing on the same basis as anyone else who applies for rental or home ownership.

When you apply for housing you can only be asked questions that are related to the tenancy, and you must be asked the same questions as any other applicant.

You cannot be denied housing because of a physical disability if you can be reasonably accommodated. "Reasonably accommodated" means, for example, the addition of ramps, wider doors for wheel chairs, and grab bars in bathrooms

and showers. You may have to pay for these additions but you cannot be denied housing because they don't exist when you apply for housing.

Once you have applied for rental housing or home ownership, your lease and/or mortgage must be the same as those available to non-disabled persons. In other words, the landlord cannot add special conditions because of your disability. You cannot be evicted except under the same terms and conditions as other tenants. If your tenancy would constitute a threat to health, safety or property, you may be evicted. However, if the risk can be reduced or eliminated by reasonable accommodation, this must be done.

You should know that the FHAA defines disability in terms of real or perceived disability or a history of treatment for a disability. Even if at the time you apply for housing you are no longer disabled but the landlord learns you had been at one time in Vermont State Hospital or another designated facility, this information cannot be used to deny you housing. So long as you

can meet the tenancy requirements applied to all tenants, you have a right to that housing.

If you have any questions about the FHAA or feel you have been discriminated against, you can contact the Vermont Human Rights Commission listed under "Protecting Your Rights".

Housing Contingency Fund

In an effort to ensure that former hospital patients have access to adequate housing, the Department Developmental and Mental Health Services has established a housing contingency fund. Every community mental health center has funds specifically for their clients who need assistance with housing.

These funds can be used in several ways. For example, it can be used to pay a security deposit, to pay the difference between the actual rent and the amount you can pay, and to pay the share of the rent a roommate would normally pay after they have moved out and while you are looking for a new roommate, or to pay rent to keep

your apartment while you are in a hospital or crisis treatment program.

If you have any questions regarding your eligibility for these funds, or have been denied requested assistance by your local community mental health agency, contact the Department Developmental and Mental Health Services at 241-2646, or Vermont Protection & Advocacy at 1-800-834-7890.

ABOUT VERMONT PROTECTION & ADVOCACY

Vermont Protection & Advocacy, or VP&A, is the result of the federal "Protection and Advocacy for Individuals with Mental Illness Act of 1987" or PAIMI. This Act mandated that all states create an independent statewide system capable of responding to complaints of abuse, neglect and violation of civil rights expressed by people with a diagnosis of mental illness.

VP&A is an independent, non-profit organization dedicated to responding to problems, issues, and complaints brought to it by people with a mental illness

diagnosis. VP&A is client centered, and directed by a Board of Directors. VP&A's mission is to promote the equality, dignity, and self-determination of people with disabilities.

VP&A provides advocacy assistance to individuals, including legal assistance, to people throughout the state. VP&A also advocates at a systems level, including legislative advocacy to promote positive systematic responses to issues affecting people with mental illness. Although there are limits to what VP&A can provide, as well as eligibility criteria people need to meet to obtain assistance, VP&A staff try to help people who are not eligible for VP&A's services by offering information and referrals when possible.

VP&A also provides information to people regarding their rights, such as this booklet, as well as outreach and education activities intended to assist people with their self advocacy efforts. If you are in an abusive situation, believe that your rights are being violated, or know someone with this type of

problem, you should consider contacting VP&A by calling, 1-800-834-7890.

PROTECTING YOUR RIGHTS

If you are experiencing any difficulty with your treatment, and/or treatment providers, you have the right to protect yourself through grievance procedures within each mental health service program.

You have the right to access and communicate privately with any rights protection service, or advocacy group. The following list includes several organizations that may be helpful to you.

- A. Vermont Bar Association Lawyer Referral Service
1-800-639-7036
- B. Vermont Legal Aid
(income-based free legal services in non-criminal matters, most offices staff a Senior Citizens Law Project attorney)

Burlington Office: 863-2871
863-5620

Montpelier Office: 223-6377
Rutland Office: 775-0021
St. Albans Area: 524-6707
(Franklin/Grand Isle)
St. Johnsbury: 748-8721
Springfield: 885-5181

Mental Health Law Project (Waterbury)
241-3222

Disability Law Project
863-2871 (Burlington)
223-6377 (Montpelier)
775-0021 (Rutland)

C. Volunteer Lawyer's Project
(volunteer lawyer services for income
eligible people, pro bono)
1-800-639-8857 (outside Chittenden
County)
863-7153 (within Chittenden County)

D. Advocacy Organizations

Vermont Protection & Advocacy
(advocacy for people diagnosed as
mentally ill, responding to complaints

of abuse, neglect and violation of civil
rights)
1-800-834-7890
229-1355 (Montpelier)
141 Main Street, Suite 7
Montpelier, VT 05602
www.vtpa.org

Vermont Psychiatric Survivors
(Rutland)(peer support, assistance,
information and referral for people
with a diagnosis of mental illness)
1-800-564-2106

Client Assistance Program
(vocational rehabilitation client
advocacy)
241-2641 (Waterbury)
773-5866 (Rutland)

Advocates for Better Care (Winooski)
(group advocating on behalf of
residents as a class, monitoring and
commenting on legislation and
regulations which affect residents in
nursing homes)
655-1846

Community of Vermont Elders (COVE)
(Montpelier)
(senior citizen advocacy organization
that does community organizing,
lobbying, and provides public
education on health care, affordable
medication, family leave, long- term
care, utilities, and nursing home
issues)
229-4731

Medicare Advocacy Project
(provides assistance with Medicare
related problems)
865-0360
1-800-639-9627 (Fletcher Proctor)
(ask for information and referral)

Public Defender's Prisoner's Rights
Office (Montpelier)
(deals with issues of confinement)
828-3194

Vermont Alliance for the Mentally Ill
(Waterbury) (advocacy, and support for
and with family and friends of people
diagnosed as mentally ill)

1-800-639-6480 or 244-1396

Vermont Center for Independent Living
(Montpelier)
(peer advocacy for people with
disabilities)
229-0501
1-800-639-1522

Vermont Citizen Advocacy (State
Office) (Burlington)
[provides protection, advocacy, and
support for people with disabilities
through volunteers, regional)
860-1823

Vermont Coalition for Disability Rights
(Montpelier)
(28 member coalition advocating public
policy and legislation pertinent to
people with disabilities)
223-6140

Vermont Low Income Advocacy Council
223-7787

Vermont Association for Mental Health
1-800-639-4052

E. Adult Protective Services (SRS)
(investigates abuse, neglect or
exploitation of elders and people with
disabilities)
1-800-564-1612
241-2345

Champlain Valley Office (Burlington)
865-0360

Southeastern Vermont Office
(Brattleboro)
257-0569

F. AIRS (automated information and
referral service)
241-2219

Northeastern Vermont Office (St.
Johnsbury)
748-5182

G. Ombudsman
(complaint investigation and
assistance for people living in nursing
homes or community care homes)

Southwestern Vermont Office (Rutland)
775-0486
775-3223 (information and referral)

Senior Health Line
1-800-642-5119

Southwestern Vermont Sub-Office
(Bennington)
442-5436

State Long Term Care Ombudsman
241-2400

Central Vermont Office (Barre)
479-0531

Central Vermont Sub-Office (Lamoille
County)
888-7732

H. Vermont Human Rights
Commission(Montpelier) (investigates
complaints of discrimination regarding
housing, public accommodations and
employment)
828-2480

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|---|---|
| <p>I. Governor's Information & Referral Line
(general information and referral)
1-800-649-6825</p> <p>Vermont State Legislature (Sergeant-at-Arms)
1-800-322-5616</p> | <p>Bennington Mental Health
Consumers Group (Bennington)
442-4046</p> |
| <p>J. Vt. State Department of Developmental
and Mental Health Services
(governs the Vermont State Hospital,
designated hospitals, and regional
mental health agencies and various
programs)
241-2604
241-2610</p> | <p>Bi-Polar Society of Burlington
434-3222</p> <p>Carriage Club House (Rutland)
775-7196</p> <p>Challenging Horizons (St.
Johnsbury)
748-3181</p> |
| <p>K. American Civil Liberties Union of
Vermont
(addressing constitutional rights issues
of all citizens)
223-6304</p> | <p>Evergreen House (Middlebury)
388-3468</p> <p>Genesis (Newport)
334-6744</p> <p>Mood Disorders Hotline
(Brattleboro)
1-800-639-8036</p> |
| <p>L. Support Groups, Clubhouses, and
Drop-In Centers</p> <p>Another Way (Montpelier)
229-0920</p> | <p>Mood Disorders Support Group
254-2092 (Brattleboro)
464-2495 (Wilmington)</p> |

Mountain House (Bennington)
447-2166

New Hope Support Group (White
River Junction)
295-9670

New Hope Support Group II
(Bradford)

Our Place (Bellows Falls)
463-2217

Rutland Connection (Rutland)
773-3540

Southeast Vermont Psychiatric
Survivors (Putney)
387-4701

Springfield Peer Support Group
(Springfield)
885-8025

Supportive Alters (Several Locations)
453-4929

Uptight (Rutland)
775-1233

Westview House (Burlington)
658-3323

M. Vermont Agency of Human Services
242-2220

Vermont Department of Aging &
Disabilities, Division of Licensing &
Protection (investigates complaints
regarding hospitals, residential care
homes, nursing homes and other
licensed facilities)
241-2345

Vermont Department of Aging and
Disabilities
241-2400

Vermont Department of Prevention,
Assistance, Transition, and Health
Access (Formerly Social Welfare)
241-2800
1-800-287-0589

Vermont Developmental Disabilities
Council
241-2612

Architectural and Transportation
Barriers, Compliance Board
1-800-USA-ABLE

N. Americans with Disabilities Act
Information

General ADA Information
1-800-949-4232

ADA Requirements Affecting
Employment
Equal Employment Opportunity
Commission
1-202-663-4900 (Voice)
1-800-800-3302 (TDD)

ADA Requirements Affecting Public
Accommodations and State and Local
Government Services Department of
Justice, Civil Rights Division
1-202-514-0301 (Voice)
1-202-514-0381 (TDD)

ADA Requirements for Accessible
Design In New Construction and
Alterations

ADA Requirements Affecting
Transportation
Department of Transportation
1-202-366-9305
1-202-755-7687 (TDD)

ADA Requirements for
Telecommunications
Federal Communications
Commission
1-202-632-7260
1-202-632-6999 (TDD)

Burlington ADA Coordinator
658-9300 x197

O. Federal Drug, Alcohol, and Crime
Clearinghouse Network (the network
includes the National Clearinghouse
for Alcohol and Drug Information,
Drug Information and Treatment
Referral Line, Drug Free Work Place
Help Line, National Aids

Clearinghouse, National Criminal
Justice Reference Service)
1-800-788-2800

- P. Office of Professional Regulation
(Montpelier)
(for complaints against Psychologists,
Mental Health Counselors, Dentists,
Doctors of Osteopathy, Optometrists
Physical Therapists, Social Workers,
Nurses, and Chiropractors)
828-2367
1-800-439-8683 (Secretary of State)
- Q. Vermont Board of Medical Practices
(Montpelier) (for complaints against
any Licensed Physicians, Psychiatrists,
Physicians Assistants, Podiatrists)
828-2674
1-800-439-8683 (Secretary of State)

***The following, is an additional list of
groups which may be of interest to you,
or perhaps, could offer specific
information or
assistance with particular issues.***

Attorney General...828-3171
Medicaid Fraud Unit...828-2151
Consumer Protection...656-3183
Governor's Commission on Women
828-2851
Vermont Health Department 863-7280
Alcohol and Drug Abuse 241-2170
Vermont Network Against Domestic Violence
and Sexual Assault (Montpelier) 223-1302
Survivors of Incest Anonymous
862-4225, 985-3616
Vermont Center for Prevention of Child
Abuse 1-800-639-4014
HIV/AIDS Drop-In Support Group
(Burlington) (Vermont Cares)
1-800-649-2437, 863-2437
Outright Vermont (Burlington)
Gay, Lesbian, Bisexual Youth Group for 22
and Under 865-9677
Alzheimer's Association/Green Mountain
Chap. (Montpelier)1-800-698-1022,
229-1022

Consumer Protection Division of the
Attorney General's Office
1-800-649-2424

Food Stamp Hotline
1-800-622-4476

Friends of Recovery
229-6103

Emergency Fuel Hotline for Home
Heating Assistance
1-800-622-4476

Mental Health Law Project
1-800-265-0660

North Central Vermont Family Support
Network 229-2353

Vermont Association for the Blind
1-800-639-5861

Vermont CARES (HIV/Aids Service
Organization) 1-800-649-2437

Vermont Developmental Disabilities
Council 1-888-317-2006

Vermont Psychiatric Association
223-7898

Veteran's Affairs
828-3381

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