

The Right Door for Hope, Recovery and Wellness

Chapter Title	Chapter #		Subject #
Recipient Rights	RR		119
Subject Title	Adopted	Last Revised	Reviewed
Services Suited to Condition	09/30/02	6/15/16	04/24/05; 4/24/06; 12/27/07; 11/23/09; 11/22/10; 1/23/12; 3/25/13; 9/22/14; 9/23/15; 6/15/16; 6/21/17; 6/20/18; 6/19/19; 10/19/20; 10/18/21

POLICY

Application

This policy shall apply to The Right Door for Hope, Recovery, and Wellness and all services operated by or under contract with it.

1.0 Purpose:

Establish guidelines for services suited to the condition of each individual recipient of mental health services.

2.0 Policy:

- A. Services suited to the condition of each recipient shall be provided in the least restrictive setting that is appropriate and available. Transfer between programs, including residential services, which do not affect the level of service provided, may be made for administrative purposes, if the transfer would not be detrimental to the recipient.
- B. Mental Health Services shall be provided in a safe, sanitary, and humane treatment environment.
- C. A recipient has the right to be treated with dignity and respect.
- D. The services to be provided to the recipient shall be determined through the person-centered planning process, in partnership with the recipient, and documented in an individualized plan of service (IPOS).
- E. Services shall be provided in accordance with all applicable standards of care or treatment required by any of the following:
 - a. All State or Federal laws, rules, or regulations governing the provision of community mental health services; and
 - b. Obligations of The Right Door for Hope, Recovery and Wellness established under the terms of its contract with the Michigan Department of Health and Human Services; and
 - c. Obligations of a Provider established under the terms of a contract or employment agreement with The Right Door for Hope, Recovery and Wellness

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- d. The Right Door for Hope, Recovery and Wellness guidelines or protocols of a Provider; and
 - e. Written directives from a supervisor consistent with any of the above; and
 - f. A recipient's Individual Plan of Service.
- F. A recipient's individualized plan of service shall be kept current and modified when clinically indicated. It shall include assessments of the recipient's need for food, shelter, clothing, healthcare, employment opportunities where appropriate, education opportunities where appropriate, legal services and recreation.
- G. The recipient's IPOS shall identify any restrictions or limitations of the recipient's rights and includes documentation describing attempts to avoid such restrictions, as well as what action will be taken as part of the plan to ameliorate or eliminate the need for the restrictions in the future.
- H. Restrictions, limitations, or intrusive behavior treatment techniques are reviewed by a formally constituted committee of mental health professionals with specific knowledge, training, and expertise in applied behavioral analysis. [AR 7199(g)]
- I. The recipient shall be given a choice of physician or mental health professional within the limits of available staff.
- J. Justification for exclusion of individuals chosen by the recipient to participate in the IPOS process shall be documented in the clinical record.
- K. An applicant, his/her guardian, or a minor applicant's parent will be notified that a second opinion to determine if the applicant has a serious mental illness, serious emotional disturbance, or a developmental disability, or is experiencing an emergency situation or urgent situation, may be requested if denied services.
- L. When challenging behaviors are an issue, a functional assessment/analysis will be conducted.
- M. The Behavior Treatment Committee shall review and approve plans to address challenging behaviors.

3.0. Responsibilities:

- A. The CEO is responsible for ensuring that a physician and a psychologist are members of the Behavior Treatment Committee.

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- B. The Recipient Rights Office is responsible for ensuring that procedures to implement the intent of this policy are developed, reviewed, and revised as necessary.
- C. The staff person in charge of coordination of the treatment plan is responsible for ensuring that treatment is determined through a person-centered planning process, and that treatment is provided as outlined in the plan of service. The recipient or his/her guardian will be notified of his/her right to appeal any service decisions.
- D. Access staff are responsible for providing notification of the right to a second opinion to applicants for The Right Door for Hope, Recovery and Wellness services to empowered guardians, or parents of minors.
- E. On-Call staff are responsible for providing notification of the right to a second opinion to applicants for hospitalization, empowered guardians, or parents of minors.
- F. The Access staff are responsible for informing the recipient of his/her right to request a second opinion if the Access staff denies a request for hospitalization, if requested:
 - 1) The CEO arranges the second opinion to be performed within three (3) business days.
 - 2) The CEO and Medical Director review the second opinion if it differs from the opinion of the Access staff.
 - 3) The CEO and Medical Director's decision to uphold or reject the findings of the second opinion is confirmed in writing to the requestor, contains the signatures of the CEO and Medical Director, or verifies that the decision was made in conjunction with the Medical Director.

4.0. Monitoring:

This policy is reviewed annually by the Recipient Rights Advisory Committee.

Compliance with this policy shall be monitored through any of the following: Internal quality improvement reviews and committees; external monitoring and/or accreditation bodies; grievance and appeals data; death reports; incident reports; and Recipient Rights complaint data.

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5.0. References:

Michigan Mental Health Code: Chapter 7 Rights of Recipients of Mental Health Services, 330.1708, 330.1752(1)(0).

Melissa McKinstry, Board Chairperson	Date		