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Reviewed By: Mohamad Khraizat	Title: Health Operations Manager - CHRC
Signature: Parend Holzof He	Date: 12-18-19
Approved By:	ACCESS Board
Signature(s):	Date:

## I. POLICY

It is the policy of the ACCESS Community Health and Research Center (ACCESS) to ensure that all recipients of mental health services and their family members shall be treated with dignity and respect. All rights complaints and/or other reports of alleged rights violations shall be reviewed resolved by the Regional Recipient Rights Consultant and remediated if substantiated. All service providers are also required to utilize the recipient rights procedure in the Michigan Public Health Code Act 368 of 1978, Article 6, Substance Abuse.

### II. PURPOSE

The purpose of this policy is to provide direction for ACCESS staff to protect and promote the dignity and respect to which all recipients of mental health services, and family members of those recipients, are entitled. All applicants have access to the recipient rights procedure and internal grievance procedure. Medicaid recipients also have access to the Michigan Department of Health and Human Services Administrative Hearing Procedure established by federal law and departmental policy.

The Recipient Rights process does not replace a Medicaid beneficiary's right to file a hearing request with the Michigan Department of Health and Human Services, and both processes may possibly occur simultaneously.

### III. APPLICATIONS

This policy applies to all ACCESS Community Health and Research Center (CHRC) employees, interns and volunteers who provide support and treatment on behalf of the ACCESS to any Mental Health and Substance Use Disorder (SUD) Prevention, Treatment

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and Recovery consumers as required in the Administrative Rules for Substance Abuse Programs in Michigan, Section 6231, Part 3, under P. A. 368. It applies to all funding sources under Medicaid, Healthy MI, Block Grant, MI CHILD, PA 2, and MI Health Link.

#### IV. DEFINITIONS

- A. Dignity to be treated with esteem, honor, politeness; to be addressed in a manner that is not patronizing, condescending or demeaning; to be treated as an equal; to be treated the way any individual would like to be treated.
- **B.** Family member A parent, stepparent, spouse, sibling, child, or grandparent of a primary consumer, or an individual upon whom a primary consumer is dependent for at least 50% of his or her financial support.
- C. MCPN Manager of Comprehensive Provider Network
- D. Respect To show deferential regard for; to be treated with esteem, concern, consideration or appreciation; to protect the individual's privacy; to be sensitive to cultural differences; to allow an individual to make choices

# E. Key Words

- Administrative Hearing (AH)
- Administrative Law Judge (ALJ)
- Authorized Hearing Representative (AHR)
- Administrative Tribunal (AT)
- Departmental Review
- Hearings Coordinator
- Staff Coordinator

### V. PROCEDURES

- A. ACCESS Staff will inform Clients of their Rights as described in the Screening and Access to Services Policy Orientation Section.
- **B.** The Quality Assurance Manager and Office of Recipient Rights shall assure that training is provided to the ACCESS staff.
- C. Treatment with dignity and respect shall be defined by the recipient or family member, and considered in light of the specific incident, treatment goals, safety concerns, laws and standards, and what a reasonable person would expect under similar circumstances.
- D. Examples of treating a person with dignity and respect include, but are not limited to, calling a person by his or her preferred name, knocking on a closed door before entering, using positive language, encouraging the person to make choices instead of making assumptions about what he or she wants, taking the person's opinion seriously, including the person in conversations, allowing the person to do things independently or to try new

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things.

- **E.** All staff, volunteers, agents and subcontractors, of ACCESS, shall treat recipients and their family members with dignity and respect, being sensitive to conduct that is or may be deemed offensive to the other person.
- **F.** In addition to the above, treating family members with dignity and respect shall include:
  - 1. Giving family members an opportunity to provide information to the treating professionals;
  - Providing family members an opportunity to request and receive general educational information about the nature of disorders, medications and their side effects, available support services, advocacy and support groups, financial assistance and coping strategies.
- G. Information shall be received from or provided to family members within the confidentiality constraints of Section 748 of the Mental Health Code (MCL 330.1748).
- **H.** All recipient rights communications shall comply with state and federal regulation.
- I. The process of investigating a recipient rights complaint shall be in accordance with the Administrative Rules for Substance Abuse Service Programs in Michigan. Promulgated pursuant to section 6231 (1) of Michigan Public Act 368 of 1978 by the Michigan Department of Public Health; which includes:
- J. Providing simple mechanisms for notifying recipients of their rights, reporting apparent rights violations, determining whether in fact violations have occurred, and for ensuring that firm, consistent, and fair remedial action is taken in the event of a violation of these rules.
- **K.** Recipient rights complaints shall be distributed to the client, the program, the coordinating agency, and the office on a form provided by the office.
- L. Reporting: ACCESS will report recipient rights complaints as required. The information provided will be for demographics purposes only and will not infringed upon the client(s) confidentiality.
- M. Retention: ACCESS will retain recipient rights complaints records for six (6) years following a final decision. If any litigation, claim negotiation, audit or other action involving the records has been started before the expiration of the six (6) year period, the records shall be retained until completion of the action and resolution of all issues which arise from it or until the end of the regular five-year period, whichever is later.
- N. ACCESS will comply with the State's required SUD procedures for Recipient

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Rights (see attached procedure).

#### VI. QUALITY ASSURANCE / IMPROVEMENT:

- A. The ACCESS Quality Assurance Manager
  - a. Will monitor adherence to this policy as one element of its site review process.
- **B.** ACCESS' Quality Assessment and Performance Improvement Program (QAPIP) must include measures for both monitoring of and for the continuous improvement in quality of the program or process described in his policy.

#### VII. COMPLIANCE WITH ALL APPLICABLE LAWS:

ACCESS staff are all bound by all applicable counties, state, and federal laws; rules; regulations and policies; all federal waiver requirements; state and county contractual requirements; and administrative directives in effect at the time of the writing of this policy, or as amended.

# VIII. LEGAL AUTHORITY AND REFERENCES:

A. Michigan Public Health Code Act 368 of 1978, Article 6, Substance Abuse Michigan Public Health Code Act 258 of 1974, Chapter 2A, Substance Use Disorder Services Michigan Mental Health Code, P.A. 258 of 1974, as amended MCL 330.1704; MCL 330.1708; MCL 330.1711; MCL 330.1748 Authority Policies (All Authority Policies refer to the most recent policy at the time of writing):

- Disclosure of Confidential or Privileged Information
- Services Suited to Condition in the Least Restrictive Environment

## IX. EXHIBITS:

Know Your Rights Brochure
Rights Poster
SUD Recipient Rights Form 504
SUD Recipient Rights Form 505
SUD Recipient Rights Form 506
SUD Recipient Rights Form 507
SUD SOP for SUD Recipient Rights