

**WEST MICHIGAN COMMUNITY MENTAL HEALTH
ADMINISTRATIVE MANUAL**

		Chapter: 5	Section: 2	Subject: 6
CHAPTER: Recipient Rights				
SECTION: Recipient Rights in all CMH Settings				
SUBJECT: Freedom of Movement / Treatment Environment / Services Suited to Condition				
Administrative Approval:		Date of Governing Board Action:		Page 1 of 4
		3/19/96		

- I. **PURPOSE:** To establish policy and procedures to ensure recipients receive mental health services suited to condition; provided in a safe, sanitary and humane treatment environment; offered in the least restrictive setting that is appropriate and available; and freedom of movement is not limited or restricted more than is necessary to provide mental health services.

- II. **APPLICATION:** All CMH programs and services operated by or under contract with the West Michigan Community Mental Health Governing Body.

- III. **REQUIRED BY:** MCL 330.1708; 330.1744.

- IV. **DEFINITIONS:** Not applicable.

- V. **POLICY:** It is the policy of the West Michigan Community Mental Health that a recipient's freedom of movement shall not be restricted more than is necessary to provide mental health services to him or her, to prevent injury to him or her or to others, or to prevent substantial property damage, except that security precautions appropriate to the conditions and circumstances of an individual by order of a criminal court or transferred as a sentence-serving convict from a penal institution may be taken. Any restrictions shall be determined by the recipient's Support Team, and shall incorporate the following:
 1. Recipients shall receive treatment in the least restrictive setting that is appropriate and available.
 2. Recipients shall be informed of their rights relating to freedom of movement.
 3. Recipients shall have the freedom to access areas suited to vocational, social and recreational activities while utilizing services provided by WMCMH.

- VI. **PROCEDURES:**
 1. If a service recipient's freedom of movement is restricted, the type of restriction and the date when it expires shall be documented in his/her Individual Plan of Service. In addition, each instance of limitation and justification for its application shall be documented in his/her progress notes. This information shall be reviewed by the Responsible Care Manager and other involved staff members on a weekly basis or when circumstances no longer exist to discuss the service recipient's progress or lack of progress and determine if the freedom movement restriction still needs to be imposed. If it is determined that the restriction is no longer essential it shall be removed. The Responsible Care Manager shall document the above information.

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		3/19/96		

2. Service recipients whose freedom of movement is restricted in an emergency situation shall be reviewed by the Responsible Care Manager and other involved staff members within 72 hours and weekly thereafter to discuss the service recipient's progress or lack of progress and determine if the freedom of movement restriction still needs to be imposed. The above information shall be documented according to the procedures in number one (1) of this policy.
3. A service recipient shall not be transferred to a more restrictive setting unless the justification is documented by the Responsible Care Manager in the recipient's clinical record.
4. The Responsible Care Manager shall inform the recipient/recipient's guardian, parent of a minor child or Probate Court during the hearing process, if applicable, if the service recipient's freedom of movement is restricted.
5. Service Recipient's shall have the right to appeal the freedom of movement for restrictions that are substantial in scope and duration as follows:
 - 5.1 If the service recipient appeals the freedom of movement limitation, he/she shall submit a verbal or written statement to the Responsible Care Manager. The Responsible Care Manager shall place the original statement in the service recipient's clinical file and submit a copy to his/her supervisor.
 - 5.2 The Responsible Care Manager's supervisor shall review that appeal within five (5) working days and determine if the imposed limitation is justified or not.
 - 5.3 If the service recipient does not agree with the decision made by the Responsible Care Manager's supervisor, he/she may appeal to the Deputy Director of Clinical Services or designee. The Deputy Director of Clinical Services or designee shall review the appeal within five (5) working days and determine if the imposed limitation is justified or not.
6. Service Recipient's Appeal Process for Denial of Leave Request:
 - 6.1 If the service recipient appeals the denial of leave request, he/she shall submit a verbal or written statement to the Responsible Care Manager. The Responsible Care Manager shall place the original statement in the service recipient's clinical file and submit a copy to his/her supervisor.

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Administrative Approval:		Date of Governing Board Action:		Page 3 of 4
		3/19/96		

6.2 The Responsible Care Manager's supervisor shall review that appeal within 48 hours and determine if the imposed limitation is justified or not.

If the service recipient does not agree with the decision made by the Responsible Care Manager's supervisor, he/she may appeal to the Deputy Director of Clinical Services or designee. The Deputy Director of Clinical Services or designee shall review the appeal within 48 hours and determine if the imposed limitation is justified or not.

7. Services shall be provided in accordance with all applicable standards of care or treatment required by any of the following:
 - 7.1 All State or Federal laws, rules or regulations governing the provision of community mental health services.
 - 7.2 Obligations of the WMCMH established under the terms of its contract with the Michigan Department of Health and Human Services.
 - 7.3 Obligations of a provider established under the terms of a contract or employment agreement with the WMCMH.
 - 7.4 The WMCMH's policies and procedures.
 - 7.5 Written guidelines or protocols of a Provider.
 - 7.6 Written directives from a supervisor consistent with any of the above.
 - 7.7. A recipient's Individual Plan of Service
8. The service recipient shall be informed that he/she can file a complaint with the Recipient Rights Officer if he/she feels that his/her right to freedom of movement; treatment environment or mental health services suited to condition has been violated.

VII. **SUPPORTING DOCUMENTS:** N/A