

	<b>General Policy</b>			
	<b>Chapter:</b>	Recipient Rights	<b>Policy #</b>	5-4-1
	<b>Section:</b>	Substance Use Disorder Recipient Rights	<b>Revision #</b>	2

- I. **PURPOSE:** To establish policy and procedures regarding the rights of recipients of WCMCMH substance use disorder services.
  
- II. **APPLICATION:** Substance use disorder services operated by the West Michigan Community Mental Health Governing Body.
  
- III. **REQUIRED BY:** Department of Licensing and Regulatory Affairs, Bureau of Community and Health Systems Substance Use Service Program R325.1301 – R325.1399 and accrediting bodies.
  
- IV. **DEFINITIONS:**
  1. **Exploitation:** An action by a staff member that involves the misappropriation or misuse of a recipient’s property or funds for the benefit of an individual or individuals other than the recipient.
  
  2. **Intimate parts:** The primary genital area, groin, inner thigh, buttock, or female breast of a human being.
  
  3. **Recipient:** An individual who receives services from a licensed substance use disorders program in the state of Michigan.
  
  4. **Recipient abuse:** Either of the following:
    - a. An intentional act by a staff member which inflicts physical injury upon a recipient, or which results in sexual contact with a recipient.
    - b. A communication made by a staff member to a recipient, the purpose of which is to curse, vilify, intimidate, or degrade a recipient or to threaten a recipient with physical injury.
  
  5. **Recipient neglect:** An instance in which a recipient suffers injury, temporarily or permanently, because the staff or other person responsible for the recipient’s health or welfare has been found negligent.
  
  6. **Sexual Contact:** The intentional touching, by a staff member, of the recipient’s intimate parts or the intentional touching of the clothing covering the immediate area of the recipient’s intimate parts, if that intentional touching can reasonably be construed as being for the purpose of sexual arousal or gratification.
  
- V. **POLICY:** It is the policy of West Michigan Community Mental Health to implement a Recipient Rights Program that upholds the standards set forth by the Michigan Administrative Rules for Substance Abuse Service Programs.
  
- VI. **PROCEDURES:**
  1. A recipient shall not be denied appropriate service on the basis of race, color, national origin, religion, sex, age, mental or physical handicap, marital status, sexual preference, or political beliefs.


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2. The admission of a recipient to this program, or the provisions of prevention services, shall not result in the recipient being deprived of any rights, privileges, or benefits which are guaranteed to individuals by state or federal law or by the state or federal constitution.
3. A recipient may present grievances or suggested changes in program policies and services to the program staff, to governmental officials, or to another person within or outside the program. In this process, the program shall not in any way restrain the recipient.
4. A recipient has the right to review, copy, or receive a summary of his or her program records, unless in the judgment of the Chief Clinical Officer or his/her designee, such actions will be detrimental to the recipient or to others for either of the following reasons:
  - a. Granting the request for disclosure will cause substantial harm to the relationship between the recipient and the program or to the program's capacity to provide services in general.
  - b. Granting the request for disclosure will cause substantial harm to the recipient.
5. If the Chief Clinical Officer or his/her designee determines that releasing a recipient's records will be detrimental, the recipient is allowed to review non-detrimental portions of the record or a summary of the record. If a recipient is denied the right to review all or part of his or her record, the reason for the denial shall be stated to the recipient. An explanation of what portions of the record are detrimental and for what reasons, shall be stated in the client record and shall be signed by the Chief Clinical Officer or his/her designee.
6. All requests to review records will be directed to the Chief Clinical Officer or his/her designee.
7. A recipient shall not be subjected to recipient abuse, recipient neglect, or exploitation.
8. A recipient shall not be subjected to retaliation or humiliation by a staff person.
9. A recipient has the right to review the written fee schedule. A person applying for services will be given a summary of fees.
10. A recipient is entitled to receive an explanation of his or her bill upon request, regardless of the source of payment.
11. A recipient shall participate in the development of his or her treatment plan. A copy of the treatment plan shall be provided to the recipient.
12. A client has the right to refuse treatment and to be informed of the consequences of that refusal. When a refusal of treatment prevents this program from providing services according to ethical and professional standards, the relationship with the

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recipient may be terminated upon reasonable notice. Reasons for termination will be recorded in the client's case file in the discharge summary.

13. Upon admission, each recipient is provided with program rules, which are also posted in public places in the program. These program rules inform new recipients of the infractions which can lead to discharge. The rules also describe the mechanism for appealing a discharge decision and which staff have authority to make a discharge decision. The recipient signs a form that documents that a written copy of program rules has been received and questions about it answered.
14. If applicable, a recipient shall have the benefits, side effects, and risks associated with the use of any drugs fully explained in language which is understood by the recipient.
15. A recipient has the right to give prior informed consent, consistent with federal confidentiality regulations, for the use and future disposition of products of special observation and audiovisual techniques, such as one-way vision mirrors, tape recorders, television, movies, or photographs.
16. A recipient shall not be fingerprinted, nor shall his/her fingerprints be used as a condition for obtaining services from West Michigan Community Mental Health
17. These policies and procedures shall be provided to each member of the program staff. Each staff member shall review this material and shall sign a form which indicates that he or she understands and shall abide by this program's recipient rights policy and procedures.
18. The Chief Clinical Officer shall designate the WMCMH Recipient Rights Officer or Recipient Rights Advisor as the rights advisor for substance abuse services. The rights advisor shall:
  - a. Attend all of the Substance Abuse Licensing training pertaining to recipient rights.
  - b. Receive and investigate all recipient rights complaints independent of interference or reprisal from program administration.
  - c. Communicate directly with the Coordinating Agency Rights Consultant when necessary.
19. The staff member designated as rights advisor shall not be a provider of counseling services.
20. Rights of recipients shall be displayed in a public place on a poster to be provided by The Michigan Department of Health and Human Services. The poster will indicate the designated rights advisor's name and telephone number.
21. As part of the intake or admission process, each recipient will receive a brochure which summarizes recipient rights.

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22. The intake worker or counselor shall explain each right listed on the brochure to the recipient. The recipient will then be requested to sign the rights acknowledgment form to indicate understanding of the rights. The Rules state we must use a form approved by the Office of Substance Abuse Services.
23. If the recipient is incapacitated, he or she shall be presented with the previously mentioned brochure, explanation of rights, and opportunity to document understanding of the rights as soon as feasible, but not more than 72 hours after admission.
24. The procedures to be followed when the rights advisor receives a formal complaint is described in detail in the Licensing and Regulatory Affairs (LARA) LARA/BCHS-SUD-200 (9/20) Model Recipient Rights Policy and Procedures document. It is this program's policy that the Program Rights Advisor follow the procedures outlined in that document and issue the LARA Program Rights Advisors Investigation Report (BCHS-SUD-205)
25. The WCMH Rights Consultant shall monitor licensed SUD contract agencies program's active RR formal complaint process toward resolution, provide technical assistance as needed and monitor remedial actions.
  - a. Upon receipt of a SUD Recipient Rights Appeal to the Department Form [BCHS-SUD-220], Rights Consultant shall complete the Regional Entity Rights Consultant Investigation Report (BCHS-SUD-215)) within the specified timelines & inform the recipient of their right to further appeal to LARA.
  - b. Following the CA Investigative Report, Rights Consultant shall monitor implementation of applicable remedial action, and, if necessary, report remedial implementation problems to LARA.
  - c. WCMH has been asked to perform the SUD recipient rights functions on behalf of the LRE for Mason, Lake and Oceana Counties. WCMH will maintain supplies of RR materials for SUD contract agency programs (all available on websites to copy).


**VII. SUPPORTING DOCUMENTS:**

Appendix 5-4-1A: Rights Acknowledgement Form

Please refer to the [www.michigan.gov](http://www.michigan.gov), LARA Substance Use Disorder Program Recipient Rights Complaints.

**VIII. POLICY/PROCEDURE REVIEW:**

REV#	APPROVED BY	Policy/Procedure	DATE
NC			11/2015
NC			11/2016
NC			11/2017
1	COC	Procedure	10/2019
2	COC	Title Changes	11/2020

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<b>Board Approval Date: 08/16/2011</b>			

IX. **CHIEF EXECUTIVE OFFICER ENDORSEMENT:**

I have reviewed and approved of policy # 5-4-1 Revision # 2.

CEO: Lisa A. Williams      Approval Signature: \_\_\_\_\_

**WEST MICHIGAN CMH  
ACKNOWLEDGEMENT STATEMENT**

**Required by**

**MDHHS Administrative Rules for Substance Abuse Service Programs  
R 325.1397 (2)  
&  
The PIHP Contract**

I hereby certify that I have been provided electronic access to the WMCMH Substance Use Disorder Recipient Rights Policy & Procedures 5-4-1.

I understand and agree to abide by the WMCMH Substance Use Disorder Recipient Rights Policy & Procedures 5-4-1.

\_\_\_\_\_  
Staff Signature

\_\_\_\_\_  
Date

Distribution: Staff Member  
WMCMH Personnel File