



HURON BEHAVIORAL HEALTH  
**PROCEDURE**

Procedure #: **RR.2.23**  
Issue Date: **09/14/00**  
Rev. Date: **04/24/18**  
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**Title: Recipient Rights – Recipient Rights System Procedure**

**Prepared By: Recipient Rights Officer**

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**Purpose:**

To define the overall Recipient Rights System at Huron Behavioral Health.

**Scope:**

This procedure applies to all employees (including full-time employees, part-time employees, contractual providers, volunteers, students, and/or interns), of Huron Behavioral Health (HBH) programs, both direct and contracted.

**Information:**

- It is the policy of Huron Behavioral Health that the rights of all consumers served are safeguarded.
- All agencies, programs and service providers that have entered into a contractual relationship with HBH must, as a condition of that contract, implement and abide by the HBH recipient rights protection system.
- The recipient rights office will be protected from pressures that could interfere with the even-handed, and thorough performance of its duties.

**Procedure:**

**STANDARDS:**

- A. **Huron Behavioral Health employs the Recipient Rights Officer.** The hiring and dismissal procedures are established by HBH's personnel policies. The hiring and dismissal decisions are ultimately made by the Executive Director with input from the Recipient Rights Advisory Committee (RRAC).
- B. **The office of Recipient rights is subordinate only to the Executive Director.**
- C. **The Executive Director will ensure all of the following:**
  1. Within one (1) year of the effective date of employment, HBH Executive shall attend those sections of the Basic Skills Training Program designated by the Michigan Department of Health and Human Services (MDHHS).
  2. The agency has written policies and procedures for the operation of the rights system on file with MDHHS Office of Recipient Rights (ORR).
  3. Education and training in recipient rights policies and procedures are provided to HBH's recipient rights advisory committee and the appeals committee.
  4. The process for funding the rights office includes a review of the funding by the recipient rights advisory committee.
  5. The rights office will have unimpeded access to all programs and services operated by or under contract (including staff employed or under contract) to HBH and all evidence necessary to conduct a thorough investigation or to fulfill its monitoring function.
  6. The staff of the rights office receive training each year in recipient rights protection (see [RR.2.16](#)).
  7. Each contract between HBH and a provider requires that the provider and his/her employees receive recipient rights training and that consumers will be protected from rights violations while they are receiving services under the contract.
  8. The policies and procedures mandate employee cooperation in recipient rights investigations.
  9. HBH protocol specifies how rights services will be provided including during a temporary absence of the Rights Officer.
  10. A Recipient Rights Officer is selected who has the education, training, and experience to fulfill the

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responsibilities of the office.

11. There is no selection, replacement or dismissal of the Recipient Rights Officer without first consulting the Recipient Rights Advisory Committee.
12. A grievance procedure is available to the rights officer in the event of disciplinary action or discharge.
13. A local grievance and dispute resolution process for Medicaid/non-Medicaid consumers is in place compliant with federal and state regulations.
14. The Rights officer has no direct clinical service responsibilities.
15. An annual report is submitted to the HBH Board of Directors and MDHHS no later than December 30<sup>th</sup> of each year for the preceding fiscal year, prepared by the recipient rights office reviewed and commented on by the Recipient Rights Advisory Committee on the current status of recipient rights in reviewing the operations of the rights office. The annual report includes, at a minimum, all of the following:
  - a. Summary data, by category, including complaints received, number of reports filed, number of reports investigated by provider
  - b. Number of substantiated rights violations by category and provider
  - c. Remedial action taken on substantiated violations by category and provider
  - d. Training received by staff of the rights office
  - e. Training provided by rights office to contract providers
  - f. Desired outcomes established for the rights office and progress toward these outcomes
  - g. Recommendations to the HBH Board
16. Ensures there is proper coverage in the absence of the Rights Officer. In the extended absence of the HBH Recipient Rights Officer, coverage is provided by another board within the regional affiliation.

**D. Required Policies and Procedures:**

1. HBH has developed policies and procedures as a mechanism for prompt reporting, review, investigation, and resolution of apparent or suspected Rights violations which are consistent with Chapter 7 and 7A of the Michigan Mental Health Code, and are designed to protect recipients from and also prevent repetitions of, violations of rights as guaranteed by Chapter 7 and 7A (330.1752) as follows:
  - a. RR.2.01 [Recipient Abuse & Neglect Procedure](#)
  - b. RR.2.02 [Appeals Procedure](#)
  - c. RR.2.03 [Right to Access Entertainment Material, Information, and News Procedure](#)
  - d. RR.2.04 [Change in Type of Treatment Procedure](#)
  - e. RR.2.05 [Comprehensive Examination Procedure](#)
  - f. RR.2.06 [Communication, Telephone, Visiting Rights Procedure](#)
  - g. RR.2.07 [Confidentiality and Disclosure of Information Procedure](#)
  - h. RR.2.08 [Duty to Warn Procedure](#)
  - i. RR.2.09 [Fingerprinting/Photographing, Audio-taping and Use of 1-Way Glass Procedure](#)
  - j. RR.2.10 [Freedom of Movement Procedure](#)
  - k. RR.2.11 [Informed Consent Procedure](#)
  - l. RR.2.13 [Personal Property & Funds Procedure](#)
  - m. RR.2.14 [Privacy and Human Dignity Procedure](#)
  - n. RR.2.15 [Psychotropic Medication Procedure](#)
  - o. RR.2.16 [Recipient Rights Officers Qualifications and Training Procedure](#)
  - p. RR.2.17 [Residential Labor Procedure](#)
  - q. RR.2.18 [Least Restrictive Treatment Procedure](#)
  - r. RR.2.19 [Restraint Procedure](#)
  - s. RR.2.20 [Seclusion Procedure](#)
  - t. RR.2.21 [Services Suited to Condition Procedure](#)
  - u. RR.2.22 [Sterilization, Abortion, & Contraception Procedure](#)
  - v. RR.2.23 [Recipient Rights System Procedure](#)

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- w. RR.2.24 [Treatment by Spiritual Means Procedure](#)
- x. RR.2.25 [Records Retention and Disposal Procedure](#)
- y. RR.2.36 [Grievance and Appeals Procedure](#)

**E. The Office of Recipient Rights will abide by the following:**

1. Provide or coordinate the protection of recipient rights for all directly operated or contracted services.
2. Ensure that consumers, parents of minor consumers, and guardians or other legal representatives have access to summaries of rights guaranteed by Chapter 7 and 7A of the Michigan Mental Health Code.
3. Ensure that consumers, parents of minor consumers, and or other legal representatives are notified of the rights guaranteed by Chapter 7 and 7A of the Michigan Mental Health Code in an understandable manner, both at the time services are initiated and periodically during the time services are provided to the consumer. The receipt shall be documented in the case record.
4. Ensure that all consumers, guardians, parents or other concerned parties have ready access to rights complaint forms. The phone number and address of the rights office and name of the rights officer is conspicuously posted at all service sites.
5. Maintain a record system for all reports of apparent or suspected rights violations received by the agency including a mechanism for logging all complaints and securing storage of all investigative documents and evidence.
6. Ensure that each service site is visited with the frequency necessary for protection of rights but in no case less than annually.
7. Ensure that all individuals employed by HBH or contract agencies receive training related to recipient rights protection before or within thirty (30) days of employment.
8. Review recipient rights policies and the rights system of each provider under contract with HBH (if they have their own rights system) to ensure the rights system provider is in compliance with the Michigan Mental Health Code, is of a uniformly high standard, and in compliance with all MDHHS training requirements. The rights officers/advisors shall attend updated training as specified by MDHHS-ORR every three (3) years during their employment.
9. Review and comment as needed on all HBH policies impacting the rights of consumers.
10. Serve as a consultant to the Executive Director and to all HBH staff in rights-related matters.
11. Attend meetings such as Behavior Treatment Plan Review Committee (BTPRC) meetings, Quality Improvement Committee meetings, Executive Staff meetings, Board meetings, and individual case meetings (when appropriate) when rights-related issues are discussed.
12. Ensure that all reports of apparent or suspected violations of rights within HBH are investigated in accordance with requirements of Chapter 7A of the Michigan Mental Health Code.
13. Ensure that reports of alleged or suspected rights violations that did not warrant investigation are recorded in accordance with #5 above.
14. Provide Semi-annual summaries of complaint data consistent with the required annual report. The summary will include remedial action(s) taken on substantiated complaints by category to MDHHS and the HBH Recipient Rights Advisory Committee.

**F. The Recipient Rights Advisory Committee shall:**

1. Be appointed by the HBH Board consisting of at least 6 members who represent the various perspective of Huron County's geographic area. At least 1/3 of the membership will be primary consumers or family members. Of the 1/3, one-half will be primary consumers.
2. Meet quarterly or at least semi-annually or as necessary to carry out its responsibilities.
3. Maintain a current list of membership names and a list of categories represented by members, which is available to individuals upon request.

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4. Protect the recipient rights office from pressures, which could interfere with the impartial, even-handed and thorough performance of its duties.
5. Recommend candidates for recipient rights officer to the Executive Director.
6. Consult with the Executive Director regarding any proposed dismissal of the Recipient Rights Officer.
7. Serve in an advisory capacity to the Executive Director and Recipient Rights Officer.
8. Serve as the Appeals Committee for recipient right complaint appeals.
9. Ensure meetings of the RRAC comply with the Open Meetings Act, Act No. 267 of the Public Acts of 1976, MCL 15.261 to 15.275.
10. Ensure minutes of RRAC meetings are maintained and made available to individuals upon request.
11. Review and provide comments on the annual rights report submitted by the Executive Director to the HBH Board.

**G. The Rights Advisors for each HBH program or facility shall:**

1. Report directly to the Recipient Rights Officer regarding recipient rights issues.
2. Participate in in-service training regarding the Recipient Rights System.
3. Ensure that consumers and others have access to Recipient Rights Complaint Forms (DCH-0030).
4. Complete all training required by MDHHS-ORR and Michigan Mental Health Code, which will include: Basic Skills, Art of Investigation and Developing Effective Rights Training.
5. Assist consumers, his/her relatives, friends, guardians and/or staff members in completing the Recipient Rights Complaint Form.
6. Report to the Recipient Rights Officer oral complaints made by service consumers, his/her relatives, guardians, friends and/or staff members.
7. Forward all alleged violations (marked "Confidential") to the Recipient Rights Officer.
8. Assist the Recipient Rights Officer in investigating recipient rights complaints when asked.
9. Provide recipient rights services and may serve as a back-up in case the Recipient Rights Officer is absent.

**H. Records:**

1. Records compiled in the course of investigating an alleged rights violation shall be retained by the Recipient Rights Officer, maintained independent of the consumer's case record, or an employee's personnel record, and shall be subject to confidentiality safeguards of Public Act 258, Section 748 and the Health Insurance Portability and Accountability Act (HIPAA) privacy regulations.

**I. Complaint Investigation and Resolution:**

1. The HBH Rights Officer will assure that consumers, parents of minors, guardians, and others have ready access to complaint forms.
2. The HBH Rights Officer ensures that each rights complaint is recorded upon receipt.
3. Acknowledgement of the recording of the complaint is sent along with a copy of the complaint to complainant within five (5) business days.
4. The complainant will be notified within five (5) business days after receiving the complaint if it is determined that no investigation of the complaint is warranted.
5. Assistance will be given to the consumer/other individual with the complaint process as necessary.
6. The consumer (or other individual) will be advised that there are advocacy organizations available to assist in preparation of a written rights complaint and offer to make the referral.
7. In the absence of assistance from an advocacy organization, the office will assist in preparing a written

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complaint, which contains a statement of the allegation, the right allegedly violated, and the outcome desired by the complainant.

8. The consumer (or other individual) will be informed of the option of mediation and under what circumstances and when it may be exercised.
9. If a rights complaint is filed regarding the conduct of the Executive Director or the Recipient Rights Officer, HBH Board will be advised and they will direct the Rights Officer to refer to another Community Mental Health Services Program (CMHSP) or to the state office of recipient rights for further investigation.
10. The rights office will initiate investigation of apparent or suspected rights violations in a timely and efficient manner.
11. The rights office will ensure that rights complaints filed by consumers or anyone on their behalf are sent/given to the designated rights officer/advisor in a timely manner.
12. Subject to delays involving pending action by external agencies (Children's Protective Services, law enforcement, etc.), the office completes investigations no later than ninety (90) calendar days following receipt.
13. The rights office will ensure investigation is immediately initiated in cases involving alleged abuse, neglect, serious injury, or death of a consumer when a rights violation was apparent or suspected.
14. Investigation activities for each rights complaint will be accurately recorded by the rights office.
15. The rights office will use a preponderance of the evidence as its standard of proof in determining whether a right was violated.
16. The rights office will issue a written status report every thirty (30) calendar days during the course of the investigation to the complainant, respondent, and the responsible mental health agency. The 30 days status report shall contain:
  - a. statement of the allegations
  - b. statement of the issues
  - c. citations to relevant provisions to the Michigan Mental Health Code, rules, policies, and the guidelines
  - d. investigative progress to date, e) expected date for completion
17. Upon completion of the investigation, the office will submit a written investigative report to the respondent and to the Executive Director of HBH. (Issuance of the written investigative report may be delayed pending completion of investigations that involve external agencies). The written investigative report shall include all of the following:
  - a. statement of the allegations
  - b. statement of the issues involved
  - c. citations to relevant provisions of the Michigan Mental Health Code, rules, policies, and guidelines
  - d. investigative findings, e) conclusions, f) recommendations, if any
18. The rights office will ensure that for substantiated rights violations, the respondent and/or HBH took appropriate remedial action that met all the following requirements:
  - a. corrects or provides remedy for the rights violation
  - b. is implemented in a timely manner
  - c. attempts to prevent a recurrence of the rights violation
19. Remedial action(s) will be taken on substantiated violations and is documented and made part of the record maintained by the rights office.
20. The Executive Director or his/her designee submits a written summary report to the complainant and consumer, if different than the complainant, within ten (10) business days after receiving a copy of the investigative report from the rights office.
21. The written summary report shall contain all of the following:
  - a. Statement of the allegations.

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- b. Statement of the issues involved.
  - c. Citations to relevant provisions of the Michigan Mental Health Code, rules, policies, and guidelines.
  - d. Summary of investigation findings of the rights office.
  - e. Conclusions of the rights office.
  - f. Recommendations made by the rights office,
  - g. Action taken, or plan of action proposed, by the respondent.
  - h. A statement describing the complainant's right to appeal and the grounds for the appeal.
22. Information in the summary report is provided within the constraints of the confidentiality/privileged communications sections (748, 750) of the Michigan Mental Health Code.
  23. Information did not violate the rights of any employee (ex. Bullard-Plawecki Employee Right to Know Act, Act No. 397 of the Public Acts of 1978, MCL 423.501 et. Seq.).
  24. HBH and each service provider under contract with HBH will ensure that appropriate disciplinary action is taken against those who have engaged in abuse or neglect.
  25. The officer shall comply with pertinent HBH policies to assure that investigations are conducted in a manner that does not violate employee rights.
  26. Complainants, rights office staff, and any staff acting on behalf of a consumer will be protected from harassment or retaliation resulting from recipient rights activities. Appropriate disciplinary action will be taken if there is evidence of harassment or retaliation, in accordance with HBH disciplinary policies ([ORI.1.07 Discipline Compliance Policy](#)).
  27. When either HBH or provider personnel fail to report suspected violations of rights, appropriate administrative action will be taken.
  28. Review incident reports to determine if they involve possible rights violation.

### J. Recipient Rights Site Review:

1. The Behavioral Health and Developmental Disabilities Administration (BDHHA) and the MDHHS Office of Recipient Rights (ORR) conduct on-site assessment of HBH's recipient rights system every three (3) years.
2. An audit report is generated and is provided to HBH with an overall score, with a rating of one of the following:
  - FC – Full Compliance
  - SC – Substantial Compliance
  - LTSC – Less Than Full Compliance
3. If HBH receives a rating of LTSC, a Plan Of Correction (POC) will be developed and submitted to the ORR within thirty (30) days. The ORR will respond back to HBH within fifteen (15) days.
4. If the ORR approves the POC, the ORR will monitor the POC's implementation for ninety (90) days. If the POC is fully implemented within 90 days, no additional action is required of HBH. However, if the plan is not implemented within the 90-day monitoring period, the ORR will recommend to BHDDA that HBH be placed on a "Provisional" status. In sixty (60) days, the ORR will conduct an on-site review of HBH to determine if HBH has fully implemented the POC.
5. If HBH does not achieve Full Compliance within thirty (30) days of the on-site review, the ORR may recommend monetary sanctions against HBH and continual monitoring will occur until the POC is fully implemented and Full Compliance is achieved.

### Definitions/Acronyms:

Code Protected Rights: A right that is guaranteed by the Michigan Mental Health Code (Public Act of 1995), the Administrative Rules of the Michigan Department of Health and Human Services, or applicable law.

Complainant: A consumer or any other person who files a complaint indicating that a right has been violated.

Intervention: The Rights Office acts on behalf of a consumer to obtain resolution of an allegation of a rights



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violation contained in a complaint through processes other than an investigation.

**ORR:** Michigan Department of Health and Human Services Office of Recipient Rights (MDHHS-ORR)

**Preponderance of Evidence:** A standard of proof which is met when, based upon all available evidence; it is more likely that something is true than untrue; greater weight of evidence, not to quantity (number of witnesses), but as to quality (believability and greater weight of important facts); more than 50 percent.

**Refuted:** A determination made by the Recipient Rights Officer that the consumer rights complaint was not a violation.

**Provider:** The Executive Director of Huron Behavioral Health. The Executive Director may delegate his/her duties to individual facilities, programs, or entities operated by or under contract with HBH but shall ensure county-wide uniformity in recipient rights procedures.

**Recipient/Consumer:** A person who receives mental health services from a program or facility operated by or under contract with Huron Behavioral Health. People who receive purely educational or information services are not considered mental health recipients.

**Recipient Rights Officer:** An employee of the Board who assumes the responsibility for safeguarding the rights of consumers.

**Rights Advisor:** An employee of HBH, an employee of a contract agency or a contractor, designated to provide rights services.

**Remedial Action:** Action taken by the Executive Director (or his/her designee) to correct a violation, prevent a violation from re-occurring, and/or remove any contributing conditions.

**Substantiated:** A determination made by the Recipient Rights Officer that the recipient rights complaint was a rights violation.

**Unsubstantiated:** A determination made by the Recipient Rights Officer that a recipient rights complaint was unable to be substantiated or refuted.

### ACRONYMS:

*BTPRC* – Behavior Treatment Plan Review Committee

*CMHSP* – Community Mental Health Services Program

*DCH* – Department of Community Health (changed to MDHHS)

*FC* – Full Compliance

*HBH* – Huron Behavioral Health

*HIPAA* – Health Insurance Portability & Accountability Act

*LTSC* – Less Than Substantial Compliance

*MDHHS* – Michigan Department of Health and Human Services

*ORR* – Office of Recipient Rights

*RRAC* – Recipient Rights Advisory Council

*SC* – Substantial Compliance

### **Forms:**

DCH-0030 Recipient Rights Complaint Form

### **Records:**

N/A

### **Reference(s) and/or Legal Authority**

Michigan Mental Health Code, 330.1755(1), 330.1722, 330.1752, 330.1757, 330.1776-1782, 330.1788, 330.1753

Americans with Disabilities (ADA) Act of 1973 (section 504)

[ORI.1.07 Discipline Compliance Policy](#)

RR.2.01 through RR.2.25 and RR.2.36 (see list and hyperlinks defined in section “D” above)

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Change Letter	Date of Change(s)	Changes
A	05/23/03	Documentation brought into the new procedure format and numbered for tracking, minimal changes made to content. Redefined preponderance of evidence included new master contract requirements for training, added heading "Complaint Investigation and Resolution" and broke it out of RR Officer responsibilities for clarification. Re-ordered information for clarity
B	07/24/03	C.9 – Added "(RR.2.36)"; D.7 - changed "three (3) months" to "thirty (30) days"; D.8 – added "if they have their own rights system"; D.11 – Added "(when invited)", Definitions – Changed "Intervention" to match state reporting definition, Reference section – added ADA reference and RR.2.36, added second sentence in H.26 , added reference "ORI.1.07 Discipline Compliance Policy" (to respond to DCH Rights Audit POC).
C	03/01/06	Revised FIA to "Childrens Protective Services throughout document, changed "service recipient" to "consumer" 3 places, removed references to 330.1232A(1)(b), 330.1704, 330.1712 & reference to DCH contract, removed "C.9" which stated "a grievance procedure is available for complainants..." in accordance with the Rights Assessment, #E.11 – changed "invited" to "appropriate", E.8 – added "Mental Health Code, is....", removed/changed the words "service recipient" to "consumer" or "recipient" throughout document, C.15 – added agreement with AAM, reformatted, added hyperlinks, added section D (Policies & Procedures).
D	03/23/09	Updated language for required training for contracts, E8, added reviewing the incident reports H28 (added last sentence in E.8, added I.28)
E	04/23/12	Procedure- A #16 removed "and also with Sanilac County Community Mental Health Authority." D- Added "z. RR.2.36", I- #26 added "(ORI.1.07 Discipline Compliance Policy), Reference- moved RR.2.36 to the line below. Approved by the HBH Recipient Rights Advisory Committee 04/23/12.
F	05/15/13	Annual review conducted – no content changes made
G	12/16/14	In C.16 removed "Access Alliance of Michigan (AAM)" and replaced with statement about "another board in the regional affiliation", reformatted page margins, no other content changes made.
H	04/28/15	Reviewed by HBH Recipient Rights Advisory Council – no content changes made
I	02/07/17	Reviewed by the Recipient Rights Advisory Committee – changed "Michigan Department of Community Health/MDCH" to "Michigan Department of Health and Human Services/MDHHS" throughout document (8 places), in G.2 changed state form "DCH-2500A" to "DCH-0030", changed "Mental Health Code" to "Michigan Mental Health Code" throughout document (12 places), in "Forms" section added "DCH-0030", in "Acronym" section added "CMHSP" & "BTPRC", made several small wording/grammatical changes/corrections throughout document without changing sentence content.
J	10/16/17	Removed D.1.I ("RR.2.I2 Medication Administration/Stop Order Procedure")
K	04/24/18	Added section "J" to comply with April 12, 2018 MDHHS letter entitled "Subject: Compliance".