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| **MONTCALM CARE NETWORK**  **611 North State Street, Stanton, MI 48888** | |
| SUBJECT: Specific Recipient Rights for  the Integrated Dual Diagnosis Treatment Program | Section: 8950 |
| Effective Date: November 27, 2007 | Revised Date: |
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# A. Guarantee of rights

Persons enrolled with the Integrated Dual Diagnosis Treatment Program are entitled to all of the rights, privileges and benefits guaranteed to all consumers of Montcalm Care Network services, and guaranteed by Michigan or Federal Law and State and Federal Constitutions. Recipients may not be deprived of these rights, privileges and benefits.

# B. Nondiscrimination

A recipient of Integrated Dual Diagnosis Treatment Program services shall not be denied access to needed or appropriate services on the basis of inability to pay, race, color, ethnicity, religion, age, gender, religion, national affiliation, marital status, sex, sexual orientation or preference, height, weight, arrest record, disability or handicap, political beliefs or affiliation or, on the presence of coexisting medical or substance abuse disorders any other legally protected status. ( Also refer to Policy #8110.)

# C. Grievance and complaint Rights

A recipient of Integrated Dual Diagnosis Treatment Program services shall not be restrained from presenting grievances or suggested program policy and service changes to program staff, governmental officials, or to another person within or outside of the program. Refer to Policy #8800 and associated procedures for detailed information about additional rights and procedures for formal processes related to grievance, complaint, and appeals.

# D. Right to Access Records

1. A recipient of Integrated Dual Diagnosis Treatment Program services has the right to review, copy or receive a summary of his or her program records. Refer to Policy #11861 and associated procedures for detailed information about specific procedures and additional rights as required by Federal and State Law.
2. For persons enrolled with the Integrated Dual Diagnosis Treatment Program, requests to review records must be made to the Program Director who is the only staff member authorized to grant such requests.

# E. Protection from Abuse and Neglect

1. Program staff members, contractors or other agents of Montcalm Care Network shall not physically, sexually or mentally abuse, or neglect a recipient.
2. Program staff members, contractors or other agents of Montcalm Care Network shall immediately report all incidents or reports of abuse or neglect of recipients to the appropriate authorities. (Refer to Policy #8905 and associated procedures.)

# F. Fees

1. Services are based on an ability to pay as defined by the Michigan Department of Health & Human Services. Recipients are entitled to a review of the established ability to pay when there is a change in their financial circumstance and at least annually. (Refer to Policy #6355 and associated procedures.)
2. A recipient has a right to receive a copy and to review the fee schedule at the time of admission for services and to receive notice of any changes in the fee schedule at least two (2) weeks in advance of the implementation of changes.
3. A recipient has a right to an explanation of a bill for services upon request and regardless of the source of payment. Requests for explanation may be made to the business office through any means of communication. The review will be scheduled at Montcalm Care Network during regular business hours and at a time convenient for the Recipient. Recipients shall be informed of this right at the time of admission to the program.

# G. Service and treatment Planning

1. A recipient shall participate in the Person/Family Centered Planning process.
2. The process shall be explained to the recipient. The recipient shall be informed that this is a cooperative and collaborative process between the recipient and treatment providers requiring mutual agreement. (Refer to Policy #8118 and associated procedures.)
3. A recipient has a right to refuse services or treatment and to be educated about the actual and potential consequences of refusal.
4. Services to the recipient may be terminated if the refusal prevents the program from providing services in keeping with prevailing ethical and professional standards of care and with the written approval of the program Director and Medical Director.
5. Discharges or terminations from the Dual Diagnosis Treatment Program are for periods of at least thirty (30) days.
6. Written notice of any termination of treatment or service must be provided to the consumer and the reasons for termination documented in the clinical record. (Refer to Policy #8800 and associated procedures for notice requirements and processes.)

# H. Program Rules

1. Recipients enrolling with the Dual Diagnosis Treatment Program are entitled to a copy of any Integrated Dual Diagnosis Treatment program rules including any rule violations that may result in discharge or termination from services.
2. Recipients are entitled to information about processes available to appeal a discharge or termination of services. (Refer to Policy #8800 and associated procedures for detailed information about appeal processes.)
3. Recipients enrolled with the Dual Diagnosis Treatment program are entitled to know what staff have the authority to authorize a discharge or termination of services.
4. The recipient must sign a statement verifying receipt of this information.

# I. Research or experimental procedures

1. The program shall not participate in investigative, educational, experimental or research procedures without the informed consent of the recipients.
2. Recipients have the right to refuse to participate without jeopardizing services.
3. All State and Federal Rules, Laws and Regulations shall be followed regarding research using human subjects. (Also refer to Policy #8245).

# J. Medication

1. If medications are used for the treatment of a recipient, the recipient shall be provided with information about the purpose, benefits, risks, potential side effects, associated with the use of the medication by the prescribing physician as designated by the Medical Director.
2. This information shall be provided in language understandable to the recipient
3. The recipient must provide written informed consent when treatment with medications can be initiated.
4. Refer to Policy #8305 and associated procedures for additional requirements related to medication utilization and practices.

# K. Photography, voice recording video taping, fingerprinting and use of one-way mirrors

1. Photography, videotape devices, voice records and other audio-visual equipment shall not be used to record the actions or images of recipients unless the recipient has given informed consent for the use of these procedures. (Also refer to Policy #8904 and associated procedures.)
2. One-way mirrors shall not be used to observe recipients unless the recipient has provided informed consent for the use of this device. (Also refer to Policy #8904 and associated procedures.)
3. Fingerprints may be taken and used in connection with research, treatment or to determine the name of the recipient if the recipient has provided informed consent for this procedure. Fingerprints must be filed in a separate part of the consumer clinical file and destroyed or returned to the recipient when these are no longer required based on the specific purpose as outlined in the recipient consent. (Also refer to Policy #8904 and associated procedures.)

# L. Staff Training and Attestation

1. Staff will be provided with training related to these policies at least annually.
2. Staff shall review these policies and attest to their receipt and understanding in writing.
3. Staff shall agree to comply with these policies in writing.
4. These attestations and agreements shall be maintained in staff files.

# M. RR System

1. A nonclinical staff person shall be designated by the director as the Recipient Rights Advisor for persons receiving Integrated Dual Diagnosis Services.
2. The Recipient Rights Advisor shall:
   1. Attend all Substance Abuse Licensing training pertaining to recipient rights;
   2. Receive and investigate all recipient rights complaints independent of and free from interference or reprisal from program administration; and,
   3. Communicate directly with the Coordinating Agency Rights Consultant when necessary.
3. Right of recipients shall be displayed in a public place on a poster to be provided by BSAS. The poster shall include the name and telephone number of the Rights Advisor and the name address and telephone number of the Rights Consultant.
4. Each recipient shall be provided with a brochure provided by BSAS, summarizing these Recipient Rights.
5. These rights will be explained to the recipient at the time of admission to the program and the recipient will be asked to acknowledge this explanation and receipt of information in writing. If the recipient refuses to provide this acknowledgement, the refusal and reason for refusal shall be documented in the recipient file.
6. If the recipient is incapacitated at the time of admission to the program the explanation of rights may be delayed but in any case not for more than seventy-two (72) hours after admission.
7. In the event of a formal complaint, the Recipient Rights Advisor will follow the procedures outlined in detail in the January 1982 Recipient Rights Procedure Manual.
8. The Board shall appoint a Recipient Rights Committee and the Committee and Board shall review all program policies at least annually to ensure that policies and procedures are not discriminatory in nature and that they comply with all current rules, laws and regulations.