

CHAPTER Recipient Rights	CHAPTER 04	SECTION 003	SUBJECT 35
SECTION Individual Rights		DESCRIPTION Change in Type of Treatment	
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APPLICATION:

<input checked="" type="checkbox"/> CMH Staff	<input checked="" type="checkbox"/> Board Members	<input checked="" type="checkbox"/> Provider Network	<input checked="" type="checkbox"/> Employment Services Providers
<input checked="" type="checkbox"/> Employment Services Provider Agency	<input checked="" type="checkbox"/> Independent Contractors	<input checked="" type="checkbox"/> Students	<input checked="" type="checkbox"/> Interns
<input checked="" type="checkbox"/> Volunteers	<input type="checkbox"/> Persons Served		

POLICY:

Lapeer County Community Mental Health (LCCMH) ensures persons served have the right to change the type of treatment received.

STANDARDS:

- A. The type of treatment administered at LCCMH will initially be determined by mutual agreement between the person served and the intake personnel.
- B. Each person served has the right to request changes or modifications in the treatment plan, and/or a change in therapist / case manager assigned, and/or to receive a second opinion. The written Plan of Service (Section 1712 of the Michigan Mental Health Code) is addressed in the agency’s Person-Centered Planning policy.
- C. A person served will be given a choice of physician or other mental health professional in accordance with the policies of the Community Mental Health Services Program (CMHSP) or service provider and within the limits of available staff.

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PROCEDURES:

- A. The Individual Plan of Service will be developed within 14 days of the commencement of services.
1. A quarterly and yearly review, or a review upon request, will be held at which time the overall plan and any of its sub-components will be formally reviewed for possible modification or revision [Administrative Rule 7199(2)(j)].
 2. At any time, if the person served is not satisfied with their Individual Plan of Service (IPOS), the person served, or their guardian or parent of a minor recipient may make a request for review to the designated individual in charge of implementing the plan. [See Mental Health Code 712(2)].
 3. When persons served request changes or modifications in treatment plans, clinicians should work cooperatively to affect a mutually agreeable plan and to keep the plan current and modified when indicated. [MHC 712(1), MHC 752].
 4. If such an agreement cannot be reached, the therapist will inform the person served of their right to discuss the matter with the designated supervisor or with the Recipient Rights Officer. It is the responsibility of the therapist to inform the supervisor, who will contact the person served or schedule an appointment. The above review is to be completed within 30 days and is carried out in a manner approved by Community Mental Health (MHC 712[2]).
- B. If the person served continues to express dissatisfaction with their plan, person served can contact Customer Service or they may file a complaint with the Recipient Rights Office.
- C. Persons served requesting a change in therapist and/or case manager may do so by directly informing the therapist and/or case manager, or, when this seems unreasonable, the designated supervisor.
1. If a decision of the supervisor is appealed, the person served can contact Customer Service or file a complaint with the Recipient Rights Officer.
- D. A person served may request through the therapist or designated supervisor, an in-house review (second opinion). A person served may also, at their own

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expense, request the opinion of an outside consultant after signing appropriate Release of Information forms.

- E. A person served who wishes to make a grievance or a change in program policies or services may propose the above to Agency staff, LCCMH management, or the Office of Recipient Rights.
- F. The person served will not be restricted from or denied services as a result of presenting a grievance.
- G. The rationale for such changes will be recorded in the quarterly status report and the annual case review, and this information will be available to the person served.
- H. The Person-Centered Planning Process will determine when a person served is ready for another type of treatment and care, release discharges, or has received maximum benefit from the programs.
- I. Justification for a change from one type of treatment and care within the program will be in writing and made part of the plan of service and case record of the person served.
- J. A person served must be informed orally and in writing of their clinical status and progress at reasonable intervals established in the IPOS in a manner appropriate to their clinical condition (MHC 714).
- K. Should an irreconcilable disagreement arise between person served and clinician over change in type of treatment, the clinician will bring this matter to supervision and the supervisor's opinion and recommendation will be made available to the person served. If the person served continues to express dissatisfaction over change in type of treatment, the person served can contact Customer Service or file a complaint with the Recipient Rights Officer.
- L. Under Person-Centered Planning Guidelines, the person served, parent and/or guardian should be involved in the development of the treatment plan. The treatment plan includes a signature line on the review form for them to sign to show their participation. If the guardian is not readily available or does not wish to participate in the development of the treatment plan in person, their input is sought via telephone or written communication. A copy of the treatment plan and treatment plan review is mailed to the guardian.

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For more information regarding the Person-Centered Planning process see the Policy and Procedure entitled Person-Centered Planning policy 02.001.15.

REFERENCES:

Plan of Service (Section 1712 of the Michigan Mental Health Code)

LKJ/kn

This policy supersedes
#10/09029 dated 10/06/2009.
