HIAWATHA BEHAVIORAL HEALTH

Administrative Policy

CHAPTER: Recipient Rights	SECTION: Change in Type of Treatment – 6.16
EFFECTIVE DATE: 5/21/07	APPROVAL /REVISED DATE: 11/26/18
REVIEW DATE: 11/25/2024	REVIEW COMMITTEE: Recipient Rights CHANGES: Yes: X No:

I. Purpose

To provide guidelines and proper notification when a change of type of treatment occurs.

II. Policy

It is the policy of Hiawatha Behavioral Health to ensure when it is determined a recipient may benefit from a change in treatment, termination of treatment, or has received maximum benefit from present treatment, the recipient, legal representative or guardian with authority is provided notice. The written Individual Plan of Service will have a specific date(s) when the plan will be formally reviewed for possible modification or revision.

III. Definitions

Primary Clinician: The individual responsible for implementation of the Individual Plan of Services (IPOS).

IV. Procedure

A. Hiawatha Behavioral Health ensures that a person centered planning process is exercised to develop an Individual Plan of Services (IPOS) in partnership with the recipient. A preliminary plan shall be developed within seven (7) days of the commencement of services or, if an individual is hospitalized for less than 7 days, before discharge or release. The individual or individuals responsible for implementing the plan shall be designated in the IPOS. The plan shall be in writing, kept current and shall be reviewed and/or modified when indicated.
B. The IPOS shall address, as either desired or required by the recipient, the recipient's need for food, shelter, clothing, health care, employment opportunities, legal services, transportation, and recreation.
C. The IPOS shall consist of a Treatment Plan, a Support Plan, or both. The Plan shall establish meaningful and measurable goals with the recipient. Recipients shall be informed orally and in writing of his or her clinical status and progress at intervals established in the IPOS in a manner that is appropriate to his or her clinical condition.

D. A recipient may choose, unless otherwise stipulated through court order, to remain in

treatment until he or she has reached a stage in recovery where as the planning team determines that maximum benefit has been achieved and mental health services provided at HBH are no longer medically necessary.

E. A recipient will be given the choice of physician or mental health professional in accordance with the policies of the CMHSP or service provider and within the limits of available staff.
F. Written notice shall be provided to the recipient, their legal representative or guardian with authority for all changes in type of program or treatment within or through HBH, the notice shall also be filed in the recipient's electronic medical record.
G. If the recipient, legal representative of a minor, or guardian with authority is not satisfied with a proposed change in the type of treatment/IPOS, he or she may appeal the proposed change. The Appellant will be notified in writing of the results of the Appeal within 30 days. The results shall also be maintained in the electronic medical record.
H. The Appellant shall be provided information regarding their due process right to pursue additional avenues of redress and offered assistance by the Office of Recipient Rights should the Appellant remain dissatisfied with the results of the local Appeal process.

V. Application

All Programs directly operated or under contract with HBH

VI. Cross Reference and Legal Authority

A. Act 258 of the Public Acts of 1974, as amended - Mental Health Code Section 330.1712, 330.1714.
B. MDHHS Administrative Rules - R - 330.7199
C. Administrative Rules for Substance Abuse Service PA 368 of 1978 as amended.