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Owner:	<i>Mignon Strong: Deputy Director, Recipient Rights</i>
Policy Area:	<i>Recipient Rights</i>
References:	

Freedom Of Movement

POLICY

It is the policy of the Detroit Wayne Integrated Health Network (DWIHN) that freedom of movement of a recipient shall not be restricted more than is necessary to provide mental health services to him/her.

PURPOSE

To provide standards to be followed to ensure that recipients of DWIHN-contracted services shall not have their freedom of movement restricted more than is necessary to provide mental health services, prevent injury or prevent substantial property damage.

APPLICATION

1. The following groups are required to implement and adhere to this policy: DWIHN Board, DWIHN Staff, Contractual Staff, Access Center, Network Providers, Crisis services vendor
2. This policy serves the following populations: Adults, Children, I/DD, SMI/SEI, SED, Autism
3. This policy impacts the following **contracts/service lines**: MI-HEALTH LINK, Medicaid, Autism, Grants, General Fund

KEYWORDS

1. Freedom of Movement
2. Limitation
3. Restriction

STANDARDS

1. Mental health services shall be offered in the least restrictive setting that is appropriate and available.
2. Recipient shall have freedom to access areas suited for vocational, social and recreational activities.
3. Freedom of movement may be restricted only:
 - a. By restrictions pursuant to applicable operational procedures which may include the following:
 1. From areas that could cause health, safety or security problems, impair effective functioning of the service site,

2. Temporary restrictions from areas for reasonable, unforeseeable activities, including repair or maintenance
 3. For emergencies, in cases of fire, tornadoes, floods, etc.
 4. From accessing off-ground areas
 5. From areas which have time restrictions (posted hours for access, etc.)
- b. By limitations, when determined clinically necessary:
1. To provide mental health services to the recipient
 2. To prevent injury to the recipient or others
 3. To prevent substantial property damage
 4. To provide security precautions appropriate to the condition and circumstances of an individual admitted by order of a criminal court or transferred as a sentence-serving convict from a penal institution
4. Any restrictions or limitations of the recipient's rights shall be reviewed and approved by a formally constituted committee of mental health professionals with specific knowledge, training, and expertise in applied behavioral analysis.
5. Limitations determined clinically necessary shall be clearly documented in the recipient's plan of service including the date the restriction expires and justification for its adoption.
- a. Documentation shall also be included that describes attempts that have been made to avoid such limitations as well as what actions will be taken as part of the plan to eliminate the need for the limitations in the future.
6. Limitations on the freedom of movement of a recipient shall be discontinued when the circumstance that justified its adoption ceases to exist.

QUALITY ASSURANCE/IMPROVEMENT

DWIHN shall review and monitor contractor adherence to this policy as one element in its network management program, and as one element of the QAPIP Goals and Objectives.

The quality improvement programs of direct contractors must include measures for both the monitoring of and the continuous improvement of the programs or processes described in this policy.

COMPLIANCE WITH ALL APPLICABLE LAWS

DWIHN staff, contractors, and subcontractors are bound by all applicable local, state and federal laws, rules, regulations and policies, all federal waiver requirements, state and county contractual requirements, policies, and administrative directives, as amended.

LEGAL AUTHORITY

1. Michigan Mental Health Code, P.A. 258 of 1974, as amended, MCL 330.1712; MCL 330.1744; MCL 330.1752

RELATED POLICIES

1. Individual Plan of Service/Person-Centered Planning

- 2. Services Suited to Condition in the Least Restrictive Environment
- 3. Treatment with Dignity and Respect
- 4. Use of Personal Restraint
- 5. Use of Seclusion

RELATED DEPARTMENTS

- 1. Administration
- 2. Clinical Practice Improvement
- 3. Customer Service
- 4. Integrated Health Care
- 5. Managed Care Operations
- 6. Quality Improvement
- 7. Recipient Rights

CLINICAL POLICY

YES

INTERNAL/EXTERNAL POLICY

EXTERNAL

Attachments:

Approval Signatures

Approver

Date

Dana Lasenby: Chief Clinical Officer

12/2019

