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

Change In Type Of Treatment

POLICY

It is the policy of the Detroit Wayne Integrated Health Network (DWIHN) that a recipient of services within the Agency's contracted service area is entitled to be involved and informed of the treatment plan and/or support plan developed as the individual plan of service using a person-centered planning process, including any changes in treatment.

PURPOSE

To provide standards to be followed to ensure that recipients receiving DWIHN-contracted services are involved and informed of the treatment plan and/or support plan developed as the Individual Plan of Service using a person-centered planning process, including changes in treatment.

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. Individual Plan of Service (IPOS)
2. Person-Centered Planning
3. Responsible Mental Health Authority
4. Support Plan
5. Treatment Plan

STANDARDS

1. The Responsible Mental Health Authority shall develop policies and/or procedures to ensure that a person-centered planning process is used to develop a written individualized plan of services in partnership with the recipient which, at a minimum, include the following:

- a. A preliminary plan shall be developed within 7 days of commencement of services or, if an individual is hospitalized for less than 7 days, before discharge or release.
 - b. Participation shall be allowed in the planning process of individuals chosen or required by the recipient.
 - c. The individual plan of service shall consist of a treatment plan, a support plan, or both.
 - d. A treatment plan shall establish meaningful and measurable goals with the recipient.
 - e. The individual plan of service shall address, as either desired or required by the recipient, the recipient's need for food, shelter, clothing, health care, employment opportunities, educational opportunities, legal services, transportation and recreation.
 - f. The plan shall be kept current and shall be modified when indicated.
 - g. The plan shall contain a specific date(s) when it or any component of it will be formally reviewed for possible modification or revision.
 - h. The recipient shall be informed of any change in the IPOS and the justification for the change. Documentation of the notification and the justification for change shall be maintained in the recipient's case record.
 - i. The individual in charge of implementing the plan of services shall be designated in the plan.
2. Recipient must be informed when ready for change, release, discharge, or when maximum benefit is received.
 3. Recipient shall be informed orally and in writing of his/her clinical status and progress at reasonable intervals established in IPOS in a manner appropriate to his/her clinical condition.
 4. If a recipient is not satisfied with his/her individual plan of services, or changes made to the plan, the recipient, the person authorized by the recipient to make decisions regarding the individual plan of services, the guardian of the recipient, or parent of a minor recipient may make a request for review to the designated individual in charge of implementing the plan.
 - a. The review shall be completed within 30 days of the receipt of the request for the review.
 - b. The review shall be carried out in a manner approved by the governing body of the contractor, and shall include a mechanism for appeal of the review decision.
 5. An individual chosen or required by the recipient may be excluded from participation in the planning process only if inclusion of that individual would constitute a substantial risk of physical or emotional harm to the recipient or substantial disruption of the planning process. Justification for an individual's exclusion shall be documented in the recipient's case record.

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
2. Michigan Administrative Code, R330.7199

RELATED POLICIES

1. Individual Plan of Service/Person-Centered Planning
2. Consent for Treatment and Services
3. Treatment with Dignity and Respect

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

