



# MACOMB COUNTY

## COMMUNITY MENTAL HEALTH

### **BILL OF RIGHTS**

Based upon the public mental health system's obligation under the Michigan Mental Health Code to ensure your rights and responsibilities as a citizen of the United States, of the State of Michigan, and as a recipient of public mental health services the protection of the following Bill of Rights and Responsibilities is established.

In addition to the enumerated Rights listed below, Macomb County Community Mental Health Services (MCCMH) shall endeavor to ensure persons served the right to be furnished behavioral health care consistent with the scope of MCCMH's provider services, and shall ensure persons served have assistance and are empowered in locating and obtaining additional available community resources to meet the everyday needs of life such as: Shelter; Food; Clothing; Medical care; Legal assistance; Educational opportunities; Recreational opportunities; Inpatient services for children, adolescents, and adults; Residential services; Psychiatric, Dental, Rehabilitative, Vocational, Transportation services; and Case Management to provide access to needed services and/or other necessities of life.

### **TREATMENT RIGHTS**

#### **You have the right:**

- To participate in decisions regarding your health care including your right to refuse treatment and the right to express preference about future treatment.
- To have a written plan of service which is appropriate to meet your individual needs. Your plan of service will be explained to you or your empowered guardian or parent if a minor, in language that is understood. You or your empowered guardian or parent may review this plan, assist in its development, ask questions about the plan, or ask for it to be changed if you think it is not appropriate to your needs, and you are encouraged to ask questions about your choices or things you don't understand.
- To receive information about available treatment options and alternatives, as well as information about state plan services MCCMH does not cover, presented in a manner appropriate to your condition and ability to understand.
- You (or your empowered guardian or parent(s), if you are a minor) will be informed about the nature of all proposed treatments, as well as any discomfort, risks, or benefits you might reasonably expect from treatments.
- To be told how much you will be charged for your treatment based on your ability to pay, and your right to appeal in the event you disagree with the amount.
- To be treated with dignity and respect in a safe and clean treatment environment.
- To have assistance in locating and obtaining additional available community resources in meeting the everyday needs of life.
- To stop treatment with the agency at any time, unless your treatment is court ordered.
- To be informed when it is determined that you are ready for another type of treatment, release, discharge or have received the maximum benefit from the program.
- To be free from any form of restraint or seclusion used as a means of coercion, discipline, convenience, or retaliation.
- To be free to exercise your rights without being treated adversely.

## **RIGHT TO CONSENT**

### **You have the right:**

*Once you (or your empowered guardian or parent if you are a minor) know all the facts, to make an informed decision regarding your treatment, release of any information (unless court ordered) concerning you or your treatment, and to any changes in your treatment.*

To change your mind (without it being held against you) when you (or your representative) believe anything you have agreed to concerning your treatment is no longer in your best interest.

## **CONFIDENTIALITY RIGHTS**

### **You have the right:**

- To have information about you and your treatment kept private within the requirements of law.
- To not be photographed or fingerprinted by an agency without your written consent (or that of your empowered guardian or parents(s) if you are a minor) unless it is allowed by law or for the purpose of identifying you.

## **ACCESS TO RECORDS RIGHTS**

### **You have the right:**

- To personally review information in your record. If a part of the information in your record would be harmful to you or others, the information believed to be harmful may be withheld and you will be told this has been done.
- To receive your fingerprints and photographs, if any, and if it is allowed by law, when they are no longer necessary or when you are discharged, whichever comes first.

## **CIVIL RIGHTS**

### **You have the right:**

- To not be discriminated against in receiving services at this agency, and to have all the protection of the Americans with Disabilities Act, Federal Fair Housing Act, Michigan Handicappers Civil Rights Act, and section 504 of the Rehabilitation Act.
- To not be sexually harassed by an agency employee, a fellow consumer, or any person at the provider.
- To read, watch or listen to television, radio, recordings or movies, without censorship. Restrictions or limitations may be imposed if they are included in your plan of service or if you are a minor.
- To enter into a marriage contract or obtain or oppose a divorce.

## **RIGHT TO COMPLAIN**

### **You have the right:**

- To complain to the person in the Rights Office, file a grievance, and/or request mediation in writing or verbally, if you think something is wrong with your treatment.

## **RESIDENTIAL RIGHTS**

### **If you are receiving residential services, you have the right:**

- To get and send mail without anyone else opening it unless there is reason to believe the mail contains something that could result in breaking the law or is harmful to you or others.
- To talk on the phone in private. This right may be limited based on your plan of service or agency policy.
- To see visitors you want to see during regular visiting hours and to see your own doctor or spiritual counselor at reasonable times.
- To contact your lawyer at any time regarding your legal matters.
- To practice your religion or faith. You will not be forced to be involved in a religious event.
- To go to the polls to vote if you are registered. If you are not registered, you may arrange to become registered.
- To stay in a place which is clean, has good light, adequate heat, fresh air, hot and cold water, a bathroom with privacy, and personal storage space.
- To wear your own clothes and keep your own personal belongings, unless restricted by law, policy or your written plan of service.
- To be free from unreasonable searches, to watch if a search does occur; to have the reason for the search explained to you and written in your record.
- To be paid for work you agree to do if you are offered work. You will not be paid for personal housekeeping chores such as making your own bed.
- To go anywhere you want unless limited by law, policy, or your Plan of Service.
- To conduct your personal and business affairs unless you have an empowered guardian or a parent(s), if you are a minor, who acts in your interest.
- To not have surgery performed on you without your prior consent (or that of an empowered guardian or parent(s) if you are a minor) unless your life is threatened.
- To maintain your driver's license upon admission to a residential facility unless you were previously notified by the Secretary of State that your license was suspended, or the residential facility excludes or limits a person's possession of driver's licenses.
- To the mental health services which suit your condition.
- To the maximum amount of freedom within the residential facility grounds and outside the facility grounds which will not affect the safety of persons and property.

## **INFORMATION RIGHTS**

### **You have the right:**

- To receive information when you begin services, and at least annually thereafter, that describes the services MCCMH provides to you.
- To know your covered benefits, and how to obtain them.
- To know the names, locations, and telephone numbers of relevant providers in your service area.
- To know what restriction, if any, limit your freedom of choice among providers.
- To know how to make a complaint if you feel any of your rights have been violated.
- To know where you can go for emergency and after-hours care.
- To receive information on advance directives.
- To receive additional information about the organization of MCCMH, at your request.
- To have your questions answered about any information given to you.
- To make recommendations regarding MCCMH's member rights and responsibilities policy.



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### **BILL OF RESPONSIBILITIES**

Rights and responsibilities are mutual and inseparable. People cannot always exercise rights when the results would burden others. The importance of rights does not diminish people's responsibilities for their own lives. A sense of fairness depends on the responsibility shown by each of us. As a recipient of public mental health services,

I have the responsibility:

- To be fully responsible for my own actions, and for the consequences of those actions. Freedom to choose carries with it the responsibility for my choices.
- To not bring weapons, and legal/illegal drugs not authorized by my doctor.
- To supply information (to the extent possible) that the organization and its practitioners and providers need to provide care.
- To be an active participant in my treatment, and if dissatisfied, to complain to the appropriate person.
- To understand my health problems and participate in developing mutually agreed-upon treatment goals, to the degree possible.
- To follow plans and instructions for care that I have agreed to with my practitioners.
- To do as much as possible to identify and meet my own needs.
- To respect the rights, privacy, and beliefs of others by showing courtesy and consideration.
- To be responsible for the cost of treatment based on my ability to pay. To keep appointment times as scheduled, or telephone in advance to cancel.
- To respect the environment and property of others, as well as my own.
- To share with staff my experience of the Agency's services, of what they do well, and what they could do better.