

# **To learn more about your rights, ask your Rights Advisor.**

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Authorized by:

Michigan Mental Health Code P.A. 258 of 1974, as amended  
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# Your Rights

When  
Receiving  
Mental  
Health  
Services  
in  
Michigan



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Jennifer M. Granholm, Governor  
Janet Olszewski, Director

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## **SECTION I: GENERAL RIGHTS**

### **General Information** \_\_\_\_\_

**When you receive mental health services, Michigan's Mental Health Code and other laws safeguard your rights. Staff are responsible to protect your rights when they provide services to you. You are encouraged to ask questions about your treatment and about your rights and to make suggestions that you feel are in your best interest. If you believe your rights have been violated, you should inform a Rights Officer/Advisor.**

### **Notice** \_\_\_\_\_

Mental Health Code Section 706, 706a

At the time you make a request for, or when you begin to receive, mental health services you will be given information about the rights guaranteed by Chapter 7 and 7 A of the Mental Health Code. This is usually done by giving you a booklet with a summary of these rights and by having a complete copy of these chapters available for your review.

If you receive services from a community mental health services program, you should also be given a pamphlet containing information regarding available resources, advocacy and support groups, and other relevant information, including how to contact Michigan Protection and Advocacy Services, Inc.

## **Competency** ---

Mental Health Code Section 702

Just because you are ordered by a court to receive mental health treatment or services does not mean that you are incompetent. You still have the right to have a driver's license, marry and divorce, make a will, buy and sell property, manage your own affairs and decide most things about your life. You will continue to be treated as competent unless a court has decided that you are legally incompetent and has appointed a guardian for you. **A guardian** is authorized by a judge to make certain decisions for you. For some people, a guardian makes major decisions; for others, the guardian decides only those specific things listed in a court order.

If you do have a guardian and:

- You think you should be able to make more decisions for yourself, or
- You think you don't need a guardian, or
- You think you need a different guardian than you, or someone on your behalf, may go to the court and ask (petition) for a change of guardianship.

## **Consent** \_\_\_\_\_

Mental Health Code Section 100 a[15]; Administrative Rule 330.7003

### **You must give informed consent**

- To receive treatment or,
- To have any confidential information about you provided to others by the agency from which you are receiving services.

In order to be able to give informed consent

- You should be told about the risks, benefits, and available alternatives to a course of treatment or medication.  
(KNOWLEDGE)
- You should be able to reasonably understand the information including the risks, benefits, available options or alternatives, or other consequences.  
(UNDERSTANDING)
- You should not be forced or pressured into a decision. The choice you make should be your decision.  
(VOLUNTARY)

This consent must either:

- Be in writing and signed by you, your legal representative, or
- Be your verbal agreement to something that is witnessed and put in writing by someone who is not treating you at the time.

## **Dignity and Respect**

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Mental Health Code Section 704, 7

The law requires all mental health service providers to assure that you are treated with dignity and respect. Examples of staff not showing respect include calling you names, making fun of you, teasing, or harassing you.

Your **family members** also have the right to be treated with dignity and respect. In addition, they must be given:

- An opportunity to provide information about you to your treating professionals.
- An opportunity to request, and receive, general education information about the nature of mental disorders, medications and their side effects.
- Information about available support services, advocacy groups, financial assistance, and coping strategies.

## **Freedom from Abuse and Neglect**

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Mental Health Code Section 722; Administrative Rule 330.7035

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

- Not to be physically, sexually, or otherwise abused  
(Sexual harassment is also considered abuse.)
- Not to be neglected
- If you have been abused or neglected, or suspect another recipient has been, you should report it right away to a staff person and to the Office of Recipient Rights.

## **Fingerprints, Photographs, Audiotape, Videotape, and Use of One-Way Glass** ---

Mental Health Code Section 724

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

- Not to be fingerprinted, photographed, audiotaped, videotaped, or viewed through a one-way glass unless you or your legal representative agree in writing.
- If someone wants to photograph, videotape, or record you for educational, informational, social or treatment purposes, that person must first ask if you object.
- If you do object it will not be done.
- While doing an investigation to determine if your rights were violated, the Rights Office may need to take your picture. This will be kept in your confidential records maintained in the Rights Office.
- When they are no longer needed, or upon discharge, any fingerprints, photographs, audiotapes, or videotapes in your record must either be given to you, or destroyed.

## **Confidentiality**

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Mental Health Code Section 748, 946

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

Have information about your mental health treatment kept private. Information about you and your treatment cannot be given to anyone except as required or allowed by law. Listed here are situations when confidential information may be released:

- If a law or a court order requires your records be released.
- If you, or your legal representative, consents.
- If needed to get benefits for you or to get reimbursement for cost of treatment.
- If it is needed for research or statistical purposes, with certain safeguards regarding identification.
- If you die and your surviving spouse or other close relative needs the information to apply for and receive benefits.
- If you tell your mental health professional that you are going to harm another person, he/she may have to notify the police and the person who you threaten to harm.

## **Access To Your Record** \_\_\_\_\_

Mental Health Code Section 748

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

To see your record. Upon request, you or your legal representative may read or get a copy of all or part of your record. There may be a charge for the cost of copying.

If you are an adult and the court has not judged you incompetent (appointed a guardian for you), information entered in your record after March 28, 1996 may not be withheld from you under any circumstances.

If you are denied access to your record, you, or someone on your behalf, may appeal the decision. Contact your rights officer/advisor for information about the appeal process.

If you or your legal representative believe your record contains incorrect information, you or they may place a statement in your record which corrects that information. You may not remove what is already in the record.

## **Environmental Rights** \_\_\_\_\_

Mental Health Code Section 708

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

To treatment in a place which is clean and safe

If you are receiving services from a residential program, the place where you live must have good lighting, enough heat, fresh air, hot and cold water, a bathroom with privacy, personal storage space, and it should be free from unpleasant smells.

## **Civil Rights**

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Mental Health Code Section 740; Administrative Rule 330.7009

Even though you are receiving mental health services, you cannot be denied your civil rights. You have the right to an education, the right to vote\*, and the right not to be discriminated against because of your:

- Age
- Color
- Height
- National origin
- Physical or mental disability
- Sex
- Religion
- Race
- Weight

\* Information about registration and voting may be obtained from the Recipient Rights Office.

As a person with a mental disability, your rights may be additionally protected under:

- Americans With Disabilities Act (ADA)
- Fair Housing Amendments Act
- Civil Rights of Institutionalized Persons Act
- Individual's With Disabilities Education Act
- Rehabilitation Act, Section 504
- Michigan Disability Civil Rights Act

Knowing about these laws will help you exercise your rights and prevent discrimination. If you, your advocate, or family members are interested in these laws, or any other laws which affect your rights as a person receiving mental health services, contact your Recipient Rights Office for more information. If you, or someone on your behalf, think that you have been discriminated against, a complaint may be filed with the Recipient Rights Office at any time, even after you are discharged. Additionally, you may file a discrimination complaint with the Michigan Department of Civil Rights, 110 West Michigan Avenue, Lansing, Michigan 48913, 1-800-482-3604.

To file with this agency you must write to them within 180 days of the time the alleged discrimination occurred. If you are still not satisfied, you may also sue in the State Circuit Court or Federal District Court.

In addition, there are many governmental organizations available to assist you if you think your rights have been violated.

## **Federal Agencies** ---

For information on how an individual with a disability may be reasonably accommodated at work, call the Job Accommodation Network at 1-800-526-7234, (voice/TTY) or 1-800-ADA-WORK (voice/TTY).

If you feel your rights under Title II of the ADA have been violated by state or local governmental agencies, you may file a complaint with the Department of Justice. This must be done within 180 days from the date of discrimination. In certain circumstances, cases may be referred to mediation programs sponsored by the Department of Justice. The Department may bring a lawsuit where it has investigated a matter and has been unable to resolve the violations. For more information or to file a complaint, contact Civil Rights Division NYAV, U.S.

Department of Justice, 950 Pennsylvania Ave NW, Disability Rights Section, Washington, D.C. 20530. You may also call 1-800-514-0301 (voice) or 1-800-514-0383 (TTY).

For violations of Title III of the ADA by places of public accommodation (e.g., restaurants, doctors offices, grocery stores, hotels) complaints may be filed with the Justice Department and in certain circumstances cases may be referred to a mediation program sponsored by the department. The Department is authorized to bring lawsuits where there is a pattern or practice of discrimination in violation of Title III or where an act of discrimination raises an issue of general public importance. Title III may also be enforced through a private lawsuit. See the address and phone numbers given above.

For violations of the Fair Housing Amendments Act, you may file a complaint with the U.S. Department of Housing and Urban Development. For more information on filing a complaint, contact the Office of Fair Housing and Equal Opportunity, Department of Housing and Urban Development, Room 5204, 451 Seventh St. SW, Washington, D.C. 20410-2000 <http://www.hud.gov/complaints/housediscrim.cfm>

Under the Civil Rights of Institutionalized Persons Act, the Attorney General may initiate civil rights lawsuits when there is reasonable cause to believe that the conditions are significant enough to subject residents to serious harm and they are part of a pattern or practice of denying residents' constitutional or federal rights including Title II of the ADA and Section 504 of the Rehabilitation Act. For more information or to bring a matter to the attention of the Department of Justice, contact the Special Litigation Section, Civil Rights Division, U.S. Department of Justice, 950 Pennsylvania Ave NW, Washington, D.C. 20530, (202) 514-6255 (voice/relay).

Under the Individuals with Disabilities Education Act, if a parent disagrees with the proposed IEP, he/she can request a due process hearing in a review from the Michigan Department of Education, if applicable in that state. He/she can also appeal the state agency's decision to the state or federal court. For more information about this act and your rights, contact the Office of Special Education Programs, U.S. Department of Education, 330 C Street, NW, Room 3086, Washington, D.C. 20202, (202) 245-7468 (voice) or (202) 245-7366 (TTY).

Under Section 504 of the Rehabilitation Act, no qualified individual with a disability in the United States shall be excluded from, denied the benefits of, or be subject to discrimination under any program or activity that either receives federal financial assistance or is conducted by any executive agency or the U.S. Postal Service. If you feel that you have been discriminated against by an agency receiving federal money based on disability, you can file a 504 complaint with an appropriate agency by contacting contact Civil Rights Division NYAV, U.S. Department of Justice, 950 Pennsylvania Ave NW, Disability Rights Section, Washington, D.C. 20530. You may also call 1-800-514-0301 (voice) or 1-800-514-0383 (TTY).

## **State Agencies** \_\_\_\_\_

If you are a recipient who believes that you have been discriminated against in your job because of your race, gender, marital status, etc., you are protected under Michigan's Elliott Larsen Act. If you believe you have been discriminated against based upon disability, you are protected under the Michigan Handicapper Civil Rights Act. For more information regarding either of these laws, contact the Michigan Department of Civil Rights, at 110 West Michigan Avenue, Lansing, Michigan 48913, 1-800-482-3604.

If you are a consumer, or the parent of a consumer, and have questions concerning special education or would like to file a complaint regarding special education services, contact the Michigan Department of Education, Office of Special Education, P.O. Box 30008, (or 608 W. Allegan St), Lansing, Michigan 48909, (517) 373-0923.

## **SECTION II: TREATMENT RIGHTS**

### **Treatment and Support** \_\_\_\_\_

Mental Health Code Section 705, 707- 719, 744;

Administrative Rule 7029, 7135

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

To be told why you are being treated, what your treatment is, and how much you will be charged for your treatment.

To participate in the development of your plan of service and to involve family members, friends, advocates, and professionals of your choice in the development process.

Justification for the exclusion of a person of your choice must be documented in your case record.

To have your plan of service developed within seven days of commencement of services or before discharge or release if you are hospitalized less than seven days.

To choose, within certain limitations, the physician or other mental health professionals to provide services for you, if you receive services from a community mental health services program or a licensed hospital.

To be informed of your progress, both orally and in writing, at reasonable intervals and in a manner appropriate to your condition.

To not have surgery unless consent is obtained from  
You, or

- Your guardian with legal authority to consent to surgery, or
- Your parent with legal and physical custody, if you are under 18 years of age, or
- A representative authorized to give consent under a durable power of attorney or other advance directive, or
- Your life is in danger if surgery is not performed, there is no appropriate person available to give consent and the necessity for the surgery is documented in your record, or
- Surgery is necessary, there is no appropriate person is available to give consent, and the probate court consents to the surgery.

To have notice of available family planning and health information services and, if you ask, to have staff provide you education and information on family planning and health.

To have staff help you get spiritual treatment if you ask for it.

To receive treatment in a place where you have as much freedom as your condition allows.

To not have electroconvulsive therapy (ECT), or other procedures intended to produce convulsions or coma, unless consent is obtained from:

- You, if you are over 18 years old and do not have a guardian for medical purposes, or
- Your guardian who has legal authority to consent to ECT, or
- If you are under 18 years of age, your parent with legal and physical custody, or
- A representative authorized to consent to ECT under a durable power of attorney or other advance directive.

**If you have been denied services** you are entitled to receive a second opinion. This request is made to the executive director of the community mental health service program.

**If you are a minor, 14 years of age or older**, you are entitled to ask for, and receive, outpatient mental health services (not including psychotropic medication or pregnancy termination referral services) without the consent or knowledge of your parent or guardian. These services are limited to 12 sessions or 4 months for each request.

**If you are a voluntary** recipient and do not agree with some part of your treatment, you have the right to withdraw your consent to treatment at any time. If there is not another appropriate treatment to which you do consent, you will be discharged.

**If you receive inpatient or residential treatment**, you are entitled to have a physical and mental examination within 24 hours after you are admitted, and again at least once a year.

**If you are an involuntary recipient, you do not have the right to refuse treatment. However, you do have the right to ask questions about your treatment, review your plan of service, and discuss it with your doctor or other mental health professionals. If you think your treatment is not helping, you may ask for a review of your treatment plan.**

## **Person-Centered Planning** \_\_\_\_\_

Mental Health Code Section 712

The 1996 revisions to the Mental Health Code require a person-centered approach to the planning, selection, and delivery of the supports, services, and/or treatment you receive from the public mental health system (community mental health programs, centers for persons with developmental disabilities, and psychiatric hospitals, and mental health service providers under contract to any of these).

### **What is person-centered planning?**

Person-centered planning means the treatment you receive will be made up of activities which you think will help you, which you assist in developing, and which meet your goals. This process will determine the supports you want or need to achieve your desired future. The staff involved in your treatment will encourage feedback from you about these supports, the progress you have made, and any changes you think would make your treatment more effective.

There are four basic parts in the person-centered process:

- Identifying the future you desire.

It is up to you to choose the individuals who will help identify your future and help you plan for it. You will be a part of deciding what information is, *or is not*, shared at the meeting. You will be able to choose, within reason, the times and place you want to have meetings to plan your treatment, to decide the content of the meetings and how long they will be.

- Planning the future you desire.

Meetings which are held to plan for your future will attempt to discover what is important to you, to share information about your abilities, strengths, and skills, to learn about your needs and to decide which of your desired goals will be achieved in the short term and which will need to be long-term. Then, you and the support team will determine the strategies for achieving these goals.

- Finding the supports and services it will take to achieve your desired future.

You will be able to use the resources in your network of family, friends, your community, and the public mental health system which might be available to assist in achieving your desired outcomes. You will be able to choose, from available resources, the supports and services to be delivered, and help decide who will do what, when, and how.

- Getting feedback on your treatment regularly to determine how to make the supports and services work better for you.

It is important for you to receive feedback on your progress. This should be done by informally, and regularly, discussing with your case manager (supports coordinator) how supports and services are being delivered, your satisfaction with their delivery, and progress toward your desired outcomes. The information you provide should be used to make any necessary changes in the supports and services you receive.

You should also have the opportunity to formally express your opinion about supports and services you receive so that improvements in service delivery can be made for everyone.

In addition, you always have the right to make formal complaints about how your supports and services were delivered or about any of the people who might have provided them and taking action to resolve the problem.

## **Questions You May Want To Ask About Person-Centered Planning**

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### **Who must attend the person-centered planning meeting?**

You, and your legal representative (a parent if you are a minor, or guardian) and your supports coordinator (case manager).

### **Who also might be included?**

You may want to invite family members, co-workers, friends, a teacher, coach, staff, and other people who know you well and with whom you feel comfortable sharing personal information. Your supports coordinator (case manager) may also suggest inviting a nurse, physical therapist, or direct care staff, who has information to help in planning and decision making.

## **What kinds of outcomes are discussed?**

"Outcomes" may include:

- Having positive relationships with family members,
- Participating in community activities and events,
- Doing what you find meaningful and productive with your day, (such as going to school, work, volunteering),
- Living in a place alone, or having assistance from people you choose.

## **Are there limits to person-centered planning?**

Person-centered planning does not guarantee that the supports, services, and/or treatment nor the amount of them you might like to have can be provided by the public mental health system. What is actually provided by the public mental health system will depend upon the available resources (such as funding and staffing), rules and regulations that govern the program or funding system, and/or the judgment of the program administrator(s) as to feasibility, appropriateness, and safety of such support, service, or treatment.

## **Questions You May Want to Ask About Your Medication** ---

If you are given medication by your doctor you will need to take it according to his/her instructions. Listed below are some questions you may want to ask of the doctor or nurse so that you can have the information you need to make it as effective as possible.

- Why do I have to take this medicine?
- What will happen if I do not take it?
- Can I be treated without medication?
- Before I begin taking any medicine or even if I am not taking medicine, can I have a second opinion?
- What is the name of the medicine prescribed for me?
- How is it supposed to make me feel? What are the side effects of the medicine? Will it affect any other medical or physical problems I have?
- Are there side effects I should report immediately?
- Is it similar to or different from the medicine I was taking before this?
- How much should I take? How many times a day? What time of day? Before or after meals?
- What would happen if I took too much?
- Is it all right if I drink alcohol or beer when taking this medicine? Is there any food or other drink I should avoid?
- Are there other medicines I should avoid when taking this medicine?
- Will this medicine affect my interest and/or my ability to participate in sex?
- *For women in child bearing years:* Will this affect my menstrual periods? Should I take birth control pills while taking this medicine? If I get pregnant while taking this medicine, could it have any effect on my baby? Should I take it while nursing?
- Should I drive or operate machinery while taking this medicine?
- Is there anything else I should know about this medicine?

- How often will you review with me what the medicine is doing?
- How long will I need to take this medicine?
- How soon will I need to take this medicine?
- If I take this medicine for a long time, what can it do to me?
- What is tardive dyskinesia (TD)? Can I get TD from taking this medicine? Can something be done to avoid this?

**SECTION III:**  
**RIGHTS RELATED TO**  
**ADMISSION & DISCHARGE**  
**(Minors and Adults)**

**Voluntary Admission Process** \_\_\_\_\_

Mental Health Code Section 410-420

If you are admitted to a psychiatric hospital or unit on a voluntary basis (or you are admitted by application of your guardian with your agreement) you have the following rights:

**Formal Voluntary Admission:** to give written notice of your intent to leave the hospital. After you put your request in writing, you must be discharged within three (3) days (excluding Sunday and holidays). However, if the hospital director determines you require treatment and petitions the court for your involuntary admission you must remain in the hospital until a determination is made about your treatment by the court.

- To be discharged when treatment is complete or when you no longer need the services.
- To request a second opinion if the community mental health services program pre-admission screening unit does not think you need to go into the hospital.

## **Involuntary Admission Process**

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Mental Health Code Section 423-450; 1498

If you are involuntarily admitted to a psychiatric hospital or unit, you have the following rights:

- To make at least two phone calls.
- To a copy of the application or petition saying you require treatment and to copies of reports by the doctors who examine you.
- To a written statement explaining that you will be examined by a psychiatrist within 24 hours after you are admitted.
- To a written statement explaining your rights:
  - To a full court hearing.
  - To be represented by an attorney.
  - To be present at the hearing.
  - To a jury trial.
  - To an independent clinical examination.
- To have staff, if you wish, notify your family of your admission to the hospital.

If the police take you into protective custody and bring you to a preadmission screening unit, to have staff of that unit complete their examination of you within two hours unless there is a documented medical reason for the delay.

- To be examined by two doctors or by a psychologist and a psychiatrist to determine whether you need to be admitted. One of the examinations must be by a psychiatrist and the first examination may be done before you are brought to the hospital.

- To refuse medication before your court hearing unless a physician decides you need it to prevent you from physically hurting yourself or others or if your life is in danger.
- To have an independent medical examination before your full court hearing.
- Within 72 hours (excluding Sundays and holidays) after a petition and clinical certification have been filed with the court, you have:
  - The right to meet with legal counsel,
  - The right to meet with a treatment team member assigned by the hospital director,
  - The right to meet with a designated community mental health worker,
  - The right to designate an individual of your choice to meet with you and the people indicated above for the purpose of informing you of:
    - The proposed plan of service in the hospital.
    - The proposed plan of service in the community.
    - The nature and possible consequences of the involuntary hospitalization process.
- The right to request that your court hearing be delayed, or "deferred", temporarily (60 or 90 days) with a continuing right to demand a hearing during this "deferral period".  
You will be treated as a voluntary patient during this period.

If you agree to medication or treatment before the court hearing, this does not mean that you are agreeing to the hospitalization.

## Court Hearings

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Mental Health Code Section 452; 463

If you are admitted to the hospital involuntarily, you have the following rights regarding court hearings:

- To have your court hearing promptly, but not more than seven days (excluding Sundays and holidays) after the court receives the application (petition).
- To be present at all court hearings. You may choose to waive the right to attend your hearing by signing a waiver witnessed by your legal counsel and filed with the court. During this hearing, you have the right to be represented by an attorney. If you cannot afford an attorney, the court will appoint one for you. Your attorney must consult with you in person at least 24 hours before the time set for your court hearing.
- To demand a jury trial. To present documents and witnesses and to cross examine witnesses.
- To obtain, at public expense if necessary, an independent clinical evaluation by a physician, psychiatrist, or licensed psychologist of your choice. (You must request this before the first scheduled hearing or at the first scheduled hearing before the first witness has been sworn.)
- To a copy of the court order.

- If you are a minor 14 years of age or older, you may write to the court within 30 days of your admission to object to your being hospitalized. You may do so again within 30 days from the time you receive a written review from the clinical staff regarding your need for continued hospitalization.
- If you are a minor of any age and have been hospitalized for more than seven days, you may inform a hospital staff of your desire to object to your hospitalization. Someone from the staff is required to assist you in properly filing your objection to the hospitalization. If nobody does this, then ask to see the rights advisor who will help get someone to assist you.

Note: Upon entry of a court order involuntarily hospitalizing you or placing you in involuntary alternative treatment, the court must order the State Police to enter the court order into the law enforcement information network [LIEN].

If you are re-hospitalized for longer than 10 days under a combined hospitalization/alternative treatment order, you must be notified of your right to file an objection to the hospitalization. If you do object, the court must schedule a hearing to determine whether you continue to be a person requiring treatment.

## **Periodic Review** ---

Mental Health Code Section 482; 485a

If you have a court order for continuing involuntary treatment, you have the right to regular, adequate, and prompt reviews of your status. These reviews must be done six (6) months from the date of the court order and every six (6) months from then on.

Results of these reviews must be provided to you within five days from the time they are made part of your record and you must be informed of your right to petition for discharge. If you do petition for discharge following the periodic review, you have the right to a hearing. In addition to that hearing, you may petition the court for a discharge hearing once within each 12 month period from the date of the original order. After any of these hearings, if the court determines that you no longer require treatment, you will be discharged.

## **SECTION IV: RIGHTS IN A RESIDENTIAL OR INPATIENT SETTING**

The Mental Health Code guarantees that recipients receiving inpatient or residential services will be assured that some basic rights are protected. These rights may be limited due to the nature of your treatment. If such limitations are imposed they must be agreed to in the plan of service by you or your legal representative. General restrictions that apply to everyone (such as visiting hours, property you may have, or times the telephone may be used) can be established by a residence or unit. These restrictions must be posted in a place where they can be easily seen.

### **Mail** \_\_\_\_\_

Mental Health Code Section 726

#### **Yo have the right:**

To receive and send mail without anyone else opening or reading it. If you have no income and if you ask for them you will be given writing materials and a reasonable number of stamps.

## **Telephone** \_\_\_\_\_

Mental Health Code Section 726

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

To talk on the phone. If you have no income, a reasonable amount of funds will be provided so that you can use the telephone.

## **Visitors** \_\_\_\_\_

Mental Health Code Section 715, 726, 748 Administrative Rule 7135

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

To see visitors of your choice,

To see your own doctor (if you have one) or visit with your minister, priest, rabbi, or spiritual counselor at reasonable times.

To talk with your attorney, a court, or others, about legal matters without any limitations and at any time.

## **Entertainment Materials, Information**

### **and News** \_\_\_\_\_

Mental Health Administrative Rule 330.7139

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

To watch TV, have a newspaper provided, buy magazines, and books of your own choice, unless limited by your plan of service or as generally restricted by program rules.

## **Religion** \_\_\_\_\_

Mental Health Code Section 704

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

To practice your religion or faith. You cannot be forced to go to a religious event if you do not want to, nor can you be required to listen to or watch religious programs on radio or TV.

## **Personal Property** \_\_\_\_\_

Mental Health Code Section 728; Administrative Rule 7009

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

Wear your own clothes and keep your own things.

Inspect your personal property at reasonable times.

Have a receipt given to you and a person you designate for your property held by the facility. This property must be returned to you when you are discharged unless it is something illegal.

Have a reasonable amount of space to store your personal belongings.

Not have your belongings searched unless this is part of your plan of service or unless there is a good reason; to watch if your belongings are searched; and to have the reason for the search written in your record.

Your plan of service may further limit this right for the following reasons:

- To protect property you may have brought with you from theft, loss, or destruction. If you want to keep your property even though it may not be safe you must sign a waiver which releases the facility from responsibility.
- To prevent you from physically hurting yourself or others.
- You, or your legal representative, should be told the reason for the limitation and the date it expires.

## **Money**

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Mental Health Code Section 730- 736

If you are in a state hospital or center, you have the right to:

Be paid for work you agree to do if you are offered work. However, you will not be paid for personal housekeeping chores (such as making your own bed) or work which is part of a small group living arrangement.

Not have more than half of any money you earn used to pay for your treatment.

Have your money kept in an account in your name at the facility.

Easy and reasonable access to your money kept in an account at the facility and to spend your money as you want. Facility rules may limit the amount of money you can have on you at any one time.

Have money in the account given to you when you are discharged.

These rights may be limited

- If the U.S. government says you need someone to handle money you receive from Social Security and has assigned you a representative payee, or
- If you have a conservator or guardian who has the authority to limit how you spend your money.

## **Freedom of Movement**

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Mental Health Code Section 740, 742, 744

Freedom of movement is a right, not a privilege. This right cannot be limited or restricted more than is necessary to provide mental health services to you, to prevent you from injuring yourself or others, or to prevent substantial property damage. If you are admitted by order of a criminal court or are transferred from a jail or prison, appropriate security precautions may be taken.

If there are limitations on your freedom of movement, the expected length and the reasons for them must be written into your record. The limitations must be removed when the reasons for them no longer exist.

If you are in a psychiatric hospital or licensed child caring institution, you may only be or put in a locked room (seclusion):

- To keep you from physically hurting others.
- To keep you from causing substantial property damage.

If you are a resident in an inpatient or residential setting, you may only be physically restrained:

- If facility licensure rules allow.
- To keep you from physically hurting yourself or others.
- *To keep you from causing substantial property damage.*

## **SECTION V: FORENSIC RIGHTS**

### **Incompetent to Stand Trial (IST) \_\_\_\_\_**

Mental Health Code Section 330.2020-2044

If you are admitted to a hospital on an IST (Incompetent to Stand Trial) Order you are under the jurisdiction of the criminal court, not the probate court system. The IST order can last for up to 15 months during which time you will receive psychiatric treatment to enable you to understand the criminal charges against you and assist in your defense. Reevaluation of your competence will be done by your treating psychiatrist every 90 days and a report will be submitted to the criminal court.

### **Not Guilty by Reason of Insanity (NGRI) \_\_\_\_\_**

Mental Health Code Section 330.2050

If you are acquitted of a criminal charge by reasons of insanity, you will be committed to the Center for Forensic Psychiatry, for a period of not more than 60 days, to be evaluated to determine whether you are a person who requires mental health treatment.

If the Center for Forensic Psychiatry determines that you do require mental health treatment, a petition for involuntary hospitalization may be filed with the probate court and a hearing held. See Section III of this booklet regarding the involuntary admission process and related rights.

If a petition for involuntary hospitalization is not filed, the Center for Forensic Psychiatry will be notified and you shall be discharged.

## **SECTION VI: THE COMPLAINT AND APPEALS PROCESS**

### **Filing a Recipient Rights Complaint \_\_\_\_\_**

Mental Health Code Section 776

If you believe that any right listed in this booklet has been violated, you or someone on your behalf should file a recipient rights complaint.

You may file a complaint by calling or visiting the Rights Office, or by completing the recipient rights complaint form and returning it to the Rights Office. For copies of the recipient rights complaint form, please contact your local rights office or start at the following web address:

[www.michigan.gov/recipientrights](http://www.michigan.gov/recipientrights) and click on the link Recipient Rights Complaint Form. The name and telephone number of the Rights Officer/Advisor for this agency can be found on the front of this booklet and should be clearly posted in the place you are receiving treatment.

Your complaint needs to contain:

- A statement telling the Rights Office what you are complaining about;
- What right(s) you think have been violated;
- What you think will resolve your complaint.

If you want help writing your complaint the Rights Office will refer you to an advocacy organization for assistance. If there is no advocacy organization available, the Rights Officer/Advisor will assist you.

## **Investigating Your Complaint** \_\_\_\_\_

Mental Health Code Section 776

Within five (5) business days after receiving your complaint, the Rights Office will provide you with a letter which tells you that your complaint was received and a copy of the complaint. This letter will also tell you whether your complaint is going to be investigated and about the mediation process which you may use after the investigation is completed.

If the Rights Officer/Advisor investigates your complaint, he/she will decide if your rights have been violated and, if necessary, will recommend appropriate action to correct the violation.

The Rights Officer/Advisor should finish investigating your complaint no later than 90 days after it was received. You will get a written status report every 30 days until completion of the investigation.

When the investigation is complete, the Rights Officer/ Advisor will submit an Investigative Report to the agency director. Within 10 business days after receiving this report, he/she will provide you with a written Summary Report.

The Summary Report will tell you about the investigation, let you know if the Rights Office determined your rights were violated, inform you of any recommendations made by the Rights Office and let you know what action the Director has taken or will take to resolve your complaint. It will also give you information on how and where to file an appeal if you are not satisfied with the finding of the Rights Office, the action taken, or if you think the Rights Office did not start or complete the investigation in a timely manner.

## **Appeal Rights**

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Mental Health Code Section 784-786

After you receive the Summary Report, you have the right to file an appeal. An appeal must be written and sent within 45 days. You can file an appeal if you feel:

- The investigative findings of the Rights Office were not consistent with the facts, or with the law, rules, or policies of the agency.
- The action, or proposed action, of the agency director did not provide adequate resolution.
- The Rights Office did not start, or finish, the investigation in a timely manner.

If an advocacy organization is not available to help you write your appeal, the Rights Office will assist you.

Within five (5) business days after receiving your appeal, the local appeals committee will review it to see if it meets the requirements, and will notify you in writing whether your appeal was accepted.

This committee has 30 days to make a decision on your appeal. They will review the case file provided by the Rights Office and may ask you for more information. Within ten days after the decision is made they will send you a copy.

If you are not satisfied you have 45 more days to file a written appeal with the Michigan Department of Community Health. The only reason you may appeal to this level is if you believe that the investigative findings of the Rights Office were not consistent with the facts or relevant laws, rules, policies, or guidelines.

If you are not satisfied with the answer from the Department you may appeal to the Circuit Court in the county where you live (or the Ingham County Circuit Court). You only have 21 days to do this and may need to hire an attorney to help you. Your appeal to the Circuit Court is based on the entire record of your appeal which was put together by the Department.

## **Mediation**

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Mental Health Code Section 788

After the investigation of the Rights Office is finished, you have the right to request mediation of your dispute. Mediation is voluntary for all parties. The mediation process involves a meeting between you, a representative of the agency and a person who is trained to help resolve complaints. If you reach an agreement you will have to sign a statement which states you and the agency will follow through. While engaged in the mediation process, time frames for responses and appeals stop. If mediation is not successful, you then have the right to pursue an appeal.

For a full listing of Community Dispute Resolution Centers in Michigan, start at the following web address:  
<http://courts.michigan.gov/scao/dispute/odr.htm>. Under the heading Court Rule Mediation Resources and Community Dispute Resolution Materials, click on the link CDRP Centers

## **SECTION VII: ADVISORY GROUPS AND ORGANIZATIONS**

The following groups and organizations are available to assist you in protecting your rights as a recipient of mental health services:

### **Association for Children's Mental Health (ACMH)**

941 Abbott Rd., East Lansing, MI 48823  
517/336-7222 or 800/782-0883  
<http://acmh-mi.org>

### **Alliance for the Mentally Ill**

921 N. Washington, Lansing, MI 48906  
517/485-4049 or 800/331-4264 ~ FAX 517/485-2333  
<http://mi.nami.org>

### **ARC/Michigan**

1325 S. Washington Avenue, Lansing, MI 48910  
800/292-7851  
<http://www.arcmi.org>

### **Michigan Disability Rights Coalition**

780 West Lake Lansing Road, Suite 200, Lansing, MI 48823  
In Michigan: 800/760-4600 or 517/333-2477 ~ Fax 517/333-2677  
<http://www.copower.org> and click on Mi. Disability Rights Coalition

### **Michigan Protection and Advocacy Services, Inc.**

4095 Legacy Parkway Ste 300, Lansing, MI 48911  
800/288-5923 (Voice or TTY) or 517/487-1755 ~ Fax 517/487-0827  
<http://www.mpas.org>

### **United Cerebral Palsy - Michigan**

3401 East Saginaw, Suite 216, Lansing, Michigan 48912  
800/828-2714  
<http://www.ucpmichigan.org>

