<u>AGENDA</u>

BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS RECIPIENT RIGHTS ADVISORY & APPEALS COMMITTEE MEETING

Thursday, December 5, 2024 at 5:00 pm

Behavioral Health Center, Room 225, 201 Mulholland Street, Bay City, MI 48708

Committee Members:	Present	Excused	Absent	Committee Members	Present	Excused	Absent	Others Present:
Patrick McFarland, Ch				Toni Marie Reese				BABH: Melissa Prusi, Chris Pinter, and
Sally Mrozinski, V Ch				Laurie Van Wert				Sara McRae
Robert Bowers				Robert Pawlak, Ex Off				
Kathy Niemiec				Richard Byrne, Ex Off				
Justin Peters								Legend: M-Motion; S-Support; MA-
								Motion Adopted; AB-Abstained

	Agenda Item	Discussion	Motion/Action
1.	Call To Order & Roll Call		
2.	Public Input (Maximum of 3 Minutes)		
3.	Advisory Committee Report 3.1) Executive Summary of Complaints for the months ending October 31, 2024 & November 30, 2024		3.1) No action necessary
4.	Training 4.1) Photographing, Video Recording, Audio Taping Fingerprinting Recipients, 03-03-06		4.1) No action necessary
5.	 4.2) Complaint Investigation & Resolution, 03-05-01 Unfinished Business 5.1) None 		4.2) No action necessary
6.	New Business 6.1) December Site Visits 6.2) 2025 Annual Goals		6.1) No action necessary6.2) Consideration of a motion to adopt the 2025 annual goals

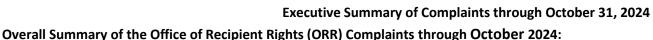
AGENDA

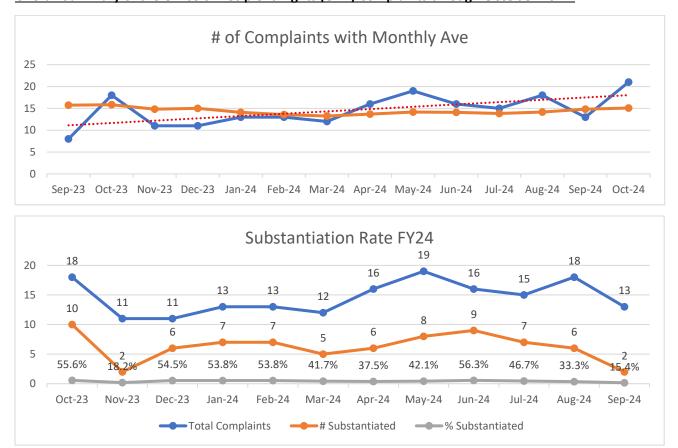
BAY ARENAC BEHAVIORAL HEALTH BOARD OF DIRECTORS RECIPIENT RIGHTS ADVISORY & APPEALS COMMITTEE MEETING Thursday, December 5, 2024 at 5:00 pm Behavioral Health Center, Room 225, 201 Mulholland Street, Bay City, MI 48708

Page 2 of 2

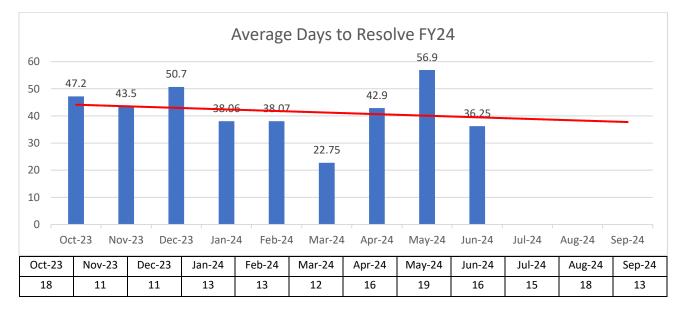
	6.3) BABH 2024 Annual Recipient Rights Report			6.3) Consideration of motion to forward the BABH 2024 Annual Recipient Rights Report to the full Board for approval
	6.4) Review of 2024-2025 BABH Office of Recipient Rights Budget			6.4) No action necessary
	6.5) Recipient Rights/Customer Services Department Moves to Mulholland Update			6.5) No action necessary
	6.6) Reminder of New Meeting Schedule for 2025			6.6) No action necessary
7.	Adjournment	M -	S -	pm MA

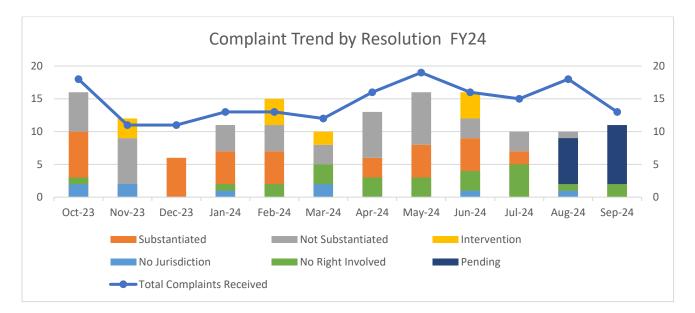
Recipient Rights Advisory and Appeals Committee

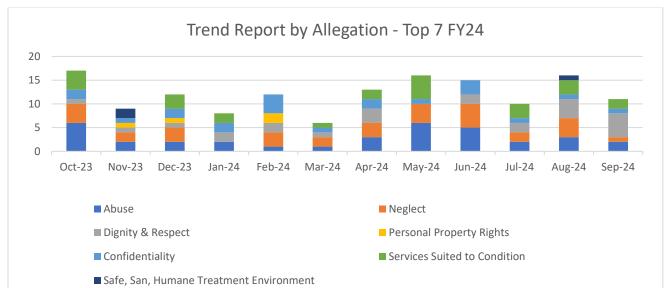




The BABHA ORR completed 190 ORR Complaints for FY23 with an average number of days to resolve the complaints being 57.675 days. The BABHA ORR's goal is to complete RR complaint investigations within 30 days from receipt of the complaint. Moving forward the RRAC will be kept abreast of the average days to resolve complaints per quarter as we attempt to achieve our goal.

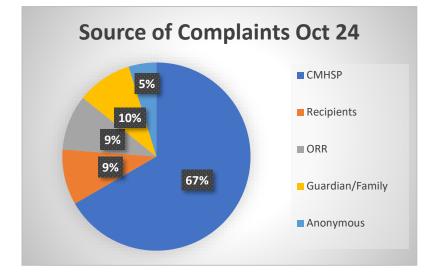






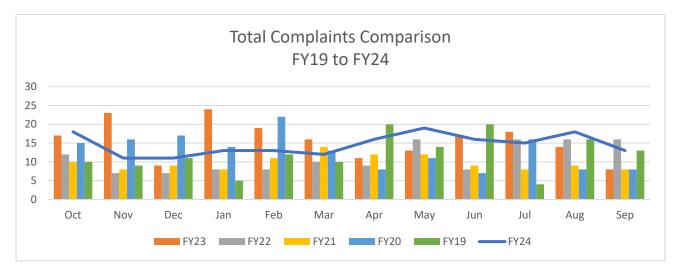
Trend Report by Allegation	Oct-	Nov-	Dec-	Jan-	Feb-	Mar-	Apr-	May-	Jun-	Jul-	Aug-	Sep-
Тор 7	23	23	23	24	24	24	24	24	24	24	24	24
Abuse	6	2	2	2	1	1	3	6	5	2	3	2
Neglect	4	2	3	0	3	2	3	4	5	2	4	1
Dignity & Respect	1	1	1	2	2	1	3	0	2	2	4	5
Personal Property	0	1	1	0	2	0	0	0	0	0	0	0
Confidentiality	2	1	2	2	4	1	2	1	3	1	1	1
Svcs Suited to Cond	4	0	3	2	0	1	2	5	5	3	3	2
Safe, San, Humane Tx	0	2	0	0	0	0	0	0	0	0	1	0

Source of Complaints:

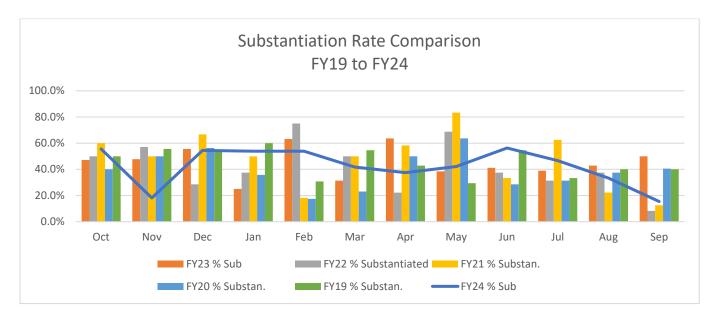


CMSHP Network Staff	14
Recipients	2
ORR	2
Guardian/Family	2
Anonymous	1
Other Agency/Community	0

Comparison of Complaints for FY98 to FY24 (DRAFT):



Total Comp	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
FY24	18	11	11	13	13	12	16	19	16	15	18	13
FY23	17	23	9	24	19	16	11	13	17	18	14	8
FY22	12	7	7	8	8	10	9	16	8	16	16	16
FY21	10	8	9	8	11	14	12	12	9	8	9	8
FY20	15	16	17	14	22	13	8	11	7	16	8	8
FY19	10	9	11	5	12	10	20	14	20	4	16	13



	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
FY24 % Sub	55.6%	18.2%	54.5%	53.8%	53.8%	41.7%	37.5%	42.1%	56.3%	46.7%	33.3%	15.4%
FY23 % Sub	47.1%	47.8%	55.6%	25.0%	63.2%	31.3%	63.6%	38.5%	41.2%	38.9%	42.9%	50.0%
FY22 % Sub	50.0%	57.1%	28.60%	37.5%	75.0%	50.0%	22.2%	68.8%	37.5%	31.3%	37.5%	8.0%
FY21 % Sub	60.0%	50.0%	66.7%	50.0%	18.2%	50.0%	58.3%	83.3%	33.3%	62.5%	22.2%	13.0%
FY20 % Sub	40.0%	50.0%	56.3%	35.7%	17.4%	23.1%	50.0%	63.6%	28.6%	31.3%	37.5%	40.5%
FY19 % Sub	50.0%	55.6%	54.6%	60.0%	30.8%	54.6%	42.9%	29.4%	54.6%	33.3%	40.0%	40.0%

When comparing FY18 with FY19, FY20, FY21, FY22 and FY23 there were significant differences in the number of complaints received in the following months:

- In April 2018 BABHA's ORR received twenty complaints whereas in April 2019 seven complaints were received.
- In June 2018 BABHA's ORR received twenty complaints whereas in June 2019 eleven complaints were received.
- In July 2018 BABHA's ORR received four complaints whereas in July 2019 fifteen complaints were received.
- FY20's total number of complaints is higher for the first quarter than the first quarter for FY19, and FY18.
- COVID-19 significantly reduced the number of RR complaints reported to BABHA's ORR. (Starting March 2020 through FY22.)

- FY23 complaints are trending above FY22 and FY21:
 - FY21 October 2020 through September 2021 the ORR received 118 complaints.
 - \circ $\;$ FY22 October 2021 through September 2022 the ORR received 133 complaints.
 - \circ $\;$ FY23 October 2022 through September 2023 the ORR received 190 complaints.
 - \circ $\;$ FY24 October 2023 through September 2024 the ORR received 177 complaints.

ID	Rcv Date	Inv. Report	Allegation Type	Remedial	Remedial	Remedial
		Sent Date		Action 1	Action 2	Action 3
1652	6/26/2024	9/24/2024	Neglect, Class III	Written Reprimand		
1651	6/27/2024	7/16/2024	Mental Health Services Suited to Condition (Includes Chapter 4 Violations)	Training		
1650	6/25/2024	7/26/2024	Disclosure of Confidential Information	Training		
1649	6/26/2024	9/16/2024	Neglect, Class III	Employment Termination		
1648	6/19/2024	7/16/2024	Neglect, Class III; Disclosure of Confidential Information	Written Reprimand	Training	
1647	6/19/2024	7/15/2024	Disclosure of Confidential Information	Training		
1644	6/17/2024	6/21/2024	Abuse, Class II - Nonaccidental act	Written Reprimand	Suspension	Employment Termination
1643	6/13/2024	6/21/2024	Neglect, Class III	Employment Termination		
1638	6/3/2024	8/27/2024	Neglect, Class III	Written Reprimand	Written Reprimand	Training

Report of Remedial Action for Substantiated Complaints for June 2024:

The matrix displays the substantiated complaints with the date that each complaint was received, resolved, and the date the Summary Report was issued. It is important to note that all complaints were resolved within the 90-calendar day requirement established by the Michigan Mental Health Code. The Mental Health Code dictates that the Responsible Mental Health Agency (RMHA) takes remedial action to correct and prevent reoccurrence of substantiated Recipient Rights Complaints. In addition, if the violation of Abuse or Neglect is substantiated then the RMHA must take fair disciplinary action as well. The matrix above lists the substantiated complaint allegation type and all of the remedial action utilized by the RMHA. The Office of Recipient Rights can only call for disciplinary action as required in the Mental Health Code. The Office cannot dictate the level of disciplinary action as the RMHA determines this action.

Additional Activities by the Office of Recipient Rights:

Training by Recipient Rights Officer for Staff previous month:

Number of Training Sessions	Number of People Attending	Number of Hours
5	63	10

Training by Recipient Rights Officer for Consumers previous month:

Number of Training Sessions	Number of People Attending	Number of Hours
1	3	1

10/02/2024 - Melissa trained the BABHA CAC on several policies

Training received by the Recipient Rights Office:

None

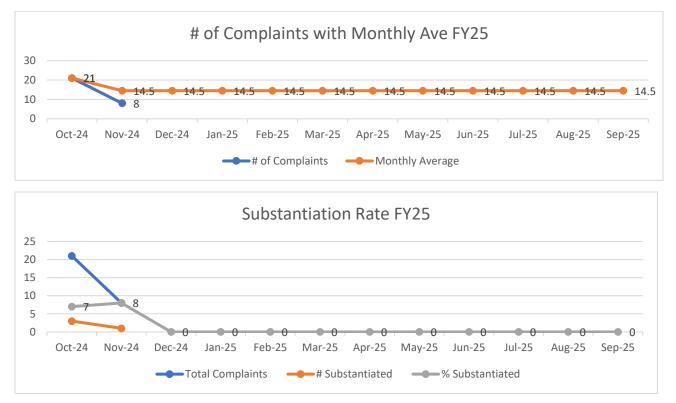
Site Visits:

10/1/24	Liberty Living-Wilson, Independence, Jefferson, Jefferson North & Liberty
10/3/24	Autism & Neurodiversity Services
10/9/24	Hope Network-Bay Valley Home
10/10/24	Bay City Crisis Residential Unit
10/10/24	Mid Michigan Specialized Residential
10/11/24	McLaren LPH
10/15/24	Flourish ABA -Bay City
10/17/24	Mercy Plus ABA-Standish
10/24/24	Safehaus

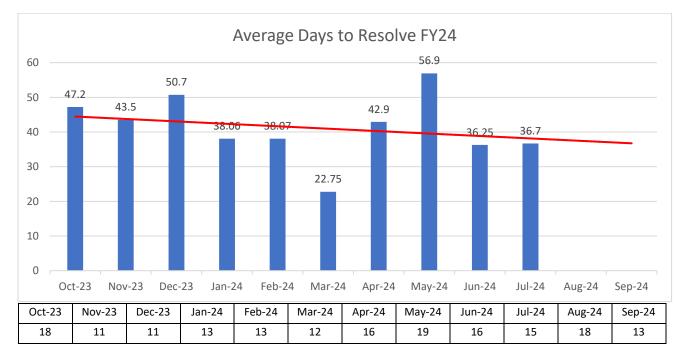
Recipient Rights Advisory and Appeals Committee

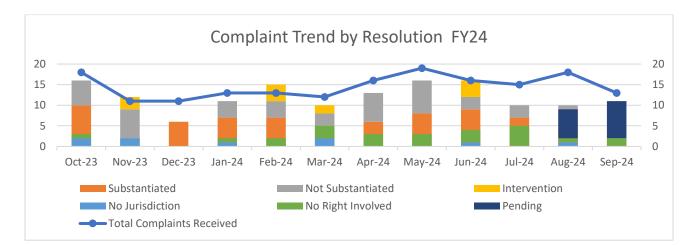
Executive Summary of Complaints through November 30, 2024

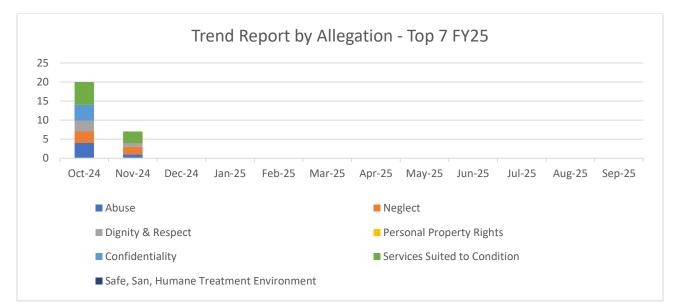
Overall Summary of the Office of Recipient Rights (ORR) Complaints through November 2024:



The BABHA ORR completed 190 ORR Complaints for FY23 with an average number of days to resolve the complaints being 57.675 days. The BABHA ORR's goal is to complete RR complaint investigations within 30 days from receipt of the complaint. Moving forward the RRAC will be kept abreast of the average days to resolve complaints per quarter as we attempt to achieve our goal.







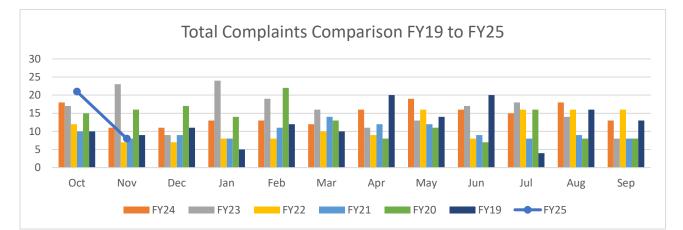
Trend Report by Allegation	Oct-	Nov-	Dec-	Jan-	Feb-	Mar-	Apr-	May-	Jun-	Jul-	Aug-	Sep-
Тор 7	24	24	24	25	25	25	25	25	25	25	25	25
Abuse	4	1										
Neglect	3	2										
Dignity & Respect	3	1										
Personal Property Rights	0	0										
Confidentiality	4	0										
Services Suited to Condition	6	3										
Safe, San, Humane Treatment Environment	0	0										

Source of Complaints:

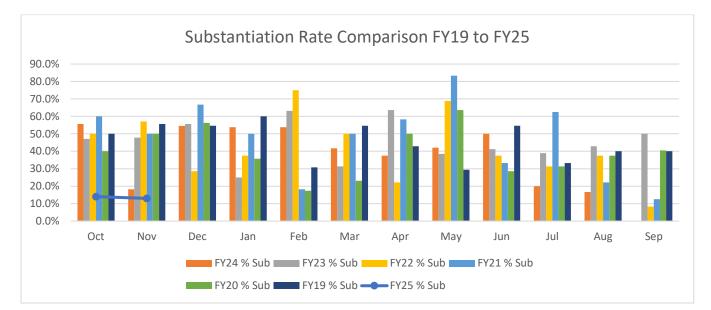


CMSHP Network Staff	14
Recipients	2
ORR	2
Guardian/Family	2
Anonymous	1
Other Agency/Community	0

Comparison of Complaints for FY19 to FY25 (DRAFT):



	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep
FY25	21	8										
FY24	18	11	11	13	13	12	16	19	16	15	18	13
FY23	17	23	9	24	19	16	11	13	17	18	14	8
FY22	12	7	7	8	8	10	9	16	8	16	16	16
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FY20	15	16	17	14	22	13	8	11	7	16	8	8
FY19	10	9	11	5	12	10	20	14	20	4	16	13



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ID	Rcv Date	Inv. Report	Allegation Type	Remedial Action 1	Remedial Action 2	Remedial Action 3	Remedial Action 4
1669	7/26/2024	10/7/2024	Neglect, Class III	Written Reprimand	Training		
1668	7/25/2024	7/25/2024	Mental Health Services Suited to Condition	Written Counseling	Suspension	Employee left agency but substan	Environmental Repair/Enhanc ement
1662	7/12/2024	7/22/2024	Mental Health Services Suited to Condition	Written Counseling			
1661	7/10/2024	10/7/2024	Dignity and Respect	Written Reprimand	Employment Termination	Training	
1659	7/9/2024	9/4/2024	Dignity and Respect	Training	Other (include explanation)		
1658	7/3/2024	9/20/2024	Abuse, Class III	Employee left agency but substan			
1657	7/3/2024	9/18/2024	Neglect, Class III	Suspension	Training		

Report of Remedial Action for Substantiated Complaints for July 2024:

The matrix displays the substantiated complaints with the date that each complaint was received, resolved, and the date the Summary Report was issued. It is important to note that all complaints were resolved within the 90-calendar day requirement established by the Michigan Mental Health Code. The Mental Health Code dictates that the Responsible Mental Health Agency (RMHA) takes remedial action to correct and prevent reoccurrence of substantiated Recipient Rights Complaints. In addition, if the violation of Abuse or Neglect is substantiated then the RMHA must take fair disciplinary action as well. The matrix above lists the substantiated complaint allegation type and all of the remedial action utilized by the RMHA. The Office of Recipient Rights can only call for disciplinary action as required in the Mental Health Code. The Office cannot dictate the level of disciplinary action as the RMHA determines this action.

Additional Activities by the Office of Recipient Rights:

Training by Recipient Rights Officer for Staff previous month:

Number of Training Sessions	Number of People Attending	Number of Hours
2	35	7

Training by Recipient Rights Officer for Consumers previous month:

Number of Training Sessions	Number of People Attending	Number of Hours
3	10	3

11/6/2024 Recipient Rights training at OC-Melissa 11/20/2024 Bay Consumer Council Meeting-Melissa 11/21/2024 Arenac Consumer Council Meeting-Melissa

Training received by the Recipient Rights Office:

None

Site Visits:

11/6/2024	Game Changers Therapy Services-Bay City
11/19/2024	Westwood Specialized Residential
11/21/2024	Noble Pathway Pediatric Therapy

Recipient Rights Complaints Reporting Period - Oct 2024 - September 2025

Category	Category Description	Oct.	Nov.	Dec.	lan.	Feb.	March	April	May	lune	July	Aug.	Sept.	Total Allegations YTD
7084	Dignity and Respect	3	1											4
7081	Mh Services Suite to Condition	6	4											10
7082	Safe, Sanitary/Humane Treatment/Environment													0
7100	Physical and Mental Exams													0
7120	Person Centered Process													0
7110	Family Dignity & Respect													0
7120	Individual Plan of Service													0
7130	Choice of Physician or Mental Health Professional													0
7150	Services of a Mental Health Professional													0
7221	Abuse I													0
72221	Abuse II - Non-Accidental Act	1	1											2
72222	Abuse II - Unreasonable Force	1												1
72225	Abuse II - Exploitation													0
7223	Abuse III	2												2
7224	Abuse I - Sexual Abuse													0
72251	Neglect I													0
72252	Neglect I - Failure to Report													0
72261	Neglect II	2												2
72262	Neglect II - Failure to Report													0
72271	Neglect III	1	2											3
7240	Photographs, Fingerprints - Prior Consent	1												1
7249	Video Surveillance													0
7262	Communications-Telephone													0
7263	Communications-Mail													0
7281	Personal Property - Possession													0
7286	Personal Property-Limitations													0
7300	Safeguarding money													0
7360	Labor & compensation													0
7400	Restraint													0
7420	Seclusion													0
7440	Freedom of Movement													0
7480	Disclosure of Confidential Information	4												4
7550	Rights Protection System													0
7555	Retaliation/Harassment													0
0001	Outside jurisdiction		1											1
0000	No Right involved	2	1											3
														0
	Subtotal	23	10	0	0	0	0	0	0	0	0	0	0	33
							Gran	d Tota	f 61 Alle	gation	s YTD			33

Chapter: 3	Member Rights and Responsibilities								
Section: 3	Rights of Consumers	Rights of Consumers							
Topic: 6	Photographing, Video Recording, Audio Taping, Fingerprinting Recipients								
Page: 1 of 5	Supersedes Date: Pol: 6-3-02, 7-15-99 Proc: 6-3-02, 7-28-98	Approval Date: Pol: 6-21-12 Proc: 5-8-12	Board Chairperson Signature						
Chief Executive Officer Signature Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 11/21/2024. For controlled copy, view Agency Manuals - Medworxx on the BABHA Intranet site.									

DO NOT WRITE IN SHADED AREA ABOVE

Policy

It is the policy of Bay-Arenac Behavioral Health Authority that:

- 1. Fingerprints, photographs, video recordings or audiotapes may be taken and used, and oneway glass may be used: in order to provide services, including research, to a recipient; for educational or training purposes; or to determine the name of a recipient, when informed consent has been obtained from the recipient or applicable parent or guardian. Video surveillance is prohibited.
- 2. Photographs may be taken for purely personal or social purposes unless the recipient or applicable parent or guardian has indicated an objection, either verbally or in writing. However, these photographs, videos, audio-recordings taken for personal or social purposes may not be put on social media of any kind without specific written consent of the legally responsible party.

<u>Purpose</u>

This policy and procedure are established to ensure that recipients are protected in the areas of photographing, video recording, audio taping and fingerprinting.

Education Applies to

🖂 All BABHA Staff	
Selected BABHA Staff, as follows:	
All Contracted Providers: Policy Only	Policy and Procedure
Selected Contracted Providers, as follows:	
Policy Only Policy and Procedu	re
BABHA's (Affiliates): Policy Only	Policy and Procedure

Definitions

Generated By:

		sponsibilities	Member Rights and Responsibilities							
Section: 3	Rights of Consumers									
Topic: 6	Photographing, Video Recording, Audio Taping, Fingerprinting Recipients									
Page: 2 of 5	Supersedes Date: Pol: 6-3-02, 7-15-99 Proc: 6-3-02, 7-28-98	Approval Date: Pol: 6-21-12 Proc: 5-8-12	Board Chairperson Signature							
Chief Executive Officer Signature Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 11/21/2024. For controlled copy, view Agency Manuals - Medworxx on the BABHA Intranet site.										

DO NOT WRITE IN SHADED AREA ABOVE

Audio Taping: Any reproduction of a recipient's voice by mechanical means.

Educational or Training Purposes:

- A. To assist staff in performing their job responsibilities.
- B. To provide general information to the community.

<u>Consent:</u> A written agreement executed by a recipient, a minor recipient's parent, or a recipient's legal representative with authority to execute a consent, that is in compliance with the Agency's procedure for consent.

Photography: Includes still pictures, motion pictures, and videotapes.

Primary Clinician: The staff member in charge of implementing the recipient's plan of service.

Social Media: Included, but is not limited to: Facebook, Parler, Twitter, Instagram, Snap Chat, and/or Linked-In.

Video Recording: A recording of both visual and audible components.

Procedure

- A. <u>Using Fingerprints, Photographs, Video Recordings or Audiotapes, and One-Way</u> <u>Glass to Provide Services, Including Research</u>
 - 1. The primary clinician shall:
 - a. Obtain prior informed consent from one of the following and file it in the recipient's record:
 - i. The recipient if 18 years of age or over and competent to consent
 - ii. The guardian of the recipient if the guardian is legally empowered to execute such a consent
 - iii. The parent with legal and physical custody of the recipient, if the recipient is less than 18 years of age.

Generated By:

Chapter: 3	Member Rights and Re	Member Rights and Responsibilities							
Section: 3	Rights of Consumers	Rights of Consumers							
Topic: 6	010/	Photographing, Video Recording, Audio Taping, Fingerprinting							
	Recipients								
Page: 3 of 5	Supersedes Date: Pol: 6-3-02, 7-15-99 Proc: 6-3-02, 7-28-98Approval Date: Pol: 6-21-12 Proc: 5-8-12Board Chairperson Signature								
	Chief Executive Officer Signature								
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DO NOT WRITE IN SHADED AREA ABOVE

- b. Inform the individual signing the consent that he or she is free to withdraw consent at any time without prejudice, and document on the form if consent is withdrawn.
- c. Ensure that the fingerprints, photographs, video recordings or audiotapes, and any copies of them, shall be kept as part of the recipient's record and be subject to standards governing confidentiality.
- d. Annually review whether the fingerprints, photographs, video recordings or audiotapes in the record, and any copies of them, are still essential for the original purpose. Either give them to the recipient or destroy them when they are no longer essential or when the recipient is discharged, whichever occurs first.
- 2. The staff taking the fingerprints, photographs, video recordings or audiotapes shall afford the recipient an opportunity to object, verbally or in writing, immediately prior to the time the fingerprinting, photographing, video recording or taping occurs.
- B. <u>Using Photographs, Video Recording, Audiotapes, or One-Way Glass for Educational</u> or <u>Training Purposes</u>
 - 1. The primary clinician shall:
 - a. Obtain prior informed consent from one of the following and file it in the recipient's record:
 - i. The recipient if 18 years of age or over and competent to consent
 - ii. The guardian of the recipient, if the guardian is legally empowered to execute such a consent
 - iii. The parent with legal and physical custody of the recipient, if the recipient is less than 18 years of age.
 - b. Inform the individual signing the consent that he or she is free to withdraw consent at any time without prejudice, and document on the form if consent is withdrawn.
 - c. Inform the individual signing the consent whether or not the photographs, fingerprints, video recordings or audiotapes, and any

Chapter: 3	Member Rights and I	Member Rights and Responsibilities		
Section: 3	Rights of Consumers	Rights of Consumers		
Topic: 6	Photographing, Video Recipients	Photographing, Video Recording, Audio Taping, Fingerprinting Recipients		
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copies of them, shall be kept as part of the recipient's record and be subject to standards governing confidentiality.

- d. If the photographs, fingerprints, video recordings or audiotapes will be kept confidential, annually review whether they are still essential for the original purpose. Either give them to the recipient or destroy them when they are no longer essential or when the recipient is discharged, whichever occurs first.
- 2. The staff taking the photographs, fingerprints, video recordings or audiotapes, or using the one-way glass shall afford the recipient an opportunity to object, verbally or in writing, immediately prior to the time the fingerprinting, photographing, video recording, or audiotaping, or use of one-way glass occurs.

C. Taking Photographs or Producing Video Recordings for Personal Or Social Purposes

- 1. The primary clinician shall:
 - a. Obtain prior informed consent from one of the following and file it in the recipient's record:
 - i. The recipient if 18 years or over and competent to consent
 - ii. The guardian of the recipient if the guardian is legally empowered to execute such a consent
 - iii. The parent with legal and physical custody of the recipient if the recipient is less than 18 years of age.
 - b. Inform the individual signing the consent that he or she is free to withdraw consent at any time without prejudice, and document on the form if consent is withdrawn.
- 2. The staff taking the photographs or producing the video recordings shall afford the recipient an opportunity to object, verbally or in writing, immediately prior to the time the photograph or video recording is taken.

Attachments N/A

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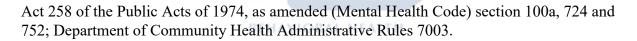
Related Forms

Consent Form for Use of Photographs and/or Video Recordings (Master Clinical Files)

Related Materials

N/A

<u>References/Legal Authority</u>



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	SUBMISSION FORM				
AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL /REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION - If replacement list policy to be replaced	
Marlene Wolber	Linda Maze	11/10/09	Revision	Triennial Review-format and language updated	
Pepa Carlson Tina Dilley	Linda Maze	5/8/12	Revision	Revised to include video recordings and added related form: consent for Use of Photographs and/or Video Recordings	
Melissa Prusi	Christopher Pinter	6/27/16	No changes	Triennial Review-no changes	
Melissa Prusi	Christopher Pinter	06/20/2019	Revision	Triennial and annual review – minor changes	
Melissa Prusi	Christopher Pinter	01/06/2021	Revision	Annual review	
Melissa Prusi	Christopher Pinter	01/25/2021	Revision	Revised to reflect updated MDHHS ORR standards re: video surveillance.	
Melissa Prusi	Christopher Pinter	06/23/2021	No changes	Triennial Review	

BAY-ARENAC BEHAVIORAL HEALTH AUTHORITY	
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Policy

It is the policy of Bay-Arenac Behavioral Health Authority (BABHA) that:

- A. A mechanism shall be provided for prompt reporting, review, investigation, and resolution of apparent or suspected rights violations, which includes an appeal process. Further, it is the policy of BABHA that an acknowledgement of the receipt of any submitted complaint be issued to the complainant within five (5) business days; and if the investigation is not completed and a report issued within thirty (30) calendar days of receipt of the complaint, a status report is issued to the complainant reporting on:
 - Statement of allegation EHAVIORAL HEALTH
 - Statement of issues
 - Citations of relevant portions of the Michigan Mental Health Code (MMHC), rules, policies, and guidelines
 - Investigative process to date
 - Expected completion date
- B. An Investigative Report is to be completed by the Recipient Rights Officer within 90 calendar days of the initial complaint receipt following by a Summary Report completed by the Chief Executive Officer (CEO) within 10 business days of the Investigation Report.
- C. The complainants, staff or the Office of Recipient Rights, and any staff acting on behalf of a recipient shall be protected from harassment or retaliation resulting from recipient rights activities.
- D. Appropriate disciplinary action shall be taken in accordance with agency policy and procedure if there is evidence of harassment or retaliation.

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Purpose

This policy and procedure is established to ensure that there is a mechanism in place for the prompt reporting, review, investigation and resolution of apparent or suspected rights violations which includes an appeals process.

Education Applies to:

All BABHA Staff
Selected BABHA Staff, as follows:
All Contracted Providers: Policy Only Policy and Procedure
Selected Contracted Providers, as follows: RAL HEALTH
Policy Only Policy and Procedure
BABHA's (Affiliates): Policy Only Policy and Procedure
Other:

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Definitions

<u>Appellant:</u> The recipient, complainant, parent of a minor or guardian who appeals a recipient rights finding or a respondent's action to an Appeals Committee.

<u>Intervention</u>: To act on behalf of a recipient to resolve a complaint alleging a violation of a code protected right when the facts are clear and the remedy, if applicable, is clear, easily obtainable and does not involve statutorily required disciplinary action.

<u>Investigation</u>: A detailed inquiry into, and systematic examination of, an allegation raised in a rights complaint. The Recipient Rights Office shall determine whether a right was violated by using the preponderance of evidence standard as its standard of proof.

<u>Preponderance of Evidence:</u> A standard of proof which is met when, based upon all available evidence; it is more likely that something is true than untrue; greater weight of evidence, not to

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quantity (number of witnesses), but as to quality (believability and greater weight of important facts); more than 50 percent.

<u>Reasonable Cause:</u> A suspicion founded upon circumstances sufficiently strong to warrant a reasonable person to believe that the suspicion is true.

<u>Respondent:</u> The service provider that had responsibility at the time of an alleged rights violation for the services with respect to which a rights complaint has been filed.

<u>Rights Complaint</u>: A written or oral statement filed by a recipient, or another individual on behalf of a recipient, with the Office of Recipient Rights, alleging a violation of the MMHC or Administrative Rules, and which contains the following information:

- A. A statement of the allegations that give rise to the dispute;
- B. A statement of the right or rights that may have been violated;
- C. The outcome that the complainant is seeking as a resolution to the complaint.

<u>Harassment:</u> Words, gestures, or actions which threaten an individual, unreasonably interfere with an individual's work performance, or create an intimidating, hostile or offensive work environment.

<u>Retaliation:</u> Unjustified negative actions taken against an individual. Examples include but are not limited to: discharge, deterioration in performance evaluations, changes in job classification, job responsibilities, compensation, benefits, location, and number of hours assigned, or specific shift assigned.

Procedure

I. Standards

A. BABHA and respondents shall ensure that:

Appropriate administrative action is taken for failure to report suspected rights violations;

Action is taken to protect the recipient during the investigation;

The Office of Recipient Rights has unimpeded access to all of the following:

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All programs and services

All employees, volunteers, trainees, and recipients; All evidence that the Recipient Rights Office determines is necessary to conduct a thorough investigation or to fulfill its monitoring of remedial action.

Employees, volunteers, or agents of a provider who may have knowledge pertinent to the investigation, cooperate fully with the Office of Recipient Rights and other authorized investigative bodies, respond to questions put forth, verbally or in writing, provide written statements when requested, and provide accurate and honest information. Disciplinary action shall be taken for any failure to cooperate.

All employees, volunteers, agents of a provider, recipients, and others who file a complaint or cooperate in an investigation are protected from discrimination, harassment, or retaliation in accordance with applicable laws and BABHA policies/procedures, and appropriate disciplinary action is taken if this does occur.

The recipient's record and other documentary or physical evidence is immediately secured as necessary and protected from tampering, erasures, deletions, or any other type of falsification.

Copies of documentation requested by the Office of Recipient Rights are provided in a timely manner.

- B. The Office of Recipient Rights shall assure that recipients, parents, guardians, and others have ready access to complaint forms.
- C. Rights complaints filed by recipient or anyone on their behalf are sent or given to the designated rights officer/advisor in a timely manner.
- II. <u>Procedure</u>

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- A. Reporting of Rights Violations
 - 1. All employees, volunteers, and trainees who witness, discover, or have reasonable cause to suspect recipient rights violations shall report, verbally or in writing, to a designated supervisor AND the Office of Recipient Rights within 24 hours.

B. Filing Rights Complaints

- 1. The Office of Recipient Rights shall:
 - a. Date, number, and record each rights complaint when it is received and send an acknowledgment, along with a copy of the complaint, to the complainant within five (5) business days. If the Recipient Rights Office determines that no investigation of the rights complaint is warranted, it shall notify the complainant within five (5) business days;
 - b. Assist the recipient or other individual with the complaint process;
 - c. Advise the recipient or other individual that there are advocacy organizations such as Disability Rights Michigan available to assist in preparation of a written rights complaint and offer to refer the recipient or other individual to those organizations. In the absence of assistance from an advocacy organization, the Office of Recipient Rights shall assist in preparing a written rights complaint;
 - d. Accept complaints that are filed anonymously and protect any information that may lead to identification of the anonymous complainant.
 - e. Route complaints involving alleged abuse, neglect, serious injury, or death to the CEO.
- 2. When the Recipient Rights Office determines that no investigation of the rights complaint is warranted, the office may complete an intervention within 30 days which shall include:
 - a. Recommendations for remedial action for obvious rights violations;
- 3. An employee, who is aware that a recipient or other individual wants to file a rights complaint, shall either assist that person or refer him/her to the Recipient Rights Office.

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C. Investigation

- 1. All employees, volunteers, and trainees shall cooperate fully with investigators from the Office of Recipient Rights and other authorized investigative bodies, respond to questions put forth, verbally or in writing, and provide accurate and honest information.
- 2. The Office of Recipient Rights shall:
 - a. Investigate activities for each rights complaint of apparent or suspected rights violations in a timely and efficient manner. Investigation shall be initiated immediately in cases involving alleged abuse, neglect, serious injury, or the death of a recipient that involves an apparent or suspected rights violation.
 - b. Maintain accurate records of all complaints and corresponding documentation.
 - c. Conduct investigations in a manner that does not violate employee rights.
 - d. Complete the investigation no later than 90 days after receiving the rights complaint subject to delays involving pending action by external agencies including law enforcement, protective services, or licensing entities. Include the following when pertinent to the investigation:
 - i. An interview with the complainant when circumstances allow, preferably face-to-face;
 - ii. An interview with the recipient if other than complainant when circumstances allow, preferably face-to-face;
 - iii. Interviews with all witnesses and others who may provide relevant information, preferably face-to-face;
 - iv. Interviews with employees, volunteers, and trainees who are alleged to have violated a right, preferably face-to-face;
 - v. Written statements from employees, volunteers, trainees, recipients, and relevant others when such a statement is necessary to support oral interviews, to obtain additional information, or to provide findings relevant to the investigation;

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- vi. Review of recipient records and appropriate other documentation;
- vii. Review of investigations into the same allegation conducted by law enforcement licensing entities, or others when available;
- viii. Visit to the site of the alleged violation;
- ix. Review of pertinent laws, rules, policies and procedures.
- e. Maintain accurate records of investigative activities and findings.
- f. Store all investigative documents and evidence in a secure manner in a locked cabinet in the Office of Recipient Rights, separate from clinical or personnel records and within the constraints of confidentiality and privileged communications in Sections 748 and 750 of the MMHC.
- g. Determine whether a right was violated by using a preponderance of evidence as the standard of proof.
- h. Monitor progress toward remediation of all substantiated violations of rights.
- 3. The Office of Recipient Rights may:
 - a. File additional rights complaints when it becomes apparent that other rights may have been violated;
 - b. Consult with the respondent to determine appropriate remedial action.
- 4. If a rights complaint has been filed regarding the conduct of the CEO, the rights investigation shall be conducted by the office of another Community Mental Health Services Program (CMHSP) or by the State Office of Recipient Rights, as decided by BABHA.
- D. Status Report
 - 1. The Office of Recipient Rights shall:
 - a. Issue a written Status Report every 30 calendar days during the course of the investigation. The report shall be submitted to the complainant, the respondent, and the responsible mental health agency (RMHA).
 - b. Include all the following in the Status Report:
 - i. Statement of the allegations;
 - ii. Statement of the issues involved;

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- iii. Citations to relevant provisions of the MMHC, Administrative Rules, guidelines, and BABHA policies and procedures;
- iv. Investigative progress to date;
- v. Expected date for completion of the investigation.

E. Investigative Report

- 1. The Office of Recipient Rights shall:
 - a. Submit a written Investigative Report to the respondent and Agency Director upon completion of the investigation. Issuance of the written Investigative Report may be delayed pending completion of investigations that involve external agencies including law enforcement, protective services, or licensing entities:
 - b. Include all of following in the Investigative Report:
 - i. Statement of the allegations;
 - ii. Statement of the issues involved;
 - iii. Citations to relevant provisions of the MMHC, Administrative Rules, guidelines, and BABHA policies and procedures;
 - iv. Investigative findings;
 - v. Conclusions;
 - vi. Recommendations, if any
- 2. The Office of Recipient Rights may reopen or reinvestigate a complaint if there is new evidence that was not presented at the time of the original investigation.

F. <u>Remedial Action</u>

- 1. If it has been determined through investigation that a right has been violated, the respondent shall:
 - a. Take appropriate remedial action that meets all of the following requirements;
 - i. Corrects or provides a remedy for the rights violation;
 - ii. Is implemented in a timely manner;
 - iii. Attempts to prevent a recurrence of the rights violation;
 - b. Provide the Office of Recipient Rights with written documentation of the remedial action for its record.

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2. BABHA and each provider under contract with BABHA shall:

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- a. Ensure that appropriate disciplinary action is taken against those who have engaged in abuse or neglect;
- b. Apply remedial action for a specific complaint to all recipients in similar situations, when applicable.

3. BABHA shall:

a. Ensure that remedial action taken on substantiated violations is documented and maintained by the Rights Office.

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G. Summary Report

The CEO shall:

- a. Submit a written Summary Report to the complainant and recipient, if different from the complainant, guardian or parent of a minor recipient, and the Office of Recipient Rights within 10 business days after receiving a copy of the Office of Recipient Rights investigative report.
- b. Include all of the following in the Summary Report:
 - i. Statement of the allegations;
 - ii. Statement of the issues involved;
 - iii. Citations to relevant provisions of the MMHC, Administrative Rules, guidelines, and BABHA policies and procedures;
 - iv. Summary of investigative findings;
 - v. Conclusions;
 - vi. Recommendations made by the office;
 - vii. Action taken, or plan of action proposed, by the respondent;
 - viii. Statement describing the complainant's, guardian or parent of a minor recipient's right to appeal and the grounds for an appeal.
- Provide information in the Summary Report within the constraints of confidentiality and privileged communications in Sections 748 and 750 of the MMHC.
- c. Provide information in the Summary Report in a manner that does not violate the rights of any employee. (ex. Bullard-Plawecki Employee Right to Know Act, Act No. 397 of the Public Acts of 1978, MCL 423.501 est.seq)

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H. Board Appeals Committee

- 1. The Recipient Rights Advisory Committee is designated as the Appeals Committee.
- 2. The Appeals Committee shall:
 - a. Appoint one member to serve as chair;
 - b. Receive training about recipient rights;
 - c. Ensure that a member who has a personal or professional relationship with an individual involved in an appeal abstains from participating in that appeal as a member of the committee;
 - d. Conducts appeals proceedings within the constraints of confidentiality and privileged communications in Sections 748 and 750 of the MMHC. Such meetings are not subject to the Open Meetings Act.
 - e. Write reports within the constraints of confidentiality and privileged communications in Section 748 and 750 of the MMHC and in a manner that does not violate the rights of any employee.
- 3. The Appeals Committee may:
 - a. Schedule to meet within 30 days to review the appeal in a non-public session and review the facts as stated in all complaint investigation documents and;
 - b. Request consultation and technical assistance from the Michigan Department of Health and Human Services (MDHHS).
- I. <u>Appeal of a Summary Report</u>
 - 1. Not later than 45 days after receipt of the Summary Report, the complainant may file a written appeal with the Appeals Committee.
 - 2. An appeal shall be based on one of the following grounds:
 - The decision of the Office of Recipient Rights is not consistent with the facts or with law, rules, policies, or guidelines;
 - The action taken or plan of action proposed by the respondent does not provide an adequate remedy.
 - An investigation was not initiated or completed on a timely basis.

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3. The Office of Recipient Rights shall:

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- a. Inform the appellant of their right to appeal the decision made by the Rights Office;
- b. Advise the appellant that there are advocacy organizations such as Michigan Protection and Advocacy Services available to assist in preparing the written appeal and offer to refer the appellant to those organizations;
- c. In the absence of assistance from an advocacy organization, assist the appellant in meeting the procedural requirements of a written appeal;
- 4. The Appeals Committee shall:
 - a. Review the appeal within five (5) business days after receipt of the written appeal to determine whether it met criteria (above);
 - b. Notify the appellant, in writing, if the appeal was accepted or denied, within the five (5) business day period;
 - c. Provide written notice to the complainant and provide a copy of the appeal to the respondent and the Agency if the appeal is accepted within the five (5) business day period;
 - d. Provide a copy of the appeal, if it was accepted, to the respondent and the CMHSP within the five (5) business day period;
 - e. Meet to review the facts as stated in all complaint investigation documents within 30 days after receipt of a written appeal was received, and do one of the following:
 - i. Uphold the investigative findings of the Office of Recipient Rights and the action taken or plan of action posed by the respondent. If an investigation is returned to the CMH by an appeals committee for reinvestigation, upon receipt of the RIF, the director will take appropriate remedial action and will submit a written summary report to the complainant, recipient, if different than the complainant, parent or guardian, and the appeals committee within 10 business days.
 - ii. Return the investigation to the Office of Recipient Rights and request that it be reinvestigated and completed within 45 days;
 - iii. Uphold the investigative findings of the Office of Recipient Rights but recommend that the respondent take additional or different action to remedy the violation. If a request for additional or

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different action is sent to the Director, a response will be sent within 30 days as to the action taken or justification as to why it was not taken. The response will be sent to the complainant, recipient, if different than the complainant, parent or guardian, and the appeals committee.

- iv. Recommend that the Agency Board request an external investigation by the MDHHS Office of Recipient Rights. If the committee notifies the CMH Board chair of a recommendation to seek an external investigation from MDHHS-ORR, the board will send a letter of request to the director of MDHHS-ORR within 5business days of receipt of the request from the appeals committee. The director of the CMH making the request will be responsible for the issuance of the summary report, which will identify the grounds and advocacy information as in A32-A34 of this document and MDHHS-ORR Appeal Committee as the committee for any Appeal.
- f. Document its decision in writing, and
 - Within 10 days after reaching its decision, the Appeals Committee provide copies of the decision, to the respondent, appellant, recipient if different than the appellant, the recipient's guardian if a guardian has been appointed, the Agency, and the Office of Recipient Rights. Copies shall include a statement of the appellant's right to appeal to MDHHS Appeals Committee (Level 2 appeal), the time frame for appeal (45 days from receipt of decision) and grounds for appeal (investigative findings or the rights office are inconsistent with facts, rules, policies or guidelines). (MMHC 786)
- J. Appeal of an Agency Appeals Committee Decision
 - 1. Within 45 days after receiving written notice of the decision of the Agency Appeals Committee, the appellant may file a written appeal with the MDHHS. The appeal shall be based on the record established in the previous appeal, and on the allegation that the investigative findings of the Office of Recipient

Chapter: 3	Member Rights and Re	Member Rights and Responsibilities				
Section: 5	Complaint Investigation	n and Resolution				
Topic: 1	Investigation/Resolution	n				
Page: 13 of 15	Supersedes Date: Pol: 9-20-01, 7-15-99 Proc: 6-27-16, 3-30-11, 6- 15-09, 7-26-05, 3-10-05, 8- 15-02, 6-3-02, 5-21-02, 1- 18-02, 7-28-98	Approval Date: Pol: 6-3-02 Proc: 3-14-2023	Board Chairperson Signature			
Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 11/21/2024. For						
controlled copy, view Ag	gency Manuals - Medworxx on the BA	BHA Intranet site.				

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Rights are not consistent with the facts or with law, rules, policies, or guidelines.

- 2. MDHHS shall give written notice of receipt of the appeal to the appellant, respondent, local Office of Recipient Rights, and the Agency. The respondent, local Office of Recipient Rights and the Agency shall ensure that the MDHHS has access to all necessary documentation and other evidence cited in the complaint.
- 3. MDHHS shall review the record based on the evidence or information that was not available during the local appeal process, although the MDHHS may return the matter to the Agency requesting an additional investigation.
- 4. Within 30 days after receiving the appeal, the MDHHS shall review the appeal and do one of the following:
 - a. Affirm the decision of the local appeals committee;
 - b. Return the matter to the Agency with instructions for additional investigation and consideration.
- 5. The MDHHS shall provide copies of its action to the respondent, appellant, recipient if different than the appellant, the recipient's guardian, the Agency and the local Office of Recipient Rights.

K. Appeal to Circuit Court

A person aggrieved by a decision of the Director of the MDHHS may appeal to the Circuit Court, requesting an order reversing the decision. The appeal shall be based upon the whole record, and the Circuit Court considers whether the decision is authorized by law and supported by competent evidence.

L. Harassment/Retaliation

An individual who believes he or she is the subject of retaliation resulting from recipient rights activities should use the Agency's grievance procedure as a means for resolving the matter.

In any instance where the immediate supervisor is involved, the employee should process his or her complaint with the CEO.

Chapter: 3	Member Rights and Re	Member Rights and Responsibilities				
Section: 5	Complaint Investigation	n and Resolution				
Topic: 1	Investigation/Resolution	n				
Page: 14 of 15	Supersedes Date: Pol: 9-20-01, 7-15-99 Proc: 6-27-16, 3-30-11, 6- 15-09, 7-26-05, 3-10-05, 8- 15-02, 6-3-02, 5-21-02, 1- 18-02, 7-28-98	Approval Date: Pol: 6-3-02 Proc: 3-14-2023	Board Chairperson Signature			
Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 11/21/2024. For controlled copy, view Agency Manuals - Medworxx on the BABHA Intranet site.						

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Attachments

N/A

Related Forms

DCH 0030 Complaint Form (Intranet-Forms for Employees)

Related Materials - Exhibits:

N/A

BEH.	AVE	OR	AL-	HI	EAL	TH.

ARENAC

References/Legal Authority

- A. Act 258 of the Public Acts of 1974, as amended (Mental Health Code), Sections 330.1722. 752, 755, 776-782, 788.
- B. Act 469 of the Public Arts of 1980 (Whistleblowers Protection Act)
- C. Department of Health and Human Services Administrative Rule 7035.

BAY

D. The Agency Board minutes, June 1996.

	SUBMISSION FORM					
AUTHOR/ REVIEWER	APPROVING BODY/COMMITTEE/ SUPERVISOR	APPROVAL /REVIEW DATE	ACTION (Deletion, New, No Changes, Replacement or Revision)	REASON FOR ACTION - If replacement list policy to be replaced		
Sara Heydens	Linda Maze	6/15/09	Revision	Grammatical/Combined Policy		
Sara Heydens	Linda Maze	3/30/11	Revision	Language added to update to current practices		
		12/31/12	Revision	Triennial Review-Minor grammatical		

Chapter: 3	Member Rights and Responsibilities						
Section: 5	Complaint Investigation	n and Resolution					
Topic: 1	Investigation/Resolution	n					
Page: 15 of 15	Supersedes Date: Approval Date: Pol: 9-20-01, 7-15-99 Pol: 6-3-02 Proc: 6-27-16, 3-30-11, 6- 15-09, 7-26-05, 3-10-05, 8- 15-02, 6-3-02, 5-21-02, 1- Proc: 3-14-2023 Board Chairperson Signature						
	Chief Executive Officer Signature						
Note: Unless this document has an original signature, this copy is uncontrolled and valid on this date only: 11/21/2024. For controlled copy, view Agency Manuals - Medworxx on the BABHA Intranet site.							

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				changes
Melissa Prusi	Christopher	6/27/16	Revisions	Triennial Review-Minor changes to reflect current state agency names
Melissa Prusi	Christopher Pinter	06/22/2019	Review	Triennial and annual review. No changes.
Melissa Prusi	Christopher Pinter	09/10/2020	Revision	Annual review and removal of mediation option from policy.
Melissa Prusi	Christopher Pinter	07/29/2021	Revision	Changed Michigan Protection and Advocacy Services to Disability Rights Michigan.
Melissa Prusi	Christopher Pinter	03/14/2023	Revised	To reflect 2023 MDHHS ORR standards



BEHAVIORAL HEALTH



Recipient Rights Advisory & Appeals Committee Site Reviews December 2024

Site Reviews:

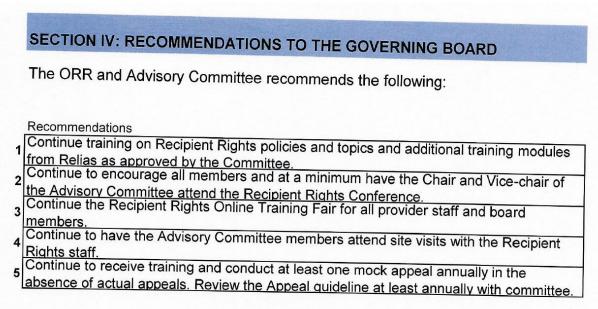
12/12/2024

 $\circ~$ Bay City Crisis Residential – Bay City, MI 48602

Recommendations to the Governing Board

The Office of Recipient Rights and Recipient Rights Advisory Committee Recommends:

2024 Recommendations



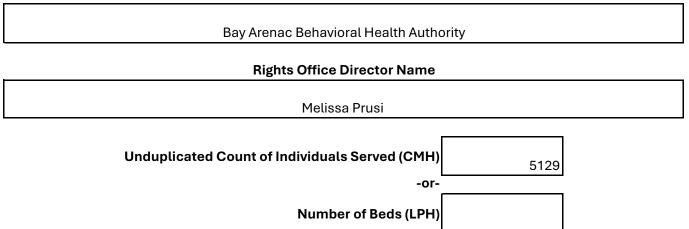
Outcomes	Status
Maintain full compliance with MDHHS ORR standards.	Ongoing
Promote visibility of the Recipient Rights/Customer Service Staff.	Ongoing
Complete investigations within 30 calendar days unless awaiting outside information for completion.	Ongoing
Continue to provide effective Recipient Rights training to those we serve, employees, contract staff, and any agent of the agency.	Ongoing
Provide initial Recipient Rights site review within four months of fully executed contract with new providers.	Ongoing
Outcomes established for the Office of Recipient Rights for 2025	
Maintain full compliance with MDHHS ORR standards.	
Promote visibility of the Recipient Rights/Customer Service Staff.	
Complete investigations within 30 calendar days unless awaiting outside information for completion.	
Continue to provide effective Recipient Rights training to those we serve, employees, contract staff, and any agent of the agency.	

Provide initial Recipient Rights site review within four months of fully executed contract with new providers.

Office of Recipient Rights Demographic Data

Data Report Covering October 1, 2023 through September 30, 2024

CMH/LPH Name



Staff Performing Recipient Rights Functions

Staff Name	Hours Per Week	Role
Melissa Prusi	40	Other ORR Function
Kevin Motyka	40	Investigation
Bridget Hayes	40	Investigation
Tamera Matuszewski	40	Administration/Cle

Summary of Complaint Data by Category

Code	Category	Total Received	Investigation	Intervention	Substantiated
7221	Abuse Class I	0	0	0	0
72221	Abuse Class II - Nonaccidental Act	7	7	0	2
72222	Abuse Class II - Unreasonable Force	6	6	0	4
72223	Abuse Class II - Emotional Harm	0	0	0	0
72224	Abuse Class II - Treating as Incompetent	0	0	0	0
72225	Abuse Class II - Exploitation	10	10	0	4
7223	Abuse Class III	10	10	0	4
7224	Abuse Class I - Sexual Abuse	2	2	0	0
72251	Neglect Class I	1	1	0	0
72252	Neglect Class I - Failure to Report	0	0	0	0
72261	Neglect Class II	9	9	0	4
72262	Neglect Class II - Failure to Report	1	1	0	1
72271	Neglect Class III	34	34	0	25
72272	Neglect Class III - Failure to Report	0	0	0	0
7550	Rights Protection System	0	0	0	0
7555	Retaliation/Harassment	0	0	0	0
7040	Civil Rights	0	0	0	0
7044	Religious Practice	0	0	0	0
7045	Voting	0	0	0	0
7081	Mental Health Services Suited to Condition	26	21	5	11
7082	Safe, Sanitary, and Humane Treatment Environment	3	2	1	1
7083	Least Restrictive Setting	0	0	0	0
7084	Dignity and Respect	33	33	0	13
7100	Physical and Mental Exams	0	0	0	0
7110	Family Rights	1	1	0	1

Code	Category	Total Received	Investigation	Intervention	Substantiated
7120	Individual Written Plan of Service	3	2	1	1
7130	Choice of Physician/Mental Health Professional	0	0	0	0
7140	Notice of Clinical Status/Progress	0	0	0	0
7150	Services of a Mental Health Professional	0	0	0	0
7160	Surgery	0	0	0	0
7170	Electroconvulsive Therapy	0	0	0	0
7180	Psychotropic Drugs	0	0	0	0
7190	Medication Side Effects	0	0	0	0
7240	Fingerprints, Photographs, Audio Recordings, and Use of One-Way Glass	1	0	1	1
7249	Video Surveillance	0	0	0	0
7261	Communications - Visits	0	0	0	0
7262	Communications - Telephone	0	0	0	0
7263	Communications - Mail	0	0	0	0
7281	Personal Property - Possession and Use	6	4	2	5
7286	Personal Property - Limitations	0	0	0	0
7300	Safeguarding Money (State Hospitals Only)	0	0	0	0
7360	Labor and Compensation	0	0	0	0
7440	Freedom of Movement	4	3	1	2
7400	Restraint	0	0	0	0
7420	Seclusion	2	2	0	0
7460	Complete Record	0	0	0	0
7480	Disclosure of Confidential Information	23	16	7	13
7481	Withholding Confidential Information/Access Denial to Records	0	0	0	0
7490	Correction of Record	0	0	0	0
7500	Privileged Communication	0	0	0	0
0000	No Right Involved	25			
0001	Outside ORR Jurisdiction	9			

Substantiated Rights Violations and Remedial Action Taken

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Abuse Class II - Unreasonable Force	Contracted	Other		0	0	1
Neglect Class III	Contracted	Training	Written Reprimand	0	0	1
Neglect Class III	Contracted	Employment Termination		0	0	1
Mental Health Services Suited to Condition	Agency	Written Counseling	Training	0	0	0
Neglect Class III	Contracted	Employment Termination		0	0	3
Mental Health Services Suited to Condition	Contracted	Employment Termination		1	0	0
Neglect Class III	Contracted	Employment Termination		0	0	1
Neglect Class III	Contracted	Written Counseling		0	0	2
Personal Property - Possession and Use	Contracted	Training	Employment Termination	0	0	1
Neglect Class III	Contracted	Written Counseling	Training	0	0	2
Disclosure of Confidential Information	Contracted	Written Counseling	Training	0	0	2
Dignity and Respect	Contracted	Employment Termination	Training	0	0	3
Personal Property - Possession and Use	Contracted	Other		0	0	0
Mental Health Services Suited to Condition	Contracted	Written Reprimand	Training	0	0	0
Dignity and Respect	Contracted	Written Counseling	Training	0	0	4
Abuse Class II - Unreasonable Force	Contracted	Suspension	Training	0	0	1
Personal Property - Possession and Use	Contracted	Other		0	0	1
Neglect Class I - Failure to Report	Contracted	Written Counseling	Employee left the agency, but substantiated	0	0	1
Neglect Class III	Contracted	Training	Training	0	0	1
Disclosure of Confidential Information	Contracted	Training	Other	0	0	0
Mental Health Services Suited to Condition	Contracted	Written Counseling		1	0	0

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Abuse Class II - Unreasonable Force	Contracted	Employment Termination	Training	0	0	1
		Employee left the agency, but				
Abuse Class II - Unreasonable Force	Contracted	substantiated		0	0	0
Mental Health Services Suited to Condition	Agency	Other	Other	0	0	0
Disclosure of Confidential Information	Contracted	Verbal Counseling	Employment Termination	0	0	1
Fingerprints, Photographs, Audio Recordings, and						
Use of One-Way Glass	Contracted	Written Counseling		0	0	1
Disclosure of Confidential Information	Contracted	Written Counseling		0	0	1
Abuse Class III	Contracted	Employment Termination		0	0	0
Personal Property - Possession and Use	Contracted	Other		0	0	2
Neglect Class III	Contracted	Employment Termination		0	0	2
Personal Property - Possession and Use	Contracted	Other		0	0	0
No de se Oles e III		O united at A stilling	Testates			
Neglect Class III	Contracted	Contract Action Employee left the agency, but	Training	0	0	1
Neglect Class III	Contracted	substantiated		0	0	0
Disclosure of Confidential Information	Agency	Employment Termination		0	0	0
Disclosure of Confidential Information	Contracted	Written Reprimand	Other	0	0	0
Neglect Class III	Contracted	Employment Termination	Written Reprimand	0	0	0
Mental Health Services Suited to Condition	Contracted	Written Counseling	Suspension	0	0	1
Disclosure of Confidential Information	Agency	Training		0	0	0
Freedom of Movement	Contracted	Training		0	0	0
Abuse Class III	Contracted	Written Reprimand	Employment Termination	0	0	0
Neglect Class III	Contracted	Written Reprimand	Training	0	0	0
		Employee left the agency, but			5	
Disclosure of Confidential Information	Contracted	substantiated	Training	0	0	0
Mental Health Services Suited to Condition	Agency	Policy Revision/Development	Training	0	0	0

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Neglect Class III	Contracted	Written Reprimand	Employment Termination	0	0	1
Dignity and Respect	Contracted	Employment Termination	Training	0	0	0
Freedom of Movement	Contracted	Employment Termination		0	0	0
Abuse Class II - Exploitation	Contracted	Training	Written Reprimand	0	0	2
Neglect Class III	Contracted	Training	Written Reprimand	0	0	2
Neglect Class II	Contracted	Training	Contract Action	0	0	1
Dignity and Respect	Contracted	Staff Transfer	Training	0	0	1
Family Rights	Contracted	Staff Transfer	Training	0	0	1
Neglect Class III	Contracted	Contract Action	Other	0	0	1
Neglect Class II	Contracted	Contract Action		0	0	1
Neglect Class III	Contracted	Written Reprimand	Suspension	0	0	1
Mental Health Services Suited to Condition	Agency	Training	Verbal Counseling	0	0	0
Abuse Class III	Contracted	Employment Termination		0	0	5
Disclosure of Confidential Information	Contracted	Training		0	0	5
Neglect Class II	Contracted	Written Reprimand	Employment Termination	0	0	1
Neglect Class III	Contracted	Written Reprimand	Written Reprimand	0	0	0
Neglect Class III	Contracted	Employment Termination		0	0	2
Abuse Class II - Nonaccidental Act	Contracted	Written Reprimand	Suspension	0	0	1
Disclosure of Confidential Information	Agency	Training		0	0	0
Neglect Class III	Agency	Written Reprimand	Training	0	0	0
Disclosure of Confidential Information	Agency	Written Reprimand	Training	0	0	0
Neglect Class III	Contracted	Employment Termination		0	0	0

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Disclosure of Confidential Information	Agency	Training		0	0	0
Mental Health Services Suited to Condition	Contracted	Training		0	0	6
Neglect Class III	Contracted	Written Counseling		0	0	3
Neglect Class III	Contracted	Suspension	Training	0	0	11
Abuse Class III	Contracted	Employee left the agency, but substantiated		0	0	0
Dignity and Respect	Contracted	Training	Other	0	0	1
Dignity and Respect	Contracted	Written Reprimand	Employment Termination	0	0	0
Mental Health Services Suited to Condition	Contracted	Written Counseling		0	0	4
Mental Health Services Suited to Condition	Contracted	Written Counseling	Suspension	0	0	0
Neglect Class III	Contracted	Written Reprimand	Training	0	0	1
Neglect Class III	Contracted	Written Counseling	Staff Transfer		0	1
Abuse Class II - Exploitation	Contracted	Training	Employment Termination	0	0	0
Abuse Class II - Exploitation	Contracted	Training	Employment Termination	0	0	0
Dignity and Respect	Agency	Written Reprimand		0	0	0
Dignity and Respect	Agency	Written Reprimand		0	0	0
Disclosure of Confidential Information	Contracted	Training	Written Counseling	0	0	2
Neglect Class II	Contracted	Written Reprimand	Training	0	0	1
Neglect Class III	Contracted	Written Reprimand		0	0	1
Dignity and Respect	Contracted	Employment Termination		0	0	0
Dignity and Respect	Contracted	Written Reprimand	Suspension	0	0	2
Safe, Sanitary, and Humane Treatment Environment	Contracted	Written Reprimand	Employment Termination	0	0	3
Abuse Class II - Exploitation	Contracted	Employee left the agency, but substantiated	Written Reprimand	0	0	1

Complaint Category	Provider Type	Remedial Action	Remedial Action 2	SEDW	CWP	HSW
Dignity and Respect	Contracted	Written Reprimand	Training	0	0	0
Dignity and Respect	Contracted	Suspension	Training	0	0	1
Dignity and Respect	Contracted	Training		0	0	1
Abuse Class II - Nonaccidental Act	Contracted	Written Reprimand	Employment Termination	0	0	0
Individual Written Plan of Service	Contracted	Other		0	0	0

	Training Category				
Staff Name	I	II	111	IV	Total
Melissa Prusi	25.5	1.5	0	12	39
Kevin Motyka	11.5	0	0	4.5	16
Bridget Hayes	4	1	0	3	8
Tamera Matuszewski	0	0	0	0	0
					0
					0
					0
					0
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	1		1		

Training Provided by the Office of Recipient Rights

			Number of attendees by type			
Торіс	Mode	Length	Agency	Contracted	Recipient	Other
Provider test	eLearning	4.5		9		
Recipient Rights zoom training	Instructor-Led (Virtual)	6.0		40		
New Employee Orientation	Instructor-Led (Virtual)	1.0	4			
Recipient Rights training w/ Melissa Prusi	Instructor-Led (In Person)	4.5		52		
Provider test	eLearning	3.5		7		
Recipient Rights zoom training	Instructor-Led (Virtual)	6.0		29		
Provider test	eLearning	1.0		2		
Recipient Rights zoom training	Instructor-Led (Virtual)	6.0		32		
Provider test	eLearning	0.5		1		
Recipient Rights zoom training	Instructor-Led (Virtual)	6.0		20		
New Employee Orientation	Instructor-Led (Virtual)	1.0	4			
Provider test	eLearning	0.5		1		
Recipient Rights zoom training	Instructor-Led (Virtual)	7.0		20		
New Employee Orientation	Instructor-Led (Virtual)	1.0	2			
Provider test	eLearning	1.0		2		

Торіс	Mode	Length	Agency	Contracted	Recipient	Other
Recipient Rights zoom training	Instructor-Led (Virtual)	3.5		14		
New Employee Orientation	Instructor-Led (Virtual)	1.0	8			
Provider test	eLearning	1.5		3		
Recipient Rights zoom training	Instructor-Led (Virtual)	7.0		28		
New Employee Orientation	Instructor-Led (Virtual)	1.0	5			

Appeals

Allegation Appealed	Grounds for Appeal	Action	Final Decision
Disclosure of Confidential Information	Findings	Accepted Appeal	Upheld Investigative Findings

Data Summary

Demographic Information				
Reporting CMH/LPH	Bay Arenac Behavioral Health Authority			
Recipient Rights Office Director Name	Melissa Prusi			
Reporting Period	October 1, 2023 through September 30, 2024			
Number of Rights Office Staff	4			
Full Time Equivalents (FTEs)	4			
Staff with an Investigative Role	2			
FTEs for Investigation	2.00			
Complaints per FTE	108			

Complaint Data Summary					
Туре	Received				
All Allegations Received	216				
Allegations Received Subject to Investigation/Intervention	182				
Allegations Received with No Right Involved or Outside Jurisdiction	34				
Investigations Completed	164				
Interventions Completed	18				
Allegations Substantiated	92				
Percent of All Allegations Substantiated	51%				
Highlighted Complaint Categories	Received	Substantiated			
Abuse I, II, III	35	14			
Neglect I, II, III	45	30			
Dignity and Respect	33	13			
MH Services Suited to Condition	26	11			
Individual Written Plan of Service	3	1			
Disclosure of Confidential Information	23	13			

	Complair	nt Remed	iation		
Remediation Type	Total			Waiver Type	Total
Verbal Counseling	2			SEDW	2
Written Counseling	15			CWP	0
Verbal Reprimand	0			HSW	99
Written Reprimand	27				
Suspension	8				
Demotion	0				
Staff Transfer	3				
Training	42				
Employment Termination	20				
Employee Left the Agency but Substantiated	6				
Contract Action	4				
Policy Revision/Development	1				
Environmental Repair/Enhancement	0				
Plan of Service Revision	0				
Recipient Transfer to Another Provider/Site	0				
Other	12	52 -f 61			

None

Training Received by the Office of Recipient Rights			
Training Categories	Hours		
I - Operations	41		
II - Legal Foundations	2.5		
III - Leadership	0		
IV - Augmented Training	19.5		
Total	63		

Training Provided by the Office of Recipient Rights					
	Agency	Contracted	Recipient	Other	
Instructor-Led (In Person)	0	52	0	0	
Instructor-Led (Virtual)	23	183	0	0	
eLearning	0	25	0	0	
Video	0	0	0	0	
Paper	0	0	0	0	
Total	23	260	0	0	

Appeals				
Grounds	Total			
Findings	1			
Action Taken	0			
Timeliness	0			
Decision	Total			
Denied Appeal	0			
Upheld Investigative Findings	1			
Returned for Reinvestigation	0			
Requested External Investigation	0			
Take Additional Action	0			
Address Timeliness Issues	0			

Desired Outcomes and Progress Toward These Outcomes

Outcomes

Outcomes established for the Office of Recipient Rights for 2025

Outcomes established for the Office of Recipient Rights for 2025			

Recommendations to the Governing Board

The Office of Recipient Rights and Recipient Rights Advisory Committee Recommends:

Director Attestation

(To be completed by the CMH/LPH Director)

I attest that I have reviewed this annual report and I am submitting it as required by law.

Name (sign or type below)

DATE

Bay-Arenac Behavioral Health Recipient Rights FY 2025 Budget

RF	VFI	NUE
1/1	~ _ 1	NOL.

TOTAL REVENUE	56,667
Other CMH for CMH	56,667

EXPENSE

EXPENSE	
Salaries and Wages	364,562
Employer FICA	26,644
Health insurance	87,298
Dental insurance	3,557
Vision insurance	723
Life insurance	307
Disability insurance, short	2,466
Disability insurance, long	1,091
Retirement	18,658
Employee Health Services	180
Benefit Administration Fees	445
Workers compensation	549
Facility cost allocation	8,140
Staff conference and travel	2,767
Telephone and communications	1,502
Contractual program cost	4,700
Consumer compensation	2,410
Consumer conference and travel	305
Consumer activites	630
Mobile communications	3,401
Office supplies and expenses	5,117
Postage and frieght	1,191
Consumer info and printing	3,277
Purchased services, other	1,173
Software license maintenance	187
Professional liab insurance	1,958
General insurance and bonds	192
PCE allocation	5,793
IS Dept. Allocation	31,490
Depr exp allocation	5,111
General & Board Admin Allocation	27,398
TOTAL EXPENSE	613,220

TOTAL BUDGET	
--------------	--

556,553

Recipient Rights (RR) Advisory & Appeals Committee Monthly Meeting SLT Facilitator: Melissa Prusi

	January	February	March	April	May	June	July	August	September	October	November	December
Items:												
Executive Summary of Rights Activity	х	х	Х	х	х	х	х	х	х	х	х	х
Policy Review for Training	х	Х	Х	Х	х	х	х	х	Х	х	х	х
Site Reviews for Training	х	х	Х	х	х	х	х	х	х	х	х	х
Annual RR Conference									х			
Adopt Annual Committee Goals												х
Annual RR Report/MDHHS Submission												х
RR Office Budget Review												х
Accessibility Plan					х							
Strategic Initiatives/Dashboard Review												
(Inclusive of Executive Summary Reports)												
Requests for Appeals/Appeals Committee												

Other coordination with Board Office:

1) Annual RR Training for Board Members

2) RR Training for New Board Members

Januar	y 2025	BABH Boa of Directo	Su Mo Tu We	January 2025 February 2025 Su Mo Tu We Th Fr Sa 1 5 6 7 8 9 10 11 2 3 4 5 6 7 8 12 13 14 15 16 17 18 9 10 11 12 13 14 15 19 20 21 22 23 24 25 16 17 18 19 20 21 22 26 27 28 29 30 31 23 24 25 26 27 28				
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY		
Dec 29	30	31	Jan 1, 25 New Year's Day/BABH Offices Closed	2 5:00pm Personnel & Compensation Committee	3	4		
5	6 5:00pm Recipient F Advisory & App Committee		8 5:00pm Finance Committee	9 5:00pm Program Committee	10	11		
12	13 5:00pm Audit Committee	14	15	16 5:00pm REGULAR BOARD MEETING	17	18		
19	20 Martin Luther King Day/BABH Office Closed		22	23	24	25		
26	27	28	29	30	31	Feb 1		

Februar	y 2025	BABH Bo of Direc		February 20 Su Mo Tu We 2 3 4 5 9 10 11 12 16 17 18 19 23 24 25 26		March 2025 Su Mo Tu We Th Fr Sa 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 14 15 16 17 18 19 20 21 22	
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY	
Jan 26	27	28	29	30	31	Feb 1	
2	3	4	5	6 5:00pm Corporate Compliance Committee	7	8	
9	10 5:00pm Recipient Rig Advisory & Appea Committee		12 5:00pm Finance Committee	13 5:00pm Program Committee	14	15	
16	17 President's Day/BABH Offices Closed	18 5:00pm Audit Committee	19	20 5:00pm REGULAR BOARD MEETING	21	22	
23	24	25	26	27	28	Mar 1	

March		BABH Boai of Director		Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa Su Mo Tu We Th Fr Sa Su Mo Tu We Th Th Th Th Th Th Th Th Th Sa Su Mo Tu We Th Th<				
SUNDAY	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY	SATURDAY		
Feb 23	24	25	26	27	28	Mar 1		
2	3	4	5	6 5:00pm Facilities & Safety Committee	7	8		
9	10 5:00pm Recipient I Advisory & App Committee		12 5:00pm Finance Committee	13 5:00pm Program Committee	14	15		
16	17 Saint Patrick's Day 5:00pm Audit Committee	18	19	20 5:00pm REGULAR BOARD MEETING	21	22		
23	24	25	26	27	28	29		
30	31	Apr 1	2	3	4	5		