

5. Timeframes and Templates
 - Information RE: Investigative Documents; when & to whom
 - Acknowledgement Letter Language, (side 2; LPH additions)
 - Quality Review for Acknowledgement*
 - Intervention Criteria
 - Acknowledgement/Intervention Example
 - Quality review for Intervention*
 - Template for Investigative Report
 - Quality review for Investigative Report*
 - Template for 30, 60 day letter
 - Suggested Language for Summary Cover Letter
 - Template for Summary Report
 - Quality Review for Summary report*
 - RIF Example
 - Summary Example

Insert Date

RE: Recipient Rights Complaint # Insert complaint #

Insert name & address

Dear Ms/Mr :

This letter is to inform you that the investigation has been completed, which began after you filed a rights complaint with the _____ (Agency) office of recipient rights. A preponderance of evidence was found (not found) to substantiate a violation of recipient rights. A copy of the investigation summary has been enclosed for your review.

The Michigan Health Code states that you may appeal the information presented in this Summary Report if you disagree with them for one of the following reasons:

1. You feel that the findings or conclusion of the rights office are not consistent with the facts, or with law, rules, policies or guidelines.
2. You feel that the action taken, or the action that is proposed, does not provide an adequate solution.
3. The investigation did not begin, or was not completed, on a timely basis. (The Rights Office has 90 days to complete an investigation)

Your appeal must be in writing and received no later than 45 days from the day you receive this report. Your written request for appeal should be sent to:

Appeals Coordinator
MDCH Appeals Committee
Lewis Cass Bldg 4th Fl
320 Walnut St
Lansing, Michigan 48933

NOTICE OF RIGHT TO MEDIATION

At this time, you also have the option of requesting mediation to resolve your complaint. If you wish to seek mediation, please contact the Rights Advisor, who will assist you in this process.

If you should need assistance with your appeal you can contact the local rights office at _____

In addition, there are several advocacy organizations to assist you:

- *Alliance on Mental Illness (AMI)* Telephone: (800) 331-4264 (State of Michigan)
- *ARC of Michigan* Telephone (800) 292-7851
- *Association for Children's Mental Health (ACMH)* Telephone: (800) 782-0883
- *Michigan Protection and Advocacy Services* Telephone: (800) 288-5923
- *Michigan Disability Rights Coalition* Telephone: (800) 760-4600

**For hearing impaired access through the Michigan Relay Center call (800) 649-3777

If the summary report contains a plan of action; upon completion, you will receive a letter indicating the actual remedial action that was taken. At that time you will have 45 days to appeal based only on the grounds that that the action taken does not provide an adequate solution.

Sincerely,

_____, Executive Director
Agency...

Attachment: Investigative Summary Report
CC: office of recipient rights