

Notices/Language for Summary Reports following Investigations & Re-investigations

A. Notice of right to Appeal 1st investigation - to CMH or LPH Appeals Committee

B. Notice of right to Appeal 1st investigation - to DCH AC (lph/u using DCH)

C. Appeals Committee Letter - notice of upholding

D. Notice of right to Appeal - reinvestigation now substantiated - to CMH or LPH AC

E. Notice of right to Appeal - reinvestigation now substantiated - to DCH AC

F. Notice of appeal reinvestigation remains unsubstantiated

G. Summary Report Language following reinvestigation from SOAHR

NOTICE OF RIGHT TO APPEAL

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:

Insert name of Appeals Committee
c/o XXX
ADDRESS OF APPEALS COMMITTEE
ADDRESS OF APPEALS COMMITTEE

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.

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.

NOTICE OF RIGHT TO APPEAL

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:

Alma Staton, 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.

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NOTICE TO APPELLANT

The appeals committee has upheld the findings of the office and the action taken by the respondent in this case/investigation.

If you disagree with this decision to uphold the findings, you can appeal to the State Office of Administrative Hearings and Rules for the Department of Community Health (SOAHR – DCH). Your appeal must be received within 45 days of your receiving this Appeal decision. The only ground the SOAHR - DCH will use to accept your appeal is:

If the investigative findings of the local office of recipient rights are not consistent with the facts, or with law, rules, policies or guidelines.

You may send your appeal to:

SOAHR – DCH: Step 2 Appeal
P.O. Box 30763
Lansing, Michigan 48909-7695
Toll free # (877) 833-0870

**REINVESTIGATION
NOTICE TO APPELLANT**

The investigative findings in this case result in the substantiation of a previously unsubstantiated allegation of a rights violation.

If you disagree with the adequacy of the action or plan of action proposed, you may file an appeal on such grounds to the Appeals Committee at the address below. Your appeal must be received within 45 days of your receiving this Summary Report.

Insert name of Appeals Committee
c/o XXX
ADDRESS OF APPEALS COMMITTEE
ADDRESS OF APPEALS COMMITTEE

If you should need assistance with this you can contact the local rights office.

There are also 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

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cc: CMH Appeals Committee
or LPH Appeals Committee

REINVESTIGATION NOTICE TO APPELLANT

The investigative findings in this case result in the substantiation of a previously unsubstantiated allegation of a rights violation.

If you disagree with the adequacy of the action or plan of action proposed, you may file an appeal on such grounds to the Appeals Committee at the address below. Your appeal must be received within 45 days of your receiving this Summary Report.

Alma Staton, Appeals Coordinator
Department of Community Health
Office of Recipient Rights
320 S Walnut 4th fl
Lansing, MI 48933
Phone (517) 373-2319

If you should need assistance with this you can contact the local rights office.

There are also 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
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cc: MDCH Appeals Committee

Notice of appeal back to DCH appeals Committee - accompanying 2nd summary report
case is now substantiated

E

**REINVESTIGAION
NOTICE TO APPELLANT**

The investigative findings in this case remain the same as those appealed.

If you are not satisfied with the results of the investigation and continue to assert that the investigative findings of the local office of recipient rights are not consistent with the facts, or with law, rules, policies or guidelines, you may appeal to the State Office of Administrative Hearings and Rules for the Department of Community Health at the address below. Your appeal must be received within 45 days of your receiving this Summary Report.

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P.O. BOX 30763
LANSING, MI 48909-7696
Toll free # (877) 833-0870

If you should need assistance with this you can contact the local rights office

There are also several advocacy organizations to assist you:

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cc: (originating appeals committee)
i.e. DCH Appeals Committee or LPH or CMH Appeals Committee

Notice of appeal to SOAHR - accompanying 2nd summary report
case remains unsubstantiated

F

**REINVESTIGATION
Step 2 Appeal (SOAHR-DCH)
NOTICE TO APPELLANT**

Please find enclosed the summary report for recipient rights case (insert case number). The allegation remains unsubstantiated. This closes the Mental Health Code Appeal Process.
You may seek redress through circuit court.

OR

Please find enclosed the summary report for recipient rights case (insert case number). The investigative findings in a case result in the substantiation of a previously unsubstantiated allegation of a rights violation. If you disagree with the adequacy of the action or plan of action proposed, you may file an appeal on such grounds to the Appeals Committee at the address below. Your appeal must be received within 45 days of your receiving this Summary Report.

Insert name of Appeals Committee
c/o XXX
ADDRESS OF APPEALS COMMITTEE
ADDRESS OF APPEALS COMMITTEE

If you should need assistance with this you can contact the local rights office.

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- Michigan Disability Rights Coalition Telephone: (800) 760-4600

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

cc: CMH Appeals Committee
or LPH Appeals Committee