

_____CMHSP- Office of Recipient Rights
 LPH/U Inpatient Monitoring Checklist

Date: _____ Assessor: _____

Name of site: _____ Voluntary Involuntary Both #Beds _____

Yes <input type="checkbox"/> No <input type="checkbox"/>	1. Does Hospital have its own Rights Advisor and back up Rights Advisor? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	2. Does Rights Advisor report only to the Director (check policy) If designee who can take action on substantiated violations, is there a formal designation? explain (check policy) Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	3. Is there a poster (or other means) which identifies the Rights Advisor and a method for contact posted in areas where recipients, family members and guardians and visitors have access? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	4. a. Is there rights booklets/summary of rights posted? 4 b. Is a copy of chapter 7 & 7A available to recipients? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	5 Are Recipient Rights booklets provided to recipients, family members and guardians upon admission? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	6 Is the Rights Advisor and means of contact identified on the Recipient Rights booklet? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	7 Are complaint forms readily available on the unit and is there a secure mechanism for reporting (lock box or other confidential way)? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	8 Are posters on reporting abuse and neglect present in staff areas? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	9 Does the RR Advisor have unimpeded access to all information/areas necessary to conduct an investigation/perform monitoring functions? (MHC 330.1755 (2) (d)) Comments: _____ _____ _____

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Yes <input type="checkbox"/> No <input type="checkbox"/>	10 Are Unit Rules (if any) posted including any exclusions (i.e. telephone usage, visitation, etc)? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	11 Are Unit Rules reasonable and lawful? <u>ATTACH COPY OF UNIT RULES</u> Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	12 Are there any health or safety concerns? (Locked medications, cleaning supplies, etc. – if Restraint/Seclusion is being used, check policy, is it being done properly?) Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	13 Are staff aware of how to file a complaint? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	14 Are Recipients aware of how to file a complaint? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	15. a. Appeals Process for CMHSP recipients (those receiving services or authorization from CMHSP); i. Does notice of appeal rights refer patients to appropriate CMH appeals committee? 15.b. Appeals Process for non-CMHSP recipients; i. Is there an agreement with DCH? ii. Has LPH/U established their own appeals committee Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	16. a. Is there a Recipient Rights Advisory Committee in place either by: i. agreement with local CMH? Or ii. process handled by the hospital's RRAC? 16. b. Do RRC Minutes reflect meeting at least twice per year? Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	17. a. Has the Rights Advisor and back up Rights Advisor had Basic Skills 17. b. Has the Rights Advisor been trained in Right related matters annually thereafter (Building Blocks and DET)? Comments: _____ _____ _____

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Yes <input type="checkbox"/> No <input type="checkbox"/>	18. a. Are all LPH staff trained on basic rights within 30 days of hire? (check policy, training records)?
	18. b. Have all staff who come into contact with patients admitted to the LPH/U been trained on all residential rights within 30 days of hire?
	Comments: _____ _____ _____
Yes <input type="checkbox"/> No <input type="checkbox"/>	19. Were Hospital Recipient Rights polices reviewed? (Note any deficiencies)

Observations/Deficiencies Noted/Required Action:
