

INSTRUCTIONS: This document is a GUIDELINE for recipient rights staff to use when preparing for the triennial recipient rights assessment. It describes possible sources where evidence to support compliance for each standard might be found. It also describes generally what assessors are looking at or looking for as evidence for compliance with each standard. Policy names and sources for evidence may vary between CMH organizations. Sources for evidence that a standard is being met may include, but are not limited to, the sources suggested below.

Citation		Standard	SECTION 1 - CMHSP RESPONSIBILITIES	SOURCES OF EVIDENCE
MHC 1755 (1)	1.1.1	The Agency has established a recipient rights office subordinate only to the executive director.		Policy; organizational chart; human resources records; Rights Director’s job description.
MHC 1100 (a)(30) MHC 1782	1.1.2	The Agency has appointed a designee to act in place of the Executive Director in the absence of the Director.		Agency policy regarding duties of Executive Director; Board meeting minutes.
MHC 1755(2) (b)	1.2.1	The process for funding the rights office includes a review of the funding by the recipient rights advisory committee.		Office of Recipient Rights policy; RRAC policy; RRAC meeting minutes.
MHC 1755 (2) (c)	1.3.1	The recipient rights office is protected from pressures that could interfere with the impartial, even-handed and thorough performance of its duties.		Policy; RRAC meeting minutes; notes regarding contact with others (such as MDHHS-ORR) for consultation; CMH Board meeting minutes.
MHC 1755 (2) (d)	1.3.2	The rights office has had unimpeded access to: a) All programs and services operated by, or under contract to, the CMHSP; b) All staff employed by, or under contract to, CMHSP; c) All evidence necessary to conduct a thorough investigation or to fulfill its monitoring function.		Policy; language of CMH contracts with providers; case file notes and RIF language indicating provider/ respondent cooperation with investigations; RRAC meeting minutes notes regarding contact with others (such as MDHHS-ORR) for consultation; documentation of agency communications with contracted providers.
MHC 1755(3) (a)	1.3.3	Complainants, rights office staff, and any staff acting on behalf of a recipient will be protected from harassment or retaliation resulting from recipient rights activities.		Policy; case file notes and RIF/ Summary Report language for retaliation/ harassment complaints; agency and provider human resources records. RRAC and Board meeting minutes.
MHC 1755 (3)(a) AR 7035 (1)	1.3.4	Appropriate disciplinary action was taken if there was evidence of retaliation and harassment.		Policy, case file contents; remedial action verification forms; Summary Reports on retaliation/ harassment complaints; HR Records.
MHC 1755 (4) MHC 1757(2) (e)	1.4.1	The executive director has selected a director of the rights office who has the education, training and experience to fulfill the responsibilities of the office.		Policy; rights officer job description; rights officer resume; RRAC meeting minutes; HR Records.
MHC 1755 (4) MHC 1778 (1)	1.4.2	The Agency has established a process to assure ongoing rights protection in the absence of the rights director.		Policy; contract or written agreement with another qualified recipient rights provider; RRAC and Board meeting minutes.

		SECTION 1 - CMHSP RESPONSIBILITIES	SOURCES OF EVIDENCE
Citation	Standard		
MHC 1757(2) [e]	1.4.3	The executive director has consulted with the Recipient Rights Advisory Committee in the hiring of the Director of the office.	Policy; RRAC meeting minutes; documentation such as emails regarding consultation between executive director and RRAC members.
MHC 1755 (4)	1.4.4	The director of the rights office has no clinical service responsibilities.	Policy; rights officer job description; organizational chart (shows ORR separate from clinical services departments); BMC meeting minutes (rights staff act as consultants for Behavior Management Committee but do not “sign off on” or “approve” BTPs).
CMHSP 6.3.2.3A	1.5.1	All contracts with licensed private hospitals/units included language that required contractor's rights staff to comply with Attachment 6.3.2.3A of the CMHSP contract.	Language of contracts between CMH and LPHs requiring LPH rights staff to obtain continuing education; language of LPH policies regarding recipient rights; CMH Policy; copy of contract includes attachment.
MHC1755(2)(f) (ii)	1.5.2	Each contract between a CMHSP and a service provider requires that all recipients be protected from rights violations while receiving services.	Policies of contracted providers; Language of contracts between CMH and service providers; CMH Policy.
MHC 1722 [2]	1.5.3	The CMHSP ensured that each service provider under contract, including those allowed/required to have their own rights protection system, took appropriate disciplinary action against those who are engaged in abuse or neglect.	Policies of contracted providers; language of contracts between CMH and service providers; Summary Reports; ORR investigation files; provider- respondent human resources records; CMH Policy.

		SECTION 2 – RIGHTS OFFICE OPERATIONS	SOURCES OF EVIDENCE
Citation	Standard		
MHC 1706	2.1.1	At the time services are initiated, ORR ensured that recipients, parents of minor recipients, and guardians are notified, in an understandable manner, of the rights guaranteed by Chapter 7 and 7A of the Mental Health Code, and provided access to summaries of the rights guaranteed by Chapter 7 and 7A both at the time services are initiated and periodically during the time services are provided.	Policy; CMH website information for public; New admissions intake packet; consent to treatment forms and process; ORR contact information posters; ORR contact information in complaint resolution files; Your Rights Booklets; electronic medical record (EMR) documentation; customer service department activities and documentation; CMH website.
MHC 1776 (5)	2.2.1	ORR ensured there is a mechanism to advise recipients or other individuals that there are advocacy organizations available to assist in preparation of a written rights complaint and offered to make the referral.	Policy; New Admissions Intake Packet; ORR contact information posters; ORR contact information in complaint resolution files; notices to complainants in complaint resolution files such as complaint acknowledgement letters and summary report appeal notices; Your Rights Booklets; staff training curriculum; customer service department activities and documentation.

		SECTION 2 – RIGHTS OFFICE OPERATIONS	SOURCES OF EVIDENCE
Citation	Standard		
MHC 1776 (5)	2.3.1	As necessary, the office assists recipients or other individuals with the complaint process.	Policy; information in complaint resolution files; complaint logs; ORR activity logs; customer service notes and logs; ORR reports to RRAC, described in RRAC meeting minutes; Your Rights Booklets; CMH website.
MHC 1755[5][d][i]	2.4.1	ORR maintained a record system for all reports of apparent or suspected rights violations received including a mechanism for logging all complaints.	Policy; complaint log; ORR activity log; electronic records system.
MHC 1755[5][d]	2.4.2	ORR has established a mechanism for secure storage of all investigative documents and evidence.	Policy; FOIA, privacy and confidentiality policies; locked file cabinet; locked ORR staff offices; secure electronic records system; secure fax machine; secure email.
MHC 1755[5][h]	2.5.1	ORR serves as a consultant to the director and to agency staff in rights related matters.	Policy; staff training policy and curriculum; ORR activity log; customer service notes; complaint resolution files; documentation regarding training and monitoring visits at provider sites; documentation of meetings and communications with Executive Director regarding ORR activities; curriculum for staff trainings; documentation of ORR's consultative interactions with agency staff.
MHC 1755[5][i]	2.6.1	Ensure that all reports of apparent or suspected violations of rights within the community mental health services program system are investigated in accordance with section 778.	Policy; complaint resolution files; evidence of review of RIFs by Executive Director; evidence of effective monitoring and supervision of ORR activities by Executive Director; evidence of effective monitoring and supervision of ORR staff and their work product by ORR management; in-house checklists/sheets.
AR 7199 (g) CMHSP 6.8.3.1	2.7.1	The Rights Office attended meetings of the Behavior Treatment Review Committee as an ex-officio member.	Policy; rights officer job description; BTC policy and procedures; BTC meeting minutes showing ORR attendance (rights staff act as consultants for Behavior Treatment Committee but do not “sign off on” or “approve” BTPs).

		SECTION 3 – EDUCATION AND TRAINING	SOURCES OF EVIDENCE
Citation	Standard		
CMHSP 6.3.2	3.1.1	The staff of the rights office attended and successfully completed the Basic Skills Training programs within 90 days of hire.	Policy; ORR staff training records; Annual Report; ORR Annual Monitoring forms (for submission to MDHHS-ORR); RRAC meeting minutes; MDHHS-ORR training department records.
CMHSP 6.3.2	3.1.2	The Executive Director has completed the Executive Rights Training program with 180 days of hire.	Policy; CMH staff training records; Annual Report; RRAC meeting minutes; ORR Annual Monitoring forms (for submission to MDHHS-ORR); MDHHS-ORR training department records.
MHC 1755[2][e] CMHSP 6.3.2.3 (A)	3.2.1	The staff of the rights office have complied with the continuing education requirements identified in the contract attachment, including that a minimum of 12 of the required 36 hours were approved as either Category I or II.	Policy; ORR staff training records; Annual Report; ORR Annual Monitoring forms (for submission to MDHHS-ORR); RRAC meeting minutes; MDHHS-ORR training department records.
MHC 1755[5][f]	3.3.1	All individuals employed by the CMHSP or its contract agencies received training related to recipient rights protection before or within 30 days after being employed.	Policy; CMH staff training records; human resources department records; service provider annual site monitoring review forms and records; language of CMH contracts with providers; CMH website and server; CMH online training program.
CMHSP 6.3.2.3B	3.3.2	Training related to recipient rights protection addressed all training standards identified in the contract attachment.	Policy; CMH staff training policy; language of CMH contract with providers regarding required training for staff; MDHHS-CMH Master Contract; Curriculum of recipient rights training for new CMH staff; curriculum of recipient rights annual training for CMH staff; MDHHS-ORR training department records; CMH website and server; CMH online training program.
MHC 1755[2][a]	3.4.1	Education and training in recipient rights policies and procedures are provided to the recipient rights advisory committee and appeals committee.	Policy; RRAC policy; RRAC meeting minutes (this should be a standing agenda item).

		SECTION 4 – POLICIES	SOURCES OF EVIDENCE
Citation	Standard		
MHC 1752[1]	4.1.1	The policies and procedures provided a mechanism for prompt reporting, review, investigation and resolution of apparent or suspected rights violations and are designed to protect recipients from, and prevent repetition of, violations of rights guaranteed by Chapters 7 and 7A.	CMH recipient rights policies; Policy Standards worksheet; complaint resolution files; annual and semi-annual reports; CMH website and server.
MHC 1752[1]	4.1.2	Policies and procedures included, at a minimum, all those specifically delineated in this section of the MHC.	CMH recipient rights policies; MDHHS-ORR Policy Standards Worksheet prepared by CMH ORR for assessment; CMH website and shared drive.
MHC 1752 [1] MHC 1704 [1]	4.1.3	Policies and procedures meet the criteria established in the Mental Health Code, Administrative Rules, and Contractual Requirements and those reflected in the MDHHS-ORR Policy Review Standards.	CMH recipient rights policies; MDHHS-ORR Policy Standards Worksheet prepared by CMH ORR for assessment; CMH website and shared drive.

		SECTION 5 – RECIPIENT RIGHTS ADVISORY COMMITTEE	SOURCES OF EVIDENCE
Citation	Standard		
MHC 1757[1]	5.1.1	The board of each community mental health services program shall appoint a recipient rights advisory committee consisting of at least 6 members who represent the varied perspectives of the CMHSP’s geographic area and meet the statutory requirements of the Mental Health Code.	RRAC policy; RRAC membership roster; Board records regarding appointment of RRAC members; RRAC meeting minutes and bylaws.
MHC 1757[2](a)	5.1.2	The RRAC met at least semiannually or as necessary to carry out its responsibilities.	RRAC policy; RRAC meeting minutes; RRAC meeting schedule; RRAC bylaws.
MHC 157[2](b)	5.1.3	The CMHSP maintains a current list of members’ names. This list is available to individuals upon request.	RRAC policy; RRAC membership roster by name only; RRAC bylaws.
MHC 1757[2](c)	5.1.4	The CMHSP maintains a current list of categories represented by members. This list is available to individuals upon request.	RRAC policy; RRAC membership roster by category only; RRAC bylaws.
MHC 1757[2](d)	5.1.5	The RRAC acts to protect the recipient rights office from pressures which could interfere with the impartial, even-handed and thorough performance of its duties and serves in an advisory capacity to the CMH Director and the Director of the Office of Recipient Rights.	RRAC policy; RRAC meeting minutes; training materials presented to RRAC; RRAC bylaws.
MHC 1757[2][g]	5.1.6	The RRAC reviewed and provided comments on the annual rights report submitted by the executive director to the Board of the CMHSP.	RRAC policy; RRAC meeting minutes; training materials presented to RRAC; Annual Report; RRAC bylaws.
MHC 1757[2][i]	5.1.7	Meetings of the RRAC complied with the Open Meetings Act (Act 257 of 1976).	RRAC policy; RRAC meeting minutes; training materials presented to RRAC; CMH website and shared drive; RRAC bylaws.
MHC 1757[2][i]	5.1.8	Minutes of the RRAC meetings were maintained and made available to individuals upon request.	RRAC policy; RRAC meeting minutes; training materials presented to RRAC; CMH website and shared drive; log of instances of requests for meeting minutes; RRAC bylaws.

		SECTION 6 – COMPLAINT RESOLUTION - PROCESS	SOURCES OF EVIDENCE
Citation	Standard		
MHC 1776[3]	6.1.1	Each rights complaint was recorded upon receipt by the rights office.	Complaint resolution policy; Complaint log; complaint resolution files.
MHC 1776 [3]	6.1.2	For each rights complaint recorded, an acknowledgement letter and copy of the complaint was sent to the complainant.	Complaint resolution policy; Complaint log; complaint resolution files.
MHC 1776[6]	6.2.1	If a rights complaint had been filed regarding the conduct of the agency director, the rights investigation was conducted by the office of another CMHSP or, if requested by the CMHSP Board of Directors, by the MDHHS Office of Recipient Rights.	Complaint resolution policy; contract or agreement with another rights officer to conduct investigation; Complaint investigation files; Board meeting minutes; contract or agreement with another rights officer to conduct investigation.
MHC 1778[1]	6.3.1	The rights office immediately initiated investigation of apparent or suspected rights violations involving the death of a recipient, alleged abuse or neglect of a recipient, or the alleged retaliation or harassment of an individual using the rights system.	Complaint resolution policy; Complaint investigation files; RIF and Summary Report information. Standard: documentation of rights activity within 24 hours of notice of the event.

		SECTION 6 – COMPLAINT RESOLUTION - PROCESS	SOURCES OF EVIDENCE
Citation	Standard		
MHC 1778[1]	6.3.2	The rights office initiated investigation of apparent or suspected rights violations in a timely and efficient manner.	Complaint resolution policy; Complaint intervention and investigation files; RIF and Summary Report information. Standard: documentation of rights activity within 7 days of notice of the event.
MHC 1778 [2]	6.4.1	Investigation activities for each rights complaint were accurately recorded by the office. This includes interview notes, documents reviewed, policies, and other sources of evidence pertaining to the investigation being contained in the complaint case file.	Complaint resolution policy; Complaint intervention and investigation files; RIF and Summary Report information; interview notes, documents reviewed, policies and other sources of evidence pertaining to the investigation being contained in the complaint case file.
MHC 1776 [6] MHC 1778	6.5.1	At the completion of the investigation, the rights office notified the complainant of the option of mediation.	Complaint resolution policy; Complaint investigation files; notice accompanying Summary Report; Summary Report cover letter.
MHC 1778[5]	6.6.1	Upon completion of the investigation, the office completed a written investigative report and submitted it to the respondent and to the RMHA.	Office of Recipient Rights policy; complaint resolution policy; Complaint investigation file; RIF contents; Complaint log; RIF cover letter.
MHC 1782[1]	6.7.1	The executive director submitted a written summary report to the complainant, recipient if different, guardian/parent of a minor recipient.	Office of Recipient Rights policy; complaint resolution policy; Complaint investigation files; contents of Summary Report; Summary Report cover letters.
MHC 1782[2]	6.8.1	Information in the summary report did not violate the rights of any employee.	Bullard-Plawecki Employee Right to Know Act requirements met; Office of Recipient Rights policy. complaint resolution policy; human resources policy; Complaint investigation files; contents of Summary Report;
MHC 1784[3]	6.9.1	The rights office advised the appellant that there are advocacy organizations available to assist in preparing the written appeal and offered to make the referral. In the absence of assistance from an advocacy organization, the rights office assisted the appellant in meeting the procedural requirements of a written appeal.	Complaint resolution policy; appeal policy; complaint investigation files; appeal files; appeal notice accompanying Summary Report; cover letter of Summary Reports' appeals documents with report enclosure.

		SECTION 7 – COMPLAINT RESOLUTION - CONTENT	SOURCES OF EVIDENCE
Citation	Standard		
CMHSP 6.4.3.2	7.1.1	Complaints identified as out-of-jurisdiction or no right involved were correctly categorized and responded to. Sufficient rationale was provided to the complainant.	Policy; Complaint intervention files; acknowledgment and response letters for NRI/OJ complaints.
CMHSP 6.4.3.2	7.1.2	For complaints where the intervention process was utilized, the rights office conducted the intervention using a preponderance of evidence standard and in compliance with the standards established by MDHHS.	Policy; Complaint intervention files; acknowledgment and response letters for intervention complaints.
CMHSP 6.4.3.2	7.1.3	The results of the intervention indicated whether a rights violation was substantiated.	Policy; Complaint intervention files; acknowledgment and response letters for intervention complaints.

		SECTION 7 – COMPLAINT RESOLUTION - CONTENT	SOURCES OF EVIDENCE
Citation	Standard		
CMHSP 6.4.3.2	7.1.4	Correspondence providing information on the results of an intervention contained all required elements.	Policy; Complaint intervention files; acknowledgment and response letters for intervention complaints; interview notes and documents received are included in complaint files.
MHC 1778[4]	7.1.5	The communication clearly indicated that process for requesting an investigation if the complainant was not satisfied with the result of the intervention.	Policy; Complaint intervention files; acknowledgment and response letters for intervention complaints.
MHC 1778 [4]	7.2.1	Issued status reports contained all required elements.	Policy; 30 & 60 day status report contents.
MHC 1778 [4]	7.2.2	Status reports were sent to all required persons.	Policy; 30 & 60 day status report contents; SR Cover letters.
MHC 1778[5][a]	7.3.1	The written investigative report included a statement of allegations as required by MDHHS standards.	Policy; complaint resolution policy; RIF contents.
MHC 1778[5][c]	7.3.2	The written investigative report included citations to relevant provisions of the Mental Health Code, other applicable laws, rules, policies and guidelines.	Policy; complaint resolution policy; RIF contents.
MHC 778[5][b]	7.3.3	The written investigative report included a statement of the issues involved as required by MDHHS Standards.	Policy; RIF contents.
MHC 778[5][d]	7.3.4	The written investigative report included findings of the investigation that were sufficient to provide a detailed inquiry and systematic examination of the allegation.	Policy; RIF contents.
MHC 778[5][e]	7.3.5	The written investigative report included a conclusion section which provided an analysis of the findings and a decision as to whether a violation occurred using a preponderance of evidence standard.	Policy; RIF contents.
MHC 778[5][f]	7.3.6	When appropriate, the written investigative report included recommendations which provided for appropriate remedial action and attempted to prevent a recurrence of the violation.	Policy; RIF contents.
MHC 1722[2]	7.4.1	On substantiated rights violations involving abuse or neglect, the RMHA/ respondent took appropriate disciplinary action.	Policy; complaint investigation file; Summary Report contents; annual and semi-annual reports; HR records.
MHC 1755[3][b] MHC 1780[1]	7.4.2	On substantiated rights violations not requiring disciplinary action, the RMHA/respondent took appropriate remedial action.	Policy; Complaint intervention and investigation files; Summary Report contents; intervention response letter contents; annual and semi-annual reports; HR records.
MHC 1782 [1] (a-g)	7.5.1	Summary reports reflected the information from the allegation, citation, and issues, and recommendation sections of the RIF and provided a summary of the investigative findings of the rights office.	Policy; RIF and Summary Report contents.
MHC 1780	7.5.2	The Summary Report provided detailed information as to the action taken (or action planned to be taken) in order to meet the requirements stated in MHC 1780.	Policy; Summary Report contents.
MHC 1782[1][h]	7.5.3	As part of the Summary Report the complainant, recipient, if different, guardian or parent of a minor were informed of their right to appeal, the grounds for filing the appeal and information about where to send the appeal.	Policy; Summary Report contents; Appeal notice contents; Summary Report cover letter contents.

Citation	Standard	SECTION 7 – COMPLAINT RESOLUTION - CONTENT	SOURCES OF EVIDENCE
CMHSP 6.3.2.4 II. D	7.6.1	If the Summary Report included a “Plan of Action”, written notice was issued to the potential appellants upon completion of the plan. If the action taken was different than the plan, the notice detailed the action that was taken and the date it occurred as well as informed potential appellants of the right to appeal on action only.	Policy; Complaint investigation files; contents of written notice to appellants; copy of amended Summary Report with cover letter indicating it was sent.

Citation	Standard	SECTION 8 – COMPLAINT RESOLUTION - TIMEFRAMES	SOURCES OF EVIDENCE
MHC 1776 (3)	8.1.1	For each complaint received, the Rights Office provided, to the complainant within 5 business days, an acknowledgement of receipt and a copy of the complaint.	Policy; complaint log; acknowledgement letters; complaint resolution files; customer services policy.
MHC 1776 (4)	8.1.2	For each complaint utilizing the intervention process, responses were provided to the complaint within 30 calendar days.	Policy; customer services policy; Complaint resolution files; acknowledgment and response letters for NRI complaints’ complaint log.
MHC 1776 (4)	8.1.3	For each investigation, status reports were issued every 30 days, as required.	Policy; customer services policy; Complaint resolution files; acknowledgment and response letters for OJ complaints; complaint log.
MHC 1778 (1)	8.1.4	Subject to delays involving pending action by external agencies, the office completed investigations no later than 90 calendar days following receipt.	Policy; Complaint log; RIF and Summary Report contents; RIF cover letters; documentation of submission of RIFs to required parties.
MHC 1782 (1)	8.1.5	A written Summary Report was issued for each Report of Investigative Findings (RIF) within 10 business days after receipt of the RIF.	Policy; Complaint log; Summary Report contents; Summary Report cover letters; documentation of submission of Summary Reports to required parties.

Citation	Standard	SECTION 9 – APPEALS	SOURCES OF EVIDENCE
MHC 1774[2][a]	9.1.1	The Board of the CMHSP appointed an appeals committee to hear appeals of recipient rights matters OR designated the RRAC as the appeals committee. An appointed committee shall consist of seven individuals who meet the following criteria: (a) None are employed by DHHS or the CMHSP, (b) at least 3 are members of the RRAC c) At least 2 are board members and d) at least 2 are primary consumers.	Policy; Appeals committee roster; RRAC by-laws; Board and RRAC meeting minutes.
MHC 1774[4] CMHSP C 6.3.2.4.III.F	9.2.1	Within 5 business days after receipt of a written appeal, the assigned Committee members reviewed the appeal to determine whether it met criteria.	Policy; appeals log; notice or response letter to appellant; documentation in appeal file; RRAC meeting minutes.
MHC 1774[4] CMHSP C 6.3.2.4.III.F	9.2.2	Requests for appeal were correctly accepted or rejected in accordance with the standards established in the Code and contract language.	Policy; appeals log; notice or response letter to appellant; documentation in appeal file; RRAC meeting minutes.
CMHSP C 6.3.2.4.III.G	9.2.3	Within 7 business days of the receipt of the appeal, written notification was provided to the appellant as to the acceptance or denial of the appeal. A notice of rejection shall describe the reason for not accepting the appeal.	Policy; Appeals log; notice or response letter to appellant; appeal file.

		SECTION 9 – APPEALS	SOURCES OF EVIDENCE
Citation	Standard		
CMHSP C 6.3.2.4.III.G	9.2.4	A copy of the appeal was provided to the Rights Office, the respondent, and the RMHA.	Policy; Appeals log; notice or response letter to appellant, with evidence that copy of appeal request was copied to all required persons; appeal file.
MHC 1774[6]	9.3.1	A member of the Appeals Committee who has a personal or professional relationship with an individual involved in the appeal abstains from participating in the appeal.	Policy; Appeals Committee meeting minutes; notice or letter to appellant describing conclusion of committee; appeal file.
MHC 1784[5] CMHSP C 6.3.2.4.III.H	9.4.1	Within 30 days after the written appeal was received, the Appeals Committee met in a closed session and reviewed the facts as stated in all complaint investigation documents.	Policy; Appeals log; Appeals Committee meeting minutes; notice or letter to appellant describing conclusion of committee; appeal file.
MHC 1784[5] CMHSP C 6.3.2.4.III.H	9.4.2	The Appeals Committee took an action that was in compliance with the Code and contract requirements.	Policy; Appeals log; Appeals Committee meeting minutes; notice or letter to appellant describing conclusion of committee; appeal file.
MHC 1784[5] CMHSP C 6.3.2.4.III.H	9.4.3	The decision of the Appeals Committee was correct.	Policy; Appeals log; Appeals Committee meeting minutes; notice or letter to appellant describing conclusion of committee; appeal file.
MHC 1784[6] CMHSP C 6.3.2.4.III.J	9.5.1	The Appeals Committee documented its decision in writing and provided written justification for that decision.	Policy; Appeals log; notice or letter to appellant describing conclusion of committee; appeal file.
MHC 1784[6]	9.5.2	Within 10 days after reaching its decision, the Appeals Committee provided copies of the decision to the respondent, appellant, recipient, if different than appellant, recipient’s guardian (if one has been appointed), the RMHA, and the rights office.	Policy; log; notice or letter to appellant describing conclusion of committee, with evidence that it was copied to all required persons; appeal file. Documentation shall include the justification for the decision of the committee.

		SECTION 10 – SEMI-ANNUAL AND ANNUAL REPORTING	SOURCES OF EVIDENCE
Citation	Standard		
MHC 1755[5][j] CMHSP 6.5.1.1	10.1.1	By June 30 of each year, the Rights Office provided to MDHHS and to the agency RRAC, a summary of complaint data together with a remedial action taken on substantiated complaints.	Policy; Semi-Annual and Annual Report, with evidence of date of submission; RRAC meeting minutes.
MHC 1755[6] CMHSP 6.5.1.1	10.2.1	By December 30 of each year, the CMHSP submitted to MDHHS, an annual report prepared by the recipient rights office on the current status of recipient rights in the agency and a review of the operations of the rights office for the preceding fiscal year.	Policy; Annual Report, with evidence of date of submission; RRAC meeting minutes; Agency Board meeting minutes.
MHC 1755[6] CMHSP 6.5.1.1	10.3.1	By January 15 of each year, the Rights Office submitted the ORR Annual Report Monitoring form for the preceding calendar year to MDHHS-ORR.	Policy; ORR Annual Report Monitoring form, with evidence of date of submission.

Citation	Standard	SECTION 11 – SITE VISITS	SOURCES OF EVIDENCE
MHC 1755 (5) (e) ORR Guidance 17-01	11.1.1	The agency ensured that for all service providers - <i>other than LPHs and other providers that have their own rights system</i> – the service site is visited with the frequency necessary for protection of rights but in no case less than annually.	Policy and procedure regarding provider site monitoring; language of CMH contracts with providers; CMH contract monitoring team activities; service provider annual site monitoring review forms, reports, and records; CMH website and server; documentation confirming completion of required remedial action and/or plans of correction.
MHC 1755(b)(c)(i) MHC 1776 (1) (5) MHC 1723	11.1.2	The agency ensured that for each site review of service providers - <i>other than LPHs and other providers that have their own rights system</i> – the review contained all elements required by Code, Rules, Contract and MDHHS-ORR standards.	Policy and procedure regarding provider site monitoring; language of CMH contracts with providers; CMH contract monitoring team activities; service provider annual site monitoring review forms and records; ORR contact information posters; Your Rights Booklet with ORR contact info; documentation confirming completion of required remedial action and/or plans of correction.
MHC 1755 (5) (g)	11.2.1	The agency ensured that for each site review of service providers - <i>other than LPHs and other providers that have their own rights system</i> – any necessary follow up or remedial action required to bring providers into compliance with ORR standards is addressed and completed.	Policy and procedure regarding provider site monitoring; language of CMH contracts with providers; CMH contract monitoring team activities; service provider annual site monitoring review forms and records; documentation confirming completion of required remedial action and/or plans of correction.
MHC 1755 (5) (e) ORR Guidance 18-01	11.2.2	The Agency ensured that the service sites of all LPHs and other providers that have their own rights system are visited with the frequency necessary for protection of rights but in no case less than annually.	Policy and procedure regarding provider site monitoring; language of CMH contracts with providers; CMH contract monitoring team activities; service provider annual site monitoring review forms and records; documentation confirming completion of required remedial action and/or plans of correction.
MHC 1755 (5)(e)	11.2.3	The Agency ensured that for site reviews of <i>LPHs and other providers that have their own rights system</i> the review contained all elements required by Code, Rules, Contract and MDHHS-ORR standards.	Policy and procedure regarding provider site monitoring; language of CMH contracts with providers; CMH contract monitoring team activities; service provider annual site monitoring review forms and records; ORR contact information posters; service provider annual site monitoring review forms and records; Your Rights Booklet with ORR contact info; documentation confirming completion of required remedial action and/or plans of correction.

Citation	Standard	SECTION 11 – SITE VISITS	SOURCES OF EVIDENCE
MHC 1755 (5)(e)	11.2.4	The Agency ensured that, for each site review of <i>LPHs and other providers that have their own rights system</i> , any necessary follow up or remedial action required to bring providers into compliance with ORR standards is addressed and completed.	Policy and procedure regarding provider site monitoring; language of CMH contracts with providers; CMH contract monitoring team activities; service provider annual site monitoring review forms and records; documentation confirming completion of required remedial action and/or plans of correction.
MHC 1755 (5)(e)	11.2.5	The Agency ensured that the recipient rights policies of <i>LPHs and other providers that have their own rights system</i> are reviewed, and that the reviews are done in compliance with applicable standards for rights policy reviews.	Policy and procedure regarding provider site monitoring; language of CMH contracts with providers; CMH contract monitoring team activities; service provider annual site monitoring review forms and records; policy review for LPHs.