

COMMUNITY MENTAL HEALTH PARTNERSHIP OF SOUTHEASTERN MICHIGAN		<i>Policy and Procedure</i>	
Department: Author: E. Rostash & N. LaBrie		<i>Recipient Payment for Damage of Property</i>	
		Local Policy Number (if used)	
Revision Date	Approval Date	Implementation Date	
08/08/07	1/15/08	2/15/08	
Archive Information			
Date:			
Reason:			

I. PURPOSE

To establish guidelines for recipient responsibility for payment for apparent purposeful damage to property of Community Mental Health Partnership of Southeastern Michigan (CMHPSM) contractual service providers and/or other recipients during the course of services.

II. POLICY

It is the policy of the CMHPSM to promote recipient assumption of responsibility for purposeful damage of property during the course of receiving services.

III. APPLICATION

This policy applies to the Comprehensive Specialty Services Networks (CSSN's), the Comprehensive Specialty Services Network (CSSN) look-alike and the Prepaid Inpatient Health Plan (PIHP) within the Community Mental Health Partnership of Southeast Michigan (CMHPSM).

IV. DEFINITIONS

Purposeful damage – Any intentional or deliberate impairment of the usefulness or value of facilities and property.

V. STANDARDS

The following parameters will be followed:

Recipients will not be charged for accidental damage to property. Ongoing maintenance funds from program budgets shall be accessed for repairs due to accidental damage.

The supports coordinator/client service manager (SC/CSM), or other primary clinician, in consultation with other professionals including the ORR, as needed, shall make a determination as to the purposeful nature of the action, and the recipient's ability to understand the connection between their action and the damage incurred. In addition, any actions or omissions by staff, which may have contributed

to the incident, will be carefully evaluated. A recipient shall not be asked for pay for damages if staff action or omission to act was the apparent determining factor in the property damage incident.

The SC/CSM or other primary clinician will determine an appropriate charge for the damage. Charges will not exceed the cost of repair or the current actual value of the damaged property that needs to be replaced. Charges will not place the recipient in a position where he or she will not be able to meet his or her basic needs. Payment plans may be arranged as appropriate. Any restrictions placed on a recipient's access to funds must be in keeping with policies on "Personal Property and Funds" and "Limitation of Rights".

Should the recipient not consent to payment, the SC/CSM or other primary clinician and other involved professionals shall determine whether it is appropriate for legal charges to be filed. This determination shall be made in consultation with the Office of Recipient Rights.

The SC/CSM or other primary clinician shall review the recipient's Person Centered Plan and assure that all needed supports and services, including behavioral services are in place. The SC/CSM or other primary clinician will reconvene the planning team, and provide referrals for needed professional consultations and services as needed.

VI. EXHIBITS

None

VII. REFERENCES

Reference:	Check if applies:	Standard Numbers:
Michigan Mental Health Code, Public Act 258 of 1974, as amended	X	
Limitation of Rights Policy	X	
Personal Property and Funds Policy	X	

VIII. PROCEDURES

<u>WHO</u>	<u>DOES WHAT</u>
All Program Staff	<ol style="list-style-type: none">1. Remains alert to signs of agitation or escalating behavior which may indicate potential loss of control on the part of a recipient, using appropriate techniques for counseling, redirection and confrontation avoidance.2. Maintains familiarity with recipient's Person Centered/Behavior Plans which identify any specific techniques or interventions to be used to address any history of property destruction. In the event a recipient engages in destructive behavior, intervenes as soon as possible to prevent harm to individuals and property, following policies on disruptive behavior and any plan for physical intervention.3. After assuring that all persons are safe and needs have been addressed, assesses any property damage.4. Encourages recipient to assist with clean up of any debris, damage if appropriate, and if it will not further escalate the recipient, resulting in additional damage.5. Inventories damaged property. Initiates any immediately needed repairs.6. Follows emergency and Incident Reporting procedures and any previously identified behavior plan.7. Notifies Program Supervisor.

WHO

DOES WHAT

Program Supervisor

1. Assures all recipients are safe and that their needs have been addressed, secures property as needed. Notifies Supports Coordinator/CSM of Incident. Assures IR is forwarded within 24 hours.
2. Informs SC/CSM if program staff observation and reports indicate that consideration should be given to assessing recipient costs of damages.
3. Secures information on costs of repairs/replacements and forwards to SC/CSM.

Assigned Clinical Professional Staff

1. Reviews incident, consults with recipient, program staff and other professionals as indicated to determine appropriateness of assessing recipient costs of damages.
2. Determines amount to be charged based on cost of repair or the cost of the damaged item's actual/present value considering the actual cost of replacement/repair, age and condition of item, and the recipient's financial resources, and staff actions to appropriately intervene and reduce potential damage.
3. Consults with ORR before making final determination to assess recipient costs.
4. Notifies Program Supervisor and recipient of results of review.
5. If recipient agrees to repayment, assists recipient in making payment arrangements.
6. Should recipient refuse to make payment consults with other involved professionals, supervisor and ORR to determine if other action is appropriate.
7. Assures recipient is aware of Problem Resolution and Appeals Processes and Recipient Rights Complaint Process.