

<b>COMMUNITY MENTAL HEALTH</b>  <b>CLINTON-EATON-INGHAM</b>  <b>SUBJECT: Communication &amp; Visits</b>  <b>SCOPE: Residential Inpatient Programs of CMH Network and Providers</b>	POLICY: <u>3.6.4</u>	Reviewed		
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	ISSUED BY: Director, Recipient Rights, Quality, and Customer Service	3/5/05		
APPROVED BY: Board of Directors				
	Effective 4/12/84		Revised 8/31/01	

I. Purpose:

To establish guidelines to provide recipients residing in centers, facilities, or hospitals the opportunities for communication and visits with individuals of their choice.

II. Policy:

- A. A resident is entitled to unimpeded, private, and uncensored communication with others by mail and telephone and to visit with persons of his or her choice.
- B. The service provider may limit a resident's communications and visits only if such limitation is specifically approved in the resident's individualized plan of service.
- C. The service provider may establish reasonable times and places for the use of telephones and for visits. General restrictions and rules shall be in writing and posted.
- D. There shall be no limitation on communication and visits between a resident and an attorney or court, or between a resident and other individuals if the communication involves matters that are or may be the subject of legal inquiry.
- E. If a resident is able to secure the services of a mental health professional, the resident shall be allowed to see the professional at any reasonable time.

III. Responsibilities:

- A. The Director of Quality Customer Service and Recipient Rights is responsible for ensuring that procedures to implement the intent of this policy are developed, reviewed, and revised as necessary.
- B. Residential service providers are responsible for establishing, posting, and enforcing house rules which limit residents' right to communication and visits, such as visiting hours and access to telephones or other means of communication.

- C. The primary clinician in charge of the written plan of service shall ensure the development and implementation of treatment plans involving limitations to a recipient's right communication and visits.
- D. Staff are responsible for implementing house rules and treatment plans.

IV. Monitoring and Review:

This policy is reviewed by the Director of Quality Customer Service and Recipient Rights. It is monitored internally by the Recipient Rights Office and the Recipient Rights Advisory Committee. It is monitored externally by the Department of Community Health.