

POLICIES & PROCEDURES

ADMINISTRATION REQUIREMENTS – CLIENT RECORDS



Client records. All records and information relating to client services is confidential and protected by Title 42 of the Code of Federal Regulations, part 2, governing the confidentiality of alcohol and drug abuse client records. Program staff shall not convey to a person outside of the program that an individual attends or receives services from the program or disclose any information identifying an individual as an alcohol or other drug services client unless the client consents in writing for the release of information, the disclosure is allowed by a court order, or the disclosure is made to qualified personnel for a medical emergency, research, audit or program evaluation purposes. A signed confidentiality agreement will be obtained from each individual authorized to review or audit the program. Identification must be furnished upon request to ensure proper authorization exists.

Federal laws and regulations do not protect any threat to commit a crime, any information about a crime committed by a client either at the program or against any person who works for the program. Federal laws and regulations do not protect any information about suspected child abuse or neglect from being reported under state law to appropriate state or local authorities.

Requests by a client for information contained in the clinical records shall be reviewed by the Clinical Director. Copies of the information will be obtained and provided to the client, per his/her request. Former clients will verify their identity with proper identification.

All files shall be maintained in a locked room on the premises and accessible only to staff or representatives of the following regulatory agencies:

1. The Ohio Department of Mental Health and Addiction Services.
2. The Tri-County Board of Recovery and Mental Health Services.
3. The Miami County Department of Job & Family Services.

Storage of client records shall be maintained in accordance with 42 CFR Part 2, Confidentiality of Alcohol & Drug Abuse Client Records; in a locked, fire prevention room. Client records shall be maintained for a minimum of seven (7) years. Destruction of records is required to be done by shredding all documents, in order to maintain client confidentiality as required by State/Federal law. This will be done annually, once the legal storage timeline has expired.

The destruction of records shall cease immediately in the event that a legal process is initiated against MCRC.

The Office Manager is responsible for controlling the records and implementing the following procedures:

1. Records of persons served are to be kept in a designated area. The central filing area shall be supervised by the Office Manager and monitored by support staff to ensure access is restricted to authorized personnel only: MCRC employees and authorized student interns.
2. Administrative records shall be maintained by the Office Manager, and kept in a locked file cabinet. Access is restricted to the Executive Director and Office Manager.
3. Upon receipt, electronically generated documents will be placed in the appropriate staff member's mail slot, which is located in the central filing area and is restricted to MCRC employees only.
4. Electronic records follow a routine procedure for backup. All files on the system are copied to a server every night. All records are then backed up in duplicate, to an external hard-drive, and to a secondary back-up server located in a separate and secure part of the facility.
5. Clinicians are required to have all clinical documentation entered into the record within 24 hours of the time of service. No desktop computer shall be left unattended in an unoccupied clinician's office with the electronic client record remaining open.

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COMPONENTS OF CLIENT RECORDS

All initial paperwork shall be completed upon the first visit.

A comprehensive assessment must include each of the areas required by ODMHAS. An assessment from a program certified by the Department is acceptable if it has transpired within the ninety days prior to admission. A copy of the original assessment shall be filed in the client's record and updated, signed and dated by a staff member of MCRC.

An individualized treatment plan shall be written for each client within seven days of completion of the assessment or at the time of the first face-to-face contact following assessment. The treatment plan will address problems identified in the client's assessment, and will include goals, objectives and time-frames to measure the client's progress. Treatment plans shall be reviewed/updated with each client a minimum of every 180 days or at a significant clinical event/change to remain current with clinical needs and response to treatment interventions.

Continued-stay reviews shall be completed with each treatment plan review and diagnostic update to establish needs consistent with the clinical protocols for outpatient services.

Progress notes shall be written to reflect the implementation and evaluation of treatment plans. All progress notes shall be completed prior to the close of each workday. Progress notes are required to include sufficient content to justify the client's continuing need for services. Signage of all electronic documentation shall be completed within 24 hours of the service provided.

Discharge summaries shall be completed within thirty calendar days after treatment has been terminated. All ODMHAS requirements must be included in the summaries including degree of severity dimensions from clinical protocols.

Countersignatures: All documentation except for case management services and non-treatment services completed by chemical dependency counselor assistants and student interns shall be countersigned by an individual qualified to be an alcohol and drug treatment services supervisor pursuant to rule 3793:2-1-08 of the Administrative Code.

All documentation requiring countersignature shall be presented to the Clinical Supervisor (or qualified designee) within 72 hours of the documented service. This can be done face-to-face or by placing said documentation in the supervisor's agency mailbox.

Components of client records shall include, but not be limited to, the following:

- 1) Identification of client (name of client and/or client identification number).
- 2) Assessment.
- 3) Consent for certified agency treatment services.
- 4) Client fee agreement.
- 5) Documentation to reflect that the client was given a copy of the following:
 - (a) Program rules or expectations of clients
 - (b) Client rights and grievance procedures.
 - (c) Written summary of the federal laws and regulations that indicate the confidentiality of client records is protected as required by 42 CFR Part B, paragraph 2.22.
- 6) Diagnosis.
- 7) Treatment plans.
- 8) Progress notes.
- 9) Disclosure of client information forms, when applicable.
- 10) Termination summary/discharge plan.

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RIGHTS OF PERSONS SERVED

Miami County Recovery Council places the utmost importance on the rights of each person receiving services. Prior to the beginning of service delivery, each client will receive a copy of the **Statement of Client Rights**. Once the client has reviewed the information, he/she will acknowledge that the Client Rights have been read, and/or communicated in a way that is understandable. The client will sign and date to that effect, witnessed by a staff person. This document is placed in the client record. In crisis/emergency situations, the Client Rights will be distributed by the staff person responding to the client, explained in full and signed by each party. In the event of persons served for longer than one year, the **Statement of Client Rights** will be offered for review.

1. The right to be treated with consideration and respect for personal dignity, confidentiality, privacy, freedom from abuse, financial or other exploitation, retaliation, humiliation or neglect.
2. The right to receive services in the least restrictive, feasible environment.
3. The right to be informed of one's own condition.
4. The right to be informed of available program services.
5. The right to give consent or to refuse any service, treatment or therapy.
6. The right to participate in the development, review and revision of one's own individualized treatment plan and receive a copy of it.
7. The right or freedom from unnecessary or excessive medication, unnecessary physical restraint or seclusion.
8. The right to be informed and the right to refuse any unusual or hazardous treatment procedures.
9. The right to be advised and the right to refuse observation by others and by techniques such as one-way vision mirrors, tape recorders, video recorders, television, movies or photographs.
10. The right to access or receive a referral to an independent treatment specialist, legal counsel, or advocacy support at one's own expense.
11. The right to confidentiality of communications and personal identifying information within the limitation and requirements for disclosure of client information under state and federal laws and regulations.

12. The right to have access to one's own client record in accordance with program procedures.
13. The right to be informed of the reason(s) for terminating participation in a program.
14. The right to be informed of the reason(s) for denial of a service.
15. The right not to be discriminated against for receiving services on the basis of race, ethnicity, age, color, religion, sex, national origin, disability or HIV infection, whether asymptomatic or symptomatic, or AIDS.
16. The right to know the cost of services.
17. The right to be informed of all client rights.
18. The right to exercise one's own rights without reprisal.
19. The right to file a grievance in accordance with program procedures without fear of retaliation or barriers to services.
20. The right to have oral and written instructions concerning the procedures for filing a grievance.

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GRIEVANCE PROCEDURE

The Miami County Recovery Council (MCRC) is dedicated to providing quality care for all clients. This will include assisting a client with the grievance procedure and with the filing of the grievance.

Each client will receive notification of their right to express a grievance and the proper method to follow in doing so. This information shall be read (or reviewed with the client by the staff member after being read by the client). The client will sign a copy, indicating that the material has been read and fully understood. This will become part of the client's clinical record.

The Civil Rights Officer (CRO) has the responsibility of investigating on behalf of the grievant, ensuring that a client filing a formal complaint/grievance will not result in retaliation or barriers to services to the client.

The client or individual filing the grievance on behalf of the client is to put in writing, sign and date all pertinent information related to the incident. Records of filed grievances will be maintained for a minimum of two years. Information required includes:

1. Date of incident.
2. Approximate time.
3. Description of incident.
4. Names of individuals involved.

Designated staff will be available to assist the client filing a grievance. If there is a preference for a male, it will be the Clinical Director or Senior Clinician; female, the Office Manager. Staff will explain all aspects of client rights and grievance procedure upon request.

The grievance report is given to the agency Civil Rights Officer (CRO). The CRO also collects and evaluates any reports, documents and/or related conversations.

If the grievance is not resolved, the client and the CRO will meet with an impartial person to hear the grievance. A written statement will be given to the client with the results. A written statement will also be placed in the case record

Once the grievance is filed, the agency will work to resolve the complaint within 20 calendar days from the date of receipt of the grievance. Any extenuating circumstances indicating that this time period will need to be extended must be documented in the grievance file and written notification given to the client. A client has the option to file a grievance with outside organizations at any time, including but are not limited to the following:

1. Tri-County Board of Recovery & Mental Health Services
1100 Wayne Avenue, Suite 4000
Troy, Ohio 45373
(937-335-7727)

2. U.S. Department of Health & Human Service, Civil Rights Office
233 N. Michigan Ave, Suite 240
Chicago, Illinois 60601
(312-886-2359)

3. Ohio Department of Mental Health & Addiction Services
30 East Broad Street, 8th Floor
Columbus, Ohio 43215-3430
(614-466-2297)

4. Disability Rights Ohio
Attn: Intake
200 Civic Center Drive, Suite 300
Columbus, Ohio 43215
614-466-7264 or 1-800-282-9181, select option 2 for intake (TTY 1-800-858-3542)
Call between 9:00 am and 12 pm or 1:00 pm and 4:00 pm Monday through Friday

These entities will be provided on request. They will be listed on a separate sheet of paper, which will be available at the agency. Copies of this procedure will also be available upon request. Appointments will be made with the CRO for anyone wishing to file a grievance. If there appears to be a conflict of interest between the grieving party and the CRO, arrangements will be made for the grievance to be filed with, and investigated by another staff member who is not a party of the alleged grievance, beginning with the Alternate CRO.

Written acknowledgement of receipt of a grievance will be provided to each grievant within three (3) working days of receipt, and will include:

1. Date grievance received
2. Summary of grievance
3. Overview of investigation process
4. Timetable for investigation/notification of resolution
5. Contact person and address/phone number of Miami County Recovery Council

A written analysis of all formal complaints shall be conducted annually. This process is used to:

1. Determine trends

2. Identify areas needing performance improvement
3. Recommend actions to be taken

All grievances, dispositions, and annual reviews shall be shared with the Board of Directors.

Civil Rights Officer – Thom Grim, Executive Director (937) 335-4543 x143

Alternate – Michael Ruffin, Clinical Director (937) 335-4543 x134

Hours of availability for CRO/Alternate: 8:00 am – 5:00 pm Monday-Friday