

POLICY AND PROCEDURE MANUAL	BCCMHA	PAGE 1 OF 4
CATEGORY - CLINICAL SERVICES	CHAPTER 11	SUBJECT A
LEAST RESTRICTIVE TREATMENT/ ENVIRONMENT	REVIEWED 08/04/2021 REVISED 09/15/2021	EFFECTIVE 5/14/1996

I. PURPOSE

To provide recipients of Barry County Community Mental Health Authority (BCCMHA) services that are least restrictive in treatment and environment in accordance with the Michigan Mental Health Code, home and community based services waiver.

II. GOAL

BCCMHA clients will be provided with the least restrictive treatment with the least restrictive environment.

Behavioral health services shall be offered in the least restrictive setting that is appropriate and available. (MCL 330.1708) The freedom of movement for a recipient shall not be restricted more than is necessary to provide mental health services to them; to prevent injury to them or to others; to prevent substantial property damage except that security precautions appropriate to the condition and circumstances of an individual admitted by order of a criminal court or transferred as a sentence-serving convict from a penal institution may be taken. (MCL 330.1744)

III. APPLICATION

Applicable to BCCMHA services, including those directly and contractually provided.

IV. DEFINITIONS

Least Restrictive Environment or Setting

is the physical setting which places the least restraint on the client's freedom of movement and opportunity for independence, consistent with the person's treatment or habilitation needs. Examples might be Crisis Residential rather than in an inpatient facility, or residential care in a semi-independent apartment rather than Adult Foster Care.

Least Restrictive or Intrusive Treatment

is a clinical intervention which intrudes as little as possible on the client's physical person or individual autonomy.

V. POLICY

All recipients of BCCMHA services are entitled basic rights, freedom and protection as defined in the Chapter 7(a) of the Mental Health Code, Civil Rights, and other provisions of the law. Among these is the right to receive behavioral health services in a way which promotes independence and minimally intrudes on rights and freedom.

BCCMHA believes that as citizens, recipients of behavioral health services are capable of social, emotional and intellectual growth, and that each person's degree of change toward health, self-determination and self-reliance, within the context of their individual limitations is dependent upon both personal responsibility and access to appropriate treatment and/or habilitative services to facilitate change. In order to promote increased self-determination and self-reliance for the recipient, services must be offered in a setting which imposes the least restriction on the recipient.

For the foregoing reasons, it is the policy of BCCMHA that every client is served in a setting which imposes the least restriction possible on his/her liberty and freedom of movement consistent with the individual's treatment or habilitation needs. This policy has two main areas of applicability:

1. Behavioral health services should be provided in the physical setting which places the least restraint on freedom of movement and provides opportunity for independence. This is the philosophy known as "Least Restrictive Environment or Setting".
2. Behavioral health services should be provided in a way which intrudes as little as possible on their person or individual autonomy. This philosophy is known as "Least Restrictive (or Least Intrusive) Treatment." (RRO Standard N2)

VI. STANDARDS

In all treatment planning and review, BCCMHA staff shall assess the feasibility and strive for treatment or habilitation of the recipient in a less restrictive setting and/or using less intrusive forms or levels of treatment.

Where progress to a less restrictive setting or less intrusive form or level of treatment is seen as feasible, it shall be included as an objective in the treatment plan. Methodologies necessary to achieving this objective shall be identified in the plan.

The BCCMHA psychiatrist's use of psychotropic medications will also be governed by the principle of Least Intrusive Treatment. Medication will be adjusted to the smallest dose found effective for treatment of the recipient's illness or disability.

Clients will be provided with the maximum opportunity to exercise personal choice, experience self-growth and develop the capacity to meet the age and socially appropriate challenges and risks of daily life, and to develop self-reliance.

BCCMHA will facilitate the integration of clients within the community and attempt to provide CLS/Skill Building training for clients as needed and appropriate.

Clients will be provided with recommendations for Peer Support Services or Peer Monitoring Services if clinically appropriate.

BCCMHA recognizes the importance of family and/or natural supports as a resource for both the client and service provider; involvement of natural supports in treatment is strongly encouraged to promote the use of natural supports by the client.

VII. PROCEDURES

A recipient's Individualized Plan of Service (IPOS) will be monitored and reviewed as outlined in the IPOS, per the appropriate service best practices standards and in accordance with insurance requirements. A recipient's level of care will be assessed at least once per year through the use of tools such as the SIS, LOCUS, DLA, CAFAS, PECFAS, etc. The biopsychosocial assessment and IPOS will reflect current treatment recommendations, to include the level of care guidelines and will be amended to reflect the service as well as the amount, scope and duration of the service remains the least restrictive treatment appropriate.

Behavioral health services shall be offered in the least restrictive setting that is appropriate and available to meet health and safety needs addressed in the IPOS.

Freedom of movement for a recipient shall not be restricted more than necessary to provide mental health services, to prevent injury to self or others, or to prevent substantial property damage.

A privilege can be limited, only as allowed in the Individual Plan of Service (IPOS) following review and approval by the Behavior Treatment Plan Review Committee (BTPRC) and with consent of the recipient, guardian, or parent of a minor.

Restrictions/modifications will be reviewed by the BTPRC at least every three months and will be reduced or eliminated when no longer required to maintain health and safety.

(See Recipients Rights Policy, Restraint and Seclusion Policy, BTPRC policy for additional information.)

Seclusion and restraint are prohibited except in a MDHHS operated or licensed hospital. Prone immobilization is prohibited by BCCMHA.

(See Restraint and Seclusion Policy for additional information.)

REFERENCES

BCCMHA
CARF
CMS
Department of Health and Human Services
Michigan Behavioral Health Code
Olmstead Act
Office of Recipient Rights
Civil Rights
MCL 330

QUALITY IMPROVEMENT

This policy/procedure will be reviewed by the Quality Improvement Committee six months after implementation and annually thereafter to enhance and improve the quality.

At any time employees can request in writing, on the form provided, that this policy or items in this policy be reviewed by the Quality Improvement Committee. Employee's written request can be given to any Quality Improvement Committee member.

When an area for improvement is indicated the process for improvement as identified in the Quality Improvement Plan will be followed.

APPROVED BY:

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Date

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Recipient Rights Officer

Date

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Chief Clinical Officer

Date