COMMUNITY MENTAL HEALTH AUTHORITY

ADMINISTRATIVE POLICY AND PROCEDURES MANUAL				
Chapter **Program Quality**	**Section** **Recipient Rights**	**Chapter** **05**	**Section** **01**	**Subject** **15**
Subject **Personal Property & Funds**	**Authorization**		**Approved: 04/30/19** **Replaces: 09/26/00**	

Reviewed/No Updates: October 2024; October 2025

I. PURPOSE: To protect the rights of recipients with regards to personal property and funds.

II. APPLICATION: All specialized Residential Programs

III. DEFINITIONS:

A. Facility: A residential facility for the care or treatment of individuals with serious mental illness, serious emotional disturbance, or developmental disability that is either a state facility or a licensed facility.

B. Limitations: Constraint of a right for an individual recipient within the provisions of the Mental Health Code and Administrative Rules.

C. Primary clinician: The staff member in charge of implementing the recipient's plan of service.

D. Reasonable times: Hours of the day that do not tax the effective functioning of the facility.

IV. POLICY: Residents are entitled to receive, possess, and use all personal property and funds unless restricted by law or limited in the individual plan of service.

A. Each facility shall provide a reasonable amount of storage to each resident for his or her clothing and other personal property. The resident shall be permitted to inspect personal property at reasonable times.

B. When the facility adopts exclusions of particular kinds of personal property, it shall list the specific items excluded and shall notify residents of these exclusions at the time of admission. All exclusions shall be officially adopted, shall be in writing, and shall be posted in the facility. Exclusions may be appropriate to the mental or chronological age of residents, and shall include all of the following:

1. Weapons, such as firearms, knives, and other sharp objects, or explosives.

2. Illicit drugs, drugs, whether prescribed or not, unless possession of the drug is specifically authorized by the attending physician.

C. A resident's belongings or sleeping area shall not be searched for restricted exclusions, unless there is reason to believe that a resident possesses an excluded

item. If an illegal item is suspected, law enforcement shall be called to conduct a search.

D. The primary clinician may limit the right to receive, possess, and use personal property if each limitation is essential to either prevent theft, loss, or destruction of the property, unless a waiver is signed by the resident, or to prevent the resident from physically harming himself, herself, or others.

E. A resident, parent, or guardian may challenge a limitation or the expiration date of a limitation by notifying the primary clinician, verbally or in writing, of his or her desire to appeal.

F. A receipt shall be given to a resident, and an individual designated by the resident, for any of his or her personal property taken into the possession of the facility for safekeeping and the resident shall be permitted to inspect the personal property at reasonable times. Any personal property in the possession of a facility at the time the resident is released shall be returned to the resident.

G. A resident shall have access to his or her money to use as desired and have a lock box available, if desired.

H. Personal belongings of residents shall not be used as community property. If the resident voluntarily agrees to an exception, written informed consent shall be obtained and filed in the resident's record.

V. PROCEDURE:

A. Exclusions: The primary clinician will notify individuals of excluded items prior to admission.

B. Searches: The primary clinician, home manager, or designee will:

1. Determine that there is justification to conduct a search.

2. Notify the resident what item he or she is suspected of possessing and offer the resident an opportunity to produce the item voluntarily without a search.

3. Conduct a search for the suspected item in the presence of the resident unless the resident declines to be present, and another witness.

4. Document the circumstances surrounding the search which includes: (a) the justification for initiating; (b) the names of the individuals performing and witnessing the search; (c) the results of the search including a description of the property seized; and (d) document all of these details of the search in the resident's record and by filing an Incident report per agency policy.

C. Limitations

1. The primary clinician may limit personal property rights if each limitation is essential for one of the following purposes:

a. In order to prevent theft, loss, or destruction of the property, unless the resident signs a waiver.

b. In order to prevent the resident from physically harming himself herself or others.

2. The primary clinician will:

a. Explain the limitation to the resident, parent or guardian and place the following documentation in the resident's record.

(1) The specific limitation.

(2) The justification for its adoption.

(3) The date it expires.

(4) The date the explanation was given.

b. Notify the resident, parent, or guardian of the appeal process.

c. Review the limitation annually and remove it when the circumstance that justified its adoption ceases to exist.

d. Notify the resident of the removal.

D. Appeals

1. If the resident, parent, or guardian appeals a limitation or the expiration date of a limitation:

a. The primary clinician will request his or her supervisor, or the treatment team to conduct a review.

b. The reviewing party will notify the individual of the decision within 14 days, and document it in the resident's record.

2. If the appellant is dissatisfied, he or she may submit a request to the Chief Executive Officer, verbally or in writing, for a further review.

a. The Chief Executive Officer will conduct a review and notify the appellant of the decision within 14 days.

b. The Chief Executive Office, or designated primary clinician or supervisor, will document this decision in the recipient’s record.

VI. REFERENCES AND LEGAL AUTHORITY: Act 258 of the Public Acts of 1974, as amended (Mental Health Code), Sections 100b, 728

VII. EXHIBITS: None