**REVISIONS TO POLICY STATEMENT:** **YES**  **NO OTHER REVISIONS:**  **YES**  **NO**

**APPLIES TO**:

All Northpointe Behavioral Healthcare Systems services.

**POLICY:**

It is the policy of Northpointe Behavioral Healthcare Systems (NBHS) Board that services will be provided suited to the condition of the individual.

**PURPOSE**:

To develop a policy regarding recipient services suited to condition.

**PROCEDURES**

1. Services shall promote the best interests of the individual receiving services and shall be designed to increase independence, improve quality of life, and support community integration and inclusion; services for children and families will be designed to strengthen and preserve the family unit if appropriate; services for each recipient shall be suited to his/her condition and be developed using a person-centered planning process. These services will be provided in a safe, sanitary, and humane treatment environment. Services shall be offered in the least restrictive setting that is appropriate and available.
2. A recipient shall be given a choice of physician or other mental health professional within the limits of available staff and as determined appropriate by the clinical team.
3. The IPOS will identify any restrictions or limitations of the recipients rights and will include documentation describing attempts to avoid such restrictions as well as what action will be taken as part of the plan to ameliorate or eliminate the need for the restrictions in the future.
4. Justification for the exclusion of individuals chosen by the recipient to participate in the IPOS process shall be documented in the case record.
5. Services shall be provided in accordance with all applicable standards of care or treatment required by any of the following:

1. All State or Federal laws, rules, or regulations governing the provision of community mental health services; and

2. Obligations of The CMHSP established under the terms of its contract with the Michigan Department of Community Health; and

3. Obligations of a Provider established under the terms of a contract or employment agreement with The CMHSP; and

4. The CMHSP's policies and procedures; and

5. Written guidelines or protocols of a Provider; and

6. Written directives from a supervisor consistent with any of the above; and  
  
7. A recipient's Individual Plan of Service