NORTHPOINTE BEHAVIORAL HEALTHCARE SYSTEMS

POLICY TITLE: Labor
MANUAL: Recipient Rights
ORIGINAL EFFECTIVE DATE: 10/2/95
REVIEWED/REVISED ON DATE: 3/15/18
REVISIONS TO POLICY STATEMENT: YES NO OTHER REVISIONS: YES NO

POLICY:
Residents of facilities operated by or under contract with Northpointe may perform labor which contributes to the operation and maintenance of the facility.

PURPOSE:
To establish policies and procedures that protect the rights of recipients who work for Northpointe.

PROCEDURES:
A. Residents of a mental health facility operated by or under contract with Northpointe:

1. May perform labor which contributes to the operation and maintenance of the facility for which the facility would otherwise employ someone only if:
   a. The resident voluntarily agrees to perform the labor;
   b. Engaging in the labor would not be inconsistent with the resident's individual plan of service, or interfere with other ongoing treatment; and is approved by the person in charge of the plan; and
   c. The resident is employed appropriately and in accordance with applicable federal and state labor laws, including minimum wage and minimum wage reduction provisions.
   d. That discharge from the facility or privileges shall in no event be a condition of performing labor.
   e. That the resident's right to compensation shall be protected by the facility when performing labor, which results in an economic benefit to another person or agency other than the facility.

2. May be required to perform personal housekeeping tasks without compensation.

B. A recipient may perform volunteer activities on behalf of the organization in the volunteer program.

1. Northpointe’s primary responsibility to the recipient is that of treatment services and that treatment must not be compromised by using recipients to perform physical labor. Therefore any work being done by recipients beyond the scope of the residential guidelines shall be justified in the Individual Plan of Service.

2. Residents performing labor shall have prior approval by the Treatment Team and reviewed at Treatment Team meetings to discuss the resident's progress or lack of progress.

3. If the Treatment Team members do not all agree with the resident performing labor, the reason why shall be documented on a progress note by the responsible Care Manager and placed in the clinical record. In addition, the impasse of the resident performing/or not performing labor may be referred to a Review Committee for a final decision, as follows:

   a. Each discipline involved in the Treatment Team has ten working days to submit documentation of assessment information, which is related to the resident performing labor, to the responsible Care Manager.
   b. The responsible Care Manager shall submit the assessment information to the appropriate supervisor
   c. The appropriate supervisor shall form a Review Committee of three privileged staff members who are familiar with the program/population being served but not directly involved with the
d. The Review Committee shall review the case within five working days from receipt of the assessment information.

e. The Review Committee shall review the assessment information and make a final decision.

f. A member of the Review Committee shall meet with the Treatment Team to inform them of the decision regarding the impasse.

4. Resident labor shall not consume more than six hours a day, unless approved by the appropriate Site Supervisor.

5. NBHS shall maintain a record of payments made to the resident.

6. One half of any compensation paid to a resident shall be exempt from collection for payment of mental health services provided.