



Client Rights Report for Extended Calendar Year '16

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18 Month Report

July 1, 2015 - December 31, 2016

Thank you:

Thomas Williams, Data Research Specialist &

Jessica Torres, Data Quality Analyst

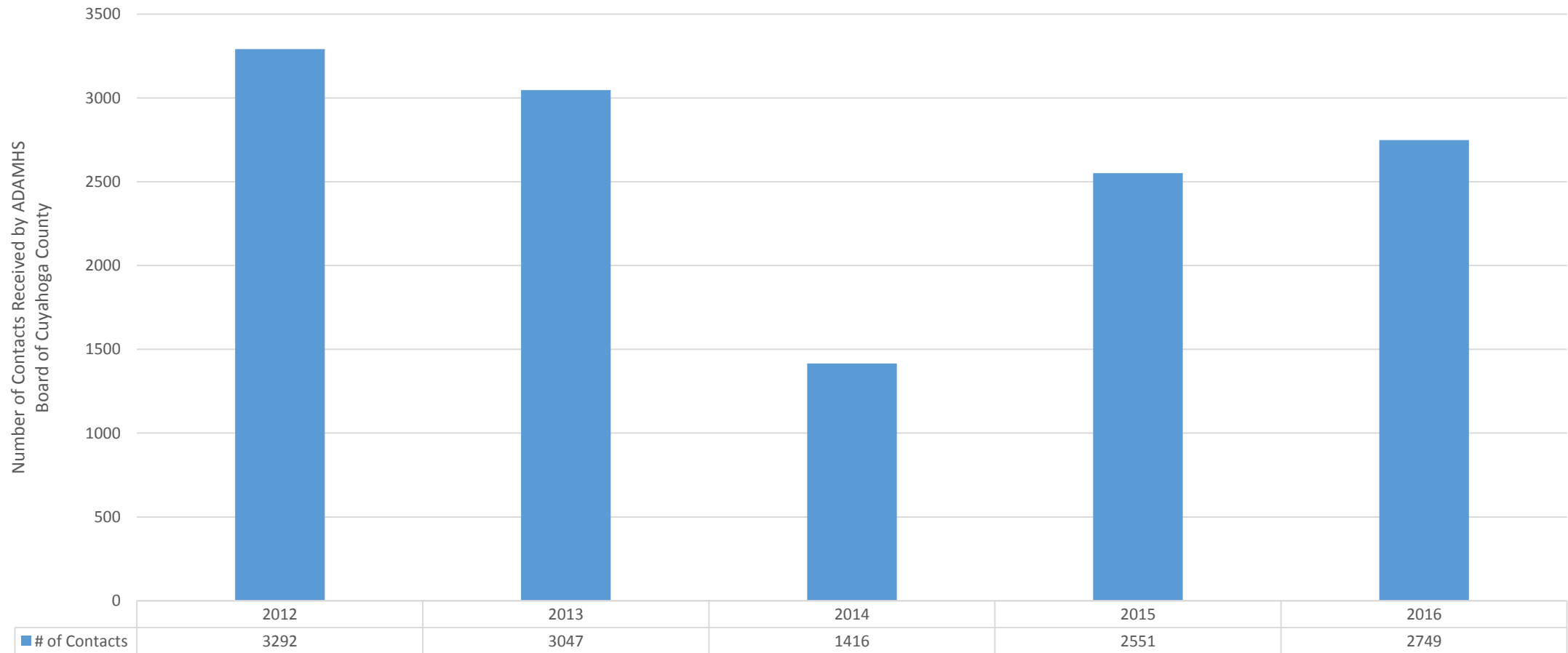
for their assistance compiling the data from the Lotus system.

About this Report...

- This Client Rights Report represents all data collected by the Client Rights and External Affairs Division for Calendar Year (CY) 2016.
- As the Board shifted from fiscal year to calendar year in 2016, the following report encompasses an 18-month period from July 1, 2015 through December 31, 2016.
- Data from 38 AoD and Mental Health agencies are represented in this report.
- Each agency self-reports, based upon the services provided at that agency, the number of complaints and grievances received for each service provision.

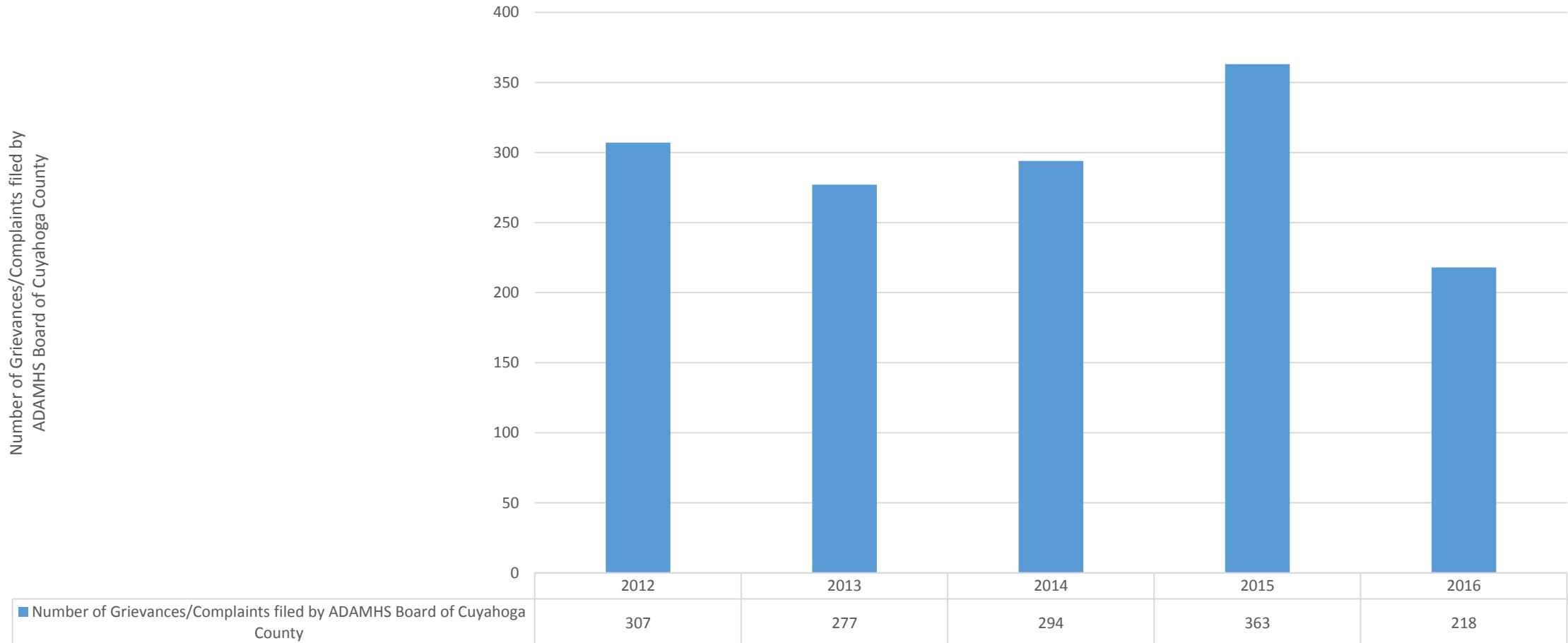
ADAMHS Board Inquiries and Grievances/Complaints

Contacts (Inquiries/Grievances/Complaints) Received by ADAMHS Board of Cuyahoga County
5 Year Trend

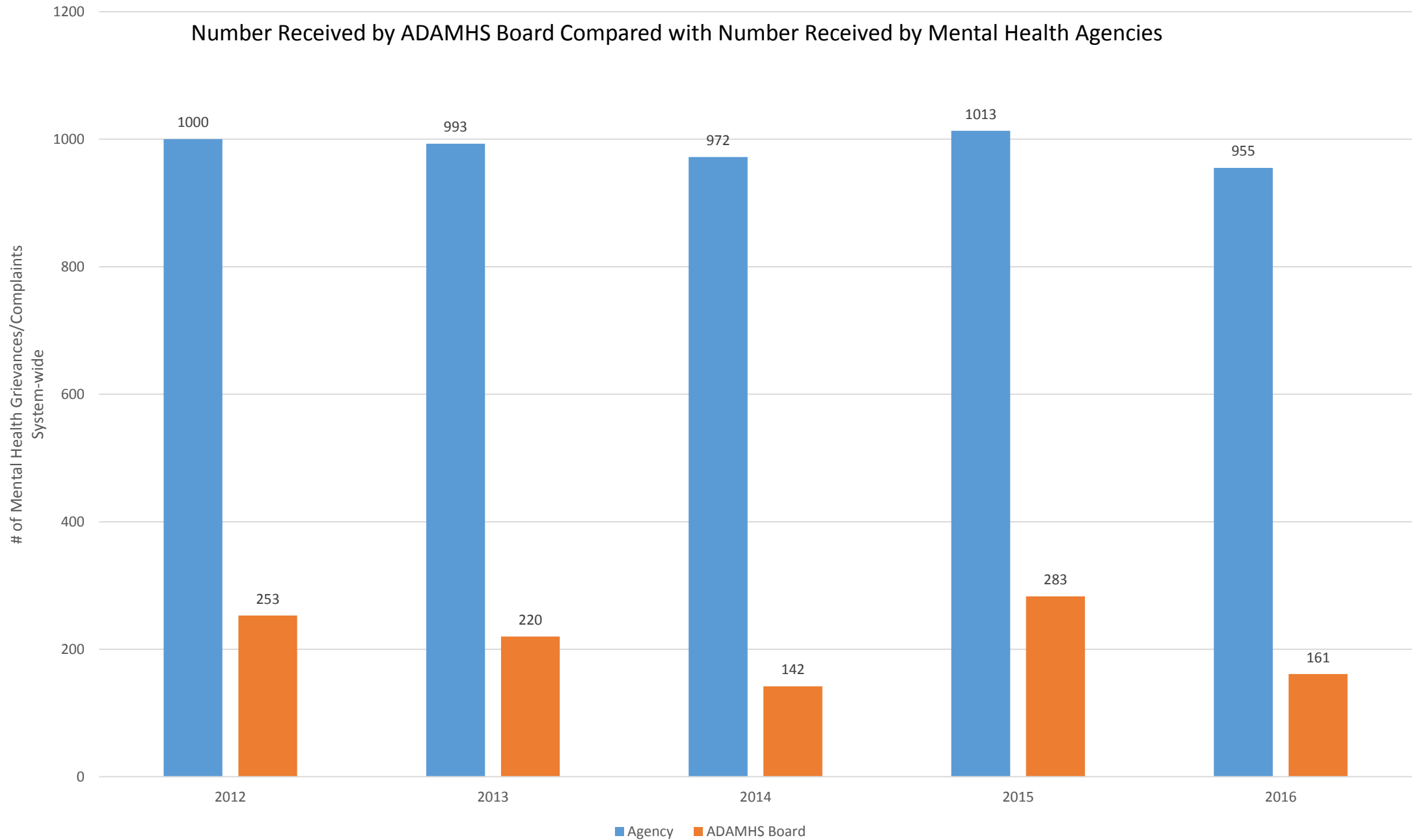


This Chart *Omits Inquires* received by the Board and Illustrates only Complaints and Grievances

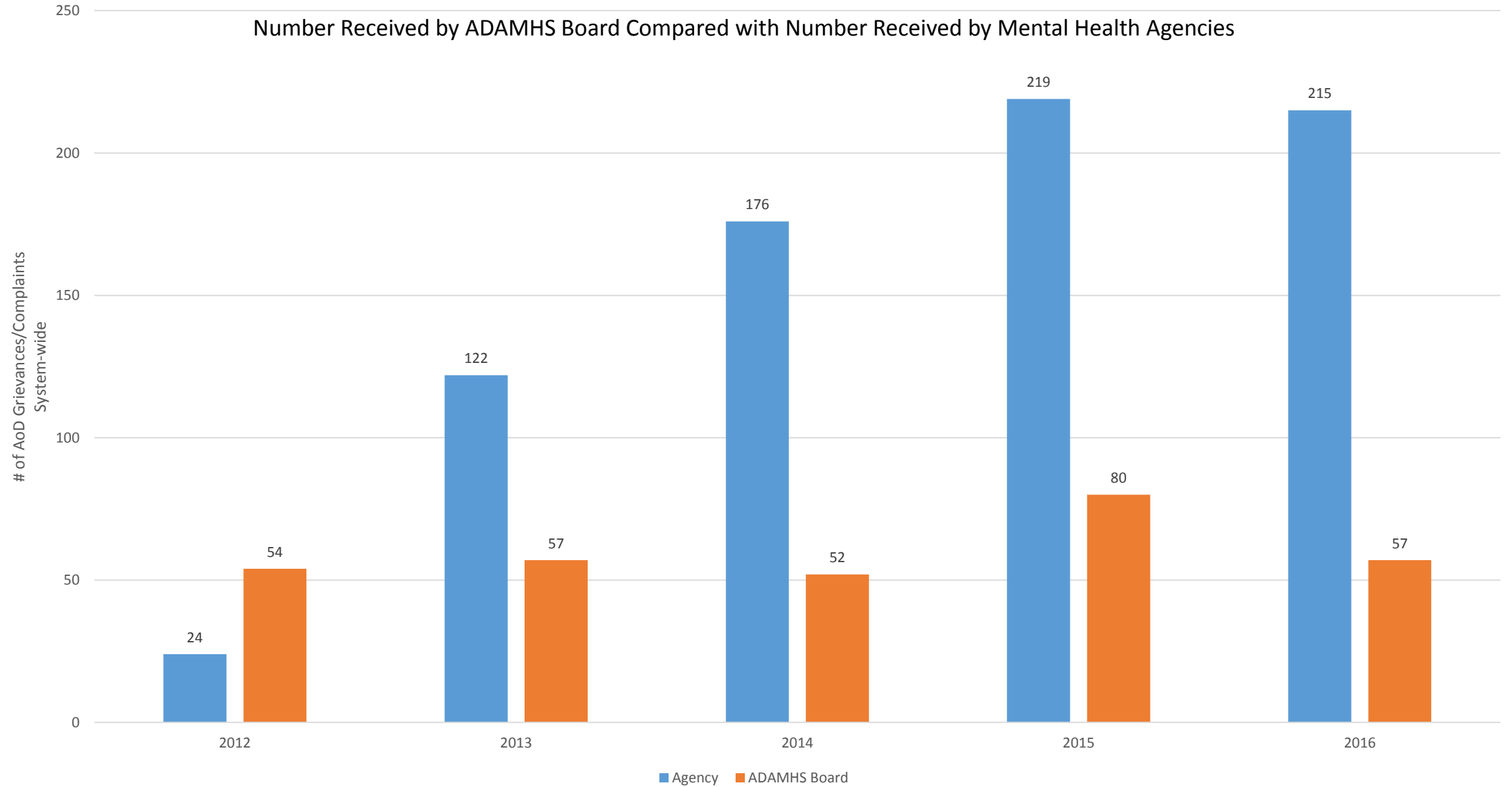
Grievances/Complaints filed by ADAMHS Board of Cuyahoga County:
5 Year Trend



Mental Health Grievances /Complaints Received System-wide 5 year Trend

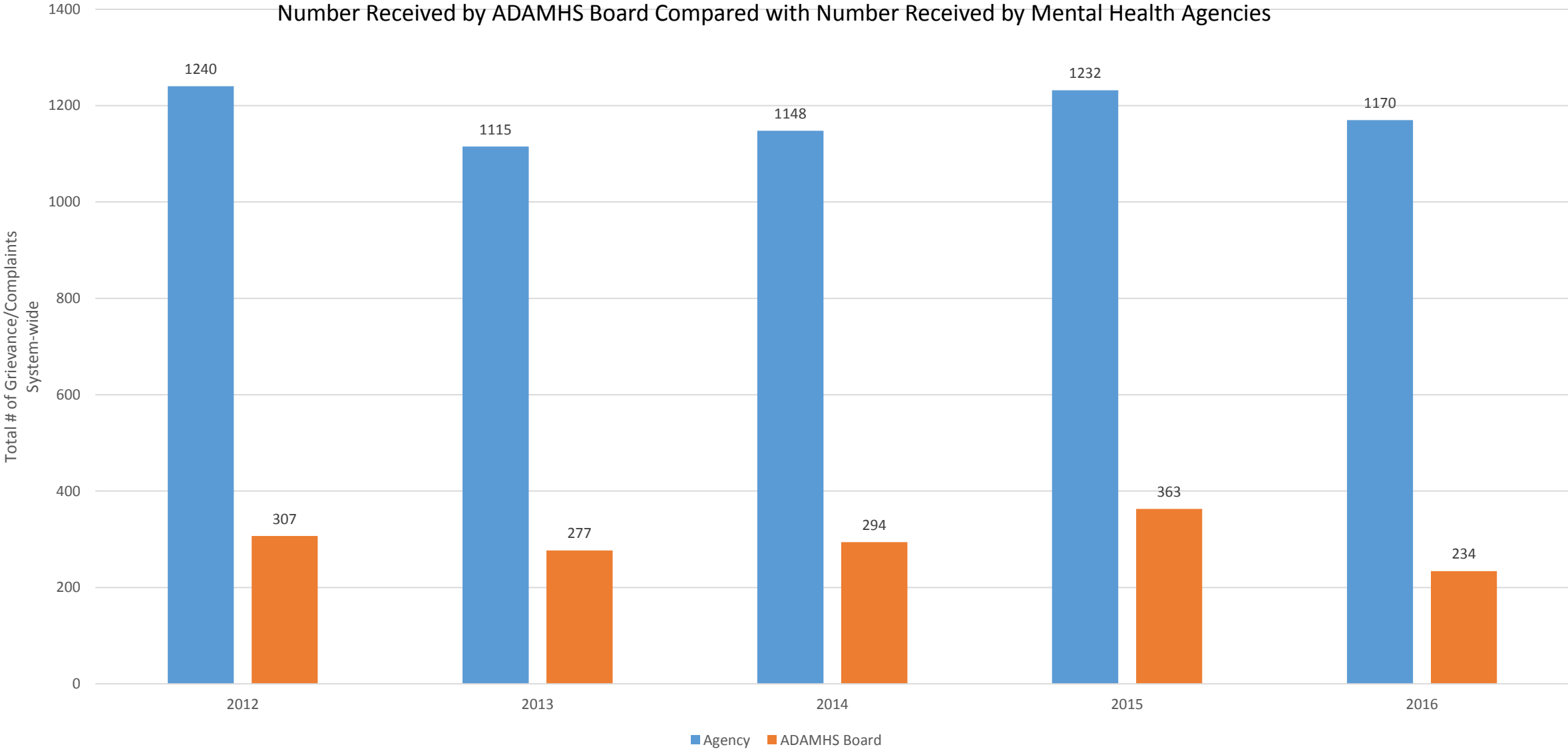


AoD Grievances/Complaints Received System-wide: 5 Year Trend

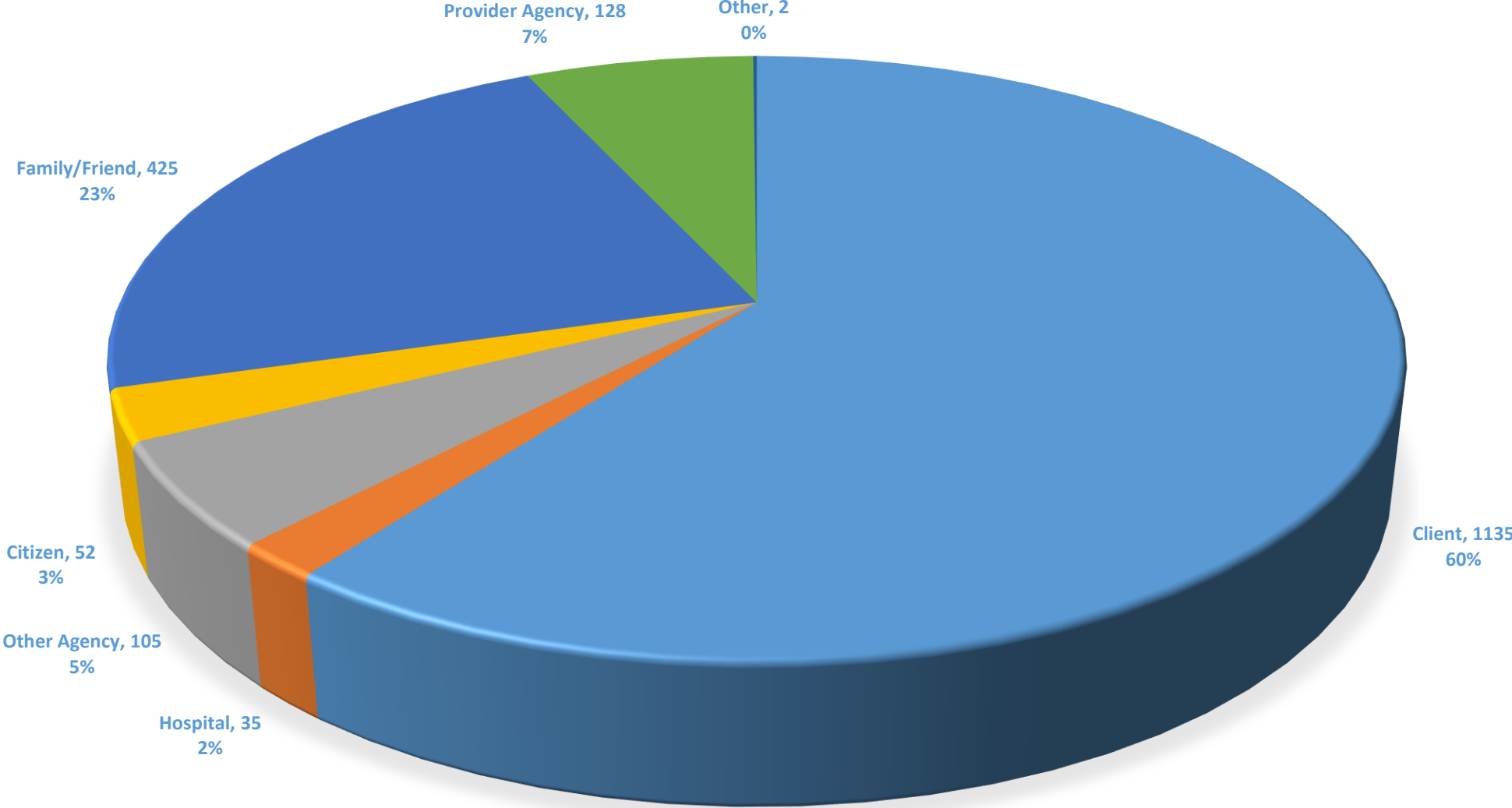


Combined Mental Health/AoD Total Grievance/Complaint System-wide: 5 Year Trend

Number Received by ADAMHS Board Compared with Number Received by Mental Health Agencies

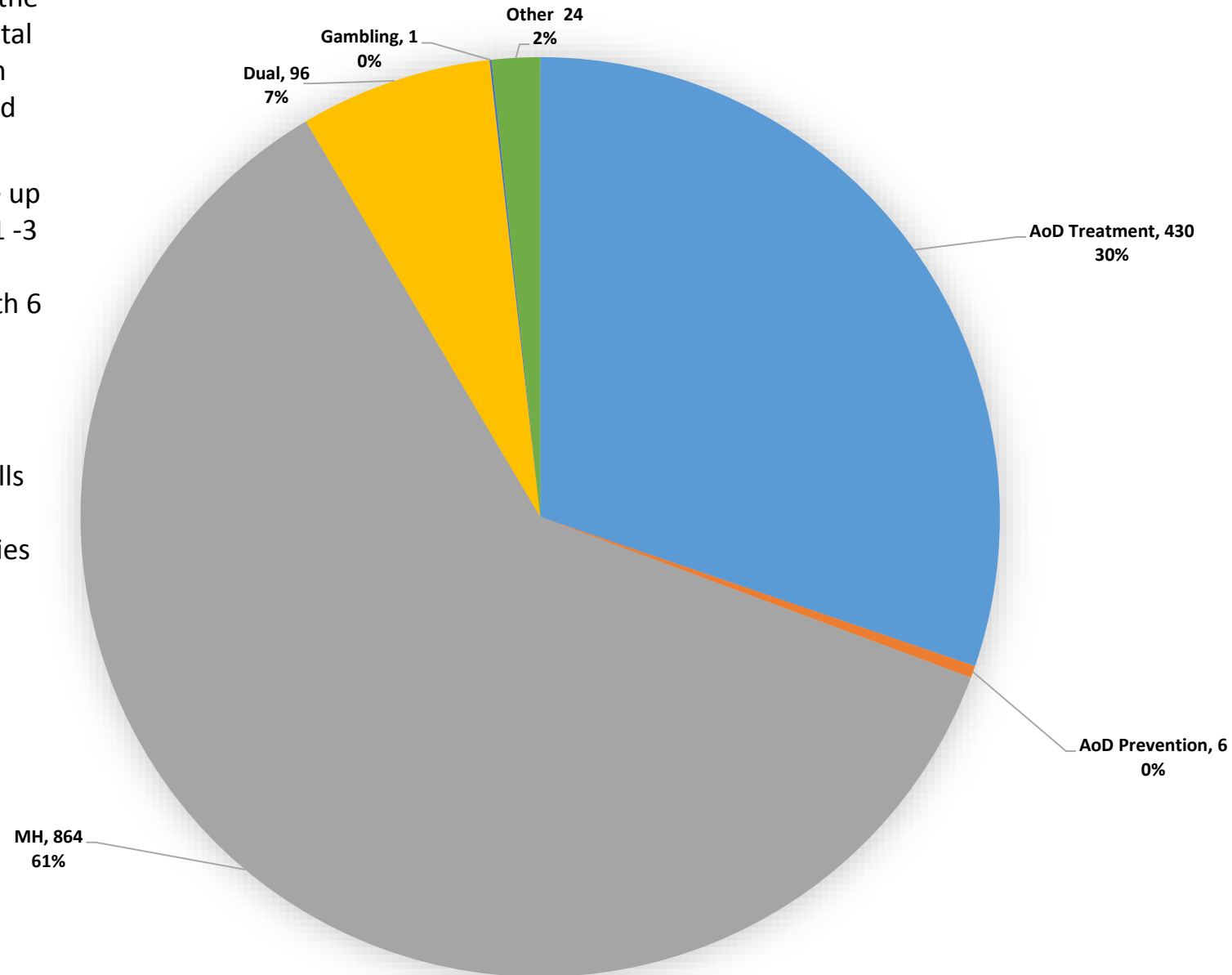


Who is Contacting ADAMHS Board for Clients Rights?



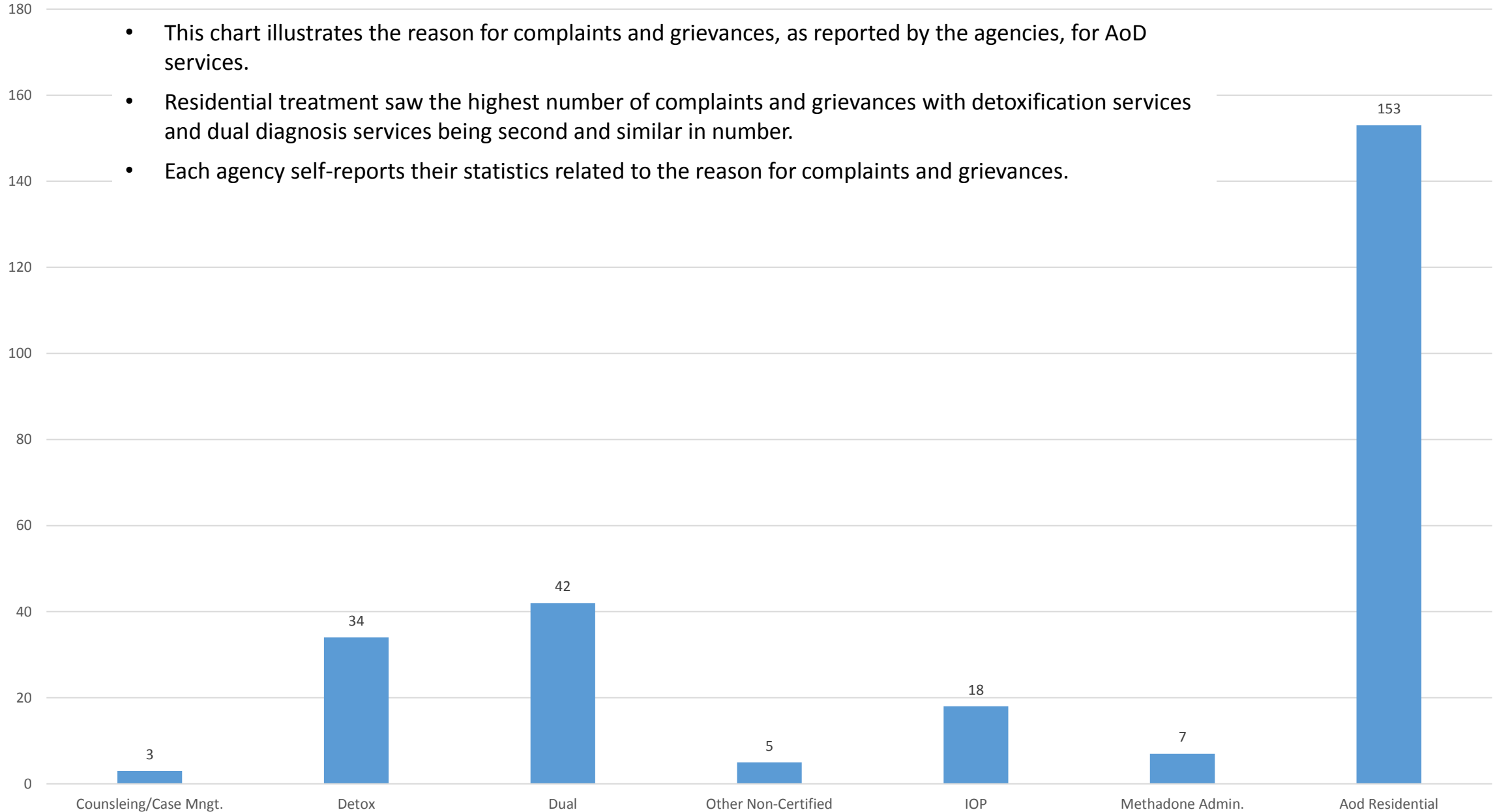
Reasons for Contacting ADAMHS Board Client Rights

- Primary reasons for contacting the ADAMHS Board are due to mental health needs and concerns with AoD treatment being the second largest.
- Gambling has statistically made up the smallest portion with only 1 -3 calls per calendar or fiscal year, followed by AoD Prevention with 6 calls.
- This chart includes inquires, complaints and grievances.
- The Board logs and tracks all calls based upon the need and are classified by one of the categories illustrated in the chart.

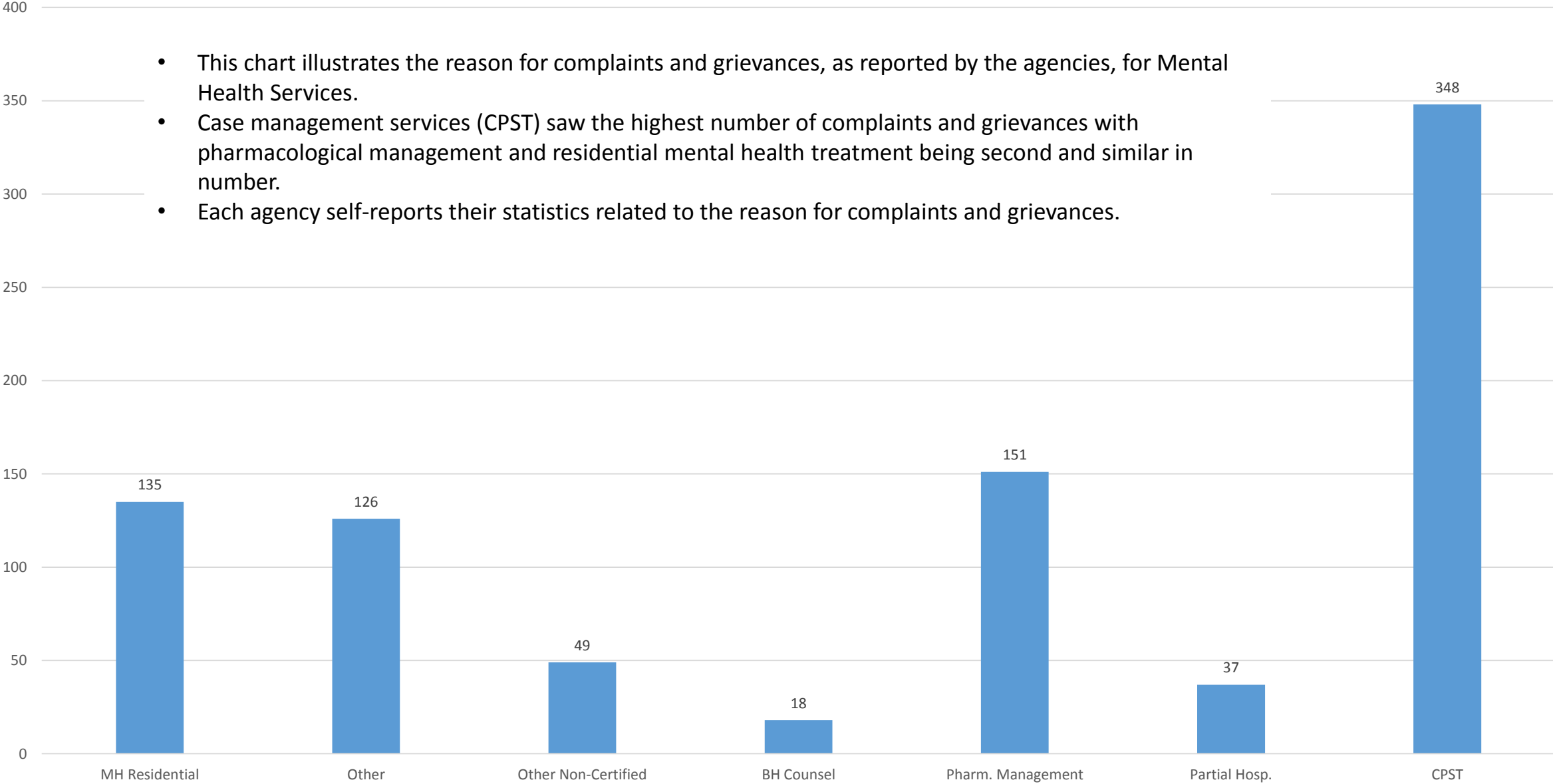


Grievance/Complaint for AoD Services

- This chart illustrates the reason for complaints and grievances, as reported by the agencies, for AoD services.
- Residential treatment saw the highest number of complaints and grievances with detoxification services and dual diagnosis services being second and similar in number.
- Each agency self-reports their statistics related to the reason for complaints and grievances.

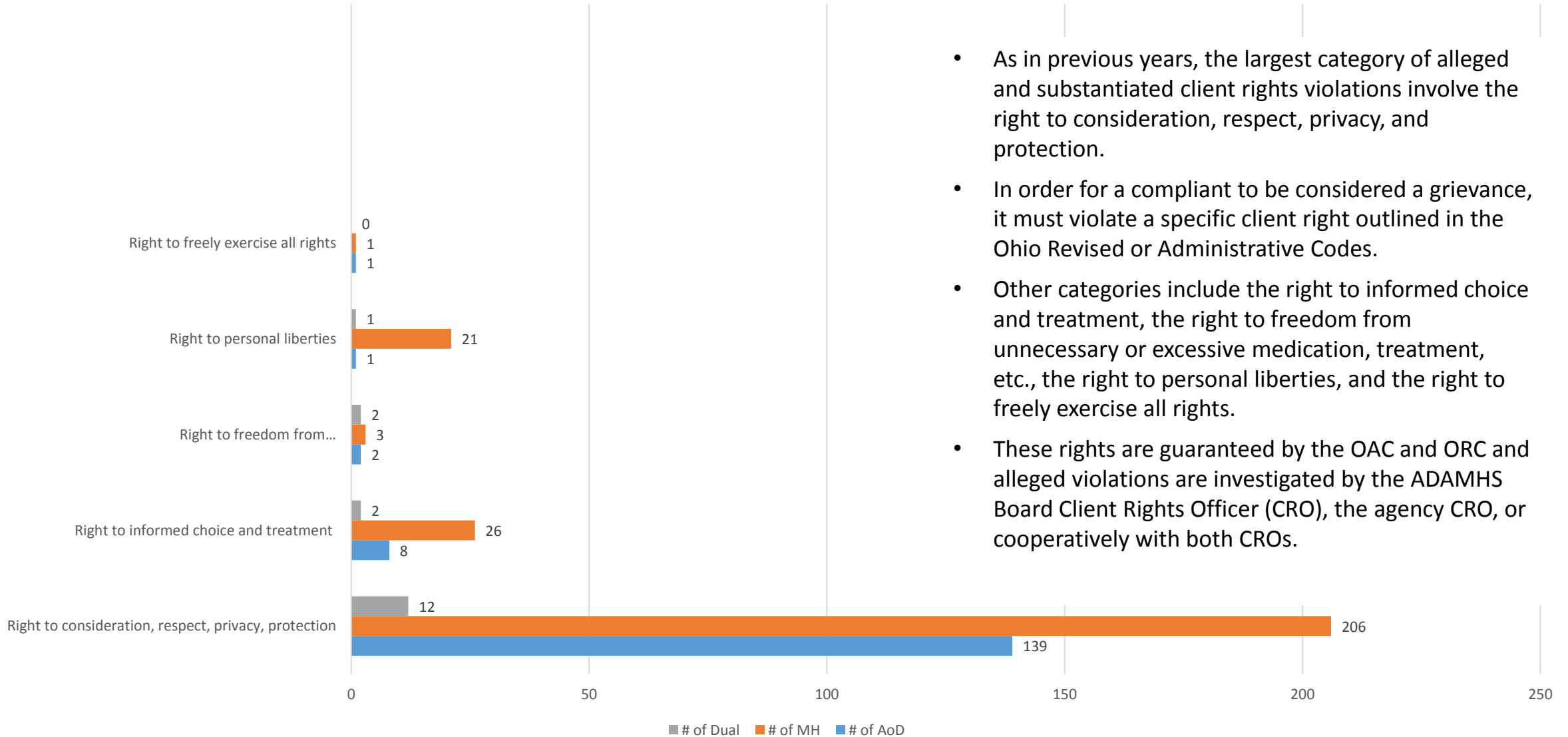


Grievance/Complaint For Mental Health Services



- This chart illustrates the reason for complaints and grievances, as reported by the agencies, for Mental Health Services.
- Case management services (CPST) saw the highest number of complaints and grievances with pharmacological management and residential mental health treatment being second and similar in number.
- Each agency self-reports their statistics related to the reason for complaints and grievances.

Grievance/Complaint Sorted by Client Rights Categories



- As in previous years, the largest category of alleged and substantiated client rights violations involve the right to consideration, respect, privacy, and protection.
- In order for a complaint to be considered a grievance, it must violate a specific client right outlined in the Ohio Revised or Administrative Codes.
- Other categories include the right to informed choice and treatment, the right to freedom from unnecessary or excessive medication, treatment, etc., the right to personal liberties, and the right to freely exercise all rights.
- These rights are guaranteed by the OAC and ORC and alleged violations are investigated by the ADAMHS Board Client Rights Officer (CRO), the agency CRO, or cooperatively with both CROs.

About this Report...

- The next series of charts lists each right as guaranteed under the OAC and ORC.
- Each agency self-reports alleged and substantiated grievance investigations based upon what right violation is alleged to have occurred.

Grievances by Client Rights Category

	<u>AoD (Treat)</u>	<u>MH</u>	<u>DUAL</u>
<u>Right to Consideration, Respect, Privacy, Protection</u>			
AOD Tx-1 & Prev-a & MH-2a: To be treated with consideration and respect...	105	158	12
AOD Tx-2: To receive services in least restrictive feasible environment	2		
MH 2d: To receive reasonable assistance in the least restrictive setting		6	
MH-2b: To receive humane services			
MH-6: To [have] reasonable privacy...freedom from excessive intrusion...		9	
MH-2e: To [have] reasonable protection from...abuse, inhumane Tx, assault, battery...	4	29	
<u>Right to Informed Choice and Treatment</u>			
AOD-3: To be informed of one's own condition			
AOD Tx-4 & Prev-b: To be informed of available [treatment] program/ [prevention] service			2
MH-1b: To receive information in a language and terms appropriate for the person's understanding...		3	
MH-2c: To Participate in appropriate & available service that is consistent with ISP...regardless of refusal of other service, unless...		5	
AOD Tx-5 & Prev-c: To give consent...refuse...service, treatment/therapy			
MH-4a: To Give full informed consent to any service prior to commencement...[to] decline services including medication, absent		4	
AOD Tx-6: To Participate in development, review and revision of...treatment plan... [to] receive a copy			
MH-3a: To [have] a current individualized service plan (ISP) that address the needs and responsibilities ...and specifies...services		1	
MH-3b: To participate in periodic ISP reviews...including services...upon discharge		5	
AOD Tx-13 and Prev-h: To be informed of reason(s) for terminating...program [or] services	2		
MH-14: To be informed in advance of reason(s) for discontinuance of service provision... [and to] plan for consequences		3	
AOD Tx-14 & Prev-i: To be informed of the reason(s) for denial of...service	1	3	
MH-15: To receive an explanation...for denial of service			
<u>Right to Freedom From...</u>			
AOD Tx-7 and Prev-d: [To be free] from unnecessary or excessive medication, unnecessary physical restraint or seclusion	2		1
MH-5: [To be free] from restraint or seclusion unless there is imminent risk of physical harm to self or others		3	
AOD Tx-8: To be informed [of]...refuse hazardous treatment procedures			

<u>Grievances by Client Rights Category</u>	<u>AoD (Treatment)</u>	<u>MH</u>	<u>DUAL</u>
MH-4c: To decline any hazardous procedures			
AOD Tx-9 and Prev-e: To be advised [of]...refuse observation by others and by techniques...			
H-4b: To be advised [of and]...refuse observation by techniques [that include all] audio and visual technology[ies]. This does not			
MH-12: [To be free from] ... conflicts of interest. No agency employee may be a person's guardian or representative if the person is currently receiving services from said facility/			1
<u>Right to Personal Liberties</u>			
AOD Tx-10: To consult with independent Tx specialist or legal counsel, at one's own expense			
MH-11: To have the opportunity to consult with independent specialist or legal counsel, at one's own expense			
AOD Tx-11/Prev-f: To [have] confidentiality of communications and personally identifying information within the limitations an	1		1
MH-7a: The right to confidentiality unless a release or exchange of information is authorized and the right to request to restrict		14	
MH-7b: To be informed of the circumstances under which an agency is authorized or intends to release, or has released			
AOD Tx-12 and Prev-g: To have access to one's own client [or] consumer record			
MH-13: To have access to one's own psychiatric, medical...treatment records unless access to...identified items...is restricted...		5	
AOD Tx-15 and Prev-j: To not be discriminated against for receiving services...			
MH-9: The right to receive services and participate in activities free of discrimination		2	
AOD Tx-16 and Prev-k: To know the cost of services...			
MH-1c: To be fully informed of the cost of services			
<u>Right to Freely Exercise All Rights</u>			
AOD Tx-17 and Prev-l: To be informed of all rights			
MH-1a: To be informed of all rights...prior to consent to proceed with services and... [to have the right] to request a written copy...			
AOD Tx-18 and Prev-m: To exercise one's own rights without reprisal	1		
MH-10: To exercise all rights without reprisal of any form.....including the ability to continue services with uncompromised access. No right extends so far as to supersede health and safety considerations		1	
AOD Tx-19 and Prev-n: To file a grievance in accordance with agency [or] program procedures			
MH-8: To have the grievance procedure explained orally and in writing...to file a grievance, with assistance if requested...to have a grievance reviewed through a grievance process, including the right to appeal a decision			
AOD Tx-20 and Prev-o: To have oral and written instructions concerning the procedure for filing a grievance			

About this Report...

- The next series of charts examine specific areas and treatment modalities that have resulted in complaints and grievances by clients, separated by Mental Health and AoD services.
- Agencies also track specific client complaints and grievances relating to issues such as staff behavior or the manner in which services are provided.
 - This enables the agency to better investigate the claim and make the necessary recommendations for resolution should a complaint or grievance be substantiated.

TOPIC	Grievance	Complaint
HOUSING CONDITIONS	5	30
OTHER ENVIRONMENTAL CONCERN		7
HOUSING AVAILABILITY	1	20
MONEY/PROPERTY ISSUES	5	22
REPRESENTATIVE PAYEE ISSUES	3	18
SAFETY ISSUES	4	12
NEED FOR SERVICE IMPROVEMENT	58	89
NEED TO INCREASE SERVICE FREQUENCY	15	167
STAFF BEHAVIOR	116	316
RULES/POLICY	25	172
PERSONAL NEEDS	20	106
FAMILY NEEDS AND CONCERNS	5	1
OTHER (Member to input)		1
Medications	9	29
Breaking Rules/passes/chores/voting/smoking		20
Food		11
Vending/Payphone		26
Restraint	1	
Percieved staff to be inattentive		17
Lenghty Discharge		53
Physician Communication		26
Participation in plan of care		8
Removed from Services	1	2
Scheduling clinic appointments		1
Denied Service		4
Unfair Discontinuation of Service	2	5
ISSUES WITH SERVICES PROVIDED BY ANOTHER AGENCY	<u>2</u>	14
Client to Client		8

<u>AoD Service or Program</u>	# of Grievances	# of Complaints	# of Clients Accepting Resolution	# of Grievances resolved within 21 Calendar days	# of Complaints resolved within 30 Calendar days
TREATMENT:					
Assessment		3	2		1
Case Management		1	1		1
Crisis Intervention					
Detoxification - Acute Hospital					
Detoxification - Sub-acute	2		2	2	
Dual Diagnosis Services	1	30	28	1	30
Individual, Group or Family Counseling	5	1	6	5	
Intensive Outpatient (IOP)	6	10	14	9	9
Methadone Maint. (Opioid Agonist Admin)					
Medical/Somatic					
Residential Treatment	56	96	78	56	96
Urinalysis					
Program or Service not listed above:					
Specify:					
Specify:					
Specify:					
Other (non-certified)	3				
Other (non-certified)					
Other					
Consultation					
Intervention					
Outreach					
Referral and Information					
Training					
Sub-Total Treatment					
PREVENTION:					
Alternatives					
Education		1	1		1
Information Dissemination					
Mentoring					
Problem ID and Referral					
Program or service not Listed above:					
Specify:					
Specify:					
Other (non-certified)					
Sub-Total Prevention		1	1		1
Sub-Total Treatment (from above)					
TOTAL For AoD	73	142	132	82	138

<u>Certified MH Service</u>	# of Grievances	# of Complaints	# of Consumers Accepting Resolution	# of Grievances resolved within 20 Business days	# of Complaints resolved within 30 Calendar days
Adjunctive Therapy		2	2		
Adult Educational					
Behavioral Health Counsel/Therapy	7	9	15	8	8
Behavioral Health Hotline Service	1	10	8	1	10
Comm. Psych Support Tx (CPST)	96	144	177	89	138
Consultation Service					
Consumer Operated Service	1	1	2	1	1
Crisis Intervention MH Service	1	2	1	1	2
Employment Services		2	2		1
Forensic Evaluation					
Foster Care (Therapeutic ONLY)					
Inpatient Service		105	105		105
Mental Health Assessment	1	9	9	1	9
Mental Health Educational					
Occupational Therapy					
Partial Hospitalization	22	12	9	4	6
Pharmacologic Management	20	114	107	22	110
Pre-hospitalization					
Prevention Service					
Referral and Information					
Residential Treatment (ODMH Cert.)	51	80	124	61	69
School Psychological					
Self-Help/Peer Support	1	1	2	1	1
Social and Recreational					
Vocational Services					
Other Mental Health (5122-29-27)					
Guardianship		4	4		4
Representative Payee		5	5		5
psych testing (wait list)		1	1		1
nursing (staff behavior)	1		1	1	
Day Report		7	7		7
Clerical	22	4	15	21	4
Client Rights	1		1	1	
Entitlements	3	1	3	3	1
Receptionist		1	1		1
Records		2	2		2
Pharmacy	2		2	2	
Contracted Services	4	1	2	4	1
non-MH	2				
Skilled Nursing	2		2	2	
Support Staff	1	17	17	1	17
Hospital Systems/Dept policy/Phones		19	19		19
Shelter Dismissal		1	1		1
Sexual Allegation Against Staff	1		1	1	
PATH					
Case Management/Housing	7	105	110	7	105
Emergency Financial assist.	1		1	1	
Driver		2			1
Total For MH	255	700	799	240	665

Challenges Collecting Client Rights Data & Remedies

- **Challenge:** Not all agencies submitted annual clients rights reports; however all major agencies submitted reports:
- **Solutions:**
 - Update list of agency CROs.
 - Monthly meetings with agency CROs.
 - New agency CROs orientation.
- **Challenge:** Currently no way to determine from the annual client rights report received from individual agencies, how many of the complaints and grievances were also filed with ADAMHS Board.
- **Solution:**
 - ADAMHS Board CRO will determine previous client actions to resolve issue.

Challenges Collecting Client Rights Data & Solutions

- **Challenge:** Possible confusion in agencies completing the clients rights annual report.
- **Solutions:**
 - Revision of report to provide a more accurate representation of client rights data.
 - Board staff will provide training in completing report to agency CROs.
- **Challenge:** No method by which to track Adult Care Facilities (ACF) complaints through the agency client rights report.
- **Solution:**
 - Revision of report to include ACF complaints.