BERRIEN MENTAL HEALTH AUTHORITY
-- PROCEDURE --

SUBJECT: FREEDOM OF MOVEMENT	SECTION: 01-35-01 Page 1of 3
APPLICATION: Directly Operated & Contractual Residential and Inpatient Programs EFFECTIVE DATE: 10/01/94 APPROVED BY: _____ Chief Executive Officer REVISED: 4/95, 7/96, 10/99, 3/02, 6/03, 2/05, 4/2022, 7/2022	REQUIRED BY: MHC 712, 744, 752

POLICY:
Mental health services will be offered and provided in the least restrictive setting that is appropriate and available. A recipient's freedom of movement may not be restricted unless there are circumstances that justify limitations be imposed in the consumer's Person-Centered Plan and/or Behavior Treatment Plan.

PURPOSE:
The purpose is to provide for the freedom of movement of recipients living in residential settings. The following procedure provides guidelines for when freedom of movement may be restricted to protect the resident or others, frequency of review, and the removal of such restrictions.

STANDARDS:
- PCP reviews shall be completed as soon as possible, but no longer than 30 days from the date of the request, as provided in Section 712(2) of the Mental Health Code.

DEFINITIONS:
Freedom of Movement - The right of a recipient to move about with the least amount of restriction or limitation in accordance with the recipient's need for protection from injury or imposing injury to others, prevention of substantial property damage, or security precautions appropriate to the clinical condition and required for the provision of mental health services.

Restriction: Constraint of an individual's freedom of movement or constraint of freedom of movement for a group or groups of recipients.

PROCEDURE:

1. All restrictions on a recipient's freedom of movement must be consistent with law, rules, standards of accreditation/certification organizations and Berrien Mental Health Authority (BMHA) policy/procedure.

2. Recipient's must not be unnecessarily restricted in their movement.

3. Freedom of movement may be restricted only:
    a. By general restrictions applicable to a group or groups of recipients pursuant to provider facility procedures which may include the following:
        i. From areas that could cause health, safety, or other security precautions or prevent the facility from providing mental health services (medication room, furnace room)
        ii. Temporary restrictions from areas for reasonable unforeseeable activities including repair or maintenance
        iii. For emergencies in case of fire, tornadoes, floods, etc.

    b. By individual restrictions, when determined clinically necessary:
        i. To provide mental health services
        ii. To prevent injury to the recipient or others
        iii. To prevent substantial property damage by the recipient

    c. By 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.

4. Individual restrictions deemed clinically necessary must be documented in the individual's plan of service, including: justification for its adoption, time limits for the date the restriction(s) will be reviewed and/or expires. Documentation must also be included that describes attempts that have been made to avoid such restrictions as well as what actions will be taken as part of the plan to ameliorate or eliminate the need for such restrictions in the future.

5. If it is determined that a less restrictive placement is appropriate but not available, the person in charge of the person-centered plan shall document all efforts made to find one, as well as, what steps will be taken to secure or develop an appropriate setting and within what timeframes.

6. Restrictions on the freedom of movement of a recipient shall be discontinued when the clinical rational for their implementation ceases to exist.

7. A recipient will not be transferred to a more restrictive setting unless medically necessary evidence exists that the recipient presents a substantial danger to self, others, or substantial property damage.

8. If a person is not happy with their Person-Centered Plan, a recipient or guardian may make a request for review to the person in charge of implementing the plan of service, as provided in Section 712(2) of the Mental Health Code. This review must be completed within 30 days of the date of the request.

9. A recipient or guardian may also file a complaint to the Office of Recipient Rights regarding restrictions they feel are not justified or appropriate.

FORMS: N/A

Reviewer: Office of Recipient Rights
Reviewed: 5/07, 3/08, 7/09, 6/10, 9/11, 9/12, 7/13, 5/14, 7/15, 3/16, 4/17, 7/18, 6/19, 4/2020, 5/2021, 4/2022, 7/2022, 8/2023, 8/2024, 8/2025