

Ohio Department of Mental Health

30 East Broad Street Columbus, Ohio 43215-3430

DATE: September 5, 2008

DATE:	NUMBER:	ORIGINATOR & TITLE:	
09/05/2008	C 08 09 05	Anita Lieser, Chief	
OFFICE: Office of Lic	ensure and Cert	ification	
APPROVED Sloan Spaldir	BY: ng, Deputy Direct	tor	
DISTRIBUT	ION: Boards	□ Provider Agencies	Shareholder Organizations ■ Shareholder Organizations ■
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SUBJECT: Allocation Licensure Procedure	MACSIS	Medicaid	☑ Critical Information☑ Policy
	ORRESPONDEN -1-02, Client Rig	NCE: ghts and Grievance Procedure	es
CONTENT:	Informational U _I	pdate	
REQUIRED	ACTION: N/A		
DATES FOR	REQUIRED AC	CTION: N/A	
NAME, TEL	EPHONE NO., A	AND EMAIL OF CONTACT PL Anita Lieser, Chief (614) 752-8880 liesera@mh.state.oh.us	ERSON(S):

SUBJECT: The Ohio Department of Mental Health (ODMH) Process for Review and Approval of Client Rights and Grievance Procedures (CRGP's) for New Agencies or Agencies with Substantive Changes to Their CRGP's

The Department's process for review and approval of client rights and grievance procedures is outlined in Ohio Administrative Code (OAC) Section 5122-26-18 (Client Rights and Abuse), and this Rule references OAC 5122:2-1-02 (attached). OAC 5122:2-1-02(I)(4) states that each board and agency shall send to the Department of Mental Health its written client rights policy and grievance procedures for approval by the Department. Subsequent substantive changes to such written policy and procedures shall

Client Rights and Grievance Procedures September 5, 2008 Page 2

also be submitted to and approved by the Department before enactment. (Please note: a substantive change means that the agency's client rights procedures are no longer in compliance with the Ohio Administrative Code Section 5122:2-1-02.)

For further clarification, you may access the rule in its entirety at www.mh.state.oh.us/legaldiv/general/rules.html

In lieu of submission of policy and procedures, new agencies or agencies that have substantive changes to their client rights and grievance procedures may submit the <u>Client Rights and Grievance Verification</u> <u>Statement and Checklist</u> to the Department, along with Board assurance that the agency has addressed all required elements of the OAC 5122:2-1-02, Client Rights and Grievance Procedures. This checklist and appropriate sign off form is available on the ODMH website: www.mh.state.oh.us/licensurecert/general/lc.forms.html

You may submit this form to:

Anita Lieser, Chief Office of Licensure and Certification Ohio Department of Mental Health 30 East Broad Street, 24th Floor Columbus, Ohio 43215-3430

ODMH will review the agency's submission and return a copy of the Verification Statement to the Agency and the Board. This signed copy will serve as initial approval of Client Rights and Grievance Procedures for the purpose of ODMH Certification.

ODMH reserves the right to review an agency's Client Rights and Grievance Procedure, and require a plan of correction, if indicated.

If you have any questions, please contact me at <u>liesera@mh.state.oh.us</u>. Thank you for your assistance in this matter.