

**ST. CLAIR COUNTY COMMUNITY MENTAL HEALTH AUTHORITY**

**ADMINISTRATIVE PROCEDURE**

Date Issued **01/24**

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<b>CHAPTER</b> Recipient Rights	<b>CHAPTER</b> 05	<b>SECTION</b> 003	<b>SUBJECT</b> 0020
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<b>WRITTEN BY</b> Victor Amato	<b>REVIEWED BY</b> Telly Delor	<b>AUTHORIZED BY</b> Tracey Pingitore	

I. APPLICATION:

- SCCCMHA Board
- SCCCMHA Providers & Subcontractors
- Direct-Operated Programs
- Community Agency Contractors
- Residential Programs
- Specialized Foster Care

II. PURPOSE STATEMENT:

In accordance with the Michigan Compiled Laws and the Michigan Department of Health and Human Services (MDHHS) Administrative Rules, St. Clair County Community Mental Health Authority (SCCCMHA) requires the employees and volunteers of SCCCMHA and its provider network to ensure recipients/recipients' legal representatives receive notice of the availability of family planning and health information services.

III. DEFINITIONS:

- A. Family Planning: Means matters regarding sterilization, abortion, and contraception.
- B. Recipient: Means an individual who receives mental health services from the Michigan Department of Health and Human Services (MDHHS), a community mental health services program, or a facility, or from a provider that is under contract with the MDHHS or a community mental health services program.

IV. STANDARDS:

- A. SCCCMHA will provide recipients, their guardians, and parents of minor recipients a notice of the availability of family planning and health information services, and, upon request of any such person, provide referral assistance to providers of such services in accordance with SCCCMHA administrative procedure #05-002-0006, Informed Consent.
- B. A minor, 14 years of age or older, may request and receive mental health services and a mental health professional may provide mental health services, on an outpatient basis, excluding pregnancy termination referral services and the use of psychotropic drugs, without the consent or knowledge of the minor's parent, guardian, or person in loco parentis.

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V. PROCEDURES:

**Employee in Charge of Initiating/Revising the Recipient's Individual Plan of Service**

1. Provides recipients, their guardians, and parents of minor recipients with notice of the availability of family planning and health information services at the time of application for services, and annually thereafter.
2. Refers a recipient requesting information to their primary care provider, other health provider, and/or the St. Clair County Public Health Department for education and information on family planning and health information services. The notice shall include a statement that receiving mental health services does not depend in any way on requesting or not requesting family planning or health information services.

VI. REFERENCES:

- A. Michigan Mental Health Code, Sections 330.1707 and 330.1708
- B. Michigan Department of Health and Human Services Administrative Rules, R 330.7029

VII. EXHIBITS:

None Available

VIII. REVISION HISTORY:

Dates issued 05/88, 09/93, 03/97, 02/99, 02/01, 02/03, 02/05, 02/07, 02/09, 02/11, 09/12, 09/13, 09/14, 01/16, 01/17, 01/18, 01/19, 01/20, 01/21, 01/22, 01/23.