

Facility Name: _____ Unit #/Name: _____	DENIAL OF RIGHTS MONTHLY TALLY Individual Report _____ / _____ Month/Year	Patient Name: _____ I.D.# _____ Patient DOB: ___/___/___ Gender (M,F,T): ___ Ethnicity Code: ___
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RIGHT DENIED	DAY OF THE MONTH															
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Clothes																
Possessions																
Money																
Storage																
Visitors																
Telephone																
Letter Writing																
Mail																

RIGHT DENIED	DAY OF THE MONTH															
	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total Days
Clothes																
Possessions																
Money																
Storage																
Visitors																
Telephone																
Letter Writing																
Mail																

<u>Gender</u> M = Male F = Female T = Transgender	<u>Ethnicity Code</u> 1 = White 4 = Amer. Native 7 = Other 2 = Hispanic 5 = Asian 3 = Black 6 = Pacific Islander
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<u>Department of Mental Health (DMH) January 2008</u> MHRC = Mental Health Rehabilitation Center PHF = Psychiatric Health Facility <i>CSU = Crisis Stabilization Unit (23-hour bed)</i>	<u>Department of Social Services</u> <i>CTF = Community Treatment Facility</i> <i>CCF = Community Care Facility</i> <i>GROUP HOME</i>	<u>Department of Public Health CDPH</u> <i>PSYCH = Acute Psychiatric Hospital</i> <i>SNF/STP = Special Treatment Program</i> <i>GACH = General Acute Care Hospital</i> <i>ICF (all) = Intermediate Care Facility</i> <i>SNF = Skilled Nursing Facility</i>
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General Provisions: The reason for denial of a right must be related to the specific right denied. When a right has been denied, staff shall employ the least restrictive means of managing the behavior that led to the denial. A right shall not be withheld or denied as a punitive measure, nor shall a right be considered a privilege to be earned. Treatment plans shall not include denial of any right.

1. To wear their own clothing.
2. To keep and use personal possessions including toilet articles.
3. To keep and be allowed to spend a reasonable sum of their own money for canteen expenses and small purchases.
4. To have access to individual storage space for their private use.
5. To see visitors each day.
6. To have reasonable access to telephone, both to make and receive confidential phone calls and to have such calls made for them.
7. To have ready access to letter-writing materials, including stamps.
8. To mail and receive unopened correspondence.

Rights while in Seclusion or Restraint: Patients retain the rights above even when in either seclusion or some form of restraint. However, if the patient is in seclusion and/or restraint, a specific request must be made by the patient to exercise one or more of their rights. If staff finds that there is "Good Cause" to deny the request to exercise one or more rights, then a denial of rights must be filed in accordance with these procedures.

Patient Informing: The patient shall also be told of the content of the notation (reason for the denial) and the process for restoration at the time of the denial. The date that a specific right is restored shall be documented in the patient's treatment record.

Restoration of Rights: A patient's right under this Section shall be restored when the good cause for its denial no longer exists

This form must be completed to reflect all denial of rights that occurred. The report must be forwarded to the facility coordinator for the completion of the MH-307.