Hennepin County

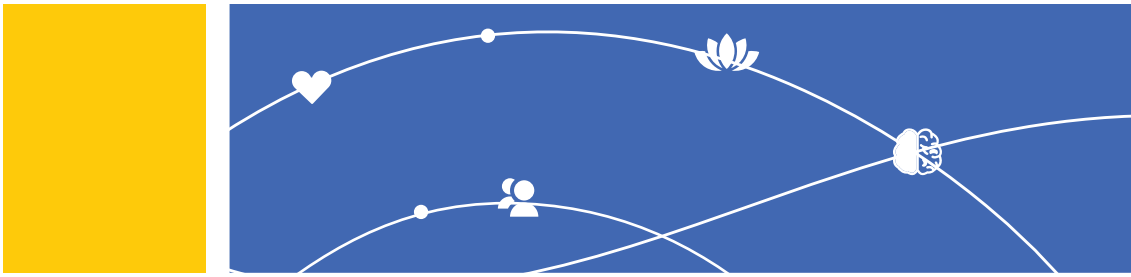
Mental Health Center

Client Guide

Table of contents

Thank you for choosing the Mental Health Center. We are here to support your treatment goals and do our best to address any barriers you may encounter in accessing mental health services.

This handbook is designed to provide you with information that will help you be an active, satisfied participant in your care. You will learn about our staff and services, as well as our policies and procedures to get the most from your involvement here. If you have questions or need additional information about the contents of the handbook, please ask your provider for assistance.



Our commitment to you

Our vision

To empower clients with resiliency, stability, and an improved quality of life.

Our mission

The Mental Health Center is committed to delivering high-quality mental health services that enhance the mental well-being of Hennepin County adults and children experiencing serious mental illness or emotional disturbances. We prioritize individuals referred by Hennepin County departments and those facing barriers to care, ensuring accessible and inclusive support.

Our values

Excellence
Striving for the highest quality in everything we do.

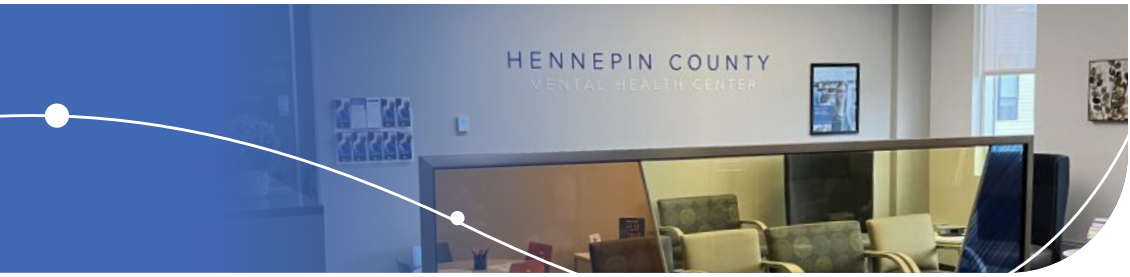
Accessibility
Ensuring that services are available to those in need.

Cultural competence
Respecting and embracing diversity in all its forms.

Integrity
Upholding honesty, transparency, and ethical standards.

Compassion
Providing care with empathy and understanding.

Respect
Honoring the dignity and worth of every individual.



Who we serve

The Mental Health Center provides trauma informed, recovery oriented and person-family center care to all ages. We serve adults who have serious mental illness and who may also have a co-occurring substance use disorder. We serve children across different developmental stages, starting from infancy. Our services address children's mental health needs starting with a mental health evaluation to determine the best treatment plan.

We are licensed by the state of Minnesota as a 245I and a 254G outpatient mental health and substance use disorder provider. We are a Certified Community Behavioral Health Clinic (CCBHC).

The Mental Health Center is a county-supported facility designed to serve residents of Hennepin County or people for whom Hennepin County has financial responsibility. In most cases, if you move out of Hennepin County you are no longer eligible for our services, but we will help you get connected with the care you need.

Our staff

The Mental Health Center team includes psychiatrists, advanced practice nurses, psychologists, therapists and care coordinators, nurses, and other mental health professionals. A Genoa pharmacist is on site to assist with medication needs. Our Human Services Representative can assist you with county eligibility supports and help with forms and applications for public insurance coverage. Our clinicians and team of administrative support staff work together to help you throughout your treatment at the Mental Health Center.

Our services

The Mental Health Center approaches mental health care using a multidisciplinary approach, offering a range of services, including:

Assessments and evaluations

- Comprehensive evaluations/diagnostic assessments
- Comprehensive assessments for substance use disorder treatment
- Psychiatric evaluations
- Psychological evaluations

Therapy and education

- Individual and group therapy
- Psychoeducation
- Consultation
- Wellness and general health education

Medication services

- On-site pharmacist
- Nurse line
- Medication management
- Genomic testing

Whole-person care

- Care coordination and resource assistance
- Collaboration with community partners and service providers
- Individual Placement and Support (IPS) program with Rise
- Peer support services
- Therapeutic and medication support and groups for individuals struggling with co-occurring mental health and substance use disorders

Hours

Monday: 8 a.m. to 5 p.m.

Tuesday: 9:30 a.m. to 5 p.m.

Wednesday: 8 a.m. to 6 p.m.

Thursday: 8 a.m. to 5 p.m.

Friday: 8 a.m. to 5 p.m.

Appointments may be scheduled at 612-596-9438.

Some of our clinical services are also available on a walk-in basis.

Notice of Mandated Reporting

All Mental Health Center staff members are mandated reporters. This means that we are required by law to report when we have reason to believe that a child is or has been abused or neglected within the past three years. We are also mandated to report maltreatment of a vulnerable adult such as abuse, neglect or financial exploitation.

Additionally, all clinicians have a duty to warn potential victims if a Mental Health Center client or visitor makes a direct threat to a specific person. Our organization operates in accordance with Minnesota's Extreme Risk Protection Order (ERPO) statute, which allows certain individuals to petition the court to temporarily restrict firearm access for individuals who pose a significant risk to themselves or others.

Patients' Bill of Rights

As a Mental Health Center client you have certain rights:

1. Information about Rights

Patients shall, at admission, be told that there are legal rights for their protection during their stay at the facility or throughout their course of treatment and maintenance in the community and that these are described in an accompanying written statement of the applicable rights and responsibilities set forth in this section. Reasonable accommodations shall be made for those with communication impairments, and those who speak a language other than English. Current facilities policies, inspection findings of state and local health authorities, and further explanation of the written statement of rights shall be available to patients, their guardians or

their chosen representatives upon reasonable request to the administrator or other designated staff person, consistent with chapter 13, the Data Practices Act, and Section 626.557, relating to vulnerable adults.

2. Courteous Treatment

Patients have the right to be treated with courtesy and respect for their individuality by employees of or persons providing service in a health care facility.

3. Appropriate Health Care

Patients shall have the right to appropriate medical and personal care based on individual needs. This right is limited where the service is not reimbursable by public or private resources.

4. Physician's Identity

Patients shall have or be given, in writing, the name, business address, telephone number, and specialty, of any, of the physician responsible for coordination of their care. In cases where it is medically inadvisable, as documented by the attending physician in a patient's care record, the information shall be given to the patient's guardian or other person designated by the patient as his or her representative.

5. Relationship with Other Health Services

Patients who receive services from an outside provider are entitled, upon request, to be told the identity of the provider. Information shall include the name of the outside provider, the address, and a description of the service which may be rendered. In cases where it is medically inadvisable, as documented by the attending physician in a patient's care record, the information shall be given to the patient's guardian or other person designated by the patient as his or her representative.

6. Information about Treatment

Patients shall be given by their physicians complete and current information concerning their diagnosis, treatment, alternatives, risks and prognosis as required by the physician's legal duty to disclose. This information shall be in terms and language the patients can reasonably be expected to understand. Patients may be accompanied by a family member or other chosen representative, or both. This information

shall include the likely medical or major psychological results of the treatment and its alternatives. In cases where it is medically inadvisable, as documented by the attending physician in a patient's medical record, the information shall be given to the patient's guardian or other person designated by the patient as his or her representative. Individuals have the right to refuse this information. Every patient suffering from any form of breast cancer shall be fully informed, prior to or at the time of admission and during her stay, of all alternative effective methods of treatment of which the treating physician is knowledgeable, including surgical, radiological, or chemotherapeutic treatments or combinations of treatments and the risks associated with each of those methods.

7. Participation in Planning Treatment

Notification of Family Members:

a. Patients shall have the right to participate in the planning of their health care. This right includes the opportunity to discuss treatment and alternatives with individual caregivers, the opportunity to request and participate in formal care conferences, and the right to include a family member or other chosen representative, or both. In the event that the patient cannot be present, a family member or other representative chosen by the patient may be included in such conferences. A chosen representative may include a doula of the patient's choice.

b. If a patient who enters a facility is unconscious or comatose or is unable to communicate, the facility shall make reasonable efforts as required under paragraph (c) to notify either a family member or a person designated in writing by the patient as the person to contact in an emergency that the patient has been admitted to the facility. The facility shall allow the family member to participate in treatment planning, unless the facility knows or has reason to believe the patient has an effective advance directive to the contrary or knows the patient has specified in writing that they do not want a family member included in treatment planning. After notifying a family member but prior to allowing a family member to participate in treatment planning, the facility must make reasonable efforts, consistent with reasonable medical practice, to determine if the patient has executed an advance directive relative to the patient's health care decisions. For purposes of

this paragraph, “reasonable efforts” include:

1. examining the personal effects of the patient.

2. examining the medical records of the patient in the possession of the facility.

3. inquiring of any emergency contact or family member contacted whether the patient has executed an advance directive and whether the patient has a physician to whom the patient normally goes for care; and

4. inquiring of the physician to whom the patient normally goes for care, if known, whether the patient has executed an advance directive. If a facility notifies a family member or designated emergency contact or allows a family member to participate in treatment planning in accordance with this paragraph, the facility is not liable to the patient for damages on the grounds that the notification of the family member or emergency contact or the participation of the family member was improper or violated the patient’s privacy rights.

c. In making reasonable efforts to notify a family member or designated emergency contact, the facility shall attempt to identify family members or a designated emergency contact by examining the personal effects of the patient and the medical records of the patient in the possession of the facility. If the facility is unable to notify a family member or designated emergency contact within 24 hours after the admission, the facility shall notify the county social service agency or local law enforcement agency that the patient has been admitted, and the facility has been unable to notify a family member or designated emergency contact. The county social service agency and local law enforcement agency shall assist the facility in identifying and notifying a family member or designated emergency contact. A county social service agency or local law enforcement agency that assists a facility is not liable to the patient for damages on the grounds that the notification of the family member or emergency contact or the participation of the family member was improper or violated the patient’s privacy rights.

8. Continuity of Care

Patients shall have the right to be cared for with reasonable regularity and continuity of staff assignment as far as facility policy allows.

9. Right to Refuse Care

Competent patients shall have the right to refuse treatment based on the information required in Right No. 6. In cases where a patient is incapable of understanding the circumstances but has not been adjudicated incompetent, or when legal requirements limit the right to refuse treatment, the conditions and circumstances shall be fully documented by the attending physician in the patient's medical record.

10. Experimental Research

Written, informed consent must be obtained prior to patient's participation in experimental research. Patients have the right to refuse participation. Both consent and refusal shall be documented in the individual care record.

11. Freedom from Maltreatment

Patients shall be free from maltreatment as defined in the Vulnerable Adults Protection Act. "Maltreatment" means conduct described in Section 626.5572, Subdivision 15, or the intentional and nontherapeutic infliction of physical pain or injury, or any persistent course of conduct intended to produce mental or emotional distress. Every patient shall also be free from nontherapeutic chemical and physical restraints, except in fully documented emergencies, or as authorized in writing after examination by a patients' physician for a specified and limited period of time, and only when necessary to protect the patient from self-injury or injury to others.

12. Treatment Privacy

Patients shall have the right to respectfulness and privacy as it relates to their medical and personal care program. Case discussion, consultation, examination, and treatment are confidential and shall be conducted discreetly. Privacy shall be respected during toileting, bathing, and other activities of personal hygiene, except as needed for patient safety or assistance.

13. Confidentiality of Records

Patients shall be assured confidential treatment of their personal and medical records, and may approve or refuse their release to any individual

outside the facility. Copies of records and written information from the records shall be made available in accordance with this subdivision and Section 144.335. This right does not apply to complaint investigations and inspections by the department of health, where required by third party payment contracts, or where otherwise provided by law.

14. Disclosure of Services Available

Patients shall be informed, prior to or at the time of admission and during their stay, of services which are included in the facility's basic rate and that other services are available at additional charges. Facilities shall make every effort to assist patients in obtaining information regarding whether the Medicare or Medical Assistance program will pay for any or all of the aforementioned services.

15. Responsive Service

Patients shall have the right to a prompt and reasonable response to their questions and requests.

16. Personal Privacy

Patients shall have the right to every consideration of their privacy, individuality, and cultural identity as related to their social, religious, and psychological well-being.

17. Grievances

Patients shall be encouraged and assisted, throughout course of treatment, to understand and exercise their rights as patients and citizens. Patients may voice grievances and recommend changes in policies and services to facility staff and others of their choice, free from restraint, interference, coercion, discrimination, or reprisal, including threat of discharge. Notice of the grievance procedure of the facility or program, as well as addresses and telephone numbers for the Office of Health Facility Complaints shall be posted in a conspicuous place. Every facility employing more than two people that provides out-patient mental health services shall have a written internal grievance procedure that, at a minimum, sets forth the process to be followed; specifies time limits, including time limits for facility response; provides for the patient to have the assistance of an advocate; requires a written response to written grievances; and provides for a timely decision by an impartial decision-maker if the grievance is not otherwise resolved.

18. Communication Privacy

Patients may associate and communicate privately with persons of their choice and enter and, except as provided by the Minnesota Commitment Act, leave the facility as they choose. Patients shall have access, at their expense, to writing instruments, stationery, and postage. Personal mail shall be sent without interference and received unopened unless medically or programmatically contraindicated and documented by the physician in the medical record. There shall be access to a telephone where patients can make and receive calls as well as speak privately. Facilities which are unable to provide a private area shall make reasonable arrangements to accommodate the privacy of patients' calls. This right is limited where medically inadvisable, as documented by the attending physician in a patient's care record. Where programmatically limited by a facility abuse prevention plan pursuant to the Vulnerable Adults Protection Act, Section 626.557, Subdivision 14, Paragraph (b), this right shall also be limited accordingly.

19. Personal Property

Patients may retain and use their personal clothing and possessions as space permits, unless to do so would infringe upon rights of other patients, and unless medically or programmatically contraindicated for documented medical, safely, or programmatic reasons. The facility may, but is not required to, provide compensation for or replacement of lost or stolen items.

20. Services for the Facility

Patients shall not perform labor or services for the facility unless those activities are included for therapeutic purposes and appropriately goal-related in their individual medical record.

21. Protection and Advocacy Services

Patients shall have the right of reasonable access at reasonable times to any available rights protection services and advocacy services so that the patient may receive assistance in understanding, exercising, and protecting the rights described in this Section and in other law. This right shall include the opportunity for private communication between the patient and a representative of the rights protection service or advocacy service.

22. Right to Communication Disclosure and Right to Associate

Upon admission to a facility, where federal law prohibits unauthorized disclosure of patient identifying information to callers and visitors, the

patient, or the legal guardian or conservator of the patient, shall be given the opportunity to authorize disclosure of the patient's presence in the facility to callers and visitors who may seek to communicate with the patient. To the extent possible, the legal guardian or conservator of the patient shall consider the opinions of the patient regarding the disclosure of the patient's presence in the facility.

The patient has the right to visitation by an individual the patient has appointed as the patient's health care agent under chapter 145C and the right to visitation and health care decision making by an individual designated by the patient under paragraph 22.

Upon admission to a facility, the patient or the legal guardian or conservator of the patient, must be given the opportunity to designate a person who is not related who will have the status of the patient's next of kin with respect to visitation and making a health care decision. A designation must be included in the patient's health record. With respect to making a health care decision, a health care directive or appointment of a health care agent under chapter 145C prevails over a designation made under this paragraph. The unrelated person may also be identified as such by the patient or by the patient's family.

Inquiries or complaints regarding medical treatment or the Patients' Bill of Rights may be directed to:

Minnesota Board of Medical Practice
2829 University Ave. SE, Suite 400
Minneapolis, MN 55414-3246
612-617-2130
800-657-3709

Office of Health Facility Complaints
P.O. Box 64970
St. Paul, MN 55164-0970
651-201-4200
800-369-7994

Inquiries regarding access to care or possible premature discharge may be directed to:

Ombudsman for Long-Term Care
P.O. Box 64971
St. Paul, MN 55164-0971
800-657-3591
651-431-2555 (metro)

Minnesota Department of Health
Health Regulation Division
P.O. Box 64900
St. Paul, Minnesota 55164-0900
651-201-4101
health.fpc-licensing@state.mn.us

To obtain this information in a different format, call: 651-201-4101.

Attendance

In an effort to help the most clients get the most benefit from our services we have established some attendance guidelines:

An appointment will be considered a failed appointment/no-show unless canceled with at least 24-hours notice.

Failed appointments for the first visit with a therapist: Psychologist or prescriber for assessment and/or evaluation and psychological testing will not be rescheduled. These services will be available on a standby basis only. Our scheduling staff can explain your options to you if you miss your first appointment for any of these services.

Current clients: If you miss two appointments in a row or have inconsistent attendance, you will be invited to same-day services for at least two visits. You may or may not be eligible to schedule appointments again in the future.

Pets

The Mental Health Center keeps a strict no-pets policy. Please leave your pet or emotional support animal at home when you come to the Mental Health Center. Service dogs are welcome.

Personal conduct

We are committed to keeping the Mental Health Center a safe and comfortable setting for you to receive your treatment. As noted in the rights and responsibilities section, we ask your cooperation by interacting with others using respectful tone, words and actions. Please note:

- Behavior that is offensive, unruly, intimidating or threatening will not be tolerated and will be managed by clinical, supervisory and security staff and may involve law enforcement.
- Possible consequences of disruptive behaviors include:
  - being asked to leave the Mental Health Center for the day
  - being required to make amends and sign a participation agreement as a commitment to avoid any further incidents
  - being subject to a 180-day trespass restriction and may only be seen on the 5th floor under security escort
  - temporary or permanent demission from our services
  - legal action

If you have questions or would like more information about these guidelines, speak to your provider or a supervisor.

Forms

If you are a current, active client and are following your treatment plan, every effort will be made to complete relevant forms on your behalf within five to seven business days.

Records request

Please let your provider know if you are interested in an after visit summary. You have the right to request any of your records by calling 612-596-7600. Please note that some records may be available through your MyChart and does not require you to go through the Release of information department.

Changing treatment providers

If you feel you cannot work effectively with the provider assigned to you, you may request a transfer to another staff member. Please discuss this directly with your provider. If you need additional assistance, ask to speak with a supervisor.

Because the transfer process may take up to 45 days, you are encouraged to keep any scheduled appointments until you are notified about a decision.

Complaints and grievances

If there is a problem that interferes with or prevents you from receiving help or benefit from our services, please let us know. Current and former clients, as well as their representatives, have the right to file a grievance. To do so, please submit a Complaint Form. All grievances will be resolved within 15 days.

- You are encouraged to attempt to address concerns/complaints through your provider. If the complaint is about your provider and you don't feel comfortable addressing it directly with that person, you may ask to speak with your provider's supervisor. The supervisor will work with you and, in some cases, your provider and other members of our treatment team, to resolve the issue to your satisfaction.
- If you do not feel your concerns have been adequately addressed, you will be offered the opportunity to submit a complaint form which the MHC's Manager will review. You will be contacted for a follow-up phone call or meeting. You can have someone with you during this meeting and the Manager may involve other MHC staff in the meeting.
- If you feel the issues are not resolved to your satisfaction, you or your representative may submit a written complaint to the Human Services and Public Health Department's (HSPHD) Area Manager. If you need

assistance in writing the complaint, a staff member will help you. You may also request a meeting with the Area Manager.

- It is expected that the preceding steps will resolve complaints, but if you feel that we have not adequately addressed your concerns, you may, at any time, contact a representative from:

Hennepin County Human Services and Public Health Department Office of the Ombudsperson A-1000 Government Center
300 S Sixth Street
Minneapolis, MN 55408
612-348-0239

State of Minnesota Office of the Ombudsman for Mental Health and Developmental Disabilities Metro Square Building
121 Seventh Place East, Suite 420
Saint Paul, MN 55101
651-757-1800
1-800-657-3506

Hennepin County Mental Health Association
2021 East Hennepin Avenue, Suite 412
Minneapolis, MN 55401-1742
612-334-5784

Minnesota Department of Human Services Licensing Division
P.O. Box 64242
St. Paul, MN 55164-0242
651-431-6500

Important numbers

Appointments, referrals and information: 612-596-9438

Fax: 612-329-4500

Nurse Line: 612-543-0577

Other: _____

If you need to leave a message:

- Spell your first and last names
- State your date of birth
- State your phone number
- State the reason for your call

Crisis services

In the case of a life-threatening emergency, call 911.

Hennepin County Cope

24/7/365 mobile crisis response for all ages
612-596-1223

Hennepin County Medical Center's Acute Psychiatric Services (APS)

24/7 Walk-in help for mental health crisis
701 Park Avenue South, Minneapolis 612-873-3161

Notes

Hennepin County Mental Health Center
2215 East Lake Street, 5th floor
Minneapolis, Minnesota 55407
612-596-9438