

LD 1080:

Resolve, Directing the Department of Health and Human Services  
To Update the Rights of Recipients of Mental Health Services  
(Adult ROR)



The Maine Legislature enacted and the Governor signed Legislative Document No. 1080 (Resolves 2021, ch. 132), which directs the Department of Health and Human Services to update the Department's rules about the Rights of Recipients of Mental Health Services for both children (14-472 C.M.R. Ch. 1) and adults (14-193 C.M.R. Ch. 1). The Rights of Recipients are described here.

As part of the Department's efforts to update the Rights of Recipients, it is planning for broad engagement from interested parties via this survey, as well as town hall meetings that are being planned for the second half of 2023. DHHS looks forward to moving this work forward with engagement and input from interested parties.

Instructions:

The current *Rights of Recipients of Mental Health Services*, 14-193 C.M.R. Ch. 1 or Adult Rights of Recipients (Adult ROR) is available via this link. The Adult ROR has three parts (Part A, Part B, and Part C) and each part has several sub-parts.

We are seeking feedback on the rule, organized by its parts. Within each free-text response you may wish to speak to questions such as:

- What elements of this Part or Subpart need to be updated or revised in the updated Rights of Recipients?
- What elements of this Part or Subpart, if any, should be removed in the updated Rights of Recipients?

Within each part, there is also an option to share additional feedback.

Completed forms should be sent to:

Office of Behavioral Health  
Department of Health & Human Services  
Attn: Emily Leighton  
41 Anthony Avenue  
11 SHS, Augusta, ME 04333



OR

[BehavioralHealthRightsOBH@maine.gov](mailto:BehavioralHealthRightsOBH@maine.gov)

**THIS SECTION IS OPTIONAL**

Your Name: \_\_\_\_\_

Your Organization: \_\_\_\_\_

Your Email: \_\_\_\_\_

**Please select the description that most closely corresponds to your perspective or organization.**

- Consumer
- Advocate
- Provider of Mental Health Services
- Health Care System
- Other: \_\_\_\_\_

**Part A: Rules of General Applicability**

Please provide your response in the text boxes below. Please consider the following questions:

- What elements of this Part or Subpart need to be updated or revised in the updated Rights of Recipients?
- What elements of this Part or Subpart, if any, should be removed in the updated Rights of Recipients?
- Any additional feedback you would like to provide

**Least Restrictive Appropriate Setting**



**Part A: Rules of General Applicability**  
*continued*

**Right to Due Process with Regard to Grievances**

**Complaints**



**Part A: Rules of General Applicability**  
*continued*

**Please share any other feedback on Part A**

*Please continue to next page for Part B*

## Part B: Rights in Inpatient and Residential Settings

Please provide your response in the text boxes below. Please consider the following questions:

- What elements of this Part or Subpart need to be updated or revised in the updated Rights of Recipients?
- What elements of this Part or Subpart, if any, should be removed in the updated Rights of Recipients?
- Any additional feedback you would like to provide

### Individualized Treatment and Discharge Plan

### Informed Consent to Treatment

**Part B: Rights in Inpatient and Residential Settings**  
*continued*

**Basic Rights**

**Freedom from Unnecessary Seclusion and Restraint**

**Part B: Rights in Inpatient and Residential Settings**  
*continued*

**Please share any other feedback on Part B**

*Please continue to next page for Part C*

## Part C: Rights in Outpatient Settings

Please provide your response in the text boxes below. Please consider the following questions:

- What elements of this Part or Subpart need to be updated or revised in the updated Rights of Recipients?
- What elements of this Part or Subpart, if any, should be removed in the updated Rights of Recipients?
- Any additional feedback you would like to provide

### Individualized Support Planning Process

### Individualized Treatment or Service Plan



**Part C: Rights in Outpatient Settings**  
*continued*

**Informed Consent to Treatment and/or Services**

**Please share any other feedback on Part C**

**Thank you for your time and feedback!**