



PENINSULA RSN

ADMINISTRATION POLICIES AND PROCEDURES

Policy Name: ADVANCE DIRECTIVES

Policy Number: 2.02

Reference: DSHS Contract, RCW 71.32, and 42 CFR 438.6

Effective Date: 7/2005

Revision Date(s): 7/2009

Approved by: PRSN Executive Board

CROSS REFERENCES

- Policy: Corrective Action Plan
- Policy: Crisis Prevention Plan Standards

PURPOSE

The Peninsula Regional Support Network (PRSN) network providers shall provide information to all adult consumers regarding their right to create an advance directive. Advance Directives shall include and demonstrate an individual's voice in developing the plan(s).

PROCEDURE

1. Information must be provided to enrollees at the time of their enrollment in the mental health system:
 - a. At the time of enrollment all adult persons must receive information regarding:
 - The person's rights regarding advance directives under Washington State law
 - A description of the applicable state law
 - Information regarding the implementation of these rights
2. The network community mental health providers must periodically make persons aware of the option to enter into an advance directive.
3. The network community mental health providers must display educational material regarding advance directives, such as the PRSN Advance Directives

brochure, including rights under the law of the state to any service receipt that requests it.

4. The network community mental health providers must:
 - Assist adult persons who are interested in developing and executing an advance directive
 - Document, in the adult person's clinical record, whether or not the adult person was provided the information and whether an advance directive was executed
 - Not discriminate against an adult person because of his or her decision to execute or not to execute an advance directive
 - Provide a copy of a person's executed advanced directive, or documentation of refusal, to the acute care primary care provider (PCP) for inclusion in the person's medical record.
 - Provide advance directive information to the enrollee's family or surrogate in the same manner that it issues other materials (in accordance with state law) to an individual is incapacitated at the time of initial enrollment and is unable to receive information or unable to articulate whether or not he or she has executed an advance directive.

Ensure follow-up procedures to verify the advance directive information is given to the individual at the appropriate time (i.e. once he or she is no longer incapacitated or unable to receive such information).

- Inform individuals that complaints concerning non-compliance with the advance directive may be filed with the state survey and certification agency.
- Develop an internal agency mechanism for easy identification of clinical records with Advance Directives, such as for crisis response workers.

MONITORING

This policy is mandated by statute and contract.

1. This policy will be monitored through use of PRSN:
 - Annual PRSN Provider and Subcontractor Administrative Review
 - Monthly Provider Crisis Chart Review
 - Biennial Provider Quality Review Team On-site Review.
2. If a provider performs below expected standards during any of the reviews listed above a Corrective Action Plan will be required for PRSN approval. Reference PRSN Corrective Action Plan Policy.