



PENINSULA RSN

ADVOCACY AND SUPPORT PROGRAMS POLICIES AND PROCEDURES

Policy Name: MENTAL HEALTH CARE PROFESSIONAL
ADVOCACY

Policy Number: 13.01

Reference: 42 CFR 438.102, 438.218; DSHS Contract

Effective Date: 2/2002

Revision Date(s): 11/2010

Approved by: PRSN Executive Board

CROSS REFERENCES

- Policy: Complaint, Grievance, Appeal and Fair Hearing General Requirements
- Policy: Corrective Action Plan

PURPOSE

The Peninsula Regional Support Network (PRSN) shall not restrict a health care professional from advising or advocating on behalf of an enrollee.

PROCEDURE

The PRSN shall not prohibit in any way, nor allow PRSN contractors or subcontractors to prohibit health care professionals and/or a network agency from acting within the lawful scope of their practice from communicating, advising or advocating on behalf of an enrollee for any reason.

A community mental health agency, network provider, or mental health care professional, acting on behalf of an individual and with their written consent, may:

- file an appeal on behalf of an enrollee
- file a grievance on behalf of an enrollee
- request a fair hearing on behalf of an enrollee
- act as the individual's authorized representative

MONITORING

This policy is a mandate by statute.

1. This policy will be monitored through use of PRSN:
 - Annual PRSN Provider and Subcontractor Administrative Review
 - Monthly Provider Chart Reviews
 - Exhibit N Report and PRSN Grievance Tracking
 - 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 will be required for PRSN approval. Reference PRSN Corrective Action Plan Policy.



PENINSULA RSN

ADVOCACY AND SUPPORT PROGRAMS POLICIES AND PROCEDURES

Policy Name: OMBUDS SERVICES

Policy Number: 13.02

Reference: WAC 388-865-0250; DSHS Contract

Effective Date: 2/2002

Revision Date(s): 11/2010

Approved by: PRSN Executive Board

CROSS REFERENCES

- Policy: Complaint, Grievance, Appeal and Fair Hearing General Requirements
- Policy: Corrective Action Plan

PURPOSE

It is the policy of the Peninsula Regional Support Network (PRSN) to establish a service responsive to the age and demographic character of the region, and to assist and advocate for consumers with complaints and grievances concerning services, through the establishment of an independent Ombuds Service.

PROCEDURE

1. The independence of the PRSN Ombuds service is assured by contracting for Ombuds Services from an independent contractor. The current contractor is the Kitsap Dispute Resolution Center. This contractor provides Ombuds Services throughout the PRSN region.
2. The position Ombuds person, Mental Health Services will **not** be filled by any person who:
 - a. has been employed by the PRSN or a subcontracted provider in the proceeding two years.
 - b. has a fiduciary tie to any service provider or financial decision making capacity in an organization that raises funds to be used as gifts for support of direct services.

- c. has not satisfactorily passed a Washington State Patrol background check.
 - d. has not received state required training, as determined by the Department, within three months of assuming the Ombuds person position.
 - e. is identified as a Federal Excluded or disbarred person.
3. The PRSN, by specifying in the contract for Ombuds services, encourages and assures the Ombuds will:
- a. Receive consumer, family member, and other interested party complaints and assists in the complaint's resolution with the consumer's consent, at the lowest possible level.
 - b. Meet with consumers, families, advocacy groups and providers to make the Ombuds services known.
 - c. For the purposes of outreach and resolving complaints, have access to consumers, service sites, and records relating to the consumer. The PRSN, network providers, and subcontractors will provide access to records, contingent upon written consent as described by law.
 - d. Intercede and advocate on behalf of consumers and family members, at the consumer's request, in the complaint and grievance process.
 - e. Publicize by brochure and other means, the availability of Ombuds service.
 - f. Outreach to ethnic minority communities, and elderly and child advocates to promote services.
 - g. Investigate and assist in achieving fair resolutions for or on the behalf of consumers which includes making recommendations for additional or different solutions.
 - h. Use his/her best efforts to ensure the complainant is not retaliated against and to ensure anonymity.
 - i. Direct complaints through formal and informal channels, and, with the complainant's consent, offer to assist the complainant throughout the complaint, grievance, appeal, and Fair Hearing processes.
 - j. Consult with those involved in the complaint or grievance, gather and study information on the situation presented, and, whenever possible, resolve differences.
 - k. Recognize that the Ombuds person has no binding authority to make decisions on grievances.
 - l. Encourage volunteer assistance in the Ombuds office, particularly the assistance of consumers or advocates.
 - m. Maintain confidentiality.
 - n. Participate in PRSN Advisory and/or Governing Board meetings no less than quarterly.

- o. Meet with Quality Review Team (QRT) formally and informally on a regular basis.
 - p. Submit monthly complaint (previously referred to as Exhibit N) reports and trends reports quarterly for broad distribution to at least the following stakeholders: PRSN Administrator, Advisory Board, Quality Improvement Committee, Quality Review Team, Local Consumer/Family Advocate Groups, Service area mental health Advisory Boards, Provider Network, and the Mental Health Division.
 - q. Attend ongoing statewide Ombuds trainings, sponsored by the Department.
 - r. Participate in PRSN QUIC quarterly meetings. Report on noticeable trends regionally, or within a provider agency.
4. The Ombuds person will supply the PRSN with a copy of the current program Policies and Procedures.
 5. The Ombuds program will supply the PRSN with a copy of monthly program activity and bi-annual expenditure reports.

MONITORING

This policy is a mandate by contract and statute.

1. This Policy will be monitored through use of PRSN:
 - Annual PRSN Subcontractor Administrative Review
 - Monthly Provider Chart Reviews
 - Exhibit N Report and PRSN Grievance Tracking
 - Biennial Provider Quality Review Team On-site Review
 - Semi-annual Provider Revenue and Expense Report
 - Review of previous Provider Corrective Action Plans related to Age and Cultural Competence policy, including provider profiles related to performance on targeted indicators
2. If a provider performs below expected standards during any of the reviews listed above a Corrective Action will be required for PRSN approval. Reference PRSN Corrective Action Plan Policy.