

**Dispute Resolution Center
Ombuds and Parent Advocacy Programs
PRSN Administrative Review Final Report**

Date: January 24, 2008

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Scoring range: 1-absent, 2-partially developed, 3-evidence of compliance

#	ITEM	SCORE	COMMENTS
1. Administrative Services- Ombuds & Parent Voice			
a	Ombuds and Parent Voice program Information is made available Measure- Review marketing/informational materials.	3	Evidenced by agency brochures, magnets, business cards, NAMI outreach visits, health fairs and continual participation in community-based team meetings with ancillary providers.
b	Comply with PRSN Fraud and Abuse Plan Measure- Review staff training to identify and report possible fraud/abuse.	* 3	Evidenced in agency manual and staff interview. Recommend: Refresher training of Medicare Fraud & Abuse Plan
c	Advanced Directives written information is provided and available (42 CFR 438.6.i.3, PRSN Rights) Measure- Review written information	3	Evidenced by community-based workshops and trainings to assist individuals with executing a Advance Directive. Use "Practical Guide to A.D.s" curriculum. Use of A.D. brochure and laminated cards.
d	Programs comply with all applicable state and federal laws. Measure – Audit contract compliance and review policies and procedures.	3	Policy evidenced in BRIDGES program manual.
e	ADA self-assessment of building completed Measure- ADA self- assessment tool completed	2	Aware of requirements, however no evidence that ADA self-assessment has been conducted. The PRSN will send the Ombuds the ADA assessment form. CAP required.
f	Programs submit required RSN reports in a timely manner. Measure- Submission of monthly activity and Exhibit N reports (Ombuds, only)	* 3	Discussed recent report lags. BRIDGES will re-submit last quarters activity reports for both programs. Recommend: Follow-up using plan to address timely submission.
2. General Services- Ombuds Program:			
a	Maintain confidentiality. Measure- Review Ombuds case records, documentation, and verify ROIs	3	Evidenced by locked files/door, shredder, and minimal information in the field (outreach).
b	Comply with PRSN Grievance Policy Measure- Review staff training records, including statewide trainings. Review records for compliance with PRSN Grievance policy. Protocol for addressing client dissatisfaction with Ombuds services.	3	Staff attended the PRSN Grievance training last year. Staff attend WIMRT trainings (including orientation curriculum) as available. Provided case examples.
c	Remain accessible to consumers, including a toll free phone number. Measure- Verify toll free number and accessible	3	Contact information is well advertised. Evidenced in various marketing material. Program

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			strongly encourages outreach to individuals in the community.
d	Receive and investigate concerns at the request of an individual. Measure- review call log, RIO process, and investigation process	3	Evidenced in call log, documentation of investigation, resolution of cases and staff interviews.
e	Assist in conflict resolution to resolve concerns and complaints at the lowest level. Measure- Ombuds Manual for Investigation and Resolution P&P, review informal complaints process	3	Evidenced in call log and documentation for cases that are settled informally.
f	Assist and advocate for clients and family members in voicing complaints with the provider, PRSN, or MHD. Measure- Review case notes	3	Evidenced by discussions of recent challenging case(s) and review of case records.
g	Actively outreaches to consumers and family members to inform them of services and provide assistance with issues of dissatisfaction. Measure- Review outreach activities	3	Outreaches are noted on monthly Activity Reports. Program strongly encourages outreach to individuals in the community.
h	Coordinates and collaborates with allied system advocacy and Ombuds services to improve the effectiveness of advocacy and to reduce duplication of efforts for shared clients (WAC) Measure- Case example	3	Discussed cases that coordinate/overlap with BRIDGES Parent Voice program, DCFS Ombuds, and Long-term & Aging Ombuds services.
i	Refer matters to mediation, when possible and appropriate. Measure- Review case record that was referred to mediation services.	3	Discussed cases that are referred to mediation. DRC provides mediation services. Some Ombuds staff are certified mediators.
2. General Services- Parent Voice Program:			
a	Actively encourages parent voice within the network service delivery system Measure- Review program org chart	3	Staff facilitate team meetings and participate in the Kitsap Shared resources meetings. Provided case examples.
b	Has a Parent Partner designated to each of the four network service providers. Measure – Review records for Parent Partners	* 3	Current vacancy of Parent Partner positions, program demonstrated creative brain-storming and re-organization to fill the Parent Partner gap(s). Recommend: On-going creative solutions to meet community needs.
c	Establish routine parent support groups	* 3	Evidenced by routine meetings scheduled in Kitsap and Port Angeles areas. Recommend: Establish a routine meeting in Jefferson and Forks, possibly using an established group such as NAMI.
d	Identify and coordinates trainings of interest to parent participants (statewide and local)	* 3	Evidenced by attendance to the statewide Behavioral Healthcare Conference. Recommend: Establishing a process for identifying trainings of interest for parent members.

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e	Increases parent participation in the service system	3	Discussed the minimal interest of current families due to time restraints. Provided a few examples of how parents participate in direct team meetings.
f	Enhances parent voice in the developing community service systems relationships between the schools, juvenile court, and other community partnership coalitions. Measure-	3	Provided a few examples of how the program has participated in the formation of the Kitsap MH court and Kitsap Shared Resources. These are very positive examples/ links to the community.
3. Quality Assurance Activities- Ombuds & Parent Voice			
a	Participate in an on-going PRSN Quality Management process to ensure continued assessment and improvements in system effectiveness.(5.1, 5.1.1, 42 CFR 438.240.a.2) Measure- Review QA/QM activities and outcomes.	3	Evidenced by active participation on QUIC, QRT, agency staff meetings, and established contact with each QA director at the network agencies.
b	Make recommendations to improve the quality of services provided through the network, based on investigation and reporting trends. Measure- Review participation in QUIC and QRT	3	Evidenced by monthly Activity Reports submitted to the PRSN, QRT, and QUIC. Actively reports on programs at the PRSN Advisory Board meetings.
4. Enrollee Rights- Ombuds			
a	Posted general enrollee rights in all prevalent languages. Measure- Has rights available in prevalent languages.	3	Evidenced in office @ DRC and available to reference on-site at the CMHAs.
b	Ombuds is aware of client rights regarding a second opinion. Measure- Staff interview	3	Evidenced by staff interview. Discussed how concern with diagnosis is the most common reason to request a second opinion.
c	Ombuds is aware of a client's rights regarding choice and change of providers. Measure- Staff interview	2.5	Evidenced by staff interview- staff missed complete answer to question ("at any time for any reason") CAP required.
5. Utilization and Resource Management- Ombuds & Parent Voice			
a	Demonstrate understanding of authorization requirements and process. Measure- Through staff interview	* 3	Evidenced by reference to PRSN Manual- LOC. Recommend: Refresher training by PRSN of LOC documents and authorization process.
b	Demonstrate knowledge of appeal process for clients when services have been denied or reduced. Measure- Through staff interview.	2	Evidenced by discussion- staff unfamiliar with appeal process. CAP required.
c	Demonstrate ability to identify if utilization management activities are structured so as to provide incentives for any individual or entity to deny, limit, or discontinue medically necessary mental health services to any consumer. (3.10.) Measure- Protocol to identify, inform client and advocate, with permission, on their behalf.	NA	

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6. Personnel- Ombuds & Parent Voice			
a	Ensure number of qualified staff to provide age and culturally appropriate services. Measure - Review monthly activity reports for both programs.	* 3	Current program staff: 2 Ombuds (each are .5 FTE) 1 office supervisor 1 Parent Voice mentor (contractor) Recommend: Cultural diversity training for working with ethnic groups/ families
b	Ombuds staff have not been employed by a service provider two years previous to hire, unless with MHD approval Measure – Personnel records.	3	Evidenced in personnel records
c	Neither employ or contract with person excluded from participation in Federal Health Care programs, including WSP background check. (2.3.6.1) Measure- Federal website and WSP verification documentation in all personnel files.	* 3	Website printouts evidenced with Ombuds staff, missing for office supervisor and PV Mentor. Recommend: Completing website checks for all staff.
d	Review of agency employee files for supervision, training, and/or evaluation plans Measure- Review all personnel files for evidence of training (state sponsored ,ect) documents, evaluation plans, and supervision logs.	2	Evidenced in review of personnel records. Documented some trainings attended, missing individualized training and evaluation plans. CAP required.
e	Review of Exit Interviews from recently departed staff (within the past 12 months) Measure- Review Exit Interviews if applicable.	2	No formalized exit interview process for departing staff. Program turn-over within the past year. CAP required.
f	Signed statements are maintained on file acknowledging understanding and agreement to abide by HIPAA requirements. Measure – Review all personnel files	* 3	Evidenced in personnel records. Recommend: an annual refresher of HIPAA requirements (possibly on-line or by PRSN HIPAA officer)
g	Agency staff have received HIPPA training. New staff receive training within 30 days of start date. Measure – Personnel files, training records.	NA	
h	Staff regularly attend state wide bi-annual meetings. Measure – Personnel files, training records.	3	Evidenced by attendance to WIMRT trainings.
i	Staff interviews (see staff interview questions) Measure- Conduct Staff interviews	3	See below

PRSN staff follow-up:

- send ADA self-assessment form(s) to BRIDGES
- send MHD Compliance Hotline brochures to BRIDGES
- PRSN training to LOC, including appeal process
- research possible PRSN refresher training for HIPAA
- joining already scheduled PRSN regional DBT trainings

Staff Interview Questions

Staff interviewed: All, collectively. Recorded answers are indicated in **bold**.

1. **True** or False.
An individual can request a Fair Hearing, prior to exhausting the local Grievance process.
2. Do you know how to access Interpreters/ Hearing Impaired services, if they were needed for a client requesting your services? **Yes, provide the following examples: ATT language line, ParaTransit, OC, WA Relay and email options**
3. **True** or False.
A client with special health care needs shall have unencumbered access to a MHP.
4. If a client or family member requested a second opinion, what are the next steps?
Not clearly understood for requests following a 'not authorized' following the assessment
5. If a client requested a change of providers, what are the guidelines (timeframes) listed on the PRSN Client Rights form?
Not clearly known.
6. Are you aware of your roles, responsibilities, and communication channels when you are concerned of agency or staff Medicaid Fraud and Abuse?
Call PRSN. PRSN will provide MHD Hotline brochure
7. Please give an example of when you had the opportunity to advocate for a client so that they were not denied, limited, or discontinued medically necessary mental health services?
Not clearly known.
8. Please explain the Ombuds role in the appeal process for a client who's mental health services have been denied or reduced. **Discussed how Ombuds may advocate to CMHA and CommCare**
9. From your perspective, what are the top three mental health service delivery issues most commonly addressed through the Ombuds program?
 1. **communication with staff/ service coordination with ancillary**
 2. **crisis services (not enough)**
 3. **client education on illness/ system**
 4. **lack of housing**

Through the Parent Voice Program?

 1. **lack of respite**
 2. **education**
10. Please provide the PRSN feedback about how our office could assist in the quality improvement of services provided through the Ombuds and Parent Voice programs?
Allow BRIDGES to attend regional trainings