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## North Sound Mental Health Administration

Section 4500 – Consumer Affairs: Ombuds Services

Authorizing Source:

Cancels:

See Also:

Responsible Staff: Ombuds Lead

Executive Director Signature:

Approved by: Board of Directors Date: 7/14/2005

Motion #05-046

Date: 5/15/2007

### **POLICY #4516.00**

#### **SUBJECT: OMBUDS SERVICES**

#### **PURPOSE**

The North Sound Mental Health Administration ("NSMHA") sets out this policy governing the provision of Ombuds services.

#### **POLICY**

##### **North Sound Mental Health Administration (NSMHA) Ombuds Mission**

The Ombuds mission is to:

1. Receive and investigate client, family member and other interested party complaints, grievances and appeals. Be available to investigate, advocate for, and assist clients through complaints, grievances, fair hearings and appeals. Assist clients in pursuing formal resolution of their issues.
2. Respond to clients as advocates with empathy, respect, dignity and professionalism. Treat all equally and with cultural sensitivity. Give clients a voice. Investigate complaints and attempt to resolve them at the lowest level.
3. Educate and empower clients to solve problems by teaching them their rights and options in public mental health laws, mental health resources, and the public mental health system.
4. Work with service provider agencies and NSMHA to achieve complaint resolutions and empower clients to manage their own advocacy. Conduct an outreach program to advertise Ombuds services in a wide array of organizations and settings.
5. Provide regular reports, at least annually, to the NSMHA Board of Directors, Advisory Board and quality management committees to emphasize client issues and concerns.

##### **Administrative Responsibilities**

Ombuds administrative responsibilities include:

1. Stay current on knowledge of the RCWs, WA Cs, contracts, clinical eligibility and care standards and similar documents that provide the legal basis of providers' obligations and clients' rights.
2. Maintain client case files and database of clients to include a list of archived files in storage.
3. Complete and maintain written authorization forms in accordance with Health Insurance Portability and Accountability Act (HIPAA) requirements.

4. Attend meetings (advocating for clients) of the NSMHA Advisory Board and Board of Directors. Sit on the Internal Quality Management Committee (IQMC), Quality Management Oversight Committee, (QMOC), Critical Incident Review Committee (CIRC), and other committees as appropriate. Prepare data and documents for these boards and committees as necessary.
5. Present regular Ombuds statistics reports to the IQMC, Quality Management Committee, QMOC, Advisory Board and Board of Directors. Submit copies to the Mental Health Division and local advocacy organizations.
6. Submit statistics and analysis reports, including formalized recommendations, to the NSMHA for its semi-annual Complaints, Grievances and Fair Hearings Report.
7. Order outreach publications and materials (pens, pocket calendars) toward the end of the year. Coordinate with NSMHA financial representatives. Work with the OCA coordinator to republish the NSMHA brochure when updates are necessary. Work with NSMHA administrative staff to ensure brochure supplies are available and copies of the brochure are sent to all NSMHA providers and local advocacy organizations.

### **Authority of Ombuds**

WAC 388-865, paragraphs 0250 and 0255 outline Ombuds services and the Consumer Grievance Process. The WAC prescribes authority for Ombuds services and levies responsibilities on the NSMHA to support Ombuds. Additionally, Attachments XIII and XV, Associated Provider Network Contract, deal with Ombuds issues.

Ombuds has the authority to access provider service sites and consumer records as necessary if written authorization is obtained from the client.

*Ombuds attempt to resolve issues at the lowest possible level. Normally, this will be a complaint resolved at the provider level. If acceptable resolution can't be reached, Ombuds will usually file a provider level grievance, followed by an RSN level grievance if necessary.*

FUNCTIONAL INDEPENDENCE, ANTI-RETALIATION AND DISPUTE RESOLUTION

### **Functional Independence**

Ombuds are functionally independent from the NSMHA, in accordance with NSMHA Policy 4504, Functional Independence. Additionally, Ombuds are entirely independent from public mental health service providers. The policy enables Ombuds to perform their duties with functional independence and without fear of retaliation. The policy provides definition to functional independence and establishes the parameters of responsibilities for all concerned.

### **Anti-Retaliation Policy**

NSMHA Policy 4502 sets forth anti-retaliation guidance.

### **Dispute Resolution Process**

*If there is a dispute with the NSMHA, Attachment XV of the Associated Provider Network Contract describes the Dispute Resolution Process.*

### **DUTY TO REPORT-DUTY TO WARN**

Ombuds must "report and warn" to protect the health, safety and well-being of clients and associates.

If a client makes a statement regarding harm to self or others, the following procedure applies:

1. Reality test the statement. If it meets the test, inform the client that you will report it.
2. Determine who to report it to. Consult with the Ombuds supervisor if necessary.
3. Report it and debrief the supervisor.

Clearly document any incidence of abuse or suspected abuse, neglect, or exploitation. Report such situations to the appropriate authorities responsible for investigating them, such as the Health Department or DSHS Adult or Child Protective Services. Inform the client that outside assistance is being sought. The timing and detail of such notice needs to be sensitive to the condition and needs of the client.

### **OMBUDS ETHICS POLICY**

This policy is designed to define ethical behavior expected of Ombuds, particularly as those behaviors relate to interaction with Ombuds clients. It is intended to support RCW ethical standards.

These standards seek to meet expectations of public opinion and expectation. They do not attempt to exhaust the moral and ethical values that guide Ombuds actions. They help create a working environment that promotes honesty and integrity in providing professional Ombuds services.

1. Ombuds will treat every client fairly, equally and with courtesy and respect. Ombuds won't discriminate by dispensing special favors or privileges to anyone for any reason.
2. Ombuds will avoid the appearance of improper influence and refrain from receiving, soliciting or accepting gifts, gratuities or anything of value. Ombuds will not accept favors or special benefits. Ombuds will not accept gifts or items of value from clients except for official donations made to the NSMHA. In some cases, to refuse a gift will greatly offend the client. In these cases, Ombuds should thank the client graciously but make it clear that gifts present an awkward situation for Ombuds, and gifts will be turned over to the NSMHA for use within the public mental health program.
3. Ombuds won't attempt to influence others in the performance of their duties in any inappropriate or improper ways.
4. Ombuds won't use NSMHA property for private purposes or purposes other than those authorized or permissible.
5. Ombuds won't use NSMHA resources for political purposes or to influence the outcome of a ballot election or initiative. This prohibition includes political party activities, campaigning, distribution or display of campaign material, and fund raising. On their own time, Ombuds members have constitutional rights to engage in partisan political activities.

6. Ombuds won't intentionally act outside the scope of their authority, nor allow such perception.
7. Ombuds will provide services within the scope of the Ombuds program and will refer clients in need of other assistance to appropriate agencies. Ombuds won't do favors for a client beyond the scope of Ombuds services.
8. Ombuds' friends or family will not perform services for clients, even if done voluntarily, without prior approval of Ombuds' supervisor.
9. Ombuds won't serve as guardians, protective payees, or powers of attorney for clients receiving Ombuds services unless an exception is obtained from the Executive Director.
10. Ombuds won't falsify client financial or eligibility status in order to obtain needed services.
11. Ombuds will respect the privacy of clients by refraining from contacting them except for legitimate Ombuds responsibilities.
12. Ombuds won't use obscene, profane, disrespectful or inappropriate language or behavior in the presence of clients.
13. Ombuds won't withhold services or referrals until a client renders a favor or reimburses for the service or referral.
14. Ombuds will advise clients about financial obligations the client may incur as a result of dealing "with a particular service provider.
15. Any time Ombuds handle a client's money or property they will sign a receipt for the financial amount or value of property handled, document the nature of the transaction and have the client sign it. Retain documentation in the client's record and give a copy to the client.
16. If a potential conflict of interest exists between Ombuds and a client, or if a client is a friend, associate or relative of an Ombuds, the other Ombuds will represent that client.
17. Ombuds won't engage in any financial transactions with former or current clients such as real estate, insurance or investment.
18. Ombuds won't ask a client to purchase any item or service belonging to or sold by Ombuds.
19. Ombuds won't receive remuneration in any manner from any source for a client referral.
20. Ombuds won't use any information obtained in the course of employment for personal gain.
21. Ombuds won't seek co-employment from a service provider.
22. Ombuds won't give legal or medical advice or perform case management or therapy.
23. Ombuds won't transport clients in their personal vehicles.
24. Ombuds won't host clients when meeting them in restaurants.
25. Ombuds won't meet in consumer's homes except when the client can't leave their home. In that case, the Ombuds Safety regulations below apply.
26. Ombuds won't ever be "friends" with clients.

## **COMMUNITY OUTREACH**

All mental health consumers with open coupons are eligible for Ombuds set-vices whether they are currently receiving services, eligible for services, or appealing denied set-vices. Ombuds will maintain a toll-free, independent phone line for consumers to reach them confidentially. Ombuds will respond to letters, faxes, emails (although not back through the email system due to confidentiality), referrals, personal visits and any other way consumers may make contact. All eligible consumers requesting Ombuds set-vices will receive services without concern for age or demographics of the consumer. Ombuds will equally represent children, adults and seniors of all race, religion and sexual preference.

Through outreach, Ombuds makes its set-vices more visible and accessible to consumers, family members and the community. Ombuds uses NSMHA resources as well as those of the community to identify and reach consumers. A specific outreach plan keeps Ombuds outreach activities on target.

Collaboration with other organizations results in mutually beneficial advocacy partnerships. Ombuds will work collaboratively with such organizations as community assistance agencies, jails, chemical dependency organizations, Long-Term Care and Division of Children and Family Services Ombuds, Division of Developmental Disabilities, NAMI, seniors' organizations, hospitals and Tribes to reduce duplication of effort and enhance mental health set-vices, advocacy and recovery.

Distribute posters, business cards, handouts, flyers, brochures, pens, calendars and anything else available pertinent and helpful, to set-vice providers, residences, support programs, crisis centers, evaluation and treatment centers, and other mental health-oriented organizations.

Make Ombuds presentations at consumer/ family advocacy groups and consumer support groups.

## **OMBUDS SAFETY**

Ombuds meet clients in public places unless the client is housebound. If a home meeting must take place, these safeguards will be followed:

1. When possible, two Ombuds should attend a home meeting.
2. Inform Ombuds' supervisor and the NSMHA Administration receptionist prior to the meeting.
3. Put the client's name and address in a sealed envelope and leave it with the receptionist.
4. Contact the receptionist at the conclusion of the meeting.
5. Destroy the sealed envelope upon returning to the office.

## **ASKING DEMOGRAPHICS QUESTIONS**

When doing an intake, Ombuds need to collect demographic information. The questions regarding ethnicity and sexual orientation may best be asked in a manner such as this:

"In an effort to ensure that you receive the best possible care, the goal of our agency is to offer services tailored to your specific needs. This includes services appropriate to your culture and personal understanding of your sexuality. Your answers are optional. Please let me know if you are uncomfortable answering any questions and I will move on. Is your ethnic background \_\_\_ (give choices). Do you identify yourself as \_\_\_ (offer sexual preferences)?"

## **CONFIDENTIALITY**

Confidentiality is an extremely important issue to Ombuds. Clients and their files must receive confidentiality at all times. File storage cabinets will remain locked when not in use.

Any time Ombuds needs to discuss a specific consumer's situation with someone outside Ombuds, a signed written authorization needs to be obtained. Use the NSMHA written authorization form, officially titled "Authorization to Receive and/ or Release Information," to obtain clients' permission to speak with pertinent people or agencies. Ombuds will normally involve other persons at the client's request if they are on the written authorization form. Clients must complete and sign the form.

Ombuds must be entirely familiar with the NSMHA HIP AA Training Manual and NSMHA privacy policies and procedures. These cover mandatory confidentiality requirements.

Ombuds will not inappropriately disclose any client information obtained during Ombuds employment. Ombuds may, with written NSMHA approval, disclose information for research, statistical, monitoring, and evaluation purposes conducted by appropriate federal agencies and DSHS.

## **FILES AND DOCUMENTATION**

Client files will be kept in the following manner:

1. Labels will consist of last name and first name.
2. The client's written information form is filed on the inner front left cover.
3. Progress notes are placed on the inner right side in chronological order.
4. On the left back page, place correspondence and documentation pertaining to the case.
5. On the right back page place complaint and resolution documentation.

Current files are stored in the Ombuds office. Prior year files are stored at InfoCare, the NSMHA records storage facility in Bellingham. Ombuds' Department files have names of archived files.

To initiate an Ombuds case, normally a written authorization form will be mailed or faxed to clients with a cover letter explaining why the form is necessary. Copies of letters sent to anyone on the client's behalf will usually be sent to the client as well. At the conclusion of an Ombuds case, a closing letter will usually be sent along with an Ombuds Client Satisfaction Survey. The surveys are to remain anonymous. When a completed survey returns, it will be filed in the current year Ombuds Audit Book.

**ATTACHMENTS**

None