

CHELAN-DOUGLAS RSN/PIHP POLICY AND PROCEDURE MANUAL		Chapter:	1.5
Title:	INTRODUCTION AND ADMINISTRATIVE POLICIES	Page:	1 of 5
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AUTHORITY: Chelan-Douglas Regional Support Network/Prepaid Inpatient Health Plan Contracts
 CDRSN/PIHP Task Forces
 Mental Health Division Value Statements and Strategic Plan
 WAC 388-865-0200, Regional Support Networks
 WAC 388-865-0220, Standards for Administration

SCOPE: This policy applies to Chelan-Douglas Regional Support Network/Prepaid Inpatient Health Plan (CDRSN/PIHP) and its contractors (agencies/providers), and subcontractors (referred to as contractors or agencies or providers throughout this policy).

PURPOSE: These principles define what the CDRSN/PIHP community mental health system ought to be and what participants in the system need to do to make it so.

DEFINITIONS: Medically Necessary Services. As defined in the State Medicaid Contract, are those services which are reasonably calculated to prevent, diagnose, correct, cure, alleviate or prevent the worsening of conditions in the consumer that endanger life, or cause suffering or pain, or result in illness or infirmity, or threaten to cause or aggravate a handicap, or cause physical deformity or malfunction, and there is no other equally effective, more conservative or substantially less costly course of treatment available or suitable for the consumer requesting services. For purposes of this definition, "course of treatment" may include mere observation or, where appropriate, no treatment at all.

POLICY: The goal of CDRSN/PIHP is to deliver medically necessary, timely support to each individual experiencing a mental disorder in order to assist each in achieving and maintaining, to the maximum extent possible, a respected and productive standing in the community. In order to promote this goal, CDRSN/PIHP and its contractors shall be:

- A. Administratively Consumer Oriented
 1. Demonstrate meeting the requirements of chapter 71.05, 71.24, and 71.34 RCW, and ensure the effectiveness and cost

effectiveness of community mental health services in an age and culturally competent manner.

2. The CDRSN/PIHP shall establish a governing board that includes, where applicable, representation from tribal authorities, consistent with RCW 71.24.300.
3. Ensure the protection of consumer and family rights as described in WAC 388.865, and chapter 71.05 and 71.34 RCW.
4. Collaborate with and make reasonable efforts to obtain and use resources in the community to maximize services to clients.
5. Educate the community regarding mental illness to diminish stigma.
6. Develop publicized forums in which to discuss and include input about service needs and priorities from community stakeholders, including:
 - i. Clients (Consumers);
 - ii. Client family members and advocates;
 - iii. Culturally diverse communities including clients who have limited English proficiency;
 - iv. Social service agencies;
 - v. Organizations representing persons with a disability;
 - vi. Tribal authorities;
 - vii. Underserved groups, and
 - viii. For the CDRSN/PIHP, its service providers.
7. Maintain job descriptions for staff with qualifications for each position with education, experience, or skills relevant to job requirements.
8. Provide orientation and ongoing training to staff in the skills pertinent to the position and the treatment population, including age and culturally competent consultation with clients, families, and community members.
9. Identify trends and address service gaps.
10. The CDRSN/PIHP must provide an updated biennially to the MHD for approval consistent with the provisions of RCW 71.24.300(1)

B. Consumer Focused

1. The CDRSN/PIHP is responsive to the unique cultural and developmental needs and characteristics of each consumer served; this includes children, adults, and elders, as well as the consumer's family/support network.
2. The CDRSN/PIHP strives for consumer satisfaction throughout their involvement in services.
3. Consumer empowerment and self determination are promoted through maximizing the consumer's and the family/support network's partnership in the planning, evaluation, and provision of individual and CDRSN/PIHP services.

4. Each consumer has a right to advocacy.
5. Each consumer and family has a right to information about their mental disorder and its management.

C. Holistic/Humanitarian

1. Each consumer is understood and treated as a whole person.
2. Each consumer has a right to a safe and stable environment with long-term commitment by caring adults.
3. The CDRSN/PIHP endeavors to preserve the family/support network, as defined by the consumer.
4. The CDRSN/PIHP, in addition to having primary responsibility for mental health treatment, actively and creatively shares responsibility with other community resources to meet the needs of consumers across all life domains.
5. The CDRSN/PIHP recognizes and protects the consumer's right to confidential, voluntary, and safe services.
6. The CDRSN/PIHP acknowledges and builds on the strengths of the consumer and their family/support network.

D. Accessible

1. The CDRSN/PIHP promotes accessibility for individuals of all ages and overcomes barriers to service by being knowledgeable and sensitive to the unique needs created by physical, cultural, psychological, educational, linguistic, economic, geographic, and administrative factors.
2. The CDRSN/PIHP is responsible for providing information and education as to how to access all mental health services.
3. The CDRSN/PIHP assures that outreach and transportation are available as integral components of mental health access services.

E. Normalizing/Non-Stigmatizing

1. The CDRSN/PIHP promotes the community's acceptance of individuals with a mental disorder.
2. The CDRSN/PIHP maximizes the potential of each consumer to maintain a residence in the community of choice.
3. The CDRSN/PIHP assists and facilitates each consumer in being involved in meaningful activity in the community of choice.
4. The CDRSN/PIHP actively promotes alternatives, but acknowledges that involuntary intervention is needed for some people at some times.

F. Responsive

1. The CDRSN/PIHP is committed to assisting consumers in a respectful and trustworthy manner.

2. The CDRSN/PIHP recognizes that needs change; and it promotes flexibility and adaptiveness in tailoring services to fit changing consumer needs.
3. The CDRSN/PIHP is committed to offering consumers individualized services to match the level of need of each individual consumer across domains.
4. The CDRSN/PIHP is flexible and reaches the consumer and family/support network at the time and place of need.
5. The CDRSN/PIHP intervenes at the earliest juncture, prior to a situation becoming extreme.
6. The CDRSN/PIHP maximizes the use of the family/support network and other natural supports of the consumer.
7. The CDRSN/PIHP's services occur in the consumer's own environment, in the most natural and least intrusive setting (e.g., home, schools, community), whenever possible.

G. Effectively Managed

1. The CDRSN/PIHP's staff are well trained in mental disorder treatment issues.
2. The CDRSN/PIHP maintains a diversity of staff which is representative of the community, and it promotes the recruitment and maintenance of specialists.
3. The CDRSN/PIHP recognizes that quality service is dependent on recruiting and maintaining quality staff.
4. The CDRSN/PIHP effectively and creatively monitors, evaluates, and modifies itself.
5. The CDRSN/PIHP develops standards of care, assures consistent resource availability throughout the Counties, and establishes a quality assurance improvement process which reviews care on an ongoing basis for appropriateness, quality, and consumer satisfaction.
6. The CDRSN/PIHP collects information in order to enhance services and measure outcomes.
7. The CDRSN/PIHP develops partnerships and incentives for cooperation with other service systems in order to ensure clear and accurate communication, collaboration, coordination, and resource sharing.
8. The CDRSN/PIHP honors confidentiality and exchanges information only to the extent that information is needed to provide the services.
9. The CDRSN/PIHP assures the proportionate distribution of resources to underserved populations and identifies and addresses funding gaps; maximum positive use is made of public and private resources; and administrative costs are managed commensurate with assuring implementation of these principles.

10. The CDRSN/PIHP holds itself accountable to assure that these principles are primary in the development and maintenance of all parts of the system.

SEE ALSO: All other policies in this manual.
Glossary of Terms and Acronyms