

CHELAN-DOUGLAS RSN/PIHP POLICY AND PROCEDURE MANUAL		Chapter:	2.6
Title:	MANAGED CARE SERVICES	Page:	1 of 2
		Date Effective:	July 1, 2002
Subject:	RISK ASESSEMENT and SAFETY/PREVENTION PLANS	Date Revised:	June 25, 2011
		Authorizing Signature:	

AUTHORITY: Guiding Principle(s): Consumer Focused, Responsive, Effectively Managed
WAC 388-865-0230, Community Support Services
WAC 388-865-0430, Clinical Record
RCW 71.24, Community Mental Health Services Act
RCW, 71.05 Mental Illness
RCW, 71.34 Mental Health Services for Minors

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: To assure that planning is implemented to address risks identified at intake, subsequent assessments, and throughout the course of treatment. Planning should include the opportunity to intervene at the earliest indication of crisis in order to serve the individual in the least restrictive setting and in accordance with their wishes.

POLICY: Every enrollee should be offered the opportunity to complete a Safety/Prevention Plan and Psychiatric Advance Directive. A Safety/Prevention plan shall be developed with an individual indicating a history in the past 180 days of homicidal ideation, assault, threats of harm, suicide attempts, suicidal ideation, self harm gestures, self neglect/grave disability, property damage, arson/unsafe fire behavior, loss of residence due to mental health symptoms, or arrest due to mental health symptoms.

PROCEDURE:

1. If the consumer reports the risks cited above have been in the past 180 days the plan shall be started at assessment and completed no later than the first routine appointment.
2. The assessing clinician will enter the risk management information into screens 1-3 of the Avatar Crisis Plan. The final

screen is templated (see attachment) to provide a Safety/Prevention Plan that can be printed separately for distribution to the consumer or those support persons of their choosing. Every attempt should be made to encourage thorough completion of this screen. If one or all items are declined by the consumer note this in the field.

3. If the consumer reports current intent or significant ideation regarding the risks cited above they will be referred immediately to the DMHP for evaluation. The Safety/Prevention plan will be completed or updated at the first appointment following resolution of the crisis.
4. Safety/Prevention Plans shall include and reflect consumer voice as well as input from relevant family and/or other involved service organizations.
5. Safety/Prevention Plans shall include preventive and progressive measures to prevent or divert a crisis, address the health and safety needs of the consumer and family, be written using consumer voice, in a language he or she can understand, and include roles and responsibilities for implementing interventions designated in the plan.
6. Consumers enrolled with the Division of Developmental Disabilities shall have Cross System Crisis Plans coordinated and completed with DDD.
7. DMHPs in the course of evaluation and crisis intervention, shall access the Safety/Prevention plan.
8. The plan shall be reviewed and updated if needed every 180 days at a minimum. This shall be documented on the 180 day note. The plan need not be recreated unless changes are made.
9. CDRSN/PIHP will monitor compliance with this policy through reviews of chart contents and DMHP access of MSO crisis plan screens in Avatar.