

# Aging and Long Term Support Administration

## Home and Community Services Guardianship Pilot Project



### HCS Guardianship Pilot Project Overview

Implemented in July 2022, the HCS Guardianship Pilot Project is a state funded project with limited slot availability for clients meeting specific criteria. The HCS Guardianship Pilot Project is designed to assist Acute Care Hospitals (ACH) in the identification of proposed guardians/conservators for a subset of eligible and presumed eligible clients needing a decision maker to access long-term care services and supports (LTSS).

The HCS Guardianship Pilot Program is designed as a collaborative process wherein DSHS HCS works in tandem with ACHs to assist them with the identification of a proposed guardian/conservator while the Hospital remains the petitioning party to the guardianship/ conservatorship motion. Only in limited situations, HCS may serve as the petitioning party.

### PILOT STATISTICS

As of June 30, 2023, the pilot has received 126 referrals statewide which has resulted in 83 approved for the pilot project. Of the approved cases:

- 23 have been removed for reasons including client death, client capacity restoration, or execution of DPOA or less restrictive alternative arrangement.
- 60 cases are currently active on the pilot.
- 40 clients have had a contracted guardian or conservator appointed by the court .
- Even with extensive monitoring, the average timeframe from time of acceptance onto the HCS Guardianship Pilot Project to time of final guardian or conservator court appointment is 3.2 months.



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***64% of all referred individuals have been determined to meet eligibility criteria and have been accepted into the pilot. Of the accepted and retained clients, 81.6% of cases have successfully had a guardian appointment to date.***

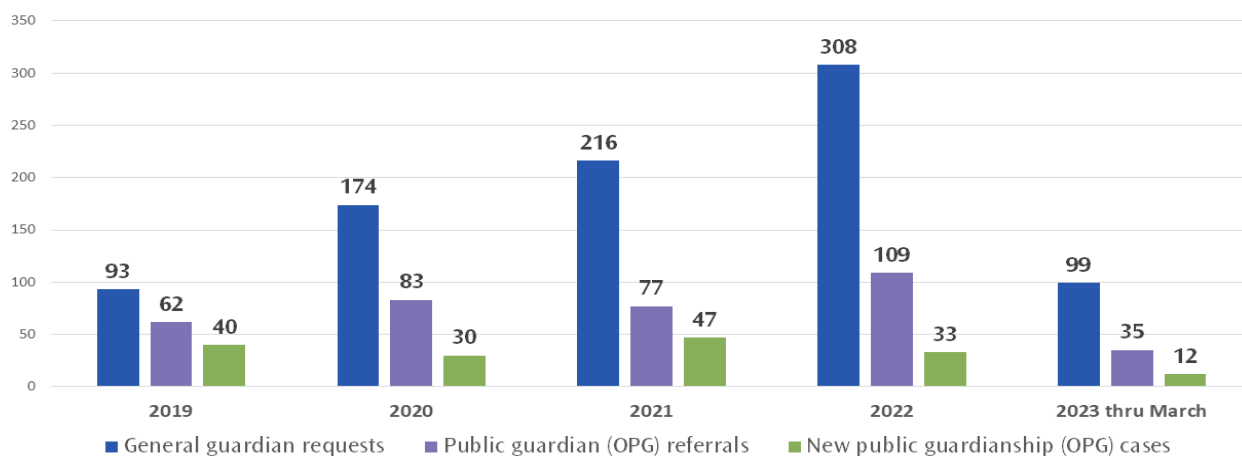
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## Hospital Transitions & DSHS: Guardianship Pilot Lessons Learned and Ongoing Needs

### Since implementation of the pilot we have seen:

- The vast majority of individuals with cognitive deficits are able to make decisions to self-direct their care or are able to identify a decision maker of other means to assist them.
- Improved utilization of the established ListServ referral process managed by the Office of Public Guardians & Conservator.
- Improved education and communication between DSHS ALISA HCS and Hospitals.
- Established lessons learned and next steps for continuous Pilot improvement.

### *Referrals to Office of Public Guardians and Conservators, 2019 -March 2023*



While a success, the pilot has highlighted where additional work could be done to better serve all clients in hospitals who are deemed non-decisional:

- **Make emergency guardianship more accessible to hospitalized individuals.**
  - Explore closing gap in emergency guardianship statute that keeps individuals in hospitals from accessing emergency guardianship provisions to help them transition.
- **There are not enough public and professional guardians to meet demand.**
  - Expand the Office of Public Guardians and recruit more public and professional guardians into service.
- **Pay for additional types of decision making support for individuals.**
  - Expand supported decision making to allow qualified individuals to be paid to provide decision making support.