Washington State Department of Social & Health Services
Transforming lives

Home and Community Services

# Decision Making for Transition Planning

*Individuals that hospitals deem non-decisional can often still consent to HCS services.*

## Person Centered

The Department of Social and Health Services (DSHS), Home and Community Services (HCS) assists individuals who are eligible for Medicaid funded long-term services and supports by creating an individualized care plan to support the transition.

In all processes, the client is the primary source of information and has the option to identify individuals that they want to assist in the planning and decision-making process including spouses, family and friends. In the infrequent scenario that a client cannot participate in their planning, or identify someone they want to assist, HCS looks to the next options available to assist the client.

In situations where the individual has been deemed unable to make medical decisions, it may not impact their residual decision making and ability to identify an authorized representative to assist them with service and transition planning or to execute a Durable Power of Attorney (DPOA).

*Although a DPOA is not always necessary, a DPOA can be beneficial in terms of assisting in the benefits application, functional assessment and service planning, as well as accessing financial records that are needed to determine eligibility. Providers may look to a DPOA to facilitate monthly payments for room and board and services or to inform on-going service planning and delivery of care.*

## When an individual is unable to participate in planning, HCS has additional resources to support the process:

1. Established escalation process to staff with Assistant Attorney General to explore options if there are questions regarding client's ability to participate in the process.
2. Effective 7.1.2022 HCS ability to utilize the Certified Professional Guardian and Conservator Pilot for a limited number of individuals who lack the ability to participate and qualify based on:
    c. Lack of decisional making capacity related to dementia, Traumatic Brain Injury or stroke;
    d. Eligibility for HCS services; and
    e. Currently hospitalized in an acute care hospital.

## HCS works with individuals in need of long-term services and supports to:


## HCS Supporting Transition of Individuals Out of Hospitals

A 60-year-old individual was admitted to an Eastern WA hospital in 2022. The hospital referred him to HCS for long-term care residential services. Medical records and staff at the hospital considered him non-decisional for medical purposes and assumed he would need guardianship to transition to long-term care. This individual did not have a Power of Attorney in place although he had a sister and an 18-year-old daughter.

When the HCS case manager met with the individual, he did have capacity to inform the HCS case manager that he wanted his sister to assist with HCS service planning, and appointed her as his representative, at the same time he informed the case manager that he would sign the consent form for HCS services. With these client instructions, HCS was able to work with client, his sister, and hospital staff to successfully transition this client to an Adult Family Home.