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TEXAS DEPARTMENT OF STATE HEALTH SERVICES

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Broadcast #217

October 13, 2015

TO: Superintendents, State Mental Health Facilities
Executive Directors/ CEOs, Local Mental Health Authorities

FROM: Peggy W. Perry *PWP*
Hospital Service Section Director, Mental Health Substance Abuse
Department of State Health Services (DSHS)

Subject: Guardianship Fields in Clinician Work Station (CWS)

The 84th Regular Legislature appropriated \$2.47 million in General Revenue to DSHS over the course of the 2016-2017 biennium to create a guardianship program to provide supported decision-making/guardianship services to patients in the state hospitals who lack capacity and cannot be discharged and transitioned to more appropriate community settings.

The appropriated amount will provide funding for guardianship specialists who will screen individuals in need of a guardian and coordinate with the courts and community providers to transition individuals and to contract for guardianship services with individuals and agencies in the community. The guardianship specialists will be located at various state hospitals, but will report to central office.

DSHS has developed and activated fields in the state hospitals' CWS which will allow a treatment team to indicate a patient's need for a guardian. One field can be found on the social assessment screen. The other is located on the client recovery plan screen. By marking the *patient needs a guardian* fields in CWS, a treatment team refers a patient in need of guardianship services to guardianship specialists who will be housed at the state hospitals.

The patient's treatment team will make referrals to the guardianship specialists through the CWS fields. The guardianship specialist will assess whether the individual is appropriate for lower level decision making support (power of attorney, directive to physician, declaration for mental health treatment, payee) or a guardianship. If the individual is appropriate for a guardianship, the guardianship specialist will work with the treating physician to determine the nature and degree of the incapacity for the individual who needs a guardians and the program attorney, the court coordinators, investigators, and judges to begin the process of guardianship. The specialist will provide the initial application to the guardianship services contractor in the patient's county of residence (this is not necessarily where the state hospital is located). Once the court has issued an order for guardianship, the guardianship contractor will then have the power to make medical and housing decisions for the patient. The guardianship specialist will have to work closely with the treatment team and the local mental health authority to identify community housing

**Guardianship Need Field in the Barriers to Discharge Section in the Mental Health Client Recovery Plan
Screen**

arrangements and outpatient treatment services post discharge.

Screen captures of both fields are attached to this broadcast message. If you have any questions regarding this broadcast message, you can contact Nnenna Ezekoye at nnenna.ezekoye@dshs.state.tx.us.

**cc: Lauren Lacefield Lewis
Trina Ita**

Guardianship Fields in the Mental Health Social Assessment Screen

Avatar 2015 - TRAINING [hhsce-aavcrstrm -MW01]

Home melba T Preferences Lock Sign Out Switch Help CAS9273

TOAST, MELBA (000305381)
F, 72, 09/25/1942
Ep: 1 : GERIATRIC
Problem P: -
Location: NAVARRO / NAVARRO / 25
Attn. Pract.: HOPKINS, MATTHEW C MD
Ht: 5' 6.0", Wt: 156 lbs, BMI: 25.2
DX P: 295.20 Catatonic type schizophrenia
Adm. Pract.: CATHEY, STEVEN W MD
Allergies (0)

Chart SOCIAL ASSESSMENT MH

- GENERAL INFORMATION
- INFORMANTS
- COURSE OF DYSFUNCTION
- FAMILY/SIGNIFICANT O...
- PERSONAL HISTORY
- NEEDS/RECOMMENDS

Submit

Occupational History

Never Employed Retired
 Unemployed Currently Employed

Length of Current Employment

Longest Period of Employment

Preferred Type of Work

Occupation

Comments - Occupational History

Guardianship

Guardian status unknown Not Applicable
 Pt has guardian Pt needs guardian
 Pt's appointed guardian no longer acting

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Guardianship Need Field in the Barriers to Discharge Section in the Mental Health Client Recovery Plan Screen

Avatar 2015 - LIVE [hhsce4svorsdbp1 - MW13]

Home mark B Preferences Lock Sign Out Switch Help CAS9273

Ep: 6 : ADULT ACUTE Location: CROCKETT / CRO / 12
Problem P: - Athn. Pract.: STANLEY, KATHLEEN A MD
DX P: 295.30 SCHIZOPHRENIA, PARANOID TYPE Adm. Pract.: RASCH, JOHN W MD
Allergies (2)
Allergies Reviewed=Yes (01/23/2013)

Client Recovery Plan MH

Client Recovery Plan MH
Client Recovery Plan (Pag...
Formulation (Page 2)
Patient Participation Rev...

Problems
Goals
Objectives
Interventions
Participation

Submit

▼ Patient Participation Review of Plan (Page 3)

Patient was Involved in Development of Plan
 Yes No

Patient Involvement in Development/Review of Plan

1. Patient briefed prior to meeting
2. Patient attended treatment team meeting
3. Patient described personal goals/needs during meeting
4. Plan explained to patient (during or after meeting)
5. Copy of plan provided to patient (in preferred language)
6. Copy of plan provided to guardian/LAR
7. Copy of plan provided to MHA

Review Date
[] [T] [Y] []

Comment about Patient Involvement
[]

Criteria for Discharge Met?
 Yes No

Does the patient have barriers to discharge?
 Yes No

Patient has the following barriers to discharge.

- Patient needs legal Guardian
- Patient has no benefits and requires nursing home or other placement
- Patient needs nursing home and none will accept due to history of violent, sexual, or destructive behavior
- Patient requires RTC and none will accept
- Patient awaiting placement in SSLC
- Other

Other
[]

Discharge Plans

Is the patient admitted for competency restoration?
 Yes No

For Forensic Patients (as applicable)

- Patient is competent
- Patient is expected to regain competency
- Patient not likely to regain competency

Review of Plan
[]

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