



Title: Policy and Procedure	Page: 1 of 1
Section: 2 Program Service and Operation	Date: June 1, 2018
Policy: HH2-6A Client's Rights to Accept or Refuse Medical Care	Replaces: December 1, 2017

PURPOSE

To provide written policies and procedures to established by the HHA regarding the client's rights to accept or refuse medical care, client/patient resuscitation, surgical treatment and the right to formulate an Advance Directive.

- A. Each client and family member are a part of the development of the client's Care Plan. The Care Plan is developed by a LPN that is Supervised by an RN or a Registered RN.
- B. The Licensed professional discusses all medical options to include the DNR option per our Policy 2-6B.
- C. Each client is created Daily Tasks that the assigned Caregiver must attempt to provide for the client each day by using the ClearCare Telephony System.
 - a. If the Task is completed the Caregiver must document per the Telephony System Complete
 - b. If the task is refused or not complete the Caregiver must document per the Telephony System Incomplete and provide a reason why the task was refused or not complete.
- D. The assigned Licensed Professional LPN and RN monitor the system daily to determine the tasks that can cause medical harm or is in violation of the Physician order.
 - a. 1st the Nurse will contact the client and/or family member to re-educate the client to stay in compliance with the Care Plan. Then contact the Case Manager (if Applicable) to notify them that client is being non-compliant.
 - b. 2nd if the client continues to be non-compliant the Nurse will do a home visit to determine if the Care Plan needs to be updated or if the client needs to be discharged from the Agency.
 - i. If the Care plan is updated the RN creates a new Care Plan and reviews it with the caregivers and client/Family member (as applicable)
 - ii. Contacts the Case Manager of the required changes to the Care plan to request additional Authorization for the home visit for billing.
 - c. If the RN and Case Manager agrees to do a 30 day Emergency Discharge, PD will continue to provide care per the care Plan and continue document all tasks that is refused and will continue to contact the case manager of the client's refusal of care.
 - i. This will continue until final discharge authorization is received from Case manager.

Departments Involved in Development: Board of Directors, Compliance Committee, Legal Counsel
Reviewed by Executive Board and approved by the Board 06/01/18
Reviewed by Compliance Officer and approved 06/01/18
All previous versions are obsolete