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| Transforming Lives | **Does your adult client need an NSA Representative?**  **Checklist for DDA Review** | | | | | | |
| If your adult client does not want an NSA representative and has requested in writing, to be his / her own NSA or an NSA representative cannot be found, answer the following questions and submit your recommendation. **(Note: If you are unsure about the answer, check the “No” box).** | | | | | | | |
| CLIENT NAME | | | | DDA NUMBER | | | |
| CRM NAME | | | REGION | TELEPHONE NUMBER | | | |
| **Yes No**  1. The client can read.  **If yes, skip to question 2.**  a) The client can determine that a letter is addressed to him / her.  **If yes, skip to question 1c.**  b) The client is unable to personally determine that a letter is addressed to him / her, but you   are reasonably sure there is someone in the household or in his / her life who will notify the   client that he / she has received a letter.  **If no, the client needs an NSA representative.**  c) You are reasonably sure that the client will seek assistance from someone to read the letter   to him / her.  **If no, the client needs an NSA representative.**  d) You can be reasonably sure that the client will understand the letter if it is read to him/her.  **If no, the client needs an NSA representative.**  2. The client’s cognitive and decision making abilities are unimpaired by mental illness and/or  intellectual disability.  **If no, the client’s cognitive and/or decision-making abilities are impaired and the** **client** n**eeds an NSA representative.**  3. The client is cognitively able and responsible to manage his / her own day-to-day affairs without  assistance.  **If no, the client needs an NSA representative.** | | | | | | | |
| **Based on the answers above and your knowledge of the client submit your recommendation to HQ.**  **If you answered “No” to any of the questions, but believe the client is able to act as his / her own representative be prepared to provide one or more concrete examples of when the client has shown the ability to understand information and then to act appropriately in his / her interest.**  **HQ will review the information submitted and, in consultation with the AAG, make a final determination.** | | | | | | | |
| I support the request to act as his / her own representative.  I do not support the request to act as his / her own representative. | | | | | | | |
| CASE MANAGER/SUPERVISOR | | | | | | DATE | |
| Client is  approved  not approved to act as his / her own representative. | |  | | | on |  |  |
|  | | DDA ASSISTANT SECRETARY OR DESIGNEE | | |  | DATE |  |

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| **INSTRUCTIONS**  **Does your adult client need an NSA Representative?**  **Checklist for DDA Review**  **When is form 14-491 submitted?**  Form DSHS 14-491 checklist is completed by a DDA case manager or DDA supervisor and submitted to the DDA HQ whenever an adult client with no guardian does not have an NSA because no NSA can be found (e.g. client is unwilling or unable to identify an NSA), or the client requests to be his / her own NSA.  **Remember:**  If the client requests to be his / her own NSA then the request must be in writing per WAC 388-825-102 (What if I do not want my notices and correspondence sent to anyone else?). This means you must have both the client’s written request and submit from 14-491. If DDA receives a client’s written request then the DDA case manager or DDA supervisor must submit the 14-491 for a DDA HQ decision.  **How do I complete form DSHS 14-491?**  Answer each question as needed by checking the appropriate check box. The case manager or supervisor should type his / her name in the appropriate text box at the bottom of the form and also type the date the request is submitted. The case manager or supervisor should e-mail the request to the QCCC Unit Manager at DDA HQ with the form as an attachment. Write an e-mail subject line that clearly indicates you are submitting the NSA Representative checklist.  **What do I do if the DDA HQ returns form DSHS 14-491 checked as “approved” or “not approved” but the DDA HQ has not typed his / her name or has not dated it?**  Forward the e-mail with the incomplete attachment back to the DDA HQ and request that he / she include his / her name and/or date.  **Must form DSHS 14-491 be submitted to the DDA HQ annually?**  Form DSHS 14-491 does not need to be re-submitted unless the client’s circumstances have changed. The CM and/or supervisor must contact the DDA HQ if in their professional judgment the client is no longer capable of acting as his / her own NSA. The DDA HQ will take your information (examples of why you believe the client has not fulfilled the NSA duties) and will make a new determination. You must complete an SER documenting that the client continues to request to be and is qualified to be his / her own NSA annually.  **Where do I document that form DSHS 14-491 has been approved or denied, by the DDA HQ?**  This is documented in two places. The completed form DSHS 14-491 documenting the DDA HQ approval or denial must be filed in the Legal Section of the client’s file. You must also write an SER to document the DDA HQ decision. |