ADW Q & A Held in Person at Quarterly Provider Meeting -May 23, 2016

1. Does the updated PAL that is initialed by the CM have to be used from that point on to give to the PA's to complete? It's not bad when the participant receives services for HM and CM through the same company, but when CM is elsewhere, we are finding the copy is very light in CareConnection and if it is faxed to our agency, it comes in crooked and the quality is poor. The more a document needs to be copied from a copy, the quality of the document will be reduced. We feel it is most important for the PA's to have a crisp/clear document as this is their guide and details their job duties.

Answer: No, as long as the updated PAL with the CM's initials is present in the record that you keep, then it should be fine to have the PA's completing the clearest copy that you can generate.

2. Some of the Participants do not want the PAL to read assist with toileting daily. Toileting is a dignity issue and many of the Participants are independent with toileting. However, there may be a time whenever someone has diarrhea, etc, and really needs assistance. If the PAL reads assist daily, then the PA would have to make a daily note (this could be weeks/months) stating that Participant did not need assistance today. If the PA initials that they provided assistance (when they did not), then this is false documentation. My office had been documenting: toileting/assist at Participant's request. Please advise.

Answer: Toileting is a sensitive area and there is an expectation that people would be treated with dignity. However, we still must discuss it in a respectful manner. If the person needs assistance with toileting, indicate it on the PAL. If the person does not need assistance every time the PA is there, then put on the PAL that the PA will offer assistance every time. A person who is independent with toileting and he/she has an episode where they need assistance (diarrhea), document the assistance on the PAL. For the person who continues to need assistance with toileting, a PAL update would be required.

"One time changes to planned activities must have prior approval by the RN and noted in the comment section of the Personal Attendant Log. Example: The person requires service to begin at 9:00 am due to an appointment. The plan is for the person's service to begin at 10:00 am. The request is made by the ADW recipient. The RN informs the Personal Attendant of the planned schedule change and a notation is made by the RN or Personal Attendant in the comment section of the Personal Attendant Log." 501.18.2

3. The same goes for transfer. Participant's don't always need assistance with transfer, but there are times when they need just a little bit of help getting up out of that old chair. Assist to transfer @ Participant request leaves the way for the assistance when necessary.

Answer: If the person does not need routine assistance with transfer, indicate on the PAL when the occasional change in activity occurs. For the person who continues to need assistance with transfer, a PAL update would be required.

4. Clean/File nails – assist @ Participant request or TOTAL @ Participant request. Nails aren't done daily.

Answer: Assist with nails weekly. Offer it and if they do not want it, document that. If you have a participant who is having memory problems or problems with certain steps of toileting when they are home alone, then you may want to clean their hands and under their nails with a soft nail brush every day.

5. The Training Log Form: is it mandatory that everyone uses this? Or may we use our own training log?

Answer: You <u>must</u> use the Training record and the Instructions for the Training Record on the BMS website.

6. Can you please add the Provider's fax number on the transfer notice? Thanks.

Answer: The provider's fax number is on the BoSS website under Help at Home/ADW program. On that page there is a listing of CM agencies and PA agencies. Their phone numbers and fax numbers are included.

7. Can you clarify the process that is to take place if a member has a permanent change in days, hours or activities and a new PAL is completed? The instructions say that the RN/RC documents on page 4 the date of change and initials. Verifies recipient approval was by phone or in person. RN/RC sends PAL Update to CM if applicable. Then the CM (if applicable) initials/dates for receipt of the new PAL with changes in days, hours, or activities. CM (if applicable) attaches new PAL to current Service Plan. PAL becomes a part of the Service Plan. However, the manual, in section 501.13, states the Case Manager is required to document the person's approval of

the change in the plan by telephone or in person on the changed Personal Attendant Log under the comment section.

Answer: The Case Manager initials and dates the PAL, verifying receipt of the PAL and participant approval which was documented on page 4 by the RN. The Case Manager is ultimately responsible for the Service Planning process. The Case Manager may use the RN's documentation as approval or may contact the participant again. The Case Manager must note the Change in Needs on page one of the Service Plan and attach the updated PAL to the Service Plan.

"When the person receiving ADW services has a change in needs, the Personal Attendant Log can be changed and attached to the current Service Plan to document any permanent Plan changes. (i.e. change in service hours, types of assistance with the activity, frequency of the activity, days of the week, destination for community activity or essential errands, etc.). The Case Manager is required to document the person's approval of the change in the plan by telephone or in person on the changed Personal Attendant Log under the comment section. Approved minor daily changes (i.e. worker arrived at 8:00 A.M.to get the person ready for a doctor appt.) in a person's needs such as hours of service, may be documented on the Personal Attendant Log and does not constitute the need for a change. However, if a change becomes permanent, a new Personal Attendant Log must be completed. " 501.13

8. In the event that a new PAL is completed d/t change in hours, days or activities, does the plan period change? Such as, an annual SP/PAL is done in March and the plan period is March 2016-September 2016, then a new PAL is completed in June with changes, does the plan period remain March 2016-September 2016, or does it change to June 2016-September 2016?

Answer: The plan period remains with the original six month intervals. An update is an update and does not replace the six month or annual plan.

<u>Additional Topics</u>:

9. To increase the Level of Care prior to a participant's anchor date (when new PAS was done thereby necessitating the higher level of care), you will fax the Request for Service Level Change form and a brief narrative stating the reason for request to APS Healthcare at 866-212-5053. APS will process the request manually and the agency will receive fax confirmation of the result. If a change in level of care is necessitated by something other than the completion of the yearly PAS, you will still need to complete the entire process for Change in Level of Care in CareConnection including the necessary documentation.
10. When determining the number of hours per month a person should receive, you must use a person-centered approach within the framework of services available in the ADW program. Some participants demand to be given the maximum number or hours allowed in their service level – although on the surface, this may appear

person-centered, it is actually not. Person-centered does not equal what a person wants but what a person needs. The amount of time needed to address the person's needs must leave the Personal Attendant busy at all times during her/his time in the home and with the participant. There should be no time "visiting" or watching TV or "providing respite".

11. Case Managers should not make a judgment call on whether or not a participant can manage being on the Personal Options program. The Participant may have a POA that is very capable of making decisions on the Personal Options program. The Case Manager may be biased to their own agency. Case Managers do not have the medical expertise to determine a Participant's capacity level – only a medical professional can make that determination.
12. For those of you assisting applicants with financial eligibility, it would benefit you and the applicant to develop your own release of information to have the applicant sign. This release would allow the DHHR to discuss financial matters with you and enable you to better assist the applicants.
13. For Interpreter services for people with Limited English Proficiency, look into a company called Fluent Language Solutions. It is the service that the DHHR uses when necessary. Their website address is www.FluentLS.com and their phone number is 1-888-225-6056.
14. For questions about the Direct Care Worker Certification training curriculum, contact Lisa Scarberry at WV Partnership for Elder Living. Her email address is lmscarberry@gmail.com and her phone number is 304-610-7943. This was the curriculum that Jenni Sutherland, Executive Director of Putnam Aging, explained during the Provider Meeting in the morning session. It is a two-week curriculum taught by a certified provider in the secondary school system.
15. If you want county emergency notifications in your area, look into www.nixle.com. According to attendee at meeting, it provides real-time updates and information about your area, including inclement weather statements and planned utility outages.
16. When using interns in your office, please understand that they cannot be used to do Medicaid paid services such as Case Management contacts (in-person or by phone). They can observe while the licensed, trained Case Manager makes the contacts, but they cannot sign the documentation.