



Nursing Support Services

WHAT YOU'LL WANT TO KNOW IF
YOU SELF DIRECT YOUR DDA
WAIVER SERVICES

Introduction & Disclaimer

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Owner of Health Link LLC

Registered Nurse working in Self
Directed Services for over 16 years

Worked for over 200 individuals
throughout career in SDS

Currently working for 30+ individuals
self directing their services

*Disclaimer: this is a general presentation. I am unable
to answer individual specific questions at this time.*

Definitions

Nursing Support Services

Nursing Consultation

Nursing Case Management/Delegation

Certified Medication Technician

Certified Nursing Assistant

Health Risk Screening Tool

Skilled Nursing/REM

Nursing Support Services

A waiver service available to you in DDA administered waivers

Required if you have an **HRST Level of 3 or higher**

Required if your staff administer medications or do any healthcare treatments for you

A valuable service to help you manage your healthcare needs and plan for the future when your family may not be able to help you as much

Nursing Support Services

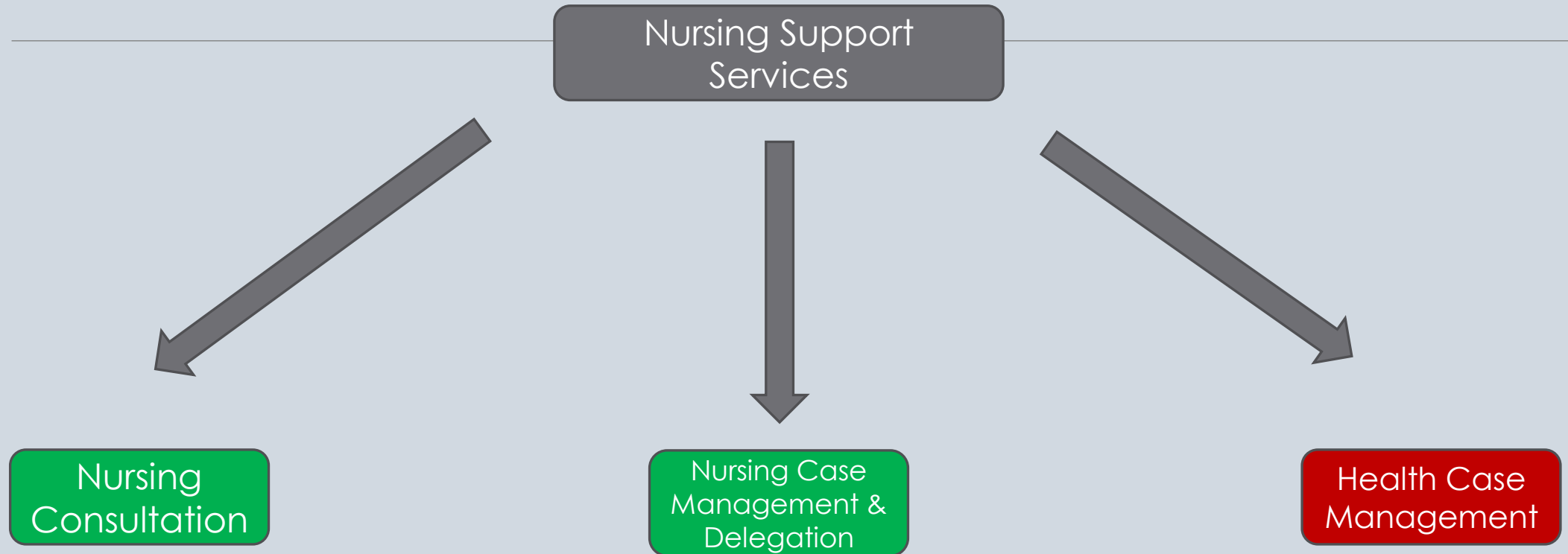
Two Nursing Support Services are available to people who self direct:

- **Nursing Consultation**
- **Nursing Case Management and Delegation**

Nursing Health Case Management – Traditional services only, not SDS

See handout: Guidelines For Service Authorization p. 47-54

Nursing Support Services



How do you know which service you need?

What is your HRST Level? If it is Level 3 or higher you will need to recruit, interview, and hire a nurse to provide one of the Nursing Support Services.

Do you take responsibility for **managing your meds yourself?**

Can you **direct your staff** to assist you in managing your healthcare, administering your meds or doing any of your treatments?

Do you rely on your family or **unpaid caregivers** to administer your meds and do any treatments?

Will you need help from your **paid staff** to manage your healthcare, administer your meds, and complete any treatments?

Nursing
Support
Services:

Nursing
Consultation

You have an **HRST Level of 3 or higher**

You manage your own healthcare and administer your own meds/treatments...

OR

You can direct your paid staff to assist you, but you take the responsibility...

OR

You rely on unpaid caregivers to manage your healthcare, administer meds, complete treatments

Nursing Consultation is....

Registered Nurse who has completed the DDA approved RN training

A comprehensive nursing assessment

A self administration assessment

HRST rating or reviewing (together with you, your family, and your CCS)

Help to develop health care protocols or routines

Help you develop a way to communicate with your doctors

Help to identify community healthcare resources

Up to four visits per year, no more often than quarterly

Maximum of 16 hours per year but can be less.

Nursing
Consultation
is **NOT**...

Delegation to staff (no med tech training required)

Direct staff training

Direct nursing care

On call nurse availability

Care plan development

Health care case management

Visits more often than quarterly

Nursing Case Management and Delegation

Required if your **paid staff** is going to administer meds or complete healthcare treatments. Includes over the counter meds and those given as needed.

- *Emergency medications can be given by anyone with training, not necessarily CMT*

Required if your **family is paid staff** and they are going to administer meds or complete treatments during their work hours.

HRST level – any, but more likely the higher HRST levels

Nursing Support Services:

Nursing Case Management & Delegation

Registered nurse, currently licensed in the State of Maryland who has completed the DDA two-day RN Case Manager/Delegating Nurse training and is approved by the DDA.

A comprehensive nursing assessment

A self administration assessment

Other assessments if you need them, i.e., choking risk and fall risk

HRST rating or reviewing (together with you, your family, and your CCS)

Develops your care plan (with you, your family, and staff)

Trains your staff to do the things listed in your care plan

Delegates and supervises staff to do the things listed in your care plan

Nursing Case Management & Delegation is...

Visits from your nurse **at least every 45 days**. May be more often if you need it

Your nurse is on call for you and your staff during all the hours the staff are working and to your team during business hours

Help to identify community healthcare resources

Help to develop a way to communicate to your doctors

Help to understand your medications and your healthcare needs

Help to manage your medications and healthcare to the degree you want the nurse to help

Consultation vs. Delegation: What's included?

Provided by Nurse	Consultation	Delegation
Comprehensive Nursing Assessment	X	X
Self Administration Assessment	X	X
Provide recommendations to access health services & supports	X	X
Clinical Review/Update HRST	X	X
Development of Health Care Protocols	X RN Assistance	X
Development of Care plans		X
Nursing Visits quarterly max of 16 hrs/year	X	
Nursing Visits minimally every 45 Days		X
Training to Direct Support Staff		X
Monitor DSP & Delegate Nursing Tasks		X
Oversight to CMT Trained staff to administer medications		X

Staff Training Recommendations...



Recommended by RN after comprehensive assessment



The nurse may recommend you hire or have staff trained as **Certified Medication Technician (CMT)** or **Certified Nursing Assistant (CNA)** or both:

CMT- an individual who has successfully completed a Board-approved Medication Technician Training Program (MTTP), meets any other qualifications set by the Board, and is certified by the Maryland Board of Nursing as a medication technician. (COMAR 10.39.04)

CNA- an individual, who routinely performs nursing tasks delegated by a registered nurse (RN) or licensed practical nurse (LPN) for compensation. (COMAR 10.39.01)



Both CMT and CNA trained staff are certified by the Maryland Board of Nursing (MBON) and work at the delegation of an approved RN Case Manager Delegating RN.

Role of a Certified Medication Technician (CMT)

Work	Works at the delegation of the RN and is certified by the Maryland Board of Nursing (MBON)
Administer	Regularly administer medications and/or treatments
Observe and notify	Observe and notify the Delegating RN of changes in the individual's health (both physical and behavioral)
Assist	Assist with Health Care Provider visits (if needed)
Assist	Assist with obtaining medications from pharmacy (if needed)
Document	Document administration of medications thoroughly and properly

CMT Training



20-hour training that utilizes the DDA-approved curriculum



Math and Reading test prior to 20-hour training



Must complete full course to apply to MBON for certification



Must have a delegating RN in order to enroll in training



Must meet with Delegating RN as the last step of training



Coordinate between the instructor and the delegating RN to avoid missing steps in the application process



Costs can range from \$180-\$250 per staff

Enrolling in CMT Training

Three curriculums of CMT training out there...

- *School Health, Assisted Living, and DDA*

Make sure your staff take the curriculum your delegating nurse will accept

Maryland Board of Nursing application fee is often included in cost of class (\$20-\$30). But ask!

Classes are hard to find right now... share resources among yourselves, contact the DDA Regional Nurse to ask for resources, advocate for more choices.

Enrolling in CMT Training cont.

Most importantly...

Stay in communication with your delegating nurse throughout the duration of the training!!

As your staff go through training, there are many intricate steps in the process. Missing any of them will hold up your staff's certification!

After CMT Training is Complete

Notify your Delegating RN, as the staff will have to meet with them for an “Onsite Competency”, or demonstration. The process will not move forward until this step is complete.

Clarify with the instructor what the staff’s role is in processing their own application. Who is responsible for the Maryland Board of Nursing (MBON) payment?

Clarify with the instructor how long to expect until the CMT certification will post to the MBON website, and when to begin following up if it has not.

Certified Nursing Assistant (CNA)

Your nurse may recommend to you that you hire staff who are CNA trained.

Your nurse will do this when your care needs are such that your staff should have a good understanding of the basics of providing for your **physical care** when they are hired.

It is very difficult to train someone to meet your complex care needs when they have no foundation of skills. What is second nature to you is often overwhelming for a lay person.

Certified Nursing Assistants must also have CMT training in order to administer medications.

Role of a Certified Nursing Assistant (CNA)

Work	Work at the delegation of the RN and is certified by the Maryland Board of Nursing
Perform	Perform activities of daily living and delegateable nursing functions
Observe and notify	Observe and notify the Delegating RN of changes in the individual's health (both physical and behavioral)
Assist	Assist with physical care including transferring, positioning, ambulating
Assist	Assist with personal care including complex hygiene needs, feeding, etc.
Document	Document daily as appropriate for that individual

CNA Training Includes:

- VS measurement
- Bathing/bed bath
- Transferring
- Passive ROM
- Colostomy care
- Weights
- Fingernail care
- Oral care/denture care
- Grooming
- Toileting
- Gait belt ambulation
- Bed making (occupied)
- Feeding/dysphagia protocols
- Dressing affected limbs
- Enemas/O2 administration
- I & O measurement
- Clean dressing
- Peri-care
- Hand washing
- Universal precautions
- Bedpan usage
- Turning & positioning
- Foot care
- TED application

Nursing Supports in SDS: Things to Think About

Your nurse can be a valuable member of your team.

The nurse who works for you is either an employee or a vendor, so it is important to stay in communication.

The nurse **does not** work for DDA or have access to the LTSS system.

The nurse should maintain your confidentiality and share information with only those people you give permission for the nurse to speak to, as with any health care professional.

You have the choice who to hire as a nurse, and who to keep in your employ.

You have the right to advocate to have more choices of nurses and more availability of CMT training.

Things to Think About When Hiring a Nurse

Please caution your CCS regarding how much information can be shared with a stranger. You are not a “case” you are an employer looking for a vendor or employee. **Your personal information is yours to be shared on your terms.**

You are the employer, interview to see if the nurse is a good fit. **The nurse is not assigned, and you are not an assignment.** We do a meet and greet phone conversation and I wait to be offered the job. It is usually pretty clear if we are a good fit.

Do not assume the nurse is still available if your PCP has taken a long time to get approved. Just like other staff, they may have had to move on.

Nursing Rates vs Nursing wages – Most nurses are vendors and total cost of doing business is coming out of that “rate” Business expenses include taxes, workman’s compensation, malpractice insurance, and all administrative costs.

Health Risk Screening Tool (HRST)

Questionnaire that provides assessment of your health risks

Required by DDA to be done when you come in to DDA services and at least annually. It is submitted to DDA with your PCP and Revised PCP

Initially information is entered by your CCS.

Level 3 or above must then be reviewed by an RN

When you enter DDA Services, the initial RN review is done by a contracted agency. Once you hire a nurse on your team, your nurse will do the review.

You can ask the nurse to work with your CCS to complete the HRST.

There is no such thing as a stand alone HRST review done by an RN. Remember the two NSS we talked about.

The HRST is important in supporting your need for support services. Make sure you have input and it is accurate.

Health Risk Screening Tool (HRST)

Levels 1-6 with 6 being the highest. The level should not be a surprise... You already know what health risks you have... this verifies them and supports your need for support.

The HRST also identifies staff training needs based on the risks.

Components:

Your demographic information

List of your diagnoses

List of your medications

Rating areas of health risks

Skilled Nursing (hourly shifts of direct nursing care)

DDA does not have a waiver service providing skilled nursing

Current source of this service is **REM medical assistance**. REM stands for Rare and Expensive Case Management and is administered by **Maryland Department of Health (MDH)**, not DDA.

REM has its own process for eligibility and specifically eligibility for skilled nursing.

One can be eligible for REM Case Management but not necessarily eligible for skilled nursing.

Skilled nursing is not the same as the two Nursing Support Services we talked about that are available to people in self direction.

People who need skilled nursing care or have REM skilled nursing services may be receiving DDA self directed or traditional services.

Million Dollar Question...



Where do you find a nurse and CMT training???

Supply and demand...

SDAN continues to advocate for more supply.

Resources:

- Each other – share information with each other it is always the best way (Today in the chat, on the SDAN Facebook Page)
- Your Support Broker, CCS or CCS supervisor
- Provider agencies in your area
- The DDA Regional Self Direction Lead
- The DDA Self Direction Coordinator – Kristi Culbreth
- The DDA Regional Nurses

Resources

DDA Regional Self Direction Leads	Name	Email
Central Region	Ola Otuyelu	olasubomi.otuyelu@maryland.gov
Eastern Region	Jonna Hitch	jonna.hitch@maryland.gov
Southern Region	Tia Henry	tia.henry2@maryland.gov
Western Region	Cara Buckman	cara.buckman@maryland.gov

DDA Regional Advocacy Specialist	Name	Email
Central Region	Cheryl Gottlieb	cheryl.gottlieb@maryland.gov
Eastern Region	Cody Drinkwater	cody.drinkwater@maryland.gov
Southern Region	---	---
Western Region	Jessica Stine	jessica.stine@maryland.gov

DDA Self Direction Coordinator – Kristi Culbreth kristina.culbreth@maryland.gov

DDA Regional Nurses

DDA Health Services Liaison Nurse	Name	Email
Central Region	Kelly Jones	kelly.jones2@maryland.gov
Eastern Region	Ramona Bradley	ramona.bradley@maryland.gov
Southern Region	Michelle Howell	michelle.howell@maryland.gov
Western Region	Beth Laisure	beth.laisure@maryland.gov

DDA Quality Enhancement Nurse Administrator	Name	Email
Central Region	Mardi Adams	mardi.adams@maryland.gov
Eastern Region	Naomi Holochwost	naomi.holochwost1@maryland.gov
Southern Region	John Miller	john.miller1@maryland.gov
Western Region	Wendy Shaffer-Yingling	wendy.shaffer-yingling@maryland.gov

Questions?
