# Nurse Delegation in the DDA World



## DEVELOPMENTAL DISABILTIES ADMINISTRATION

### WHO ARE WE?

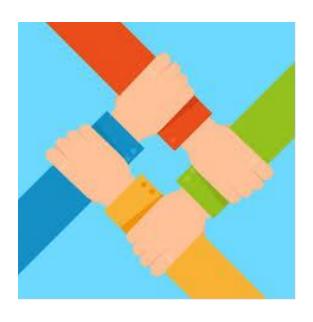
## DEPARTMENT OF SOCIAL AND HEALTH SERVICES

### 8 Administrations:

- 1 DEVELOPMENTAL DISABILITIES
- 2 Aging & Long Term Support
- 3 Behavioral Health & Service Integration
- 4 Children's Administration
- 5 Economic Services
- 6 Juvenile Justice & Rehabilitation
- 7 Financial Services
- 8 Service & Enterprise Support

### **DDA Mission Statement**

## TO TRANSFORM LIVES BY CREATING PARTNERSHIPS THAT EMPOWER PEOPLE



### Who are DDA clients?



### **DDA** clients

- represent all age groups from birth to death
- have a disability that began before age 18
- have a disability expected to continue throughout their lifetime
- have support needs that range from minimal to live independently to 24 hr. intensive supports

### DDA Community Services

- Case Management
- Personal Care
- Employment
- Community Access
- Community Supports
- Individual and Family Support

- Children's Intensive In-home Behavior Supports
- Children's Licensed Staff Residential
- Medically Intensive Children's Program (MICP)
- Adult Private Duty Nursing (PDN)
- Adult Residential Services
  - Supported Living
  - Adult Family Homes
  - Companion Homes
  - Group Homes
  - Alternative Living

### DDA Nurse Delegation Referrals

### CRM/SW will:

- assess client and support needs (at least annually)
- will follow policy and WACs to determine the client's FUNCTIONAL and COGNITIVE abilities.
- will identify if medications/treatments can be managed
  - ❖ independently, OR
  - \*with medication assistance from caregivers, OR
  - with delegation

### **FUNCTIONAL**

Is client able to get the medication where it needs to go?

WAC 246-888-020

"must be able to put the medication into his or her mouth or apply or instill the medication."

#### **COGNITIVE**

Is client aware that what they are taking is medication?

WAC 246-888-020

"does not necessarily need to state the name of the medication, intended effects, side effects or other details..."

### A person with a diagnosis of 'intellectual disability'

### CAN

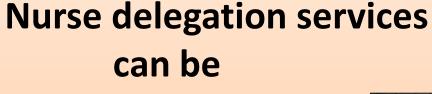
meet the cognitive requirement!!

### **CRM/SW will:**

- When appropriate or when in doubt, CRM/SW will request an assessment by the RND
- Prepare and send the referral form and additional plans and assessments to the RND
- Open and manage authorization for payment for service upon receipt of RND's referral response form

Remember: accurate payments start with timely billing!!!

### What is unique to DDA?



provided to clients of all ages

(birth to death)





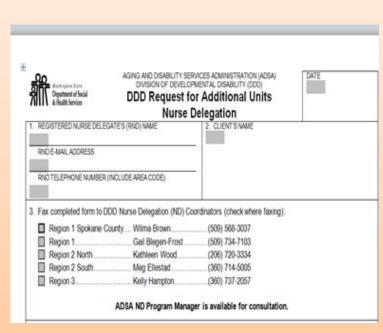
## Delegation Services can be provided in a variety of

settings





(residential and vocational)



DDA allows up to 100 units per month (15 minutes = 1 unit)

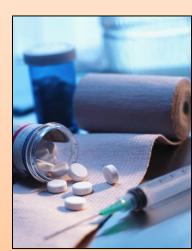
Requests for >50 are submitted by the RND to the regional ND coordinator

## Delegating with DDA clients may require more home visits compared to ND in other



### settings due to:

- Frequent staff turn-over
- Clients with frequent med changes and complex medical needs



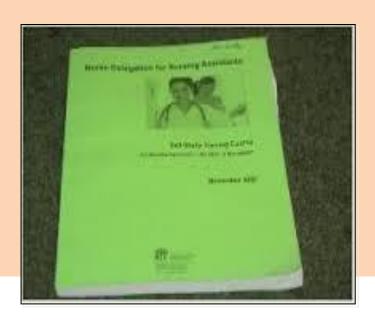
Families do not need to be delegated, to perform nursing tasks.

DDA definition:

Relatives including spouse or registered domestic partner; natural, adoptive, or step parent; grandparent; child; stepchild; sibling; stepsibling; uncle; aunt; first cousin, niece or nephew

### **TRAINING**

DDA provides training materials to RNs with a training contract at no charge (for SL, GH staff)



DDA requests training be done in a classroom setting (with self-study approved on an as-needed basis)



### Each DDA region has 2 nurse delegation coordinators:

Region 1

**Gail Blegen-Frost** 

509-374-2124

**Region 2** 

**Meg Hindman** 

360-714-5005

Region 3

**Kelly Hampton** 

360-725-4300

Wilma Brown

509-329-2940

**Kathleen Wood** 

206-568-5783

**Tobias Clawson** 

360-565-2707

### ROLE OF REGIONAL ND COORDINATORS

- Help train staff on policies, WACs regarding delegation
- Act as liaison between RNDs, CRMs/SW, care providers
- Maintain information about RND availability and recruit new nurses
- Help facilitate transitions between RNDs when change is necessary
- Process payment for training provided to supported living & GH staff upon receipt of rosters and evaluation forms
- Manage training materials

## Each DDA region has a Nursing Care Consultant

**Region 1** 

**Karen Elmendorf** 

509-329-2881

**Region 2** 

**Kathleen Donlin** 

206-568-5739

**Region 3** 

**Kathleen Donlin** 

253-404-5557

### ROLE OF NURSING CARE CONSULTANTS

- What is PDN and MICP?
- Clinical Eligibility for MICP/PDN-must require 4 hours or more of continuous skilled nursing.
- MICP WAC 182-551-3000
- PDN WAC 388-106-1010

### **ROLE OF NURSING CARE CONSULTANTS**

- Recommend MICP/PDN clients for nurse delegation assessment when the client's skilled nursing tasks are determined to be routine. (RND makes the determination of the client's status being stable and predictable).
- Prior Approvals (PA) for medication management for Children.
- Assist with transition from PDN/MICP to Medicaid Personal Care (MPC) with nurse delegation.
- Collaborate and problem-solve with RNDs

### **Communication**

### A KEY TO A SUCCESSFUL PARTNERSHIP

**Referral/Response** 

**CRM/SW**≒**RND** 

Timely billing & authorizations

Task Sheets in homes

90 Day Review Reports to agency



Credential/training confirmation

Vacation planning & back up

**New ISP to RND** 

**Quarterly RND meeting** 

Fair Hearings

### **SUCCESSFUL DELEGATION:**

A partnership that empowers individuals with disabilities to live in the home of their choice and as independently as possible

CLIENT

CAREGIVER



CRM/SW

ND COORDINATOR

NCC

RND