Purpose
To define the elements of nursing oversight and care management.
To describe the process for approval of nursing oversight and care management services.

Policy
Senior and Disabilities Services (SDS) requires nursing oversight and care management services for participants who are enrolled in the Children with Complex Medical Conditions (CCMC) program; or who are enrolled in Adults with Physical and Intellectual Disabilities program, provided the participant would be eligible for the CCMC program if he/she were under 22 years of age. These services are provided to participants who perform self-care or who receive care of a medical nature that requires nursing direction, observation, and skill.

Nursing oversight and care management services are provided by a registered nurse who may delegate nursing duties to others in accordance with Alaska nursing statutes and regulations. The registered nurse evaluates the participant’s need for medical care, including the ability to provide self-care; develops a nursing plan; trains, supervises, and evaluates the participant who provides self care and/or the individuals who perform delegated nursing duties for the participant; and monitors medical care to ensure services are reasonable and necessary for the participant’s medical condition and the complexity of care required to treat that condition, and to verify services are delivered according to the nursing plan and in a manner that protects the health, safety, and welfare of the participant.

Authority
7 AAC 105.220 Provider responsibilities; 7 AAC 105.230 Requirements for provider records.
7 AAC 130.205 (d) [CCMC recipient category]; 7 AAC 130.230 (d) [Planning team]; 7 AAC 130.235 Nursing oversight and care management services; 7 AAC 160.900 (d)(10) Chart of Personal Care Attendant and Waiver Services Rates 2011. AS 08.68 Nursing. 12 AAC 44.950 – 44.975 [Delegation of nursing duties].

Definitions
“Defined unit of service” means a fifteen minute block of time during which nursing oversight and care management services are provided.
“Local service” means service provided within two-hundred miles of the location of the nursing oversight and care management services provider agency; all services that are not, or need not be, provided on-site to a participant are considered to be local services.
“Nonlocal service” means service provided on-site to a participant at a location that is two-hundred miles or more from the location of the nursing oversight and care management services provider agency.
“Reasonable and necessary services” means services that are needed and provided for the treatment of the participant’s medical condition, are consistent with the nature and severity of that condition, and meet the accepted standards of medical and nursing practice.
“Representative” means a parent, guardian, or other individual with legal authority to act on behalf of a participant.
Responsibilities

1. The participant/representative is responsible for
   a. discussing the need for services with the care coordinator; and
   b. cooperating with the agency registered nurse in the planning and implementation of services.

2. The care coordinator is responsible for
   a. convening the planning team, including the agency registered nurse;
   b. including the nursing plan in the Plan of Care;
   c. submitting required documents to SDS; and
   d. ongoing coordination of care with the agency registered nurse.

3. The nursing oversight and care management services provider agency is responsible for
   a. assigning an agency registered nurse to develop a nursing plan; and
   b. maintaining records to document services provided.

4. The agency registered nurse is responsible for
   a. assessing the participant;
   b. developing a nursing plan;
   c. delegating, supervising, and evaluating the performance of nursing duties by others;
   d. identifying training needs and providing training; and
   e. monitoring implementation of the nursing plan.

5. SDS is responsible for
   a. reviewing the nursing assessment and the nursing plan; and
   b. approving or denying services.

Procedures

A. Planning for services.

1. Notification to proceed.
   a. SDS sends the care coordinator a letter indicating that the nursing facility level-of-care requirement has been met by the participant.
   b. The care coordinator, upon receipt of the SDS letter, notifies the nursing oversight and care management services provider agency selected by the participant/representative.
   c. The nursing oversight and care management services provider agency
      i. determines that there is a reasonable expectation the participant’s needs can be met at the location where services are to be delivered, and
      ii. assigns an agency registered nurse to perform a nursing assessment and to develop a nursing plan.
2. Service planning process.
   a. Evaluation of need for services.
      i. The agency registered nurse evaluates the participant’s medical care needs by
         (A) discussing the participant’s condition and needs with medical providers and the
         participant/representative;
         (B) reviewing medical records, including current physician orders and recommendations;
         (C) assessing the participant’s condition and needs at his/her current location; and
         (D) if the current location is not the site where services are to be delivered, the agency registered
         nurse evaluates the site where services will be delivered before developing the nursing plan.
      ii. The initial assessment includes
         (A) evaluation of the participant’s capacity for self-care;
         (B) identification of the degree of the participant’s dependence on medical technology;
         (C) identification of tasks that may be delegated by a registered nurse;
         (D) review of the availability and willingness of direct service workers and/or informal supports to
         perform delegated tasks; and
         (E) determination of training needs to enable the participant to perform self-care or to enable direct
         service workers and/or informal supports to perform delegated tasks.
   b. Development of the nursing plan.
      The agency registered nurse reviews his/her assessment findings and develops recommendations for
      nursing oversight and care management services, including
      i. goals and objectives of service provision,
      ii. identification of tasks that may be delegated,
      iii. designation of individuals to perform specific tasks,
      iv. delegation plans,
      v. training plans and training checklists,
      vi. nursing oversight responsibilities and activities, and
      vii. projections of amount, duration, and scope of services.

B. Plan of care.

1. Development.
   a. The care coordinator convenes the planning team including the agency registered nurse.
   b. The agency registered nurse discusses the nursing plan with the planning team.
   c. The care coordinator
      i. includes nursing oversight and care management services in the Plan of Care, indicating
         (A) the amount of service as defined units of service,
         (B) the duration, and scope of the services, and
         (C) whether the defined units of service are local or nonlocal; and
      ii. submits the nursing assessment and the nursing plan with the Plan of Care to SDS.

2. Evaluation.
   SDS evaluates the nursing plan to determine whether it is consistent with the nursing assessment and meets
   the identified needs of the participant.
3. Approval.  
a. SDS approves services that are reasonable and necessary and meet the requirements of 7 AAC 130.230, or denies services that do not.  
b. SDS notifies the care coordinator who informs the nursing oversight and care management services provider agency of service authorizations.

C. Implementation of the nursing plan.  
1. The nursing oversight and care management services provider agency  
   a. provides services as authorized by SDS;  
   b. maintains records in accordance with 7 AAC 105.220 – 105-230; and  
   c. notifies the care coordinator to request amendment of the Plan of Care when the need for services changes.  
2. The agency registered nurse  
   a. provides a copy of the nursing plan to the participant/representative;  
   b. maintains a copy of the nursing plan and written instructions for all delegated tasks at the location where services are provided;  
   d. trains and supervises individuals who perform the tasks he/she has delegated;  
   c. provides ongoing oversight through various activities such as observation, interviewing, and communication with the participant/representative, providers, direct service staff, and informal supports;  
   e. maintains collaborative working relationships with the participant’s medical providers and care coordinator,  
   f. discusses the participant’s condition and needs with medical providers as necessary; and  
   g. reports to the care coordinator changes in the participant’s condition or treatment, or other factors that require alteration of the nursing plan.