



Developmental Services
Private Duty Nursing
 Monitoring Protocol

Private duty nursing services are prescribed by a physician and consist of individual, continuous nursing care provided by registered or licensed practical nurses within the scope of their nursing license.

Cite	Standard	Probes
<p>Explanation of Monitoring Tool Symbols/Codes</p> <p> Alert: Denotes a critical standard or cite relating to health, safety and rights. A deficiency requires a more intense corrective action and follow-up cycle.</p> <p>“W” Weighted Element: A “W” followed by 2.0 or 4.0 in the Cite column denotes elements that have a greater impact on the monitoring score.</p> <p>“R” Recoupment: An “R” in the Cite column denotes an element that is subject to recoupment of funds by the State if the element is “Not Met.”</p>		
B. Provider Qualifications and Requirements		
<p><i>For all training related elements of performance appearing under this section: Review Area Office requirements for mandatory meetings and training documentation. Review provider's/staff member training records to determine if documentation is maintained, and at a minimum includes: The topic of the training; Length of the training session; Training dates; Participants' signature; Instructor's name; Objectives and/or a syllabus.</i></p>		
1 W4.0	<p> Providers are registered nurses or licensed practical nurses and may be independent vendors or employees of licensed home health, hospice agencies or nurse registries.</p>	<p>Review provider or agency staff personnel files or Area Office enrollment files to verify current licensure.</p>
2	<p>Proof of current training and certification is available for all independent providers and agency staff in Cardiopulmonary Resuscitation (CPR).</p>	<ul style="list-style-type: none"> • Independent vendors and agency staff complete this training within 30 days of initially providing services. • Determine if the provider and staff receive retraining according to the requirements established by the sponsoring organization or according to regulations. • Review personnel files and other provider training records for evidence of required CPR training. • Review CPR certificates or CPR training documentation to determine expiration date and need for updated training. <p><i>Note: A certified trainer must provide CPR training.</i></p>

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3	Proof of current training is available for all independent vendors and agency staff in AIDS and infection control.	<ul style="list-style-type: none"> • Independent vendors and agency staff complete this training within 30 days of initially providing services. • Determine if the provider and staff receive retraining according to the requirements established by the sponsoring organization or according to state's regulations. • Review personnel files and other provider training records for evidence of required training. • Infection control may be a separate training or included and documented as part of the AIDS training as "universal precautions." <p><i>Note: American Red Cross First Aid Training does not meet the requirements for HIV/AIDS training.</i></p>

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4	The provider attends mandatory meetings and training scheduled by the Area Office and/or Agency.	<p>If this is an onsite visit:</p> <ul style="list-style-type: none"> • Ask the provider if they are aware of Area Office and Agency mandatory meeting and training schedules. Ask the provider if they can produce any notices, announcements or agendas received about meetings or training. • Ask the provider what Area Office and Agency meetings or training they have attended during the review period. • Ask the provider for any evidence they have to verify attending the meeting or training. <p>If this is a desk review</p> <ul style="list-style-type: none"> • Look for evidence in documents supplied by the provider of attendance at Area Office and Agency meetings, such as notes in personnel files or other records. <p><i>Note: If the Area Office has not sponsored any mandatory meetings or training, score this element Not Applicable.</i></p>

Cite	Standard	Probes
5	Independent providers and agency staff receive training on responsibilities and procedures for maintaining health, safety and well-being of individuals served.	<p>Review provider personnel files or training records for evidence of this type of training.</p> <p>If this is an onsite review, ask the provider and/or their staff about what types of training programs they have and continue to attend.</p> <p>Training on health, safety and well-being of individuals could include such topics as:</p> <ul style="list-style-type: none"> • Fire safety for the environment; • Evacuation procedures in the event of natural or other disasters; • Training on what to do in the event of personal health emergencies involving consumers; • Basic infection control training, e.g., hand washing before and after all contact with consumers. • Identifying and reporting concerns about health, safety and well-being of individuals and the environment in which they are living. <p>Refer also to the provider's policy in this area to determine compliance.</p> <p><i>Note: The Area Office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff; providers and their staff may attend a program offered through another provider.</i></p>
6	Independent providers and agency staff receive training on required documentation for service(s) rendered.	<p>Look for evidence that the provider and/or staff have received training on the type and format of documentation that is required for the services and supports that they render.</p> <p>Examples of this training could include:</p> <ul style="list-style-type: none"> • Instruction on documentation that is required for reimbursement and monitoring purposes. <p><i>NOTE: The Area Office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff; provider and their staff may attend a program offered through another provider.</i></p>

Cite	Standard	Probes
7	Independent providers and agency staff receive training on responsibilities under the Core Assurances.	<p>Look for evidence that the provider and/or staff have been familiarized with and have had some training related to the Core Assurances section of their Waiver Services Agreement and the DS Waiver Services Florida Medicaid Coverage and Limitations handbook.</p> <p>Examples of this training could include instruction on:</p> <ul style="list-style-type: none"> • The rights of individuals in the program and how the provider respects these rights; • Maintaining confidentiality of consumer information; • Offering individuals a choice of services and supports; • Recognizing and reporting of suspected abuse, neglect or exploitation; • Rendering services in an ethical manner. <p><i>NOTE: The Area Office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff; provider and their staff may attend a program offered through another provider.</i></p>
8	Independent providers and agency staff receive training on responsibilities under the requirements of specific services offered.	<p>Look for evidence that the provider and/or staff have been familiarized with and have had training related to the service specific sections of their Waiver Services Agreement.</p> <p>Examples of this training could include instruction on:</p> <ul style="list-style-type: none"> • Specifics of rendering services and supports; • Service limitations; • Service documentation requirements; and • Billing for services. <p><i>NOTE: The Area Office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff; provider and their staff may attend a program offered through another provider.</i></p>

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9	Independent providers and agency staff receive training on use of personal outcomes to establish a person-centered approach to service delivery.	<p>Look for evidence that the provider and/or staff have received training on using desired outcomes for individuals as the guide for rendering services and supports.</p> <p>Examples of this training could include instruction on:</p> <ul style="list-style-type: none"> • Rendering services and supports in accordance with the service authorization. • Respecting the wishes of individuals as it relates to the services and supports being provided. • Use of Personal Outcomes Measures, or another person-centered planning approach. • Individualizing service delivery methods. <p>Also refer to the provider’s policy in this area to determine specified training.</p> <p><i>Note: This does not mean that the provider must have received the official Personal Outcome Measures training (with the exception of Support Coordinators). Other person-centered approaches are acceptable.</i></p> <p><i>The Area Office is not the sole source for a provider to find training programs and activities referred to in the Core Assurances. Providers may develop their own curriculum for their staff; provider and their staff may attend a program offered through another provider.</i></p>

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10 W2.0	Independent providers and agency staff receive other training specific to the needs or characteristics of the individual as required to successfully provide services and supports.	<p>Look for evidence that the provider and/or staff assigned to render services and supports to individuals have received some orientation to an individual and their unique characteristics and needs.</p> <p>The family or guardian or other providers or people who are in regular contact with and understand the unique characteristics and needs of the individual can provide this orientation.</p> <p>Examples of this training could include instruction on:</p> <ul style="list-style-type: none"> • Communicating with the individual; • Unique environmental issues for the individual • Unique individual characteristics that provider needs to be aware of in order to render services <p>This training may be one-on-one in nature, and therefore documentation will not take the form of an agenda, or curriculum with handouts and outline. Also look for evidence in the consumer's record, such as in notes or other provider documentation.</p>
11	Proof of required training in recognition of abuse and neglect to include domestic violence and sexual assault, and the required reporting procedures is available for all independent vendors and agency staff.	<ul style="list-style-type: none"> • Review personnel files and other provider training records for evidence of required training. • If applicable, ask staff about the in-service training that they have received. • Training should include prevention, detection and reporting requirements.
C. Service Limits and Times		
12	The provider renders no more than 96 units of this service per day.	<p><i>Note: A unit is defined as a 15 minute time period or portion thereof.</i></p> <p>Review provider claims data, service logs, nursing care plans, daily progress notes, and prescriptions for the service.</p> <p><i>Note: Nursing services can be provided at the same date and time with another service. If services are provided to 2 or more recipients present, the amount of time billed must be prorated between the number of recipients receiving the service.</i></p>

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13	The provider renders services to recipients 21 years of age or older who require active nursing interventions on an ongoing basis.	Review provider claims data, service logs, nursing care plans, daily progress notes and the prescription for the service. Note: Nursing services not available to individuals under the Medicaid State Plan, or which are insufficient in quantity to meet recipient needs, may be paid for by the DD Waiver, if the appropriate qualified professional determines, on behalf of the Agency, that the standards for medical necessity set forth in Chapter 59G-1.010(166)(a), F.A.C., are met.
14	The provider is not rendering private duty nursing services for ongoing medical services and oversight in a licensed residential facility.	Review claims data, provider service logs or other records to determine if an individual resides in a residential facility this service is not being used as a medical oversight mechanism.
15	Provider is authorized to render private duty nursing services.	Review provider records for a service authorization.
16	Provider renders services and supports at a frequency and intensity as defined in the service authorization.	Review provider records for a service authorization and compare these to claims data and the provider's billing documents and service log.
17 NEW	The provider renders services and supports on a one-on-one basis.	<ul style="list-style-type: none"> • Ask the provider about the populations to who they typically render services and supports. • Ask the provider about the individuals they are currently working with and how they schedule activities for these individuals. • Review provider service logs and compare to claims data.
18	Private duty nursing services are provided in the individual's own home or family home.	<ul style="list-style-type: none"> • Interview individuals who received or are receiving services. • Ask where services were received. • Review service logs and other documentation to determine service location.

Cite	Standard	Probes
D. Documentation		
19 R	Provider has at a minimum copies of service logs for the period being reviewed.	<p>Review provider records for service logs.</p> <p>Service logs are to be submitted to the waiver support coordinator on a monthly basis.</p> <p><i>Note: A service log contains the individual's name, social security number, Medicaid ID number, the description of the service, activities, supplies or equipment provided and corresponding procedure code, times and dates service was rendered.</i></p> <p>This Cite is subject to recoupment as reimbursement documentation if not available.</p>
20 R	Provider has at a minimum copies of the nursing care plan (and all revisions) for the period being reviewed.	<p>Review provider records for copies of nursing care plans.</p> <p>This nursing care plan is submitted to the waiver support coordinator at the time of the initial claim and at least annually thereafter.</p> <p>This Cite is subject to recoupment as reimbursement documentation if not available.</p>
21	Provider has at a minimum copies of all daily progress notes.	Review provider records for copies of daily progress notes.
22	The provider has at a minimum the original prescription for this service.	<p>Review provider records for a copy of the original prescription for the service from the physician.</p> <p>A copy of the prescription for the service is submitted to the waiver support coordinator.</p>

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23 R	Provider has at a minimum an individual nursing assessment conducted initially and annually thereafter.	<p>Review provider records for a nursing assessment and updates.</p> <p>The nursing assessment is submitted to the waiver support coordinator at the time of the initial claim and at least annually thereafter.</p> <p><i>Note: Individual Nursing assessment must be completed at time the first claim for reimbursement is submitted</i></p> <p>Cite #24 is subject to recoupment as reimbursement documentation if not available.</p>
24	Independent providers of private duty nursing must demonstrate either verbally or in writing their knowledge, skills and ability to provide the specific care required by the individual, as well as a plan for the care that they provide.	<p>Review provider records for documentation from the individual's physician. This may take the form of a resume or work history.</p> <p><i>Note: Nurses will demonstrate through documentation their knowledge, skills and abilities. Documentation must be provided to the individual's waiver support coordinator before rendering services.</i></p> <p><i>Score this cite as 'Not Applicable' for agency providers.</i></p>
25	Independent providers of private duty nursing have a plan for regular supervision of the care that they provide from the individual's personal physician.	<p>Review provider records for evidence of physician supervision.</p> <p><i>Score this cite as 'Not Applicable' for agency providers.</i></p>

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