



Developmental Services  
**Skilled Nursing**  
 Monitoring Protocol

Skilled nursing is a service prescribed by a physician that consists of part-time or intermittent nursing care provided by registered or licensed practical nurses within the scope of Florida’s Nurse Practice Act.

Cite	Standard	Probes
<p><b>Explanation of Monitoring Tool Symbols/Codes</b></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>A. Service Tasks and Locations</b>		
1	The provider renders skilled nursing services at the individual’s place of residence or other waiver service sites, such as an Adult Day Training program.	<ul style="list-style-type: none"> <li>Review provider service logs or other records to determine where services are being rendered.</li> <li>Interview individual served to determine where services were provided.</li> </ul>
<b>B. Provider Qualifications and Requirements</b>		
<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>		
2  W4.0	Providers of skilled nursing services are independent vendors or employees of licensed home health or hospice agencies that are registered nurses or licensed practical nurses, practicing within the scope of their licenses.	<p>Review Area Office enrollment files for agency licensure.</p> <p>Review provider and agency staff personnel records for job descriptions, qualifications and evidence of current licensure.</p> <ul style="list-style-type: none"> <li>Registered and licensed nurses may provide this service as independent vendors or as employees of licensed home health or hospice agencies.</li> </ul> <p><i>Note: Home health agencies must also be enrolled in the Medicaid Home Health Program and meet Federal Conditions of Participation in accordance with 42 CFR 484.</i></p>

Cite	Standard	Probes
3	Proof of current training and certification is available for all nurses in Cardiopulmonary Resuscitation (CPR).	<ul style="list-style-type: none"> <li>• Independent vendors and agency staff complete this training within 30 days of initially providing services.</li> <li>• Determine if the provider and staff receive retraining according to the requirements established by the sponsoring organization or according to regulations.</li> <li>• Review personnel files and other provider training records for evidence of required CPR training.</li> <li>• Review CPR certificates or CPR training documentation to determine expiration date and need for updated training.</li> </ul> <p><i>Note: A certified trainer must provide CPR training.</i></p>
4	Proof of current training is available for independent vendors and agency staff in AIDS and infection control.	<ul style="list-style-type: none"> <li>• Independent vendors and agency staff complete this training within 30 days of initially providing services.</li> <li>• Determine if the provider and staff receive retraining according to the requirements established by the sponsoring organization or according to regulations.</li> <li>• Review personnel files and other provider training records for evidence of required training.</li> <li>• Infection control may be a separate training or included and documented as part of the AIDS training as “universal precautions.”</li> </ul> <p><i>Note: American Red Cross First Aid Training does not meet the requirements for HIV/AIDS training.</i></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, or providers and their staff may attend a program offered through another provider.</i></p>

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5	The provider attends mandatory meetings and training scheduled by the Area Office and/or Agency.	<p><b>If this is an onsite visit:</b></p> <ul style="list-style-type: none"> <li>• 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.</li> <li>• Ask the provider what Area Office and Agency meetings or training they have attended during the review period.</li> <li>• Ask the provider for any evidence they have to verify attending the meeting or training.</li> </ul> <p><b>If this is a desk review</b></p> <ul style="list-style-type: none"> <li>• 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.</li> </ul> <p><i>Note: If the Area Office has not sponsored any mandatory meetings or training, score this element Not Applicable.</i></p>
6 W2.0	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"> <li>• Fire safety for the environment;</li> <li>• Evacuation procedures in the event of natural or other disasters;</li> <li>• Training on what to do in the event of personal health emergencies involving consumers;</li> <li>• Basic infection control training, e.g., hand washing before and after all contact with consumers.</li> <li>• Identifying and reporting concerns about health, safety and well-being of individuals and the environment in which they are living.</li> </ul> <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>

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7	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"> <li>• Instruction on documentation that is required for reimbursement and monitoring purposes.</li> </ul> <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 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"> <li>• The rights of individuals in the program and how the provider respects these rights;</li> <li>• Maintaining confidentiality of consumer information;</li> <li>• Offering individual's choice of services and supports;</li> <li>• Recognizing and reporting of suspected abuse, neglect or exploitation;</li> <li>• Rendering services in an ethical manner.</li> </ul> <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 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"> <li>• Specifics of rendering services and supports;</li> <li>• Service limitations;</li> <li>• Service documentation requirements; and</li> <li>• Billing for services.</li> </ul> <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>
10	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"> <li>• Rendering services and supports in accordance with the service authorization.</li> <li>• Respecting the wishes of individuals as it relates to the services and supports being provided.</li> <li>• Use of Personal Outcomes Measures, or another person-centered planning approach.</li> <li>• Individualizing service delivery methods.</li> </ul> <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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11 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"> <li>• Communicating with the individual;</li> <li>• Unique environmental issues for the individual</li> <li>• Unique individual characteristics that provider needs to be aware of in order to render services</li> </ul> <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>
12	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"> <li>• Review personnel files and other provider training records for evidence of required training.</li> <li>• If applicable, ask staff about the in-service training that they have received.</li> <li>• Training should include prevention, detection and reporting requirements.</li> </ul>
<b>C. Services Limits and Times</b>		
13	The provider renders no more than 32 units of this service per day.	<p><i>Note: A unit is defined as a 15 minute time period or portion thereof.</i> <i>This service may be provided at the same time and date with another service.</i></p> <p>Review claims data, provider service logs and other records to determine limits are being observed.</p>
14	The provider renders services to recipients 21 years of age or younger with complex medical needs.	Review claims data, provider service logs and other records to determine limits are being observed.
15	The provider is not rendering skilled nursing services for ongoing medical oversight and monitoring of direct care staff or caregivers in a licensed residential facility or in the recipients own or family home.	Review claims data, provider service logs or other records to determine if an individual resides in a licensed residential facility, own home or family home this service is not being used as medical oversight.

Cite	Standard	Probes
16	Provider is authorized to render skilled nursing services.	Review provider records for a service authorization.
17	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.
<b>D. Documentation</b>		
18 R	Provider has at a minimum copies of the service logs for the period being reviewed.	<p>Onsite review: Interactively with the provider review a sample of records for the content noted in the standards.</p> <p>Desk review: If available, review any records supplied by the provider for the content noted in the standards.</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><b>This Cite is subject to recoupment as reimbursement documentation if not available.</b></p>
19 R	Provider has at a minimum copies of all nursing care plans (and 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><b>This Cite is subject to recoupment as reimbursement documentation if not available.</b></p>
20 W2.0	Provider has at a minimum daily progress notes (or case notes) for the period being reviewed.	Review provider records for copies of daily progress notes.
21	The provider has at a minimum the original prescription for the service.	<p>Review provider records for a copy of the original physician prescription for the service.</p> <p>A copy of the prescription for the service is submitted to the waiver support coordinator.</p>

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22 R	The 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><i>Note: Individual nursing assessment must be completed at the time of the first billing.</i></p> <p>The nursing assessment is submitted to the waiver support coordinator at the time of the initial claim.</p> <p><b>This Cite is subject to recoupment as reimbursement documentation if not available.</b></p>

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