

Nursing Services Guide

Nursing services are to provide medically necessary services to individuals with documented medical needs. These services will be provided where they are needed, whether in the home or in the person's day activity setting.

All requests for nursing services are built into an individual's existing cost plan. Any requests for nursing services that are under \$2000 per fiscal year must be approved through the Regional Manager. Any services above \$2000 for an acute need or above \$2000 per fiscal year for ongoing care will need approval through the Medical Director.

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- ✓ This form must be used for all nursing service requests within the current fiscal year.
 - ✓ When providing supporting documentation, attach information as a separate document or copy and paste into this document.
 - ✓ Documentation must show exactly what services the nurse is providing, why a nurse is needed to perform those services, and how much time it takes to provide those services.
 - ✓ All requests must include the amount, frequency, and duration of the nursing services. *Example: 2 hours per week x 1 year*
 - ✓ All request must include the total amount of funds needed on a short-term basis or the amount required for ongoing services over the fiscal year.
 - ✓ All requests for approval must be sent to a Regional Manager and must be submitted electronically. If sent through regular email, only include the AWACS ID and omit the individual's name for HIPPA compliance.
 - ✓ All nursing services that exceed \$2000 for an acute need must be forwarded by the Regional Manager to DDP Central Office for final review by the Medical Director.
 - ✓ Annualized nursing services that exceed \$2000/fiscal year must be forwarded by the Regional Manager to DDP Central Office for final review by the Medical Director.
 - ✓ Annualized requests must be reviewed yearly as needs may change.
 - ✓ When the Nursing Service Request Form is completed, print and include with the Plan of Care as supporting documentation for monitoring purposes.

Nursing services must be specified in the plan of care and must be ordered in writing by the person's medical provider (physician, APRN or PA) The services must be delivered by a registered nurse (RN) or licensed practical nurse (LPN).

Skilled nursing services can include:

- Medications:
 - Administration of medications via PEG or J-tube
 - Administration of medications through a PEG can be performed by medication certified DSP's who meet training requirements.
 - Administration of medications by subcutaneous, intramuscular or intravenous route
 - Calculation of medication doses (such as sliding scale insulin)
 - Drawing up medication into syringes
- Skin/wound care
 - Application of dressings involving prescription medications and aseptic techniques
 - Care of extensive decubitus ulcers or other widespread skin disorders
 - Post-operative wounds where there are complications such as an infection or allergic reaction or where there is an underlying disease that affects wound healing such as diabetes.
 - Open and complex wounds that require skilled treatment that can only be provided safely and effectively by a nurse.
- Training/teaching
 - Training the person self-administration skills for inhalers or other medical gases (such as medicine given through a nebulizer) and teaching staff how to assist with this if needed.
 - Training staff and patient how to care for a recent colostomy or ileostomy or suprapubic catheter.
 - Teaching patients how to perform self-catheterization
 - Training staff and patients on the proper use and care of braces, splints and orthotics and any associated skin care
 - Teaching specific/specialized techniques for feeding, transferring, and positioning.
 - Training staff on specific dietary needs such as therapeutic diets, carbohydrate counting, etc.
- Observation and assessment
 - Assessment of persons with conditions such as congestive heart failure, diabetes, seizure disorders, etc to identify signs of decompensation or exacerbations of the condition, or adverse effects of medications especially when there have been recent medication changes. These are allowed on a very minimal basis for specific issues which must be thoroughly documented.
 - Assessment of persons who have had a recent surgical procedure for the development of such complications as pneumonia, vascular problems (decreased blood perfusion or clot formation) and skin breakdown and to help determine adequate pain management.
 - Ongoing assessment of persons (on a limited basis) with recurrent medical problems such as bowel obstructions, decubitus ulcers, etc to identify and evaluate the person's need for possible modifications of treatment.
- Other
 - Deep naso-pharyngeal or tracheotomy suctioning
 - Insertion and replacement of catheters and sterile irrigations