

REQUEST FOR CLARIFICATION/INTERPRETATION

TO:	Name and Title: Jannis Conselyea	FROM:	Name and Title: Paula Sherwood, Quality Improvement Specialist
	Organizational Unit: Developmental Disabilities Program		Organizational Unit: Developmental Disabilities Program, Region V
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1. TYPE OF REQUEST: Follow-up to Verbal Request - Date of Verbal Request: Written Request

2. STATEMENT OF QUESTION OR ISSUE: **Requirement of medication administration certification of respite workers hired through fiscal agencies such as Acumen.**

1. Are respite providers who are employed by families through a fiscal agency such as Acumen required to become med-certified if they are providing assistance/supervision with medication administration to individuals receiving DDP services?
2. If so, must there be a doctor's order for any Over the Counter medications with which the Respite worker is assisting and supervising?
3. Must there also be a PRN protocol in place for any PRN medications with the Respite worker is assisting and supervising?
4. Must there be an objective in the individual's IFSP/PSP regarding training for self-medication and/or any PRN protocols?

3. ANSWER:

1. No, Respite workers employed by families through a fiscal agency are not required to be med-certified.
2. No, a doctor's order for over the counter medications with which Respite workers assist with is not necessary.
3. No, a PRN protocol is not required.
4. No, an objective is not required in the plan of care.

References:

Approved and Issued by: _____
DSD Administrator

Date: _____

STATE USE ONLY	4: DISTRIBUTION: One Copy: Requestor One Copy: Manual Coordinator One Copy: Division Files Additional Copies: <input type="checkbox"/> to_	5: FOLLOW-UP: <input type="checkbox"/> To be issued as Bulletin to _____ (Division Administrator) Manual. Expected Date of Issuance: <input type="checkbox"/> A.R.M. Change <input type="checkbox"/> State Plan Change
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