

## February PCS 2019 Inservice

### Topics

**PCS books**-Are always to be in the home and easily accessible. They should also have previous and current progress notes in them. This is mandatory by Medicaid and in our policy. If they are not please call the office Immediately so we can fix that. When Medicaid comes to the clients home, they should see your current progress notes for the week, past yellow copies of cares provided, care plan, Medicaid documents, policies and procedures with consents. Remember the state goes out and reads files yearly if not two times a year. They have found people doing things that are not on the plan of care and we have to go back and fix the time or pay back even though we have paid you.

**Charting**- Writing time in correct spots PCS vs Homemaking. Care plans are in EVERY home. Please go off the time in the upper right-hand corner. That is the time you should use so you don't go over by the end of the month. If someone has 3hrs of PCS and 1hr of HMK but you do laundry and meal prep and shopping in one day, you can NOT mark all your hours under HMK or you will go over. This is all that is allowed a day and is set by Medicaid. If you go over, we cannot pay you and we do not get paid. **We will no longer be calling you when mistakes are being made, it just won't get billed and you won't get paid till its done correctly. If you run out of hours by the end of the month for incorrect charting it will not be paid.**

**Please** call if you feel you might go over hours. Janice will let you know how many hours you have in each section if you want to call towards the end of the month. Please for Sanity

purpose do not call on Mondays



**Documentation at each visit**- Client needs to initial and review daily. Each day you are at the clients home you should write a small note. *Example-fixed meals, cleaned, patient steady on feet today.*

*Example-Bathed patient very SOB, needed extra assistance on getting out of chair, cleaned fixed meals, client a little confused today compared to last time was here.*

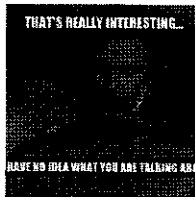
*Example- all cares done according to Care plan no complaints.*

*Example-Patient wanted me to wash walls and clean out her ears, explained why I couldn't and referred her to PCS coordinator and her Medicaid nurse, refused me to assist with toileting, all other cares done according to plan.*

*Examples-patient told me not to remind him of medications daily, explained was on his care plan, refer him to Medicaid nurse.*

It is very important to document the atmosphere in the home, how client is doing, and what you did. Can be short and simple. If nothing is documented, it did not happen! This helps us at the office when clients want to complain, when the Medicaid nurse goes out to review their file and there is a change in hours either up or down. **It is also very important to only chart what is approved.** If the plan of care says NA on mobility DO NOT mark it.

**Calling in sick or Changing times- NEW POLICY** This is going to be a new policy this year. If you normally work Monday, Tuesday, Thursday, and Friday and one week you or a child is sick and you have to miss a day or exchange a day you need to text the Helping hand cell phone which is 208-681-4236 and explain why you are missing the day and if you are making it up and if your client has been notified. Or you may call the office and Speak to Amy Smith, Janice Curtis, or Amy Wolfe. Please do not call the office before 8, that will go to the nurse on call who has no



idea what you are talking about.

**Complaint Log-**Starting January 2019 we have been keeping complaint logs in client's folders as well as the complaint log. These are to help determine if we are good fit for the client and how the aides are doing as well. Please if you have a complaint about a client lets address it before you get over whelmed. I would like notes of a difficult patient on progress notes. If you do not feel comfortable doing this write on a paper so we can put in their file. If I get complaints about an aide, I will address every complaint with the appropriate caregiver if needed. I do

understand not everyone is a fit for us, but we would like to keep our reputation as professional and caring.

Remember you should be polite and tactful and you should be treated tactful and respectful. Cell phones should be kept on silent or vibrate and only use during an emergency.

I have also received a few complaints from Medicaid nurse and from Paula who is charge on negligence. She finds we are CHARTING we are cleaning daily but she can see cob webs and dust on furniture. Please read care plan on what the client needs help with regarding cleaning. If you find you are having to do more, please document and let me know so we can do a change or talk to client. We do not do deep cleaning examples Washing walls, curtains, cleaning out cupboard's animals' feces, shoveling snow, pulling weeds, mowing lawns. Also, a lot of complaints about aides being on your phone. THIS SHOULD NOT BE HAPPENING UNLESS AN EMERGENCY OR YOU ARE BREAK AND HAVE TOLD CLIENT.

### **Confidentially/Non-compete clause**

### **Attendant Care**

### **Harassment**

Aides reading this online would just like to remind you sexual or verbal harassment is not tolerated. If you have a client or clients friend/family doing so report it immediately. Also you should not talk about another client with another client friend or family. No exceptions.

## **Things to come in FUTURE**

### **Electronic Charting mandated by Medicaid**

**Going to all Clients home to ensure policy is being followed.**

**Treat day/Drawing for gifts???? Do you guys want dishwashing gloves for the homes a set for kitchen and a set for bathroom? WHAT WILL HELP YOU**

**Does anyone have any questions, complaints, ideas to make things better or how to get more aides?**

**Quiz If you do not receive a 100% you are required to call or come in the office to go over the test.**

1. It is ok to take my current week progress note home if I know I am returning to client's home in the morning?
  - a. Yes, this is ok as long as I leave the yellow copy at the end of the week.
  - b. No, I should leave my current progress note in the home, this is required by Health and Welfare.
  - c. Yes, only the yellow copy has to stay in the home after my work week is completed.
  - d. None of these answers are correct
2. What should I find in clients PCS binder?
  - a. Consents, POC, living will, unit hours, Medicaid's Plan of care and nurse evaluation.
  - b. Just must have plan of care and past yellow copies of progress notes.
  - c. Consents, Rights and responsibilities, living will, Medicaid nurse evaluation from Medicaid and helping hands, POC, monthly hours,
  - d. Consents, Plan of care, monthly hours
3. When are your progress notes due?
  - a. When I get around to it.
  - b. As long its before pay day I am good.
  - c. By 4pm Every Monday
  - d. Between Monday and Tuesday of each week, only matters to be there by 4pm on Monday the week of payroll
4. Monthly in services are due each month, failure to complete them may result in a loss of hours until completed?
  - a. True
  - b. False
5. What is the MAX amount of PCS hours that can be billed a week?
  - a. Depends on care plan
  - b. 16
  - c. 20
  - d. I didn't know there was a max
6. Should I wash my hands when entering each home and before I leave?
  - a. True
  - b. False

Here is a Plan of Care, please use to answer the following Questions using the below care plan.

PCS Helping Hands 2785 Bannock Hwy ID. 93204 208-232-2009

## PLAN OF CARE

Client Name: [REDACTED]  
 Address: [REDACTED]  
 Telephone: [REDACTED]

Daily Hours PCS/ATT: 2 Hrs  
 Daily Hours Homemaker: 1 Hr  
 Daily Hours Comp/Respite: 0  
 15 Minutes = .25 (1/4 hour)  
 30 Minutes = .50 hour (1/2 Hrs)  
 45 Minutes = .75 hour (3/4 Hrs)  
 60 Minutes = 1 hour  
 Monthly PCS/ATT Hrs = 47.50 Hrs  
 Monthly WK/HMK Hrs = 26.50 Hrs  
 Monthly Resp/Comp Hrs = 0

Review Date: 12/07/2018  
 Redet Date: 12/06/2019

\*\*\*SIGNIFICANT CHANGE EFF 1/9/2019\*\*\*

SERVICES:	Remarks	Freq	SUN	MON	TUE	WED	THUR	FRI	SAT
<b>PCS/Attendant</b>									
1. Eating Meals/Feeding	Aide to help as needed with cutting up items at times or set up of meals. Client for the most part can get meals and drinks.	Daily PRN		X	X	X	X	X	
2. Toileting	NO AUTHORIZED UNITS	NA							
3. Mobility	NO AUTHORIZED UNITS	NA							
4. Transferring/turn position	NO AUTHORIZED UNITS	NA							
5. Personal Hygiene	Aide to help remind daily for personal hygiene and monitor. Client has a hard time seeing and due to brain damage from drugs needs reminded. Assist with diabetic foot care - may need to see podiatrist.	Daily		X	X	X	X	X	
6. Dressing	Aide to help as needed to remind to change clothes. Due to mental health issues patient forgets.	Daily PRN		X	X	X	X	X	
7. Bathing	Aide to SBA as needed in the shower. Due to being partially blind client has a hard time finding items. Prompt to complete tasks.	WEEKLY		3-4 x	WEEK				
8. Medication Reminders ***SC***	Aide to remind daily to take medications. Client currently has home health filling his med boxes. Medication is important to stay on track for client's mental health. ***SC*** RN UNITS AUTHORIZED FOR WEEKLY MED BOX SET UP ***	Daily		X	X	X	X	X	
9. Supervision	Aide to help as needed. Does have a lawyer to help pay bills. May need aide to help remind him of appointments. Client has mental health services through Hope Tree.	Daily PRN		X	X	X	X	X	
10. Arrange Transportation	NO AUTHORIZED UNITS	NA							
11. Emergency Response	NO AUTHORIZED UNITS	NA							

Homemaker									
1. Meal Preparation	Aide to help daily prepare meals. Client forgets or gets side-tracked and can leave stove on. Is blind in one eye and has difficulty using microwave and stove. Can make simple items.	Daily		X	X	X	X	X	
2. Shopping	Aide to assist as needed. Client gets disoriented in grocery store due to partial blindness and mental health issues needs help staying on track.	WEEKLY			PRN				
3. Laundry	Aide to help with laundry. Laundry needs to be taken to the laundromat. Needs help gathering, washing/drying and putting away due to blindness and mental health.	WEEKLY		1-2 x	WEEK				
4. House Cleaning	Aide to help with cleaning. Client has a hard time staying focused and seeing to clean. Client to help as he can.	Daily		X	X	X	X	X	
General Information	Hx of multiple psychiatric admissions. SPECIAL EQUIPMENT: Hearing aids, med boxes, pacemaker.								
Community Supports/Behavior Management	Community Supports/Behavior Management: Church occasionally, trying to get meals on wheels. Receives mental health services through Hope Trees.								
Goals Outcomes	GOALS: Establish care with heart doctor. Doesn't want another heart attack.				OUTCOMES: Feel comfortable and safe.				
	HEALTH AND SAFETY RISKS: Due to mental health issues, recent heart attack and living alone client is a high risk for another heart attack due to anxiety.				INTERVENTION: Trying to get scheduled needs and help for anxiety.				
Backup Plan	I will accept a substitute caregiver if my caregiver is not available				YES				
	I will use informal supports if my caregiver is not available:				NO				
	[REDACTED]				[REDACTED]				
	Communication Plan: No family, some friends help when possible. <b>SEE BACK UP PLAN ON BACK OF CLIENT FOLDER</b>								

I consent to services provided by Helping Hands Home Health Staff. Homemakers may perform only those duties specified above.

7. How many hours a week do I have for PCS service with no attendant care.
  - a. 3
  - b. 2
  - c. 10
  - d. 20
  
8. I can take my client to the doctor's office?
  - a. True
  - b. False

9. Its Friday and I have used 8 hours of PCS and 5 of Homemaking. I work 3 hours a day, what is ok to work today.

- a. I will work 3 hours and mark all on PCS, I am out of homemaking hours.
- b. I will work 2 hours PCS and 1 on Homemaking, Janice will just fix at the office and tell Medicaid to give me more hours for this day.
- c. I will only work 2 hours today and can only mark on PCS side.
- d. I will work 2 hours and mark 1 hours for PCS and 1 for homemaking.

PLEASE USE PROGRESS NOTE FOR FOLLOING QUESTIONS

DATE	1-7	1-8	1-9	1-10	1-11
<b>PCS/ATTENDANT CARE</b>					
Feeding/Eating Meals	X	X	X	X	X
Toileting					
Mobility		X		X	
Transfer/Turn Position					
Personal Hygiene	X	X	X	X	X
Dressing	X	X	X	X	X
Bathing	X	X	X	X	X
Medication Reminder	X	X	X	X	X
Supervision	X	X	X	X	X
Arrange Transportation					
Emergency Response					
TIME IN:	7:00 AM	7:00 AM	7:00 AM	7:00 AM	7:00 AM
TIME OUT:	3:00 PM	3:00 PM	3:00 PM	3:00 PM	3:00 PM
<b>HOMEMAKER</b>					
Meal Preparation	X	X	X	X	X
Grocery Shopping	X	X	X	X	X
Laundry	X	X	X	X	X
House Cleaning	X	X	X	X	X
TIME IN:	8:00 AM	8:00 AM	8:00 AM	8:00 AM	8:00 AM
TIME OUT:	10:00 AM	10:00 AM	10:00 AM	10:00 AM	10:00 AM
<b>COMPANION/RESPIRE</b>					
TIME IN:					
TIME OUT:					
Client Initials:					
<b>NOTES AND OBSERVATIONS</b>					
Date/Times: 1-7 through 1-11 Richards Donna Haskley Has not on arms mid what made hand fixed and not him self He got New Braces for knee and its help big it alot. Hes doing great Now.					

10. Using this progress note and the care plan above what is wrong with this progress note?

- a. Nothing, it is correct.
- b. Missing patients initials and Homemaking and PCS hours are wrong.
- c. Missing patients' initials, homemaking and PCS hours are incorrect, but does not have mobility on his care plan, should not have a check mark.

**d. Missing patients' initials, homemaking and PCS hours are incorrect, but does not have mobility on his care plan, should not have a check mark, also should have a refusal on why didn't shower another time during the week**

**11. According to care plan above, I should only be dusting and vacuuming.**

**a. True**

**b. False**