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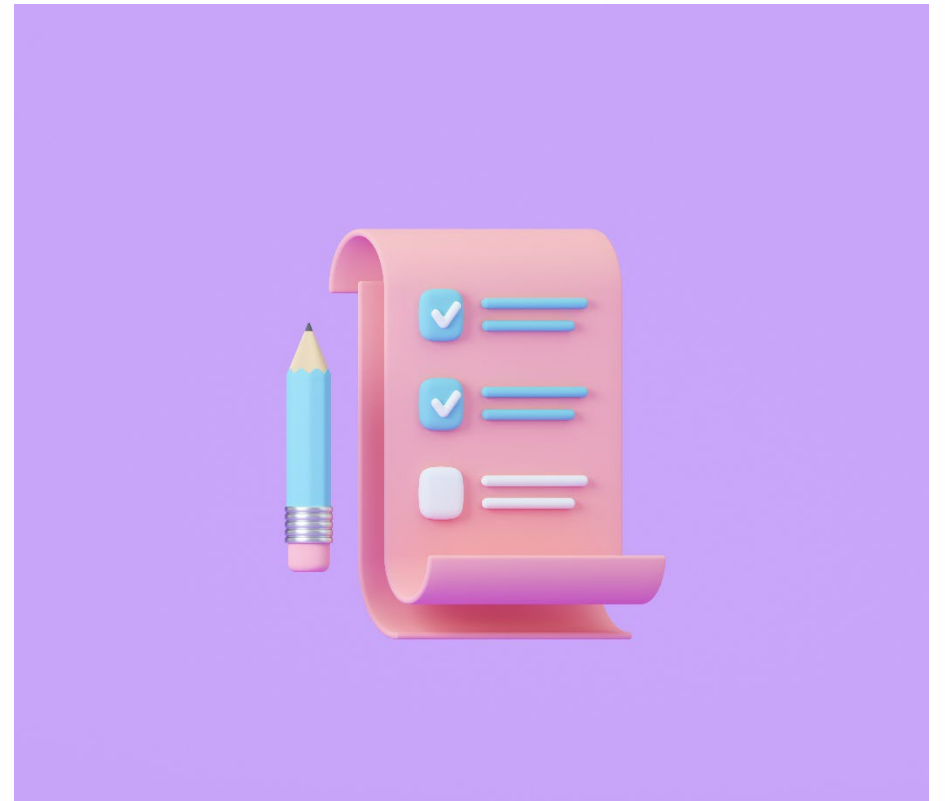
# RND Contractor Meeting

**April 19th, 2023**

# Agenda

- Welcome
- PHE ending
- Audit process and CAP
- Documentation
- Wound Care
- LTCW Training and Verification update
- Available Contractor
- Coverage for vacation
- Nursing Pool update (pending clarification)
- Closing comments and questions

**\*\* Please keep your microphones on mute unless asked to unmute for comments. Cameras on can interfere with your connection if you are having problems. You can use the chat box for questions or raise your hand to be called on. Be respectful of others and wait your turn to be called on. Thank you!**



# PHE ending updates - PHE Coming to an End May 11, 2023

1. There has been a lot of questions from field staff of RCS and HCS regarding nurses continuing to do remote visits.
  - The guidance from the NCQAC is in an Advisory Opinion and the rules need to be followed for Telehealth – <https://nursing.wa.gov/sites/default/files/2022-07/NCAO25.pdf>

Nurse delegation is Telehealth if you are choosing to do remote services. HIPAA guidelines must be followed.

The Biden administration has announced that the COVID-19 public health emergency (PHE) will end on May 11, 2023.

Although many of the waivers introduced during the pandemic will stay in place through December 21, 2024, two waivers will immediately go away. The [HIPAA notification of enforcement discretion](#) during PHE will end, as will the prescribing of controlled substances to patients for whom prescribers have not conducted an in-person medical evaluation.

<https://www.cms.gov/Regulations-and-Guidance/Administrative-Simplification/HIPAA-ACA/AreYouaCoveredEntity>

# Audit Process and information

Administrative Policy 13.16 requires that all contracts for services meet performance-based contracting standards, therefore the RNDPM utilizes the Performance-Based Contracts Checklist to fulfill the Department's goal to achieve more than minimal compliance. The RNDPM supplements monitoring activities with the Quality Assurance Unit (QA) Guidelines for Nurse Delegation-specific auditing.

## Per Nurse Delegation Contract:

**5. File Audit** – The Chart audit process is for compliance purposes to comply with State regulation and the terms and conditions of AL TSA/DDA Nurse Delegation contracts. Findings may be used to identify training needs for the Nurse Delegation Program.

b. The contracted nurse will receive one of two letters with the chart and audit findings. **Deficiency Free or Results and Follow up Needed.**

c. The complete Nurse Delegation Quality Assurance file audit process can be found at:

<https://www.dshs.wa.gov/sites/default/files/AL TSA/hcs/documents/ND/ND%20file%20audit.pdf>

**\*\*This is under review for the process and a modified audit is being conducted to assess where we are at and what improvement and processes can be updated.**

**17. State or Federal Audit Requests.** The Contractor is required to respond to State or Federal audit requests for records or documentation, within the timeframe provided by the requestor. The Contractor must provide all records requested to either State or Federal agency staff or their designees.

# Current Audit:



## Steps:

1. HCS QA team is sending initial letter and gathering the documentation for review. When the documents are received and filed the QA team reviews and completes the checklist of what is deficient or not.
2. QA then notifies Program Manager for program review and follow up email. At this point you will receive another email that either is an Audit complete or Corrective Action Plan is required. You will be given a deadline for the CAP response with each email. **YOU MUST RESPOND TO THIS WHEN A FOLLOW UP IS REQUIRED.**
3. PM will review the plan and do 1 of 2 actions:
  - a. Accept the action plan and place in file
  - b. Send final email notifying the Contractor that Audit is complete.

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*\* Please be aware the program has limited staff and the return process from the time of documents sent and the follow up letter will not be quick. There is a lot to review and most of it is currently done by myself and Alia. We also have the rest of the program management to tend to. Thank you for your patience.*

# Documentation standards per ND Contract

**Special Terms and Conditions of Contract starts references to documentation on PAGE 14**

## **d. Documentation**

The contractor shall: page 15

(1) Complete and maintain copies of all Nurse Delegation clinical and billing records documenting services provided. Records shall be kept on file by the Contractor for a period of six (6) years and shall be available upon request to ALTSA for purposes of general audit and service verification.

(2) Confirm all Nurse Delegation activities performed under the contract are documented in the client's record and shall be located at the client's place of residence. The RND shall retain a duplicate copy of all documented activities.

(a) Nurse Delegation activities, shall include but are not limited to:

i. Assessment

ii. Documentation Teaching/Training Instructions

iii. Skin Observation Protocol

iv. Credentials Verification, Medications

v. Referrals

vi. Consents, and

vii. Assumption and Rescinding of clients/caseload

## Documentation cont.

(3) All DSHS contracted nurse delegators must use DSHS mandatory Nurse Delegation forms located at <http://www.dshs.wa.gov/altsa/residential-care-services/nurse-delegation-forms>

### 7. Billing and Payment page 16

g. The Contractor shall bill DSHS for services and travel time in 15-minute increments. The Contract shall specify the number of units **by use of a tracking record** DSHS shall pay the Contractor for authorized services according to the AL TSA fee schedule published by the Office of Rates Management.

\*Currently no set form for tracking but please make it legible and easy to follow for tracking service, date, and time.



# Wound Care

I have had many questions for several entities regarding wound care and delegation. Here is some resources for choosing to delegate or not:

**WAC 246-840-920 – Definitions** <https://apps.leg.wa.gov/WAC/default.aspx?cite=246-840-920>

(3) "Complex task" means that a nursing task may become more complicated because of:

- (a) The patient's condition;
- (b) The setting;
- (c) The nursing care task(s) and involved risks; and
- (d) The skill level required to perform the task.

(10) "Outcome" means the end result or consequence of an action after following a plan of care.

(15) "Stable and predictable condition" means the registered nurse delegator determines the patient's clinical and behavioral status is nonfluctuating and consistent. Stable and predictable may include a terminally ill patient whose deteriorating condition is expected. Stable and predictable may include a patient with sliding scale insulin orders. The registered nurse delegator determines the patient does not require frequent nursing presence and evaluation.

**WAC 246-840-940 – Decision Tree** <https://apps.leg.wa.gov/WAC/default.aspx?cite=246-840-940>

Washington state nursing care quality assurance commission community-based and in-home care setting delegation decision tree.



# Training Verification

WAC 246-840-930 Criteria For Delegation

8)

(c) Has evidence as required by the department of social and health services of successful completion of nurse delegation core training;

d) Has evidence as required by the department of social and health services of successful completion of nurse delegation special focus on diabetes training when providing insulin injections to a diabetic client; and

This evidence can be a certificate or a transcript from an accredited education source.

Washington State Certificate / Registration Number for \_\_\_\_\_

NAR     NAC     HCA – C    Expiration Date: \_\_\_\_\_

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**3. Training Verification**

NAR	NAC and HCA-C
<p><b>Non-exempt LTCW</b> (employed after January 7, 2012 (HCS) and January 1, 2016 (DDA)):</p> <p><input type="checkbox"/> 9 hour ND for nursing assistants                      Date: _____</p> <p><input type="checkbox"/> 3 hour special focus on diabetes                              Date: _____</p> <p><b>Basic training:</b></p> <p><input checked="" type="checkbox"/> HCS – 40 hours basic training                              Date: _____</p> <p><input type="checkbox"/> DDA – 40 hour CORE basic                                      Date: _____</p> <p><b>Exempt LTCW</b> (employed one day from January 1, 2011 – January 6, 2012 (HCS) or employed prior to January 1, 2016 (DDA)):</p> <p><input type="checkbox"/> 9 hour ND for nursing assistants                      Date: _____</p> <p><input type="checkbox"/> 3 hour special focus on diabetes                              Date: _____</p> <p><b>Basic training:</b></p> <p><input type="checkbox"/> HCS – Fundamentals of Care (FOC)                              Date: _____</p> <p><input type="checkbox"/> HCS – Revised Fundamentals of Care (RFOC)                      Date: _____</p> <p><input type="checkbox"/> DDA – 32 hour letter    Date: _____</p>	<p><input type="checkbox"/> 9 hour ND for nursing assistants                      Date: _____</p> <p><input checked="" type="checkbox"/> 3 hour special focus on diabetes                              Date: _____</p>

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**4. Exempt Long Term Care Workers**

The HCS LTCW employed one day between **January 1, 2011 and January 6, 2012** and the DDA LTCW employed any time prior to **January 1, 2016** should have a letter from the employer who employed them stating they have completed the basic training requirements in effect on the date of his or her hire. The Registered Nurse Delegator must obtain proof of employment prior to delegation of an exempt LTCW.

Letter of employment verification type: \_\_\_\_\_ Date of verification: \_\_\_\_\_

F. Notes

# LTCW Training Updates

## Training and Certification Deadlines

Worker hired or rehired during the time frame of:	Must complete basic training no later than:	Must be certified no later than:
8/17/2019 to 9/30/2020	1/31/2023	5/31/2023
10/1/2020 to 4/30/2021	4/30/2023	8/28/2023
5/1/2022 to 3/31/2022	7/31/2023	11/27/2023
4/1/2022 to 9/30/2022	10/31/2023	2/27/2024
10/1/2022 to 6/30/2023	11/30/2023	3/28/2024
Beginning 7/1/2023	Standard Training Requirements - 120 days from hire date	Standard certification requirements - 200 days from hire date

## Available Contractors/Tasks

AL TSA and DDA are putting together a tool to try and keep updates on contractors that are open to new clients and what tasks you are willing to delegate.

For example: complex clients and children, tracheostomy care, cough assist, suction,

Please send an email if you haven't already with:

- a) Contact information
- b) Skills willing to delegate
- c) Counties available in
- d) Which settings HCS/AAA/DDA or all.

[NURSEDELEGATION@DSHS.WA.GOV](mailto:NURSEDELEGATION@DSHS.WA.GOV)

# Vacation Coverage

## To help clarify how you can take a vacation:

With Medicaid reimbursement you cannot get paid for time you do not spend doing the activity.

Contract: page 16 -

d. DSHS shall not pay the Contractor for cancelled or missed appointments, nor for scheduled hours of service when clients are not seen or served by the Contractor.

Page 2 - Definitions

e. “Contractor” means the individual or entity performing services pursuant to this Contract and includes the Contractor’s owners, members, officers, directors, partners, employees, and/or agents, unless otherwise stated in this Contract. For purposes of any permitted Subcontract, “Contractor” includes any Subcontractor and its owners, members, officers, directors, partners, employees, and/or agents.

**Suggestion** – If you are working with another contracted RN to help cover your clients if you are unavailable, you should email the client CM and the PM to state who is assisting you. The client/authorized representative is also required to be notified as it is a client right to have a choice in care providers. If the situation arises that the covering contractor provides services, the CM can then authorize that Contractor to provide the service for the billing purposes.

# Nursing Pool Registration

➤ Nursing Pool Registration does not qualify you for a Nurse Delegation business – this is a **current discussion** with Department of Health, Program Management and the Attorney's for each Department regarding getting more clarification.

➤ Per RCW Nursing Pool definition does not match the Nurse delegation services:  
<https://app.leg.wa.gov/RCW/default.aspx?cite=18.52C.020>

(4) "Nursing pool" means any person engaged in the business of providing, procuring, or referring health care or long-term care personnel for temporary employment in health care facilities, such as licensed nurses or practical nurses, nursing assistants, and chore service providers. "Nursing pool" does not include an individual who only engages in providing his or her own services. *\*Please review the RCW and WAC*

➤ <https://app.leg.wa.gov/WAC/default.aspx?cite=246-845-050>

**\*More information will be distributed as we get it. I will keep everyone informed as we receive clarity.**

Currently, if you are in the process or deciding about getting a Nursing Pool Registration because someone told you that is what you needed to have RN employees, this is not the recommendation from the department.

**\*\*Nursing Pool Registration is not considered a license.**

# Meeting Dates and Times **\*\* Please mark your calendar**

**2023 -**

**June 21st 10:00AM**

**August 16th 1:00PM**

**October 18th 10:00AM**

**December 13th 1:00PM**



# Thank you for attending

Meeting notes will be posted NEXT week to:

<https://www.dshs.wa.gov/altsa/residential-care-services/nurse-delegation-program>

For Delegation questions email:

Janet Wakefield ND Program Manager

[nursedelegation@dshs.wa.gov](mailto:nursedelegation@dshs.wa.gov)

For DDA client questions email:

[Erika.Parada@dshs.wa.gov](mailto:Erika.Parada@dshs.wa.gov)

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