

Registered professional nurse supervision of unlicensed direct support professionals in programs approved by the Office for People With Developmental Disabilities (in certain **NON-certified** sites)

Policies and Procedures Necessary for Issuance of an Operating Certificate

Policy	Content	Compare to Existing Regulation / ADM
Emergency Procedures	Policy establishes the plan for addressing life threatening situations. Policy must empower staff to call 911 without supervisor approval for life-threatening emergencies. Define life threatening emergencies.	633.10
Ready to Go Form	Policy establishes the plan for access to emergency medical information by staff in the service recipient's home.	RTG form
CPR	Policy establishes the plan for addressing life threatening situations /availability of CPR for service recipients found unresponsive and not breathing. Policy clarifies if staff are trained by the agency, then they are expected to perform CPR.	633.10
First Aid Training	Policy establishes the plan for provision of first aid. If not trained in first aid, staff must be trained in calling 911 for emergencies or reporting health concerns. If trained in first aid by the agency, staff are expected to perform as trained.	633.10
Professional Nursing Availability	<p>Policy establishes the availability of a Registered Nurse 24 hours / 7 days a week.</p> <p>The following procedures should be established:</p> <ul style="list-style-type: none"> • use of the after-hours service, • RN telephone triage expectations, • training for reporting health changes, concerns and errors 	MOU 2003-01

	<ul style="list-style-type: none"> • training for reporting appointment results and medication/diet/medical order changes • reporting refusal of plan of care service 	
Infection Control	<p>Policy establishes infection control procedures related to the following:</p> <ul style="list-style-type: none"> • Hand-washing procedures • Storage and cleanliness of health care bag/supplies (equipment/supplies crossing settings) and DSP personal property in the home setting • BBP exposure control plan /reporting procedures including Sharps disposal procedures. Hepatitis B vaccination offered free of charge. • Reporting procedures for exposure to communicable disease in the individual's home. • TB testing requirements • Obtaining gloves and other PPE necessary for performance of duties 	<p>Exposure control plan</p> <p>OSHA</p> <p>TB 633.14</p>
RN Caseload	Policy establishes RN caseload maximum.	2015-03
RN Home Visits	<p>Policy establishes visit frequency.</p> <p>Policy would further define the time-frame for RN home visit following hospital discharge.</p>	2015-03
RN Plans of Nursing Service (the plan of care)	<p>Policy establishes that Plans of Nursing Service are written, staff trained, and plans reviewed annually and as needed.</p> <p>Plans address medical conditions, give step by step directions in the completion of nursing skills delegated.</p> <p>Procedures would be established for communicating and training new and short term NPOS in a timely manner.</p>	<p>2003-01</p> <p>2015-03</p>
RN Supervision of DSPs	Policy establishes the frequency of supervision of DSPs in tasks delegated, onsite training, and review of the Plans of Nursing Services (PONS) with staff.	

	Procedures would be established for RN communicating and rectifying performance concerns.	
Self-Administration of Medication	Policy establishes the process for annual self-medication administration assessment. The assessment should describe the level of staff support required. Policy would require RN to develop a support plan for individuals requiring assistance or supervision with self-administration. Self-administration assessment is only required for individuals who require the support of a DSP in administering medication or preparing med bars / organizers.	633.17
Medication Disposal	Policy establishes the process for how staff dispose of outdated or discontinued medication in the individual's home. Policy distinguishes disposal procedures for controlled medication. Policy establishes procedures for documenting disposal.	633.17
Needles, Syringes, Lancets (Sharps)	Policy establishes process for immediate disposal of sharps in puncture resistant, leak-proof containers. Policy outlines the procedures for the removal of containers with sharps when 2/3 full and the disposal of sealed containers in a manner allowable by community ordinances.	633.17
Medication Safe Storage	Policy establishes guidance on safe storage within the individual's home in consideration of other occupants, the environment (heat and moisture), and visitor access. Staff must assist individuals to store medication in accordance with manufacturer's recommendations, keeping internals and externals separated.	
Medication Administration Documents	Policy defines documents required within the home chart for staff reference. Medication Administration Records, medication orders and personalized medication information must be immediately available for staff reference.	633.17

	Procedures would be established for training DSPs in health care documentation.	
Medication Orders	Policy defines DSP authority to administer only medications - including over-the-counter medications - that are prescribed or ordered by a physician, dentist, NP or RPA.	633.17
New Medication Procedures	Policy establishes procedures for starting new medications. Policy establishes time frames for starting new orders and process for obtaining new medications.	2003-01
Medication Supply	Policy designates who maintains the medication supply and how supply concerns are addressed.	
Over-The-Counter Medication	Policy establishes that Over-the-counter medication must be ordered by a health care provider. Over-the-counter medication may be ordered on an annual basis on an order sheet, if it lists the reason and administration directions. Administration of over-the-counter medications may not exceed 2 days without informing the nurse or physician unless a prescriber has ordered on a regular or routine basis.	633.17
Medication Administration Process	Policy establishes the process and expectations for medication administration. Procedures would be established for immediate reporting of orders, labels and MARs that do not match.	633.17
Medication Errors	Policy establishes the process and expectations for staff when a medication error is identified and describes the agency process for reviewing medication errors.	633.17
DSP Training	Policy establishes contents of DSP training: <ul style="list-style-type: none"> • Medication Administration Course • Weights • Vital Signs • Grocery Shopping / Meal Preparation • Diet Consistency and Dining Safety 	

	<ul style="list-style-type: none"> • Observing, Documenting, and Reporting • Plans of Care 	
Staff Reassignment Procedures	<p>Policy establishes the procedures for re-assigning staff who will have responsibilities of implementing an RN's plan of nursing service / plan of care.</p> <p>Procedures would be established for safe temporary reassignments and permanent reassignments.</p>	Med Course Temporary / Permanent Reassignment
AMAP Training	<p>Policy establishes requirement for DSP's to complete the OPWDD Medication Administration Course or an OPWDD approved curriculum and the required practicum prior to administering medications.</p>	633.17
AMAP Training	<p>Policy establishes who may administer medications to individuals supported in uncertified settings. (An appropriately licensed dentist, physician's assistant, registered nurse, or licensed practical nurse can administer medications in uncertified settings.)</p> <p>The policy would limit the staff who may be certified through the AMAP process for uncertified settings to those who are providing direct care services, as documented by job description and whose role meets the definition of a DSP within the ADM 2015-03.</p>	633.17 ADM 2015-03