

Nurse Care Manager/Social Work Care Manager Exemption Recommended Orientation Checklist

*Supervisor needs to complete the Social Work Care Manager/Nurse Care Manager Training and Development Plan. If skill does not apply, please indicate N/A.

1. Screen participants for eligibility and appropriateness for MSSP participation.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

2. **NCM only:** Certify level of care (LOC) determinations.
 - a) Complete the LOC certification form with rationale and justification to substantiate the LOC determination.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
 - b) Sign and date all entries on the LOC certification form.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
 - c) Check the appropriate box to indicate the source of information.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
 - d) Re-certify participant's LOC annually at intervals not to exceed 365 days.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
 - e) Reestablish eligibility as it relates to LOC.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

3. Complete application form and inform participants of:
 - a) Circumstances under which he/she will lose services.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
 - b) The participant grievance procedure.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

- c) Termination procedures.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
 - d) Any other information deemed essential for the proper delivery of services.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
4. Confirm and document the participant's perception of why he/she was referred to the program, how he/she characterizes his/her situation and needs, and verify participant's choice to participate in MSSP.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
5. Complete the Release of Information form(s).
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
6. Conduct in-depth assessments appropriate to the discipline, adequately addressing all appropriate elements, and within two weeks of enrollment. Conducting assessments involves:
- a) Face to face interview with the participant.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
 - b) Contact with family and other informal supports, if appropriate.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
 - c) Contact with participant's physician and other health providers, as appropriate.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
7. Assessment elements include, as appropriate to discipline:
- a) Medical history.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
 - b) Health history.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

- c) Psychosocial history.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- d) Rehabilitation history/needs.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- e) Functional Grid.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- f) Cognitive Status Exam.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- g) Medications Sheet.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- h) Health Professional List (Optional).
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- i) Summary (Optional).
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- j) Complete participant needs statement list.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

8. Critically identify the assessment outcome to include:

- a) The participant's functional capacity to live independently.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- b) The system, if any that supports independent functioning.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- c) What more is needed to sustain as much independence as possible.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

- d) Situations where the participant is at risk e.g., safety, abuse, neglect, depression, other psychosocial and/or health factors.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
9. Conduct quarterly face-to-face visits and monthly contacts to include:
- a) Identification of changes in participant's situation warranting care plan changes.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- b) Identification of safety risks.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- c) Identification of physical, fiduciary, exploitative abuse.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- d) Identification of immediate health/medical risks, including those of a pharmacological nature.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- e) Identification and provision of education to participant and family.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
10. Consult and work closely with others involved with the participant, including collateral agencies, physician, pharmacists, consultants, IHSS, APS, and others.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
11. Make service arrangements.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
12. Provide justification, obtain authorization, and implement services.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

13. Monitor service delivery and participant's use of services

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

14. Monitor participant's situation to ensure that services continue to meet the participant's needs.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

15. Appropriate consultations between Social Work Care Manager and Nurse Care Manager; participant seen by both disciplines at least once/year.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

16. Review records pertaining to the participants' situation, conditions, and services.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

17. Perform case recording by:

a) Documenting all care management activity.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

b) Including entries at least monthly.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

c) Including type of contact with participant or other identified individual.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

d) Recording all events that affect the participant.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

e) Including evaluative comments on services delivered.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

- f) Including comments on the relationship between identified needs and services delivered or not delivered.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- g) Documenting all contacts with collateral agencies, physician, pharmacists, consultants, IHSS, APS, and others.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- h) Ensuring that notes are dated and signed.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- i) Ensuring that notes follow MSSP standards of documentation.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- j) Verifying applicant's choice to participate in MSSP.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- k) Verifying the necessity and appropriateness of MSSP services, including the need for care management.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- l) Reflecting monitoring and follow-up of services.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- m) Verifying services delivered.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- n) Reflecting the timeliness and effectiveness of services.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

18. Report to other professionals/agencies as appropriate.
- Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

19. Share information across disciplines and act as a consultant in the care manager's area of expertise.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

20. Conduct a complete reassessment at least annually in the participant's place of residence. Reassessment activities include:

a) Completion of the Reassessment tool.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

b) Analysis of changes during the period since last assessment.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

c) Assurance that participant's needs are being met.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

d) Assurance that increases, additions, augmentation, decreases, reductions or termination of services are addressed.

- Cannot Perform/Needs Training*
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- Performs Independently

21. Develop and write a care plan that is consistent with MSSP policies, reflects participant's medical, physical, and psychosocial needs. Elements include:

a) Contains participant need statements.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

b) Identifies the services needed.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

c) Specifies frequency of service.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

d) Specifies type of service (I-R-P-C).

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

- e) Specifies plan for intervention.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- f) Specifies goals/outcomes for participant's needs.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- g) Includes the participant rights to a fair hearing.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- h) Considers the participant/caregiver's wishes.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- i) Includes the primary care manager's signature.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- j) Ensures that the participant signs the care plan at or before the first Quarterly Home Visit (QHV) following the care plan activation.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- k) Ensures that services are listed on the SPUS.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- l) Revisions as necessary to reflect changes in the participant's situation.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

22. As appropriate, develop and write a risk management plan which reflects:

- a) A description of the situation.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- b) An explanation of the cause(s) of concern.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

- c) The possible negative consequences to the participant and/or others.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- d) A description of the participant's preference.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- e) Possible alternatives/interventions to minimize the potential risk(s) associated with the participant's preference/action.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- f) A description of the services, if any, that will be provided to accommodate the participant's choice or minimize the potential risk.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently
- g) The final agreement, if any, reached by all involved parties.
 - Cannot Perform/Needs Training*
 - Performs with Minimal Supervision
 - Performs Independently

23. Determine when a Notice of Action is required, and the process and time frames for the action.

- Cannot Perform/Needs Training*
- Performs with Minimal Supervision
- Performs Independently

Comments: