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CHAPTER 45: PEDIATRIC DAY HEALTH CARE

SECTION 45.7: PLAN OF CARE

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PLAN OF CARE

An individualized plan of care (POC) addressing the child's problems, goals, and required services shall be developed under the direction of the facility's nursing director in collaboration with the prescribing physician prior to placement in the facility. The POC shall ensure the child's developmental needs are addressed; identify specific goals for care, and plans for transition to discontinuation of care. The plan must be signed by the parent, PDHC representative, and prescribing physician. A copy shall be given to the prescribing physician and to the parent if requested. The facility shall retain a copy in their records. Services shall be administered in accordance with the plan of care. The POC is written to cover a specific time frame. The plan for achieving the goals shall be determined and a schedule for evaluation of progress shall be established.

Requirement

Once a referral has been received by the PDHC center the recipient will attend, a POC shall be developed under the direction of the facility's nursing director. The development of the plan shall begin within 72 hours of the referral. A POC is required prior to the first day PDHC services begin.

The POC should be developed under the direction of the facility's nursing director and in collaboration with the prescribing physician. The POC for continuation of services shall be reviewed and updated at least quarterly or as indicated by the needs of the child.

Initial Plan of Care

Components

- Provider Information Name and Medicaid Provider Number
- Start of care date and certification period
- Recipient's functional limitations, rehabilitation potential, mental status patient activity, precautions, method of transportation to and from facility and allergies.
- Other special orders/Instructions
- Medications, treatments, and any required equipment
- Monitoring criteria and monitoring equipment and supplies
- Nursing services to be provided
- Diet as indicated and how recipient is to be fed
- Recipient's current medical condition and hospitalizations within last six months
- Risk factors associated with medical diagnoses.
- Identify special goals for care: Plans for achieving the goals shall be determined and an evaluation schedule of progress shall be established.

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- Frequency/Duration of PDHC services –number of days/week; hours/day or duration.
- Discharge plans contain specific criteria from transitioning from or discontinuing participation in the PDHC with the facility.
- For Recertification only accomplishments toward goals; assessment of effectiveness of services; acknowledgment of annual face-to-face evaluation between recipient and physician.

Approval

The POC must be signed by the prescribing physician, an authorized representative of the facility and the recipient's parent or caretaker. All signatures on the POC must be legible and dated.

Copies of the plan of care shall be given to the prescribing physician and other agencies as appropriate. The facility shall retain a copy in their records and a copy shall be given to parent(s) if request.

The facility staff shall administer services and treatments in accordance with the plan of care as ordered by the physician.

Renewal

The POC for continuation of services shall include the above components. In addition, the revised POC shall include accomplishments toward goals; assessment of the effectiveness of services; and acknowledgment of annual face to face evaluation.

- Reviewed and updated at least quarterly or as indicated by the needs of the child
- Completed by registered nurse of the facility
- Reviewed and ordered by the prescribing physician
- POC shall be incorporated into the patient's clinical record within seven calendar days of receipt of the prescribing physician's order

The medical director shall review the plans of care in consultation with the PDHC staff and the prescribing physician every 60 days or more frequently as the child's condition dictates. Prescribed services and therapies included in the POC shall be adjusted in consultation with the prescribing physician to accommodate the child's condition.