**PSS/PSSX Personal Support Service**

**1403.1- Supervisory Duties**

Every two months (within 62 calendar days) the provider RN or LPN completes a face-to-face supervisory visit, in the member’s home, with the member and, if appropriate, the member’s representative or caregiver for all members who receive more than 24 units of service per week.

Every three months (within 92 calendar days) the provider RN or LPN completes a face-to-face supervisory visit, in the member’s home, with the member and, if appropriate, the member’s representative or caregiver for all members who receive 24 units or less of services weekly.

At least once annually, the provider RN or LPN completes an in-home supervisory visit to observe and monitor the in-home performance of the Personal Support Aide

**NOTE:** The LPN must be supervised by the provider agency’s RN. The LPN may not (1) conduct the initial assessment, (2) develop a member’s care plan or (3) re-evaluate a member.

Duties of the RN-

* reviewing, signing, and dating all clinical record entries (i.e., service record forms, progress notes) made by the personal support aides assigned to those members whose health status and situations involve complex observation
* **reviewing and co-signing all documentation of the LPN’s supervisory visits within ten (10) days of each visit** and following up immediately on all concerns raised by the LPN.
* developing and revising member care plans as appropriate and reviewing the content of member care plans during each supervisory visit and communicating all revisions to appropriate staff
* General Services Manual- 606.18

0The Member's Care Plan (Appendix K of the CCSP General Manual) reflects the provider agency's plan to deliver the services agreed upon by the provider agency, the member/member’s representative and the care coordinator based on the comprehensive care plan.

0TIndividuals who participate in the Community Care Services Program have been determined to be at risk for nursing facility placement. Therefore, after the initial evaluation, *the provider RN must review the care plan and revise,* ***sign and date*** *it as part of each supervisory visit, or as often as the member's condition requires.* The provider RN communicates all revisions to the care plan to appropriate staff. The member care plan must be re-written at least once per year

* SNS manual- 1904B

Member care plan, reviewed, updated, signed, and dated at least every 62 days by the provider RN. (Refer to Section 606.18 of the CCSP General Manual);

**ALS- Alternative Living Service**

**1203.4 and 1253.6 - Supervisory Duties**

Supervisory Visits must be conducted at least twice in a calendar month. There must be at least 14 days between the 1st and 2nd scheduled visits in a calendar month. The first scheduled visit in a month should be spaced so that it is at least 7 days after, but not more than 21 days after, the last visit made in the previous month. At least every other visit must be conducted by the RN. At the request of the personal care home caregiver, owner, manager or care coordinator, the RN must provide an additional supervisory visit within 24 hours of any reasonable request based on a change in the member’s condition or conditions in the home.

**An LPN may conduct the alternate visits**, the purpose of which is to note and report immediately to the RN any changes in the member’s condition or concerns about care rendered. The RN is to review and sign all documentation of the LPN’s visits and follow up immediately on all concerns raised by the LPN. **(Rev. 4/12)**

\*At each supervisory visit, the provider RN reviews, initials and dates the member care plan.

* General Services Manual- 606.18

0The Member's Care Plan (Appendix K of the CCSP General Manual) reflects the provider agency's plan to deliver the services agreed upon by the provider agency, the member/member’s representative and the care coordinator based on the comprehensive care plan.

0TIndividuals who participate in the Community Care Services Program have been determined to be at risk for nursing facility placement. Therefore, after the initial evaluation, *the provider RN must review the care plan and revise,* ***sign and date*** *it as part of each supervisory visit, or as often as the member's condition requires.* The provider RN communicates all revisions to the care plan to appropriate staff. The member care plan must be re-written at least once per year

**1203.5 E-**

**At each supervisory visit, the RN or LPN must review and sign each member’s Medication Administration Record (MAR) for the current month as of the date of the visit. Any deficiencies on completion of the MAR must be noted in the supervisory review notes, including how these deficiencies have been addressed with the staff members who supervise medication administration at the PCH. The supervisory nurse (LPN or RN) must also review, sign and date the completed MAR for the previous month at the first supervisory visit of each month**. **If the LPN signs the MAR, the RN must review the MAR and sign off after the LPN by no later than the next supervisory visit. Rev. 7/2014, 10/2014, 4.2017**

**An electronic MAR can be printed or reviewed electronically as long as it records the nurse’s signature and date at each supervisory visit. Rev. 4/2018**

**ADH- Adult Day Health**

**1103.5**

Supervisory visits must be conducted at least monthly by either the registered nurse or licensed practical nurse. When the license practical nurse conducts supervisory visits, the registered nurse must conduct a supervisory visit at least every 62 days.

The LPN may conduct and document a face-to-face supervisory visit every other month under the supervision of the RN. The LPN is to note and immediately report any changes in the member's condition or concerns about care being rendered to the RN. The RN will follow up immediately on any concerns raised by the LPN. The RN **must** review, sign, and date the LPN's supervisory notes.

* General Services Manual- 606.18

0The Member's Care Plan (Appendix K of the CCSP General Manual) reflects the provider agency's plan to deliver the services agreed upon by the provider agency, the member/member’s representative and the care coordinator based on the comprehensive care plan.

0TIndividuals who participate in the Community Care Services Program have been determined to be at risk for nursing facility placement. Therefore, after the initial evaluation, *the provider RN must review the care plan and revise,* ***sign and date*** *it as part of each supervisory visit, or as often as the member's condition requires.* The provider RN communicates all revisions to the care plan to appropriate staff. The member care plan must be re-written at least once per year

**At each supervisory visit, the RN must review and sign each member’s Medication Administration Record (MAR) for the previous month. Any deficiencies on completion of the MAR must be noted in the supervisory review notes, including how these deficiencies have been addressed with the nurses and other staff members who supervise medication administration at the ADH center. Rev 4/2017**

**An electronic MAR can be printed or reviewed electronically as long as it records the nurse’s signature and date at each supervisory visit. Rev 4/2018**