

PLAN OF CARE

Tip Sheet

This tip sheet will help your agency be more prepared for DSCC's Nursing agency review. In this document, we will be covering how to create a detailed care plan.

CHECKLIST:



Is your most current Plan of Care signed and dated by the child's physician or nurse practitioner?

Current Plan of Care must be signed and dated by the physician within 45 days from the start date of the Plan of Care.



Do the hours or allocation on the Plan of Care agree with HFS authorized hours and respite hours?

Make sure that the hours and allocation as listed on HFS approval (2352) match hours and allocation listed on Plan of Care. Respite hours must be listed on the Plan of Care and match HFS authorization for Waiver participants.



Does the Plan of Care identify the trained caregivers?

Please make sure you list the trained caregiver's name and relationship to the child. Also ensure that the caregivers listed on the Plan of Care match the caregivers listed on the emergency plan.



Does the Plan of Care match current physician/nurse practitioner orders?

- Medications listed on the Plan of Care must match the dosage, frequency, and route on the MAR and should be administered as ordered.
- Feeding: Formula name, amount, frequency, rate, and method listed on the Plan of Care must match nursing notes and flow sheets.
- All equipment parameters and alarm limits for the ventilators, pulse oximeters, cough assists, BiPAP and CPAP on Plan of Care must match vent sheets, flow sheets, and nursing notes.
 - Any verbal or supplemental order changes must correlate with the Plan of Care being reviewed.
 - Documentation of ventilator settings verified every 2 hours and all equipment alarm limits verified each shift.