

Proxy Caregiver Updates

111-8-100



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HFRD MISSION

ACCESS



Access
to affordable,
quality health
care in our
communities

RESPONSIBLE



Responsible
health planning
and use of
health care
resources

HEALTHY



Healthy
behaviors and
improved
health
outcomes

Facility Delivering Services Through PCG

1) Facility must develop Policies and Procedures that outline:

- a. The scope of HMA that PCG can perform
- b. notification procedures with change of condition
- c. Safety and security precautions

Delivering Services through PCG cont'd

2. Facility Must Disclose:

- a) The manner in which the PCG is used and the supervisor's qualification
- b) Any additional charges
- c) How the resident can change and designate PCG
- d) Qualifications of the LHP who develops the Plan of Care and training
- e) Frequency of skills determinations

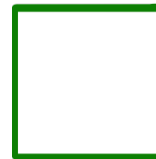


Delivering Services through PCG

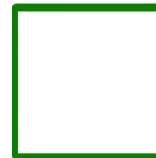
- Ensure Written Informed Consent
- Ensure Written Plan of Care developed and implemented
- Maintain Documentation of training
- Separate skills checklist for each HMA provided
- Use medication curriculum and forms
- Maintain supporting documentation
- Maintain evidence of satisfactory performance on initial and annual skills competency determinations



EXCELLENT



GOOD



AVERAGE

PROXY CAREGIVER

- ✓ DEFINITION OF PROXY CAREGIVER
- ✓ INDIVIDUAL WITH DISABILITY/DISABLED INDIVIDUAL
- ✓ INFORMED CONSENT FORM
- ✓ TRAINING CURRICULUM PER DEPT
- ✓ SKILLS COMPETENCY CHECKLISTS AVAILABLE

PROXY CAREGIVER DEFINITION

Definitions

Proxy Caregiver (PCG) -an unlicensed **person or a licensed health care facility** who has been selected by a disabled individual or a personal legally authorized to act on behalf of such individual to serve as such individual's proxy caregiver, provided that such person shall receive training and shall demonstrate the necessary knowledge and skills to perform documented health maintenance activities as specified in Rules 111-8-100.

PROXY CAREGIVER DEFINITION



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Unlicensed person

Licensed health care facility



INDIVIDUAL WITH DISABILITY/DISABLED INDIVIDUAL

DEFINITION

INDIVIDUAL WITH DISABILITY/DISABLED INDIVIDUAL

Definitions 111-8-100-.03(g) an individual who has a physical or mental impairment that substantially limits one or more major life activities and who meet the criteria for a disability under state and federal law.

INDIVIDUAL WITH DISABILITY (PHYSICAL)



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DISABLED INDIVIDUAL (COGNITIVE)



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HEALTH MAINTENANCE ACTIVITY

Health Maintenance Activities (HMA)

"Health maintenance activities" are limited to those activities that, but for a disability, a person could reasonably be expected to do for himself or herself. Such activities are typically taught by a registered professional nurse, but may be taught by an attending physician, advanced practice registered nurse, physician assistant, or directly to a patient and are part of ongoing care. Health maintenance activities are those activities that do not include complex care such as administration or intravenous medications, central line maintenance, and complex wound care; do not require complex observations or critical decisions; can be safely performed and have reasonable precise, unchanging directions; and have outcomes or results that are reasonably predictable. Health maintenance activities conducted pursuant to these rules shall not be considered the practice of nursing.

INFORMED CONSENT

Informed Consent

Informed Consent

No licensed facility will permit a proxy caregiver to provide health maintenance activities (HMA) by or through the licensed facility unless the individual with the disability, or the legally authorized representative has executed a written informed consent. Informed Consent Form Provided

INFORMED CONSENT

- ✓ INFORMED CONSENT FORM SIGNED WHEN SERVICE STARTS
- ✓ NEW FORMS NOT REQUIRED FOR NEW CAREGIVERS
- ✓ NEW FORMS REQUIRED FOR CHOW

INFORMED CONSENT

- ✓ FORMS AVAILABLE ON DEPARTMENT'S WEBSITE
- ✓ FORMS IN USE EFFECTIVE JULY 1, 2018

Informed Consent

- Prior to PCG services being provided and must contain:
- Definition of HMA
- The HMA to be performed
- Explanation that the HMA are provided pursuant to a healthcare provider's orders
- Name(s) of the proxy caregiver(s) who are being authorized to provide HMA
- Disclosure that GA law now allows LHP to train unlicensed PCG
- Acknowledgement that PCG are not licensed professionals
- Consent is conditioned upon PCG being trained appropriately
- Statement that consent can be withdrawn orally or in writing
- Authorization signed and dated

- PLAN OF CARE

PLAN OF CARE

- "Written plan of care" means the specific set of written instructions which have been determined necessary, usually by a registered professional nurse, to implement the written orders of the attending physician or an advanced practice registered nurse or physician assistant working under a nurse protocol agreement or job description respectively.

Written Plan of Care

- In accordance with the orders of an attending physician
- Specifies training frequency and evaluation requirements
- Implemented by appropriately trained PCG
- Maintain documentation of training with checklists
- Maintain supporting documentation as needed
- Maintain documentation of satisfactory performances on initial and annual competency-based skills checklist
- Does not have to be signed by the medical provider

SKILLS COMPETENCY CHECKLIST

SKILLS COMPETENCY CHECKLIST

- 111-8-100-.05(1)(f)
- (f) The use of skills competency checklist forms when made available by the department for the specific health maintenance activities to be performed or other skills checklist forms that include all of the competencies in the correct order as contained on the forms made available by the department and as required for the specific client ...

MEDICATION TRAINING CURRICULUM

MEDICATION TRAINING CURRICULUM

111-8-100-.05(3)

Licensed facilities that employ or contract with proxy caregivers to provide medication administration must maintain documentation reflecting that the facility has trained these proxy caregivers in accordance with the medication administration training curriculum established by DCH.

LICENSED HEALTHCARE PROFESSIONAL

Licensed Healthcare Professional

"Licensed healthcare professional" (LHP) means an individual who is licensed and authorized under Georgia law to perform certain healthcare practices. The term includes physicians, advance practice registered nurses, physician's assistants, registered nurses, pharmacists, physical, speech and occupational therapists who are functioning within their scopes of licensed practice. The term does not include licensed practical nurses, certified nursing assistants or medication aides

Training Curricula

- **For non-medication HMA** the LHP must develop the curriculum/forms for the HMA that includes all the requirements in
111-8-100-.05(1) (a-g)

Only TOFHLA if no high school diploma or GED

Medication Administration:

- Use Curriculum/Forms established by DCH
- Training Provided by LHP
- New medication must document contact with a LHP to determine whether additional training is required
- 75 on the TOFHLA
- Annual training at a minimum

General HMA Training Curriculum (non med)

- Learning objectives
- Content knowledge and skills
- Learning activities to provide instruction
- TOHFLA if no high school diploma or GED
- Completion of required skills competency checklists
- Use forms if provided by the Department or other which include the competencies in the correct order
- Evidence of routine evaluations at least annually



Non-medication or specialized HMA

- LHP must verify by direct observation and sign documentation that the PCG can complete all tasks in proper sequence without prompting
- Must be reevaluated with any change and on a regularly recurring schedule as determined on the Plan of Care
- Schedule should take into consideration the nature of the HMA and the condition of the client
- No less than annually at a minimum

Records maintenance for medication administration

- MAR which includes name, allergies name and number of healthcare provider, name strength and specific instructions for medications and a chart for staff to record initials, time and date when meds are taken, refused or error is identified. Staff must immediately update the MAR
- Facility must make medication information concerning the descriptions of medication, dosing, side effects, adverse reactions and contraindications for each medication immediately available
- Must document any unusual reactions to the medications and provide such information to the individual with a disability, legally authorized representative, if any and healthcare provider, as appropriate

Prohibited Assistance

- Mixing Compounding, converting or calculating medication doses, except for measuring a prescribed amount of liquid medication, breaking a scored tablet, crushing a tablet or adding water or other liquid to laxatives and nutritional supplements when being done in accordance with a specific RX.
- Preparing syringes for intravenous injection or the first dose of any subcutaneous or intramuscular injection
- Interpreting a “PRN” order when the order does not identify the resident behaviors or symptoms which would trigger the need for the medication and/or does not identify the proper dosing and is not specifically authorized on the Plan of Care
- Irrigating or debriding agents for treatment of skin conditions
- Administering any medication or over the counter drugs with no order
- Performing HMA that no longer meets the definition of a HMA or without the knowledge or skill necessary to perform the HMA safely

Website: dch.ga.gov/healthcare facility division

- Rules and Regulations 111-8-100 for PCG
- Medication Curriculum
- Informed Consent
- Plan of Care
- Medication skills competency checklist
- Signature Page non-medication HMA checklist
- Insulin by syringe checklist
- Insulin by pen checklist

RECENTLY ASKED QUESTIONS

Informed Consent

Informed Consent

No licensed facility will permit a proxy caregiver to provide health maintenance activities (HMA) by or through the licensed facility unless the individual with the disability, or the legally authorized representative has executed a written informed consent. Informed Consent Form Provided

This informed consent requires the name(s) of the proxy caregiver(s) who are being authorized to provide the HMA

INFORMED CONSENT

Do I need to update the informed consent annually?

INFORMED CONSENT

Does every proxy caregiver have to sign the informed consent form?

INFORMED CONSENT

Do I have to redo this form with each new hire? Or employees separated?

INFORMED CONSENT

Can the same form be used for two different health maintenance activities e.g. catheter care and insulin

INFORMED CONSENT

Whose signature should be on the informed consent form?

INFORMED CONSENT

Under what circumstances will a new informed consent form be needed?

PLAN OF CARE

Who develops the plan of care?

PLAN OF CARE

Does the plan of care have to be signed by a physician?

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PLAN OF CARE

When does the plan of care need to be updated/changed?

PLAN OF CARE

What are some scenarios that would cause the plan of care to be changed?

PLAN OF CARE

What are some scenarios that would cause the plan of care to be changed?

a) A new diagnosis e.g resident had a CVA and new meds coumadin prescribed.

b) New physician's orders e.g resident on Metformin, now has insulin added to control blood sugar.

PLAN OF CARE

Do I need to update the plan of care if antibiotics are ordered?

SKILLS COMPETENCY CHECKLIST

Do I have to use the skills competency checklist on the Department's website for medication administration?

SKILLS COMPETENCY CHECKLIST

Can I develop my own skills competency checklist?

MEDICATION CURRICULUM

- Can I develop my own medication curriculum to train staff?

QUESTIONS

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