



Essential Services & Safety Plans

Care Coordination Training Module #6

Care Coordinator Requirements

DHS Protocols state:

Safety Plan/Personal Risk Management Plan

Desired Outcome: The enrollee has been assessed for risk and has a plan to address identified safety issues relating to risks, rights and choice.

Method for measuring outcome achievement (met as determined by all of the following):

Risk discussion and planning:

- a. Discussion between care coordinator and enrollee regarding safety concerns/risks is documented; **and**
- a. The plan for managing any identified risks is included in the care plan; **or**
it is documented that no plan for managing risks is needed.

Identifying Essential Services



Identifying essential services and supports prior to an emergency occurring will help members make informed choices based on their individualized goals and preferences.

Essential services are services that if the member did not receive them, the member's health or ability to maintain safety in their home would be compromised.

Examples:

- If the member's only source of nutrition is Meals-on-Wheels, then it is an essential service.
- If a member receives home care services, including PCA for assistance with ADL completion, then it is an essential service.
- If the member resides in a Customized Living, 24 hour Customized Living, or Adult Foster Care to ensure health and safety are maintained, then it is an essential service.

Back Up Plans



It is critical for members to have individualized backup plans in place for essential services to maintain support in the event of an unexpected staffing and/or support emergency. The Care Coordinator must discuss and develop emergency backup plans with the member and their legal representative (if applicable).



The backup plan must focus on the member's needs, desires and preferences for service delivery. The support the person chooses as part of their emergency backup plan does not need to include only formal supports and services. The member may choose to receive emergency backup support through assistive technologies, family members, friends, community organizations or other informal supports. Exploring preferences and choices with the person may lead to identifying unique and innovative backup support — something not necessarily part of their regular list of options. Each person's strengths, needs and supports are unique. A backup plan should reflect each member's individual circumstances and choices.

Back Up Plans

Important topics to discuss include, but are not limited to:

- Plan for short-term staffing emergencies (e.g., staff are late, staff did not show up)
- Plan for long-term staffing emergencies (e.g., staff resigned, staff are unable to work, primary caregiver is unable to care for the person, provider terminates services, residential site closes)
- From whom the person wants to receive support during a staffing emergency (e.g., family, friends, organizations, providers, assistive technology, formal and informal caregivers)
- What specific support the person needs and wants
- When the support will occur (i.e., frequency, duration).

Back Up Plan Example

Essential Services Backup Plan: *(when providers of essential services are unavailable; essential services are services that if not received, health and safety would be at risk)*

I am receiving essential services Yes No

Essential services I am receiving: 24 Hour Customized Living

If Yes, describe provider's backup plan, as agreed to by me: If current Customized Living service becomes unavailable, Betty's daughter has agreed she would be able to care for Betty short-term, until another placement is found.

My Backup Plans

Essential Services Plan

Enter a description of the backup plan if the person is receiving essential services or needs a 24-hour plan of care.

If current Customized Living service becomes unavailable, Betty's daughter has agreed she would be able to care for Betty short-term, until another placement is found.

Safety Plans



Care Coordinators must support and encourage the member to make informed choices and respect the member's right to take risks. To do this Care Coordinators are responsible to:

- Continue to work assertively with a member who refuses necessary services.
- Understand the CC's reporting duties under the Vulnerable Adults Act.
 - Understand person-centered planning.
- Work with the person to develop a plan that both meets the member's needs and wants and addresses any identified risk.

Safety Plans

Care Coordinators should review members identified safety concerns and the services/supports documented in the members care plan/support plan. If there are identified health and safety risks, the Care Coordinator must document how these will be addressed with services or the members plan for managing risk. If the member doesn't have a plan because member doesn't have risks identified or doesn't believe they have any risks, then Care Coordinator should note that on the care plan/support plan. If the Care Coordinator offers a service that is critical to the member's health and safety that is not accepted by the member, this should be noted in this section.

A Care Coordinator can report suspected maltreatment or neglect of a vulnerable adult by either:

- Calling the Minnesota Adult Abuse Reporting Center (MAARC) at 1-844-880-1574
- Completing the [online MAARC Mandated Reporter Form](#).

Emergency Plan Examples

Emergency Plan:

In the event of an emergency, I will (check all that apply):

- Call 911
- Use Emergency Response Monitoring System
- Call Emergency Contact
- Call Other Person Name: [redacted] Phone: [redacted]
- Other (describe) Customized Living Staff to ensure safety in the event of an emergency.

Self Preservation/Evacuation Plan:

If I am unable to evacuate on my own in an emergency, my plan is to: Use my call-light and wait for help from staff.

If other concerns or plans, describe: Betty reported she may need help with her walker if she needed to quickly evacuate. She would rely on staff at the facility.

✔ My Plan In An Emergency

- Call 911
- Call emergency contact
- Use emergency response monitoring system
- Other

Describe*

Wait for staff to assist.

✔ If I am not able to evacuate on my own, I will:

Betty reported she may need help with her walker if she needed to quickly evacuate. She would rely on staff at the facility.

Community-Wide Disaster Plan

Our members may have greater difficulty accessing the public health and medical services they require following a disaster or emergency. Often times, they have needs in one or more of the following functional areas, putting them at-risk:

- Communication
- Medical
- Maintaining Independence
- Supervision
- Transportation



Community-Wide Disaster Plan

It is important for our members to be prepared for a natural disaster and/or emergencies. Consider disasters that may impact our Minnesota members (flooding, fires, tornados, extreme heat or cold, blizzards, etc.). These can force people to evacuate their homes or shelter-in-place at short notice. Support services that are usually available, such as help from caregivers/family members or services and supports may be unavailable for a period of time. **Community Wide Disaster Plans should NOT be a blanket statement**, they should be created to reflect each member's individual circumstances and choices. Things to consider when discussing a Community Wide Disaster Plan with the member:

- Planning for pets and service or support animals
- Consider special needs related to medical conditions or disabilities
- Consider DME
 - Many types of durable medical equipment can be challenging to replace during disruptions to the health care system and supply chain during a disaster
 - Consider alternate or backup equipment options, such as a manual wheelchair or an oxygen tank that does not require electricity
- Consider medications
 - If the member takes a medication that requires refrigeration, consider alternative power sources and storage options in case of a power outage
- Consider basic needs
 - How will the member get groceries
 - How will the member get medications

Community-Wide Disaster Plan Examples

Community-Wide Disaster Plan:

In the event of a community-wide disaster, (e.g., flood, tornado, blizzard), I will (describe plan): Betty's Customized Living facility has a disaster/evacuation plan in place. Betty would rely on the staff to ensure her safety in the event of a community-wide disaster. If Betty's daughter is able to get to the facility, she would take Betty in as well.

✔ Community-Wide Disaster Plan

Enter a description of the person's plan in the event of a community-wide disaster, (e.g., flood, tornado, blizzard).

Betty's Customized Living facility has a disaster/evacuation plan in place. Betty would rely on the staff to ensure her safety in the event of a community-wide disaster. If Betty's daughter is able to get to the facility, she would take Betty in as well.

If you have questions regarding this audit element, please reach out to your auditor or email MedicaSPPRegQuality@Medica.com.





MISSION

To be the trusted health plan of choice for customers, members, partners and our employees.

VISION

To be trusted in the community for our unwavering commitment to high-quality, affordable health care.

VALUES

Customer-Focused • Excellence • Stewardship • Diversity • Integrity