

Lois A. Day, Administrator

**Authorized Signature**

**Number:** CW-IM-10-002

**Issue Date:** 01/15/2010

**Topic:** Personal Care Services

**Subject:** Personal Care Services Referrals

**Applies to (check all that apply):**

- |                                     |                               |                          |                                      |
|-------------------------------------|-------------------------------|--------------------------|--------------------------------------|
| <input type="checkbox"/>            | All DHS employees             | <input type="checkbox"/> | County Mental Health Directors       |
| <input type="checkbox"/>            | Area Agencies on Aging        | <input type="checkbox"/> | Health Services                      |
| <input checked="" type="checkbox"/> | Children, Adults and Families | <input type="checkbox"/> | Seniors and People with Disabilities |
| <input type="checkbox"/>            | County DD Program Managers    | <input type="checkbox"/> | Other (please specify):              |

**Message:** Responsibilities for completing Personal Care Services Referrals

**Caseworker Responsibilities:**

Caseworkers are responsible for ensuring current, accurate medical information is included in a Personal Care Services Referral.

The caseworker completes the Personal Care Services Referral (CF 0172) for a child or young adult who has a documented, diagnosed medical condition or mental impairment and requires personal care services for assistance with one or more of the following Personal Care Services:

Activities of daily living;  
Medication Management; or  
Delegated Nursing Procedures.

It is critical that the referral information be complete, accurate, and thorough. All eligibility criteria must be met prior to making a Personal Care Services Referral.

The Personal Care Services Referral can be initiated by sending a completed the CF 172B electronically to the contract RN using his or her personal e-mail address. The complete list of contract RN email addresses is attached to this message.

To complete the referral process, the caseworker must complete and sign the DHS 2099 Authorization for Use and Disclosure, gather all relevant medical records and reports from doctors, parents, foster parents or others, submit this material to the branch Personal Care Coordinator who will mail the additional information to the contract RN to complete the referral process.

**Branch Personal Care Coordinator Responsibilities:**

The branch Personal Care Coordinator e-mails the completed CF 172B to the Contracted Registered Nurse and to Central Office. To mail this to Central Office, please use the following e-mail address: [personal.care@state.or.us](mailto:personal.care@state.or.us).

All additional information regarding the child, including the DHS 2099 Authorization for Use and Disclosure, the relevant medical records and reports from doctors, parents, foster parents or others which is sent only to the contract RN.

The branch Personal Care Coordinator also sends to the contract RN the completed CF501B Medical Service Authorization and Invoice.

The branch Personal Care Coordinator enters the Referral for Service (REFS) in IIS with the Open Reason (PCSR). The service can be closed (CLOS) the same day. This data entry allows the Personal Care Services Program to anticipate the number of assessments currently in progress.

The contract registered nurse will submit the completed assessments directly to the Personal Care RN Manager for review/approval using [personal.care@state.or.us](mailto:personal.care@state.or.us) as the email address.

Once the Personal Care Services Assessment has been approved, the caseworker will receive an electronic copy of the assessment and the Assessment Results.

When the Personal Care Services Plan is signed by the foster parent or relative caregiver, an electronic PDF copy will be provided to the caseworker.

*If you have any questions about this information, contact:*

<b>Contact(s):</b>	Teri Shultz, RN		
<b>Phone:</b>	503-945-6620	<b>Fax:</b>	503-945-6969
<b>E-mail:</b>	<a href="mailto:TSHULTZ@DHS.STATE.OR.US">TSHULTZ@DHS.STATE.OR.US</a>		