EXTENDED PERSONAL CARE SERVICE PROVIDER AGREEMENT

NORTH DAKOTA DEPARTMENT OF HUMAN SERVICES
MEDICAL SERVICES DIVISION
SFN 576 (Rev. 3-2019)

Clear Fields

Print Name	Provider Number

The purpose of extended personal care services (EPCS) is to complete tasks that are nursing or medical in nature and specific to the needs of an eligible individual. Approval to complete these tasks is provided by the nurse educator who has provided training to the EPCS provider and is enrolled with the Department of Human Services (Department) to provide nurse education.

This service may include medical or nursing care to the extent permitted by state law that will maintain the health and well-being of the individual and will allow the individual to remain in the community. These are services that an individual without a functional disability would customarily and personally perform without the assistance of a licensed health care provider, such as catheter irrigation, administration of medications, wound care or other tasks as approved by the state program administrator. Activities of daily living such as bathing, dressing, routine skin care, toileting, transferring/positioning, mobility and instrumental activities of daily living such as housework, laundry, or meal prep are not part of this service. EPCS does not include tasks for monitoring healthy habits, encouraging healthy eating, monitoring falls or tasks covered under the global endorsements or education for these tasks.

Providers must immediately report all critical incidents.

A critical incident is any actual or alleged event or situation that creates a significant risk of substantial or serious harm to the physical or mental health, safety or well-being of a waiver participant.

Reportable incidents include:

1. **Abuse, neglect, or exploitation** events.
2. **Rights violations** through omission or commission, the failure to comply with the rights to which an individual is entitled as established by law, rule, regulation or policy.
3. **Serious Injury or medical emergency** which would not be routinely provided by a primary care provider.
4. **Wandering or elopement** from the agency.
5. **Restrain violations** (Use of restraints not documented in care planning.)
6. **Death** of a waiver recipient and cause.
7. Report of all **medication errors** or omissions.
8. Any event that has the potential to jeopardize the waiver recipients health, safety or security if left uncorrected.

All reports must be filed within five days of the incident to the case manager and complete an incident report (SFN 53601) fillable form at https://www.nd.gov/eforms/Doc/sfn53601.pdf. Forward the SFN 53601 to the case manager.

EPCS provider must notify the HCBS case manager and nurse educator if the client is not home at the scheduled time for service, If there is an observed change in the clients physical, cognitive, emotional or environmental condition, or there is a change in the amount or type of service that may be needed by the client.

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Education is provided to the EPCS provider in the presence of a client who is competent to make their own decisions or in the presence of their legal representative.

EPCS is provided by an individual enrolled with the Department as a qualified service provider (QSP) to provide EPCS. Both agency and individual QSPs are required to identify a backup plan or provider in the event they are not able to provide services.

EPCS is provided in accordance with the Individual Care Plan (ICP) developed by the client and home and community based services (HCBS) case manager. The Nursing Plan of Care (NPOC) is developed by the client and a nurse educator. The EPCS provider must contact the nurse educator for training prior to administering new medication or treatments for which training has not been provided. The nurse educator will send training documentation to the case manager and state program administrator. The training documentation must be signed by the nurse educator and the extended personnal care provider(s).

The EPCS Provider is given an Authorization to Provide Services document by the HCBS Case Manager in which the reimbursable tasks and the time allowed for the provision of each task is described. Documentation with training is provided by the Nurse Educator to the EPCS Provider approving identified nursing tasks. The nurse educator must provide documentation to the EPCS Provider which describes the nursing tasks approved. Payment is limited to the services described in the Authorization to Provide Services.

The EPCS provider is required to maintain records related to: (1) the written instructions for completing the authorized tasks provided by the nurse educator; and (2) incidents that result in client injury or require medical care.

Documentation must include:

- EPCS provider's name,
- Client's name
- Date service provided,
- Start and end time of the tasks performed including AM and PM.
- Tasks performed, (i.e. medication administration, wound care or eye drops)

Sample documentation forms are provided in the QSP packet and may be used at your discretion.

I have read and understand this information and agree to comply with all requirements.

Extended Personal Care Service Provider Signature	Provider Number
Agency Name, if applicable	Date