

### **3007 SERVICE PROVIDER INFORMATION, AUTHORITY, AND NOTIFICATION**

REVISION DATE: 10/1/2014

EFFECTIVE DATE: July 3, 1993

The Division shall disclose to a service provider in the Planning Document, and in all meetings resulting from a response to a Vendor Call for Services, any historical and behavioral information necessary for the provider to anticipate the member's future behaviors and needs. This includes summary information from the Program Review Committee, Unusual Incident Reports reviewed by the Human Rights Committee, and Behavioral Health Treatment Plans. The Division shall redact the member's identification from this information.

Service providers are authorized to engage in the following activities in accordance with the member's Planning Document:

- A. Administer medications, including assisting the member's self-administration of medications;
- B. Log, store, and dispose of medications; and,
- C. Maintain medications and protocols for direct care.

The Division may establish procedures for items "A" through "C" listed above.

To protect the health and safety of a member, a provider must notify the Division within 24 hours if an emergency situation exists in which the provider is unable to meet the health or safety needs of the member.

On notification of an emergency, the Department shall hold a Planning Meeting within 15 days after notification to recommend any changes, including whether there is a need for temporary additional staffing to provide appropriate care for a member, and shall develop a plan within 30 days after notification to resolve the situation.

#### Other Safety Considerations for Placements

Prior to any out-of-home respite or residential placement (including emergencies), the *Pre-Service Provider Information*, *Residential Transfer Checklist*, and any other pertinent forms shall be completed to gather general care information and identify potential safety concerns to prevent risk to the member, other residents, staff, and the public.

The Planning Team shall complete the *Case Transfer* form as part of the pre-placement meeting.

The Planning Team will identify in the Planning Document appropriate means to deal with potential safety risks including, but not limited to training, inoculations, and staffing as needed.

The Planning Team, in consultation with law enforcement, Behavioral Health, the Department of Child Safety (DCS), or other members/agencies as appropriate, will identify

planned responses to known problems prior to placement, and document them on the *Risk Assessment*.