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Introduction

The Minimum Data Set (MDS) is the nursing facility resident assessment instrument used for all nursing facility residents. The revisions to Section Q (Participation in Assessment and Goal Setting) improve the identification of individuals in nursing facilities who want to obtain information about available options and supports for community living and to support individual choice. Individuals identified for transition to community services in the Section Q process will be referred to a Local Contact Agency to receive information about community choices and for assistance in transitioning to community living situations.

Purpose

The Kentucky Department for Medicaid Services (DMS) has identified the Aging Disability Resource Centers (ADRC) as the Local Contact Agency (LCA) that will provide residents with information on returning to the community.

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Responsibilities of the Area Development Districts

The Area Development District (ADD) shall be responsible for planning, organizing, and administering a district-wide service delivery system including the Aging Disability Resource Center (ADRC). Specific terms and conditions are included in the master agreement and are approved by the Department for Aging and Independent Living (DAIL). Each ADRC shall develop the capacity to effectively respond to referrals related to MDS/Section Q.

General Requirements

- Staff from the AAAIL or ADRC shall make contact with the nursing homes in their respective region and provide them with the Section Q referral form that will be used by the ADRC as well as the contact information for the ADRC, prior to implementation.
- AAAIL shall provide each nursing home a marketing tool (preferably a magnet for visibility and convenience) with ADRC contact information including, but not limited to, a phone number and e-mail or fax number.
- AAAIL shall provide the nursing home with the standardized referral form
- AAAIL will work with each nursing home to determine the best method for
 collecting the referral forms, either e-mail or fax. Please note that if e-mail is
 used that the information is sent using a secure method and it should be a
 multiple user e-mail account, such as adrc@btadd.com, to ensure that
 referrals are processed by the ADRC in a timely manner
- AAAIL shall develop a list of county or region specific resources that are available to the resident. This list shall, at a minimum, include the following groups: ADRC, Adult Day Care Services, Adult Protective Services, Assistance with Food and Clothing, Assisted Living Facilities, Senior Citizen Centers, Emergency Response Systems, Financial Assistance, Home Care Equipment and Products, Home Delivered Meals, Home Health Agencies, Hospice Services, In-Home Services, Legal Assistance, Long Term Care Ombudsman, Money Follows the Person/Kentucky Transitions, Medicaid Waiver Consumer Directed Options Programs, Mental Health Services, Office of Family Support, Private Pay Options, State Health Insurance Assistance Program, Subsidized Housing and Transportation Services.

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- AAAIL shall identify available staff who will discuss the resources available within the community, with the resident.
- AAAIL shall send key staff to the Kentucky MDS Section Q Implementation Training.
- Detailed policies and procedures shall be developed and sent to DAIL for review
- AAAIL shall enter required data into the Social Assistance Management Software (SAMS) system within specified timeframes.

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General Requirements

DAIL shall:

- (1) Be responsible for the statewide oversight of the administration of the Aging Disability Resource Centers. In keeping with the mission of the program, DAIL shall be responsible for providing direction to the AAAILs and the ADDs in effective and efficient administration of the MDS Section Q process;
- (2) Establish and make available on a statewide basis, policies and procedures essential for implementation of MDS Section Q. DAIL shall provide training and maintain a viable working relationship with the AAAILs through monitoring and technical assistance functions; and,
- (3) Conduct annual field review audits (monitoring) of AAAILs. This review includes both administration monitoring and post payment aspects.

Specific Requirements

DAIL shall:

- (1) Develop and revise, as necessary, program and fiscal reporting requirements for the MDS Section Q;
- (2) Provide or assist with training, technical assistance in situations where assistance is needed due to problems in coordination with other programs or agencies, and difficult consumer situations and complaints;
- (3) Develop other protocol, guidelines or MDS Section Q requirements, when the need has been identified; and,
- (4) Develop reports, and other information to keep administration, DMS and CMS aware of the needs and program performance.

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Each ADRC will effectively facilitate the referral processes and response time necessary to meet the requirements of a designated Local Contact Agency.

Referral Procedure

- (1) Initial referral will be made by the nursing home to the ADRC using standardized referral from within the (10) business days of the MDS assessment. A business day is defined as one (1) work weekday.
- (2) Referral form will be received using fax or secure e-mail
- (3) Initial and annual MDS assessment referrals require a face to face visit within ten (10) business days of receipt of the referral
- (4) Quarterly or status change MDS referrals require a phone call within three (3) business days.
- (5) Region or County specific resource packets will be provided to the resident providing them with available community resources
- (6) AAAIL staff shall provide information only and shall not accept direct request for services.
- (7) AAAIL staff shall receive documentation from the resident, guardian or nursing home staff verifying facility visit.
- (8) If the resident has a legal guardian who has full guardianship, AAAIL will contact the guardian regarding the residents return to the community.
- (9) If the guardian agrees to receive the information, it shall be given by the AAAIL to the guardian face to face within 10 business days unless the guardian lives out of state then the information shall be provided within 3 business days by phone.
- (10) If the guardian does not agree to the resident returning to the community, AAAIL shall document results and case may be closed.
- (11) If the resident does request information and the Ombudsman feels that the guardian is not acting in the best interest of the resident, the State Long Term Care Ombudsman has the authority to override the guardian's decision.
- (12) If the resident wishes to return to a county outside of the region, AAAIL staff shall provide the resident with returning county resources and advise them of the ADRC in that region.
- (13) ADRC will review the referral and will determine if the resident is MFP eligible
- (14) If MFP eligible, the same referral from will be faxed to Kentucky Transitions.

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Reports

Each AAAIL will collect resident and facility data to build a profile of the referrals being made. All data will be entered into the DAIL approved reporting system

Procedure:

- (1) The AAAIL will use the following data fields for entry into the data system:
 - Date of referral
 - Facility name, address, and phone number
 - Discharge Planner Name
 - Name of Client
 - Date of Birth
 - Social Security Number
 - Medicaid Number
 - Interpreter needed
 - Power of Attorney, Guardian, Family Contact
 - MDS Completed: Initial Contact, Quarterly, Annual, Status Change
 - Type of Contact (Face to Face, Phone)
 - Payor Source (if Medicaid)
 - Admission Date
 - How long in the Facility
 - County of desired discharge location
 - Date Referred
 - Referred to (ADRC name, MFP)
 - Completed By