



# Wyoming Home Services

## Policies & Procedures Manual

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## ***Introduction to Wyoming Home Services***

The Wyoming Home Services (WyHS) program is mandated by the State of Wyoming through W.S. § 9-2-1208. WyHS is fully funded by the State of Wyoming General Fund. Initially termed the Community Based In-Home Services Program, WyHS was created to serve Wyoming's senior citizens and disabled adults eighteen (18) years of age and older. Priority is given to individuals at risk of premature or inappropriate institutionalization. WyHS is a social model program, which can provide up to ten (10) services for eligible individuals. These services include: care coordination, personal care, homemaking, chore, respite, personal emergency response systems, adult daycare, hospice, home modification, and medication setup.

WyHS is granted out to one (1) provider in each county in Wyoming, totaling 23 providers throughout the State. Every four (4) years the program is put out for a competitive application. Year two (2) through four (4) are continuation grant years, in which the organization who is awarded the grant in the competitive year, houses and maintains the program.

In order to apply to be a provider for Wyoming Home Services in Wyoming, an organization shall apply during the competitive grant year. At that time, public notices were published in statewide newspapers. Organizations then request an application, based upon the instructions of the public notice, in order to apply. If there is more than one applicant in a county, a team of individuals shall be gathered to score the applications submitted and the grant funds shall be awarded to the highest scoring applicant.

When an organization applies to become a provider of WyHS in their county, they select which services they are going to provide. The one (1) mandatory service to be provided is care coordination. The organization shall employ an individual who is trained by the division to serve as an Access Care Coordinator (ACC) to provide the care coordination services. Access care coordinator training is provided by the Division at least one time per year, with individualized training available as needed throughout the year.

In order to be eligible for the WyHS program, potential clients shall be at least eighteen (18) years of age, determined through an ongoing assessment (AGNES) to be at-risk of premature institutionalization, and be in need of program services. Effective July 1, 2023, income verification was implemented for the WyHS Program. Payment for services is based upon a sliding fee scale and a mutual agreement between the client of services and the provider of services. Any payment collected shall be considered program income.

## *Definitions*

Access Care Coordinator. A person certified by the Wyoming Department of Health, Aging Division, Community Living Section to provide care coordination services for the Wyoming Home Services program.

Adult Day Care. A community-based group program designed to meet the needs of adults with physical or mental disabilities through an individual activity care plan. It is a structured, comprehensive program that provides a variety of health, social, and related support services in a protective setting during any part of a day, but less than 24-hour care.

At-risk. An individual unable to perform normal daily tasks independently due to multiple problems which can include, but are not limited to physical, emotional, or cognitive functioning, environment, abuse or neglect.

Capitation. A cost containment measure which places spending limits on community based in-home services funding for each client.

Care Coordination. A set of logical steps and processes of interaction within a service network which assure that a client receives needed services in a supportive, effective, efficient, and cost-effective manner.

Central Registry. Means the registry maintained by the Wyoming Department of Family Services pursuant to W.S. §14-3-213, which indexes perpetrators of child abuse or neglect and abuse, exploitation or abandonment of disabled adults. Find the Central Registry [here](#).

Certified Nursing Assistant. A person who is currently certified by the Wyoming State Board of Nursing.

Change of Status. A change of status includes, but is not limited to, if a client goes into the hospital for more than 24 hours, if a client moves, if a client's home has an infestation, the WyHS provider is informed that a client 'isn't doing well', a client's needs change, etc.

Chore. Chore services may include snow removal, yard maintenance, deep cleaning of household appliances or other services per the discretion of the provider.

Client. An at-risk adult, age 18 or older, who is the client of Wyoming Home Services.

Client Evaluation. Interviewing and observing the client, usually in the client's home, in order to obtain information on the client's functional capacity, available personal and social support resources, perceived problems, and services currently received from formal or informal sources.

Continuing Education Booklet (CEU Booklet). The form in which ACC's shall document and track education related to their work as an ACC. The due date of the booklet is printed on the booklet.

Days. Calendar days.

Department. The Wyoming Department of Health.

Disability. Per the ADA Amendments Act of 2008, a physical or mental impairment that substantially limits one or more major life activities.

Division. Aging Division.

Evaluation. Determining the status of the client for service (s) that can be addressed by the program. This shall be completed as specified by the Division.

Financial Year. An accounting period of twelve months starting July 1 through June 30.

Grantee. An organization that provides services outlined in an approved grant funded by the Division.

Health Evaluation. An evaluation of a client's medically related needs by a physician, physician extender or professional registered nurse.

Heavy Housework. Examples include but are not limited to moving heavy furniture, washing windows, cleaning baseboards, cleaning the floor on hands and knees, shampooing carpets, deep cleaning of kitchen appliances, cleaning overhead light fixtures & fans, cleaning & organizing cupboards & closets.

Homemaker. A person who assists with environmental services such as, but not limited to, light housekeeping, basic meal preparation, shopping, and laundry. Homemakers do not provide personal care.

Home Modifications. Minor modifications that are necessary to facilitate the ability of at-risk adults to remain in their homes and that are not available under other programs. A maximum of three hundred dollars (\$300) per client per year may be expended under this program for such modifications.

Hospice. A program for the terminally ill and their families given in a home or health facility which provides medical, palliative, psychological, spiritual, and supportive care and treatment.

Immediate Family. A person such as a spouse, parent, stepparent, parent-in-law, child, stepchild, child-in-law, sibling, half-sibling, stepsibling, sibling-in-law, grandparent, step-grandparent, grandparent-in-law, and grandchild.

Level of Care. Level of services a client may need such as in home, intermediate, or institutional.

Light Housekeeping. Services such as sweeping, vacuuming and mopping floors, dusting, cleaning in the areas used by the client which are essential to the client's maintaining a sanitary home.

Local Match. Local funds raised by the provider to be used to match state funds within the provider's budget.

Medication reminder. For WyHS policy regarding the role of the CNA, please follow information provided by the Wyoming State Board of Nursing found [here](#).

Medication setup. A licensed pharmacist or professional registered nurse can administer medications into a client's medication box.

Outreach. Identifying and establishing contact with persons who need the services provided by the program.

Personal Care. Activities include, but are not limited to, bathing, grooming, feeding, ambulating, exercising, oral hygiene, and skin care.

Personal Emergency Response System (PERS). An electronic device worn by the client to summon emergency help.

Physician Extender. Physician Assistant (PA) and/or Advanced Practitioner of Nursing.

Respite Care. Temporary, substitute supports to provide a brief period of relief for caregivers.

Senior Citizen. Any person 60 years of age or older.

Service Plan. Documentation of the services that shall be provided to meet the needs and goals of the client.

Service Unit. One hour of direct service provided to the client with the exception of PERS. One service unit for PERS is defined as an initial hook-up, the monthly service, or the termination of service.

Sliding Fee Schedule. Payment for services rendered to eligible clients based on the ability to pay.

Unable. Lacking the necessary ability to pay client fees for WYHS services.

Unsafe. Threatening, dangerous or posing physical or emotional harm.

## ***Community Living Section***

The Community Living Section (CLS) is a section within the Wyoming Department of Health's Aging Division. The CLS houses multiple programs, primarily under the direction of the Older Americans Act Reauthorization of 2016.

### ***Provider Organizations***

Once a provider organization is awarded the Wyoming Home Services grant funds, they shall begin to serve Wyoming's eligible citizens.

#### ***Employees***

The provider organization shall hire and train the appropriate staff to provide services. All care coordinators, homemakers, CNAs, and nurses shall be covered by liability insurance and bonding.

- *New Employee Orientation:* All staff shall have a general orientation completed during the first week of employment and prior to direct client contact, documentation of this orientation shall be kept in each employee's personnel file. This orientation shall include, but is not limited to, the following areas as related to job responsibilities:
  - Confidentiality;
  - Client rights and responsibilities;
  - Vulnerable adult abuse and reporting procedures;
  - Communication;
  - Documentation;
  - Understanding and working with various client populations; and
  - Understanding basic human needs.
- *Access Care Coordinator (ACC):* The provider organization shall employ a certified ACC; duties are detailed in the 'Services' section under 'Care Coordination'. In order to become an ACC, a person shall attend an ACC training sponsored by CLS and meet the following qualifications:
  - Be at least 21 years of age;
  - Have a high school diploma or GED;
  - Meet at least one (1) of the following criteria:
    - Have completed at least forty-eight (48) semester hours or seventy-two (72) quarter hours of post-secondary education in a related field;
    - Have at least two (2) years of experience in social services working with the elderly or people with disabilities.

Following initial certification, an ACC shall maintain certification by completing twelve (12) contact hours of job-related continuing education each financial year. Each year, the WyHS program manager shall provide the ACCs with a continuing education booklet (CEU booklet). This booklet shall have a place for the ACC to track all continuing education completed in the previous year. Each educational event shall be verified by certificate of attendance, signature from presenter, or signature from the provider

organization director. The CEU booklet is due every June at the end of the fiscal year. The original CEU booklet shall be provided to the WyHS program manager. Specific due dates shall be stated on each year's booklet. If a new ACC begins employment during the middle of a year, the contact hours of job-related education shall be prorated to 1 contact hour per month of employment for that year. The ACC will enter obtained information for WyHS clients into the CLS Database program. The provider organization has the discretion to employ a person to input all Wyoming Home Services data into the CLS Database program. Download Database User Responsibilities [here](#).

In the event that the ACC leaves employment or changes job duties within the provider organization, notice will be given to the Division within ten (10) working days. Unless specified by the Executive Director, the ACC's certification will be marked as expired per the date given. If the employer and the employee wishes to retain their ACC certification and/or the employee is working as an ACC by entering data and/or supporting ACC staff by performing ACC duties, then they must adhere to the above outlined policies covering ACCs (i.e. maintaining their certification through obtaining CEUs and attending ACC trainings).

- *Certified Nursing Assistant (CNA)*: If the provider organization intends to provide personal care to eligible clients, then a CNA shall be the person providing that service. CNAs shall follow the rules and regulations promulgated by the Wyoming State board of Nursing pursuant to its authority under W.S. § 33-21-119 thru W.S. § 33-21-156 and the federal requirements (Public Law 100-203). A CNA hired to provide personal care shall have a current license, in good standing, through the Wyoming State Board of Nursing. This CNA shall also have the home health aide training component of their licensure. Licensure, and home health aide training can be verified [here](#). In following the Wyoming State Board of Nursing regulations, a CNA shall be supervised by a professional registered nurse. Any questions regarding nursing rules, regulations, or licensure shall be directed to the Board of Nursing.
- *Homemaker*: If the provider organization intends to provide homemaking services to eligible clients, then a homemaker shall be employed. Minimum requirements for a homemaker are the following:
  - Eighteen (18) years of age and older;
  - High school diploma, General Educational Development (GED) Test;
  - Valid driver's license and access to reliable transportation;
  - Physical ability to perform required tasks;
  - Absence of any felony or misdemeanor convictions related to abuse, neglect, exploitation, intimidation, or abandonment.

A homemaker shall have a minimum of eight (8) hours of the following training, in the following areas, before any client assignment:

- General staff orientation;
- Documentation responsibilities;
- Practical knowledge and skills in homemaking;

- Maintaining a clean, safe, and healthy environment.

Homemakers shall be evaluated by the ACC at least every one-hundred eighty (180) days, at which time the competency form is completed.

- *Chore Personnel:* If the provider organization intends to provide chore services to eligible clients, then a chore personnel shall be employed or the services may be secured via a subcontractor.

### ***Hiring***

When hiring individuals to provide Wyoming Home Services to eligible clients, the provider organization shall first do the following:

- *All WyHS Employees:* Prior to working independently in a client's home, the provider organization shall obtain written documentation of at least two (2) character references from a previous employer, if any, or other knowledgeable and objective sources.
- *Wyoming State Board of Nursing Licensure Verification:* For all personnel that are licensed by the Wyoming State Board of Nursing (BON), the provider organization shall verify that the individual is in good standing with the BON.
- *Department of Family Services (DFS) Central Registry Screen:* The provider organization shall fill out the DFS form and submit according to the stated instructions. Prior to the employee working unsupervised, a clear Central Registry Screen shall be returned to the provider organization. The Central Registry Screen shall cost the provider organization \$10 per screening submitted. This fee is the responsibility of the provider organization. The Central Registry is found [here](#).
- *Background Check:* It is required, beginning July 1, 2015, by the Community Living Section that all employees working directly with clients of Wyoming Home Services have a completed background check. As stated in CLS rule for the WyHS program, "No Professional registered nurse, CNA, or Homemaker/Chore personnel shall have been convicted of a felony or a misdemeanor related to abuse, neglect, exploitation, or abandonment of adults or children." The provider organization is responsible for the cost of the completion of a fingerprint card, CLS shall pay for the cost of the background check. Background checks shall be handled and processed by the director of the provider organization, unless the director of that organization has completed the '*Executive Director Designation for Background Check Results*' in order to designate an employee to handle and process background checks. Using the small white labels obtained from the Program Manager, submit the fingerprint card to DCI, 208 S. College Dr., Cheyenne, WY 82002. Please email the last name only of the individual you are submitting for background check or simply call the Program Manager with the last name. Once the report is received back, it will be sent via secure email to the Director or their designee. If you do not make the Program Manager aware of the submission this will delay the report being returned to the provider. Background Checks are recommended to be conducted every two years for current employees.

## ***Required Reporting***

### ***Data Tracking***

There are multiple ways in which the services provided through Wyoming Home Services are tracked and subsequently reported to CLS. The financial and any requested forms or reports shall be submitted through the approved CLS database.

- ***Data Entry:*** All services provided through Wyoming Home Services are expected to be entered into the Database program by the 15<sup>th</sup> working day of the month. Much of the information requested on the quarterly financial reports and the quarterly program reports is pulled from the Database program. Please refer to the Database section of this manual for additional information.
- ***Quarterly Financial Reports:*** Based upon the state financial year, from July 1 to June 30, financial reports shall be submitted to the CLS, WyHS program manager quarterly. The quarterly financial reports are created by the CLS Program Manager and given to the provider prior to the report due date. The due dates are approximately as follows:
  - October 15
  - January 15
  - April 15
  - July 15
- ***Quarterly Program Reports:*** Also, based upon the state financial year, from July 1 to June 30, program reports shall be submitted to the CLS, WyHS program manager quarterly. The quarterly program reports are created by the CLS Program Manager and given to the provider prior to the report due date. The due dates are approximately as follows:
  - October 15
  - January 15
  - April 15
  - July 15
- ***Year End Close Out Report:*** This report is only used when a year-end payment and/or adjustment is required. The CLS Program Manager shall create and provide this form to the provider organization included with the quarterly financial report file. Upon the submission of the fourth quarter financial report, the program manager shall make a close out payment if matching funds have exceeded the 5% and state funds are remaining. Following the receipt of this payment, the provider organization shall submit the completed close out report to the WyHS Program Manager.

## *Financials*

When a provider organization submits an application for WyHS grant funds, it is required that the organization turn in a full, detailed proposed budget for all funds that shall be used for the program. This includes the requested state funds, local funds, projected program income, in-kind, and any other sources of funds that shall be used for WyHS.

- *WyHS State Funds Amount:* Each provider shall be notified of the allotted amount of WyHS state funds they can request. This shall be done when the grant application is sent out to all providers, in the spring of each year.
- *Program Income:* Funds that are paid by WyHS program participants for the services they are receiving. These funds shall be used first, before any other funds, to supplement the WyHS program.
- *Matching Funds:* Each provider organization shall provide at least five (5) percent of the contracted amount, based on actual expenses, to be applied as a local match for its budget. For example, a provider shall match \$5000 for a WyHS grant amount of \$100,000, totaling at \$105,000 to be spent on the WyHS program. Matching funds may include non-federal public or private funds, cash, WSSB funds, or in-kind. Funds used for the match in the WyHS program may not be duplicated as match in any other programs. Matching funds shall be accrued and reported, via the monthly financial report, on a monthly basis.
- *In-Kind Funds:* In-kind funds are the value of personnel, goods, and services for which the provider organization does not actually pay. Provider organizations shall document the contributed resource value amount.
- *Cost Capitation:* A cost containment measure which places spending limits on WyHS funding for each client. Each provider organization shall have a cost capitation policy for the Wyoming Home Services program.
- *Income Verification and Sliding Fee Scale:* WyHS providers shall utilize the Division's Income Verification and sliding fee scale to determine an agreed upon amount that the client is able to pay for services. The Income Verification form is updated and provided yearly. The agreed upon amount shall be stated on the service plan and signed by the client and the ACC. Such fees shall be considered program income.
- *Client Fees:* Clients paying a fee for services shall be provided with monthly statements regarding the number of service units and the agreed upon fee for services. After 60 days, if a client has not paid the amount on the statement, that statement shall be zeroed out. Provider organizations shall not use legal means or collections to recover funds on unpaid statements. The Provider may choose to reduce services or place a client on a waiting list if the client is unable to contribute to the cost of services as determined by the Income Verification and Sliding Fee Scale form.
- *Direct Services:* Direct services shall account for at least 70% of WyHS grant funds. Direct services are directly related to delivering goods, services or work effort to clients or customers of the WyHS program. Direct costs generally include: salaries or wages including vacations, holidays, sick leave and other excused approved absences of employees, other employee fringe benefits allocable on direct labor employees,

consultant services contracted to accomplish specific WyHS grant/contract objectives, travel of direct labor employees, materials, supplies and equipment purchased directly for use on the WyHS grant, and communication costs such as long distance telephone calls identifiable with the WyHS grant.

- *Indirect Costs:* Indirect costs shall not exceed 15% of the WyHS funding amount. Represent the expenses of doing business that are not readily identified with the WyHS grant. Indirect or administrative costs generally include: general administration and expenses, such as the salaries and expenses of executive officers, personnel, administration and accounting, depreciation or use allowances of buildings and equipment, costs of operating and maintaining facilities, audit expenses, computing services, utilities, or custodial services.

## *Client Eligibility*

W.S. § 9-2-1208 states that ‘The department of health shall administer a state program to provide community based in-home services for Wyoming senior citizens and disabled adults eighteen (18) years of age and older. Priority shall be given to persons at risk of placement in nursing homes, assisted living or other institutional care settings. The program may serve persons who are not senior citizens if the program’s services are needed to avoid institutional placement.’

- *Eligibility for WyHS:* In order to be eligible for the Wyoming Home Services program, a potential client shall be at least 18 years of age, determined through an ongoing assessment, to be at-risk of premature institutionalization and be in need of program services.
- *Aging Needs Evaluation Summary (AGNES):* The AGNES is the division’s initial evaluation and level of care tool used to determine eligibility for the WyHS program. Within the AGNES are the Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL) scales. Potential clients are eligible for WyHS if they have 2 areas of need on either of these scales or between the two scales.
- *Exceptions:* Potential clients may still be eligible, even if they do not meet two (2) areas of need requirement, if they have a need for services to prevent inappropriate or premature institutionalization. This is determined on a case-by-case basis, at the discretion of the ACC. The ACC’s may also contact the WyHS program manager for additional direction and guidance.
- *Needs versus Wants:* Services provided by the WyHS program are to serve the needs of Wyoming’s eligible populations, not necessarily the wants.

## ***Local Policies***

Local policies are policies that provider organizations have put into place to govern day to day business. Each provider organization may have multiple local policies that they follow. The CLS requires a provider to maintain the following local policies:

### ***Required Local Policies***

- ***Adult Protective Services (APS) Policy:*** Each provider organization shall have an APS policy in place. This policy shall define what abuse, neglect, and exploitation are and provide a process in which employees shall follow if they suspect abuse, neglect, or exploitation of a Wyoming Home Services client. This policy shall be reviewed with new clients and annually thereafter with each client.
- ***Shopping Policy:*** The provider organization shall maintain a local policy on how money is handled for shopping. The provider shall maintain a written record, according to local policy, of any forms of currency given to the homemaker for shopping purposes. This record shall include the date, amount given, items to be purchased, and the client and homemaker signatures. After the shopping is completed, change shall be returned to the client. The written record shall then include the amount of change returned and the client and homemaker signature.
- ***Tips, Gratuities, and Gifts Policy:*** Staff members who are employed with the Wyoming Home Services program are prohibited from accepting any and all individual gratuities, gifts, property, tips, or other incentives from the consumer or the consumer's family. Under no circumstances shall it be acceptable for any staff to accept cash or cash equivalent as an individual gift, gratuity or additional payment for services. Each funded contractor shall develop a written policy and procedure to enforce this policy.
- ***Waiting List Policy and Procedure:*** It is the responsibility of each provider to establish a written policy on waiting list procedures. This policy shall include how a client is added to the waiting list, how a client comes off the waiting list, and if a client is not ready to come off the list, where does that client go on the list.
- ***Emergency Preparedness Plan:*** Each provider shall have an emergency preparedness plan, both for the place of business and when in the WyHS client home, in which all CNA's, Homemakers, and ACCs shall be trained. A disaster or emergency may be a local, community, regional, or statewide event. Disasters or emergencies may include, but are not limited to:
  - Tornadoes;
  - Fires;
  - Floods;
  - Blizzards;
  - Power outages;
  - Vehicle wrecks;
  - Declared health crises.

## *Services*

Each provider organization has the opportunity to provide up to ten (10) services under the Wyoming Home Services program. These Services are care coordination, personal care, homemaking, chore, respite, personal emergency response system, adult day care, hospice, home modification, and medication setup. The provider organization shall choose the services to be provided upon grant application completion. If a provider chooses to add another service to their grant during the provision of the grant year, the provider organization shall submit the following: (1) a request to do so in the approved CLS database, (2) the appropriate updated service pages from the grant application, and (3) the updated budget pages, if necessary.

WyHS services shall not be performed in nursing homes, intermediate care facilities, assisted living facilities, or group homes. There shall not be any duplication of services. Clients may receive services from other programs, but WyHS services shall never be performed at the same time as similar services from other programs. **Clients shall be present during the provision of all WyHS services.**

- *Care Coordination:* A set of logical steps and processes of interaction within a service network which assures that a client receives needed services in a supportive, effective, efficient, and cost-effective manner. Care coordination is a mandatory service. Every client receiving Wyoming Home Services shall receive care coordination services. Care coordination shall be provided by a certified access care coordinator.
  - *Waiting List Care Coordination:* The time that an Access Care Coordinator spends with potential WyHS clients prior to being on the WyHS program shall be entered into the approved CLS database and be considered as the care coordination is completed. This may include discussing services, evaluating, the sliding fee scale, completing paperwork, etc. Find the Database training here: <https://vimeo.com/1059148790> . The client's information is entered into the database, the funding source will be added and a service will be added and shown as waitlisted.
  - *Initial Evaluation:* The ACC shall determine initial eligibility using the AGNES. The ACC shall work with the new client to complete the entire AGNES form. At this time, pages one (1) through three (3) shall be completed. The new client shall have at least two (2) areas of need in the ADL and/or IADL area. If a client does not meet this requirement, he or she shall have a need for services to prevent inappropriate or premature institutionalization. This initial evaluation is valid for one (1) calendar year, at which time a new, full AGNES shall be completed. A service plan shall be developed based upon the needs identified in the AGNES.
  - *Service Plan:* Based upon the completed AGNES, needs are identified. At this point the ACC shall complete a service plan based upon the identified needs. The service plan shall include the following information:
    - Start/End Dates of the authorized services
    - Name, address, phone number
    - Emergency contact information
    - ADL & IADL numbers and scores initially and for each quarter

- Income information
  - Agreed upon fee for services
  - Services to be provided
  - Functions of services to be provided
  - Frequency of services to be provided
  - Signature from client, ACC, and professional registered nurse (if personal care, skilled nursing, or med setup services are needed)
- *Quarterly Evaluation:* An evaluation of a client shall be made by the ACC, in the client's home, to evaluate the quality and need for services at least every ninety (90) days. During this evaluation, the ACC shall complete an ADL/IADL page, pages four (4), five (5), or six (6) of the AGNES. Adjustments in the service plan may be made at this time, as necessary. Clients receiving only care coordination and PERS services may have two (2) quarterly visits via telephone. Two (2) quarterly visits shall be completed in the client's home.
- *Significant Change of Status:* If a change of status occurs, depending upon the change, the ACC may complete a new AGNES, and service plan. A change of status may include the following:
  - The client is hospitalized for more than twenty-four (24) hours
  - The client moves
  - The client's home has an infestation (bed bugs, mice, etc.)
  - The WyHS provider is informed that the client 'isn't doing well'
  - The client does not receive services for 30 continuous calendar days
  - The client's ADL or IADL number changes
- *Personal Care:* Activities include, but are not limited to, bathing, transferring, grooming, feeding, ambulating, exercising, oral hygiene, and skin care. Personal care is a hands-on service and shall be performed by a Certified Nursing Assistant (CNA) or a professional registered nurse. WyHS is a social model program, medical interventions such as colostomy care and catheter care are limited within the program. Per the Wyoming State Board of Nursing, under the supervision of a professional registered nurse, a CNA may complete the following colostomy/catheter/ostomy care: clean and dry off a Foley catheter as part of routine peri-care; empty catheter bags; and empty ostomy bags. If there is any question regarding services to be provided by a CNA or professional registered nurse, please refer to the Wyoming State Board of Nursing [here](#) or contact them directly.
- *Homemaking:* Homemaking can be broken down into two different types, light housekeeping and shopping. Homemaking is a 'hands-off' service.
  - *Light Housekeeping:* This includes services such as sweeping, vacuuming and mopping floors, and dusting. Homemaking services shall only be completed for the WyHS client, not others living in the home. Homemaking services shall not pose any health risk to staff. Homemaking does not include the following:
    - Cleaning baseboards;

- Cleaning floors on hands and knees;
  - Moving heavy furniture or objects;
  - Climbing ladders;
  - Washing windows;
  - Washing walls or ceilings;
  - More than one day accumulation of dishes;
  - Shampooing carpets.
- *Shopping*: Shopping shall be preapproved through the ACC and shall be authorized on the client's service plan. The provider organization shall maintain a local policy on how money is handled for shopping. The provider shall maintain a written record, according to local policy, of any forms of currency given to the homemaker for shopping purposes. This record shall include the date, amount given, items to be purchased, and the client and homemaker signatures. After the shopping is completed, change shall be returned to the client. The written record shall then include the amount of change returned and the client and homemaker signature.
- *Respite Care*: A temporary substitute support provided to the WyHS client, in order to relieve the client's caregiver for a brief period of time.
- *Chore*: If chore services are needed in order to prevent premature institutionalization, WyHS funds can be used to provide the services or hire a sub-contractor to provide the chore services. Examples of chores include, but are not limited to, moving heavy furniture, washing windows, cleaning baseboards, cleaning the floor on hands and knees, shampooing carpets, deep cleaning of kitchen appliances, cleaning overhead light fixtures & fans, snow removal, yard maintenance, or other services per the discretion of the provider organization.
- *Personal Emergency Response System (PERS)*: This electronic device, worn by the client to summon emergency help, may be provided to WyHS clients in need of the service. The ACC shall verify that the PERS unit for each WyHS client receiving the service has been tested monthly. Documentation that the PERS unit was tested shall be kept in the client file. There are multiple ways in which an ACC can verify that the test was completed:
  - The ACC can go out to the client's home and test the PERS unit monthly
  - The ACC can monitor the activity report, provided by the PERS company, in order to verify that tests were completed within the month. If a test is shown as not completed within the month, then the ACC shall follow up and verify that the PERS unit is functioning properly
  - CNAs or homemakers may test the PERS unit as a part of their homemaking or personal care duties while they are visiting a client. The CNA or homemaker shall be adequately trained on how to test the PERS unit. This shall be documented on the CNA/homemaker competency form. The task of testing the PERS unit shall be listed as a task on the client's task sheet.

- *Adult Day Care:* Adult day care is a community-based group program designed to meet the needs of adults with physical or mental disabilities. If a provider chooses to offer this service, it shall be done through a certified Adult Day Care facility. Please refer to the Wyoming Department of Health, Aging Division, Office of Healthcare Licensing and Surveys for more information [here](#).
- *Hospice:* A program for the terminally ill and their families given in a home or health facility. If a provider chooses to offer this service, it shall be conducted through a certified Hospice agency. Please refer to the Wyoming Department of Health, Aging Division, Office of Healthcare Licensing and Surveys for more information [here](#).
- *Home Modification:* Minor modifications that are necessary to facilitate the ability of at-risk clients to remain in their homes and that are not available under any other programs. A maximum of three hundred dollars (\$300) per client, per year may be expended for such modifications. A visual inspection of the home shall be completed by the ACC to determine the client's need. If it is found that the requested home modification shall not be of direct benefit to the client, the provider shall deny the request. If the home is in poor condition and not structurally sound, the home modification shall not be approved. The approved home modification shall be documented on the client's service plan. When the modification is complete, the service plan shall be updated. In order to receive a home modification, a client shall meet the following criteria:
  - Must be currently enrolled in the WyHS program
  - Must own the home or receive prior written approval from landlord
  - Must demonstrate a need for a safer and/or adapted environment
  - The modification shall directly assist the client's ability to complete his or her ADL's or IADL's.
- *Medication Setup:* A licensed pharmacist or a professional registered nurse may place medications into a client's medication box or container, for easier administration at a later time. This service does not include medication administration, no exceptions.

## ***Legal Matters***

Access Care Coordinators shall not have guardianship or power of attorney of WyHS clients. If guardianship or power of attorney was previously established, the ACC shall not provide care coordination or direct services to that client. An alternate ACC shall need to provide services to that client. If there is no alternate ACC, the project director or designee shall assume the care coordination for that client.

- *Legal Representatives:* Legal representatives can be guardians, power of attorneys, etc. Legal representatives can sign on behalf of the client in the event the client is unable to sign WyHS documents. Legal representatives shall provide documentation to the provider organization, such as power of attorney or guardianship documents before signing on behalf of the client. Any forms of documentation shall be notarized. A copy of the documentation shall be kept in the client file, with the document dated when received. Any updated documentation shall be kept in the client file in chronological order.
- *Advanced Health Care Directives:* If a WyHS client has documentation on their wishes regarding performing cardiopulmonary resuscitation (CPR), this documentation may be in the client file. It is the client and/or family's responsibility to make sure there is a document stating the client's wishes posted in the client's home in clear sight of any provider staff or EMS staff. If no document is posted in the home, provider staff may perform CPR. Providers shall have a policy regarding advanced directives, CPR, and WyoPOLST as to provide guidance to their staff. The WyoPOLST document can be found [here](#).

## ***Client Files & Documentation***

All client files and documentations shall be kept for 6 years following client termination, according to HIPAA laws. With the implementation of the CLS Database, all files will be accessible online.

- *Client Files:* The provider shall maintain a file for each client receiving Wyoming Home Services. All CLS issued WyHS forms shall be kept in the client files, please see the 'Forms' section of this manual for additional information on each form. Each WyHS file shall be kept separate from any other client program file. Case files shall be confidentially maintained in a locked container or a locked room. A log shall be maintained stating each authorized staff member that has access. The room or container shall be locked when authorized staff are not present. All major activities related to the WyHS client shall be documented and recorded in the case file. This includes but is not limited to:
  - Initial referral documentation;
  - Signed copy of the Division's client rights and responsibilities (located on the back side of the service plan);
  - HIPAA documents;
  - Evaluation information;
  - Services provided;
  - Follow-up visits;
  - Changes in client status;
  - Service plan;
  - Service providers' notes;
  - Any related client information (i.e. – DNR, POA, etc.);
  - Information that is related to the coordination of care, communication, and client safety.
- *Service Documentation:* Staff providing direct services to clients shall document the services rendered and other information in order to aid in communication and coordination of services for the client, monitor service quality, and verify the work is done. This includes services rendered for the following:
  - Care coordination;
  - Personal care;
  - Homemaking;
  - Chore services;
  - Respite care;
  - Personal emergency response system;
  - Adult daycare;
  - Hospice;
  - Home modification, and;
  - Medication setup.

All documentation shall include date and time. Time shall be either in AM/PM or military time but the entire organization shall use the same method. Each time a staff

member documents, the entry shall be authenticated with the appropriate signature(s). All documentation shall be completed with blue ink, white out shall never be used. Entries shall be specific and objective. Opinions, complaints, and/or emotions are not to be included in client files. All staff shall be trained on proper documentation. Training for this is provided yearly at the Access Care Coordinator training and upon special request. All services billed for in the approved CLS database shall have backup documentation.

- *Accident & Incident Documentation & Reporting:* All witnessed accidents and incidents (falls, etc.) shall be documented in an official report in the client's file. All incidents or accidents that occur but are unwitnessed shall be documented in the client's file with time, date, occurrence, witnesses and any other pertinent information. If a client falls when staff is present or if a staff member finds a client who has fallen:
  - Emergency medical services (EMS) shall be contacted to assess the client's potential injuries;
  - If a client refused EMS services when they arrive, this shall be documented;
  - The client's emergency contact shall be notified immediately.
- *Signature:* If a client is unable to sign a document, the client may use initials, an 'X', or utilize a stamp, if they choose. These types of signatures shall be witnessed initially by the ACC or professional registered nurse. A legal representative can sign for the client, provided that the WyHS provider has, in their possession, documentation of the legal relationship. If a client is unable to write initials, an 'X', and does not use a stamp or have legal representation, the ACC shall document 'client unable to sign, verbal consent provided'. This shall be witnessed by the ACC and another staff member at the initial instance. Staff may never sign for a client. If dating the form, the ACC needs to initial the date and note that they are dating the document for the client.

## *Forms*

The Community Living Section distributes various forms that are required to be used for the Wyoming Home Services program. These forms shall **not** be used for any other program, unless specifically instructed to do so by CLS staff. All forms are included in this manual, along with instructions, if applicable.

- *AGNES (Required)*: Each WyHS client shall have an AGNES completed upon starting the program, with a significant change of status, and yearly thereafter. For the WyHS program, the ACC shall complete the full 6 pages of the current AGNES with the client. When a client starts the WyHS program and annually the ACC shall complete pages 1-3 of the AGNES. Each quarter thereafter, the ACC shall complete a new ADL/IADL page, from pages 4-6 of the AGNES. These records shall be kept in the WyHS client's chart, in chronological order.
- *Service Plan (Required)*: A service plan shall be completed for WyHS clients starting the program and yearly thereafter. A WyHS service plan is developed based upon the AGNES evaluation and each client's unique needs. The service plan shall state the specific services to be provided and the frequency in which those services are to be provided. The service plan shall be signed by the client or their legal representative (if applicable) and the Access Care Coordinator. A service plan is active for one (1) year, at which time the ACC shall complete a new one. Written service plan instructions shall be provided to staff before services are rendered. The ACC shall document every service that the client shall be receiving in the service plan time frame.
- *Change of Status (CoS) Form*: If a change of status takes place within a WyHS client's service plan year, the CoS form shall be used to make any changes to the client's contact information, services, or fee for services that may be needed. A change of status includes, but is not limited to, if a client goes into the hospital for more than 24 hours, if a client moves, if a client's home has an infestation, if WyHS staff are informed that the client isn't doing well, or a client's needs changes.
- *Task Sheet (Required)*: The task sheet is used for any services that are provided in a client's home. The task sheet shall be filled out by the ACC or the RN (for personal care) in order to specify to the employee what tasks shall be completed at the client's home. The employee shall not add items to the task sheet. Any additions or client requests shall be approved through the ACC or RN. Once the sheet is filled out by the ACC or RN, it is given to the employee that is providing the direct care services. The task sheet may be used for one (1) up to ten (10) visits. The top portion and bottom portion of the task sheet may not be modified by the provider organization, the middle portion of the form may be modified as needed by the provider organization. During the visit to the client's home, the employee shall check off or initial each task that is completed. If the sheet is being used for one (1) visit, the employee can document each item and sign the sheet at the bottom. Then the client shall then review the sheet and sign at the bottom verifying the completion of the tasks that day. If the sheet is being used for more than one (1) visit, the employee shall initial each task that was completed. At the end of the visit, the sheet shall be given to the client so they can initial next to each task that was completed, in

order to verify completion of the tasks that day. When the employee is done using the sheet, then the employee and the client shall sign the sheet as a final verification of the entire task sheet.

- *Adult Nursing Assessment (Required):* The adult nursing assessment shall be completed for clients receiving personal care. Personal care shall be provided by a CNA, who is supervised by a professional registered nurse. The adult nursing assessment shall be filled out and completed by a professional registered nurse. The adult nursing assessment shall be updated annually and/or as needed. If a WyHS client is being discharged from the hospital, the hospital professional registered nurse may complete the adult nursing assessment. The discharge paperwork is not sufficient to replace the adult nursing assessment.
- *Nursing Delegation (Required):* A professional registered nurse shall complete a nursing delegation form for each WyHS client receiving personal care services. The intention of this form is to meet the Wyoming Board of Nursing requirement to delegate the unique personal care tasks, for a specific client, to a CNA. This form shall be completed annually and/or as needed for changes in client's needs. The nursing delegation shall then be used to guide the completion of the task sheet for personal care.
- *Competency Form (Required):* The competency form is to be completed for all CNA's, homemakers, and chore personnel. This form shall be completed every 180 days and verifies that the employee is competent in the stated skill areas. If the employee is a CNA, the competency form shall be completed by a professional registered nurse. If the employee is homemaker or chore personnel, the ACC shall complete the competency form. The skills areas may be verified through observation, verbal, or written demonstration. The completed competency form shall be placed in the employee file.

## ***Suspension and Termination of Services***

Suspension or termination of WyHS services may be conducted in various situations with clients. Following is a list of protocols for situations that may involve a suspension of services or termination of services.

- *Suspension of Wyoming Home Services:* Suspension of WyHS services means putting one or all services on temporary hold until an issue is resolved. WyHS services may be suspended, but not limited to the following reasons:
  - Pest infestation;
  - Illegal drug usage while WyHS services are being provided;
  - Hospitalization.

Upon the identification that a service shall be suspended, the ACC shall discuss the issue with the client and send a suspension letter. The suspension letter shall include the following:

- The effective date of the suspension;
- Under what circumstances the suspension may be lifted;
- A contact name and number for the local WyHS program;

An ACC may suspend one service, while continuing other services, if it is appropriate. For example, Mary has bed bugs, Mary's ACC suspends homemaking services, while continuing care coordination in order to assist Mary in securing services to get rid of the bed bugs.

- *Termination of Wyoming Home Services:* Termination of WyHS services means permanently ending all services with a client. A WyHS client may be terminated, but not limited to the following reasons:
  - Level of care requirements are no longer being met;
  - Exceeding the cost containment level, as set by the provider;
  - Client is unwilling to pay the fee for service agreed upon by the client and the ACC;
  - The client chooses nursing home placement or other alternatives;
  - The client or client's family impedes the provision of services;
  - The provider has a reduction of funding or services;
  - The provider ceases to operate with no transferring of services;
  - The client does not receive services for thirty (30) continuous calendar days.

For the above reasons, providers shall provide at least fourteen (14) business days written, advance notice of the intent to terminate services. The letter of notice of termination shall include:

- The reason for termination;
- The end date of services;
- An explanation of the client's right to personal and/or third-party representation at all stages of the termination process;
- Contact information for the Long-Term Care Ombudsman Program, if applicable;
- The client's right to dispute the termination from services to the provider's director and board chair.

The letter shall be on the provider organization's letterhead, and it shall be sent certified mail. The provider may provide services during the dispute process. If the client does not meet the deadline for dispute submittal, the dispute process ceases.

A client may be terminated immediately from the program and services may not be provided during the dispute process if:

- The client or client's family creates a hostile, dangerous or unsafe work environment for employees;
- The client becomes a danger to self or others.

For the above reasons, providers shall provide notice of immediate termination of services. The letter of notice of immediate termination shall include the same items listed above for the notice of termination of services. Any letter of termination shall be entered into the approved CLS database.

- *Thirty (30) Days No Services:* Examples of thirty (30) continuous days of no WyHS services being provided: a client leaving Wyoming for the winter months, a client moves to another county and doesn't return, a client moves out of Wyoming, a client is in the hospital or nursing home for at least thirty-one (31) days. The thirty (30) day period begins on the first day of the missed service(s).
- *Dispute Process:* Upon receipt of the notice of termination, a client may appeal the decision with the provider organization's board of directors. If a client wishes to appeal, he or she shall write the organization's board of directors within ten (10) calendar days of the date of the notice of termination. Upon receipt of the board of director's letter of decision regarding the appeal, if the client disagrees with the decision, then the client shall contact the WyHS Program Manager at 307 777 7995 or 800 442 2766.

## ***Program Transfer***

If the program is to be transferred from one provider to another, it is the responsibility of the transferring provider to inform clients of the impending change in writing, at least fourteen (14) days prior to contract termination. The letter to the client shall include:

- The name of the new provider;
- The name and phone number of the contact person with the new provider;
- Assurance that the client shall not be arbitrarily dropped from the program due to the transfer;
- A statement informing the client that a new evaluation shall be required and shall occur within ninety (90) days of the transfer;
- The date of the transfer.

With the use of the preferred database, if the client moves from one county to another, then the file can be left active in the database, their address can be changed and a note placed in the file explaining the situation. Notify the Program Manager of the change and the Program Manager will contact the new provider and ask that contact be made to the client, to make any changes necessary.

## ***Confidentiality***

All program and client information are subject to the Health Insurance Portability and Accountability Act (HIPAA) and the Health Information Technology for Economic and Clinical Health Act (HITECH). Program staff shall be trained on HIPAA and HITECH. All client files shall be secured according to HIPAA and HITECH standards.

## *CLS Database for Wyoming Home Services*

The Wyoming Home Services Program provides services to qualified disabled and aging adults, aged 18 and over, who are at risk of premature institutionalization. These services are designed to keep individuals in the least restrictive, safest environment possible, for as long as possible.

**Eligibility:** Clients shall be 18 years of age or older, residing in Wyoming, and determined, through an ongoing evaluation, to be at risk of premature institutionalization.

**REQUIRED:** The AGNES shall be entered into CLS Database using the 'Document' tab in each consumer's file. If you are uploading the AGNES into the database, you will also need to manually enter the data that is in the AGNES form into the database.

### **SERVICES:**

*Service Category ~ Case Management (Care Coordination) – **REQUIRED SERVICE** - Assistance in the form of access care coordination in circumstances where the person is experiencing diminished functioning capacities, personal conditions or other characteristics which require the provision of services by formal service providers. Activities of care coordination include evaluating needs, developing care plans, authorizing services, arranging services, coordinating the provision of services among providers, follow-up and reassessment as required. **Tracking Care Coordination by hours provided to each unduplicated client is required.***

**Unit Type:** 1 Hour

There are four services under Case Management:

- **Initial Evaluation** - includes, but is not limited to, the time spent developing the service plan, doing the AGNES, HIPAA Privacy Practices and assessment for other community resources.
- **Follow-up Contacts –CM** - phone call(s) or any contact with the Client.
- **Quarterly evaluation** – every 90 days after the initial start date a personal visit (unless otherwise specified in the WyHS Policy and Procedure) with the client shall take place to evaluate if any change in services is needed;
- **Re-evaluation renewal** – every year the ACC shall conduct an annual visit to the client which consists of completing a new service plan, AGNES, and assessment for other community resources.

*Service ~ Personal care* - Providing personal assistance, stand-by assistance, supervision or cues for persons with the inability to perform one or more of the following activities of daily living; eating, dressing, bathing, toileting, transferring in and out of bed/chair, or walking. All personal care shall be completed by a Wyoming licensed CNA who is supervised by a Wyoming professional registered nurse.

**Unit Type: 1 Hour**

There are five examples of Personal Care:

- **Dressing**
- **Skin Care**
- **Bathing/Showering**
- **Transferring**

*Service ~ Homemaker* - Providing assistance to persons with an inability to perform one or more of the following instrumental activities of daily living: preparing meals, shopping for personal items, managing money, using the telephone, or doing light housework.

**Unit Type: 1 Hour**

There are five examples under Homemaker:

- **Housekeeping**
- **Meal Preparation**
- **Laundry/Linen Change**
- **Shopping**

*Service ~ Chore* - Providing assistance to persons with the inability to perform one or more of the following instrumental activities of daily living: heavy housework, yard work, or sidewalk maintenance.

**Unit Type: 1 Hour**

There are three examples for Chore:

- **Snow Removal**
- **Handyman**
- **Yard Maintenance**

*Service Category - Respite care* - Respite care services offer temporary, substitute supports, or living arrangements for eligible clients in order to provide a brief period of relief or rest for family members or other caregivers.

**Unit Type: Hours**

There are three services for Respite:

- **In Home**
- **Assisted Living**
- **Institutional**

*Service - Adult Day Care (ADC) - Service Adult Day Care/Health* - Provision of personal care for dependent adults in a supervised, protective, congregate setting during some portion of a twenty-four-hour day. **Licensed facilities only.**

**Unit Type: 1 Hour**

*Service ~ Hospice* - Services provided to the terminally ill, allowing the client to remain at home. **Licensed Hospice providers only.**

**Unit Type:**

There are two examples for Hospice:

- **In-Home Hospice**
- **Licensed Facility-Hospice**

*Service ~ Home Repair* – Minor home modifications, such as hand rails or ramp, that are necessary to facilitate the ability of at-risk adults to remain in their homes and that are not available under other programs. **A maximum of \$300.00 per client may be expended for such modifications, and shall be approved by the WyHS Program Manager** prior to any work starting or the grant being charged for modifications.

**Unit Type: Hours**

*Service Category - Nursing* - Services that are within the scope of practice of a Wyoming professional registered nurse, as defined by the Wyoming Nurse Practice Act. Services under Nursing include medication setups, delegating tasks, assessing and reassessing client's personal care and nursing needs.

**Unit Type: 1 Hour**

There are four Services for Nursing.

- **Medication Management** – Medication setups are the placing of medications into another container, such as a medication planner, for easier administering at a later time, e.g., service of oral medication and/or insulin set up. Medication setups do not include the preparing and immediate administering of the medication by the person who prepared it. As dictated by the Wyoming Statute, only a Wyoming licensed skilled nurse, working under the direction of a physician, may give injections or administer medications.
- **Delegation** – Time spent completing the delegation form. This form specifies the delegated tasks and expected outcomes to CNA's.
- **Re-assessment** – Time spent re-assessing a WyHS client's needs.
- **Assessment** – Time spent completing the Adult Nursing Assessment.

*Service Category - Personal Emergency Response Systems (PERS)* - Electronic warning device informing emergency personnel of an accident or safety hazard to a client in their home.

**Unit Type: Monthly**

There are two services for PERS:

- **Monthly**
- **Installation**

## ***CLS DATABASE INFORMATION***

***Imports:*** The approved database and My Senior Center are working on a full-integration between systems where the data will be seamless between the two systems without a manual import. Full integration should occur February 2025.

***Recordings of Trainings:*** Mon Ami Training overview IIIE and WyHS Programs find it [here.](#)

### ***Training Office hours:***

- ***System Basics, December 3rd- [Mon Ami Office Hours: System Basics - 2024/12/03 13:40 MST - Recording](#)***
- ***Title IIIE and WyHS, December 4th- [Mon Ami Office Hours: Title IIIE and WyHS - 2024/12/04 13:43 MST - Recording](#)***
- ***Reporting Services, December 11th- [Mon Ami Office Hours: Reporting Service - 2024/12/10 13:32 MST - Recording](#)***
- ***Using Reports, December 17th - [Mon Ami Office Hours: Using Reports - 2024/12/17 13:45 MST - Recording](#)***
- ***General Office Hours, December 19th- [Mon Ami General Office Hours - 2024/12/18 13:51 MST - Recording](#)***

***Care Plans:*** Care Plans for WyHS and Caregiver will not transfer over from the old database to the new database. Please begin to add the care plans with any file you complete work on; please have all care plans associated with active clients updated by June 2025.

***Monthly Data reports to Programs:*** The Program Manager will review provider data directly in the database system. Providers will no longer be required to send monthly data reports.

- Each Month providers will need to verify with their staff that all reporting is complete prior to sending monthly reimbursement requests. Directors will be asked to attest to this when submitting reimbursement requests in the Submittable platform.
- When reimbursement requests are received, CLS program managers will review the applicable data in the database for each grantee and may ask questions prior to approving the reimbursement requests.

- The first question in the Submittable platform will ask if the Director at your organization has completed a review for the data for the corresponding program and certifies that all data is accurate and complete.
- The second question will ask if the program director has reviewed the My Senior Center (or other external upload data), and has verified its accuracy in the Mon Ami database. This question will also include an option for ‘non-applicable’ if your organization does not use any data from an external database for uploading information to the approved CLS database.

***Signatures for AGNES forms in the CLS Database:***

All new/renewal AGNES forms must have a client signature to upload in the database. Each active client in the database needs only one client signature per lifetime. The uploaded signature does not need to happen right away for existing clients in the database, but should happen for all new clients moving forward and any clients providing a renewal AGNES form after January 6, 2025. This can be completed in one of two ways.

- If a new client/renewal completes a paper AGNES and signs the document, you will upload a copy of this document in the CLS database using the “Signed Information Release Form” found on the ‘Documents’ tab in the client’s profile in the database.
- If a new client/renewal provides their AGNES information to one of your staff members, and this information is entered directly into the CLS database, you will need to have the client sign a copy of the “Signed Information Release Form” and upload this document. Blank forms can be obtained by downloading the ‘Blank form’ located in the ‘Document Templates’ tab of the CLS database, or under the “Documents” tab of the client’s profile.
- The Release of Information form can be found on our website in English and Spanish <https://health.wyo.gov/wp-content/uploads/2024/11/Release-of-Information-Form-for-Community-Living-Section-Programs-English.pdf>
- For existing clients with a signed paper AGNES form in your organization’s file, please keep these paper records for a minimum of three years, or longer if your organization’s policies require. These documents will be subject to review during the FFY 2025 quality assurance visits from CLS.

***Authority/Permissions for individual users in the CLS database***

When you gain access to the new CLS database you should be set up with the permissions appropriate for your work and based on the information we collected from each provider. If you feel your permissions are not set up correctly, please speak with your organization’s director and have them reach out to Maraia Rubin (maraia.rubin@wyo.gov) via email to request a change.

In the CLS database, only Directors of organizations have access to delete service deliveries/records. All users in the system should have access to view reports.

***User Responsibilities:***

All users added to the CLS database will be sent an Authorized User document to sign off, demonstrating they understand the rules and responsibilities of accessing the database. Please review this document carefully and let your Program Manager know if you have any questions.