URGENT SERVICES

Introduction

San Diego County provides In-Home Supportive Services (IHSS) through the Individual Provider (IP) mode. Occasionally the Individual Provider is temporarily unable to provide the required daily services, placing the IHSS recipient's health and safety at risk. When all alternative resources have been exhausted, a referral to the contracted private agency will be made. The contractor is responsible for the administration and organization of the service delivery for all recipients referred by IHSS staff.

Urgent Services Contractor

The County of San Diego has entered into a contract with At Your Home Family Care for the administration and delivery of Urgent Services for IHSS recipients. Referrals will be strictly limited to ongoing IHSS recipients that require personal care or other IHSS services in order to avoid unnecessary hospitalization, emergency room visits and calls to 9-1-1. The services are available seven (7) days a week, twenty-four (24) hours a day, including holidays. Recipients may request a referral on holidays or after hours of operation by calling the AIS Call Center at 1-800-510-2020. The after-hours vendor will process the request.

Objectives

The contract allows for the temporary provision of Urgent Services to IHSS recipients:

- Within 2 to 6 hours for emergency services referrals
- Requests for services will be available by telephone to the recipient on a 24-hour basis, seven days per week
- Within 24 hours of providing services the contractor shall fax a confirmation of the services provided to the Social Work Supervisor.

Services

Services that may be authorized by IHSS staff include:

RELATED SERVICES	NON-MEDICAL PERSONAL CARE SERVICES
Meal preparation Meal cleanup Laundry Food shopping	Respiration Bowel and bladder care Feeding Routine bed baths Dressing Menstrual care Ambulation Moving in and out of bed Bathing, oral hygiene, and grooming Repositioning and skin care Assistance with prosthetic devices/self-administration of meds

The authorized tasks involved in the performance of each of the previously mentioned services are defined in Chapter 3.

Urgent Services are to be utilized as a temporary resource when an ongoing IHSS recipient has exhausted all other plans for the provision of IHSS services. Recipients who require daily assistance, or who would require hospitalization if a day of IHSS service is missed due to health and safety risks may be eligible for referral to urgent care services if they:

- Receive daily personal care services.
- Have 200 or more authorized service hours per month.
- Are isolated and do not have a live-in provider or another person to provide the services.

The Urgent Services authorized are not in addition to the recipient's regular authorized monthly hours. The authorized services will decrease as a result of the hours used for urgent care services.

The intent is to provide a temporary resource to current IHSS recipients who are unable to wait for their Individual Provider to supply the regularly scheduled services and whose needs cannot be met by existing alternative resources. *All other resources* for an alternative person to provide the IHSS services must be exhausted prior to completing a referral to the Urgent Services contract agency. Social Workers may authorize Urgent Services only for an IHSS recipient who is determined to be at risk if services are not provided.

Examples of Urgent Need

Urgent need for services includes, but is not limited to:

- A recipient who uses a wheelchair and is unable to move in and out of bed independently.
- An oxygen-dependent recipient who requires assistance with self-administration of respiratory non-medical services.
- A recipient who cannot feed themselves and who requires assistance with special devices for food consumption and/or intake of fluids.
- An incontinent recipient who requires care such as assistance with bedpans, application of adult sanitary products, and/or changing of bed linens.
- A recipient requiring assistance with self-administration of medications such as reminding and set up of medication.

The above list is not all-inclusive; an IHSS recipient may need emergency services and not fall into any of the above categories.

Social Workers shall consider the specific circumstances of the case, the recipient's right to self-determination, and the recipient's right to remain safely in their home with minimal disruption.

Social Workers are responsible for informing IHSS recipients of the availability of Urgent Services. At the initial home visit, the Social Worker will provide the applicant"Information about Service Providers", Notice 12-74 HHSA.

Social Workers must include in their voice mail message a statement informing callers that IHSS recipients may be eligible for an Urgent Services referral. The voice mail message must include the following:

1) AIS Call Center telephone number 1-800-510-2020.

2) A statement that the services are available only to IHSS recipients whose health and safety may be adversely affected if they do not receive daily personal care services.

3) A statement that a request should be made to the AIS Call Center only after hours of operation or on holidays.

Sample Phone Message

"If you are calling on a holiday, weekend or after business hours because your Individual Provider is unable to provide services and your health and safety may be adversely affected, please call 1-800-510-2020 and a representative will determine if a referral to Urgent Services is appropriate for you."

Emergency Referrals

When an IHSS Social Worker is informed that a recipient has not received scheduled services, for whatever reason, and concludes that the recipient is at risk of an emergency room visit, hospitalization, or other severe health risks without service provision the same day, the Social Worker will refer the recipient to the agency contracted to provide Urgent Services.

Determining an Emergency/Urgent Service Referral

When speaking with an IHSS recipient, or an individual calling to report the recipient's need for services, the following questions may be used by the Social Worker when determining if a referral to Urgent Services is needed:

- What is the nature of your emergency?
- Can you wait until tomorrow to receive services?
- If no, why not?
- What services do you need today?
- Do you have a back-up IP, friend, family member, or neighbor who can assist you until tomorrow?
- Have you contacted your doctor so that he can contact a home health agency?
- What will you do if you can't receive emergency services right now?
- Have you received services from a home health agency that you can contact now for emergency services?

- When was the last time a home health agency provided service to you?
- Do you need oxygen?
- Do you need insulin and/or meal prep in order to avoid diabetic problems?

Limitations

The funding for Urgent Services is for a set amount of seventy-five thousand dollars ($75,000.00) per year. Referrals shall be authorized to the extent that funds are available. IHSS Management and the AIS Fiscal department monitor the expenditures and funding balance.

Even though Urgent Services are available, the IHSS Social Worker will attempt to secure services for the recipient from other sources prior to authorizing Urgent Services.
Example: when a physician has ordered services from a home health agency, the cost is paid by Medi-Cal.

- If possible, attempt to contact the recipient's physician, or another physician, to determine if they will authorize home health services through Medi-Cal/Medi-Care for this brief time period. If the physician will not authorize home health services, the Social Worker will review the case to determine if alternative resources are authorized, and contact the individual or agency providing alternative resources to determine if they are able to provide services to the recipient.
- If an alternative resource is not available or is unable to provide services, the Social Worker will attempt to contact the "emergency contact" listed on the SOC 293A (face sheet) to determine if the "key person" is able to provide, or is aware of another individual who can provide, services to the IHSS recipient.
- When no other resources are available, the Social Worker will make an urgent service referral to the contractor. Please see the IHSS Policy and Procedure Handbook for details and forms pertaining to the referral process.

Contractor Information

The name, telephone and fax numbers, and county mail stop for the current contractor is presented below and in the IHSS Policy and Procedures Handbook:

AT YOUR HOME FAMILYCARE CONTACT INFORMATION				
TELEPHONE		FAX	MAILSTOP	HOURLY RATE
Monday – Friday 8:00 a.m. to 5:00 p.m. (858) 625-0406	After-hours and Holidays (877) 687-4368	(858) 558-6640	N-102	$16.37

Referrals

The Social Worker will complete form 06-30 HHSA and include the following:

- Recipient information

- Authorized service hours
- Funding source
- Social Work Supervisor's signature/approval

The completed form will be faxed to At Your Home Familycare. The hours authorized to the recipient's Individual Provider must be prorated and identified on the SOC 311. The reduction should match the service hours identified on the HHSA 06-30. Include a brief narration in the case file regarding the Urgent Services referral.

When a recipient, for whatever reason, is unable to sign-off on a time sheet the Social Work Supervisor is responsible for verification and sign off of the time sheet before the payment is processed to At Your Home Familycare.

Communication with the Contractor

It is important that all changes or terminations in services be communicated in writing to the contractor as soon as possible. This is accomplished through use of the HHSA 06-30 and/or a telephone call.

Complaints - Urgent Services

The Social Worker will handle any complaints received from the recipient or the recipient's representative about the contracted service by:

- Narrating all complaints and their disposition in the case record.
- Contacting the contract monitor to discuss possible resolutions to the problem.
- Following up with the recipient within 24 hours to see if the recipient is satisfied with the outcome.

If the issue has not been resolved with Social Worker intervention, the Social Worker will complete and forward the Service Complaint Referral/Report form HHSA 12-64 to the IHSS Contract Unit at mail stop W-433. A copy of the complaint will be retained in the case file, and a copy will be sent to the Program Manager.

At Your Home Familycare has a strict policy against a recipient hiring any of their workers directly. It is not encouraged.