

Module 1: Entering the Health Care Field

Objectives

- Explain Activities of Daily Living (ADLs) and Instrumental Activities of Daily Living (IADLs).
- Describe some of the different kinds of health care organizations available in Maine.
- Be familiar with patient centered care.
- Describe the Department of Health and Human Services (DHHS) healthcare facilities' inspection and complaint process.
- Be familiar with the Occupational Safety and Health Administration (OSHA).
- Be familiar with how health care is regulated in Maine.

Key Terms

- PSS
- UAP
- ADLs
- IADLs
- Organizational Chart
- Inspection and Complaint Process
- DHHS
- OSHA
- Insurance
- Medicare
- MaineCare
- Guardianship
- Conservatorship

Definitions

- ♦ Activities of Daily Living (ADLs)
 - ADLs are tasks that are routinely performed by an individual to maintain bodily function, including, but not limited to mobility; transfers in position among sitting, standing and prone positions; dressing; eating, toileting; bathing; and personal hygiene assistance. (*10-144 Chapter 129, Rules and Regulations Governing In-Home Personal Care and Support Workers*, hereafter referred to as 10-144 CMR Chapter 129)
- ♦ Instrumental Activities of Daily Living (IADLs)
 - IADLs include, but are not limited to, meal preparation, taking medication, using the telephone, handling finances, banking and shopping, light housekeeping, getting Consumers to appointments, and reminding Consumers to take their medications.
- ♦ Unlicensed Assistive Personnel (UAP)
 - UAPs are individuals employed to provide hands-on assistance with activities of daily living to individuals in homes, assisted living facilities, residential care facilities, hospitals and other health care settings. Unlicensed assistive personnel does not include certified nursing assistants employed in their capacity as certified nursing assistants. (*10-144 CMR Chapter 129*)
- ♦ Personal Support Specialist (PSS)
 - PSSs are UAPs who assist Consumers with ADLs and IADLs.
 - PSSs are Direct Care Workers.
 - PSSs are Administrative Staff not Medical Staff.

Content

Reference Textbook: Unit 1: Chapter 1 – The Health Care System	
Textbook Section	Notes
Health Care Delivery, Past and Present*	
Helping Hands and a Caring Heart: Focus on Humanistic Health Care*	Story may not be applicable – Instructors use discretion.
Types of Health Care Organizations*	
<ul style="list-style-type: none"> Hospitals* 	
<ul style="list-style-type: none"> Sub-Acute Care Units (Skilled Nursing Units)* 	
<ul style="list-style-type: none"> Long-Term Care Centers (Nursing Homes)* 	
<ul style="list-style-type: none"> Assisted Living Facilities* 	Assisted Living Facilities are called Assisted Housing Programs in Maine.
<ul style="list-style-type: none"> Home Health Care Agencies* 	
Supplemental Information	
<ul style="list-style-type: none"> Personal Care Agency (PCA) 	“A Personal Care Agency is an individual or entity, not otherwise licensed by the Division of Licensing and Certification, engaged in a business that hires and employs unlicensed assistive personnel to provide assistance with activities of daily living to individuals in the places in which they reside, either permanently or temporarily. An individual who hires and employs unlicensed assistive personnel to provide care for that individual is not a personal care agency.” <i>(State of Maine 10-144, Chapter 129)</i>
<ul style="list-style-type: none"> Hospice Care 	Hospice care provides an interdisciplinary team of skilled professionals and volunteers who deliver comprehensive medical, psychological, and spiritual care for persons who are terminally ill, as well as support for their families. Trained hospice professionals assist the family in caring for the Consumer to ensure that the Consumer's wishes are honored, and the Consumer is kept as comfortable and free from pain as possible. In order to receive hospice care, a Consumer must be medically certified to have six months or less to live, and they cannot be receiving any active treatment.
<ul style="list-style-type: none"> Respite Care 	Respite care is provided to individuals on a short-term basis because of the absence of, or need for relief of, the caregiver.
Reference Textbook: Unit 1: Chapter 1 – The Health Care System	
Textbook Section	Notes
Structure of Health Care Organizations*	Paragraph 4 “Within each facility...”, Figures 1-6* and 1-7* only Your facility will have a chain of command shown in a document called the “organizational chart” (Figure 1-6*). The

	chart shows you the chain of command in your facility. By following the chart, you will see where you fit into your organization and who your supervisor is.
Reference Textbook: Unit 9: Chapter 46 – Introduction to Home Health	
Textbook Section	Notes
<ul style="list-style-type: none"> The Health Care Team* 	<p>Include:</p> <ul style="list-style-type: none"> Box 46-1: Members of the Home Health Care Team* <p>Other Team Members PSSs might interact with include:</p> <ul style="list-style-type: none"> Certified Residential Medication Aide (CRMA) <ul style="list-style-type: none"> CRMAs work in various residential settings. They are trained to administer certain medications safely and accurately. Mental Health Rehabilitation Technician (MHRT) <ul style="list-style-type: none"> MHRTs typically work in Residential care facilities serving adults with mental illness. They must complete training that includes first aid, CPR, behavioral intervention, and medication administration. Home Health Aide (HHA) <ul style="list-style-type: none"> HHAs work for Medicare certified Home Health Agencies. They help older, disabled, and medically ill persons to live in their own homes instead of in a hospital or other health care facility. HHAs perform simple clinical evaluations such as pulse, temperature, and respiration; help with simple prescribed exercises; and assist with medication routines. They may provide housekeeping services, personal care, and emotional support. Some HHAs accompany Consumers outside the home, serving as a guide, companion, and aide. HHAs work as part of a health care team that may include nurses; physicians; physical, occupational, and speech therapists; dietitians; and social workers.
Reference Textbook: Unit 1: Chapter 1 – The Health Care System	
Textbook Section	Notes
Oversight of The Health Care System*	
<ul style="list-style-type: none"> Ensuring Quality Health Care* 	Through OBRA Paragraph only and Figure 1.8*
The Survey Process*	<p>Include:</p> <ul style="list-style-type: none"> Guidelines Box 1-1: Guidelines for Excelling at Your Job and Helping Your Facility Do Well During a Survey* <p>As PSSs work under the administration of the facility, they may be involved in the DHHS inspection and complaint</p>

	process which is similar to the survey process. The inspection and complaint process may include, but not be limited to, the Attorney General’s Office and the DLC.
Protecting Health Care Workers*	
Supplemental Information	
Supplemental Regulation Information	<p>Health care is licensed and regulated both by the State of Maine and the Federal Government. You must become familiar with the state and federal rules that apply to your job. These rules are called regulations, and they have the same importance as laws.</p> <p>Regulations cover such areas as:</p> <ul style="list-style-type: none"> • Abuse, Neglect, and Exploitation • Confidentiality • Mandatory Reporting • Administration and storage of medications • Assessment and service planning • Rights of residents • Admissions policies and procedures • Implementation of activities programs • Hygiene and safety compliance • Handicap access and related ADA issues • Minimum staff qualifications • Consumer records and tracking of services • Number of persons that can be served in particular facilities <p>NOTE: All employers must have a copy of the applicable State regulations on hand. All staff should be familiar with the regulations that apply to their specific work setting.</p>
Maine Department of Health and Human Services (DHHS)	The mission of the Maine Department of Health and Human Services is to provide health and human services to the people of Maine so that all persons may achieve and maintain their optimal level of health and their full potential for economic independence and personal development. The department provides supportive, preventive, protective, public health and intervention services to children, families and adults, including the elderly and adults with disabilities. (http://www.maine.gov/portal/government/state-agencies/)
<ul style="list-style-type: none"> • State Survey Agency 	The agency designated for licensing health care institutions in the State and for certifying health care institutions for Medicare and/or Medicaid pursuant to 42 U.S.C. §§1395 aa and 1396. The State Survey Agency is the Division of Licensing and Certification in the Bureau of Medical Services, Department of Human Services. (10-144 CMR, Chapter 129)
<ul style="list-style-type: none"> • The Office of Aging and Disability Services (OADS) 	The Office of Aging and Disability Services (OADS) supports Maine's older and disabled adults by providing adult protective, brain injury, other related conditions, intellectual

	<p>and developmental disability, long term care, and aging and community services to the people of Maine.</p> <p>OADS coordinates the programs and benefits to assure they operate consistent with the state and federal policies and the Maine DHHS's goals.</p>
Reference Textbook: Unit 1: Chapter 1 – The Health Care System	
Textbook Section	Notes
Paying for Health Care*	
<ul style="list-style-type: none"> Private and Group Insurance* 	Paragraph 1 only
<ul style="list-style-type: none"> Medicare* 	<p>First four sentences only.</p> <p>NOTE: PSSs will not work with Minimum Data Sets, that are required by Medicare.</p>
<ul style="list-style-type: none"> Medicaid* 	The Medicaid program in Maine is currently called MaineCare.
What Did You Learn?*	Matching 1, 2, 3, 4, 5 only
Supplemental information	
<ul style="list-style-type: none"> Veteran's Affairs (VA) 	The VA paid Community Nursing Home pays for up to six months of nursing home care following hospitalization for those veterans who qualify.
<ul style="list-style-type: none"> Financial Power of Attorney (POA) 	A person or persons chosen by the Consumer to make financial decisions if they become incapacitated.
Guardianship and Conservatorship	The purpose of a guardianship or conservatorship is to ensure that continuing care is provided for individuals who are unable to take care of themselves or their property because of incapacity. The decision of whether a person needs a guardian or conservator is made by a probate court.
<ul style="list-style-type: none"> What is Incapacity? 	<p>An "Incapacitated person" means any person who is impaired by reason of mental illness, mental deficiency, physical illness or disability, chronic use of drugs, chronic intoxication, or other cause except minority to the extent that he lacks sufficient understanding or capacity to make or communicate responsible decisions concerning his person 18-A MRS§§5-101)</p> <p>This is more than just being dependent on other people for assistance. The individual must be unable to make or communicate informed decisions about his or her health and safety.</p> <p>Sometimes an older person, a person with intellectual disabilities, or a person with mental illness is not able to make responsible decisions for him or herself. He or she might do things that are dangerous and not understand the consequences. For example,</p>

	<ul style="list-style-type: none"> • A person might not understand that crossing the street without watching the traffic could cause them to get hit by a car. • A person may not understand about their medication and take the whole bottle and without meaning to, they could kill themselves. • A person might be easily cheated or give away all their money.
<ul style="list-style-type: none"> • What is a Guardian? 	<p>A guardian is an individual, organization, or state agency appointed by the probate court to make decisions on behalf of a person who is incapacitated. the incapacitated person is called a "ward." A guardian has the authority to make decisions about the ward's person, such as:</p> <ul style="list-style-type: none"> • Where the ward will live. • Whether the ward will go into a facility such as a nursing or boarding home. • What medical treatment the ward will receive. • If the guardian is given responsibility for the ward's finances, this is limited to administration when the value of all assets is under \$5,000. When assets exceed this amount, the court appoints a conservator with responsibility for managing larger financial assets.
<ul style="list-style-type: none"> • What is a Conservator? 	<p>A conservator is a person appointed by the probate court to protect and manage the money and property of any person who is unable to manage his or her own property because of a mental or physical illness or disability.</p> <p>The person under conservatorship is called a "protected person." The conservator can do such things as:</p> <p>pay the protected person's bills;</p> <p>sell, mortgage, rent out or manage the person's real estate;</p> <p>and/or</p> <p>invest the person's money.</p> <p>The conservator is not allowed to make decisions about the protected person's personal life unless he or she is also appointed as the guardian. The conservator also is not allowed to write a will for the protected person.</p>
<ul style="list-style-type: none"> • Types of Guardianship 	<p>There are two types of guardianship you may encounter.</p>
<ul style="list-style-type: none"> ○ Full Guardianship 	<p>Under full guardianship,</p> <ul style="list-style-type: none"> • the guardian may decide where the person will live. • the guardian can give consent for medical treatment or any other professional care or service. • the guardian may approve the ward's placement into a hospital or institution.

	<p>A ward under guardianship may not enter into any contract, make legally binding agreements, or marry without their guardian's permission.</p>
<ul style="list-style-type: none"> ○ Limited Guardianship 	<p>The court also may appoint a limited guardian. a limited guardian has the authority to make only specific kinds of decisions, such as giving consent for medical treatment or making financial decisions. Under limited guardianship, a person has the right to make any decisions that have not been specifically granted to the guardian.</p> <p>Since the law requires that the probate court help the incapacitated person stay as independent and self-reliant as possible, a limited guardianship or conservatorship is always preferable to full guardianship or conservatorship.</p> <p>Guardianship is generally a life-long arrangement, but in some emergency situations the court may appoint a temporary guardian, usually for a period of six months or less, to handle a person's affairs until they are no longer incapacitated or until a permanent guardian can be found.</p>
<ul style="list-style-type: none"> ● Rights and Responsibilities of the Guardian 	<p>The guardian generally has the same rights and responsibilities as the parent of a minor child, except:</p> <ul style="list-style-type: none"> ● the guardian does not have to pay the expenses of the ward using his/her own money ● the guardian is not legally or financially responsible for acts of the ward. <p>The guardian is expected to ensure the care, comfort, and protection of the ward's person and property. the guardian is to respect the wishes of the ward and to act in the ward's best interest. these rights and duties may be specifically limited under a limited guardianship.</p> <p>The authority of the guardian may be limited by other state laws. For instance, a guardian does not have the authority to have the ward sterilized or admitted to a state institution. Also, the guardian has the authority to give consent but may not be able to force the ward to act according to the guardian's decision. A guardian may decide that the ward should live in a certain home but may not force the ward to stay there.</p>
<ul style="list-style-type: none"> ● Working with Guardians 	<p>Talk with your supervisor to find out how you are expected to communicate with Guardians.</p> <p>NOTE: There may be times when a guardian expects you to do something is outside your Scope of Training. Explain to the guardian that you need to talk to your supervisor. Also, talk with your supervisor if you feel that a guardian is making decisions that are not in the ward's best interest.</p>