

## **Qualifications for Agencies to Subcontract with Nurse Consultant Firms for Nursing Services**

1. Consulting agency will employ only Registered Nurses (RN) and Licensed Practical Nurses (LPN) licensed in CT who meet the DDS nursing minimum requirements:
  - a) RN with at least 1-year of professional nursing experience (RN experience) who also possesses at least 1-year of RN experience working with individuals diagnosed with intellectual/developmental disability (IDD). However, if the RN has less than 1-year of IDD experience, then the RN shall be assigned an experienced RN to collaborate with as a nurse mentor for a minimum of 1-year.
  - b) LPN working under the direct supervision of an RN who has at least 1-year of professional nursing experience working with individuals diagnosed with IDD.
2. Any RN or LPN with a history of DPH licensing or significant agency disciplinary action shall have a plan of supervision submitted to DDS.
3. Consulting agency shall have a process to verify that the nurses maintain a valid RN/LPN license for the duration of their employment.
4. Consulting agency shall provide to the DDS Operations Center a list of all nurses' credentials (in the form of a curriculum vitae [CV] or résumé) and job descriptions on an annual basis for nurses who were newly hired during the previous year. Personal information such as the nurse's address, email, and phone number may be redacted from the CV or résumé prior to submission.
5. Consulting agency may employ graduate nurses (GN) under the direct supervision of a nurse preceptor until such time that the GN meets the DDS minimum nursing requirements. Graduate nurses (GN) may not be assigned a caseload, however, may work under the supervision of a qualified registered nurse. In the event, the consulting firm hires a graduate nurse there must be a plan in place to help support new graduates in the transition from student to professional caregiver (i.e. nurse residency program). This would involve 1:1 preceptorship of at least 12 weeks (during this time the GN may not be assigned a caseload), once the 12-week preceptorship period is complete and the GN has obtained his/her nursing license then the new RN may be assigned a caseload at approximately 50% the usual RN assignment based on level of acuity working in collaboration with a qualified registered nurse (RN with at least 2-yr experience working with individuals diagnosed with a developmental and/or intellectual disability diagnosis) for a period of at least 3-months with monthly documented oversight and evaluation. Once the nurse has been employed with the consulting agency for a period of at least 6 months, has demonstrated the ability to manage a smaller caseload and has developed organizational, interpersonal, and critical thinking skills pertinent to individuals funded by the department, then he/she may be assigned a full caseload based on level of acuity, and work in collaboration with a qualified nurse for a period of 2-years with quarterly documented oversight and evaluation. However, if the graduate nurse does not pass his/her licensure examination, then he/she may not continue to work in the graduate nurse capacity.

CT nursing statues reference- [https://www.cga.ct.gov/current/pub/Chap\\_378.htm](https://www.cga.ct.gov/current/pub/Chap_378.htm)

GN statues- [https://www.cga.ct.gov/current/pub/Chap\\_378.htm#sec\\_20-101](https://www.cga.ct.gov/current/pub/Chap_378.htm#sec_20-101)

GN DPH reference- [https://portal.ct.gov/DPH/Practitioner-Licensing--  
Investigations/Nursing/Graduate-Nurses](https://portal.ct.gov/DPH/Practitioner-Licensing--Investigations/Nursing/Graduate-Nurses)

DPH GN supervision reference- [https://portal.ct.gov/DPH/Practitioner-Licensing--  
Investigations/Nursing/Guidelines-for-Supervision-of-Graduate-Nurses](https://portal.ct.gov/DPH/Practitioner-Licensing--Investigations/Nursing/Guidelines-for-Supervision-of-Graduate-Nurses)

LPN Practice Acts reference- [https://www.cga.ct.gov/2003/olrdata/ph/rpt/2003-R-  
0546.htm](https://www.cga.ct.gov/2003/olrdata/ph/rpt/2003-R-0546.htm)

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6. Consulting agency will refer their employees to the Department of Public Health whenever there are significant concerns regarding a nurse's performance. Consulting agency will notify DDS at the time of such referral.
7. Consulting agency will require all nurses they employ to attend the DDS Nurse Orientation at the agency's expense. The DDS Nurse Orientation is a one-time 2-day training for all new nurses and/or nurses who have not previously attended the orientation course. The RN attends both days and the LPN attends only the first day (RN – 2-day course LPN – 1-day course). There is no fee to attend the course; however, DDS does not compensate nurses to attend the nurse orientation course. DDS will plan to offer the course approximately 4 – 6 times per year, based on agency need. The course will be available in-person and remotely, based on need and feasibility.
8. Consulting agency will comply with the DDS Quality Job Performance (QJP) standards for RNs and LPNs for nursing responsibilities and expectations (see attached).
9. Consulting agency will comply with the Outline of Nursing Responsibilities for Qualified Private Providers Subcontracting for Nursing Support (see attached).
10. Consulting agency will always appropriately assign and maintain manageable nursing caseloads based on acuity levels of the individuals to ensure safe and appropriate nursing/health care. Upon request, the qualified provider or nurse consultant agency shall provide DDS with a copy of the nursing caseloads.
11. Consulting agency agrees to complete a nursing assessment(s) within 30-days for nurses assigned new caseloads, residences, and/or individuals. Nursing assessments shall be face-to-face/in-person with the individual(s). Telecommunication is acceptable for completing some portions of the nursing assessment; however, not all aspects can be completed remotely. It is imperative that the nurse meets all of the individuals on her/his caseload and familiarizes his/herself with the individual's needs and home environment.
12. Consulting agency agrees to complete all nursing documentation consistent with the Outline of Nursing Responsibilities for Qualified Private Providers Subcontracting for Nursing Support.
13. Consulting agency will develop a communications protocol that ensures the residential staff can provide the assigned nurse with necessary medical information and details of any observed change of conditions. The protocol should include a verification process acknowledging that the assigned nurse has received the information.
14. Consulting agency shall implement a transition process to transfer medical information from the outgoing and incoming nurses. The process should include direct contact between the two nurses.
15. Consulting agency will develop and implement a process for all assigned nurses to obtain adequate information necessary to meet the medical needs of the individual.
16. Consulting agency will develop and implement a process for all assigned nurses to observe and report all changes which affect the health and safety of the individual to key people within the provider agency.
17. Consulting agency agrees to maintain timely communication between the on-call nurse and team nurse, this process is not limited to electronic communication.
18. Consulting agency agrees to have the delegating RN meet with med certified staff in a timely manner to complete pass and pour practicums. Delegating RN shall be available for initial

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certification and recertifications within 7-10 days of receiving notification that an onsite practicum is needed. It is the responsibility of the non-licensed employee and the agency's Med Coordinator to provide the nurse with advanced notice of due dates for onsite practicums. The covering nurse may be responsible for completing onsite practicums in the extended absence of the delegating nurse (i.e., vacation or leave of absence).

19. Consulting agency will maintain an updated list on a secured website accessible to DDS of the contact information for all On-Call Nurses and Emergency Contacts. The consulting agency will provide each provider, individual or residence with an updated and available On-Call Nurse and Emergency Contacts list available at all times.
20. Consulting agency agrees that the RN shall respond to the appropriate staff within 15-30 minutes of a call to the On-Call Nurse.
21. Consulting agency shall assign a nurse supervisor or RN designee to review nursing performance through a quality assurance process to include an internal random audit of the medical/nursing documentation completed by the nurse. Consultant agency will submit a summary of the nurse's performance evaluation at the time of the renewal of their nursing license or at such time the evaluation has been deemed unsatisfactory. The summary of the nurse's evaluation may be replaced by a certificate of standing which would certify the nurse's performance. A certification of good standing means that the nurse's performance is congruent with the expectations of DDS and DPH without disciplinary action or concern with nursing practice. A certification that indicates the nurse is not in good standing shall detail areas of concern, actions taken and plan for improvement. If the consulting agency elects to use a certificate of standing in lieu of the performance evaluation, the document shall be notarized.
22. Consulting agency agrees that the nurse (nurse supervisor or covering nurse) shall participate in the DDS Regional Mortality Review and Reporting Policy and Procedures process upon the death of an individual assigned to their caseload. Participation in this process includes but is not limited to completing a detailed nursing summary, providing the requested nursing/medical and nursing delegation or training documents to the Regional Mortality Review Committee (RMRC). In the event that the consulting agency separates from the provider after the death of the individual and prior to the Regional Mortality Review, the nurse shall maintain responsibility for providing the nursing mortality review documents and responding to any questions or concerns from the Mortality Review Committee or Regional Health Services Director. The individual's medical records shall be made available to the consulting nurse by the qualified provider for the purpose of participating in the mortality review process.
23. Consulting agency agrees that nurses shall participate in the DDS Statewide Nurses' Meetings. DDS conducts Quarterly Private Provider Nurses' Meetings in all three regions in March, June, September, and December. The nurse may also be invited to participate as a short-term (1-year) member of the DDS Statewide Nurse Managers' Meetings as a nurse representative for select qualified provider agencies. The statewide nurses' meetings are utilized to communicate new policies/procedures, address concerns/questions from private agency nurses, and to provide

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- presenters/guest speakers on relevant topics. When subcontracted nurses attend any DDS nurses' meetings they shall sign-in indicating their participation and list which agencies they represent.
24. Consulting agency shall have representation at the DDS statewide private nurses' quarterly meetings. DDS shall establish a standard nurses' "sign-in sheet" (or virtual sign-in process) for all regions to implement. Upon completing the sign-in and listing the associated qualified providers, the nurse is acknowledging responsibility for sharing the information with co-workers within the same nurse consultant agency. The consulting agency may wish to implement a process by which the nurses who are not in attendance at the DDS statewide nurses' meeting shall review the meeting minutes and complete a "read-and-sign;" the agency maintains the signed document for their records.
  25. Consulting agency agrees that the subcontracted nurse shall review and contribute to responses pertaining to all nursing/health-related concerns in the residential facility's licensing Plan of Corrections.
  26. Consulting agency shall meet all applicable federal and state regulations.
  27. Consulting agency understands and shall follow all applicable DDS policies and procedures.
  28. Consulting agency shall protect the confidentiality of the individual and family's information.
  29. Consulting agency shall comply with the Drug Free Policy of the Department
  30. Consulting agency shall follow the End of Life Policy and Procedures of the Department.
  31. Consultant agency shall follow the Abuse and Neglect Policy and Procedures of the Department and agrees to participate in all investigations requested by the Department. All members of the nursing staff are mandated reporters of abuse and/or neglect.
  32. Consultant agency shall follow the Incident Reporting Procedure of the Department.

Additional resources:

[https://portal.ct.gov/-/media/DDS/Operations\\_Center/2018/Operation\\_Center\\_Memo\\_FY2018-07\\_Subcontracting\\_Services.pdf](https://portal.ct.gov/-/media/DDS/Operations_Center/2018/Operation_Center_Memo_FY2018-07_Subcontracting_Services.pdf)

[https://portal.ct.gov/-/media/DDS/Health/memos/Outline\\_of\\_Nursing\\_Responsibilities.pdf](https://portal.ct.gov/-/media/DDS/Health/memos/Outline_of_Nursing_Responsibilities.pdf)

<https://portal.ct.gov/DPH/Public-Health-Hearing-Office/Board-of-Examiners-for-Nursing/Board-of-Examiners-for-Nursing>

<https://portal.ct.gov/DDS/LegislativeAffairs/Legislative-Affairs/DDS-Administration-of-Medications-Regulations>

[https://portal.ct.gov/-/media/DDS/qpap/QJPS\\_RN\\_Revised\\_11-09-09.doc](https://portal.ct.gov/-/media/DDS/qpap/QJPS_RN_Revised_11-09-09.doc)