Appendix P: Emergency Back-Up

Emergency Back-up

Connecticut's comprehensive back-up system will operate as follows:

There will be one central toll free line for all MFP participants to provide 24/7 assistance and back- up support for services that were not delivered which place the participant at risk. This back-up function will be contracted to Connecticut Community Care Incorporated (CCCI). CCCI will maintain a data-base of all MFP participants. The data-base will be secured on a lap top computer. A single page 'face-sheet' will be created for every participant listing the most essential information. Additionally, CCCI will maintain a copy of the participant's plan. This information will be transmitted directly from the transition coordinators to CCCI upon discharge from the institution and updated as needed.

During normal business hours, all calls will be answered on a CCCI 'must answer' line. After hours, the calls will be answered by a 24 /7 receptionist. Regardless of who answers the first call, the determination regarding the urgency of the matter will be made immediately. (Can this wait?) If the situation warrants immediate attention, the caller's information will be transferred immediately to the on-call staff.

The on-call staff will have access to the data base at all times. They will determine the appropriate response. There are three possible scenarios: 1) this is not an emergency; 2) this is a medical emergency – 911; 3) this is a high risk back-up emergency. (There are immediate concerns regarding health and safety of the participant if back up services are not located.) For callers who have emergency needs where expertise lies in other 'on-call' organizations, the triage system will immediately connect the participant to the appropriate assistance. The MFP back-up triage service will assure parties are in communication before disconnecting. For example, if the triage service receives a call from a DMHAS client in crisis, the caller will immediately be connecting with the DMHAS crisis hot line.

Documentation on all calls will be logged and transmitted monthly to the DSS MFP Director. Call logs will include the participant's name, nature of the call, and response of the nurse. Documentation on all calls requiring emergency back-up will be transmitted within 24 hours to the MFP Director who will forward information immediately to the agencies sharing responsibility for the participant. Language line will be used to assure the language capacity necessary to meet the needs of a diverse group or participants. For participants who access the 24/7 system two times in one month, care plans will be reassessed within three days of the second call.

Registries of emergency back-up staff will be developed through the fiscal intermediaries. Connecticut will offer an additional stipend to all personal care attendants who provide emergency services in order to create an incentive for on-call duty. This will be an additional new service option under demonstration services for the MFP.

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24/7 Emergency Back-up/Triage Service

Department of Social Services
Money Follows the Person Demonstration

24/7 Emergency Back-up/Triage Service

DSS/MFP Demonstration Project

Project Purpose:

The 24-hour back-up system is designed as one intervention that is part of Connecticut's MFP quality improvement initiative focusing on the improvement in workforce reliability. Data collection, documentation and analysis regarding real or perceived workforce reliability issues will occur.

Emergency Defined:

The toll free line will receive all emergency calls, critical incident calls, all reports of abuse and neglect, etc.

Emergency calls:

- This is a medical emergency – 911
- There is risk to the participant if:
  - Back up staff is not sent
  - Back up transportation is not sent
  - Back up equipment is not sent or malfunctions

Critical Incident calls:

- DSS defined expectations

Reports of abuse and neglect:

- DSS defined expectations

Emergency Toll-Free Line and Communications:

CCCI will establish a toll free emergency back-up/triage service through telephonic and electronic communication systems. As part of the demonstration project, transition coordinators and care plan personnel should maximize communication assistive technology to support the highest level of independence. CCCI will employ state-of-the-art technology and assistive technology to facilitate 1:1 communications with the MFP participant. Two telephone lines will be secured: voice and a dedicated TTY. Both telephone lines have forwarding capacity to an after-hours on call staff person.

The telephonic and electronic communications system has the capacity to perform:

- Live transferring to another emergency response line (mobile crisis, etc.)
- Caller telephone number identification
- Caller identification with pop up pre-loaded dataset of consumer
- Call volume and response time logs
- TTY automatic answer
- TTY alert to the triage personnel (land-line or cell-line)
- Instant messaging, email and text capability

Hours of Service

CCCI's work day hours are 8:00-4:30. The 24/7 Emergency back-up/triage voice line will be forwarded to an answering service. The answering service will provide light triage (is this an emergency, can it wait until 8:00 a.m. An on-call professional will directly receive all TTY, instant messaging, email and text communication 24/7.

Recommended Intake Forms:

- Prior to discharge, emergency (911) personnel will be notified of consumer special emergency needs through current state-wide notification system. It is recommended that all consumers/care planners/transition coordinators complete and submit this form.
- Emergency back-up dataset completed by consumer/care planning professional (or transition coordinator) and submitted to CCCI.
- Contact information provided to consumer for 24/7 emergency back-up/triage service
- What is an emergency - tip sheet
- Conservatorship Notification Agreement (if applicable)

Recommended Emergency Back-up Dataset:

CCCI in collaboration with stakeholders will provide the MFP Director with a standardized emergency data sheet for use with the 24/7 emergency back-up/triage service. Required data for care planning staff/ transition coordinators include:

Name		
Address		
Date of Birth		
Primary communication/contact information	Landline Cell phone Email	

Special housing access considerations	Locked front entrance Parking Other	
Conservator/Guardian contact information		Conservator/Guardian reporting agreement on file? Yes/No
Other legal representative		
Primary and secondary emergency contact		
Medicaid/Other Insurance		
Care Plan agency:		
Plan of care		
Consumer identified back-ups/for which service		
Consumer/Professional identified Medical/Health management/treatment issues that may require emergency back up:	Diagnosis: Treatment/possible intervention needs: Consumer/professional identified mandatory back-up need Consumer/professional identified intervention time frame: Is their a wellness agreement in place (WRAP)	
Consumer/Professional identified medical equipment reliance that may require emergency back up:	Consumer/professional identified mandatory back-up need Consumer/professional identified intervention time frame: Supplier: Equipment:	
Consumer/Professional identified transportation reliance that may require emergency back up.	Consumer/professional identified mandatory back-up need Specialized transportation needs:	

Recommended Dataset updating:

It is recommended that dataset updating be faxed or emailed to CCCI as changes occur. Web portal live updates under current review. Individualized emergency back up plan will be developed prior to transition to the community for each consumer**.**

DSS Reporting Requirements:

DSS defined – further discussion

Volume:

Year One	**Year Two**	**Year Three**	**Year Four**
100	**200**	**200**	**200**