

Maine
Direct Service
Worker Training
Program

MAINE DIRECT SERVICE WORKERS

A Guide to Job Titles

September 2017

Maine Direct Service Workers: A Guide to Job Titles

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Background and Introduction

Please note, there are limitations of this report as a “static” document. The requirements and policies for Maine’s direct service workers are continually undergoing change and it is important to note that this report, originally written in September 2014, was **updated with current information as of September 2017**.

Background

In 2012, Maine was one of six states to receive a three- year grant from the Health Resources and Services Administration (HRSA) to develop a competency-based, coordinated training program for direct services workers. With this funding, the Department of Health and Human Services (DHHS) worked in partnership with the University of Southern Maine (USM) to develop and test a competency-based core curriculum and specialty curricula for workers in the three most popular job titles: Personal Support Specialist (PSS), Mental Health Rehabilitation Technician I (MHRT I), and Direct Service Professional (DSP). The intent of this program is to build the foundation for a comprehensive training and certification system that would enable career progression, specialization, and cross-training, and provide DHHS with the tools and flexibility it needs to reshape its workforce in response to an ever increasing, and increasingly complex, population of people who use long term services and supports.

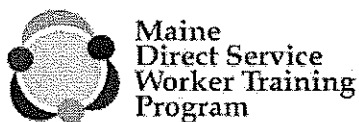
A cross-office workgroup within DHHS guided the development and implementation of the Direct Service Worker Training Program (DSWTP). During workgroup sessions members identified a lack of easily accessible information across the various job titles, and further, that there was considerable confusion on various policies concerning this broad workforce.

What’s in this Report

This report focuses on the job titles of direct service workers in Maine (*note: not case managers*) who serve adults receiving long term services and supports. Most of these direct service workers obtain required certification through DHHS programs and provide publicly-funded services. Direct service workers in Maine work with a broad array of populations, including older adults and adults with disabilities. Direct service workers also work in a variety of settings including members’ homes, residential facilities, and hospitals, and are a vital workforce providing services and supports to vulnerable adults. The following pages provide further details. The USM Muskie School team researched federal and state laws, policies, rules and guidelines to identify requirements for direct service worker training, job descriptions, and populations served. Key managers across DHHS provided valuable information, insight and review on multiple drafts of the document.

For more information on direct service workers in Maine see:

<http://mainedirectserviceworker.org>

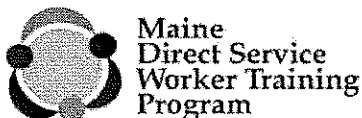


Certified Intentional Peer Support Specialist (CIPSS)

Worker Description	
Job Functions, ADLS/ IADLS Assistance	CIPSS' provide formalized peer support with the goal of building community oriented, natural help rather than creating a formal service. Intentional peer support is about relational change; a commitment to mutuality, negotiation, noticing power dynamics, and a transparent agreement that both people are there to learn through the process of their relationship. CIPSS' do not assist with ADLS/ IADLS.
Populations Served	Adults and children living with impact of trauma, mental illness and/or substance use. Services provided by a CIPSS can be covered by MaineCare under Chapter II of the MaineCare Benefits Manual (MBM) Section 92 (Behavioral Health Homes).
Settings	CIPSS' may work in a variety of settings: Maine Warmline, in Emergency Departments (patients ages 16+), Behavioral Health Homes, State Psychiatric Hospitals, select ACT teams, Crisis Program, Peer Centers, Social Clubs, Peer Centers, Youth Move Maine (up to age 25)
Supervision	Determined by contract, within agency, by agency.

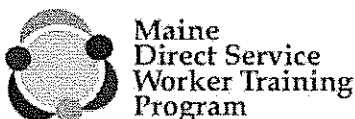
Training	
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Oversight of Training Content	ME DHHS Office of Substance Abuse and Mental Health Services (SAMHS)
Training Prerequisites	<p>One of the following is needed before applying to take CIPSS training program:</p> <p>Peer Support 101: 3-hour class offered to anyone interested in learning more about peer support.</p> <p>OR</p> <p>Healthy Connections: Four day-long sessions that use the four tasks of Intentional Peer Support to address topics such as listening differently, challenging conversations, conflict and crisis situations. Attendance must include the session when the certification process is explained.</p> <p>Individuals who are interested in participating in the CIPSS Program must supply three personal references when applying for training. If the applicant is working or volunteering, at least one of these references must be from a supervisor. Each reference should complete the form, seal it in an envelope, sign his/her name across the seal outside the envelope, and return it to the applicant so it can be included in one package with the application. Because space in the training program is limited, Recovery Supports/SAMHS is not always able to accept all applicants. Applicants who are not accepted to the program initially are welcome and encouraged to reapply, and Recovery Supports/SAMHS will provide information on additional opportunities for skills development and work towards recovery.</p>
Course Hours, Training Requirements	Nine-day training: Cannot miss days I or II, nor more than five hours total. After this core training is complete, trainee has 6 weeks to complete the Follow Up Workbook. Upon completion of this workbook, the trainee is provisionally certified and begins field work. After a year of field work, trainee is fully certified. Field work includes co-reflection (one per quarter after Core training), continuing education (two per year after Core training), and Intentional Peer Support practice (18 hours per quarter).



Training, cont.

Behavioral Intervention Training	N/A
Reciprocity/ Testing Out Availability	Anyone who has been trained and/or certified in Peer Support in a state outside of Maine: please contact the Recovery Training Coordinator, Kelly Staples, at Kelly.Staples@maine.gov to schedule the written and oral exam for entry to the program. If an applicant from out of state meets the minimum score on these exams, they will be provisionally certified and must begin the field work requirements outlined above under Course Hours, Training Requirements.
Incumbent Workers/ Grandfathering	N/A
Certification Length	Certificates are issued by February 15 th of each year and are valid from January 1 st through December 31 st of that year.
Continued Ed. Requirements	Field work includes co-reflection (1 per quarter after Core training), continuing education (2 per year after Core training), and Intentional Peer Support practice (18 hours per quarter). Fidelity Review: occurs every other year. CIPSS are required to demonstrate proficiency in IPS skills; this begins at least a year after Core training is completed.
Trainer Qualifications	The steps to become an Intentional Peer Support (IPS) Organizational Trainer are outlined below: <ol style="list-style-type: none"> 1) Complete an IPS Core Training 2) Practice IPS for at least a year 3) Submit a Train-the-Trainer application 4) Complete and IPS Train the Trainer Course 5) Become designated as IPS Organization Trainer after demonstrating IPS tasks and principles, strong communication skills, and willingness to self-reflect 6) Regularly engage in co-reflection 7) Complete IPS Refresher Course every two years <p>Additionally, Maine SAMHS must approve trainers to offer trainings in the state of Maine. Maine follows the Vermont model for training the trainers, see link below: http://www.intentionalpeersupport.org/trainings/#FTAnchor</p>
How Training is Funded	State of Maine funds trainings, which will reimburse mileage as well and/or help find ride shares/ carpools.



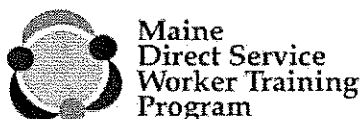
Certified Nursing Assistant (CNA)

Worker Description

Job Functions, ADLS/ IADLS Assistance	Under the supervision of a registered professional nurse, CNAs perform a variety of nursing tasks after they have satisfactorily demonstrated their ability to do so, e.g. taking temperature and pulse, monitoring food intake, urine output, changing bed linens, etc. Rules for State Board of Nursing (Ch.2, Sec. 380), Ch. 5. CNAs assist with ADLS and IADLS.
Populations Served	Persons of all ages, with multiple needs, including those with physical disabilities and conditions (http://www.maine.gov/dhhs/mainedirectserviceworker/Files/Glance_11-15-11.pdf). CNAs are qualified to provide MaineCare covered services to MaineCare members.
Settings	Hospital; nursing facility; home care; residential care/adult day; assisted living; doctor's office Source: http://www.maine.gov/dhhs/mainedirectserviceworker/Files/Glance_11-15-11.pdf
Supervision	CNAs must work under the supervision of a registered professional nurse. (Maine 10-44 CMR CH 128)

Training

Oversight of Training Content	Oversight of training content resides within the Maine DHHS Department of Licensing and Certification (DLC), per Title 32, Chapter 31 §2104, Section 4: http://legislature.maine.gov/statutes/32/title32sec2104.html CNA registry administration oversight: Maine Division of Licensing & Certification
Training Prerequisites	Required: 16 yrs. old & completed 9th grade and can read and write English. Preferred: high school diploma or GED. Training programs are required to ensure participants pass background check, while hospital/ facility regulations often require physical exam and current immunizations. Rules for State Board of Nursing (Ch.2, Sec. 380), Ch. 5.
Course Hours, Training Requirements	Maine's approved CNA training program is 180 hours including 90 hours of classroom theory, 20 hours of clinical laboratory work, and 70 hour of supervised clinical practice. Rules for State Board of Nursing (Ch.2, Sec. 380), Ch. 5 Federal regulations also dictate curriculum requirements for CNA training (42 CFR Chapter IV §483.152). Guidelines can be found here: http://www.gpo.gov/fdsys/pkg/CFR-2011-title42-vol5/pdf/CFR-2011-title42-vol5-sec483-152.pdf

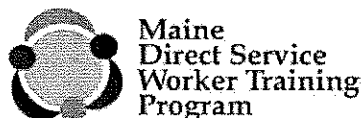


Training, cont.

Behavioral Intervention Training	None required.
Reciprocity/ Testing Out Availability	See Bridge Exam, below.
Incumbent Workers/ Grandfathering	Maine's CNA Bridge Exam is a competency testing process taken by CNAs trained in another jurisdiction who want to work as a CNA in Maine. A completed application for placement of an out-of-state CNA must be submitted to the ME Registry, with the following required documentation: a) Successful completion of approved out-of-state CNA training program of not < 100 hrs. that complies w/federal CNA laws. b) Employment as CNA for at least 32 hrs./wk. for 3 out of the past 5 yrs. c) At least 16 yrs. old, & completion of ≥ 9th grade of school (high school graduation or high school equivalency diploma preferred). d) Ability to read and write English. Rules for State Board of Nursing (Ch.2, Sec. 380), Ch. 5.
Certification Length	Certificate of training does not expire, but to remain eligible for employment, CNAs need to continue their "active" status on CNA registry which expires every two years, per Department of Licensing and Certification rules.
Continued Ed. Requirements	12 hours per year; burden is not on CNA to complete. Facility to provide the training. Maine 10-144 DHHS Chapter 110 - Skilled Nursing & Nursing Facilities Regulation. If continuing education/work requirements not met, trainee must repeat training with approved CNA program. (http://www.maine.gov/dhhs/mainedirectserviceworker/Files/Requirements.pdf).
Trainer Qualifications	Qualifications of trainer: must be RN with minimum of two years years' experience, one year of which must be in long term care services (federal requirement); ideally complete train the trainer class (8 hrs.) (ME State Board of Nursing) Federal Regs: 42 CFR Chapter IV §483.152 - can be found here: http://www.gpo.gov/fdsys/pkg/CFR-2011-title42-vol5/pdf/CFR-2011-title42-vol5-sec483-152.pdf
How Training is Funded	Federal requirements for CNA training cost and reimbursement apply to nursing facilities. Cost for providing training for employee: an individual who is employed by, or who has received an offer of employment from, a nursing facility on or before the date the individual begins a CNA training program or competency evaluation, may not be charged for any portion of the program (including any fees for textbooks or other required course materials). Reimbursement for training costs: a CNA who becomes employed by, or receives an offer of employment from, a nursing facility not later than 12 months after satisfactory completion of a CNA training program or competency evaluation, may be eligible for reimbursement by the nursing facility for costs incurred for the training program or competency evaluation. 42 C.F.R. 483.150-158

Certified Nursing Assistant – Medications (CNA-M)

Worker Description	
Job Functions, ADLS/ IADLS Assistance	<p>CNA-Ms perform all functions of a CNA; additionally, CNA-Ms provide medication administration performed under the direction and on-site supervision of a registered professional nurse.</p> <p>Under supervision of a registered professional nurse, CNA-Ms perform a variety of nursing tasks after they have satisfactorily demonstrated their ability to do so, e.g. taking temperature and pulse, monitoring food intake, urine output, changing bed linens. They may also administer selected non-injectable medications to patients 4 years of age or older. Rules for State Board of Nursing (Ch.2, Sec. 380), Ch. 5.</p> <p>CNA-Ms assist with ADLS and IADLs.</p>
Populations Served	<p>Persons ages 4 and over, with multiple needs, including those with physical disabilities and conditions (http://www.maine.gov/dhhs/mainedirectserviceworker/Files/Glance_11-15-11.pdf). CNA-Ms are qualified to provide MaineCare covered services to MaineCare members.</p>
Settings	<p>Hospital; nursing facility; home care; residential care/adult day; assisted living; doctor's office, county jails, correctional facilities (http://www.maine.gov/dhhs/mainedirectserviceworker/).</p>
Supervision	<p>CNA-Ms must work under the supervision of a registered professional nurse. (Maine 10-44 CMR Ch. 128, State Board of Nursing rules).</p>
Training	
Oversight of Training Content	<p>CNA-M Standardized Medication Course is approved by Maine State Board of Nursing.</p>
Training Prerequisites	<p>CNA-M must be active on registry, and must have already been employed as a CNA for equivalent of one year full-time, cumulatively. See requirements for entrance to program, per Maine State Board of Nursing Rules (Ch. 5, Section 4 Part D):</p> <ol style="list-style-type: none"> 1) Successful completing of a nursing assistant training program, in accordance with 32 MRSA Section 2102 2) Listing on the Maine Registry of Certified Nursing Assistants 3) Equivalent of at least one year of full time employment as CNA 4) 10th grade competency level on the test of Adult Basic Education (TABE) or other competency assessment mechanisms approved by ME State Board of Nursing
Course Hours, Training Requirements	<p>Standardized Medication Course for Certified Nursing Assistants teaches CNAs to administer selected non-injectable medications to patients who are 4 years of age or older. Training includes one hundred twenty (120) hours of instruction. Sixty (60) hours are in the classroom, twenty (20) hours skills lab, and forty (40) hours of clinical experience in a long-term health care facility.</p>

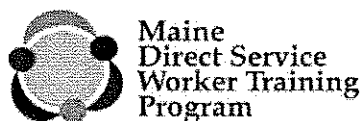


Training, cont.

Behavioral Intervention Training	None required.
Reciprocity/ Testing Out Availability	N/A for CNA-M
Incumbent Workers/ Grandfathering	N/A for CNA-M
Certification Length	N/A
Continued Ed. Requirements	There is no specific medication continuing education requirement for CNA-M, while this isn't stated in rule it is in practice. CNA-M to follow CNA guidelines on continuing education: 12 hours per year; typically the facility in which CNA works provides the training. CNA-M is not required to find continued educational training elsewhere. Per Rules for State Board of Nursing (Ch.2, Sec 380, Ch. 5 Section 4 Part F), it is recommended that 4 hours of continuing education annually be devoted to topics pertinent to medication administration.
Trainer Qualifications	Board of Nursing has oversight of CNA-M curriculum. R.N. trains, but other than that, no qualifications for trainer - the curriculum is Board -approved to fit guidelines.
How Training is Funded	Employer/ Agency may fund training for CNAs to become CNA-M.

Certified Residential Medication Aide (CRMA)

Worker Description	
Job Functions ADLS/IADLs Assistance	The legal and ethical responsibilities of a CRMA include the following: 1) Be prepared to administer medications in a safe, proper and accurate manner, 2) record and document administration of medications, 3) report incidents, 4) be aware and knowledgeable of Resident Rights, 5) maintain patient confidentiality, and 6) administer drugs according to duly authorized, licensed practitioner's orders. (10-44 DHHS CH 113, Section 7, Rules Regulating Assisted Housing) CRMAs do not assist with ADLs/ IADLs.
Populations Served	Works with older adults, adults with disabilities, persons with mental illness in certain assisted housing programs (Level III or IV residential setting) CRMAs are qualified to provide MaineCare covered services to MaineCare members
Settings	CRMAs must work in a DHHS licensed only residential care, assisted living, adult day Level III facility/home. It is a regulation requirement for Level III and Level IV Residential Care Facilities, Level III and Level IV PNMLs and Assisted Living Facilities to have workers trained in Medication Administration to administer medications in these settings. See 144 Chapter 113: Regulations Governing the Licensing and Functioning of Assisted Housing Programs.
Supervision	32 MRSA Section 2102 2. H and Chapter 6: Regulations Relating to Coordination and Oversight of Patient Care Services by Unlicensed Assistive Personnel <u>allows</u> (but does not mandate) a registered professional nurse to coordinate and oversee certain nursing tasks consistent with the standards set forth in the regulation. "...The registered professional nurse may coordinate and oversee unlicensed health care assistive personnel for specific tasks for specific patients, consistent with patient safety." This registered professional nurse cannot coordinate/oversee unlicensed health care assistive personnel "for health counseling, teaching or any task that requires independent, specialized nursing knowledge, skill or judgment."
Training	
Oversight of Training Content	ME DHHS Division of Licensing & Certification
Training Prerequisites	Recommended that CRMAs be at least 18 years old
Course Hours, Training Requirements	This program involves a 24 hour curriculum for the Level III and Level IV residential care facilities that are served by the Office of Aging and Disability Services. The CRMA 35-45 hour curriculum is for all other Level III and Level IV facilities. See https://gateway.maine.gov/dhhs-apps/assisted/crma_overview.asp .



Training, cont.

Behavioral Intervention Training	None required.
Reciprocity/ Testing Out Availability	<p>CNAs on Maine Registry, or who hold certificate of training from ME board-approved CNA-M program, can test out of CRMA course if they pass a written test and 3 medication passes under supervision of a registered nurse. http://www.maine.gov/dhhs/mecdc/dlrs/Licensing/crma/curriculum/crma_introduction.pdf</p> <p>Certain Level IV facilities whose primary purpose is to care for persons with severe mental illness or intellectual disability may be approved to have alternative training. https://gateway.maine.gov/dhhs-apps/assisted/crma_overview.asp</p> <p>WORKING FOR HOME HEALTH AGENCIES: CNAs who complete the CRMA course and are working in the home health agency can only perform tasks as delegated by his/her RN Supervisor. PSS's who complete the CRMA course and are working for a PCA Agency may administer medications if this is determined as a service need. See: http://www.maine.gov/dhhs/mecdc/dlrs/Licensing/crma/curriculum/crma_introduction.pdf</p>
Incumbent Workers/ Grandfathering	N/A
Certification Length	2 years
Continued Ed. Requirements	8 hours every 2 years; can get re-certified with competency based exam. See: http://www.maine.gov/dhhs/mecdc/dlrs/Licensing/crma/curriculum/crma_introduction.pdf
Trainer Qualifications	Trainers must be active R.N. and complete 3-day "train the trainer" DHHS course and be approved as a trainer by DHHS Division of Licensing and Certification. See: http://www.maine.gov/dhhs/mecdc/dlrs/Licensing/crma/curriculum/crma_introduction.pdf
How Training is Funded	Providers and trainers operating own businesses offer training; trainees may pay directly or agency may pay.

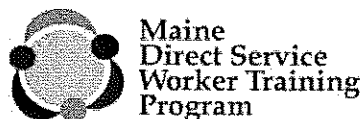
Consumer Directed Personal Attendant (CDPA)

Worker Description

<p>Job Functions, ADLS/IADLs Assistance</p>	<p>Consumer Directed Attendant Services as described in the MaineCare Benefits Manual (MBM) Section 12: Known as CDAS, this program empowers the consumer to recruit, hire, train and supervise their own personal attendant(s) to assist with activities of daily living and instrumental activities of daily living. The program has an upper limit of 28 hours per week of attendant services.</p> <p>OADS' Physical Disability Services also offers a state funded Consumer-Directed Personal Assistance Services, also known as Consumer-Directed Home Based Care (CDHBC) to provide services for those who do not qualify financially for the MaineCare programs described above. This program allows for up to 40 hours/week of personal care assistance, administration, and personal emergency response systems. (This service is currently provided under contract with AlphaOne. To learn more about AlphaOne please visit their website at www.AlphaOneNow.org).</p> <p>Participant Directed Option (PDO): Persons receiving services through MBM Section 19, Home and Community Benefits for Elderly and Adults with Disabilities, are allowed to use the PDO option. It allows the MaineCare member or their representative to hire, discharge, train, schedule and supervise the attendant providing services. If the member is directing his or her own services they must be documented as able to self-direct on their MED form.</p> <p>CDPAs assist with ADLS/ IADLS.</p>
<p>Populations Served</p>	<p>Adults with physical disabilities, older adults CDPAs are qualified to provide MaineCare covered services to MaineCare members.</p>
<p>Settings</p>	<p>Consumers' homes.</p>
<p>Supervision</p>	<p>The worker is supervised by the member receiving services, or in certain cases, their representative.</p>

Training

<p>Oversight of Training Content</p>	<p>On-the-job training is done by the consumer.</p>
<p>Training Prerequisites</p>	<p>CDPA or CDA must be 17 years of age (MBM Sections 12 and 19.) For state funded program, worker must be 16. Training for persons who are receiving services: Individuals interested in directing their personal care must be 18 years or older and have the cognitive ability to assume the role of employer.</p>



Training, cont.

Course Hours, Training Requirements	<p>Per MBM Sections 12 and 19, as well as OADS' rule (Maine DHHS 14-197, Ch. 11): at a minimum, based upon the attendant's job performance, the MaineCare member or consumer will train and then certify their worker's competence in the following areas:</p> <ul style="list-style-type: none"> • ability to follow oral or signed and written instructions and carry out tasks as directed by the member/ consumer; • disability awareness; • use of adaptive and mobility equipment; • transfers and mobility; and • ability to assist with health maintenance activities. <p>Consumers must complete at least four hours of skills training and be able to demonstrate the ability to manage Personal Attendant Services.</p>
Behavioral Intervention Training	N/A
Reciprocity/ Testing Out Availability	N/A
Incumbent Workers/ Grandfathering	N/A
Certification Length	N/A
Continued Ed. Requirements	N/A
Trainer Qualifications	N/A
How Training is Funded	N/A

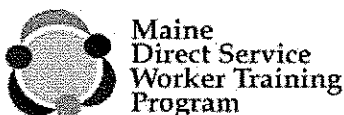
Direct Service Professional (DSP)

Worker Description

Job Functions, ADLS/IADLs Assistance	Direct Service Professionals support people with intellectual or developmental disabilities who need personal care and other assistance in order to be as independent as possible. See: http://www.maine.gov/dhhs/mainedirectserviceworker/DSP.html DSPs assist with ADLS/ IADLS.
Populations Served	Persons ages 18+ with intellectual or developmental disabilities who meet the medical eligibility criteria for admission to an Intermediate Care Facility for Persons with Intellectual Disabilities (ICF/ID) (MBM Sections 21 & 29). DSPs are qualified to provide MaineCare covered services to MaineCare members.
Settings	Residential, Community & Work Settings. See: http://www.maine.gov/dhhs/mainedirectserviceworker/DSP.html
Supervision	MBM Sections 21 & 29 state "A DSP may supervise another DSP." 32 MRSA Section 2102 2. H and Chapter 6: Regulations Relating to Coordination and Oversight of Patient Care Services by Unlicensed Assistive Personnel allows (but does not mandate) a registered professional nurse to coordinate and oversee certain nursing tasks consistent with the standards set forth in the regulation. "...The registered professional nurse may coordinate and oversee unlicensed health care assistive personnel for specific tasks for specific patients, consistent with patient safety."

Training

Oversight of Training Content	ME DHHS Office of Aging and Disability Services (OADS)
Training Prerequisites	Must be 18 years of age & have HS diploma or GED. Those without must request a written exemption from DHHS (MBM Sections 21 & 29).
Course Hours, Training Requirements	<p>Must successfully complete the Direct Support Professional curriculum as adopted by DHHS, or demonstrate proficiency through DHHS' approved "Assessment of Prior Learning," or successfully complete the curriculum from the Maine College of Direct Support within 6 months of date of hire (MBM Sections 21 & 29).</p> <p>The following four modules from the College of Direct Support must be completed prior to a DSP providing services to a member alone:</p> <ol style="list-style-type: none"> 1. Introduction to Developmental Disabilities 2. Professionalism 3. Individual Rights and Choice 4. Maltreatment <p>A DSP who also provides Work Support- Individual or Work Support-Group must complete the additional employment modules in the Maine College of Direct Support in order to provide services.</p> <p>A DSP who also provides Career Planning must complete the additional employment modules in the Maine College of Direct Support and an additional 6 hours of Career Planning and Discovery training provided through Maine's Workforce Development System.</p> <p>A DSP may also be required to complete additional training as required by their employer, e.g., CPR, First Aid, CRMA, and/or Behavioral Intervention.</p>



Training, cont.

Behavioral Intervention Training	Mandt, NAPPI or CPI may be required depending on the employer. If the workplace is a licensed facility providing Crisis Residential Services, MH Agency Licensing standards mandate that, in addition to the orientation and training required in the core staff development standards, crisis residential staff shall receive nationally recognized training in managing people who act out aggressively. (CRS 8.B.) See: https://www.maine.gov/dhhs/dlrs/Licensing/MH-LicensingStandards/CrisisResidential/residential-services.html
Reciprocity/ Testing Out Availability	N/A
Incumbent Workers/ Grandfathering	People who obtained their DSP Certificate prior to implementation of College of Direct Support training are not required to complete the Maine College of Direct Support training. Proof of certification needed before they can be hired/ start employment.
Certification Length	N/A
Continued Ed. Requirements	As required by agency rules for their employees, as training expires (CPR, First Aid, CRMA and NAPPI, Mandt or CPI), it must be renewed each year as it applies to the area of certification. DSP may assist in administering medication but must be CRMA or CNA-M certified within 1 year (MBM Sections 21 & 29).
Trainer Qualifications	Trainers must have completed DSP certification as well as a course for trainers.
How Training is Funded	Most agencies that employ DSPs will reimburse workers for their DSP certificate training. The Maine Office of Aging and Disability Services contracts with the College of Direct Support Program. Maine College of Direct Support can be found online at: http://www.maine.gov/dhhs/oads/provider/developmental-services/college-of-direct-support.html

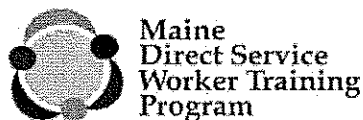
Family Provider Service Option (FPSO) Attendant

Worker Description

Job Functions, ADLS/IADLs Assistance	<p>Family Provider Service Option (FPSO) is a self-directed option that allows a MaineCare member, twenty-one (21) years or older, to register as a personal support services agency solely for the purpose of managing his/her own services, or allows for an adult, twenty-one (21) years or older, to register as a personal support services agency solely for managing the services of no more than two of the adult's family members. The management includes: hiring, firing, training, maintaining records and scheduling the personal support specialist(s). If the MaineCare member does not have the ability or does not desire to manage his or her own care, a family member related by blood, marriage or adoption, or a significant other in a committed partnership, can manage the personal support services on the Member's behalf. To use the Family Provider Service Option, the MaineCare member, or his or her family member, as applicable, must be a family provider agency (MBM Section 96).</p> <p>FPSO attendants may assist with ADLS/ IADLS.</p>
Populations Served	<p>Elders and adults with physical disabilities. FPSO is a MaineCare covered service for MaineCare members.</p>
Settings	<p>Consumers' homes</p>
Supervision	<p>Supervisory visits for the family provider service option: A PSS reimbursed under the family provider service option must have on-site home supervisory visits by the Service Coordination Agency (SCA) to evaluate the condition of the member, the implementation of the care plan and the member's satisfaction with the services. Failure to allow the SCA on-site visits is grounds for terminating reimbursement to the family provider service option agency (MBM Section 96).</p>

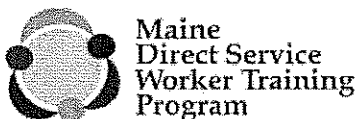
Training

Oversight of Training Content	<p>On-the-job training is provided by the MaineCare member or their family member.</p>
Training Prerequisites	<p>N/A</p>
Course Hours, Training Requirements	<p>N/A</p>
Behavioral Intervention Training	<p>N/A</p>



Training, cont.

Reciprocity/ Testing Out Availability	N/A
Incumbent Workers/ Grandfathering	N/A
Certification Length	N/A
Continued Ed. Requirements	N/A
Trainer Qualifications	N/A
How Training is Funded	N/A



Home Health Aide (HHA)

Worker Description

Job Functions, ADLS/IADLs Assistance	Home Health Aides provide medical and personal care to persons in their homes. This is a direct service job title whose services may be reimbursed by Medicare or MaineCare, depending on the person being served and the program under which services are being provided. HHAs assist with ADLS/ IADLs.
Populations Served	Medicare services are for persons age 65+ as well as younger adults with disabilities. Medicare may pay for home health aide and homemaker services only if the individual requires skilled nursing care or therapy. The individual must also be homebound, have a plan of care that is prepared and signed by a physician, and the services are performed by a Medicare-certified home health care agency. Private long-term care insurance may also pay for health aide services. See: http://www.medicare.gov/Pubs/pdf/10969.pdf . HHAs may provide MaineCare covered services to MaineCare members; services are delivered according to the orders of a licensed physician and an authorized plan of care that certify the need for the Home Health Services (MBM Section 19).
Settings	Consumers' homes
Supervision	Medicare: Home health aides work under the supervision of a registered nurse, licensed practical nurse, or therapist to provide health services. See: http://www.medicare.gov/Pubs/pdf/10969.pdf . MaineCare: Services provided by a certified Home Health Aide are delegated and supervised by a registered nurse (MBM Section 40).

Training

Oversight of Training Content	Federal legislation (42 CFR 484.36) requires that Medicare-certified home health agencies employ HHAs who are trained and evaluated through training programs approved by their state. Oversight of training content outlined below is by the Centers for Medicaid & Medicaid Services. The training information provided below on Medicare HHA can be found here under §484.36(a): https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_b_hha.pdf MaineCare: "A certified HHA must have satisfactorily completed a training program for certified nurse assistants, consistent with the rules and regulations of the Maine State Board of Nursing" (MBM Section 40). Curriculum oversight: Oversight of training content resides within the Maine DHHS Department of Licensing and Certification (DLC). See: http://legislature.maine.gov/statutes/32/title32sec2104.html CNA registry oversight by ME DHHS, Office of Licensing and Certification. See CNA for training information.
Training Prerequisites	Medicare: N/A MaineCare: See CNA.

Training, cont.

Course Hours, Training Requirements	<p>Medicare: The HHA training program must include classroom and supervised practical training totaling at least 75 hours, with at least 16 hours devoted to supervised practical training.</p> <p>MaineCare: See CNA.</p>
Incumbent Workers/ Grandfathering	<p>Medicare: N/A</p> <p>MaineCare: See CNA.</p>
Reciprocity/ Testing Out Availability	<p>Medicare: N/A</p> <p>MaineCare: See CNA.</p>
Behavioral Intervention Training	<p>None required.</p>
Certification Length	<p>N/A</p>
Continued Ed. Requirements	<p>Medicare: The home health aide must receive at least 12 hours of in-service training during each 12-month period. The in-service training may be furnished while the aide is furnishing care to the patient.</p> <p>MaineCare: See CNA.</p>
Trainer Qualifications	<p>Medicare: The training and supervision of home health aides during the supervised practical portion of the training must be performed by or under the general supervision of a registered nurse with minimum of 2 years of nursing experience, at least 1 year of which must be in the provision of home health care.</p> <p>MaineCare: See CNA.</p>
How Training is Funded	<p>Medicare: Worker's employer may pay for training, or individuals may pay for it themselves.</p> <p>MaineCare: See CNA.</p>

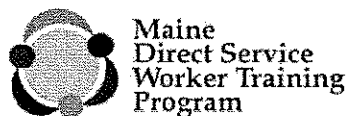
Homemaker or Individual Support Specialist (ISS)

Worker Description

Job Functions, ADLS/IADLS Assistance	<p>As defined in Title 22 MRSA §1717, Homemakers are unlicensed assistive personnel "employed to provide hands-on assistance with daily living to individuals in homes, assisted living centers, residential care facilities, hospitals and other health care settings" (10-149 Ch. 5 - OADS Policy Manual, Sections 63 & 69).</p> <p>Homemakers assist with ADLS/ IADLS. For purposes of eligibility, ADLs shall only include the following as defined in OADS Policy Manual 10-149 Ch. 5 Section 63.02(B): "bed mobility, transfer, locomotion, eating, toileting, bathing and dressing." For ISS, DLS shall include the following for purposes of eligibility: "personal hygiene and dressing" (OADS Policy Manual 10-149 Ch. 5 Section 69.01 (B)).</p>
Populations Served	<p>Elders and adults with physical disabilities. Homemakers do not provide MaineCare covered services to MaineCare members as this is a state-funded program and not covered by MaineCare.</p>
Settings	<p>Homes, assisted living centers, residential care facilities, other health care settings, per 10-149 Ch. 5 - OADS Policy Manual, Sections 63 & 69.</p>
Supervision	<p>N/A</p>

Training

Oversight of Training Content	<p>There is no required training for these job titles.</p>
Training Prerequisites	<p>N/A</p>
Course Hours, Training Requirements	<p>N/A</p>
Behavioral Intervention Training	<p>N/A</p>
Reciprocity/ Testing Out Availability	<p>N/A</p>
Incumbent Workers/ Grandfathering	<p>N/A</p>



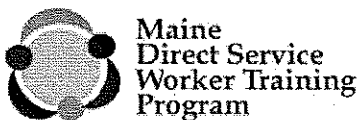
Training, cont.

Certification Length	N/A
Continued Ed. Requirements	N/A
Trainer Qualifications	N/A
How Training is Funded	N/A

Mental Health Rehabilitation Technician I (MHRT-I)

Worker Description	
Job Functions, ADLS/ IADLS Assistance	<p>MHRT-Is work with adults with serious and persistent mental illness to maintain the highest level of independence possible, and provide personal supervision and therapeutic support. They develop and maintain the skills of daily living and help individuals remain oriented, healthy, and safe (Chapter II of MBM, Section 17.04-4).</p> <p>MHRT-Is assist with Daily Living Support services; Daily Living Support Services includes the administration and supervision of medication, wherein a CRMA must provide that portion of the services. (Ch. II MBM Section 17.04-4).</p> <p>Daily Living Support Services do not include ADLs or IADLs.</p>
Populations Served	Persons 18+ with serious and persistent mental illness, services provided under MBM Section 17 are for MaineCare members with diagnosis of AXIS I or AXIS II, and/or with functional impact. MHRT-Is are qualified to provide MaineCare covered services to MaineCare members.
Settings	Homes, Residential settings, or temporary living quarters, PNMI residential care, and/or in the community (MBM Section 17)
Supervision	32 MRSA Section 2102 2. H and Chapter 6: Regulations Relating to Coordination and Oversight of Patient Care Services by Unlicensed Assistive Personnel <u>allows</u> (but does not mandate) a registered professional nurse to coordinate and oversee certain nursing tasks consistent with the standards set forth in the regulation. "...The registered professional nurse may coordinate and oversee unlicensed health care assistive personnel for specific tasks for specific patients, consistent with patient safety." This registered professional nurse cannot coordinate/oversee unlicensed health care assistive personnel "for health counseling, teaching or any task that requires independent, specialized nursing knowledge, skill or judgment."

Training	
Oversight of Training Content	ME DHHS Office Substance Abuse and Mental Health Services
Training Prerequisites	<p>18 years old, high school diploma or GED, must have provisional MHRT I (part of new hire orientation).</p> <p>Provisional MHRT-I: When hired, employee must complete the Provisional Mental Health Support Specialist (MHSS) Handbook which is a brief version of the MHSS training required for full certification. Once completed, employer submits a request to the Center for Learning for provisional MHRT-I certification. Once employee has earned this MHRT I provisional certification, they have one year to work toward full MHRT I certification. See more information at: http://muskie.usm.maine.edu/cfl/MHRTIOverview.html.</p>
Course Hours, Training Requirements	<p>The five trainings required for full MHRT I certification are:</p> <p>1) 35-hour MHSS training, 2) 40-hour CRMA training , 3) CPR, 4) First Aid, 5)Behavioral Intervention program, including but not limited to NAPPI, Mandt, CPI.</p> <p>See CFL website: http://muskie.usm.maine.edu/cfl/MHRTIOverview.html.</p>

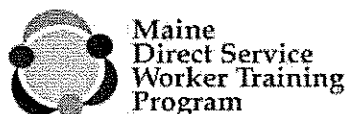


Training, cont.

Behavioral Intervention Training	<p>See http://muskie.usm.maine.edu/cfi/MHRTIAcceptableTraining.html for approved Behavioral Intervention training programs that include NAPPI, Mandt.</p> <p>If the workplace is a licensed facility providing Crisis Residential Services, MH Agency Licensing standards mandate that, in addition to the orientation and training required in the core staff development standards, crisis residential staff shall receive nationally recognized training in managing people who act out aggressively. (CRS 8.B.)</p> <p>See: https://www.maine.gov/dhhs/dlrs/Licensing/MH-LicensingStandards/CrisisResidential/residential-services.html.</p>
Reciprocity/ Testing Out Availability (cont.)	<p>MHSS Waiver Policy as of November 25, 2013: You are <u>not</u> required to take the MHSS training if you have one of the following:</p> <ul style="list-style-type: none"> • Residential Care Specialist (RCS) certification; • Full Mental Health Rehabilitation/Community (MHRT/C) Certification; • Master’s Degree in Social Work; • Master’s Degree in Counseling, Community Mental Health or other Master’s level education that reflects a counseling concentration; • License as one of the following Master’s Level Clinicians: LMSW; LMSW-CC; LCPC-CC; LCPC; APRN,CCS (Certified Clinical Supervisor); Psy. D/Ph.D. Psychologist; or MD/DO Psychiatrist <p>http://muskie.usm.maine.edu/cfi/MHRTIOverview.html</p>
Incumbent Workers/ Grandfathering	N/A
Certification Length	<p>Provisional MHRT-I lasts one year. Full MHRT-I certification does not expire as long as training certifications do not expire (see Continued Ed. Requirements below).</p>
Continued Ed. Requirements	All required training that expires (CPR, First Aid, CRMA and NAPPI, Mandt or CPI) must be kept current in order for MHRT I certification to remain effective. The MHSS training does not expire.
Trainer Qualifications	Trainers must meet requirements for each specific course (CPR, First Aid, CRMA and MHSS).
How Training is Funded	Per DHHS, cost of training staff is built into the rate agencies receive. Provider agencies that have MHSS trainers on staff can choose to offer the course to people outside their agency, and it is their choice whether or not they charge a fee. The same is true if they have CPR/ First Aid/ Mandt instructors on staff.

Personal Support Specialist (PSS)

Worker Description	
Job Functions, ADLS/IADLs Assistance	<p>PSSs are included in the definition of unlicensed assistive personnel set forth Title 22 MRSA 1717(1) (D): employed to provide hands-on assistance with daily living to individuals in homes, assisted living centers, residential care facilities, hospitals and other health care settings. This includes services related to a member's physical requirements for assistance with ADLs & IADLs, including health maintenance activities, which must be activities the member would otherwise be able to do if physically or cognitively able. Unlicensed assistive personnel are sometimes referred to as personal care assistants or attendants.</p> <p>A PSS provides these services in accordance with an authorized plan of care, which varies and has limitations per program and population. Generally, MaineCare and state funded programs require that personal care services be provided by a PSS, indicating that the individual meets certain qualifications and training requirements set forth by the Maine Department of Health and Human Services. A PSS provides these services in accordance with an authorized plan of care, which varies and has limitations per program and population.</p>
Populations Served	<p>Adults 18+, for participants of various state and MaineCare service programs. Populations served by PSS will vary depending on program from which the participant receives services e.g. elderly members & adults with disabilities in their own residence (MBM Sections 19, 20, 96), or in-home adult care from a state funded program (OADS Sec 10.149, Ch. 5, Section 63).</p>
Settings	<p>Homes, residential settings, assisted living centers, adult day programs, hospitals and other health care facilities</p>
Supervision	<p>MaineCare and state funded program regulations set forth specific requirements for supervision. The frequency of required supervision varies depending on the program. For example, the Medicaid waiver program requires a provider agency supervisor to make an initial visit to the program recipient's home prior to the start of the PSS services and to conduct on-site supervisory visits at least quarterly. See Section 19 of the MaineCare Benefits Manual. The state-funded home based care program requires a provider agency to conduct an initial visit and on-site supervisory visits: on-site visits must be quarterly for individuals requiring higher levels of care (Level III and Level IV) and every six months with quarterly calls for individuals assessed at lower levels of care (Level I and Level II). See Section 63 of the OADS Policy Manual (10-149, chapter 5).</p> <p>More frequent or additional on-site supervision visits of the PSS occur at the discretion of the provider agency as governed by its personnel policies and procedures.</p>
Training	
Oversight of Training Content	<p>ME DHHS Division of Licensing & Certification</p>
Training Prerequisites	<p>Must be at least 16 years old to enroll in PSS course, and 17 to be employed as PSS. See: http://www.maine.gov/dhhs/mainedirectserviceworker/Files/Requirements.pdf.</p>



Training, cont.

Course Hours, Training Requirements	<p>Standardized training curriculum of at least 50 hours of formal classroom instruction, demonstration, return demonstration, and examination. Curriculum includes, and is not limited to instruction in basic personal support procedures, first aid, handling of emergencies, & review of mandatory reporting requirements. A PSS who is hired without the required training must enroll in certified training program within 60 days of hire and complete training and exam within six months of hire per OADS regulations for state funded programs, and nine months of hire per MaineCare regulations.</p> <p>Any newly hired PSS who does not yet meet the Department's training and examination requirements must undergo an eight (8) hour orientation by the employing agency that reviews the role and responsibilities of a PSS. For a PSS working in the MaineCare program, job shadowing can count for up to two hours of this job training. The orientation must be completed before the PSS starts delivering services. These requirements only apply to individuals receiving services through an agency delivery model of care. They do not apply to unlicensed assistive personnel who provide care to a person on a MaineCare or state-funded program who is using participant-direction of the Family Provider Services Option that allow a program participant (and in some cases a representative) to hire, train and manage their own worker.</p>
Behavioral Intervention Training	None
Reciprocity/ Testing out Availability	<p>CNA: PSS includes 20 hour credit for CNA course if the CNA course if taken within 2 years of PSS class/test. CNAs are also qualified for PSS if they are on Maine Registry, or if they hold certificate of training from ME board-approved CNA program. Lapsed CNAs may pass a competency exam to become qualified PSS without the PSS training. This test includes written & competency skills, but a lapsed CNA does not need to take training hours to test out (MBM Section 19.05 (b) (4)).</p> <p>DSP: DSPs may test out of PSS training if 1) they have a current Maine DSP certification, 2) take the PSS exam and receive an 80% or better, 3) after receiving an 80% or better score on the PSS exam, attend and pass with 100% score the PSS clinical skills demonstration.</p> <p>Certain Level IV facilities whose primary purpose is to care for persons with severe mental illness or intellectual disability may be approved to have alternative training for PSS (https://gateway.maine.gov/dhhs-apps/assisted/pss_overview.asp).</p>
Incumbent Workers/ Grandfathering	<p>PSSs who completed DHHS-approved curriculum prior to 9/1/2003 are grandfathered as a qualified PSS, (MBM Section 19.08 (b) (4)).</p> <p>Anyone with a PCA certificate may continue to work as a PCA after Sept 1, 2003, and are not required to take the PSS curriculum in the home health care arena.</p> <p>Anyone with an RCS I certificate may continue to work in residential care settings after Sept 1, 2003, and are not required to take the PSS curriculum.</p> <p>However, in order for a PCA to crossover to a residential care facility or for an RCS I to cross over to a home care program, they must successfully complete the PSS curriculum.</p> <p>See: https://gateway.maine.gov/dhhs-apps/assisted/pss_overview.asp.</p>
Certification Length	N/A
Continued Ed. Requirements	In licensed facilities, , a PSS may be required to complete 12 hours training per year, for in-service, based on employee annual performance review. This may vary for certain settings of assisted living (i.e. Level I, II, III, IV), (144 Chapter 113: Regulations Governing the Licensing and Functioning of Assisted Housing Programs).
Trainer Qualifications	Must be on the list of trainers approved by DLC.
How Training is Funded	In most cases, agencies employing the PSS will pay for training, but trainees may also pay directly.

Glossary

Terms and Acronyms Used	
ADLs: Activities of Daily Living	ADLs include bathing, dressing, eating, toileting, ambulation, transfers, changing positions in bed, personal hygiene, and grooming (shaving, oral care, shampooing, and nail care), bladder and bowel requirements, routine catheter care and routine colostomy care.
DHHS	Department of Health & Human Services
DLC	Division of Licensing and Certification
DOE	Department of Education
IADLs: Instrumental Activities of Daily Living	IADLs are incidental household tasks essential to the activities of daily living or to the maintenance of a member's health and safety within their home in the community or assisted living facility; IADLs include activities such as shopping and meal preparation, laundry, bed-making, dusting and vacuuming, arranging transportation, managing finances.
MBM	MaineCare Benefits Manual
MOU	Memorandum of Understanding: a bilateral or multilateral agreement between two or more parties. It expresses a convergence of will between the parties, indicating an intended common line of action.
OADS	Office of Aging and Disability Services
SAMHS	Office of Substance Abuse and Mental Health Services
SCA	Service Coordination Agency. SCA is an organization that has the capacity to provide Care Coordination, Supports Brokerage and Skills Training to eligible members pursuant to the MaineCare Benefits manual, and has met the MaineCare provider enrollment requirements of the Department.