

**Medicaid Home and Community-Based Services Waiver Programs  
Caregiver Service Plan (use only for people at home)**

<b>Participant:</b>	<b>Date of Plan:</b>
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<b>Nurse Monitor:</b>	<b>Signature:</b>
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The Nurse Monitor - Develop a Caregiver Service Plan (CSP) that documents services or tasks the caregivers are required to perform for the participant. The nurse monitor must: ask the case manager for a copy of the Plan of Care/Plan of Service (POC/POS), use the POC/POS with appropriate input from the participant and caregivers to help develop the CSP, ensure that caregivers understand all CSP tasks and expectations, complete a new CSP when adding services or tasks, add additional pages as needed and give a CSP copy to both case manager and caregivers. Immediately contact the case manager and other appropriate professionals to report suspected health and safety concerns. (Adult Protective Services at 1-800-917-7383, emergency Personnel, Police, etc.)

<b>Task</b>	<b>Frequency</b>	<b>Tasks: Please note all special instructions and precautions</b>	<b>Note and Comments</b>
Personal Hygiene (i.e. bathing, hair, oral, nail, and skin care)			
Toileting (i.e. bladder, bowel, and bed pan routines; movement to/from bathroom)			

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Dressing & Changing Clothes			
Mobility & Transfers			
Eating & Drinking			
Medications		(Place a check next to each required item) Medication reminder___ Assist to self-medicate___ CMA ___MAR___ (Medication Admin. Record)	
Light Housekeeping			
Errands			
Other			