



# NEWSLETTER

## DHS Required PCA Training Must Be Completed Immediately

The required DHS training for PCA's must be done as soon as possible for any employees that have not completed it yet. If you do not complete the training you will not be allowed to be a PCA in the State of MN. To continue being paid and working as a PCA please complete the training immediately.

It is possible to test out of the training but be aware that DHS tracks the attempts you make because you must register each time to take the test. An email address is required to receive the completion certificate. The complete training process takes about an hour and a half.

After completion of the training please provide Carefree

Home Services with a copy of the completion certificate that contains the completion number.

You can find a link to the DHS training on our website at [www.carefreehs.com](http://www.carefreehs.com); links have been provided on the home page, in the employee and news sections, or you can find links on our new Facebook page.

If you need access to a computer to complete the training please call our office to make arrangements to come in, or we suggest trying your local library.

You are only required to complete the training one time and must do so as soon as possible if you have not done so yet.

### New Phone Number

We are converting our old toll free 800 number to a new one, to reach us us toll free please call 866-356-8406.

All other numbers remain the same as listed below.

### Contact Information

Carefree Home Services  
7830 149th Ln NW  
Ramsey, MN 55303

ph: 763-422-9713  
866-356-8406  
fax: 763-421-3098 or  
866-299-0884

general email:  
[carefree@carefreehomeservices.com](mailto:carefree@carefreehomeservices.com)

web:  
[www.carefreehs.com](http://www.carefreehs.com)

### HOLDING CHECKS

Due to current situations with the City of Ramsey we will no longer be holding checks for pick up at the office. All checks must be mailed or directly deposited to the employees bank account. Checks

are mailed on the weekend and most people receive them on



Monday. Direct deposits are also deposited on Monday, please be aware if Monday is a holiday direct deposits and mailed checks will be delayed until the next working business day.

**CAREPLANS**

All employees are required to review the client care plan located in the client book. Care plans have been updated and you should be aware of any changes to the care plan that may have occurred. The

care plan lists all DHS approved cares relative to the client. Any cares outside of the care plan are not approved and should be reported to the Qualified Professional assigned to the client.

**FACEBOOK**

Please become our fan on Facebook. We will use Facebook as a resource to post news, information, and open positions. We will also have discussions that you may participate in about PCA services and other issues that affect our clients and employees. Just log in and search for Carefree Home Services, then become a fan.



Don't forget about our website either which is now even easier to get to at [www.carefreehs.com](http://www.carefreehs.com) or [www.carefreehomeservices.com](http://www.carefreehomeservices.com). There you will find valuable information, such as, any open positions we may currently have. and access to forms including current time-sheets, incident reports, and payroll calendars.

You will also find important links to DHS and other resources for client's and employee's.

**TIMESHEETS**

Due to problems with the Carefree timesheets being filled out improperly creating compliance issues with DHS standards we are requiring that all PCA's use the new DHS style standard timesheet. This timesheet and instructions for filling it out can be found online on our website at [www.carefreehs.com](http://www.carefreehs.com) on either the employee or client pages. Please review the instructions for filling out the timesheet properly and remember: include your PCA Provider #; insert a line through all days not worked; most all situations are 1:1, unless otherwise instructed by the office; circle am or pm for each shift; the first day on the timesheet is always Monday and each day of the week has its own space; every employee should have one timesheet per week for each client they work for; make sure your hours do not overlap with any other PCA's, only one PCA may work at a time; be sure to sign and date. It is important that the timesheet be filled out according to DHS policy, so please read the instructions and call the office if you have any questions.

Some of you may be using this style timesheet already but please update to the newly modified version on our website.

DHS-487-ENG #06

**PCA Time and Activity Documentation**

Dates of Service	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY	MM/DD/YY
	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
<b>Activities</b>							
Dressing							
Grooming							
Bathing							
Eating							
Transfers							
Mobility							
Positioning							
Toileting							
Light Housekeeping							
Laundry							
Health Related							
Behavior							
Other							
<b>Visit One</b>							
Ratio staff to recipient	1:1	1:2	1:3	1:1	1:2	1:3	1:1
Shared care location							
Time in (circle AM/PM)	AM	AM	AM	AM	AM	AM	AM
Time out (circle AM/PM)	PM	PM	PM	PM	PM	PM	PM
<b>Visit Two</b>							
Ratio staff to recipient	1:1	1:2	1:3	1:1	1:2	1:3	1:1
Shared care location							
Time in (circle AM/PM)	AM	AM	AM	AM	AM	AM	AM
Time out (circle AM/PM)	PM	PM	PM	PM	PM	PM	PM
<b>Visit Three</b>							
Ratio staff to recipient	1:1	1:2	1:3	1:1	1:2	1:3	1:1
Shared care location							
Time in (circle AM/PM)	AM	AM	AM	AM	AM	AM	AM
Time out (circle AM/PM)	PM	PM	PM	PM	PM	PM	PM
<b>Daily Total Hours</b>							
<b>Total Hours This Time Sheet</b>	Total 1:1		Total 1:2		Total 1:3		

**Acknowledgement and Required Signatures**

After the PCA has documented his/her time and activity, the recipient must draw a line through any dates and times he/she did not receive services from the PCA. Review the completed time sheet for accuracy before signing. It is a federal crime to provide false information on PCA billings for Medical Assistance payment. Your signature verifies the time and services entered above are accurate and that the services were performed as specified in the PCA Care Plan.

RECIPIENT NAME (Print, MI, Last)	MA MEMBER # OR BIRTH DATE	PCA NAME (Print, MI, Last)	PCA PROVIDER NUMBER
RECIPIENT / RESPONSIBLE PARTY SIGNATURE	DATE	PCA SIGNATURE	DATE

## Diabetic hypoglycemia

Low blood sugar (diabetic hypoglycemia) affects people who have diabetes. It occurs when there's too much insulin and not enough sugar (glucose) in your blood. Several factors can cause diabetic hypoglycemia, including taking too much insulin or diabetes medication or skipping a meal.

Pay attention to early warning signs so you can treat low blood sugar promptly. Treatment involves short-term steps — such as taking glucose tablets — to raise your blood sugar into a normal range.

Left untreated, diabetic hypoglycemia can lead to seizures and loss of consciousness. This is considered a medical emergency. Tell family and friends what symptoms to look for and what to do in case you're not able to treat diabetic hypoglycemia yourself.

### Symptoms

#### Early warning signs

Early signs and symptoms of diabetic hypoglycemia include:

- Shakiness
- Dizziness
- Sweating
- Hunger
- Irritability or moodiness
- Anxiety or nervousness
- Headache
- Pounding heartbeat

#### Nighttime symptoms

Diabetic hypoglycemia can also occur while you sleep. Signs and symptoms include:

- Damp sheets or bed clothes due to perspiration
- Nightmares
- Tiredness, irritability or confusion upon waking

#### Severe symptoms

If early symptoms of diabetic hypoglycemia go untreated, signs and symptoms of severe hypoglycemia can occur. These include:

- Clumsiness or jerky movements
- Muscle weakness
- Difficulty speaking or slurred speech
- Blurry or double vision

- Drowsiness
- Confusion
- Convulsions or seizures
- Unconsciousness

Take your symptoms seriously. Diabetic hypoglycemia can increase the risk of serious — even deadly — accidents. Left untreated, hypoglycemia can lead to seizures and loss of consciousness.

Tell family, friends and co-workers what symptoms to look for and what to do in case you're not able to treat hypoglycemia yourself.

Not everyone has the same symptoms or the same symptoms each time, so it's important to monitor your blood sugar levels regularly and keep track of how you're feeling when you do have low blood sugar. Some people don't experience any early symptoms. This is called hypoglycemia unawareness.

#### When to see a doctor

Call 911 or emergency medical assistance if:

- Early signs of hypoglycemia don't improve with eating or taking glucose tablets
- Someone you know who has diabetes loses consciousness and a glucagon injection isn't available

Also, if you experience symptoms of hypoglycemia several times a week, see your doctor. You may need to change your medication dosage, change the type of medication you take or make other adjustments to your diabetes treatment program.

#### Causes

Hypoglycemia — defined as blood sugar below 70 milligrams per deciliter (mg/dL) or 4 millimoles per liter (mmol/L) — occurs when there's too much insulin and not enough sugar (glucose) in your blood. Hypoglycemia is most common among people who take insulin, but it can also occur if you're taking oral diabetes medications.

Common causes of diabetic hypoglycemia include:

- Taking too much insulin or diabetes medication
- Not eating enough
- Postponing or skipping a meal or snack
- Increasing exercise or physical activity without eating more or adjusting your medications
- Drinking alcohol

#### Blood sugar regulation

During digestion, your body breaks down carbohydrates from foods — such as bread, rice and pasta — into various sugar molecules. One of these sugar molecules is glucose, a main energy source for your body. Glucose is absorbed directly into your bloodstream after you eat, but it can't enter the cells of most of your tissues without the help of insulin — a hormone secreted by your pancreas.

When the level of glucose in your blood rises, it signals your pancreas to release insulin. The insulin, in turn, unlocks your cells so that glucose can enter and provide the fuel your cells need to function properly. Any extra glucose is stored in your liver and muscles in the form of glycogen. This process lowers the amount of glucose in your bloodstream and prevents it from reaching dangerously high levels. As your blood sugar level returns to normal, so does the secretion of insulin from your pancreas.

For people with diabetes, the effects of insulin on your body are drastically diminished, either because your pancreas doesn't produce enough of it (type 1 diabetes) or because your cells are less responsive to it (type 2 diabetes). As a result, glucose tends to build up in your bloodstream and may reach dangerously high levels (hyperglycemia). Insulin or other drugs are used to lower blood sugar levels.

If you take too much insulin relative to the amount of glucose in your bloodstream, however, it can cause your blood sugar level to drop too low and result in hypoglycemia. Hypoglycemia may also result if, after taking your diabetes medication, you don't eat as much as usual (ingesting less glucose) or you exercise more (using up more glucose) than you normally would. Your doctor usually works with you to find the optimum dosage that fits your regular eating

and activity habits to prevent this imbalance from happening.

**Complications**

If you ignore the symptoms of hypoglycemia too long, you may lose consciousness. That's because your brain needs glucose to function. Recognize the signs and symptoms of hypoglycemia early because untreated, hypoglycemia can lead to:

- Seizures
- Loss of consciousness
- Death

On the other hand, be careful not to overtreat your low blood sugar. If you do, you may cause your blood sugar level to rise too high (hyperglycemia). This, too, can be dangerous and may cause damage to your nerves, blood vessels and various organs.

**Treatments and drugs**

If you think that your blood sugar may be dipping too low, check your blood sugar level with a blood glucose meter. Then eat or drink something that will raise your blood sugar level quickly. For example:

- Five to six pieces of hard candy
- Four ounces (118 milliliters) fruit juice or regular — not diet — soda
- One tablespoon (15 milliliters) sugar, jelly or honey
- Three glucose tablets (available without a prescription at most pharmacies)

If you experience symptoms of low blood sugar but can't check your blood sugar level right away, treat yourself as though you have hypoglycemia. In fact, you might want to carry at least one sugary item with you at all times. It's also a good idea to wear a bracelet that identifies you as someone who has diabetes. Check your blood sugar level again 15 to 20 minutes later. If it's still too low, eat or drink something sugary. When you feel better, be sure to eat meals and snacks as usual.

**Emergency treatment**

Hypoglycemia can leave you confused or even unconscious. In case you're not able to treat hypoglycemia yourself, make sure your family, friends and co-workers know what to do.

If you lose consciousness or can't swallow:

- You shouldn't be given fluids or food, as this may cause choking
- You need an injection of glucagon — a hormone that stimulates the release of sugar into the blood
- You need emergency treatment in a hospital if a glucagon injection isn't on hand

Glucagon is available by prescription only and comes in an emergency syringe kit. It contains one dose that has to be mixed before being injected. Store the glucagon at room temperature and be aware of the expiration date. Because vomiting can occur after an injection, you must be turned on your side to prevent choking if you're unconscious.

In 15 minutes you should be alert and able to swallow. You then need to eat. If you don't respond within 15 minutes, medical assistance should be called immediately.

**Prevention**

Following are suggestions that can help prevent diabetic hypoglycemia:

- **Don't skip or delay meals or snacks.** If you take insulin or oral diabetes medication, it's important that you be consistent about the amount and timing of your meals and snacks. The food you eat must be in balance with the insulin working in your body.
- **Monitor your blood sugar.** Depending on your treatment plan, you may check and record your blood sugar level several times a week or several times a day. Careful monitoring is the only way to make sure that your blood sugar level remains within your target range.
- **Measure medication carefully, and take it on time.** Take your medication as recommended by your health care provider.
- **Adjust your medication or eat additional snacks if you increase your physical activity.** The adjustment depends on the blood sugar test results and on the type and length of the activity.
- **Eat a meal or snack with alcohol, if you choose to drink.** Drinking alcohol on an empty stomach can cause hypoglycemia.

- **Keep a record of any low glucose reactions.** This can help you and your health care team see patterns contributing to hypoglycemia and find ways to prevent them.
- **Carry some form of diabetes identification so in an emergency others will know that you have diabetes.** Use a medical identification necklace or bracelet and wallet card.

Information gathered from the Mayo Clinic. Created by the Mayo Clinic staff.

**LOVE THAT MAX**

*We were recently introduced to an award winning blog created by the mother of a special needs child. Their story is quite inspirational and the site contains useful information and resources to those of you who are parents or are relatives of children with disabilities. It is an informative and well written blog created by someone who's experiences may help you with your own situations. Sometimes it can be helpful to hear how someone else deals with everyday life with a special needs child. The blog is even one of five finalists for Best Parenting Blog by Nickelodeon Parents Connect. Please check it out at <http://lovethatmax.blogspot.com>.*