

Wisconsin Department of Health Services
IRIS (Include, Respect, I Self-Direct)
Self-Directed Information Technology
System

**Adding a Self-Directed Personal Care (SDPC)
Representative**

P-02512A (10/2019)

Version 1.0.18 / MicroPact Confidential

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1 Participant

This section will show what the consultant, nurse, or any other care team member must do in order to designate a contact as an SDPC representative in the self-directed information technology system.

1.1 Participant Contact

Add a participant contact using the same steps you would when adding any other (for example, a guardian, power of attorney, brother, or parent). From the participant record, add participant contact data. To create a new participant contact record, follow these steps:

1. Hover over **Participant Contact** and select **New Participant Contact**.

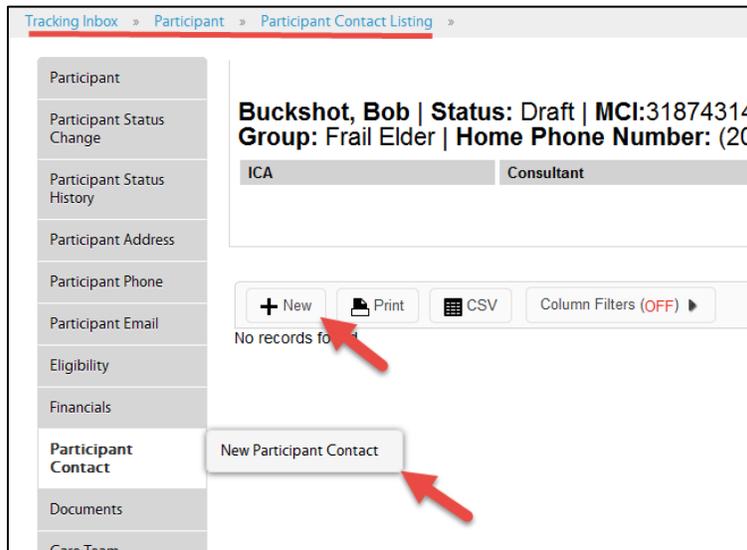


Figure 1-1 New Participant Contact

2. Enter required data fields.

Tracking Inbox » Participant » Participant Contact Listing » Participant Contact » Assignment: Administrator

Participant Contact

- Contact Addresses
- Contact Documents
- Contact Email
- Contact Phone
- Participant Contact Status History

Buckshot, Bob | Preferred Name: | **Status:** Enrolled | **Status Effective Date:** 08-03-2017 | **MCI:**3187431431 | **DOB:**02-01-1957 | **Target Group:** Developmentally Disabled | **Preferred Phone Number:** (206) 555-9856 | **County of Responsibility:** Ashland

Primary Contact: Cora Buckshot - Spouse/Partner Printer Friendly Format

IRIS Start Date	ICA	Consultant	FEA	SDPC Status
07/07/2017	Connections	Cook, Olivia	ILife	Pending
SDPC Status Effective Date	SDPC Nurse	Create Work Request		
08/10/2017		Create Work Request		

Status: Active

First Name: *

Last Name: *

Middle:

Suffix:

Organization:

Relationship: Spouse/Partner *
 Parent
 Daughter
 Friend

Primary Contact: Yes No *

Release of Information or Guardianship Paperwork Obtained: Yes No *

Notes:

Best Time To Contact:

Other Communication Info:

Figure 1-2 Create New Contact

In the **Relationship** field, make sure **SDPC Representative** is selected.

Relationship

- Guardian of Person&Estate
- POA Healthcare - Active
- POA Healthcare - Inactive
- POA Financial - Active
- POA Financial - Inactive
- Authorized Designee/Representative
- Medical
- Secondary Contact
- SDPC Representative
- POAHealthcare&Financial - Active
- POAHealthcare&Financial - Inactive

1.2 Adding the SDPC Representative to the SDPC Referral

When entering the SDPC Referral, under the field **Preferred Contact for SDPC Intake**, the contacts with a relationship of **SDPC Representative** should appear in the drop-down list. At this point, you may proceed with the referral as you normally would.

Date Referred to IRIS	
IRIS Enrollment Date	
Status	
County of Residence	
Living Situation	
Currently Receiving MAPC	<input type="radio"/> Yes <input type="radio"/> No 
Referral	
Ensure the participant meets criteria for SDPC services. Prior to referring please see "IRIS Consultant's Guide to SDPC".	
Has an IRIS start date established?	<input type="radio"/> Yes <input type="radio"/> No 
Needs hands on care as evidenced by the LTC-FS? (1?s or 2?s)	<input type="radio"/> Yes <input type="radio"/> No 
Is under Fraud or Misappropriation Investigation?	<input type="radio"/> Yes <input type="radio"/> No 
Is involved with APS related to provision of cares? (self-neglect, worker neglect, etc.)	<input type="radio"/> Yes <input type="radio"/> No 
Is residing in an RCAC?	<input type="radio"/> Yes <input type="radio"/> No 
Is residing in an AFH owned by Blood relatives?	<input type="radio"/> Yes <input type="radio"/> No 
Has workers identified to provide cares and paperwork has been submitted to FEA?	<input type="radio"/> Yes <input type="radio"/> No 
Has a back-up plan that addresses SDPC requirements with people identified that can complete personal cares if the primary worker is unavailable?	<input type="radio"/> Yes <input type="radio"/> No 
Will the guardian or POA-HC be providing paid SDPC services?	<input type="radio"/> Yes <input type="radio"/> No 
Preferred Contact for SDPC Intake	<input type="text" value=""/>
Notes	<input type="text" value=""/>

Figure 1-3 New SDPC Referral Questions