Job Descriptions

Skilled Professionals-484.75 Aide-484.80 Administrative Oversight



484.75-Skilled Professional Services

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- Directly or under arrangement
 - SN Services
 - Physical therapy
 - SLF
 - OT
 - Physician
 - Medical social services
- Skilled professionals who provide services must participate in the coordination of care
- Standard: Provision of services by skilled professionals
 - Authorized, delivered and supervised
 - By health care professionals
 - In accordance with agency policy and procedures

484.75-Skilled professional services

- Standard: Responsibilities of skilled professional
 - · Ongoing interdisciplinary assessment of patients
 - Development and evaluation of the plan of care in partnership with the patient, patient representative (if any) and caregiver(s)
 - Providing services on the physician ordered POC.
 - Patient, caregiver, and family counseling
 - Patient and caregiver education
 - Preparing clinical notes
 - Communication with all physicians involved in the plan of care and other health care practitioners (as appropriate) related to the current POC.
 - Participate in the agency QAPI program
 - Participate in HHA Sponsored inservices.



484.80-Home Health Aide Services

Previously CoP-484.36

484.80-Home Health Aide Services

• A Home Health Aide Training Program must address:

- Communication skills, including the ability to read, write, and verbally report clinical information to patients, representatives, and caregivers, as well as to other agency staff
- Observation, reporting, and documentation of patient status and the care or service furnished
- Reading and recording temperature, pulse, and respiration
- Basic infection prevention and control procedures
- Basic elements of body functioning and changes in body function that must be reported to an aide's supervisor
- Maintenance of a clean, safe, and healthy environment
- Recognizing emergencies and the knowledge of instituting emergency procedures and their application



484.80-Home Health Aide Services

- A Home Health Aide Training Program must address:
- The physical, emotional, and developmental needs of and ways to work with the populations served by the HHA, including the need for respect for the patient, his or her privacy, and his or her property
- Appropriate and safe techniques in performing personal hygiene and grooming tasks that include –
- · Bed bath, sponge bath, tub and shower bath
- Hair shampooing-sink, tub and bed
- Nail and skin care
- · Oral hygiene
- · Toileting and elimination
- · Safe transfer techniques and ambulation
- · Normal range of motion and positioning
- · Adequate nutrition and fluid intake
- · Recognizing and reporting skin conditions
- · Any other task HHA may choose as permitted by state law

Competency Evaluation

- A home health aide must not perform the task without direct supervision by a RN until after he or she has received training in the task for which he/she was evaluated as unsatisfactory and has successfully completed a subsequent evaluation
- Agency must maintain documentation that standard is met.



Competency Evaluation

- New employees and yearly onsites on the following skills
 - 2 New Skills-Communication competency and Reporting on skin conditions
 - Bed bath
 - Sponge, tub and shower bath
 - · Hair shampooing
 - · Nail and skin care
 - Oral hygiene
 - Toileting and elimination
 - Safe transfer techniques and ambulation
 - · ROM and positioning
 - · Adequate nutrition and fluid intake
 - Vital signs



484.80-Home Health Aide Services

- Standard: Competency Evaluation
- Must be evaluated by observing an aide's performance with a patient
 - Personal hygiene and grooming tasks that include:
 - Bed bath, sponge, tub and shower bath
 - · Hair shampooing in sink, tub, and bed;
 - Nail and skin care;
 - · Oral hygiene;
 - · Toileting and elimination;
 - Safe transfer techniques and ambulation;
 - Normal range of motion and positioning
- **The remaining subject areas evaluated through written, oral exam or after observation of a home health aide with a patient



Communication skills

- Read
- Write
- Verbally report clinical information



484.80 Home Health Aide Services

- A home health aide competency evaluation program may be offered by any organization, unless excluded from participation
 - By a registered nurse in consultation with other skilled professional
- A home health aide is not considered competent in any task evaluated as unsatisfactory
 - Must not perform that task without direct supervision by a registered nurse until evaluated satisfactory
- Is not considered to have successfully passed a competency evaluation if the aide has an "unsatisfactory" rating in more than one of the required areas

Inservice Training

- 12 hours/12 months-May occur while an aide is furnishing care to a patient.
- May be offered by any organization and supervised by a RN
- Must maintain documentation that demonstrates the requirements met.
- Qualifications of instructors-conducting classroom or practical training-RN with minimum 2 years nursing and 1 year must be in home health or by other individuals under the supervision of the RN.



484.80 Home Health Aide Services

- Standard: Home Health Aide Assignments and Duties
- Assigned by registered nurse or other appropriate skilled professional
- Written patient care instructions that the RN or other appropriate skilled professional (PT, OT, SLP)
- Home Health Aide Services
 - Ordered by the MD
 - Included in the plan of care
 - Permitted to be performed under state law
 - Consistent with the home health aide training

Home Health Aide Assignments

- · Ordered by MD
- Duties consistent with practice and under plan of care
- Simple procedures as extension of skilled care
- Must be member of interdisciplinary team
- Must complete appropriate documentation
- If during supervision-concern noted, then must do onsite with clinician
- If deficiency, aide must complete competency again
- Home health aides are assigned to a specific patient by a registered nurse or other appropriate skilled professional (that is, PT,ST,OT) —there is a change here indicating the individual assigning the case and writes the instructions must be the same person-but it does NOT have to be the aide supervisor.



Supervision of aides

- · Every 14 days or less
- · Following patient plan of care
- Maintain open communication process with patient representative, CG and family
- Demonstrating competency with assigned tasks
- Complying with infection prevention and control policies
- Reporting changes in patient condition
- · Honoring patient rights



Supervision of aides

- Home health aide supervision must ensure that aides furnish care in a safe and effective manner, including, but not limited to, the following elements:
- · Following the patient's plan of care for completion of tasks assigned
- Maintaining an open communication process with patient, representative, caregivers, and family
- Demonstrating competency with assigned tasks
- Complying with infection prevention and control policies and procedures
- Reporting changes in the patient's condition
- Honoring patient rights

484.80 Home Health Aide Services

- Areas of concern noted in aide services
- Supervising individual must make an on-site visit to location where patient is receiving care
- Observe and assess the aide while performing care
- RN or appropriate skilled professional must Make an annual on-site visit to the location where a patient is receiving care
- Observe and assess each aide while he or she is performing care
- If a deficiency in aide services is verified during an on-site visit HHA must conduct, and the home health aide must complete a competency evaluation

484.80-Home Health Aide Services

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- Demonstrating competency with assigned tasks
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- · Reporting changes in the patient's condition
- Honoring patient rights

Summary

- All aides will need to pass a competency for new skills-ierecognizing and reporting skin conditions
- Instruction needed re: communication skills-read, write and verbally report clinical information
- · Infection prevention
- Recognizing emergencies and "knowledge of instituting emergency procedures and their application."





484.105-Organization and Administration of Services

Previously 484.14

484.105-Organization and administration of services

- Standard: Governing body
- Assumes full legal authority and responsibility for
- Overall management and operation
- Provision of all home health services
- Fiscal operations
- Review of agency's budget, operational plans
- Quality assessment and performance improvement program (No longer must have PAC or annual agency review)

484.105-Organization and administration of services

- Standard: Administrator
- · Appointed and reports to the governing body
- Responsible for day to day operations of the agency
- Ensures that a <u>clinical manager is available during all operating hours.</u>
- Ensures:
 - HHA employs qualified personnel
 - · Development of personnel qualifications and policies
- Is available (or pre-designated person) available during operating hours
- Predesignated person-Must be appointed in writing by administrator and governing body, is qualified and assumes administrator responsibilities

484.105-Organization and administration of services

- Standard: Administrator
- For individuals that began employment PRIOR TO July 13, 2017-must be:
 - A physician
 - A registered nurse OR
 - Has training and experience in health services administration and at least 1 year of supervisory administrative experience in home health care or a related health care program.
- For individuals that begin employment AFTER July 13, 2017-
 - Licensed physician, a registered nurse, or holds an undergraduate degree AND
 - Has experience in health services adminstration and at least 1 year of supervisory administrative experience in home health care or a related health care program.

484.105-Organization and administration of services

- Standard: Clinical manager
- · One or more individuals
- Must be physician, RN, PT, SLP, OT, Audiologist, Social worker
- Provide oversight of all patient care services and personnel
- Oversight must include the following:
 - · Making patient and personnel assignments
 - · Coordinating patient care
 - Coordinating referrals
 - · Assuring that patient needs are continually assessed
 - Assuring the development, implementation, and updates to the individualized plan of care

484.105-Organization and administration of services

- Standard: Services under arrangement
- Maintain responsibility for services
- Written agreement
- Agency, organization, or individual providing services under arrangement may not have been
 - · Denied Medicare and Medicaid enrollment
 - Been excluded from any federal health care program
 - When the administrator is not available, a qualified, pre-designated person, who is authorized
 in writing by the administrator and the governing body, assumes the same responsibilities and
 obligations as the administrator. The pre-designated person may be the clinical manager as
 described in paragraph (c) of this section
 - · Had its Medicare or Medicaid billing privileges revoked; or
 - · Been debarred from participating in any government program
- The primary HHA is responsible for patient care, and must conduct and provide, either directly or under arrangements, all services rendered to patients





Administrator

- Need to add elements of responsibility for oversight and availability
- Need to add job qualifications for before Jan 13, 2018 and after.
 - Before Jan 13, 2018- must be Physician, RN <u>OR</u> Has training and experience in health services administration and at least 1 year of supervisory administrative experience in home health care or a related health care program.
 - After Jan 13, 2018-Licensed physician, a registered nurse, or holds an undergraduate degree AND
 - Has experience in health services administration and at least 1 year of supervisory administrative experience in home health care or a related health care program.

Administrator

- Reports to Governing Body-Must be appointed in writing
- Must insure clinical manager available during operation hours
- Ensures qualified personnel
- Responsible for the development of personnel policies
- Must be available during operating hours or have predesignated person in place.
- Responsible for taking, investigating, and resolution of complaints

Clinical Manager

- Can be RN, PT, OT, SLP, MSW, Audiologist
- Provides oversight of all patient care services and personnel
- Oversight must include the following:
 - Making patient and personnel assignments
 - Coordinating patient care
 - Coordinating referrals
 - · Assuring that patient needs are continually assessed
 - Assuring the development, implementation, and updates to the individualized plan of care
- Role in Emergency Preparedness
- Role in QAPI
- · Availability to agency during operating hours

Clinical Skilled Disciplines

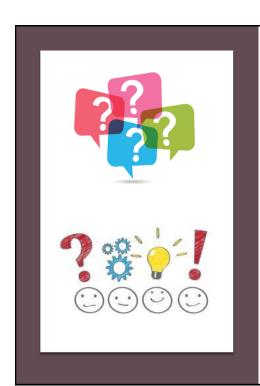
- RN
- LPN
- PT
- OT
- SLP
- · Responsibilities-
 - ongoing assessment
 - Interdisciplinary assessment
 - Development and revision to POC
 - Providing ordered services
 - Participate in inservices

LPN

- Orders
- Responsible for communication/coordination
- Infections/Occurrences

Aides

- Who supervises them
- Need new skills added to job responsibilities
- Emergency Preparedness
- Competency and unsatisfactory job tasks



Questions

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