

ELDERLY SERVICES PROGRAM (ESPSM)

HOME CARE ASSISTANCE (HCA)

SERVICE SPECIFICATION

**EFFECTIVE NOVEMBER 1, 2014
(HCESP)**

HOME CARE ASSISTANCE

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HOME CARE ASSISTANCE (HCA) SERVICES

1.0 Objective

The HCA service enables a client to achieve optimal independence by assisting them with their Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL).

2.0 Unit of Service

- 2.1 A full unit of service is equal to one hour of in-home service to the client. The smallest unit of service is equal to one-quarter hour of service to the client.
- 2.2 The unit rate must include administration, supervision, travel, and documentation costs.
- 2.3 The number of units is determined by the Care Manager. All additional units of service will require prior authorization from the Care Manager except in the circumstance where immediate action must take place by the Provider's staff to ensure client protection in high risk or acute episodes. The Provider must notify the Care Manager within one business day after completing the service to request authorization for additional units. After review of each request for units, the Care Manager will determine if additional units of service will be authorized.

3.0 Client Eligibility

- 3.1 Clients who are eligible for this service must be enrolled in Elderly Services Program and meet the following criteria as determined by the Care Manager:
 - a) Functional, cognitive and/or mental health impairments restricting his/her ability to perform specific tasks related to daily living activities.
 - b) The services that are needed are not provided under another service such as Independent Living Assistance.

4.0 Provider Requirements

4.1 General

- a) The Provider must comply with all of the Conditions of Participation of the Elderly Services Program.
- b) The Provider must be capable of delivering services seven days a week. Telephone coverage must be provided for staff and clients twenty four hours a day, seven days per week including all holidays.
- c) The Provider must have the capacity to respond to inquiries or requests pertaining to client care within 24 hours.

4.2 Employees

- a) The Provider must maintain in employee files, documented evidence verifying that each of the individuals providing HCA services meet all applicable training and certification requirements prior to client contact.
- b) The Provider must document training and testing for staff, including training site information, the date of training, the number of hours of training, a list of instruction materials, a description of the subject areas covered, the qualifications of the trainer and tester, the signatures of the trainer and tester to verify the accuracy of the documentation, and all testing results applicable to section 5.8 e of this specification.
- c) HCA Supervisor
 1. The Provider must ensure that all HCA Supervisor and/or trainer shall be a RN or a LPN. An LPN serving in this capacity must be under the supervision of an RN. RN and LPN shall have a current and valid license to practice nursing in the State of Ohio.
 2. The Provider must have a system in place to ensure that the Nurse Supervisor is accessible to respond to emergencies during times when the HCA Aides are scheduled to work.
- d) HCA Aide
 1. The Provider must assure HCA Aide is qualified to complete the tasks outlined in the Care Manager's authorized plan, which may include any of the following tasks with client approval:
 - a) Personal hygiene and care
 - b) Mobility
 - c) Elimination
 - d) Nutrition/Meal Assistance
 - e) Homemaking/Laundry
 - f) Companion
 - g) Respite
 2. The Provider must maintain documented evidence of completion of eight hours of in-service education for each HCA Aide annually, excluding Provider and program-specific orientation, initiated after the first anniversary of employment with the Provider.

Documentation maintained in the employee's file of in-service education must include:

- a) Date
- b) Length of training
- c) Signature of trainer
- d) Signatures of those in attendance

4.3 Service Delivery

- a) The Provider must maintain individual client records for each episode of service delivery containing all required documentation including:
 1. Date of service delivery
 2. A description of the service tasks performed captured in either written or electronic form
 3. The printed name of the HCA Aide providing the service(s)
 4. The HCA Aide's arrival and departure time.
 5. The HCA Aide's written or electronic signature to verify the accuracy of the record
 6. The client's or client's caregiver's signature for each episode of service delivery
 7. Providers that utilize an electronic verification system (e.g. TELEPHONY) must capture all required elements identified in section 4.3 a 1-5. If using TELEPHONY Providers are not required to collect signatures.
 8. If a Provider utilizes an electronic verification system, in the event the system is unavailable, the provider must maintain written verification of service delivery including all required documentation as identified in section 4.3 a 1-6.
 9. The Provider must deliver service only when the client is at home. With the exception, that the HCA Aide may assist in preparing the client's home prior to their return from the hospital or nursing facility. The client's representative must be present for this service and prior authorization from the Care Manager must be obtained.

4.4 Monitoring System

- a) The Provider shall have a monitoring system to verify services are provided according to the care plan.
 1. In this system, the Provider shall include a written plan for monitoring:
 - a) Whether the HCA Aide is present at the location where the services are to be provided and at the time the services are to be provided
 - b) At the end of each working day, whether the provider's employees have provided the services at the proper location and time
 2. A protocol to be followed in scheduling a substitute employee when the monitoring system identifies that an employee has failed to provide home care services at the proper location and time this shall include standards for determining the maximum length of time that may elapse before the substitute arrives at the client's home without jeopardizing the health and safety of the client;
 3. Procedures and written documentation for maintaining records of the information obtained through the monitoring system;

4. Procedures and written documentation for compiling annual reports of the information obtained through the monitoring system, including statistics on the rate at which home care services were provided at the proper location and time; and,
5. Procedures and written documentation for conducting random checks of the accuracy of the monitoring system. A random check is considered to be a check of not more than five percent of the home care visits each HCA Aide makes to different clients.

5.0 Requirements of HCA Aide

- 5.1 The Home Care Assistance Aide will enable a client to achieve optimal function with Activities of Daily Living (ADL) and Instrumental Activities of Daily Living (IADL).
- 5.2 Must be at least 18 years old and meet one of the training criteria requirements listed under Section 5.8 of this specification.
- 5.3 Is able to understand the written task sheet, execute instructions, and document services delivered.
- 5.4 Is able to communicate with clients/families and emergency service systems personnel.
- 5.5 The HCA Aide must be able to assist the client with personal care/hygiene as authorized.
- 5.6 The HCA Aide can assist a client to maintain a clean and safe environment. The HCA Aide will assist a client to reduce isolation and maintain socialization. The HCA Aide is intended for the client and specifically excludes direct services for all other household members who are not clients.
- 5.7 The HCA Aide can provide indirect care in the form of relief for the caregiver who is responsible for twenty-four hour care of the client who requires constant supervision and may never be alone. The purpose is to decrease stress and/or isolation for the caregiver and ensure time to care for personal responsibilities.
- 5.8 Each HCA Aide must, at a minimum, meet at least one of the following training or certification requirements prior to client contact:
 - a) Be listed on the Ohio Department of Health's Nurse Aide Registry;

- b) Successfully complete the Medicare competency evaluation program for home health aides set forth in 42C.F.R. Part 484, as a direct care health care worker without a twenty-four month lapse in employment as a home health aide or nurse aide;
- c) Have at least one year employment experience as a supervised home health aide or nurse aide, and have successfully completed written testing and skills testing by return demonstration prior to initiation of service provision;
- d) Successfully complete a certified vocational program in a health care field, and successfully complete written testing and skills testing by return demonstration prior to initiation of service provision; or,
- e) Successfully complete sixty hours of training, including, but not limited to instruction on:
 - 1. Communication skills, including the ability to read, write and make brief and accurate oral or written reports
 - 2. Observation, reporting and documentation of consumer status and services provided
 - 3. Reading and recording temperature, pulse and respiration
 - 4. Universal precautions for infection control procedures
 - 5. Basic elements of body functioning and changes in body function that should be reported to a supervisor
 - 6. The maintenance of a clean, safe and healthy environment, including but not limited to house cleaning and laundry, dusting furniture, sweeping vacuuming, and washing floors; kitchen care (including dishes, appliances, and counters), bathroom care, emptying and cleaning bedside commodes and urinary catheter bags, changing bed linens, washing inside windows within reach of the floor, removing trash, and folding, ironing, and putting away laundry
 - 7. Recognition of emergencies, knowledge of emergency procedures, and basic home safety
 - 8. The signs and symptoms of elder abuse/exploitation and the requirements for reporting to Adult Protective Services
 - 9. Recognition of health and safety issues
 - 10. Provider protocol for bed bugs
 - 11. The physical, emotional and developmental needs of clients, including the need for privacy and respect for clients and their property
 - 12. Appropriate and safe techniques in personal hygiene and grooming that include: bed, tub, shower, and partial bath techniques; shampoo in sink, tub, or bed; nail and skin care; oral hygiene; toileting and elimination; safe transfer and ambulation; normal range of motion and positioning; and adequate nutrition and fluid intake
 - 13. Meal preparation and nutrition planning, including special diet preparation, grocery purchase, planning, and shopping, and errands for the sole purpose of picking up prescriptions

5.9 HCA Aides must complete skill-testing with return demonstration for the following duties and responsibilities indicated by an *:

- a) *Personal Hygiene and Care
 - 1. Bathing: bed, tub, shower and complete, partial and/or supervision of client bathing activities
 - 2. Oral hygiene, including denture care
 - 3. Hair care
 - 4. Shaving
 - 5. Periodontal care
 - 6. Skin care
 - 7. Hand and foot care (including filing/cutting finger nails and filing toe nails of non-diabetic clients)
 - 8. Dressing and grooming

- b) *Mobility
 - 1. Turning and positioning using proper body mechanics
 - 2. Assisted transfers and ambulation, with and without assistive devices
 - 3. Active and Passive Range of Motion

- c) *Elimination
 - 1. Assist in use and cleaning of bedpan, bedside commode, and toileting activity
 - 2. Incontinence care
 - 3. Catheter care limited to cleansing/positioning of external parts of drainage system and emptying drainage system

- d) *Nutrition/ Meal Assistance
 - 1. General meal preparation
 - 2. Cleaning of food preparation and eating areas
 - 3. Encourage and facilitate adequate nutritional and fluid intake.
 - 4. Meal planning
 - 5. Post cleanup
 - 6. Prepare grocery list/clip coupons for shopping

- e) *Homemaking
 - 1. Bed making: occupied and unoccupied, with linen change
 - 2. Laundry (only client's personal laundry)
 - 3. Trash removal
 - 4. Dusting and straightening furniture. Light furniture may be moved to complete jobs i.e. dining chairs, small objects, etc
 - 5. Cleaning floors and rugs by wet/dry mop, vacuum, and/or sweeping
 - 6. Cleaning the kitchen, including washing dishes, pots, and pans
 - 7. Cleaning outsides of appliances/counters/cabinets
 - 8. Cleaning ovens, defrosting/cleaning refrigerators, and disposal of spoiled/outdated food items

9. Cleaning the bathroom, including tub, sink, shower, toilet bowl, and emptying and cleaning of the commode chair/urinal
 10. Washing insides of windows and sills within reach from the floor.
 11. Packing/unpacking boxes to assist clients in moving
- f) Prevention of dangerous chemical mixtures and proper use of equipment
- g) *Laundry
1. Washing and drying client's clothes and linens in the home, or at a designated place
 2. Folding clothes, linens and ironing if necessary
 3. Putting away finished laundry
- h) Accompany clients to appointments and ensure safe return home; i.e., beauty shop, business and medical appointments. Accompany client to visit significant others; i.e., hospital, nursing home or cemetery. This may include hands-on assistance i.e. pushing client in his/or wheelchair or assistance with transfers.
- i) Help clients reduce isolation and maintain social contacts by (includes but not limited to):
1. Writing letters/mailing letters
 2. Reading to client
 3. Assisting with telephone calls
 4. Reminding client of appointments
 5. Reminiscing with the client
 6. Taking walks with clients
- j) Shopping Assistance
1. Selection assistance with household and personal items
 2. Grocery shopping
- NOTE:** HCA Aides may not drive clients in their cars or clients' car. However, Aides may accompany clients, if necessary, to appointments using transportation that has been contracted and authorized by COA to meet the transportation needs of the client.
- k) Safety
1. Identify and report safety hazards to immediate supervisor
 2. Eliminate safety hazards with client's and supervisor's approval
 3. Knowledge of emergency protocol, recognizing and accessing assistance
- l) Other
1. Knowledge of basic elements of body functioning and what changes must be reported to supervisor
 2. Reality orientation and sensory stimulation
 3. Communication skills

4. Ability to accompany (not transport) client to appointments
5. Documentation of services provided
6. Role and Expectations of the Aide
7. Special needs of the elderly
8. Assistance with self administration of medications

- m) *Standard precautions/infection control to prevent cross contamination
1. Hand washing techniques
 2. Precautions and bodily fluids

5.10 Specialized Skills Training

Prior to performing specialized skills not included in initial training, HCA Aides must be trained by a supervisor and perform a successful return demonstration. Examples include, but are not limited to: Hoyer lift, TED hose, and assisting with prosthetics.

5.11 The Provider must assure that these specific tasks are **never** assigned as HCA Aide client care responsibilities:

- a) Administration of over-the-counter medications or eye drops
- b) Administration of prescription medications or application of topical prescription medications or eye drops
- c) Perform tasks that require sterile techniques
- d) Administration of irrigation fluids to intravenous lines, Foley catheters or ostomies
- e) Administration of food and fluids via feeding tubes
- f) Administration of enemas or suppositories
- g) Filing/cutting finger nails and filing toe nails of diabetic clients

6.0 Requirements of RN/LPN

6.1 All HCA Supervisor and/or trainer shall be a RN or a LPN. An LPN serving in this capacity must be under the supervision of an RN. An RN or LPN, as delegated by an RN, supervises the HCA Aide in client care tasks.

The Provider must maintain evidence of compliance with the following supervisory requirements:

6.2 Prior to the start of services being provided to the client, the HCA Supervisor must complete and document an initial home visit. The documentation of the initial visit must define the expected activities of the HCA Aide and a written activity plan should be developed prior to service delivery where possible.

6.3 The HCA Supervisor must conduct and document a visit to the client as follows:

- a) A supervisory visit must be completed every 93 days for each client receiving only homemaking or companion tasks.
- b) A supervisory visit must be completed every 62 days for each client receiving only personal care or respite tasks.

- c) A supervisory visit must be completed every 62 days for each client receiving personal care or respite tasks along with homemaking or companion tasks.
- d) The visit must document and address compliance with the activity plan, client satisfaction, and Aide performance. The HCA Supervisor must discuss recommended modifications with the Care Manager and Aide. The Aide need not be present during the visit. The visit must be documented and the documentation must include the date of the visit, the printed name and signature of the HCA Supervisor, printed name and signature of the client. Electronic signatures are acceptable.
- e) If the HCA Supervisor identifies any significant change in the client's health, the Provider will notify the Care Manager and recommend service modifications to meet the client's health needs.
- f) A Supervisor must notify Adult Protective Services and the Care Manager when signs of elder abuse/exploitation are reported by the HCA Aide, client, family member or primary caregiver.