



Home Care Policy and Procedure Checklist

Chapter 246-335 WAC

Agency _____ Surveyor _____ Date _____

Date policies and procedures last reviewed: _____

WAC	Policy & Procedure	Agency Administrator Verification
246-335-415	Plan of Operation	
Z 0330	(1) A description of the organizational structure;	
Z 0335	(2) Personnel job descriptions according to WAC 246-335-425(2)	
Z 0340	(3) Responsibilities of contractors and volunteers;	
Z 0345	(4) Services to be provided;	
Z 0350	(5) The days and hours of agency operation;	
Z 0355	(6) Criteria for management and supervision of home health services throughout all approved services areas, which include: The applicant or licensee must develop and implement a plan of operation which includes: (a) How the initial assessment and development of the plan of care will be completed per WAC 246-335-440;	
Z 0360	(6) Criteria for management and supervision of home health services throughout all approved service areas, which include:(b) How supervision of personnel and volunteers and monitoring of services provided by contractors will occur which meet the requirements of WAC 246-335-445;	
Z 0365	(6)Criteria for management and supervision of home health services throughout all approved service areas, which include:(c) How performance evaluations for personnel and volunteers and evaluation of services provided by contractors will be conducted per WAC 246-335-425 (16) and (17); and	
Z 0370	(6)Criteria for management and supervision of home health services throughout all approved service areas, which include: (d) How the quality improvement program required in WAC 246-335-455 will be applied throughout all approved service areas.	
Z 0375	(7) A process to inform patients of alternative services prior to ceasing operation or when the licensee is unable to meet the patient's needs;	
Z 0380	(8) A plan for preserving records, including the process to preserve or dispose of records prior to ceasing operation according to WAC 246-335-450 (7) and (8);	
Z 0385	(9) Time frames for filing documents in the patient records;	
Z 0390	(10) Emergency preparedness that addresses service delivery when natural disasters, man-made incidents, or public health emergencies occur that prevent normal agency operation. Include, at minimum: Risk assessment and emergency planning, communication plan, coordination of service delivery with emergency personnel to meet emergent needs of patients, and staff training;	
Z 0395	(11) The applicant or licensee must identify an administrator. The administrator must be a home health employee and possess education and experience required by the agency's policies. The administrator is responsible to:(a) Oversee the day-to-day operation and fiscal affairs of the agency;	
Z 0400	(11) The applicant or licensee must identify an administrator. The administrator must be a home health employee and possess education and experience required by the agency's policies. The administrator is responsible to:(b) Implement the provisions of this section;	

Z 0405	(11) The applicant or licensee must identify an administrator. The administrator must be a home health employee and possess education and experience required by the agency's policies. The administrator is responsible to: (c) Designate in writing an alternate to act in the administrator's absence;	
Z 0410	(11) The applicant or licensee must identify an administrator. The administrator must be a home health employee and possess education and experience required by the agency's policies. The administrator is responsible to: (d) Provide management and supervision of services throughout all approved service areas according to subsection (6) of this section ;	
Z 0415	(11) The applicant or licensee must identify an administrator. The administrator must be a home health employee and possess education and experience required by the agency's policies. The administrator is responsible to:(e) Arrange for necessary services;	
Z 0420	(11) The applicant or licensee must identify an administrator. The administrator must be a home health employee and possess education and experience required by the agency's policies. The administrator is responsible to: (f) Keep contracts current and consistent with WAC 246-335-425(4);	
Z 0425	(11) The applicant or licensee must identify an administrator. The administrator must be a home health employee and possess education and experience required by the agency's policies. The administrator is responsible to: (g) Serve as a liaison between the licensee, personnel, con-tractors and volunteers;	
Z 0430	(11) The applicant or licensee must identify an administrator. The administrator must be a home health employee and possess education and experience required by the agency's policies. The administrator is responsible to: (h) Ensure personnel, contractors and volunteers are currently credentialed by the state of Washington, when appropriate, according to applicable practice acts and consistent with WAC 246-335-425(5);	
Z 0435	(11) The applicant or licensee must identify an administrator. The administrator must be a home health employee and possess education and experience required by the agency's policies. The administrator is responsible to: (i) Ensure personnel, contractors and volunteers comply with the licensee's policies and procedures;	
Z 0440	(11) The applicant or licensee must identify an administrator. The administrator must be a home health employee and possess education and experience required by the agency's policies. The administrator is responsible to: (j) Implement a quality improvement process consistent with WAC 246-335-455;	
Z 0445	(11) The applicant or licensee must identify an administrator. The administrator must be a home care employee and possess education and experience required by the agency's policies. The administrator is responsible to: (k) Manage recordkeeping according to WAC 246-335-450;	
Z 0450	(11) The applicant or licensee must identify an administrator. The administrator must be a home care employee and possess education and experience required by the agency's policies. The administrator is responsible to: (l) Ensure supplies and equipment necessary to client care are available, maintained, and in working order;	
Z 0455	(11) The applicant or licensee must identify an administrator. The administrator must be a home care employee and possess education and experience required by the agency's policies. The administrator is responsible to: (m) Ensure the accuracy of public information materials; and	
Z 0460	(11) The applicant or licensee must identify an administrator. The administrator must be a home care employee and possess education and experience required by the agency's policies. The administrator is responsible to: (n) Ensure current written policies and procedures are accessible to personnel, contractors, and volunteers during hours of operation.	
Z 0465	(12) The licensee must continue to update its plan of operation to reflect current practice, services provided by the agency, and state and local laws.	
246-335-420	Delivery of Services	
Z 0470	(1) Admission, transfer, discharge, and referral processes: (a) In order to minimize the possibility of client abandonment, clients must be given at least a forty-eight hour written or verbal notice prior to discharge that will be documented in the client record; (b) Forty-eight hour notice is not required if home care agency worker safety, significant client noncompliance, or client's failure to pay for services rendered are the reason(s) for the discharge; (c) A home care agency discharging a client that is concerned about their ongoing care and safety may submit a self-report to appropriate state agencies which identifies the reasons for discharge and the steps taken to mitigate safety concerns; (d) Home care agencies under contract with DSHS or the AAA may follow different time frames for notice of discharge as established in the terms of the contract.	

Z 0475	(2) Specific nonmedical services available to meet client, or family needs as identified in the plan of care;	
Z 0480	(3) Home care services starting within seven calendar days of receiving and accepting a referral for services. Longer time frames are permitted when one or more of the following is documented:(a) Longer time frame for the start of services is requested by the client, designated family member, or legal representative, or referral source;(b) Longer time frame for the start of services is agreed upon by the client, designated family member, or legal representative, or referral source in order for agency to select and hire an appropriate caregiver to meet the needs of the client;(c) Start of services was delayed due to agency having challenges contacting client, designated family member, or legal representative;(d) Home care agencies under contract with DSHS or the AAA may follow different time frames for the start of services as established in the terms of the contract.	
Z 0485	(4) Agency personnel, contractor, and volunteer roles and responsibilities related to medication self-administration with assistance;	
Z 0490	(5) Coordination of care, including:(a) Coordination among services being provided by a licensee having an additional home health or hospice service category; and (b) Coordination with other agencies when the care being provided impacts client health;	
Z 0495	(6) Actions to address client, or family communication needs;	
Z 0500	(7) Emergency care of the client;	
Z 0505	(8) Providing back-up care to the client when services cannot be provided as scheduled. Back-up care which requires assistance with client ADLs must be provided by staff with minimum credentialing or workers who meet the exemption criteria in chapter 246-980 WAC. Noncredentialed staff may provide backup care only when assisting a client with IADLs or in emergency situations;	
Z 0510	(9) Actions to be taken upon death of a client;	
Z 0515	(10) Actions to be taken when client has a signed advanced directive;	
Z 0520	(11) Actions to be taken if a client has a signed POLST form. Any section of the POLST form not completed implies full treatment for that section. At minimum, include: In the event of a client medical emergency and agency staff are present, provide emergency medical personnel with a client's signed POLST form;	
Z 0525	(12) If the home care agency chooses to offer assistance with taking vital signs, then relevant policies and procedures must comply with the following minimum requirements: (a) Assistance with taking vital signs for informational purposes only, due to client being unable to complete tasks independently. Home care agency workers may only assist clients in the process of taking their own vital signs. Examples of assistance include, but are not limited to, handing client a digital thermometer, sliding blood pressure cuff over client's arm, turning on a device, recording digital readings and communicating those readings back to the client, designated family member, or legal representative. Devices used must be electronically operated with digital readouts; and (b) Assistance with taking vital signs to determine when to take or exclude prescribed medications, or what dosage of medication to take due to client being unable to complete tasks independently. Agencies must contract with a registered nurse to determine if nurse delegation is appropriate and train agency worker(s) on taking specific vital signs and to understand how the readings relate to the medications that the client needs to take;	
Z 0530	(13) If a home care agency chooses to offer assistance with passive range of motion exercises for maintenance purposes only, then relevant policies and procedures must comply with the following minimum requirements:(a) Ensure the client provides the agency with a copy of their passive range of motion exercise plan established by a physical therapist licensed under chapter 18.74 RCW, an occupational therapist licensed under chapter 18.59 RCW, or qualified registered nurse licensed under chapter 18.79 RCW. The date of the plan must be within twelve months of requesting assistance with passive range of motion. The plan must clearly state that the passive range of motion is for maintenance purposes only. Passive range of motion for purposes of restoring joint function is outside the scope of a home care agency to provide; (b) If the exercise plan is older than twelve months or does not clearly state for maintenance purposes only, the agency will direct client to get an updated or new passive range of motion plan from their health care provider; (c) Ensure and document passive range of motion skills verification of assigned agency workers, consistent with WAC 246-335-425(9), prior to the provision of these services; and (d) Ensure clients receiving passive range of motion submit to the agency an updated exercise plan from their health care provider at least annually;	
Z 0535	(14) Nurse delegation according to the following: (a) Delegation is only permitted for stable and predictable clients requiring specific nursing tasks that do not require clinical judgment; (b) Home care agencies are not required to provide nurse delegation services and do not	

	<p>need a policy if they do not provide these services;</p> <p>(c) A licensee with an approved home care service category only may provide nurse delegation in the following ways:</p> <p>(i) Contract with a registered nurse for any client needing nurse delegation;</p> <p>(ii) DSHS or the AAA that contracts with licensees to provide home care services to Medicaid eligible clients are responsible to establish contracts with registered nurse delegators for any client needing nurse delegation; and</p> <p>(d) Home care agency credentialed workers must complete the core delegation training from DSHS prior to participating in the delegation process. Home care agency workers must also comply with any nurse delegation requirements specific to their department issued credential.</p>	
246-335-425	Personnel Contractor and Volunteer Policies	
Z 0540	(1) Employment criteria regarding discrimination consistent with chapter 49.60 RCW;	
Z 0545	(2) Job descriptions that contain responsibilities and are consistent with health care professional credentialing and scope of practice as defined in relevant practice acts and rules;	
Z 0550	(3) References for personnel, contractors and volunteers;	
Z 0555	The applicant or licensee must develop and operationalize personnel, contractor, and volunteer policies and procedures that describe: (4) Contracting process when using a contractor. The contract should include, at minimum, a description of the duties the contractor will perform, and a statement indicating that the contractor, not the employer, is responsible for withholding any necessary taxes. As with personnel and volunteers, contractors are subject to all applicable requirements in this chapter;	
Z 0560	(5) Credentials of health care professionals that are current and in good standing;	
Z 0565	<p>(6) Criminal history background checks and disclosure statements for personnel, contractors, volunteers, students, and any other individual associated with the licensee having direct contact with children under sixteen years of age, people with developmental disabilities or vulnerable persons according to RCW 43.43.830 through 43.43.842 and the following:</p> <p>(a) Criminal history background checks must be processed through the Washington state patrol (WSP);</p> <p>(b) Disclosure statements must be approved by the department; and</p> <p>(c) All criminal history background checks and disclosure statements required under this chapter must be renewed within two years from the date of the previous check;</p>	
Z 0570	<p>(7) Character, competence, and suitability determination conducted for personnel, contractors, volunteers, and students whose background check results reveal non-disqualifying convictions, pending charges, or negative actions. Factors to consider when making a determination include, but are not limited to: (a) Whether there is a reasonable, good faith belief that they would be unable to meet the care needs of the client;(b) Level of vulnerability of the client under their care;(c) Behaviors since the convictions, charges, negative actions or other adverse behaviors;(d) Pattern of offenses or other behaviors that may put the client at risk;(e) Number of years since the conviction, negative action, or other issue;(f) Whether they self-disclosed the conviction(s), pending charge(s) or negative action(s);(g) Other health and safety concerns; and (h) Although a licensee may determine, based on their assessment process, that an employee is suitable to work with vulnerable clients, the department has the final authority to deny, revoke, modify, or suspend any professional credential it issues based on application and criminal background check information.</p>	
Z 0575	<p>(8) Mandatory reporting:</p> <p>(a) Mandatory reporters shall report failure to comply with the requirements of chapters 246-335 WAC and 70.127 RCW to the department. The report must be submitted on department forms. Reports must be submitted within fourteen calendar days after the reporting person has knowledge of noncompliance that must be reported;</p> <p>(b) Mandatory reporters shall report suspected abandonment, abuse, financial exploitation, or neglect of a person in violation of RCW 74.34.020 or 26.44.030 to the department of social and health services and the proper law enforcement agency. Reports must be submitted immediately when the reporting person has reasonable cause to believe that abandonment, abuse, financial exploitation, or neglect of a vulnerable adult has occurred.</p>	



Z 0580	(9) In-person orientation to current agency policies and procedures and verification of skills or training prior to independently providing client care. Examples of skills verification include written testing, skills observation, and evidence of previous training and experience such as long-term care worker training as detailed in RCW 74.39A.074 and certified nursing assistant training as detailed in WAC 246-841-400;	
Z 0585	(10) Ongoing training pertinent to client care needs;	
Z 0590	(11) Safe food storage, preparation and handling practices consistent with the United States Food and Drug Administration's recommendations for "food safety at home" for personnel, contractors, and volunteers involved in food preparation services on behalf of clients. Personnel, contractors, and volunteers may not provide clients with homemade food items or baked goods that they themselves prepared;	
Z 0595	(12) Infection control practices, communicable disease testing, and vaccinations. Policies and procedures must include, at minimum: (a) Standard precautions such as hand hygiene, respiratory hygiene and cough etiquette, and personal protective equipment; (b) Availability of personal protective equipment and other equipment necessary to implement client plans of care;	
Z 0600	(12) Infection control practices, communicable disease testing, and vaccinations. Policies and procedures must include, at minimum: (c) Tuberculosis (TB) infection control program. Key elements include, but are not limited to: (i) Conducting a TB risk assessment for all new employees upon hire. Agencies must use a tuberculosis risk assessment form provided by the department. Based on risk assessment results, determine the agency's responsibility to conduct TB testing of new employees. If TB testing is required, follow the department's tuberculosis risk assessment form testing recommendations; (ii) Conducting an annual assessment of new TB risk factors for all employees. Agencies must use a tuberculosis risk assessment form provided by the department. Based on risk assessment results, determine agency's responsibility to conduct TB testing of employees. Retesting should only be done for persons who previously tested negative and have new risk factors since the last assessment; and (iii) Ensuring workers receive TB related training and education at the time of hire or during new employee orientation. Training and education must be consistent with the department's tuberculosis program's online posted educational materials.	
Z 0605	(12) Infection control practices, communicable disease testing, and vaccinations. Policies and procedures must include, at minimum: (d) Actions to take when personnel, volunteers, contractors, or clients exhibit or report symptoms of a communicable disease in an infectious stage in accordance with chapters 246-100 and 246-101 WAC;	
Z 0610	(12) Infection control practices, communicable disease testing, and vaccinations. Policies and procedures must include, at minimum: (e) Exposure to blood borne pathogens such as Hepatitis B and HIV and other potentially infectious materials in compliance with the department of labor and industries, chapter 296-823 WAC. Key elements include, but are not limited to: (i) Conducting an initial risk assessment of the environment in which personnel, volunteers, and contractors perform their assigned duties to determine occupational exposure. The results of the risk assessment will inform policy and procedure development and level of employee training and education. Annually, agencies must determine if significant changes have occurred that would require a new risk assessment to be performed; (ii) If the risk assessment concludes that workers have a reasonably anticipated risk of occupational exposure to blood and other potentially infectious materials, agencies must offer workers the Hepatitis B vaccine series at the agency's expense. Workers have the right to decline the Hepatitis B vaccine series; and	
Z 0615	(12) Infection control practices, communicable disease testing, and vaccinations. Policies and procedures must include, at minimum: (f) Agencies must document an annual review of applicable state and federal health authority recommendations related to infection control practices, communicable disease testing, and vaccinations and update trainings and policies and procedures as necessary.	
Z 0620	(13) Annual performance evaluations of all personnel and volunteers providing direct client care, including on-site observation of care and skills specific to the care needs of clients; and	
Z 0625	(14) Annual evaluations of services provided by contractors providing direct client care.	

Agency Administrator Signature _____ Date _____