



**MEDPROS OF AMERICA, INC.  
THE COMPLETE HOME HEALTH AGENCY HANDBOOK**

# **Table Of Contents**

## **ADMINISTRATIVE POLICIES AND PROCEDURES**

1. AGENCY MANAGEMENT
2. ACTION PLAN
3. ANNUAL EVALUATION
4. ANNUAL OPERATING BUDGET
5. BOARD OF DIRECTORS
6. CHAIN OF COMMAND
7. CODE OF ETHICS
8. COMMUNICATION OF INFORMATION
9. COMPLIANCE WITH FEDERAL, STATE AND LOCAL LAWS
10. CONFLICT OF INTEREST DISCLOSURES
11. CONFLICT RESOLUTION
12. CONTRACTED SERVICES
13. CORPORATE COMPLIANCE PLAN
14. ETHICS COMMITTEE
15. FINANCIAL INCENTIVES CLINICAL DECISION MAKING
16. FISCAL PLANNING
17. GOVERNANCE BOARD OF DIRECTORS
18. INCIDENT REPORT
19. INCIDENT REPORTS POLICY
20. MISSION POLICY
21. NON-DISCRIMINATION POLICY
22. ORGANIZATION AND STRUCTURE
23. ORGANIZATIONAL PERFORMANCE IMPROVEMENT PLAN
24. PHILOSOPHY POLICY
25. PHYSICIAN LICENSE VERIFICATION
26. POLICY AND PROCEDURE POLICY
27. PRIVACY AND CONFIDENTIALITY OF INFORMATION
28. PROBLEM SOLVING
29. PROFESSIONAL ADVISORY COMMITTEE
30. ROOT CAUSE ANALYSIS
31. SENTINEL EVENTS

## **COMPLAINT RESOLUTION**

1. COMPLAINT RESOLUTION LOG
2. PATIENT CONCERNS/GRIEVANCES PROCESS
3. PATIENT PERCEPTION OF CARE REPORT
4. PERCEPTION OF CARE SATISFACTION SURVEY

## **EMERGENCY MANAGEMENT PLAN**

### **EQUIPMENT DELIVERY AND SETUP**

1. AFTER HOURS DELIVERY
2. BACK UP EQUIPMENT
3. DELIVERY DOCUMENTATION POLICY
4. DELIVERY PROCEDURE
5. HOME EQUIPMENT INSTRUCTIONS CHECKLIST
6. DELIVERY ROUTE SHEET
7. PATIENT RIGHTS POLICY

## **8. EQUIPMENT AND BED CLEANING GUIDELINES**

9. QUALITY SERVICE STANDARDS:
  - a. FOR WHEELCHAIRS – OPERATIONAL CHECKOUT PROCEDURES
  - b. FOR SUCTION MACHINES – OPERATIONAL CHECKOUT PROCEDURES
  - c. FOR AIR MATTRESSES – OPERATIONAL CHECKOUT PROCEDURES
  - d. FOR PATIENT LIFTS – OPERATIONAL CHECKOUT PROCEDURES
  - e. FOR HOSPITAL BEDS – OPERATIONAL CHECKOUT PROCEDURES
10. EQUIPMENT SAFETY POLICY
11. EQUIPMENT SET-UP POLICY
12. WARRANTY POLICY
13. HUMIDIFIER CLEANING INSTRUCTIONS
14. NEBULIZER/COMPRESSOR SERVICE
15. CPAP/ BiPAP SERVICE
16. NON-ROUTINE (NON-PM) EQUIPMENT MAINTENANCE RECORD
17. EQUIPMENT PICK UP POLICY
18. APNEA MONITOR MAINTENANCE POLICY
19. FEEDING PUMP MAINTENANCE
20. OXYGEN REGULATOR MAINTENANCE
21. RECEIVING EQUIPMENT POLICY
22. RETURN OF PURCHASED OR RENTED EQUIPMENT
23. SERVICE CALL REPORT
24. VENDOR REPAIR SERVICE
25. PRODUCT AND MEDICAL EQUIPMENT RECALL/ SAFETY ADVISORY PROCESS
26. DELIVERY LOGS AND RETENTION
27. TRANSPORTATION, LABELING, HANDLING, AND DELIVERY
28. CLIENT RESIDENCE ASSESSMENT
29. WAREHOUSE/ STORAGE POLICY
30. EQUIPMENT SELECTION POLICY
31. INVENTORY TRACKING AND MONITORING POLICY
32. PREVENTATIVE MAINTENANCE REPAIR AND TESTING

## **FINANCIAL POLICY AND PROCEDURE**

1. BILLING SERVICE INFORMATION
2. ACCOUNTS RECEIVABLE
3. ACCOUNTS PAYABLE
4. CREDIT AND COLLECTIONS
5. CONTRACT, PROPOSALS AND BIDS
6. CUSTOM FORMS

## **HIPAA Compliance**

- Administrative Procedures
- Acceptable Encryption Policy
- Acceptable Use Policy
- Accounting of Disclosures and PHI's

Patient Rights- Amendment of Protected Health Information  
 Analog/ ISDN Line Security Policy  
 Guidelines on Anti-Virus Process  
 Application Service Providers (ASP) Policy  
 ASP Security Standards  
 Audit Policy  
 Automatically Forwarded Email Policy  
 Information Protection Agreement between Business Associates  
 HIPAA Compliance Policies  
 Confidentiality Notice  
 Consent Form for Disclosure of PHI and Receipt of Privacy Policy  
 Dial- In Access Policy  
 Disclosure Tracking Log  
 Disposal of PHI  
 Electronic Mail  
 Employee Confidentiality Acknowledgment  
 Extranet Policy  
 General Policy on Uses and Disclosures and PHI  
 Information Sensitive Policy  
 Internal Lab Security Policy  
 Internet EZ Equipment Policy  
 Minimum Necessary Use  
 Password Policy  
 Patient Access/ Amendment to PHI and PHI Disclosure Summary  
 Printing and Copying PHI  
 Privacy Complaint Policy  
 Sample (Chief) Privacy Offer Job Description  
 Notice of Privacy Practices  
 Remote Access Policy  
 Request for an Accounting of Disclosures  
 Policy: Accounting of Disclosures  
 Risk Assessment Policy  
 Router Security Policy  
 Security Awareness Training Policy  
 Server Security Policy  
 Storage of PHI  
 HIPAA Compliance Policies: HIPAA Compliance Guide  
 Use and Disclosure of PHI for Judicial or Administrative Proceedings  
 Wireless Communication Policy

**HR FILE SETUP**

**Section One: (Correspondence)**

Orientation Checklist  
 Correspondence/Memos  
 Equipment Agreements (If Applicable)

**Section Two: (Personal)**

Application  
 License Copy/Verification  
 Diploma/Degree/Transcript  
 CPR Card  
 Emergency Contact  
 Resume (Licensed Professionals Only)  
 (2) References  
 W-4

**Section Three: (Agreements)**

Receipt of Employee Handbook  
 Acknowledgment of New/Revised Policy  
 Letter of Appointment (Safety Director)  
 Job Description  
 Confidentiality  
 Work Made For Hire  
 Conflict of Interest & Disclosure Statement  
 Workplace Policy

**Section Four: (Credentials)**

Specialty Training

**Section Five: (In-Service)**

Offsite Training (i.e. Complex Rehab)

**Section Six: (Confidential File – Kept Separate)**

Driving Record  
 FDLE Screenings (As Applicable)  
 I-9 Form  
 Drug Test Consent & Authorization  
 Mantoux or X-ray  
 Immunizations

Other Confidential Information

**Section Seven:**

Evaluations  
 Pre Employment Medical Questionnaire  
 Questionnaire For Positive TB Tests  
 Informed Consent For Hepatitis B Vaccine  
 Hepatitis B Vaccine Declination  
 Performance Evaluations  
 Time Off Request

**HUMAN RESOURCES**

- Employee Handbook
  - Employee Handbook – Federal
  - Orientation Checklists
  - Termination Forms
1. APPLICATION FOR EMPLOYMENT
  2. ATTENDANCE – TARDINESS
  3. CERTIFIED NURSING ASSISTANTS
  4. CLASSIFICATION OF EMPLOYEES
  5. CRIMINAL BACKGROUND CHECKS
  6. DISCIPLINARY ACTION
  7. DRESS REGULATIONS
  8. EMPLOYEE COMMUNICATIONS
  9. EMPLOYEE REQUESTS PAID TIME OFF
  10. EMPLOYMENT OF THE DISABLED
  11. EQUAL OPPORTUNITY EMPLOYMENT
  12. ETHICAL DILEMMAS
  13. EXIT INTERVIEW FORM
  14. EXIT INTERVIEWS
  15. FOREIGN APPLICANTS
  16. GARNISHMENT OF WAGES
  17. HOLIDAY POLICY
  18. HOME HEALTH AID COMPETENCY EVALUATION
  19. HOME HEALTH AID SKILLS CHECKLIST
  20. HOME HEALTH AID SUPERVISION
  21. NEPOTISM
  22. ORIENTATION PROGRAM
  23. ORIENTATION – HOME HEALTH AIDE SERVICES
  24. PAYROLL VERIFICATION
  25. PERSONAL INFORMATION
  26. PERSONNEL FILES
  27. PHOTO IDENTIFICATION
  28. POSITION CONTROL
  29. RECRUITMENT, RETENTION AND EDUCATION
  30. REFERENCE CHECKING
  31. RE-HIRE
  32. SICK LEAVE
  33. STAFF SELECTION
  34. TERMINATION OF EMPLOYMENT
  35. VACATION
  36. WORKMENS COMPENSATION

**JOB DESCRIPTIONS & 90 DAY EVALUATIONS**

1. CURRENT LICENSURE CERTIFICATION AND REGISTRATION
2. PERFORMANCE EVALUATION
3. ADMINISTRATOR ANNUAL EVALUATION
4. ADMINISTRATOR JOB DESCRIPTION – 90 DAY EVALUATION
5. CASE MANAGER ANNUAL EVALUATION
6. CASE MANAGER JOB DESCRIPTION – 90 DAY EVALUATION
7. DIRECTOR OF PATIENT CARE SERVICES ANNUAL EVALUATION
8. DIRECTOR OF PATIENT CARE SERVICES JOB DESCRIPTION – 90 DAY EVALUATION
9. HOME HEALTH AIDE ANNUAL EVALUATION
10. HOME HEALTH AIDE JOB DESCRIPTION – 90 DAY EVALUATION
11. INTAKE NURSE ANNUAL EVALUATION
12. INTAKE NURSE JOB DESCRIPTION – 90 DAY EVALUATION
13. LPN/LVN ANNUAL EVALUATION
14. LPN/LVN JOB DESCRIPTION – 90 DAY EVALUATION
15. MEDICAL SOCIAL WORKER ANNUAL EVALUATION
16. MEDICAL SOCIAL WORKER JOB DESCRIPTION – 90 DAY EVALUATION
17. OCCUPATIONAL THERAPIST ANNUAL EVALUATION

18. OCCUPATIONAL THERAPIST JOB DESCRIPTION – 90 DAY EVALUATION
19. PHYSICAL THERAPIST ANNUAL EVALUATION
20. PHYSICAL THERAPIST JOB DESCRIPTION – 90 DAY EVALUATION
21. SPEECH THERAPIST ANNUAL EVALUATION
22. SPEECH THERAPIST JOB DESCRIPTION – 90 DAY EVALUATION

- Range of Motion
- Respiratory Disorders
- Seizures and Strokes
- Vital Signs

#### INSURANCE DECLARATIONS

#### MEDICAL DEVICE PRODUCT RECALL

#### MEDICATION ADMINISTRATION

##### ADMINISTRATION

1. PHARMACY INTRAVENOUS ADMINISTRATION
2. PHARMACY MEDICATION ADMINISTRATION
3. DRUG REACTIONS
4. FIRST DOSE MEDICATIONS
5. MEDICATION ADMINISTRATION AND TRANSCRIPTION
6. MEDICATION MANAGEMENT
7. MEDICATION ORDERS
8. MEDICATION PROFILE “A”
9. MEDICATION PROFILE “B”

##### EVALUATION

1. LICENSE AND PROFESSIONAL STANDARDS

##### HIGH RISK MEDICATION

1. HIGH ALERT MEDICATION MANAGEMENT
2. HIGH RISK HIGH ALERT MEDICATION LIST
3. LIGHT SENSITIVE MEDICATION POLICY
4. LIGHT SENSITIVE MEDICATIONS LIST

##### MONITORING

1. ADVERSE DRUG REACTION REPORTING FORM
2. ADVERSE DRUG REPORT FORM
3. AMINOGLYCOSIDE DOSING CONSULTATIONS
4. ANTICOAGULATION MONITORING
5. CREATININE LEVEL ASSESSMENT
6. MEDICATION ERROR ANALYSIS TOOL
7. MEDICATION ERRORS
8. MEDICATION INADVERTENT INCIDENT REPORT FORM
9. POTENTIAL ADVERSE DRUG REPORT FORM
10. RENAL DOSING ADJUSTMENTS
11. THERAPEUTIC DRUG MONITORING
12. THERAPEUTIC DRUG MONITORING WORKSHEET

##### ORDERING AND TRANSCRIBING

1. DOCUMENTATION AND THE USE OF ABBREVIATIONS, ACRONYMS AND SYMBOLS
2. DRUG COMPOUNDING
3. MEDICATION ORDERS
4. PHYSICIAN SIGNATURE DEA NUMBERS
5. QUESTIONABLE MEDICATION ORDERS
6. UNACCEPTABLE ABBREVIATION AND SYMBOL LIST

##### PREPARING AND DISPENSING

1. CONTROLLED DRUG DISTRIBUTION
2. DRUG PRODUCT DEFECTS
3. ENTERAL NUTRITION PRODUCTS
4. LABELING STANDARDS
5. LAFW'S OR BARRIER ISOLATORS
6. LAMINARE AIRFLOW HOOD MAINTENANCE
7. MEDICATION PREPARATION
8. MEDICATION RECALL
9. NIGHT MEDICATION LOCKERS
10. PARENTERAL NUTRITION GUIDELINES
11. PARENTERAL NUTRITION PROTOCOL
12. PHARMACIST ORDER VERIFICATION
13. PHARMACY COMMUNICATIONS SHEET
14. PHARMACY NIGHT LOG
15. STERILE ADMIXTURE
16. UNIT DOSE DISTRIBUTION SYSTEM
17. UNUSABLE AND OUTDATED DRUGS

##### SELECTION AND PROCUREMENT

1. FDA APPROVED DRUGS FOR NON-FDA APPROVED USE
2. FORMULARY ADDITION DELETION REQUEST FORM
3. LOANING AND BORROWING MEDICATION FOR EMERGENCY PURPOSES
4. NON-FORMULARY DRUG REQUEST FORM
5. PROCUREMENT OF MEDICATIONS
6. PURCHASE RECORDS

##### STORAGE

1. CONCENTRATED ELECTROLYTE SOLUTIONS AND OTHER DRUG CONCENTRATIONS

#### INFECTION CONTROL

1. AIDS HIV GUIDELINES
2. EMPLOYEE ADSENCE REPORT
3. EMPLOYEE HEALTH
4. EMPLOYEE HEALTH – ILLNESS
5. EMPLOYEE HEALTH – IMMUNIZATIONS
6. EMPLOYEE HEALTH INJURY
7. EMPLOYEE HEALTH PROGRAM
8. EXPOSURE CONTROL PROGRAM
9. HAND HYGENE
10. HEPATITIS B VACCINE DECLINATION
11. HEPATITIS B VACCINE FORM
12. HIV EXPOSURE
13. INFECTION CONTROL COMMITTEE
14. INFECTION CONTROL PROGRAM
15. INFECTION REPORT FORM
16. NURSING BAG TECHNIQUES
17. POSITIVE TB SKIN TEST REACTIONS QUESTIONNAIRE
18. POST EXPOSURE PROPHYLAXIS HEPATITIS
19. PREVENTION OF TUBERCULOSIS TRANSMISSION
20. REPORTING PATIENT INFECTIONS
21. SHARPS INJURY LOG
22. SHARPS INJURY PROTECTION PLAN
23. STANDARD PRECAUTIONS
24. TUBERCULOSIS PROBLEM EVALUATION FLOWCHART
25. TUBERCULOSIS RISK ASSESSMENT FLOWCHART
26. TUBERCULOSIS SCREENING PROGRAM
27. TUBERCULOSIS TRAINING PROGRAM

#### INFORMATION MANAGEMENT

1. ANSWERING SERVICE POLICY
2. APPROVED SYMBOLS AND ABBREVIATIONS
3. CLIENT INFORMATION FORM
4. CLIENT RECORD HOME CARE NOTES
5. INFORMATION MANAGEMENT POLICY
6. MEDICAL RECORD AUDITS
7. PATIENT RECORD
8. PRIVACY AND CONFIDENTIALITY INFORMATION
9. UNACCEPTABLE ABBREVIATION AND SYMBOL LIST

#### IN-SERVICE TRAINING

1. ABUSE, NEGLECT AND EXPLOITATION
2. ALZHEIMER'S DISEASE
3. BEHAVIOR MANAGEMENT
4. BLOODBORNE PATHOGENS
5. BODY MECHANICS
6. DEPRESSION
7. DIABETES
8. FIRE SAFETY
9. HAND WASHING TECHNIQUES
10. PPE – PERSONAL PROTECTIVE EQUIPMENT
11. SAFETY –SECURITY
12. OTHER IN-SERVICE TOPICS SPECIFIC TO YOUR COMPANY
  - Durable Medical Equipment
  - End of Life
  - Heart Disease
  - Incontinence and Constipation
  - Infection Control
  - Lifting and Transferring Patients
  - Malnutrition and Dehydration
  - Medical Device Reporting
  - Mental Illness
  - Nutrition
  - Pain Management
  - Personal Care/Skin Care
  - Psychosocial

2. CONTROLLED SUBSTANCES – PHARMACY
3. DECREASING MEDICATION ERRORS
4. DISPOSAL OF CONTROLLED SUBSTANCE PATCHES
5. DRUG PROCUREMENT INVENTORY CONTROL
6. FLOOR STOCK
7. INSPECTION OF DRUG STORAGE AREAS
8. LOOK-ALIKE, SOUND-ALIKE MEDICATION MANAGEMENT
9. POISON CONTROL

**MSDS'**

**NURSING FORMS**

1. ADULT SKILLED NURSING CLINICAL PLAN OF CARE
2. ADULT SKILLED NURSING NOTE
3. CASE MANAGEMENT
4. DIABETIC FLOWCHART
5. DIABETIC PLAN OF CARE
6. DISCHARGE INFORMATION FORM
7. GLUCOSE MONITOR OPERATOR PROFICIENCY RECORD FORM
8. HHA PCA HOMEMAKER CARE PLAN
9. HHA PCA HOMEMAKER COMPANION SUPERVISORY EVALUATION TOOL
10. MEDICAL SOCIAL SERVICES ASSESSMENT
11. MEDICAL SOCIAL SERVICES NOTE
12. MEDICATION PROFILE FORM "A"
13. MEDICATION PROFILE FORM "B"
14. MISSED VISIT REPORT
15. NUTRITIONAL ASSESSMENT FORM
16. OCCUPATIONAL THERAPY ASSESSMENT
17. OCCUPATIONAL THERAPY NOTE
18. OCCUPATIONAL THERAPY PLAN OF CARE
19. PARAPROFESSIONAL NOTE AND TIMESHEET
20. PATIENT SUMMARY
21. PHYSICAL THERAPY ASSESSMENT
22. PHYSICAL THERAPY NOTE
23. PHYSICAL THERAPY PLAN OF CARE
24. SPEECH THERAPY ASSESSMENT
25. SPEECH THERAPY PLAN OF CARE
26. WOUND HEALING ASSESSMENT TOOL
27. WOUND PHOTOGRAPHIC DOCUMENTATION

**OSHA LOG AND MANUAL**

OSHA 300 – 300A – 301

**PATIENT ADMINISTRATIVE POLICIES AND PROCEDURES**

1. 2009 HOME CARE NATIONAL PATIENT SAFETY GOALS
2. ACCEPTANCE / ADMISSION OF PATIENTS
3. ADMISITATION OF BLOOD COMPONENTS
4. ADVANCE DIRECTIVES
5. ASSESSMENTS
6. CARE OF THE TERMIALLY ILL PATIENT
7. CARE PLAN IMPLEMENTATION
8. CARE PLANNING
9. CARE PLANNING AND COORDINATION
10. CONFIRMATION OF PHYSICIAN VERBAL TELEPHONE ORDER
11. CONSENT
12. CONSENTS FOR USES OR DISCLOSURES
13. COORDINATION OF SERVICES
14. CRITERIA FOR DISCHARGE/TRANSFER
15. CRITICAL TEST REPORTING
16. DISCHARGE SUMMARY
17. DISCHARGE TRANSFER REFERRAL OF PATIENTS
18. DO NOT RESUSCITATE(DNR) DO NOT INTUBATE(DNI)
19. EMERGENCY INTERVENTIONS
20. GLUCOSE MONITOR CONTROL LOG
21. GUIDELINES FOR MEDICAL MANAGEMENT
22. INTAKE SERVICE
23. INTERDISCIPLINARY CARE PLANNING
24. MEDICATION TRANSFER COMMUNICATION
25. MULTIDISCIPLINARY PATIENT EDUCATION
26. NUTRITIONAL ASSESSMENT
27. ON-CALL COVERAGE
28. PAIN MANAGEMENT
29. PAIN MANAGEMENT EDUCATION
30. PATIENT ABUSE, NEGLECT OR EXPLOITATION - ADULT

31. PATIENT ABUSE, NEGLECT OR EXPLOITATION – CHILD
32. PATIENT ASSESSMENT/FUNCTIONS/QUALIFICATIONS
33. PATIENT BILL OF RIGHTS AND RESPONSIBILITIES
34. PATIENT EDUCATION
35. PATIENT EDUCATION – MEDICAL EQUIPMENT
36. PATIENT IDENTIFICATION ACCURACY
37. PATIENT INFORMATION PACKET
38. PATIENT INFORMED DECISION MAKING
39. PATIENT RISK OF FALLS ASSESSMENT
40. PATIET SAFETY PLAN
41. PATIENT SAFETY PROGRAM CHECKLIST
42. PATIENT VISITS
43. PATIENT WITH SPECIAL COMMUNICATION NEEDS
44. PERSONAL CARE INSTRUCTIONS
45. PHOTOGRAPHING – VIDEOTAPING PATIENTS
46. PRIVACY AND CONFIDENTIALITY OF INFORMATION
47. SUPERVISION OF CARE AND SERVICES
48. SUSPECTED ADULT ABUSE REPORT FORM – EXAMPLE
49. USE OF RESTRAINTS
50. USES AND DISCLOSURES OF INFORMATION
51. VERBAL TELEPHONE ORDER READBACK
52. WAIVED TESTING
53. WITHHOLDING AND WITHDRAWING LIFE SUPPORT

**PATIENT ADMISSION PACKETS**

- Welcome Letter and Hours of Operation
- Service Outline
- Advance Directives
- Copy of Durable Power of Attorney (Original in Patient File)
- Non-Discrimination Policy
- Patients Rights and Responsibilities/English
- Patients Rights and Responsibilities/Spanish
- Sec.102.003 Rights of Elderly
- Sec. 102.004 List of Rights
- Sec.102.005 Rights Cumulative
- Patient Client Grievance
- Abuse, Neglect and Exploitation
- Home Health Aid Responsibility
- Preventing Infections At Home
- Taking Medications
- In Case of Emergency
- Biomedical Waste Disposal Home Procedure
- Client Instructions in the Event of an Emergency
- Community Resources
- Home Health Aid Advanced Beneficiary Notice
- Home Health Agency Outcome and Assessment Information Set (OASIS) English
- Home Health Agency Outcome and Assessment Information Set (OASIS) Spanish
- Privacy Act Statement of Health Care Records
- Privacy Notice / English
- Privacy Notice / Spanish
- Use of Restraints

**PATIENT FILE SETUP**

**Section 1**

**ADMISSION**

- Admission Record
- Advance Directives
- Agreement to Establish Home Health Care Services
- Authorization and Consent To Photograph/Videotape
- Authorization/Agreement For Services
- Beneficiary Eligibility – HIQA
- Client Classification For Disaster Planning
- Confirmation of Physician's Orders
- Consent to Blood/Blood Product Transfusion(s)
- Declaration To Withdraw/Withhold Treatment
- Do Not Resuscitate and/or Do Not Intubate Request Form
- Durable Power Of Attorney
- Home Health Notice of Medicare Provider Non-Coverage
- Intake/Referral Form
- Orders For Service

Patient Consent and Authorizations

Section 2

**PATIENT CERTIFICATION**

- Home Hazard Analysis Checklist
- Home Health Certification and Plan of Treatment
- Initial Home Safety Evaluation and Instruction
- Patient/Family Education Record
- Personal Care Instructions ( HHA/CAN)

Section 3

**ASSESSMENTS, NOTES, PLAN OF CARE**

- Speech Therapy
- Occupational Therapy
- Physical Therapy

Section 4

**ASSESSMENTS, NOTES, PLAN OF CARE**

- Medical Social Services
- Photo Assessments

Section 5

**HOME HEALTH AIDE/COMPANION**

- Supervisory Evaluation Tool HHA/PCA – Homemaker/Companion
- Missed Visit Report
- HHA/PCA – Professional Note and Timesheet

Section 6

**NURSING - OASIS**

- Patient Summary
- Discharge Information
- Adult Skilled Nursing Notes
- Clinical Plan of Care: Adult Skilled Nursing
- Case Coordination
- Case Management/Care Coordination
- Diabetic Flowchart
- Missed Visit Report
- Medication Profile “A”
- Medication Profile “B”
- Glucose Monitor Operator Proficiency Record
- Nutritional Assessment
- Risk Screen
- Oasis B-1
- Oasis Start Of Care Plan
- Oasis Patient Tracking Sheet
- Oasis Follow-Up Version
- Oasis Transfer Version
- Oasis Discharge Version

**PATIENT SAFETY GUIDES**

- Patient Guide To Using A Walker
- Patient Guide To Using Crutches
- Patient Guide To Use A Cane
- Patient Guide To Using A Bedside Commode
- Patient Guide To Using A Wheelchair
- Patient Guide To Using A Hospital Bed
- Patient Guide To Using A Trapeze
- Patient Guide To Using A Patient Lift
- Patient Guide To Using An Enteral Feeding Pump
- Patient Guide To Using An Gravity Style Enteral Feeding
- Patient Guide To Using A Suction Machine
- Patient Guide In The Use Of An Oxygen Concentrator
- Patient Guide To Using A Nebulizer Compressor

**QUALITY PERFORMANCE IMPROVEMENT**

**SAFETY MANAGEMENT**

**SECURITY**

1. SECURITY EDUCATION
2. SECURITY PLAN
3. SECURITY POLICY & SECURITY CHAIN OF COMMAND

**WORKER SAFETY AND HAZARD COMMUNICATION**

1. ANTINEOPLASTIC WAST MANAGEMENT
2. BOMB INCIDENT PLAN
3. BOMB THREAT REPORT FORM
4. CHEMOTHERAPY LIQUID SPILLS
5. DETECTING SUSPICIOUS PACKAGES/LETTERS
6. DUTIES OF DEPARTMENT MANAGER IN SAFETY PROGRAM
7. DUTIES OF SAFETY DIRECTOR
8. HAZARD VULMERABILITY ANALYSIS

9. HAZARDOUS MATERIALS AND WASTE PLAN

10. INFECTIOUS WASTE MANAGEMENT PLAN

11. LETTER OF APPOINTMENT – SAFETY DIRECTOR

12. SAFE MEDICAL DEVICES

13. SAFETY – HAZARD SURVEILLANCE PROGRAM

14. SAFETY – PRECAUTIONS WHEN USING OXYGEN

15. SAFETY AND SECURITY TRAINING FOR HOME HEALTH PERSONNEL

16. SAFETY EDUCATION

17. UTILITY SYSTEMS MANAGEMENT PLAN



