



**MEDPROS OF AMERICA, INC.
THE COMPLETE HOME HEALTH AGENCY COMPLIANCE PROGRAM MANUAL**

PATIENT ADMINISTRATIVE POLICIES AND PROCEDURES

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 63. USES AND DISCLOSURES OF INFORMATION
 64. WAIVED TESTING
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PATIENT ADMISSION PACKETS

- WELCOME LETTER AND HOURS OF OPERATION
- SCOPE OF SERVICES
- PATIENT INFORMATION ON ADVANCE DIRECTIVES
- DURABLE POWER OF ATTORNEY FOR HEALTHCARE
- STATEMENT OF WITNESSES
- HOME CARE PATIENT RIGHTS AND RESPONSIBILITIES (ENGLISH)
- HOME CARE PATIENT RIGHTS AND RESPONSIBILITIES (SPANISH)
- RIGHTS OF THE ELDERLY
- ABOUT THE RIGHT TO EXPRESS GRIEVANCES
- ABUSE, NEGLECT AND EXPLOITATION
- INSERT HOME HEALTH AID RESPONSIBILITIES
- PREVENTING INFECTIONS AT HOME
- TAKING YOUR MEDICATION
- PATIENT AND FAMILY EDUCATION HANDOUT - HOME SAFETY
- IN CASE OF AN EMERGENCY
- BIOMEDICAL WASTE DISPOSAL HOME PROCEDURE
- CLIENT INSTRUCTIONS ON THE EVENT OF AN EMERGENCY
- COMMUNITY RESOURCES
- HOME HEALTH ADVANCE BENEFICIARY NOTE

- AVISO ANTICIPADO AL BENEFICIARIO DE LOS SERVICIOS DE SALUD EN AL HAGAR
- PRIVACY ACT NOTICE OF HEALTH CARE RECORDS
- PRIVACY OBLIGATIONS
- PRIVACY OBLIGATIONS (SPANISH)
- PATIENT AND FAMILY EDUCATION HANDOUT – USE OF RESTRAINT DEVICES

PATIENT FILE SETUP

SECTION 1 ADMISSION

- ADMISSION RECORD
- ADVANCE DIRECTIVE INFORMATION FORM
- AGREEMENT TO ESTABLISH HOME HEALTH CARE SERVICES
- AUTHORIZATION AND CONSENT TO PHOTOGRAPH AND PUBLICATION
- AUTHORIZATION / AGREEMENT FOR SERVICES
- HIQA BENEFICIARY ELIGIBILITY
- 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 (DNR) AND / OR DO NOT INTUBATE (DNI) REQUEST FORM
- NOTE
- WARNING TO PERSON EXECUTING THIS DOCUMENT
- DURABLE POWER OF ATTORNEY
- STATEMENT OF WITNESSES
- 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
- PERSONAL CARE INSTRUCTIONS (HHA/CAN)
- PATIENT / FAMILY EDUCATION RECORD

SECTION 3 ASSESSMENTS, NOTES, PLAN OF CARE

- SPEECH THERAPY
- MISSED VISIT REPORT
- ASSESSMENT
- PLAN OF CARE
- OCCUPATIONAL THERAPY
- MISSED VISIT REPORT
- ASSESSMENT
- NOTE
- PLAN OF CARE
- PHYSICAL THERAPY
- MISSED VISIT REPORT
- ASSESSMENT
- NOTE
- PLAN OF CARE

SECTION 4

ASSESSMENTS, NOTES, PLAN OF CARE

- MEDICAL SOCIAL SERVICES
- MISSED VISIT REPORT
- ASSESSMENT
- NOTE
- WOUND DOCUMENTATION
- PHOTOGRAPHIC WOUND DOCUMENTATION
- TOOL

SECTION 5

HOME HEALTH AIDE/COMPANION

- SUPERVISORY / EVALUATION
TOOL: HHA / PCA – HOMEMAKER COMPANION
- MISSED VISIT REPORT
- PARAPROFESSIONAL NOTE AND TIMESHEET
- HOME HEALTH AIDE / PCA / HOMEMAKER CARE PLAN

SECTION 6

NURSING - OASIS

- PATIENT SUMMARY

- DISCHARGE INFORMATION
- ADULT SKILLED NURSING ASSESSMENT / NOTE
- CLINICAL PLAN OF CARE: 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
- OUTCOME AND ASSESSMENT INFORMATION SET (OASIS B-1)
- ITEMS TO BE USED AS SPECIFIC TIME POINTS
- START OF CARE VERSION
- PATIENT TRACKING SHEET
- FOLLOW-UP VERSION
- TRANSFER VERSION
- DISCHARGE VERSION

PATIENT SAFETY GUIDES

- DURABLE MEDICAL EQUIPMENT
- DURABLE MEDICAL EQUIPMENT USED BY STAFF
- PATIENT GUIDE TO:
 - USING A WALKER
 - USING CRUTCHES
 - USE A CANE
 - USING A BEDSIDE COMMUNE
 - USING A WHEELCHAIR
 - USING A HOSPITAL BED
 - USING A TRAPEZE
 - USING A PATIENT LIFT
 - USING AN ENTERAL FEEDING PUMP
 - USING A GRAVITY STYLE ENTERAL FEEDING
 - USING A SUCTION MACHINE
 - USE OF AN OXYGEN CONCENTRATOR
 - USING A NEBULIZER COMPRESSOR