

NORTH CAROLINA DIVISION OF AGING AND ADULT SERVICES
MONITORING TOOL FOR IN-HOME AIDE SERVICES

Service Provider: _____
 Review Date: _____ State Fiscal Year: _____
 Interviewer(s): _____
 Person(s) Interviewed and Title: _____

PROGRAM ADMINISTRATION

1. What level(s) of the service are offered by the service provider? (Check all that apply)

Level	Home Mgmt.	Home Mgmt. Respite	Personal Care	Personal Care Respite	Funding		
					HCCBG	SSBG	State In-Home
I							
II							
III							
IV							

(HCCGB Manual Reference: Reporting Requirements and Reimbursement Procedures Sections 3-5)
 (Services Information Systems Manual: Section III General Services)

Comments:

2. Documentation of Agency Eligibility to provide In-Home Aide Service			
Personal Care License	Date	Direct	Sub-Contracting
Personal Care License Level II			
Personal Care License Level III			
HM Only Certification			
Level I			
Level II			
Level III			
Level IV			

3. Policy for In-Home Aide Services	HCCGB		SSBG		State In Home	
A. Does the DSS or provider agency or governing body have a written and approved policy and procedures to guide staff in managing and administering the service? (Home Care Licensure 10A NC AC 13J .001) Comments:	Y		Y		Y	
	N		N		N	
	N/A		N/A		N/A	
	Yes	No	Yes	No	Yes	No
B. Does the policy address the following:						
1. Level(s) of service to be provided;						
2. Method(s) of service provision to be utilized;						
3. Provision of respite care if applicable;						
4. Use of waiting list or inquiry list;						

3. Policy for In-Home Aide Services (continued)	HCCGB		SSBG		State In Home	
	Yes	No	Yes	No		
5. Maintenance of waiting list						
6. Client priority policy						
7. Appeals policy						

******PLEASE DOCUMENT AIDE SPECIFIC DATA FOR #4 AND #5 OF THIS SECTION ON THE ATTACHED SPREADSHEETS *******
(Review Aides Records from the Service Sample Being Reviewed)

4. Competency Requirements for Aides (See Attachment A)

A.

1) All aides have demonstrated competence for the specific tasks they have been individually assigned. Competence is documented.

Documentation:

Comments:

2) Aides performing at Level III- Personal Care task have passed the required state standardized test and are registered by the North Carolina Division of Health Services Regulation and are listed on the Nurse Aide I Registry.

Documentation:

Comments:

3) Is competency for specified levels of home management or personal care documented? (NC statute does not require standardized testing for aides functioning at levels below level III – personal care, but specific agency policy may require testing for personal care aides at lower levels of personal care. (All aides require competency verification for assigned tasks.)

Documentation:

Comments:

4. Competency Requirements for Aides (continued)
4) Aides required to perform selected tasks at a higher level (other than Level III – Personal Care) have documented competence in the specific tasks and the agency has documentation of prior approval for such task by the North Carolina Board of Nursing – Nurse Aide II task list. Documentation: Comments:

5. Aide supervisory contact standards (See Attachment B)
A. When aides are new since last monitoring visit to the service agency:
1) The supervisor(s) has completed at least two home visits in the first month of the aide's employment to observe the work of each worker.
2) The supervisor(s) has conducted additional visits, as needed, to respond to the capabilities of the aides and the needs of the clients. Documentation for 5A 1-2: Comments for 5A 1-2:
B. When the aides and agency have an established working relationship:
1) For new assignments a recommended supervisory home visit or telephone call to the aide is made within the first calendar week.
2) For aides serving Level I clients, a quarterly on-site visit to the home of at least one client the aide is serving is made.
3) For aides serving Level II clients, a quarterly on-site visit to the home of at least one client the aide is serving is made.
4) For aides serving Level III - Personal Care clients, aide supervisory visits are in compliance with 10A NCAC 13J .1110 (Home Care Agency Licensure Rule which states that "the appropriate supervisor as specified in paragraph (a) or (b) in this Rule shall supervise an in-home aide or other allied health personnel by making a supervisory visit to each client's place of residence at least every three months, with or without the in-home aide's presence, and at least annually, while the in-home aide is providing care to each client to assess the care and services being provided").
5) For aides serving Level III and Level IV- Home Management clients an on-site visit at least every 60 days to the home of at least one client the aide is serving is made.
6) In each of the intervening months the supervisor has some type of contact with each of the aides and the client/designated person for aides providing Level II and Level III personal care.
7) For Level IV clients the social worker conducts weekly conferences with the aide.

5. Aide supervisory contact standards (continued)

Documentation for 5B 1-7:

Comments for 5B 1-7:

C. If services are offered on an "after hours" basis (e.g. evenings, overnight, on weekends), is supervision available to the aides during any time period they are assigned to work? (Home Care Licensure 10A NCAC 13J .1110).

Documentation:

Comments:

6. Agency Policy and Procedures for Training and Testing

A. The provider agency has assured that competency testing is appropriately administered. (For example: conditions for demonstrating tasks before the appropriate professional; competency testing which reflects tasks and knowledge required of the aide; a competency check-off list; etc.)

Documentation:

Comments:

6. Agency Policy and Procedures for Training and Testing (continued)
<p>B. The provider agency has assured that aides have sufficient training to pass a competency test for the level of service the aides will provide. (For example: the aide's personnel file contains competencies completed, agency records contain training offered with names and dates of those who attended, etc.)</p> <p>Documentation:</p> <p>Comments:</p>

7. Provider Agency's responsibilities when services are purchased.	Yes	No	Date	NA
<p>A. The provider agency has executed a contract with a service agency that provides In-Home Aide Services for the relevant time period.</p> <p>Documentation:</p> <p>Comments:</p>				
<p>B. The contractee is capable of providing the level(s) of In-Home Aide Services contracted for.</p> <p>Documentation:</p> <p>Comments:</p>				

7. Provider Agency's responsibilities when services are purchased (continued)	Yes	No	Date	NA
C. The contract addresses the following items:				
1) Assessment of the client.				
2) Selection of qualified aides.				
3) Assignment of aides to clients.				
4) Provision of supervision that meets the standard for level(s) provided.				
5) Assurance that aides meet the competency requirements for the level(s) of service provided.				
6) Fulfillment of employer financial obligations.				
7) Provision of backup service when usual aid is unavailable.				
8) Communication procedures between the client, the provider agency, and the community service agency.				
9) Negotiation and Communication of the In-Home Aide Services Plan.				
10) Assure that the county procurement process is being used and complies to all state, federal, and local requirements.				
Documentation for 7C 1-10:				
Comments for 7C 1-10:				

8. Organization of Record

Comments:

9. General Comments