173-3-06.4 Older Americans Act: homemaker service.

(A) Definitions for this rule:

- (1) "Homemaker service" (homemaker) means a <u>case-managed</u> service providing routine activities to help a consumer to achieve and maintain a clean, safe, and healthy living environment.
 - (a) "Homemaker service" includes the following activities:
 - (i) Routine meal-related activities: planning a meal, preparing a meal, and planning a grocery purchase.
 - (ii) Routine household activities: dusting furniture, sweeping, vacuuming, mopping floors, removing trash, and washing the inside of windows that are reachable from the floor, kitchen care (washing dishes, appliances, and counters), bedroom and bathroom care (changing bed linens and emptying and cleaning bedside commodes), and laundry care (washing, drying, folding, ironing, and putting the laundry away in the consumer's home and washing and drying at a laundromat if the consumer does not have a working washer and dryer).
 - (iii) Routine transportation activities: providing an errand outside of the presence of the consumer (e.g., picking up a prescription or groceries), or escort, but not transportation under rule 173-3-06.6 of the Administrative Code.
 - (iv) The activities described in paragraphs (A)(1)(a)(i) to (A)(1)(a)(iii) of this rule when they assist the consumer as respite to the consumer's caregiver or are essential to the health and safety of the consumer as respite to the consumer's caregiver.
 - (b) "Homemaker service" does not include the following activities:
 - (i) Activities provided outside of the home with the exception exceptions of the laundry activities in paragraph (A)(1)(a)(iii) of this rule and the routine transportation activities listed in paragraph (A)(1)(a)(iii) of this rule.
 - (ii) Activities within the scope of home maintenance and chores.
 - (iii) Activities available through third-party insurers, community supports, Ohio medicaid state plan, or a medicaid waiver program.

- (iv) Activities to administer or set-up medications.
- (2) "Aide" means the person who provides homemaker activities.
- (B) Requirements for every AAA-provider agreement with agency providers for homemaker activities paid, in whole or in part, with Older Americans Act funds:
 - (1) The AAA-provider agreement is subject to rule 173-3-06 of the Administrative Code.
 - (2) Licensure: The provider is subject to the requirement under Chapter 3740. of the Revised Code and Chapter 3701-60 of the Administrative Code for the provider to hold a current, valid license to provide skilled home health services or nonmedical home health services.
 - (3) Availability: The provider shall maintain the following:
 - (a) Adequate staffing levels to provide homemaker activities at least five days per week.
 - (b) A back-up plan for providing homemaker activities when the provider has no aide available.
 - (c) The availability of an aide supervisor during all hours when aides are scheduled to work.

(4) Aides:

- (a) Initial qualifications: The provider may allow a person to serve as an aide only if the person meets at least one of the following qualifications and the provider meets the verification requirements under paragraph (B)(4) (e) of this rule:
 - (i) The person meets at least one of the qualifications to be a PCA under paragraph (B)(4)(a) of rule 173-3-06.5 of the Administrative Code.
 - (ii) The person successfully completed a—training and competency evaluation—program with the following characteristics: on any activity listed under paragraph (A)(1)(a) of this rule that the person would provide as an aide. For example, a person who would provide only laundry activities as an aide would qualify to be an aide by successfully completing training and competency evaluation on laundry activities.

- (a) The training lasted at least twenty hours.
- (b) All the following subjects were included in the program's training and its competency evaluation:
 - (i) Communications skills, including the ability to read, write, and make brief and accurate reports (oral, written, or electronic).
 - (ii) Universal precautions for infection control, including hand washing and the disposal of bodily waste.
 - (iii) Homemaker activities.
 - (iv) Recognition of emergencies, knowledge of emergency procedures, and basic home safety.
 - (v) Record-keeping skills.
- (b) Orientation: Before allowing aides or other employees to have direct, faceto-face contact with consumers, the provider shall provide the aides or other employees with orientation that, at a minimum, addresses the following topics:
 - (i) The provider's expectations of employees.
 - (ii) Person-centered care.
 - (iii)(ii) The provider's ethical standards.
 - (iv)(iii) An overview of the provider's personnel policies.
 - (v)(iv) The organization and lines of communication of the provider's agency.
 - (v) Person-centered care.
 - (vi) Incident reporting.
 - (vii) Emergency procedures.
 - (viii) Standard precautions for infection control, including hand washing and the disposal of bodily waste.

(c) In-service training: The provider shall retain records to show that each aide successfully completes eight-six hours of ODA-acceptable in-service training every twelve months. Agency- and program-specific orientation do not count toward the eight-six hours. If the aide is also a PCA according to rule 173-3-06.5 of the Administrative Code, the provider may consider eight-six hours of successfully-completed ODA-acceptable in-service training as a PCA to count for the eight hours required as an aide by this paragraph.

(d) Training sources: Acceptable training, orientation, and competency evaluation:

- (i) An organization other than the provider may provide the orientation and training required in paragraphs (B)(4)(b) and (B)(4)(c) of this rule. Any training successfully completed through https://mylearning.dodd.ohio.gov/ or https://collinslearning.com/home-health-care/ is approved.
- (ii) The portion of training that is not competency evaluation may occur online.
- (iii) The portion of competency evaluation that involves return demonstration qualifies as competency evaluation under paragraph (B)(4)(a) of this rule only if it is conducted in person.
- (e) Verification of compliance with aide <u>qualifications and</u> requirements:
 - (i) If a person meets the initial qualifications to be an aide under paragraph (B)(4)(a) of this rule by meeting the qualifications to be a PCA under paragraph (B)(4)(a) of rule 173-3-06.5 of the Administrative Code, the provider shall comply with the verification requirements under paragraph (B)(4)(f) of rule 173-3-06.5 of the Administrative Code.
 - (ii) If a person meets the initial qualifications to be an aide under paragraph (B)(4)(a) of this rule by completing the training and competency evaluation program under paragraph (B)(4)(a)(ii) of this rule, the provider shall either retain copies of certificates of completion earned by each aide after the aide meets qualifications/ requirements under paragraph (B)(4) of this rule for successfully completing any training and competency evaluation program, orientation, and in-service training under paragraph (B)(4) of this rule or record the following information for each aide, and retain

it, if it does not appear on the aide's certificate of completion (or if the aide did not receive a certificate of completion): name of the school or training organization, name of the course, training dates, and training hours successfully completed.

- (5) Aide supervisors, aide trainers, and aide testers:
 - (a) Qualifications: The provider may allow a person to serve as an aide supervisor, an aide trainer, or an aide tester only if the person meets one or more of the following qualifications:
 - (i) The person is an RN.
 - (ii) The person is an LPN-who works under the supervision of an RN.
 - (iii) The person successfully completed a baccalaureate or associate degree in a health and human services field.
 - (iv) The person completed at least two years of work as an aide, as defined by this rule.
 - (b) Aide supervisor visits: The provider's aide supervisor shall do all of the following:
 - (i) Visit each consumer in person at the consumer's home to develop a written or electronic activity plan with the consumer either before allowing an aide to provide an episode of service to the consumer or during the aide's initial episode of service to the consumer. During a state of emergency declared by the governor or a federal public health emergency, the aide supervisor may conduct the visit by telephone, video conference, or in person at the consumer's home.
 - (ii) Visit each consumer in person at the consumer's home at least once every ninety-three days after the aide's initial episode of service with the consumer to evaluate compliance with the activity plan, the consumer's satisfaction, and the aide's performance. The aide supervisor may conduct each visit with or without the presence of the aide being evaluated. During a state of emergency declared by the governor or a federal public health emergency, the aide supervisor may conduct the visit by telephone, video conference, or in person at the consumer's home.
 - (iii) Retain a record of the initial visit and each subsequent visit that includes the date of the visit; whether the visit occurred by

telephone, video conference, or in person at the consumer's home; the aide supervisor's name and signature; the consumer's name; and a unique identifier of the consumer or the consumer's caregiver. During a state of emergency declared by the governor or a federal public health emergency, the provider may verify that the aide supervisor provided the initial visit or subsequent visits without collecting a unique identifier of the consumer or the consumer's earegiver, either of the following:

- (a) For an in-person visit, the date of the visit, an indication that the visit occurred in person at the consumer's home, the supervisor's name, the supervisor's unique identifier, the consumer's name, and a unique identifier of the consumer or the consumer's caregiver. During a state of emergency declared by the governor or a federal public health emergency, the provider may verify that the supervisor provided the initial or subsequent visit without collecting a unique identifier of the consumer or the consumer's caregiver.
- (b) For a visit by telephone or video conference, the date of the visit, an indication of whether that the visit was provided by telephone or video conference, the supervisor's name, the consumer's name, and evidence that a visit occurred by telephone or video conference (e.g., a record automatically generated by telehealth software, a record showing that the supervisor's phone called the consumer's phone, or clinical notes from the supervisor).

(6) Employee policies:

- (a) The provider shall develop, implement, comply with, and maintain written or electronic policies on all the following topics:
 - (i) Job descriptions.
 - (ii) Qualifications to provide homemaker activities.
 - (iii) Performance appraisals.
 - (iv)(iii) Incident reporting.
 - (v)(iv) Obtaining the consumer's written or electronic permission before releasing information concerning the consumer to anyone.

(vi)(v) The required content, handling, storage, and retention of consumer records.

(vii)(vi) The provider's ethical standards.

- (b) The provider shall make its policies available to all employees and to ODA or the AAA upon request.
- (7) Service verification: The following are the mandatory reporting items for each episode of service that a provider retains to comply with the requirements under paragraph (B)(9) of rule 173-3-06 of the Administrative Code:
 - (a) Consumer's name.
 - (b) Service date.
 - (c) Arrival time.
 - (d) Departure time.
 - (e) Service description.
 - (f) Service units.
 - (g) Name of each aide in contact with the consumer.
 - (h) The unique identifier of each aide in contact with the consumer to attest to providing the service.
 - (i) The unique identifier of the consumer or the consumer's caregiver to attest to receiving the service. During a state of emergency declared by the governor or a federal public health emergency, the provider may verify each episode of service provided without collecting the unique identifier of the consumer or the consumer's caregiver.
- (C) The requirements for every AAA-provider agreement for homemaker paid, in whole or in part, with Older Americans Act funds with participant-directed providers are the same as for agency providers, with the following differences:
 - (1) Availability: Paragraph (B)(3)(a) of this rule does not apply.
 - (2) Licensure: Paragraph (B)(2) of this rule applies only if the provider meets the definition of "nonagency provider" in rule 3701-60-01 of the Administrative Code.

(3) Initial qualifications, in-service training, and verification: Paragraphs (B)(4)(a), (B)(4)(c), and (B)(4)(e) of this rule apply as if "provider" is the AAA and "aide" is either the self-employed or participant-directed provider.

- (4) Orientation: Paragraph (B)(4)(b) of this rule does not apply.
- (5) Supervision: Paragraph (B)(5) of this rule does not apply.
- (6) Employee policies: Paragraphs (B)(6)(a)(iv) (B)(6)(a)(iii) to (B)(6)(a)(vii) (B)(6) (a)(vii) of this rule of this rule apply, but paragraphs (B)(6)(a)(i) to (B)(6)(a)(iii) (B)(6)(a)(iii) do not apply.
- (7) Service verification: Paragraph (B)(7) of this rule applies as if "aide" is either the self-employed or participant-directed provider.
- (D) Unit of service: A unit of homemaker is one hour of homemaker. Providers may report partial hours to two decimal places (e.g., "0.25 hours").

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Certification

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