

Home Health Policy and Procedure Checklist Chapter 246-335 WAC

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Date policies and procedures last reviewed:

WAC	Policy & Procedure	Agency Administrator Verification
246-335-515	Plan of Operation	
Z 0995	(1) A description of the organizational structure;	
Z 1000	(2) Personnel job descriptions according to WAC 246-335-525(2)	
Z 1005	(3) Responsibilities of contractors and volunteers;	
Z 1010	(4) Services to be provided;	
Z 1015	(5) The days and hours of agency operation;	
Z 1020	(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 246-335-540;	
Z 1025	(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 246-335-545;	
Z 1030	(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 246-335-525 (16) and (17); and	
Z 1035	(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 246-335-555 will be applied throughout all approved service areas.	
Z 1040	(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 1045	(8) A plan for preserving records, including the process to preserve or dispose of records prior to ceasing operation according to WAC 246-335-550 (7) and (8);	
Z 1050	(9) Time frames for filing documents in the patient records;	
Z 1055	(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 1060	(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 1065	(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 1070	(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 1075	(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 1080	(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 1085	(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 246-335-525(4);	
Z 1090	(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 1095	(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 246-335-525(5);	
Z 1100	(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 1105	(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-	
	335-555;	
Z 1115	(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 supplies and equipment necessary to patient care are available,	
	maintained, and in working order;	
Z 1120	(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:(m) Ensure the accuracy of public information materials; and	
Z 1125	(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: (n) Ensure current written policies and procedures are accessible to	
	personnel, contractors, and volunteers during hours of operation.	
Z 1130	(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.	
246-335-520	Delivery of Services	
Z 1135	(1) Admission, transfer, discharge, and referral processes: (a) In order to	
	minimize the possibility of patient abandonment, patients must be given at least a forty-eight hour written or verbal notice prior to discharge that will be	
	documented in the patient record;	
Z 1140	(1) Admission, transfer, discharge, and referral processes: (b) Forty-eight hour	
	notice is not required if home health agency worker safety, significant patient	
	noncompliance, or patient's failure to pay for services rendered are the reason(s) for the discharge;	
Z 1145	(1) Admission, transfer, discharge, and referral processes: (c) A home health	
	agency discharging a patient that is concerned about their ongoing care and	
	safety may submit a self-report to appropriate state agencies which identifies	
7 1150		
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Z 1155	(3) Home health services starting within seven calendar days of receiving and	
Z 1150 Z 1155	 safety may submit a self-report to appropriate state agencies which identifies the reasons for discharge and the steps taken to mitigate safety concerns; (2) Specific home health services, including any nonmedical services, available to meet patient or family needs as identified in plans of care; 	

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	accepting a physician or practitioner 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 physician or practitioner;	
Z 1160	(3) Home health services starting within seven calendar days of receiving and	
	accepting a physician or practitioner referral for services. Longer time frames	
	are permitted when one or more of the following is documented: (b) Longer	
	time frame for the start of services is requested by the patient, designated	
Z 1165	family member, legal representative, or referral source; or (3) Home health services starting within seven calendar days of receiving and	
21105	accepting a physician or practitioner referral for services. Longer time frames	
	are permitted when one or more of the following is documented: (c) Start of	
	services was delayed due to agency having challenges contacting patient,	
7 4 4 7 0	designated family member, or legal representative;	
Z 1170	(4) Agency personnel, contractor, and volunteer roles and responsibilities related to medication self-administration with assistance and medication	
	administration;	
Z 1175	(5) Coordination of care, including:	
	(a) Coordination among services being provided by a licensee having an	
	additional home care or hospice service category; and	
Z 1180	(5) Coordination of care, including:	
	(b) Coordination with other agencies when the care being provided impacts patient health.	
Z 1185	(6) Actions to address patient, or family communication needs;	
Z 1190	(7) Utilization of telehealth or telemedicine for patient consultation purposes or to acquire patient vitals and other health data in accordance with state and	
	federal laws:	
Z 1195	(8) Management of patient medications and treatments in accordance with	
	appropriate practice acts;	
Z 1200	(9) Emergency care of the patient;	
Z 1205	(10) Actions to be taken upon death of a patient;	
Z 1210	(11) Providing back-up care to the patient when services cannot be provided	
2 1210	as scheduled. Back-up care which requires assistance with patient ADLs or	
	patient health services must be provided by staff with minimum health care	
	credentialing. Non credentialed staff may provide back-up care only when	
	assisting a patient with IADLs or in emergency situations;	
Z 1215	(12) Actions to be taken when the patient has a signed advanced directive;	
Z 1220	(13) Actions to be taken if a patient has a signed POLST form. Any section of	
	the POLST form not completed implies full treatment for that section. Also	
	include: In the event of a patient medical emergency and agency staff are	
	present, provide emergency medical personnel with a patient's signed POLST form;	
Z 1225	(14) Nurse delegation according to the following:	
	(a) Delegation is only permitted for stable and predictable patients requiring	
	specific nursing tasks that do not require clinical judgment;	
Z 1230	(14) Nurse delegation according to the following:	
	(b) A licensee with an approved home health service category only may use their PN on staff for patient nurse delegation paeds:	
Z 1235	their RN on staff for patient nurse delegation needs; (14) Nurse delegation according to the following:	
2 1200	(c) A licensee with approved home health and home care service categories	
	may provide nurse delegation in the following ways:	
	(i) Use an RN from their home health side to contract with and delegate to	
7 4040	their home care side; or	
Z 1240	(14) Nurse delegation according to the following:(c) A licensee with approved home health and home care service categories	
	(c) A licensee with approved nome nealth and nome care service categories may provide nurse delegation in the following ways:	
	(ii) Transfer a home care client needing delegation to the agency's home	
	health side;	
Z 1245	(14) Nurse delegation according to the following: (d) Home health aides must	
	complete the DSHS nurse delegation class prior to participating in the	
	delegation process. If the tasks are ones considered by the nursing quality	
	assurance commission to be simple care tasks, such as blood pressure monitoring, personal care services, diabetic insulin device set up, and verbal	
	verification of insulin dosage for sight-impaired individuals, the DSHS training	
	is not required.	

246-335-525	Personnel	
Z 1250	(1) Employment criteria regarding discrimination consistent with chapter 49.60 RCW;	
Z 1255	(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 1260	(3) References for personnel, contractors and volunteers;	
Z 1265	(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 1270	(5) Credentials of health care professionals that are current and in good standing;	
Z 1275	 (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: (a) Criminal history background checks must be processed through the Washington state patrol; 	
Z 1280	 (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: (b) Disclosure statements must be approved by the department; and 	
Z 1285	 (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: (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; 	
Z 1290	 (7) Character, competence, and suitability determination conducted for personnel, contractors, volunteers, and students whose back-ground 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 patient; 	
Z 1295	(7) Character, competence, and suitability determination conducted for personnel, contractors, volunteers, and students whose back-ground check results reveal non disqualifying convictions, pending charges, or negative actions. Factors to consider when making a determination include, but are not	
Z 1300	 limited to:(b) Level of vulnerability of the patient under their care; (7) Character, competence, and suitability determination conducted for personnel, contractors, volunteers, and students whose back-ground check results reveal non disqualifying convictions, pending charges, or negative actions. Factors to consider when making a determination include, but are not limited to:(c) Behaviors since the convictions, charges, negative actions or other adverse behaviors; 	
Z 1305	 (7) Character, competence, and suitability determination conducted for personnel, contractors, volunteers, and students whose back-ground check results reveal non disqualifying convictions, pending charges, or negative actions. Factors to consider when making a determination include, but are not limited to:(d) Pattern of offenses or other behaviors that may put the patient at risk; 	
Z 1310	 (7) Character, competence, and suitability determination conducted for personnel, contractors, volunteers, and students whose back-ground check results reveal non disqualifying convictions, pending charges, or negative actions. Factors to consider when making a determination include, but are not limited to:(e) Number of years since the conviction, negative action, or other issue; 	
Z 1315	(7) Character, competence, and suitability determination conducted for personnel, contractors, volunteers, and students whose back-ground check	

	results reveal non disqualifying convictions, pending charges, or negative actions. Factors to consider when making a determination include, but are not limited to:(f) Whether they self-disclosed the conviction(s), pending charge(s)	
	and/or negative action(s);	
Z 1320	(7) Character, competence, and suitability determination conducted for personnel, contractors, volunteers, and students whose back-ground check results reveal non disqualifying convictions, pending charges, or negative actions. Factors to consider when making a determination include, but are not limited to:(g) Other health and safety concerns; and	
Z 1325	(7) Character, competence, and suitability determination conducted for personnel, contractors, volunteers, and students whose back-ground check results reveal non disqualifying convictions, pending charges, or negative actions. Factors to consider when making a determination include, but are not limited to:(h) Although a licensee may determine, based on their assessment process, that an employee is suitable to work with vulnerable patients, 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.	
Z 1330	(8) Mandatory reporting: (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;	
Z 1335	(8) Mandatory reporting: (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.	
Z 1340	(9) In-person orientation to current agency policies and procedures and verification of skills or training prior to independently providing patient care. Examples of skills verification include written testing, skills observation, and evidence of previous training and experience such as a certified nursing assistant training as detailed in WAC 246-841-400;	
Z 1345	 (10) The process for personnel and contractors holding a nursing assistant registration to become credentialed as a nursing assistant certified. The policies and procedures must include, at minimum: (a) Personnel and contractors holding a nursing assistant registration must become credentialed as a nursing assistant certified within twelve months of the date of hire. The date of hire is specific to each registered nursing assistant, not to the employer, and does not change if the registered nursing assistant changes employers; 	
Z 1350	(10) The process for personnel and contractors holding a nursing assistant registration to become credentialed as a nursing assistant certified. The policies and procedures must include, at minimum:(b) Personnel and contractors who hold a nursing assistant registration and do not become credentialed as a nursing assistant certified within twelve months of the date of hire cannot continue to provide patient care; and	
Z 1355	(10) The process for personnel and contractors holding a nursing assistant registration to become credentialed as a nursing assistant certified. The policies and procedures must include, at minimum: (c) Personnel and contractors hired by an in-home services licensee prior to March 1, 2018, who held a nursing assistant registration and have maintained their registration and employment with the licensee are not required to become credentialed as a nursing assistant certified.	
Z 1360	 (11) Training on the use of telehealth or telemedicine for patient consultation and the transmission of health data; 	
Z 1365	(12) Ongoing training pertinent to patient care needs;	
Z 1370	(13) 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 patients. Personnel, contractors, and volunteers may not provide patients with homemade food items or baked goods that they themselves prepared;	
Z 1375	 (14) Current cardiopulmonary resuscitation (CPR) training consistent with agency policies and procedures for direct care personnel and contractors. Internet-based classroom training is permissible but demonstration of skills must be hands on and observed by a certified trainer; 	

21380 (15) 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 edjuette, and personal protective equipment. 21385 (16) Infection control practices, communicable disease testing, and vaccinations. Policies and procedures must include, at minimum: (b) major and testing and testis and personal testis and personal testing and	7 4000	(AP) is faction control and the control of the state of t	
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	Home Health and Hospice only if Home Medical	
	Supplies and Equipment Furnished Patients	
246-335-560	Home Medical Supplies and Equipment	
Z 2045	(1) The applicant or licensee must develop and implement policies and procedures to: (a) Maintain medical supplies and equipment;	
Z 2050	(1) The applicant or licensee must develop and implement policies and procedures to:(b) Clean, inspect, repair and calibrate equipment per the manufacturers' recommendations, and document the date and name of individual conducting the activity;	
Z 2055	(1) The applicant or licensee must develop and implement policies and procedures to:(c) Ensure safe handling and storage of medical supplies and equipment;	
Z 2060	(1) The applicant or licensee must develop and implement policies and procedures to:(d) Inform the patient, designated family member, or legal representative of the cost and method of payment for equipment, equipment repairs and equipment replacement;	
Z 2065	(1) The applicant or licensee must develop and implement policies and procedures to:(e) Document the patient, designated family member, or legal representative's approval;	
Z 2070	(1) The applicant or licensee must develop and implement policies and procedures to:(f) Instruct each patient, designated family member, or legal representative to use and maintain supplies and equipment in a language or format the patient or family understands, using one or more of the following: (i) Written instruction;	
Z 2075	(1) The applicant or licensee must develop and implement policies and procedures to:(f) Instruct each patient, designated family member, or legal representative to use and maintain supplies and equipment in a language or format the patient or family understands, using one or more of the following:(ii) Verbal instruction; or	
Z 2080	(1) The applicant or licensee must develop and implement policies and procedures to:(f) Instruct each patient, designated family member, or legal representative to use and maintain supplies and equipment in a language or format the patient or family understands, using one or more of the following:(iii) Demonstration.	
Z 2085	(1) The applicant or licensee must develop and implement policies and procedures to:(g) Document the patient, designated family member, or legal representative understanding of the instructions provided;	
Z 2090	(1) The applicant or licensee must develop and implement policies and procedures to:(h) Replace supplies and equipment essential for the health or safety of the patient; and	
Z 2095	(1) The applicant or licensee must develop and implement policies and procedures to: (h) Replace supplies and equipment essential for the health or safety of the patient; and (i) Identify and replace equipment recalled by the manufacturer.	
Z 2100	(2) If the applicant or licensee contracts for medical supplies or equipment services, develop and implement policies and procedures to ensure that contractors have policies and procedures consistent with subsection (1) of this section.	

Agency Administrator Signature _____ Date_____