

HOME CARE ASSOCIATION OF AMERICA

GUIDELINES FOR HIRING, TRAINING, AND SUPERVISING OF CAREGIVERS

The HCAOA Standards and Ethics Committee have developed guidelines for the hiring, training, and supervising of paraprofessional caregivers for all caregiver levels. Home Care Association of America member agencies should follow these established guidelines unless the agency's state regulations for hiring, training and supervising of caregivers are more stringent.

The HCAOA Standards and Ethics Committee have also developed guidelines for designated levels of care along with specific training and supervising criteria for each caregiver level. Agencies should follow these guidelines unless; the agency's state has regulations for care that are more stringent; agency is limited by the agency's insurance coverage; or agency's general business practices prohibit the activity. All services must be provided according to the Practice Act of the State and/or standards of care set by the agency's state.

I. Hiring Process for All Caregiver Levels

The hiring process should include the following for all caregiver levels and the supporting documentation should be filed in the employee's personnel file or a separate file depending on the level of confidentiality required of the subject matter.

- A. Application Process—A formal written application process must occur for each applicant.
- B. Interview—A minimum of one interview in person is required for each applicant.
- C. Criminal Background Screening—A criminal history background is completed on hire and updated periodically.
- D. Elder Abuse and Sex Offenders Screening—The State's Elder Abuse and Sex Offender Registry is checked, if available in your state.
- E. Caregiver Registry—The Caregiver Registry is checked, if available in your state.
- F. Credential Verification—All current certifications, registrations or licenses, as applicable, are verified and copies of certificates obtained, if issued.
- G. Reference Check—A minimum of two satisfactory work references, written and/or verbal should be obtained. If after a good faith effort, two work references were not available, an employment verification, education reference or personal reference may be used in place of a work reference.
- H. Motor Vehicle Record Check—If the caregiver will be driving as part of their assigned duties, a copy of their current driver's license and proof of car insurance is obtained. In addition, their driving record should be checked at the Bureau/Department of Motor Vehicles on hire and periodically thereafter.
- I. Communicable Disease Screening—Employees are screened for communicable disease according to state requirements. In the absence of state requirements, a physician's statement stating that the employee is free from signs and symptoms of communicable disease is obtained.
- J. Hepatitis B Vaccine—It is recommended to offer the Hepatitis B Vaccine to all caregivers who provide hands on care according to the CDC/OSHA federal guidelines or any state guidelines in effect. Documentation of acceptance or refusal should be placed in the caregiver's medical file.

- K. Job Descriptions—A comprehensive job description for each level of care for each position is provided to the employee. The job description should outline:
- a. Job title
 - b. Qualifications of caregivers
 - c. Purpose or Overview
 - d. Essential Job Duties and Caregiver Responsibilities
 - e. Job Specifications that are consistent with the Americans with Disability Act
 - f. Designate supervision of employee

II. Training/Orientation Requirements for All Caregiver Levels

Initial care giving training should include the following topics and must be completed prior to the caregiver being placed with a client. Documentation of the completed training/orientation should be placed in the employee's personnel file. The required training/orientation topics are:

- A. Organization's Operational Policies and Procedures—Employee should sign a form confirming they have been oriented to the organization's policies and procedures.
- B. Organization's Personnel (human resources) Policies and Procedures
- C. Standard Precautions/Infection Control—Including OSHA regulations with a focus on handwashing and personal hygiene. The necessary personal protective equipment (PPE) should be provided in order to comply with the regulations.
- D. Confidentiality—Security of clients' personal, financial, and health information along with applicable HIPAA regulations. Recommendation is to have a signed confidentiality agreement maintained in employee's personnel file.
- E. Abuse—Information on prevention, the signs and symptoms and reporting of abuse including state requirements.
- F. Service Plan for Clients—Including goals and the employee's responsibilities associated with carrying out the tasks.
- G. Documentation—Including how to appropriately document observation, reporting and service provision with an emphasis placed on objective vs. subjective reporting.
- H. Required In-services or Continuing Education—Including all on going training to be in compliance with state guidelines. Documentation of in-services and continuing education should be maintained in employee's personnel file.
- I. Basic Body Mechanics for Employee Safety—Caregiver should demonstrate skills.
- J. Safety Procedures and Emergency Plan—Including disaster preparedness and the organization's procedure for emergency situations. Fire safety, home security, personal safety, weather related disaster planning and all known or potential hazards should be covered.
- K. Client Emergencies—How to handle client emergencies specific to the employee level of care.

- L. Communication Skills for Difficult Clients—Including how to communicate with individuals who have dementia or hearing loss.
- M. Caregiver Stress—How to handle caregiver stress.

III. Levels of Care

Additional training/orientation activities that are required depending on the level of care the caregiver is assigned to. A description of each level of care follows with the recommended duties, training/orientation topics and supervision.

Level 1 Care Activities

This level of care provides support services that strive to maintain and support clients in their place of residence. This level does not require “hands on” services and is typically provided by a Companion/Sitter or a Homemaker.

Duties/Tasks:

(All duties will be in accordance with the agency’s state guidelines, if applicable.)

- Provide socialization, conversation and emotional reassurance to the client.
- Encourage and participate in reading, appropriate games, and other activities to promote well-being and stimulate the mind and the spirit.
- Provide for safety by using the principles of health and safety in relation to self and client as follows:
 1. Identifies and reports safety hazards.
 2. Follows assigned safety precautions.
 3. Practices health protection and cleanliness by appropriate techniques of hand-washing, waste disposal and household tasks.
- Assist with home management as authorized by the client, client’s family, client’s legal representative, or licensed professional; i.e., assist client in paying bills, monitoring food expirations, ordering/shopping for groceries/home supplies, and monitor home repair as needed.
- Assist with mail and supervise deliveries to the client.
- Provides incidental transportation and/or escorts client to scheduled appointments, shopping and errands.
- Perform light housekeeping duties.
- Take care of pets and water the plants.
- Supervise the safety of client while he/she is toileting, bathing and dressing.
- Encourage mild exercise program.
- Encourage, monitor and assist with simple meal preparation and fluids.
- Provide medication reminders. Medications must be pre-dosed by the client, client’s family, client’s legal representative or licensed professional. (Any medication non-compliance should be reported to Agency supervisor.)
- Report any concerns to Agency supervisor.

Training Guidelines for Level 1:

(Recommendations for Training Based on Assigned Duties)

- Communication skills with clients/families in all areas but especially with persons, who are hard of hearing, have dementia, or other special needs.
- Housekeeping—Scope and limitations of assigned chores and information on use and storage of cleaning equipment, materials, and supplies. Caregiver should complete a checklist of knowledge and skills in this area.
- Maintaining a clean, healthy, and safe environment.
- Food Safety/Handling—Techniques for the safe storage, handling and preparation of food.
- Overview of Basic Human Needs—Specific to aging and disease processes.
- Basics of Hydration for client and signs and symptoms of dehydration.
- Basics of Nutrition—Guidelines for meal preparation.

Supervision of Level 1:

Level 1 Supervision can be performed by a supervisor with experience or training in the senior or disabled care industry. This level of supervision does not require a nursing background.

- Initial and periodic assessment of Level 1 caregiver's competency. Competency can be demonstrated through written or observed evaluation.
- Initial completion, review, and on-going revision (as needed) of a client specific service plan.
- Supervisory phone call or on-site visit at least once every 90 days to reassess the client's service plan and the client's satisfaction with the service provided.
- Completion of documentation of supervisory visit/phone call for file.
- Review of documentation of tasks performed by caregiver.

Level 2 Care Activities

This level of care supports and maintains individuals in their place of residence by providing Level 1 support services and assistance with personal "hands on" care. Clients who require Level 2 caregivers are able to participate in their personal care activities, however due to the aging process or disability they require assistance. Level 2 care is provided by a Personal Care Assistant/Attendant Caregiver/Home Care Aide with demonstrated competencies in all personal care duties of a Certified Nurse Aide, Home Health Aide or the state level equivalent who has completed formalized training.

Duties/Tasks:

(All duties will be in accordance with the agency's state guidelines, if applicable.)

- All Level 1 tasks can also be performed in Level 2.
- Assists with personal hygiene:
 1. Assist with activities of daily living—grooming, bathing, dressing, and toileting.
 2. Assist with shaving using an electric or safety razor only.

3. Assist with nail care. Assistance may include soaking of nails, pushing back of cuticles without utensils and filing of nails. Caregivers may not trim or clip nails. Nail care should not be provided to clients with a medical condition that might involve peripheral circulatory problems or loss of sensation.
 4. Assists with application of support stockings that can be purchased without a physician's prescription. At this level, caregivers may not assist with an application of an Ace bandage, anti-embolic or other pressure stockings that must be purchased with a physician prescription.
- Assist with feeding client providing the client can still independently swallow and be positioned upright.
 - Assist with general skin care when skin is unbroken and when any chronic skin problems are not active. Skin care should be preventive rather than therapeutic in nature. Caregivers may apply non-medicated lotions and solutions that do not require a physician's prescription.
 - Assists with mobility:
 1. Assist with turning and positioning client when the client is able to identify verbally, non-verbally or through another means, when the position needs to be changed.
 2. Assist with pivot transfers that do not require adaptive equipment.
 3. Assist with ambulation (i.e. stand by assistance, adaptive equipment set-up).
 4. Reminds and encourages physical therapy, daily exercise or active range of motion.
 - Assists with elimination with client direction:
 1. Assist with emptying or changing external urinary bags.
 2. Assist with emptying ostomy bags.
 - Assists with medications—Assist with medication compliance by providing timely medication reminders and observing the client taking medications. Medication must be pre-dosed by the client, client's family, client's legal representative or licensed professional.
 - Any medication non-compliance should be reported to Agency supervisor.
 - Assists client with blood sugar checks such as, opening containers, handing client supplies. Caregiver cannot perform the procedure.

Training Guidelines for Level 2:

(Recommendations for Training Based on Assigned Duties)

- All training listed in Level 1.
- Training in proper nutrition and assistance with feeding.
- Basic hygiene practices and infection control procedures using Standard Precautions.
- How to assist with personal care including bathing, pericare, basic continence care, hair care, oral care, shaving, and dressing.
- Nail and foot care—no trimming or clipping of nails.
- Basic skin care in the absence of chronic problems and when skin is intact.
- Procedure for application of support stockings.

- Body mechanics for employee safety to include techniques when assisting with transferring and positioning.
- Use of durable medical equipment (wheelchairs, walkers, canes, beds).
- Oxygen Safety
- End-of-Life Support.
- Specialized dementia training.
- How to assist with emptying catheter and ostomy bag including cleansing around intact suprapubic tube site.

Supervision of Level 2:

Level 2 Supervision can be performed by a supervisor with experience or training in the senior or disabled care industry. This level of supervision does not require a nursing background.

- Initial and periodic assessment of Level 2 caregiver's competency. Competency can be demonstrated through written or observed evaluation.
- Initial completion, review, and on-going revision (if needed) of client specific service plan.
- Supervisory on-site visit at least once every 60 to 90 days to reassess the client's service plan and the client's satisfaction with the service provided.
- Completion of documentation of supervisory visit/phone call for file.
- Review of documentation of tasks performed by caregiver.

Note: An on-site supervisory visit can be performed more frequently should there be a need for closer monitoring of the client situation. An on-site supervisory visit may need to be performed every 45-60 days for clients that have been diagnosed with dementia, cognitive impairment or any diagnosis of clients at the end of life when there is no family support system to monitor the care.

Level 3 Care Activities

This level of care supports and maintains individuals in their place of residence by providing Level 1 support services and personal "hands on" care. Clients who require Level 3 caregivers may not be able to participate in all of their personal "hands on" care activities. Level 3 care is provided by a Certified Nurse Aide, Home Health Aide or the state level equivalent who has completed formalized training.

Duties/Tasks:

(All duties will be in accordance with the agency's state guidelines, if applicable.) All duties will need to be supervised and aide will need to be competency evaluated on each task.

- All Level 1 and 2 activities can be performed in Level 3.
- Apply the principles of good nutrition to meal planning and preparation paying particular attention to the requirements of special diets. Can prepare a specialized diet for the client.
- Perform daily living activities—grooming, bathing, dressing, and toileting.
 1. Performs occupied bed changes
 2. Performs bed bath
- Provide nail care to clients that are not diabetic or on anti-coagulant prescriptions.
- Maintain intake and output records.
- Assist with client-directed, non-invasive ostomy care only when there is no need for skilled skin care or for observation or reporting to a nurse within state guidelines. The aide will not be responsible for skin breakdown and observation of skin.
- Provide skin care to clients with chronic problems under the direction of a licensed nurse. Caregivers cannot provide wound care or apply prescription medications.
- Provide medication assistance under the direction of a licensed registered nurse within state guidelines.
- Provide transfers with the use of gait belts, total lift and transfer devices with the proper training and demonstrated competency.
- Assists with respiratory status:
 1. Assists clients with nebulizer treatments by providing reminders and preparing and cleaning supplies.
 2. Applies oxygen and maintains oxygen equipment.
 3. Maintains intactness of ventilator during position changes
- Reinforce range of motion, physical and occupational therapy exercises under the direction of a licensed therapist or nurse.
- Obtain and record vital signs; i.e., blood pressure, pulse, respirations, and daily weights when indicated. Caregiver should report significant changes to the supervising nurse.

Training Guidelines for Level 3:

(Recommendations for Training Based on Assigned Duties)

- All training will include the Level 1 and 2 training.
- Infection Control practices and standard precautions specific to Level 3 tasks.
- How to feed a client if client is unable to feed him/herself.
- Range of motion exercises.
- Proper techniques of taking all vital signs.

- Demonstrated competency on use of lift chairs and other assistive transfer devices.
- Non-invasive Foley catheter care.
- Non-invasive ostomy bag care.
- Nutrition and specialized diets.
- How to prepare specialized diets for client.
- Oxygen use and care of equipment, including safety factors. Training will include what is acceptable by the state.
- How to take, monitor and record vital signs.
- How to measure and record intake and output.
- Provide routine inservices to instruct caregivers on the higher level requirements of care.

Supervision of Level 3:

Level 3 Supervision should be performed by a licensed nurse. The registered nurse role is limited to oversight of the service plan and caregiver competency, and not intended to provide skilled nursing intervention to the client.

- Initial and periodic assessment of Level 3 caregiver's competency. Competency can be demonstrated through written or observed evaluation.
- Complete nursing assessment and completion of a care plan by a licensed nurse or physical therapist.
- Supervisory visit to assess the care plan and the client's satisfaction with the service provided every 60 days depending on stability of client, required tasks, medication assistance, and state requirements.
- Completion of documentation of supervisory visit for chart.
- Observation of caregivers and additional training as necessary.

Note: An on-site supervisory visit may need to be performed more frequently based on the needs of the client.

IV. Ongoing Safety Training

An agency should have an ongoing program to educate staff and clients in safety measures appropriate to the current care environment to minimize physical hazards related to the care provided.

The agency will provide the initial and appropriate ongoing written or oral instruction in safety related to the care/service provided. The instruction of all appropriate staff includes:

- Basic environmental safety.
- Safe and appropriate use of medical equipment or devices (if applicable).
- The identification, storage, handling, and disposal of hazardous materials and wastes in a safe and sanitary manner and in accordance with applicable laws and regulations (if applicable).

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