

ADVANCED HOME HEALTH AIDES ADVISORY WORKGROUP

Convened by the New York State Department of Health

GUIDANCE March 2015

I. INTRODUCTION

Governor Cuomo's 2015-16 Executive Budget includes a proposal to amend Article 139 of the Education Law, known as the Nurse Practice Act, to permit Advanced Home Health Aides to perform advanced tasks in home care and hospice settings, with appropriate training and upon assignment by registered nurses and under supervision by such nurses. This proposal will enable many more people with disabilities who are currently in institutional settings to live in home and community based settings or remain in home and community based settings and will help provide support to family caregivers and their loved ones.

A. BACKGROUND

In 2011, a workgroup convened by the Medicaid Redesign Team – the Workforce Flexibility and Change of Scope of Practice Work Group – recommended that home health aides be authorized to assist with the administration of routine medications and that they be certified to carry out an expanded range of tasks, upon assignment by a registered professional nurse. The specific list of tasks was to be identified through a stakeholder process. Authorizing the assignment of additional tasks by home health aides by registered professional nurses requires an amendment to the Nurse Practice Act.

The Nurse Practice Act, set forth in Education Law Article 139, generally limits the provision of nursing care to licensed nurses, with certain exemptions identified in Education Law § 6908. For example, one exemption, found at Education Law § 6908(1)(a), permits individuals who are not licensed as nurses to provide care to friends and family members with disabilities or illness, or to pay another individual to provide such services.

In furtherance of the MRT Workgroup's recommendations, Governor Cuomo included proposals to make the necessary amendments to the Education Law in both his 2013-14 and 2014-15 Executive Budgets. In 2014, the Governor also released Program Bill No. 37, which combined the two concepts put forward by the MRT Workgroup to create a single category of Advanced Home Health Aides. Subsequently, the Governor included the proposal in his 2015-16 Executive Budget (Health and Mental Hygiene Article VII legislation, Part J). See Appendix A (Executive Budget Proposal).

This proposal is important because by allowing people to receive additional supports and services at home, it will support the State's efforts to ensure that individuals with disabilities receive the services and supports they need in the most integrated settings, consistent with the 1999 United States Supreme Court decision in *Olmstead v. L.C.* and Executive Order No. 84.

Further, the initiative is important to help the State advance its efforts under the State Plan Amendment (SPA) filed by the Department of Health under the Community First Choice Option (CFCO). In 2010, the CFCO was enacted as an incentive to overcome the institutional bias towards providing services and supports in institutions rather than in home and community based settings. CFCO is an optional program that states may implement under § 2401 of the Affordable Care Act, 42 U.S.C. § 1396n(k), and its implementing regulations, 42 C.F.R. Part 441, Subpart K, to expand the availability and access of Medicaid-funded home and community-based personal attendant programs.

CFCO pre-invests the savings of transitioning from institutional to community based services by providing additional funding to the states that select it, in order to ensure that individuals who are eligible for institutional placement can receive services and supports in home and community based settings. States that select CFCO are eligible to receive an increased federal match of six percent. The Department filed the SPA with the federal Centers for Medicare and Medicaid Services (CMS) in December 2013, indicating that certain CFCO services would be available to eligible Medicaid enrollees, but has not yet received CMS approval.

The legislative proposal also will provide crucial support to family caregivers by allowing paid aides to provide services for which they are currently responsible. It also will offer additional opportunities for career advancement for home health aides and provide flexibility to health care providers that serve individuals in the community, potentially increasing the availability of the home and community based services workforce. In addition, the proposal will promote safety by providing that such tasks are carried out by individuals with training and under supervision.

B. SUMMARY OF EXECUTIVE BUDGET PROPOSAL

Under the 2015-16 Executive Budget language, the Commissioner of Education would be required to issue regulations to specify the types of advanced tasks that registered nurses could assign to Advanced Home Health Aides, identify certain parameters for qualifications, training and competency of such aides, and provide that Advanced Home Health Aides could act only under the direct supervision of a licensed registered professional nurse employed by a home care services agency or a hospice program. See Appendix A (Executive Budget proposal). These tasks will expand the scope of people able to live in home and community based settings to include people who require assistance with health-related

tasks, consistent with Federal law and with New York State policy for people with disabilities.

Specifically, § 1 of the Executive Budget language would add new Education Law § 6908(1)(a)(v) to exempt from the Nurse Practice Act tasks provided by an Advanced Home Health Aide in accordance with regulations developed by the Commissioner of Education in consultation with the Commissioner of Health. At a minimum, such regulations would:

1. specify the types of tasks that may be performed by Advanced Home Health Aides (“advanced tasks”), which would include the administration of medications which are routine and prefilled or otherwise packaged in a manner that promotes relative ease of administration;
2. provide that advanced tasks performed by Advanced Home Health Aides may be performed only under the direct supervision of a registered professional nurse licensed in New York State and employed by a home care services agency licensed or certified pursuant to Public Health Law (PHL) Article 36 or a hospice program certified pursuant to PHL Article 40, where such nursing supervision would:
 - a. include training and periodic assessment of the performance of advanced tasks,
 - b. be determined by the registered professional nurse responsible for supervising such advanced tasks based upon the complexity of such advanced tasks, the skill and experience of the Advanced Home Health Aide, and the health status of the individual for whom such advanced tasks are being performed, and
 - c. include a comprehensive assessment of the individual’s needs;
3. provide that advanced tasks may be performed only in accordance with and pursuant to an authorized practitioner’s ordered care;
4. provide that only a home health aide who has at least one year of experience as a certified home health aide, has completed the requisite training and demonstrated competencies of an Advanced Home Health Aide, has successfully completed competency examinations satisfactory to the Commissioner, and meets other appropriate qualifications may perform advanced tasks as an Advanced Home Health Aide;
5. provide that only an individual who is listed in the Home Care Services Registry maintained by the Department of Health pursuant to PHL § 3613(9) as having satisfied all applicable training requirements and having passed the applicable competency examinations and who meets other requirements as

set forth in regulations issued by the Commissioner of Health pursuant to PHL § 3602(17) may perform advanced tasks and hold himself or herself out as an Advanced Home Health Aide;

6. establish minimum standards of training for the performance of advanced tasks by Advanced Home Health Aides, including
 - a. didactic training;
 - b. clinical training; and
 - c. a supervised clinical practicum with standards set forth by the Commissioner of Education;
7. provide that Advanced Home Health Aides shall receive case-specific training on the advanced tasks to be assigned by the supervising nurse, provided that additional training shall take place whenever additional advanced tasks are assigned;
8. prohibit an Advanced Home Health Aide from holding himself or herself out, or accepting employment as, a person licensed to practice nursing under the provisions of this article;
9. provide that an Advanced Home Health Aide is not required nor permitted to assess the medication needs of an individual;
10. provide that an Advanced Home Health Aide shall not be authorized to perform any tasks or activities that are outside the scope of practice of a licensed practical nurse;
11. provide that an Advanced Home Health Aide shall document medication administration to each individual through the use of a medication administration record; and
12. provide that the supervising registered professional nurse shall retain the discretion to decide whether to assign advanced tasks to Advanced Home Health Aides and shall not be subject to coercion or the threat of retaliation.

In developing such regulations, the Commissioner of Education would be required to take into account the recommendations of the workgroup of stakeholders convened by the Commissioner of Health for the purpose of providing guidance on these requirements.

Section 2 of the legislation would add new PHL § 3602(17) to define Advanced Home Health Aides as home health aides who are authorized to provide advanced tasks as set forth in Education Law § 6908(1)(a)(v). The Commissioner

of Health would be required to issue regulations regarding such aides, which would include a process for the limitation or revocation of the aide's authorization to perform advanced tasks in appropriate cases.

Section 3 of the bill would add new PHL § 3613(9) to require the Department of Health to indicate within the Home Care Services Worker Registry when a home health aide has satisfied all applicable training and recertification requirements and has passed the applicable competency examinations necessary to perform advanced tasks as set forth in Education Law § 6908(1)(a)(v) and the associated regulations. Any limitation or revocation of the Advanced Home Health Aide's authorization also would be indicated on the registry.

Section 4 of the bill provides that in developing regulations under Education Law § 6908(1)(a)(v), the Commissioner of Education would be required to consider the recommendations of the workgroup of stakeholders convened by the Commissioner of Health to provide guidance on the tasks which may be performed by Advanced Home Health Aides pursuant to such section.

Under the proposal, the workgroup's guidance would include recommendations on:

1. the tasks that appropriately could be performed by Advanced Home Health Aides with appropriate training and supervision (advanced tasks);
2. the types of medications that Advanced Home Health Aides should be authorized to administer, including whether subcutaneous injectables and controlled substances should be authorized;
3. qualifications that must be satisfied by Advanced Home Health Aides to perform advanced tasks, including those related to experience, training, moral character, and examination requirements;
4. minimum training and education standards; and
5. adequate levels of supervision to be provided by nurses, including adherence to existing requirements for comprehensive assessment and any additional assessment that should be required, including when the individual receiving advanced tasks performed by an Advanced Home Health Aide experiences a significant change in condition.

These provisions would take effect October 1, 2015, with the regulations to be in place by that date.

C. ACTIVITIES OF THE WORKGROUP

As noted, the Executive Budget language provides that the regulations to be developed by the State Education Department would take into account a workgroup convened by the Department of Health for purposes of providing guidance. Governor's Program Bill No. 37 would have required the establishment of a workgroup of academic experts and stakeholder representatives to provide such guidance.

Although that legislation was not enacted, the Department convened the Advanced Home Health Aides Advisory Workgroup (Workgroup) in August 2014, comprised of members as described in the Program Bill: individuals from academic institutions with relevant expertise, representatives of home care, hospice providers, nurses, nurse educators, home health aides and pharmacists, representatives of individuals who may be eligible for advanced tasks performed by Advanced Home Health Aides pursuant to statute, and other relevant consumers and others. See Appendix B (List of Workgroup Members).

The Workgroup met nine times between August 2014 and March 2015 to consider the issues and provide guidance to the Department of Health on advanced tasks that could safely be performed by home health aides in home care and hospice settings with appropriate training and supervision. This document sets forth the Workgroup's guidance.

Specifically, the Workgroup was charged with providing guidance on identifying:

- Tasks that could be performed safely by Advanced Home Health Aides, including administration of medication;
- The qualifications required for Advanced Home Health Aides, including minimum training and education standards; and
- The level of supervision to be provided by registered nurses to Advanced Home Health Aides.

The Workgroup was asked to work within the parameters of the proposed legislation, and generally did so. In a few instances, however, the Workgroup as a whole or individual members thereof suggested revisions to the legislation where necessary to effectuate specific Workgroup recommendations.

The guidance contained herein generally represents the consensus of the Workgroup on two of those areas. The guidance also reflects the positions of the members on the third topic, where a consensus was reached on some but not all matters. It must also be noted that several Workgroup members indicated that where they were able to participate in the consensus in certain areas, they did so

with the recommendation of further discussion or contingent upon resolution of other issues. Additionally, the State Education Department has been present for Workgroup discussions, but has not taken a position on the work of that body to date or on the Executive Budget proposal.

II. GUIDING PRINCIPLES

The Workgroup initially identified several overarching principles that would guide its work.

- The needs of the individual receiving services are specific to that individual.
- Advanced Tasks must be specifically described so that competency can be assessed and performance can be measured.
- A minimum level of standardized training and testing must be required so that it is clear what an Advanced Home Health Aide has been taught to do.
- Advanced Home Health Aides would receive training on these advanced tasks but would not necessarily perform them for each individual – they would do so only when assigned by a registered professional nurse based on his or her assessment of the aide's competency.
- Advanced Home Health Aides should be trained in communication and reporting.
- These broad principles guided the Workgroup's recommendations regarding which tasks safely can be assigned to Advanced Home Health Aides:
 - Advanced Home Health Aides should not be authorized to perform any task that requires nursing judgment and/or assessment, including assessing an individual's need for medication.
 - Advanced Home Health Aides should not be authorized to perform any task that requires sterile techniques.
 - Advanced Home Health Aides should not be authorized to perform any task that could potentially involve obstruction of an airway.
 - Advanced Home Health Aides may be authorized to administer medications when routine or pre-filled.

Advanced Home Health Aides should not be authorized to administer intramuscular, intravenous, or intracutaneous injections, but may be authorized to administer certain subcutaneous injections with a relative low risk of complications and only when prefilled.

III. ADVANCED TASK RECOMMENDATIONS

As noted above, the regulations required under the Executive Budget language would specify the types of advanced tasks that could be performed by Advanced Home Health Aides when assigned to do so and supervised by a registered nurse. At a minimum, the bill provides that an Advanced Home Health Aide may not be authorized to perform any tasks or activities that are outside the scope of practice of a licensed practical nurse. Advanced tasks would, however, include the administration of medications which are routine and prefilled or otherwise packaged in a manner that promotes relative ease of administration. The language further stated that the Workgroup would provide guidance on the advanced tasks and in particular on the types of medications that Advanced Home Health Aides may be authorized to administer, including whether subcutaneous injectables and controlled substances may be authorized. Further, the bill notes that Advanced Home Health Aides would not be required or permitted to assess an individual's medication needs.

After many hours of analysis and discussion, the Workgroup formed a general agreement as to the tasks that could be performed safely by an Advanced Home Health Aide with appropriate training and supervision. The Home Care Association of New York State (HCA) questioned several of the tasks recommended made by the Workgroup, but all other members reached agreement on the body of advanced tasks reflected on Appendix C (Advanced Task Matrix).

Appendix C is a revised version of the existing matrix used by the Department of Health and the State Education Department to identify tasks that currently are permissible or not permissible for home health aides to carry out. The current matrix also identifies "special circumstances," which allows certain tasks which are not routinely taught in home health aide training programs to be provided by home health aides to "self-directing" individuals, as long as they are trained in the specific task to be performed.

The special circumstances tasks identified on the matrix assisted the Workgroup in initially identifying tasks that potentially could be carried out by Advanced Home Health Aides, or "advanced tasks." However, the advanced tasks would not be restricted based on whether an individual is or is not "self-directing;" instead, the focus would be on the supervising registered nurse's assessment of the individual's needs and the competency of the Advanced Home Health Aide.

The Advanced Task Matrix attached as Appendix C includes a column reflecting the activities that the Workgroup agrees can be carried out by Advanced Home Health Aides, assuming appropriate training and supervision. The "non-permissible" column refers to home health aides and should not be applied to any task marked in the Advanced Home Health Aides section.

IV. RECOMMENDED QUALIFICATIONS, TRAINING AND COMPETENCY

The proposed legislation provides that only a home health aide who has at least one year of experience as a certified home health aide, has completed the requisite training and demonstrated competencies of an Advanced Home Health Aide, has successfully completed competency examinations and meets other appropriate qualifications may perform advanced tasks as an Advanced Home Health Aide. The regulations would have to establish minimum standards of training for the performance of advanced tasks by Advanced Home Health Aides, including: (1) didactic training; (2) clinical training; and (3) a supervised clinical practicum with standards set forth by the Commissioner. Further, the bill specifies that the Workgroup would provide guidance on the qualifications that must be satisfied by Advanced Home Health Aides to perform advanced tasks, including those related to experience, training, moral character, and examination requirements, as well as on minimum training and education standards.

A. EXPERIENCE

As noted, the proposed legislation would require at least one year of experience as a home health aide. The Workgroup recognized that while the Home Care Registry currently reflects the date that an individual has become certified as a home health aide and shows whether the aide was employed, it does not reflect the nature of the services provided to each individual client; *i.e.*, whether they are personal care or home health aide tasks. The Workgroup therefore recommends that the legislative proposal be amended to reflect that the individual interested in becoming an Advanced Home Health Aide should be certified as a certified home health aide for at least a year, but that the services provided may be either personal care or home health aide services.

B. TRAINING

The Workgroup recommended areas of training which should be provided to Advanced Home Health Aides and an approximate number of hours for each such area. These are minimum recommended training times and topics; training programs may choose to spend additional time. The Workgroup generally agreed that it would require, at a minimum, approximately 40 additional hours of training and education to prepare a home health aide to become qualified to perform these additional advanced tasks. However, additional assessment and training would be required by a supervising nurse on a patient specific basis.

The Workgroup also identified three modules of training that should be included in an approved curriculum: (1) Fundamentals; (2) Medication Administration; and (3) Other Tasks. See Appendix B (Recommended Training Topics and Times).

1. Module 1 – Fundamentals

First, the Workgroup noted that Advanced Home Health Aide training program should begin with a module on Fundamentals. This would provide advanced aides with training in guiding principles, the roles of the Advanced Home Health Aide and supervising nurse, and communications and reporting.

a. Guiding Principles

Training programs should ensure that Advanced Home Health Aides understand the imperative to provide culturally competent services in the most integrated setting, as well as the overarching principle that each individual served has their own individualized needs.

b. Roles and Responsibilities

The Workgroup felt that it was important that the Advanced Home Health Aide understand their roles and responsibilities as well as those of the supervising nurses.

c. Communications and Reporting

The Workgroup believed that it would be important for Advanced Home Health Aides to develop the skills needed to accurately report information to the members of the care team as well as to address problems in communications that may arise.

The Workgroup felt it important to stress, however, that all of the principles articulated in the Fundamentals Module would be reinforced throughout the remaining training modules. Similarly, these principles should be reinforced as part of the case-specific training provided by the supervising nurse and throughout the regular ongoing interaction with the nurse.

The Workgroup anticipated that the training in Fundamentals would require approximately eight hours.

2. Medication Administration

Second, the Workgroup recommended a training module on the administration of medications. This would include oral, topical, injectables, intra-aural, nasal and ocular, rectal and vaginal, and medicated baths.

The Workgroup anticipated that this training would require approximately 20 hours.

3. Other Tasks

Third, the Workgroup recommended a training module on other non-medication administration tasks.

- Orientation to health related tasks;
- Performing simple measurements and tests;
- Complex modified diets;
- Assisting with the use of prescribed medical equipment;
- Supplies and devices;
- Assisting with special skin care;
- Assisting with a dressing change; and
- Assisting with ostomy care.

The Workgroup anticipated that this training would require approximately 12 hours.

C. COMPETENCY ASSESSMENT AND TESTING

The Workgroup expressed that instructors will assess the competency of students on an ongoing basis throughout the various training modules.

In addition, written testing should occur after each module. The written examination would take approximately one hour for each module for a total of three hours which, when added to the estimated minimum 40 hours of training, would bring a training program to a minimum of 43 hours for training and competency testing.

V. NURSING SUPERVISION RECOMMENDATIONS

As set forth in the proposed legislation, Advanced Home Health Aides would be authorized to carry out advanced tasks only as assigned by and under the direct supervision of a registered professional nurse licensed in New York State and employed by a home care services agency or a hospice program, where such nursing supervision: (1) includes training and periodic assessment of the performance of advanced tasks; (2) shall be determined by the registered professional nurse responsible for supervising such advanced tasks based upon the complexity of such advanced tasks, the skill and experience of the Advanced Home Health Aide, and the health status of the individual for whom such advanced tasks are being performed; and (3) includes a comprehensive assessment of the individual's needs. Additionally, under the bill, the regulations would provide that Advanced Home Health Aides shall receive case-specific training on the advanced tasks to be assigned by the supervising nurse, with additional training taking place whenever additional advanced tasks are assigned or modified.

The Workgroup considered several aspects of supervision, including the need for initial orientation visits ongoing supervision. Workgroup members agreed that supervision involves both client-centered supervision and supervision of the aides.

A. INITIAL ORIENTATION VISITS

There was a consensus among Workgroup members that there needs to be an initial in-home visit where the supervising registered nurse (RN) works to orient the Advanced Home Health Aide to the needs of the individual receiving services, identifies the tasks that could be performed by the aide for the individual, trains the aide in performing those tasks, and satisfies himself or herself in the aide's competency to perform the tasks.

Some Workgroup members recommended requiring a specific number of additional in-home orientation visits within the first month of an Advanced Home Health Aide's assignment to a particular patient. Specifically, the New York State Nurses Association (NYSNA) recommended one to two visits in the first week, depending on the complexity of the tasks assigned. If necessary, the second orientation visit would occur within a week after the first and then two additional visits within the first month.

Other members thought that additional orientation visits may be necessary and appropriate in some cases but not in others, and that this should be left to the discretion of the nurse based on the circumstances.

The Workgroup recognized that there are some logistical challenges involved if an individual is receiving services from multiple Advanced Home Health Aides who work different shifts.

In particular, Workgroup member Center for Disability Rights raised the point that an individual receiving around-the-clock support might have as many as five or six aides, and that requiring the nurse to visit each aide multiple times in the first two weeks might render the Advanced Home Health Aide program cost-prohibitive for those individuals. CDR advised that denial of access to the program would be a form of discrimination on the basis of disability in violation of the Americans with Disabilities Act, and that regulation of the program must not create any situations in which individuals are likely to be discriminated against on the basis of their disability.

B. ONGOING SUPERVISION

Once an Advanced Home Health Aide has been oriented and the supervising RN is comfortable that they are competent to perform the assigned tasks, an appropriate minimum level of ongoing supervision will be necessary to assess the Advanced Home Health Aide's compliance with standards in administering

tasks and to assess the current condition of the client (e.g., one on site visit/assessment every XX days).

The Workgroup agreed that the need for additional visits or schedule of visits would be based upon the assessment of the nurse regarding the abilities of the Advanced Home Health Aide and the complexity of the tasks being assigned/performed. The Workgroup also concluded that RNs would need to be on call 24/7 to consult with an Advanced Home Health Aide, answer questions from the aide, and respond to issues that arise, but it would not necessarily have to be the same nurse that assigned the task in the first instance.

The Center for Disability Rights and other Workgroup members suggested that it would be worthwhile to distinguish between nurse supervision of the aide's compliance with standards in administering tasks, and the nurse's supervision of the current condition of the client. With respect to supervision of the aide, frequent mandatory supervision will increase costs and impose logistical problems that interfere with the individual's life and integration into the community, particularly for individuals with multiple aides. These members raised the point that that nurse supervision of the client might be sufficient to ensure the client's safety, with supervision of the aide taking place on a more occasional, as-needed basis.

C. SUPERVISION LEVELS

One Workgroup member, the New York State Nurses Association (NYSNA), noted that it would be critical to mandate an appropriate level of nursing supervision. NYSNA proposed addressing this by providing a clear and concrete definition of nursing supervision (including minimum standards for site visits to observe the work of the aide and assess the condition of the person receiving the services) and limiting the number of AHHAs that a RN could supervise by imposing "staffing ratios." To allow the Workgroup to finalize its recommendations, NYSNA asserted that the specifics of this could be left to regulation, but recommended that "staffing ratios" be required in legislation.

NYSNA recommended that the final regulations adopted by the Commissioner of Education include an upper limit on the number of Advanced Home Health Aides that can be supervised by an RN to ensure adequate nursing supervision, oversight and education of the Advanced Home Health Aide, with the proviso that the RN retains the discretion to determine a lower number based on assessment and judgment. The upper limit would be determined by an advisory committee to the Commissioner of Education, which would include representatives of home care and hospice providers and nurses, representatives of individuals who may be eligible to receive services provided by Advanced Home Health Aides, and other relevant stakeholders.

Other Workgroup members recognized the significance of the issue but expressed concern about attempting to impose a “one size fits all” solution in this area given the wide potential variation in the complexity of the tasks required. They felt this should be left to the RN’s assessment and judgment as such factors as travel time, number and complexity of tasks assigned to each Advanced Home Health Aide under supervision, the competency of the Advanced Home Health Aide, the number of site visits necessary to properly supervise each Advanced Home Health Aide, the number of site visits necessary to assess the health status of the client, and other relevant factors such as ability to respond to issues/questions/problems that arise while an Advanced Home Health Aide is working with an individual.

Home care agency representatives noted that providers need to be able to manage their resources, particularly in light of the challenges they face in the managed care environment, and that enforcing a specific limit could add to the administrative burden and cost. LeadingAge New York in particular opposed staffing ratios.

Disability rights advocates and others in the Workgroup noted that the supervision needs of individuals receiving long-term services and supports might vary by orders of magnitude, and that a ratio would not be able to account for this variation in supervision. Either it will be so high as to be ineffectual, or it will be so low that it will needlessly limit the scope of the Advanced Home Health Aide program. In light of the goal of this program to increase the opportunities for people with disabilities to live in home and community based settings, such a limitation might undermine the whole program. At best, it could keep people with high supervision needs from living in home and community settings, contrary to their rights under *Olmstead* and a form of discrimination on the basis of disability in violation of the ADA.

Workgroup members agreed that they all shared the goal of creating a workable structure and that in developing regulations as part of this effort, the State Education Department, in consultation with the Department of Health, should review existing federal and state requirements to ensure that any new requirements are not duplicative. Moreover, the Commissioner should strive to streamline the regulations to reduce the administrative burden on providers, and take into account the range and complexity of the tasks that may be assigned to Advanced Home Health Aides.

D. SUPERVISION PARAMETERS

NYSNA also suggested adding language to the proposed statutory provisions requiring Advanced Home Health Aides to document not only medication administration, but all advanced tasks/treatments, to increase effectiveness of supervision and to catch errors or need for further training. The Workgroup agreed to make such recommendation.

The Workgroup also recognized the concern that nurses who fulfill their responsibilities under the law not be unduly held liable for errors or other harmful acts by aides under their supervision. The New York Association of Health Care Providers (HCP) suggested similar protection for home care agencies that utilize Advanced Home Health Aides. The Workgroup recommended further study of this issue so that provisions could be included in the statute that are consistent with other provisions of New York State law.

VI. THRESHOLD IMPLEMENTATION ISSUES

As indicated, the guidance contained herein represents the consensus of the Workgroup on advanced tasks and minimum training times, and reflects the discussion on the topic of supervision, where a consensus has not yet been achieved on all aspects thereof. In certain cases, Workgroup members raised issues they felt required emphasis and concerns that they thought should be subject to further consideration or addressed in conjunction with the enactment of the legislation. Several of those issues are highlighted herein.

The Center for Disability Rights emphasized the significance of the Advanced Home Health Aides in carrying out the Supreme Court's recognition in *Olmstead v. L.C.* that people with disabilities have the right to receive services and supports in "the most integrated setting appropriate to the needs of the individual." Specifically, the legislative changes are necessary to ensure that people with disabilities and the elderly are able to live in integrated settings consistent with their rights under *Olmstead*. Further, the CDR reiterated that the Advanced Home Health Aides initiative also will enable New York State to leverage considerable additional Federal funding through broad implementation of the Community First Choice Option.

Some members of the Workgroup thought that it would be helpful to have additional clarification to understand how the curriculum will be developed. LeadingAge New York recommended that the State solicit applications, supported by funding, for the development of the curriculum development, to include both testing and evaluation components. Further, members expressed interest in making sure that training programs are approved by the State and held to consistent standards, and that efforts be made to ensure that a sufficient number of programs are approved throughout the State. HCA and HCP also noted that provider-based training programs should be eligible and funded to the same extent as other training programs.

Some members expressed concerns about the ability to implement the legislative proposal for several reasons, including that the proposal is not accompanied by dedicated funding to support curriculum development, training program costs, increased wages for Advanced Home Health Aides, increased nursing supervision costs, or other expenses. In part, representatives of home care agencies, hospice programs, and long term home health care programs noted concerns about

challenges arising from the provisions of services as anticipated in the legislation in a managed care environment. In particular, HCA, HCP and Leading Age emphasized their concern that they will find it difficult to implement the legislation absent increased reimbursement rates.

Workgroup members New York Chapter of the Assisted Living Federation Association of America (ALFA) and Leading Age New York, with the support of AARP, recommended that the legislation be expanded to include Enhanced Assisted Living Residences that are certified to provide enhanced services. This would allow such residences to retain Advanced Home Health Aides directly, as long as they are supervised by RNs, rather than obtaining such services through a home care agency or hospice program. Other members of the Workgroup felt that this was worthy of further discussion.

Finally, the Workgroup agreed that it would be important to review the progress of the Advanced Home Health Aides initiative for the purpose of identifying and recommending resolution of any implementation issues that may arise once the program is underway. The Department agreed that it would convene the Workgroup again two years after the legislation takes effect so that it could conduct an initial review of progress and issue a written report setting forth any such recommendations. Further, the Department will continue to work with Workgroup members and other stakeholders during development of the regulations and thereafter to facilitate the implementation of the initiative.

VII. CONCLUSION

The Workgroup made a great deal of progress in carrying out its charge and reached a consensus on most of the matters before it. A number of important issues that must be addressed for implementation to be successful were identified, and all the Workgroup members committed to continued participation in discussions to work through the challenges.

While recognizing the additional work that needs to be carried out to promote the successful implementation of the Advanced Home Health Aides initiative, the Department of Health concludes that the guidance of the Workgroup is of a sufficient level of detail such that it informs the regulations that would be issued in conformance with the legislation. Accordingly, the Executive Budget proposal should move forward, particularly given the significant opportunity it presents to transform the home care system in a way that will improve the lives of individuals with disabilities and family caregivers.

APPENDIX A

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1 discovered as a result of seeking immediate health care as defined in
2 paragraph (b) of subdivision three of section 220.78 of the penal law,
3 for either another person or him or herself because such person is experi-
4 encing a drug or alcohol overdose or other life threatening medical
5 emergency as defined in paragraph (a) of subdivision three of section
6 220.78 of the penal law.

7 Criminal possession of a controlled substance in the seventh degree is
8 a class A misdemeanor.

9 § 5. Paragraph (g) of subdivision 2 of section 850 of the general
10 business law, as amended by chapter 812 of the laws of 1980, is amended
11 to read as follows:

12 (g) Hypodermic syringes, needles and other objects, used or designed
13 for the purpose of parenterally injecting controlled substances into the
14 human body; provided, however, hypodermic syringes and needles obtained
15 and possessed from the state's syringe exchange and pharmacy and medical
16 provider-based expanded syringe access programs shall not be considered
17 drug-related paraphernalia;

18 § 6. Paragraph (c) of subdivision 1 of section 3381 of the public
19 health law, as amended by chapter 178 of the laws of 2010, is amended to
20 read as follows:

21 (c) by a pharmacy licensed under article one hundred thirty-seven of
22 the education law, health care facility licensed under article twenty-
23 eight of this chapter or a health care practitioner who is otherwise
24 authorized to prescribe the use of hypodermic needles or syringes within
25 his or her scope of practice; provided, however, that such sale or
26 furnishing: (i) shall only be to a person eighteen years of age or
27 older; and (ii) ~~[shall be limited to a quantity of ten or less hypoderm-~~
28 ~~ic needles or syringes, and (iii)]~~ shall be in accordance with subdivi-
29 sion five of this section.

30 § 7. Paragraph (a) of subdivision 5 of section 3381 of the public
31 health law, as amended by section 9-a of part B of chapter 58 of the
32 laws of 2007, is amended to read as follows:

33 (d) In addition to the requirements of paragraph (c) of subdivision
34 one of this section, a pharmacy licensed under article one hundred thir-
35 ty-seven of the education law may sell or furnish hypodermic needles or
36 syringes only if such pharmacy: ~~(i) does not advertise to the public~~
37 ~~the availability for retail sale or furnishing of hypodermic needles or~~
38 ~~syringes without a prescription, and (ii) at any location where hypo-~~
39 ~~dermic needles or syringes are kept for retail sale or furnishing,]~~
40 stores such needles and syringes in a manner that makes them available
41 only to authorized personnel and not openly available to customers.

42 § 8. This act shall take effect immediately.

43

PART J

44 Section 1. Subparagraph (v) of paragraph a of subdivision 1 of section
45 6908 of the education law is relettered subparagraph (vi) and a new
46 subparagraph (v) is added to read as follows:

47 (v) tasks provided by an advanced home health aide in accordance with
48 regulations developed in consultation with the commissioner of health
49 which, at a minimum, shall: (1) specify the types of tasks that may be
50 performed by advanced home health aides pursuant to this subparagraph
51 ("advanced tasks"), which shall include the administration of medica-
52 tions which are routine and prefilled or otherwise packaged in a manner
53 that promotes relative ease of administration; (2) provide that advanced
54 tasks performed by advanced home health aides may be performed only

1 under the direct supervision of a registered professional nurse licensed
2 in New York state and employed by a home care services agency licensed
3 or certified pursuant to article thirty-six of the public health law or
4 hospice program certified pursuant to article forty of the public health
5 law, where such nursing supervision (A) includes training and periodic
6 assessment of the performance of advanced tasks, (B) shall be determined
7 by the registered professional nurse responsible for supervising such
8 advanced tasks based upon the complexity of such advanced tasks, the
9 skill and experience of the advanced home health aide, and the health
10 status of the individual for whom such advanced tasks are being
11 performed, and (C) includes a comprehensive assessment of the individ-
12 ual's needs; (3) provide that advanced tasks may be performed only in
13 accordance with and pursuant to an authorized practitioner's ordered
14 care; (4) provide that only a home health aide who has at least one year
15 of experience as a certified home health aide, has completed the requi-
16 site training and demonstrated competencies of an advanced home health
17 aide, has successfully completed competency examinations satisfactory to
18 the commissioner and meets other appropriate qualifications may perform
19 advanced tasks as an advanced home health aide; (5) provide that only an
20 individual who is listed in the home care services registry maintained
21 by the department of health pursuant to subdivision nine of section
22 thirty-six hundred thirteen of the public health law as having satisfied
23 all applicable training requirements and having passed the applicable
24 competency examinations and who meets other requirements as set forth in
25 regulations issued by the commissioner of health pursuant to subdivision
26 seventeen of section thirty-six hundred two of the public health law may
27 perform advanced tasks pursuant to this subparagraph and may hold
28 himself or herself out as an advanced home health aide; (6) establish
29 minimum standards of training for the performance of advanced tasks by
30 advanced home health aides, including (A) didactic training, (B) clin-
31 ical training, and (C) a supervised clinical practicum with standards
32 set forth by the commissioner; (7) provide that advanced home health
33 aides shall receive case-specific training on the advanced tasks to be
34 assigned by the supervising nurse, provided that additional training
35 shall take place whenever additional advanced tasks are assigned; (8)
36 prohibit an advanced home health aide from holding himself or herself
37 out, or accepting employment as, a person licensed to practice nursing
38 under the provisions of this article; (9) provide that an advanced home
39 health aide is not required nor permitted to assess the medication needs
40 of an individual; (10) provide that an advanced home health aide shall
41 not be authorized to perform any tasks or activities pursuant to this
42 subparagraph that are outside the scope of practice of a licensed prac-
43 tical nurse; (11) provide that an advanced home health aide shall docu-
44 ment medication administration to each individual through the use of a
45 medication administration record; and (12) provide that the supervising
46 registered professional nurse shall retain the discretion to decide
47 whether to assign advanced tasks to home health aides under this program
48 and shall not be subject to coercion or the threat of retaliation; in
49 developing such regulations, the commissioner shall take into account
50 the recommendations of the workgroup of stakeholders convened by the
51 commissioner of health for the purpose of providing guidance on the
52 foregoing; or

53 § 2. Section 3602 of the public health law is amended by adding a new
54 subdivision 17 to read as follows:

55 17. "Advanced home health aides" means home health aides who are
56 authorized to perform advanced tasks as delineated in subparagraph (v)

1 of paragraph a of subdivision one of section six thousand nine hundred
2 eight of the education law and regulations issued by the commissioner of
3 education, in consultation with the commissioner of health, relating
4 thereto. The commissioner shall promulgate regulations regarding such
5 aides, which shall include a process for the limitation or revocation of
6 the advanced home health aide's authorization to perform advanced tasks
7 in appropriate cases.

8 § 3. Subdivision 9 of section 3613 of the public health law is renum-
9 bered subdivision 10 and a new subdivision 9 is added to read as
10 follows:

11 9. The department shall indicate within the home care services worker
12 registry when a home health aide has satisfied all applicable training
13 and recertification requirements and has passed the applicable competen-
14 cy examinations necessary to perform advanced tasks pursuant to subpara-
15 graph (v) of paragraph a of subdivision one of section six thousand nine
16 hundred eight of the education law and regulations issued thereto. Any
17 limitation or revocation of the advanced home health aide's authori-
18 zation also shall be indicated on the registry.

19 § 4. In developing regulations required under subparagraph (v) of
20 paragraph a of subdivision 1 of section 6908 of the education law, as
21 added by section one of this act, the commissioner of education shall
22 consider the recommendations of the workgroup of stakeholders convened
23 by the commissioner of health, to provide guidance on the tasks which
24 may be performed by advanced home health aides pursuant to such section
25 including but not limited to recommendations encompassing the following
26 matters:

27 (a) the tasks that appropriately could be performed by advanced home
28 health aides with appropriate training and supervision ("advanced
29 tasks");

30 (b) the types of medications that advanced home health aides should be
31 authorized to administer, including whether subcutaneous injectables and
32 controlled substances should be authorized;

33 (c) qualifications that must be satisfied by advanced home health
34 aides to perform advanced tasks, including those related to experience,
35 training, moral character, and examination requirements;

36 (d) minimum training and education standards; and

37 (e) adequate levels of supervision to be provided by nurses, including
38 adherence to existing requirements for comprehensive assessment and any
39 additional assessment that should be required, including when the indi-
40 vidual receiving advanced tasks performed by an advanced home health
41 aide experiences a significant change in condition.

42 § 5. This act shall take effect October 1, 2015; provided, however,
43 that the commissioner of education shall adopt or amend regulations
44 necessary to implement the provisions of subparagraph (v) of paragraph a
45 of subdivision 1 of section 6908 of the education law, as added by
46 section one of this act, by such effective date; provided, further, that
47 no advanced tasks may be performed pursuant to such provision until such
48 regulations are adopted and except in conformance with such regulations.

49 PART K

50 ~~Section 1. Subdivisions 1, 2 and 3 of section 2802 of the public~~
51 ~~health law, subdivisions 1 and 2 as amended by section 58 of part A of~~
52 ~~chapter 58 of the laws of 2010, subdivision 3 as amended by chapter 609~~
53 ~~of the laws of 1992 and paragraph (e) of subdivision 3 as amended by~~
54 ~~chapter 731 of the laws of 1993, are amended to read as follows:~~

APPENDIX B

ADVANCED HOME HEALTH AIDES ADVISORY WORKGROUP Members

- 1199SEIU United Healthcare Workers East: Helen Schaub, Vice President, New York Director of Policy and Legislation; Faith Wiggins, Director of the 1199SEIU Bill Michelson Home Care Education Fund
- AARP: David McNally, New York Manager of Government Affairs and Advocacy; Bill Ferris, State Legislative Representative
- American Nurses Association: Karen Ballard, MA, RN, FAAN, Executive Director; Marilyn Dollinger, DNS, FNP, RN, Associate Dean, Wegmans School of Nursing
- BOCES: Paula Negri, Health Careers Principal, Capital Region BOCES
- Center for Disability Rights: Bruce Darling, President/CEO; Stephanie Woodward, Director of Advocacy; Adam Prizio, Policy Analyst
- Center for Health Workforce Studies, University at Albany: Jean Moore, Director
- Chain Pharmacy Association of New York State: Kimberly DeMagistris, PharmD, RPh, Pharmacy Clinical Coordinator, Price Chopper Supermarkets;
- City University of New York: Dr. William Ebenstein, University Dean for Health and Human Services
- Consumer Directed Personal Assistance Association of New York State: Bryan O'Malley, Executive Director
- Columbia University School of Nursing: Bobbie Berkowitz, Ph.D., RN, FAAN, Dean
- Home Care Association of New York State: Al Cardillo, Executive Vice President
- Hospice & Palliative Care Association of New York State: Beth Mahar, Director of Member Services
- LeadingAge New York: James Clyne, Jr., President/CEO; Alyssa Lovelace, Government Relations Analyst; Cheryl Udell, Community Services Policy Analyst
- New York Association of Independent Living Association: Lindsay Miller, MPH, Executive Director
- New York State Association of Health Care Providers: Christy Johnson, President; Megan Tangjerd, MPA, Senior Associate for Public Policy
- New York Association of Psychiatric Rehabilitation Services, Inc. (NYAPRS): Briana Gilmore, Director of Public Policy
- New York Organization of Nurse Executives and Leaders: Claire Murray, Executive Director
- New York State Nurses Association: Susan Mitnick, Regulatory Specialist; Leon Bell, Political Director; Martha Wilcox, RN, Sullivan County Health Department, Board Member; Carol Ann Lemon, RN, Lobbyist; Judith Berek, Consultant
- New York University College of Nursing, Hartford Institute for Geriatric Nursing: Tara Cortes, Ph.D, RN, FAAN, Executive Director
- Paraprofessional Health Initiative: Carol Rodat, New York Policy Director; Peggy Powell, National Director, Workforce & Curriculum Development

- Pharmacists Society of the State of New York: Kelly Flynn, Pharmacist
- New York Chapter of the Assisted Living Federation of America: Ginger Landy, Co-Director, NY ALFA; (Michele O'Connor, Legislative Director
- New York State Department of Health: Lisa Ullman, Office of Primary Care and Health Systems Management (OPCHSM); Barry Gray, OPCHSM; Caleb Wistar, OPCHSM; Rebecca Fuller Gray, OPCHSM; JoAnn Tyler, OPCHSM; Cherlyn Fay, OPCHSM; Darleen Cieply, OPCHSM; Mark Kissinger, Division of Long Term Care (DLTC); Margaret Willard, DLTC; Alicia Segura, DLTC; Karen Meier, DLTC; Shaymaa Mousa, M.D., M.P.H., Office of the Commissioner of Health; Hope Plavin, Office of Quality and Patient Safety; Sandy Jensen, Division of Legal Affairs (DLA); James Tardy, DLA; Jane McLaughlin, Office of Government Affairs
- New York State Office for People With Developmental Disabilities: Kate Marlay, Deputy Director, Division of Person-Centered Supports; Jill Pettinger; Victoria Schultz; Martha Schunk

DRAFT – 03-13-2015

Matrix

**Permissible and Non-Permissible Activities Home
Health Aide (HHA) Services**

**Revised to include Advanced Home Health Aide
(AHHA)**

**PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES
HOME HEALTH AIDE (HHA) AND ADVANCED HOME HEALTH AIDE (AHHA) SERVICES**

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Functions/Tasks		
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Preparing meals in accordance with complex modified diets	Diabetic, nutritionally supplemented, combinations	2 – 3
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	Total parenteral nutrition (TPN)	4 - 6
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**PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES
HOME HEALTH AIDE (HHA) AND ADVANCED HOME HEALTH AIDE (AHHA) SERVICES**

TABLE OF CONTENTS

Component	Sub-topics	Page(s)
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**PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES
HOME HEALTH AIDE (HHA) AND ADVANCED HOME HEALTH AIDE (AHHA) SERVICES**

TABLE OF CONTENTS

Component	Sub-topics	Page(s)
Functions/Tasks (cont.)		
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**PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES
HOME HEALTH AIDE (HHA) AND ADVANCED HOME HEALTH AIDE (AHHA) SERVICES**

TABLE OF CONTENTS

Component	Sub-topics	Page(s)
Functions/Tasks (cont.)		
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INTRODUCTION

The Matrix delineates the activities associated with the provision of health related tasks by home health aides. Designations of permissible activities, permissible under special circumstances, and non-permissible activities are very specific and detailed to reflect the collaborative work and agreement by the State Education Department (SED) to clarify which activities that would be permissible by SED without violating the Nurse Practice Act and to assure that:

- there is a common understanding of all activities associated with each task; and
- the home care industry clearly understands which parts of the activity may be performed by the home health aide without violating the Nurse Practice Act in New York State (Article 139 of the State Education Law).

The language used in the listing of activities in the Matrix is not intended to imply that a home health aide providing services may make judgments about a patient's need for assistance with an activity. The patient's medical status must be reflected in a physician's order. A registered professional nurse must assess the functions, tasks, activities and degree of assistance needed by the patient. Permissible activities must be identified in the patient's plan of care. The home health aide must be supervised by a registered professional nurse or therapist and, where indicated, receive on-the-job training in the patient's home in performance of an activity.

A Guidance section is presented on pages vi-vii. The Guidance section is intended to be used as a reference in conjunction with review and interpretation of the Matrix content. Page numbers are included in the Guidance section to assist in the location of the terms within the body of the Matrix.

GUIDANCE

I. General:

- ◇ **Observe, Record and Report, General, pages 1-54:** to gather, write down and/or verbally convey information documenting:
 1. actions and findings of the home care aide when assisting the patient with a specific function, task or procedure assigned in the patient's plan of care;
 2. changes in the patient's behavior, physical environment and relationships with other caregivers which might affect the plan of care;
 3. effects of, or patient's reaction to, a procedure or treatment performed by the home care aide; and
 4. effects of, or problems developing from, a procedure or treatment performed by someone other than the home care aide.

II. Home Health Aide

- ◇ **Activities Permissible Under Special Circumstances, General, pages 1 - 54:** activities which can only be provided in association with a patient whose characteristics and case situation meet all of the following criteria:
 1. The patient is self-directing: i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices;
 2. The patient has need for assistance with the task or activity for routine maintenance of his/her health;
 3. The patient cannot physically perform the task or activity because of his/her disability; and
 4. The patient has no informal caregiver available at the time the task or activity must be performed, or the caregiver is unwilling or unable to perform the task, or the caregiver's involvement is unacceptable to the patient.
- ◇ **Activities Permissible Under Special Circumstances, Administration of Injectable (Insulin Only) Medications, pages 11-13:** cleaning of the site for insulin injection, inspection of the site for evidence of infection, and/or irritation and injection of a pre-filled insulin dose for a patient whose characteristics and case situation meet the above four criteria **for HHA.**
- ◇ **Activities Permissible Under Special Circumstances, Indwelling Catheter, pages 25-28 and page 45:** irrigation of the catheter, changing of a leg or bed urinary drainage bag,

and collection of a urinary specimen for testing purposes from the drainage bag for a patient whose characteristics and case situation meet the above four criteria and whose home care aide provides service exclusively to the patient within a particular day

- ◇ **Activities Permissible Under Special Circumstances, Mechanical Ventilators, pages 35-36:** activities which can only be performed for a patient whose characteristics and case situation meet the above four criteria and by a home care aide with current certification in cardiopulmonary resuscitation (CPR).
- ◇ **Administration of Medications, pages 5-17:** activities performed to prepare for and complete the administration of prescription and/or non-prescription oral, topical intra-aural, nasal, ocular, rectal and vaginal medications. Removal of the proper amount of medication from the medication container and/or application, instillation, insertion, etc. of a medication by a home care aide can only be performed for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understand the impact of these choices and assume responsibility for the results of the choices.

III. Advanced Home Health Aide

- ◇ **Activities Permissible, General pages 1 - 54:** activities which can only be provided for individuals as assigned by the supervising nurse.
- ◇ **Activities Permissible, Indwelling Catheter, pages 25-28 and page 45:** irrigation of the catheter, changing of a leg or bed urinary drainage bag, and collection of a urinary specimen for testing purposes from the drainage bag for a patient may be provided by an AHHA as assigned by the supervising nurse.
- ◇ **Activities Permissible, Mechanical Ventilators, pages 35-36:** Activities which can only be performed for a patient whose characteristics and case situation as assigned by the supervising nurse by an AHHA aide with current certification in cardiopulmonary resuscitation (CPR).
- ◇ **Administration of Medications, pages 5-17:** Activities performed to prepare for and complete the administration of prescription and/or non-prescription oral, topical intra-aural, nasal, ocular, rectal and vaginal medications. Removal of the proper amount of medication from the medication container and/or application, instillation, insertion, etc. of a medication by an AHHA can be performed for a patient as assigned by the supervising nurse.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Preparing meals in accordance with modified diets					
- low sugar	1. plan meals in cooperation with patient and family.	X			
- low salt					
- low fat	2. prepare shopping list.	X			
- low residue					
- calorie	3. purchase food.	X			
- high calorie					
- low cholesterol	4. assemble/setup necessary equipment/utensils/supplies for meal preparation.	X			
- bland					
- mechanically altered	5. prepare meals/food.	X			
- high residue					
- high protein	6. serve meals.	X			
- soft					
- liquid	7. clean cooking area, equipment and utensils.	X			
	8. store uneaten foods properly.	X			
	9. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Preparing meals in accordance with complex modified diets.					
- diabetic	1. plan meals in cooperation with patient or family.	X			
- nutritionally supplemented, involving measuring and mixing	2. prepare shopping list.	X			
	3. purchase foods.	X			
- combination of two or more modified diets	4. assemble/set up necessary equipment/utensils/supplies for meal preparation.	X			
	5. prepare meals/foods.	X			
	6. add medications to foods:				
	a. hyperal imentation solutions;			X	
	b. oral medications;			X	X
	c. vitamin supplements;	X			
	d. stool softeners	X			
	7. serve meals.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Preparing meals in accordance with complex modified diets.					
- diabetic, et al (cont.)	8. clean cooking area, equipment and utensils	X			
	9. store uneaten foods properly.	X			
	10. observe, record, and report.	X			
- tube feedings	1. assemble necessary equipment and supplies	X			
- naso-gastric	2. position patient for instillation of feeding.	X			
	3. insert tubes.			X	
	4. irrigate tubes.			X	
	5. instill feeding			X	
	6. hand requested items to person instilling feeding.	X			
	7. dispose of used equipment and supplies.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Preparing meals in accordance with complex modified diets.					
- tube feedings (cont.)	8. clean reusable equipment and unused supplies.	X			
	9. store reusable equipment and unused supplies.	X			
	10. observe, record, and report.	X			
- total parenteral nutrition (TPN)	1. dressing changes to IV catheter site (see permissible activities related to changing of dressings involving sterile procedures, pages 38-39).				
	a. assemble necessary equipment and supplies;	X			
	b. change dressing;			X	
	c. clean reusable equipment;		X		
	d. store equipment and unused supplies;	X			
	e. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Preparing meals in accordance with complex modified diets.					
- total parenteral nutrition (TPN)	2. mixing solutions: a. assemble necessary equipment and supplies; b. check for names, dates, clarity of solution; c. attach tubing to solution bottles; d. prepare additives; e. inject additives into solution; f. store solution as directed; g. observe, record, and report.			X X X X X	
	3. hooking up solutions: a. assemble necessary equipment and supplies; b. hang solution on IV poll; c. prepare additional equipment; d. prepare Heparin flush;		X	X X X X	X X

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Preparing meals in accordance with complex modified diets.					
- total parenteral nutrition (TPN)	e. inject Heparin into TPN catheter; f. connect solution tubing to catheter; g. set initial infusion rate; h. adjust infusion rate; i. inject Heparin flush again; j. perform sterile dressing change to IV catheter site; k. clean reusable equipment; l. store reusable equipment and unused supplies; m. repair equipment; n. observe, record, and report.			X X X X X X X	
	4. daily monitoring: a. measure weight; b. take temperature c. test urine for sugar;	X X X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications					
- oral medications	1. prompt patient of time to take medication	X			
	2. read the label on the medication container to check:				
	a. the name of the person for who the medication is intended;	X			
	b. the name of the medicine (may include both the generic and brand name);	X			
	c. amount to be used at each application;	X			
	d. frequency of the amount (i.e. QD, BID, etc.);	X			
	e. expiration date for prescription medications;	X			
	f. name, telephone number, address, and ID number of pharmacy;	X			
	g. doctor's name;	X			
	h. date prescription is filled;	X			
	i. number of prescription.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications (cont.)					
- oral medications (cont.)	3. bring the medication container and any necessary supplies and equipment to the patient.	X			
	4. open the medication container for the patient.	X			
	5. position the patient for medication administration.	X			
	6. remove proper amount of medication from the container.	X*			X**
	7. put/spray/spoon prescription or non-prescription medication in patient's mouth:				
	a. not pre-measured;	X*			X**
	b. pre-measured.	X*			X**

* This activity can only be provided for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices, and assumes responsibility for the results of the choices.

** This activity can be provided by an advanced home health aide for individuals as assigned by the supervising nurse.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications (cont.)					
- oral medications (cont.)	8. dispose of used supplies.	X			
	9. clean reusable equipment.	X			
	10. store medication properly.	X			
	11. observe, record, and report.	X			
- topical medications on stable skin surface (a skin surface that may have a superficial wound but is not open, inflamed, or infected.)	1. prompt patient of time to apply medication.	X			
	2. read the label on the medication container (see oral medications, page 7).	X			
	3. bring the medication container and any necessary supplies and equipment to the patient.	X			
	4. open the medication container for the patient.	X			
	5. position the patient for medication administration.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications (cont.)					
- topical medications for stable skin surface (cont.)	6. remove proper amount of medication from container	X*			X**
	7. apply prescription or non- prescription medications:				
	a. antibiotics;	X*			X**
	b. anesthetics;	X*			X**
	c. corticosteroids;	X*			X**
	d. vasodilators;	X*			X**
	e. protectives;	X*			X**
	f. antiparasitics;	X*			X**
	g. antifungals;	X*			X**
	h. antipruritics;	X*			X**
	i. antibacterials;	X*			X**
	j. rectal/vagina preparations	X*			X**
	k. antianginals.			X	X**
	8. dispose of used supplies.	X			
	9. clean reusable equipment and supplies.	X			

* This activity can only be provided for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices, and assumes responsibility for the results of the choices.

** This activity can be provided by an advanced home health aide for individuals as assigned by the supervising nurse.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications (cont.)					
- topical medications for stable skin surface (cont.)	10. store medication properly.	X			
	11. observe, record, and report.	X			
- injectable medications	1. prompt patient of time to inject medication	X			
	2. read the label on the medication container (see oral medications, page 7).	X			
	3. bring the medication container and any necessary supplies and equipment to the patient.	X			
	4. open the medication container for the patient.	X			
	5. position the patient for injection of medication.	X			
	6. draw up solution (including reconstituting) or prepare prefilled dose.			X	

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications (cont.)					
- injectable medications (cont.)	7. cleanse site for injection of insulin				
	a. self-injected		X		
	b. not self-injected		X		X
	8. inspect site for evidence of infection and/or irritation.				
	a. self-injected		X		
	b. not self-injected		X		X
	9. give injection:				
	a. intramuscular including Z track;			X	
	b. intravenous;			X	
	c. intracutaneous;			X	
	d. subcutaneous;			X	
	(1) prefilled insulin		X		X
	(2) low molecular weight Heparin			X	X
	(3) other prefilled			X	X***
	10. dispose of used supplies.	X			
	11. dispose of needles used for:				
	a. insulin injection;	X			
	b. other types of injections			X	
	12. clean reusable equipment and supplies.	X			

*** As approved by the Department of Health in consultation with the State Education Department.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications (cont.)					
- injectable medications (cont.)	13. store medication properly.	X			
	14. observe, record, and report.	X			
- intra-aural, nasal, and ocular medications.	1. prompt patient of time to instill or apply medication.	X			
	2. read the label on the medication container (see oral medications, page 7).	X			
	3. bring the medication container and any necessary supplies and equipment to the patient.	X			
	4. open the medication container for the patient.	X			
	5. removed proper amount of medication from container.	X*			X**
	6. warm solution for medication instillation/application.	X			

* This activity can only be provided for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices, and assumes responsibility for the results of the choices.

** This activity can be provided by an advanced home health aide for individuals as assigned by the supervising nurse.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications (cont.)					
- intra-aural, nasal, and ocular medications. (cont.)	7. position the patient for instillation or application of medication.	X			
	8. perform special cleansing of eyelids and eyelashes to remove secretion and crusts and prepare for instillation or application of ocular medication.	X			
	9. straighten ear canal and prepare for instillation or application of intra-aural medication.	X			
	10. instill/apply/spray prescription or non-prescription medication.	X*			X**
	11. dispose of used supplies.	X			

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** This activity can be provided by an advanced home health aide for individuals as assigned by the supervising nurse.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications (cont.)					
- intra-aural, nasal, and ocular medications. (cont.)	12. clean reusable equipment and supplies	X			
	13. store medication properly.	X			
	14. observe, record, and report.	X			
- rectal and vaginal medications	1. prompt patient of time to insert medication.	X			
	2. read the label on the medication container (see oral medications, page 7).	X			
	3. bring the medication container and any necessary supplies and equipment to the patient.	X			
	4. open the medication container or package for the patient.	X			
	5. attach medication container to vaginal or rectal applicator.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications (cont.)					
- rectal and vaginal medications	6. position the patient for insertion of medication.	X			
	7. remove proper amount of medication from container.	X*			X**
	8. insert prescription or non- prescription medications:				
	a. creams, lotions;	X*			X**
	b. glycerine suppositories;	X*			X**
	c. medicated suppositories.	X*			X**
	9. dispose of used supplies and equipment.	X			
	10. clean reusable supplies and equipment.	X			
	11. store medication properly.	X			
	12. observe, record, and report.	X			

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** This activity can be provided by an advanced home health aide for individuals as assigned by the supervising nurse.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Administration of medications (cont.)					
- medicated baths	1. prompt patient of bath time.	X			
	2. prepare bath water.	X			
	3. pour medication into water.	X			
	4. clean equipment.	X			
	5. store medication properly.	X			
	6. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Providing skin care					
- routine	1. assemble necessary equipment and supplies.	X			
(routine skin care consists of activities normally performed on a regular basis to maintain the skin's integrity.)	2. position patient.	X			
	3. use support equipment (e.g., sheepskin, cushions).	X			
	4. maintain clean environment:				
	a. clothing change;	X			
	b. linen change;	X			
	c. supportive equipment.	X			
	5. perform personal care:				
	a. bathing;	X			
	b. backrub;	X			
	c. apply cream/lotion;	X			
	d. nail care:				
	(1) file;	X			
	(2) cut.		X		X
	e. hair care;	X			
	f. toileting.	X			
	6. inspect skin for signs of pressure/irritation.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Providing skin care (cont.)					
- routine (cont.)	7. dispose of used supplies	X			
	8. clean reusable equipment	X			
	9. store reusable supplies.	X			
	10. dispose of used supplies.	X			
- special	1. assemble necessary equipment and supplies	X			
(special skin care consists of activities performed as needed to protect a stable surface wound or to prevent the development of decubiti.)	2. position patient.	X			
	3. apply prescription or non-prescription topical medications to stable skin surface.	X*			X**
	4. apply prescription or non-prescription topical medications to unstable skin surface.			X	

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** This activity can be provided by an advanced home health aide for individuals as assigned by the supervising nurse.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Providing skin care (cont.)					
- special (cont.)	5. perform dressing change on stable skin surface (see permissible activities related to changing dressings for stable surface wounds, pages 38-39).				
	6. perform dressing change on unstable skin surface.			X	
	7. inspect skin for signs of pressure/irritation	X			
	8. dispose of used supplies	X			
	9. clean reusable equipment.	X			
	10. store reusable supplies.	X			
	11. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices.					
- crutches	1. bring the equipment/supply/ device to the patient.	X			
- walkers					
- braces/splints					
- arm	2. position the patient for use of equipment/device.	X			
- leg					
- neck					
- back	3. fit/adjust equipment/supply/ device.			X	
- prosthetics					
- artificial limbs	4. put on/put in/remove/operate:				
- hearing aids	a. braces/splints:				
- glasses	(1) arm;	X			
- artificial eyes	(2) leg;	X			
- dentures	(3) neck;	X			
- breasts	(4) back;	X			
- wheelchairs	(5) traction.			X	
- motorized	b. prosthetics:				
- unmotorized	(1) artificial limbs;	X			
- trapeze	(2) hearing aids;	X			
- footboards/cradles	(3) glasses;	X			
- canes, all types	(4) artificial eyes;			X	X
	(5) dentures;	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- hospital beds	4. put on/put in/remove/operate (cont.):				
-special mattresses (eggcrate, air, water)	b. prosthetics (cont.)				
- cushions (water, air)	(6) breasts;	X		X	X
- pads (sheepskin)	(7) others.				
- slings	c. trapeze;	X			
- elastic support stockings	d. hospital beds;	X			
- ace bandages	e. slings;	X			
- backrests	f. elastic support stockings	X			
- transfer/sliding boards	g. ace bandages		X		X
	5. change/charge batteries of electrically/electronically operated equipment/devices.	X			
	6. dispose of used equipment/supplies/devices	X			
	7. clean reusable equipment/supplies/devices	X			
	8. store reusable equipment/supplies/devices properly.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)	9. repair equipment.			X	
	10. observe, record, and report.	X			
- hydraulic lift such as Hoyer - electric lift chair	1. assemble/set up necessary equipment.	X			
	2. position patient to move into/out of equipment.	X			
	3. operate the equipment.	X			
	4. clean reusable equipment.	X			
	5. store equipment properly.	X			
	6. repair equipment.			X	
	7. observe, record, and report.	X			
- transcutaneous electrical nerve stimulator (TENS)	1. assemble/set up necessary equipment.		X		X
	2. prepare skin/electrodes.		X		X
	3. apply/remove electrodes.		X		X

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- transcutaneous electrical nerve stimulator (TENS) (cont.)	4. adjust electrode controls.		X		X
	5. clean equipment.		X		X
	6. store equipment properly.		X		X
	7. repair equipment.			X	
	8. observe, record, and report.		X		X
- catheters - external	1. assemble necessary equipment and supplies.	X			
	2. position patient.	X			
	3. cleanse skin around application site.	X			
	4. apply/remove catheter.	X			
	5. change leg or bed drainage bag.	X			
	6. empty leg or bed drainage bags.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- catheters ` - external (cont.)	7. measure and record urinary output (see simple measurements and tests, pages 43-44).	X			
	8. dispose of used supplies.	X			
	9. clean reusable equipment.	X			
	10. store reusable equipment.	X			
	11. observe, record, and report.	X			
- catheters ` - straight (intermittent) (routine, chronic, clean)	1. assemble necessary equipment and supplies.	X			
	2. position patient.	X			
	3. cleanse skin around insertion site.			X	X
	4. set up clean field for insertion of catheter.			X	X

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- catheters - straight (intermittent) (routine, chronic, clean)	5. apply prescription or non-prescription medication around insertion site.			X	X
	6. insert/remove straight catheter			X	X
	7. clean skin and catheter tubing with soap and water.	X			
	8. measure and record urinary output (see simple measurements and tests, pages 43-44).	X			
	9. dispose of used supplies.	X			
	10. clean reusable equipment.	X			
	11. store reusable equipment properly.	X			
	12. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- catheters	1. assemble necessary equipment and supplies.	X			
- indwelling (e.g. Foley)	2. position patient.	X			
	3. cleanse skin around insertion site.			X	
	4. set up sterile field for insertion of catheter.			X	
	5. apply prescription or non- prescription medication around insertion site.			X	
	6. insert/remove indwelling catheter:			X	
	7. irrigate indwelling catheter.		X*		
	8. cleanse skin and catheter tubing with soap and water.	X			
	9. change leg or bed drainage bags.		X*		X**

* This activity can only be provided for a patient whose characteristics and case situation meet all of the four special circumstances criteria on page vi

AND

whose home care aide provides services exclusively to him/her within a particular day.

** This activity can be provided by an advanced home health aide for individuals as assigned by the supervising nurse.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- catheters	10. empty leg or bed drainage bags.	X			
- indwelling (e.g. Foley)	11. measure and record urinary output (see simple measurements and tests, pages 43-44).	X			
	12. dispose of used supplies.	X			
	13. clean reusable equipment.	X			
	14. store reusable equipment properly.	X			
	15. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- enemas	1. assemble necessary equipment and supplies.	X			
	2. position patient for task.	X			
	3. prepare soap solution.	X			
	4. administer: a. commercially prepared; b. soap solution.		X	X	X X
	5. remove fecal impactions.			X	
	6. cleanse skin around enema site.	X			
	7. dispose of waste materials and used supplies.	X			
	8. clean reusable equipment.	X			
	9. store reusable equipment properly.	X			
	10. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- douches	1. assemble necessary equipment and supplies.	X			
	2. position patient for task.	X			
	3. prepare douche solution.	X			
	4. administer: a. commercially prepared; b. douche solution.		X X		
	5. cleanse skin around douche site.	X			
	6. dispose of waste materials and used supplies.	X			
	7. clean reusable equipment.	X			
	8. store reusable equipment properly.	X			
	9. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- hot and cold applications	1. assemble necessary equipment and supplies.		X		X
- hot water bottles	2. prepare equipment for application.		X		X
- heating pads	3. position patient for task.		X		X
- hot and cold compresses	4. apply/immerse/remove:				
- ice bags	a. hot water bottle;		X		X
- foot and hand soaks	b. heating pad;		X		X
- sitz baths	c. hot and cold compress;		X		X
	d. ice bag;		X		X
	e. foot/hand soak;		X		X
	f. sitz bath;		X		X
	5. time application.		X		X
	6. dispose of used supplies.		X		X
	7. clean reusable equipment.		X		X
	8. store reusable equipment properly.		X		X
	9. observe, record, and report.		X		X

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- medication nebulizer	1. assemble necessary equipment and supplies.	X			
	2. position patient.	X			
	3. place medication in nebulizer: a. normal saline solution; b. prescribed medications.	X	X		X
	4. turn on the equipment.	X			
	5. time the treatment.	X			
	6. check to assure that patient is using equipment properly.	X			
	7. turn off equipment.	X			
	8. clean reusable equipment.	X			
	9. store equipment properly.	X			
	10. repair equipment.			X	
	9. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- humidifier	1. assemble necessary supplies.	X			
	2. fill with water.	X			
	3. clean equipment.	X			
	4. store equipment properly.	X			
	5. repair equipment.			X	
	6. observe, record, and report.	X			
- oxygen equipment	1. assemble/set up necessary equipment.	X			
- oxygen tank - liquid oxygen reservoir	2. turn on the equipment.	X			
	3. set/regulate the oxygen flow rate.		X		X
	4. check that flow rate is at setting prescribed on patient's care plan.	X			
	5. turn off the equipment.	X			
	6. clean equipment.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- oxygen equipment (cont.)	7. store equipment properly.	X			
	8. repair equipment.			X	
- tank, reservoir	9. observe, record, and report.	X			
- oxygen concentrator	1. assemble/set up necessary equipment.	X			
	2. turn on the equipment.	X			
	3. set/regulate the oxygen flow.		X		X
	4. check that flow rate is at setting prescribed on patient's care plan.	X			
	5. turn off equipment.	X			
	6. clean equipment.	X			
	7. store equipment properly.	X			
	8. repair equipment.			X	
	9. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- mechanical ventilators including intermittent	1. assemble necessary equipment and supplies		X		X
	2. plug in equipment.		X		X
	3. charge batteries.		X		X
• Assistance with use of this equipment requires current certification in cardiopulmonary resuscitation (CPR)	4. check settings on gauges against prescribed settings on patient's plan of care.		X		X
	5. set/regulate gauges.		X		X
• items 6, 7, and 8 are for continuous mechanical ventilators (does not include IPPB CPAP, or nebulizers)	6. suctioning:				
	a. assess chest/breath sounds;			X	
	b. observe, identify, and record need for suctioning.			X	X
	7. perform deep suctioning.			X	
	8. perform superficial				
	a. nasal;			X	X
	b. nasopharyngeal;			X	
	c. stable tracheostomy;			X	X
	d. oral.		X		X

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- mechanical ventilators including intermittent	9. unplug equipment		X		X
	10. clean reusable equipment and supplies.		X		X
	11. store reusable equipment and supplies.		X		X
• Assistance with use of this equipment requires current certification in cardiopulmonary resuscitation (CPR)	12. repair equipment.			X	
	13. maintain contents of emergency supply box.		X		X
	14. perform emergency care as needed, e.g. CPR		X		X
	15. observe, record, and report.		X		X

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Using medical equipment, Supplies and devices. (cont.)					
- equipment for sleep apneas; Continuous Positive Airway Pressure (CPAP)	1. assemble necessary equipment and supplies.	X			
	2. position patient.	X			
	3. turn on equipment.	X			
	4. apply/remove mask.	X			
	5. turn off equipment.	X			
	6. clean equipment.	X			
	7. store reusable equipment.	X			
	8. repair equipment.			X	
	9. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Changing of dressings					
-dressings involving clean procedure, for stable surface wounds (a wound that is closed, crusted or scabbed over non-draining, and non- infected, but not necessarily healed.) - bandaid - gauze pads with tape	1. assemble necessary equipment and supplies.	X			
	2. position patient.	X			
	3. remove wrappings from new dressing.	X			
	4. cut tape.	X			
	5. remove old dressing.	X			
	6. dispose of old dressing.	X			
	7. clean skin with soap and water.	X			
	8. hand requested items to patient.	X			
	9. apply prescription and non- prescription topical medication.	X*			X**

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** This activity can be provided by an advanced home health aide for individuals as assigned by the supervising nurse.

Permissible and Non-Permissible Activates
Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Changing of dressings (cont.)					
- dressings involving clean procedure (cont.)	10. apply new dressing.	X			
	11. store unused supplies properly.	X			
	12. observe, record, and report.	X			
- dressings involving sterile procedure	1. assemble necessary equipment and supplies.	X			
	2. sterilize instruments.		X		
	3. position patient.	X			
	4. set up sterile field.			X	
	5. remove wrappings from new dressing.			X	
	6. cut tape.	X			
	7. remove soiled dressing.			X	
	8. dispose of soiled dressing.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Changing of dressings (cont.)					
- dressings involving sterile procedure (cont.)	9. apply prescription or non- prescription medication to dressing.			X	
	10. apply new dressing.			X	
	11. apply reinforcement dressing if necessary.			X	
	12. clean equipment.		X		X
	13. store unused supplies properly.	X			
	14. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Performing simple measurements and tests to routinely monitor the patient's medical condition					
- vital signs	1. assemble necessary equipment.	X			
	2. position patient for task.	X			
	3. take blood pressure: a. arm; b. other site.	X		X	X
	4. take temperature: a. oral; b. axillary; c. rectal.	X X X			
	5. take pulse: a. radial; b. apical; c. carotid.	X	X	X	X X
	6. count respirations.	X			
	7. dispose of used supplies.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Performing simple measurements and tests (cont.)					
- vital signs	8. clean equipment.	X			
	9. store equipment properly.	X			
	10. observe, record, and report.	X			
- specimen collection	1. assemble necessary equipment and supplies.	X			
- urine	2. position patient for task.	X			
- stool	3. transfer specimen from commode or toilet or from bed pan or urinal to specimen container.	X			
	4. cleanse patient's skin.	X			
	5. dispose of used supplies.	X			
	6. label specimen container.	X			
	7. store specimen as directed.	X			
	8. clean reusable equipment.	X			
	9. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Performing simple measurements and tests (cont.)					
-specimen collection (cont.)	1. assemble necessary equipment and supplies.	X			
- sputum	2. position patient for task.	X			
	3. encourage patient to cough expectorate into specimen container.	X			
	4. dispose of used supplies.	X			
	5. label specimen container.	X			
	6. store specimen as directed.	X			
	7. clean patient's mouth.	X			
	8. observe, record, and report.	X			
- intake and output	1. assemble necessary equipment and supplies.	X			
	2. pre-measure containers.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Performing simple measurements and tests (cont.)					
- intake and output (cont.)	3. measure amount of fluid intake and urinary output.	X			
	4. dispose of used materials.	X			
	5. clean reusable equipment.	X			
	6. store equipment properly.	X			
	7. observe, record, and report.	X			
- blood testing collection	1. assemble necessary equipment and supplies.		X		X
- diabetic	2. cleanse patient's stick site.		X		X
	3. obtain drop of blood from stick site.		X		X
	4. place specimen on testing material.		X		X
	5. time the test.		X		X
	6. read and record test results.		X		X

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Performing simple measurements and tests (cont.)					
- blood testing (cont.)	7. dispose of used equipment and supplies.		X		X
- diabetic (cont.)	8. clean equipment.		X		X
	9. store unused equipment and supplies properly.		X		X
	10. observed, record, and report.		X		X
- urine testing	1. assemble necessary equipment and supplies.	X			
- diabetic	2. position client for task.	X			
- bacterial	3. collect specimen from: a. commode, bedpan, urinal (diabetic only); b. indwelling catheter; c. clean catch.	X*	X*	X	X** X**

* This activity can only be provided for a patient whose characteristics and case situation meet all of the four special circumstances criteria on page vi

AND

whose home care aide provides services exclusively to him/her within a particular day.

** This activity can be provided by an advanced home health aide for individuals as assigned by the supervising nurse.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Performing simple measurements and tests (cont.)					
- urine testing (cont.) - diabetic - bacterial	4. administer the test.	X			
	5. time the test.	X			
	6. read and record test results.	X			
	7. dispose of used equipment and supplies.	X			
	8. store testing materials properly.	X			
	9. observe, record, and report.	X			
- weight	1. bring scale to patient if necessary.	X			
	2. support patient on scale.	X			
	3. read the weight.	X			
	4. store scale properly.	X			
	5. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Performing a maintenance exercise program	1. assemble/set up necessary equipment.	X			
	2. position patient for exercise.	X			
	3. carry out:				
	a. passive range of motion;	X			
	b. resistive range of motion;	X			
	c. postural drainage; (1) percussion and vibration to the chest.	X	X		X
	4. count or time exercise.	X			
	5. store equipment properly.	X			
	6. repair/adjust traction equipment.			X	
	7. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Caring for an ostomy after the ostomy has achieved its normal function					
- changing a colostomy or ileostomy appliance or dressing when the ostomy is mature and stable (an ostomy that is not new or changing and for which a routine of care has been established.)	1. assemble necessary equipment and supplies.	X			
	2. position patient.	X			
	3. remove wrapping from disposable items.	X			
	4. measure stoma and cut faceplate to size.	X			
	5. remove/apply ostomy belt and/or bags.	X			
	6. apply prescribed medication, solvent, cleaning agent, wetting agent, etc. to applicator.	X			
	7. apply dressing (see permissible activities related to changing dressings for stable surface wounds, pages 38-39).	X			
	8. empty bags.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Caring for an ostomy (cont.)	9. dispose of used equipment and waste materials.	X			
- changing a colostomy or ileostomy appliance/ dressing (cont.)	10. clean reusable equipment.	X			
	11. store reusable equipment properly.	X			
	12. observe, record, and report.	X			
	1. assemble necessary equipment and supplies.	X*			X**
• Irrigating a colostomy	2. position patient.	X*			X**
	3. prepare prescribed irrigation solution.	X*			X**
	4. pour irrigation solution into irrigation reservoir.	X*			X**

* Irrigating a colostomy can only be performed **by a home health aide** under the following circumstances:

- the ostomy is mature and stable;
- irrigation has been ongoing and a customary part of the patient's care;
- the patient can tolerate the irrigation on the toilet or commode; and
- the patient is fully able to direct the procedure.

** Irrigating a colostomy can only be performed by an advanced Home Health Aide under the following circumstances:

- the ostomy is mature and stable;
- irrigation has been ongoing and a customary part of the patient's care.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Caring for an ostomy (cont.)	5. remove air from irrigation tubing.	X*			
• Irrigating a colostomy (cont.)	6. attach tubing and irrigation reservoir and prescribed irrigation tip.	X*			
	7. hang or hold irrigation reservoir at proper height.	X*			
	8. insert/remove catheter and irrigate colon.	X*			
	9. regulate flow of irrigation solution.	X*			
	10. clean reusable equipment.	X*			
	11. store reusable equipment and supplies properly.	X*			
	12. observe, record, and report.	X*			

* Irrigating a colostomy can only be performed **by a home health aide** under the following circumstances:

- the ostomy is mature and stable;
- irrigation has been ongoing and a customary part of the patient's care;
- the patient can tolerate the irrigation on the toilet or commode; and
- the patient is fully able to direct the procedure.

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Caring for an ostomy (cont.)					
- caring for a tracheostomy when the ostomy is mature and stable	1. apply dressing (see permissible activities related to changing dressing for stable surface wounds, pages 38-39).	X			
	2. insert/remove: a. inner cannula; b. outer cannula.	X		X	
	3. clean inner cannula.	X			
	4. cleanse skin around stoma.	X			
	5. change neck straps/ties.	X			
	6. dispose of used equipment and waste materials.	X			
	7. store reusable equipment and supplies properly.	X			
	8. observe, record, and report.	X			

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Caring for an ostomy (cont.)					
- caring for a gastrostomy when the ostomy is mature and stable					
- changing dressing	1. apply dressing (see permissible activities related to changing dressing for stable surface wounds, pages 38-39).	X			
- assist with feedings	1. assemble necessary equipment.		X		X
	2. position patient for feeding.		X		X
	3. add pre-mixed and pre- measured formula to feeding bag.		X		X
	4. connect feeding bag tube to gastrostomy catheter.		X		X
	5. turn on pre-set feeding pump.		X		X
	6. turn feeding pump off after formula is completed.		X		X
	7. disconnect feeding bag from gastrostomy catheter.		X		X
	8. add specific amount of water to gastrostomy catheter.		X		X

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Caring for an ostomy (cont.)	9. cleanse skin around stable ostomy and apply dressing (see permissible activities related to changing dressings for stable surface wounds, pages 38-39).		X		X
	10. dispose of used equipment and supplies.		X		X
	11. clean and store reusable equipment.		X		X
	12. store formula properly.		X		X
	13. reposition patient one hour after feeding.		X		X
	14. observe, record and report.		X		X
- changing a urinary diversion appliance or dressing when the ostomy is mature and stable	1. assemble necessary equipment and supplies.		X		X
	2. position patient.		X		X
	3. remove wrappings from disposable items.		X		X

Permissible and Non-Permissible Activates Home Health Aide (HHA) and Advanced Home Health Aide (AHHA) Services

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non-Permissible HHA	AHHA
Caring for an ostomy (cont.)					
- ureterostomy	4. remove/apply ostomy belt and/or bags.		X		X
- ileal conduit					
- others	5. apply prescribed medication, solvent, cleaning agent, wetting agent, etc. to applicator.		X		X
- changing a urinary diversion appliance or dressing (cont.)	6. apply dressing (see permissible activities related to changing dressings for stable surface wounds, pages 38-39).		X		X
	7. empty bags.		X		X
	8. dispose of used equipment and waste materials.		X		X
	9. clean reusable equipment.		X		X
	10. store reusable equipment and supplies properly.		X		X
	11. observe, record, and report.		X		X