

| Rule Number | Service Specification | Findings/comments | Yes | No | N/A |
|----------------|---|-------------------|-----|----|-----|
| | 1.0: Service Definition | | | | |
| 1.1 | Homemaker service is intended to assist with duties such as house cleaning, laundry, meal prep and errands | | | | |
| 1.2 | Homemaker Escorted client transportation enables a client to travel to locations such as the grocery store, post office, bank with the escort aide | | | | |
| 1.3 | Premium Homemaker and Homemaker Escort: Service, authorized by the care consultant, of 2 hours or less provided during a given shift | | | | |
| | 2.0: Unit of Service | | | | |
| 2.1 & 2.2 | A unit of both homemaker service and escorted client transportation is one (1) hour of direct client service | | | | |
| 2.3 | Unit rate must include all Administration, Supervision, Travel and Documentation time | | | | |
| 2.4 | The number of units authorized in each service day may vary from a fraction of a unit to several units. | | | | |
| 2.5 | Premium service shall be billed under the appropriate care plan item. A provider's premium rate shall be set by the provider agency and shall not exceed 1.5x the contracted rate for the basic service | | | | |
| 2.6 | SourcePoint services and program are based on assessed client need and are person- centered; therefore, minimum shift lengths cannot be imposed by Providers. | | | | |



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| | 3.0: Provider Agency Requirem | | | | |
| 3.1 | Shall have written policy addressing workers handing of client funds | | | | |
| 3.2 | For escorted transportation, the homemaker shall use his/her own vehicle or designated agency vehicle. | | | | |
| 3.3 | Providers of escort services shall have a written policy regarding requirements for direct care workers providing escort services. This policy at a minimum shall include: | | | | |
| 3.3 (a) | Collection of aide's current car insurance, updated annually | | | | |
| 3.3 (b) | Collection of aide's current driver's license, updated as necessary | | | | |
| 3.3 (c) | Collection of aide's certified 3-year driving record, updated every 5 years | | | | |
| 3.3 (d) | What constitutes an unfavorable result of driving record and steps agency will take when an unfavorable result is received. | | | | |
| 3.3 (d)(1) | At minimum: no more than 2 moving violations or 2 at fault accidents within a 12 month period or 4 moving violations or 3 at fault accidents within a 24 month period. | | | | |
| 3.3 (d) (2) | Automatic prohibited offenses: DUI, reckless operations or death due to driving violations | | | | |
| 3.3 (e) | Agency's policy regarding whether direct care staff with unfavorable driving records can take additional training to provide escort, including what the training options are (with the exception of any offense in 3.3(d)(2). | | | | |
| | OR | | | | |
| | If direct care staff members with unfavorable driving records are prohibited from providing escort until driving record is considered clean | | | | |
| 3.3 (f) | Training staff on what to do in case of emergency on the road, including contacts within the agency and notification of SourcePoint care consultant | | | | |



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| 4.0: Con | tinuing Education: The provider must furnish a minimum of six (6) hours o | f continuing (in-service) education for each homemaker | | | |
| | paraprofessional annually | | | | |
| 4.1 | Provider must maintain documentation of homemaker staff participation in continuing education sessions | | | | |
| 4.2 | The six (6) hour continuing education requirement is in excess of the training required under section 10 | | | | |
| 4.3 | The following topics are recommended for homemaker paraprofessional continuing education instruction: | | | | |
| | A. Health and Wellness | | | | |
| | B. Normal Aging | | | | |
| | C. Illness and Disability | | | | |
| | D. Chronic Diseases | | | | |
| | E. Maintaining Boundaries in the Helping Profession | | | | |
| | F. Special Needs of the Elderly | | | | |
| | G. Death and Dying | | | | |
| | H. Universal Precautions | | | | |
| 5.0: 1 | Duties and Responsibilities: Provider must assure homemaker parap services outlined in the authorized plan which my include ar | | | | |
| 5.1 | House Cleaning: Dusting, mopping, vacuuming, cleaning kitchen and outside of applicances, counters and cabinets, ovens, bathroom, changing linens, window washing, trash removal, emptying commode | | | | |
| 5.2 | Meal Prep and Nutrition | | | | |
| 5.3 | Laundry | | | | |
| 5.4 | Basic Home Safety | | | | |
| 5.5 | Additional Activities: reading to and writing for the client at client request, accompany client to appointments | | | | |
| 5.6: | Errands: purchasing groceries, prescriptions, household or personal items, other household errands | | | | |
| 6.0: Hom | emaker Paraprofessional Supervision: The provider must assure that a Ho the authorized plan and that the Provider's supervisor oversees the He | | | | |



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| 6.1 | Supervisor must complete and document a home visit to define the expected daily activities of the Homemaker paraprofessional <u>before client care is initiated</u> | | | | |
| 6.1 (a) | Supervisor prepared written Homemaker daily care plan specific to each client and consistent with authorized plan | | | | |
| 6.1 (b) | Supervisor provided a copy of the daily plan for each client assigned to the Homemaker paraprofessional | | | | |
| 6.2 | Supervisor must evaluate Homemaker paraprofessional compliance with daily care plan and SourcePoint's authorized plan at least every 93 days | | | | |
| 6.2 (a) | Review the Homemaker paraprofessional documented client contacts to assure Homemaker staff member task competition is consistent with the daily care plan and authorized plan. | | | | |
| 6.2 (b) | Client Supervisory Service Reviews must be completed every 93 days. * Reviews may be completed in-person or over the phone. * In-person reviews must be completed for new client enrollment. * In-person reviews must be completed when a client has been on suspension for 30 or more days * There should be no Client Supervisory Service Reviews conducted via telephone back to-back. | | | | |
| | 6.2 (c) Documentation of Client Supervisory Service Reviews conducted via telephone must indicate that the Review was completed via telephone, and include the same information as Reviews conducted in-person. | | | | |
| 6.3 | Supervisor must assure that each episode of Homemaker service delivery, including a listing of tasks performed by the Homemaker paraprofessional and client response to the service, is signed by the homemaker paraprofessional and the client | | | | |
| 6.3 (a) | If provider is utilizing an electronic service delivery system, do they have an approved copy of the SourcePoint electronic service delivery waiver? | | | | |
| 6.4 | The supervisor must evaluate client response to the care plan and reflect problems identified by client through the documentation review and supervisory visit process identified in section 6.0, item 6.2 and notify the care consultant of recommended modifications and resolution of any problems identified | | | | |



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| 6.5 | Supervisor must maintain documentation that supervisor report was completed every 93 days in each client's file | | | | |
| | 7.0: The provider must have a monitoring system/method in place to v | erify service delivery. Mechanism must verify: | | | |
| 7.1 | Whether homemaker is present at location where services are to be provided and at time services are to be provided | | | | |
| 7.2 | Whether provider's employees have provided the services at the proper location & time by the end of the working day | | | | |
| 7.3 | Client/family member signature at end of service shift. If system does not have signature capability, provider must request a Waiver from SourcePoint. | Is there a waiver from SourcePoint if the ESDV system does not have signature capability? | | | |
| 7.4 | A protocol for scheduling a substitute employee when the monitoring system identifies that an employee has failed to provide home care services at proper location and time, including standards for determining the length of time that may elapse without jeopardizing the health and safety of the consumer | | | | |
| 7.5 | Procedures for maintaining records of the information obtained through he monitoring system | | | | |
| 7.6 | Procedures for compiling annual reports of the information obtained through the monitoring system, including statistics on the rate at which home care services were provided at the proper location and time | | | | |
| 7.7 | Procedures for conducting random checks of the accuracy of the monitoring system to assure system is in proper working order | | | | |
| Note: | Note: Above items are still required for agencies utilizing electronic service delivery | Is there an ESDV waiver granted by SourcePoint? | | | |
| 8.0: Sum | mary of Requirement Documents: the provider of homemaker services n | nust furnish Homemaker service specific documentation | | | |
| in additio | on to the documentation requirements of the conditions of Participation. | The homemaker service specific documentation required | | | |
| | includes: | | | | |
| 8.1 | The provider assessment outcome | | | | |
| 8.2 | Client specific homemaker care plans | | | | |
| 8.3 | Documentation of each episode of client contact | | | | |
| 8.4 | Regular supervisor/worker case consultation and communication | | | | |
| 8.5 | SourcePoint or agency supervisory report | | | | |

Homemaker and Homemaker Escort



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| Note: | Above may be kept electronically | | | | |
| 9.0 |): Personnel Qualifications: The provider must assure that position descrip | ptions and Homemaker staff possess the following | | | |
| | qualifications: | | | | |
| 9.1 | Homemaker Paraprofessional: | | | | |
| 9.1.1 | Is a high school graduate or completed GED or has a minimum of 2-years work | | | | |
| 9.1.2 | experience is able to understand written care plans, execute instructions and document services | | | | |
| 9.1.2 | delivered | | | | |
| 9.1.3 | is able to communicate with clients/ families and emergency service systems | | | | |
| | personnel | | | | |
| 9.1.4 | has one of the following: | | | | |
| 9.1.4 (a) | Successful completion of the nurse aide competency evaluation program conducted | | | | |
| | by the Ohio Department of Health | | | | |
| | OR | | | | |
| | | | | | |
| 9.1.4 (b) | Successful completion of the Medicare competency evaluation program for home health aides without a 24 month lapse in employment as a nurse aide or home health | | | | |
| | aide | | | | |
| | OR | | | | |
| 9.1.4 (c) | One year of paid supervised employment experience | | | | |
| | as a homemaker paraprofessional without a 24 month lapse in employment; | | | | |
| | | | | | |
| | OR | | | | |
| 9.1.4 (d) | One-year relevant supervised experience with a home cleaning company, custodial | | | | |
| | company or related field and completion of training section 10.1. through 10.4 with in field demonstration | | | | |
| | OR | | | | |
| 9.1.4 (e) | one-year relevant life/work experience, documented by the agency, and completion of | | | | |
| J.1.4 (C) | training section 10.1. through 10.4 with in-field demonstration | | | | |
| | | | | | |
| | OR | | | | |
| 9.1.4 (f) | Completion of 11 hours of training under section 10 and 2 weeks of in-field training | | | | |
| | with observation. | | | | |



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| 9.1.5 | 9.1.5 Provider must maintain and furnish documentation of the Homemaker paraprofessional's training and in-field demonstration in the Homemaker paraprofessional personnel file. The documentation requirements are: | | | | |
| 9.1.5 (a) | Date of training | | | | |
| 9.1.5 (b) | number of hours of the training | | | | |
| 9.1.5 (c) | List of instruction materials and subject areas covered | | | | |
| 9.1.5 (d) | qualifications of the trainer and the field trainer | | | | |
| 9.1.5 (e) | signatures of the trainer, and the homemaker paraprofessional verifying the accuracy of the record | | | | |
| 9.1.5 (f) | Date of in-field demonstration of each required skill with signature of field trainer and homemaker paraprofessional. | | | | |
| 9.2 | Homemaker Supervisor: | | | | |
| 9.2.1 | Is a registered nurse or a licenses practical nurse currently licensed to practice in the state tat of Ohio | | | | |
| | OR | | | | |
| 9.2.2 | Possess a bachelor's degree (BS or BA) OR an associate degree in one of the following areas | | | | |
| | Home economics | | | | |
| | Counseling | | | | |
| | Gerontology | | | | |
| | Social Work | | | | |
| | Nursing | | | | |
| | Public Health | | | | |
| | Health Education | | | | |
| | Other related field | | | | |
| | OR | | | | |
| 9.2.3 | Possesses a minimum of four (4) years of direct community service experience in the | | | | |
| | provision of home care services 10.0: Homemaker Classroom Training Topics: components requiri | ng demostration during in-field training | | | |
| | | | | | |
| 10.1 | Housecleaning- 3.5 hours | | | | |
| | handling cleaning products And prevention of dangerous chemical mixtures; dusting; cleaning floors; cleaning appliances; cleaning bathroom; changing bed linens | | | | |

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| 10.2 | Laundry- 0.5 hour | | | | |
| | sorting, washing, drying clithes and linens; folding clothes and linens | | | | |
| 10.3 | Other Homemaker Tasks- 2.5 hours | | | | |
| | meal prep/nutrition including specialty diets; basic home safety; communication and listening skills; proper documentation | | | | |
| 10.4 | Additional Areas for Attention When Working With Older Adults- 4.5 hours | | | | |
| | Universal Precautions for infection control and communicable diseases; maintaining appropirate boundaries; mandated reporting; emergency protocol | | | | |
| 10.5 | The required training hours do not include agency orientation hours required for new agency employees as specified on the Conditions of Participation | | | | |
| 10.6 | Agency is expected to implement additional training if deemed necessary through ongoing performace appraisals and/or client feedback to assure sall staff are able to perform the duties of a homemaker paraprofessional | | | | |