

CHAPTER 06 – AGING: PROGRAM OPERATIONS

SUBCHAPTER 06A – AGING: IN-HOME AIDE SERVICES FOR OLDER ADULTS

SECTION .0100 - SCOPE OF SERVICE

10A NCAC 06A .0101 SCOPE OF IN-HOME AIDE SERVICES

As used in this Subchapter, the following definition of In-Home Aide Services shall apply:

- (1) Primary Service. In-Home Aide Services are those paraprofessional services which assist the individual, his family or both with essential home management tasks, personal care tasks, or supervision, or all of the above, to enable the individual, his family, or both to remain, and function effectively, at home as long as possible.
- (2) Respite Care Component. In-Home Aide Services may be used for the purpose of providing respite for a primary caregiver. For this purpose, In-Home Aide Services may be provided to a client or patient in his own home or in the home of his primary caregiver. Respite Care may consist of any level of home management or personal care tasks.

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A; Eff. December 1, 1991; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

10A NCAC 06A .0102 DEFINITIONS

As used in this Subchapter, the following terms shall have the meanings specified:

- (1) "Activities of Daily Living (ADL)" include eating, dressing, bathing, toileting, bowel and bladder control, transfers, ambulation and communication such as speaking, the written word, signing, gestures and communication devices.
- (2) "Available Person" is someone who lives with or near the client, who has the time and is willing to perform the needed services.
- (3) "Primary Caregiver" is the person who voluntarily provides the most care or assumes the most responsibility for another person.
- (4) "Home Management" includes tasks that range from basic housekeeping, shopping, and essential transportation to intensive work with individuals and their families on budgeting and family management.
- (5) "Instrumental Activities of Daily Living (IADL)" includes meal preparation, medication intake, cleaning, money management, phone use, laundering, reading, writing, shopping and going to necessary activities.
- (6) "Medically Stable" means physical or mental adaptation to previously recognized health problems with effective maintenance by diet, medication, or routine physical exercise, or a combination of these remedies.
- (7) "Medically Unstable" means a recent acute illness or complications of a chronic condition that are not physically or mentally controlled by diet, medication, or physical exercise, or a combination of these remedies and which require frequent monitoring and testing by skilled professionals.
- (8) "Older Adult" means 60 years of age or older.
- (9) "Own Home" means that the service recipient is living in a residence he maintains for himself or is maintained for him. "Own home" does not include any group care setting.
- (10) "Personal Care" includes tasks that range from assistance with basic personal hygiene and grooming, feeding, and ambulation to medical monitoring and other health care related tasks.
- (11) "Respite Care" is a component of In-Home Aide Services which provides needed relief to primary caregivers of persons who cannot be left alone because of mental or physical problems.
- (12) "Responsible Person" is someone who is dependable and capable of performing the needed services for the client.

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A; Eff. December 1, 1991;

Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

10A NCAC 06A .0103 DESCRIPTION OF IN-HOME AIDE SERVICE LEVELS

As used in this Subchapter, the following descriptions of In-Home Aide Service levels shall apply for older adults:

- (1) Level I - Home Management. In-Home Aide Services at this level are intended to provide support to persons and their families who require assistance with basic home management tasks, such as housekeeping, cooking, shopping, and bill paying. Clients to be served include those who are self-directing, medically stable, and who have at least one instrumental activity of daily living (IADL) impairment. Personal care tasks may not be performed at this level.
- (2) Level II - Home Management and Personal Care. In-Home Aide Services at this level are intended to provide support to persons and their families who require assistance with basic activities of daily living and home management tasks. Both the home management and assistance with personal care tasks can be provided to the client when his capacities are diminishing or when the client is striving to maintain or improve his own functioning. Clients to be served include those who are medically stable and partially dependent in carrying out one or two activities of daily living (ADL) due to physical or mental impairments, or both; or who have maintenance needs or rehabilitative potential, or both. In addition to their personal care needs, clients may also require assistance with IADL activities to improve IADL functioning or to learn independent living skills; or they may have two to four IADL needs requiring additional support to maintain or achieve overall functioning.
- (3) Level III - Home Management. In-Home Aide Services at this level are intended to provide intensive education and support to persons and their families in carrying out home management tasks and improving family functioning skills. Provision of the service primarily focuses on individualized work with a client and his family in teaching and demonstrating skills and tasks and reinforcing improved client and family accomplishments. It also involves direct care and support in crisis situations. Clients to be served generally have moderate to severe limitations in cognitive or psycho-social functioning, but have potential for partial or total independence in IADL or home management functioning, or both. Some clients may have more than four IADL impairments.
- (4) Level III - Personal Care. In-Home Aide Services at this level are intended to provide substantial ADL support to persons who require assistance with health or personal care tasks, or both. Provision of these tasks involves extensive "hands on" care and potential assistance with a wide range of health related conditions. Clients to be served include those who are medically stable with three or more ADL impairments resulting from a chronic condition; or who are medically stable with significant ADL impairments, but have rehabilitative potential; or who are medically unstable due to recent illness, complications of a chronic condition, or a deteriorating condition with variable ADL and IADL needs.
- (5) Level IV - Home Management. In-Home Aide Services at this level are intended to provide a wide range of educational and supportive services to persons and their families who are in crisis or who require long term assistance with complex home management tasks and family functioning skills. Provision of the service involves quick and creative response to individual and family crisis situations identified by the case manager; it also focuses on appropriate learning sessions with small groups of persons from different families who have similar needs. Clients to be served include those who have serious limitations in cognitive or psycho-social functioning, or both, but who have the potential for major or complete independence in IADL functioning and who have little or no ADL impairment.

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A; Eff. December 1, 1991; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

10A NCAC 06A .0104 TARGET POPULATION

The target population consists of individuals who are unable to carry out tasks essential to the activities of daily living or the instrumental activities of daily living, or both, who have no responsible person available to perform these tasks, and who need the service in order to remain in their own homes. It also includes functionally impaired persons whose

primary caregivers need relief from everyday caregiving responsibilities in order for the impaired individuals to remain at home.

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A;
Eff. December 1, 1991;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

SECTION .0200 - CLIENT ELIGIBILITY

10A NCAC 06A .0201 ELIGIBILITY FOR IN-HOME AIDE SERVICES

- (a) Persons eligible for services must be 60 years of age or older, live at home, and have home management or personal care needs, or both.
- (b) Persons served must be in need of the service for all of the following reasons:
- (1) the person is unable to carry out one or more tasks essential to the activities of daily living (ADL's) or instrumental activities of daily living (IADL's);
 - (2) the person needs help with these tasks in order to remain in his own home; and
 - (3) a responsible person is not available to perform these tasks or the primary caregiver needs relief.
- (c) Persons must be served in the following order of priority:
- (1) older adults for whom the need for Adult Protective Services has been substantiated and the service is needed as part of the adult protective services plan;
 - (2) older adults who are at risk of abuse, neglect, or exploitation;
 - (3) older adults with extensive ADL or IADL impairments who are at risk of placement in substitute care;
 - (4) older adults with three or more ADL or IADL impairments; and
 - (5) older adults with one or two ADL or IADL impairments.

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A;
Eff. December 1, 1991;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

SECTION .0300 - SERVICE PROVISION

10A NCAC 06A .0301 SERVICE DELIVERY

In-Home Aide Services must be provided in accordance with the standards established in Rules .0304, .0305, .0306, .0307, and .0310 of this Section for task levels, competency requirements, supervision, and quality assurance requirements regardless of whether the aide performing the tasks is a paid employee or a volunteer under the supervision of an established agency.

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A;
Eff. December 1, 1991;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

10A NCAC 06A .0302 ASSESSMENT AND REASSESSMENT OF CLIENT

- (a) The purpose of the initial assessment and regular reassessments is to determine each client's level of functioning and determine or confirm the need for In-Home Aide Services.
- (b) The initial assessment and reassessments must be conducted by an appropriate professional and are prerequisites to providing In-Home Aide Services.
- (c) An initial assessment is not a prerequisite when the health or safety of a client is at risk. In these instances the initial assessment must be completed within five working days of the onset of services.
- (d) The initial assessment and reassessment must be conducted in the client's home and must address the mental, social, environmental, economic, and physical health status of the client, as well as the ability to perform activities of daily living (ADL's) and instrumental activities of daily living (IADL's).

- (e) The initial assessment and reassessments must be signed and dated by the professional responsible for assuring the completion of the initial assessment and reassessments.
- (f) An initial assessment must be completed prior to the professional's development of an In-Home Aide Service Plan.
- (g) A full reassessment must be completed at least every 12 months or as the client and family situation warrants.
- (h) A review of the client and family situation must be completed by an appropriate professional at least quarterly. If a reassessment is conducted, it meets the requirements for a quarterly review.
- (i) If the person needs Home Management tasks at Levels I, II, or III, the initial assessment and reassessments must be completed by a social worker or other appropriate professional such as a registered nurse or registered dietitian. If a registered nurse or dietitian is conducting the initial assessment or reassessment at Levels I, II, or III, and the client's social needs appear more extensive than the assessor is able to adequately evaluate, then a social worker must be consulted for further input. If the person needs Home Management tasks at Level IV, the initial assessment and reassessments must be completed by a social worker.
- (j) If the client needs Personal Care tasks at Level III, a registered nurse must complete the physical health status and the ADL portions of the initial assessment and reassessments. For Level II Personal Care tasks, if a social worker or registered dietitian is conducting the initial assessment or reassessment and the client's personal care needs appear more extensive than the assessor is able to adequately evaluate, then an appropriate health professional must be consulted for further input.

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A;
Eff. December 1, 1991;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

10A NCAC 06A .0303 IN-HOME AIDE SERVICE PLAN

- (a) Each client must have an In-Home Aide Service Plan which is based on the initial assessment and regular reassessments.
- (b) The In-Home Aide Service Plan must include:
 - (1) measureable client outcome goals;
 - (2) In-Home Aide Service level or levels to be provided;
 - (3) specific tasks to be performed;
 - (4) frequency of service provision;
 - (5) anticipated duration of the service; conditions for continuing or discontinuing service;
 - (6) signature of client or designated person indicating agreement with the service plan;
 - (7) signature of agency's professional staff developing the service plan; and
 - (8) a physician's signature if required by a specific funding source.
- (c) All changes in tasks must be documented and dated on the In-Home Aide Service Plan by the responsible professional.

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A;
Eff. December 1, 1991;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

10A NCAC 06A .0304 COMPETENCY REQUIREMENTS

- (a) Aides who provide In-Home Aide Services must meet the competency requirements for the level of service they are regularly required to perform. In addition, an aide performing any tasks in Level III Personal Care must meet the competency requirements for that level and be registered as a Nurse Aide I with the NC Board of Nursing. Meeting competency requirements includes a correct demonstration of the tasks to an appropriate professional.
- (b) The agency employing the in-home aides must maintain documentation of each aide's competence; this includes verification of knowledge of all content areas and ability to correctly perform all tasks at the level of service regularly provided. If the aide is required to perform selective tasks at a higher level, documentation of competence in the specific tasks is also required. An aide must be fully competent at the current level of service provision before being assigned tasks at a higher level.
- (c) By July 1, 1991, regardless of the level of service to which the aide is assigned, demonstrated competence for the specific tasks assigned to that aide must be documented before allowing the aide to perform the tasks independently.

(d) Competency requirements for all levels except Level III Personal Care are applicable on July 1, 1993 for all persons hired after that date. All aides performing any Level III Personal Care tasks must have met the NC Board of Nursing's competency requirements and be registered as a Nurse Aide I with the North Carolina Board of Nursing by January 1, 1991 or within four months of being assigned these tasks. Each service provider agency is responsible for ensuring that competency testing is appropriately administered.

(e) A listing of the tasks and related areas of competence for each level from which a competency test for the aide will be drawn is provided in Rule .0305 of this Section.

(f) Each service provider agency is responsible for insuring that its aides have sufficient training to pass a competency test for the level of service the aides will regularly provide.

(g) In the event that a spouse, parent, child or sibling is paid to provide care, the service provider agency can make a determination that the family member is capable of providing the care needed without requiring any formal training. The family member must demonstrate competence to perform the tasks needed by the client to an appropriate professional. When the family member provides Personal Care at Level III, he must meet the NC Board of Nursing's competency requirements and be registered as a Nurse Aide I with the NC Board of Nursing within four months of being assigned these tasks.

(h) Demonstration of competence in the presence of an appropriate professional can take place in a variety of settings including, but not limited to, the classroom, laboratory, local agency, or the home of the client and family.

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A; Eff. December 1, 1991; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

10A NCAC 06A .0305 IN-HOME AIDE TASKS AND REQUIRED COMPETENCIES

(a) Tasks to be performed and required competencies for In-Home Aides performing Level I - Home Management are as follows:

Tasks	Required Competencies
Home Management	
<ul style="list-style-type: none"> • Pay bills as directed by client • Provide transportation for medical appointments and shopping • Clean and care for clothing: ironing, simple mending, laundering • Do basic housekeeping tasks: sweeping, vacuuming, dusting, mopping, dishes • Make minor repairs to house and furnishings • Make un-occupied bed • Recognize and report changes in health and environment • Identify medications for client • Provide companionship and emotional support • Prepare simple meals • Shop for food from verbal or written instruction • Observe and report symptoms of abuse, neglect, and illness to proper professional 	<ul style="list-style-type: none"> Communication Skills <ul style="list-style-type: none"> • Methods of communication • Maintaining control • Observing, documenting and reporting • Confidentiality Mental Health and Illness <ul style="list-style-type: none"> • Characteristics of good mental health • Personality differences Family Dynamics <ul style="list-style-type: none"> • Cultural and Ethnic Life-styles • Role of families in meeting individual needs Home Management Skills <ul style="list-style-type: none"> • Maintaining a clean and safe environment • Basic housekeeping • Shopping

- Clothing care and repair
- Paying bills

Food and Nutrition

- Role of nutrition in promoting good health
- Balanced meal preparation and food handling and storage

Disabled Adults

- Life long aging process
- Disabled persons as individuals
- Specific needs of older persons

Understanding Basic Human Needs

- Physical and psychological needs
- Needs hierarchy
- Client and Patient Rights

Medications

- Retrieve and identify medications for client
- Do's and don'ts of medication

Responding to Emergencies

- Fire
- Personal injury and sickness
- Observe and report systems of abuse, neglect, exploitation, illness, or unsafe environment to proper professionals
- Other dangers

Personal Hygiene (worker)

- Expectations regarding cleanliness, odors, smoking

Safety Measures

- Household safety tips
- Body mechanics for aides
- Transporting of client

Inappropriate Tasks

- Personal care
- Deviation from care plan
- Other inappropriate tasks

(b) Tasks to be performed and required competencies for In-Home Aides providing Level II - Home Management and Personal Care are as follows:

Tasks

Required Competencies

Home Management

- Assist in following budget prepared by case manager
- Assist to find and use community resources
- Perform reading and writing tasks
- Demonstrate and model simple altering and mending techniques
- Demonstrate and model housekeeping
- Assist in organizing household routines
- Assist in making or purchasing clothing or other household items
- Plan menus using food guide
- Assist with developing a market order and shopping
- Demonstrate and model food handling, preparation and storage

Personal Care

- Assist ambulatory client with mobility and toileting
- Provide care for normal, unbroken skin
- Assist with personal hygiene, (mouth care, hair and scalp grooming, fingernails and bathing; shower, tub, bed, basin)
Cut and trim hair
- Shave client (electric and safety razor)
- Provide basic first aid
- Apply ace bandages, TED's, binders (demonstrated competency verified by R.N.)
- Make occupied bed
- Assist limited function patient with dressing
- Observe, record and report self-administered medications
- Apply and remove prosthetic devices for stable clients (demonstrated competency verified by R.N.)
- Assist with feeding clients with special conditions (no swallowing difficulties)
- Assist and encourage physical activity and prescribed exercise

Communication Skills

- Roles of the service delivery team
- Plan of care
- Report writing

Mental Health and Illness

- Effects of stress
- Defense mechanisms
- Dementia

Family Dynamics

- Family life cycle
- Issues at each stage of life
- Effects of disruption

Home Management Skills

- Housekeeping techniques and routines
- Demonstrating and modeling homemaking tasks
- Working within a budget
- Clothing and household supply purchasing
- Knowledge and use of community resources

Food and Nutrition

- Planning menus from a food guide
- Developing a market order
- Principles of food preparation
- Following a prescribed diet

Ill and Disabled Adults

- Diseases of the elderly
- Coping with chronic illness

Special Care Skills

- Assist with feeding clients with special conditions (excluding swallowing difficulties)
- Application of ace bandage, TED's, binders
- Assist and encourage physical activity and prescribed exercise
- Assist ambulatory client

- Assist client with self-monitoring of temperature, pulse, blood pressure and weight (demonstrated competency verified by R.N.)

with mobility and toileting

- Assist limited function client with dressing
- Making occupied bed
- Assist with application and removal of prosthetic devices

Personal Hygiene (client)

- Assist with bathing (bed, tub, shower, basin)
- Assist with mouth care
- Assist with hair and scalp grooming (cut and trim hair)
- Assist with fingernail care (clean and file)
- Shaving clients (electric and safety razor)
- Normal skin care

Medications

- Reminding and reinforcing self-administered medications
- Observe, report, record self-administered medications

Abuse and Neglect

- Recognizing and reporting criteria (age specific)

Infection Control

- Preventing the spread of diseases
- Hand washing techniques

Basic First Aid

- Principles of cardio-pulmonary Resuscitation
- Taking temperature, pulse, height and weight
- Taking blood pressure

Inappropriate Tasks

(c) Tasks to be performed and required competencies for In-Home Aides providing Level III - Home Management and Level III - Personal Care are as follows:

Tasks

Home Management

- Demonstrate securing and caring for household furnishing
- Teach basic sewing and use of

Required Competencies

Communication Skills

- Promoting client independence
- Strategies for guiding,

sewing machine

- Demonstrate how to plan for a move, locate housing, and organize moving activities
- Teach and reinforce house-keeping methods, home safety, energy conservation, and sanitation skills
- Teach and reinforce personal hygiene and self care, reinforce sound health care practices, and personal safety techniques
- Take and accompany to medical appointments; reinforce special diet routines; monitor treatment plans
- Teach and reinforce household budgeting and planning skills; teach proper use of credit
- Demonstrate and reinforce comparison shopping and good consumer practices with food, clothing and furnishings
- Teach and reinforce management of time and resources, including work simplification techniques
- Teach and reinforce appropriate food handling and cooking skills
- Monitor and reinforce family progress on protective service plan goals

Personal Care

(Tasks subject to nurse supervision requirements of the Nursing Practice Act.)

- Assist with feeding clients with special conditions
- Give bed bath
- Make occupied bed
- Assist with mobility, gait training using assistive devices
- Assist with range of motion exercises
- Assist limited function patient with dressing
- Take and record temperature, pulse, blood pressure, height and weight, respirations
- Observe, record and report self-administered medications
- Apply and remove prosthetic

supporting, and encouraging

- Medical terminology
- Documentation

Mental Health and Illness

- Substance abuse
- Mental retardation
- Types of mental disorders

Principles of Adult Education

- How Adults Learn
- "Let's Do" teaching

Food and Nutrition

- Comparison Shopping
- Principles of therapeutic (specialized) diets
- Purchasing, planning and preparing therapeutic (specialized) diets
- Observing dietary treatment plans

Infection Control

- Isolation techniques
- Universal precautions
- Application in the home

Death and Dying

Personal Care Track

Personal Hygiene

- Bed bath
- Shampoo in bed
- Shave client with skin disorders
- Trim toenails (no diabetes or peripheral vascular disease)
- Perineal and catheter care

Treatment Techniques

- Assist with feeding clients with special conditions
- Force and restrict fluids
- Care of non-infected skin ulcers
- Clean dressing changes (non-sterile)
- Vaginal douches
- Apply prescribed heat and cold

devices for stable client

- Apply ace bandages, TED's, binders
- Assist with scalp care
- Trim toenails for clients without diabetes or peripheral vascular disease
- Empty and record drainage of catheter bag
- Shave clients with skin disorders
- Administer enemas
- Insert rectal tubes and flatus bags
- Bowel and bladder retraining
- Collect and test urine or fecal specimens
- Perineal care
- Apply condom catheters
- Chair and stretcher transfer
- Turn and position
- Safety measures (side rails, mitts, restraints)
- Change non-sterile dressings
- Force and restrict fluids
- Apply prescribed heat and cold
- Care for non-infected decubitus ulcers
- Assist clients in understanding medical orders and routines, encourage compliance
- Assist with purchase and preparation of diet food specified by professional
- Vaginal douches after instruction
- Assist with prescribed physical and occupational therapy
- Plan menus for special diets
- Monitor dietary treatment plan, provide feedback to professional

Tasks With Special Training
(Requires Nurse Aide II
registration with the NC Board
of Nursing)

- Administer gastrostomy tube feedings
- Perform in and out bladder catheterizations
- Change sterile dressings

- Assist client in understanding medical orders and routines, encourage compliance
- Intake and output
- Take respirations

Elimination and Treatment

- Empty and record drainage of catheter bag
- Bowel and bladder retraining
- Collect and test urine or fecal specimens
- Insert rectal tube and flatus bag
- Apply condom catheters
- Administer enemas
- Use of bedpans and urinals

Other Training Techniques

- Apply and remove EKG monitor leads
- Post mortem care
- Gastric suction (maintenance)
- Turn, cough and deep breath
- Restorative services

Body Mechanics

- Transfer techniques
- Use of lifts
- Assistive devices
- Assist with prescribed physical and occupational therapy

Safety Measures

- Side rails, mitts restraints

Basic First Aid

- Cardiopulmonary Resuscitation

Home Management Track

Home Management Skills

- Teaching housekeeping skills
- Planning and organizing moving activities
- Energy conservation
- Basic mending and sewing and use of sewing machine

- Home safety skills

Financial Management

- Setting family goals
- Developing a family budget
- Making good budgeting and spending choices
- Use of credit
- Consumer protection practices

Resource Management

- Securing and caring for household furnishings
- Teaching management of time and resources
- Locating housing
- Work simplification techniques

Self Care

- Personal hygiene and health care practices
- Personal safety techniques
- Following treatment plans

Family Dynamics

- Understanding dysfunction in families
- Impact of substance abuse
- Reinforce new skills and patterns in poorly functioning families

(d) Tasks to be performed and required competencies for In-Home Aides providing Level IV - Home Management are as follows:

Tasks

Home Management

- Provide supervision and role modeling of appropriate care and supervision when family is available but unable to perform caretaker duties due to physical or emotional illness (under close case supervision by social worker)
! Implement strategies developed on social work plan including arranging transportation, housing and other auxiliary services
(under close case supervision by social worker)
- Demonstrate management of food

Required Competencies

Family Dynamics

- Characteristics and interventions for multi problem families
- Impact of loss, separation
- Family violence
- Confrontation skills
- Principles of adult learning

Home Management Skills

- Planning moves
- Understanding eviction procedures
- Elimination of household

resources and menu planning (under close case supervision by social worker)

- Provide case tracking and follow up to social work staff by observing families in home environment
- Assist professionals in establishing and maintaining various client groups
- Provide tracking of household budgets with clients
- Identify indicators of risks to families and appropriately report to social worker

safety hazards relevant to client functioning

Protective Services

- Legal base and liability
- Factors of increased risk for abuse or neglect
- Indicators of mental and emotional functioning

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A; Eff. December 1, 1991; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

10A NCAC 06A .0306 TIME FRAMES FOR COMPLETING COMPETENCY REQUIREMENTS

The following time frames for completing competency requirements for each level of In-Home Aide Services shall apply:

- (1) Level I. Competency requirements consist of demonstration of knowledge and skills indicated for Level I tasks listed in Rule .0305 of this Section. Competency requirements for Level I must be met within one year of employment as a Level I aide.
- (2) Level II. Competency requirements consist of demonstration of knowledge and skills indicated for Level II tasks listed in Rule .0305 of this Section. Competency requirements for Level II must be met within one year of employment as a Level II aide.
- (3) Level III. This level is tracked for either Home Management or Personal Care and shall consist of the following competency requirements:
 - (a) Home Management Track. Competency requirements consist of demonstration of knowledge and skills indicated for Level III Home Management tasks listed in Rule .0305 of this Section. Competency requirements for Level III Home Management must be met within one year of employment at this level.
 - (b) Personal Care Track. Competency requirements consist of demonstration of knowledge and skills indicated for Level III Personal Care tasks and registration as a Nurse Aide I with the NC Board of Nursing. Level III Personal Care Tasks are listed in Rule .0305 of this Section. Aides performing Level III Personal Care tasks must complete training or competency testing, or both within four months of employment at this level.
- (4) Level IV. Competency requirements consist of demonstration of knowledge and skills indicated for Level IV tasks listed in Rule .0305 of this Section. Competency requirements for Level IV must be met within one year of employment as a Level IV aide.

History Note: Authority G.S. 143B-181.1(c); 143B-181.9A; Eff. December 1, 1991; Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.

10A NCAC 06A .0307 AIDE SUPERVISION

- (a) It is the responsibility of the agency providing the In-Home Aide Service to assure that supervision is given to all aides.
- (b) Regardless of the level of tasks performed, supervisory home visits must be made at least twice during the first month of the aide's employment.

- (c) Following the first month of the aide's employment, supervisory home visits must be made as follows:
- (1) Level I - at least quarterly;
 - (2) Level II - at least quarterly;
 - (3) Level III - at least every sixty days; and
 - (4) Level IV - at least every sixty days.
- (d) The frequency of aide supervision must be increased as needed to respond to the capabilities of the aide and the needs of the client.
- (e) Each service provider agency must assure at least some portion of the supervisory visits occur when the aide is providing care to clients.

*History Note: Authority G.S. 143B-181.1(c); 143B-181.9A;
Eff. December 1, 1991;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.*

10A NCAC 06A .0308 SELECTION OF AIDES

Agencies providing in-home aide services must have a written policy regarding who may serve as in-home aids. The written policy shall include, at a minimum, the following information about who may serve as in-home aides:

- (1) aides shall be 18 years of age or older or emancipated minors; and
- (2) aides shall be persons who have demonstrated competency to perform the tasks needed by the client; and
- (3) whether or not the agency allows the hiring of relatives to serve as the client's in-home aide. If the agency allows a relative to be the client's in-home aide, the policy must also contain the following requirements:
 - (a) that relatives of the client, for this purpose are either a parent, spouse, child, or sibling of the client including step relations of the client for any of those; and
 - (b) that the relative must have given up employment or the opportunity for employment in order to perform the tasks needed by the client; and
- (4) any other hiring guidelines established by the agency.

*History Note: Authority G.S. 143B-181.1(c); 143B-181.9A;
Eff. December 1, 1991;
Amended Eff. May 1, 1995;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.*

10A NCAC 06A .0309 CLIENT RECORDS

Records must be kept for each In-Home Aide Services client and must include:

- (1) documentation of request or authorization for services;
- (2) a copy of the completed initial assessment;
- (3) copies of all completed reassessments;
- (4) copies of the initial and any revised In-Home Aide Services Plans;
- (5) documentation of significant client information;
- (6) documentation of client eligibility;
- (7) documentation of quarterly reviews; and
- (8) documentation notifying client of service reduction, denial or termination.

*History Note: Authority G.S. 143B-181.1(c); 143B-181.9A;
Eff. December 1, 1991;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.*

10A NCAC 06A .0310 QUALITY ASSURANCE REQUIREMENTS

(a) All agencies providing In-Home Aide Services must be either licensed by the Department of Health and Human Services as a home care agency, or be certified or accredited through one of the following accreditation organizations, or other entities recognized by the Health and Human Services or the North Carolina Medical Care Commission:

- (1) North Carolina Accreditation Commission for In-Home Aide Services;
- (2) National Home Caring Council;
- (3) Joint Commission on Accreditation of HealthCare Organizations (Home Care accreditation); or
- (4) National League for Nursing.

(b) Licensure by the Health and Human Services is required by July 1, 1992 for agencies providing In-Home Aide Services at Level II - Home Management and Personal Care, Level III - Personal Care, or both. If the agency is certified or accredited as described in Paragraph (a) of this Rule, then the agency shall be given deemed status for licensure.

(c) Certification or accreditation by one of the accreditation organizations described in Paragraph (a) of this Rule is required by July 1, 1996 for agencies providing In-Home Aide Services at Level I - Home Management, Level III - Home Management, Level IV - Home Management, or any combination thereof. If the agency is licensed as a home care agency by the Health and Human Services, then certification or accreditation shall not be required.

*History Note: Authority G.S. 143B-181.1(c); 143B-181.9A;
Eff. December 1, 1991;
Pursuant to G.S. 150B-21.3A, rule is necessary without substantive public interest Eff. September 6, 2016.*