

California
Skilled
Home Health Agency
Licensed
Non-Accredited
Administrative
Policies *and* Procedures
Manual

3717 39th Ave. S.

Seattle, WA 98144

www.kenyonhcc.com

gkenyon@kenyonhcc.com

Tel: 206 721 5091

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POLICIES AND PROCEDURES MANUAL
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Ginny Kenyon RN, MN, Principal
Kenyon HomeCare Consulting
3717 39th Ave S
Seattle, WA 98144 USA
gkenyon@kenyonhcc.com

EDITING YOUR MANUAL

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There are several text placeholders that will need to be replaced with your agency's information. Text placeholders are as follows:

[AGENCY NAME] — Your agency's business name

[BUSINESS TYPE] — Your agency's business type

[STATE] — The state your agency is licensed in

[OPENING TIME] — Your agency's opening operating time

[CLOSING TIME] — Your agency's closing operating time

[GEOGRAPHIC COVERAGE AREA] — Your agency's geographic coverage area, including cities, towns, and/or counties

[HOLIDAYS OBSERVED] — Your agency's observed holidays that you will be closed for

[DOLLAR LIMIT] — Your agency's dollar limit within document

[JOB TITLE] — Your agency's Administrator title

[STATUS] — Your agency's status: for-profit or non-profit

To Find and Replace Text Placeholders:

1. On the Edit menu, click Replace.
2. In the Find what box, enter the placeholder text exactly as it is above that you want to search for.
3. In the Replace with box, enter the replacement text.
4. Click Find Next, Replace, or Replace All.
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To Update Table of Contents:

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1. Hold down CONTROL key, click the table of contents, and then click Update Field.
2. Click the option that you want.

ACCEPTANCE OF THE ADMINISTRATIVE POLICIES AND PROCEDURES MANUAL

I attest that the following administrative policies and procedures have been reviewed by me and have been accepted and approved by the Governing Body as the policies and procedures that guide the practices and services for [AGENCY NAME].

Owner/Administrator

Date

CALIFORNIA
SKILLED
HOME HEALTH AGENCY
LICENSED
NON-ACCREDITED
ADMINISTRATIVE
POLICIES AND PROCEDURES
MANUAL

REVISED JULY 1, 2024

This manual has incorporated the California State Title 22 Division 5 Chapter 6 for home health agency related definitions and regulations.

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ORGANIZATION AND ADMINISTRATION

MISSION STATEMENT

POLICY

The [AGENCY NAME]'s Governing Body has adopted a written mission statement that reflects its commitment to the provision of efficient, effective, quality home health care services to patients in the communities we serve. The agency will serve its patients with dignity and comfort, prioritize service goals based on patient/representative input, and deliver timely, coordinated, and culturally sensitive service. The agency shall not refuse service to or employment to or in any way discriminate against any person and shall remain in compliance with all federal and state Equal Opportunity and Affirmative Action regulations.

PURPOSE

To serve as the guiding principles for the agency's personnel, policies, procedures, services, and programs.

PROCEDURE

1. The mission statement is established with appropriate interdisciplinary team and administrative staff input and review and approved by the Governing Body.
2. The mission statement is reviewed, revised (if needed), and approved at least every 36 months by the Governing Body.
3. The mission statement is included in all orientations.
4. A written copy of the mission statement is available for patients or their representatives, referral sources, Department representatives, employees and other interested parties.

EXAMPLE

[AGENCY NAME] is dedicated to providing excellent and respectful home health care agency services to patients served in our communities that are provided by qualified and dedicated personnel in a fiscally responsible manner.

REFERENCES:

California Title 22/Division 5/ Chapter 6: 874717; 874721

WRITTEN ADMINISTRATIVE POLICIES DEVELOPMENT AND IMPLEMENTATION OF POLICIES AND PROCEDURES

DEFINITIONS

Policy: A statement of principles formulated, approved, and enforced by the Governing Body/designees to direct and limit its actions as related to a specific subject.

Procedure: A set of established steps or a prescribed method to be followed routinely for optimally effective achievement of a desired result.

POLICY

Administrative policies shall be established and implement by [AGENCY NAME].

[AGENCY NAME] follows an established process for the development, approval, implementation, and access to its policies and procedures. Policies will conform to local, state regulations and federal statutes, established for California Licensed Home Health Agencies..

Exceptions to the Governing Body approval of procedures may occur due to legal or regulatory mandates, mandates with an immediate-effective date, generally accepted clinical-based standards of practice, or manufacturer instructions for use and maintenance of agency equipment. The Administrator, collaborating with clinical management, will identify procedure approval exceptions.

The Administrator or designee(s) may develop or amend policies and procedures on as as-needed basis when required for the continuity of care and submit them for Governing Board approval.

The Governing Body will approve all new and revised policies and applicable procedures by electronic and/or written notation.

Policies and procedures will be reviewed and revised if needed at least annually by the Owner/Governing Board.

PURPOSE

1. To ensure a consistent methodology for the development, review, revision, approval and distribution of administrative and clinical policies and procedures.
2. To ensure accountability and responsibility in the oversight, review and approval of policies and procedures which direct the services of the agency.

PROCEDURE

1. A. Policies and procedures shall be reviewed and revised as necessary.

2. B. Policies and procedures shall be made available upon request to patients or their representatives upon request.
3. C. Policies and procedures shall be made available upon request to the Department representative.
4. D. Written administrative policies may be captured in three aligning areas:
 - a. a. Administrative policies and procedures delineate lines of authority and responsibilities for governance, planning, public communications, risk management, safety and security, and financial control of the agency.
 - b. b. Operational policies and procedures define compliance with federal, state, and local personnel management and employment regulations, infection control, emergency preparedness and contingency planning with interruptions to patient care.
 - c. c. Clinical policies and procedures are developed and implemented to ensure quality and safe care for patients. Agency patient care policies and procedures are developed by the clinical management with staff input, data analysis and approved by the Governing Body.
5. E. Policies include, and are not limited to the policy statement and agency procedures to ensure the intent of the policy statement:
 - a. A plan to handle medical emergencies
 - b. A statement that patients will be accepted for treatment or care on the basis of reasonable expectation that the patient's needs can be met by the agency;
 - c. Reasons for patient termination;
 - d. Clinical programs policies and procedures; infection
 - e. Infection management plan including policies designed to prevent, identify, and control infections
 - f. Provisions for a quality assessment and improvement program (QAPI);
 - g. Written personnel policies shall include qualifications, responsibilities, and conditions of employment for each type of personnel and shall be available to all personnel
 - h. Emergency/disaster preparedness plan; policies
 - i. Policy and procedures regarding patient records and computerized patient records, data security, privacy and confidentiality, advanced directives.

Policy Develop and Implementation

1. Policies and procedures may be generated by staff or management suggestions and may be assigned to an individual or committee for development. Input from

appropriate staff will be solicited during the development process. Outside consultants may be sought, when the policy involves greater subject expertise.

- a. A policy and procedure log or grid shall be maintained to capture changes and revisions and when applicable the date effective for regulatory compliance.
2. References should be cited in the development and revision of the policy and procedure and dated. Include the website or source of the reference, such as AFL, All Facilities Letter from , number date issued and effective date.
3. Policies and procedures will be written in a standardized format, maintained and organized for efficient reference and access by the Administrator or designee, accessible via the Internet, and available to authorized personnel during normal business hours.
 - a. Best Practice: Process flows, specific software instructions, agency u-tubs, references, etc. are encouraged to illustrate the intention of the policy and strengthen the procedure.
4. Upon review and approval, the President of the Governing Body will sign and date the "Acceptance of the Administrative Policies and Procedures Manual." This form will appear at the front of the manual or by electronic signature.
 - a. The date of review/revision should be entered on the policy.
 - b. Best Practice: Date of distribution to the respective departments, staff, clinicians should be noted in the policy and procedure log.
 - c. When the policy and procedure is provided in a staff/team meeting, attendance should be noted, the information filed.
 - i. If attendee is late or absent a make-up should be scheduled to provide for accountability with the employee or services by agreement personnel or their supervisor for distribution. .
5. If the annual review of policies and applicable procedures results in a revision, the revision follows the same approval process. Policy reviews will be documented on the policies updated and on any new ones that are developed.
6. Once approved, the Administrator will implement the policy by notifying affected persons and distributing related instructions (if needed) to affected entity managers for related staff education. If a policy or procedure requires competency testing to confirm new practice, the Administrator or designee will arrange for that competency testing.
7. Policies and procedures may be shared with community resources and facilities serving the agency patients for continuity of care, patients or their representatives, and federal, state, and local authorities upon request. Personnel will have access to all policies including personnel policies.

REFERENCES:

California Title 22/Division 5/Chapter 6 §74721