

PRIVATE HOME CARE PROVIDER RULES AND IG

TAGS	RULE	IG
0000 Initial Comments.	<p>DISCLAIMER: This is an unofficial copy of the rules that has been reformatted for the convenience of the public by the Department of Community Health. The official rules for this program are on record with the Georgia Secretary of State's office. The Secretary of State's website for reviewing the rules is http://rules.sos.state.ga.us/cgi-bin/page.cgi?d=1. Effort has been made to ensure the accuracy of this unofficial copy. The Department reserves the right to withdraw or correct text in this copy if deviations from the official text as published by the Georgia Secretary of State are found.</p>	<p>Clarification for Providers (This information is intended to clarify rules and to provide technical assistance and examples for providers. Such clarification and examples are subject to change from time to time as necessary to better reflect rule requirements. Any references to "Best Practices" are suggestions for raising the quality of care but are not requirements at this time. References to other related rules may be provided here to assist the reader in finding information.)</p>
0101 Legal Authority 290-5-54-.01	<p>These rules are adopted and published pursuant to the Official Code of Georgia Annotated (O.C.G.A.) Sec. 31-7-300 et seq.</p>	<p>The rules were last revised and took effect February 12, 2008.</p>
0201 Title and Purposes 290-5-54-.02	<p>These rules shall be known as the Rules and Regulations for Private Home Care Providers. The purposes of these rules are to provide for the licensing and inspection of private home care providers. Authority O.C.G.A. Sec. 31-7-300 et seq.</p>	
0301 Definitions 290-5-54-.03(a)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following:</p> <p>(a) "Ambulation and transfer" means the acts of moving or walking about or walking or being moved from place to place with or without assistance. ...</p>	<p>Ambulation and transfer may or may not require the use of assistive devices such as wheelchairs, walkers, lifts, supports, etc.</p>

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<p>0302 Definitions 290-5-54-.03(b)</p>	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following. . .</p> <p>(b) " Applicant " means:</p> <ol style="list-style-type: none"> 1. When the private home care provider is owned by a sole proprietorship, the individual proprietor shall be the applicant for the license, complete the statement of responsibility and serve as the licensee; 2. When the private home care provider is owned by a partnership, the general partners shall be the applicant for the license, complete the statement of responsibility and serve as the licensee; 3. When the private home care provider is owned by an association limited liability company (LLC), the governing body of the association or LLC shall authorize the application for the license and complete the statement of responsibility and the association shall serve as the licensee; and 4. When the private home care provider is owned by a corporation, the governing body of the corporation shall authorize the application for the license and complete the statement of responsibility and the corporation shall serve as the licensee. ... 	<p>Georgia corporations, limited liability companies and limited partnerships are formed by registering with the Georgia Secretary of State's Office, Corporations Division. Some foreign (out of state) entities that do business in the state of Georgia are required to file with the Corporations Division, as well. For additional information, please check the web site at www.sos.ga.gov.</p>
<p>0303 Definitions 290-5-54-.03(c)</p>	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(c) "Companion or sitter tasks" means the following tasks which are provided to elderly, handicapped, or convalescing individuals: transport and escort services; meal preparation and serving; and household tasks essential to cleanliness and safety. ...</p>	<ol style="list-style-type: none"> 1. Sitter services provided for healthy non-disabled individuals, such as babysitting services for children, are not regulated by these rules. 2. "Hands on" services, such as assistance with bathing, feeding, toileting, or assistance with ambulation or transfer are classified as personal care services and would require licensing for those services. 3. Companion or sitter tasks could also include reading or socializing with the client while providing watchful oversight. 4. A business that provides only housekeeping services, which could be provided with or without the client present and do not include any component for contact or oversight with the client, would not require licensure under these rules.

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0304 Definitions 290-5-54-.03(d)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(d) " Criminal history background check " means a search as required by law of the criminal records maintained by law enforcement authorities to determine whether the applicant has a criminal record as defined in these rules. ...</p>	
0305 Definitions 290-5-54-.03(e)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(e) " Criminal record " means:</p> <ol style="list-style-type: none"> 1. Conviction of a crime; or 2. Arrest, charge, and sentencing for a crime where: <ol style="list-style-type: none"> (i) A plea of nolo contendere was entered to the charge; or (ii) First offender treatment without adjudication of guilt pursuant to the charge was granted; or (iii) Adjudication or sentence was otherwise withheld or not entered on the charge; or 3. Arrest and being charged for a crime if the charge is pending, unless the time for prosecuting such crime has expired pursuant to Chapter 3 of Title 17 O.C.G.A. ... 	
0306 Definitions 290-5-54-.03(f)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(f) "Department" means the Department of Human Resources. ...</p>	Department by operation of law now means the Department of Community Health. See O.C.G.A. §31-7-308.
0307 Definitions 290-5-54-.03(g)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(g) "Director" means the chief administrative or executive officer or manager. ...</p>	

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0308 Definitions 290-5-54-.03(h)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(h) "Home health agency" means a facility licensed as a home health agency in accordance with the applicable licensing statutes and associated rules. ...</p>	PHCP may not advertise services as 'home health'. Refer to O.C.G.A. §10-1-393(b)(30)(B).
0309 Definitions 290-5-54-.03(i)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(i) "Home management" means those activities normally performed by a homemaker for the maintenance of a home's essential services, including but not limited to activities such as meal planning, shopping, and bill paying; any employee that is authorized unlimited access to a client's personal funds for home management shall be bonded through the provider. ...</p>	<p>Home management tasks would be considered companion or sitter tasks.</p> <p>Employees performing home management tasks which require access to a client 's personal funds are required to be bonded, either personally or by the provider.</p>
0310 Definitions 290-5-54-.03(j)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(j) "Housekeeping or housekeeping tasks" means those activities performed for the upkeep and cleanliness of the home, including but not limited to such activities as laundry, changing linens, trash disposal, and cleaning. ...</p>	See 290-5-54-.02(b) above. Businesses providing only household or housekeeping tasks for healthy or non-disabled individuals/families, which include no provisions for contact or watchful oversight with the client while services are provided, are not regulated by these rules.

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<p>0311 Definitions 290-5-54-.03(k)</p>	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(k) "Inspection" means any examination by the department or its representatives of a provider, including but not necessarily limited to the premises, and staff, persons in care, and documents pertinent to initial and continued licensing so that the department may determine whether a provider is operating in compliance with licensing requirements for has violated any licensing requirements. The term inspection includes any survey, monitoring visit, complaint investigation, or other inquiry conducted for the purposes of making a compliance determination with respect to licensing requirements. ...</p>	<p>All complaint and follow-up inspections are unannounced. The expectation is that during business hours a staff person will be available at the place of business at the time of surveyor entry or within one hour of the surveyor ' s arrival.</p>
<p>0312 Definitions 290-5-54-.03(l)</p>	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(l) "Medically frail or medically compromised client" means a client whose health status, as determined by appropriate provider staff in accordance with accepted standards of practice, is likely to change or has changed because of a disease process, injury, disability or advanced age and underlying disease processes). ...</p>	<p>The provider must have in place a process to determine whether clients may be medically frail and/or medically compromised (MF/MC). There should be evidence of initial and on-going assessments to identify clients who may be MF/MC. When information suggests that a client may be MF/MC, there must be evidence that a medically qualified provider staff (Licensed Nurse, Physician's Assistant, or Physician) has conducted an assessment to determine if the client is in fact MF/MC. Examples of clients who may be considered MF/MC include but are not limited to the following:</p> <ol style="list-style-type: none"> 1. Clients with cognitive and/or psychological conditions, severe developmental disabilities or traumatic injuries that are unstable; 2. Clients requiring gastric feeding tubes, intermittent catheterizations, ventilators, respirators, bowel care, or trach care; 3. Clients with unstable medical disorders such as diabetes where the blood sugars fluctuate frequently between high and low levels, hypertension where the blood pressure fluctuates frequently, congestive heart failure where the condition may deteriorate rapidly, seizure conditions, where the seizures are not controlled by medications and occur more than once per month, and other unstable chronic disease conditions; and 4. Clients with a high risk of skin breakdown.

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0313 Definitions 290-5-54-.03(m)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following. . .</p> <p>(m) "Medically related activities" means activities such as but not limited to observing and reporting changes in a client's condition, arranging trips to the doctor, picking up prescription drugs, accompanying clients on medical appointments, documenting client's food and/or liquid intake or output, reminding clients to take medication, and assisting with self-administration of medication; such activities shall not include professional services that are subject to regulation under professional practice and licensing statutes and associated rules.</p>	<p>" Medically related activities " as used in these rules does not include activities which by law must be performed by a nurse, such as administration of medication, wound care, ventilator care, deep suctioning of a tracheostomy, and g-tube care of new g-tube sites. Refer to the decision tree produced by the Georgia Board of Nursing for assistance in determining whether an activity must be performed by a nurse: http://www.sos.state.ga.us/plb/rn/decision_tree.htm).</p> <p>Some g-tube care for established g-tube sites, involving just the setting up and administration of the feeding, and cleaning around the surface of a g-tube or tracheostomy site, may be considered ' medically related activities ' and may be performed by properly trained personal care aides. Taking vital signs is also considered a " medically related activity".</p> <p>Administration of medication through a g-tube must always be performed by a nurse.</p>
0314 Definitions 290-5-54-.03(n)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(n) " Owner " means any individual or any person affiliated with the corporation, partnership, or association with 10 percent or greater ownership interest in a business or agency licensed as a private home care provider and who:</p> <ol style="list-style-type: none"> 1. Purports to or exercises authority of an owner in the business or agency; 2. Applies to operate or operates the business or agency; or 3. Enters into a contract to acquire ownership of such a business or agency. ... 	
0315 Definitions 290-5-54-.03(o)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following. . .</p> <p>(o) "Personal care home" means a facility licensed as a personal care home in accordance with the applicable licensing statutes and associated rules. ...</p>	

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<p>0316 Definitions 290-5-54-.03(p)</p>	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following. . .</p> <p>(p) "Personal care tasks" means assistance with bathing, toileting, grooming, shaving, dental care, dressing, and eating; and may include but are not limited to proper nutrition, home management, housekeeping tasks, ambulation and transfer, and medically related activities, including the taking of vital signs only in conjunction with the above tasks.</p>	<p>Provision of personal care tasks for healthy and nondisabled individuals, such as for normal children during babysitting or child care, are not regulated under these rules.</p> <p>Tasks are not considered personal care tasks if the client needs only a reminder and can perform the tasks independently (reminders would be considered companion or sitter tasks). However, clients who need close supervision and/or multiple verbal prompts and /or physical guidance through the performance of the task (e.g. " turn on the water " , " place your hands in the water " , etc.) to adequately complete personal care tasks or need assistance for safety reasons, may be considered receiving personal care services.</p>
<p>0317 Definitions 290-5-54-.03(q)</p>	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(q) "Private home care provider" means any person, business entity, corporation, or association, whether operated for profit or not for profit, that directly provides or makes provision for private home care services through:</p> <ol style="list-style-type: none"> 1. its own employees or agents; 2. contractual arrangements with independent contractors; or 3. referral of other persons to render home care services, when the individual making the referral has ownership or financial interest in the delivery of those services by those other persons who would deliver those services. ... 	<p>To meet the definition of a private home careprovider and to remain licensed, the provider must be actively engaged in the provision of services to clients.</p> <p>If the service is just a staffing service, consisting only of the referral of potential caregivers to interested individuals who pay a one-time referral fee to the service for a list of individuals who the requesting individual will interview, hire and schedule, the service is not subject to these rules.</p> <p>When the referring individual/business receives a fee for and is involved in the selection and/or scheduling of the caregiver, on a regular or intermittent basis, the service is subject to licensure.</p>

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<p>0318 Definitions 290-5-54-.03(r)</p>	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(r) "Private home care services" means those items and services provided at a patient's residence that involve direct care to that patient and includes, without limitation, any or all of the following:</p> <ol style="list-style-type: none"> 1. nursing services, provided that such services can only be provided by a person licensed as a Registered Professional Nurse or Licensed Practical Nurse in accordance with applicable professional licensing statutes and associated rules; 2. personal care tasks; and 3. companion or sitter tasks. 4. Private home care services shall not include physical, speech, or occupational therapy; medical nutrition therapy; medical social services; or home health aide services provided by a home health agency. ... 	<p>Only services provided at the client's residence (or from the client ' s residence, as running errands) are regulated under these rules. Services provided at or from any location other than the client's residence are not covered by these regulatory requirements.</p> <p>The PHCP license must include nursing services if they are providing nursing services, otherwise the PHCP is providing services beyond the scope of its license.</p> <p>The PHCP may not provide physical, speech, or occupational therapy, medical social services, or medical nutrition services.</p>
<p>0319 Definitions 290-5-54-.03(s)</p>	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(s) " Records check application " means two sets of classifiable fingerprints, a records search fee to be established by the department by rule and regulation, payable in such form as the department may direct to cover the cost of a fingerprint records check, and an affidavit by the applicant disclosing the nature and date of any arrest, charge, or conviction of the applicant for the violation of any law, except for motor vehicle parking violations, whether or not the violation occurred in this state, and such additional information as the department may require. ...</p>	

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0320 Definitions 290-5-54-.03(t)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(n) "Residence" means the place where an individual makes that person's permanent or temporary home, whether that person's own apartment or house, a friend or relative's home, or a personal care home, but shall not include a hospital, nursing home, hospice, or other health care facility licensed under Chapter 31-7-1 et seq</p>	<p>PHCP services can not replace services that are required to be provided by staff of personal care homes; however, PHCP services can provide additional personal services such as nursing visits.</p>
0321 Definitions 290-5-54-.03(u)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(o) "Responsible Party" means any person authorized in writing by the client or appointed by an appropriate court to act upon the client's behalf; the term shall include a family member of a physically or mentally impaired client unable to grant the above authorization</p>	
0322 Definitions 290-5-54-.03(v)	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(v) " Satisfactory criminal history background check determination " means a written determination that a person for whom a records check was performed was found to have no criminal record which includes one of the covered crimes outlined in O.C.G.A. Sec. 49-2-14.1 et seq., if applicable. ...</p>	

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<p>0323 Definitions 290-5-54-.03(w)</p>	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(w) "Transport and escort services" means accompanying clients or providing or arranging transportation for clients to places outside of their residences for purposes such as appointments, entertainment, exercise, recreation, shopping, or social activities. If the mode of transportation is not owned by the client and is operated by an employee of the provider, the provider shall either obtain a signed waiver by the client of any claims for damages arising out of the operation of the vehicle or make reasonable efforts to insure that there is current motor vehicle insurance that will provide medical coverage for the client, in the event that the vehicle is involved in an accident causing injuries to the client. ...</p>	<p>Transport and escort services for healthy individuals/families are not regulated by these rules.</p> <p>If the client is to be transported in the caregivers personal automobile, the provider must maintain evidence of one of the following:</p> <ul style="list-style-type: none"> - Documentation of current automobile insurance for the caregiver's vehicle that includes medical coverage for the client, or - A waiver, signed by the client and/or responsible party, for any claims for injury damages which could arise in the event the vehicle were involved in an accident.
<p>0324 Definitions 290-5-54-.03(x)</p>	<p>In these rules, unless the context otherwise requires, the words and phrases set forth herein shall mean the following ...</p> <p>(x) " Unsatisfactory criminal history background check determination " means a written determination that a person for whom a records check was performed has a criminal record which includes one of the covered crimes outlined in O.C.G.A. Sec. 49-2-14.1 et seq., if applicable. Authority O.C.G.A. Secs. 26-5-3, 31-7-300 et seq.</p>	<p>O.C.G.A. §31-2-14 now codifies the criminal records check requirements for owners of private home care provider programs.</p>

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0401 Governing Body 290-5-54-.04	Each private home care provider shall have a governing body empowered and responsible to determine all policies and procedures and to ensure compliance with these rules. Authority O.C.G.A. Secs. 26-5-3, 31-7-300 et seq.	The governing body may consist of one or more people, depending on the complexity of the agency. The governing body must ensure at a minimum, the development and implementation of the following policies and procedures: 1. Description of the scope of services offered and the type of clients served; 2. Obtaining written Service Agreements; 3. Maintenance and security of client records; 4. Procedures for service planning; 5. Documentation of services provided; 6. Rights and Responsibilities; 7. Handling and resolution of complaints. 8. The Quality Improvement program; and 9. Other policies and procedures related to compliance with these rule, such as those for personnel records.
0501 Licenses 290-5-54-.05(1)	No private home care provider shall operate without a license or provisional license issued by the department.	Out of state agencies doing business in Georgia by providing PHCP services to Georgia residents must be licensed to provide such services in Georgia. For a Georgia license to be issued, the applicant must maintain a functioning PHCP office in Georgia out of which the PHCP services are delivered.
0502 Licenses 290-5-54-.05(1)(a)	A license shall be issued and renewed periodically by the department upon a providers ' compliance with these rules and shall remain in force and effect until the license expires or is suspended, revoked or limited.	Licenses are renewed yearly. License holders must submit an updated application annually and pay the required annual fees prior to expiration of the license. If the license expires, the program will be considered to be operating without a license and and may be subject to higher renewal fees and/or adverse action.

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0503 Licenses 290-5-54-.05(1)(b)1.	<p>Prior to the issuance of any new license, the owner of the business or agency applying for the license shall be required to submit a records check application so as to permit the department to obtain a criminal history background check.</p> <p>1. An owner may not be required to submit a records check application if a determination is made by the department that the owner does not do any of the following:</p> <ul style="list-style-type: none"> (i) Maintains an office at the location where services are provided to clients; (ii) Resides at a location where services are provided to clients; (iii) Has direct access to persons receiving care; nor (iv) Provides direct personal supervision of personnel by being immediately available to provide assistance and direction during the time services are being provided. 	
0508 Licenses 290-5-54-.05(1)(b)2.	<p>In lieu of a records check application, the owner may submit evidence, satisfactory to the department, that within the immediately preceding 12 months the owner has received a satisfactory criminal records check determination.</p>	

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0509 Licenses 290-5-54-.05(1)(c)	<p>A private home care provider license shall not be issued, and any issued license shall be revoked, where it has been determined that the owner has received an unsatisfactory criminal records check determination involving any of the following covered crimes, as outlined in O.C.G.A. 49-2-14.1 et seq.:</p> <ol style="list-style-type: none"> 1. A violation of Code Section 16-5-1, relating to murder and felony murder; 2. A violation of Code Section 16-5-21, relating to aggravated assault; 3. A violation of Code Section 16-5-70, relating to aggravated battery; 4. A violation of Code Section 16-5-70 relating to cruelty to children; 5. A violation of Code Section 16-5-100, relating to cruelty to a person 65 year of age or older; 6. A violation of Code Section 16-6-1, relating to rape; 7. A violation of Code Section 16-6-2, relating to aggravated sodomy; 8. A violation of Code Section 16-6-4, relating to child molestation; 9. A violation of Code Section 16-6-5, relating to enticing a child for indecent purposes; 10. A violation of Code Section 16-6-5.1, relating to sexual assault against persons in custody, detained persons, or patients in hospitals or other institutions; 11. A violation of Code Section 16-6-22.2, relating to aggravated sexual battery; 12. A violation of Code Section 16-8-41, relating to armed robbery; 13. A violation of Code Section 30-5-8, relating to abuse, neglect, or exploitation of a disabled adult or elder person; or 14. Any other offense committed in another jurisdiction that, if committed in this state, would be deemed to be a crime listed in this paragraph without regard to its designation elsewhere; 	<p>Applicable Georgia Code Section is now O.C.G.A. §31-2-14.</p>
0523 Licenses 290-5-54-.05(1)(d)	<p>An owner holding a valid private home care provider license issued on or before June 30, 2007 shall be required to obtain a fingerprint records check determination no later than December 31, 2008.</p>	

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0524 Licenses 290-5-54-.05(1)(d)1.	An owner holding a valid private home care provider license issued on or before June 30, 2007 who has received an unsatisfactory criminal records determination which includes any one of the covered crimes listed in Rule .05(c)(1)-(14) above, shall not have the license revoked prior to a hearing being held before a hearing officer pursuant to Chapter 13 of Title 50, the ' Georgia Administrative Procedures Act ' .	
0525 Licenses 290-5-54-.05(1)(d)2.	An owner with a valid private home care provider license who acquires a criminal record for any of the crimes listed in Rule .14(7)(c)(1)-(14) above subsequent to the effective date of these rules shall disclose the criminal record to the department.	
0526 Licenses 290-5-54-.05(1)(e)	If at any time the department has reason to believe an owner holding a valid license has been arrested, charged, or convicted of any of the covered crimes listed in Rule .14(7)(c)(1)-(14) above, the department shall require the owner to submit a records check application immediately for determination of whether a revocation action is necessary.	
0527 Licenses 290-5-54-.05(1)(f)	A provisional license may be issued by the department on a conditional basis for one of the following reasons: 1. To allow a newly established provider a reasonable, but limited, time to demonstrate that its operational procedures comply with these rules; or 2. To allow an existing provider a reasonable length of time to comply with these rules and regulations, provided that the provider shall present a plan of improvement acceptable to the department.	Provisional licenses will be issued at the department's discretion.

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0528 Licenses 290-5-54-.05(2)	Qualifications Requirement. In order to obtain or retain a license or provisional license, the provider's administrator and its employees must be qualified, as defined in these rules, to direct or work in a program. However, the department may require additional reasonable verification of the qualifications of the administrator and employees either at the time of application for a license or provisional license or at any time during the license period whenever the department has reason to believe that an administrator or employee is not qualified under these rules to direct or work in a program.	Additional verification of qualifications may include review of professional licenses, education documents and training certificates, employee evaluations, driving licenses, criminal record reviews, reference checks, complaint logs, staffing schedules, or interview and/or observation of staff. Personnel files will be reviewed to see if personnel licenses, certifications or registrations are up to date and to determine how the PHCP ensures that all professional employees and personnel used under arrangement and by contract have current licenses and/or registrations.
0529 Licenses 290-5-54-.05(2)(a)	If a governing body maintains offices as a private home care provider in more than one location, then each location shall be separately licensed.	Any location from which coordination of care is provided and/or where current client and/or employee records are kept must be separately licensed. The locations to be licensed must be in Georgia.
0530 Licenses 290-5-54-.05(2)(b)	The license shall be prominently and appropriately displayed at the private home care providers licensed location.	
0531 Licenses 290-5-54-.05(2)(c)	No license issued under these rules is assignable or transferable. Each license or provisional license shall be returned to the department in cases of changes in name, location, ownership or governing body or if suspended, revoked, or limited. The department shall be provided 15 days notice in advance of any providers change in location. Authority O.C.G.A. Sec. 31-7-300 et seq.	The license is issued to operate the PHCP at the specific address in Georgia listed on the license. If the owner desires to move during the year, the owner must notify the Department 15 days prior to the change in location of the business office within Georgia so that an amended license with the new address may be issued. When there is a change of ownership, the new owner must apply for licensure and pay the appropriate fees, as applicable. If the PHCP is a corporation and the corporation does not change, i.e. a stock purchase, the tax ID does not change, then generally no change of ownership has occurred. If the PHCP is individually owned and is purchased by another entity, a change of ownership has occurred. Applications for renewal will be reviewed to determine whether there are any inconsistencies relative to name, location, or governing body.

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<p>0601 Applications 290-5-54-.06(1)</p>	<p>Initial applications for a license as a private home care provider must be submitted to the department on forms provided by the department, and shall include the submission of an application fee and a license fee established by the Board of Human Resources, and a records check application for the owner. Such application shall include a description of the private home care provider services to be offered by the applicant and the geographic area that will be served.</p>	<p>Applicants begin by requesting an application from the Home Care Unit of the Healthcare Facility Regulation Division, Department of Community Health. Instruction for initial application will be included with the application packet. Applicants are required to submit a completed application packet with copies of specific operations-related documents for office review, in order to be considered for a provisional license, which will allow the provider to enroll clients and begin providing services. All applicable fees must be paid at the time of application. When the provider is issued the provisional license and has provided services to clients, the initial inspection will be performed to determine eligibility for a regular license. Once compliance is assured, a regular license will be issued. The applicant must maintain a PHCP business location in Georgia to be eligible for licensing.</p> <p>The geographic area that will be served will not appear on the license. This information will be included on the application and will be maintained in the Department.</p> <p>Fees may be refunded for good cause as determined by the department.</p>
<p>0602 Applications 290-5-54-.06(2)</p>	<p>Renewal of Licenses. Licenses shall be renewed by the department periodically from the date of initial issuance upon submission of a renewal application, and a license renewal fee established by the Board of Human Resources. Such renewal application shall include a description of the private home care provider services offered by the licensee and the geographic area served.</p>	<p>License holders must submit an updated application annually to the Health Care Facility Regulation Division, Department of Community Health and pay the required annual fees prior to expiration of the license. If the license expires, the program will be considered to be operating without a license and may be subject to higher renewal fees and/or adverse action. Responsibility for the regulation of private home care providers was transferred to the Department of Community Health by law found at O.C.G.A. §§31-2-5 and 31-7-300.</p> <p>In addition, license holders are expected to ensure that contact information, such as phone numbers, on file with the application is current.</p>
<p>0603 Applications 290-5-54-.06(3)</p>	<p>Fees. Fees shall be reasonable and shall be set so that the total of the fees approximates the total of the direct and indirect costs to the state of the licensing program. Fees may be refunded for good cause as determined by the department.</p>	

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0604 Applications 290-5-54-.06(4)	False or Misleading Information. The application for any license or renewal must be truthfully and fully completed. In the event that the department has reason to believe that any application has not been completed truthfully, the department may require additional reasonable verification for the facts alleged. The department may refuse to issue or renew any license where false statements have been made in connection with the application or any other documents required by the department. Authority O.C.G.A. Secs. 31-2-6, 31-7-300 et seq.	Review the application for comparison with actual services provided and accuracy of names, addresses and phone numbers.
0701 Exemptions 290-5-54-.07(1)(a)	These rules shall not apply to private home care services which are provided under the following conditions: (a) When those services are provided directly by an individual, either with or without compensation, and not by agents or employees of the individual and not through independent contractors or referral arrangements made by an individual who has ownership or financial interest in the delivery of those services by others who would deliver those services. ...	
0702 Exemptions 290-5-54-.07(1)(b)	These rules shall not apply to private home care services which are provided under the following conditions: ... (b) When those services are home infusion therapy services and the intermittent skilled nursing care is provided only as an integral part of the delivery and infusion of pharmaceuticals; however, such skilled nursing care, whether hourly or intermittent, which provides care licensed by these rules beyond the basic delivery and infusion of pharmaceuticals is not exempt; ...	Those skilled nursing services, personal care services or companion/sitter services not directly related to infusion are subject to PHCP regulations.

TAGS	RULE	IG
0703 Exemptions 290-5-54-.07(1)(c)	<p>These rules shall not apply to private home care services which are provided under the following conditions: ...</p> <p>(c) When those services are provided through the temporary placement of professionals and paraprofessionals to perform those services in places other than a persons residence; ...</p>	
0704 Exemptions 290-5-54-.07(1)(d)	<p>These rules shall not apply to private home care services which are provided under the following conditions: ...</p> <p>(d) When those services are provided by home health agencies which are licensed under state law; ...</p>	
0705 Exemptions 290-5-54-.07(1)(e)	<p>These rules shall not apply to private home care services which are provided under the following conditions:</p> <p>(e) When those services are provided in a personal care home by the staff of the personal care home; ...</p>	<p>These rules were not intended to cover those services allowable under the Personal Care Homes rule and can be provided by personal care home staff.</p>
0706 Exemptions 290-5-54-.07(1)(f)	<p>These rules shall not apply to private home care services which are provided under the following conditions: ...</p> <p>(f) When those services are services within the scope of practice of pharmacy and provided by persons licensed to practice pharmacy. ...</p>	
0707 Exemptions 290-5-54-.07(1)(g)	RESERVED.	<p>g) O.C.G.A § 31-7-305(7) provides the following additional exemption: "When those services are provided directly by an individual on a volunteer basis through a senior volunteer program, which includes the foster grandparent program, the senior companion program, and the retired and senior volunteer program. In no case shall there be remuneration to any person, firm, corporation, or volunteer for services rendered or coordination of services in conjunction with the senior volunteer program or the foster grandparent program.</p>

TAGS	RULE	IG
0708 Exemptions 290-5-54-.07(2)	A certificate of need issued pursuant to O.C.G.A. Sec. 31-6-1 et seq. is not required for licensure so long as the provider does not operate as a licensed home health agency or personal care home. Authority O.C.G.A. Secs. 31-7-305, 31-7-307.	
0801 Inspections and Plans of Correction 290-5-54-.08(1)	Providers shall be inspected by the department periodically; provided, however, the department may exempt a provider from such periodic inspections if it is certified or accredited by a certification or accreditation entity recognized and approved by the department.	<p>The accrediting organizations currently recognized by the Department are:</p> <ul style="list-style-type: none"> - The Joint Commission on Accreditation of Healthcare Organizations (JCAHO); - Community Health Accreditation Program (CHAP) . <p>The agency must submit proof that the certification and /or accreditation organization reviewed the agency under a set of standards related to the services the agency provides. For example, the JCAHO accredits many healthcare organizations; however, to be deemed for the Private Home Care Provider rules, a set of standards related to Private Home Care must be used.</p>
0802 Inspections and Plans of Correction 290-5-54-.08(1)(a)	A provider seeking exemption from on-site inspection shall be required to submit to the department documentation of certification or accreditation, including a copy of its most recent certification or accreditation report.	
0803 Inspections and Plans of Correction 290-5-54-.08(1)(b)	Nothing contained herein shall be construed to prohibit the department from conducting inspections of any provider as the department determines necessary.	

TAGS	RULE	IG
0804 Inspections and Plans of Corrections 290-5-54-.08(2)	Consent to Entry and Access. An application for a license or the issuance and renewal of any license by the department constitutes consent by the applicant or licensee and the owner of the premises for the department's representatives, to enter the premises for the purpose of conducting any inspection during regular business hours.	The Department generally schedules routine/periodic inspections in advance, but is not required to do so. Complaint investigations and follow-up inspections are always unannounced and access to the business address of the licensed PHCP as it appears on the Georgia license during regular business hours is required. Regular business hours are considered to be 9 AM to 5 PM, Monday through Friday and any additional times when the PHCP staff is operating at the business location listed on the license. NOTE: If the provider changes the location of the PHCP from the one listed on the license, it must notify the Department in writing of the change. The new location must also be located in Georgia.
0805 Inspections and Plans of Correction 290-5-54-.08(2)(a)	Department representatives shall be allowed reasonable and meaningful access to the provider's premises, all records relevant to licensure and all provider staff. Providers shall assist and cooperate in arranging for department representatives to have meaningful access to provider's clients who consent to be interviewed by department representatives in connection with any licensure activity.	For announced inspections, access to the provider's premises, as identified on the PHCP license must be provided at the scheduled time. For unannounced inspections, access must be provided immediately if personnel are in the office at the time the surveyor arrives, or no later than one hour after the arrival of the surveyor at the office location.
0806 Inspections and Plans of Correction 290-5-54-.08(3)	Cooperation with Inspection. All provider staff shall cooperate with any inspection conducted by the department and shall provide, without unreasonable delay, any documents to which the department is entitled hereunder.	The representative of the Department is entitled to review and obtain photocopies or duplicates of any documents related to the PHCP program and the services provided, including but not limited to client and employee information. Requested photocopies must be provided at no charge to the Department. ' Without unreasonable delay ' is interpreted by the Department to mean the requested documents must be provided without delay if physically located where the surveyor is . If document are in another location, then the documents shall be produced within one hour of the surveyor's request.

TAGS	RULE	IG
0807 Inspections and Plans of Correction 290-5-54-.08(4)	<p>If as a result of the inspection, violations of these licensure regulations are identified, the provider will be given a written report of the inspection which identifies the licensure regulations violated. The provider must submit a written plan of correction (improvement) in response to the inspection report which states what the provider will do when to correct each of the violations identified. The provider may offer any explanation or dispute the findings of violations in the written plan of correction so long as an acceptable plan of correction is submitted within ten days of the receipt of the written report of licensure inspection. Authority O.C.G.A. Secs. 31-2-6, 31-7-300 et seq.</p>	<p>The provider must submit to the Department a written plan of correction (POC) within ten (10) working days of receipt of a statement of deficiencies (violations). The plan must be completed as described in the accompanying instructions, and signed and dated by the appropriate management staff.</p> <p>If the POC is not acceptable, the provider will be notified and must submit an acceptable POC within 48 hours of such notification.</p>
0901 Administration and Organization 290-5-54-.09(1)	<p>Services Description. A provider shall establish and implement written policies and procedures that define the scope of private home care services it offers and the types of clients it serves. No provider shall provide services that are prohibited by these rules, the applicable legal authority, or other laws.</p>	
0902 Administration and Organization 290-5-54-.09(2)	<p>Service Agreements. No provider shall offer to provide a client any private home care services that it cannot reasonably expect to deliver in accordance with these rules.</p>	<p>The service agreement must be between the client and the PHCP actually providing the services at the client ' s residence. Service agreements with third parties are not acceptable.</p>

TAGS	RULE	IG
0903 Administration and Organization 290-5-54-.09(2)(a)	A provider shall establish and implement policies and procedures for service agreements. All services provided to a client shall be based on a written service agreement entered into with the client or the client's responsible party, if applicable.	<p>Written policies and procedures must specify that all PHCP services are provided only in accordance with a written service agreement established with the client and/or responsible party.</p> <p>Policies should also specify the procedure and tools for establishing and implementing the service agreement and include the assignment of responsibility.</p> <p>If the provider offers PRN (as needed) and/or very short-term services (no more than 2 visits within a 7 day period), then their policies and procedures must address their practice regarding service agreements in these situations, such as, when the service is ongoing or intermittent. A service agreement should be obtained by the second visit.</p>
0904 Administration and Organization 290-5-54-.09(2)(a)1.	<p>The service agreement must include the following:</p> <ol style="list-style-type: none"> 1. Date that provider makes initial contact with client for services; ... 	<p>This is the date the PHCP contacts the client by phone or in person to offer services.</p>
0905 Administration and Organization 290-5-54-.09(2)(a)2.	<p>The service agreement must include the following: ...</p> <ol style="list-style-type: none"> 2. Date of referral, i.e. the date on which the provider received a specific request to deliver private home care services to a particular client; ... 	
0906 Administration and Organization 290-5-54-.09(2)(a)3.	<p>The service agreement must include the following: ...</p> <ol style="list-style-type: none"> 3. Description of services needed as stated by client or responsible party, if applicable; ... 	<p>The client or their representative is asked to describe what service activities they want from the provider, and this description is entered on the service agreement. Descriptions should be specific, e.g. help in and out of bed, bathing, getting dressed, etc.</p>

TAGS	RULE	IG
0907 Administration and Organization 290-5-54-.09(2)(a)4.	<p>The service agreement must include the following: ...</p> <p>4. Description of services to be provided and expected frequency and duration of services; ...</p>	<p>The services listed in the agreement to be provided in the home must be limited to the three services allowed for in these rules and for which the PHCP is licensed. For example, the services might be described as companion or sitter tasks, personal care tasks, and/or nursing services, depending on the needs of the client.</p> <p>Another example, if "supportive services" is the terminology utilized by a third party payer, the description on the service agreement must still be stated in terms of the service(s) for which the PHCP is licensed: companion or sitter tasks, personal care tasks, and/or nursing services.</p> <p>The agreement should include how often visits will be made to the residence (e.g. three times per week), and the anticipated duration of each visit.</p> <p>Updates/changes to service agreements should be documented in the client's record in a manner that is easily accessible.</p>
0908 Administration and Organization 290-5-54-.09(2)(a)5.	<p>The service agreement must include the following: ...</p> <p>5. Charges for such services, and mechanisms for billing and payment of such charges; ...</p>	<p>The agreement must contain the amount of charges (hourly or total) for the services to be provided to the client, regardless of payor source.</p>
0909 Administration and Organization 290-5-54-.09(2)(a)6.	<p>The service agreement must include the following: ...</p> <p>6. Acknowledgment of receipt of a copy of client's rights and responsibilities as outlined at rule .12; ...</p>	<p>This may be done on a separate form.</p>
0910 Administration and Organization 290-5-54-.09(2)(a)7.	<p>The service agreement must include the following: ...</p> <p>7. A telephone number of the provider that a client can call for information, questions, or complaints about services supplied by the provider; ...</p>	<p>If provided on the signed Rights & Responsibilities document, the telephone number would not be required on the service agreement.</p>

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0911 Administration and Organization 290-5-54-.09(2)(a)8.	<p>The service agreement must include the following: ...</p> <p>8. The telephone number of the state licensing authority, i.e. the department, to call for information or questions about the provider concerning a violation of licensing requirements that was not resolved to the client's satisfaction by complaining to the provider; ...</p>	<p>PHCP clients should be given the main number for the Licensure and Certification Section of the Healthcare Facility Regulation Division, Department of Community Health (404-657-5550) for information about licensing requirements.</p> <p>The number to lodge complaints about provider services is 404-657-5728.</p> <p>See also L1211 Client's Right.</p>
0912 Administration and Organization 290-5-54-.09(2)(a)9.	<p>The service agreement must include the following: ...</p> <p>9. Authorization from client or responsible party, if applicable, for access to client's personal funds when home management services are to be provided and when those services include assistance with bill paying or any activities, such as shopping, that involve access to or use of such funds; similarly approved authorization for use of client's motor vehicle when services to be provided include transport and escort services and when the client's personal vehicle will be used;</p>	<p>Prior to the establishment of the Service Agreement, the provider should attempt to determine if the client has a Responsible Party and has executed any written document designating a Responsible Party or has had a legal guardian appointed by the court. If unable to determine if client has a responsible party or guardian, efforts made to determine the status should be documented. It should be documented in the client ' s record whether the client represents himself or whether another designated responsible party represents the client for the purposed of authorizations.</p> <p>The service agreement should always reflect whether or not the PHCP employees are to have access or use of any client funds, including creditcards, or of the client ' s car..If so, there must be special written authorization for such use or access in the client ' s record. Refer to L0944 regarding the requirement for bonding for any provider whose employees have access to client ' s funds or car.</p> <p>Transport and escort services' for healthy individuals/families are not considered PHCP services.</p>
0913 Administration and Organization 290-5-54-.09(2)(a)10.	<p>The service agreement must include the following: ...</p> <p>10. Signatures for the provider's representative and the client or responsible party, if applicable, and date signed; if a client or responsible party refuses to sign the agreement, such refusal shall be noted on the agreement with an explanation from the provider's representative.</p>	<p>The provider's representative may be any staff member designated by the administrator to initiate the service agreement.</p>

TAGS	RULE	IG
0914 Administration and Organization 290-5-54-.09(2)(b)	For new clients, such initial service agreements shall be completed not later than the second visit to the client's residence to provide services if the second visit occurs on a different day from the first visit or not later than seven calendar days after services are initially provided in the residence, whichever is earlier.	If all services are provided within seven calendar days and then discontinued, no service agreement is required by these rules.
0915 Administration and Organization 290-5-54-.09(2)(b)1.	If the provider is unable to complete the service agreement for good cause, the provider will document such reason(s) in the client's file.	
0916 Administration and Organization 290-5-54-.09(2)(b)2.	Subsequent revisions to the initial service agreement may be handled by the provider noting in the client's record the specific changes in service (e.g. addition or deletion of service, changes in frequency, or duration, or charge for services, etc.) that will occur and that the change was discussed with and agreed to by the client and/or responsible party, as appropriate, who signed the initial agreement prior to the change in services occurring.	
0917 Administration and Organization 290-5-54-.09(2)(c)	A client has the right to cancel any service agreement at any time and shall only be charged for services actually rendered prior to the time that the provider is notified of the cancellation. The provider may assess a reasonable charge for travel and staff time if notice of the cancellation of the service agreement is not provided in time to cancel the service prior to the provider's staff member arriving at the client's house to perform the service.	When adequate notice has been given, the client should not be charged for travel and staff time because the provider was unable to contact the staff.
0918 Administration and Organization 290-5-54-.09(3)	Administrator. The governing body shall appoint an administrator who shall have full authority and responsibility for the operation of the private home care provider.	

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0919 Administration and Organization 290-5-54-.09(3)(a)1.	Any administrator employed after the effective date of these rules must meet the following minimum qualifications: 1. Never have been shown by credible evidence (e.g. a court or jury, a department investigation, or other reliable evidence) to have abused, neglected, sexually assaulted, exploited, or deprived any person or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct as evidenced by an oral or written statement to this effect obtained at the time of application; ...	A criminal records check may be used to partially meet this requirement, but it must be supplemented with other evidence. There must be, in addition, a signed affidavit in the administrator ' s file to reflect that they have never been found to have participated in the types of misconduct described by this rule.
0920 Administration and Organization 290-5-54-.09(3)(a)2.	Any administrator employed after the effective date of these rules must meet the following minimum qualifications: ... 2. Participate in the orientation and training required by these rules; ...	There should be evidence that the administrator received orientation and training as required by these rules as described at L0966.
0921 Administration and Organization 290-5-54-.09(3)(a)3.	Any administrator employed after the effective date of these rules must meet the following minimum qualifications: ... 3. Not have made any material false statements concerning qualifications requirements either to the department or the provider.	
0922 Administration and Organization 290-5-54-.09(4)(a)	Record keeping. (a) Client Records. A provider shall maintain a separate file containing all written records pertaining to the services provided for each client that it serves[.] ...	Each client must have a separate file on site, even if they live together, are served on the same day, and are billed together. Client files must be kept in the licensed program ' s business office as reflected on the PHCP license issued by the Department and protected according to the requirements in L0937.
0923 Administration and Organization 290-5-54-.09(4)(a)1.	The [client] file shall contain the following: 1. Identifying information including name, address, telephone number, and responsible party, if any; ...	

TAGS	RULE	IG
0924 Administration and Organization 290-5-54-.09(4)(a)2.	The [client] file shall contain the following: ... 2. Current service agreement as described at rule .09(2); ...	
0925 Administration and Organization 290-5-54-.09(4)(a)3.	The [client] file shall contain the following: ... 3. Current service plan as described at rule .11; ...	
0926 Administration and Organization 290-5-54-.09(4)(a)4.	The [client] file shall contain the following: ... 4. Clinical and/or progress notes if the client is receiving nursing services that have been signed and dated by the staff providing the direct care; ...	Nursing clinical and/or progress notes should be sufficient to determine the care provided and the patient's progress and response to the care provided. See 290-5-54-.09(4) and L1018. Signatures must be legible, or have the individual ' s name printed legibly beside the signature.
0927 Administration and Organization 290-5-54-.09(4)(a)5.	The [client] file shall contain the following: ... 5. Documentation of personal care tasks and companion or sitter tasks actually performed for the client; ...	Staff must document each specific task performed for the client each time the task is performed, such as assistance with bathing, toileting, and shaving rather than documenting performance in a general area such as personal hygiene, grooming, activities of daily living (ADL's), etc. A check-list is acceptable. See L1018. There must be documented an explanation for any tasks not performed as scheduled or visits not made as scheduled.
0928 Administration and Organization 290-5-54-.09(4)(a)6.	The [client] file shall contain the following: ... 6. Documentation of findings of home supervisory visits by the supervisor unless entered in service plan; ...	See L1013 and L1016 for supervisor assessment/observation requirements.
0929 Administration and Organization 290-5-54-.09(4)(a)7.	The [client] file shall contain the following: ... 7. Any material reports from or about the client that relate to the care being provided to the client including items such as progress notes and problems reported by employees of the provider, communications with personal physicians or other health care providers, communications with family members or responsible parties, or similar items; ...	Physician orders for nursing tasks must be current and in the client ' s record.

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0930 Administration and Organization 290-5-54-.09(4)(a)8.	The [client] file shall contain the following: ... 8. The names, addresses, and telephone numbers of the client's personal physicians, if any; ...	
0931 Administration and Organization 290-5-54-.09(4)(a)9.	The [client] file shall contain the following: ... 9. Date and source of referral.	
0932 Administration and Organization 290-5-54-.09(4)(b)	Retention and Confidentiality of Client Records. Written policies and procedures shall be established and implemented for the maintenance and security of client records specifying who shall supervise the maintenance of records, who shall have custody of records, to whom records may be released and for what purposes and how long the records will be retained.	Client records must be kept in the PHCP office, not in the clients ' homes. The provider should have and adhere to timelines for timely submission of tasksheets for inclusion into client records. During an inspection, client records must be available for review by the surveyor if not immediately then within no later than one hour of request. Records of discharged clients must be maintained in a readily retrievable manner for a period of twelve (12) months from the last service date for the client.
0933 Administration and Organization 290-5-54-.09(4)(b)1.	At a minimum, all client records shall be retained for five years from the date of last service provided. The provider shall maintain the confidentiality of client records.	
0934 Administration and Organization 290-5-54-.09(4)(b)2.	Employees of the provider shall not disclose or knowingly permit the disclosure of any information in a client record except to appropriate provider staff, the client, responsible party (if applicable), the client's physician or other health care provider, the department, other individuals authorized by the client in writing or by subpoena.	
0935 Administration and Organization 290-5-54-.09(4)(c)	Personnel Records. A provider shall maintain separate written records for each employee[.] ...	Any person providing services in the client ' s home as arranged by the PHCP must have a complete employee record at the PHCP office, including contracted personnel. Records kept at a staffing agency are not sufficient to assure that the individual meets the requirements of the PHCP and these rules.

TAGS	RULE	IG
0936 Administration and Organization 290-5-54-.09(4)(c)1.	[Personnel] records shall include the following: 1. Identifying information such as name, address, telephone number, and emergency contact person(s); ...	
0937 Administration and Organization 290-5-54-.09(4)(c)2.	[Personnel] records shall include the following: ... 2. A five year employment history or a complete employment history if the person has not been employed five years; ...	
0938 Administration and Organization 290-5-54-.09(4)(c)3.	[Personnel] records shall include the following: ... 3. Records of qualifications; ...	Evidence of qualifications includes but is not limited to copies of current Georgia nursing licenses, letters from the Department specifying that the person is on the Georgia Nurse Aide Registry, score sheets from approved nurse aide skills test along with competency testing check sheets, or evidence of successful completion of a 40 hour training program as described in L0953 and competency testing check sheets. General minimum qualifications for all employees are described in L0947-0950. Additional minimal qualifications for personal care aides are described in L0953. Additional minimum qualifications for employees providing nursing services are described in L0951. Additional minimum qualifications for employees providing companion or sitter services are described in L0964 and L0965.

TAGS	RULE	IG
0939 Administration and Organization 290-5-54-.09(4)(c)4.	[Personnel] records shall include the following: ... 4. Documentation of a satisfactory TB screening test upon employment and annually thereafter; ...	This requirement applies to all employees. The Department relied on CDC guidelines to determine what is an adequate TB screening: All employees should have a TB skin test every year unless; - The employee is being treated for latent TB or has been diagnosed with latent TB and has refused treatment; - The employee was treated in the past for TB; or - Was turned down for a skin test by the Health Dept. If any of the above exclusions apply, the PHCP must have in the employee ' s file a physician ' s documentation of the applicable exception, evidence of initial evaluation by a physician to determine that the individual is free of active disease, and annually completed checklists to assure that the individual shows none of the signs and symptoms of TB. (History of BCG vaccine does not qualify as an exception to the requirement for annual TB skin test.)
0940 Administration and Organization 290-5-54-.09(4)(c)5.	[Personnel] records shall include the following: ... 5. Date of employment; ...	This may be the date the individual was hired, attended orientation (whether or not paid to attend), or was paid for services.
0941 Administration and Organization 290-5-54-.09(4)(c)6.	[Personnel] records shall include the following: ... 6. The person's job description or statements of the person's duties and responsibilities; ...	The job description(s) should include all tasks the individual is expected to perform. Example: If an individual has the primary role of a companion sitter but is qualified to provide personal care services and does on occasion, there should be a job description for both functions in the employee file.
0942 Administration and Organization 290-5-54-.09(4)(c)7.	[Personnel] records shall include the following: ... 7. Documentation of orientation and training required by these rules; ...	Refer to L0967, L0968, L0969, L0970 and L0971 for descriptions of the required orientation and training. A signed job description will suffice as documentation of the orientation to the employee ' s job duties.
0943 Administration and Organization 290-5-54-.09(4)(c)8.	[Personnel] records shall include the following: ... 8. Documentation of at least an annual performance evaluation; ...	See L1009, Supervision of Services. The annual performance evaluation must include direct observation or demonstration of skills for tasks assigned.

TAGS	RULE	IG
0944 Administration and Organization 290-5-54-.09(4)(c)9.	<p>[Personnel] records shall include the following: ...</p> <p>9. Documentation of bonding if the employee performs home management services which permit unlimited access to the client's personal funds. (If bonding is provided through a universal coverage bond, evidence of bonding need not be maintained separately in each personnel folder.) ...</p>	<p>' Unlimited access ' is interpreted to include access to a bank account by checkwriting, or simply access to the client ' s checkbook or credit cards.</p>
0945 Administration and Organization 290-5-54-.09(4)(d)	<p>Reports of Complaints and Incidents. The provider shall maintain files of all documentation of complaints submitted pursuant to rule .12(2). A provider shall also maintain on file for a minimum of five years all incident reports or reports of unusual occurrences (e.g. falls, accidents, significant medication errors, etc.) that affect the health, safety, and welfare of its clients. Documentation required to be maintained shall include what actions, if any, the provider took to resolve clients' complaints and to address any incident reports or unusual occurrences required to be retained.</p>	<p>Records of discharged clients shall be maintained in a readily retrievable manner for a period of twelve (12) months from the last service date for the client. Complaint and incident reports shall be maintained in a readily retrievable manner for a period of five (5) years.</p> <p>See L1019, L1201, L1208, L1214, and L1215 for additional information related to complaints.</p>
0946 Administration and Organization 290-5-54-.09(5)	<p>Staffing. The provider shall have sufficient numbers of qualified staff as required by these rules to provide the services specified in the service agreements with its clients. In the event that the provider becomes aware that it is unable to deliver the specified services to the client because of an unexpected staff shortage, the provider shall advise the client and refer the client to another provider if the client so desires.</p>	<p>There should be no scheduled visits ' missed ' due to shortage of staff. At any time the provider becomes aware that they cannot meet agreed-upon visits, they must notify the client and refer them to another provider. The provider is responsible for anticipating staff shortages or absences and assuring that there are sufficient back-up staff to prevent missed visits.</p>
0947 Administration and Organization 290-5-54-.09(5)(a)	<p>All staff employed by a provider shall have included in their personnel records or files maintained by the particular provider a written evaluation that was performed within one year before or after the effective date of these rules. The written evaluation must reflect that the employee's performance of required job tasks was observed personally by a supervisor either by demonstration or observation and such performance was determined to be competent for all job tasks required to be performed ...</p>	

TAGS	RULE	IG
0948 Administration and Organization 290-5-54-.09(5)(a)1.	All staff hired after the effective date of these rules must meet the following minimum qualifications: 1. Never have been shown by credible evidence (e.g. a court or jury, a department investigation, or other reliable evidence) to have abused, neglected, sexually assaulted, exploited, or deprived any person or to have subjected any person to serious injury as a result of intentional or grossly negligent misconduct as evidenced by an oral or written statement to this effect obtained at the time of application; ...	Refer to L0919, also required for the administrator. A criminal records check may be used to partially meet this requirement, but it must be supplemented with other evidence. There must be, in addition, a signed affidavit in the employee ' s file to reflect that they have never been found to have participated in the types of misconduct described by this rule.
0949 Administration and Organization 290-5-54-.09(5)(a)2.	All staff hired after the effective date of these rules must meet the following minimum qualifications. ... 2. Participate in the orientation and training required by these rules; ...	Refer to L0967, L0968, L0969, L0970 and L0971 for orientation and training requirements.
0950 Administration and Organization 290-5-54-.09(5)(a)3.	All staff hired after the effective date of these rules must meet the following minimum qualifications: ... 3. Not have made any material false statements concerning qualifications requirements either to the department or the provider.	
0951 Administration and Organization 290-5-54-.09(5)(b)	Nursing Personnel. Any persons employed by the provider to provide nursing services shall be licensed in Georgia in accordance with professional licensing laws and associated rules. Such persons may also provide any other types of private home care services offered by the provider.	Some nursing services may be provided by an LPN if supervised by an RN. Refer to the decision trees, etc. in the Georgia Registered Nursing practice act: http://sos.georgia.gov/plb/rn/board_policy.htm
0952 Administration and Organization 290-5-54-.09(5)(c)	Personal Care Assistant (PCA). The provider may have PCAs perform personal care tasks for clients. Such persons may also perform companion or sitter tasks for clients, but shall not provide nursing services unless qualified as stated in rule .09(5)(b) above.	For guidance as to what tasks may be performed by unlicensed personnel and what tasks are nursing tasks, consult the decision trees at: http://sos.georgia.gov/plb/rn/board_policy.htm
0953 Administration and Organization	Any PCA hired after the effective date of these rules shall have the following training and/or experience:	Written documentation of the training/ experience of a PCA along with documented evidence of competency testing must be

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290-5-54-.09(5)(c)1.	<p>(i) successful completion of a nurse aide training and competency evaluation program pursuant to the requirements of 42 CFR Part 483, Subpart D, as revised or recodified, if applicable; or</p> <p>(ii) successful completion of a competency examination for nurse aides recognized by the department; or</p> <p>(iii) successful completion of a health care or personal care credentialing program recognized and approved by the department; or</p> <p>(iv) successful completion or progress in the completion of a 40 hour training program provided by a private home care provider, which addresses at least the following areas:</p> <p>(I) Ambulation and transfer of clients, including positioning;</p> <p>(II) Assistance with bathing, toileting, grooming, shaving, dental care, dressing, and eating;</p> <p>(III) Basic first aid and CPR;</p> <p>(IV) Caring for clients with special conditions and needs so long as the services are within the scope of the tasks authorized to be performed by demonstration;</p> <p>(V) Home management;</p> <p>(VI) Home safety and sanitation;</p> <p>(VII) Infection control in the home;</p> <p>(VIII) Medically related activities to include the taking of vital signs; and</p> <p>(IX) Proper nutrition.</p>	<p>maintained in the personnel record for each employee. (see L0947)</p> <p>(i) Individuals with a certificate from an approved nurse aide training program who are registered with the Georgia Health Partnership are deemed to have met the training/experience requirement. The registry maintains a listing of individuals certified as nurse aides and a nurse aide abuse registry required by OBRA 1987 as amended. There is an on-line searchable Georgia directory of certified nurse-aides which is maintained by the Georgia Health Partnership. The web site is : www.ghp.georgia.gov. Click on the directories tab to check the status of a nurse-aide.</p> <p>(ii) There are two avenues recognized for this option:</p> <p>1). (This is a two-part avenue) The Department recognizes the "Home Health Aide Skills Assessment Test", issued by the National League of Nursing, as an acceptable instrument to assess the skills of PCA's when the assessment is made in conjunction with direct supervision and documented skills competency testing. Data reflects that on average home health aides from across the United States who took the experimental tests scored an average of 76% of the items correctly so the provider should consider establishing this as a minimum passing score by policy. Providers should compare the PCA's job description with specific areas of the test in order to identify strengths and weakness and in order to determine where further training and supervision may be needed.</p> <p>The address and phone number is: NLN Test Service 61 Broadway 33rd Floor New York, NY 10006 Phone: 1-212-363-5555 E-mail: Custserv @ NLN.org.</p> <p>For this option to be acceptable, the NLN test must have been taken online and scored by the organization. Also, the provider must have developed their own skills competency testing to follow the written test.</p> <p>2). This is a three part avenue: The Department recognizes the "Personal Care Assistant (PCA) Competency Test", developed by the Georgia Home Care Association (GAHCA) as an acceptable instrument to assess the skills of PCA's when the assessment is made in conjunction with direct supervision and</p>

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		<p>documented skills competency testing (Parts 2 and 3). The passing score is 80% for the written exam (Part 1) and a pass on the applicable portions of the skills competency checks (Part 2 and 3). The skills competency checks (Part 2 and 3) must be administered by a RN or LPN or qualified personal care aide. The Skills Assessment Exam results may be transferred between PHCPs if testing occurred no longer than 1 year previously. If a PHCP accepted another agency's evidence of written testing, supervision and documented competency testing would still be required. Membership in the GAHCA shall not be a pre-requisite to obtain a copy of this test.</p> <p>(iii) There is currently no PCA credentialing program recognized by the Department.</p> <p>(iv) If the provider will be providing the 40-hour training program for PCAs, the provider must have and follow a training curriculum covering all of the topics required by the rules, and forms for documenting the mastery of the material (a written test). Additionally, there must be documentation for each PCA of assessment by direct observation of competency in those activities the PCA will be providing.</p>
<p>0961 Administration and Organization 290-5-54-.09(5)(c)2.</p>	<p>A training program described in rule .09(5)(c)1.(iv) must be conducted under the direction of a licensed registered professional nurse, or a health care professional with commensurate education and experience. Twenty hours of the program must be completed by the employee prior to serving clients and the additional twenty hours must be completed within six months of the date the training initially began. No PCA shall be assigned to perform a task for which training has not been completed and competency has not been determined. No PCA shall be assigned to care for a client with special conditions unless the PCA has received training and has demonstrated competency in performing such services related to such special conditions.</p>	<p>"Special conditions" may include but are not limited to Alzheimer ' s disease, behavior disorders, birth defects, blindness, developmental disorders, diabetes, mental retardation, non-verbal, traumatic brain injuries, and might include special services such as transfer and escort of the blind client, preparation of diabetic diets, basic trach and g-tube care and g-tube feeding, and cultural specific practices (i.e. diet, etc.). A PCA must have a completed competency checklist for any of these tasks to be performed with clients.</p>
<p>0962 Administration and Organization 290-5-54-.09(5)(d)</p>	<p>Companions or Sitters. The provider may have companions or sitters perform companion or sitter tasks for clients.</p>	

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0963 Administration and Organization 290-5-54-.09(5)(d)1.	Companions or Sitters ... Such persons may not provide other private home care services to clients unless qualified as stated in rules .09(5)(b) and (c).	
0964 Administration and Organization 290-5-54-.09(5)(d)2.(i)	Any companion or sitter hired after the effective date of these rules must meet the following minimal requirements: (i) Be able to read and write, follow verbal and written instructions, and complete written reports and documents; ...	
0965 Administration and Organization 290-5-54-.09(5)(d)2.(ii)	Any companion or sitter hired after the effective date of these rules must meet the following minimal requirements: ... (ii) Successfully complete training or demonstrate understanding and practical competency in the following areas: understanding the needs and characteristics of elderly, handicapped, or convalescing individuals; meal preparation and serving; transportation and escort services; housekeeping to include sanitation; home safety; handling medical emergencies in the home; and infection control.	Documentation of required training and competency must be maintained in each individual's personnel file. Assessments must include direct observation of actual performance with a client or other person by a qualified person. Individuals with documented qualifications as a licensed nurse or PCA may provide companion or sitter services.
0966 Administration and Organization 290-5-54-.09(6)	Staff Training. Prior to working with clients, all employees hired or used on or after the effective date of these rules and who provide services to clients shall be oriented in accordance with these rules and shall thereafter receive additional training in accordance with these rules.	Documentation of orientation must be maintained in each individual personnel file. The provider must have a curriculum for orientation which includes all of the required topics listed under this rule.
0967 Administration and Organization 290-5-54-.09(6)(a)1.	Staff orientation shall include instruction in: ... 1. The provider's written policies and procedures regarding its scope of services and the types of clients it serves (rule .09 (1) and clients rights and responsibilities and complaints (rule .12), as well as other policies that are relevant to the employee's range of duties and responsibilities; ...	Other policies and procedures relevant to the staff's range of duties and responsibilities would include but may not be limited to, the documentation of home care services and the service plan.

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0968 Administration and Organization 290-5-54-.09(6)(a)2.	Staff orientation shall include instruction in: ... 2. The employee's assigned duties and responsibilities; ...	A signed job description will suffice as documentation of orientation to assigned duties and responsibilities.
0969 Administration and Organization 290-5-54-.09(6)(a)3.	Staff orientation shall include instruction in: ... 3. Reporting client progress and problems to supervisory personnel and procedures for handling medical emergencies or other incidents that affect the delivery of services in accordance with the client's services plan; ...	
0970 Administration and Organization 290-5-54-.09(6)(a)4.	Staff orientation shall include instruction in: ... 4. The employee's obligation to report known exposure to tuberculosis and hepatitis to the employer.	
0971 Administration and Organization 290-5-54-.09(6)(b)	Additional training consisting of a minimum of eight clock hours of training or instruction shall be provided annually for each employee after the first year of employment. Employees hired prior to the effective date of these rules are also required to receive eight clock hours of training or instruction annually beginning with the effective date of these rules. Such training or instruction shall be in subjects that relate to the employee's assigned duties and responsibilities.	
0972 Administration and Organization 290-5-54-.09(7)	Contracted Services. If a provider arranges with independent contractors, individuals, or agents for them to provide any authorized private home care services on behalf of the provider in any way, such arrangements shall be set forth in writing detailing the services to be provided. The provider must assure that the independent contractor, individual, or agent supplying the services follow the provisions of these rules and are qualified to provide the services. The services must be supervised, as outlined in rule .10(2) (Supervision of Services), by a supervisor of the licensed provider. Authority O.C.G.A. Sec. 31-7-300 et seq.	The supervision requirement for contracted staff is the same as employees, i.e., direct observation or demonstration. A contracted employee must have a complete personnel file at the PHCP office documenting qualifications, training, and competencies.

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1001 Private Home Care Provider Services 290-5-54-.10(1)	A provider may provide three categories of home care services as defined in these rules.	
1002 Private Home Care Provider Services 290-5-54-.10(1)(a)	Nursing Services. If a provider provides nursing services, such services shall be provided by a licensed registered professional nurse or a licensed practical nurse under the direction of a supervisor as required by these rules. Such services shall be provided in accordance with the scope of nursing practice laws and associated rules, and the client's service plan.	In accordance with nursing practice laws and rules, nursing tasks require physician orders.
1003 Private Home Care Provider Services 290-5-54- .10(1)(a)1.(i)	Nursing services shall include the following: ... (i) Regularly assess the nursing needs of the client; ...	Only an RN can do an admission assessment of nursing needs. Clients must be assessed on admission and reassessed often enough to determine the client ' s health status and ability to function.
1004 Private Home Care Provider Services 290-5-54- .10(1)(a)1.(ii)	Nursing services shall include the following: ... (ii) Participate in the establishment and implementation of the client's service plan; ...	Any nursing services provided must be included in the client ' s service plan.
1005 Private Home Care Provider Services 290-5-54- .10(1)(a)1.(iii)	Nursing services shall include the following: ... (iii) Provide nursing services as needed and in accordance with the client's service plan; ...	
1006 Private Home Care Provider Services 290-5-54- .10(1)(a)1.(iv)	Nursing services shall include the following: ... (iv) Report problems and progress of client to supervisory personnel or the client's personal physician.	

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<p>1007 Private Home Care Provider Services 290-5-54-.10(1)(b)</p>	<p>Personal Care Tasks. If a provider provides personal care tasks, such tasks, at a minimum, shall be performed by a qualified PCA under the direction of a supervisor as required by these rules, and in accordance with the client's service plan. In addition to following the service plan, a PCA must report on the personal care needs of the client, on changes in the client's condition, and on any observed problems that affect the client. Licensed nurses are also authorized to perform personal care tasks.</p>	<p>The PCA who delivers the services must have access to and be knowledgeable of the client's service plan at the time services are provided. As personal care needs change or problems emerge, the PCA must document changes or need for changes. This may be documented on the task sheet.</p>
<p>1008 Private Home Care Provider Services 290-5-54-.10(1)(c)</p>	<p>Companion or Sitter Tasks. If a provider provides companion or sitter tasks, such tasks, at a minimum, shall be performed by a qualified companion or sitter under the direction of a qualified supervisor as required by these rules, and in accordance with the client's service plan. In addition to following the service plan, a companion or sitter must report on the needs of the client, on changes in the client's condition, and on any observed problems that affect the client.</p>	<p>The companion or sitter who delivers the services must have access to and be knowledgeable of the client's service plan at the time services are provided. As care needs change or problems emerge, the companion or sitter must document changes or need for changes. This may be documented on the task sheet.</p>
<p>1009 Private Home Care Provider Services 290-5-54-.10(2)</p>	<p>Supervision of Services. Services shall be supervised by qualified staff of the provider. Each staff member providing services to a client shall be evaluated in writing by his or her supervisor, at least annually, either through direct observation or demonstration, on the job tasks the staff member is required to perform. No supervisor shall knowingly permit an employee who has been exposed to tuberculosis or hepatitis or diagnosed with the same to provide services to clients until it is determined that the employee is not contagious.</p>	<p>There must be documentation of supervisory review of services provided by staff. Regular review of completed tasks sheets, with sign-off by the reviewer, is acceptable documentation of the review.</p>

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<p>1010 Private Home Care Provider Services 290-5-54-.10(2)(a)</p>	<p>Supervision of Nursing Services. If a provider provides nursing services, it shall employ fully licensed Georgia registered professional nurse to supervise the provision of such services and the employees who provide the services. Such supervisor may perform other duties provided he or she is able to fulfill the supervisory responsibilities described in these rules. A supervisor shall complete the client's service plan in accordance with rule .11 and in coordination with the appropriate staff who will be providing the client's services.</p>	<p>The provider must have implemented a system for regular supervision of nursing services provided in the clients ' homes. Nursing services must be supervised by a registered nurse.</p>
<p>1011 Private Home Care Provider Services 290-5-54-.10(2)(b)</p>	<p>Supervision of Personal Care Tasks. If a provider offers personal care task services, the provider shall employ supervisor(s) that have been determined to be qualified by education, training and experience to supervise the provision of such tasks in accordance with accepted standards of care. A licensed registered professional or practical nurse shall supervise the provision of personal care tasks for clients determined to be medically frail or medically compromised. If such supervision is provided by a licensed practical nurse, the licensed practical nurse shall report to a licensed registered professional nurse who will continue to be responsible for the development and management of the service plan. Such supervisor may perform other duties provided he or she is able to fulfill the supervisory responsibilities described in these rules.</p>	<p>See definition of medically frail or medically compromised.</p> <p>See L1002 Nursing Services.</p> <p>Medication and treatment orders are routinely written by physicians for nurses.</p> <p>Medication and treatment orders are not required for services not involving skilled care.</p>

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<p>1012 Private Home Care Provider Services 290-5-54-.10(2)(b)1.</p>	<p>If a provider offers personal care task services...</p> <p>1. The appropriate supervisor as specified in these rules shall complete the client's service plan in accordance with rule .11 and in coordination with the appropriate staff who will be providing the client's services. For clients who are determined to be medically frail or compromised, a licensed registered professional nurse shall complete the initial service plan. Subsequent revisions to the service plan may be made by a licensed practical nurse who is supervising the provision of personal care tasks services to the client. Revisions made by the licensed practical nurse will be reviewed in a timely manner by the provider's licensed registered professional nurse ultimately responsible for the management of the client's care.</p>	<p>See L1010, Service Plans. Revisions made by an LPN to the service plan must be reviewed by the appropriate RN.</p>
<p>1013 Private Home Care Provider Services 290-5-54-.10(2)(b)2.</p>	<p>If a provider offers personal care task services...</p> <p>2. The appropriate supervisor shall make a supervisory home visit to each client's residence at least every 92 days, starting from date of initial service in a residence or as the level of care requires to ensure that the client's needs are met. The visit shall include an assessment of the client's general condition, vital signs, a review of the progress being made, the problems encountered by the client and the client's satisfaction with the services being delivered by the provider's staff. Such supervision shall also include observations about the appropriateness of the level of services being offered. Routine quarterly supervisory visits shall be made in the client's residence and shall be documented in the client's file or service plan.</p>	<p>In addition to routine supervisory visits, a supervisory home visit may be made when the provider receives a complaint concerning services and the complaint raises a serious question regarding the services being delivered. If a provider determines that an assessment of a client's vital signs is not appropriate or obtainable during the supervisory visit, an entry will be made on the written report of the supervisory home visit which explains the omission.</p>
<p>1014 Private Home Care Provider Services 290-5-54-.10(2)(c)</p>	<p>Supervision of Companion or Sitter Tasks. If a provider provides companion or sitter tasks, supervision of such tasks shall be provided by a qualified supervisor (e.g. registered professional nurse, licensed practical nurse, the administrator, or any other staff member assigned responsibility for supervision of the delivery of care.)</p>	

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<p>1015 Private Home Care Provider Services 290-5-54-.10(2)(c)1.</p>	<p>If a provider provides companion or sitter services...</p> <p>1. The appropriate supervisor, as specified in these rules, shall complete the client's service plan in accordance with rule .11 and in coordination with the appropriate staff who will be providing the client's services.</p>	<p>The phrase, "appropriate staff who will be providing the client's services", means any staff member who goes into the client's residence to perform private home care provider tasks. The phrase, "In coordination", means any staff member going into a client's residence to perform private home care provider tasks will review the client's complete, current service plan prior to providing care in the client's residence. Additionally, any staff member will be given the opportunity to speak with his/her supervisor regarding the service plan prior to providing care.</p>
<p>1016 Private Home Care Provider Services 290-5-54-.10(2)(c)2.</p>	<p>If a provider provides companion or sitter services...</p> <p>2. The appropriate supervisor shall make a supervisory home visit to each client's residence at least every 122 days starting from date of initial service in the residence or when the provider receives a complaint concerning services and the complaint raises a serious question concerning the services being delivered. The visit shall include an assessment of the client's general condition, a review of the progress being made, the problems encountered by the client and the client's satisfaction with the services being delivered by the provider's staff. Such supervision shall also include observations about the appropriateness of the level of services being offered. Routine supervisory visits shall be made in the client's residence. All supervisory visits shall be documented in the client's file or service plan.</p>	
<p>1017 Private Home Care Provider Services 290-5-54-.10(2)(d)</p>	<p>When employees or subcontractors are performing personal care tasks for clients who are medically frail or medically compromised in the clients' residences, the provider shall have a representative on call and accessible who shall be able to contact a nurse supervisor by telephone or other means to provide appropriate consultation to the employees or subcontractors concerning responding to the clients' medical needs.</p>	<p>The on-call representative and nurse supervisor must be accessible at any time services are scheduled to be provided for medically fragile or medically frail clients, for consultation regarding the care of those clients.</p>

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<p>1018 Private Home Care Provider Services 290-5-54-.10(3)</p>	<p>Documentation of Home Care Services Provided. A provider shall establish and implement written policies and procedures for documenting the services actually performed for its clients each day. Such documentation shall be incorporated into the client's file in accordance with rule .09(4)(a).</p>	<p>The PHCP ' s policy should contain a timeline for review of task sheets and incorporation of those sheets into clients ' records. The timeline should be sufficiently timely to identify and resolve promptly any problems in service delivery.</p>
<p>1019 Private Home Care Provider Services 290-5-54-.10(4)</p>	<p>Quality Improvement Program. The provider must have and maintain documentation reflecting that there is an effective quality improvement program that continuously monitors the performance of the program itself and client outcomes to ensure that the care provided to the clients meets acceptable standards of care and complies with the minimum requirements set forth in these rules. At a minimum, the quality improvement program must document the receipt and resolution (if possible) of client complaints, problems with care identified and corrective actions taken. Authority O.C.G.A. Sec. 31-7-300 et seq.</p>	<p>There must be documentation of client complaints, problems with care identified and corrective actions taken in the PHCP ' s quality improvement program. Have any corrective actions been taken? For complaints, see also L1201, L1208, L1214, and L1215. Best practice is to have a QI program which tracks multiple components of service provision.</p>
<p>1101 Service Plans 290-5-54-.11(1)</p>	<p>Service Plan Content. A provider shall establish and implement written policies and procedures for service planning. A written plan of service shall be established in collaboration with the client and the responsible party, if applicable, and the client's personal physician if the services to be provided are nursing services and the client has a personal physician.</p>	<p>The written policies and procedures must specify the individual(s) responsible for developing the plan, the time frame for completing the service plan document, the integration of the assessment findings, and describe when the service plan should be reviewed or revised. The care planning process must respect the patient ' s right to make choices by accepting or refusing services and their right to participate in the service planning process. If the provider offers nursing services, the policy/procedure must include how the PHCP secures physician ' s orders, and physician verification of oral, change, and/or renewal orders. The policy and procedures for receiving verbal orders from the physician.</p>

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<p>1102 Service Plans 290-5-54-.11(1)(a)</p>	<p>The service plan shall include the functional limitations of the client, types of service required, the expected times and frequency of service delivery in the client's residence, the expected duration of services that will be provided, the stated goals and objectives of the services, and discharge plans.</p>	<p>The purpose of the service plan is to direct staff action for a specific client. Consequently, the service plan must be individualized and contain adequate information for staff action. The service plan should contain the following at a minimum:</p> <ul style="list-style-type: none"> - Description of the client ' s functional limitations, which may include, but is not limited to difficulties with hearing, vision, speech, mobility, swallowing, eating, breathing or cognitive abilities. The limitations should be described in detail, e.g. " cannot stand or transfer unassisted " or " cannot hear or understand speech at normal volume " . - Types of service required, to include the specific tasks and specific directions for tasks where appropriate. ' Types of service ' means directions for the specific tasks (e.g. bed bath, tub bath, applying lotion to feet, applying lotion to back, etc.) to be performed by provider staff. Tasks described in any client ' s service plan must be limited to those related to services the PHCP is licensed to provide: personal care tasks, companion sitter tasks, and/or nursing tasks. Information about medications and treatments should be included if the provider's staff is expected to assist with the medication or treatment. Description of tasks to be performed by staff must be detailed enough for the staff member to know what to do, e.g. for personal care services: give bed bath, brush teeth, etc.; for sitter tasks: reading, playing cards, prepare lunch, etc.; for nursing tasks: provide cleansing and redressing of wound according to orders, etc. - The expected times and frequency of service delivery means how often staff will go to the client's home, on what days and at what time of day, a.m. or p.m. - The expected duration means how long staff will remain in the home to accomplish the task assigned. - The goals and objectives (or outcome criteria) are statements describing measurable outcomes of care. If goals/objectives are not being achieved, the provider must reevaluate the client and revise the plan. Goals/objectives may be standardized for personal care and companion/sitter clients (e.g.. provide supportive services so that the client may maintain an optimal level of independent functioning at home). For clients receiving medications and/or treatments prescribed by physicians for skilled care, goals should be specific to the problem, time referenced, and measurable. - The discharge plan is to identify the specific needs for maintaining or achieving maximum function after

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<p>1103 Service Plans 290-5-54-.11(1)(b)</p>	<p>When applicable to the condition of the client and the services to be provided, the [service] plan shall also include pertinent diagnoses, medications and treatments, equipment needs, and diet and nutritional needs.</p>	<p>For most clients, diagnoses, medications and treatments, equipment, diet and nutritional needs, as well as cognitive ability and emotional stability, will impact the service delivery and should be addressed on the service plan. For example, if staff is to prepare meals for the client, a diet (regular, soft, liquid, low salt/fat, diabetic, etc.) must be part of the service plan. Treatments and specific nursing procedures may be written and revised as indicated when the service is skilled care. (i.e. wet to dry dressing, using saline, roll gauze, with vapor barrier covering, etc.)</p> <p>A diagnosis of cognitive impairment or emotional instability due to Alzheimer's, mental retardation, head trauma, etc., may necessitate specific instruction on communicating with the client and managing behavior, i.e. a non-verbal client, mental retardation, etc.</p> <p>Interview client and observe for applicable conditions requiring this addition information.</p>
<p>1104 Service Plans 290-5-54-.11(2)</p>	<p>Service plans shall be completed by the service supervisor within seven working days after services are initially provided in the residence. Service plans for nursing services shall be reviewed and updated at least every sixty-two days. Other service plans shall be reviewed and updated at the time of each supervisory visit. Parts of the plans must be revised whenever there are changes in the items listed in rules .11(l)(a) and (b), above. Authority O.C.G.A. Sec. 31-7-300 et seq.</p>	<p>The service plan or plans of care are the result of the assessment function. The provider's staff carries out the actions identified during the planning process. These actions are done according to the provider's policy and procedures, standards of practice, and the scope of services. Monitoring the client's response to the care and modification of the service plan is an ongoing process. Revisions of the plan are based on a reassessment and identified goals.</p>
<p>1201 Rights, Responsibilities, and Complaints 290-5-54-.12(1)</p>	<p>A provider shall establish and implement written policies and procedures regarding the rights and responsibilities of clients, and the handling and resolution of complaints.</p>	<p>For complaints, see also L1208, L1214, and L1215.</p>
<p>1202 Rights, Responsibilities, and Complaints 290-5-54-.12(2)</p>	<p>Such policies and procedures shall include a written notice of rights and responsibilities which shall be provided to each client or responsible party, if applicable, when the service agreement described in rule .09(2) is completed.</p>	<p>The policy and procedure should reference the specific written document that the provider has created to inform clients of their rights and which is to be provided to the client.</p>

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1203 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(a)	The required notice [of rights and responsibilities] shall include the following items: (a) Right to be informed about plan of service and to participate in the planning; ...	The client's preferences regarding days and times of service should be honored when possible. If not possible, the client should be offered the option of referral to another provider.
1204 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(b)	The required notice [of rights and responsibilities] shall include the following items: ... (b) Right to be promptly and fully informed of any changes in the plan of service ...	Changes in time of service and availability or change in staff should be reported to the client residence as soon as possible, before the service, so that the client retains the right to accept or refuse services.
1205 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(c)	The required notice [of rights and responsibilities] shall include the following items: ... (c) Right to accept or refuse services; ...	For the client who has not been adjudicated the right to accept or refuse services must be respected. Refusal of services must be reported to the supervisor immediately when the client could potentially suffer harm from the refusal of service, i.e. an individual who, if left alone, could not flee a burning house, or might wander off and get lost, etc.
1206 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(d)	The required notice [of rights and responsibilities] shall include the following items: ... (d) Right to be fully informed of the charges for services; ...	See also L0906.
1207 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(e)	The required notice [of rights and responsibilities] shall include the following items: ... (e) Right to be informed of the name, business telephone number and business address of the person supervising the services and how to contact that person; ...	See also L1215, Provider Phone, provision of provider contact phone numbers.

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1208 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(f)	The required notice [of rights and responsibilities] shall include the following items: ... (f) Right to be informed of the complaint procedures and the right to submit complaints without fear of discrimination or retaliation and to have them investigated by the provider within a reasonable period of time. The complaint procedure provided shall include the name, business address and telephone number of the person designated by the provider to handle complaints and questions; ...	For other rules about complaints, see also L1201, L1214, and L1215.
1209 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(g)	The required notice [of rights and responsibilities] shall include the following items: ... (g) Right of confidentiality of client record; ...	See also L0933, Retention and Confidentiality of Client Records and L0805, Department access to records.
1210 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(h)	The required notice [of rights and responsibilities] shall include the following items: ... (h) Right to have property and residence treated with respect; ...	
1211 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(i)	The required notice [of rights and responsibilities] shall include the following items: ... (i) Right to receive a written notice of the address and telephone number of the state licensing authority, i.e. the department, which further explains that the department is charged with the responsibility of licensing the provider and investigating client complaints which appear to violate licensing regulations; ...	Department of Community Health, Healthcare Facility Regulation Division Licensure and Certification Section 2 Peachtree Street NW, Suite 31.447 Atlanta, GA 30303-3142 404-657-5550 Complaints only: 404-657-5728 or 1-800-878-6442

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1212 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(j)	The required notice [of rights and responsibilities] shall include the following items: ... (j) Right to obtain a copy of the provider's most recent completed report of licensure inspection from the provider upon written request. The provider is not required to release the report of licensure inspection until the provider has had an opportunity to file a written plan of correction for the violations, if any, identified. The facility may charge the client reasonable photocopying charges; ...	The provider is not required to release the report of licensure inspection until a written plan of correction has been accepted/approved by the department. When making a determination as to whether a charge was reasonable or not, surveyors should compare with charges of other similar providers.
1213 Rights, Responsibilities, and Complaints 290-5-54-.12(2)(k)	The required notice [of rights and responsibilities] shall include the following items: ... (k) Right to be advised that the client and the responsible party, if applicable, must advise the provider of any changes in the client's condition or any events that affect the client's service needs.	A change in the client's condition or event that affects the client's service needs may include, but is not limited to, medication changes, any change in functional limitations, admission to a hospital, etc.
1214 Rights, Responsibilities, and Complaints 290-5-54-.12(3)	Such policies shall also include procedures for clients and others to present complaints, either orally or in writing, about services and to have their complaints addressed and resolved as appropriate by the provider in a timely manner.	The provider may not require a client to submit complaints in writing. Complaints submitted verbally must be documented by the provider. Responses to complaints would not be considered timely if there were any negative impact on the client or responsible party due to the response time of the provider Any failure on the part of the provider to adhere to this requirement may constitute a violation of the clients right at L1208. For other rules related to complaints, see also L1201, L1208, and L1215.
1215 Rights, Responsibilities, and Complaints 290-5-54-.12(4)	A provider shall supply all clients and responsible parties, if applicable, with the specific telephone number of the provider for information, questions or complaints about services being delivered by the provider. Authority O.C.G.A. Sec. 31-7-300 et seq.	The provider must be available by telephone during all service hours to respond to complaints about services. Other information or questions may be responded to during the established business hours. For other rules related to complaints, see also L1201, L1208, and L1214.
1301 Enforcement and Penalties 290-5-54-.13(1)	Enforcement of these rules and regulations shall be conducted in accordance with Rules and Regulations for Enforcement of Licensing Requirements, Chapter 290-1-6.	Responsibility for the Rules and Regulations for Enforcement of Licensing Requirements has been transferred to the Department of Community Health and these enforcement rules are in the process of being renumbered and published under Chapter 111-8-25.

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1302 Enforcement and Penalties 290-5-54-.13(2)	If the department finds that an applicant for a license has violated any provisions of these rules or other laws, rules, regulations, or formal orders related to initial or continued licensing, it may, subject to notice and an opportunity for hearing, refuse to grant any license or limit or restrict any license.	
1303 Enforcement and Penalties 290-5-54-.13(3)	If the department finds that a provider has violated any provision of these rules or other laws, rules, regulations, or formal orders related to initial or continued registration, it may, subject to notice and an opportunity for hearing, take any of the following actions: administer a public reprimand; limit or restrict a license; suspend a license; impose a fine; refuse to renew a license; or revoke a license. Authority O.C.G.A. Sec. 31-2-6.	
1401 Waivers and Variances 290-5-54-.14(1)	The department may, in its discretion, grant waivers and variances of specific rules upon application or petition being filed on forms provided by the department. The department may establish conditions which must be met by the provider in order to operate under the waiver or variance granted ...	
1402 Waivers and Variances 290-5-54-.14(2)	... Waivers and variances may be granted in accordance with the following conditions: (2) Variance. A variance may be granted by the department upon a showing by the applicant or petitioner that the particular rule or regulation that is the subject of the variance request should not be applied as written because strict application of the rule would cause undue hardship. The applicant or petitioner must also show that adequate standards affording protection for the health, safety and care of persons in care exist and will be met in lieu of the exact requirements of the rule or regulation in question. ...	

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1403 Waivers and Variances 290-5-54-.14(3)	<p>... Waivers and variances may be granted in accordance with the following conditions: ...</p> <p>(3) Waiver. The department may dispense entirely with the enforcement of a rule or regulation by granting a waiver upon a showing by the applicant or petitioner that the purpose of the rule or regulation is met through equivalent standards affording equivalent protection for the health, safety and care of persons in care. ...</p>	
1404 Waivers and Variances 290-5-54-.14(4)	<p>Waivers and variances may be granted in accordance with the following conditions: ...</p> <p>(4) Experimental Variance or Waiver. The department may grant waivers and variances to allow experimentation and demonstration of new and innovative approaches to delivery of services upon a showing by the applicant or petitioner that the intended protections afforded by the rule or regulation which is the subject of the request are met and that the innovative approach has the potential to improve service delivery. Authority O.C.G.A. Sec. 31-2-4.</p>	<p>The legal authority for waivers and variances is now found at O.C.G.A. §31-2-9.</p>
1501 Severability 290-5-54-.15(1)	<p>In the event that any rule, sentence, clause or phrase of any of these rules and regulations may be construed by any court of competent jurisdiction to be invalid, illegal, unconstitutional, or otherwise unenforceable, such determination or adjudication shall in no manner affect the remaining rules or portions thereof.</p>	
1502 Severability 290-5-54-.15(2)	<p>The remaining rules or portions thereof shall remain in full force and effect, as if such rule or portions thereof so determined, declared, or adjudged invalid or unconstitutional were not originally a part of these rules. Authority O.C.G.A. Sec. 31-7-300 et seq.</p>	
9999 Closing Comments.		