Non-Skilled
Home Care Agency
Administrative Policies and Procedures Manual
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NON-SKILLED HOME CARE AGENCY ADMINISTRATIVE
POLICIES AND PROCEDURES MANUAL
ELECTRONIC PUBLICATION

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   Kenyon HomeCare Consulting
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   Seattle, WA 98122 USA
   gkenyon@kenyonhcc.com
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This document’s formatting is controlled by the use of Word styles. It is a Microsoft Word document and should operate on systems using Office 2007 software or higher. Kenyon HomeCare Consulting has done it’s best to ensure reformatting will be minimal for most agencies, but we do not assume liability for any formatting errors that may occur.

There are a number of text placeholders that will need to be replaced with your agency’s information. Text placeholders are as follows:

[HOMECARE AGENCY NAME] — Your agency’s business name
[BUSINESS TYPE] — Your agency’s business type
[STATE] — The state your agency is licensed in
[OPENING TIME] — Your agency’s opening operating time
[CLOSING TIME] — Your agency’s closing operating time
[GEOPGRAPHIC COVERAGE AREA] — Your agency’s geographic coverage area, including cities, towns, and/or counties
[HOLIDAYS OBSERVED] — Your agency’s observed holidays that you will be closed for
[DOLLAR LIMIT] — Your agency’s dollar limit within document
[JOB TITLE] — Your agency’s Administrator title
[STATUS] — Your agency’s status: for-profit or non-profit

To Find and Replace Text Placeholders:

1. On the Edit menu, click Replace.
2. In the Find what box, enter the placeholder text exactly as it is above that you want to search for.
3. In the Replace with box, enter the replacement text.
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5. To cancel a search in progress, press ESC.

To Update Table of Contents:

You can update either the whole table of contents or page numbers only.

1. Hold down CONTROL key, click the table of contents, and then click Update Field.
2. Click the option that you want.
ACCEPTANCE OF THE ADMINISTRATIVE POLICIES AND PROCEDURES MANUAL

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

Owner/Administrator

Date
NON-SKILLED HOME CARE AGENCY ADMINISTRATIVE POLICIES AND PROCEDURES MANUAL
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ORGANIZATION AND ADMINISTRATION
MISSION STATEMENT

POLICY

The [HOME CARE AGENCY NAME] Owner/Governing Body has adopted a written mission statement that reflects its commitment to the provision of efficient, effective, quality home care services to clients in the communities we serve. The agency will serve its clients with dignity and comfort, prioritize service goals based on client/representative input, and deliver timely, coordinated, and culturally sensitive services.

PURPOSE

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

PROCEDURE

1. The mission statement is established with appropriate PAC, if applicable, and administrative personnel input and review, and approved by the Governing Body.

2. The mission statement is reviewed, revised (if needed), and approved at least every 36 months by the Owner/Governing Body.

3. The mission statement is included in all orientation.

4. A written copy of the mission statement is available for clients, referral sources, and other interested parties.

EXAMPLE

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

REFERENCES:

ACHC PD1-6A

CHAP CI.1
POLICY AND PROCEDURE DEVELOPMENT AND IMPLEMENTATION

Definitions

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

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

Policy

[HOME CARE AGENCY NAME] follows an established process for the development, approval, implementation, and access to its policies and procedures. Agency policies and procedures reflect an emphasis of quality services, current and ethical standards of practice, client rights, and the agency's mission statement. Policies and procedures will be reviewed and revised if needed at least annually by the Administrator or Professional Advisory Committee (PAC).

Purpose

1. To ensure accountability and responsibility in the oversight, review, and approval of policies and procedures which direct the services of the agency.

2. To delineate the authority for the approval process.

Procedure

1. The home care agency is licensed in the state of [STATE].

2. Policies and procedures will be written in a standardized format, approved by the Owner/Governing Body, maintained on the Internet, and organized for efficient reference and access.

3. The PAC annually will review all policies and procedures for needed changes.

4. The Service Supervisor may develop or amend policies and procedures and forward them to the Administrator for review. If the policy as amended or developed meets with the Administrator’s approval, the Owner/Governing Body will be asked to approve it. Upon approval, the Administrator will sign and date the “Acceptance of the Administrative Policies and Procedures Manual.” This form will appear at the front of the manual.
5. Once approved, the Administrator will implement the policy notifying affected persons and distributing related instructions (if needed) to related personnel. If a policy or procedure requires competency testing to confirm new practice, the Administrator or designate will arrange for that competency testing.

6. Policies and procedures may be shared with community resources and facilities serving agency clients.

7. The administrative policies and procedures manual will be located in a space that will make it available to all personnel during the hours of operation.

REFERENCES:
ACHC PD1-2A
CHAP CI.5a, PD 1.5