

APPENDIX D – PERSONAL CARE SERVICE

A. PURPOSE

PCS is designed to enable participants to achieve optimal function with ADLs and IADLs. PCS may also be used to provide respite for the participant's caregiver. PCS must be provided in the participant's residence.

B. UNIT of SERVICE

- (1) One unit of service is equal to one hour of direct service.
- (2) The unit rate shall include all administrative costs, travel, and record documentation time.
- (3) Tasks in this service include, but are not limited to:
 - a) reading and recording the participant's temperature, pulse, and respiration;
 - b) performing house cleaning including dusting furniture; sweeping, vacuuming, and washing floors; kitchen care including washing dishes, appliances, and counters; washing inside windows within reach from the floor;
 - c) providing bathroom care; emptying and cleaning the bedside commode and urinary catheter bags; changing bed linens; removing trash; and washing, drying, folding, ironing, and putting away the participant's laundry;
 - d) performing personal hygiene and grooming assistance using bed, tub, shower, and partial bath techniques; shampooing the participant's hair in the sink, tub, or bed; providing nail and skin care; assisting the participant with oral hygiene, toileting, and eliminations; and
 - e) planning and preparing the participant's meals, including special diets; shopping for and purchasing groceries; and running errands.

C. SERVICE PROVIDER AGENCY REQUIREMENTS

- (1) The Service Provider must be able to deliver services five days a week. Evidence of a back-up service delivery plan must be provided.
- (2) The Service Provider shall maintain a participant record of each service delivery. The record will document specific tasks performed, the PCA's

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signature and arrival and departure times, and the participant's or caregiver's signature upon completion of service delivery.

- (3) The Service Provider shall document that the PCA providing participant services meets at least one of these training criteria prior to participant service provision:
 - a) successfully completed the STNA or the Medicare Competency Evaluation Program for Home Health Aides established in 42 CFR 434, without a twenty four month lapse in employment; or
 - b) has received Service Provider agency training and testing. Testing shall include written test and skills testing by return demonstration. The subject areas listed in these specifications shall be included in the training and testing programs. Training and testing shall be documented by the Service Provider; and
 - c) shall include training site information; date and length of training that includes the number of hours, instruction materials, and subject areas; signature of trainer; and all testing results; or
 - d) has one year of satisfactory institutional or community-based direct service delivery in health care within the last three years. The PCA must successfully complete written testing and skills testing by return demonstration.
- (4) Service Provider must maintain evidence of the completion of eight hours of in-service continuing education for each PCA in a twelve month period, excluding agency and program-specific orientation, initiated after the first anniversary of employment with the Service Provider and each year following. The PCA training program of sixty hours of instructions and skill testing by return demonstration for PCA staff described in these specifications shall include these subject areas:
 - (a) communication skills including the ability to read, write, and make brief and accurate oral or written reports.
 - (b) observation, reporting, and documentation of participant status and services rendered.
 - (c) reading and recording temperature, pulse, and respiration;
 - (d) precautions for infection control procedures;

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- (e) basic elements of body functioning and changes in body function that should be reported to the supervisor;
 - (f) maintenance of a clean, safe, and healthy environment of house cleaning and laundry that includes dusting furniture; sweeping, vacuuming, and washing floors; kitchen care including washing dishes, appliances, and counters; bathroom care; emptying and cleaning the bedside commode and urinary catheter bags; changing bed linens; washing inside windows within reach from the floor; removing trash; and folding, ironing, and putting away laundry;
 - (g) recognition of emergencies, knowledge of emergency procedures, and basic home safety;
 - (h) the physical, emotional, and developmental needs of the participant, including the need for respect and privacy of the participant and their property;
 - (i) appropriate and safe techniques in personal hygiene and grooming including bed, tub, shower, and partial bath techniques; shampooing in the sink, tub, or bed; nail and skin care; oral hygiene; toileting and elimination; safe transfer and ambulation; normal range of motion and positioning; and adequate nutrition and fluid intake; and
 - (j) meal preparation and nutrition planning that include special diet preparation, grocery purchase, planning, and shopping; and running errands for the sole purpose of picking up prescriptions.
- (5) Additional training and skill testing by return demonstration is required for any other assigned tasks not included in these service specifications.
 - (6) The PCA is prohibited from administering medications in the home or any setting as defined in Chapter 2723 of the ORC.
 - (7) The PCA may not transport the participant or drive the participant's vehicle.

D. SUPERVISORY REQUIREMENTS

- (1) Prior to participant service initiation, the supervisor shall complete and document a participant home visit, which may occur at the initial PCA visit to the participant, to define the expected activities of the PCA and prepare a written PCA activity plan, where the Agency is providing case

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management services, the PCA activity plan shall be consistent with the Agency service checklist completed by the Agency and the participant.

- (2) The supervisor shall evaluate the PCA's compliance with the activity plan, the participant's satisfaction, and the PCA's performance. Where the Agency is providing case management services, the supervisor shall discuss recommended modifications with the Agency. The supervisor shall conduct and document:
 - (a) a visit to the participant at least every sixty-two (62) days to evaluate compliance with the activity plan; and
 - (b) a supervisory visit to the participant at least every one hundred and twenty-four (124) days while the PCA is present and providing participant care.

E. PERSONNEL QUALIFICATIONS

- (1) The PCA shall be a high school graduate, or have completed a GED, or have a minimum of two years of work-related experience.
- (2) The PCA supervisor or trainer shall be a currently licensed Ohio RN or LPN under the supervision of an RN.