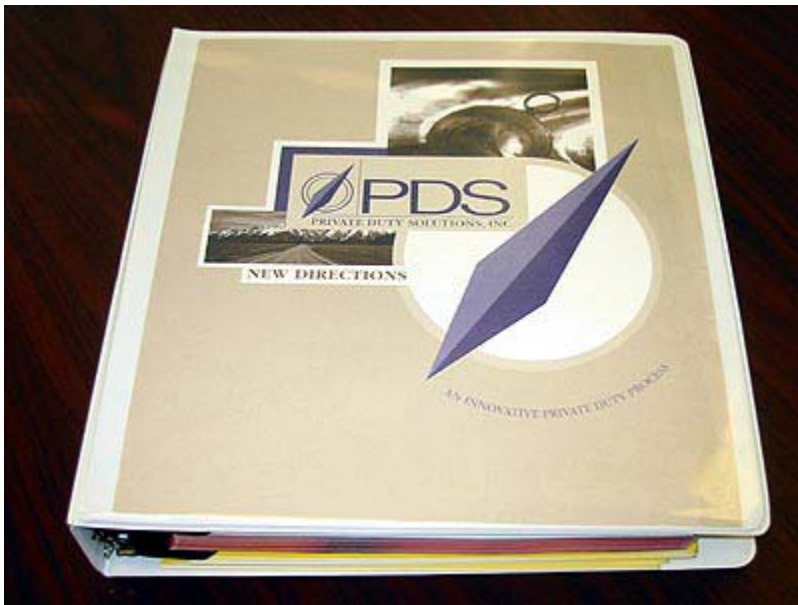


New Directions™ Policies and Procedures Manual for Private Duty Non-Medical Home Care Companies



Available exclusively at Leading Home Care

Need a set of policies and procedures to start or grow your non-medical private duty home care business? Need a template to update your policies, procedures, employee handbook, client charts, intake forms, employment application, and employee orientation? Everything you need is here in one single manual. This jumbo binder contains all of the information you need to start and grow your private duty home care business. This is the same set of binders used in our [New Directions Business Process™](#).

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- Documentation and Record Keeping (19 items)
- In-Service Education (3 items)
- Finance (6 items)
- Legal Issues (6 items)

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Author: Kathleen Bailey

Publisher: Private Duty Solutions, Inc.

Format: 3-Ring Binder with accessories

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New Directions™ Policies and Procedures Manual

Overview of Contents

This large manual includes all the information needed to manage a private duty/private pay homecare and staffing agency in an easy-to-use 3-ring format. The following overviews describe the contents of each chapter.

Administration & Office Management

The information included in the Administration and Office Management chapter is used to establish the foundation for operational control and management of the agency. The administrator is responsible for the planning process and the on-going management of the agency. The office staff is responsible for the efficient control and continuous update of the scheduling process, and monitoring the time and cost of providing care for each client.

- Forms, Policies & Procedures included:
- Organizational Charts
- Sample Vision Statements
- Business Plan Outline
- Business Process Chart
- Business Process Outline
- Staff Meeting Agenda
- Task Sheet (Reminder of Things-To-Do)
- Office Staff Expense Record
- On-Call Report
- Client Monthly Calendar
- Employee Schedule Calendar

Documentation & Record Keeping

The forms in the Documentation and Record Keeping chapter are designed to record and monitor a client's individualized care. The record begins when care is requested and continues until the client is discharged. The forms are used to establish, monitor, record and modify the client's care as needed, throughout the time the client receives care or service from the agency.

- Forms, Policies & Procedures included:
- Request for Service
- Client Assessment
- Client Care Plan - Nursing
- Client Care Plan - Home Health Aide
- Client Care Plan - Homemaker/Companion
- Changes to Care Plan
- Client Care Record - Nursing
- Client Care Record - Home Health Aide

- Client Care Record - Homemaker/Companion
 - Client Care Record - Instructions
 - Observation Guidelines for Home Care Employees
 - Supervisory Clinical Nursing Note
 - Communication Sheet
 - Physician Plan of Treatment / Physician Notification
 - Physician's Interim Orders
 - Kardex for Physician's Orders
 - Standing Order, Adult Routine
 - Letter to Physician Requesting Standing Order
 - Diabetic Flow Sheet
-

Education

The information included in the Education chapter is used to enhance the educational programs that can be used to continually educate the agency's employees:

Forms, Policies & Procedures included:

- In-Service Education Topics for Training Programs
 - Program Evaluation
 - Tips for Listening
-

Finance

The information in the Finance chapter is used to guide and control the financial operations of the agency. The assorted data gives guidance to business planning and management.

Forms, Policies & Procedures included:

- Billing Rates, Calculating

- Billing Rates, Establishing
 - Collection Letters for Overdue Accounts
 - Expense Record, Office Staff
 - Start-up Expenses Worksheet
 - Tax Filing Requirements - Federal
-

Legal Issues

The agreements included in the Legal Issues chapter are designed define the services and responsibilities of the agency and the responsibilities of those who are a party to the agreements. The documents also establish and protect the clients' rights during the time that they receive care or service.

- Forms, Policies & Procedure included:
 - Advance Directive for Health Care
 - Abuse and/or Neglect Evaluation
 - Client Bill of Rights
 - Service Agreement (Between agency and client)
 - Agreement, Home Care Staffing (Supplemental staffing between agencies)
 - Agreement, Private Duty Services in Long Term Care Facilities
-

Human Resources

The forms included in the Human Resources chapter are used to assure competent staff to meet the needs of the clients served by the agency. Staff competence is evaluated at the time of hiring and maintained by one-on-one instruction by qualified personnel for specific knowledge or skills when necessary. The agency also provides staff self-development and learning through in-service educational opportunities covered in the Education chapter. The agency must have a sufficient number of qualified staff to meet the

needs of our clients.

- Forms, Policies & Procedures included:
- New Employee Application Outline
- Employment Application
- Interview Questions
- Reference Request, Confidential
- Assessment Skills/Competency Evaluation - HHA/NA
- Assessment Test - HHA
- Assessment Test Answer Sheet - HHA
- Assessment Test - HHA - Correct Answers
- Availability Form
- Orientation Outline, New Employee
- Orientation Checklist
- W-4 (sample)
- I-9 (sample)
- Criminal Record Check (sample)
- Child Abuse History Clearance
- Health Statement
- Hepatitis Vaccine Consent Form
- Advance Directive Choice Form
- Agreement to Standards
- Infection Control Guidelines - signed
- Appeal Process - Employee
- License Verification - Nursing
- Job Description - Account/Payroll Manager
- Job Description - Administrator
- Job Description - Client Service Representative

- Job Description - Director of Nursing
 - Job Description - Human Resources Manager
 - Job Description - Marketing Director
 - Job Description - "On-Call" Coordinator
 - Job Description - Operations Manager
 - Job Description - RN (field staff)
 - Job Description - LPN/LVN (field staff)
 - Job Description - Certified HHA
 - Job Description - Homemaker/Companion
 - Performance Review Questionnaire
 - Performance Evaluations - Corresponding to each position
 - Performance Evaluations - Field Staff
 - Mileage Report
 - Time Slip
-

Marketing

The information in the Marketing chapter guides the marketing and advertising of the agency's services.

Forms, Policies & Procedures included:

- Competitor's Profile
 - Marketing / Advertising Tips
 - Marketing Plan
 - Marketing Sales Report
 - New Service Introduction - Sample letter #1
 - New Service Introduction - Sample letter #2
 - Brochure - Sample
-

Quality Assurance & Risk Management

The forms included in the Quality Assurance & Risk Management chapter assist the agency to evaluate and monitor its own performance and control disease and injury risks. Using the survey results, the agency can create new policies, design new programs and set performance standards. The infection control guidelines are based on criteria published by the Centers for Disease Control and Prevention, and are designed to prevent disease and infection. However, if a client or an employee develops an infection, the agency can monitor the condition.

Employee incidents can be monitored to investigate and correct problems quickly and to improve employee performance.

- Forms, Policies & Procedures included:
 - Client Satisfaction Survey
 - Evaluation, Staff Relief Employee
 - Incident / Counseling Report
 - Infection Control Guidelines - Employee's Acknowledgement
 - Infection Control Guidelines - Client's Chart
 - Infection Control: Surveillance - Identification - Control
 - Injury Report, Employee
 - Tracking Report
-

Thanks again for your interest in the most complete non-medical and private duty home care policies and procedures manual available today. If you have any other questions, or would like to order, call the Experts at Leading Home Care at 1-888-668-9333.

Sample Policies and Forms

On the following pages, you will find a selection of sample policies and forms from this manual. These samples are intended for your use in considering your purchase of the manual. Any duplication of these samples or distribution to any other party is strictly prohibited.

BUSINESS PLAN OUTLINE

The business plan helps you begin the planning process to turn your idea into a business. A business plan provides a written framework for developing your idea and making it a reality.

THE BUSINESS PLAN

I. Executive Summary

The executive summary is a concise statement of the purpose of your business including your long and short-term goals. If your plan is to be used for financing, include a brief statement regarding the use of the funds being sought.

II. The Business Description

Describe your business and the services you plan to offer.

A. Operational description

1. Purpose and History
2. Description of services to be offered
3. Employment opportunities
4. Benefit to community and local market place
5. Location of office and Hours of service
6. Date business will begin operation

B. Business Organization and Personnel

1. Legal form and ownership
2. Management, Personnel and Advisors

III. The Marketing Plan

Describe your target market, your competition and your strategies for reaching that market.

A. Services

1. Current services provided by you (if any); features and benefits
2. Future services

B. Market

1. Market description
 - a. Define clients by age, income, location
 - b. Identify clients needs and reasons for being attracted to your business
2. Market size – quantify geographic area and population
3. Trends for the future

C. Competition

1. Direct and indirect competition
2. Evaluation – you vs. your competition
(Your position in relation to your competition)

D. Market Position, Goals and Strategies

1. Market share - indicate potential sales volume
2. Goals, long and short-term
3. Marketing Strategy
 - a. Printed material
 - b. Target market - referral sources and directly to clients
 - c. Promotion plan
 - d. Pricing - establish price structure

IV. The Operational Plan

Describe how you plan to operate the business, personnel responsibilities, guidelines and policies for conducting the business, and outside services that will help support the business.

- A. Facilities
 - 1. Location
 - 2. Size
 - 3. Lease – terms and length
- B. The management process
 - 1. Daily operational system
 - 2. Management personnel and responsibilities
 - 3. Field staff - direct caregivers
- C. Policies
 - 1. Business
 - 2. Personnel
- D. Professional services
 - 1. Attorney
 - 2. Accountant
 - 3. Insurance agent

V. The Financial Plan

The financial plan provides detailed projections of your operating costs, future sales, and potential profitability of your agency.

- A. Investment required and the use of these funds
 - 1. Start-up expenses and cash flow projections
 - 2. Anticipated dollars required for operations
 - 3. Uses for line of credit funds
- B. Pro-forma for anticipated annual gross sales
 - 1. Profit & Loss statement
 - 2. Balance sheet
- C. Support documents
 - 1. Personal financial statement
 - 2. Other sources of funds

VI. Attachments

The business plan may also include any information that will strengthen the proof of your expertise or experience.

- A. Resumes
 - 1. Yourself
 - 2. Key personnel
- B. Letters of Reference
- C. Letters of Intent to do business with you
- D. Copies of legal documents that may be appropriate

VII. Cover Sheet

- A. Name of Business
- B. Name(s) of Principals
- C. Business Address
- D. Phone/Fax

LOGO)

CLIENT ASSESSMENT

Assessment Date	Soc.Sec. Number	Date of Birth	Client Name: Last, First, Middle
Referral Date	Start Date	V.O.	

VITAL SIGNS: (if appropriate)

Temp.	Resp.	Height	Weight	Pulse A	Pulse R	Y Reg Y Weak	Y Irreg. Y NSR
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Blood Pressure:	Right Sitting:	Right Standing:	Lying:	Left Sitting:	Left Standing:	Lying:
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Primary DX and other medical/surgical history (including surgical procedures with dates): _____

<p>FUNCTIONAL LIMITATIONS:</p> <p>Y Amputation Y Bowel/Bladder/Incontinence Y Contractures Y Dyspnea with Minimal Exertion Y Paralysis Y Endurance Y Ambulation</p> <p>Y Speech Y Legally Blind Y Hearing Y Other (Specify) _____ _____ _____</p>	<p>ACTIVITIES PERMITTED:</p> <p>Y Bedrest Y Complete Y BRP Y Up as Tolerated Y Transfer Bed/Chair Y Exercises as Prescribed Y Partial Weight Bearing</p> <p>Y Independent at Home Y Wheelchair Y Crutches Y Walker Y Cane Y No Restrictions</p> <p>Other: _____ _____ _____</p>
--	--

<p>NEUROLOGICAL:</p> <p>Y WNL Orientation Y Person Other: _____ _____</p>	<p>AMBULATION:</p> <p>Y Independent Y Needs Assist _____</p>	<p>MENTAL/EMOTIONAL STATUS</p> <p>Y Oriented Y Depressed Y Withdrawn Y Cooperative</p> <p>Y Friendly Y Lethargic Y Calm Other: _____</p> <p>Y Alert Y Passive Y Agitated</p> <p>Y Talkative Y Forgetful Y Disoriented</p>
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<p>MUSCULAR/SKELETAL</p> <p>Y Within Normal Limits Y Weakness Y Other: _____ _____ _____</p>	<p>HEARING</p> <p>Y WNL Y Hearing Loss Y Hearing Aide Other: _____ _____ _____</p>	<p>MOUTH</p> <p>Y WNL Y Difficulty Swallowing Other: _____ _____ _____</p>	<p>VISION</p> <p>Y WNL Y Cataracts Y Glaucoma</p> <p>Y Vision Loss Y Glasses Y Other: _____ _____ _____</p>
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MEDICATION REGIMEN Who administers medications? _____

Do Client and Caregiver understand the purpose, dosage, side effects, and contraindications for each medication?
 Y YES Y NO (Be specific) _____

List medications – Including dosage, frequency, and route. N=New C=Changes

Continued on next page!

(LOGO)

INFECTION CONTROL GUIDELINES

The following guidelines provide uniform instructions for all home care staff and family members to prevent the transmission of infection when working with all home care clients.

Guidelines:

1. Assume that all blood and body fluids from all patients are potential infections.
2. Hands **MUST** be washed before and after contact with each patient, and before preparing food. Hands should be washed under a steady stream of warm water with soap or antibacterial fluid for at least one minute. Dry hands completely.
3. **GLOVES** must be worn when coming in contact with blood or body fluids. These fluids include but are not limited to:
 - * feces
 - * vomitus
 - *urine
 - * oral secretions
 - * respiratory secretions
 - * secretions from open woundsWhen gloves are removed, hands should be thoroughly washed again. Gloves do not take the place of hand washing. Remove gloves by grasping the top and peeling them off, folding the fingers into the glove and turning the glove inside out. Discard the gloves. **Never reuse gloves.**
4. Bed linens, towels, and clothing soiled with urine, stool, or any body fluid should be placed in a plastic bag and tied shut until ready to be laundered. Wash all soiled items in hot, soapy water. Dry on high heat.
5. Dispose of urine, stool, and vomitus by flushing in toilet.
6. Clean bedpan or commode bucket and rinse with a 1:10 bleach solution. (Mix 1/4 cup bleach and 2 1/4 cups water.) Use a fresh solution daily.
7. Dispose of gloves and incontinent padding in a sealed plastic bag. Place this bag inside household trash bag.
8. Wash all eating utensils in hot soapy water.
9. Needles, syringes, and sharps are not to be recapped, bent, broken or clipped. Place intact into a puncture resistant container. A coffee can with a hard plastic lid may be used. Tape lid securely in place when ready for disposal with household trash.

IF YOU HAVE QUESTIONS, PLEASE CALL OUR OFFICE: 555-5555

THESE INSTRUCTIONS MUST REMAIN IN THE CLIENT'S CHART

ANY CLIENT CHANGES?

NAME:

YES NO DATE _____

ADDRESS:

CHANGE _____ PHONE NUMBER: _____

HOURS: _____

Initials: _____ Additional Information: _____

Primary Caregivers: _____

Name of This Agency
Address
Phone

MONTH & YEAR

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday

POLICY AND PROCEDURE

Implemented: _____
Revised: _____

TITLE: **ADVANCE DIRECTIVE**

POLICY: This agency recognizes a client's right to request that no CPR or other "heroic" measures be instituted to prolong life. This agency will support the client's wishes when they comply with Act 1992-24 (20 Pa. C.S.A. sect. 5409 (b)).

The agency will provide information to the client and this agency's employees that a Do Not Resuscitate (DNR) order may be rescinded by:

1. Verbal or written notification of any agency personnel made by the client or the responsible party, and that
2. Such notification may be made at any time and will take precedence over any written document.

The Agency will not condition the provision of care or otherwise discriminate based on whether an individual has an order for DNR.

PROCEDURE:

1. When a copy of an Advanced Directive is received by the Agency, the Nursing Supervisor will contact the client's attending physician to ascertain if orders, specific to the Directive, are appropriate.
2. A DNR order must state that an Advance Directive is on file and that the client is in a terminal state.
3. Two (2) original copies of DNR will be obtained from the client's attending physician.
4. When written orders are received in this agency's office they will be added to the client's chart.
5. The client's chart will be labeled with a large, red circle indicating the client is DNR.
6. The client's care plan will be amended to reflect the change in physician orders.
7. The Nursing Supervisor will remind the client, family or other appropriate persons of the need to have a copy of the Advanced Directive as well as an original copy of the DNR order placed in a clearly marked envelope into the client's refrigerator.
8. A copy of this policy will be placed in the chart in the client's place of service.