

ANNOTATION OF TASKS PERFORMED AND KNOWLEDGE AND SKILLS USED ACROSS LINES OF SERVICE IN LONG TERM CARE

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
Domain 10 Customer Care, Supports, and Services					
10.01 Establish care recipient service policies and procedures that comply with applicable federal and state laws, rules, and regulations.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>S11 Analyzing and interpreting information/data</p> <p>S13 Recognizing and ensuring care recipients' holistic needs are being met</p> <p>S16 Writing and evaluating policies and procedures</p> <p>S19 Managing regulatory and accreditation surveys, inspections, and audits</p>	<p>Able to create policies and procedures that follow federal and states laws rules and regulations</p> <p>Understands and implements contemporary care planning processes assuring preferences based on customers stated needs.</p> <p>These laws apply across lines of service (LOSs):</p> <ul style="list-style-type: none"> • Older Americans Act of 1965 • Social Security Amendments Act of 1965 • Rehabilitation Act of 1973 • State practice acts for nurse, therapist, dietician, etc. • Elder Justice Act of 2010 • Condition of Participation and State specific laws • Affordable Care Act of 2010 	<p>Skilled Nursing Facilities (SNFs) are typically required to be knowledgeable on 42 CFR 483.5 to 483.75 or the Centers of Medicare Services (CMS) Medicare & Medicaid Requirements for Long-Term Care Facilities.</p> <p>Omnibus Budget Reconciliation Act of 1987 applies</p>	<p>Regulations for an entry level Assisted Living Administrator are state specific but again overarching federal laws would apply.</p> <p>Although AL Administrators need to understand state specific regulation, the fundamental skill set of ‘what is behind the regulation’ can be universally applied. Assessment to care planning to customer centered decision making are labeled differently in all three lines of service but are universal in attempting to achieve a person centered care environment for individual needs across all lines of service (LOS).</p>	<p>Home Health Care and Hospice regulations are both found in the Code of Federal Regulations. The specific Medicare (CMS) guidelines are located at:</p> <ul style="list-style-type: none"> • Home Health Care 42 CFR 484.1-484.55 • SOM Appendix B • Hospice 42 CFR 418.3 418.116 • SOM Appendix M <p>Care Recipient services for Adult Day programs are state specific however the core competency for the administrator would have generally the same approach in writing and evaluating care recipient policies to ensure the client’s holistic needs are being met, using the same principles across all LOS.</p>
10.02 Ensure plans of care are evidence-based, established, implemented, updated, and monitored based on care recipient preferences and assessed needs.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K05 Psychosocial aspects of aging</p> <p>K06 Physiological aspects of aging</p> <p>K19 Basic understanding of mental health issues</p> <p>K20 Basic understanding of cognitive impairments</p> <p>K21 Basic principles of behavior management</p> <p>K22 Basic principles of restraint usage and reduction</p> <p>K27 Basic principles of hospice and palliative care</p> <p>K34 Resident Assessment Instrument (RAI) and interdisciplinary care plan requirements and process</p> <p>K35 Care recipient assessment instruments (OASIS) and interdisciplinary care plan requirements and process</p> <p>S11 Analyzing and interpreting information/data</p> <p>S13 Recognizing and ensuring care recipients' holistic needs are being met</p> <p>S16 Writing and evaluating policies and procedures</p> <p>S17 Developing and evaluating systems</p>	<p>Able to ensure that staff implements the plan of care for each care recipient based on the individuals needs and preferences under the direction of a physician. Includes comprehensive assessment of each care recipient, which includes (but is not limited to) assessments for nutrition (to include diet, texture, weight, swallowing), therapy, mobility, fall risk, skin/wound management, medications and contraindications, cognitive abilities, behavior, mental health, etc.</p>	<p>Care planning for individual preferences based on professional assessment is consistent across all LOS. Specific to SNF is: CFR 483.</p> <ul style="list-style-type: none"> • MDS assessment • Resident Assessment Instrument Manual • Care planning processes 	<p>Essential for the core competency of an entry level administrator is the ability to ensure that plans of care are established to professional standards but state rules and regulations make the tool used unique to each state.</p> <ul style="list-style-type: none"> • Uniform Assessment Instrument • Individual Service Plans • State specific tools • Clearly defined Resident Agreement (stating capabilities and limitations of AL) 	<p>The home health plan of care is outlined using CMS OASIS C1 Provider Manual, (home health only). Direction is provided for the required elements for individualized plan of care.</p> <p>Provider organizations provide valuable resources with template to operational guidelines, policies, procedures. The most widely used by the provide community are:</p> <ul style="list-style-type: none"> • National Hospice and Palliative Care Accrediting bodies • ACHC (Accreditation Commission for Health Care) • CHAP (Guidance Policy Tools) Community Health Accreditation Partner) <p>The Plan of Care for Home Health is specifically identified in 42 CFR 484.18 and 484.55</p> <p>For Hospice: State Operations Manual (SOM) 418.54 through 418.56.</p>

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			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
10.03 Ensure the planning, development, implementation/ execution, monitoring, and evaluation of admission/move in process, including preadmission/ pre-move in information, to promote a quality experience for care recipients.	K05 Psychosocial aspects of aging K06 Physiological aspects of aging K18 Basic principles of creating a safe environment for care recipients K30 Person-centered care concepts K31 Diversity of care recipients K33 Care recipient Bill of Rights K37 Admission/move-in, transfer, and discharge/move-out requirements K41 Care recipient specific legal matters (such as power of attorney, guardianship, conservatorship, code status, Advance Directives) S02 Communicating effectively S03 Cultivating effective relationships S05 Demonstrating empathy S13 Recognizing and ensuring care recipients' holistic needs are being met S22 Utilizing social media	Able to ensure that the admission process is comprehensive and is resident centered. This task includes obtaining all available documentation at the time of admission to include; but not limited to; power of attorney for health care and financial, care recipient identification cards, insurance information, doctor and all other orders related to the care recipient to include hospital/doctors/clinic records pertaining to the care recipient stay at the facility or services provided by the organization.	Beyond the empathy of the transition events for the care recipient, Administrators need a basic understanding of the concepts of bill of rights and comprehension of the bill of rights for their LOS. Bill of Rights are written for each LOS. Advanced Directives are universal across all LOS. Specific bill of rights for SNF can be found at www.cms.gov . (Code of Federal Regulations) 483.12 d. (1)-(4) <ul style="list-style-type: none"> • Intake of orders from hospital or incoming referral source • A basic understanding of the State Practice Acts for each licensee is essential to avoid direction to an occupation that would be counterproductive to their profession; i.e. Nurse, physical therapist, dietician, etc. 	State bill of rights exists for most jurisdictions and should be obtained for the state of which the academic program resides. General guidance of the bill of rights concepts are critical for person centered care concepts regardless of the LOS. QAPI Resources provide move in/out best practices as guides for quality to be reviewed for all LOS. Resident Admission Agreement is an important document outlining the expectations for both the facility and the resident. It should also specify the capabilities and limitations of the AL, and under what criteria move-out (discharge) may be warranted.	Home Health Care bill of rights and Hospice bill of rights exist and need to be reviewed by all health care providers. Patient Rights are listed in 484.10 Best practices or other tools for move in/out should be reviewed. CMS QAPI resources for all LOS are provided at the following website. http://www.cms.gov/Medicare/Provider-Enrollment-and-Certification/QAPI/qapiresources.html
10.04 Ensure the planning, development, implementation/ execution, monitoring, and evaluation of discharge/move out process to promote a quality experience for care recipients.	K01 Applicable federal and state laws, rules, and regulations K05 Psychosocial aspects of aging K06 Physiological aspects of aging K18 Basic principles of creating a safe environment for care recipients K30 Person-centered care concepts K31 Diversity of care recipients K33 Care recipient Bill of Rights K37 Admission/move-in, transfer, and discharge/move-out requirements K41 Care recipient specific legal matters (such as power of attorney, guardianship, conservatorship, code status, Advance Directives) S02 Communicating effectively S03 Cultivating effective relationships S05 Demonstrating empathy S13 Recognizing and ensuring care recipients' holistic needs are being met S22 Utilizing social media	Ensures that care recipient care is appropriate for the level of care they require and that an interdisciplinary team continually monitors the care recipient's progress and recommends the best care environment need to maximize the care recipient's quality of living.	Each 483.12 (a)-(b) Safe discharge Older Americans Act of 1965 Omnibus Budget Reconciliation Act of 1987 Social Security Amendments Act of 1965 Rehabilitation Act of 1973 State Practice Acts for: Nurse, therapist, Dietician, etc. http://www.pioneernetwork.net/ Same Best Practices guidance and resources as 10.03.	Forms at discharge State specific Resident Admission Agreement is an important document outlining the expectations for both the facility and the resident. It should also specify the capabilities and limitations of the AL, and under what criteria move-out (discharge) may be warranted.	Transfer trauma and relocation practices should be included in the knowledge and skills of all administrators at all levels. 484.10 lists specific patient bill of rights to this KSA. Patients need a clear understanding of what services are and are not covered under both home health and hospice. Coverage must be clearly defined to the patient upon admission, so that if/when the patient meets the criteria for discharge, they know in advance the discharge is appropriate. Follow up services if needed are then established and implemented. Coverage criteria for both home health and hospice can be found through the State Operations Manuals (SOM) for each discipline.

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10.05 Ensure the planning, development, implementation/ execution, monitoring, and evaluation of programs to meet care recipients' psychosocial needs and preferences.	K01 Applicable federal and state laws, rules, and regulations K03 Ethical decision-making K05 Psychosocial aspects of aging K11 Basic principles and concepts of restorative/wellness programs K19 Basic understanding of mental health issues K20 Basic understanding of cognitive impairments K23 Basic elements of a social services program K24 Basic elements of a therapeutic recreation/activity program K27 Basic principles of hospice and palliative care K28 Grieving process K32 Care recipients' support network interests, needs, and values K40 Services and resources available across the continuum of care (such as community, social, financial, spiritual) K50 Signs and symptoms of abuse, neglect, and exploitation K56 Hospitality services S03 Cultivating effective relationships S05 Demonstrating empathy S13 Recognizing and ensuring care recipients' holistic needs are being met	Able to ensure that care recipients are properly evaluated and cared for based on their psychosocial needs and preferences.	483.15 (a)-(h) Resident Bill of Rights 483.13 Resident Behavior and Facility Practices C.20 comprehensive Care Plans 483.25(l) Unnecessary Drugs 483.25(f) Mental and Psychosocial Functioning	No specific regulations but core competencies should be addressed in a Person-centered care environment for all clients. Address specific needs of dementia residents with dementia and appropriateness of environment and services in the AL setting.	Hospice Core Services requires counseling as a core including but not limited to bereavement, dietary and spiritual counseling. State Operations Manual 2080 C. Patient Bill of Rights is 484.10,
10.06 Ensure the planning, development, implementation/ execution, monitoring, and evaluation of care recipients' activities/recreation to meet social needs and preferences.	K01 Applicable federal and state laws, rules, and regulations K06 Physiological aspects of aging K11 Basic principles and concepts of restorative/wellness programs K12 Basic principles of rehabilitation K23 Basic elements of a social services program K24 Basic elements of a therapeutic recreation/activity program K30 Person-centered care concepts K42 Activities of Daily Living (ADLs) and Independent Activities of Daily Living (IADLs) K48 Quality assurance and performance improvement processes as related to care and services S13 Recognizing and ensuring care recipients' holistic needs are being met S21 Utilizing technology S22 Utilizing social media	Able to ensure that activities, events, and programs are care recipient centered and designed to meet the needs and preferences of each care recipient.	Administrators should be exposed to Achieving Excellence in America's Nursing Homes, Pioneer Network and other resources <i>regardless of their LOS</i> to learn person centered options for the care recipient. 42 CFR 483.15 (d)-(f) requires specific SNF Age-appropriate activities within the Resident Rights. http://www.pioneernetwork.net/	Activities and social needs and preferences are an integral part of AL as a social model differentiating it from the medical model of the SNF. Activities should include both internal events as well as community oriented programs and trips. Care should be taken to design activities specifically for those with dementia as well.	Comprehensive assessment of patients in located in 484.55. HHA Comprehensive assessments may be focused more on the rehabilitative and therapeutic aspect of care with recognition of the role of activities and recreation for ultimate health and life satisfaction.

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10.07 Ensure the planning, development, implementation/ execution, monitoring, and evaluation of a health information management program to meet documentation requirements in compliance with federal and state regulations.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K07 Basic principles and concepts of nursing</p> <p>K08 Basic medical terminology</p> <p>K09 Basic pharmaceutical terminology</p> <p>K34 Resident Assessment Instrument (RAI) and interdisciplinary care plan requirements and process</p> <p>K35 Care recipient assessment instruments (OASIS) and interdisciplinary care plan requirements and process</p> <p>K36 Care recipient assessments and care plans other than RAI and OASIS</p> <p>K41 Care recipient specific legal matters (such as power of attorney, guardianship, conservatorship, code status, Advance Directives)</p> <p>K42 Activities of Daily Living (ADLs) and Independent Activities of Daily Living (IADLs)</p> <p>K47 Center for Medicare and Medicaid Services (CMS) quality indicators and measures</p> <p>K48 Quality assurance and performance improvement processes as related to care and services</p> <p>K49 Techniques for auditing care recipient services and outcomes</p> <p>K52 Medical record content, format, and documentation requirements</p> <p>K53 Confidentiality, disclosure, and safeguarding medical record information requirements</p> <p>S11 Analyzing and interpreting data.</p>	<p>Able to ensure that all care recipient specific documentation is protected and follows state, federal, and HIPAA regulations.</p> <p>HIPAA would apply to all three LOS.</p> <p>Knowledge on POA and resident rights on review/documentation of education and assurance of completion would apply for all three LOS with each possessing their unique bill of rights.</p> <p>Policies and procedures would need to be developed for all three LOS for clinical record retention, protection of the confidentiality of information and minimum contents specific to the state.</p>	<p>CFR 483.10 (e)</p> <p>CFR 483.75 (l)</p>	<p>State Privacy Acts or Laws</p> <p>Resident Bill of Rights</p>	<p>HHA clinical record requirements are found in 42 CFR 484.48 which identified retention, protection and minimum contents.</p> <p>Hospice clinical record requirements are located at 418.104(a through f)</p>
10.08 Ensure the planning, development, implementation/execution, monitoring, and evaluation of medication management that supports the needs of the care recipient.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K07 Basic principles and concepts of nursing</p> <p>K09 Basic pharmaceutical terminology</p> <p>K10 Basic principles and regulations for medication management/administration</p> <p>S02 Communicating effectively</p> <p>S10 Problem solving</p> <p>S11 Analyzing and interpreting information/data</p> <p>S16 Writing and evaluating policies and procedures</p> <p>S17 Developing and evaluating systems</p> <p>S20 Prioritizing and managing time</p> <p>S21 Utilizing technology</p>	<p>Able to ensure the timely ordering and procurement of medications, safe storage and distribution of the medications at the appropriately scheduled times, by the appropriately licensed staff.</p> <p>Able to understand terminology related to medication</p> <p>Able to ensure the pharmacist's periodic review of medication orders with recommendations to the physician.</p> <p>Able to ensure the documentation of the delivery of medications, and if held for any reason, that information and circumstances are duly noted as well.</p>	<p>Conditions of Participation, Federal Regulations, OBRA.</p> <p>CFR 483.10(n)</p> <p>CFR 483.25(l)</p> <p>CFR 483.60</p>		<p>Hospice CFR 418.106 (a-e)</p> <p>Home Health CFR 484.55(d)</p>

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10.09 Ensure the planning, development, implementation/execution, monitoring, and evaluation of a rehabilitation program to maximize optimal level of functioning and independence for care recipients.	K01 Applicable federal and state laws, rules, and regulations K05 Psychosocial aspects of aging K11 Basic principles and concepts of restorative/wellness programs K24 Basic elements of a therapeutic recreation/activity program S11 Analyzing and interpreting information/data S12 Informed decision making/critical thinking S13 Recognizing and ensuring care recipients' holistic needs are being met S14 Assessing and recognizing safety concerns and needs S15 Allocating and optimizing resources and programs S17 Developing and evaluating systems	Able to provide individualized rehabilitative services to recipients that will help them meet their baseline and allow residents to be as independent as possible.	Conditions of Participation, Federal Regulations, OBRA and reimbursement types. CFR 483.20(a) CFR 483.45 CFR 483.75(h) CFR 483.55(f)		Hospice: CFR 418.72 and 418.74 Home Health CFR 484.38
10.10 Ensure the planning, development, implementation/execution, monitoring, and evaluation of systems for coordination and oversight of contracted services.	K01 Applicable federal and state laws, rules, and regulations K39 Roles, responsibilities, regulation and oversight of contracted providers and services K40 Services and resources available across the continuum of care (such as community, social, financial, spiritual) S02 Communicating effectively S03 Cultivating effective relationships S09 Negotiating, collaborating, and resolving disputes S12 Informed decision making/critical thinking S13 Recognizing and ensuring care recipients' holistic needs are being met S15 Allocating and optimizing resources and programs S18 Protecting and promoting financial viability	Able to ensure that services are available to meet the needs of each recipient from qualified vendors that meet city, state, and federal requirements.	Conditions of Participation, Federal Regulations, OBRA and reimbursement types. CFR 483.60 CFR 483.75 (h through o)		Home Health CFR 484.14(f-h) Hospice CFR 418.108 (c) and 418.12 among other areas
10.11 Ensure the planning, development, implementation/execution, monitoring, and evaluation of policies and procedures for responses to care recipient-specific incidents, accidents, and/or emergencies.	K01 Applicable federal and state laws, rules, and regulations K18 Basic principles of creating a safe environment for care recipients K46 Emergency medical services and techniques (such as CPR, first aid, Heimlich maneuver, AED) K50 Signs and symptoms of abuse, neglect, and exploitation K51 Mandatory reporting requirements for incidents and adverse events S10 Problem solving S11 Analyzing and interpreting information/data S12 Informed decision making/critical thinking S14 Assessing and recognizing safety concerns and needs S16 Writing and evaluating policies and procedures S17 Developing and evaluating systems	Able to ensure that policies and procedures are written and followed to prevent incidents and accidents and to prepare staff to act appropriately when incidents, accidents, and emergencies occur.	Conditions of Participation, Federal Regulations, OBRA and reimbursement types. CFR 483.13(b) CFR 483.25 (h) CFR 483.25 (m) CFR 483.35 (b) CFR 483.40 (d) CFR 483.70 (a) CFR 483.75 (o)		Hospice: CFR 418.110 (c) Home Health CFR 484.18 (a) and G206 (x) among many other areas where safety is specifically mentioned as part of the plan of care and treatment.
10.12 Ensure the planning, development, implementation/execution, monitoring, and evaluation of housekeeping and laundry services for care recipients.	K01 Applicable federal and state laws, rules, and regulations K14 Basic principles of infection control K18 Basic principles of creating a safe environment for care recipients S13 Recognizing and ensuring care recipients' holistic needs are being met S14 Assessing and recognizing safety concerns and needs S15 Allocating and optimizing resources and programs S16 Writing and evaluating policies and procedures S17 Developing and evaluating systems	Able to ensure a clean, safe, and sanitary environment. Center for Disease Control (CDC) recommendations and Infection Control best practices would apply across the continuum, and may vary for some settings. OSHA guidelines with respect to chemical usages and Safety Data Sheets (SDS) would apply across all settings.	Conditions of Participation, Federal Regulations, OBRA and reimbursement types. CFR 483.10(l) CFR 483.15 (h) CFR 483.35 (i) CFR 483.65 (all sub-sections) CFR 483.70 (h)		This applies only to inpatient hospice services. For inpatient hospice: CFR 418.110 (i, j, k)

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10.13 Ensure the planning, development, implementation/execution, monitoring, and evaluation of education intended for care recipients and their support networks.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K05 Psychosocial aspects of aging</p> <p>K06 Physiological aspects of aging</p> <p>K27 Basic principles of hospice and palliative care</p> <p>K32 Care recipients' support network interests, needs, and values</p> <p>K33 Care recipient Bill of Rights</p> <p>K40 Services and resources available across the continuum of care (such as community, social, financial, spiritual)</p> <p>S13 Recognizing and ensuring care recipients' holistic needs are being met</p> <p>S14 Assessing and recognizing safety concerns and needs</p> <p>S16 Writing and evaluating policies and procedures</p>	Able to ensure that the care recipient and or their responsible party is informed of their care, condition, and treatment as much as practical.	<p>Conditions of Participation, Federal Regulations, OBRA and reimbursement types.</p> <p>CFR 483.12 (a-d)</p> <p>CFR 483.10 (a)</p> <p>CFR 483.15 (c)</p> <p>CFR 483.20</p>	Resident education begins with the Admission Resident Agreement, and carries into the Service Plan. Should be updated on a regular basis and as resident care needs change. Resident Agreement should delineate the capabilities of the AL and for what reasons a move out decision may be implemented.	<p>Each section of the Home Health and Hospice requirements for participation that outline services delivered to patients requires that the recipient receive appropriate education as to the service being delivered, expectations and potential risks and outcomes.</p> <p>For Home Health: CFR 484.14 (g) CFR 484.48(a,b) CFR 484.32 (a) CFR 484.55 (a,b,d)</p> <p>For Hospice: CFR 418.52 (c) CFR 418.54 (c,d) CFR 418.56 (b,c,d) CFR 418.100(a)</p>
10.14 Ensure the planning, development, implementation/ execution, monitoring, and evaluation of nutritional needs and preferences of care recipients.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K06 Physiological aspects of aging</p> <p>K25 Basic principles of nutrition including specialized diets</p> <p>K26 Basic principles of dietary sanitation, food storage, handling, preparation, and presentation</p> <p>K30 Person-centered care concepts</p> <p>K34 Resident Assessment Instrument (RAI) and interdisciplinary care plan requirements and process (NHA)</p> <p>K35 Care recipient assessment instruments (OASIS) and interdisciplinary care plan requirements and process (HCBS)</p> <p>S02 Communicating effectively</p> <p>S11 Analyzing and interpreting information/data</p> <p>S17 Developing and evaluating systems</p>	<p>Able to ensure that the care recipient's nutritional needs are met in accordance with their individualized needs and preferences while simultaneously meeting all physicians prescribed orders.</p> <p>*Federal regulations (NH-Apdx PP, HH-Apdx B, Hospice-Apdx M) differ across service lines</p>	<p>483.25(i) Quality of Care – Nutrition &</p> <p>483.25(j) Quality of Care – Hydration and</p> <p>483.35 Dietary Services</p> <p>483.15(b) Self-Determination and Participation</p> <p>483.15(e) Accommodation of Needs</p>	<p>Generally more focused on resident preferences than on nutritional standards. Varies widely by state. Liberalized diets to match resident preferences versus strict adherence to therapeutic diets.</p> <p>Federal Regulations do not apply, although there are likely state regulations that may govern this area (although these cannot be specifically tested on in an exam). However it is certainly good practice to ensure that nutritional needs and recipient preferences be monitored and met as appropriate. Food Safety best practices should also be followed.</p>	<p>Varies by setting; more flexible in community-based settings than in hospice (Medicare regulations in hospice)</p> <p>Some of this depends on the line of service-in settings where meals or assistance with meals are provided, i.e. Adult Day programs, similar to RCAL state regulations may apply</p> <p>In Home Health, meals may not be provided, but an assessment of nutritional needs and functional ability of an individual to get those needs met should be part of a good assessment, with involvement of the care recipient per 484.10(c) Standard: Right to be Informed and to Participate in Planning Care and Treatment, and inclusion/referral to resources to support those needs should be made as necessary.</p> <p>In Home Care, if assistance with meals is provided, proper food safety best practices should be followed.</p> <p>In Hospice, aspects of this are governed under 418.110(l) Meal Service and Menu Planning and perhaps aspects of 418.56 Condition of Participation: Interdisciplinary Group, Care Planning, and Coordination of Services to the extent that the appropriate team members with expertise related to the care recipients nutritional needs are included and that the preferences of the patient and family are taken into account.</p>

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			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
10.15 Ensure the planning, development, implementation/ execution, monitoring, and evaluation of dining experience that meets the needs and preferences of care recipients.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K05 Psychosocial aspects of aging</p> <p>K06 Physiological aspects of aging</p> <p>K20 Basic understanding of cognitive impairments</p> <p>K25 Basic principles of nutrition including specialized diets</p> <p>K26 Basic principles of dietary sanitation, food storage, handling, preparation, and presentation</p> <p>K30 Person-centered care concepts</p> <p>K56 Hospitality services</p> <p>S01 Creating and communicating a vision</p> <p>S13 Recognizing and ensuring care recipients' holistic needs are being met</p> <p>S15 Allocating and optimizing resources and programs</p> <p>S17 Developing and evaluating systems</p>	<p>Able to ensure that dining services are resident centered and meets the nutritional needs paralleled with the recipient preferences.</p> <p>*Federal regulations (NH-Apdx PP, HH-Apdx B, Hospice-Apdx M) differ across service lines</p>	<p>Focus on determining resident preferences but then service delivery still rigidly dictated by regulatory/recommended guidelines.</p> <p>Federal regulations will govern aspects of this, namely</p> <p>483.25 (i) Quality of Care – Nutrition & Hydration, 483.25(j) Quality of Care – Hydration, 483.70(g) Physical Environment - Dining and Resident Activities</p> <p>483.35 Dietary Services</p> <p>483.15(b) Self-Determination and Participation</p> <p>483.15(e) Accommodation of Needs</p>	<p>Much more freedom to follow resident preferences even if in conflict with recommended guidelines.</p> <p>Federal Regulations do not apply, although there are likely state regulations that may govern this area (although these cannot be specifically tested on in an exam). However it is certainly good practice to ensure that food safety practices are followed, a hospitable experience is offered, and recipient preferences honored as appropriate.</p>	<p>Some of this depends on the line of service-in settings where congregant meals are provided.</p> <p>For Adult Day programs, similar to RCAL, state regulations may apply, and certainly food safety practices should be followed, a hospitable experience offered, and recipient preferences honored, as appropriate.</p> <p>In Home Health, this is less applicable, but if assistance with meals is provided, the above good practices should still apply if meal or eating assistance is offered, and care recipient preferences should be honored per 484.10(c) Standard: Right to be Informed and to Participate in Planning Care and Treatment.</p> <p>In Home Care, if assistance with meals is provided, as stated above those same good practices should be followed.</p> <p>Hospice - aspects are governed under 418.110(l) Meal Service and Menu Planning 418.56 Condition of Participation: Interdisciplinary Group, Care Planning, and Coordination of Services to the extent that the appropriate team members with expertise related to the care recipients functional dining needs are included and that the preferences of the patient and family are taken into account.</p>

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			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
10.16 Ensure care recipients' rights and individuality within all aspects of care.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K03 Ethical decision-making</p> <p>K22 Basic principles of restraint usage and reduction</p> <p>K27 Basic principles of hospice and palliative care</p> <p>K30 Person-centered care concepts</p> <p>K33 Care recipient Bill of Rights</p> <p>K50 Signs and symptoms of abuse, neglect, and exploitation</p> <p>S01 Creating and communicating a vision</p> <p>S05 Demonstrating empathy</p> <p>S13 Recognizing and ensuring care recipients' holistic needs are being met</p>	<p>Able to ensure all staff are trained and follow State and Federal Guidelines related to Resident Rights. Attention must be made to issues related to Abuse, Neglect, Misappropriation of Resident Property and Mistreatment of Residents.</p> <hr/> <p>*Although federal regulations (NH-Apdx PP, HH-Apdx B, Hospice-Apdx M) dictate practices in NH, HH, and Hospice, realistically, the general dictates of these Resident Rights should really be applied across all settings and the knowledge and skills necessary to support their provision do not differ significantly across services lines.</p>	<p>Uniform federal definition of abuse and neglect.</p> <p>Federal Regulations will govern aspects of this – namely the entirety of 483.10 Resident Rights, most of 483.13 Resident Behavior and Facility Practices, and most of 483.15 Quality of Life.</p>	<p>More variability in abuse, neglect and exploitation standards due to different state definitions in the absence of a uniform national standard.</p> <p>Federal Regulations do not apply, although there are likely state regulations that may govern this area (although these cannot be specifically tested on in an exam). However it is certainly good practice to ensure that care recipients' rights and individuality within care provision are afforded-one of the bedrock principles of RCAL was to provide more personalized care in a more homelike environment, so similar "rights" afforded to nursing home residents should be afforded to RCAL recipients.</p> <p>Many states follow the Federal Regulations in regard to resident rights, and may implement additional regulations unique to that state.</p>	<p>More focus on individuality in home/community settings??</p> <p>More likely focus on person-centered care due to setting??</p> <p>Federal regulations do not govern Adult Day or Home Care services, but like in RCAL, every effort should be made to afford these care recipients similar Rights and individuality within care provision that are afforded to nursing home residents.</p> <p>One of the biggest challenges in a HCBS setting may be care providers trying to balance safety concerns with care recipients' rights, but as long as care recipients are competent, and risks are explained, they should be allowed to assume the level of risk they chose. In Home Health, this is governed by the entirety of 484.10 Condition of Participation: Patient Rights. In Hospice this is governed by the entirety of 418.52 Condition of Participation: Patient's Rights and 418.56 Condition of Participation: Interdisciplinary Group, Care Planning, and Coordination of Services to the extent that the preferences of the patient and family are taken into account, and 418.110(m) Condition of Participation: Hospices that provide inpatient care directly – Restraints or Seclusion.</p>

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
10.17 Integrate support network's perspectives to maximize care recipients' quality of life and care.	<p>K02 Government programs and entities</p> <p>K03 Ethical decision-making</p> <p>K32 Care recipients' support network interests, needs, and values</p> <p>K33 Care recipient Bill of Rights</p> <p>K41 Care recipient specific legal matters (such as power of attorney, guardianship, conservatorship, code status, Advance Directives)</p> <p>K48 Quality assurance and performance improvement processes as related to care and services</p> <p>S02 Communicating effectively</p> <p>S03 Cultivating effective relationships</p> <p>S06 Group facilitation, consensus building, and team building</p> <p>S12 Informed decision making/critical thinking</p> <p>S13 Recognizing and ensuring care recipients' holistic needs are being met</p>	<p>Able to ensure that measures are taken to incorporate perspectives from all parties involved in formally or informally supporting the care recipient, including family and supportive friends, as well as interdisciplinary care providers from across the care continuum. Both their recommendations and outcome measures should be considered when strategizing how each member of the support network helps to improve the resident's quality of life and care. Attention must be made to issues related to meeting the care recipient's individualized needs.</p>	<p>Regulations require collecting history/preferences from family/support network.</p> <p>In a sense, this is governed by all of the federal Nursing Home regulations which are purportedly intended to help maximize residents' quality of life and care. More specifically, 483.20 Resident Assessment includes provisions that family members input should be included in the assessment process, and with respect to individual care needs, 483.15 Quality of Life, 483.15(b) Self-Determination and Participation, and 483.15(e) Accommodation of Needs also apply.</p>	<p>Input from family/support network encouraged but not mandated.</p> <p>Federal Regulations do not apply, although there may be state regulations that may govern this area (although these cannot be specifically tested on in an exam). However it is certainly good practice to ensure that input from family and other supports (formal or informal) are considered to enhance the care recipient's quality of life and care.</p>	<p>Family/support network is often extremely prevalent in HCBS, and more weight may need to be given to their perspectives.</p> <p>Federal Regulations do not apply to Adult Day or Home Care, although there may be state regulations that may govern these areas (although these cannot be specifically tested on in an exam). However, the role of the support network is often critical in allowing a care recipient to successfully get their needs met via HCBS, so it is certainly good practice to ensure that input from family and other supports (formal or informal) are considered to enhance the care recipient's quality of life and care. In Home Health a federal regulations that govern this area include 484.10(c) Standard: Right to be Informed and to Participate in Planning Care and Treatment (and we think there may be aspects of completing OASIS that require family members to be interviewed on patient preferences). In Hospice aspects of 418.56 Condition of Participation: Interdisciplinary Group, Care Planning, and Coordination of Services and 418.100(a) Standard: Serving the Hospice Patient and Family apply to the extent that preferences of the patient and family are taken into account.</p>

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
10.18 Ensure transportation options are available for care recipients.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K02 Government programs and entities</p> <p>K39 Roles, responsibilities, regulation and oversight of contracted providers and services</p> <p>K40 Services and resources available across the continuum of care (such as community, social, financial, spiritual)</p> <p>K54 Transportation options for care recipients</p> <p>S02 Communicating effectively</p> <p>S14 Assessing and recognizing safety concerns and needs</p> <p>S15 Allocating and optimizing resources and programs</p>	<p>Able to ensure adequate transportation to recipients. The facility should identify transportation that is available and the costs (if any) for the services and inform recipients and their responsible parties of availability and cost. The facility/entity must be available to help coordinate transportation services based on the recipients preference and available funding.</p> <p>* There are federal regulations (NH- Appendix PP, HH- Appendix B, Hospice- Appendix M) require provision of transportation in certain cases in NH, HH, and Hospice, but the necessary knowledge and skills needed to be able to offer or arrange safe transportation to not likely differ significantly across services lines.</p>	<p>Most providers have in-house transportation available. In-house availability may be limited due to state/federal safety or training requirements for transportation staff.</p> <p>Federal regulations generally require the facility to provide transportation when it is necessary for the resident to receive care from, participate in activities outside the building, or otherwise transfer to alternative locations, Nursing Homes are expected to arrange safe transportation. The obligation to offer transportation outside of the facility is specifically referenced in the following Nursing Home regulations: 483.15(f) Activities, 483.25(b) Vision and Hearing, 483.25(c), 483.40(d) Availability of Physicians for Emergency Care, 483.55(a) Dental Services, 483.55(b) Skilled Nursing Facilities, 483.65 Infection Control, 483.75(j) Laboratory Services, and 483.75(k) Radiology and Other Diagnostic Services.</p>	<p>Federal Regulations do not apply to RCAL, although there are likely state regulations that may govern this area (although these cannot be specifically tested on in an exam). However as a part of services offered most RCAL facilities will include transportation for community activities and may also have options for arranging transportation to outside services and should have systems in place for how to handle emergency transportation as well.</p> <p>Transportation availability and requirements and restrictions should be addressed upon admission and any associated fees for personal transportation if applicable should be disclosed as part of the admission agreement and if changes are made.</p> <p>Transportation to events and outings should also be clearly posted for all residents to see.</p>	<p>Federal Regulations do not apply to Adult Day or Home Care, although there are likely state regulations that may govern these areas (although these cannot be specifically tested on in an exam). There are no federal regulations that specifically speak to provider obligations for transportation of care recipients in Home Health or Hospice regulations either. However, as a part of services offered Adult Day providers will likely offer transportation to group activities/outings in the local community, and may have a mechanism for assisting in arrangement of transportation to appointments that occur during the day, as well as a provision for emergency transportation if needed. Hospice providers offering inpatient care will also likely do the same. Home Health or Home Care providers will likely identify need for transportation as part of their comprehensive assessment process and make referrals to appropriate providers to assist care recipients in getting their transportation needs met and have policies regarding the use of 911/emergency transport if needed while their providers are present providing care.</p> <p>Community assessment as to availability but limited as far as a broad based academic goal</p> <p>Providers turn to the national advocacy groups for transportation guidance at a community/county/ jurisdictional level. National Hospice and Palliative Care Accrediting bodies ACHC (Accreditation Commission for Health Care) CHAP (Guidance Policy Tools) Community Health Accreditation Partner)</p>

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
10.19 Ensure the provision of a customer service culture that leads to a quality experience for care recipients.	K04 Interpersonal relationships, dispute resolution, and group dynamics K05 Psychosocial aspects of aging K30 Person-centered care concepts K32 Care recipients' support network interests, needs, and values K48 Quality assurance and performance improvement processes as related to care and services K56 Hospitality services S01 Creating and communicating a vision S03 Cultivating effective relationships S06 Group facilitation, consensus building, and team building S10 Problem solving S13 Recognizing and ensuring care recipients' holistic needs are being met	*Overall, this task shouldn't really differ significantly across services lines, since understanding your customer and meeting their needs are at the core of this, in reality, there are probably different focuses for administrators across service lines.	Often more focused on regulatory compliance than customer satisfaction. Venues such as resident and family councils may established for regulatory compliance rather than to solicit customer feedback. There are not specific federal regulations that speak to this, although certainly regulations such as 483.15(b) Self-Determination and Participation and 483.15(e) Accommodation of Needs speak to meeting customers' needs and preferences which is a bedrock of quality customer service.	Customers often more demanding (higher percentage private pay/insurance) in terms of expectations and typically choose between more options, so the bar is set higher in terms of customer service. (more how the service is given than the commodity nature of the service as a product) There are not specific federal regulations that speak to this, nor likely specific state regulations, although meeting residents' needs and preferences is a bedrock of quality customer service. Person Centered Care is an integral part of customer service and satisfaction in the AL setting. This is also good and critical business practice, as most AL residents are private pay and can choose to take their money elsewhere if not satisfied.	Probably true here too There are not specific federal regulations that speak to this in any service lines, although certainly regulations in Home Health such as 484.10(c) Standard: Right to be Informed and to Participate in Planning Care and Treatment in Home Health and in Hospice, 418.56 Condition of Participation: Interdisciplinary Group, Care Planning, and Coordination of Services to the extent that preferences of the patient and family are taken into account speak to meeting care recipients needs and preferences which is a bedrock of quality customer service.
Domain 20 Human Resources					
20.01 Ensure that human resource management policies and programs comply with federal and state rules and regulations.	K01 Applicable federal and state laws, rules, and regulations K07 Compensation and benefit programs (such as employee assistance programs, insurance, salary, retirement) K08 Human resource policies and procedures (such as employee grievance, workplace rules, discipline, absenteeism, turnover, classification, exemption status) K12 OSHA rules and regulations K13 Workers compensation rules, regulations, and procedures K21 Union/management and labor relations K22 Employee record-keeping requirements and procedures S11 Analyzing and interpreting information/data S12 Informed decision making/critical thinking S16 Writing and evaluating policies and procedures	Able to create policies and procedures that follow federal and states laws rules and regulations Includes ensuring understanding of and compliance with: <ul style="list-style-type: none"> • OSHA guidelines • Fair Labor Standards (FLSA) • Equal Opportunity Employment • Non-Discrimination in Interviewing and Hiring • Employee Background Checks (requirements may vary state to state) • Understanding of Collective Bargaining Agreements and Rules in the case of a collective bargaining initiative • Family Medical Leave Act (FMLA) • Worker's Compensation and Unemployment • License Verification across all disciplines • Employee record keeping requirements 	Various Interpretive Guidelines provides guidance throughout chapter 483. Including Sufficient Staff (.30) Registered Nurse (.30) Dietary Staffing (.35); Administration (.75) and Staff Qualifications NA's (.75)		484.4 identifies personnel qualifications for Home Health 418.114 identifies personnel qualifications for Hospice.

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
20.02 Establish the planning, development, implementation, monitoring, and evaluation of recruitment, selection, and retention practices.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K05 Employee recruitment, selection, interviewing, reference and background checks</p> <p>K06 Employee orientation, training and continuing education requirements, and resources</p> <p>K07 Compensation and benefit programs (such as employee assistance programs, insurance, salary, retirement)</p> <p>K08 Human resource policies and procedures (such as employee grievance, workplace rules, discipline, absenteeism, turnover, classification, exemption status)</p> <p>K16 Employee recognition, appreciation, and retention programs</p> <p>K18 Types and methods of communication</p> <p>S08 Coaching, teaching, counseling, and mentoring</p> <p>S16 Writing and evaluating policies and procedures</p>	<p>Able to ensure that the facility has systems in place that will provide for a consistent, fair, and predictable method of job development, job hiring, job training, employee evaluation, and continuing education. These systems should follow the standards of the Fair Labor Standards Act (FLSA).</p> <p>Develops necessary tools and systems for:</p> <ul style="list-style-type: none"> • Budgeting necessary employee FTEs in all departments based upon care needs and financial constraints. • Develop compensation and benefit packages within budget and competitive allowances. • Recruiting employees with appropriate credentials to fill budgeted vacancies. • Interviewing and hiring practices in accordance with FLSA and Equal Employment standards. • Developing effective employee orientation and continuing education programs. • Develop and implement employee evaluation practices, including employee recognition and empowerment. 	Recruitment and training would be impacted by various requirements of the CMS Conditions of Participation, including 483.75(f)(g). Training and minimum education requirements are found in this section.		<p>The State Operations Manual for Home Health Agencies identifies specific Standards related to the duties of the various positions that would be necessary for the Administrator to be familiar with at minimally qualified practice level (see 484.30(a)(b)). The State Operations Manual for Hospice also identifies a specific standard for recruiting and retaining at 418.78(c).</p> <p>Development of job descriptions that outline necessary experience due to the independent practice.</p> <p>Home Health 484.36 HHA training and competency</p> <p>Hospice 418.112 Training and orientation of staff</p>
20.03 Establish the planning, development, implementation, monitoring, and evaluation of employee training and development programs.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K06 Employee orientation, training and continuing education requirements, and resources</p> <p>K09 Diversity training</p> <p>K11 Safety and injury prevention training</p> <p>K17 Leadership development</p> <p>K19 Conflict resolution and team dynamics</p> <p>S11 Analyzing and interpreting information/ data</p> <p>S16 Writing and evaluating policies and procedures</p> <p>S17 Developing and evaluating systems</p>	Has policies and procedures in place to train managers/leaders to follow and design basic and continuing education programs aimed at evaluating individual employee performance and training programs that can meet the basic, continuing, or potential educational needs of the employee.	The federal register does include regulations related to the amount, nature and frequency of CE for particular positions within the SNF setting. At minimum practice standards, the Administrator does need to recognize that these standards exist and how they impact policies, practices and procedures. See 483.75(e) from the State Operations Manual.		<p>The CMS State Operations Manual for Home Health Agencies does identify requirements for Home Health Aide training (see 484.36(a)(1)-(3)(b)(1)-(5)(e)). The Conditions of Participation for Hospice also includes specific requirements for competency and training (see 418.76(a)-(f); 418.78(a); 418.100(g) of the State Operations Manual).</p> <p>Hospice Regulations can be found at: http://www.ecfr.gov/cgi-bin/text-idx?rgn=div5&node=42:3.0.1.1.5</p> <p>Home Health regulations can be found at: http://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title42/42cfr484_main_02.tpl</p> <p>Home Health 484.14, 484.36 and Hospice 418.112, 418.76</p>

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
20.04 Establish the planning, development, implementation, monitoring, and evaluation of employee evaluation programs.	K1 Applicable federal and state laws, rules, and regulations K04 Employee position qualifications, job analysis, job descriptions K10 Performance evaluation procedures K19 Conflict resolution and team dynamics K22 Employee record-keeping requirements and procedures S02 Communicating effectively S16 Writing and evaluating policies and procedures S17 Developing and evaluating systems	Able to ensure that policies and procedures are in place that clearly provide instruction to managers/leaders to regularly monitor employee performance and to timely inform employees of when their performance or adherence to procedures does not meet standards. This includes timely formal evaluations of the employee to communicate areas of poor performance and areas that employee meets and exceed facility standards.	State Operations manual 483.75(f) provides interpretation and direction for expectations related to the proficiency of Nurse Aides. This requirement might impact the knowledge base necessary for this task, as evaluations are a measure of proficiency.		Both the State Operations Manual for Home Health Agencies and Hospice give direction related to evaluation (484.36(e), and 418.76(c) respectively).
20.05 Establish the planning, development, implementation, monitoring, and evaluation of compensation and benefit programs.	K1 Applicable federal and state laws, rules, and regulations K07 Compensation and benefit programs (such as employee assistance programs, insurance, salary, retirement) K08 Human resource policies and procedures (such as employee grievance, workplace rules, discipline, absenteeism, turnover, classification, exemption status) K15 Methods for assessing, monitoring, and enhancing employee satisfaction K16 Employee recognition, appreciation, and retention programs S11 Analyzing and interpreting information/data S16 Writing and evaluating policies and procedures	Able to ensure that policies and procedures are in place for employee compensation and benefits programs. This includes a formal method of informing employees of their benefits that include employee benefit and compensation. Compensation and benefit programs must be in keeping with FLSA and must be within the operating budget parameters as well as in line with perceived local competitors in the profession. The FLSA addresses requirements related to this task across all service lines. ERISA also pertains across all lines of service, as well as the ACA.			
20.06 Establish the planning, development, implementation, monitoring, and evaluation of employee health and safety programs.	K1 Applicable federal and state laws, rules, and regulations K11 Safety and injury prevention training K12 OSHA rules and regulations K13 Workers compensation rules, regulations, and procedures K14 Drug-free workplace programs K22 Employee record-keeping requirements and procedures K23 Mandatory reporting requirements S14 Assessing and recognizing safety concerns and needs S16 Writing and evaluating policies and procedures	Able to ensure that policies and procedures are in place to prevent employee injury and encourage employee wellness. This includes an effective workers compensation or group retro program and providing a health/wellness program that gives employees the opportunity to attain health, dental, vision, accident, pharmacy, and life insurance programs. Health and Safety programs must include compliance with OSHA regulations, such as posting of Safety Data Sheets (SDS), use and availability of protective equipment, systems in place to prevent injury and how to respond if/when injury occurs. Must also comply with injury data collection, submission and posting requirement of OSHA. OSHA standards address requirements related to this task across all service lines. The ACA also currently addresses requirements related to this task across all lines of service.			

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
20.07 Establish the planning, development, implementation, monitoring, and evaluation of employee satisfaction and organizational culture.	K06 Employee orientation, training and continuing education requirements, and resources K07 Compensation and benefit programs (such as employee assistance programs, insurance, salary, retirement) K15 Methods for assessing, monitoring, and enhancing employee satisfaction K18 Types and methods of communication K19 Conflict resolution and team dynamics S01 Creating and communicating a vision S02 Communicating effectively S03 Cultivating effective relationships S04 Inspiring and motivating S16 Writing and evaluating policies and procedures S17 Developing and evaluating systems	Able to ensure that policies and procedures are in place to measure employee satisfaction and that employee satisfaction results are taken seriously and considered. Requires development an organization chart/structure that will clearly communicate to employees the organization structure.			
20.08 Establish the planning, development, implementation, monitoring, and evaluation of employee disciplinary policies and procedures.	K08 Human resource policies and procedures (such as employee grievance, workplace rules, discipline, absenteeism, turnover, classification, exemption status) K10 Performance evaluation procedures K15 Methods for assessing, monitoring, and enhancing employee satisfaction K19 Conflict resolution and team dynamics K22 Employee record-keeping requirements and procedures S16 Writing and evaluating policies and procedures S17 Developing and evaluating systems	<p>Has policies and procedures in place that will set standards to objectively measure employee performance and when employee performance or behavior does not meet standards, employees are made aware of an allegation that their performance or behavior does not meet expectations, employee is given an opportunity to give an explanation of their performance or behavior (give their side of the story), offer witnesses or evidence that will support their statement, and provide a written statement. Procedure should include that the employee will be made aware if an investigation will be done, if the employee will be suspended pending investigation, and that no discipline will be applied until a thorough investigation is completed.</p> <p>An effective evaluation and disciplinary program begins with ensuring that the employee clearly understands the expectations of the position held, and the workplace rules. This includes clearly written job descriptions, as well as a clearly written employee handbook and appropriate and sufficient continuing education to ensure expectations are understood.</p>	<p>The Federal Resident Rights Statute will impact practices in this setting. See the State Operations manual 483.10(a)(c)(d)(e)(f)(l).</p> <p>Federal Resident Rights statute CFR 483.10(a) – (o) and 483.12(a) –(d)</p>	<p>Although not covered by Federal Statute, many jurisdictions either use or adapt the Resident Right statute, so that there is some level of regulatory requirement related to how discipline must be carried out related to particular employee behaviors that impact the resident or the resident population.</p>	<p>Since this setting is more likely to have employees working in remote locations, and with minimal or no direct supervision, the minimally qualified candidate would need to be able to recognize that the policies and procedures must still include methods to objectively and consistently provide disciplinary actions. The Federal Resident Rights Statute will impact practices in some of these settings.</p> <p>Home Health Patient rights 484.10 Hospice 418.52</p>

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
20.09 Establish the planning, development, implementation, monitoring, and evaluation of employee grievance policies and procedures.	K01 Applicable federal and state laws, rules, and regulations K04 Employee position qualifications, job analysis, job descriptions K06 Employee orientation, training and continuing education requirements, and resources K08 Human resource policies and procedures (such as employee grievance, workplace rules, discipline, absenteeism, turnover, classification, exemption status) K09 Diversity training K10 Performance evaluation procedures K21 Union/management and labor relations S02 Communicating effectively S08 Coaching, teaching, counseling, and mentoring S09 Negotiating, collaborating, and resolving disputes S10 Problem solving S12 Informed decision making/critical thinking	Has policies and procedures in place to clearly communicate with the employee a formal program grievance procedure in which the employee without fear of retaliation can communicate areas of frustration, abuse, mistreatment, or concerns with the understanding that a formal response will follow. For employees that are unionized, the NLRB guidelines apply EEOC applies to all			
20.10 Establish the planning, development, implementation, monitoring, and evaluation of leadership development programs.	K09 Diversity training K17 Leadership development K18 Types and methods of communication K21 Union/management and labor relations S01 Creating and communicating a vision S02 Communicating effectively S04 Inspiring and motivating S08 Coaching, teaching, counseling, and mentoring S10 Problem solving	Able to develop leadership development programs not only for manager/leaders but also for all employees. This may be in the form of a formalized programs designed by a corporation, outside vendor, or the Administrator.			
20.11 Promote a safe work environment (such as safety training and employee risk management).	K01 Applicable federal and state laws, rules, and regulations K06 Employee orientation, training and continuing education requirements, and resources K11 Safety and injury prevention training K12 OSHA rules and regulations K13 Workers compensation rules, regulations, and procedures K14 Drug-free workplace programs K21 Union/management and labor relations S02 Communicating effectively S08 Coaching, teaching, counseling, and mentoring S10 Problem solving S14 Assessing and recognizing safety concerns and needs	Able to ensure effective policies and procedures are in place to create an awareness of safety throughout the workplace that include reporting accidents, safety monitoring, fire drills, water, gas, and electric shut off valves, and that emergency generators are regularly tested. Risk Management - acceptable practice and common knowledge apply across LOS	Nurse Aide Training \$483.75(e)		Home Health Aide Services \$484.36 Hospice Aide & Homemaker Services \$418.76

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
20.12 Promote a positive work environment (using techniques such as conflict resolution, diversity training, staff recognition programs).	K01 Applicable federal and state laws, rules, and regulations K08 Human resource policies and procedures (such as employee grievance, workplace rules, discipline, absenteeism, turnover, classification, exemption status) K09 Diversity training K15 Methods for assessing, monitoring, and enhancing employee satisfaction K16 Employee recognition, appreciation, and retention programs K19 Conflict resolution and team dynamics S02 Communicating effectively S03 Cultivating effective relationships S08 Coaching, teaching, counseling, and mentoring S15 Allocating and optimizing resources and programs S17 Developing and evaluating systems	Able to ensure that policies and procedures are in place to assure that the employees are provided a workplace allows them to communicate concerns and grievances in a safe environment. In addition includes training programs in diversity, conflict resolution, continuing education, and staff recognition programs. Across LOS, for employees that are unionized – NLRB guidelines apply			
20.13 Facilitate effective written, oral, and electronic communication among management and employees.	K06 Employee orientation, training and continuing education requirements, and resources K09 Diversity training K17 Leadership development K18 Types and methods of communication K20 Information technology safeguards related to such issues as data security, social media, e-mail, voicemail, computer software, cell phones, photography, video, texting S02 Communicating effectively S21 Utilizing technology S22 Utilizing social media	Able to ensure that policies and procedures are in place to direct managers and employees on how to formally and informally communicate with each other. These procedures should include requirements to managers on effective leadership ensuring employees are aware and trained in their respective job duties and tasks. Supervisors should also be held accountable for validating performance and communicating with employee their progress.			
20.14 Ensure employee records and documentation systems are developed and maintained.	K01 Applicable federal and state laws, rules, and regulations K02 Licensure requirements and scopes of practice K04 Employee position qualifications, job analysis, job descriptions K08 Human resource policies and procedures (such as employee grievance, workplace rules, discipline, absenteeism, turnover, classification, exemption status) K21 Union/management and labor relations K22 Employee record-keeping requirements and procedures S17 Developing and evaluating systems S16 Writing and evaluating policies and procedures S21 Utilizing technology	Able to ensure that employee records and correspondence are protected and secure to other employees, care recipients, and unauthorized individuals.	Conditions of Participation – Questions differ in specific federal regulations only - §483.30 Nursing Services, §483.33 Dietary Services, §483.40 Physician Services, §483.45 Specialized Rehabilitation Services, §483.55 Dental Services, §483.60 Pharmacy Services, §483.75 Administration		Conditions of Participation – (Hospice/Home Health) - Questions differ in specific federal regulations only – Condition of Participation (Home Health) – §484.14 – Organization, Services, and Administration; §484.30 –Skilled Nursing Services; §484.32 – Therapy Services; §484.34 – Medical Social Services; §484.36 Home Health Aide Services Condition of Participation (Hospice) – §418.62 – Core Services; §418.72 – PT,OT,SLP; §418.76 - Hospice and Homemaker Services; §418.102 Medical Director

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
20.15 Establish a culture that encourages employees to embrace care recipients' rights.	K01 Applicable federal and state laws, rules, and regulations K05 Employee recruitment, selection, interviewing, reference and background checks K06 Employee orientation, training and continuing education requirements, and resources K09 Diversity training K18 Types and methods of communication K23 Mandatory reporting requirements S01 Creating and communicating a vision S02 Communicating effectively S03 Cultivating effective relationships S05 Demonstrating empathy S13 Recognizing and ensuring care recipients' holistic needs are being met S14 Assessing and recognizing safety concerns and needs	Able to create a culture that ensures that all care recipients' rights are followed. Able to develop policies and procedures on reporting violation of care recipients' rights.	483.10 Residents Rights referring to multiple factors 483.15 Quality of Life relating to dignity, self-determination and participation		Federal regulations exist regarding patient rights for hospice and home health §418.52 (Hospice); §484.10 (Home Health)
Domain 30 Finance					
30.01 Ensure that financial management policies, procedures, and practices comply with applicable federal and state rules and regulations.	K01 Applicable federal and state laws, rules, and regulations K02 Operational and capital budgeting and forecasting methods K07 Integration of clinical and financial systems K08 Billing, accounts receivable, and collections K10 Revenue cycle management S11 Analyzing and interpreting information/data S12 Informed decision making/critical thinking S16 Writing and evaluating policies and procedures S18 Protecting and promoting financial viability	Able to create policies and procedures that follow federal and states laws rules and regulations. Able to understand and use principles of Generally Accepted Accounting Principles (GAAP) in the development of financial processes and reports. Able to ensure the safekeeping of finances through accounting checks and balances to identify, and prevent fraud and abuse. Able to understand and implement principles of Corporate Compliance through the development and implementation of policies and procedures.	CFR 483.75 (b,c) Office of Inspector General (OIG) Work Plans as defined year to year. http://oig.hhs.gov/compliance/compliance-guidance/index.asp http://oig.hhs.gov/compliance/compliance-guidance/docs/complianceguidance/nhg_fr.pdf		Office of Inspector General (OIG) Work Plans as defined year to year. http://oig.hhs.gov/compliance/compliance-guidance/index.asp For Home Health: CFR 418.14 (i) (1-4) For Hospice: CFR 418.100(b-e)
30.02 Develop, implement, and evaluate the service provider's budget.	K01 Applicable federal and state laws, rules, and regulations K02 Operational and capital budgeting and forecasting methods K03 Financial statements and reporting requirements for not for profit and for profit service providers K10 Revenue cycle management K13 Financial analysis (such as ratios, profitability, debt covenants, revenue mix, depreciation, forecasting) S10 Problem solving S11 Analyzing and interpreting information/data S12 Informed decision making/critical thinking S15 Allocating and optimizing resources and programs S17 Developing and evaluating systems	Can understand the budget process and has systems in place to accurately set budgets based on income, expense, capital improvements, and required tasks of the organization. There are differences in revenue sources and types of expenses, but basic principles of budgeting would be the same. Budgets must consider building and property upkeep and depreciation.			

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
30.03 Oversee the billing and collections process and monitor the accuracy of charges and timely collection of accounts.	K01 Applicable federal and state laws, rules, and regulations K05 Reimbursement methods across the continuum of care K08 Billing, accounts receivable, and collections K10 Revenue cycle management K12 Contracts and agreements S07 Delegating, leading, and empowering S09 Negotiating, collaborating, and resolving disputes S10 Problem solving S18 Protecting and promoting financial viability S21 Utilizing technology	Has procedures in place to timely and accurately bill for care and services to appropriate parties, insurances, or state and federal agencies as appropriate. Systems should be in place to make sure each recipient knows and understands their bill so that timely payments can be made to the facility.	Numerous sources / requirements for billing may differ (i.e. RUG rates vs per diem rates). Corporate Compliance related to billing. Coordination of clinical services with RUG billing.		Numerous Sources/different requirements for billing. (F2F requirements for Home Health and Hospice, CTI) Pay per visit/ insurance vs private pay/ hourly. Methods for ensuring services were actually rendered. Corporate Compliance related to billing. Unique systems in place for payer specific requirements. (Hospice Notice of Election, CTI, F2F)
30.04 Negotiate, interpret, and implement contractual agreements to optimize financial viability.	K01 Applicable federal and state laws, rules, and regulations K04 Service-related sources of revenue/reimbursement K06 Alternative sources of revenue K13 Financial analysis (such as ratios, profitability, debt covenants, revenue mix, depreciation, forecasting) K14 Financial statements (such as income statement, balance sheet, statement of cash flows) S02 Communicating effectively S03 Cultivating effective relationships S09 Negotiating, collaborating, and resolving disputes S11 Analyzing and interpreting information/data	Able to ensure the facility/ organization has written agreements and contracts that include duration of contract, liability insurance required and assured for each party, language that includes duties of each party and what steps are required to notify each party of any breach of service and details of how to dissolve agreement for poor service or choice to use another vendor/contractor.			
30.05 Develop, implement, monitor, and evaluate financial policies and procedures that comply with Generally Accepted Accounting Principles (GAAP).	K01 Applicable federal and state laws, rules, and regulations K03 Financial statements and reporting requirements for not for profit and for profit service providers K14 Financial statements (such as income statement, balance sheet, statement of cash flows) S11 Analyzing and interpreting information/data.	Able to ensure that policies and procedures are in place to direct staff on the steps to accurately perform their duties. Direction must be given for employees in the areas of payroll, accounts receivable, billing, accurate record keeping, internal controls, trust accounts, HIPAA, and etc. The principles of GAAP are used nationwide in all industries. There is no difference among service lines in the requirement and responsibility to use GAAP in the development of accounting policies and procedures.			

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
30.06 Monitor and evaluate the integrity of financial reporting systems and audit programs.	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K02 Operational and capital budgeting and forecasting methods</p> <p>K03 Financial statements and reporting requirements for not for profit and for profit service providers</p> <p>K11 Internal controls</p> <p>K14 Financial statements (such as income statement, balance sheet, statement of cash flows)</p> <p>S18 Protecting and promoting financial viability</p>	<p>Able to ensure that internal controls are in place to validate systems, audit and verify information, proper supervision to protect theft such as never letting the person who prepares a deposit make the deposit and the person making the deposit check the numbers of the person preparing the deposit to ensure that no errors were made. Another example would be to have a place where the administrator or designee can access all passwords in case of emergency or to validate access when a person may be unavailable.</p> <p>Able to create policies and procedures that follow federal and states laws rules and regulations.</p> <p>Able to understand and use principles of Generally Accepted Accounting Principles (GAAP) in the development of financial processes and reports.</p> <p>Able to ensure the safekeeping of finances through accounting checks and balances to identify, and prevent fraud and abuse.</p> <p>Able to understand and implement principles of Corporate Compliance through the development and implementation of policies and procedures.</p>	<p>Office of Inspector General (OIG) Work Plan Corporate Compliance</p> <p>Record keeping across multiple payer lines.</p> <p>Bad debt allocations</p> <p>Contractual Allowances</p> <p>RUG validation</p> <p>Census tracking over multiple payer sources</p> <p>CFR 483.75 (b,c)</p> <p>Office of Inspector General (OIG) Work Plans as defined year to year.</p> <p>http://oig.hhs.gov/compliance/compliance-guidance/index.asp</p> <p>http://oig.hhs.gov/compliance/compliance-guidance/docs/complianceguidance/nhg_f r.pdf</p>		<p>Tracking and ensuring home visits have actually been performed before billing can take place. It's easier to monitor census days in a skilled or AL, because billing is done based on presence in facility. In HCBS, billing is based on visits, so paramount to have safeguards to ensure visits took place and have been properly recorded for billing. Census tracking over multiple payer sources. Unique systems in place for payer specific requirements. (Hospice Notice of Election, CTI, F2F)</p> <p>Office of Inspector General (OIG) Work Plans as defined year to year.</p> <p>http://oig.hhs.gov/compliance/compliance-guidance/index.asp</p> <p>For Home Health: CFR 418.14 (i) (1-4)</p> <p>For Hospice: CFR 418.100(b-e)</p>
30.07 Establish safeguards for the protection of the service provider's assets (such as insurance coverage, risk management).	<p>K01 Applicable federal and state laws, rules, and regulations</p> <p>K10 Revenue cycle management</p> <p>K11 Internal controls</p> <p>K16 Risk management</p> <p>K17 Insurance coverage (such as property, liability)</p> <p>K20 Purchasing process and supply chain management (such as request for proposals, pricing, ordering, receiving, group purchasing organization [GPO])</p> <p>K21 Resident trust accounts for personal funds</p> <p>S18 Protecting and promoting financial viability</p>	<p>Has knowledge of and can provide leadership in risk management, internal controls, workers compensation, and to prevent unnecessary insurance/legal claims.</p> <p>Ensure appropriate insurance is in place for liability as well as property loss and damage.</p> <p>Ensure workers compensation and unemployment insurance in place.</p>			<p>Bonding of employees who travel home to home. Vehicle insurance if company owned vehicles, Employee theft insurance. Background checks should include motor vehicle violations checks.</p>

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services (inc. hospice, home health, adult day services)
30.08 Develop, implement, monitor, and evaluate systems to improve financial performance.	K08 Billing, accounts receivable, and collections K09 Accounts payable procedures and management K10 Revenue cycle management K11 Internal controls K18 Inventory control and management S10 Problem solving S11 Analyzing and interpreting information/data S15 Allocating and optimizing resources and programs	Able to use critical based thinking to understand financial viability and to respond to the financial needs of the facility/organization. Implements spend-down sheets, PPDs, inventory control, AR/AP, competitive bidding, etc. with dept. leaders & monitor and adjust accordingly. Able to budget based on projected census with influencing factors, such as multiple payer sources, local environment and economies. Able to anticipate and estimate projected expenses including staffing requirements based upon census projections. Able to identify fixed vs. variable expenses for budgeting and projection purposes.			
30.09 Manage and adjust expenses with fluctuations in census/occupancy/care recipient levels (such as staffing ratios).	K11 Internal controls K12 Contracts and agreements K18 Inventory control and management K19 Payroll procedures and documentation K20 Purchasing process and supply chain management (such as request for proposals, pricing, ordering, receiving, group purchasing organization [GPO]) S10 Problem solving S15 Allocating and optimizing resources and programs	Has systems in place that will effectively make adjustments in labor, supplies, and resources as needed to ensure continued financial performance. Utilizes spend-down sheets, staffing ladders and other tracking systems to monitor labor, supplies, contract reviews, etc. and adjust accordingly as needed			
30.10 Monitor and address changes in the industry that may affect financial viability.	K01 Applicable federal and state laws, rules, and regulations K05 Reimbursement methods across the continuum of care K06 Alternative sources of revenue K13 Financial analysis (such as ratios, profitability, debt covenants, revenue mix, depreciation, forecasting) K20 Purchasing process and supply chain management (such as request for proposals, pricing, ordering, receiving, group purchasing organization [GPO]) S11 Analyzing and interpreting information/data S18 Protecting and promoting financial viability	Stays knowledgeable of the changes of all financial resources to include but not limited to Medicare, Medicaid, insurance companies, and other payor sources. In addition knowledgeable of any city, state, and federal changes that may affect the financial performance of the facility/organization and make changes as needed within the facility/organization.	Generally, skilled admin will have more industry factors such as Medicare, Medicaid, HMOs, insurance, federal and state taxes, etc. Additionally, within some primary factors are more detailed variables such as RUGS, MDS, etc. Monitor and understand the development of Accountable Care Organizations (ACO) and CMS Bundled Payment programs.	Generally, fewer payer sources than skilled, but must maintain competency in Medicaid those states that fund AL; usually more private pay driven; must keep current with state and federal taxes and other regulations related to finances. As more states are moving Medicaid into managed care programs, the Administrator must understand the implications of a multi-payer system vs. single payer through traditional Medicaid.	Similarly, maintaining competency with hospice, insurance, state and federal programs, and local funding is paramount to financial success. Additionally, within some primary factors are more detailed variables such as Home Health Resource Groups, bundled payments, etc. Changes in reimbursement through regulatory changes (e.g. Face to Face and Notice of Election (NOE)). Also Understand ACOs, and growth of managed care within market.

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services
Domain 40 Environment					
40.01 Ensure that physical environment policies and practices comply with applicable federal, state, and local laws, rules, and regulations.	<p>K01 Federal, state and local standards, codes and regulations for building, equipment, maintenance, and grounds</p> <p>K03 HIPAA compliance</p> <p>K05 Design principles that create a safe, secure, and home-like atmosphere based on the needs of the individuals served</p> <p>K09 Contracted services for mechanical, electrical, plumbing, laundry systems, IT</p> <p>K10 Compliance matters related to provision of contracted services</p> <p>K11 Infection control and sanitation regulations/standards of practice</p> <p>K13 Handling and disposal of potentially hazardous materials</p> <p>S09 Negotiating, collaborating, and resolving disputes</p> <p>S10 Problem solving</p> <p>S11 Analyzing and interpreting information/data</p> <p>S14 Assessing and recognizing safety concerns and needs</p> <p>S16 Writing and evaluating policies and procedures</p>	<p>Able to create policies and procedures that follow federal and states laws rules and regulations.</p> <p>Makes sure contracts meet regulatory requirements</p> <p>Makes sure hazardous material is handled properly</p>	All Life Safety Code K-tags apply	There are no Federal standards/regulations established by CMS; however, OSHA, LSC, and contracted services would still apply.	<p>Policies regarding environment will differ based on the type of service provided (i.e., if it is home based, or provided in facility) such as OSHA compliance, and local/state/federal LSC regulations.</p> <p>The maintenance of building and grounds would not apply if the services were strictly provided for in the client home.</p> <p>Contracted services would not apply if services were strictly provided in a home setting.</p> <p>HCBS would need to adhere to environmental laws, rules, and regulations in any physical space where they operate (agency office).</p> <p>Life Safety standards helpful for any provider to be able to identify potential problems in a home setting.</p>
40.02 Ensure the planning, development, implementation, monitoring, and evaluation of a safe and secure environment.	<p>K01 Federal, state and local standards, codes and regulations for building, equipment, maintenance, and grounds</p> <p>K06 Safety and security procedures</p> <p>K07 Physical plant security principles</p> <p>K08 Preventative and routine maintenance programs for buildings, grounds, and equipment</p> <p>K09 Contracted services for mechanical, electrical, plumbing, laundry systems, IT</p> <p>K10 Compliance matters related to provision of contracted services</p> <p>S10 Problem solving</p> <p>S11 Analyzing and interpreting information/data</p> <p>S14 Assessing and recognizing safety concerns and needs</p> <p>S17 Developing and evaluating systems</p>	<p>Has policies and procedures in place that ensure the physical plant, systems, equipment, and resources are properly used and appropriate.</p> <p>Able to understand, promote, direct, and require supervision to maintain all equipment and resources.</p>	All Life Safety Code K-tags apply	There are no Federal standards/regulations established by CMS; however, OSHA, LSC, and contracted services would still apply.	<p>For HCBS that have physical buildings: all would apply.</p> <p>In a home setting, much of this wouldn't apply.</p> <p>The focus would be environmental safety issues in the home, related to city ordinance codes.</p>
40.03 Ensure the planning, development, implementation, monitoring, and evaluation of infection control and sanitation.	<p>K09 Contracted services for mechanical, electrical, plumbing, laundry systems, IT</p> <p>K11 Infection control and sanitation regulations/standards of practice</p> <p>K12 Pest control programs</p> <p>K13 Handling and disposal of potentially hazardous materials</p> <p>S10 Problem solving</p> <p>S14 Assessing and recognizing safety concerns and needs</p> <p>S16 Writing and evaluating policies and procedures</p> <p>S17 Developing and evaluating systems</p>	<p>Has policies and procedures in place to effectively assure that infection control and sanitation are properly planned, implemented, and validated.</p> <p>Policies and procedures include, but are not limited to, training of personnel, assuring proper supplies and resources are available and effective communication through the facility/operation/agency of reporting violations and areas of concern.</p>	<p>F-tags apply</p> <p>CFR 483.65 (a-c)</p> <p>CFR 483.70</p>		<p>It is helpful to have a basic knowledge of infection control and sanitation to be able to identify potential problems in a home setting.</p> <p>The administrator has responsibilities in this the provision of care in home settings, beyond the physical building-i.e. therapists must wash hands, wear gloves, use sterile equipment, etc. this is especially true as they are traveling house to house.</p> <p>For Hospice: CFR 418.60 (a-e)</p>

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services
40.04 Ensure the planning, development, implementation, monitoring, and evaluation of emergency and disaster preparedness program, including linkage to outside emergency agencies.	<p>K04 Community resources, programs and agencies available to meet the care recipients' home needs</p> <p>K06 Safety and security procedures</p> <p>K07 Physical plant security principles</p> <p>K08 Preventative and routine maintenance programs for buildings, grounds, and equipment</p> <p>K09 Contracted services for mechanical, electrical, plumbing, laundry systems, IT</p> <p>K10 Compliance matters related to provision of contracted services</p> <p>K14 Disaster and emergency planning, preparedness, and recovery</p> <p>K15 Community resources available in the event of emergency or disaster</p> <p>K16 The use, storage, and inspection of required emergency equipment</p> <p>S09 Negotiating, collaborating, and resolving disputes</p> <p>S13 Recognizing and ensuring care recipients' holistic needs are being met</p> <p>S14 Assessing and recognizing safety concerns and needs</p> <p>S15 Allocating and optimizing resources and programs</p> <p>S16 Writing and evaluating policies and procedures</p> <p>S17 Developing and evaluating systems</p>	<p>Has specific policies and procedures in place to assure that an effective Disaster Preparedness Program is in place regardless of LOS. The degree to which they need delineation is within the LOS.</p> <p>For all, the emergency preparedness plan includes regular training of staff related to fire drills, emergency shut off valves, fire evacuation routes, where to find flashlights, emergency and temporary power, emergency phone, etc.; and regular testing of emergency systems.</p> <p>Able to make agreements with outside vendors for equipment testing and maintenance, transportation in the event of an emergency, and transfer agreements with resources that can help provide care and service.</p>	<p>All K-tags are specific to skilled care and greater definition is required for the individual population served related to:</p> <ul style="list-style-type: none"> • EOP plan & drills • Emergency water supply contract • Emergency evacuation plan and transportation contract • Transfer agreements that account for relocation capability for each resident including location and resources 	<p>AL would require the review of core expectations and create safe environments based the core expectations relative to the locality and customer population served.</p>	<p>HCBS would need to maintain a disaster plan for their agency office and plan for how they will handle interruption in services to their clients, should a disaster prevent them from providing services.</p>
40.05 Ensure the planning, development, implementation, monitoring, and evaluation of environmental services, housekeeping and laundry.	<p>K06 Safety and security procedures</p> <p>K09 Contracted services for mechanical, electrical, plumbing, laundry systems, IT</p> <p>K17 Policies and procedures for housekeeping, maintenance, and laundry services</p> <p>S16 Writing and evaluating policies and procedures</p> <p>S17 Developing and evaluating systems</p>	<p>Able to ensure that policies and procedures are in place to provide a comprehensive plan that assures all environmental, housekeeping, and laundry services department meet and/or exceed all local, state, and federal requirements. Has policies and procedures that include infection control, proper temperatures and temperature logs, proper use of chemicals and products used per Safety Data Sheets (SDS), preventative maintenance, systems to validate compliance, etc.</p> <p>SDS manual with policy and procedure for updating when products are changed or added is essential for SNF and AL and core knowledge to HCBS as to customer and staff safety. Chemicals used to sanitize within any setting need to have policies and procedures for effective utilization within the minimum core knowledge required of all LOS.</p> <p>Required in SNF, best practices should be core knowledge in developing preventive maintenance programs for all LOS.</p>			<p>Housekeeping and laundry services would apply to HCBS if they are providing custodial services to clients in their homes, such as personal sitters, cleaners, etc.</p> <p>This LOS requires specific knowledge to individual household use and not community shared living settings in policy development.</p>

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services
40.06 Ensure the planning, development, implementation, monitoring, and evaluation of maintenance services for property, plant and all equipment, including preventative maintenance.	K06 Safety and security procedures K08 Preventative and routine maintenance programs for buildings, grounds, and equipment K09 Contracted services for mechanical, electrical, plumbing, laundry systems, IT S15 Allocating and optimizing resources and programs S17 Developing and evaluating systems	Able to ensure that policies and procedures are in place to provide a comprehensive plan that assures all maintenance services meet and/or exceed all local, state, and federal requirements. Comprehensive plan includes infection control, proper temperatures and temperature logs, proper use of chemicals and products used per SDS, preventative maintenance, systems to validate compliance, etc. Has specific policies and procedures in place to assure that effective planning is in place regardless of LOS for the following items. The degree to which they need delineation is within the LOS. Preventative maintenance program Lock out tag out policies and procedures Temperature logs for freezers and refrigerators in use with policies and procedures to address out of range temps			Applies for those HCBS that have physical buildings
40.07 Ensure the planning, development, implementation, monitoring, and evaluation of appropriate HIPAA compliant technology infrastructure.	K03 HIPAA compliance K10 Compliance matters related to provision of contracted services K18 Technology infrastructure S11 Analyzing and interpreting information/data S21 Utilizing technology	Able to ensure that HIPAA compliance is assured by developing technology infrastructures, technology safeguards (i.e. backup systems, external data storage areas, preventative maintenance for computer hardware and software) and ongoing validation surveys. Has specific policies and procedures in place to assure that effective planning is in place regardless of LOS for the following items. The degree to which they need delineation is within the LOS. <ul style="list-style-type: none"> • Corporate Compliance • HIPAA policies and procedures for personal health information and medical record storage, requests for access, etc. 			HIPAA guidelines would apply, and the IT infrastructure would vary based on the type of HCBS provided. Most is provided in a mobile environment.
40.08 Establish, maintain, and monitor a physical environment that provides clean, safe, and secure home-like surroundings for care recipients, staff, and visitors.	K02 Environmental principles that promote care recipient rights K05 Design principles that create a safe, secure, and home-like atmosphere based on the needs of the individuals served S13 Recognizing and ensuring care recipients' holistic needs are being met S17 Developing and evaluating systems	Able to ensure that policies and procedures are in place to create a clean, home-like environment that supports the well-being and safety of all recipients. Creates a culture that promotes choice, comfort, and cleanliness.			

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services
40.09 Identify opportunities to enhance the physical environment to meet changing market demands.	K02 Environmental principles that promote care recipient rights K05 Design principles that create a safe, secure, and home-like atmosphere based on the needs of the individuals served K08 Preventative and routine maintenance programs for buildings, grounds, and equipment S13 Recognizing and ensuring care recipients' holistic needs are being met S16 Writing and evaluating policies and procedures S17 Developing and evaluating systems	Able to regularly maintain the physical environment and to evaluate and monitor changing trends within the market/community to keep current. Can create a chart/schedule for the normal life of equipment and furnishings, using qualified professionals to assess the interior/exterior design, and developing annual and capital budgets to prepare for predicted capital spending.			
40.10 Establish, maintain, and monitor an environment that promotes choice, comfort, and dignity for care recipients.	K02 Environmental principles that promote care recipient rights K05 Design principles that create a safe, secure, and home-like atmosphere based on the needs of the individuals served K08 Preventative and routine maintenance programs for buildings, grounds, and equipment S13 Recognizing and ensuring care recipients' holistic needs are being met	Able to ensure that policies and procedures are in place to create a clean, home-like environment that supports the well-being and safety of all recipients. Creates a culture that promotes choice, comfort, and cleanliness.			Would apply to those HCBS that have physical buildings. Also in a home care setting, there is a responsibility on care providers to offer care in a manner that is dignified (i.e., protect their privacy from other housemates, within the environment/culture/processes of how your organization is run, offer choice of caregivers or preferences in schedules, etc.)
40.11 Assess care recipients' environment for safety, security, and accessibility and make recommendation for referral or modification.	K02 Environmental principles that promote care recipient rights K05 Design principles that create a safe, secure, and home-like atmosphere based on the needs of the individuals served K08 Preventative and routine maintenance programs for buildings, grounds, and equipment S13 Recognizing and ensuring care recipients' holistic needs are being met S14 Assessing and recognizing safety concerns and needs	Able to ensure that each recipient's personal environment and accessibility is individually evaluated and accommodations are made to provide the most independent, comfortable, and safe environment possible. Adheres to ADA requirements			
Domain 50 Management and Leadership					
50.01 - Ensure compliance with applicable federal and state laws, rules, and regulations.	K1 Applicable federal and state laws, rules, regulations, agencies, and programs K31 Leadership and management principles and philosophies (such as planning, organizing, directing, delegating, motivating, evaluating) K37 Functions of all departments and services S02 Communicating effectively S07 Delegating, leading, and empowering S16 Writing and evaluating policies and procedures	Able to create policies and procedures that follow federal and states laws rules and regulations	Knowledge of requirements found in the CFR 483.0 through 483.75 National Fire Protection Association (NFPA) - Life Safety Code for nursing facilities	Knowledge of state survey requirements; National Fire Protection Association (NFPA) - Life Safety Code for residential care facilities	Knowledge of state survey requirements; applicable Life Safety code requirements for inpatient hospice only. For Home Health: CFR 484.1 through 484.55 For Hospice: CFR 418.3 through 418.116
50.02- Promote ethical practice throughout the organization.	K2 Code of ethics and standards of practice K3 Components and purpose of mission, vision, and value statements K7 Provider's role in the healthcare continuum S02 Communicating effectively S16 Writing and evaluating policies and procedures	This task requires the Administrator to create policies and procedures that ensure that a system is in place to direct the facility/organization related to ethical topics/situations that arise. This task would include developing an ethics committee or the creation of an ad hoc ethics committee when necessary.			

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services
50.03 – Develop, implement, monitor, and evaluate policies and procedures that comply with directives of governing body.	K3 Components and purpose of mission, vision, and value statements K4 Stakeholder roles, responsibilities, and limitations K5 Roles and responsibilities of owners and governing bodies K8 Methods for assessing, monitoring and enhancing care recipient satisfaction K30 Organizational structures S01 Creating and communicating a vision S06 Group facilitation, consensus building, and team building S16 Writing and evaluating policies and procedures	This task requires the Administrator to know and understand the governing body and all directives, policies, and procedures. This task also requires the administrator to recommend changes or additions to policies and procedures and make recommendation to the governing board to change/add policies and procedures when necessary			

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services
50.04 – Develop, communicate, and champion the service provider’s mission, vision, and values to stakeholders.	K3 Components and purpose of mission, vision, and value statements K4 Stakeholder roles, responsibilities, and limitations K5 Roles and responsibilities of owners and governing bodies K8 Methods for assessing, monitoring and enhancing care recipient satisfaction K30 Organizational structures S01 Creating and communicating a vision S06 Group facilitation, consensus building, and team building S16 Writing and evaluating policies and procedures	This task requires the Administrator to develop a process to train stakeholders to the mission, vision, and value of the organization. This includes creating positive and effective ways to not only share the mission, vision, and value of the organization but to create an atmosphere of confidence and execution of the mission, vision, and values.			

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services
50.05 – Develop, implement, and evaluate the strategic plan with governing body’s endorsement.	K3 Components and purpose of mission, vision, and value statements K4 Stakeholder roles, responsibilities, and limitations K5 Roles and responsibilities of owners and governing bodies K8 Methods for assessing, monitoring and enhancing care recipient satisfaction K18 Strategic business planning K30 Organizational structures S01 Creating and communicating a vision S06 Group facilitation, consensus building, and team building S16 Writing and evaluating policies and procedures	This task requires the Administrator to develop a strategic plan that reflects the facility/organizational values, mission, and policies and will direct the facility/organization to conduct effective business practices with the endorsement of the governing body. The strategic plan must include how the plan will be implemented and validated/evaluated timely.			
50.06 – Promote and monitor satisfaction of the care recipient’s and their support networks.	K6 Services available in the healthcare continuum K7 Provider’s role in the healthcare continuum K8 Methods for assessing, monitoring and enhancing care recipient satisfaction K10 Regulatory survey and inspection processes, including the plan of correction process K28 Quality assurance and performance improvement techniques and models S02 Communicating effectively S06 Group facilitation, consensus building, and team building S07 Delegating, leading, and empowering S09 Negotiating, collaborating, and resolving disputes S10 Problem solving S13 Recognizing and ensuring care recipients’ holistic needs are being met S14 Assessing and recognizing safety concerns and needs	Able to develop a system to monitor resident satisfaction. This can be done by the Administrator by being visible; onsite visits with residents and family. This can also be done with satisfaction surveys and mock inspections. The successful administrator will generally perform a combination of onsite visits, surveys, and daily interaction with staff in the form of a stand up meeting.			

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			Skilled Nursing	Assisted Living	Home and Community-based Services
50.07 - Identify, foster, and maintain positive relationships with key stakeholders.	K4 Stakeholder roles, responsibilities, and limitations K5 Roles and responsibilities of owners and governing bodies S02 Communicating effectively S03 Cultivating effective relationships S06 Group facilitation, consensus building, and team building	Able to determine who key stakeholders are and develop a working relationship/ understanding with each of them. Able to create an atmosphere and trust and understanding. This should be tempered with providing necessary information and work jointly on projects and systems that benefit the organization. At no time should the impression be giving that any key stakeholder is asked to help lead or assist in leading the facility/organization.			
50.08 – Educate stakeholders on services provided, regulatory requirements, and standards of care.	K1 Applicable federal and state laws, rules, regulations, agencies, and programs K4 Stakeholder roles, responsibilities, and limitations K7 Provider's role in the healthcare continuum S02 Communicating effectively S03 Cultivating effective relationships S06 Group facilitation, consensus building, and team building	Able to determine who key stakeholders are and develop a working relationship/ understanding with each of them. This task includes creating an atmosphere and trust and understanding. This should be tempered with providing necessary information and work jointly on projects and systems that benefit the organization.			
50.09 – Solicit information from appropriate stakeholders for use in decision making.	K1 Applicable federal and state laws, rules, regulations, agencies, and programs K4 Stakeholder roles, responsibilities, and limitations K7 Provider's role in the healthcare continuum S02 Communicating effectively S03 Cultivating effective relationships S06 Group facilitation, consensus building, and team building S12 Informed decision making/critical thinking	Able to set up protocols/standards of practice to use all available input from trusted resources to make effective/fair/timely decisions. Has the ability to weigh the situation/circumstance and the time used to make decisions. Is accountable for the decisions he/she will make, knowing that sometimes a good decision is better than the best decision when time or the lives of others is a factor.			
50.10 Manage the service provider's role throughout any survey/inspection process.	K1 Applicable federal and state laws, rules, regulations, agencies, and programs K9 Provider's certifications and licensing requirements K10 Regulatory survey and inspection processes, including the plan of correction process K12 Procedures for Informal Dispute Resolution (IDR) S19 Managing regulatory and accreditation surveys, inspections, and audits	Able to develop a protocol/practice to use for any survey. The protocol/practice includes communicating with staff, providing information requested from surveyors, and appropriate conduct during the survey process. Has knowledge of conditions of participation and specific regulatory requirements for the LOS. Has knowledge of complaint and ombudsman investigations			
50.11 Develop and implement an intervention(s) or risk management program(s) to minimize or eliminate exposure.	K1 Applicable federal and state laws, rules, regulations, agencies, and programs K15 Risk management principles and processes K17 Internal investigation protocols and techniques S11 Analyzing and interpreting information/data S14 Assessing and recognizing safety concerns and needs S17 Developing and evaluating systems	Able to develop a risk management program to reduce the incident of avoidable problems. Includes communication, validation, and reporting techniques in the program.			

	Knowledge and Skills <u>most</u> needed to perform task	Core expectations for entry-level across lines of service (what the person should be able to know and do)	What is different across lines of service? How would training content, test questions, and testing emphasis differ?		
			Skilled Nursing	Assisted Living	Home and Community-based Services
50.12 Identify and respond to areas of potential legal liability.	K1 Applicable federal and state laws, rules, regulations, agencies, and programs K8 Methods for assessing, monitoring and enhancing K13 Compliance programs K16 Provider's legal and criminal scope of liability K17 Internal investigation protocols and techniques K27 Mandatory reporting requirements S14 Assessing and recognizing safety concerns and needs	Able to create/implement a plan that can identify and respond proactively to areas of potential organizational liability. Able to adhere to regulations and/or standards of practice. Able to utilize a higher level understanding of legal/regulatory requirements. Able to develop a risk management program to reduce the incidence of avoidable problems. Includes communication, validation, and reporting techniques in the program. Able to develop and utilize Corporate Compliance policies and procedures in the evaluation of ongoing practices.	CFR 483.75 (b,c) Office of Inspector General (OIG) Work Plans as defined year to year. http://oig.hhs.gov/compliance/compliance-guidance/index.asp http://oig.hhs.gov/compliance/compliance-guidance/docs/complianceguidance/nhg_fr.pdf Note: The rules listed above touch on a portion of the many areas for potential legal liability.		Office of Inspector General (OIG) Work Plans as defined year to year. http://oig.hhs.gov/compliance/compliance-guidance/index.asp For Home Health: CFR 418.14 (i) (1-4) For Hospice: CFR 418.100(b-e) Note: The rules listed above touch on a portion of the many areas for potential legal liability.
50.13 Implement, monitor, and evaluate information management and technology systems to support service providers' operations.	K19 Management information systems K20 Technology to support operations K29 Organizational change management S15 Allocating and optimizing resources and programs S21 Utilizing technology	Understands the regulatory requirements of information management and technology systems for managing health, financial and operations data. Can develop/implement systems to ensure staff at all levels understand their role in protecting health/financial/care recipient/staff information. Able to ensure that technology devices and software meet guidelines to protect, secure, and maintain information.			
50.14 Develop, implement, and monitor comprehensive sales, marketing, and public relations strategies.	K18 Strategic business planning K21 Sales and marketing techniques K22 Public relations including media relations S03 Cultivating effective relationships S11 Analyzing and interpreting information/data	Able to develop/implement and perform ongoing monitoring of an effective sales and marketing/public relations strategy to communicate the features, benefits, and amenities of the organization/community. Understands policies and process for communication with the media, public, and consumer base in the event of disaster/urgent situation.			
50.15 Ensure that written agreements between the care recipient and the service providers protect the rights and responsibilities of both parties.	K1 Applicable federal and state laws, rules, regulations, agencies, and programs K4 Stakeholder roles, responsibilities, and limitations K25 Care recipient's rights and responsibilities K26 Role of care recipient advocates and advocacy groups S16 Writing and evaluating policies and procedures	Able to ensure that all written agreements reflect the services provided to the care recipient and meet regulatory guidelines. Able to seek assistance from an attorney/organization agent (such as CPA, CEO, or other) for specific documents to ensure the community/organization and care recipient are protected. Able to ensure written agreements are HIPAA compliant.			

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			Skilled Nursing	Assisted Living	Home and Community-based Services
50.16 Develop, implement, and evaluate the organization's quality assurance and performance improvement programs.	K1 Applicable federal and state laws, rules, regulations, agencies, and programs K28 Quality assurance and performance improvement techniques and models S08 Coaching, teaching, counseling, and mentoring S10 Problem solving S11 Analyzing and interpreting information/data S17 Developing and evaluating systems	Able to develop systems and tools to measure quality assurance and performance within the organization/community, including methods/strategies to validate performance and indicators that measure compliance. Able to implement changes as necessary in response to the data collected and evaluate these changes to ensure sustainability. Principles of QAPI apply across the continuum.	CFR 483.75(o)		For Home Health: CFR 484.16 https://www.cms.gov/Medicare/Quality-Initiatives-Patient-Assessment-Instruments/HomeHealthQualityInits/index.html For Hospice: CFR 418.58 (all sub-sections)
50.17 Lead organizational change initiatives.	K29 Organizational change management S02 Communicating effectively S03 Cultivating effective relationships S06 Group facilitation, consensus building, and team building S07 Delegating, leading, and empowering S08 Coaching, teaching, counseling, and mentoring	Able to regularly assess the organization/community and to design and implement necessary changes for organizational development and enhancement. Includes strategies to enhance the care recipient and employee experience in the change plan.			
50.18 Facilitate effective internal and external communication strategies.	K37 Functions of all departments and services S01 Creating and communicating a vision S02 Communicating effectively S03 Cultivating effective relationships S06 Group facilitation, consensus building, and team building S22 Utilizing social media	Able to establish an internal and external communication strategy to ensure information is shared and feedback received. Can create clear and concise messages so that all staff are aware of how and what is to be communicated and when the need for assistance in communication is necessary. No employee should ever feel the total weight of providing communication rests on them. Trainings and strategies should include not only verbal and written communication but also electronic media such as Facebook, Blogs, and Twitter			
50.19 Promote professional development of all team members.	K31 Leadership and management principles and philosophies (such as planning, organizing, directing, delegating, motivating, evaluating) K35 HR management theory and principles S04 Inspiring and motivating S07 Delegating, leading, and empowering S08 Coaching, teaching, counseling, and mentoring	Able to purposefully assess team members' training and experience in order to facilitate an environment that allows employees opportunities to grow professionally. Able to ensure the provision of internal and external opportunities for employees to develop themselves professionally. Understands the impact of professional development on the individual and organization		-	