

# Employee Orientation to Minnesota Homecare Rules

As part of your orientation to working with a comprehensive license home care provider, please review the information provided below thoroughly. Links are provided throughout the document to provide more information.

## Content of Orientation. Company Name:

1. [An overview of sections 144A.43 to 144A.4798](#); Click the link to view.
2. Introduction and review of all the provider's policies and procedures related to the provision of home care services by the individual staff person.

ABUSE PREVENTION PLAN	ADMISSION POLICY	AIDE WEEKLY CARE RECORD
CEP2014	CLIENT ADMISSION PROCESS	CLIENT AND FAMILY RESPONSIBIL...
CLIENT DISCHARGE PROCESS	CLIENT INCIDENT REPORTING	CLIENT SECURITY AND PRIVACY
CLIENT TRANSFER	CLINICAL DOCUMENTATION	CLINICAL RECORD CONFIDENTIALITY
CLINICAL RECORDS	CLINICAL SUPERVISION	COMPLAINT AND INVESTIGATIVE P...
COMPREHENSIVE CLIENT ASSESSM...	CONTROLLED SUBSTANCES	COVID 19 POLICY
DELEGATION OF NURSING TASKS	DISCHARGE SUMMARY	DISCONTINUATION OF LIFE SUSTAL...
ELECTRONIC SIGNATURE	EMERGENCY MANAGEMENT	END OF LIFE CARE
FALL PREVENTION PROGRAM	HANDLING OF CLIENTS FINANCES	HEALTH CARE DIRECTIVES
HOME CARE BILL OF RIGHTS- 2014	HOME CARE BILL OF RIGHTS- 201...	INCIDENT REPORTING
INFORMATION REQUIRED FOR ME...	LICENSED PRACTICAL NURSE SUPE...	MEDICATION ADMINISTRATION ER...
MEDICATION ADMINISTRATION	MEDICATION MANAGEMENT	MEDICATION MANAGEMENT
MEDICATION ORDERS	MEDICATION SET UP POLICY	NURSING CARE PLANS
PHYSICIAN ORDERS	PROVISION FOR ON CALL AVAILA...	RELEASE AND DISCLOSURE OF INF...
RESTRAINTS	SCOPE OF SERVICES STATEMENT	SERVICE PLAN
STANDARDS OF PRACTICE	TREATMENT MANAGEMENT	UNLICENSED PERSONNEL MEDICA...
UNLICENSED PERSONNEL (AIDE) C...	UNLICENSED PERSONNEL SUPERVL...	USE OF SIDE RAILS IN THE HOME
VULNERABLE ADULT-CHILD		

- a. The following policies above pertain to provision of client care. Please familiarize yourself with each one of them. Registered nurses are responsible to performing all assessments when due, creating plans of care and updating them at least every 60 days. Below is a brief summary
- b. [Abuse Prevention Plan](#): Every client gets a vulnerability and safety assessment done once a year and as needed. Based on the assessment, an abuse prevention plan is created and instituted specific to each client.
- c. [Clinical records](#) are created and stored electronically. More will be discussed under clinical documentation.
- d. [Comprehensive Client assessments](#) are an essential part of client care and must be done at least every 90 days.
- e. [Fall Prevention program](#): Based on vulnerability and safety assessment each client will have a fall prevention program unique to their specific needs
- f. Homecare Bill of rights: HCBOR must be given to each client upon admissions, transfers, or discharge. Review the HCBOR using the link provided below.
- g. [Medication Administration](#): Review the policy to make sure that the right medications are being given at the right time, through the right route, to the right client, and at the right dose/strength.
- h. [Medication](#) and [Physician](#) Orders: All orders from the physician must be reviewed and updated every 90 days. This is usually coordinated to be done around the same time that quarterly comprehensive assessments are due. Verbal orders must be entered in the physician order sheet, then MAR or TAR and must be signed by the physician as soon as possible to with the next quarterly order renewals.
- i. [Vulnerable adult-child](#): See #b and e above. Also review the policy and procedure, as well as MN statutes regarding vulnerable child and adult. See other hand-out or document. Also take course online as indicated below
- j. [Clinical Documentation](#): All staff will document all cares and treatments provided to clients for each visit/shift of service. Mode of documentation will be electronic using Microsoft 365 products. Each new staff will be given a company email with Microsoft subscription paid for by the company to be used to document client cares

- and treatments. You will be trained on how to access and complete your documentation.
- k. [License Practical Nurse Supervision](#): Direct supervision of the Licensed Practical Nurse will be completed during the first 90 days of employment. As a component of the annual performance evaluation, all Licensed Practical Nurses will be supervised directly while providing care.
  - l. [Medication Management](#) and [Treatment management](#): Medications and treatments must be managed in a way that supports client safety and improves quality of care, treatment, and services by reducing practice variation, errors and misuse of medications. Errors must be identified and reported promptly--[view med error policy here](#). Each client receiving medication management services gets a unique medication management plan drafted and updated annually or as needed.
  - m. [Medication Setup Policy](#): All clients will be assessed to determine their need for assistance with medication management. When the agency is managing the client medications, they will obtain prescriptions for ALL medications the client is taking. Agency will set up medications for clients as ordered by the physician/Prescriber. Medications will be set up using weekly medi planner or computerized dispensing systems with verbal reminder capability.
  - n. [Client security, privacy](#), and [client/family responsibilities](#): All staff will follow company guidelines for client security and privacy while in the home, in the office and out in the community. Client/family must always be informed of their responsibilities. Also review policy on [Client Record confidentiality](#), as well as complete the HIPPA course online via [Learning Management - Patient Privacy and HIPAA Overview for Professionals \(rctclearn.net\)](#)
  - o. [Covid-19 Policy](#): currently, all care givers in direct contact with the client are required to wear medical grade masks and face shields. Please visit the CDC website for the most recent update.
  - p. [Health Care Directives](#): Valid health care directives will be followed to the extent permitted and required by law. In the absence of a health care directive, the Agency will provide appropriate care according to the Plan of Care authorized by the attending physician.
  - q. [Nursing Care Plans](#): When skilled nursing services are required, a Care Plan shall be developed by a Registered Nurse as needed to assure coordination and continuity of skilled care delivery. The plan will be developed with input from the client.
  - r. [Service Plans](#): Home care services will be provided according to a suitable and current written service plan. The service plan is developed with the client/client representative and is based on client needs and preferences. When services are initiated for a new client prior to completion of the individualized client assessment, a temporary service plan will be developed. A Service Plan shall be developed with all clients no later than 14 days after the start of service
3. Handling of emergencies and use of emergency services. Agency will have an identified plan in place to insure the safety and well-being of clients and employees during periods of an emergency or disaster that disrupts agency services. [Review our policy on Emergency Management here](#).
  4. Compliance with and reporting of the maltreatment of minors or vulnerable adults under [section 626.557](#) and [chapter 260E](#);
    - a. View our policy on Abuse Prevention Plan.
    - b. Each client gets a vulnerability assessment done and review annually and as needed.
    - c. Take the course online on "[Abuse and Neglect for Health Care Professionals](#)". User access will be granted at orientation.
  5. [Home care bill of rights under section 144A.44](#): All clients receive one upon admissions, transfer, and discharge.

6. [Client Complaint and Investigation](#): Clients will be informed of their right to complain to the home care provider about the services received and of the process to follow when making a complaint to the provider. Clients and their representatives will be informed that complaints may be made without fear of discrimination and/or retaliation. [View our policy and procedure on complaints and Investigations](#). [Also review client complaint form here](#).
  - a. All complaints must be taken seriously and be reported to the Director of Nurse.
7. Consumer advocacy services of the Office of Ombudsman for Long-Term Care, Office of Ombudsman for Mental Health and Developmental Disabilities, Managed Care Ombudsman at the Department of Human Services, county managed care advocates, or other relevant advocacy services---[See the Home care Bill of Rights \(page 4\)](#)
8. Review of the types of home care services the employee will be providing and the [provider's scope of licensure](#).
  - a. View the Job descriptions for [RNs and LPNs here](#).

I have read this "Employee Orientation for Homecare Staff" Document and understand its contents.

Signature	Date
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Company use only	Agencies (PMS, DNH, 1 GOD)
Employee Orientation to work for which company?	

Subd. 3. Verification and documentation of orientation. Each home care provider shall retain evidence in the employee record of each staff person having completed the orientation required