

# **HOME HEALTH AIDE SCOPE OF TASKS**

**Guide to Home Health Aide Training  
and Competency Evaluation**

**and**

**MATRIX  
Permissible and Non-Permissible Activities  
Home Health Aide (HHA) Services**

**NEW YORK STATE DEPARTMENT OF HEALTH  
161 Delaware Avenue  
Delmar, New York 12054**

**Office of Health Systems Management  
Division of Home and Community Based Services  
Bureau of Home Care and Hospice Surveillance and Quality Indicators/Evaluation**

**April 2006**

**STATE OF NEW YORK  
DEPARTMENT OF HEALTH  
HOME HEALTH AIDE SCOPE OF TASKS**

The purpose of this document is to transmit to home care agencies and existing home health aide training programs: 1) the Department of Health requirements for home health aide training and competency evaluation; 2) the procedures for obtaining Departmental approval of a home health aide training program; and 3) a Matrix which lists the health related tasks home health aides are permitted to perform as well as those tasks which may not be performed by aides.

**AIDE-LEVEL HEALTH RELATED TASKS**

Title 10 of the New York Codes, Rules and Regulations, Section 700.2 (c) (15), defines the provision of home health aide services as "health care tasks, personal hygiene services, housekeeping tasks and other related support services essential to the patient's health."

The attached Matrix entitled Permissible and Non-Permissible Activities: Home Health Aide (HHA) Services lists the health-related activities which a home health aide would be allowed to perform without violating Article 139 (Nurse Practice Act) of the State Education Law. The health-related tasks have been grouped to include the following areas:

1. preparation of meals in accordance with modified diets or complex modified diets;
2. administration of medications;
3. provision of special skin care;
4. use of medical equipment, supplies and devices;
5. change of dressing to stable surface wounds;
6. performance of simple measurements and tests to routinely monitor the patient's medical condition;
7. performance of a maintenance exercise program; and
8. care of an ostomy after the ostomy has achieved its normal function.

It should be noted that the health-related tasks identified on the Matrix build upon a knowledge base of personal hygiene and household tasks which home health aides are routinely allowed to perform.

## **TRAINING DISTINCTIONS AND PATIENT CHARACTERISTICS**

The tasks arrayed on the Matrix are divided into three categories: permissible activities; activities permissible under special circumstances; and non-permissible activities. Activities included in each category are as follows:

1. Permissible activities are expected to be taught either in the basic home health aide training program or on-the-job in a home care agency. If a permissible task is not included in the home health aide basic training curriculum, it may be taught to the aide as an addition to the training program, or on a one-to-one basis by the home care agency utilizing or employing the aide. Once an aide has received training in a permissible task and has been evaluated as competent, the aide may perform this task for patients without being retrained in the task. The initial training should be documented and competency reassessed as appropriate.
2. Tasks which are permissible under special circumstances are not routinely taught in a home health aide training program. Since these tasks are complex, each aide must receive training in the exact skill and/or procedure to be performed with each patient. Training and competency evaluation in the performance of these tasks are not transferable from patient to patient. Additionally, a limited number of tasks have specific criteria that must be met in order to assign an aide to the performance of the task for a patient. Tasks permissible under special circumstances may only be performed for a patient whose characteristics and case situation meet all of the following criteria:
  - The patient is self-directing. A self-directing patient has the capability to make choices about activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices.
  - The patient has a need for assistance with the task or activity for routine maintenance of his/her health.
  - The patient cannot physically perform the task or activity because of his/her disability.
  - The patient has no informal caregiver available at the time the task or activity must be performed or the caregiver is available but is unwilling or unable to perform the task or the caregiver's involvement is unacceptable to the patient.
3. Non-permissible activities may not be performed by a home health aide under any circumstances. The performance of such activities by the aide would be in violation of Article 139 of the Education Law (Nurse Practice Act).

## **SERVICE AGENCY RESPONSIBILITY**

Regardless of whether a home health aide activity is taught within a training program or on-the-job, it is the responsibility of the home care agency utilizing the services of the aide to ascertain each aide's ability to perform the health-related tasks listed on the Matrix. The agency must also provide and document appropriate inservice education or on-the-job training and provide adequate supervision and evaluation to assure that each aide is competent to perform the tasks that are required for each patient.

## **HOME HEALTH AIDE TRAINING PROGRAM REQUIREMENTS**

In order to provide home health aide services in New York State, a person must successfully complete a training and competency evaluation program or a competency program conducted by an approved home health aide training program. The attached Guide to Home Health Aide Training and Competency Evaluation clarifies for certified home health agencies (CHHAs), long term home health care programs (LTHHCPS), licensed home care services agencies (LHCSAs), and hospices, the New York State home health aide training and evaluation requirements and the procedures for obtaining Department of Health approval of home health aide training programs. The training and evaluation requirements and approval process set forth in this Guide are in accordance with Part 484 of Title 42 of the Code of Federal Regulations (42 CFR) and Section 700.2 of Title 10 of the New York Codes, Rules and Regulations. The curriculum content referred to in the Guide, which home health aide training programs are required to teach, includes most of the permissible health-related tasks listed on the Matrix as well as instruction in other housekeeping and personal care activities.

Effective October 1, 2006, any organization seeking initial approval of a home health aide training program or any existing approved program seeking reapproval must comply with the requirements set forth in the Guide and this memorandum. These requirements supersede the requirements set forth in the New York State Department of Health's Department of Health Memorandum 92-24, Home Health Aide Scope of Tasks.

Questions regarding this document should be directed to the Home Care Program Director in the appropriate Area Office of the New York State Department of Health (see Attachment 2).

**GUIDE TO HOME HEALTH AIDE TRAINING  
AND COMPETENCY EVALUATION**

# **Guide to Home Health Aide Training And Competency Evaluation**

## **INTRODUCTION**

The purpose of this Guide is to clarify for certified home health agencies (CHHAs), long term home health care programs (LTHHCs), licensed home care services agencies (LHCSAs), and hospices, hereafter referred to as home care agencies, the New York State home health aide training and evaluation requirements, and the process and procedures for Department of Health approval of home health aide training programs. Effective October 1, 2006, any applicant seeking initial approval of a home health aide training program or any existing approved program seeking reapproval must comply with the requirements set forth in this Guide. These requirements supersede the requirements set forth in the New York State Department of Health's Guide to Home Health Aide Training and Competency Evaluation (1992).

The training and evaluation requirements and approval process set forth in this guide are consistent with Part 484 of Title 42 of the Code of Federal Regulations (42 CFR) and Section 700.2 of Title 10 of the New York Code, Rules and Regulations (10 NYCRR). In order to provide home health aide services in New York State, a person must successfully complete a training and competency evaluation program or competency evaluation program only conducted by an approved home health aide training program.

## **TRAINING REQUIREMENTS**

A home health aide training program must include classroom and supervised practical training. The aide trainee must receive a minimum of 75 hours of training including 16 hours of supervised practical training. Supervised practical training means training in a laboratory, patient's home or other health care setting in which the trainee demonstrates knowledge while performing tasks on an individual under the direct supervision of a registered nurse or licensed practical nurse. At a minimum, fifty percent (50%) of each aide's supervised practical training must be provided in a patient care setting. The setting(s) used for practical training and the number of training hours provided should be based on each student's learning needs.

## **CURRICULAR CONTENT**

Each home health aide training program must identify and clearly state its goals and objectives and must include measurable performance criteria specific to both the curricular subject material and clinical content required by the Department. We recommend that the curriculum be taught at a sixth grade reading level. The curriculum must include the content outlined below:

1. Orientation to home care and the role of home health aides;
2. understanding basic human needs of individuals and families including understanding the elderly, infants and children, persons with physical illnesses, persons with physical disabilities and persons with mental disabilities;
3. communication skills;
4. basic elements of body function;
5. patient rights and HIV confidentiality;
6. safety, accident prevention and responses to emergencies;
7. infection control and universal blood and body fluid precautions;
8. personal hygiene and grooming including bed, sponge, tub or shower baths; skin, tub or bed shampoos; nail and skin care; oral hygiene; toileting and elimination;
9. use of prescribed medical equipment and supplies;

10. rehabilitation including safe transfer techniques and ambulation; normal range of motion and positioning; assistance with use of crutches, walkers, and hoist lifts; and prescribed exercise programs;
11. nutrition and fluid intake, to include preparation of meals for simple and complex modified diets;
12. temperature, pulse, respiration, and blood pressure;
13. simple test and measurements;
14. maintaining a clean, safe environment;
15. assistance with medication administration;
16. special skin care;
17. simple dressing changes;
18. ostomy care;
19. handling patient's money; and
20. observing, reporting, and recording.

The training program's teaching staff may exercise discretion in determining the amount of time required to adequately teach each of the subject areas, however, the minimum training time required must be met for each subject area and the training hours must total a minimum of 75 hours.

### **STANDARDIZED TRAINING CURRICULA**

In order to assure that all home health aide training programs are teaching comparable content, home health aide training programs are required to use this curricula as the basis for the home health aide training program.

### **The revised objectives and outline must be followed and all material must be covered.**

The Home Care Core Curriculum (HCCC) and the Health Related Task Curriculum (HRTC) developed in 1992 by the State University College of Buffalo under contract with the State Department of Social Services (SDSS) may be used as an adjunct to the information contained in the revised objectives and outline. These curricula may be obtained from:

Health Education Services  
P.O. Box 7126  
Albany, NY 12224  
(518) 439-7286 fax: (518) 439-7022  
[www.hes.org](http://www.hes.org)

Other resources may be used at the discretion of the Registered Professional Nurses supervising the approved Personal Care Aide/Home Health Aide Training Programs.

Training programs should supplement to standardized curricula with other training materials as necessary to provide adequate instruction in the curricular content outlined on pages 1 and 2 of this Guide. For example, the above curricula should be supplemented to address patient rights, HIV confidentiality and universal blood and body fluid precautions, (items 5 & 7 of the curricular outline). Therefore, training programs are required to use Part 63 or 10 NYCRR (Confidentiality of HIV-related information); Sections 763.2, 766.1, or 794.1 of 10 NYCRR, (Patient rights concerning CHHA; LTHHCP, LTHHCP and hospices respectively); and the Department of Health Memorandum 90-1 (Recommendations for the Prevention and Management of Bloodborne Disease Transmission in Home Care Settings) in the instruction of these topics.

## **COMPETENCY EVALUATION PROGRAM**

The home health aide training program is also responsible for ensuring that each home health aide trainee is competent in each skill and procedure taught in the training program. Competency evaluation may be integrated throughout the training program or may be conducted subsequent to classroom and supervised practical training. Initial competency must be evaluated by a registered nurse using the following methods:

- written and/or oral examinations that demonstrate the aide's knowledge of the information presented in the classroom training; and
- observation and demonstration by the aide of his/her competency in performing skills in the laboratory or patient care setting. The tasks associated with personal hygiene, rehabilitation and vital signs (the subject areas listed in items 8, 10 and 12 of the curriculum outlined on page 2 of this Guide) must be evaluated after observation of the aide's performance of the task with a person in the laboratory or patient care setting during the supervised practical training.

To evaluate each home health aide trainee's competence in performing the minimally required number of home health skills, each home health aide training program should utilize the following:

- The written unit tests found on the Health Department's Health Provider Network; and
- The skills checklists found in the appendices of the Home Care Curriculum (HCC) and the Health Related Tasks Curriculum (HRTC).

A home health aide training program may also supplement the written unit tests and performance examinations contained in the HCC and HRTC with evaluation processes developed by training programs to assure that the aide is competent in the content and skills learned throughout the training program.

For each home health aide who has completed classroom and supervised practical training, all competencies must be documented on a competency evaluation form developed by the home health aide training program and approved by the Department of Health. The competency evaluation form must list the competencies which are subject to evaluation; the method of evaluation and the satisfactory or unsatisfactory outcome of the evaluation; and the identity, by name and license number, of the registered nurse who has evaluated the aide's performance of each task. Classroom and supervised practical training and competency evaluation must be completed within two months of each aide's entry into the training program.

## **COMPETENCY EVALUATION ONLY**

In lieu of the standardized training and competency evaluation, the home health aide training program must make available to eligible individuals a competency evaluation program only. The competency evaluation program should be derived from the written unit tests and skills demonstration checklists included in the HCC and HRTC curricula. The written and skills demonstration portions of the competency evaluation program must contain sufficient content to assure that the aide is competent in the information and skills set forth in the curricular outline on pages 1 and 2 of this Guide. The subject areas listed in items 8, 10, and 12 of the curricular outline must be evaluated after observation of the aide's performance of the task with a person in the laboratory or patient care setting.

Individuals eligible to complete the competency evaluation program only, in lieu of training, include:



- A nursing assistant with one year of full time experience in a general hospital within the past five years;
- An individual with documented home health aide or nurse aide training and competency evaluation from an out-of-state training program;
- A home health aide with documented home health aide training and competency evaluation who has not been employed as a home health aide for 24 consecutive months;
- A nursing student who has completed fundamentals of nursing.

If a prospective home health aide demonstrates competency in some, but not all of the content and skills evaluated, the home health aide training program may provide additional training, as appropriate, and may reevaluate the aide's competency only in those areas requiring remediation.

It should be noted that a registered professional nurse or a licensed practical nurse currently licensed and registered in the State of New York may be employed as a home health aide and will be considered exempt from training and competency evaluation requirements.

### **PERSONAL CARE AIDE UPGRADING**

Personal care aides (level II) are permitted to perform fewer health-related tasks than home health aides. Personal care aides, who have been adequately trained in approved personal care activities, are issued a certificate from a NYSDOH approved training program, which must offer a minimum of 40 hours of training. Home health aide training programs should have the capability to augment a personal care aide's training with classroom and supervised practical training in those skills not included in the personal care aide training program. Such skills include but are not limited to, simple tests and measurements, such as temperature, pulse, respiration, and blood pressure; prescribed exercises; special skin care; and ostomy care. For example, a home health aide training program which utilizes the HCC and HRTC could evaluate the personal care aide for competency in the HCC content and then provide training and evaluation in the HRTC content. A personal care aide with a valid personal care aide certificate is not required to repeat training in the content and skills learned in the basic personal care aide training program. However, the home health aide training program must assure that the personal care aide is competent in such skills prior to providing additional training and issuing a home health aide certificate.

### **NURSE AIDE TRANSITIONING**

Nurse aides employed in residential health care facilities (RHCF) provide personal care and health-related services which are comparable to the activities and tasks performed by home health aides. A nurse aide who is employed in a RHCF is required to be certified in accordance with the provisions of Section 415.26 of Title 10 of NYCRR. In order to obtain nurse aide certification and be listed in the New York State RHCF Nurse Aide Registry, an individual must successfully complete a State approved RHCF nurse aide training program, which is a minimum of 100 hours duration, and pass the State authorized competency examination.

Home health aide training programs should have the capability to augment a nurse aide's training with classroom and supervised practical training in those skills not included in the nurse aide training program. Such skills include but are not limited to: assistance with medications; handling the patient's money; maintaining a clean, safe home environment; safety, accident prevention and responses to emergencies in the home; taking of blood pressure; and observing, recording and reporting. A nurse aide who is registered in the New York State Nurse Aide Registry is not required to repeat training in the content and skills learned in the nurse aide training program. However, the home health aide training program must

assure that the nurse aide is competent in such skills prior to providing additional training and issuing a home health aide certificate.

## **ISSUANCE OF CERTIFICATES**

Within 30 days of successful completion of the training program and demonstration of satisfactory competence in all training program content and skills by the aide, or successful completion of the competency evaluation program only, the home health aide training program must issue an original certificate to the aide validating his/her training competency as a home health aide. A sample of the certificate (see Attachment 1), which must be used in conjunction with the new training requirements follows. If a training certificate was issued to a home health aide, who successfully completed a training program prior to implementation of the training requirements contained in this Guide, such certificate remains valid. The home health aide must also be provided with a copy of the completed competency evaluation form. Copies of each aide's training certificate and competency evaluation form must be maintained by the training program for at least six years.

An individual who has successfully completed an approved home health aide training and initial competency evaluation program will not be considered qualified to provide home health aide services if the individual has not been employed as a home health aide within any consecutive 24 month period. In such cases, the aide's training certificate becomes null and void. The home health aide who wishes to be re-employed after a two-year lapse in employment as a home health aide will be considered qualified to take the competency evaluation program in lieu of a training program. After successful completion of the competency evaluation program, a new certificate will be issued to the home health aide by the training program administering the competency evaluation.

## **TRAINING PROGRAM APPROVAL REQUIREMENTS**

A home health aide training program sponsored by an educational facility which is regulated by the New York State Education Department (NYSED) must meet the training and competency evaluation requirements established by the NYSED. Such requirements are consistent with the standards set forth in this Guide. An educational facility wishing to conduct home health aide training should submit its proposed home health aide training program plan for approval to:

New York State Education Department  
Bureau of Proprietary School Supervision  
Room 974, Education Building Addition  
Albany, New York 12234  
(518) 474-3969

<http://www.highered.nysed.gov/bpss/steps.htm>

A home care agency or other non-educational program sponsor that is not regulated by the NYSED must submit its proposed home health aide training program plan to the appropriate regional office Home Care Program Director (see attachment 2) for approval. Home health aide training programs operated by licensed, certified agencies and hospices and approved by the NYSDOH will be allowed to charge a participant fee, up to a maximum of \$100.00 (one hundred dollars) to recoup the cost of those items students are required to have (e.g., books, supplies, equipment) and that the individual student retains upon completion or separation from the program. Any program charging over \$100.00 in fees or tuition of any amount must apply to the NYSED for approval to operate and should not seek approval under NYSDOH.

Agencies must choose to operate home health aide training programs under the approval of either the NYSDOH or NYSED. Home health aide training programs can not be dually approved by both the NYSDOH and NYSED.

A description of the proposed home health aide training program must include the following:

**Identification of the competency evaluation form to be used.**

A copy of the competency evaluation form to be used to substantiate skills competency must be attached to the training program application.

**A listing of faculty and their credentials**

The home health aide training program must be provided by or under the direction of a registered nurse who has two years of nursing experience, at least one year of which must be in the provision of home health care services. The use of other individuals such as a therapist or a dietician is encouraged as long as such individuals provide instruction under the supervision of a registered nurse. The competency evaluation must be performed by a registered nurse.

**Procedures for maintaining the confidentiality of the home health aide training program tests and examinations.**

The unit test and performance examinations which are included in each of the standardized curricula, as well as the examination utilized in the training program's competency evaluation program must be kept strictly confidential.

**Copies of signed contracts or letters of intent, if applicable, specifying those home care agencies, or other health care settings which will provide trainees with supervised practical training.**

Contracts must include an agreement by the contracting agency to: 1) utilize qualified registered nurses to provide clinical instruction and competency evaluation; and 2) maintain adequate documentation of the skills competencies observed and evaluated during the supervised practical training using the competency evaluation form approved by the Department.

**Procedures for screening training applicants.**

Training programs are expected to develop procedures for screening for the appropriateness of training applicants. Applicants should be selected on the basis of such factors as sympathetic attitude toward the care of the sick; ability to read, write, and carry out directions; maturity and ability to deal effectively with the demands of the job. A minimum age of 18 is recommended but not required.

**A description of the location, major equipment, and space to be utilized including a schematic (or floor plan), if available**

At a minimum, the training site should include a classroom area for didactic presentation of curricular content and a laboratory area with equipment and supplies that enable trainers and trainees to adequately demonstrate clinical tasks.

**Procedures for maintaining training records on all persons trained.**

The home health aide training program must have a procedure to retain, for a period of at least six years, a training record on each person who has successfully completed home health aide training and/or competency evaluation, including copies of the training certificate and competency evaluation form.

After reviewing the training program description, a representative of the Department will approve the training program and may, prior to approval, make a site visit to examine the physical layout of the training site. Subsequent visits may also be made once approval is granted to observe classroom instruction and/or in conjunction with survey visits. Initial home health aide training program approval is granted for a period of up to three years.

**REAPPROVAL OF HOME HEALTH AIDE TRAINING PROGRAM**

In order to maintain ongoing approval, a training program must submit a written program update and a request for re-approval to the appropriate regional office six weeks prior to the expiration of the current three-year approval period. The program update must include a description of any changes in curriculum, faculty (with their current credentials), and physical layout/equipment. The program must also apprise the regional office of any changes in the agencies providing supervised practical training and submit revised contracts or letters of intent as appropriate. Upon receipt of the program description, the regional office will review the information submitted and will notify the program sponsor of Department approval to continue home health aide training. Until such re-approval is received, the home health aide training program may continue to train students unless otherwise notified by the regional office.

A home health aide training program must hold at least one full 75 hour training program within each three year approval period to be reapproved. Competency evaluation, personal care aide upgrading and/or certified nurse aide transitioning are not considered full programs.

If the training program makes any significant changes within the three-year program approval period, including changes in faculty or sites for supervised practical training, the program must notify the Area Office of such changes in writing.

The agency or other organization approved to provide training and initial competency evaluation is ultimately responsible for ensuring that every aspect of the home health aide training, including the supervised practical training, meets all federal and state regulatory requirements. Each trainee completing the home health aide training program must be competent to perform the home health aide tasks taught in the program.

## **RESCINDING APPROVAL OF THE HOME HEALTH AIDE TRAINING PROGRAM**

The Department of Health may rescind approval of a home health aide training program if a training program is found to be out of compliance with the federal and state training and competency evaluation requirements. A home health aide training program may not be provided by a federally certified agency such as a CHHA, a LTHHCP or a hospice if, within the previous two years, the agency:

1. has been found out of compliance with the home health aide training and competency requirements set forth in the federal Conditions of Participation for Home Health Agencies (Title 42 of the Code of Federal Regulations Part 484);
2. has been found to permit an individual that does not meet the federal definition of home health aide to furnish home health aide services;
3. has been subjected to an extended or partial extended survey as a result of having been found to have furnished substandard (condition-level deficient) care;
4. has been assessed a civil monetary penalty of not less than \$5,000 as an intermediate sanction;
5. has been found to have compliance deficiencies that endanger the health and safety of patients and has had a temporary management appointed to oversee the agency; or
6. has had all or part of its Medicare payments suspended.
7. has been found to be charging tuition or fees in excess of \$100.00 in exchange for home health aide training.

## **ADDITIONAL INFORMATION**

Any questions regarding home health aide training and program approval requirements should be directed to the appropriate regional Home Care Program Director. (See Attachment 2)

# **Attachment 1**

# CERTIFICATE OF COMPLETION

This Certifies That

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has successfully completed a training program approved by the New York State Department of Health and is qualified for employment as a home health aide.

\_\_\_\_\_ Date of Completion

\_\_\_\_\_ Name of Training Program/Sponsoring Agency

\_\_\_\_\_ Signature and Title of Official Agency Designee

**Attachment 2**

**New York State Department of Health**

**HOME CARE PROGRAM DIRECTORS**

Bronx, Kings, New York, Richmond and Queens Counties; Dutchess, Orange, Putnam, Rockland, Sullivan, Ulster, and Westchester Counties and Nassau and Suffolk Counties:

**Mr. William V. Conron**  
**New York State Department of Health**  
**Metropolitan Area Regional Office**  
**Home Health Aide Training Program**  
**90 Church Street; 13<sup>th</sup> floor**  
**New York, New York 10001**  
**(212) 417-5888**

Albany, Canton, Columbia, Delaware, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Oswego, Rensselaer, Saratoga, Schenectady, Schoharie, Warren and Washington Counties:

**Mr. David H. Philips, Jr.**  
**New York State Department of Health**  
**Capital District Regional Office**  
**Home Care Unit**  
**Frear Building**  
**One Fulton Street**  
**Troy, New York 12180**  
**(518) 408-5413**

Broome, Cayuga, Cortland, Chenango, Herkimer, Jefferson, Lewis, Madison, Oneida, St. Lawrence, Tioga and Tompkins Counties:

**Ms. Carolyn A. Backes**  
**New York State Department of Health**  
**Central New York Regional Office**  
**Home Care Unit**  
**217 South Salina Street**  
**Syracuse, New York 13202**  
**(315) 477-8421**

Alleghany, Cattaraugus, Chemung, Chataugua, Erie, Genesee, Livingston, Monroe, Niagara, Ontario, Orleans, Schuyler, Steuben, Seneca, Wayne, Wyoming and Yates Counties:

**Mr. Jay F. Dorney**  
**Western Regional Office**  
**Home Care Unit**  
**584 Delaware Avenue**  
**Buffalo, New York 14202**  
**(585) 238-8185**



# **MATRIX**

## **PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES HOME HEALTH AIDE (HHA) SERVICES**

**PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES**

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## INTRODUCTION

The Matrix delineates the activities associated with the provision of health related tasks by home health aides. Designations of permissible activities, permissible under special circumstances, and non-permissible activities are very specific and detailed to reflect the collaborative work and agreement by the State Education Department (SED) to clarify which activities that would be permissible by SED without violating the Nurse Practice Act and to assure that:

- there is a common understanding of all activities associated with each task; and
- the home care industry clearly understands which parts of the activity may be performed by the home health aide without violating the Nurse Practice Act in New York State (Article 139 of the State Education Law).

The language used in the listing of activities in the Matrix is not intended to imply that a home health aide providing services may make judgements about a patient's need for assistance with an activity. The patient's medical status must be reflected in a physician's order. The functions, tasks, activities and degree of assistance needed by the patient must be assessed by a registered professional nurse. Permissible activities must be identified in the patient's plan of care. The home health aide must be supervised by a registered professional nurse or therapist and, where indicated, receive on-the-job training in the patient's home in performance of an activity.

A Glossary explaining selected terms found in the Matrix is presented on pages 6-7. The Glossary is intended to be used as a reference in conjunction with review and interpretation of the Matrix content. Page numbers are included in the Glossary to assist in the location of the terms within the body of the Matrix.

## GLOSSARY

- ◇ **Activities Permissible Under Special Circumstances, General, pages 9-68:** activities which can only be provided in association with a patient whose characteristics and case situation meet all of the following criteria:
  1. The patient is self-directing: i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices;
  2. The patient has need for assistance with the task or activity for routine maintenance of his/her health;
  3. The patient cannot physically perform the task or activity because of his/her disability; and
  4. The patient has no informal caregiver available at the time the task or activity must be performed, or the caregiver is unwilling or unable to perform the task, or the caregiver's involvement is unacceptable to the patient.
  
- ◇ **Activities Permissible Under Special Circumstances, Administration of Injectable (Insulin Only) Medications, pages 20-22:** cleaning of the site for insulin injection, inspection of the site for evidence of infection and/or irritation and injection of a pre-filled insulin dose for a patient whose characteristics and case situation meet the above four criteria.
  
- ◇ **Activities Permissible Under Special Circumstances, Indwelling Catheter, pages 36-38 and page 57:** irrigation of the catheter, changing of a leg or bed urinary drainage bag and collection of a urinary specimen for testing purposes from the drainage bag for a patient whose characteristics and case situation meet the above four criteria and whose home care aide provides service exclusively to the patient within a particular day.
  
- ◇ **Activities Permissible Under Special Circumstances, Mechanical Ventilators, pages 45-46:** activities which can only be performed for a patient whose characteristics and case situation meet the above four criteria and by a home care aide with current certification in cardiopulmonary resuscitation (CPR).

- ◇ **Administration of Medications, pages 15-26:** activities performed to prepare for and complete the administration of prescription and/or non-prescription oral, topical intra-aural, nasal, ocular, rectal and vaginal medications. Removal of the proper amount of medication from the medication container and/or application, instillation, insertion, etc. of a medication by a home care aide can only be performed for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understand the impact of these choices and assume responsibility for the results of the choices.
- ◇ **Mature and Stable Ostomy, pages 62-68:** an ostomy that is now new or changing and for which a routine of care has been established.
- ◇ **Observe, Record and Report, General, pages 9-68:** to gather, write down and/or verbally convey information documenting:
  1. actions and findings of the home care aide when assisting the patient with a specific function, task or procedure assigned in the patient's plan of care;
  2. changes in the patient's behavior, physical environment and relationships with other caregivers which might affect the plan of care;
  3. effects of, or patient's reaction to, a procedure or treatment performed by the home care aide; and
  4. effects of, or problems developing from, a procedure or treatment performed by someone other than the home care aide.
- ◇ **Routine Skin Care, pages 28-29:** activities normally performed on a regular basis to maintain the skin's integrity, e. g. bathing and grooming.
- ◇ **Special Skin Care, pages 29-30:** activities performed as needed to protect a stable surface wound or to prevent the development of decubiti.
- ◇ **Stable Skin Surface, pages 18-20:** skin surface that may have a superficial wound but is not open, inflamed or infected.
- ◇ **Stable Surface Wound, pages 48-49:** a wound that is closed, crusted or scabbed over, non-draining and non-infected, but not necessarily healed.



PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

FACE SHEET

Function/Task: preparing meals in accordance with modified diets

and

preparing meals in accordance with complex modified diets

Page(s): 9-14

Home Health Aide, special circumstances: a term used to define activities which can only be provided for a patient whose characteristics and case situation meet all of the following criteria;

1. The patient is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices;
2. The patient has need for assistance with the task or activity for routine maintenance of his/her health;
3. The patient cannot physically perform the task or activity because of his/her disability; and
4. The patient has no informal caregiver available at the time the task or activity must be performed, or the caregiver is unwilling or unable to perform the task, or the caregiver's involvement is unacceptable to the patient.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Preparing meals in accordance with modified diets				
- low sugar	1. plan meals in cooperation with patient and family.	x		
- low salt				
- low fat	2. prepare shopping list.	x		
- low residue				
- calorie	3. purchase foods.	x		
- high calorie				
- low cholesterol	4. assemble/set up necessary equipment/utensils supplies for meal preparation.	x		
- bland				
- mechanically altered				
- high residue	5. prepare meals/foods.	x		
- high protein				
- soft	6. serve meals.	x		
- liquid				
	7. clean cooking area, equipment and utensils.	x		
	8. store uneaten foods properly.	x		
	9. observe, record and report.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Preparing meals in accordance with complex modified diets.				
- diabetic	1. plan meals in cooperation with patient or family.	x		
- nutritionally supplemented, involving measuring and mixing	2. prepare shopping list.		x	
- combination of two or more modified diets	3. purchase foods.		x	
	4. assemble/set up necessary equipment/utensils/supplies for meal preparation.		x	
	5. prepare meals/foods.		x	
	6. add medication to foods:			
	a. hyperal imentation solutions;			x
	b. oral medications;			x
	c. vitamin supplements;	x		
	d. stool softeners.	x		
	7. serve meals.		x	

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Preparing meals in accordance with complex modified diets.				
- diabetic, et al (cont.)	8. clean cooking area, equipment and utensils.	x		
	9. store uneaten foods properly.	x		
	10. observe, record and report.	X		
- tube feedings	1. assemble necessary equipment and supplies.	x		
- naso-gastric - gastric	2. position patient for instillation of feeding.	x		
	3. insert tubes.			x
	4. irrigate tubes.			x
	5. instill feeding.			x
	6. hand requested items to person instilling feeding.	x		
	7. dispose of used equipment and supplies.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Preparing meals in accordance with complex modified diets (cont.)				
- tube feedings (cont.)	8. clean reusable equipment and unused supplies.	x		
	9. store reusable equipment and unused supplies.	x		
	10. observe, record and report.	X		
- total parenteral nutrition (TPN)	1. dressing change to IV catheter site (see permissible activities related to changing of dressings involving sterile procedure, pages 50-51).			
	a. assemble necessary equipment and supplies;	x		
	b. change dressing;			x
	c. clean reusable equipment;		x	
	d. store equipment and unused supplies;	x		
	e. observe, record and report.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Preparing meals in accordance with complex modified diets (cont.)				
- total parenteral nutrition	2. mixing solutions:			
	a. assemble necessary equipment and supplies;			x
	b. check for names, dates, clarity of solution;			x
	c. attach tubing to solution bottles;			x
	d. prepare additives;			x
	e. inject additives into solution;			x
	f. store solution as directed;		x	
	g. observe, record and report.			x
	3. hooking up solutions:			
	a. assemble necessary equipment and supplies;			x
	b. hang solution on IV pole;			
	c. prepare additional equipment;			x
	d. prepare Heparin flush;			x

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA	
Preparing meals in accordance with complex modified diets (cont.)					
- total parenteral nutrition	e. inject Heparin into TPN catheter;			X	
	f. connect solution tubing to catheter;			X	
	g. set initial infusion rate;			X	
	h. adjust infusion rate;			X	
	i. Inject Heparin flush again;			X	
	j. perform sterile dressing change to IV catheter site;			X	
	k. clean reusable equipment;		X		
	l. store reusable equipment and unused supplies;		X		
	m. repair equipment;			X	
	n. observe, record and report.			X	
	4. daily monitoring:				
		a. measure weight;	X		
		b. take temperature;	X		
		c. test urine for sugar;	X		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

FACE SHEET

Function/Task: administration of medications

Page(s): 16-26

Home Health aide, special circumstances: a term used to define activities which can only be provided for a patient whose characteristics and case situation meet all of the following criteria:

1. The patient is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices;
2. The patient has need for assistance with the task of activity for routine maintenance of his/her health;
3. The patient cannot physically perform the task or activity because of his/her disability; and
4. The patient has no informal caregiver available at the time the task or activity must be performed, or the caregiver is unwilling or unable to perform the task, or the caregiver is unwilling or unable to perform the task, or the caregiver's involvement is unacceptable to the patient.



PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Administration of medications				
- oral medications	1. prompt patient of time to take medication.	x		
	2. read the label on the medication container to check:			
	a. the name of the person for who the medication is intended;	x		
	b. the name of the medicine (may include both the generic and brand name);	x		
	c. amount to be used at each application;	x		
	d. frequency of the amount (i.e. QD, BID, etc.);	x		
	e. expiration date for prescription medications;	x		
	f. name, telephone number, address, and ID number of pharmacy;	x		
	g. doctor's name;	x		
	h. date prescription is filled;	x		
	i. number of prescription.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Administration of medications (cont.)				
- oral medications (cont.)	3. Bring the medication container and any necessary supplies and equipment to the patient.	x		
	4. open the medication container for the patient.		x	
	5. position the patient for medication administration.	x		
	6. *remove proper amount of medication from container.	x		
	7. *put /spray/spoon prescription or non-prescription medication in patient's mouth:			
	a. not pre-measured;	x		
	b. pre-measured.	x		

\*This activity can only be provided for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Administration of medications (cont.)				
- oral medications (cont.)	8. dispose of used supplies.	x		
	9. clean reusable equipment.	x		
	10. store medication properly.	x		
	11. observe, record and report.	X		
- topical medications, for stable skin surface	1. prompt patient of time to apply medication.	x		
	2. read the label on the medication container (see oral medications, page 16).	x		
	3. bring the medication container and any necessary supplies and equipment to the patient.	x		
	4. open the medication container for the patient.			
	5. position patient for medication administration	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Administration of medications				
- topical medications, for stable skin surface (cont.)	6. *remove proper amount of medication from container	x		
	7. *apply prescription or non-prescription medications:			
	a. antibiotics;	x		
	b. anesthetics;	x		
	c. corticosteroids;	x		
	d. vasodilators;	x		
	e. protectives;	x		
	f. antiparasitics;	x		
	g. antifungals;	x		
	h. antipruritics;	x		
	i. antibacterials;	x		
	j. rectal/vaginal preparations;	x		
k. antianginals.	x			
	8. dispose of used supplies.	x		
	9. clean reusable equipment and supplies.	x		

\*This activity can only be provided for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
<b>Administration of medications</b>				
- topical medications, for stable skin surface (cont.)	10. store medication properly.	x		
	11. observe, record and report.	x		
- injectible medications	1. prompt patient of time to inject medication.	x		
	2. read the label on the medication container (see oral medications, page 16).	x		
	3. bring the medication container and any necessary supplies and equipment to the patient.	x		
	4. open the medication container for the patient.	x		
	5. position the patient for injection of medication.	x		
	6. draw up solution (including reconstituting) or prepare prefilled dose.			x

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Administration of medications (cont.)				
- injectible medications (cont.)	7. cleanse site for injection of insulin.		x	
	8. inspect site for evidence of infection and/or irritation.		x	
	9. give injection:			
	a. intramuscular including Z track;			x
	b. intravenous;			x
	c. intracutaneous;			x
	d. subcutaneous;			x
	(1) prefilled insulin;			
	(2) other.		x	x
	10. dispose of used supplies.	x		
	11. dispose of needles used for:			
	a. insulin injection;	x		
b. other types of injections.			x	
12. clean reusable equipment and supplies.		x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Administration of medications (cont.)				
- injectible medications (cont.)	13. store medication properly.	x		
	14. observe, record and report.	X		
- intra-aural, nasal and ocular medications.	1. prompt patient of time to instill or apply medication.	x		
	2. read the label on the medication container (see oral medications, page 16).	x		
	3. bring the medication container and any necessary supplies and equipment to the patient.	x		
	4. open the medication container for the patient.	x		
	5. *remove proper amount of medication from container.	x		
	6. warm solution for medication instillation/application.	x		

\*This activity can only be provided for a patient who is self-directing; i.e. has the capability to make choices about activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Administration of medications (cont.)				
- intra-aural, nasal and ocular medications (cont.)	7. position the patient for instillation or application of medication.	x		
	8. perform special cleansing of eyelids and eyelashes to remove secretion and crusts and prepare for instillation or application of ocular medication.	x		
	9. straighten ear canal and prepare for instillation or application of intra-aural medication.	x		
	10. *instill/apply/spray prescription or non-prescription medication.	x		
	11. dispose of used supplies.	x		

\*This activity can only be provided for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices.



PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Administration of medications (cont.)				
- intra-aural, nasal and ocular medications (cont.)	12. clean reusable equipment and supplies	x		
	13. store medication properly.	x		
	14. observe, record and report.	X		
- rectal and vaginal medications	1. prompt patient of time to insert medication.	x		
	2. read the label on the medication container (see oral medications, page 16).	x		
	3. bring the medication container and any necessary supplies and equipment to the patient.	x		
	4. open the medication container or package for the patient.	x		
	5. attach medication container to vaginal or rectal applicator.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Administration of medications (cont.)				
- rectal and, vaginal medications (cont.)	6. position the patient for insertion of medication.	x		
	7. *remove proper amount of medication from container.	x		
	8. *insert prescription or non-prescription medications:			
	a. creams, lotions;	x		
	b. glycerine suppositories;	x		
	c. medicated suppositories.	x		
	9. dispose of used supplies and equipment.	x		
	10. clean reusable supplies and equipment.	x		
	11. store medication properly	x		
	12. observe, record and report.	x		

\*This activity can only be provided for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Administration of medications (cont.)				
- medicated baths	1. prompt patient of bath time	x		
	2. prepare bath water.	x		
	3. pour medication into water.	x		
	4. clean equipment.	x		
	5. store medication properly.	x		
	6. observe, record and report.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

FACE SHEET

Function(s)/Task(s): providing skin care; routine, special

Page(s): 28-30

Home Health Aide, special circumstances: a term used to define activities which can only be provided for a patient whose characteristics and case situation meet all of the following criteria:

1. The patient is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices;
2. The patient has need for assistance with the task or activity for routine maintenance of his/her health;
3. The patient cannot physically perform the task or activity because of his/her disability; and
4. The patient has no informal caregiver available at the time the task or activity must be performed, or the caregiver is unwilling or unable to perform the task, or the caregiver's involvement is unacceptable to the patient.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Providing skin care				
- routine	1. assemble necessary equipment and supplies.	x		
	2. position patient.	x		
	3. use support equipment (e.g., sheepskin, cushions).	x		
	4. maintain clean environment:			
	a. clothing change;	x		
	b. linen change;	x		
	c. supportive equipment.	x		
	5. perform personal care:			
	a. bathing;	x		
	b. backrub;	x		
	c. apply cream/lotion;	x		
	d. nail care:			
	(1) file;	x		
	(2) cut.		x	
e. hair care;	x			
f. toileting.	x			
6. inspect skin for signs of pressure/irritation.	x			

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Providing skin care (cont.)				
- routine (cont.)	7. dispose of used supplies.	x		
	8. clean reusable equipment.	x		
	9. store reusable supplies.	x		
	10. dispose of used supplies.	X		
- special	1. assemble necessary equipment and supplies.	x		
	2. position patient.	x		
	3. *apply prescription or non-prescription topical medications to stable skin surface.	x		
	4. apply prescription or non-prescription topical medications to unstable skin surface.			x

\*This activity can only be provided for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Providing skin care (cont.)				
- special (cont.)	5. perform dressing change on stable skin surface (see permissible activities related to changing dressings for stable surface wounds, pages 49-50).			
	6. perform dressing change on unstable skin surface.			x
	7. inspect skin for signs of pressure/irritation.	x		
	8. dispose of used supplies.	x		
	9. clean reusable equipment.	x		
	10. store reusable supplies.	x		
	11. observe, record and report.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

FACE SHEET

Function(s)/Task(s): using medical equipment, supplies and devices.

Page(s): 32-47

Home Health Aide, special circumstances: a term used to define activities which can only be provided for a patient whose characteristics and case situation meet all of the following criteria:

1. The patient is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices;
2. The patient has need for assistance with the task or activity for routine maintenance of his/her health;
3. The patient cannot physically perform the task or activity because of his/her disability; and
4. The patient has no informal caregiver available at the time the task or activity must be performed, or the caregiver is unwilling or unable to perform the task, or the caregiver's involvement is unacceptable to the patient.

Additional requirements exist for provision of selected activities related to indwelling catheters and for assistance with the use of mechanical ventilators. Requirements are starred (\*) and explained on the applicable pages of the Appendix. Requirements are also stated on pages 6-7 of the Glossary to the Appendix.



PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, Supplies and devices.				
- crutches	1. bring the equipment/supply/ device to the patient.	x		
- walkers				
- braces/splints	2. position the patient for use of equipment/device.	x		
- arm				
- leg				
- neck				
- back	3. fit/adjust equipment/supply device.			x
- prosthetics				
- artificial limbs	4. put on/put in/remove/operate:			
- hearing aids	a. braces/splints:			
- glasses	(1) arm;	x		
- artificial eyes	(2) leg;	x		
- dentures	(3) neck;	x		
- breasts	(4) back;	x		
- wheelchairs	(5) traction.			x
- motorized				
- unmotorized				
- trapeze	b. prosthetics:			
- footboards/cradles	(1) artificial limbs;	x		
- canes, all types	(2) hearing aids;	x		
	(3) glasses;	x		
	(4) artificial eyes;			x
	(5) dentures;	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, Supplies and devices (cont.)				
- hospital beds	4. put on/put in/remove/operate			
- special mattresses (eggcrate, air, water)	(cont.):			
- cushions (water, air)	b. prosthetics (cont.)			
- pads (sheepskin)	(6) breasts;	x		
- slings	(7) others.			x
- elastic support	c. trapeze;	x		
- stockings	d. hospital beds;	x		
- ace bandages	e. slings;	x		
- backrests	f. elastic support			
- transfer/sliding boards	stockings;	x		
	g. ace bandages		x	
	5. change/charge batteries of electrically/electronically operated equipment/devices.	x		
	6. dispose of used equipment/ supplies/devices.	x		
	7. clean reusable equipment/ supplies/devices.	x		
	8. store reusable equipment/ supplies/devices properly.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, Supplies and devices (cont.)				
	9. repair equipment			x
	10. observe, record and report.	X		
- hydraulic lift such as hooyer - electric lift chair	1. assemble/set up necessary equipment.	x		
	2. position patient to move into/out of equipment.	x		
	3. operate the equipment.	x		
	4. clean reusable equipment.	x		
	5. store equipment properly.	x		
	6. repair equipment.			x
	7. observe, record and report.	X		
- transcutaneous electrical nerve stimulator (TENS)	1. assemble/set up necessary equipment.		x	
	2. prepare skin/electrodes.		x	
	3. apply/remove electrodes.		x	

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, Supplies and devices (cont.)				
- transcutaneous electrical nerve stimulator (TENS) (cont.)	4. adjust electrode controls.		x	
	5. clean equipment.		x	
	6. store equipment properly.		x	
	7. repair equipment.			x
	8. observe, record and report.		x	
- catheters - external	1. assemble necessary equipment and supplies.	x		
	2. position patient.	x		
	3. cleanse skin around application site.	x		
	4. apply/remove catheter.	x		
	5. change leg or bed drainage bag.	x		
	6. empty leg or bed drainage bags.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- catheters - external (cont.)	7. measure and record urinary output (see simple measurements and tests, pages 53-56).	x		
	8. dispose of used supplies.	x		
	9. clean reusable equipment	x		
	10. store reusable equipment properly.	x		
	11. observe, record and report.	x		
- catheters - straight (intermittent) - indwelling (e.g. Foley)	1. assemble necessary equipment and supplies.	x		
	2. position patient.	x		
	3. cleanse skin around insertion site.			x
	4. set up sterile field for insertion of catheter			x

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- catheters	5. apply prescription or non-prescription medication around insertion site.			x
- straight (intermittent)				
- indwelling (e.g. Foley) (cont.)	6. insert/remove catheter:			
	a. straight;			x
	b. indwelling			x
	7. *irrigate indwelling catheter.		x	
	8. clean skin and catheter tubing with soap and water.	x		
	9. *change leg or bed drainage bags.		x	

\*This activity can only be provided for a patient whose characteristics and case situation meet all of the four special circumstances criteria on page 31 and whose home care aide provides services exclusively to his/her within a particular day.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- catheters	10. empty leg or bed drainage bags.	x		
- straight (intermittent)				
- indwelling (e.g. Foley) (cont.)	11. measure and record urinary output (see simple measurements and tests, pages 55-56).	x		
	12. dispose of used supplies.	x		
	13. clean reusable equipment.	x		
	14. store reusable equipment properly.	x		
	15. observe, record and report.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- enemas	1. assemble necessary equipment and supplies.	x		
	2. position patient for task.	x		
	3. prepare soap solution.	x		
	4. administer:			
	a. commercially prepared;		x	
	b. soap solution.			x
	5. remove fecal impactions.			x
	6. cleanse skin around enema site.	x		
	7. dispose of waste materials and used supplies.	x		
	8. clean reusable equipment.	x		
9. store reusable equipment properly.	x			
10. observe, record and report.	x			



PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- douches	1. assemble necessary equipment and supplies.	x		
	2. position patient for task.	x		
	3. prepare douche solution.	x		
	4. administer:			
	a. commercially prepared;		x	
	b. douche solution.		x	
	5. cleanse skin around douche site.	x		
	6. dispose of waste materials and used supplies.	x		
	7. clean reusable equipment.	x		
8. store reusable equipment properly.	x			
9. observe, record and report.	x			

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- hot and cold applications	1. assemble necessary equipment and supplies.		x	
- hot water bottles	2. prepare equipment for application.		x	
- heating pads	3. position patient for task..		x	
- hot and cold compresses	4. apply/immerse/remove:			
- ice bags	a. hot water bottle;		x	
- foot and hand soaks	b. heating pad;		x	
- sitz baths	c. hot and cold compress;		x	
	d. ice bag;		x	
	e. foot/hand soak;		x	
	f. sitz bath;		x	
	b. douche solution.		x	
	5. time application.		x	
	6. dispose of used supplies.		x	
	7. clean reusable equipment.		x	
	8. store reusable equipment properly.		x	
	9. observe, record and report.		x	

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- medication nebulizer	1. assemble necessary equipment and supplies.	x		
	2. position patient.	x		
	3. place in medication nebulizer:			
	a. normal saline solution;	x		
	b. prescribed medications.		x	
	4. turn on the equipment.	x		
	5. time the treatment.	x		
	6. check to assure that patient is using equipment properly.	x		
	7. turn off the equipment.	x		
	8. clean reusable equipment.	x		
	9. store equipment properly.	x		
10. repair equipment.				x
11. observe, record and report.	x			

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- humidifier	1. assemble necessary supplies.	x		
	2. fill with water.	x		
	3. clean equipment.	x		
	4. store equipment properly.	x		
	5. repair equipment.			x
	6. observe, record and report.	x		
- oxygen equipment	1. assemble/set up necessary equipment.	x		
- oxygen tank - liquid oxygen reservoir	2. turn on the equipment.	x		
	3. set/regulate the oxygen flow rate.		x	
	4. check that flow rate is at setting prescribed on patient's care plan.	x		
	5. turn off the equipment.	x		
	6. clean equipment.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- oxygen equipment (cont.)  - tank, reservoir	7. store equipment properly.	x		
	8. repair equipment.			x
	9. observe, record and report.	x		
- oxygen concentrator	1. assemble/set up necessary equipment.	x		
	2. turn on the equipment.	x		
	3. set/regulate the oxygen flow.		x	
	4. check that flow rate is at setting prescribed on patient's care plan.	x		
	5. turn off the equipment.	x		
	6. clean equipment.	x		
	7. store equipment properly.	x		
	8. repair equipment.			x
	9. observe, record and report.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- *mechanical ventilators, including IPPB	1. assemble necessary equipment and supplies.		x	
	2. plug in equipment.		x	
	3. charge batteries.		x	
	4. check settings on gauges against prescribed settings on patient's plan of care.		x	
*Assistance with use of this equipment requires current certification in cardiopulmonary resuscitation (CPR)	5. set/regulate gauges.		x	
	6. assess:			
	a. chest/breath sounds;			x
	b. need for suctioning.			x
	7. perform deep suctioning.			x
	8. perform superficial suctioning:			
	a. nasal;			x
	b. nasopharyngeal;			x
c. staple tracheostomy;			x	
d. oral with bulb syringe.		x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- *mechanical ventilators, (cont.)	9. unplug equipment.		x	
	10. clean reusable equipment and supplies.		x	
	11. store reusable equipment and supplies.		x	
*Assistance with use of this equipment requires current certification in cardiopulmonary resuscitation (CPR)	12. repair equipment.			x
	13. maintain contents of emergency supply box.		x	
	14. perform emergency care as needed, e.g. CPR.		x	
	15. observe, record and report.		x	

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Using medical equipment, supplies and devices (cont.)				
- equipment for sleep apneas; Continuous Positive Airway Pressure (CPAP)	1. assemble necessary equipment and supplies.	x		
	2. position patient.	x		
	3. turn on equipment.	x		
	4. apply/remove mask.	x		
	5. turn off equipment.	x		
	6. clean equipment.	x		
	7. store reusable equipment.	x		
	8. repair equipment.			x
	9. observe, record and report.	x		



PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

FACE SHEET

Function(s)/Task(s): changing of dressings involving clean procedure

and

changing of dressings involving sterile procedure

Page(s): 49-51

Home Health Aide, special circumstances: A term used to define activities which can only be provided for a patient whose characteristics and case situation meet all of the following criteria:

1. The patient is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices;
2. The patient has need for assistance with the task or activity for routine maintenance of his/her health;
3. The patient cannot physically perform the task or activity because of his/her disability; and
4. The patient has no informal caregiver available at the time the task or activity must be performed, or the caregiver is unwilling or unable to perform the task, or the caregiver's involvement is unacceptable to the patient.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
<b>Changing of dressings</b>				
- dressings involving clean procedure, for stable surface wounds  -bandaid -gauze pads with tape	1. assemble necessary equipment and supplies.	x		
	2. position patient.	x		
	3. remove wrappings from new dressing.	x		
	4. cut tape.	x		
	5. remove old dressing.	x		
	6. dispose of old dressing.	x		
	7. clean skin with soap and water.	x		
	8. hand requested items to patient.	x		
	9. *apply prescription and non-prescription topical medication.	x		

\*This activity can only be provided for a patient who is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Changing of dressings (cont.)				
- dressings involving clean procedure (cont.)	10. apply new dressing.	x		
	11. store unused supplies properly.	x		
	12. observe, record and report.	x		
- dressings involving sterile procedure	1. assemble necessary equipment and supplies.	x		
	2. sterilize instruments.		x	
	3. position patient.	x		
	4. set up sterile field.			x
	5. remove wrappings from new dressing.			x
	6. cut tape.	x		
	7. remove soiled dressing.			x
	8. dispose of soiled dressing.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Changing of dressings (cont.)				
- dressings involving sterile procedure (cont.)	9. apply prescription or non-prescription medication to dressing.			x
	10. apply new dressing.			x
	11. apply reinforcement dressing if necessary.			x
	12. clean equipment.		x	
	13. store unused supplies properly.	x		
	14. observe, record and report.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

FACE SHEET

Function(s)/Task(s): performing simple measurements and tests\*

Page(s): 53-58

Home Health Aide, special circumstances: a term used to define activities which can only be provided for a patient whose characteristics and case situation meet all of the following criteria:

1. The patient is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices;
2. The patient has need for assistance with the task or activity for routine maintenance of his/her health;
3. The patient cannot physically perform the task or activity because of his/her disability; and
4. The patient has no informal caregiver available at the time the task or activity must be performed, or the caregiver is unwilling or unable to perform the task, or the caregiver's involvement is unacceptable to the patient.

Additional requirements exist for testing of urine from an indwelling catheter. Requirements are starred (\*) and explained on the applicable page of the Matrix. Requirements are also stated on page 6 of the Glossary to the Matrix.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Performing simple measurements and tests to routinely monitor the patient's medical condition				
- vital signs	1. assemble necessary equipment.	x		
	2. position patient for task.	x		
	3. take blood pressure:			
	a. arm;	x		
	b. other sites.			X
	4. take temperature:			
	a. oral;	x		
	b. axillary;	x		
	c. rectal.	x		
	5. take pulse:			
	a. radial	x		
	b. apical.		x	
	6. count respirations.	x		
	7. dispose of used supplies.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Performing simple measurements and tests (cont.)				
- vital signs	8. clean equipment.	x		
	9. store equipment properly.	x		
	10. observe, record and report.	x		
- specimen collection  - urine - stool	1. assemble necessary equipment and supplies.	x		
	2. position patient for task.	x		
	3. transfer specimen from commode or toilet or from bed pan or urinal to specimen container.	x		
	4. cleanse patient's skin.	x		
	5. dispose of used supplies.	x		
	6. label specimen container.	x		
	7. store specimen as directed..	x		
	8. clean reusable equipment.	x		
	9. observe, record and report.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Performing simple measurements and tests (cont.)				
- specimen collection (cont.) -sputum	1. assemble necessary equipment and supplies.	x		
	2. position patient for task.	x		
	3. encourage patient to cough expectorate into specimen container.	x		
	4. dispose of used supplies.	x		
	5. label specimen container.	x		
	6. store specimen as directed..	x		
	7. clean patient's mouth.	x		
	8. observe, record and report.	x		
- intake and output	1. assemble necessary equipment and supplies.	x		
	2. pre-measure containers.	x		



PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Performing simple measurements and tests (cont.)				
- intake and output (cont.)	3. measure amount of fluid intake and urinary output.	x		
	4. dispose of used materials.	x		
	5. clean reusable equipment.	x		
	6. store equipment properly.	x		
	7. observe, record and report.	x		
- blood testing collection	1. assemble necessary equipment and supplies.		x	
- diabetic	2. cleanse patient's fingertip.		x	
	3. obtain drop of blood from fingerprick.		x	
	4. place specimen on testing material.		x	
	5. time the test.		x	
	6. read and record text results.		x	

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Performing simple measurements and tests (cont.)				
- blood testing (cont.)	7. dispose of used equipment and supplies.		x	
- diabetic (cont.)	8. clean equipment		x	
	9. store unused equipment and supplies properly.		x	
	10. observe, record and report.		x	
- urine testing	1. assemble necessary equipment and supplies.	x		
- diabetic	2. position client for task.	x		
- bacterial	3. *collect specimen from:			
	a. commode, bedpan, urinal;	x		
	*b. indwelling catheter.		x	

\*This activity can only be provided for a patient whose characteristics and case situation meet all of the four special circumstances criteria on page 52

and

whose home care aide provides services exclusively to him/her within a particular day.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Performing simple measurements and tests (cont.)				
- urine testing (cont.) - diabetic - bacterial (cont.)	4. administer the test.	x		
	5. time the test.	x		
	6. read and record test results.	x		
	7. dispose of used equipment and supplies.	x		
	8. store testing materials properly.	x		
	9. observe, record and report.	x		
- weight	1. bring scale to patient if necessary.	x		
	2. support patient on scale.	x		
	3. read the weight.	x		
	4. store scale properly.	x		
	5. observe, record and report.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

FACE SHEET

Function(s)/Task(s): performing a maintenance exercise program

Page(s): 60

Home Health Aide, special circumstances: a term used to define activities which can only be provided for a patient whose characteristics and case situation meet all of the following criteria:

1. The patient is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices;
2. The patient has need for assistance with the task or activity for routine maintenance of his/her health;
3. The patient cannot physically perform the task or activity because of his/her disability; and
4. The patient has no informal caregiver available at the time the task or activity must be performed, or the caregiver is unwilling or unable to perform the task, or the caregiver's involvement is unacceptable to the patient.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Performing a maintenance exercise program	1. assemble/set up necessary equipment.	x		
	2. position patient for exercise.	x		
	3. carry out:			
	a. passive range of motion;	x		
	b. resistive range of motion;	x		
	c. postural drainage;	x		
	(1) percussion and vibration to the chest.			x
4. count or time exercise.	x			
5. store equipment properly.	x			
6. repair/adjust traction equipment.				x
7. observe, record and report.	x			

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

FACE SHEET

Function(s)/Task(s): caring for an ostomy after the ostomy has achieved its normal function

Page(s): 62-68

Home Health Aide, special circumstances: a term used to define activities which can only be provided for a patient whose characteristics and case situation meet all of the following criteria:

1. The patient is self-directing; i.e. has the capability to make choices about the activities of daily living, understands the impact of these choices and assumes responsibility for the results of the choices;
2. The patient has need for assistance with the task or activity for routine maintenance of his/her health;
3. The patient cannot physically perform the task or activity because of his/her disability; and
4. The patient has no informal caregiver available at the time the task or activity must be performed, or the caregiver is unwilling or unable to perform the task, or the caregiver's involvement is unacceptable to the patient.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Caring for an ostomy after the ostomy has achieved its normal function				
- Changing a colostomy or ileostomy appliance or dressing when the ostomy is mature and stable.	1. assemble necessary equipment and supplies.	x		
	2. position patient.	x		
	3. remove wrapping from disposable items.	x		
	4. measure stoma and cut faceplate to size.	x		
	5. remove/apply ostomy belt and/or bags.	x		
	6. apply prescribed medication, solvent, cleaning agent, wetting agent, etc. to applicator.	x		
	7. apply dressing (see permissible activities related to changing dressings for stable surface wounds, pages 49-50).			
	8. empty bags.	x		

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Caring for an ostomy (cont.)				
- changing a colostomy or ileostomy appliance/dressing (cont.)	9. dispose of used equipment and waste materials.	x		
	10. clean reusable equipment.	x		
	11. store reusable equipment properly .	x		
	12. observe, record and report.	x		
- *irrigating a colostomy	1. assemble necessary equipment and supplies.	x		
	2. position patient.	x		
	3. prepare prescribed irrigation solution.	x		
	4. pour irrigation solution into irrigation reservoir.	x		

\*irrigating a colostomy can only be performed under the following circumstances:

- the ostomy is mature and stable;
- irrigation has been ongoing and a customary part of the patient's care;
- the patient can tolerate the irrigation on the toilet or commode; and
- the patient is fully able to direct the procedure.



PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Caring for an ostomy (cont.)				
- *irrigating a colostomy (cont.)	5. remove air from irrigation tubing.	x		
	6. attach tubing and irrigation reservoir and prescribed irrigation tip.		x	
	7. hang or hold irrigation reservoir at proper height.		x	
	8. insert/remove catheter and irrigate colon.	x		
	9. regulate flow of irrigation solution.		x	
	10. clean reusable equipment.		x	
	11. store reusable equipment and supplies properly.		x	
	12. observe, record and report.		x	

\*irrigating a colostomy can only be performed under the following circumstances:

- the ostomy is mature and stable;
- irrigation has been ongoing and a customary part of the patient's care;
- the patient can tolerate the irrigation on the toilet or commode; and
- the patient is fully able to direct the procedure.

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Caring for an ostomy (cont.)				
- caring for a tracheostomy when the ostomy is mature and stable.	1. apply dressing (see permissible activities related to changing dressings for stable surface wounds, pages 49-50).	x		
	2. insert/remove:			
	a. inner cannula;	x		
	b. outer cannula.			x
	3. clean inner cannula.	x		
	4. cleanse skin around stoma.	x		
	5. change neck straps/ties.	x		
	6. dispose of used equipment and waste materials.	x		
7. store reusable equipment and supplies properly.	x			
8. observe, record and report.	x			

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Caring for an ostomy (cont.)				
- caring for a gastrostomy when the ostomy is mature and stable.				
- changing dressing	1. apply dressing (see permissible activities related to changing dressings for stable surface wounds, pages 49-50).	x		
- assist with feedings	1. assemble necessary equipment.		x	
	2. position patient for feeding.		x	
	3. add pre-mixed and pre-measured formula to feeding bag.		x	
	4. connect feeding bag tube to gastrostomy catheter.		x	
	5. turn on pre-set feeding pump.		x	
	6. turn feeding pump off after formula is completed.		x	
	7. disconnect feeding bag from gastrostomy catheter.		x	
	8. add specific amount of water to gastrostomy catheter.		x	

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Caring for an ostomy (cont.)				
	9. cleanse skin around stable ostomy and apply dressing (see permissible activities related to changing dressings for stable surface wounds.		x	
	10. dispose of used equipment and supplies.		x	
	11. clean and store reusable equipment.		x	
	12. store formula properly.		x	
	13. reposition patient one hour after feeding.		x	
	14. observe, record and report.		x	
- changing a urinary diversion appliance or dressing when the ostomy is mature and stable.	1. assemble necessary equipment and supplies.		x	
	2. position patient.		x	
	3. remove wrappings from disposable items.		x	

PERMISSIBLE AND NON-PERMISSIBLE ACTIVITIES  
HOME HEALTH AIDE (HHA) SERVICES

Functions/Tasks	Activities	Permissible HHA	Permissible Under Special Circumstances HHA	Non- Permissible HHA
Caring for an ostomy (cont.)				
- ureterostomy - ileal conduit - others	4. remove/apply ostomy belt and/or bags.		x	
	5. apply prescribed medication, solvent, cleaning agent, wetting agent, etc. to applicator.		x	
- changing a urinary diversion appliance or dressing (cont.)	6. apply dressing (see permissible activities related to changing dressings for stable surface wounds, pages 49-50).		x	
-ureterostomy -ileal conduit -others (cont.)	7. empty bags.		x	
	8. dispose of used equipment and waste materials.		x	
	9. clean reusable equipment.		x	
	10. store reusable equipment and supplies properly.		x	
	11. observe, record and report.		x	