**TITLE OF POSITION: HOME HEALTH AIDE**

**TITLE OF IMMEDIATE SUPERVISOR: REGISTERED NURSE/CLINICAL MANAGER**

**RISK OF EXPOSURE TO BLOODBORNE PATHOGENS – HIGH**

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| Home Health Aide services may also be provided by a CNA, subject to the same supervision described below. If necessary, they may also be provided by an LPN or RN. | | |
| **DUTIES** | | |
| Provides personal care and related services in the home, under the direction, instruction and supervision of the staff nurse and the Nurse Supervisor. | | |
| Tasks to be performed by an HHA must be assigned by, and performed under, the supervision of an RN, who will be responsible for the patient care provided by the HHA. | | |
| Under no circumstances may an HHA be assigned to receive, or reduce, any intravenous procedures, or any other sterile or invasive procedures, other than rectal temperatures. | | |
| **RESPONSIBILITIES** | | |
| Follows the plan of care to provide, safe, competent care to the client. | | |
| Helps the patient maintain good personal hygiene and assists in maintaining a healthful, safe environment. | | |
| Plans and prepares nutritious meals, markets, when instructed to do so by the nurse. | | |
| Assists the patient with ambulation, as ordered by the physician, and approved and supervised by the nurse. | | |
| Assists the therapy personnel, as needed, with rehabilitative processes. | | |
| Encourages the patient to become as independent as possible, according to the nursing care plan. | | |
| Attempts to promote patient's mental alertness, through involvement in activities of interest. | | |
| Gives simple emotional, and psychological, support to the patient, and other members of the household, and establishes a relationship with patient and family, which transmit trust and confidentiality. | | |
| Reports any change in the patient's mental, or physical, condition, or in the home situation, to the staff nurse, or to the Aide supervisor. | | |
| Performs routine housekeeping tasks, as related to a safe and comfortable environment for the patient, as instructed by the professional nurse. | | |
| Prepares a visit report, promptly, and incorporates same in the clinical record, weekly. | | |
| Confirms, on a weekly basis, the scheduling of visits so that other necessary visits, by staff members, can be coordinated. | | |
| Works with personnel of other community agencies involved in the patient's care, as directed by the nurse. | | |
| Attends in-service, as required by regulation. | | |
| **JOB CONDITIONS** | | |
| The ability to drive and the ability to access clients’ homes, which may not be routinely wheelchair accessible, are required. | | |
| Hearing, eyesight, and physical dexterity must be sufficient to perform a physical assessment of the client's condition and to perform client care. | | |
| On occasion, may be required to bend, stoop, reach, and move client weight, up to 250 pounds; lift and/or carry up to 30 pounds. | | |
| Must be able to communicate clearly, both verbally and in writing, in English. | | |
| **EQUIPMENT OPERATION** | | |
| Use of BP cuff, thermometer, and stethoscope. Hand washing materials. | | |
| **COMPANY INFORMATION** | | |
| Has access to all client medical records, which may be discussed with the Registered Nurse and the Nurse Supervisor. | | |
| **QUALIFICATIONS** | | |
| 1. Preferably a high school diploma or equivalent. | | |
| 1. Successful completion of one of the following:   A minimum 75 hours training and competency evaluation program, as specified in 42 CFR 484.80(b) and (c); or  A competency evaluation program that meets the requirements of 42 CFR 484.80(c); or  A nurse aide training and competency evaluation program approved by the state of Florida as meeting the requirements of 42 CFR 483.151 through 42 CFR 483.154, and is currently listed in good standing on the Florida state nurse aide registry; or  The requirements of a Florida state licensure program that meets the provisions of 42 CFR 484.80 (b) and (c) | | |
| 1. Must be free from health problems that may be injurious to patient, self, and co-workers and must present appropriate evidence to substantiate this. | | |
| 1. Must comprehend the basics of personal care, housekeeping, and meal preparation. | | |
| 1. Must understand and respect client’s, including ethics and confidentiality of care. | | |
| 1. Must have current CPR certification. Online certification is not accepted. | | |
| 1. Must have criminal background check. | | |
| **ACKNOWLEDGMENT** | | |
| **EMPLOYEE NAME:** | |  |
| **EMPLOYEE SIGNATURE:** | **DATE** | |
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