

WUS

1/B

EASTER SEAL SOCIETY / HOMEMAKER PROJECT

HOMEMAKER DUTIES / RESPONSIBILITIES

The homemaker is responsible to the Regional Homemaker Supervisor.

The homemaker shall perform only those duties authorized by the Regional Homemaker Supervisor.

Homemaker duties may include the following when authorized by D.S.S.:

Housekeeping:

1. General household management to include teaching or skills such as cleanliness, budgeting, general housework.
2. Routine cleaning which may include dishwashing, sweeping, mopping, vacuuming, dusting, laundry, ironing, mending clothes and other light general housework, including inside window washing.
3. Nutritional instruction, meal preparation, menu planning, and marketing for food.
4. Mending clothing.
5. Home accident prevention.
6. Chop wood, haul water, haul snow for water, hunting, fishing, berry picking, and hauling fuel.
7. Accompany the client to physician, shopping, etc.

Personal Care of Client:

Assist with ambulation, transfer, bathing, grooming, dressing and hygiene.

Modeling and Instruction for Child Protective Service Client:

1. Serve as role model.
2. Have understanding of child's: physical needs, emotional needs, discipline vs. punishment, intellectual needs.
3. Have understanding of parents' needs.

Child Care:

1. Do child care and/or teach child care.

Emotional Support:

1. Conversing, stimulate interest, enhance feelings of value, reading, writing letters, recreation, social interaction, short walks.

Homemaker duties SHALL NOT include the following:

1. Heavy cleaning - ie: Scrubbing walls, shampooing carpets, washing drapes or outside windows.
2. Transporting the client. The homemaker MAY NOT do this at any time as part of the service.

The homemaker shall provide only those services authorized by the Regional Supervisor.

The homemaker will be paid ONLY for those authorized hours worked.

The homemaker shall make and keep a client schedule. This schedule will be given to the Regional Homemaker Supervisor at least monthly, to enable the Supervisor to know where, when and how to contact the homemaker. The homemaker will keep the schedule in a safe place to keep confidentiality.

The homemaker must notify the Regional Homemaker Supervisor, at least 2 hours ahead, preferably 24 hours ahead, of any schedule changes or problems. If the homemaker is unable to keep the scheduled appointment with the client, the homemaker must notify the client and make other arrangements. If the client still needs service the homemaker must notify the Regional Homemaker Supervisor to allow the Supervisor to provide another homemaker for the client.

Failure to keep the schedule for the client, failure to show up for the client or failure to do the tasks assigned for the client are all grounds for termination of the homemaker. First offense will result in probation. Second offense will result in termination. Drinking on the job or showing up drunk at the client's house is grounds for immediate termination.

The homemaker is expected to attend any inservice programs provided. Attendance is recorded in the homemaker's evaluation reports.

Confidentiality: The homemaker SHALL keep full confidentiality on all clients.

The homemaker SHALL NOT discuss client or client's affairs with anyone except the Regional Homemaker Supervisor.

POSITION PAPER
ON
SENATE BILL NO. 313

APR 22 1981

"An Act making a special appropriation to the Department of Health and Social Services, division of adult and aging services, for homemaker-home health aide services; and providing for an effective date."

This bill would increase the Division of Adult and Aging Services appropriation for homemaker-home health aide services by \$892,300. Any unexpended and unobligated portion of the appropriation would lapse into the general fund June 30, 1982.

The Division of Adult and Aging Services will be soliciting proposals for the statewide provision of combined homemaker-home health aide services for Fiscal Year 1982. The additional funds would provide for both the administrative costs for subcontractors providing services on a regional/local basis and for an increase in funds available for service provision.

The Department of Health and Social Services supports efforts whereby the provision of homemaker-home health aide services can be improved and expanded to meet client needs.

Recommended by: Elizabeth Muktarian
Elizabeth Muktarian
Director
Div. of Adult and
Aging Services

Date: 4/2/81

Approved by: Helen D. Beirne
Helen D. Beirne
Commissioner
Dept. of Health and
Social Services

Date: 4/16/81

P.
THE LEGISLATURE OF THE STATE OF ALASKA
TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Senate Bill No. 313
 Title "An Act making a special appropriation to the Dept. of Health & Social Services, Div. of Adult & Aging Services, for homemaker-home health aide services; & providing for an effective date."
 Requested by of Adult & Aging Services, for homemaker-home Date April 2, 1981

II. FISCAL DETAIL

Agency Affected Department of Health and Social Services
 Program Category Affected Social and Economic Assistance for the General Population
 BRU, Program, or Subprogram(s) Affected Division of Adult & Aging Services - Adult Services
 (Note: If more than one budget component is affected, separate line-item amounts and funding for each component in the analysis section.)

EXPENDITURES (Thousands of Dollars)

	FY 81	FY 82	FY 83	FY 84	FY 85	FY 86
100 PERSONAL SERVICES						
200 TRAVEL						
300 CONTRACTUAL						
400 COMMODITIES						
500 EQUIPMENT						
600 LAND & STRUCTURES						
700 GRANTS. CLAIMS. ETC.						

TOTAL -0-

FUNDING (Thousands of Dollars)

GENERAL FUND		-0-				
FEDERAL FUNDS						
OTHER (Specify Fund Source)						

POSITIONS

FULL TIME						
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

Zero Impact.

IV. DATE 4/2/81 PREPARED BY Dorothy Walt
 AGENCY Division of Adult and Aging Services
 PHONE 465-3250
 Original: Legislative Finance
 cc: Budget and Management
 Prime Sponsor (First Legislator Named) M&B Approval H. Hubbard Date 4/6/81

HOME HEALTH NURSING SERVICE



ALASKA DEPARTMENT OF HEALTH AND SOCIAL SERVICES
DIVISION OF PUBLIC HEALTH
SECTION OF NURSING

HOME HEALTH NURSING SERVICE



Above Elizabeth Ettress. Cover Carl Samber.

Home Health nursing service provides part time skilled nursing care and other treatment services to individuals and families in their place of residence. The services are for persons suffering from diseases and disabilities of all kinds.

The goal is to assist the patient and family to make the best possible adjustment to acute or chronic illness, or permanent disability in their home environment.

There is no charge for these nursing services, however, medical supplies and equipment are the responsibility of the patient or family.

The Public Health Nurse, who is a graduate registered nurse gives skilled nursing and therapeutic care as prescribed by the physician. The Public Health Nurse sets up the plan of care and coordinates all needed health services with professional and allied health workers. If skilled nursing care is not needed, a referral will be made to the local Homemaker Health Easter Seal Agency.

Requests for a home health nurse and services are accepted from any source and can be made to the Juneau, Ketchikan or Fairbanks Health Centers. When requests are received, the patient's physician will be contacted to obtain necessary medical orders. If the individual or family does not have a local physician the Public Health Nurse will make a visit and assist the patient and family in securing a physician.

WHO TO CALL

Home Health Care Program
Suite 202, Sportsman's Mall
1512 Cushman Street
Fairbanks, 99701
452-6406

or the Fairbanks Health Center
452-1776

Juneau Health Center
227 Ferry Way
Juneau, 99801
586-3736

Ketchikan Health Center
628 Park Avenue
Ketchikan, 99901
225-4350

ALASKA DEPARTMENT OF HEALTH AND SOCIAL SERVICES
DIVISION OF PUBLIC HEALTH
SECTION OF NURSING

DO YOU KNOW:

- A person ready for discharge from the hospital who needs someone at home to continue his personal care,
- An elderly person who wants to remain at home, but needs help to stay there,
- A person who has had a heart attack, and needs help with household tasks,
- A person who is blind, or suffers from chronic disease such as Multiple Sclerosis, and needs help in order to live at home,
- A family of children who will be placed in a foster home unless they can be cared for in their own home,
- A mother who needs and wants to be shown how to care for children, prepare food, and keep the house in order,
- A mentally retarded adult who needs help in learning skills to live on his/her own?

THERE IS A BASIC STATEWIDE SERVICE TO MEET THESE NEEDS

HOMEMAKER/HOME HEALTH AIDE SERVICE:

- "In Home" service under the auspices of the Easter Seal Society.
- Qualified men and women are selected, trained, and supervised by professional persons.
- Division of Social Services Workers determine and authorize the service and the Easter Seal Society Homemaker Home Health Program selects and supervises the worker best suited to the needs of the client.
- Homemakers/Home Health Aides are paid employees, not volunteers.
- Service is available anywhere in the state of Alaska.



THE HOMEMAKER/HOME HEALTH AIDE:

- Is a paid member of a professional team.
- Performs household tasks such as cleaning, preparing meals, shopping, and personal care when needed and authorized.
- May, under direction, prepare special diets.
- Teaches through practical demonstrations: how to care for children, prepare nutritious meals on a limited income, and organize a household.
- Provides emotional support, understanding, and companionship in times of stress or need.
- Is a mature, responsible person.
- Reports directly to his/her Regional Homemaker Supervisor.

**THE EASTER SEAL SOCIETY
OF ALASKA
HOMEMAKER/HOME HEALTH AIDE
PROGRAM**

WHERE TO GO:

• Contact the nearest State Division of Social Services Office to see if the need can be met within their requirements.



PRIVATE CLIENTS:

• Contact the nearest Easter Seal Society Regional Homemaker/Home Health Aide Program Office.

REGIONAL OFFICES:

Western Regional Office:

P.O. Box 25
Bethel, AK 99559
543-2144

South Central Regional Office:

P.O. Box 2432
Anchorage, AK 99510
277-2451

Northern Regional Office:

528 5th Avenue, #211
Fairbanks, AK 99701
452-6208

Northwestern Regional Office:

P.O. Box 149
Nome, AK 99762
443-2772

Southeastern Regional Office

P.O. Box 1607
Juneau, AK 99802
586-6265

Southern Regional Office:

P.O. Box 3147
Ketchikan, AK 99901
225-5810

Central Office:

P.O. Box 2432
Anchorage, AK 99510
277-2451



**HOMEMAKER
HOME
HEALTH AIDE
PROGRAM**

SB313

IN-HOME CARE

HOMEMAKER

DEFINITION: Homemaker support is available to assist adults who are at risk and who are capable of independent living with homemaker assistance on a limited basis to maintain a level of care that will promote physical and emotional well-being and allow the adult to safely remain in his home. Homemaker tasks include assistance in home management, household chores, meal planning, purchasing and preparation, and non-health related personal care tasks.

FUNDING: Homemaker support is provided to Adult Protective Services clients without regard to income through a contract with the Easter Seal Society on an individual client basis depending on availability of units of service. Homemaker support may also be purchased directly from a provider by an individual.

AVAILABILITY: Statewide

HOME HEALTH AIDE

DEFINITION: Home Health Aide Support is available to adults who are at risk and who are in need of health related personal care services to remain in their own homes. It is provided to Adult Protective Service clients whose overall medical plan indicates that this service is appropriate to meet the adult's health care needs. Home health aide tasks include personal care, toileting, transfers, exercise, and other duties. The home health aides are supervised by licensed registered nurses.

FUNDING: Home Health Aide Support is provided to Adult Protective Service clients without regard to income through a contract with Easter Seal Society. Home health aide support may also be purchased directly from a provider by an individual.

AVAILABILITY: Anchorage, Fairbanks, Juneau, Bethel, Nome, and Ketchikan. In 1981, services will be expanded to include other communities, depending upon the availability of nursing supervision of home health aides. It is also available in Anchorage as a part of the Anchorage Municipality's Home Health program.

HOME HEALTH - *Nursing*

DEFINITION: Home Health care is the provision of part-time skilled nursing care and other therapeutic services to individuals and families in their place of residence. The services are applicable to persons suffering from diseases and disabilities of all kinds. They apply to the acutely ill, convalescent and chronic long-term illnesses. Home care may be used instead of institutional care or may be an intermediate step to enable the person to move from hospital dependency to relative independence in their place of residence. The service may be designed to assist a person to achieve optional adjustment to chronic illness or permanent disability.

FUNDING AND AVAILABILITY: The service is provided by Division of Public Health staff in Fairbanks, Juneau, and Ketchikan without regard to income. In Anchorage home health care is available through the Anchorage Municipality's Home Health Program and payment is made under Medicaid, private pay and health insurance.

JOB DESCRIPTION - HOME HEALTH AIDE

The home health aide works under the direction of the Regional Nursing supervisor. She/he also maintains a client log of observations which are submitted to the nursing supervisor biweekly and to the social worker on a monthly basis, or more often if necessary.

Specifically, the home health aide duties may include the following when authorized by D.S.S. All duties performed must have been taught by and supervised by appropriate professional personnel.

1. PERSONAL CARE—assist with bathing ambulatory clients, including sitz bath, alcohol bath, and tepid baths. Giving bed baths to bed bound clients. Shampooing hair, skin care, mouth care, denture care, nail care as directed by the nursing supervisor(not toenails.) Assist the client with the application of heat or cold for comfort, eg hot water bottle, heat lamp etc. Assist with application of prosthetic devices, and ostomy care.
2. TOILETING—assist the client with bedpan, urinal, commode or the bathroom, check urine of diabetic for sugar and/or acetone. Do catheter care, and give enemas.
3. TRANSFER— assist the client in and out of bed or chair, including the wheelchair, and in walking, with support of walker, cane or crutch.
4. EXERCISE—assist the client with active and passive range of motion, help on to exercise, assist the non-ambulatory client with proper positioning in bed or chair. Assist and/or encourage the client to eat, blending/pureeing foods as needed. Assist the client with self-administration of prescribed medications. Assist the client with care of a non-sterile dressing or application of an Ace bandage, support hose, TED or other therapeutic stockings. Assist the client and/or family to measure fluid intake and output when necessary. Take oral/rectal temperature, pulse(carotoid femoral, radial) blood pressure(palpate) and respiration. Do throat and mouth inspection. Record all client care services in accordance with established agency record procedures. Assist family in making home environment safe. Assist client or family to establish a plan for emergencies, telephone numbers of fire and police department, doctor, hospital, ambulance, home health aide supervisor, and other emergency personnel. Perform other duties as required or assigned after being instructed by the nursing supervisor. Administer basic first aid. Attend all scheduled meetings with the PHN and supervisor.

NOTE: UNDER NO CIRCUMSTANCES should the home health aide render home health care without the written instructions being recorded on the client Care Record by the Nursing Supervisor based on the physicians orders.

LIMITATIONS OF THE HOME HEALTH AIDE:

1. May not administer any hypodermic or any other internal medication; may not administer dressings requiring sterile technique, but is required to know the purpose and fundamentals of aseptic technique; will not remain in the home when communicable disease is diagnosed which would be potentially detrimental to her health or that of other consumers whom she is serving; will do only those personal health care tasks that have been assigned in writing by the Nursing Supervisor; may not lend or borrow money from clients; may not expend their own funds to purchase items for clients; may not purchase alcohol or other intoxicating drugs for clients; may not partake of any alcoholic or any other intoxicating drugs while in the home of the client or any time while on duty; may not take their children with them to a client's home; communicable illness requires a physicians certificate to return to work.

REQUIREMENTS FOR HIRE:

1. Completion of required 35 hour Home Health Training Program plus, certification as a Homemaker prior to certification as Home Health Aide.
2. Good physical health, TB clearance required before seeing first client.
3. Following personal qualities:
 - a. maintains confidentiality
 - b. tolerance for people's differences
 - c. genuine concern for people
 - d. emotionally mature
 - e. willingness to give of oneself
 - f. flexibility
 - g. ability to communicate well
 - h. ability to accept supervision & constructive criticism

MISCELLANEOUS POINTS OF INFORMATION

Home Health Aides are payed only for authorized hours; are expected to attend all inservice programs, attendance is recorded in the evaluation report of their personnel file; must notify Supervisor at least two(2) hours ahead if unable to take assigned client(s). Insurance coverage available to those meeting the personnel policy requirements.

ALL EMPLOYEES ARE REQUIRED TO GIVE TWO(2) WEEKS NOTICE OF TERMINATION!

THE EASTER SEAL SOCIETY FOR ALASKA CRIPPLED CHILDREN AND ADULTS

EASTER SEAL SOCIETY
HOMEMAKER PROGRAM
1345 W. 9TH AVE. NO. 203
ANCHORAGE, ALASKA 99510



STATE SOCIETY OFFICE
P.O. BOX 2432 99510
1345 W. 9TH AVE., NO. 203
ANCHORAGE, ALASKA
99510

February 27, 1981

Jim Kelly Administrative Assistant
Senator Pat Rodey's Office
Pouch V
Juneau, Ak. 99811

Dear Jim,

As you requested I have done work on the increased costs, etc. for putting the Homemaker/Home Health Aide contract out on a "regional" basis. In the work I have done it becomes obvious that in order to deliver the current level of service with only 6 regional contracts the legislature would have to appropriate a further \$400,000. It will cost an extra 60,000 - 80,000 per region to regionalize. Also it would cost another \$150,000 for quality control and training.

As we discussed some of the main concerns I have for the program are the following:

1. Continuity of service to the clients.
2. Continuity of employment and salaries for the employees.
3. Continued standardization/continuity of program and fiscal accountability, and of training.
4. Planned increase of service for clients. Approximately 20% increase needed in Homemaker
5. Combining of contracts into one, and billing of same amount for either service.

I do have a suggestion as to the concept of regionalization and/or local control. That is that local sub-contracts be sought. That would allow for the quality control. In talking to interested persons from Kodiak I was made aware that they in fact want a sub-contract, not to bid on a regional basis.

Below please find some further information on the program.

1. Training- As of January 31, 1981
 - A. Homemaker: 252 Homemaker-103 trained (47%)
Training is on going in all regions.
 - B. Home Health Aide: 32 Health Aides all trained (condition of employment.)

THE EASTER SEAL SOCIETY FOR ALASKA CRIPPLED CHILDREN AND ADULTS

EASTER SEAL SOCIETY
HOMEMAKER PROGRAM
1345 W. 9TH AVE., NO. 203
19-71 277-2451



STATE SOCIETY OFFICE
P.O. BOX 2432 99510
1345 W. 9TH AVE., NO. 203
ANCHORAGE, ALASKA
(907) 277-2451

C. Supervisory training to be held April, May
and June for all supervisors in conjunction
with the National Home Caring Council.

If you need more information please contact me. Thank-
you for your time and interest.

Sincerely,

Nancy Farrington

Nancy Farrington

cc: Commissioner Beirne
John Pugh
Liz Muktarian
Nola Aalberts
files

EASTER SEAL SOCIETY
HOMEMAKER PROGRAM
1345 W. 9TH AVE., NO. 203
ANCHORAGE, ALASKA 99510
(907) 277-2451



STATE SOCIETY OFFICE
P.O. BOX 2432 99510
1345 W. 9TH AVE. NO. 203
ANCHORAGE, ALASKA
19071 277-2451

March 10, 1981

RECEIVED

MAR 15 1981

Rose Palmquist, President
Board of Directors
Older Persons Action Group
325 E 3rd
Anchorage, AK 99501

Dear Rose;

At this time I would like to acquaint with some statistics/information that I gathered at the request of Jim Kelly, Administrative Assistant to Senator Pat Rodey. Attached is a copy of my letter to him outlining those items of interest and concern. The information is in regards to the massive increase in administrative overhead costs to separate out into separate contracts the Homemaker/Home Health Aide Program. Currently the program does action both on regional and local basis. Our Central office functions as a coordination, and quality assurance system for program, training, and fiscal responsibility. This provides for low overhead costs, and for continuity throughout the state in service. Having many contractors for the one service will not only increase immensely the overhead cost ratios, but in all probability necessitate an increase in the Division's Central office staff to deal with all the contracts. Alaska does have a lot of money, but why use it to increase overhead and administration, when it could be used to provide direct service to those who are in need? Separation of contracts would also mean duplication of administration for the services.

I strongly urge that rather than multiple small, expensive contracts, that the system remain the same with local or regional contracts be encouraged, even urged where an agency or health program wishes to do so. That would allow for quality control and good service.

I would be most happy to meet with you at any time to discuss the situation. I know you are a concerned person, as I am. I am looking forward to meeting with you.

Sincerely,

Nancy Farrington RN
Program Director

cc: Pat Rodey
Jim Kelly
Helen Bierne

EASTER SEAL SOCIETY
HOMEMAKER PROGRAM
1345 W. 9TH AVE. NO 203
19071 277 2451



STATE SOCIETY OFFICE
P.O. BOX 2432 99510
1345 W. 9TH AVE. NO 203
ANCHORAGE, ALASKA
19071 277 2451

March 17, 1981

Helen D. Bierne, Commissioner
Department of Health and Social Services
Pouch H-05
Juneau, AK 99811

Dear Helen;

At this time I am writing to you regarding the future of the Homemaker/Home Health Aide program. As you have gathered from copies of my letter to Jim Kelly and to Rose Palmquist I have strong concerns about abruptly "regionalizing" the contract into many small contracts. Currently the Home Health Aide program is all of five (5) months old, and still in the very early stages of development. Also, as was stated to John Pugh and Jim Kelly by Nola Aalberts, Program Director for the National Home Caring Council, an accredited or approved program takes at least three (3) years to happen under the same administration. For these reasons may I make the following recommendations:

1. That the contract be let on a statewide basis with sub-contracts let to those communities or agencies who either want or can handle the program. This would assure continued quality control, and service to those areas where local or regional management is not feasible.
2. That the contract be let for 2 to 3 years to allow for planning and upgrading of the service, continuity and training.
3. That statewide bidders be required in the proposal show a step by step plan to include dates, of turning over the the program to such subcontractors as are interested and qualified. This plan would cover the full term of the 2 to 3 year contract.
4. That coordinated efforts be made to merge the current system of homemaker/home health aides with the pilot projects of home health in the section of nursing, perhaps sub-contract both of them to the same contractor.
5. That a single contract be let for both homemaker and home health aide to allow for reduced administrative overhead and duplication. Internal controls would keep the Title XX funds separate from any health related tasks. It would also allow for a single training and billing system for a homemaker/home health aide unit.

Both the Easter Seal Society of Alaska Board of Directors and I understand your commitment to "Regionalization", but feel the above suggestions would benefit the local control, and the clients in a better way than many separate contracts.

An affiliate of the National Easter Seal Society for Crippled Children and Adults.

Helen Bierne - 2

At this time I do want to assure both you and your staff on both my behalf and on the behalf of the State Board, that whatever way the program does go we will continue to work to insure that the best possible program and service delivery reaches the clients.

Thank you for your time and interest.

Sincerely,

Nancy Farrington RN
Program Director

cc: John Pugh
Liz Muktarian
Jim Kelly
Senator Pat Rodey
Senior Citizen Ombudsman
Theda Comstock
Brent Wadsworth, Board President
Nola Aalberts

POSITION PAPER
ON
SENATE BILL NO. 313

"An Act making a special appropriation to the Department of Health and Social Services, division of adult and aging services, for homemaker-home health aide services; and providing for an effective date."

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The Division of Adult and Aging Services will be soliciting proposals for the statewide provision of combined homemaker-home health aide services for Fiscal Year 1982. The additional funds would provide for both the administrative costs for subcontractors providing services on a regional/local basis and for an increase in funds available for service provision.

The Department of Health and Social Services supports efforts whereby the provision of homemaker-home health aide services can be improved and expanded to meet client needs.

Recommended by: Elizabeth Muktarian
Elizabeth Muktarian
Director
Div. of Adult and
Aging Services

Date: 4/2/81

Approved by: Helen D. Beirne
Helen D. Beirne
Commissioner
Dept. of Health and
Social Services

Date: 4/16/81

THE LEGISLATURE OF THE STATE OF ALASKA
TWELFTH LEGISLATURE

FISCAL NOTE

I. REQUEST

Bill/Resolution No. Senate Bill No. 313
 Title "An Act making a special appropriation to the Dept. of Health & Social Services, Div. of Adult & Aging Services, for homemaker-home health aide services; & providing for an effective date."
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700 GRANTS, CLAIMS, ETC.						
TOTAL		-0-				

FUNDING (Thousands of Dollars)

GENERAL FUND		-0-				
FEDERAL FUNDS						
OTHER (Specify Fund Source)						

POSITIONS

FULL TIME						
PART TIME						
TEMPORARY						

III. ANALYSIS (See Fiscal Note Preparation Instructions, Section III)

Zero Impact.

IV. DATE

4/2/81

PREPARED BY Dorothy Wall

AGENCY Division of Adult and Aging Services

PHONE: 465-3250

Original: Legislative Finance
 cc: Budget and Management

Prime Sponsor (First Legislator Named) M. Hubbard M&B Approval M. Hubbard Date 4/6/81

Funding Information
General Fund \$892,300
Other Funds -0-
\$892,300

Introduced: 3/20/81
Referred: Health, Education &
Social Services and Finance

1 IN THE SENATE

BY RODEY AND KERITULA

2 SENATE BILL NO. 313

3 IN THE LEGISLATURE OF THE STATE OF ALASKA

4 TWELFTH LEGISLATURE - FIRST SESSION

5 A BILL

6 For an Act entitled: "An Act making a special appropriation to the Depart-
7 ment of Health and Social Services, division of adult
8 and aging services, for homemaker-home health aide
9 services; and providing for an effective date."

10 BE IT ENACTED BY THE LEGISLATURE OF THE STATE OF ALASKA:

11 * Section 1. The sum of \$892,300 is appropriated from the general fund
12 to the Department of Health and Social Services, division of adult and aging
13 services, for homemaker and home health aide services.

14 * Sec. 2. The unexpended and unobligated portion of the appropriation
15 made by this Act lapses into the general fund June 30, 1982.

16 * Sec. 3. This Act takes effect immediately in accordance with AS 01.10.-
17 070(c).

18
19
20
21
22 Homemakers - 6-6265

why this request?
1) expand service
2) allow for sub-
contracting

EASTER SEAL SOCIETY / HOMEMAKER PROJECT

HOMEMAKER DUTIES / RESPONSIBILITIES

The homemaker is responsible to the Regional Homemaker Supervisor.

The homemaker shall perform only those duties authorized by the Regional Homemaker Supervisor.

Homemaker duties may include the following when authorized by D.S.S.:

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1. General household management to include teaching or skills such as cleanliness, budgeting, general housework.
2. Routine cleaning which may include dishwashing, sweeping, mopping, vacuuming, dusting, laundry, ironing, mending clothes and other light general housework, including inside window washing.
3. Nutritional instruction, meal preparation, menu planning, and marketing for food.
4. Mending clothing.
5. Home accident prevention.
6. Chop wood, haul water, haul snow for water, hunting, fishing, berry picking, and hauling fuel.
7. Accompany the client to physician, shopping, etc.

Personal Care of Client:

Assist with ambulation, transfer, bathing, grooming, dressing and hygiene.

Modeling and Instruction for Child Protective Service Client:

1. Serve as role model.
2. Have understanding of child's physical needs, emotional needs, discipline vs. punishment, intellectual needs.
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Emotional Support:

1. Conversing, stimulate interest, enhance feelings of value, reading, writing letters, recreation, social interaction, short walks.

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1. Heavy cleaning - ie: Scrubbing walls, shampooing carpets, washing drapes or outside windows.

2. Transporting the client. The homemaker MAY NOT do this at any time as part of the service.

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The homemaker will be paid ONLY for those authorized hours worked.

The homemaker shall make and keep a client schedule. This schedule will be given to the Regional Homemaker Supervisor at least monthly, to enable the Supervisor to know where, when and how to contact the homemaker. The homemaker will keep the schedule in a safe place to keep confidentiality.

The homemaker must notify the Regional Homemaker Supervisor, at least 2 hours ahead, preferably 24 hours ahead, of any schedule changes or problems. If the homemaker is unable to keep the scheduled appointment with the client, the homemaker must notify the client and make other arrangements. If the client still needs service the homemaker must notify the Regional Homemaker Supervisor to allow the Supervisor to provide another homemaker for the client.

Failure to keep the schedule for the client, failure to show up for the client or failure to do the tasks assigned for the client are all grounds for termination of the homemaker. First offense will result in probation. Second offense will result in termination. Drinking on the job or showing up drunk at the client's house is grounds for immediate termination.

The homemaker is expected to attend any inservice programs provided. Attendance is recorded in the homemaker's evaluation reports.

Confidentiality: The homemaker SHALL keep full confidentiality on all clients.

The homemaker SHALL NOT discuss client or client's affairs with anyone except the Regional Homemaker Supervisor.

JOB DESCRIPTION - HOME HEALTH AIDE

The home health aide works under the direction of the Regional Nursing supervisor. She/he also maintains a client log of observations which are submitted to the nursing supervisor biweekly and to the social worker on a monthly basis, or more often if necessary.

Specifically, the home health aide duties may include the following when authorized by D.S.S. All duties performed must have been taught by and supervised by appropriate professional personnel.

1. PERSONAL CARE-assist with bathing ambulatory clients, including sitz bath, alcohol bath, and tepid baths. Giving bed baths to bed bound clients. Shampooing hair, skin care, mouth care, denture care, nail care as directed by the nursing supervisor(not toenails.) Assist the client with the application of heat or cold for comfort, eg hot water bottle, heat lamp etc. Assist with application of prosthetic devices, and ostomy care.
2. TOILETING-assist the client with bedpan, urinal, commode or the bathroom, check urine of diabetic for sugar and/or acetone. Do catheter care, and give enemas.
3. TRANSFER- assist the client in and out of bed or chair, including the wheelchair, and in walking, with support of walker, cane or crutch.
4. EXERCISE-assist the client with active and passive range of motion, help on to exercise, assist the non-ambulatory client with proper positioning in bed or chair. Assist and/or encourage the client to eat, blending/pureeing foods as needed. Assist the client with self-administration of prescribed medications. Assist the client with care of a non-sterile dressing or application of an Ace bandage, support hose, TED or other therapeutic stockings. Assist the client and/or family to measure fluid intake and output when necessary. Take oral/rectal temperature, pulse(carotoid femoral, radial) blood pressure(palpate) and respiration. Do throat and mouth inspection. Record all client care services in accordance with established agency record procedures. Assist family in making home environment safe. Assist client or family to establish a plan for emergencies, telephone numbers of fire and police department, doctor, hospital, ambulance, home health aide supervisor, and other emergency personnel. Perform other duties as required or assigned after being instructed by the nursing supervisor. Administer basic first aid. Attend all scheduled meetings with the PHN and supervisor.

NOTE: UNDER NO CIRCUMSTANCES should the home health aide render home health care without the written instructions being recorded on the client Care Record by the Nursing Supervisor based on the physicians orders.

LIMITATIONS OF THE HOME HEALTH AIDE:

1. May not administer any hypodermic or any other internal medication; may not administer dressings requiring sterile technique, but is required to know the purpose and fundamentals of aseptic technique; will not remain in the home when communicable disease is diagnosed which would be potentially detrimental to her health or that of other consumers whom she is serving; will do only those personal health care tasks that have been assigned in writing by the Nursing Supervisor; may not lend or borrow money from clients; may not expend their own funds to purchase items for clients; may not purchase alcohol or other intoxicating drugs for clients; may not partake of any alcoholic or any other intoxicating drugs while in the home of the client or any time while on duty; may not take their children with them to a client's home; communicable illness requires a physicians certificate to return to work.

REQUIREMENTS FOR HIRE:

1. Completion of required 35 hour Home Health Training Program plus, certification as a Homemaker prior to certification as Home Health Aide.
2. Good physical health, TB clearance required before seeing first client.
3. Following personal qualities:
 - a. maintains confidentiality
 - b. tolerance for people's differences
 - c. genuine concern for people
 - d. emotionally mature
 - e. willingness to give of oneself
 - f. flexibility
 - g. ability to communicate well
 - h. ability to accept supervision & constructive criticism

MISCELLANEOUS POINTS OF INFORMATION

Home Health Aides are payed only for authorized hours; are expected to attend all inservice programs, attendance is recorded in the evaluation report of their personel file; must notify Supervisor at least two(2) hours ahead if unable to take assigned client(s). Insurance coverage available to those meeting the personnel policy requirements.

ALL EMPLOYEES ARE REQUIRED TO GIVE TWO(2) WEEKS NOTICE OF TERMINATION!

