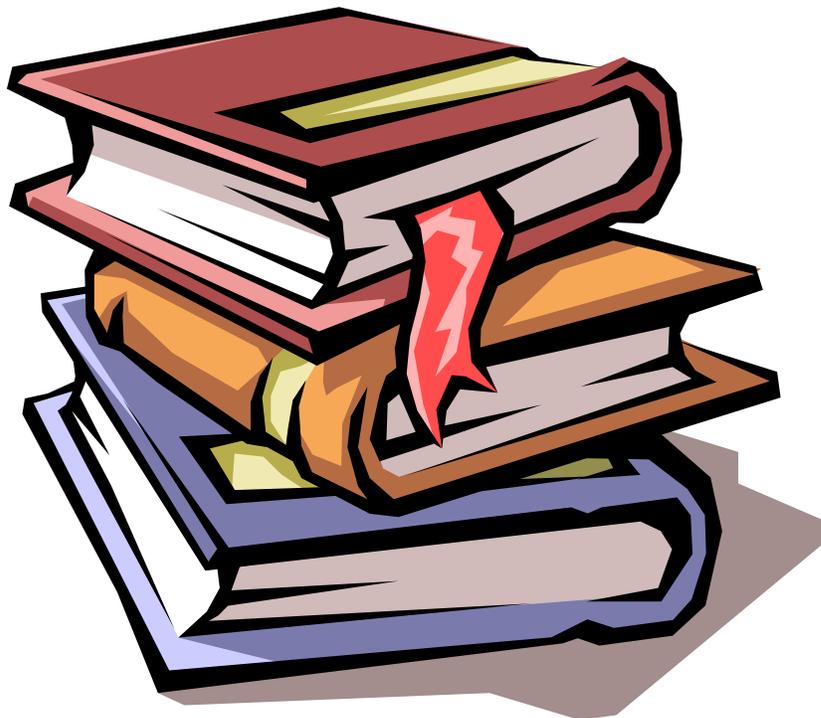


COMMONWEALTH OF PENNSYLVANIA
Pennsylvania Department of Aging

**DOMICILIARY CARE 101
BASIC TRAINING AND PROGRAM GUIDE**



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DOMICILIARY CARE 101

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CHAPTER 1 BACKGROUND OF THE DOMICILIARY CARE PROGRAM

Pennsylvania Code, Title 6, Chapter 21 (the little green book) established the standards for Domiciliary Care Service administered by the Area Agencies on Aging (AAA).

Act 70 of June 1978, which established the Pennsylvania Department of Aging, also required the Department to administer and supervise a Domiciliary Care program for aged and disabled adults. The program started slowly but officially expanded statewide with the release of Aging Program Directive 85-25-02.

The Domiciliary Care program is the result of cooperative planning between the Department of Aging, and the program Offices of Mental Health, Mental Retardation, and Income Maintenance within the Department of Public Welfare. This interdisciplinary approach avoided duplication of effort and allowed persons to be served on the basis of need rather than disciplinary group.

Domiciliary Care units within each Area Agency on Aging are generally responsible for recruiting prospective Dom Care home providers, inspecting homes for certification, assessing potential Dom Care consumers, assisting potential SSI consumers in obtaining the SSI State Supplement, and notifying the County Assistance Office to initiate or terminate the State Supplement. In addition, this AAA unit assures the appropriateness of placement, the continuing need for the provision of care, and the provision of community services for Dom Care residents.

The Domiciliary Care program has the following service goals:

1. To provide supportive, homelike, community-based living arrangements for adults who cannot live independently in the community.
2. To encourage and assist clients in developing and maintaining maximum initiative and self-determination in a homelike setting.
3. To provide an alternative to institutionalization, and to help adults remain in the community or to return to the community and, if possible to their own homes.

The goal of this training document is to provide basic information on most aspects of the Domiciliary Care program for both the AAA Dom Care program worker and any person interested in learning more about the program. Much of the material contained herein comes directly from the Domiciliary Care regulations in Chapter 21 of the PA Code. These regulations should be the starting point for researching any issue regarding the Dom Care program.

CHAPTER 2 PROVIDER ACTIVITIES

Per Dom Care regulation 21.26, to be eligible to act as a Dom Care home provider, a prospective provider shall meet the following initial criteria, as determined by the AAA:

1. Be a resident of Pennsylvania and 21 years of age or older.
2. Reside in the Dom Care home, or the prospective Dom Care home.
3. Demonstrate to the AAA, through the application and interview process, that the provider has never been convicted of a crime involving assaultive behavior or moral turpitude and has the experience and capacity to accept persons with physical, mental, or age related difficulties, has the willingness and ability to work with the AAA and consumers, and has the physical health and stamina to be a provider.

There are additional criteria listed in the regulations. Please note that there are no minimum education requirements to be a provider.

A domiciliary care home shall operate in accordance with applicable provisions of Chapter 21 to assure a safe, supportive, homelike setting for consumers.

Home Standards (21.27)

Home certification standards are addressed in section 21.27 of the regulations. To be certified and to retain certification as a Dom Care home, the home must meet the following basic standards, the remainders of which are in the regulations:

1. The home shall be a fixed, individual, private, non-commercial household or family dwelling.
2. The home shall be the residence of the provider and may not have residing within it a person who is an employee of an AAA. *(Example: A real estate management company wants to open a series of Dom Care homes. They cannot do this, as the provider must be an individual living in their own home.)*
3. The building in which the home is to be located shall meet applicable Federal, State, and local statutes and regulations pertaining to zoning, health and safety. *(Find out from your local municipalities what ordinances may affect Dom Care homes. Also find out if any fees are involved.)*
4. If the home uses water from a private source, such as a well or cistern, the source must be tested to ensure it is not polluted or contaminated. The water must be approved as meeting Commonwealth water quality standards.
5. The home shall have been inspected and approved by the local fire department or other qualified agency or individual for fire safety, and it shall meet the requirements of 21.79 (relating to fire and safety activities).

6. The home shall have a minimum of one operational smoke detector on each occupied floor, plus one in the basement area.
7. The home shall have space that would be available for storage of the consumer's personal property, such as trunks, suitcases, and seasonal clothing.
8. The home shall have a living room or recreational area with adequate space that would be available to consumers. These areas shall be large enough to comfortably accommodate all residents at the same time.
9. The home shall have bedrooms which meet the following standards:
 - a. Bedrooms to be used by consumers shall be located on floor levels not more than one story above an exit.
 - b. Bedrooms to be used by consumers shall be limited to either single or double occupancy and shall have space that is adequate for a safe and comfortable living environment.
 - c. Bedrooms to be used by consumers shall have adequate ventilation and a least one window with direct outside exposure to provide unobstructed natural light.
 - d. Windows in bedrooms to be used by consumers shall have adequate covering to ensure privacy of clients.
10. *There are many other home standards to be met per 21.27.*

Provider Application Process (21.28)

The regulations covering the Dom Care provider application process are found in Chapter 21.28. Many AAAs have developed checklists to verify that all necessary requirements are met. Some, but not all of the key points that must be verified by the provider are:

1. The provider application process should be done concurrently with the home certification process by AAA staff. The interview should take place in the prospective provider's home.
2. Prospective providers should receive a copy of the Dom Care regulations. The regulations are on the Department of Aging website for downloading.
3. The provider must provide all requested information that pertains to the Dom Care program. *If someone wishes to become a home, then it is reasonable to assume that they cooperate with the certification process.*
4. They must provide the AAA with two written character references. The references must address the suitability of the prospective provider to off a home-like setting and their ability to care for a functionally impaired person.
5. The provider must provide two written financial references. The provider must be able to function independently of the consumer's monthly payments. If the prospective home is still under a mortgage, then one of the references must be from the mortgage holding institution.
6. The provider must provide the AAA with a report from a physical examination that is no more than 6 months old. The provider must be able to physically perform the tasks necessary to care for Dom Care consumers. The

provider must also be free of communicable diseases or conditions that would endanger consumers.

- a. The exam must include a test for tuberculosis that may either be an X-ray or tuberculin test.
 - b. The physical exam is required every two years thereafter, or at the request of the AAA.
7. The provider must provide a signed statement verifying that the provider has never been convicted of a crime involving assaultive behavior or moral turpitude. The AAA should assist the prospective provider in obtaining a State Police record search. The AAA may also request an FBI records search.
- a. The regulation that covers protective service situations is in 21.55.q. *Even though this clause is in the section on decertification, the intent is also there to prevent initial certification of a provider. If an action would cause a provider to be decertified, then it also prevents someone from becoming certified. Consult with your clinical consultant or other PDA staff for additional guidance.*
 - b. *If a prohibitive offence is found in the criminal check, the AAA may deny the certification.*
8. The provider must provide proof that the prospective home has a current, valid insurance policy, which is adequate for the protection of providers in the event of a consumer's injury, accident, or property damage. Homeowner's insurance is generally not sufficient. A supplemental policy or rider may be needed to cover the consumer.
9. If the prospective home is rented, a statement from the owner stating their authorization to use the home for Dom Care must be provided.

AAA Responsibilities

The responsibilities of the Area Agency on Aging in the Dom Care program are covered throughout the regulations. Specific responsibilities are covered in regulations 21.51 to 21.62. Other responsibilities related to provider certification, placement, etc., are covered under other sections in the regulations. Some of the primary responsibilities of the AAA with the Dom Care program include:

1. Providing information to the prospective provider on the nature of the service, home certification and provider eligibility process and a description of the service requirements.
2. Conducting the new provider interview and home inspection within 30 days of when the application to be a provider was received.
3. Certifying or not certifying the prospective Domiciliary Care home and/or the provider based on the standards per regulations.
4. If the AAA is unable to make a determination on provider eligibility, the Dom Care worker should request that the Dom Care review team review the application.
5. Notifying the prospective provider, if they are determined ineligible to be a provider, in writing, which lists the reasons for the decision and gives the

prospective provider right to appeal and receive a fair hearing. The notification shall be provided within 30 days of the date on which the AAA made the determination of ineligibility.

6. Notifying the provider of the determination if the provider is found eligible and the home is certified. The newly certified home is to be placed on the central registry of certified Dom Care homes.
7. Entering into a written agreement with the provider, on forms provided by the Department, which sets forth the responsibilities of the AAA and the provider.
8. Issuing a certificate of compliance to the certified Dom Care home.

Provisional Certification (21.31)

1. The AAA may grant provisional certification of a Dom Care home if the home is in substantial compliance with the Dom Care regulations to that the health and safety of consumers are not endangered.
2. Provisional certification may not exceed 90 days and can only be granted subject to an agreement with the provider that the Dom Care home shall meet the standards prescribed in 21.27 by the end of the 90-day period.
3. A provisionally certified home may be placed on the central registry of homes so that placement activities can begin.

On-going Provider Responsibilities

The provider is responsible for maintaining the home per the standards set in regulation 21.27, even if there are no consumers in the home. The home provider must also meet the standards specified in other sections of Chapter 21, some of which are described below:

1. Per 21.82(i) & (j), the provider shall successfully complete the trainings listed below within 6 months of their eligibility determination. Failure to complete these items may lead to removal of provider certification.
 - a. A training program on items listed in 21.52(5)
 - b. CPR and basic first aid
2. The provider shall ensure that the following basic qualifications and conditions are met for staff persons involved in home provider services:
 - a. The staff person must be age 18 or older, capable of performing home provider services, and have never been convicted of a crime involving assaultive behavior or moral turpitude.
 - b. At least one provider or staff person shall be present and available on the premises when one or more consumers are present in the home
 - c. The AAA may waive the previous item if the consumer(s) are independently mobile and the staff absences would be of limited duration and not during the hours when the consumer is sleeping. This waiver, if granted by the AAA, shall be made in writing and recorded in the case record.

3. The provider must provide the basic furnishing for the consumer as described in 21.74.
4. Per 21.74(7), the provider must provide transportation to enable a consumer to receive necessary, non-emergency medical services. *Note: if the consumer receives Medicaid, contact the local CAO to see if there is the possibility of receiving mileage reimbursement.*
5. Per 21.29(1) regarding access to the home and reporting changes, the provider must:
 - a. Permit access to the home for the AAA to conduct follow-up interviews and inspections. The AAA may also inspect the home to ensure that it complies with Chapter 21. These inspections shall occur during normal business hours.
 - b. Permit access to the home for the AAA for emergency visits. These visits may occur anytime and may be based on a report of need for protective services, investigation of a death or injury to a client or occurrence of an unusual incident.
 - c. Notifying the AAA of a change in the provider's situation or home standards, which may affect eligibility of the provider or certification of the home. The requirements in 21.26 and 21.28 are of a continuing nature and it is the obligation of the provider to meet these standards on a continuing basis. Failure to comply with this subparagraph renders the provider ineligible.
6. Per 21.77(c), if the provider intends to close the home, the provider must notify the consumer and AAA in writing at least 30 days prior to the intended date of closure.
7. The provider shall maintain information on each consumer containing the information listed in 21.55(j).

Fire Safety Standards (21.79)

The provider shall ensure the following fire and safety activities are maintained:

1. First aid supplies are available in the home.
2. Telephone number of the local fire department, police, poison control, and ambulance serving the home is posted by the telephones.
3. A minimum of one operational fire extinguisher is located on each floor with at least one in the kitchen area.
4. A written plan is available for evacuation of the building in case of fire or other emergency, and the consumers are aware of the plan.
5. Fire drills are conducted at least quarterly in accordance with the above plan. The provider shall keep a written record of the fire drills. One fire drill annually shall be conducted without prior notice to the consumers.
6. Proper safeguards are taken against the fire hazards involved in smoking.
7. Firearms kept on the premises are stored in a locked area that is inaccessible to consumers.

8. Containers of poisonous, caustic, toxic, flammable or other dangerous materials kept in the home are properly marked and stored in an area inaccessible to consumers. The use of these materials may not constitute a hazard to the consumers.
9. Fireplaces are securely screened when in use.
10. Portable space heaters are not to be used.

Joint Certifications (21.32)

A domiciliary care provider may be jointly certified. *For example, the home may also be licensed as a personal care home (PCH).*

The AAA may not conduct placement activities which result in more than three consumers or residents unrelated to the provider, including consumers of other certifying or licensing agencies, residing in the home at a time.

For example: a Dom care home certified for three consumers is also licensed as a PCH. Originally this home had 2 Dom care consumers. Provider becomes licensed as a PCH and has two PCH consumers placed there. There are now a total of four consumers in the home. The home can safely handle 6 consumers under the PCH license. Even though the home is certified for 3 Dom care consumers, no additional Dom care placement can occur until the total number of consumers' drops to less than three.

Domiciliary Care Home Maintenance Activities (21.80)

The provider shall assure:

1. The atmosphere and routine of the Dom care home enables consumers to spend the majority of their hours outside of their bedrooms.
2. Furnishings and housekeeping standards are intended to keep the Dom care home comfortable and clean.
3. A minimum temperature of 68°F during waking hours and 65°F during sleeping hours is maintained in rooms used by consumers. If the temperature in rooms used by consumers exceeds 85°F, a fan or air conditioner shall be provided.
4. A consumer's bedroom is not to be used for other purposes by the provider. For example, it is not a sewing room.
5. Doors used into rooms used by consumers are not locked from the outside when the consumer is in the room.

Provider Financial Accountability (21.81)

The provider shall maintain accurate financial records regarding the operation of the domiciliary care home. The provider may not manage the consumer's finances unless prior approval is received from the consumer and the AAA and the activity is specified in the care plan.

CHAPTER 3 CONSUMER ACTIVITIES

Consumer Eligibility for Domiciliary Care

Per regulation 21.21, to receive domiciliary care service, an applicant shall meet the following criteria as determined by the AAA:

1. Be a resident of Pennsylvania and 18 years of age or older
2. Be independently mobile or semi-mobile
3. Not require skilled or intermediate nursing care, or general or special hospital care on a 24-hour residential basis
4. Have no relative, or other person whose relationship with the applicant is important to the applicant's continued well being, willing or able to provide the necessary support for independent living
5. Be incapable of living alone regardless of available services, or require services to live alone and the services are not available

In addition to the above criteria, the applicant shall also meet one or more of the following criteria:

1. Have demonstrated difficulties in accomplishing Activities of Daily Living (ADLs) to an extent, which prevents independent living in the community.
2. Have demonstrated difficulties in social or personal adjustment, usually associated with a mental disability.
3. Have demonstrated difficulties resulting from disabilities, such as blindness, deafness, amputation, paralysis or birth defects, if the individual is independently mobile or semi mobile.

Receiving the Domiciliary Care Supplement (21.22)

To receive the supplement, an applicant shall meet the following criteria:

1. Be eligible for SSI, as determined by the appropriate Social Security Office and verified by the CAO, or already be receiving SSI as verified by the CAO, or have personal income less than the combined Federal-State payment level for domiciliary care.
2. Be eligible for domiciliary care service, as determined by the appropriate AAA.
3. Be residing in or awaiting immediate placement into a domiciliary care home in which the provider is not a relative of the consumer.

Application process for Domiciliary Care service and the supplement (21.23)

The following procedures are to be used for determining the eligibility of an applicant for domiciliary care service and the supplement:

1. The applicant is responsible for:
 - a. Initiating, completing, and signing necessary application forms as needed by the Departments of Aging and Public Welfare.
 - b. Participating in an assessment interview with the AAA.
 - c. Sending the required application paperwork to the AAA.
 - d. Promptly notifying the AAA of any changes in circumstances that may affect eligibility for Dom care service or the supplement.
 - e. If the applicant is applying for SSI at the same time, they must initiate that application process with the local SSA office as well.
2. The AAA is responsible for:
 - a. Providing the applicant with the necessary application forms and if necessary, assisting the applicant in their completion.
 - b. Receiving the application from the consumer or designate and reviewing it for completeness and that all necessary documentation is attached.
 - c. Assisting the applicant with their application for SSI if they are applying at the same time.
 - d. Arranging for the face-to-face assessment interview within 15 days of the applicant's request for service.
 - e. Performing, with the applicant's informed consent, a thorough, face-to-face assessment of the applicant's level of care and need for domiciliary care service.
 - f. Arrange for a medical examination of the consumer and ensure that the appropriate documentation of the exam is recorded on forms prescribed by DPW (*i.e. MA-51*).
 - g. Providing written notice to applicant or designate of the applicant's ineligibility for Dom care service, if determined ineligible by the AAA, within 10 days after the decision has been made, providing the reasons for the determination of ineligibility, along with information on the applicant's right to appeal under 21.101.
 - h. Forwarding the original application, along with necessary documentation and forms to the appropriate CAO and retaining a copy for the AAA when the applicant is eligible for domiciliary care service and an appropriate Dom care home is available for placement.
 - i. Assigning the applicant, determined eligible for domiciliary care service, to a waiting list when no domiciliary care home is available for placement.
 - j. Initiating domiciliary care services to the consumer on a private payment basis when the AAA has determined the consumer eligible for Dom care but the CAO has determined the applicant ineligible for the supplement because their income is too high.
 - k. Beginning placement activities as soon as necessary forms and eligibility determinations have been completed by the AAA and CAO, and the AAA has available an appropriate domiciliary care home in which to place the consumer.

3. The CAO is responsible for determining eligibility for the domiciliary care supplement, and in cases where applicants appeal denial of the supplement, conducting hearings and appeals. *The CAO enters a code in their system that triggers the state supplement.*

Redetermination of Eligibility

Reassessments for Domiciliary Care consumers are to be completed every 6 months. Following the third reassessment, a complete COAF and care plan must be done. Between reassessments, consumers are responsible for reporting changes that may affect eligibility for domiciliary care service or the supplement.

Termination of eligibility for Domiciliary Care service or the supplement (21.25)

The AAA is responsible for notifying the CAO of a change in the consumer's status that requires termination of eligibility for domiciliary care service

The AAA will notify the consumer or designate in writing that the consumer is no longer eligible for dome care service, and of their right to appeal and receive a fair hearing. Notification shall take place within 20 days of the date the decision was made.

The CAO is responsible for the termination of eligibility for the domiciliary care supplement.

CHAPTER 4 PLACEMENT

The AAA may not place a consumer in a domiciliary care home of a provider who is a relative of that consumer. (21.55(t))

Certified Capacity Limitations (21.55)

1. A Domiciliary Care home certified on or after January 9, 1990 has a maximum certified capacity of **three** consumers, depending on the physical capacity of the home. The AAA shall conduct its placement activities so that no more than three consumers reside in the home at one time. (Also refer to Joint Certifications above)
2. A Domiciliary Care home certified before January 9, 1990 which has a certified capacity of four or more consumers may continue to operate with more than three consumers up to its certified capacity if state and local laws are observed in conjunction with the section 21.30 and other parts of Chapter 21. The maximum certified capacity for these older homes was 13.

Placement in the Domiciliary Care Home

1. Both the consumer and provider must approve of a placement.
2. If an SSI recipient and a private pay consumer both desire placement in the same home, the SSI recipient has priority. (21.55(c))
3. A visit shall be made to the domiciliary care home by the consumer and the agency staff person prior to placement for the purpose of acquainting the consumer with the home, the provider, and the surrounding community. Elements to be reviewed during this visit include:
 - a. Rights and responsibilities of both the consumer and provider
 - b. Consumer and provider preferences
 - c. Acceptable behaviors
 - d. Smoking and alcohol
 - e. Pets
4. The decision of the consumer to accept or reject the placement shall be made following the visit and out of the presence of the provider.
5. The AAA should encourage and assist the consumer in notifying all concerned of a consumer's upcoming move into the domiciliary care home, such as the consumer's family and the post office.
6. The AAA shall provide the domiciliary care home provider with the following written information about the consumer if placement is to occur:
 - a. Basic identifying information such as name, sex, date of birth, social security number, etc.
 - b. Religious affiliation, if the consumer chooses to disclose.
 - c. Date of entry to the home
 - d. Contact information for the consumer's family
 - e. Emergency contact for the consumer
 - f. A copy of the provider/consumer agreement

- g. An inventory of personal property
 - h. Information on any dietary restrictions
 - i. Full disclosure of medical problems and their history
 - j. Medication regimen
 - k. Contact information for the consumer's physician and dentist.
 - l. Guardian information if applicable
7. The AAA shall inform the provider in writing of the agency and person responsible for follow-up and provide their contact information.

House Rules (21.55(m))

The House Rules are to be incorporated into the Consumer/Provider Agreement. The AAA shall, before actual placement, approve the house rules of the domiciliary care home and assure that they are fully explained and agreed upon before the written agreement is finalized. The house rules at a minimum shall contain an agreement outlining when the consumer is expected to be present and away from the home.

Consumer/Provider Agreement (21.75)

1. There shall be a written agreement between the provider and consumer, specifying the monthly charge for domiciliary care provider services in accordance with the amounts specified by the Department of Aging. The agreement shall be on a form provided by the Department.
2. This agreement is subject to prior approval by the AAA. Points covered in the agreement include specifying of the house rules and the responsibility of the provider to furnish items specified in 21.74.
3. The agreement shall be amended at least annually to reflect changes in consumer payments to the provider as established by the Department. The agreement can be amended at other times, on terms mutually agreeable to the provider and the consumer, subject to review and approval by the AAA.

Follow-Up Visits

1. The AAA shall evaluate or designate another agency, such as MH/MR to evaluate the consumer's adjustment to the domiciliary care home within 15 days of the placement. The purpose of this visit is to insure the placement is working out for both parties and that the care plan is working or if it needs to be modified.
2. Additional follow-up shall be performed by a home visit at least once every 6 months thereafter, the results of which shall be reported in writing.
3. The AAA shall reassess the continuing adequacy of the placement and care plan at least every 6 months using the reassessment form. A full COAF is required after the third reassessment, or every two years.
4. If another agency is responsible for primary care management, the AAA shall obtain periodic reports and otherwise monitor these activities to insure they are being performed.

Consumer Rights (21.91)

A consumer residing in a domiciliary care home shall be afforded the following basic rights:

1. The consumer may not be restricted in the right to leave and return to the home at reasonable times consistent with the house rules.
2. The consumer shall have the right to attend and participate in the religious activities of their choice or to abstain from religious practice, and shall have the right to be free from the imposition of the religious practices of others.
3. The consumer shall be free to receive visitors at times mutually agreed upon by the consumer and provider.
4. The consumer shall have access to a telephone in the home and may make local calls, in reasonable privacy, without charge. The consumer shall be allowed to make arrangements for the payment of toll calls. *The house rules are a good place to specify how long distance calls are handled.*
5. The consumer shall have access to the US Mail and may write and send uncensored mail at the consumer's expense, and receive unopened mail addressed to the consumer.
6. The consumer is free to voice grievances and recommend changes in the policies and services of the domiciliary care provider during periodic updates to the house rules.
7. The consumer shall be allowed to keep personal possessions in their own room.
8. The consumer shall have the right to privacy in all aspects of daily living.
9. The consumer has the right to a diet consistent with religious or health reasons.
10. The consumer has the right to be treated in a courteous manner by the provider and staff.

Consumer Responsibilities (21.92)

1. A consumer must pay the monthly domiciliary care fee as established by the Department of Aging to the provider in a timely manner.
2. The consumer is responsible for paying for personal expenses not specified in 21.74 of the domiciliary care regulations.
3. The consumer is responsible for treating the provider, staff, and other residents of the home in a courteous manner.
4. The consumer must respect the rights of other consumers in the home as specified above.
5. The consumer must comply with the house rules as long as those rules do not conflict with the consumer's rights as specified in 21.91.

Provider Rights (21.83)

1. The domiciliary care provider has the right to appeal an adverse action by the Department or the AAA and receive a fair hearing
2. The provider has the right to prompt action on reasonable requests made to the AAA with regard to problems encountered with the provision of domiciliary care services.
3. The provider has the right to receive timely payments from the consumers in their home.
4. The provider has the right to receive training and technical assistance from the AAA regarding domiciliary care services.
5. The provider has the right to assistance and support from the AAA when serving special needs or during emergency situations.

CHAPTER 5 ON-GOING CARE MANAGEMENT

Per regulation 21.54(1), the AAA is responsible for the development and implementation of the care plan for each domiciliary care consumer.

The following are general domiciliary care-related care planning responsibilities:

1. The care plan shall be developed in consultation with the consumer and shall be signed by the consumer or their designate, if appropriate.
2. The care plan shall be reviewed with the home provider for their agreement. A copy of the care plan shall be given to the provider.
3. The care plan shall be developed in accordance with established procedures as outlined in the Home and Community Based Services manual.
4. When primary care management is handled by another agency such as MH/MR, that agency shall, with concurrence of the AAA, modify the care plan as required.
5. When the care plan is carried out by an agency other than the AAA, the AAA shall monitor as necessary to insure that the care plan is being implemented

Personal Care Responsibilities (21.76)

The provider shall help the consumer in developing or maintaining self-help skills, personal hygiene skills and other skills relating to activities of daily living in accordance with the consumer's care plan.

Medications (21.76.c)

If necessary, the provider shall assist with the administration of medication prescribed for self-administration, and in accordance with the care plan.

When the provider assists the consumer with the administration of medication, the following standards apply:

1. The provider shall take reasonable precautions to assure that drugs are stored and maintained in a safe and secure manner to protect against contamination, spillage, misidentification, and pilferage.
2. The provider may assist with medications by helping the consumer to remember their schedule in accordance with the prescription, storing the medication in a secure place and offering the consumer the medication at the prescribed times.
3. Only prescription medication of a consumer living in the home may be stored in the home.
4. Medication may be stored in a consumer's room for self-administration upon written instructions of a licensed physician.
5. Medication prescribed to one consumer may not be given to another consumer.

6. Medication assistance errors and drug reactions shall be reported immediately to the physician who ordered the medication.
7. Medication shall be kept in its original prescription container.
8. When the consumer permanently leaves the home, their medication is to be given to the consumer, the family, or the consumer's designate.
9. Medication that is discontinued, becomes outdated, or was for a consumer who passed away before taking all prescribed medication shall be destroyed.

Nutrition Responsibilities of the Provider (21.78)

The provider shall assure that:

1. A consumer is served daily at least three well-balanced meals which are designed to meet the daily nutritional requirements of the consumer and which are either prepared by the provider, or as indicated in the care plan, by the consumer with the provider's supervision.
2. Dietary restrictions prescribed by the consumer's personal physician are followed.
3. Meals are to be served to consumers in a dining area, except that:
 - a. Meal service to a consumer's bedroom shall be made available only if the consumer is temporarily ill or indisposed.
 - b. Meal service to other rooms in the home may be made available if the consumer requests that service and the provider agrees to deliver that service.

CHAPTER 6 INCIDENTS AND DECERTIFICATION

An unusual incident is an occurrence that threatens the health and safety of a consumer. This includes fires, structural damage to the home, crimes, serious injury, missing persons, highly contagious diseases, food poisoning, interruptions in utility services which may affect the health and safety of the consumer, neglect, mistreatment, physical or mental abuse, behavior by a consumer that constitutes a danger to that consumer or others, a request by the consumer for immediate removal or relocation from the domiciliary care home, or the relocation of the domiciliary care home.

Notification of Incidents (21.55.o)

The AAA shall promptly notify the consumer's family or designate, if those persons are available, in the event of an unusual incident involving the consumer.

Per 21.55.r, the AAA shall report to the Department, within 72 hours a documented instance of consumer neglect, mistreatment or abuse, or a major fire or structural damage in a domiciliary care home and associated consumer injury or death.

Even though the above citation does not expressly cover every defined type of incident, PDA requests that all incidents be reported to the appropriate PDA Quality & Compliance specialist. Learning how all types of incidents are handled may help other AAAs deal with similar situations.

Investigation of Reported Incidents (21.55.p)

A report of an unusual incident in the domiciliary care home shall be thoroughly investigated by representatives of the AAA as follows:

1. The investigation shall include a home visit that shall take place within 72 hours of the date the report was received by the AAA. If another agency has primary care plan responsibility, a copy of the investigation report is to be sent to this agency.
2. Investigations into incidents that are performed by the AAA as part of a protective services investigation satisfy the domiciliary care investigation requirements.

Grounds for Removal and Decertification (21.55.q)

One or more of the following reported and documented occurrences shall be grounds for removal and relocation of the consumer from the domiciliary care home and, if appropriate, decertification of the home or removal of provider eligibility by the AAA:

1. Neglect, mistreatment or physical or mental abuse of a consumer.
2. Violation of a consumer's rights as cited in 21.91.

3. Failure of the provider to comply with regulations 21.26 or 21.71-21.83 (relating to provider rights and responsibilities), or to the domiciliary care home's failure to meet the standards in 21.27 or 21.28 (relating to home certification and recertification standards; and provider application and home certification process).
4. Relocation for the consumer's physical or mental health and welfare when it is determined, in consultation with the consumer, to be necessary. An example of this is when the provider is going through some type of traumatic personal family crisis and cannot provide adequate care or supervision to the consumer.
5. The consumer becomes non-mobile. The provider shall immediately inform the AAA and make arrangements for the consumer to be examined by a physician. If the physician finds that the medical and health needs of the consumer can no longer be met in the domiciliary care home, the AAA and provider shall cooperate to transfer the consumer to the appropriate level of care. *All other eligibility requirements being met, the AAA and provider may look into the PDA Waiver program for the consumer if their medical needs rise to the level of NFCE. Contact the appropriate PDA clinical consultant for more information. See Chapter7 below for more information.*

CHAPTER 7 WAIVERS

The Department of Aging may grant waivers on provisions of the Domiciliary Care regulations if the provisions are not required by Federal, State, or Local laws. Waivers to domiciliary care policy usually fall into two separate categories:

1. Waivers to level of care requirement allowing a Dom Care consumer with greater clinical needs to reside in a domiciliary care home.
2. General waiver to any other domiciliary care policy.

Waivers to allow a PDA Waiver or other nursing facility clinically eligible (NFCE) consumers into domiciliary care are coordinated through the PDA Quality and Compliance Specialists for that AAA. The PDA staff person will provide guidance on preparing a waiver request to the Department. The PDA Quality & Compliance Specialist will process the request at the Department on the AAA's behalf. If approved, a waiver letter will be sent to the AAA.

Waivers to general policy are coordinated through the Department of Aging's Domiciliary Care program manager. Contact this person via email or phone to discuss the specific situation before putting through a formal waiver request. Once a formal written request is made by the AAA for a Dom Care regulatory waiver, the PDA Dom Care program manager process the request at the Department. If approved, an approval letter will be sent to the AAA.

In order to have a waiver approved, the AAA must be able to clearly show why the waiver is needed and how the waiver will improve the quality of life and maintain the health and safety of the consumer. A waiver must be approached as the final option in a given situation.

CHAPTER 8 PDA RESPONSIBILITIES

Per regulation 21.41, the Pennsylvania Department of Aging is responsible for the following with regards to the Domiciliary Care program:

1. The Department is responsible for determining the monthly dollar amount that consumers shall pay to providers for domiciliary care provider services. *The determination is issued annually through an Aging Program Directive (APD).* Private pay consumers pay the same monthly amount, as do SSI recipient consumers.
2. The Department is responsible for developing regulations and to supervise the domiciliary care program on a state level.
3. The Department provides technical assistance to the AAAs and other community organizations and persons as needed.
4. The Department monitors and evaluates the AAAs with regard to the provision of domiciliary care service.
5. The Department conducts hearings and appeals regarding domiciliary care service that move beyond the Domiciliary Care Review Team.

CHAPTER 9 OTHER

Central Registry of Certified Domiciliary Care Homes (21.56)

The AAA shall develop and maintain a registry of certified domiciliary care homes within their PSA. The registry shall contain the following about each home:

1. The name, address, and phone number for each home.
2. The dates of inspection, certification or recertification, and follow-up visits.
3. Total resident capacity.
4. The number of consumers presently placed in the home and dates of placement.
5. The name of the agency and person responsible for follow-up.
6. Other information deemed necessary and useful, such as a record of unusual incident reports.
7. The written record of the information obtained from the interview with the provider during the provider application and home certification process.

It is the responsibility of the AAA to continually update the occupancy data contained in the registry.

Unlike larger institutions such as personal care homes and nursing homes, domiciliary care homes are the provider's residences. Safeguard the listing from routine inquiries as these are individual homes.

The Department annually requests the central registry for a report to the Public Utility Commission. See APD 93-25-01 for more information.

Domiciliary Care Review Team (21.57)

1. The AAA shall establish a Domiciliary Care Review Team. It shall consist of at least one person from the AAA, one person from the local CAO, and one person from the county MH/MR program. Other members may be added, at the determination of the AAA.
2. The AAA may utilize its existing advisory council as the Dom care review team if the membership of the advisory council meets the above listed membership standards.
3. The domiciliary care review team shall be the first level used to handle complaints or appeals from providers, prospective providers, applicants, or consumers.