

Home Care Statutes Study Guide

The following questions may be used as a guide to ensure that home care license applicants and license holders address the requirements of home care regulations in their agency-specific policies and procedures.

This list is not all-inclusive of topics that must be covered in an agency's policies and procedures manual. Refer to the complete Minnesota home care laws for information that is required by law.

[Minnesota Home Care Laws](#)

Statute 144A.44 and 144A.4791 Home Care Bill of Rights

1. What are the 22 points in the home care bill of rights?
2. When are you required to give the bill of rights and to whom?
3. Where will acknowledgement of the client's receipt of the bill of rights be stored?
4. What staff must receive orientation and training on the home care bill of rights?
5. At what points will home care agency staff receive information about the home care bill of rights?
6. In addition to the language in 144A.44, subdivision 1, what additional language must be included regarding how to file a complaint? (see 144A.4791)
7. If you have a client who is not an English speaker, where will you find translations of the BOR to provide this client?

Minnesota Statutes, section 144A.476 Background Studies

Subdivision 2 Employees, contractors, and volunteers

1. Who is subject to a background study?
2. Through what agency must the background study be conducted?
3. Where will you keep the results of background studies?
4. Are persons who have been excluded by DHS for employment in home care allowed to work for the home care agency in any capacity?
5. Do staff from a supplemental nursing services agency need to have a DHS background study?

Statute 144A.4791 Home Care Provider Responsibilities with Respect to Clients

Subdivision 7 Basic Individualized Client Review and Monitoring

1. When and where must an individualized initial review of the client's needs and preferences be conducted?
2. When must basic client monitoring and review be done?
3. Where and/or how can this review be conducted?
4. If a client's condition changes, what procedure will you have in place to identify the change, manage it and communicate it to the staff and others?

Statute 144A.4791 Home Care Provider Responsibilities with Respect to Clients

Subdivision 8 Comprehensive Assessment, Monitoring and Reassessment

1. When must the initial assessment of a comprehensive client be conducted?
2. By whom?

3. When must a comprehensive client be reassessed?
4. What is your plan for ongoing client monitoring and reassessment?
5. How often will it be done?
6. Where/how?
7. If a client's condition changes, what procedure will you have in place to identify the change, manage it and communicate it to the staff and others?

**Statute 144A.4791 Home Care Provider Responsibilities with Respect to Clients
Subdivision 9 Service Plan, Implementation, and Revisions to Service Plan**

1. What is included in your service plan policy?
2. By when must a written service plan be in place?
3. How will the current client service plans be communicated to staff?
4. What contingency plans will you have in place in the event that you are unable to provide the scheduled service?
5. If you reasonably believe that a client is in need of another medical or health service, which your agency cannot provide, what steps will you take?
6. What specific elements must the service plan contain?
7. What is your procedure in the event that you terminate services to a client who continues to require services? What does Minnesota home care law require you do?

**Statute 144A.4791 Home Care Provider Responsibilities with Respect to Clients
Subdivision 11 Client Complaint and Investigative Process**

1. What is your policy regarding receiving, investigating, reporting and attempting to resolve complaints from a client or client's representative?
2. What is the process by which a client can file a complaint or concern about home care services? Specify to whom the complaint can be made – within the agency and to state agencies.
3. What record of complaints will you maintain? What will it include? How long will you retain it?
4. What is the step-by-step process you and your staff will use to conduct investigations of complaints?
5. Compare your policy and the document you will use to record complaints and the subsequent investigation and resolution against the statute. Does it address all required elements?

**Statute 144A.4795 Home Care Provider Responsibilities; Staff
Subdivision 7 Requirements for instructors, training content, and competency evaluations for unlicensed personnel**

1. Who will conduct the training and competency evaluations of unlicensed personnel?
2. Will you be delegating tasks to unlicensed personnel? If so, how will you ensure competency of the unlicensed personnel?
3. Review what the statute requires for training of staff performing delegated tasks. What training modalities will you utilize to cover all of the topics required?
4. How will you indicate what training and competency topics have been met by each employee, and where will this information be stored for use by the RN or licensed health professional who will be delegating tasks?
5. What topics must your training and competency evaluation program include?
6. What requirements must independent contractors and temporary staff meet?

Statute 144A.4796 Orientation and Annual Training Requirements

Subdivisions 1-5, 7

1. Who must complete the orientation to home care licensing requirements and regulations?
2. When must the orientation be completed?
3. Is the orientation transferrable from or to another home care provider?
4. What content must be covered in the orientation?
5. Where must completion of the orientation be documented?
6. How will you orient your employees to each client?
7. Do you plan to work with clients who have Alzheimer's disease or related disorders? If so, what topical areas does home care law require your orientation to cover? Who will receive this training?
8. Will you be providing services in a housing with services establishment? If so, what are the specific training and orientation requirements you must meet regarding Alzheimer's disease and related disorders?

Statute 144A.4796 Orientation and Annual Training Requirements

Subdivision 6 Required Annual Training

1. What is the requirement for annual training relative to infection control?
2. What content must be included regarding infection control?
3. How much annual training is required and when must it occur?
4. Who must complete this training?
5. What topics, in addition to infection control, must be covered during annual orientation?
6. Who can provide the training?
7. Where must the provider retain evidence that this training requirement was met?
8. What is the difference between required annual training and the training and competency evaluations for unlicensed personnel?

Statute 144A.4797 Provision of Services

Subdivisions 1, 2, 3, 4 Supervision of staff

1. What are the statutory requirements for supervision of staff who perform basic home care services? How will your agency meet these requirements?
2. What are the statutory requirements for supervision of staff who perform comprehensive home care services? How will your agency meet these requirements?
3. How often and where must the supervision occur (for staff providing basic home care services and for staff providing delegated nursing or therapy home care services)?
4. For basic home care services, who must provide the supervision of unlicensed personnel?
5. For comprehensive home care services, who must provide the supervision of unlicensed personnel?
6. What type of supervision will be provided to employees performing medication or treatment administration?
7. Where will that supervision occur?
8. What documentation must be made of supervisory activities?
9. Who will be available for staff to consult with if they have questions relating to the provision of care to clients?
10. How will staff reach this person?

Statute 144A.4798 Employee Health Status

1. What must be included in your TB prevention and control program?
2. Who is responsible for your infection control program?
3. Which resource does MDH refer to for guidelines on communicable diseases?
4. What is your facility risk assessment?
5. What topics must be covered in your training program for employees?
6. When must the training occur?
7. Who must be screened?
8. What screening protocols must be followed?
9. What policies and procedures must be developed?

Minnesota Statutes, sections 626.556 and 626.557

Reporting of Maltreatment of Minors and Vulnerable Adults

1. Summarize your understanding of the requirements of this chapter.
2. Who is considered vulnerable?
3. Who is a mandated reporter?
4. When must employees be trained in this area? Specify all times required by Minnesota Statutes, section 144A.4796.
5. What should an employee do if they suspect maltreatment of a client? If your agency serves both minors and vulnerable adults you must have policies and procedures for both populations. If your agency serves just one of these populations you must have a policy and procedures for that population. Outline the steps to take.
6. How is “immediate” defined relative to reporting of maltreatment?
7. Where will employees find information on who to report to and what information must they report?
8. Does the employee need to report to MAARC if he/she reasonably believes that a report has already been filed?
9. If a home care provider receives an internal report by a mandated reporter, what must the home care provider do?
10. What does your policy say about immunity for persons who make good faith reports of maltreatment?
11. What does your policy say about false reports?
12. What does your policy say about failure to report?
13. When is a report not required?

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