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	Standard	Standard Content	Tips For Compliance
1	PDII.2g	Paraprofessional services support professional disciplines and function as an extension of professional.	CHHA, PCA, Home/Environmental Support Service providers function under supervision of a RN and must follow the established plan of care or service plan. The RN only provides indirect supervision to home/environmental support services staff.
2	PDIII.1i	Competency evaluations done by qualified staff.	Have a process for completing competency evaluations with supporting documentation for all staff providing care/services at hire, annually and at the time of performing a new duty, task or equipment use. Competency evaluations for client care/services are performed by a qualified RN, and home/environmental support by a qualified supervisor.
3	PDIII.1k	Direct Supervisory requirements for all categories of staff providing service to clients consistent.	Supervisory visits are to be made at least every 2 months for LVN/LPN, PTA, COTA by the appropriate professional; and for CHHA by the RN. Personal care services clients are contacted at least monthly for the first 12 months and an onsite visit at least every 3 months by an LPN on an ongoing basis. Home and environmental support services are contacted at least monthly for the first 6 months with an onsite visit every 6 months on an ongoing basis.
4	PDII.5c	The paraprofessional plan of care or service plan is reviewed by a RN or designee at designated time points, and the paraprofessional follows the written plan of care or service plan.	Have a process for the care plan or service plan review by a RN at least every 2 months for CHHA and at least every 6 months for personal care/environmental support services. Elements of the care plan or service plan most commonly missed: lacks clarity in specific instructions, schedule of services and client mental status. Follows state specific requirements in reference to time frames.
5	PDII.2a	Nursing care follows the plan of care.	Services and care provided by a RN, LPN and LVN must be consistent with the plan of care. Most commonly missed areas: Nursing care provided following the care plan, all client condition changes, or service requests not reported to the physician, and consultation with and education with the client and family regarding self-care techniques and disease prevention strategies.
6	PDII.5b	Required elements of the POC for skilled private duty services in consultation with the client.	Elements most commonly missed: Medications and treatments, prognosis, functional limitations and potential rehab.
7	PDII.5a	A physician directs the POC for skilled private duty.	Have a process for management of physician orders to ensure the physicians review at least every 60 days or as often as indicated.
8	PDII.5d	Private duty clients are reassessed on a regular basis as per state regulation.	Skilled PD clients are reassessed at least every 2 months by the appropriate professional. Paraprofessionals are reassessed at least every 6 months by the appropriate professional. Home/environmental support services are reassessed at least every 6 months by the qualified supervisor. Documentation of the onsite reassessment provides evidence of compliance.
9	PDIII.1b	Qualified staff are recruited and retained.	Have a process for documenting required information prior to beginning employment for I-9, reference checks, health reports such as Hepatitis B declination, TB screening/testing, and criminal background reports per state law. A robust monitoring process to ensure compliance should be established with documented evidence in the employee files, health files or administrative files.
10	PDIII.1h	Initial and ongoing training for the paraprofessional by a qualified RN.	Validate paraprofessional's training requirements, conduct a competency assessment, agency orientation. Home/environmental support services staff are provided an initial and ongoing training by a qualified supervisor, with at least 2 years of nursing experience. Conducts a probationary evaluation with documented evidence in the HR file.