

TOP 10 NJ HOME CARE DEFICIENCIES

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Standard	Standard Content	Tips for Compliance
① NJHR.2	The HCSF requires the following personnel information prior to hire: reference checks, health reports and criminal background checks as per NJ law , proof of citizenship,I-9, competency and current certification as Homemaker-Home Health Aide.	Perform periodic record reviews to ensure that tasks and documentation by the CHHA are performed in accordance with their scope as well as the plan of care.
② NJAC.4	The Health Care Practitioner Supervisor reviews the plan of care not less than once each 30 day period and more often if client's care changes, condition or needs of client changers, another regulations standards requires otherwise.	Perform periodic record reviews to ensure there is evidence of review of the plan of care no less than each 30 day period and more often if the patient has a change in condition.
③ NJAC.13	Client record components.	<ul style="list-style-type: none"> • Perform audits of client records to validate all components of the standard are present • Educate staff on documentation requirements and entries in the client record
④ NJAC.3	The plan of care addresses: tasks/schedule of care, supplies and equipment, mental status, client's functional limitations, activities permitted, nutritional requirements, safety measures. The plan is signed with credentials and date of RN preparing the plan of care.	<ul style="list-style-type: none"> • Perform audits of client records and the plan of care to ensure that all required elements are present • Ensure that any changes to the patient that results in changes to care is addressed on the plan of care
⑤ NJHR.3	The HCSF has an application for each applicant that includes all elements per NJ Administrative Code and contains the required executed authorization.	Perform audits of personnel records to validate each application form contains the required executed authorization
⑥ NJIP.2	The HCSF staff use "standard precautions" while providing care, including hand hygiene, use of gloves, safe handling of equipment likely to be contaminated with body fluids, soiled items, sharp devices and other requirements per state law and regulation.	<ul style="list-style-type: none"> • Conduct ongoing education and training related to standard precautions • Conduct routine field observation visits with staff to validate their ability to comply with infection control processes
⑦ NJAC.11	The certified homemaker-home health aide only performs tasks: 1. That are evaluated/delegated by the Health Care Practitioner Supervisor/RN; OR 2. As directed by the Health Care Practitioner Supervisor	<ul style="list-style-type: none"> • Educate Aides on performing tasks only as delegated or directed • Conduct audits of client records to validate tasks assigned are appropriate and there is documentation of tasks performed
⑧ NJHR.4	Certified Homemaker-Home Health Aide (CHHA) provides care/services under the supervision of a registered nurse include assistance with activities of daily living, reporting changes, and other supportive tasks.	<ul style="list-style-type: none"> • Educate Aides on following the Client Care Plan and communicating with the RN if changes needed • Educate RNs on collaboration with Aide and to revise Client Care Plan as needed • Perform home supervisory visits to observe Aide and identify if following Client Care Plan • Conduct client record audits to ensure Aide is following plan of care as assigned
⑨ NJIP.4	HCSF staff at risk for occupational exposure to TB are screened for TB, with appropriate follow-up conducted when TB risk is identified.	<ul style="list-style-type: none"> • Develop a process to ensure a re-evaluation is completed on each client at least every 12 months • Conduct regular audits of client records to ensure re-evaluations are completed as required
⑩ NJAC.2	Prior to starting care/services an RN evaluates the clients needs in their residence and accepts clients based on ability to meet their identified needs. Time frame for starting services is defined.	<ul style="list-style-type: none"> • Policy defines the time frame for initiating care after conducting the evaluation • Patients are admitted only if their care needs can be met by the organization