

TOP 10 NJ HCSF DEFICIENCIES

[Click for help with standards or accreditation](#)



Standard	Standard Content	Tips for Compliance
① 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
② 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
③ NJPS.2	There is a plan of care for clients receiving skilled healthcare professional services from an employee of a Health Care Service Firm (HCSF). The plan of care is signed and dated by the physician, as are any updates. The written plan of care is reviewed at least every two months by physician, or as often as the client's condition requires.	<ul style="list-style-type: none"> Educate all disciplines on including problems, interventions and goals based on the completed comprehensive assessment and on-going clinical assessments Ensure goals are SMART (Specific, Measurable, Achievable, Realistic, Timely) Focus on individualization of the plan of care specific to each client's unique needs ensuring practitioners are involved in care planning Perform final review of Plan of Care for accuracy, completeness, and that the physician has reviewed it at least every two months
④ NJHR.6	In the event that the Health Care Practitioner Supervisor determines that the CHHA is not performing tasks per the plan of care, there is evidence that the Health Care Services Firm (HCSF) takes immediately corrective action.	<ul style="list-style-type: none"> Provide education to ensure the Health Care Practitioner Supervisor(s) understand corrective action must be taken when CHHAs are not following the plan of care Conduct record reviews to validate CHHAs are following the plan of care as assigned. If noncompliance is identified, verify documentation is in the record that demonstrates corrective action was taken to address the noncompliance
⑤ 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
⑥ 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
⑦ NJPS.1	The HCSF has an application for each applicant that includes all elements per NJ Administrative Code and contains the required executed authorization.	<ul style="list-style-type: none"> Perform audits of personnel records to validate each application form contains the required executed authorization
⑧ 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
⑨ 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
⑩ 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.	<ul style="list-style-type: none"> 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