



In-Home Aide Job Description

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| Position: In-Home Aide | In-Home Aide Name: |
| Supervisor Name: | Street Address, City, County |
| Director Name: | Other: |

I. A. **PURPOSE OF POSITION:**

Personal Care Service is a non-skilled service and should not be considered as a substitute for ongoing medical treatment. PCS includes the following tasks and services that need to occur at minimum, once per week: 1. Hands-on assistance to address unmet needs with qualifying ADLs; 2. Set-up, supervision, cueing, prompting, and guiding, when provided as part of the hands-on assistance with qualifying ADLs; 3. Assistance with home management IADLs that are directly related to the beneficiary’s qualifying ADLs and essential to the beneficiary’s care at home; 4. Assistance with medication when directly linked to a documented medical condition or physical or cognitive impairment as specified in Subsection 3.2 of Clinical Coverage Policy 3L; 5. Assistance with adaptive or assistive devices when directly linked to the qualifying ADLs; 6. Assistance with the use of durable medical equipment when directly linked to the qualifying ADLs; or 7. Assistance with special assistance (assistance with ADLs that requires a Nurse aide II) and delegated medical monitoring tasks. The following additional assistance may be approved under EPSDT criteria for beneficiaries under 21 years of age: 1. Supervision (observation resulting in an intervention) and monitoring (precautionary observation) related to qualifying ADLs; 2. Cueing, prompting, guiding, and coaching related to qualifying ADLs; 3. After school care if PCS tasks are required during that time and no other individuals or programs are available to provide this service; and 4. Additional hours of service authorization.

B. **WORK SCHEDULE:** Work schedule will vary per assigned client needs.

C. **PROGRAM REQUIREMENTS:**

The Personal Care Services (PCS) Program is a Medicaid State Plan benefit provided under the North Carolina Medicaid Program. Personal Care Services are provided for Medicaid beneficiaries who have a medical condition, cognitive impairment or disability and demonstrate unmet needs for hands-on assistance with qualifying activities of daily living (ADLs). Qualifying ADLs are bathing, dressing, mobility, toileting, and eating. The PCS program is designed to provide personal care services to individuals residing in a private living arrangement or in a residential facility licensed by the State of North Carolina as an adult care home, a combination home as defined in G.S. 131E-101(1a), or a group home licensed under Chapter 122C of the General Statutes and defined under 10A NCAC 27G as a supervised living facility for two or more adults whose primary diagnosis is mental illness, a developmental disability, or substance abuse dependency. PCS is provided in the beneficiary’s living environment by paraprofessional aides employed by licensed adult care homes, home care agencies or by home staff in supervised living homes. The amount of service provided is based on an assessment conducted by an Independent Assessment Entity (IAE) to determine the individual’s ability to perform ADLs. The performance is rated on a five point scale that includes totally independent, requiring cueing or supervision, requiring limited hands-on assistance, requiring extensive hands-on assistance, or totally



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dependent. Beneficiaries are awarded prior approvals (PAs) for a number of service hours dependent on their assessed needs. Qualifying Medicaid beneficiaries who are 21 years or older may be authorized up to 80 hours of service per month. A Medicaid beneficiary who meets the eligibility requirements for PCS and other eligibility criteria mandated by N.C. Session Law 2013-306 <http://www.ncga.state.nc.us/Sessions/2013/Bills/House/PDF/H492v7.pdf> may be authorized for up to 50 additional hours of Medicaid Personal Care Services per month for a total amount of up to 130 hours. Qualifying Medicaid beneficiaries under 21 years of age may be authorized for up to 60 hours of service per month, except if additional hours are approved under Early and Periodic Screening, Diagnostic and Treatment (EPSDT).

Units are billed in fifteen (15) minute increments.

II. A. DESCRIPTION OF RESPONSIBILITIES AND DUTIES:

- The In-Home Aide primary responsibilities are to provide direct one-on-one personal care services.
- Assist clients with the activities of daily living and personal care such as bathing, personal hygiene, dressing, toileting, feeding, mobility, etc
- Assist with meal preparation
- Assist with arranging transportation
- The In-Home Aide will be responsible for timely submission of all required documentation.
- Maintain a schedule of services/activities in a treatment plan
- Monitor and report on status of health and safety objectives
- Complete housekeeping tasks essential to the health and welfare of the individual
- Assist client participation in leisure/recreational activities
- Assist client with self-administration of medications that are ordered by a health care practitioner or other person authorized by state law to prescribe

WORK ENVIRONMENT AND CONDITIONS:

The In-Home Aide will work in a variety of environments and settings. Personal Care Specialist must be able to work flexible hours.

REQUIRED MINIMUM TRAINING:

All employees are required to complete agency orientation within the first thirty (30) days of employment.

Personal Care staff must complete a minimum of 12 hours of initial in-service training specific to the



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required components of the Personal Care definition within first 90 days of employment. This includes, but is not limited to:

- CPR/First Aid
- Bloodborne Pathogens
- Client Rights
- Confidentiality / HIPAA
- Crisis Intervention and Management
- Personal Care Service Definition
- Training specific to the individual needs of the individual

SUPERVISION RECEIVED BY IN-HOME AIDE:

The In-Home Aide will have access to their supervisor on an ongoing basis through face-to-face contact, via email, and through written correspondence or telephone. If an Associate Professional or Paraprofessional, a supervision plan will be completed to include supervision requirements.

LICENSE OR CERTIFICATION REQUIRED BY STATUTE OR REGULATION:

A valid NC drivers' license is required for this position. Must be registered as a Certified Nursing Assistant (CNA).

CERTIFICATION: In-Home Aide's Certification: I certify that I have reviewed this position description and that it is a complete and accurate description of my responsibilities and duties.

Signature Title Date

Supervisor's Certification: I certify that (a) I am the Immediate Supervisor of this position, that (b) I have provided a complete and accurate description of responsibilities and duties and (c) I have verified (and reconciled as needed) its accuracy and completeness with the In-Home Aide.

Signature Title Date