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CERTIFICATE

STATE OF WISCONSIN )  
 ) SS  
DEPARTMENT OF HEALTH AND SOCIAL SERVICES)

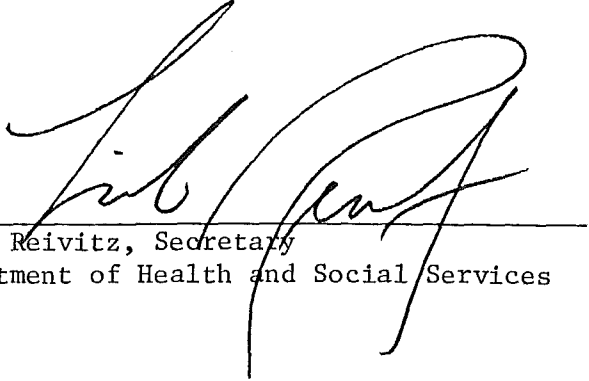
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TO ALL TO WHOM THESE PRESENTS SHALL COME, GREETINGS:

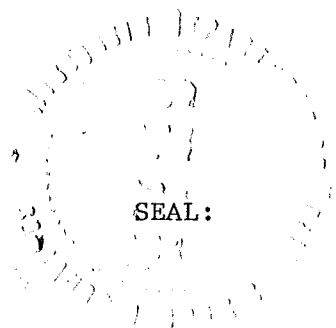
I, Linda Reivitz, Secretary of the Department of Health and Social Services and custodian of the official records of said Department, do hereby certify that the annexed rules relating to home health agencies were duly approved and adopted by this Department on March 13, 1984.

I further certify that this copy has been compared by me with the original on file in this Department and that the same is a true copy thereof, and of the whole of such original.

IN TESTIMONY WHEREOF, I have hereunto set my hand and affixed the official seal of the Department at the State Office Building, 1 W. Wilson Street, in the city of Madison, this 13th day of March, A.D. 1984.



Linda Reivitz, Secretary  
Department of Health and Social Services



6-1-84

ORDER OF THE  
DEPARTMENT OF HEALTH AND SOCIAL SERVICES  
REPEALING AND ADOPTING RULES

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To repeal H 33 and create HSS 133, relating to home health agencies.

Analysis Prepared by the Department of Health and Social Services

Home health agencies are organizations that employ registered nurses, licensed practical nurses, therapists and home health aides to provide skilled nursing and other therapeutic and support services to people in their own homes on an intermittent basis. There are presently 120 home health agencies in Wisconsin, most of them county nurse offices and other public agencies, although some are proprietary (for-profit) agencies and a few are non-profit agencies.

Section 141.15(2), Stats., gives the Department authority to establish and enforce standards for home health agencies, including standards for the care, treatment, health, safety, welfare and comfort of their patients, and requires the Department to set by rule a license fee to be paid by those agencies.

The current rules for proprietary home health agencies, ch. H 33, Wis. Adm. Code, are repealed and recreated by this order and in the process renumbered into the HSS series of the Code where all rules of the Department are being consolidated. Coverage of the rules is extended to all home health agencies consistent with recent amendments to s. 141.15, Stats., by ch. 93 of the Laws of 1981.

Chapter HSS 133 incorporates policies and procedures for license application, issuance, denial and renewal. It sets an annual license fee equal to 0.15 percent of the agency's gross annual income with a minimum fee of \$100, a maximum of \$1,000 and an initial fee of \$300. It provides for enforcement of standards through inspection and plans of correction. It establishes conditions for the structure and operation of the agency, including a governing body and a professional advisory group. Patient rights are listed. The rules also cover acceptance and discharge of patients, types of services made available by home health agencies, coordination with other service providers, and plans of treatment and periodic review of these plans.

Pursuant to the authority vested in the Department of Health and Social Services by s. 141.15(2) Stats., the Department of Health and Social Services hereby repeals and adopts rules interpreting s. 141.15, Stats., as follows:

SECTION 1. Chapter H 33 of the Wisconsin Administrative Code is repealed.

SECTION 2. Chapter HSS 133 of the Wisconsin Administrative Code is created to read:

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HSS 133.01 AUTHORITY AND PURPOSE. This chapter is promulgated under the authority of s. 141.15(2), Stats. The chapter establishes minimum standards for the operation of agencies which primarily provide in-home part-time or intermittent nursing care and other therapeutic services. These minimum standards are intended to foster safe and adequate care and treatment of patients by home health agencies.

HSS 133.02 DEFINITIONS. In this chapter: (1) "Branch office" means a location or site from which a home health agency provides services within a portion of the total geographic area served by the home health agency.

(2) "Department" means the Wisconsin department of health and social services.

(3) "Home health agency" means an organization that primarily provides both skilled nursing and other therapeutic services to patients in their homes.

(4) "Home health aide" means an individual employed by or under contract to a home health agency to provide home health aide services under supervision of a registered nurse.

(5) "Home health aide services" means personal care services which will facilitate the patient's self-care at home and are necessary to prevent or postpone institutionalization, but do not require performance by a registered nurse or licensed practical nurse.

(6) "Licensed practical nurse" means a person licensed as a trained practical nurse under ch. 441, Stats.

(7) "Occupational therapist" means someone who meets the requirements of s. HSS 105.28.

(8) "Parent agency" means a home health agency with one or more branch offices.

(9) "Physical therapist" means a person licensed to practice physical therapy under ch. 448, Stats.

(10) "Registered nurse" means a nurse registered under s. 441.06, Stats.

(11) "Social worker" means a person who has a degree in social work from a school of social work accredited by the council on social work education and has had one year of social work experience in a health care setting.

(h) Name, identification, and qualifications of the substitute administrator required by s. HSS 133.05(1)(e).

(4) ISSUANCE OF PROBATIONARY LICENSE. After receiving a completed application for a new license or change of ownership, the department shall investigate the applicant to determine the applicant's ability to comply with this chapter. Prior to completing its inspection, the department may issue a probationary license for a term of 90 days and for such additional terms as necessary to complete the inspection.

(5) ISSUANCE OF REGULAR LICENSE. (a) Regular license. An inspection of the person or agency licensed under sub. (4) shall be made prior to issuance of a regular license. If the person or agency is in substantial compliance with this chapter, an original regular license shall be issued for a period of one year from the previous June 1.

(b) Fee. No additional fee shall be required for the original regular license.

(6) RENEWAL OF LICENSE. A regular license shall be renewed by the department for a term of one year provided that:

(a) Application for renewal is made upon forms provided by the department, and is received by the department at least 7 days before expiration of the current license.

(b) The application is accompanied by a fee equal to 0.15 percent of the gross annual income of the home health agency based on the agency's most recent annual fiscal report, with a maximum fee of \$1,000 and a minimum fee of \$100.

(c) The department approves an annual fiscal report prepared by the agency which shall be filed with the application for renewal of licensure. The application for renewal shall include a summary of the services provided by the agency, a description of the geographical area covered by the agency, a statistical breakdown of the number of patients served and the kinds of services provided, a description of significant staff changes and any other information required by the department.

(d) The licensee is found to be in substantial compliance with this chapter.

(7) REPORT OF CHANGES. (a) Changes requiring notice. The licensee shall, within 10 days, notify the department in writing of any changes in the services provided and any appointment or change of the administrator.

(b) Changes requiring new application. A new application under sub. (3) shall be submitted to the department within 10 working days when any of the following changes has occurred:

1. The corporate licensee has transferred 50 percent or more of the issued stock to another party or other parties;

(d) Verification. The department shall verify that the home health agency has completed the plan of correction submitted under par. (b).

(5) INTERFERENCE WITH INSPECTIONS. Any interference with or refusal to allow any inspection or investigation under this chapter shall be grounds for denial or revocation of the license.

(6) WAIVERS OR VARIANCES. Upon application of a home health agency, the department may waive or vary any provision of this chapter if it finds that the waiver or variance will not adversely affect the health, safety or welfare of any patient.

HSS 133.05 GOVERNANCE (1) GOVERNING BODY. Each home health agency shall have a governing body which shall:

- (a) Adopt governing policies in the form of by-laws, charter, written policies or other official means;
- (b) Adopt a statement detailing the services to be provided;
- (c) Oversee the management of the agency;
- (d) Appoint an administrator; and
- (e) Provide for a qualified substitute administrator to act in absence of the administrator.

(2) PROFESSIONAL ADVISORY BODY. (a) The home health agency shall establish an advisory group of at least one practicing physician and one registered nurse and appropriate representation from other professional disciplines. A majority of the members shall be persons who are neither owners nor employes of the agency.

(b) The advisory group shall:

1. Review annually and make recommendations to the governing body concerning the agency's scope of services offered, admission and discharge policies, medical supervision and plans of treatment, emergency care, clinical records, personnel qualifications, and program evaluation;
2. Meet at least annually to advise the agency on professional issues, participate in the evaluation of the agency's program and assist the agency in maintaining liaison with other health care providers in a community information program; and
3. Document all meetings by dated minutes.

HSS 133.06 ADMINISTRATION. (1) ADMINISTRATOR. The home health agency shall be administered by an administrator who shall be a licensed physician, a registered nurse, or a person who has had training and experience in health care administration and at least one year of supervisory or administrative experience in home health care or related health programs.

(2) DUTIES OF THE ADMINISTRATOR. The administrator shall:

3. 'Disease surveillance.' Agencies shall develop and implement written policies for control of communicable diseases which take into consideration control procedures incorporated by reference in ch. HSS 145 and which ensure that employes with symptoms or signs of communicable disease or infected skin lesions are not permitted to work unless authorized to do so by a physician or physician's assistant.

(e) Continuing training. A program of continuing training shall be provided to all employees as appropriate for the client population and the employe's duties.

(f) Personnel records. A separate up-to-date personnel record shall be maintained on each employe. The record shall include evidence of suitability for employment in the position to which the employe is assigned.

HSS 133.07 EVALUATION. (1) REQUIREMENT. An evaluation of the home health agency's total program shall be conducted at least once a year by the advisory group required by s. HSS 133.05(2), home health agency staff and consumers.

(2) METHOD OF EVALUATION. The agency shall establish methods to determine whether the established programs and service policies are effective and whether service policies and procedures are substantially followed by agency staff. These methods shall include a review of a sample of patient records to determine whether services are being provided appropriately and the extent to which the needs of patients are met.

(3) REPORTS. Results of the evaluations shall be recorded in writing and reported to those responsible for the operation of the agency.

(4) MANAGEMENT REVIEW. The agency shall periodically review its policies and administrative practices to determine the extent to which they promote appropriate, adequate, effective, and efficient patient care.

HSS 133.08 PATIENT RIGHTS. (1) SERVICE APPLICANT. The home health agency shall promptly determine the applicant's suitability for services and, if the applicant is accepted, shall promptly provide services to the individual. If the applicant is found unsuitable for acceptance, the agency shall inform the applicant of other service providers in the area.

(2) POLICIES. A written statement of the rights of patients shall be made available to the patient or guardian, the spouse, parent, adult child or other relative, the sponsoring agency or representative payee and the public prior to the provision of any services and conclusion of a service agreement. Each patient receiving care from the agency shall have the following rights:

(a) To be fully informed, as evidenced by the patient's written acknowledgment prior to or at the time of acceptance, of these rights and of all rules and regulations governing patient responsibilities;

HSS 133.10 SERVICES PROVIDED. (1) REQUIRED SERVICES. The home health agency shall directly provide at least part-time or intermittent nursing services and provide or arrange for home health aide services.

(2) OPTIONAL SERVICES. In addition to the services required under sub. (1), the agency may provide therapeutic services including, but not limited to, physical therapy, speech therapy, occupational therapy and medical social services.

HSS 133.11 REFERRALS. When patients have needs which the home health agency cannot meet, the home health agency shall refer these patients to other agencies, social service organizations, or governmental units which are appropriate for unmet needs of the patients and which may be of assistance in meeting those needs. Referrals shall include referrals to meet the needs of patients for services at times before and after the normal business hours of the home health agency.

HSS 133.12 COORDINATION WITH OTHER PROVIDERS. The home health agency shall coordinate its services with any other health or social service providers serving the patient.

HSS 133.13 EMERGENCY NOTIFICATION. Home health agency personnel shall promptly notify a patient's physician or other appropriate medical personnel and guardian, if any, of any significant changes observed or reported in the patient's condition.

HSS 133.14 SKILLED NURSING SERVICES. (1) PROVISION OF SERVICES. Skilled nursing services shall be provided by or under the supervision of a registered nurse.

- (2) DUTIES OF THE REGISTERED NURSE. The registered nurse shall:
- (a) Make the initial evaluation visit to the patient;
  - (b) Regularly reevaluate the patient's needs;
  - (c) Initiate the plan of treatment and necessary revisions;
  - (d) Provide those services requiring substantial specialized care;
  - (e) Initiate appropriate preventive and rehabilitative procedures;
  - (f) Prepare clinical and progress notes;
  - (g) Promptly inform the physician and other personnel participating in the patient's care of changes in the patient's condition and needs;
  - (h) Arrange for counseling the patient and family in meeting related needs;
  - (i) Participate in inservice programs for agency staff; and



(b) Assisting patients into and out of bed and assisting with ambulation;

(c) Assisting with prescribed exercises which patients and home health aides have been taught by appropriate health personnel;

(d) Preparing meals and assisting patients with eating;

(e) Household services essential to health care at home;

(f) Assisting patients to bathroom or in using bedpan;

(g) Assisting patients with self-administration of medications;

(h) Reporting changes in the patient's condition and needs; and

(i) Completing appropriate records.

(3) ASSIGNMENTS. Home health aides shall be assigned to specific patients by a registered nurse. Written instructions for patient care shall be prepared and updated for the aides at least each 60 days by a registered nurse or appropriate therapist, consistent with the plan of treatment under s. HSS 133.20. These instructions shall be reviewed by the immediate supervisors with their aides.

(4) TRAINING OF AIDES. (a) Curriculum. In addition to the orientation required by s. HSS 133.06(4)(a), the agency shall ensure that all home health aides providing service have successfully completed a course of training covering at least the following subjects:

1. The role of the home health aide as a member of the health services team;
2. Instruction and supervised practice in in-home personal care of the sick, including personal hygiene and activities of daily living;
3. Principles of good nutrition and nutritional problems of the sick and elderly;
4. Preparation of meals, including special diets;
5. The needs and characteristics of the populations served, including the aged and disabled;
6. The emotional problems accompanying illness;
7. Principles and practices of maintaining a clean, healthy, and safe environment;
8. What, when and how to report to the supervisor; and
9. Record-keeping.

(a) Measurable time-specific goals, with benchmark dates for review; and

(b) The methods for delivering needed care, and an indication of which professional disciplines are responsible for delivering the care.

(3) REVIEW OF PLAN. The total plan of treatment shall be reviewed by the attending physician and appropriate agency personnel as often as required by the patient's condition, but no less often than every 60 days. The agency shall promptly notify the physician of any changes in the patient's condition that suggest a need to modify the plan of treatment.

(4) PHYSICIAN'S ORDERS. Drugs and treatment shall be administered by the agency staff only as ordered by the attending physician. The nurse or therapist shall immediately record and sign oral orders and shall obtain the physician's countersignature within 10 days.

HSS 133.21 MEDICAL RECORDS. (1) REQUIREMENT. A medical record shall be maintained on each patient and shall be completely and accurately documented, systematically organized and readily accessible to authorized personnel.

(2) SECURITY. Medical record information shall be safeguarded against loss, destruction or unauthorized use. Written procedures shall be established to control use and removal of records and to identify conditions for release of information.

Note: For information regarding confidentiality of patient health care records, see s. 146.82, Stats.

(3) RETENTION. For the purposes of this chapter medical records shall be retained for a minimum of 5 years following discharge. Arrangements shall be made for the storage and safekeeping of records if the agency goes out of business.

(4) TRANSFER. If a patient is transferred to another health facility or agency, a copy of the record or abstract shall accompany the patient.

(5) CONTENT. The medical record shall document the patient's condition, problems, progress and services rendered, and shall include:

(a) Patient identification information;

(b) Appropriate hospital information (discharge summary, diagnosis, current patient status, post-discharge plan of care);

(c) Patient evaluation and assessment;

(d) Plan of treatment;

The repeal and rules contained in this order shall take effect on  
June 1, 1984.

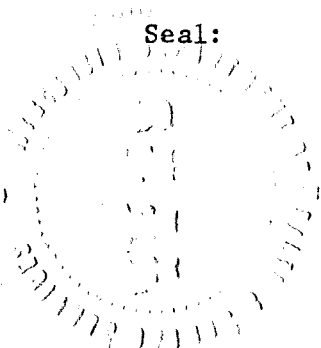
Department of Health and Social Services

Date: 3-13-84

By: \_\_\_\_\_

*Linda Reivitz*  
Linda Reivitz  
Secretary

Seal:





State of Wisconsin

DEPARTMENT OF HEALTH AND SOCIAL SERVICES

1 West Wilson Street, Madison, Wisconsin 53702

Anthony S. Earl  
Governor

Linda Reivitz  
Secretary

March 13, 1984

Mailing Address:  
Post Office Box 7850  
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Mr. Orlan Prestegard  
Revisor of Statutes  
411 West, State Capitol  
Madison, Wisconsin 53702

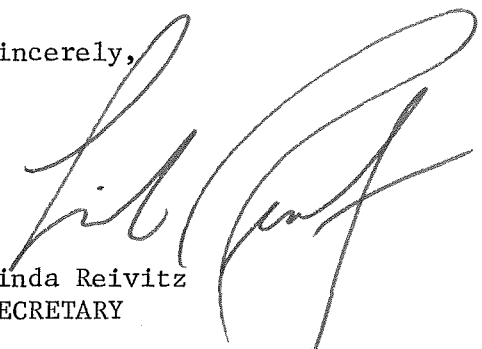
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Dear Mr. Prestegard:

As provided in s. 227.023, Stats., there is hereby submitted a certified copy of HSS 133, administrative rules relating to home health agencies.

These rules are being submitted to the Secretary of State as required by s. 227.023, Stats.

Sincerely,

  
Linda Reivitz  
SECRETARY

Enclosure