SUBCHAPTER 14. HOMEMAKER-HOME HEALTH AIDES

13:37-14.1 Purpose and scope

(a) The rules in this subchapter are designed to protect the health and safety of the public through certification of homemaker-home health aides, pursuant to N.J.S.A. 45:11-24(d)(20).
(b) This subchapter prescribes standards and curricula for homemaker-home health aide education and training programs which a homemaker-home health aide, as defined in this subchapter, is required to complete in order to work in this State. This subchapter also establishes standards and requirements for homemaker-home health aide certification and for the renewal, suspension or revocation of that certification.

13:37-14.2 Definitions

The following words and terms, as used in this subchapter, shall have the following meanings, unless the context clearly indicates otherwise.

"Activities of daily living" means the functions or tasks for self-care which are performed either independently or with supervision or assistance. Activities of daily living include at least mobility, transferring, walking, grooming, bathing, dressing and undressing, eating, and toileting.

"Homemaker-home health aide" means a person who is employed by a home care services agency and who, under supervision of a registered professional nurse, follows a delegated nursing regimen or performs tasks which are delegated consistent with the provisions of N.J.A.C. 13:37-6.2.

"Program coordinator" means the nurse responsible for the training program curriculum.

"Program sponsor" means the agency, hospital or educational institution or entity granted approval by the Board of Nursing to conduct a homemaker-home health aide training program.

13:37-14.3 Duties of a homemaker-home health aide; supervision

(a) The duties of a homemaker-home health aide may include, but not be limited to, providing personal care and homemaking services essential to the patient's health care and comfort at home, including shopping, errands, laundry, meal planning and preparation (including therapeutic diets), serving of meals, child care and assisting the patient with activities of daily living.

(b) A homemaker-home health aide shall not administer medications.

(c) The registered professional nurse who is supervising a homemaker-home health aide shall ensure that the patient care provided by the homemaker-home health aide does not exceed the tasks and procedures which the homemaker-home health aide has satisfactorily demonstrated, as documented by the registered professional nurse.

13:37-14.4 Homemaker-home health aide training program

(a) A homemaker-home health aide training program may be conducted by a home care agency licensed by the Division of Consumer Affairs; a home health agency or hospital licensed by the Department of Health; an educational institution approved by the New Jersey State Department
of Education or the Department of Higher Education; or a home care agency accredited by an independent national or state accrediting body which is without direct or indirect financial interest in the agency. Said accrediting body shall have prior approval of the Board of Nursing.

(b) A homemaker-home health aide training program shall consist of at least 76 hours, to include 60 hours of classroom instruction and 16 hours of clinical instruction in a skills laboratory or patient care setting, covering topics outlined in (d) below and N.J.A.C. 13:37-14.5. The student-to-instructor ratio for classroom instruction shall not exceed 30 students to one classroom instructor.

(c) The 16 hours of clinical instruction in a skills laboratory or patient care setting shall be supervised by a registered professional nurse. The supervision ratio shall not exceed 10 homemaker-home health aides to one registered professional nurse.

(d) The curriculum for a homemaker-home health aide training program shall include instruction in:

1. The role of unlicensed assistive personnel in nursing care settings, including:
   i. Long term care, acute care, subacute, outpatient services, rehabilitation centers, home care agencies, assisted living and hospice;
   ii. The role, responsibilities and scope of practice of the registered nurse;
   iii. The role, responsibilities and scope of practice of the licensed practical nurse;
   iv. The role and responsibilities of the unlicensed assistive personnel; and
   v. Legal and ethical considerations for the unlicensed assistive personnel, such as client rights, confidentiality, accountability, legal documentation, eligibility, reporting physical, mental, verbal, emotional and financial abuse, and maintenance of certification including necessity for unlicensed assistive personnel to complete a course, competency testing and criminal background checks;

2. Foundations for working with people, including:
   i. Components of communication;
   ii. Factors that affect communication;
   iii. Barriers to communication;
   iv. Enhancing communication;
   v. Skills for basic communication;
   vi. Communicating with staff members;
   vii. Guidelines for communicating with individuals who are visually impaired, hearing impaired, speech impaired, cognitively impaired, experiencing stress or who have transcultural considerations; and
   viii. An introduction to human behavior including instruction on understanding basic human needs, understanding mental health, emotional growth and needs throughout a person's lifetime, behavior as a response to stress or unmet needs, responses to changes in health, spiritual needs and reactions to loss, grief and dying;

3. Foundations for a safe client environment, including:
   i. Environmental conditions;
   ii. Physical conditions including potential hazards and safety measures;
   iii. Emotional conditions including potential hazards and protective measures;
   iv. Prevention of, and response to, fire and disaster emergencies;
   v. Infection control, including the chain of infection, standard precautions,
hazardous waste and special concerns regarding tuberculosis (TB), Human Immunodeficiency Virus (HIV) and Hepatitis B;
vi. Body mechanics; and
vii. Medical emergencies, emergency preparedness and guidelines for handling medical emergencies;

4. The musculoskeletal system, including:
i. Overview of anatomy and physiology;
ii. Common conditions and disorders of the musculoskeletal system;
iii. Examples of changes in the musculoskeletal system to report to a nurse; and
iv. Client care procedures related to the musculoskeletal system including exercise, activity and positioning, range of motion, transferring, ambulation, and assistive devices;

5. The integumentary system, including:
i. Overview of anatomy and physiology;
ii. Common conditions and disorders of the integumentary system;
iii. General skin care;
iv. Examples of changes in the integumentary system to report to a nurse; and
v. Client care procedures related to the integumentary system including personal hygiene and positioning;

6. The upper gastrointestinal system, including:
i. Overview of anatomy and physiology;
ii. Common conditions and disorders of the upper gastrointestinal system;
iii. General care including nutrition across the lifespan, factors affecting nutrition, therapeutic diets and alternative nutrition sources;
iv. Examples of gastrointestinal changes to report to a nurse; and
v. Client care procedures related to upper gastrointestinal system;

7. The lower gastrointestinal system:
i. Overview of anatomy and physiology;
ii. Common conditions and disorders of the lower gastrointestinal system;
iii. General care including factors affecting bowel elimination;
iv. Examples of gastrointestinal changes to report to a nurse; and
v. Client care procedures related to lower gastrointestinal system;

8. The urinary system, including:
i. Overview of anatomy and physiology;
ii. Common conditions and disorders of the urinary system, specifically incontinence;
iii. Examples of urinary changes to report to a nurse; and
iv. Client care procedures related to the urinary system;

9. The cardiovascular and respiratory systems, including:
i. Overview of anatomy and physiology;
ii. Common conditions and disorders of the cardiovascular and respiratory systems;
iii. Examples of cardiovascular or respiratory changes to report to a nurse; and
iv. Client care procedures related to cardiovascular and respiratory systems specifically, vital signs, applying antiembolism stockings, assisting the client to
use oxygen and positioning the client for circulatory and respiratory comfort;

10. Neurological system, including:
   i. Overview of anatomy and physiology;
   ii. Common conditions and disorders of the neurological system;
   iii. Examples of neurological changes to report to a nurse; and
   iv. Client care procedures related to the neurological system, specifically, care needs of a client with cognitive impairment, care of a client with a seizure disorder, care of a client following a stroke and rehabilitation or restorative care;

11. The endocrine system, including:
   i. Overview of anatomy and physiology;
   ii. Common conditions and disorders of the endocrine system;
   iii. Changes to report to a nurse, including hyperglycemia and hypoglycemia and their causes, symptoms and emergency response; and
   iv. Client care related to the endocrine system, specifically foot care, skin care and nutrition for a client with diabetes;

12. The reproductive system, including:
   i. Overview of anatomy and physiology;
   ii. The structure of, function of and age related changes to reproductive organs;
   iii. Common conditions and disorders of the reproductive system, specifically sexually transmitted diseases such as gonorrhea, syphilis, herpes and Acquired Immunodeficiency Syndrome (AIDS); and
   iv. Examples of changes in the reproductive system to report to a nurse;

13. The immune system, including:
   i. Overview of anatomy and physiology; and
   ii. Common conditions and disorders of the immune system, such as AIDS, HIV and cancer;

14. Rest and sleep, including:
   i. Functions of rest and sleep;
   ii. Factors affecting and/or causing sleep disturbances; and
   iii. Promoting sleep; and

15. Death and dying, including:
   i. Responding to the physical and emotional needs of a client with a terminal illness;
   ii. Legal and quality of life issues including the New Jersey Advance Directives for Health Care Act (N.J.S.A. 26:2H-53 et seq.), living wills and "do not resuscitate" orders;
   iii. Signs of impending death; and
   iv. Post-mortem care of the patient.

(e) Written approval of the Board of Nursing is required prior to commencement of the training program, which approval shall be granted for a 12-month period.

(f) At the discretion of the Board, program approval may be contingent upon a visit to the program site by a representative of the Board.

(g) The Board may deny or revoke program approval if the program sponsor does not meet the standards set forth in this subchapter.
13:37-14.5 Home care and hospice care training programs

(a) In addition to the curriculum training requirements of N.J.A.C. 13:37-14.4(d), the training program for a homemaker-home health aide in home care or hospice care shall include instruction in:

1. The role of the homemaker-home health aide, including:
   i. Settings utilizing homemaker-home health aides;
   ii. Role of the homemaker-home health aide; and
   iii. Legal and ethical considerations for the homemaker-home health aide;

2. The foundations for working with the home care client, the family and significant others of the home care client and home care team members, including:
   i. Communication with the client and the client's family and significant others;
   ii. Barriers to communication;
   iii. Communication with the home care team; and
   iv. Maintaining relationships with the client and the client's family and significant others;

3. Foundations for a safe client environment, including:
   i. General home safety;
   ii. Fire safety;
   iii. Personal safety and body mechanics;
   iv. Infection control;
   v. Emergencies; and
   vi. Assistance with medications;

4. Home care considerations, including:
   i. Food;
   ii. Housekeeping;
   iii. Use and care of medical equipment in the home;
   iv. Cultural diversity; and
   v. Death and dying;

5. Infant and child care, including:
   i. Introduction to infant and child care; and
   ii. Family dynamics; and

6. The responsibility of an agency to the homemaker-home health aide, including:
   i. The supervision to be provided by a registered professional nurse;
   ii. The agency's responsibility to comply with Federal and State employment laws;
   iii. Mandatory taxes to be withheld by the agency;
   iv. In-services provided to the homemaker-home health aide;
   v. Job descriptions provided by the agency;
   vi. Personnel policies of the agency;
   vii. Service policies and procedures of the agency; and
   viii. Agency policies on patient and family confidentiality.
13:37-14.6 Program sponsor; responsibilities

(a) The program sponsor shall provide an appropriately equipped classroom and skills laboratory with sufficient equipment and resources to provide for efficient and effective theoretical and clinical learning experiences.

(b) The program sponsor shall submit the following to the Board of Nursing at least two months prior to the commencement of the training program:

1. A Board of Nursing application for program approval. The application form requests the name and address of the agency or school, course offering dates and location, tentative number of trainees and name and address of program coordinator. Two supplemental forms which must accompany the application are a faculty approval application which requests the name of the instructor assigned to each session and an instructor personnel record which requests brief biographical and educational information for each instructor;

2. The annual program approval fee for each location at which the program will be offered, as set forth in N.J.A.C. 13:37-12.1(c); and

3. Resume(s) of nursing instructor(s). The resume shall include the instructor's name, address, education (institution, type of degree or diploma, month and year of graduation), work experience (employer's name and address, dates of employment, including month and year, job title, whether full-time or part-time), and New Jersey license or certification number, as appropriate.

(c) The program sponsor shall not, without prior notice to and approval by the Board, make additions to or deletions from a training program which has been approved by the Board of Nursing.

(d) The program sponsor shall notify the Board of Nursing, at least two weeks prior to each program session, of the location and the beginning and ending dates of the program session.

(e) Except in an emergency situation, the program sponsor shall notify the Board of Nursing in writing of any program session cancellation or change, such as a change in location, nursing instructor or dates, at least one week prior to any such cancellation or change. No cancellation or change shall be implemented without the written approval of the Board.

(f) The program sponsor's responsibilities shall include, but not be limited to, the following:

1. Establishing and implementing policies and procedures for the coordination of instruction, including designating a responsible program manager;

2. Maintaining on file a copy of the lesson plan for the curriculum;

3. Establishing methods or provisions to ensure that an absent student receives the required classroom and/or clinical instruction missed;

4. Establishing and maintaining records for each student. The student record shall include, at a minimum, the following:
   i. The beginning and ending dates of the program session;
   ii. An attendance record, including the dates of any makeup sessions; and
   iii. Evaluation of the student's performance by the classroom instructor and by the registered professional nurse who supervised the student's clinical instruction; and

5. Developing, implementing and maintaining on file a plan for evaluating the effectiveness of the program. The evaluation plan shall include, at a minimum, the following:
   i. The name of the person responsible for implementing the evaluation plan;
ii. An annual written training program evaluation report, including findings, conclusions and recommendations;
iii. A written evaluation of instructor(s) performance;
iv. Program, faculty and student data, which shall include, at a minimum, the following:
   1. The beginning and ending dates of each program session;
   2. The number of students enrolled;
   3. The number and percentage of students who satisfactorily completed the program;
   4. The number and percentage of students who failed the program;
   5. The number and percentage of students in each program who passed the New Jersey Homemaker-Home Health Aide Certification Examination; and
   6. The number and percentage of students in each program who failed the New Jersey Homemaker-Home Health Aide Certification Examination.

(g) The program sponsor shall not use the homemaker-home health aide training program as a substitute for staff orientation or staff continuing education programs.

13:37-14.7 Program coordinator; responsibilities

(a) The homemaker-home health aide training program shall be coordinated by a registered professional nurse licensed in New Jersey with:
   1. A minimum of a bachelor's degree in nursing; and
   2. At least two years of full-time or full-time equivalent experience as a registered professional nurse within the five-year period immediately preceding application, one year of which shall have been in community health, public health or home care.

(b) The program coordinator's responsibilities shall include, but not be limited to, the following:
   1. Ensuring that the curriculum is coordinated and implemented in accordance with this subchapter.
   2. Establishing job descriptions indicating the responsibilities of each instructor;
   3. Ensuring that each instructor meets the qualifications specified in N.J.A.C. 13:37-14.8;
   4. Ensuring that the program sponsor has available the resume of each instructor;
   5. Ensuring that each student is supervised by a registered professional nurse during the student's clinical experience;
   6. Ensuring that the registered professional nurse supervising the student evaluates the student's clinical performance and transmits the results of the evaluation to the classroom nursing instructor; and
   7. Ensuring that patient care provided during the training period by the student is provided in a safe and competent manner and that the tasks and procedures delegated to the student in accordance with N.J.A.C. 13:37-6.2 do not exceed the tasks and procedures which the student has satisfactorily demonstrated as documented by the registered professional nurse.

(c) Program coordinators who do not have a bachelor's degree in nursing but who are otherwise bachelor's or master's prepared and who began their employment on or before June 6, 1994 may qualify for an exemption from the requirements of subsection (a) subject to Board approval.
13:37-14.8 Program instructor; responsibilities

(a) Except as set forth in (c) below, classroom instruction shall be provided by:
   1. A registered professional nurse licensed in New Jersey with at least two years of
      full-time or full-time equivalent experience as a registered professional nurse within the
      five-year period immediately preceding application, one year of which shall have been in
      community health, public health or home care; or
   2. A registered professional nurse who meets the qualifications set forth in (a)1 above and
      a multidisciplinary team of individuals which may include, but not be limited to, a
      registered dietician, licensed social worker, licensed psychologist, licensed physical
      therapist, mental health consultant, licensed speech-language pathologist, public health
      nurse, home economist, occupational therapist, and/or member of the clergy.

(b) Except as set forth in (c) below, supervised clinical experience shall be provided to the
    student by a registered professional nurse with:
   1. At least two years of full-time or full-time equivalent experience as a registered
      professional nurse within the five-year period immediately preceding application, one
      year of which shall have been in community health, public health or home care; and
   2. At least six months of full-time or full-time equivalent experience in the supervision of
      homemaker-home health aides.

(c) Program instructors who began their employment on or before June 6, 1994 and who have
    been previously approved by the Board may qualify for an exemption from the requirements of
    (a) and (b) above.

(d) The program instructor's responsibilities shall include, but not be limited to, the following:
   1. Developing a lesson plan for each content area prior to the starting date of the program.
      The lesson plan shall include:
      i. The behavioral objective(s) of the lesson;
      ii. The content of the lesson;
      iii. A description of clinical activities for each lesson;
      iv. The hours of instruction; and
      v. Method(s) of presentation and teacher strategies;
   2. Developing and implementing criteria for evaluating the classroom and clinical
      performance of students; and
   3. Developing and implementing criteria to determine whether a student has satisfactorily
      completed the training program.

13:37-14.9 Homemaker-home health aides; training program requirement

Every applicant for certification as a homemaker-home health aide in this State shall be required
to complete a training program approved by the Board of Nursing, except as provided in
N.J.A.C. 13:37-14.12 and 14.14. The applicant shall have completed the training program no
later than four months after commencing the program.

13:37-14.10 Application for certification; documents required
(a) An applicant for certification as a homemaker-home health aide shall submit the following to the Board:
   1. Evidence of satisfactory completion of a homemaker-home health aide training program approved by the Board;
   2. Evidence in such form as the Board may prescribe that the applicant is of good moral character, is not a habitual user of controlled substances and has never been convicted of or pleaded nolo contendere, non vult contendere or non vult to an indictment, information or complaint alleging violation of a Federal or state law; and
   3. The application fee as set forth in N.J.A.C. 13:37-5.8(b)1.

13:37-14.11 Competency examination

(a) Upon successful completion of an approved training program, the applicant shall register for the next scheduled administration of the competency examination administered by the Board or a Board-approved testing service.
(b) The applicant may be employed by a home health care agency under the supervision of a registered professional nurse while waiting to take the next scheduled administration of the competency examination.
(c) The competency examination shall be an examination administered by the Board of Nursing or a Board-approved testing service at least four times a year.
(d) The passing score on the examination shall be established and reviewed annually by the Board.
(e) An individual who fails the competency examination may retake the examination provided that he or she registers for the next scheduled administration of the examination.
(f) An individual awaiting the next scheduled administration of the examination in accordance with (e) above may continue to be employed by a home health care agency under the supervision of a registered professional nurse.
(g) If the individual fails in the second attempt to pass the examination, he or she shall successfully complete another homemaker-home health aide training program approved by the Board before taking the examination again. This individual shall not be employed as a homemaker-home health aide until he or she passes the examination.
(h) Upon application to the Board, an individual may satisfy the examination requirement for certification as a homemaker-home health aide by passing an oral competency evaluation in English or Spanish.

13:37-14.12 Waiver of training program requirement

Current nursing students who have successfully completed a course in fundamentals/basic nursing may take the competency examination without first completing an approved training program.

13:37-14.13 Initial certification and renewal

(a) An individual who passes the competency examination may be eligible for certification by the Board as a homemaker-home health aide.
(b) Certification shall be renewed on a biennial basis unless disciplinary action against the certified person has been instituted by the Board.

13:37-14.14 Certification by endorsement

(a) An individual certified as a homemaker-home health aide in another state who can verify successful completion of an equivalent homemaker-home health aide program and competency examination may be eligible for certification by endorsement.
(b) An individual who applies for certification by endorsement shall also submit an initial certification fee and an application for certification by endorsement fee as set forth in N.J.A.C. 13:37-5.8.

13:37-14.15 Duties and powers of the Board

(a) The Board may deny or revoke training program approval if the program sponsor has failed to comply with N.J.S.A. 45:11-24(d)(20) to (24) or this subchapter.
(b) The Board may investigate complaints made against a program sponsor or certified homemaker-home health aide and may conduct hearings in connection with such complaints.
(c) The Board may suspend or revoke the certification of a homemaker-home health aide who has violated any provisions of N.J.S.A. 45:11-24(d)(20) to (24) or this subchapter.
(d) Any Board action for certification suspension or revocation or training program revocation shall take place only upon notice to the licensee and the opportunity for a hearing in accordance with the Administrative Procedure Act, N.J.S.A. 52:14B-1 et seq., and the Uniform Administrative Procedure Rules, N.J.A.C. 1:1.
(e) Decisions on violations shall be a public record maintained by the Board pursuant to N.J.S.A. 45:11-24(d)(20) and (24).