

Scope of Services

Home Health and Hospice Care, Inc. is a not-for-profit home health and hospice agency established to provide community health care. The Agency shall provide the following services to patients who meet the eligibility criteria for each program:

- 1. **Home Health:** Skilled nursing, physical therapy, speech pathology, occupational therapy, medical social work, and home health nursing assistant services are provided on an intermittent basis to homebound patients in their place of residence. Care is provided under a plan of care as prescribed by the patient's physician.
- 2. Hospice: An interdisciplinary program of supportive services for terminally ill patients and their families. Care is provided under a plan of care as prescribed by a physician. Services include medical treatment, durable medical equipment, medical supplies, oxygen, and medication associated with the terminal illness, along with volunteer, spiritual, and bereavement services. Hospice services may be provided in the home setting, inpatient hospice center, or contracted facility.
- 3. General Inpatient (GIP) Hospice provides 24-hour nursing services that meet the total nursing needs of the patient on a short-term basis to provide pain control and symptom management that cannot be accomplished in the patient's home setting, or when death is imminent, and symptoms are uncontrolled. The focus is on ensuring the patient is comfortable.
- 4. **Respite** care is short-term (5 day) inpatient care provided to the patient only when necessary to relieve the family members or other patient caregivers from the physical and emotional strain of care for a terminally ill friend or relative. Placement is subject to bed availability.
- 5. **Continuous hospice care** (see Hospice Policy #22) is nursing care provided for a minimum of 8 hours a day, up to a maximum of 24 hours a day by an RN or LPN at least 51% of the hours provided. It is provided during periods of crisis as necessary to maintain the terminally ill patient at home. This may include pain and/or symptom crisis, imminent death of a patient, exacerbation of the terminal illness, etc.

This policy is requ	uired by:	☑ DHSR Licensure	☑ CHAP	☑ Medicare	☐ Other	
Effective Date:	August 1	1990				

Administration Policy #02





Review Date: 1997- 1999, 2001, April 2004, July 2006, May 2008 (PAC), May 2009

(PAC), December 2010, 2011 (PAC), March 2012 (PAC), June 2014 (PAC), March 2016 (PAC), June 2018, November 2020, May 2023,

February 2024

Revision Date: 1991 - 1999, 1/2000, 4/2001, 6/2001, 4/2002, 8/2002, 10/2003;

4/2005; 6/ 2005, 12/06, May 2007, June 2012, March 2013 (PAC), October 2013, June 2015 (PAC), September 2017, April 2019, June

2021, April 2022