**Hire Date:**  \_\_\_\_\_\_\_\_\_\_\_\_\_**3,6,9,12 Month Review**

**POSITION PURPOSE**

The Home Health Aide (HHA) delivers direct client cares and provides assistance to clients with activities of daily living as outlined in the client's plan of care. All services are provided under the supervision of a Registered Nurse (RN). Plays a key role in honoring clients’ rights and providing exceptional customer service, with a focus on client experience.

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| **Position Expectation** | **Employee Self-Evaluation** | **Manager Feedback** | **Goals (include deadlines)** |
| **Embed Recover Care Mission in Every Interaction**   * Exhibits guiding principles of Recover Care and deals honestly in every transaction and respond honorably in every interaction. * Uses candid, respectful communication, promoting consistency in word and action. * Listens and responds to the voices of customers and co-workers. |  |  |  |
| **Client Experience (Quality)**   * Puts client preference first and promotes client independence * Demonstrates compassion and empathy for clients and families and accepts emotional needs of clients * Verbal communications with clients, client family members, and agency staff are conducted in a respectful, professional manner * Respects professional boundaries as outlined in Recover Health’s employee handbook * Works scheduled hours and arrives on time to visits |  | * Run late clock in report * Check if any verbal or written PIPS * Check if any shifts canceled by CG |  |
| **Clinical Outcomes (Compliance)**  Performs personal care tasks, including:   * Assistance with personal hygiene consisting of bathing, grooming & hair washing. * Assist with food and diet activities Medication Administration * Ambulation and Exercise * Lifting, turning, positioning and transferring up to 30 pounds of weight. * Dressing and undressing. * Monitor, observe and report changes in client health. * Accompany client to obtain necessary medical services. * Additional nursing delegated tasks, as indicated by the Registered Nurse      * Ensures client safety by maintaining a safe environment, including cleansing of medical equipment as needed * Performs light household services essential to health care at home, such as laundry, bed making and cleaning * Maintains clinical record documentation according to Recover Health policy and procedures and state/federal regulations * Understands regulatory requirements governing Home Health Aide responsibility, as outlined by Minnesota’s Comprehensive License * Reviews, understands, and complies with the client plan of care, as directed by the RN * Reports to the nurse any incidents involving an employee or client within 24 hours of an occurrence * Immediately reports suspected incidents of client abuse or neglect to manager * Notifies nurse immediately regarding client change in condition * Honors Client Confidentiality, Rights, Privacy, and Reporting Maltreatment Expectations |  | * Run missed documentation report * Check if any incidences or grievance reports * Review client’s CG has worked with in the past months * Check criteria and certification in CC |  |
| **Employee Engagement**   * Participates in on-going educational opportunities provided by the agency to ensure compliance of State and Federal requirements or provides agency with proof of training completed outside of the agency which is used to meet requirements. * Engaged in self-elected learning * Serves as trainer/mentor for new staff, as requested by manager * Seeks assignment with clients in which a full range of HHA skills may be demonstrated |  |  |  |
| **Growth/Finance**     * Only works hours which are scheduled by Team Coordinator * Proactively communicates change in schedule to manager or Team Coordinator * Avoids the need to service guarantee any visit with client |  | * Check if any incidences or grievance reports |  |
| **Other Duties as Assigned**   * This job description is not intended to cover or contain a comprehensive listing of activities, duties or responsibilities that are required of the employee for this job. Duties, responsibilities and activities may change at any time with or without notice. |  |  |  |

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| **Performance Metrics –** To gauge an employee’s performance, results are measured using the following indicators and goals | **Actual** | **Goal** |
| Client Experience (Quality)   1. Average score of 7 or better on Client Visit Experience survey 2. Shift cancellations = < 3/year 3. Late visits = < 3/year |  |  |
| Compliance   1. 100% regulatory documentation complete within 24 hours of client visit |  |  |
| Employee Engagement   1. 100% of assigned required training hours complete by deadline 2. 100% participation in staff meetings, unless otherwise approved by manager |  |  |
| Growth   1. < 5% of overtime hours worked are unapproved by Manager 2. <2% of revenue written off by service guarantees offered for negative client experience |  |  |
| **Employee’s Feedback / Growth Goals (Must have at least one):**  **Review Summary:** | | |

**WORK SCHEDULE**

This position is an hourly position limited to forty (40) hours per week. Actual hours scheduled is dependent upon client needs.

**Please Indicate the Days and Times you are Available to** **Work if Changed: :**

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| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | Monday | Tuesday | Wednesday | Thursday | Friday | Saturday | Sunday | | |
| * AM * PM * NOC | * AM * PM * NOC | * AM * PM * NOC | * AM * PM * NOC | * AM * PM * NOC | * AM * PM * NOC | * AM * PM * C | * AM * PM * NOC | * AM * PM * NOC | * AM * PM * NOC | * AM * PM * NOC | * AM * PM * NOC | * AM * PM * NOC | * AM | | |
|  |  | PM |
| * NOC | | |

**Employee Referrals:** Provide three names of your CAN/HHA friends and include their phone number:

**1.**

**2.**

**3.**

I, the undersigned have read the contents of this \_\_\_\_\_\_\_ Month Review. I understand the Recover Care Mission and Philosophy as well as the job description and understand that I am accountable for all the duties and responsibilities outlined herein.

Employee Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Supervisor Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_