

# ENHANCING RN SUPERVISION OF HOSPICE AIDE SERVICES



## HOSPICE SERVICES

A hospice agency is responsible for all hospice services, including ongoing assessment, care planning, monitoring, and coordination and provision of care by the hospice interdisciplinary group (IDG). The IDG serves as the core component for this care coordination. The IDG determines if hospice aide services are necessary and assigns hospice aides to a specific patient by a registered nurse (RN) that is a member of the IDG. Hospice aides play an integral role in the delivery of hospice services and have frequent encounters with patients. An RN oversees the hospice aide, including supervision and preparing written patient care aide instructions as part of the plan of care.

The content in this Medicare Learning Network® educational product does not reflect waivers and flexibilities issued pursuant to section 1135 of the Act or short-term regulatory changes made in response to COVID-19. The Centers for Medicare & Medicaid Services (CMS) has issued blanket waivers and flexibilities and made temporary changes to its rules to prevent gaps in access to care for beneficiaries affected by the COVID-19 public health emergency. Please visit [MLN Matters® Article SE20011](#) for up-to-date information and a complete list of COVID-19 blanket waivers and flexibilities, and temporary regulatory changes.

## THE RN ROLE IN THE SUPERVISION OF HOSPICE AIDE SERVICES

Generally, the RN responsible for supervising the hospice aide is the RN responsible for the patient's nursing care. The role of the RN responsible for supervision is to assess the adequacy of the hospice aide services in relationship to the needs of the patient and family based on the plan of care established by the IDG. The hospice RN supervisory visits are only required for patients who are getting hospice aide services as part of their plan of care. Hospice aide supervision ensures that aides are:

- Following the patient's plan of care for completion of tasks assigned to a hospice aide by the RN
- Creating a successful interpersonal relationship with the patient and family that supports compassionate care
- Demonstrating competency with assigned tasks
- Complying with infection prevention and control policies and procedures
- Reporting changes in the patient's condition
- Honoring the rights of the patient

## HOSPICE RESPONSIBILITIES RELATED TO THE RN SUPERVISORY VISITS

### 14-day On-Site RN Supervisory Visit

The hospice is responsible for ensuring that the supervisory RN makes an on-site visit to the patient's home no less frequently than every 14 days. This in-person visit by the supervising RN to interview the patient and/or caregiver ensures that the hospice gives safe and appropriate services. Medicare requires the 14-day RN Supervisory on-site visit when Medicare identifies aide services as part of the plan of care and does not require the presence or direct observation of the aide.

If the RN becomes aware of an area of concern during the 14-day on-site visit, the RN will conduct a separate on-site visit at the patient's home to observe and assess the aide performing care. If the RN identifies a performance concern during this visit, the hospice aide must complete a competency evaluation based on the aide skills the RN identifies as the deficiency.

#### **As a reminder:**

- If the patient's plan of care includes hospice aide services and the RN makes a supervisory visit on a Tuesday, the next supervisory visit is due not later than the Tuesday that occurs 14 calendar days later. This would include appropriate documentation of the on-site visit and any relevant findings.
- Proactive planning is critical to meeting this requirement. The supervisory visit should occur before 14 days to avoid falling out of compliance. This applies to both the 14-day on-site visit and the annual on-site visit.

### Annual On-Site RN Supervisory Visit

Additionally, the hospice is responsible for ensuring that the supervisory RN makes an annual on-site visit to the location where a patient is getting care to observe and assess **each** aide while the aide is performing care. This ensures at least one in-person direct care observation occurs annually for each hospice aide.

## **HOSPICE RESPONSIBILITIES RELATED TO DOCUMENTATION OF RN SUPERVISORY VISITS**

### **Documentation for the 14-day On-Site RN Supervisory Visit**

The hospice is responsible for ensuring documentation in the clinical record that the RN conducted the 14-day on-site RN supervisory visit. This includes appropriate documentation of the on-site visit and any relevant findings or concerns. If the RN identifies areas of concern, the clinical record should also indicate that direct on-site supervision of the hospice aide took place during the next home visit by the aide in addition to any additional findings or related follow-up training.

### **Documentation for the Annual On-Site RN Supervisory Visit**

The Supervisory RN should document the annual on-site RN visit in accordance with the hospice's own policies and procedures for monitoring and tracking. The annual on-site supervisory RN visit documentation should indicate the aide's ability to demonstrate performance in following the patient's plan of care, demonstrating competency with assigned tasks, complying with infection control policies and procedures, reporting changes in a patient's condition, and creating successful relationships with the patient and family. These requirements also help the hospice provider by ensuring that the hospice addresses concerns raised by the patient and/or family/caregiver in a timely manner.

### **Documentation Methods**

The Centers for Medicare & Medicaid Services (CMS) recognizes that hospice providers use various types of documentation tools for care planning and quality-of-care assessment. CMS does not specify what type of tools or systems hospice providers use. However, hospice providers must have an identified system in place for monitoring plans of care to ease the tracking and completion of RN supervisory visits for hospice aide services. To help the tracking of the supervisory visits, a hospice may consider incorporating a review of these visits into the discussion at each IDG meeting. Additionally, hospices may include supervisory elements with every nurse visit assessment, including documentation regarding the aide's care and compliance with the care plan to ensure the hospice gives adequate supervision.

## RESOURCES

**Table 1. Hospice Resources**

RESOURCE	WEBSITE
Hospice Final Rule	<a href="https://www.cms.gov/Regulations-and-Guidance/Legislation/CFCsAndCoPs/Hospice">https://www.cms.gov/Regulations-and-Guidance/Legislation/CFCsAndCoPs/Hospice</a>
MLN Matters® Article SE20011	<a href="https://www.cms.gov/files/document/se20011.pdf">https://www.cms.gov/files/document/se20011.pdf</a>
OIG Report (A-09-18-18-03022) - Registered Nurses Did Not Always Visit Medicare Beneficiaries' Homes At Least Once Every 14 Days To Assess the Quality of Care and Services Provided by Hospice Aides (November 2019)	<a href="https://oig.hhs.gov/oas/reports/region9/91803022.pdf">https://oig.hhs.gov/oas/reports/region9/91803022.pdf</a>
State Operations Manual Appendix M – Guidance to Surveyors: Hospice	<a href="https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_m_hospice.pdf">https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/som107ap_m_hospice.pdf</a>

**Medicare Learning Network® Content Disclaimer, Product Disclaimer, and Department of Health & Human Services Disclosure**

The Medicare Learning Network®, MLN Connects®, and MLN Matters® are registered trademarks of the U.S. Department of Health & Human Services (HHS).