Enhancing RN Supervision of Hospice Aide Services

What’s Changed?
No substantive content updates.

A hospice agency is responsible for all hospice services, including:

- Assessments
- Care planning
- Monitoring and coordinating
- Providing hospice care by an interdisciplinary group (IDG)
The IDG:

- Decides if hospice aide services are needed
- Assigns hospice aides to a patient by a registered nurse (RN) that is a member of the IDG

Hospice aides play an important role in delivering hospice services. An RN oversees the hospice aide, including preparing written patient care aide instructions as part of the Plan of Care (POC).

The content in this Medicare Learning Network® educational product doesn’t reflect waivers and flexibilities issued pursuant to section 1135 of the Act or short-term regulatory changes made in response to COVID-19. CMS has issued blanket waivers and flexibilities and made temporary changes to its rules to prevent gaps in access to care for patients 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.

**RN’s Role in Supervising Hospice Aide Services**

The RN responsible for supervising the hospice aide is the RN responsible for the patient's nursing care. The role of the RN is to find out if hospice aide services meet the needs of the patient and family based on the IDG’s POC. The hospice RN supervisory visits are only required for patients who get hospice aide services as part of their POC.

Hospice aide supervision makes sure aides:

- Follow the patient’s POC
- Create a successful relationship with the patient and family that supports compassionate care
- Show ability with assigned tasks
- Follow infection prevention and control policies and procedures
- Report changes in the patient’s condition
- Honor the rights of the patient

**RN Supervisory Visits**

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

The hospice must make sure that the supervisory RN visits the patient’s home at least every 14 days. For example, if the patient’s POC includes hospice aide services and the RN makes a supervisory visit on a Tuesday, the next supervisory visit is due the Tuesday that is 14 calendar days later.

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.

Medicare requires the 14-day RN Supervisory on-site visit when aide services are part of the patient’s POC, but doesn’t require the presence or direct observation of the aide.
The RN will conduct a separate on-site visit at the patient’s home to see and assess the aide doing care if the RN learns of an area of concern during the 14-day on-site visit. The hospice aide must complete an ability evaluation related to the lacking skill if the RN finds a concern during this visit.

**Annual On-Site RN Supervisory Visit**

The hospice also must make sure that the supervisory RN makes an annual on-site visit to the location where a patient is getting care to see and assess each aide while the aide is doing care. This way at least 1 in-person direct care observation occurs annually for each hospice aide.

**Documentation of RN Supervisory Visits**

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

The hospice must keep documentation:
- In the clinical record showing that the RN conducted the 14-day on-site RN supervisory visits
- Of the on-site visit and any relevant findings or concerns

The clinical record should also show that direct on-site supervision of the hospice aide took place during the next home visit by the aide in addition to other findings or related follow-up training if the RN finds areas of concern.

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

The Supervisory RN should document the annual on-site RN visit per the hospice’s own policies and procedures for monitoring and tracking. The annual on-site supervisory RN visit documentation should:
- Show the aide’s performance per the patient’s POC
- Show ability with assigned tasks
- Follow infection control policies and procedures
- Report changes in a patient’s condition
- Create successful relationships with the patient and family

These requirements help the hospice provider discuss concerns raised by the patient and family/caregiver in a timely manner.

**Documentation Methods**

CMS doesn’t specify what type of tools or systems hospice providers use to plan and assess care. However, hospice providers must have a system in place to monitor RN supervisory visits for hospice aide services.
A hospice may include:

- A review of these visits into the discussion at each IDG meeting
- Supervisory elements with every nurse visit assessment
- Documentation regarding the aide’s care and compliance with the care plan

**Resources**

- Fiscal Year 2022 Hospice Final Rule
- Hospice Conditions of Participation
- Medicare Benefit Policy Manual, Chapter 9 – Coverage of Hospice Services Under Hospital Insurance
- Medicare Claims Processing Manual, Chapter 11 – Processing Hospice Claims
- 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)

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