

In-Home Care Agency Frequently Asked Questions

1. What is an In-home Care Agency?

An in-home care agency is an agency primarily engaged in providing in-home care services for compensation to an individual in that individual's place of residence. In-Home care agencies are not home health agencies; they do not provide home health services as defined in [ORS 443.005](#). In-home care services are personal care services furnished by an in-home care agency, or an individual under an arrangement or contract with an in-home care agency, that are necessary to assist an individual in meeting the individual's daily needs, but do not include curative or rehabilitative services.

2. Who must be licensed?

You must become licensed as an in-home care agency if you are doing one or more of the following: scheduling caregivers, assigning work, assigning compensation rates, defining working conditions, negotiating for a caregiver or client for the provision of services, or placing a caregiver with a client. To determine if your future business qualifies as an in-home care agency, please see our determination form online [here](#).

3. What type of services do In-Home Care Agencies provide?

Types of services that in-home care agencies provide include but are not limited to: bathing, personal grooming and hygiene, dressing, toileting and elimination, mobility and movement, nutrition/hydration and feeding, housekeeping tasks, laundry tasks, shopping and errands, transportation, and arranging for medical appointments. In home care agencies may also provide medication and nursing services, but these services require additional conditions for approval. These conditions include additional policies and procedures, and a nurse on staff.

4. Where can I find the Statutes and Rules for In-Home Care Agencies?

The statutes (chapter 443) can be found online [here](#).

The rules (chapter 333, division 536) can be found online [here](#).

5. What do I need to do to apply for an In-home Care Agency License?

- Fill out an in-home care application, found online [here](#).
- Include a check or money order for \$1500.00; payable to the “Oregon Health Authority”.
- Develop policies and procedures, and include a sample (more information below).
- Include a resume for your administrator (more information below).
- Send everything listed above to: HCRQI, PO Box 14450, Portland OR 97293. Please do not send in partial applications or incomplete documentation.

6. When does the survey happen and what will it entail?

When your agency has submitted all above required documentation to this office **and** successfully completed the development of your policies and procedures; a representative from this office will call and schedule an onsite visit (also called a survey).

During your initial survey you will need to submit all your policies and procedures pertaining to the Oregon Administrative Rules [333-536](#). All your policies and procedures should be easily identifiable for the surveyor to review. Please ensure that you have created all required policy and procedures by cross-referencing them with the survey checklist found online [here](#).

During the survey we will review the following:

- Your Agencies policies and procedures for operating and providing services as an In-Home Care Agency in Oregon, which includes the policies and procedures pertaining to the Oregon Administrative Rules Division 536, Chapter 333, Section 0045-0090 (including a Quality Improvement Plan). Please use the surveyor tool to ensure that you have developed a policy and procedure for all of the required rules. You can find the survey checklist online [here](#).

A policy lays out what is going to be done; a course of action to guide decision making.

A procedure describes exactly how the policy is going to be carried out; in much more detail.

- A current resume and complete personnel file for the “Administrator” that includes:
 - Evidence that all position qualifications have been met,
 - Evidence of at least two years of professional or management experience in a health related field or program, including the employer’s name and location, the dates of employment including month and year, the title of the position held, and the duties performed,
 - A current position description that has been signed by the employee and dated,
 - Evidence of orientation, training and competency if applicable,
 - Evidence of possession of high school diploma or equivalent
 - Evidence of a current Driver’s License with current auto insurance if this position requires transporting clients,
 - Evidence that criminal background has been conducted for this employee, and
 - All documents required by the State of Oregon and/or the Bureau of Labor.

- At least one active “Caregiver” personnel file that includes:
 - Evidence that all position qualifications have been met,
 - A current position description that has been signed by the employee and dated,
 - Evidence that the employee has received the orientation, training and competency, as stated in our rules 333-536-0070,
 - Evidence of a current Driver’s License with current auto insurance if this position requires transporting clients,
 - Evidence that criminal background has been conducted for this employees,
 - All documents required by the State of Oregon, Bureau of Labor, and
 - Evidence of compliance with agency employee health policies.

- A sample admission packet that includes the information that you will give your client:
 - The Client’s intake form and assessment form your agency will use,
 - Your agency’s Disclosure Statement
 - Your agency’s Client’s Bill of Rights, and
 - A sample service plan and a sample client record with all the required documents.

- If your agency is providing Medication Reminders:
 - The policy and procedures for medication reminders.

- If your agency is providing Medication Services:
 - The policy and procedures for Medication Services, and
 - All training and supporting documents as required, by rule, to provide this additional service.

- If your agency is providing Nursing Services:
 - The policy and procedure for Nursing Services, and

- All training and supporting documents required, by rule, to provide this additional service.

If your agency is providing medication or nursing services include:

- A complete personnel file (as required for the Agency Administrator) for your Nurse, and
- A current copy of the Nurse's License issued by the Oregon Board of Nursing.

7. What happens if I pass the survey?

A license will be issued for your agency or subunit within ten business days with the name of your agency. The license is not transferable. **If the ownership, address or administrator of your agency or subunit changes, your agency shall notify this office, in writing, within 30 days of the change.** Some changes require a fee. The license must be posted in a conspicuous location at your agency. You are not allowed to accept clients until the Department has approved your agency as In-Home Care Agency licensed through the State of Oregon.

8. What happens if I don't pass the survey?

- ❖ You will receive a list of required corrections to your application
- ❖ You must complete the corrections
- ❖ Notify this office of the completed corrections
- ❖ Your application will be reconsidered and a new survey will be rescheduled in the order it is received with all other initial applications.

9. Where can I get more information?

See the attached Tips, Resource and Guideline pages. You can also find an informational PowerPoint online [here](#). You can also contact Health Care Regulation and Quality Improvement office at 971-673-0540.

Guidelines for Abuse and Complaint Reporting

If you have reasonable cause to believe your client is being, or has been abused, you are required to report this information to the appropriate Department of Human Services (DHS) office immediately. See contact information listed below:

Elder Abuse Reporting

You must immediately make an oral report, by telephone or otherwise, to your county DHS office of Seniors and Peoples with Physical Disabilities (SPD) or local law enforcement agency. If you are unable to locate the SPD number for your county you must call the Salem SPD office at (503) 945-5811 or 1-800-232-3020, and they will direct you.

Child Abuse Reporting

You must immediately make an oral report, by telephone or otherwise, to your county DHS office of Children, Adults and Family Services (CAF) or local law enforcement agency. If you are unable to locate the CAF number for your county you must call the Salem CAF office at (503) 945-5600, and they will direct you.

Mentally or Developmentally Disabled Persons Abuse Reporting

You must immediately make an oral report, by telephone or otherwise, to your county DHS office of Addictions and Mental Health Division (AMH) or local law enforcement agency. If you are unable to locate the AMH number for your county you must call the Salem AMH office at (503) 945-9495 or 1-866-406-4287, and they will direct you.

Non-Long Term Care Health Care Facility Complaint Reporting

Oregon Health Authority
Public Health Division
Health Care Regulation and Quality Improvement (HCR-QI)
800 NE Oregon St. #305
Portland, OR 97232
Phone: (971) 673-0540
Fax: (971) 673-0556
Email: mailbox.hclc@state.or.us
Website: www.healthoregon.org/hcrqi

An **Elder is defined as any person 65 years of age or older.

A **Child is defined as an unmarried person who is under 18 years of age.

IN-HOME CARE RESOURCES For Oregon

In-Home Care organizations that represent community based care providers and the State Agency responsible for Licensing and Compliance:

Oregon Alliance of Senior & Health Services

7340 SW Hunziker, Suite 104
Tigard, OR 97223

Phone: 503-684-3788
Fax: 503-624-0870

Deputy Director: Ms. Margaret Cervenka

Oregon Health Care Association (OHCA)

11740 SW 68th Parkway, Suite 250
Portland, Oregon 97223

Phone: 503-726-5260
Fax: 503-726-5259

Director of Policy & Programs, In-Home Care: Ms. Pamela Ruona

Oregon Association for Home Care (OAHC)

1249 Commercial Street SE
Salem, Oregon 97302-4203

Phone: 503-364-2733
Toll Free: 1-800-352-7230
Fax: 503-399-1029

Executive Director: Ms. Sarah A. Myers

State of Oregon- Health Care Regulation & Quality Improvement (HCRQI)

800 NE Oregon St., Suite 305
Portland, OR 97232

Phone: 971-673-0540
Fax: 971-673-0556

Client Care Surveyor: Ms. Duenna Ignacio-Kawanishi

Preparation Tips

1. It is important to be ready for the survey. Otherwise, it may seriously delay your ability to obtain licensure.
2. Get organized.
3. Get help.

Common Pitfalls for Initial Licensure

1. There is no organization.
2. The policies and procedures are incomplete or inadequate.
3. Rely too heavily on franchise materials and not carefully adapting to OARs.
4. Incomplete personnel files, including inadequate background checks.
5. Inadequate administrator qualifications; administrators must have a minimum of 2 years of professional or managerial experience in a health care related field.
6. Not ready to provide care immediately.