



Pennsylvania Compensation Rating Bureau

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PENNSYLVANIA TEST AUDIT PROGRAM

BULLETIN #87

NURSING HOME, PERSONAL CARE HOME AND RESIDENTIAL CARE FACILITY

CLASSIFICATION GUIDELINE

With the understanding that the assignment of an employee's payroll may vary according to individual circumstances, the following guidelines have been developed to aid in the classification of employees of a typical nursing home/personal care home. Proper documentation on audit worksheets should be added when exceptions are made to these guidelines. These guidelines, to varying degrees, affect the following basic business classifications.

Code 960 "NURSING AND CONVALESCENT HOME"

Code 974 "RETIREMENT OR LIFECARE COMMUNITY"

Code 979 "RESIDENTIAL CARE FACILITY FOR THE ELDERLY – NON MEDICAL"

Readers should take note that nursing home/personal care home employees do not have to provide actual "hands on care" to the patients and/or residents in order to have their payroll assigned to one of the above basic classifications. The object of the classification system is to group insureds into classifications so that the rating value for each classification reflects the exposures common to such distinct business enterprise (See Rule IV. C. 2. and C. 3.) It is the business of the insured that is classified within Pennsylvania, not the separate employments, occupations or operations within the business.

Employees who typically comprise the basic classification for a nursing home/personal care home are activity staff, beauticians or barbers (usually remunerated through a 1099), dining room set-up and servers, drivers, food preparation, housekeeping, laundry, maintenance/plant including supervisors, nurses (RN,CNA, LPNs), security and therapists (physical and speech).

Employees typically considered to be office employees include accounting, accounts payable and accounts receivable, business office, bookkeeping, finance, human resources and the office manager. These employees must work in a physically separate office as defined in the Manual.

Note the classifications contemplated by this guide do not permit payroll division with Code 951, Outside Sales.

With the above statements in mind, the payroll of nursing home/personal care home employees should be assigned in the following manner.

ADMINISTRATOR/EXECUTIVE DIRECTOR

Each facility has a licensed nursing home administrator on site that is in charge of all operations at the facility. This employee prepares budgets, reviews departmental reports, answers questions of department managers, deals with licensing issues, handles public relation issues, attends community events to promote the business, deals with HIPAA (Health Insurance Portability and Accounting Act) regulations, deals with employee benefits, handles safety issues, interprets procedures and writes plans of correction based on inspection reports. The employee will attend patient care plan meetings. The administrator will make rounds of the facility on a regularly scheduled basis. Each round will vary as to the amount of time it takes depending on the size and complexity of the facility. During rounds, the administrator walks the halls to observe that the patients are being cared for properly. The administrator makes sure no restraints are being used, there are no unreported maintenance issues, no housekeeping issues that are unsolved, the floor has adequate staffing and the general appearance of the facility is acceptable.

The administrator will stop and talk to residents to inquire if they have any complaints or concerns and will talk to family members and volunteers who may have questions. The administrator will not provide direct patient care. By state law (for nursing homes only) the administrator is not permitted to feed, toilet, administer medications or provide any other type of care. However, administrators do keep track of how often nurses see patients.

Administrators should have their payroll assigned to the appropriate basic classification as they are regularly exposed to the operative hazards of the nursing home/personal care facility. An administrator's job duties fall beyond the Manual definition of a clerical office employee.

ASSISTANT ADMINISTRATOR

An assistant administrator performs many of the same job duties as the administrator and reports directly to the administrator in the chain of command. This employee may assist the administrator in the preparation of budgets, review departmental reports, answer questions of department managers, deal with licensing issues, handle public relation issues, attend community events to promote the business, deal with HIPAA regulations, deal with employee benefits, handle safety issues, interpret procedures and write plans of correction based on inspection reports. The employee will attend patient care plan meetings. The assistant administrator may make rounds of the facility on a regularly scheduled basis. Each round will vary as to the amount of time it takes depending on the size and complexity of the facility. During rounds, the assistant administrator may walk the halls to observe that the patients are being cared for properly. They make sure no restraints are being used, there are no unreported maintenance issues or housekeeping issues that are unsolved, the floor is adequately staffed, and the general appearance of the facility is acceptable.

The assistant administrator may stop and talk to residents to inquire if they have any complaints or concerns and may talk to family members and volunteers who have questions. The assistant administrator may or may not provide direct patient care. Assistant administrators should have their payroll assigned to the appropriate basic classification, as they are regularly exposed to the operative hazards of the nursing home/personal care facility. See Test Audit Bulletin # 65 for reference regarding the definition of "regular and frequent." An assistant administrator's job duties fall beyond the Manual definition of a clerical office employee.

ACTIVITY DIRECTOR

The activity director is in charge of the recreational and educational activities at a nursing home. The director is responsible for setting up a schedule, ordering supplies for the activities and, in some of the smaller homes, directly supervising the employees and residents in activities. If the activities director has a physically separate office, does not participate nor directly supervise (this activity may be done by the

assistant activity director) and has no regular job duties in or about the facility, then the employee may have their payroll assigned to the clerical office classification. However, most activity directors are responsible for organizing and directly supervising the event and are present at the activity, whether it be on the premises of the facility or at another location (e.g., a shopping trip to a local mall). As such, the payroll of an activity director is generally assignable to the basic classification.

ADMISSIONS DIRECTOR

The admissions director may have alternate job titles such as Marketing Director, Social Services Director, Public Relations Director or Director of Development. Regardless, this employee is responsible for working with residents and their families and guiding them through the admission process. The admissions director will explain facility rules (such as marking clothing with a name) and patients' rights. The employee will work with family members who wish to bring furniture from home. The admissions director may explain that all electrical appliances must be inspected for safety (no frayed wires). If a family member visits and removes money from the patient, the admissions director must determine if an abuse situation exists and deal with reporting suspected abuse. If a patient is not happy with his room or roommate, the admissions director will determine if the patient can be transferred to another room. The admissions director may coordinate family concerns with department heads. If two family members disagree about treatment or how a resident's money is being spent, the admissions director may intervene and mediate the situation. They may do the charting about the social interactions of residents. They will plan care meetings. If a patient passes away or moves to another facility, the admissions director may contact the family about collecting personal belongings. They may also work with the ombudsman (a representative from the Area Agency on Aging that is assigned to a nursing home). The payroll of an admissions director is usually assigned to the basic classification, as they regularly spend time in and about the facility even though their primary job duties keep them in a physically separate office.

CASE MANAGER

This position is responsible for the management of the rehabilitation department. The employee directs the therapists and gathers information on the level of care needed for minimum data sets (MDS) forms. The case manager maintains the resident's logs and compares the amount of therapy provided to the resident's care plan. The case manager usually does not provide any rehabilitation services. This employee may go to the local hospital to screen charts for potential admissions. The case manager deals with discharge personnel in hospitals regarding possible admissions to their facility. While at the nursing home, the case manager attends managed therapy meetings to see that therapy provided to a resident is in compliance with Medicare regulations. The employee prepares communications bulletins and may write articles for a news bulletin that is distributed to residents.

The case manager meets with physicians and social service workers to determine if any residents in the assisted living facility need to be moved to the nursing home. The employee is responsible for "hospitality" when new residents move into the independent living cottages, if such a facility exists. The employee will go to the resident's apartment and visit with the resident, answering any questions while providing information about the facility.

The case manager's payroll is properly assigned to the basic classification.

CENTRAL SUPPLY CLERK

This employee is responsible for distributing supplies to the floors and assuring the cupboards are stocked with needed supplies. This employee orders the supplies and determines what is chargeable to a resident. The employee will physically stock the supplies in the units. Some facilities title these employees as purchasing, but they work in an area similar to a storage office. They will make deliveries of supplies throughout the facility, and their control/purchasing is confined to a computer, paperwork or

reports. Their offices are usually locked, since this is also where the supplies are located. The central supply clerk's payroll is properly assigned to the basic classification.

CHAPLAINS

A chaplain is a clergyman in charge of the nursing facility's chapel. They organize and conduct religious services for the residents of the nursing facility. They will visit non-ambulatory and ambulatory facility residents to provide spiritual counseling, individual worship services and counseling or just to see how a resident is faring in the facility. They may conduct in-room communions and/or last rites. Their payroll is properly assigned to the basic classification

CLINICAL DIRECTOR

The clinical director's job responsibilities usually involve updating and reviewing the resident's medical and treatment charts and folders. If they review medications and treatments on the floor or in the resident rooms or if their offices are not physically separate from all other areas of the nursing facility, the payroll of the clinical director is properly assigned to the basic classification.

DIETARY COORDINATOR /DIRECTOR /MANAGER / SUPERVISOR

In some of the larger facilities there is a Dietary Director/Manager who maintains all the dietary requirement records for the residents. Many residents have varying dietary needs, so this is often a critical position. This employee would develop menus and oversee food service. This may entail charting the intake of food by the residents. These duties are performed both in the office and on the floor. The duties also involve supervising the preparation of the food and trays. The employee may directly supervise dietary preparation in the kitchen or walk throughout the facility when meals are served to see that the patient is given their dietary requirements. The payroll of the dietary coordinator/director/manager is properly assigned to the basic classification.

DIRECTOR OF NURSING (DON)/ASSISTANT DIRECTOR OF NURSING (ADON)

Director of Nursing - This position is usually charged with overseeing the entire nursing/care functions of the facility. This employee is responsible for administering the nursing program to maintain standards of patient care and advises medical staff, department heads and administrators in matters related to nursing service. The employee analyzes and evaluates the quality of care administered by the nursing staff and visits residents routinely. The DON does not do any actual patient care.

Some nursing directors move throughout the facility all of the time, while others less so, spending the majority of their time in the office. This employee performs the scheduling of the nursing staff, all of the interviewing and hiring of nursing staff, and may review the unit manager's work. Due to the nature of the employee's work and the fact that the position requires the visitation of residents and the evaluation of the quality of care administered by the nursing staff, the payroll of the director of nursing is properly assigned to the basic classification.

Assistant Director of Nursing - This position is responsible for directing the programs of the facility. The employee collaborates in composing and implementing nursing policy, practice and quality assurance throughout the nursing department. The employee does not do any actual patient care. Primarily, their job responsibilities center around the quality assurance programs. The ADON makes sure all nursing departments are ready for the state survey. The ADON develops the schedule for quality assurance audits and reports. The employee directs, supervises and assigns projects and programs to a quality assurance analyst. The employee develops and directly oversees the Infection Control Program and reports monthly to the Quality Assurance Committee. The employee may oversee the wound care program and plans, organizes and oversees the staff development program reviewing the accurate

recording of in-service attendance records. The ADON interacts on a regular basis with patients, families, physicians and facility employees and makes tours throughout the facility on a daily basis.

In smaller facilities the ADON is the supervisor on the floor. Their time may be split between directly supervising the registered nurses and other nursing staff and completing paperwork in an office. The payroll of the ADON is properly assigned to the basic classification.

FACILITIES MANAGER

This employee, in most cases, has direct floor duties and can do hands-on repair and maintenance work in and about the facility. This employee will also conduct evaluations for major repairs and improvements to the facility that require the hiring of outside contractors. The payroll of the facilities manager is properly assigned to the basic classification.

HOME HEALTH CARE OPERATIONS

Payroll developed by separate staff(s) performing home health care services shall be separately classified as provided in the Pennsylvania Workers Compensation Manual.

INVENTORY CONTROL COORDINATOR

This employee is responsible for the control and purchasing of hard goods and supplies used throughout the facility. This employee usually has no hands-on responsibilities on the facility floor. They usually make no deliveries of supplies throughout the facility, and their control/purchasing is confined to data entry, computer-generated reports and related paperwork. The payroll of the inventory control coordinator is properly assigned to Code 953, Office, if their job duties are confined to working in a physically separate office.

MEDICAL DIRECTOR / MEDICAL COORDINATOR

The medical director is usually a physician who is only active on a part-time basis. When he/she is active, the duties are usually visiting patients and making rounds within the nursing home. The payroll of the medical director is properly assigned to the basic classification.

MAINTENANCE DISPATCH

These employees' major job responsibility is to dispatch work assignments to the maintenance employees. These employees are found in larger type facilities. They spend no time performing maintenance work in most facilities. They do not supervise the maintenance employees or do any inspections of the facility. As long as their job duties are confined to working in a physically separate office, their payroll can be assigned to Code 953, Office.

MASHGIAH

A mashgiah is an Orthodox rabbi or a person appointed by such a rabbi whose responsibility is to prevent violations of Jewish dietary laws by inspection of facilities where food assumed to be kosher is prepared for the public. These employees enter the kitchen area of the facility to make sure certain foods are kosher. This job position is usually found in faith-based facilities, and their payroll is properly assigned to the basic classification.

MEDICAL RECORDS CLERK/WARD CLERK

The medical records clerks are normally responsible for updating resident's charts and medical records. If they spend no time picking up and dropping off charts at either nurses' stations or resident's rooms,

assign Code 953. If they perform any of the above duties on a regular basis on the floor, their payroll is properly assigned to the basic classification. If they complete their updates in a physically separate office, their payroll may be assigned to Code 953, Office.

In larger facilities, medical records clerks usually work in the business office and use computers to maintain a database of records. In such circumstances assign Code 953. In the smaller facilities, they may have other duties, including the delivery of medical supplies to nursing stations and interchanging labor as a central supply clerk. If a medical records clerk has any of these duties, then their payroll should be assigned to the basic classification.

NURSING SECRETARY/SCHEDULER

These employees do the paperwork for the nursing department, such as typing, scheduling, filing and other administrative support job duties. Their payroll may be assigned to Code 953, Office, if they work in a physically separate office and have no floor exposure. If they have their desks at the nursing station that is on the floor, their payroll would be assigned to the basic classification.

RECEPTIONIST

Receptionists answer incoming telephone calls and direct them to the correct extension. This employee also greets incoming visitors and asks them why they are at the facility. They may direct all visitors to sign a guest register. They may assist staff in making photocopies. They may maintain the postage meter and be responsible for outgoing mail. They will observe resident safety while the resident is in the lobby area. If one of the residents needs assistance or falls while in the lobby area, the receptionist may quickly page an aide to assist the resident rather than walk out to the resident herself. The receptionist will type the necessary information onto a new resident's identification bracelet. They may accept payment from residents or their representatives. They may walk out to the office, lobby and/or solarium to lock up the doors at the close of each day.

Receptionists in a nursing home facility not only greet and direct visitors but also provide a measure of security/safety for wandering residents and for visitors as well. Such an arrangement invariably precludes the assignment of Code 953, Office. Their payroll is properly assigned to the basic classification.

REGISTERED NURSE ASSESSMENT COORDINATOR (RNAC)

These employees are responsible for the completion and accuracy of the resident care planning process and monitoring level-of-care changes and determinations. The RNAC oversees the development and implementation of individual resident care plans and ensures the resident's reaction and ongoing development. They are case managers for the residents and compile all of the paperwork that is needed to deal with the Health Maintenance Organizations that reimburse the nursing home for the treatment and care of the resident. They input all types of information into the computer about the activity level of all of the residents. They complete forms called Minimum Data Sets (MDS) for each new admission to the facility. They complete MDS reviews on each resident on a quarterly basis, as well as an annual MDS. The form must be completed for each resident at least once a quarter and at other times required by Medicaid, including admission and change in condition.

The RNAC compiles this information by a comprehensive review of the patient charts. The form contains many different sections used to determine how well the resident is able to function. The dietician is responsible for completing the dietary section. The physical therapy department will complete a range of motion study and will complete the appropriate section of the form. The form is a very comprehensive form that gathers information about the resident's social skills, communication skills, activities, cognitive skills, nutrition, vision and activities of daily living.

Nursing homes are reimbursed by Medicare for the care of a patient based on the condition of the patient. If a patient is in a severe condition and requires extensive medical condition, Medicare will reimburse more funds for that patient than a patient who is more self-sufficient. The RNAC writes up reports to be submitted to Medicare. These employees will visit nurses' stations to discuss the patient's progress with a DON or nursing supervisors. The RNAC will take the patient's charts back to their office to type up the reports. These individuals will also visit patient rooms to do evaluations.

The amount of time an RNAC spends working throughout the facility varies. An assessment nurse has to assess the patient, and different department heads complete parts of the form, but the RNAC signs off on the form. The RNAC places his/her license on the line by signing a form and not verifying the data is correct. For example, if a report states a patient has bedsores, the RNAC will must go on the floor and physically turn the patient over to verify this is correct. Direct observation of the resident, as well as communication with the resident's direct caregivers across all shifts, are essential for the RNAC to complete their job according to the Resident Assessment Instrument User's Manual, a manual issued by the Federal government regarding the MDS. Based on the above information and job duties, the payroll of RNACs is properly assigned to the basic classification.

RESTORATIVE PROGRAMS DIRECTOR

This employee is responsible for making sure that the residents eat regularly, walk and engage in the therapy that is provided by the insured's restorative aides. The employee will go out to see the residents and test them and regularly walks around the facility. Part of the employee's job responsibilities requires the employee to walk, lift and bend. The restorative programs director directly supervises the restorative aides and reviews them doing their jobs. Their payroll is assigned to the basic classification.

STAFF DEVELOPMENT/IN-SERVICE TRAINING COORDINATOR

These employees are registered nurses and are the "clinical experts." When a new employee is hired, these employees will do an orientation with the employee. They review corporate compliance, explain workers' compensation and infection control, and introduce the employee to his manager. They verify that all forms are completed as required for the new hire. They attend "stand-up meetings." These are meetings that occur at the change of a shift. The employees completing their shift will explain any changes in a resident's condition to the new shift. These meetings used to take place at the nursing station, but, due to HIPPA regulations, they are now held in an activity room.

They are responsible for assuring the staff's credentials and licenses are up-to-date. They assure nurses have the correct number of continuing education credits. They arrange for educational classes to be provided to employees. They may arrange for the maintenance department to provide information in a classroom setting on fire safety and the correct operation of a fire extinguisher. They may arrange for housekeeping to conduct a class for staff on infection control. They will gather information from the floor supervisors verifying nurses have met IV competencies (inserted the correct number of IVs successfully in the correct amount of time).

They regularly spend time doing classroom teaching of employees. They will teach and provide instruction classes on hand-washing techniques, resident safety, wound care and proper lifting mechanics. Their payroll is properly assigned to the basic classification.

STAFF COORDINATOR

This employee would only work from their office completing staffing schedules for the various departments. Their main job duty is to make sure there are enough employees for each shift.

If they have no other job duties and their scheduling work is done in a physically separate office, then the payroll of these employees may be assigned to Code 953, Office.

TRANSPORTATION DISPATCHER

Some of the larger facilities have employees who sit in office and schedule transportation for the residents for shopping, doctors' visits and family visits. If the employee has no other job duty and their scheduling work is done in a physically separate office, then their payroll may be assigned to Code 953, Office. If the employee regularly engages in driving the residents to and from their destinations, their payroll is properly assigned to the basic classification.

UTILIZATION MEDICAL REVIEWER - UMR

These individuals review charts from medical records for the doctors to determine patient medical needs.

These individuals work in enclosed offices and usually have no floor duties. If their work is done in a physically separate office, then the payroll of these employees may be assigned to Code 953, Office.

UNIT CLERK/SECRETARY

This employee is responsible for ordering supplies for the nursing department and checking secretarial notes for quality. The unit clerk will code bills for insurance companies, Medicare and Medicaid. These employees may work on the nursing home floor at a desk behind the nursing stations, or they may work in a physically separate office. Their responsibilities include maintaining all unit records of the patient residents. The employee answers the phones, schedules medical appointments for residents on the unit and marks files if a resident leaves the facility. The employee coordinates all labs and doctor appointments by telephone.

They call for transportation for all of the appointments and perform chart-thinning work according to the nursing home's policy. They maintain all forms and active files and coordinate all lab orders by telephone. They fax paperwork to pharmacies and physicians and complete admission/readmission checklists for each admission.

This employee is responsible for the secretarial work on the unit. The employee assures doctor's orders are placed in the patient's chart. The employee may work at a desk in the nursing station on the floor or may be in a physically separate office. If the employee has no regular job duties on the nursing room floor and works in a physically separate office, then their payroll may be assigned to Code 953, Office. If they work on the nursing home floor at a desk behind the nursing station, then their payroll should be assigned to the basic classification.

VOLUNTEER COORDINATOR

The coordinator who has no duties/supervisory responsibilities over the volunteers on the floor, who simply schedules and coordinates volunteer's activities, can be classed as clerical. They usually work in an enclosed office. Many coordinators simply spend their time on the telephones, recruiting volunteers or asking them to come in on a particular day. If they have no regular job duties in or about the facility and they work in a physically separate office, their payroll should be assigned to Code 953, Office. Those volunteer coordinators who supervise the volunteers on the floor should have their payroll assigned to the basic classification.