Home Care Process Flow Toolkit

Four ready-to-adapt workflows for inquiries, client starts, hiring, and client concerns.

> **Purpose.** These flows help a home care agency handle four daily processes the same way every time: new inquiries, client starts, hiring, and client concerns. They are templates. Review them against your state rules, payers, and policies before use.

How to use this toolkit

1. Replace the role names with your own titles. One person may hold several roles in a small agency.
2. Set your target times, and name your systems.
3. Add state-specific steps, such as licensing, registry, and training rules.
4. Train staff using real examples, and post the flow where staff can use it.
5. Audit five files each quarter to see whether the process is being followed.

Key decision rules

Rule	Why it matters
Safety comes first	If someone may be in danger or harmed, protect them and report before completing routine steps.
Reports go outside when required	Telling a supervisor may not meet a personal mandated reporting duty.
Client preferences have limits	Do not assign workers based on preferences about race, color, national origin, or religion. Get legal advice on gender requests for intimate care.
No assignment before clearance	Do not place a worker until required checks, training, and approvals are complete.
Only authorized people sign	Confirm legal authority before a representative signs.
Records tell the truth	Record what happened, when it happened, and who was told.

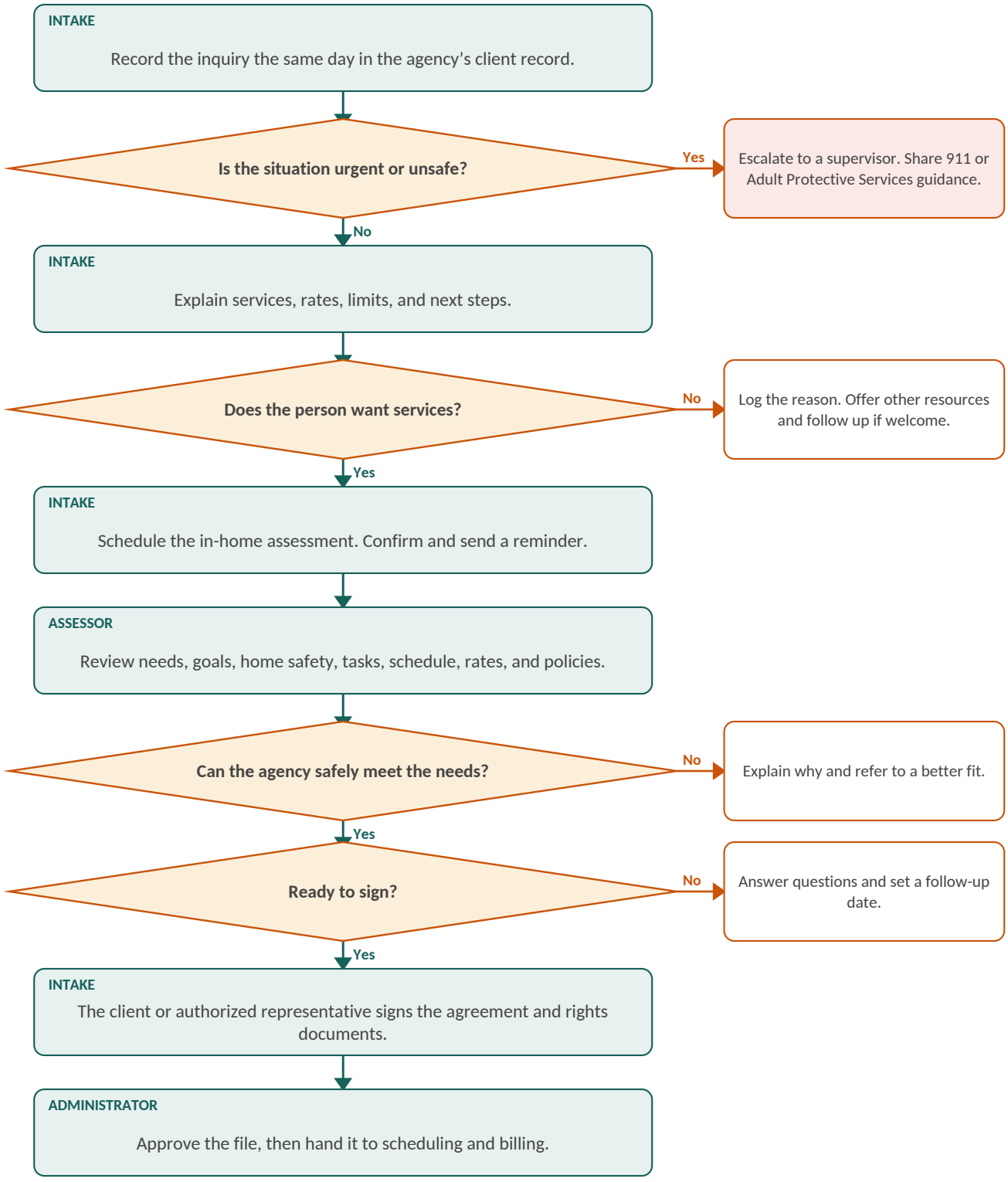
Federal checkpoints

Federal information was checked on November 5, 2026. Requirements depend on your size, services, and payers, and state law may require more.

Flow	Federal checkpoint
Inquiry	Be clear about services and costs. Follow HIPAA if your agency is a covered entity. Provide language access if you receive covered federal funds.
Client start	Confirm Medicaid or other payer authorization. Use electronic visit verification for Medicaid personal care and home health. Medicare home health agencies must also follow their Conditions of Participation.
Hiring	Follow the Fair Credit Reporting Act for consumer reports. Complete Form I-9. Avoid discriminatory questions and decisions. Check the HHS OIG exclusions list if you bill federal programs.
Client concerns	Medicaid HCBS providers must follow state critical incident rules. Federal requirements for state incident systems begin July 9, 2027.

Flow 1: Client Inquiry to Service Agreement

Use this flow from first contact through a signed service agreement.

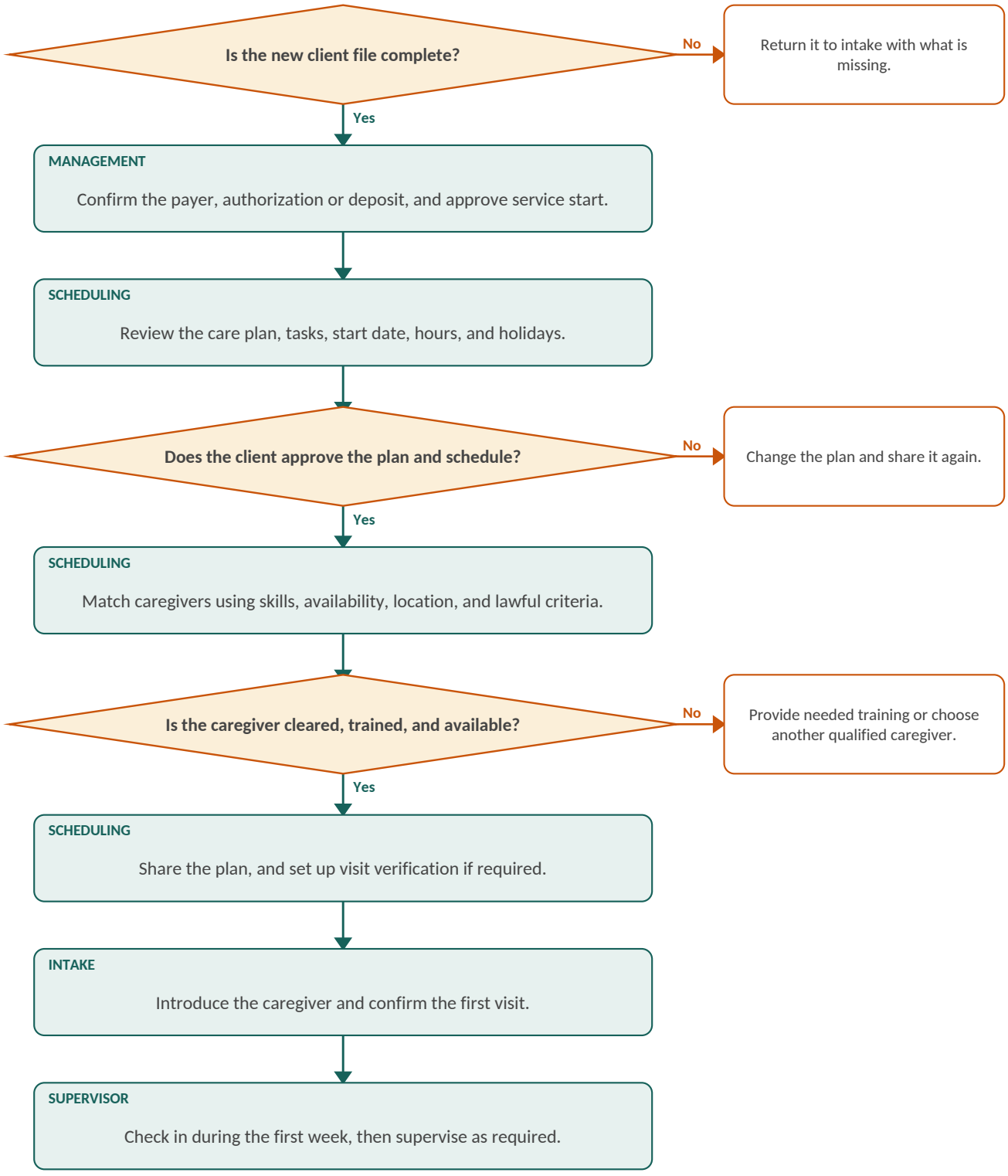


Steps, timing, and records

No.	Owner	Step	Target time	Record to keep
1	Intake	Log the caller, client, need, payer, and referral source.	Same day	Inquiry form
2	Intake	Screen for urgent safety concerns.	During call	Inquiry form
3	Intake	Explain services, costs, and limits clearly.	During call	Inquiry form
4	Intake	Schedule the assessment if the person wants services.	Set your target	Calendar entry
5	Assessor	Complete assessment, home safety review, and draft plan.	As scheduled	Assessment and home safety form
6	Assessor	Decide whether the agency can safely serve the client.	At assessment	Assessment notes
7	Intake	Confirm who has authority to sign.	Before signing	Agreement, rights documents
8	Administrator	Approve the file and hand it off.	Set your target	Approval note

Flow 2: New Client Start

Use this flow to move a signed client safely into service.



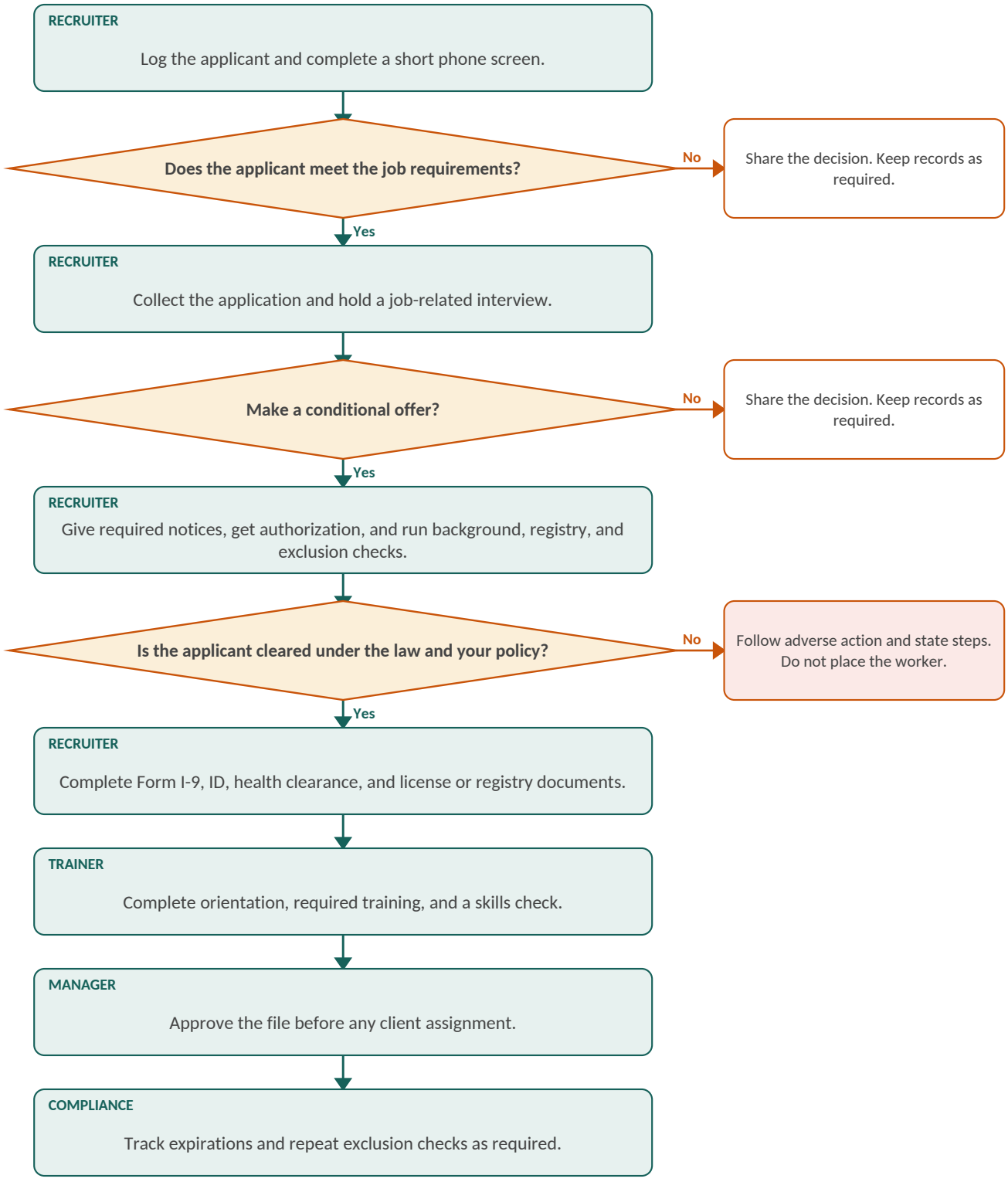
Steps, timing, and records

No.	Owner	Step	Target time	Record to keep
1	Scheduling	Confirm the assessment, care plan, agreement, and contacts are complete.	Upon receipt	Client file checklist
2	Management	Confirm payer authorization or deposit and approve start.	Before scheduling	Approval note
3	Scheduling	Review all tasks, dates, and hours.	Before matching	Care plan
4	Scheduling	Share the plan and record approval or changes.	Before start	Signed plan
5	Scheduling	Assign qualified caregivers, with a backup.	Before start	Schedule
6	Scheduling	Give plan details and any task-specific training.	Before first visit	Training record
7	Intake	Introduce the caregiver and share who to call.	Before first visit	Contact note
8	Supervisor	Check that the plan works and the client is comfortable.	First week	Visit or call note

Client preferences. A client may have legitimate needs, such as a language needed for care or a schedule. Do not record or use discriminatory staffing preferences.

Flow 3: Caregiver Hiring

Use this flow from first application to first client assignment. Follow any required order of steps in your state.



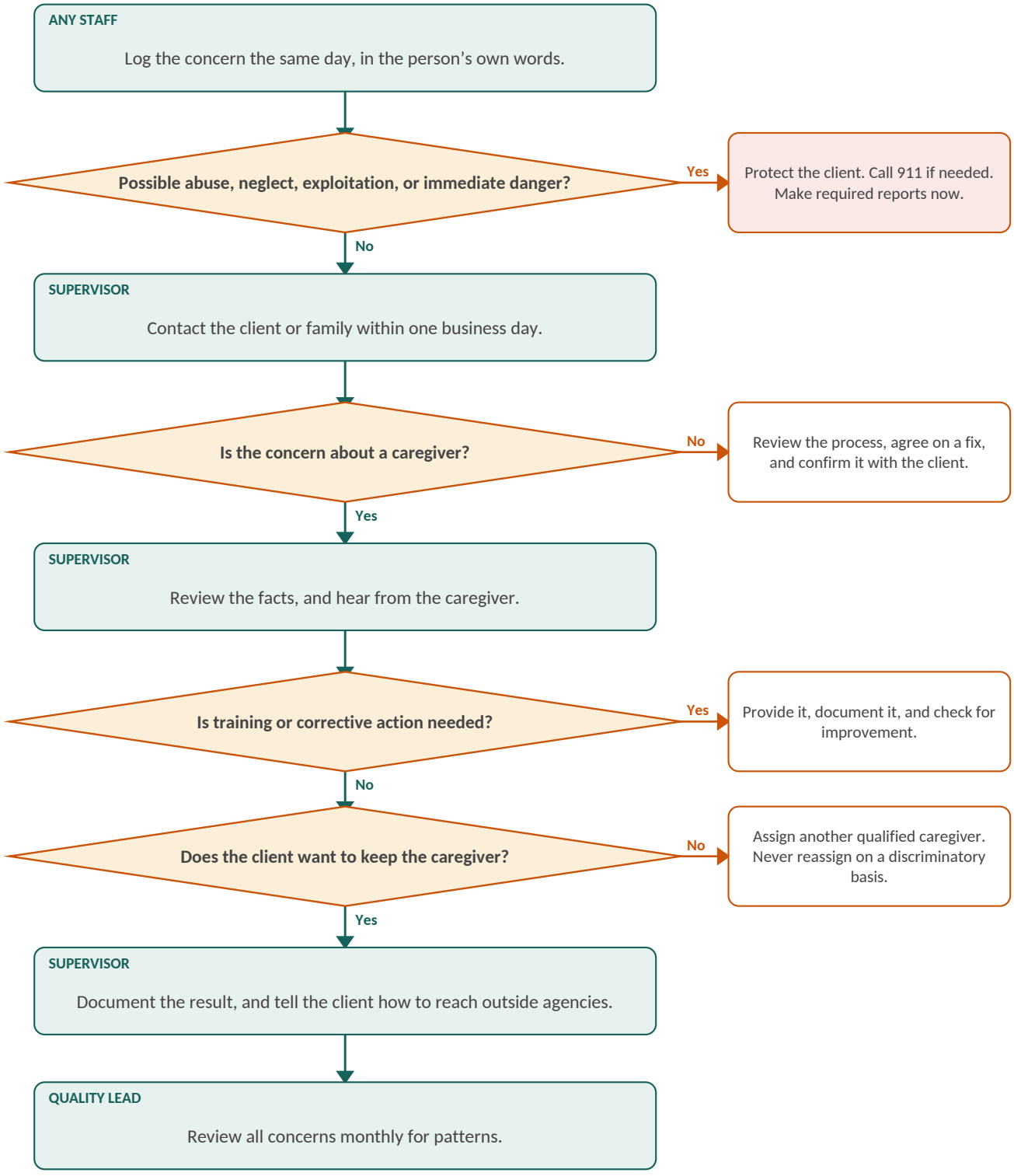
Steps, timing, and records

No.	Owner	Step	Target time	Record to keep
1	Recruiter	Use the same job-related screening questions for all applicants.	Set your target	Applicant log
2	Recruiter	Compare the applicant with written job requirements.	Phone screen	Applicant log
3	Recruiter	Interview without protected-topic questions.	Set your target	Interview form
4	Recruiter	Make a conditional offer if appropriate.	After interview	Offer letter
5	Recruiter	Complete state-required and exclusion checks.	Before client contact	Results, kept securely
6	Recruiter	Complete Form I-9 and collect required documents.	Form I-9 timing rules	I-9 file, kept separately
7	Trainer	Provide training and confirm competencies.	Before assignment	Training and skills record
8	Manager	Approve the file.	Before assignment	File checklist
9	Compliance	Monitor expiration dates and exclusion checks.	Monthly	Tracking log

Fair hiring. Apply the same steps to everyone in the same role. Use only job-related questions, and follow state rules on background checks.

Flow 4: Client Concern and Complaint

Use this flow for every concern, however small it seems.



Steps, timing, and records

No.	Owner	Step	Target time	Record to keep
1	Any staff	Log the concern, without judging it.	Same day	Complaint log
2	Supervisor	Screen for safety or reportable concerns.	Immediately	Complaint log, incident report
3	Supervisor	Contact the client or family.	Within 1 business day	Contact note
4	Supervisor	Sort the concern as administrative or caregiver-related.	At first contact	Complaint log
5	Supervisor	Review records and speak with those involved.	Set your target	Review notes
6	Supervisor	Decide on action, and follow through.	Set your target	Action plan
7	Supervisor	Share the result and complaint options.	At closure	Closure note
8	Quality lead	Track trends and repeat problems.	Monthly	Quality report

Do not investigate suspected abuse first. Protect the client and make required reports. Follow your policy on removing an accused worker from the assignment, and prohibit retaliation.

Quarterly process audit

Review five recent files for each flow. Use the results to improve the process, not just to correct individuals.

Flow	Files reviewed	All steps complete	Average time	Main gap	Owner and due date
Inquiry					
Client start					
Hiring					
Client concern					

What will we change next quarter?

Adoption record

Agency	Reviewed by
Effective date	Next review date
Changes made for our state or payers	Approved by

Sources and further reading

Medicaid.gov: Electronic Visit Verification (medicaid.gov)

42 CFR 441.302: Incident management (law.cornell.edu)

HHS OIG: Effect of exclusion (oig.hhs.gov)

HR Dive: EEOC position on customer preference (hrdive.com)

Aricares Alliance: Operations Management for Home Care Agencies, Second Edition (aricaresalliance.com)

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