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Kansas
Department of Health and Environment

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Janet Stanek, Secretary

Laura Kelly, Governor

Home Health Agency Non-Medical Supportive Care Services

Application Submission Requirements and Instruction Guide

Use this Requirements and Instructions Guide to gather and submit your documentation to support your application for a Kansas HHA license.

Instructions

1. Complete and submit the initial "Non-Medical HHA Application" and the appropriate application fee.
2. Ensure that you have received a username and password for the KDHE file transfer system.
3. On the following pages, provide all the requested items in the shaded areas immediately below each section/subject area heading (e.g., Governing Body). If an item (document) applies to multiple sections—it needs to be included in each section for consideration and review. Each section of the application submitted is considered separately. Applicable regulations have been included for your reference.

Important

Each Section below corresponds to a folder location on the file transfer system. The main folders are labeled by the subject area (e.g., "Govern Body"). Within each main folder, there are numbered folders. The numbered folders correspond to a number in parenthesis behind each required document. Each folder must include at least one document. Place the documents in the appropriate folder. You can place more than one document in each folder, as long as it supports the regulation/requirement being reviewed.

> Example: Govern Body. Bylaws or an Operating Agreement (1) – You will place the document(s) that supports the requirements for the agency's bylaws in folder "1", under the main folder of "Govern Body."

Below the shaded area in each section, there is useful information regarding what content is required for submitted items. This is not an all-inclusive list. Please review the regulations and your agency's policies for additional requirements.

Please use this form as a check off as you will not be able to access the file once you upload it to the system. It is recommended that you gather all documents prior to beginning the upload process.

This information is being requested to support your application for a Home Health Agency (HHA) Non-Medical Supportive Care Service license within the State of Kansas. All policies and references must be specifically for Kansas and under the named Home Health Agency listed on the application (even if other states are under the same umbrella; even if documents are under a corporate name that is separate).

Please note that the information requested is specifically to meet statutory and regulatory requirements for Kansas licensure only. Certification is a separate action and requires additional activities after application licensure.

Additional Help

Kansas licensing regulations can be found on the Secretary of State website, Volume 41 - Issue 18 - May 5, 2022.

- Use this form as a checklist to ensure you have included all required information.
- Make sure that there are no areas that are left blank or indicate “See Attached” or “Not Applicable.”
- Citations must be specific, and all documentation must be present for the section.
- There are sections that request specific policies that are on HHA letterhead following the policy and procedure template of your organization.
- Policies must be under the name of the HHA on the application and not another name such as the hospital name, business name or another nomenclature.
- It must be clear that submitted policies have been approved by the governing board and are enacted.

Home Health Agency Information		
Agency Name:		
Address:		
Phone:	Fax:	Email:
Counties Served:		

Branch Office 1 ☐N/A		Branch Office 2 ☐NA	
Address:		Address:	
City:	State:	City:	State:
Phone:		Phone:	
Fax:		Fax:	

Contact Person Name:
Contact Person Phone #:
Contact Person Email:

Agency Use Only – Do Not Write in This Section
Reviewed:
Reviewed:
Approved:
License Issued:

Governing Body (Govern. Body)

Please send the following information:

KAR 28-51-100
KAR 28-51-103

☐ Bylaws or an Operating Agreement (1)
☐ Policy regarding adopting, revising, and approving policies. (2)
☐ Document showing appointed Administrator (3)
☐ Document showing appointed Alternate Administrator (4)
☐ Name and address of each officer, director, and owner (5)
☐ Evidence that the Administrator lives within a 200-mile radius of the parent office. (6)
☐ Evidence that the Alternate Administrator lives within a 200-mile radius of the parent office. (7)
☐ Disclose each corporate ownership interest greater than five percent. (8)
☐ Disclose past HHA ownership or management (9)
☐ Agency's reporting process for reporting abuse, neglect, and exploitation (10)

☐ A complete copy of the organization's bylaws dated and signed. Within the body of the document the items below (1-6) must be included.

Governing Body.
Each home health agency shall have a governing body or a clearly defined body having legal authority to operate the agency. The governing body shall:

☐ (1) Have bylaws or their equivalent which shall be renewed annually;
☐ (2) Employ a qualified administrator
☐ (3) Adopt, revise, and approve procedures for the operation and administration of the agency as needed;
☐ (4) Provide the name and address of each officer, director, and owner of the agency to the licensing agency;
☐ (5) Disclose corporate ownership interests of five percent or more to the department (licensing agency); and
☐ (6) Disclose past home health agency ownership or management, including the name of the agency, its location, and current status, to the department (licensing agency).

Administrator
☐ The Administrator and the Alternate Administrator shall have the following responsibilities documented in the job description and either in agency policy or in the appointment letter from the Governing Body:
☐ Organize and direct the home health agency's ongoing functions;
☐ Act as a liaison between the governing body and staff;
☐ Employ qualified personnel in accordance with job descriptions;
☐ Provide written personnel policies and procedures and job descriptions that are made available to all employees;
☐ Maintain appropriate personnel records, administrative records, and all policies and procedures of the home health agency;
☐ Provide orientation for new staff, regularly scheduled in-service education programs, and opportunities for continuing education of the staff;
☐ Ensure the completion, maintenance, and submission of reports and records as required by the department; and
☐ Ensure that each patient or client admitted to the home health agency receives, in writing, the patients' and clients' bill of rights specified in K.A.R. 28-51-111.

Administrators (Admin)

Please send the following information:

KAR 28-51-100
KAR 28-51-103

☐ Current Kansas Licensure, if applicable (1)
☐ Resume and or Curriculum Vitae (CV) along with proof of educational training. (2)
☐ Administrator and Alternate Administrator Job Descriptions containing the responsibilities designated in the regulations and in the section above. (Please note that these are minimum responsibilities of the Administrators. Additional responsibilities may be listed in the Job Description if the agency desires.) (3)
☐ Document showing appointed Administrator (4)
☐ Document showing appointed Alternate Administrator (5)

If qualified health professionals fill these positions, send proof of current licensure in the state of Kansas and official college transcripts.

If these positions are filled by persons who are not qualified health professionals, send a resume or Curriculum Vitae (CV) along with proof of educational training that meets the requirements, such as transcripts and diplomas or certificates of program completion.

The Administrator must be "appointed" by the Governing Body, and this must be in writing. The Governing body may appoint the Alternate or simply selected by the Administrator. You must send evidence of each of these appointments.

For each home health agency providing only supportive care services, the administrator shall meet the following requirements:
☐ (A) Be at least 21 years of age;
☐ (B) Have at least one year of experience as an employee of a home health agency or in a related health care service; and
☐ (C) Have one of the following:
- ☐ (i) A baccalaureate degree;
- ☐ (ii) An associate's degree; or
- ☐ (iii) A certificate from a home health administrator course approved by the department.

For each home health agency providing only supportive care services, the alternate administrator shall meet the following requirements:
☐ (A) Be at least 21 years of age;
☐ (B) Have at least one year of experience as an employee of a home health agency or in a related health care service; and
☐ (C) Have one of the following:
- ☐ (i) A baccalaureate degree;
- ☐ (ii) An associate's degree; or
- ☐ (iii) A certificate from a home health administrator course approved by the department.

A" Job Description" is a broad, general, and written statement of a specific job, based on the findings of a job analysis. It generally includes duties, purpose, responsibilities, scope, and working conditions of a job along with the job's title, and the name or designation of the person to whom the employee reports.

Personnel Policies (Personnel Policies)

Please send the following information:

KAR 28-51-103(a)(b)(c)(d)(e)

Job Descriptions:

☐ Administrator (1)
☐ Alternate Administrator (2)
☐ Supervisor and/or Manager (3)
☐ Supportive Care Worker (4)
☐ Any and all additional positions in the agency (5)

☐ Organizational Chart (6)
☐ Staff Roster (7)

Policies:

☐ Hiring Procedures/Process (8)
☐ Interviewing (9)
☐ Reference Checks (Policy and Template) (10)
☐ Validation of credentials and/or license (11)
☐ Background Checks (12)
☐ Performance Evaluations (13)
☐ Health Record (Self-reported health history and health assessment performed by a physician, nurse practitioner, clinical nurse specialist, physician assistant, or registered nurse) (14)
☐ Tuberculosis (TB) Testing and Screening (Policy and Template) (15)
☐ Competency (Policy and Template) (16)
☐ Required Contents of Personnel Files (Policy stating what the agency requires in a personnel file) (17)
☐ Provisional Employment (18)

Please submit documents which support the above requirements.

This may include policies, templates, cited resources, etc.

☐ Staff Roster: Include all personnel in the organization listing the name, licensure (if applicable), position, status, and date of hire.

Written policies should be submitted that serve to document your agency's personnel policies and the intended practices concerning Human Resources (HR) matters. The following policy items must be addressed:

Personnel Records
Personnel records for each employee shall include the following:
☐ (1) The title of the employee's position;
☐ (2) a signed and dated job description that includes the qualifications for the position;
☐ (3) evidence of licensure or certification if required. Each degree shall be supported by official transcripts. Licensure or certification within Kansas or authorization to practice in Kansas for any qualified health professional, certified nurse aide, home health aide, licensed practical nurse, occupational therapy assistant, or physical therapy assistant shall be provided upon request;
☐ (4) performance evaluations made within six months of employment and annually thereafter;
☐ (5) documentation of reference checks for each employee before employment;
☐ (6) a health record, including the following
    ☐ (A) A self-reported health history;

☐ (B) A current health assessment performed by a physician, nurse practitioner, clinical nurse specialist, physician assistant, or registered nurse certifying that the employee is physically able to perform job functions as listed in the employee's job description before working with clients or patients; and

☐ (C) A current two-step tuberculosis skin test following the U.S. centers for disease control and prevention testing guidelines for healthcare workers taken before working with clients or patients;

☐ (7) A subsequent periodic health assessment performed by a physician, nurse practitioner, clinical nurse specialist, physician assistant, or registered nurse in accordance with home health agency policies and procedures and a subsequent health assessment at least every two years or following a significant health event;

☐ (8) A copy of the eligibility determination request submitted to the department for aging and disability services regarding adult and juvenile convictions and adjudications pursuant to K.S.A. 65-5117, and amendments thereto; and

☐ (9) Results of the state and national criminal history record check pursuant to K.S.A. 65-5117, and amendments thereto, and the findings of any state or national registry, as defined in regulations adopted by the secretary of the department for aging and disability services

☐ Abuse, Neglect, and Exploitation training records

☐ Competencies

☐ Supervision records

☐ Orientation records

☐ Ongoing training records

Personnel Records (Personnel Recs)

Please send the following information:

☐ Staff Roster of the submitted personnel files that crosswalks to folder location. Include Folder location, name, licensure (if applicable), position, status, and date of hire along with the folder location. For example: "Folder 1, John Smith, No license, Supportive Care Worker, Hired/Active, 01/01/24" (A)

Submit copies of 10 employees' personnel records. These must include the administrator, alternate administrator, and other supervisory positions. Complete the list with caregiver staff. If you do not have 10 employees, note this on your staff roster.

******Each Numbered Folder should contain the contents of ONLY ONE person's personnel file. ******

Each folder needs to include: (please do not send copies of I-9, W-4, or Social Security Cards)

☐ Personnel Application

☐ Resume or Curriculum Vitae (CV)

☐ Signed and dated Job Description that includes qualifications of the position

☐ Proof of Licensure and/or Certification Validation (if applicable)

☐ Interview and Reference Checks completed prior to date of hire

☐ Performance Evaluations as applicable

☐ Self-reported health history

☐ Health Assessment certifying that the employee is physically able to perform job functions as listed in the employee's job description

☐ TB Test/Chest X-ray

☐ Criminal Record Check Evidence

☐ Agency Orientation Records

☐ Competency Records

☐ Supervisory Visit Records
☐ Abuse, Neglect, and Exploitation Training records

Contracts (Contracts)

Please submit the following information:

KAR 28-51-103(f)

☐ A policy addressing personnel who work under an "hourly" or "per visit" contract and includes all required elements. (1)

The contract and policy shall include the following provisions:

☐ (1) A statement that patients or clients will be provided home health services, HCBS, and supportive care services by the home health agency;
☐ (2) A description of the home health services, HCBS, and supportive care services to be provided by each individual or business;
☐ (3) A statement that each individual or business shall conform to all applicable agency policies and procedures, including those related to qualifications;
☐ (4) A statement that each individual or business shall be responsible for participating in the development of plans of care;
☐ (5) A description of the manner in which home health services, HCBS, and supportive care services provided by each individual or business shall be controlled, coordinated, and evaluated by the home health agency;
☐ (6) The procedures for submitting progress notes, scheduling patient care, and conducting periodic patient evaluations; and
☐ (7) The procedures for determining charges and reimbursement to each individual or business.

Abuse, Neglect and Exploitation (ANE)

Please submit the following information:

KAR 28-51-103(g)

☐ A Policy about abuse, neglect, and exploitation. The policy must require that each employee is responsible for reporting suspected abuse, neglect, and exploitation and the policy should outline how they make the report. The specific KSA definitions of abuse, neglect, and exploitation must be in the policy. The policy must include the phone number for reporting for Kansas: KDHE Abuse, Neglect, and Exploitation Complaint Hotline: 1-800-842-0078. (1)

☐ Sample Copy of the Client Rights form given to each client/responsible party indicating the acknowledgement of receipt by the client or the designee, including signature and date. (2)

☐ A Policy addressing the agency's requirement to provide in-service training recognizing the signs and symptoms of abuse, neglect, or exploitation to home health agency employees and contracted personnel at the time of hire or contract and annually thereafter and document all training provided in each personnel file; (3)

Definitions from KSA 39-1430:

☐ The policy must include the phone number for reporting for Kansas: KDHE Abuse, Neglect, and Exploitation Complaint Hotline: 1-800-842-0078.

☐ "Abuse" means any act or failure to act performed intentionally or recklessly that causes or is likely to cause harm to an adult, including:
(1) Infliction of physical or mental injury;
(2) Any sexual act with an adult when the adult does not consent or when the other person knows or should know that the adult is incapable of resisting or declining consent to the sexual act due to mental deficiency or disease or due to fear of retribution or hardship;
(3) Unreasonable use of a physical restraint, isolation or medication that harms or is likely to harm an adult;
(4) Unreasonable use of a physical or chemical restraint, medication or isolation as punishment, for convenience, in conflict with a physician's orders or as a substitute for treatment, except where such conduct or physical restraint is in furtherance of the health and safety of the adult; or
(5) A threat or menacing conduct directed toward an adult that results or might reasonably be expected to result in fear or emotional or mental distress to an adult.

☐ "Neglect" means the failure or omission by one's self, caretaker or another person with a duty to supply or provide goods or services that are reasonably necessary to ensure safety and well-being and to avoid physical or mental harm or illness.

☐ "Financial exploitation" means the unlawful or improper use, control or withholding of an adult's property, income, resources or trust funds by any other person or entity in a manner that is not for the profit of or to the advantage of the adult. "Financial exploitation" includes, but is not limited to:
(1) The use of deception, intimidation, coercion, extortion or undue influence by a person or entity to obtain or use an adult's property, income, resources or trust funds in a manner for the profit of or to the advantage of such person or entity;
(2) The breach of a fiduciary duty, including, but not limited to, the misuse of a power of attorney, trust or a guardianship or conservatorship appointment, as it relates to the property, income, resources or trust funds of the adult; or
(3) The obtainment or use of an adult's property, income, resources or trust funds, without lawful authority, by a person or entity who knows or clearly should know that the adult lacks the capacity to consent to the release or use of such adult's property, income, resources or trust funds.

Provision of Services (Provision of Svcs.)

Please provide the following information:

KAR 28-51-104(a)(b)(c)(3)(d)(2)(e)
KAR 28-51-105(e)
KAR 28-51-117

☐ A Policy for Client Acceptance/Admission Criteria (1)
☐ A Policy for Provision of Services (2)
☐ A Policy for a Plan of Care, including developing, following, and reviewing (3)
☐ A Policy for Written Assignments (4)
☐ A Policy for Assigned Duties (5)
☐ A Policy for Communication to support the plan of care (6)
☐ A Policy for On-Call (7)
☐ A Policy and procedures for the scope of practice of a supportive care worker (8)
☐ A Policy regarding Medications and administration (9)
☐ A Policy regarding Nursing Services (10)
☐ A Policy and Template for the assessment of the client used to develop a plan of care based on the client's needs (11)
☐ Training documents and or template used to train managers and supportive care workers to deliver the plan of care (12)
☐ Competency checklist template and Policy (13)

☐ Each home health agency shall provide supportive care services to a client only when the home health agency reasonably expects that the client's needs can be met adequately by the home health agency in the client's place of residence.

☐ Each home health agency shall be limited to the supportive care services specified by the home health agency's initial application or renewal application.

☐ Training of managers and supportive care workers to deliver the plan of care in accordance with the home health agency regulations in this article of the department's regulations, including competency in the following:

- ☐ Communication skills, with special focus on communicating with clients with hearing deficits, dementia, or other special needs;
- ☐ Observation, reporting, and documentation of client status and documenting supportive care services provided to the client;
- ☐ Basic infection control procedures;
- ☐ Basic elements of body functioning and changes in body function and when to report changes in bodily functions to the manager;
- ☐ Maintenance of a clean, safe, and healthy environment;
- ☐ Recognizing emergencies and knowledge of home health agency emergency procedures;
- ☐ Recognizing physical, emotional, and developmental needs of the clients served by the home health agency;
- ☐ Working with clients, including respect of the client and the client's privacy and property; and
- ☐ Appropriate and safe techniques in personal hygiene and grooming;
- ☐ Knowledge of client's bill of rights

☐ A plan of care for the client, which shall be reviewed by the manager at least every 60 days;

☐ Policies and procedures indicating that medications shall not be set up by supportive care workers or allow supportive care workers to provide medication administration;

☐ Policies and procedures indicating that all personnel providing supportive care services to the same client shall maintain communication with the manager to ensure that all supportive care services promote the plan of care;

☐ Assigned duties. Each licensee shall include the following requirements in written policies and procedures for use by a supportive care worker: *Please see regulations addressing medication, skin care, ambulation, bathing, dressing, exercise, feeding, hair care, mouth care, nail care, positioning, shaving, toileting, transfers, respiratory care, and masks and oxygen flow.

☐ A person that applies for a license to provide only supportive care services shall not provide nursing services. (Authorized by K.S.A. 65-5109; implementing K.S.A. 65-5104; effective, T-86-23, July 1, 1985; effective May 1, 1986; amended May 20, 2022.)

Supervision (Supervision)	
Please provide the following information: ☐ A Policy for Supervision (1)	**KAR 28-51-104(c)(3)** **KAR 28-51-110(c)** **KAR 28-51-117(e)**
☐ A visit by the manager to each client every three months to provide supervision to each supportive care worker. ☐ Includes an assessment of client satisfaction of the supportive care services provided and the supportive care worker's adherence to the plan of care. ☐ Content of client record. Each client record shall contain the date of each on-site visit for supervision	

Client Records (Client Recs.)

KAR 28-51-104
KAR 28-51-110(a)(c)(d)(e)

☐ A Policy for Client Records (1)
☐ A Policy for Contents of Client Record (2)
☐ A Policy for Client Record Retention (3)
☐ A Policy for Client Record Safeguarding against loss of unauthorized review or use (4)
☐ A Policy for Client Record Use, Removal, and Release of Information (5)
☐ A Policy for Admission Notes (6)
☐ A Policy for Documentation of Supportive Care Services provided (7)
☐ A Policy for Progress Notes (8)
☐ A Policy for Supervision (9)
☐ A Policy for Discharge Summary (10)

☐ General provisions. A clinical record or client record containing pertinent past and current findings shall be maintained in accordance with accepted professional standards for each patient or client receiving home health services.

☐ Content of client record. Each client record shall contain at least the following:
- ☐ the plan of care;
- ☐ the name of the client's physician, nurse practitioner, clinical nurse specialist, or physician assistant;
- ☐ physician orders for drugs, diet, treatment, and activity;
- ☐ signed and dated admission notes;
- ☐ documentation of supportive care services provided, the date and time the provider of supportive care services checked in and out, and a confirmation that supportive care services were provided;
- ☐ a copy of progress notes;
- ☐ the date of each on-site visit for supervision required by K.A.R. 28-51-117; and
- ☐ the discharge summary report.

☐ Retention. Each clinical record and each client record shall be retained in a retrievable form for at least five years after the date of the last discharge of the patient or client. If the licensee discontinues operation, provision shall be made for retention of records.

☐ Safeguard against loss or unauthorized use. Written policies and procedures shall be developed regarding the use and removal of documents from the patient record or client record and the conditions for release of information. The patient's, client's, or guardian's written consent shall be required for release of information not required by law.

* There must be the inclusion in client record policy that "the client's or guardian's written consent shall be required for the release of information if that release is not required by law."

Client Rights (Client Rights)	
☐ A Policy for Client Rights (1) ☐ Sample Copy of the Client Rights form given to each client/responsible party indicating the acknowledgement of receipt by the client or the designee, including signature and date. (2)	**KAR 28-51-111**

☐ Each governing body shall establish a bill of rights that shall be equally applicable to all patients and clients. The following provisions shall be included in the patients' and clients' bill of rights:

- ☐ the right to choose health care professionals and the right to communicate with those health care professionals;
- ☐ the right to participate in the planning of the patient's or client's plan of care and the right to appropriate instruction and education regarding the plan of care;
- ☐ the right to home health services, HCBS, and supportive care services that are provided without discrimination as to race, color, creed, sex, or national origin;
- ☐ the right to receive home health services, HCBS, or supportive care services only if the licensee has the ability to provide safe, professional care at the level of intensity needed;
- ☐ the right to reasonable continuity of care;
- ☐ the right to be advised in advance of any change in the plan of care before the change is made;
- ☐ the right to confidentiality of all clinical records and client records, communications, and personal information;
- ☐ the right to review all health records pertaining to the patient or client unless medically contraindicated in the clinical record or client record by the physician, nurse practitioner, clinical nurse specialist, or physician assistant;
- ☐ the right to be referred to another home health agency if the patient or client is denied home health services, HCBS, or supportive care services for any reason;
- ☐ the right to voice grievances and suggest changes in home health services, HCBS, and supportive care services or the staff providing the home health services, HCBS, and supportive care services, without fear of reprisal or discrimination;
- ☐ the right to be fully informed of home health agency policies and charges for home health services, HCBS, and supportive care services, including eligibility for, and the extent of payment from third-party reimbursement sources, before receiving care. Each patient and client shall be informed of the extent to which payment could be required from the patient or client;
- ☐ the right to be free from verbal, physical, and psychological abuse and to be treated with dignity;
- ☐ the right to have the patient's or client's property treated with respect;
- ☐ the right to be advised in writing of the availability of the department's toll-free complaint telephone number; and
- ☐ the right to be free from the use of restraints in the home setting.
- ☐ the right to request information about the diagnosis, prognosis, and treatment, including alternatives to treatment and risks involved, in terms that the patient and the patient's family can readily understand in order to give informed consent;
- ☐ the right to refuse home health services or HCBS and the right to be informed of the possible health consequences of any refusal; and
- ☐ the right to be advised in advance of the home health services or HCBS that will be provided and the frequency of visits proposed to be provided.

Non-Skilled Services (Non-Skilled)	
☐ A Policy for Pre-filling Insulin Syringes (1) ☐ A Policy for Nursing Services (not providing, see below) (2)	**KAR 28-51-105(e), KSA 65-5116**

☐ No unlicensed person employed by a home health agency, in the course of employment with a home health agency, shall prefill insulin syringes for any patient served by the home health agency.

☐ A person that applies for a license to provide only supportive care services shall not provide nursing services.

Background Checks (Bkrnd. Chk.)	
☐ A Policy for Background Checks (1) ☐ Current State of Kansas list of offenses (2)	**KAR 28-51-103(d)(8)(9)**

☐ Please provide the HHA policy concerning the review of background checks and that your background checks are done in accordance with Kansas statute K.S.A 65-5117.

☐ A copy of the eligibility determination request submitted to the department for aging and disability services regarding adult and juvenile convictions and adjudications pursuant to K.S.A. 65-5117, and amendments thereto; and

☐ Results of the state and national criminal history record check pursuant to K.S.A. 65-5117, and amendments thereto, and the findings of any state or national registry, as defined in regulations adopted by the secretary of the department for aging and disability services

☐ The policy must also include the current State of Kansas list of offenses, KSA 39-970 and 65-5117

☐ Remember, it is a statutory requirement that any facility licensed under the Kansas Adult Care Home Act or Kansas Home Health Licensure Law must submit criminal record checks through KDADS. Staffing agencies who supply employees to work in an adult care home or home health agency must also submit criminal record checks.

Frequently Asked Questions

Is there a difference between the criminal record information obtained through KBI's online service and the information accessed from KBI through KDADS?

YES. The law specifies that KDADS accesses criminal history information through KBI records. Under these laws, certain juvenile convictions would constitute a prohibition of employment, which is one reason applicable facilities are required to access information from KBI through KDADS. These laws allow KDADS access to juvenile records. Most other sources you as an operator/administrator may access, including KBI's online service, would not allow access to juvenile records.

Miscellaneous (Misc.)
☐ Place a copy of this completed Home Health Agency (HHA) Non-Medical Supportive Care Services Application Submission Requirements and Instruction Guide in the folder. (1) ☐ Please provide only documents requested. If you feel there is a document that is needed and you are not sure where it should be placed, place it in this folder. Please include a letter of intent detailing the purpose of the document. (2) ☐ **When you have submitted all of your documents and your submission is complete, copy and paste the statement below into a document titled, "Begin Review Process" with the agency's letterhead, signature, and date. Submit the document under folder "3" in the "Misc." folder. The review process will not start until this document has been received. (3)** "(INSERT YOUR AGENCY NAME) has completed the documentation submission process for a Home Health Agency Non-Medical Supportive Care Services license. Please begin the review process."
This information is being requested to support your application for a Home Health Agency (HHA) Non-Medical Supportive Care Service license within the state of Kansas. All policies and references must be specifically for Kansas and under the named Home Health Agency listed on the application (even if other states are under the same umbrella; even if documents are under a corporate name that is separate). Please note that the information requested is specifically to meet statutory and regulatory requirements for Kansas licensure only. Certification is a separate action and requires additional activities after application licensure. Regulations can be found at: kssos.org/publications/Register/Volume-41/Issues/Issue-18/05-05-22-50103.html