



January 1, 2005

The National Private Duty Association Board of Directors recently voted to amend our organization's Bylaws to implement certain criteria for membership. I would like to take this opportunity to describe these changes, to explain why the Board has chosen this course, and to discuss their impact on our members.

Effective January 1, 2005, a voting member will be expected to observe several business practices:

- The Company employs not less than 90% of all direct care staff (existing requirement)
- Does not, directly or indirectly, operate a registry model agency to provide medical or non-medical private duty services (for this purpose, a "registry model agency" means a company that employs less than 90% of its direct care staff);
- It creates a plan of care, service plan, or care plan for each of its clients;
- It conducts a criminal background check and checks references for each of its direct care staff prior to the staff member's first assignment to provide direct care;
- It performs periodic supervisory visits for each of its clients;
- It maintains Workers Compensation coverage as required by law; and,
- It maintains comprehensive professional liability insurance covering its employees while providing services to its clients.

New Voting Member applicants will be required to certify that they do or will comply with these criteria in order to be accepted for membership. A new copy of the Bylaws will be mailed to you in January.

Background

In 2002 and 2003, our Charter Members participated in discussions about the future of the new Association. The consensus at the time was that they did not want NPDA to be a "regulatory" association that would police its members. Rather, they wanted NPDA to be a voice for private duty home care and work to improve the real and perceived status of its members by identifying best practices and gradually 'raising the bar' for the industry.

During 2004, it became apparent that some differences between members, both real and perceived, had the potential to sidetrack our organization. Several members requested the Board take a position to assure that the mission was not lost due to

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questions whether any particular member should be eligible for membership in the NPDA. Additionally, the need to implement standards was reinforced by the NPDA's assertive position regarding the qualitative and societal advantages of the employment model versus the registry or independent contractor model. In 2004, the Association's leadership recognized that to speak with authority on these issues, NPDA needed to be able to represent that all of its members indeed follow the same practices.

In summer of 2004, Voting Members were surveyed about their business practices. The results of the survey were published in **The Voice**, and showed that over 95% of respondents (representing over 60% of all members) were already following these practices. The new criteria were approved at the Fall 2004 Retreat, and the proper Bylaws changes have been made as of December 15, 2004.

Impact

What does this mean to your company as a Voting Member? The most obvious impact is that you will be asked to certify that your company is in compliance with the membership criteria at the time of its next renewal. However, the existence of criteria will affect your membership in other ways:

- You will have a greater assurance that those other companies who carry the NPDA banner do share your values and operate in a manner consistent with that of your own company (while maintaining competitive differences).
- NPDA will be able to represent you from a position of greater strength, by having documentation that all its members do follow minimal business standards.

The NPDA Board believes that these criteria will increase the Association's credibility and enhance the standing of all its members.

All members will receive this newly revised application upon their next renewal. You may also download it at www.privatedutyhomecare.org. Please feel free to contact the NPDA office with questions.

Sincerely,



Sheila McMackin, MSW, LCSW
Board President