**EMPLOYEE HANDBOOK AND AT-WILL EMPLOYEE STATUS ACKNOWLEDGEMENT**

I acknowledge that I have received and read a copy of the CHHCEmployee Handbook.

I also understand and agree that:

1. Additional information and policies may be implemented from time to time by CHHC.

2. The Employee Handbook is not an employment agreement or guarantee of employment.

3. My employment with CHHCis “at-will.” I understand that either I or CHHCmay terminate the employment relationship, for any reason or for no reason, at any time with or without notice, regardless of the length of my employment or the granting of benefits of any kind, including but not limited to benefits which provide for vesting based on length of employment.

4. I also understand that no circumstances arising out of my employment will alter my

“at-will” relationship. That status as an “at-will” employee can only be changed through a

written agreement duly authorized and executed by the President of CHHCand I.

5. I understand that no officer, employee or agent of CHHCis authorized to make any oral statements, agreements, promises, representations or understandings inconsistent with the contents of this Acknowledgement form.

Signature of Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Printed Name of Employee: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# **Compassionate Home Health Care**

# **Employee Handbook**

 **EMPLOYEE HANDBOOK**

### **INTRODUCTION**

Compassionate Home Health Care, LLC (CHHC) provides this handbook to its employees to familiarize them with information needed to work smoothly within CHHC. Employees are expected to review the following information immediately upon employment and to bring any questions to the attention of their supervisor.

**MISSION STATEMENT**

It is the mission of CHHC to provide client centered, quality, comprehensive care to those requiring home care services. CHHC is tailored to assist the individual and family to achieve the optimal level of health, prevent institutionalization, and provide care and support for the family. Services are delivered on an intermittent basis according to a plan of treatment, established by the patient/family, patient’s physician, and the home health staff. CHHC was founded in 2005 and received Medicare Certification in March 2006.

**OBJECTIVES:**

1. To provide comprehensive services to our clients living within a 60-mile radius of our office.
2. To provide personalized care designed according to the client’s needs.
3. To assist the client to achieve his/her maximum level of independence.
4. To maintain a work environment which provides our employees the opportunity for personal growth and job satisfaction and the tools needed for home care of the highest quality.
5. To comply with all appropriate state and federal standards and regulations.

#### **PHILOSOPHY**

Compassionate Home Health Care is driven by the philosophy of commitment to our patients, leadership and excellence as defined below. We recognize the unique physical, emotional and spiritual needs of each person. We strive to extend the highest level of courtesy and service to patients, families/caregivers, visitors and each other.

We deliver state-of-the-art home care services with identified centers of excellence. We engage in a wide range of continuing education, clinical education, and other programs for professionals and the public.

We strive to create an environment of teamwork and participation, where, through continuous performance improvement, people pursue excellence and take pride in their work, the organization and their personal development. We believe that the quality of our human resources—organization personnel, physicians, and volunteers—is the key to our continued success. We provide physicians an environment that fosters high quality diagnosis and treatment. We maintain financial viability through a cost-effective operation to meet the organization's long-term commitment to the community.

**RECRUITMENT**

CHHC seeks to employ personnel of the highest level of professional competency and integrity. The agency recruits all staff without regard to race, religion, national origin, creed, sex, age, political belief or sexual preference. Every reasonable effort will be made to accommodate physically challenged individuals. CHHC conforms to the federal regulation in Title VII of the Civil Rights Act of 1964, the Age Discrimination Act of 1967, and the Americans with disabilities act (1990). CHHC recognizes that such persons are covered by the laws and regulations that protect disabled people against discrimination. Recruitment resources may include classified advertising, employment services, college campuses, and human services and other organizations. Each applicant must complete an application form and provide a minimum of two satisfactory references. Background checks may be required at the administrator’s discretion or by state law. Background checks will be reviewed on an individual basis. No felonies will be accepted (Rev 11/17/14). Following interviews, background checks, and reference checks, the agency will verify the credentials of the licensed and certified staff prior to commencing work, and annually.

1. **The following staff must be licensed:** Nurses, Physical Therapists (and assistants), Occupational Therapist (and assistants), Social Workers, Speech Pathologists, and Dietitian.
2. **The following staff must be certified:** Occupational Therapist (and assistants), and home health aides.

**EMPLOYEE CLASSIFICATIONS**

**Clinical staff** will be classified as “PRN” (paid hourly); “part/full-time” (paid an hourly rate equal to 30+ hours per week but less than 40 hours per week); and full time salaried (paid a salary equal to 40+ hours per week). Clinical staff who work more than 40 hours in a week will be paid overtime, as pre-approved by their Clinical Manager. (Rev 05/07/19, 11/26/19)

**Non-exempt office staff** will be paid by the hour. A minimum hourly requirement, per employee, will be required. Any hours below minimum requirement will be deducted from PTO balance.

**Exempt office staff** is full time salaried staff and includes management staff. A minimum hourly amount will be expected. (Rev 11/26/19)

**Contract and temporary employees** are employed under an agreement for a specific amount of time, for a specific amount of remuneration either on a full-time or part-time basis.

Exempt employees generally occupy executive, supervisory, administrative or professional positions and are not entitled to overtime pay except in certain situations under the Fair Labor Standards Act and applicable state laws.

**HIRING AND PROMOTIONS**

When a vacancy occurs or a new position is created, the administrator and/or department supervisors will first consider whether the position will be open to current employees. The interview process will involve the Administrator and/or designees of the Administrator. If outside hiring is necessary, an ad will be run. CHHC is an equal opportunity agency and endorses the belief that no employee applying for a new or vacated position will be denied this opportunity by virtue of his/her race, religion, age, color, creed, sex, sexual preference, national origin or disability. Background checks will be done prior to hire for all licensed and certified staff and at other intervals as determined by the Agency. (Rev 11/26/19)

# **PERIOD/PROBATION**

Probation may be used as a step in progressive disciplinary action for employees past their first 90 days of employment when performance is not up to standards. At this time, the employee will be made aware of the steps that need to be taken in order to meet performance standards.

# **ORIENTATION**

All the agency employees must complete an orientation program designed to familiarize the employee with agency philosophy, policies, procedures, benefits, job descriptions, and other information necessary for successful performance of job duties. Copies of employment required documents will be collected upon hire. The following documents must be current and copied for all personnel files: driver’s license and documents that establish both identity and employment authorization. For all skilled staff the following additional documents are required; CPR, license for practice, auto insurance, and proof of TB testing.

#### **TRAINING AND SKILLS VALIDATION**

All field staff must provide proof of clinical competence including copies of current state licenses and certificates, successful completion of skills competency evaluation (verbal and observational) and documentation of professional education and licensing/certification.

**CONTINUING EDUCATION/STAFF MEETING**

Purpose: To maintain the highest level of quality of care for agency clients, to provide agency staff with the opportunity to update technical knowledge and skills, to keep agency staff informed on agency administrative issues, and to comply with state/federal regulations. The agency will provide opportunities for continuing education (CE) of its staff within the limits of its resources. Agency staff is expected to attend and participate in all case conferences and other mandatory meetings, which will provide the annual CEU requirement of 12 units/year. (Rev 11/26/19)

**Procedure:**

1. Within budgetary limits, the agency will provide:
	1. Current literature and reference materials.
	2. Additional in-service/continuing education programs to meet Medicare and licensure regulations.
2. Prior approval of CHHC agency administrator/clinical supervisor is required for continuing education requiring any agency financial support of leave. (Rev 11/26/19)
3. In-service education programs will be planned and presented by appropriate agency staff including therapy consultants, social workers, and supervisory personnel. Registered nurses may provide continuing education for aides.
4. Staff is responsible for assisting with identification of in-service training needs and maintaining their own CE records for professional license/certification. CEU’s will be tracked annually for compliance. (Rev 11/26/19)
5. All staff is expected to participate in minimum of 12 hours of continuing education annually.
6. All agency staff is expected to participate in staff meetings.
7. Continuing Education records will be maintained in the employees’ personnel files.

# **PERFORMANCE EVALUATION**

Annual performance evaluations are required for all employees by the appropriate supervisor with active employee participation. Evaluations will include self-evaluation, supervisor’s assessment of employee fulfillment of job responsibilities, employee development planning, individual goal setting, on site observations of performance skills competency evaluation and response to evaluation by the employee.

**PROGRESSIVE DISCIPLINE**

CHHC will offer employees the opportunity to correct problems when their performance is less than satisfactory but not dangerous or fraudulent. Verbal, then written warnings will be given. The employee may be terminated if performance continues at an unacceptable level.

### **CLIENT ASSIGNMENT**

Every attempt will be made to assign field staff to requested geographic areas. However, CHHC covers an area within a 60-mile radius of the office. Occasionally it may be necessary to assign visits to employees outside of their particular area to cover all patients and comply with physician orders.

**VISIT/PAPERWORK TIME FRAMES**

All electronic visit recording must be done during the visit (when possible), completed, and sent to office within **time frames**: (Rev 12/4/14, 11/26/19).

**24 Hours**- Orders must be submitted to the office within 24 hours of receiving the verbal orders

Corrections (anything in To Be Corrected box) these are things that are needed and not getting them back in 24 hours holds up billing. These are a priority and this box needs to be emptied everyday

Signature on the POC/documentation needing cosigned (anything in To Be Signed box)

**48 Hours-** Med Profiles: must be completed in 48 hours of the SCO/ROC/RCT (if they are not completed by then there is not enough time to report significant issues to the MD and carry out any changes to the MD orders)

 DC OASIS

 DC Summaries

 Daily Notes: this will be moving to the industry standard of 24 hours by the end of the year 2019

 Reassessments

 Evals

**5 Days-** SOC/ROC/RCT OASIS (The day of the OASIS visit is day 1)

\*\*\*On Call staff who complete visits/Oasis over the weekend, will be exempt from Monday 8 AM deadline paperwork and Payroll hours for the previous week.

Any other time worked (i.e. case conference, meetings, case management, marketing events) must be recorded on a time sheet and turned into the CHHC office, by 8am, on Monday for the previous week. These time sheets can be emailed, faxed, or dropped off, but are due to Payroll by deadline of 8 AM each Monday.

 If unable to meet these timeframes for an extended period of time and after assistance from direct supervisor including disciplinary action, then reduction in payment for late/incomplete documentation or termination from the agency, may occur. (Rev 07/09/12, 03/27/15, 05/07/19, 11/26/19)

### **ELECTRONIC CHARTING AND EMPLOYEE EQUIPMENT REQUIREMENTS**

It is policy of CHHC that all employees own their own electronic equipment. The equipment can be of their choosing, but must have the following minimum capabilities:

1. Must be portable, preferable a tablet that can be easily transported into a patient’s room or home so that “bedside” charting can be done if connectivity is available.
2. Must be able to connect with the internet, as our charting system, DeVero, is a WEB based charting system. CHHC will loan a MiFi device to clinical staff, as needed, for connectivity. The employee will be responsible for cost to replace device if it is lost.
3. RN’s, PT’s, OT’s, and ST’s all need to have the ability to take pictures to upload into a patient’s chart. These could include pictures of wounds, living arrangements, or medical documents such as a copy of MPOA or DNR. Information will not be stored on devices but rather uploaded to chart or sent to office then deleted.
4. All disciplines providing direct patient care need to have equipment that can obtain an electronic patient signature. This is the preferred method of obtaining patient signatures. Back up hard copies are acceptable for equipment failure or patient inability to use the electronic equipment. Touch screens, signature pads or pens are all acceptable.
5. Financial arrangements can be made through the administration if assistance is needed in purchasing equipment. The need will be reviewed on an individual basis and any funding must be repaid by automatic payroll deduction within 3 pay periods.

### **PERSONNEL RECORDS**

CHHC maintains a personnel record on each employee. All personnel records are confidential and are maintained in a secure place. They may not be removed from the office. Access to records is limited to authorized supervisory personnel.

An employee has the right to inspect and obtain a copy of their personnel files at least once a year. A former employee will have a right to inspect his or her personnel file once after termination. The review may occur at the employer’s place of business at a time convenient to both parties. The employee or former employee may be expected to pay a reasonable cost for copying documents. (rev. 01.2017)

**EMPLOYEE SEPARATION**

Should an employee not work for 90 days and have not applied for leave of absence, then CHHC will make the employee inactive marking their last day worked as the termination date.

All staff are required to give two (2) weeks written notice of resignation to be considered separated in good standing.

**EXIT INTERVIEWS**

For all terminating employees it will be optional to give an exit interview to a member of the administrative staff who is acceptable to the employee. The purpose of the exit interview is to present an opportunity for the employee to verbalize concerns safely and to offer information for agency quality improvement. CHHC’s exit interview form may be used. The only documentation in the personnel record will be that the exit interview was offered and whether it was accepted. Any written documentation of the interview will be used anonymously for agency performance improvement processes.

**EMPLOYEE DRESS CODE**

As a health care agency, CHHC depends on its employees to project an image of cleanliness, safety, professionalism, and competence. All agency employees are expected to be clean, neat, well groomed, and attired appropriately for the conduct of CHHC's business. Appropriate attire for some positions may involve the use of protective clothing or protective devices needed to ensure the safety of the employee.

1. All agency employees, outside of office staff, are expected to wear their ID badges during work hours and to be well groomed.
2. All agency employees are expected to present themselves wearing clean and conservative attire. Jeans and scrubs may be worn in community patients’ homes. Jeans may not be skinny jeans, nor may they have holes in them. Jeans and scrubs are not allowed in any facility (Rev 11/25/14).
3. If protective clothing is needed to do any specific agency job, it must be worn as per agency regulations.
4. Minimum agency expectations for field employee attire “business casual” include the following:
5. Dresses
6. Slacks/trousers
7. Knit shirts with collars and sleeves- NO T-shirts or Sweatshirts to be worn and no shirts with sports or written Logos present (Rev 11/26/19)
8. Blouses/shirts with sleeves
9. Skirts and culottes in conservative lengths, no shorter than two inches above the knee
10. Capri pants below the knee when seasonally appropriate or cargo style shorts in good condition and no more than 1-2 inches above the knee. (Rev 11/26/19)
11. No spaghetti strap style shirts, unless covered by another shirt, Bra straps should not be visible.
12. Use of cosmetics or jewelry should be moderate and no jewelry or clothing should be worn that may interfere with patient care. Hair shall be pulled back so that it does not interfere with patient care. Bra straps should not be visible.
13. If an employee is disabled or, as a member of a religious group, wears certain dress styles, every effort will be made to accommodate the employee provided that safety, health, and sanitation requirements are satisfied.
14. Management reserves the right to determine the appropriateness of the employee’s attire. Employees violating the letter and spirit of the policy may be asked to return home at their expense and change into appropriate attire.
15. **Closed toe shoes must be worn at all times by visiting staff.** (Rev 11/25/14)

**OFFICE HOURS / WORK HOURS**

The office will be open 8:00 AM to 5:00 PM Monday through Friday. Field employees are responsible to arrange hours efficiently to meet client needs.

**PAYDAYS**

Paychecks are issued semi-monthly on the 15th and last day of the month. If those days fall on a weekend paychecks will be issued the Friday prior. If those days fall on a holiday paycheck will be issued the business day prior. (Rev 08/11)

#### **TRAVEL**

Employees must show proof of adequate automobile insurance and may be asked to submit declarations page.

**JURY DUTY**

Jury duty is a civic responsibility. Therefore, employees will be reimbursed the difference between their regular pay and the jury duty pay. Employees granted time off for this purpose are expected to report for work during any portion of a scheduled workday in which they are not required to be present at court. A certificate of attendance must be submitted upon return to work.

**BEREAVEMENT**

Regular full-time employees are entitled to three paid days for bereavement upon the death of an immediate family member. Immediate family includes grandparents, (step) parents, (step) children, spouses, and siblings.

**LEAVE OF ABSENCE (2 types):**

1. **FMLA:**
	1. FMLA leave is a Federal requirement. To be eligible an employee must work for the covered employer, have worked for the employer for a total of 12 months, have worked at least 1,250 hours in the previous 12 months, and must work at a location in US, or in any territory or possession of the US, where at least 50 employees are employed by the employer within 75 miles. Leave entitlement for eligible employee must be granted for up to a total of 12 work weeks of unpaid leave during any 12-month period. The following reasons warrant eligibility:
		1. For the birth and care of a newborn child of employee;
		2. For placement with employee of a son or daughter for adoption or foster care;
		3. To care for a spouse, son, daughter, or parent with a serious health condition;
		4. To take medical leave when the employee is unable to work because of a serious health condition; or on active duty or call to active duty status as a member of the National Guard or Reserves in support of a contingency operation.
	2. If the leave is foreseeable such as surgery, pregnancy, adoption, etc., then a 30-day notice to supervisor is recommended. If the leave is emergent such as illness, injury/accident, etc. then no notice is required only a call in to supervisor. Once the employee is determined as eligible a receipt of MD certification may be required. For additional information on FMLA see “Fact Sheet 28: The Family and Medical Leave Act of 1993.” (Rev 07/09/12)
2. **NON-MEDICAL LEAVE OF ABSENCE:**
	1. Non FMLA leave of absence without pay may be granted at the discretion of the Administrator. Emergency leave may be granted in the case of death or serious illness in the employee’s immediate family. A leave of absence is defined as an unpaid absence from work for a specified period of time not to exceed eight weeks, with the proper approval and the understanding that the employee will return to work at the end of the allowed leave.
		1. **Conditions for non-emergency leave:**
			1. An employee desiring a leave must make a detailed written request stating purpose and beginning and ending dates of the leave to the Administrator who will review the request and approve or disapprove. The request must be made at least two weeks prior to the first day of leave.
			2. An employee failing to report to work on the first working day following the expiration of the leave will be considered to have voluntarily resigned. In the event, the last day worked is the termination date.
			3. Following an approved leave, an employee’s return to work is contingent upon job availability and current opening for which the employee is qualified.
			4. Normal salary/performance review dates of employees on leave are postponed by the amount of leave time.
			5. Extensions of leave may be granted depending upon individual circumstances.
	2. A request for medical leave will be considered only when accompanied by a physician’s certification indicating the reason and the probable date of return to work. An employee’s return to work following a medical leave is contingent upon job availability or current openings for which the employee is qualified.

**EMPLOYEE BENEFITS**

**Determination of eligibility:** CHHC will do a 12 month look back for all staff that are not “full-time salaried” to check eligibility status for below mentioned benefits. The look backs will be twice a year as determined by administrator and insurance broker \*Full time salaried employees automatically qualify for all benefits and may enroll the 1st day of the month following a 60-day waiting period. (rev. 10/11/19)

* **FLEXIBLE COMPENSATION PLAN:** Qualifying employees may choose among certain
“tax free” benefits in lieu of taxable compensation. Employee must agree to compensation reduction by the total cost of the plan benefits selected with proper signed enrollment form. Employees must be at least 18 years of age and have worked 60 days to be eligible. These benefits are as follows: (Rev 11/10/14):
	+ **MEDICAL INSURANCE:** Employees must be full time 30 plus hours / week or full time salaried to qualify for CHHC group health insurance. CHHC will pay $400.00 a month for qualifying employee. Additional information will be provided to full time employees upon request. (Rev 03/01/13, 10/08/13, 10/23/13, 11/6/14, 12/1/21)
	+ **DENTAL AND/OR VISION INSURANCE:** Employees must work 20+ hours per week. This is voluntary and is offered at a “pass through” cost if elected, meaning the company will not contribute toward the cost. Additional information will be provided to eligible employees upon request. (Rev 03/01/13, 10/23/13)
	+ **VOLUNTARY SHORT TERM/LONG TERM DISABILITY AND/OR TERM LIFE INSURANCE:** These benefits are also offered at a “pass through” cost if elected. Eligibility requirements are the same as Dental and Vision insurance. These arenot pre-tax benefits. Additional information will be provided to eligible employees upon request. (Rev 03/01/13)
	+ **401(K) PLAN:** All new hires will be eligible for 401k after three (3) months of Service (90 days). The entry date for participation in the plan will be the 1st day of the month coinciding with or the next following date eligibility requirements are met (Rev.11/01/22). CHHC matches employee contributions up to 4% of the employee’s salary every pay period. This amount is invested through Jocelyn Pension Company in Schwab mutual funds – to be determined by the employee. When you become eligible for the plan, you will be given more information. Employees are fully vested after 6 years of enrollment. (Rev 03/04/13)

**HOLIDAYS**: Office staff, full time salaried staff and employees who receive PTO will have these holidays paid. Employees must have worked the week before and the week after each Holiday in order to receive Holiday pay. For Office Staff and Field Staff: The number of holiday hours paid will be based on most recent PTO accrual divided by 5 days. Full time salaried staff will receive 8 hours for a holiday. (Rev 6/12/20)

Any employees with supervisor approval to work on the holiday will be paid 1.5 x their normal pay rate for hours worked. Holiday hours not worked are not eligible to receive overtime compensation i.e. if you were to work 34 hours in 4 days in a holiday week you would be paid 42 hours at your regular rate (assuming you receive 8 hours of holiday pay). Holidays which occur on Saturday will be observed on the previous Friday.  Holidays which occur on Sunday will be observed on the following Monday. Holiday pay will apply to the day the office observes the Holiday only. The office will close on the holidays listed below.   (Rev 11/10/14, 11/17/14, 12/4/14, 2/20/17, 5/10/17):

* New Year’s Day
* Memorial Day
* Independence Day
* Labor Day
* Thanksgiving Day
* Christmas Day

The office will be closed on the following days at the administrator’s discretion. These will be paid holidays for management and office staff. (Rev 11/24/14):

* Friday after Thanksgiving Day
* Christmas Eve
* Day after Christmas
* New Year’s Eve
* **PAID TIME OFF (PTO):** All employees will receive PTO regardless of hours worked. PTO is used for sick time and vacation time. PTO accrual dates will begin 60 days from hire and then every 6 months thereafter (Rev. 6/13/22). The amount of PTO accrued will be based on the average hours worked for the past 6 months (not to include hours from 3/1/20 to 6/30/20 due to COVID-19, unless the employee maintained their average hours). PTO anniversary amounts are as follows:

0**-**3 years: Employees will receive 2 weeks of PTO per year; 1 week every 6 months

3-6 years: Employees will receive 3 weeks of PTO per year; 1.5 weeks every 6 months

6+ years: Employees will receive 4 weeks of PTO per year; 2 weeks every 6 months

 PTO anniversaries start from the first day of PTO accrual. (Rev. 6/12/20)

\*\*\*PTO will NOT be paid out at termination of employment regardless of reason. (Rev 05/04 1/1/14, 06/01/14, 3/28/17)

* **VOLUNTARY PTO DONATIONS:** Employees may donate PTO to the shared PTO bank. The PTO bank will be used for personal circumstances that hinder an employee’s ability to perform their everyday tasks. The employee receiving the donated PTO must exhaust their PTO bank before PTO donations may be used. PTO donations will be paid to the approved employee with the corresponding payroll. PTO donations paid to employees will not exceed 40 hours per week. The PTO donated will be deducted from the donor’s bank of hours, when the form is submitted. Submit all PTO donation forms to payroll. (Rev 05/04/2022)
* **TIME OFF REQUESTS:**
* Time off requests must be submitted, in writing, using the “time off request form”. Requests will be accepted up to 6 months prior to and no later than 2 weeks before the first day of requested date(s) that you wish to take off.
* Requests will be considered on a first come first serve basis. Submitting a request is not a guarantee that the requested time off will be granted. Patient census, patient care, staffing needs, and current staffing availability will all be considered when determining if a time off request can be approved.
* It is CHHC’s goal to never be staffed with less than 70% in either territory; North or South.
* If time off is approved, the office will need a detailed schedule of all patient information in order to staff your patient accurately during your time off. While you can ask co-workers if they are available to cover for you, it is the scheduler’s job to make the final assignments.
* Given the nature of self-scheduling in Home Health, the scheduler is correct to assume that you are available to accept patient assignments, on your scheduled days, Monday through Friday from 8am-5pm, unless you have a pre-approved time off request. Rev (05/07/19)
* **Time off is limited to the following**: If you are an employee of CHHC with 1-3 years of service, you may take up to 2 consecutive weeks of time off, not to include more than 3 consecutive weekends. If you need more than 2 weeks of time off, a leave of absence must be considered instead; all the policy and procedures that apply to a leave of absence will be followed, including the prepayment of any benefit coverage that may accrue during your absence. If you are an employee of CHHC with greater than 3 years of service, you may take up to 3 consecutive weeks of time off, not to include more than 3 consecutive weekends. If you need more than 3 weeks of time off, a leave of absence must be considered instead; all the policy and procedures that apply to a leave of absence will be followed, including the prepayment of any benefit coverage that may accrue during your absence.
* Time off requests will not be approved for employees who have submitted their notice of resignation.

**STANDARDS OF CONDUCT**

All employees are expected to comply with the following standards of conduct:

1. To comply with all applicable local, state and federal laws;
2. To maintain complete confidentiality of client information.
3. To treat clients with complete respect according to the client bill of rights.
4. To make visits as scheduled or to notify supervisor of inability to maintain schedule.
5. To treat coworkers with respect and courtesy.
6. To practice good personal hygiene and wear appropriate clothing.
7. To refrain from bringing children, friends or pets to client’s homes, with or without client’s permission.
8. To refrain from use of client’s telephone for personal calls.
9. To practice applicable safety and fire prevention activities.

The following behaviors are unacceptable and may result in immediate termination:

1. To borrow money or any of a client’s possessions with or without permission.
2. To engage in smoking, use of alcohol or drugs or profane or abusive language in client homes.
3. To give false information in recording client care, visits made, time worked, travel time, etc.
4. Consistently late documentation is a violation of professional practice standards and places CHHC at unacceptable risk.

**DRUG-FREE WORKPLACE**

We value the health and safety of all employees and clients. We are committed to providing a workplace free of substance abuse because it jeopardizes the efficiency of our operations and the quality of our service and products.

You are expected to be in suitable mental and physical condition while at work, allowing you to perform your job effectively and safely. While working you may not possess, use, manufacture, distribute, or dispense, alcohol, any drug that is illegal under federal or state law (including marijuana or any product that contains tetrahydrocannabinol (THC)), or a legal drug not lawfully prescribed to you. This applies at all times when you are on Company property, on Company business, or under Company control.

All employees and prospective employees in the ordinary course of hiring, including those who have been conditionally offered employment, may be subject to drug and alcohol testing.

We may also randomly test employees for compliance with this Drug-Free Workplace Policy. As used in this Policy "random testing" means a method of selection of employees for testing performed by an outside third party. The selection will result in an equal probability that any employee will be tested. We will have no discretion to waive the selection of an employee selected for testing by this random selection method.

The collection and testing of samples may also be required in the following circumstances: (1) in the ordinary course of the investigation of work-related accidents or in incidents of workplace theft; or (2) when we have reasonable suspicion of possible individual impairment. Reasonable suspicion exists when: (a) an employee’s conduct or behavior at work leads management to suspect that the employee is under the influence of drugs or alcohol; and/or (b) we receive reliable information that the employee is under the influence of drugs or alcohol at work.

Drug or alcohol testing will be performed by an outside third party at a separate testing facility. If you are to be tested, we will inform you of the testing location, and you must proceed there immediately. At our discretion, a Company representative may escort you to and/or from the testing location. You will be required to present reliable identification to the person collecting the test sample. Samples to be provided for testing may consist of breath, saliva, hair, blood, and/or urine. Any drug or alcohol testing will occur during or immediately after your regular work period. We will deem as “work time” the reasonable travel time between the testing facility and the worksite as well as the testing itself, for purposes of compensation and benefits.

All sample collection and testing for drugs and alcohol will be conducted in accordance with the provisions of applicable state or federal law, with close attention paid to privacy and test reliability issues. Tested individuals will have an opportunity to provide the medical review officer who is responsible for the testing with any information they consider relevant to the test, including identification of currently or recently used prescription or nonprescription drugs, or other relevant medical information.

Upon request you will be provided with a copy of laboratory tests and medical records relating to required drug testing by the Company.

Your failure or refusal to comply with our Drug-Free Workplace Policy, your submission of an adulterated or substituted sample, or a verified or confirmed positive test result that indicates your use of alcohol, any drug that is illegal under federal or state law (including marijuana or any product that contains delta-9-tetra-hydrocannabinol (THC)), or prescriptive drugs not prescribed to you, will subject you to disciplinary or rehabilitative actions, which may include the following:

(1) A requirement that you enroll in a Company-approved rehabilitation, treatment, or counseling program, which may include additional drug or alcohol testing, as a condition of continued employment;

(2) Your suspension from work with or without pay for a period of time;

(3) Termination of your employment;

(4) Our refusal to hire a prospective employee; and/or

(5) Other disciplinary measures in conformance with our usual procedures.

**SEXUAL HARASSMENT AND ABUSE**

Sexual harassment is a form of sex discrimination under the law. It is illegal and against the policies of this organization for any employee, male or female, to sexually harass another employee.

Sexual harassment is “unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature” when:

1. Submission to such conduct is made whether explicitly or implicitly as a term or condition of an individual’s employment.
2. Submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individuals.
3. Such conduct has the purpose or effect of unreasonably interfering with an individual’s work performance or creating and intimidating working environment.

Sexual harassment of employees will not be tolerated. Any employee who believes he or she has been the subject of sexual harassment should report the alleged act immediately to the Administrator or alternate. An investigation of all complaints will be undertaken immediately. Any employee who sexually harasses another employee will be subjected to disciplinary action up to and including termination.

**CLIENT SEXUAL HARASSMENT OR ABUSE OF STAFF**

Unwelcome, repeated sexual advances or verbal or physical abuse toward staff by clients should be reported to the supervisor immediately. The supervisor will work with the employee toward a solution. Solutions may include a formal agreement with the client, transfer of the employee or planned or immediate discharge of the client.

**ABUSE OF CLIENTS OR CO-WORKERS**

Verbal or physical abuse directed at a client or co-worker is always unacceptable and will result in immediate termination. As of July 1, 2014, Colorado law requires all incidents involving neglect, abuse or financial exploitation of at-risk adults be reported immediately to the employee’s supervisor or administrator.  (Rev 11/17/14).

**REMUNERATION FOR SOLICITING**

The Agency prohibits any remuneration for securing or soliciting patients or patronage.

The Agency ensures that clinical decisions regarding the provision of care are not endangered by the provision of incentives to staff, financial or otherwise. This is monitored closely by our Quality Assessment Performance Improvement Program.

**CONFLICT WITH PERSONAL VALUES AND BELIEFS**

It is the Agency policy that refusal of an individual staff member to participate in certain aspects of care based upon personal values and beliefs will not disrupt the patient's/patient's care. Should a situation arise for care that is in conflict with individual staff values and beliefs, an alternative method of care delivery may be made available as appropriate.

**GRIEVANCE PROCEDURES**

Employees who believe they have been treated unfairly may voice their dissatisfaction in a step-by-step process according to company policy. See Policy and Procedures.

**EMERGENCY SITUATIONS AND CRITICAL INCIDENTS**

Occasionally, the employee may encounter an unusual, unexpected or emergency situation in the home. The employee is required to act according to the nature and severity of the incident.

**MEDICAL EMERGENCY, MAJOR TRAUMA OR LIFE THREATENING INCIDENTS**

1. Call 911 immediately.

 2. Report to the office what has happened.

 3. The Administrator or designee will notify the client’s emergency contact and

 physician.

 4. Stay with the client until help arrives and the situation is under control.

**NON-LIFE THREATENING INCIDENTS**

 1. Make the client comfortable.

 2. Inform the office and the family.

 3. Follow the Administrator’s instructions.

**RESTRAINT FREE FACILITY**

CHHC is a restraint free agency. The use of restraints, seclusion, or sedation for patient safety is not permitted. All CHHC personnel are trained in this restraint free philosophy and expected to be knowledgeable of methods to protect patients without the use of restraints.

**COMPASSIONATE HOME HEALTH CARE/ASSISTED LIVING FACILITIES POLICY** (Rev 11/25/14)

1. All staff must sign in/out at front desk per facility policy.
2. CHHC badge must be worn at all times while in facility.
3. Always make contact with appropriate facility personnel concerning resident care. Follow policy in facility for notifying personnel of changing condition of resident.
4. No scrubs or jeans are allowed in any facility.
5. Please be aware of time constraints of wellness nurses as they have many residents they are responsible for.
6. Please complete facility approved communication sheet and leave in ALF designated location.
7. For insulin patients, supplies and insulin location are in residents’ rooms or locked in med/chart rooms or memory units. CHHC insulin binders and logs are located in the facility appropriate locations.
8. Please ask Liaison for specific personnel contacts during orientation to individual ALF’s.