

FIVE STAR HOME HEALTH CARE

Employee Handbook

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ABOUT THE COMPANY

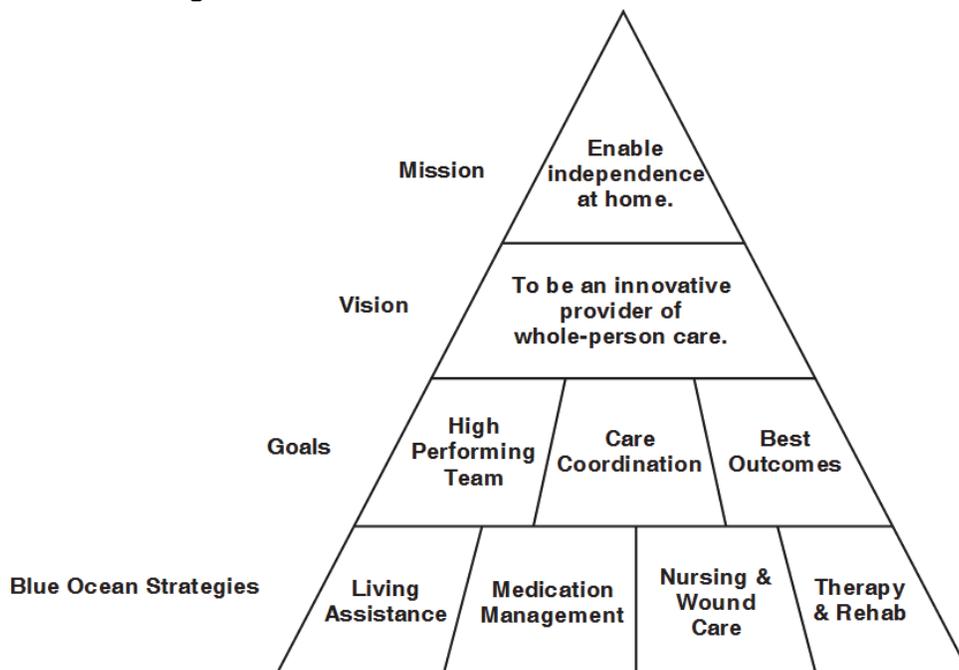
Five Star Home Health Care (“Company”) provides a full spectrum of home health care services in the client’s residence, facility or hospital. Five Star Home Health Care is a leader in "whole person" fully integrated nursing, therapy and daily living assistance for individuals who prefer 1-on-1 care in the comfort of their own home. We also provide Certified Nurse Aide and Personal Care Aide training and certification. This Employee Handbook provides general guidelines on employee and staff conduct, policies and procedures. All information may not apply to all operating divisions, services or situations and is subject to revision at any time.

We have a positive, service-oriented view of our organization and its future. We hope that you will always share in our commitment to service and quality, and join us in pursuing the goal of quality home health care. We provide skilled nursing, therapy, and non-medical personal care services in our patients’ homes. We enable seniors, special needs pediatrics, and individuals with disabilities to live comfortably, safely and independently in their own home. We bring Assisted Living to their home to avoid moving into a facility or nursing home. We are a state-licensed agency with Joint Commission accreditation. We cover all of Northern Virginia. We’re local and highly responsive! Our phones are answered 24-hours a day by a live person.

Objectives & Philosophy

- To provide the highest quality care in the client’s residence.
- To allow family members to remain together in their home as long as feasible.
- To assist the client and family to maintain as normal a lifestyle as possible.
- To augment care and services available in our community, hospitals, and nursing homes through provision of home care.
- To provide employment opportunities for individuals in a fair, safe, and professional business atmosphere with equal opportunity for all.

Mission, Vision, Goals & Strategies



Our Structure

Each operating division is managed by an Administrator or Manager, who reports to the Governing Body. Your direct supervisors include Director of Clinical Services, Nurse Supervisors, Case Manager and the office support team, who report to the respective Administrator. The Director of Clinical Services and Nursing Supervisors assess clients and develop a Plan of Care tailored specifically to each client’s needs. The office support team maintains the daily office functions, human resources, answering the phone, filing, data input and accounting. Clinical staff works under the direction of the Director of Clinical Services, Nurse Supervisors, Case Managers and office support team, and are responsible for understanding and implementing the client’s Plan of Care.

INTRODUCTION

This Employee Handbook is a summary of the Company's employment policies and procedures. The handbook revokes and supersedes any prior summaries or statements of employment policies and procedures. It is the primary document that describes the Company's policies and procedures. The Company expects to revise and update this handbook from time to time. The Company will generally advise employees of changes or additions or deletions in policies and procedures covered in this handbook by circulating such changes or additions or deletions in writing. However, the Company retains the right to change policies with proper notice to employees of such changes. This Employee Handbook is not an employee's only source of information on employment-related issues. Although this handbook will be the best place to begin looking for answers to employment-related questions, employees may from time to time have questions that the handbook does not answer. In those situations, employees should talk with their supervisor.

This handbook is not a contract of employment. As explained in the handbook, all employment with the Company is "at will" which means that the Company or employee may terminate the employment relationship at any time, with or without cause, and with or without notice. In addition, employees may be demoted, their job duties may be changed, or their benefits altered at any time, with or without cause, and with or without notice. No one in the Company has the authority to enter into any agreement for employment for a specified period of time, or to make any representations or agreements that are inconsistent with the at-will status.

EMPLOYMENT STATUS

At-Will Employment

Employment with the Company is "at-will." "At-will" means that either the Company or the employee may terminate the employment relationship at any time, with or without cause, with or without notice. No one in the Company has the authority to enter into any agreement for employment for a specified period of time, or to make any other representations or agreements that are inconsistent with the at-will status.

Work Authorization

The Company is required to verify the work authorization of every employee. It is the employee's responsibility to maintain work authorization credentials. There are certain circumstances that may cause an employee's work authorization to expire. It is the Company's legal responsibility to re-verify work authorization in these instances. Should your work authorization expire, and you fail to present updated, valid work authorization credentials, your employment will be terminated immediately until your work authorization can be re-verified.

Classifications of Employees / Eligibility for Overtime Compensation

Each employee is classified as either exempt or non-exempt, as determined by each individual's job duties.

Nonexempt employees are hourly employees who are eligible for overtime pay for all hours actually worked in excess of 40 hours in a week, in accordance with applicable federal and state wage and hour laws. The overtime rate is one- and one-half times the regular rate of pay unless you qualify under the overtime exemption rule.

Exempt employees are employees who meet the criteria for exclusion from applicable federal and state wage and hour laws. (Most clinical staff meet exemption criteria.) Exempt employees are expected to work whatever hours are necessary to complete their assignment and do not receive overtime compensation.

Personnel Records

Personnel records, including medical information about an employee, are kept confidential. Access will be controlled via locked file cabinets and access will generally be limited to case management personnel who have a need to know the information for care management responsibilities. Under some circumstances, the Company may be required to provide personnel records under federal or state law or in response to a court order or subpoena.

Access to your financial and medical records is limited to you, your designated representatives, legal guardian, authorized Company employees/contractors and duly authorized state/Federal health authorities or any other individuals specifically authorized by the Code of Virginia and regulation promulgated there under. Employees

may review their personnel records at a mutually convenient time during business hours and may add additional items to the file. Any concerns regarding the completeness or accuracy of the information contained in the personnel file should be discussed with your supervisor.

When a current employee needs the Company to verify employment (such as for a loan approval), the Employee should advise their supervisor of the need at the earliest opportunity so that the Company can verify the authorization to release employment information. The Company also reserves the right to provide references regarding former employees. Generally, such references will only include verification of dates of employment and job title and duties, unless the former employee provides a written release of additional information.

Personal Information

All employees must maintain an active phone number and current mailing address where they can be reached regularly. Employees are responsible to notify their supervisors of any personal changes, including but not limited to addresses, telephone numbers, number of dependents, change in marital status or other personal information so that the Company may keep personnel records accurate and up-date and so that the Company can communicate with employees as needed.

LEAVES OF ABSENCE

Family and Medical Leave Act

An employee who has worked for the Company at least twelve months, including at least 1,250 hours in the last twelve months and is based out of a office where there are more than 50 employees in a 75-mile radius, may be entitled to 12 workweeks of unpaid leave in any twelve-month period:

- to care for a newborn or newly-adopted child or newly-placed foster child,
- to care for a child, parent or spouse who has a serious or terminal health condition, or
- due to the employee's own serious health condition.

A "serious health condition" is an illness, impairment or condition that involves inpatient care in a hospital, hospice or residential medical care facility or continuing treatment by a health care provider, any period of incapacity of three or more consecutive days and continuing care of a medical provider, as well as any period of incapacity due to pregnancy including prenatal care.

In addition to the leave described above, a pregnant employee may also be entitled to leave for the actual period of disability associated with pregnancy and childbirth.

Leave to care for a newborn, newly adopted child or newly placed foster child must be taken within twelve months of the birth, adoption or placement. If the Company employs both parents, they are together entitled to 12 workweeks of unpaid leave.

Employees who wish to take leave must give at least 30 days' written notice in advance of the anticipated date the leave is to begin stating the reason for the leave and the dates during which the leave is to be taken. If the employee is not able to give the required notice, he or she must give notice as soon as possible.

Upon returning from the leave, an employee is entitled to return to the same position held when the leave began or to an equivalent position with equivalent benefits and pay, unless the position would have been eliminated had the employee not been on leave. In such a circumstance, the employee can apply for any other vacant position for which he or she is qualified.

The employee must use any other accumulated leave, paid or unpaid, to which he or she is otherwise entitled while on this leave. If leave pursuant to this policy would also qualify as leave under any other company benefit or policy, the period of the leave will apply toward the entitlement for each type of leave that may apply.

By taking the leave, the employee will not lose any benefits that accrued before the start of the leave. The employee will not be entitled to accrue benefits during the leave. The company will maintain its contributions to your health insurance premiums, if applicable, during the leave. The employee will be required to continue his or her share of the premiums for the employee and his or her dependents. The employee will also be required to arrange in advance self-payment of other insurance benefits. If the employee does not return at the end of

your leave, the employee may be required to repay the Company for the health insurance premiums paid during the leave.

This policy will be administered according to the Family and Medical Leave Act and the regulations interpreting it and any applicable state law. Employees should contact their supervisors with questions about eligibility for leave or other leave benefits that may be available.

Maternity Disability Leave

Pregnant employees are entitled to leave for the actual period of disability associated with pregnancy and childbirth ("Maternity Disability Leave"). If the employee is eligible for family leave under the Family and Medical Leave Act, described above, FMLA leave will run concurrent with any maternity/parental leave under this section. If the employee is not eligible for FMLA (for example, has worked for fewer than 12 months), the employee is nevertheless entitled to Maternity Disability Leave. The leave is unpaid.

Military Leave Of Absence

If an employee is required to attend annual military reserve training or other active military duty the employee may take the time as unpaid leave. If an employee takes military leave, he or she is entitled to return to the employee's former job as provided under federal and state laws.

WORKWEEK AND DAILY SCHEDULE

Workweek and Scheduling

For payroll and accounting purposes, the regular workweek begins at 12:00:01 a.m. on Monday and ends at midnight the following Sunday. The Company cannot guarantee how long a particular assignment or shift may last. Clients may cancel our services at any time or request to have an employee removed from their case. As such, an assignment may last only one day, one week or one month. Because of the unpredictable nature of each case, all assignments are considered temporary. Furthermore, we cannot guarantee the number of hours you will work each week or promise you consistent full time work. Your supervisor will communicate the hours assigned for each client to whom you provide services. You are expected to work all assigned hours and days. Requests for scheduling changes or for particular days off must be made ahead of time and approved by your supervisor. Also understand that you are free to express your preference for certain hours or working days. However, your preferences may limit the Company's ability to offer you assignments.

The Company reserves the right to change the regular workweek, the normal business hours, or the normal workday with prior notice to employees.

Rest and Meal Periods

All nonexempt employees receive a 10-minute paid rest break for each four hours of working time. If the nature and circumstances of the nonexempt employee's work allows the employee to take the equivalent of 10 minutes rest intermittently throughout the four-hour period, then the break need not be a formal, scheduled one. The employee's supervisor may schedule the breaks, which should generally occur near the midpoint of each four-hour work period. A non-exempt employee may not use break periods to extend a lunch period, to work overtime, or to leave work early.

Nonexempt employees working more than five hours in a day are entitled to take a meal break two to five hours into their shift. The normal meal break is a 30-minute unpaid period. Any nonexempt employee who works at least ten hours in a day is required to take a second 30-minute unpaid meal period around the middle of the second five-hour period.

Clinical staff will generally be required to remain on the client's premises during the meal period and will generally be paid during this time.

Any nonexempt employee who is unable to take his or her rest or meal period must notify his or her supervisor promptly so that the Company can reschedule the break/meal period, help develop strategies for obtaining a meal period while on assignment with a client or otherwise ensure that the employee receives the benefit of a meal period.

It is your responsibility to bring your own meals. For live-in personal care cases, meals will be provided by the client.

On-Call Services

The Company operates 24 hours a day, 7 days a week, 365 days a year. A live, Company employee answers the phone at all times. We do not use a call center, and we do not use voicemail.

Personal Care Division

The RN supervisors may be required to participate in an on-call rotation (either answering the phone or providing clinical services). Case Managers may also be required to participate in an on-call rotation for answering the phone.

Skilled Care Division

The nursing and therapy staff may be required to participate in an on-call rotation either for answering the phone or providing clinical services. Case Managers may also be required to participate in an on-call rotation for answering the phone.

COMPENSATION

The pay associated with each assignment may vary depending on the level of care required for each client, how many hours are spent on a job, if services are required on a holiday, etc. Therefore, always check the wage offered before accepting any position.

Pay Periods and Pay Days

The Company's pay periods are weekly and your pay day is either Thursday or Friday, depending on dept.

Submission of Patient Documentation

Employees are responsible for maintaining accurate and complete records of all hours worked and time off. For professional staff performing episodic visits, itineraries, with all visit reports attached, must be submitted the next scheduled work day, not exceeding two (2) business days. Professionals performing long term care (private duty) or paraprofessionals (personal care staff) are required to turn in documentation weekly. To be processed for payroll, this documentation from long term care staff must be at the office on the Tuesday before payday by 5pm. Falsification or recurrent late submission of documentation may result in discipline up to and including termination.

Holidays

We observe the following holidays: New Year's Day, Memorial Day, Independence Day, Labor Day, Thanksgiving, the day after Thanksgiving, Christmas Eve and Christmas Day.

Certain employees may be paid two (2) times the quoted rate on these days. Holiday pay rate does NOT apply if you call out on the day before or day after a holiday if you are scheduled to work on either of those days. If you wish to take time off work for a holiday all requests must be made in writing (30) days prior to the holiday. The holiday pay rate does NOT apply to Medicaid, Medicare, insurance or skilled care cases.

Performance Appraisals

Our goal is to conduct a performance evaluation for clinical staff during the Company's annual Employee Appreciation Week (see section labeled "Employee Appreciation Week" for clarification). The evaluation will be job-specific, and it will assess your individual performance. If applicable, it will include at least one in-home observation per year for a competency skills check. Non-clinical staff will have their performance evaluated on an informal and/or formal basis and is ongoing.

Once you have been evaluated, your supervisor will discuss the evaluation report with you. During this interview, your supervisor will outline areas where you may need improvement and will help you make a plan to address those issues. After discussing your evaluation, you will sign the evaluation report, indicating that you have seen it and have had it explained to you. You will also have an opportunity to provide input and recommendations for your development and training. The evaluation report will be placed in your personnel file and will become a part of your permanent employee record.

Held Pay

Your pay may be held if you are found to be out of compliance with Company policies. Compliance is considered part of the work required of the job.

Funds may be withheld from your pay to cover court-ordered garnishments or any court-ordered directive required of the Company. The Company will not be held responsible for incorrect garnishment notices, incorrect effective dates, incorrect withholding amounts, or other errors related to the accuracy of any actions the court orders the Company to take against you.

If your employment with the Company ends, any funds owed to the company will be deducted from your final paycheck, and your final paycheck may be delayed as documentation issues are researched.

Direct Deposit

The Company does not issue paper payroll checks or provide paper pay stubs to employees. All payments are made through direct deposit to any U.S.-based bank of your choice. We can deposit funds in up to two different accounts. All pay stubs are viewed through an online service with instructions provided via email for your first pay date. If you do not have internet access at home, you can visit any library for access.

EMPLOYEE RELATIONS

Employee Newsletter

The Company periodically sends out an employee newsletter. It is imperative that you read this newsletter. Because we do not get to see you on a regular basis, we use the newsletter to inform you of important issues and policy changes. Please take the time to read it.

Referral Bonus

Refer a Friend and Receive \$100! Refer a Client and Receive \$200! We are proud of the fact that a high number of our employees come to us by referral from satisfied current employees! To show our appreciation for recommending a friend or relative to us, we offer you a generous referral bonus program. The referred applicant must place your name in the "referred by" section of our job application. After they have successfully completed 5 work shifts, you receive \$100! Client referrals eligible for bonus must be 40 hours or more per week for at least 4 weeks. After that, you receive \$200! There is no limit with the referral bonus program. The more people you refer, the more money you can receive!

Employee Appreciation Week

Each year the Company conducts an Employee Appreciation Week. It is a week the Company uses to update employee information as well as meet compliance criteria for the year. It will include required in-service training for applicable clinical staff, performance evaluations, required on-going competency assessments, TB testing, and any employee file updates that may be required to keep you in compliance. You will be given a specific date and time well in advance of your required appointment during the week. Attendance is required for you to stay active and in good standing with the Company.

Employee In-Service Training

The Company will provide mandatory in-service training during Employee Appreciation Week. In-service training is required to keep our license AND your license in good standing with the Commonwealth of Virginia.

Credentials

It is your responsibility to maintain your own credentials. The Company is not responsible for notifying you if any credential is about to expire. Employee Appreciation Week is designed so you can keep your credentials current and on file with us. As we have specific licensing requirements from state and Federal agencies we cannot continue to employ you if any of your credentials expire. You will be suspended without pay until you provide us with the updated credential. Depending on the credential and circumstance by which it expires, you may be terminated for cause.

Performance Improvement Program and Role

The Company is continuously collecting and analyzing data in order to improve its performance of clinical processes. Your performance is be analyzed constantly, so act accordingly. The analysis of your performance may be part of reports presented to the Company's Governing Bodies. All performance improvement activities and meetings are kept confidential, and you will never be mentioned by name in any report.

Equal Employment Opportunity Act

The Company is an equal employment opportunity employer. Every employee has the right to work in surroundings that are free from all forms of unlawful discrimination. The Company will not engage in or tolerate any discrimination in the workplace prohibited by local, state or federal law. Specifically, no employee will be discriminated against on the basis of his or her race, gender, religion, age, physical or mental disability, marital status, national origin, Veterans status or any other basis prohibited by applicable federal, state or local law.

The Company recognizes that employees with physical or mental conditions, which significantly limit their major life activities, may need reasonable accommodations to enable them to perform their essential job functions. Any employee who believes s/he needs reasonable accommodation should notify his/her supervisor. Although the need for accommodations is determined on a case by case basis, generally the Company and the employee engage in an interactive process with the employee's healthcare provider(s) to confirm the existence of the condition, its limitations in the workplace and possible reasonable accommodations. The employee has an obligation to cooperate with the Company in this process, which may include authorizing the Company to communicate with the employee's healthcare providers concerning the employee's condition, its limitations, and possible reasonable accommodations.

Anti-Harassment

Harassment Will Not Be Tolerated

The Company is committed to providing a workplace that is free of verbal, physical and visual forms of harassment so that everyone can work in a productive, respectful and professional environment. Harassment in employment based on sex, race, national origin, religion, age, disability, or any other basis prohibited by local, state or federal law is strictly prohibited. The Company does not tolerate harassment, based upon any protected status, by anyone in the workplace — supervisors, co-workers, or non-employees. Employees who violate this policy are subject to discipline, up to and including possible termination.

What Is Harassment?

Examples of harassment based on race, national origin, religion, age or disability can include, but are not limited to cartoons or other visual displays of objects, pictures or posters that depict such protected groups in a derogatory way; and verbal conduct, including making or using derogatory comments, epithets, slurs and jokes towards such groups.

Sexual harassment is generally defined as unwelcome sexual advances, requests for sexual favors, or other visual, verbal or physical conduct of a sexual nature when:

- Submission to such conduct is made either explicitly or implicitly a term or condition of employment;
- Submission to or rejection of such conduct affects employment opportunities; or
- The conduct interferes with an employee's work or creates an intimidating, hostile or offensive work environment.

Sexual harassment includes harassment based on another person's gender or harassment based upon pregnancy, childbirth, or related medical conditions. It also includes harassment of another employee of the same gender as the harasser.

Examples of sexual harassment include, but are not limited to, the following types of behavior:

- Unwelcome sexual advances, like requests for dates or propositions for sexual favors;
- Excessive, one-sided, romantic attention in the form of requests for dates, love letters, telephone calls, emails or gifts;
- Offering or conditioning an employment benefit, like a raise, a promotion or a special job assignment, in exchange for sexual favors;

- Making or threatening reprisals, or changing performance expectations after an employee has turned down a sexual advance;
- Visual or physical conduct, like leering, making sexual gestures, or displaying sexually suggestive objects, pictures, cartoons, calendars or posters in the workplace;
- Verbal conduct, like making or using derogatory comments, epithets, slurs, teasing and jokes of a sexual nature;
- Graphic verbal or written comments (including emails or other electronic documents) about an individual's sex life or body;
- Sexually degrading words used to describe an individual;
- Suggestive or obscene letters, emails, notes or invitations; and
- Unwelcome physical contact, including pats, hugs, brushes, touches, shoulder rubs, assaults, or impeding or blocking movements.

What to Do If Harassment Occurs

Each employee is responsible for supporting and adhering to this policy. Employees should never tolerate inappropriate behavior. They should make their feelings known to the offending employees. In many cases, if an employee makes his/her feelings known to the offending persons, tells them the conduct is not appropriate, and asks them to stop, this may take care of the situation. However, if any employee is not comfortable doing this, then they must promptly report any offending behavior, whether such behavior is directed towards them personally or to other employees at the Company. Reports of offending behavior must be made to the Administrator or member of the Governing Body.

The Company will promptly and thoroughly investigate all claims of harassment. If the Company concludes that unlawful harassment occurred, prompt and effective remedial action will be taken. No action will be taken against any employee who in good faith files a complaint of harassment or assists in the investigation of such a complaint. Employees who believe they have been retaliated against for having reported harassment or participated in an investigation must promptly notify any supervisor or the Administrator so their concerns can be investigated. Appropriate corrective measures will be taken if allegations of retaliation are substantiated.

Unemployment and Workers' Compensation

Should your employment with the Company end you may qualify for unemployment benefits. See your local Employment Commission office for details. Because the Company cannot guarantee hours or that a particular case will last, all work is considered temporary, and therefore, it will typically disqualify you from unemployment insurance claims.

If you are injured while working for the Company, you may be entitled to Workers' Compensation benefits. Notify your supervisor immediately if you are injured on the job, and you will receive the number for opening a Workers' Compensation claim. If you are injured on the job you will be required to submit to drug testing within 24 hours of reporting your injury. You will be required to see a physician that is a part of a panel of physicians provided by the Workers' Compensation insurance provider in order to return to work. You will be offered transitional work in accommodation of the parameters set forth by the treating physician to promote a smooth and timely transition from an injured state to a state of wellness and regained ability to perform regular job duties. If you refuse this transitional work you may lose your rights to workers' compensation benefits.

Malpractice Coverage

All practicing employees of the Company are covered by the Company's malpractice insurance. This only applies when employees are practicing within the scope of his/her license or certification, and the employee is practicing with sound judgment.

Non-solicitation and Non-compete

As an employee of the Company you are prohibited from becoming employed by, or receive compensation from any patient of the Company if you were assigned to provide services to that patient by the Company within six (6) months of accepting the employment or compensation of the Company. If you work for multiple agencies, you cannot solicit the services of another agency to any patient of the Company for a period of one (1) year after discharge from the Company. If you fail to comply with this policy, you will be responsible for paying the Company a \$5,000 fee for liquidated damages, which can be deducted from outstanding paychecks.

Employees working for the Company in a non-clinical capacity are prohibited from working for a competitor in any capacity for a period of 18 months following the date of termination of employment with the Company. You are also prohibited from soliciting any patient, employee, contracted employee, referral source, or vendor of the Company. Failure to comply may result in legal action against you.

Community Resources

The Company provides information to patients regarding the resources available throughout the community. The Company maintains a list of community resources, the services provided, and telephone numbers at the office. For information on community resources contact the office. If your patient asks you for information on community resources, refer them to the office so the information can be given to them.

Employee Benefits

The current position of aide/caregiver is considered a category of employee not eligible for medical coverage or other benefits provided by the Company, regardless of when or the number of hours that are worked.

Professional and office staff will have their qualifications for benefits discussed during the hiring process. If you have any questions regarding your benefits status, talk to your supervisor.

Complaint Resolution Procedure

Any problems you have should first be addressed to your supervisor or Administrator. This should be done in a timely fashion and, depending on the nature and severity of the complaint, should be presented in writing.

If your supervisor does not resolve the complaint to your satisfaction, you may make the complaint known to your supervisor's superior. You are responsible for presenting the complaint in writing. If the complaint is not resolved by the supervisor's superior, you may take the complaint, in writing, to the Administrator. You must notify the supervisor's superior of this action. The action recommended by the Administrator shall be presented in writing and shall be binding to all parties involved. The Company will not retaliate against any employee who presents a complaint under this policy or raises any questions, issues, or concerns regarding their employment with the Company, so long as such effort is made in good faith by the employee.

To register a formal complaint about the quality of services or to report fraud, call the Commonwealth of Virginia Home Health complaint hotline at 800-955-1819.

EMPLOYEE RESPONSIBILITIES / RULES OF CONDUCT

When you are at work, you represent the Company to our clients, their families, and the public at large. Your conduct as an employee is therefore expected to be of the highest integrity, discretion and professionalism any time you are at a job site. You are a valuable member of our company. Our reputation is heavily dependent upon you!

Work Demeanor

Employees are expected to treat clients with kindness, patience and respect at all times – even if a client, as a result of his or her illness or infirmity, is sometimes difficult to deal with.

Attendance and Tardiness

Employees are expected to report for work when assigned, on a regular basis, and on time. Regular and timely attendance is an essential function of every employee's job and critical to the smooth operation of the Company. It is imperative that you be at your work site at the time that work is scheduled to begin. If you are unable to do so, you must immediately call the office and inform your supervisor.

Telephone Login is required of certain types of cases. Your Case Manager will instruct you. Your name tag will have the login/logout instructions on the back. You **MUST** use your client's home phone, or alternatively, your client's cell phone. Your personal cell phone will not register the login or logout.

Late-starts are defined as times when you are late for work and time off has not been approved. Supervisors are required to monitor and document late-start occurrences for all personnel. The office will randomly call your work site at the time you are scheduled to start your shift in order to ensure you are punctual. Also, clients often lodge complaints with the office if employees are not punctual. Documentation of late-starts will be kept on record at the office. We take this very seriously - please do not be late!

Early outs are defined as any time you leave work early without approval. Even if you have a client's permission to leave early, you must first receive approval from your supervisor before you can leave any job site. Documentation of early outs will be kept on record at the office.

If the employee has 3 unexcused tardies/late-starts/early outs within any 6-month period, their employment with the Company will be terminated without the possibility of rehire for a period not less than 1 year. A written notice shall be sent notifying the employee of their unexcused tardies and reminding them of this Policy and Procedure.

Sick-leave requires at least 12 hours notice and a doctor's note to return to work. You may be required to take off at least 3 total days for sickness.

Time off must be made in advance. Notify your Case Manager at least one month in advance. Failure to comply with policies for requests off may result in termination for cause.

Leaving a case permanently requires advance notice. As with any job, at least two weeks notice is required to remove yourself permanently from a case.

Unexcused Absences are defined as absences (including arrivals more than 30 minutes after the scheduled start of shift) without the prior approval of your supervisor. If you are ill and cannot go to work, we must have as much notice as possible before your shift begins to allow time for the office to find a replacement for your shift. Documentation of unexcused absences will be kept on record at the office. Transportation and/or babysitter issues are not valid reasons to miss work. Have a back-up plan!

Failure to work any scheduled shift in a pay period due to an unapproved absence, making changes to the original agreed upon schedule, failure to follow the care plan or supervisor instructions or to comply with work requirements or comply with company policies may result in termination from the Company with cause.

Personal Appearance/Dress Code

Clinical staff must follow the following Dress Code:

- Name tag provided by the Company division (Virginia Department of Health requirement)
- Scrubs are required for all clinical staff unless prior approval is given by the Company.
- If prior approval is given, and scrubs are not required:
- Wear clothing appropriate to the environment of your client.
- Dress comfortably, but professionally.
- Women should never wear tight fitting shirts or shirts with "flow" sleeves that can easily get caught on objects.
- Do not wear clothing with wording or images that could be offensive to clients or co-workers.
- Long hair should be tied back in a ponytail for safety and hygienic purposes.
- We advise that you remove all jewelry before reporting to work since jewelry can easily get caught on objects or lost.
- Shoes should be rubber soled for utmost traction. Heels, flip-flops and other impractical shoe wear are not allowed.
- Report to work each day clean, neat, and ready to work.
- Do NOT use heavily scented soaps.
- Do NOT wear any perfumes or colognes.

Employees who do not adhere to the dress code are subject to discipline, including a warning documenting the violation, placement on probation, and ultimately termination if unable to comply with the dress code. If you have questions about your clothing choices, please do not hesitate to consult your supervisor.

Minimum dress code for office staff is business casual. Professional attire may be required under certain circumstances.

Employee Use of Vehicles

Caregivers may be called upon to transport their clients to doctor appointments, grocery stores, etc. If you use a vehicle for work, you are expected to comply with the following requirements:

- You must have and carry a valid driver's license and evidence of satisfactory insurance at all times when driving on Company business. You must be able to provide proof to the Company in the form of a copy of the declarations page of your existing auto policy and furnish a valid driver's license.
- You will be required to provide the Company with access to your driving records. Based on the result, you may not be authorized to provide transportation services for your clients. Driving records are kept on file for 3 years.
- You are expected to drive in a safe and lawful manner at all times and follow all traffic rules, speed limit, HOV restrictions, etc.
- You are expected to promptly notify your supervisor of any citations for moving violations or accidents.

For skilled staff and office staff who drive a company vehicle, all traffic rules must be followed while driving the company vehicle, i.e. speed limit, HOV restrictions, etc. Under no circumstances can you use your cell phone for any purpose while driving a company vehicle. If you are found disobeying traffic laws, using your cell phone, or using the company vehicle for personal use, you can be terminated for cause.

Alcohol and Drug Use

Use of alcohol or any other drug is a serious threat to personal health, workplace safety, and job performance. Employees are *strictly prohibited* from possessing, selling, consuming, or being under the influence of alcohol and illegal drugs (and legal drugs that are not used in a manner consistent with accepted frequency or dosage requirements) while on the job. Employees should determine from their physician or pharmacist whether any prescription drugs taken might impair the ability to perform safely and effectively. If your performance may be so impaired, immediately advise your supervisor so that reasonable accommodations can be considered.

You may have clients who offer you alcoholic drinks either during a meal or who may want you to drink with them while escorting them to a special function. They may express that they are uncomfortable if you do not drink with them. To prevent termination from our Company, **do not drink while you are with your client!** Explain to them that it is acceptable for them to drink alcohol but it is a Company policy that none of our employees drink *any* alcohol while at work and that you will be dismissed from the case if you do so. If they do not take your response as a valid reason please have them call the office so we can explain the seriousness of this issue to them personally.

The Company may require drug testing for individuals: a) that it suspects may be engaged in illegal drug use or b) prior to reporting to work for clients that require it or at locations that require it. Confirmed positive results from drug testing shall be reported to the Virginia Board of Nursing and may result in immediate termination from the Company with cause.

As an employee of the Company, you agree, upon a request made under the Company's drug testing policy, to submit to a drug test and to furnish a sample of bodily fluid for analysis. You understand and agree that if at any time you refuse to submit to a drug test under company policy, or if I otherwise fail to cooperate with the testing procedures, it is considered a positive result, and you will be subject to immediate termination. For instant-read tests, you can have the results confirmed at an off-site drug testing facility. For non-instant read tests, you authorize and give full permission to have the Company send the specimen or specimens so collected to a laboratory for a screening test for the presence of any prohibited substances under the policy, and for the laboratory or other testing facility to release any and all documentation relating to such test to the Company and/or to any governmental entity involved in a legal proceeding or investigation connected with the test. Finally, you authorize the Company to disclose any documentation relating to such test to any governmental entity involved in a legal proceeding or investigation connected with the test. Only duly-authorized Company officers, employees, and agents will have access to information furnished or obtained in connection with the test; they will maintain and protect the confidentiality of such information to the greatest extent possible; and they will share such information only to the extent necessary to make employment decisions and to respond to inquiries or notices from government entities. You hold harmless the Company,

and any testing laboratory the Company might use, meaning you will not sue or hold responsible such parties for any alleged harm that might result from such testing, including loss of employment or any other kind of adverse job action that might arise as a result of the drug or alcohol test, even if a Company or laboratory representative makes an error in the administration or analysis of the test or the reporting of the results. You will further hold harmless the Company, its company physician, and any testing laboratory the Company might use for any alleged harm that might result from the release or use of information or documentation relating to the drug or alcohol test, as long as the release or use of the information is within the scope of this policy and the procedures as explained in the paragraph above. This policy and authorization have been explained in a language I understand, and if you have any questions about the test or the policy, they will be answered.

If you do not agree with the above policy on drug testing, notify your supervisor immediately.

Ongoing Training

Training will be conducted as changes are implemented in the Agency's policies and procedures. State-required training and refresher courses may be offered on an annual basis, or more often if needed. You will be given notice of refresher course offerings and will have an opportunity to schedule an appointment to receive the training.

Mentoring

We are committed to encouraging the professional development of our clinical staff. If you have a particular strength in a certain area, you may be assigned to mentor others who can benefit from your training and experience. Consider this part of your job description. On the other hand, if you lack experience in a certain area, we may ask you to be mentored by another member of our caregiving team.

Personal Electronic Devices

Non-skilled Staff

Talking on your cell phone, texting or playing games on your phone is allowed on your break and during meals. You are not allowed to wear a wireless headset while working. Tell your friends and family to call you in emergencies only. Under no circumstances are you to use your cell phone for any purpose when you are driving a client. You can be terminated for this offense. A client's telephone should be used only to conduct company business or in case of an emergency. Using a client's telephone for personal calls will result in disciplinary action. Use of a laptop or MP3 player is prohibited during your shifts.

Skilled Staff

Talking on your cell phone, texting or playing games on your phone is not allowed during visits. Those activities are allowed on your break and during meals. Under no circumstances are you to use your cell phone for any purpose when you are driving a company vehicle. You could be terminated for this offense.

Office Staff

Talking on your cell phone, texting or playing games on your phone is not allowed during work time, except during meal breaks. Your phone is to be kept inside your desk or purse and inform friends or family to call your phone in the event of an emergency. You will not be able to send or receive texts during regular work time. Company computers and devices are permitted to access work-related web sites only. You are not allowed to access personal email, chat, social networking, or other non-work related sites at any time on company computers and devices.

Criminal Background Checks

As explained during the application process, the Company requires national criminal background checks (CBCs) on all prospective employees. Under special circumstances, you may be allowed to begin working on a conditional basis prior to the receipt of your CBC results, provided the consent form has been signed. If you are employed on a conditional basis and your CBC results are positive, you may be terminated immediately depending on the crime involved, when it occurred, and other factors. The Department of Health may require a new CBC if offenses occur after your initial background check.

Confidentiality

No employee of the Company is allowed to give out information about agency business or a client's condition without specific authorization. All client information is confidential. The Administrator is the only person authorized to release this information. Any inquiry about a client must be directed to the Case Manager or Administrator, unless other specifics are outlined in the Plan of Care. The Agency business office is responsible for answering questions regarding insurance coverage, billing and charges. Employees who reveal confidential information without authorization will be terminated immediately and may face civil or criminal legal action.

Health Insurance Portability and Accountability Act

HIPAA accounts for the privacy of "protected health information". We are required by law to maintain the privacy of protected health information. Protected health information includes any identifiable information that we obtain from clients that relates to their physical or mental health, the health care they have received, or payment for their health care. Employees are required to maintain strict confidentiality and compliance with HIPAA privacy laws. Employees who reveal protected health information without authorization will be terminated immediately and may face civil or criminal legal action.

Workplace Misconduct and Discipline

When disciplinary action is taken against an employee, his/her supervisor has the authority to take whatever action is warranted. The action may include a 90-day probation, an oral or written reprimand, suspension without pay, reduction in pay or termination from employment. In any case of reduction in pay or suspension, the supervisor shall immediately furnish the employee and the Administrator with a written statement documenting the reasons for the action. If an employee receives a written reprimand, it shall become a permanent part of his/her personnel file.

The Company may issue disciplinary action, up to and including discharge, for the following types of workplace misconduct. This list is illustrative only, and does not identify every potential type of workplace misconduct for which an employee may receive discipline up to and including termination. Employment is at-will at all times.

- Insubordination.
- Excessive or recurring absenteeism, tardiness, or failure to report in when absent or late for work.
- Providing services outside the scope of the client's Plan of Care.
- Unauthorized release of confidential or proprietary information.
- Abusive, rude, degrading, or improper behavior (including swearing).
- Falsification of any work, personnel, or other Company records.
- Dishonesty or theft.
- Discrimination against, or harassment of, clients, co-workers or supervisors.
- Possession, use, sale, or being under any influence of alcohol or illegal drugs, or misuse of prescription drugs, while at work.
- Reporting to work under the influence of a prescription drug that may impair judgment while on the job, even if used as directed.
- Deliberate or negligent misuse of, or damage to, client or Company property, or property belonging to co-workers, supervisors or managers.
- Fighting with, or threatening, a client, co-worker, supervisor or manager.
- Possession of firearms or other weapons while at work.
- Unacceptable or below-standard job performance.
- Violation of any policy contained in this Handbook or any other Company policy or procedure communicated to employees.
- Violation of the health and safety regulations, safety rules or infection control practices.
- Violation of any state or federal laws and regulations.
- Misconduct or negligence that endangers the health or safety of yourself or others.
- Sleeping on the job, whether day or night, unless specifically allowed in the Plan of Care.
- Unethical conduct for the sake of achieving results, no matter how positive.
- Visits from friends, family members (including children), or other personal guests when working at a job site as a Caregiver.

- Allowing or making arrangements for services to be completed by any of your relatives, friends, or others for your client or their family.
- Failure to immediately report an incident that endangers the well being of a client or yourself.
- Manipulating a client or case by refusing to accept or sending away a relief Caregiver in order to stay with the client, negotiating a longer schedule with a client, leading the client to believe that you are the only person who can provide care for them, or making a client work around your schedule.

Working in Facilities

The Company can provide its services to clients who are in any type of facility (i.e. hospital, skilled nursing facility, assisted living facility, etc) in order to provide quality one-on-one care to that patient. The following are general rules that we are required to follow at most facilities:

- You must wear scrubs unless told otherwise by the Company.
- You must wear your Five Star Home Health Care name badge. If you do not have a badge for any reason, you must notify your supervisor before accepting any case in any facility.
- Wear comfortable shoes; no open toe shoes, no open back shoes, no clogs, sandals, or heels.
- No decorative hats.
- No visible tattoos.
- No excessive jewelry.
- Long hair pulled back.
- No clothing with words, sayings, slogans, or pictures.
- No chewing gum on the premises of the facility.
- No sleeveless tops
- Fingernails trimmed to ¼" in length (this includes artificial nails), and no jewelry on the nails.
- No nose, tongue, eyebrow, or excessive ear body piercing jewelry (maximum 2 earrings per ear).
- No exposed undershirts.
- No t-shirts, tank tops, or muscle shirts.
- No jeans.
- No low necklines.

You must sign in and out with every facility at the front desk and/or the nursing station on the floor where your client is. If there are any additional or specific policies for any one facility, those policies will be discussed with you prior to your assignment.

EMPLOYEE SAFETY AND SECURITY

Working Conditions and Employee Safety

The Company aims to provide employees with adequate, non-hazardous conditions in which to work in accordance with OSHA regulations. No employee will be required to work in an unsafe situation or atmosphere. While in the field, if you feel conditions to be unsafe, you should leave the area, go to a phone in a safe location and call your supervisor. You should await further instructions about notifying the client and rescheduling the visit. All unusual incidents or circumstances should immediately be reported to your supervisor who will determine the plan for providing care and for notifying other employees of the plan. A Case Manager will train each employee as to the safety requirements of each job.

During orientation, we will cover our Safety and Wellness Program that explicitly addresses potential safety concerns. Additional issues specific to the safety and security of your clients are discussed in greater detail in the **Client Care** section of this document.

If your physical condition changes at any time for any reason affecting your ability to perform the duties and responsibilities of your job safely, you must notify the Agency immediately. Your physical condition can directly affect your ability to safely care for patients. If you are unable to safely care for a patient at any time for any reason, the Agency will make every effort to accommodate your needs. If upon evaluation of a patient's needs, you are deemed unable to safely care for the patient, you acknowledge that you will be removed from the case

and reassigned. If your physical condition changes, you will need to be cleared by a physician to continue with regular duty. To be cleared, the physician needs to sign your job description to return to regular duty.

Accidents and Accident Reports

If an accident or injury occurs at a job site, the employee must notify his or her supervisor immediately. Within 24 hours following an employee's injury or accident, or suspected injury or accident, an employee must complete an incident report form describing the circumstances surrounding the incident. This form may be obtained from the client folder in the home or from your supervisor.

SAFETY ORIENTATION

Description of the Safety Program

The Company has a formal written Safety Program. It consists of this safety manual and a safety orientation.

The Company has basic safety rules that all employees must follow. These are:

- Never do anything that is unsafe in order to get the job done. If a job is unsafe, report it to your supervisor or administrative staff member immediately. We will investigate the situation and devise a safer way for you to do your job.
- Do not remove or disable any safety device! Keep guards in place at all times on operating machinery.
- Never operate a piece of equipment unless you have been trained and are authorized by the Company to use it.
- Use personal protective equipment (PPE) whenever it is required. Your client's care plan will state the required PPE for that assignment.
- Obey all safety-warning signs.
- Working under the influence of alcohol or illegal drugs or using them at work is strictly prohibited.
- Do not bring firearms or explosives to work.
- Smoking is only permitted outside the building or residence and away from any entry or ventilation intake.
- Clean up spills immediately. Good housekeeping helps prevent accidents.
- Prevent falls by making sure you wear appropriate shoes for the floor type.
- Make sure all paths are clear of debris and not blocked by furniture.
- Do not lift more than you can safely lift. If you do need to lift something, use proper body mechanics as outlined in the orientation.
- If you are on a case and you cannot handle the level of care, report your challenges to an administrative staff member right away.
- To prevent contact with bodily fluids, make sure to wear provided masks and / or rubber gloves. If none are available, call an administrative staff member immediately.

How and when to report injuries.

If you are injured or become ill on the job, report this to an administrative staff member immediately and call 911 if you are in need of immediate medical assistance. Your Case Manager will inform you of the location of the safety items during initial home orientation. Emergency phone numbers are listed in your client's care plan.

How to report unsafe conditions and practices.

The Company surveys all residences for safety hazards prior to the start of any new case. However, if you see something that is unsafe or someone working unsafely, immediately report it to any administrative personnel.

Basic Home Safety

Fire

- Familiarize yourself with fire escape routes.
- Do not smoke or allow your client to smoke if oxygen is in use.
- Know the location of exit stairs in multi-level buildings
- NEVER use elevators in a fire emergency.

If you discover a fire:

- Tell another person immediately.
- Call or have them call 911.
- Report who is in the home with you and then call a supervisor.
- If the fire is small (such as a wastebasket fire) and there is minimal smoke, you may try to put it out with a fire extinguisher.
- If the fire grows or there is thick smoke, do not continue to fight the fire.
- Tell any other employees in the area to evacuate and assist your client outside if safe to do so.
- Go to the designated assembly point outside the building.

The Company requires each client to have a fire extinguisher and smoke alarm in their residence. If you cannot locate the fire extinguisher, contact your supervisor immediately.

Environmental

- Keep walkways and pathways free of clutter.
- Remove loose rugs to help prevent falls
- Do not allow anyone in the home during a visit unless they are from the Agency and show proper identification.
- Disposable objects should only be put in appropriate containers.
- Do not operate any equipment that you are not trained to operate.
- Do not handle or dispose of any hazardous items that you are not trained to handle.

Bathroom

- Towel bars are NOT grab bars.
- Keep bathroom walkways dry and free of water to prevent falls.
- You should always perform max standby assistance for patients with an unsteady gait while they are in the bathroom.

Electrical

- Keep electrical appliances away from the bathtub or shower area.
- Make sure electrical appliances and cords are clean, in good condition, and not exposed to liquids.
- Make sure lighting throughout the house is adequate.
- Report any unsafe electrical conditions to your supervisor immediately.

Identification of hazardous chemicals used at this location.

You may be required to use chemicals, including solvents and cleaners, while performing general housekeeping duties. Please read and follow the instructions by the manufacturers that are printed on the outside of each container and protect yourself by wearing gloves and/or facemasks. The Agency currently does not store or use any medication that can contribute to hazardous waste. You should never handle or dispose of any hazardous waste that you are not trained to handle.

Storage and Access to supplies

Professional clinical staff will receive supplies from the Agency prior to an assignment. Personal Care staff will have all supplies provided by the patient or patient's family.

Use and care of required personal protective equipment (PPE).

Some tasks in our company require an employee to wear PPE to protect against injury. These tasks are noted in your Employee Handbook and in your client's care plan. The Company requires each client to have a fire extinguisher, smoke alarm, rubber gloves, face masks, a first aid kit and anti-bacterial soap available for your usage at all times. If any of the items are missing from your client's residence please contact your supervisor immediately.

On-the-job training about what you need to know to perform the job safely.

Before you are first assigned to a case, a Case Manager will explain your duties along with safety instructions and required PPE for the specific assignment. We have established safety rules and personal protective

equipment (PPE) requirements for each task, based upon a hazard assessment of that task. Your client's care plan will explicitly state when and if PPE is needed. If your client does not have the necessary PPE, contact your supervisor immediately. Do not use equipment or attempt to do any of these tasks until you have received the required training and PPE. Contact the office if you do not have the required PPE for your job.

Emergency Operations Plan

The Agency has an Emergency Operations Plan that may be implemented in the event of an emergency, i.e. severe inclement weather, earthquake, terrorist attack, etc. Patients are prioritized based on their needs during an emergency. In the event of an emergency, you need to contact the Agency to receive instructions. If there is no means of communication (i.e. no phone service), all staff are to report to the Agency's primary command structure at the Fairfax office location to receive their instructions. The command structure is located at: 4500 Southgate Place, Suite 200, Chantilly, VA 20151.

Challenging Clients

Whether or not a client has a medical condition, often times our elderly clients are unable to change their behavior or reactions, and it is our jobs to be patient and supportive to them and their families. However, if a situation with a client jeopardizes your physical safety, it is your responsibility to watch out for yourself. It is common for people suffering from a specific condition to become aggravated and difficult to deal with. This training will offer effective communication tools and a greater understanding of how to care for a person afflicted with such conditions. Deal with combativeness by trying to examine the underlying causes. Consider the following issues:

- **Physical Causes.**
Is the person tired because of inadequate rest or sleep? Are medications such as sedatives or tranquilizers creating side effects? Is the person unable to express the fact that he's in pain?
- **Environmental Causes.**
Do loud noises, people or physical clutter over stimulate the person? Is the environment unfamiliar? Does the person feel lost or abandoned?
- **Poor Communication.**
Are you asking too many questions or making too many statements at once? Are your instructions simple and easy to understand? Is the person picking up on your own stress and irritability? Are you making the person more frustrated by being overly negative or critical? Keep your requests direct and to the point. Use a calm, gentle tone and smile to reassure them.
- **Avoid Teaching.**
Offer encouragement, but keep in mind the person's capabilities and don't expect more than he can do. Avoid elaborate explanations or arguments. Remember people suffering from this disease have diminished brain capacity and often times cannot fully understand even the most basic questions, answers, or guidance.
- **Don't Take Aggression and Combativeness Personally.**
Keep in mind that the person isn't necessarily angry with you. Instead, the client may misunderstand the situation or be frustrated with their own disabilities.
- **Be on the Lookout for Frustration.**
Look for early signs of frustration in such activities as bathing, dressing or eating, and respond in a calm and reassuring tone. Keep in mind that their feelings are very important, and if you read their feelings correctly, you may be able to avoid an argument or combative situation.
- **Use Distractions.**
Don't persist in making the person perform a particular task, especially if she has been repeatedly unsuccessful. If you see the person getting frustrated with buttoning a shirt, try to distract her with another activity such as putting on a pair of pants. After a time, you can return to the shirt. Or take the person to a quiet room, have a cup of tea, or go for a walk.

Communicate Directly with the Person.

Avoid expressing anger or impatience in your voice or physical actions. Instead use positive, accepting expressions such as "please," "Thank you," and "Don't worry, everything is going to be fine." In addition, use

touch to reassure and comfort the person. For example, you might want to put your arm around the person or give him a kiss. In addition, follow these tips:

- Speak slowly and clearly.
- Use short, simple sentences.
- Approach the patient slowly and from the front.
- Use repetition and frequent reminders.

Decrease Your Level of Danger.

Assess the level of danger--both for yourself and for the person. In other words, if the person becomes combative, ask this question: "How much trouble am I in--and what can I realistically do about it?" Often you can avoid physical harm by simply taking five steps back and standing away from the person for a short period of time. At no time should you stay in the same room with a person who is endangering your physical well being. If stepping back doesn't work, leave the room and wait to see if they calm down. **If the situation continues, contact the office immediately. Do not put yourself in physical danger!**

Working Conditions and Employee Safety (OSHA)

The Company aims to provide employees with adequate non-hazardous conditions in which to work, in accordance with OSHA regulations. No employee will be required to work in an unsafe situation or atmosphere. While in the field, if you feel conditions to be unsafe, you should leave the area, go to a phone in a safe location and call your supervisor. You should await further instructions about notifying the client and rescheduling the visit. All unusual incidents or circumstances should immediately be reported to your supervisor, who will determine the plan for providing care and for notifying other employees of the plan. Each employee will be trained as to the safety requirements of each job by a Case Manager.

Personal Hygiene

Because you will often be caring for clients who are either ill or have weakened immune systems, it is important that you maintain good personal hygiene practices while at work. This includes washing your hands frequently, and especially:

- Before and after the administration of direct and indirect client care;
- Before working in the kitchen;
- After handling soiled or contaminated materials;
- After going to the toilet;
- After covering your nose or mouth while sneezing or coughing; and
- After removing gloves.

According to the latest information available from the Virginia Health Department, the mandatory minimum time for washing hands to prevent the transmission of disease is 15 seconds in warm water, combined with soap or a cleansing product. Make sure your hands have been thoroughly dried after washing to help prevent dermatitis. If you have trouble with dermatitis, the office has info on steps you can follow to cure and prevent it from returning.

Personal hygiene also includes personal grooming. The Agency has the following policy regarding fingernails:

- Fingernails of staff should be cleaned, well cared for and no longer than one-fourth (1/4) inch from fingertips in length.
- Artificial and long natural nails are not permitted for patient care staff.
 - The definition of artificial nails includes (but is not limited to) all overlays, tips, bondings, extensions, tapes, inlays and wraps and acrylic nails.
- Nail jewelry is not permitted.
- If nail polish is worn, the polish should be of a neutral color and not chipped.

Information from the Center for Disease Control & Prevention Concerning Antiseptic Hand rubs **Center for Disease Control releases new hand-hygiene guidelines**

The Centers for Disease Control and Prevention (CDC) today released new guidelines that advise the use of alcohol-based hand rubs to protect patients (and health care workers) in health care settings. The new hand hygiene guidelines were released in Chicago during the 40th annual meeting of the Infectious Diseases Society of America.

"Clean hands are the single most important factor in preventing the spread of dangerous germs and antibiotic resistance in health care settings," said Dr. Julie Gerberding, director of the CDC. "More widespread use of these products that improve adherence to recommended hand hygiene practices will promote patient safety and prevent infections." CDC estimates that each year nearly 2 million patients in the United States get an infection in hospitals, and about 90,000 of these patients die as a result of their infection. Infections are also a complication of care in other settings including long-term care facilities, clinics and dialysis centers. Improving hand hygiene will help prevent the spread of germs from one patient to another. Data show that health care personnel may be more inclined to use alcohol-based hand rubs because they are more convenient to use. Recent studies show that these hand rubs actually reduce the number of bacteria on the hands more effectively than washing hands with soap and water. "Health care personnel are always on the go which sometimes makes hand washing with soap and water difficult," said Dr. Steve Solomon, acting director of CDC's healthcare quality promotion division. "These hand rubs should help promote hand hygiene because they are much more accessible than sinks, take less time to use and cause less skin irritation and dryness than many soaps."

- Improved adherence to hand hygiene (i.e. hand washing or use of alcohol-based hand rubs) has been shown to terminate outbreaks in health care facilities, to reduce transmission of antimicrobial resistant organisms (e.g. methicillin resistant staphylococcus aureus) and reduce overall infection rates.
- When health care personnel's hands are visibly soiled, they should wash with soap and water.
- The use of gloves does not eliminate the need for hand hygiene. Likewise, the use of hand hygiene does not eliminate the need for gloves. Gloves reduce hand contamination by 70 percent to 80 percent, prevent cross-contamination and protect patients and health care personnel from infection. Hand rubs should be used before and after each patient just as gloves should be changed before and after each patient.
- When using an alcohol-based hand rub, apply product to palm of one hand and rub hands together, covering all surfaces of hands and fingers, until hands are dry. Note that the volume needed to reduce the number of bacteria on hands varies by product.
- Alcohol-based hand rubs significantly reduce the number of microorganisms on skin, are fast acting and cause less skin irritation.
- Health care personnel should avoid wearing artificial nails and keep natural nails less than one quarter of an inch long if they care for patients at high risk of acquiring infections (e.g. Patients in intensive care units or in transplant units)

Information about Gloves

Gloves are a second barrier against the transmission of disease and infectious bacteria, either from you to the client, or the client to you! Gloves should be worn in the following instances:

- Any time there is potential of skin contact with the client's blood or other bodily fluids;
- While handling any soiled clothing or linens that may have absorbed the client's blood or bodily fluids;
- Any time when the skin on your hands is not intact, and you have contact with the client's body or soiled clothing;
- While cleaning areas in the client's home such as the bathroom or kitchen; and
- Any time you handle garbage or other waste material.

The use of gloves **does not** excuse you from washing your hands after contact with these items. **Hands should always be washed after gloves are removed.**

Certain substances, such as petroleum-based moisturizers and ointments can actually cause the breakdown of latex gloves, which compromises their effectiveness as a barrier against infectious material. Although you may not have control over the ingredients of an ointment prescribed to your client by a doctor, you can minimize the risk of this happening by using a water-based moisturizer for your hands rather than one based on petroleum or mineral oil products. The office has a list of moisturizers recommended by the Virginia Health Department as being compatible with the use of latex gloves.

Communicable Infections

If your client is suspected or known to have an infectious or contagious disease, you will be advised and will need to implement procedures specific to that disease. While any specialized procedures will be outlined in the Plan of Care, you will also be expected to implement infection control procedures with regard to your

client, the other caregivers working with your client, and their environment. The Agency will provide you with appropriate protective equipment such as gloves, gowns or aprons, masks, and eye protection. Because some clients have suppressed immune systems and contracting a communicable disease could have devastating repercussions, you should not report for work if there is a danger of infecting the client. You should call the Agency as soon as you suspect you are ill, so arrangements can be made to cover your shift. This should be done at least six hours before your shift begins, preferably by 10 AM the previous work day, to allow your supervisor ample time to find a substitute.

Influenza Virus

As an employee of the Company your risk of contracting the influenza virus may be higher due to the nature and location of the work. Clients are at a higher risk for complications from the flu. Health officials recommend that individuals caring for seniors should obtain a flu shot, which is proven to be 70-90% effective in preventing the flu. For information on where to obtain a flu shot, call the INOVA HealthSource hotline at (877) 895-5BUG. A wide variety of retail stores offer flu shots, such as CVS, Walgreens, and Wal-Mart.

Client Infection Control Procedures

To guard against your client contracting a communicable disease, the following procedures should be followed:

- Consider the blood and body fluids of all clients as potentially infectious;
- Wash your hands before and after all client or specimen contact;
- Wear gloves when contact with blood or bodily fluids is anticipated and remove gloves after each task;
- If infection is airborne, wear a mask;
- If splashing with blood or body fluids is expected, wear a gown (and if necessary a mask and eyewear);
- Protect any skin that is not intact;
- Prior to washing, soak laundry stained with blood or other body fluids in a solution of one (1) part bleach to nine (9) parts water and make up fresh solution for each load of laundry;
- Any items stained with blood or body fluids that cannot be flushed down the toilet should be double wrapped in sturdy plastic bags that are sealed;
- Sharp items should be considered as potentially infectious and handled with extreme care to prevent accidental injuries;
- Cover your nose and mouth when coughing or sneezing; and
- Again, wash your hands frequently!

Among the procedures to control the possibility of environmental infection, you should:

- Maintain a clean work environment, e.g. clean counters, tables and shelves where food is stored;
- Refrigerate food promptly and cover food by closing cartons and replacing covers;
- Rinse cans and bottles before disposal in the garbage;
- Use assistive means to pick up broken glass;
- Wash garbage cans, dirty pails, and trash cans with hot soapy water;
- Dispose of garbage properly;
- Keep clean and dirty items separate;
- Keep the client environment, especially the bathroom, clean, neat and orderly, and keep supplies off the floor and out of the reach of children;
- Regularly clean client utensils such as commodes, bedpans, and urinals;
- Properly label equipment as clean or contaminated; and
- Use protective coverings such as aluminum foil and plastic and replace coverings if contamination is thought to have occurred.

Disposal of Infectious Waste

Infectious waste may include soiled dressings, used disposable instruments, used internal devices such as urinary catheters, gastrostomy tubes, and suction catheters, vaccines, and intravenous equipment.

- Contaminated sharps will not be bent, broken, or removed from disposable syringes.
- Immediately after use, contaminated sharps will be dropped into a rigid, puncture resistant container. Contaminated sharps, e.g., needles and lancets, will not be recapped. Puncture resistant containers are available and include:

- Rigid plastic sharps containers: Agency will provide for staff use. Staff will return rigid plastic sharps containers to Agency for disposal.
- Patient/clinical staff will be educated to dispose of sharps by placing in:
 - Metal cans with reinforced lid to improve the puncture resistance.
 - Hard plastic jugs.
 - All containers will be located close to the work area. When the container is $\frac{3}{4}$ full, it will be securely sealed and placed in household trash, unless Agency provided sharps container (which will be picked up by staff for proper disposal when $\frac{3}{4}$ full).
- Materials without the risk of puncturing, e.g., gauze dressings, catheters, tubing, gloves, etc., will be placed in leak-proof plastic bags, then securely fastened and disposed of in the patient's household trash.

Methods of Disinfection

- Reusable articles in the patient's home contaminated with blood or body fluids, e.g., feces, pus, mucous or other organic matter, will be washed with soap and water.
 - If a danger of contamination of body parts or adjacent areas exists, items will be washed in a specific container for that purpose and the subsequent solution discarded into the toilet bowl.
 - Full strength disinfectant will be used to clean toilet bowl and seat.
- Whenever it is necessary to use equipment which must be disinfected after use and which will be used by or for a patient over a period of time, e.g., bedpans, urinals, bedside commodes, etc., the nurse will instruct the family to provide this equipment or will assist them in obtaining it.
- Blood glucose monitors are cleaned when visibly soiled or according to manufacturers' recommendations.
- All solutions will be checked for expiration date prior to patient use.
 - When the patient no longer needs the treatment, all opened solutions and supplies will be discarded.
 - Other disposable supplies, e.g., irrigation trays, syringes, suture removal sets, solution containers, etc., will be discarded after use.
- Thermometers will be wiped with alcohol pad after each use. The effectiveness of this technique is dependent on vigorous friction. Allow to air dry. Thermometers with disposable shields are to be cleaned with alcohol pad after disposal of shield.
- Stethoscopes and blood pressure cuffs will be cleaned after each use by the employee who has possession of the equipment.
- All patient laundry is to be handled minimally and not shaken or placed against the employee's clothing or body. Laundry will be placed immediately in the patient's laundry area or washing machine to minimize employee and family exposure.
- Broken glassware, e.g., contaminated blood collection tubes, will not be picked up directly by hand.
 - Use the contents of the spill kit by sprinkling the spill with the absorbent material.
 - Wear gloves to scoop up the absorbed spill and broken glass.
 - Dispose in container and place container into a contaminated garbage bag.

Bloodborne Pathogens

- All equipment, environmental and working surfaces will be cleaned and decontaminated after contact with blood or other potentially infectious materials. Work surfaces will be decontaminated with an appropriate disinfectant:
 - After completion of procedure.
 - Immediately, or as soon as feasible, when surfaces are overtly contaminated.
 - After any spill of blood or other potentially infectious materials.
- Protective covers used to cover equipment and environmental surfaces, e.g., plastic wrap, aluminum foil or imperviously backed absorbent paper, will be removed and replaced as soon as possible when they become overtly contaminated.
- All bins, pails, cans and similar receptacles intended for reuse which have a reasonable likelihood of becoming contaminated with blood or other potentially infectious materials will be inspected and decontaminated immediately, or as soon as feasible upon visible contamination.
- Broken glassware which may be contaminated will not be picked up directly with the hands. It will be cleaned by using mechanical means such as a brush, dust pan, tongs or forceps.
- When moving containers of contaminated sharps from the area, the container will be:

- Closeable.
- Constructed to contain all contents and prevent leakage during handling, storage, transport or shipping.
- Labeled and color coded as biohazardous waste.
- Regulated waste will be placed in containers which are:
 - Closeable.
 - Constructed to contain all contents and prevent leakage of fluids during handling, storage, transport or shipping.
 - Labeled and color coded as biohazardous waste.
 - Closed prior to removal to prevent spillage.
- If outside contamination of waste containers occurs, the container will be placed in a second container. The second container will be:
 - Closeable.
 - Constructed to contain all contents and prevent leakage during handling, storage, transport or shipping.
 - Labeled and color coded as biohazardous waste.
 - Closed prior to removal to prevent spillage or protrusion of contents.
- Disposal of all regulated waste will be in accordance with applicable laws/regulations, both state and federal.
- Blood spills will be wiped up and decontaminated with diluted bleach solution or commercial germicide. A spill kit will be used, as appropriate.

Hepatitis B Vaccine

Hepatitis B, a viral infection of the liver, is caused by the Hepatitis B virus (HBV). In the United States, some 300,000 persons are newly infected with HBV each year. Occupational work related acquisition of HBV occurs through a needle stick, mucous membrane or non-intact skin exposure to blood and other body fluids containing the HBV. The risk of contracting Hepatitis B from a single contaminated needle stick ranges from 6% to 30%. Each year approximately 12,000 healthcare workers (HCW) contract work-related Hepatitis B. Three hundred of these will ultimately die from Hepatitis B related complications.

Healthcare workers are 20 times more likely to contract HBV infection than the general public. There is a 15% to 30% prevalence of Hepatitis B markers in physicians and HCWs indicating prior exposure to the virus. Since 1970, 20 reported cases of HBV infection from HCWs to patients have been reported.

Although HBV is an unpredictable disease that may incapacitate a person for weeks or months and lead to complications, most people develop antibody to the virus and recover completely. However, 5% to 10% of infected persons become chronic carriers of HBV and never develop antibodies.

One in 200 persons in the United States is chronic HBV carriers. It is estimated that 1% to 2% of all hospital admissions are Hepatitis B antigen positive. A carrier is infectious to others and has an increased risk of developing long-term complications, such as chronic active hepatitis, cirrhosis of the liver and primary carcinoma of the liver. Carriers have a risk 273 times greater than that of the general population of contracting liver cancer.

A vaccine is available for the prevention of Hepatitis B infection. It is a non-infectious genetically engineered recombinant DNA vaccine. No substances of human origin are used in its manufacture. The vaccine is administered in the deltoid area in a series of 3 doses over a 6-month period. The second dose is given one month after the first and the third dose 5 months after the second or 6 months after the first dose. Protective antibody titers are achieved in 95% of those vaccinated.

The incidence of side effects, both local and general, has been minimal among recipients of the vaccine. Broad use of the vaccine could have adverse reactions not observed during clinical trials. The most common adverse reaction is local soreness at the injection site. Less common reactions include erythematic, swelling and warmth or induration of the injection site which is generally well tolerated and usually subsides within 48 hours. Low grade fever (101) occurs occasionally; fever over 102 is uncommon. Systemic complaints, including fatigue, malaise, nausea, vomiting, headache, myalgia and arthralgia are

infrequent. Rash has rarely been reported. There has been no cause and effect relationship established between the vaccine and neurological disorders.

This vaccine is contraindicated in persons allergic to yeast. HBV vaccine would not be expected to be harmful to a developing fetus; however, its safety for the fetus has not yet been demonstrated. Accordingly, HBV vaccine is not generally recommended for pregnant women or nursing mothers.

If you have a medical condition, allergies, are pregnant or breastfeeding, please consult your physician for direction prior to receiving the vaccine.

Tuberculosis Plan

All clinical staff employed by the Company must provide either a negative PPD test or negative chest x-ray (in the event of positive PPD) at the time of hire. On-going tuberculosis screening will take place during the Company's annual Employee Appreciation Week.

The home management of those patients with suspected or confirmed Tuberculosis infections includes:

- Implementation of precautions to prevent exposure until communicability has been eliminated by drugs including:
 - Instructing patients to cover coughs and sneezes.
 - Instructing patients who are on TB medications about the importance of taking medications as prescribed (unless adverse effects are seen).
 - Employee use of NIOSH-approved high efficiency particulate air respirator (the minimally acceptable level of respiratory protection) in the following circumstances:
 - When employees enter the homes or rooms of individuals with suspected or confirmed infectious TB disease.
 - When employees perform high hazard procedures on individuals who have suspected or confirmed TB disease including but not limited to: aerosolized medication (e.g., pentamidine), sputum induction, endotracheal procedures and/or suctioning procedures.
- Performance of cough-inducing procedures in a well-ventilated area away from other persons.
 - A cough-inducing procedure performed on patients who have infectious TB should not be done in the patient's home unless absolutely necessary.
 - When medically necessary to be performed in the home, procedure should be performed in a well-ventilated area away from other persons.
 - Employee should consider opening a window to improve ventilation or collecting the specimen while outside the dwelling.
 - The employee collecting the specimen must wear respiratory protection during the procedure.
- To the extent possible, isolation of the patient away from other residents in an area with the maximum possible ventilation.
 - If agreeable with the patient, placement of a warning sign outside the room or home:
 - "Special Respiratory Isolation" or
 - A description of the necessary precautions.
 - Precautions may be discontinued when patient is no longer infectious.

Transporting the Client

Caregivers are sometimes called upon to provide their clients with transportation, such as to doctor's appointments, etc. It is the responsibility of all employees to have a valid driver's license and to carry proof of auto liability coverage of at least state minimum limits. You must be able to show proof of this coverage in the form of a copy of the declarations page of your existing auto policy and furnish a valid driver's license. Before transporting or accompanying the client anywhere outside the home, get permission from the office! If you are driving a client, you are required to obey all traffic laws, i.e. speed limit, HOV restrictions, etc. You are not allowed to use your cell phone or text while driving the client under any circumstances. If you disobey traffic laws or use your cell phone while driving a client, you will be subject to disciplinary action, which can include termination for cause.

National Patient Safety Goals

The Company has mandatory patient safety goals that it must implement to maintain good-standing with our accreditation organization. National Patient Safety Goals include:

- Use at least two patient identifiers when providing care, treatment or services.
- Maintain and communicate accurate patient medication information (Name, dose, route, frequency and purpose).
- Comply with either the current CDC hand hygiene guidelines or the WHO hand hygiene guidelines.
- Reduce the risk of falls.
- Identify patient safety risks associated with home oxygen therapy such as home fires.

Fall Reduction Program

At the time of admission, each patient is assessed for fall risk using the “*Fall Risk Assessment/Reassessment*” form (reassessment is performed if a patient falls or changes physical location). Clinical staff from the skilled care division will be responsible for providing risk reduction strategies to the patient/family for each identified risk. The following are risks and risk reduction strategies:

Risks	Risk Reduction Strategies
Impaired balance or mobility.	Educated to use assistive devices and to rise slowly from sitting to standing position. Pt. educated to call for assistance before getting OOB or getting up from chair.
Musculoskeletal problems.	Educated to use assistive devices and to rise slowly from sitting to standing position.
Cognitive impairment (short term memory changes or poor impulse control, etc.).	Educated caregiver in appropriate supervision for ADL's.
Nutritional problems affecting ADL's.	Educated in MD ordered diet.
Use of narcotics, hypnotics, analgesics, psychotropics, laxatives, diuretics, sedatives or antihypertensive medications, including multiple medications (polypharmacy = 10 or more medications).	Educated in side effects of medications, including potential for increased fall risk due to side effects of drowsiness, motor disturbances and ataxia.
History of previous falls.	Educated in safe ambulation, use of assistive devices and relevant home safety issues.
Abnormal sleep pattern for patient.	Educated in appropriate sleep.
Specific environmental issues.	Improve lighting. Needed objects should be placed within easy reach.

Client Rights

It is the responsibility of the Company and its employees to protect and promote the following client rights:

- To have your cultural, psychosocial, spiritual and personal values, beliefs and preferences respected.
- To have complaints investigated made by the patient, patient's family or guardian regarding treatment or care that is (or fails to be) furnished, or regarding the lack of respect for patient's property by anyone furnishing services on behalf of the Agency. You will not be subject to discrimination for doing so. Agency must document both the existence of the complaint and the resolution of the complaint.
- To have your property treated with respect.
- To be informed of the procedure you can follow to lodge complaints with the Agency about the care that is, or fails to be, furnished, and regarding a lack of respect for property. To lodge complaints, call the Agency Administrator at 703-273-0555.
- To know about the disposition of such complaints.
- To voice their grievances without fear of discrimination or reprisal for having done so.

- To be advised of the telephone number and hours of operation of Virginia's Home Health Agency hotline, that receives complaints or questions about local home care agencies. The hours are 24 hours a day, seven (7) days a week and the telephone number is 800-955-1819. The hotline also receives complaints about advance directives.
- To personal dignity.
- To effective communication.
- To be free from mental, physical, sexual and verbal abuse, neglect and exploitation.
- To refuse to participate in investigational, experimental, research or clinical trials.
- To be notified in advance about the care that is to be furnished, the types (disciplines) of the caregivers who will furnish the care and the frequency of the visits that are proposed to be furnished.
- To be served by individuals who are properly trained and competent to perform their duties.
- To be advised in advance of the right to participate in planning care or treatment and in planning changes in care before the change is made.
- To be informed of rights under state law to make decisions concerning medical care, including the right to accept or refuse treatment and the right to formulate advance directives.
- To be informed of policies and procedures for implementing advance directives, including any limitations if the Agency cannot implement an advance directive on the basis of conscience.
- To receive care without condition on, or discrimination based on, the execution of advance directives.
- To refuse care without fear of reprisal or discrimination and in accordance with law and regulation. If you are not legally responsible, your surrogate decision maker may refuse care on your behalf as permitted by law.
- To exercise his/her rights as a patient of the Agency.
- The patient's family or guardian may exercise the patient's rights when the patient has been judged incompetent.
- To confidentiality of your medical record as well as information about their health, social and financial circumstances and about what takes place in the home.
- To expect the Agency to release information only as required by law or authorized by the patient and to be informed of procedures for disclosure.
- To access, request an amendment to and receive an accounting of disclosures regarding your own health information as permitted under applicable law.
- To be informed of the extent to which payment may be expected from Medicare, Medicaid or any other payor known to the Agency.
- To be informed of any charges that will not be covered by Medicare or Medicaid.
- To be informed of the charges for which the patient may be liable and to receive this information, orally and in writing, before care is initiated and within 30 calendar days of the date the Agency becomes aware of any changes.
- To be informed of the procedures for collecting charges owed by the patient.
- To have access upon request to all bills for service the patient has received, regardless of whether the bills are paid out-of-pocket or by another party.
- To be admitted by the Agency only if it has the resources needed to provide the care safely and at the required level of intensity, as determined by a professional assessment. The Agency with less than optimal resources may nevertheless admit the patient if a more appropriate provider is not available, but only after fully informing the patient of the Agency's limitations and the lack of suitable alternative arrangements.
- To be given at least 5 days written notice when the organization determines to terminate services.
- To effective pain management.
- Voice concerns related to care, treatment or services and patient safety issues: Please call Agency Director of Clinical Services. We also encourage you to contact The Joint Commission, Office of Quality Monitoring at 800-994-6610 or e-mail: complaint@jointcommission.org.
- The Agency's responsibility to notify the patient in writing of any action taken which affects the patient's services.
- The Agency's responsibility to render services according to acceptable standards of care.
- The Agency's responsibility to make a good faith effort to provide care according to the scheduled Plan of Care and to notify the recipient when unable to provide care.

- The Agency must inform the patient of his or her responsibility to have some planned back-up for times when the Agency is unable to secure coverage and to identify which staff the patient should contact regarding schedule changes.
- The patient has the right to choose his or her provider agency as well as the waiver services he or she receives.

Patient Responsibilities:

- Notify the Agency of any perceived risks in your care or unexpected changes in your condition, e.g., hospitalization, changes in the plan of care, symptoms to be reported, etc.
- Notify the Agency if the visit schedule needs to be changed.
- Notify the Agency if staff fail to appear for work.
- Notify the Agency of the existence of, and any changes made to, advance directives.
- Notify the Agency of any problems or dissatisfactions with the services provided.
- Provide a safe environment for care.
- Follow instructions and express any concerns you have about your ability to follow and comply with proposed plan or course of treatment. The Agency will make every effort to adapt the plan to your specific needs and limitations. If such changes are not recommended, the Agency will inform you of the consequences of care alternatives.
- Provide accurate and complete information about present complaints, past illnesses, hospitalizations, medications and other matters related to the patient's health.
- Know that in the event of an emergency that disrupts Agency's services to patient, that Agency will make every effort to visit or telephone patient. However, if patient has a medical emergency and is not able to contact the Agency, the patient should access the nearest emergency medical facility.
- Ask questions about care or services when you do not understand your care or what you are expected to do.
- Provide feedback about service needs or expectations.
- Follow Agency rules and regulations concerning patient care and conduct.
- Show respect and consideration for Agency's personnel and property.
- Meet financial commitments agreed upon with the Agency promptly.
- Understand and accept consequences for the outcomes if the care and services or treatment plans are not followed.

Before care is initiated, the Company will inform the client, orally and in writing, of:

- The nature and frequency of services to be delivered and the purpose of service
- Any anticipated effects of treatment, as applicable
- Payment to be expected, if any, from Federal or State programs
- A schedule of fees and charges for service
- The charges the individual may have to pay
- The requirements of notice for cancellation or reduction in services by the organization and the client
- The refund policies of the organization
- The method of billing and payment for services
- Services to be billed by third party payers
- Extent to which payment may be expected from third party payers known to the Company
- Charges for services that will not be covered by third party payers

PATIENT CARE SECTION

Types of Care and Services Provided By the Personal Care Division

What is allowed under a Home Care license?

There are laws governing what certain employees who are employed through a home care agency can do. Personal Care Aides (PCAs), Home Health Aides (HHAs), and Certified Nurse Aides (CNAs) are not allowed to perform any procedure that is invasive ("of or relating to a medical procedure in which a part of the body is entered, as by puncture or incision"). This means that no aide may introduce anything into an orifice (mouth, nose, anus, ear, eye, genitals, wound, feeding tube, IV). Aides cannot put medicines into a client's mouth, help them with suppositories of any kind, administer eye or ear drops, feed them through a feeding tube, insert a

catheter, administer injections, clean a wound, draw blood for any purpose (even for blood sugar testing), manipulate someone's body doing range of motion exercises, or administer anything through an IV. Aides offer non-medical assistance only.

Aides can help clients perform their own medical procedures by "cueing" them. This means aides can hand them medication and remind them to take it, get their blood sugar monitoring equipment ready and put a lance into their hands, offer stand-by assist while they are performing their range of motion exercises, etc. This must be adhered to strictly. If your client needs assistance with any of the above-mentioned procedures please do not perform them—call the office immediately so that we can alert the family and help figure out a solution.

Types of Care and Services Provided By the Skilled Care Division

The Company is also allowed to perform the above-mentioned medical procedures using nurses and therapists. We are accredited through the Joint Commission for Accrediting Homecare Organizations (JCAHO). Most of the services provided by the skilled care division are on a per visit basis. However, we do provide private duty nursing services as well, which are hourly services for those who need medical treatments on an ongoing basis.

Skilled nursing services are performed by LPNs and RNs. Therapies include Physical Therapy, performed by a Physical Therapist or Physical Therapy Assistant; Occupational Therapy, performed by an Occupational Therapist or Occupational Therapy Assistant; and Speech Language Pathology, performed by a Speech Language Pathologist or Speech Language Pathology Assistant.

What services do we offer to patients?

The following are examples of the services provided under the Personal Care and Skilled Care Divisions. This is not an all-inclusive list

Personal Care

- Supervision
- Medication Reminders
- Meal Preparation
- Companionship
- Escort to Appointments
- Bed Bound Care
- Personal Care (Activities of Daily Living)
- End of Life Care
- Homemaker chores

Skilled Care

- Wound Care
- Private duty nursing
- IV Infusion
- Medication administration/management
- Chronic Disease Management/prevention
- Post-hospital/surgical care
- Physical Therapy
- Occupational Therapy
- Speech Therapy
- Medical Social Worker

PATIENT CARE PROCEDURES & DOCUMENTATION

First Day and Beginning-of-Shift Procedures

When you first begin a case, you may be required to be at the work site 30-60 minutes early for orientation, either by the Nurse Supervisor, Case Manager, or the Caregiver you are relieving. Sometimes a client may also wish to meet you prior to a case starting. If so, the Case Manager or office support staff will contact you to set up an appointment and go with you to a facilitated first meeting. During this meeting, you will be informed of any safety precautions and review the Plan of Care.

Client Information Packet

An information packet is left at each care site for the use of the client's family and Caregivers. This packet includes a copy of the client's Plan of Care, a list of contact names and phone numbers, a client's guide explaining the services that we provide, instructions on when to call 911, and several copies of the Service Record.

Client Service Agreement

Sometimes a client's care has been arranged by a family member, social worker, or physician rather than the client. The client might be resistant to your being there and try to send you home or terminate service. If this situation arises, contact your supervisor before taking any action, and the agency will handle any changes or interruptions in service, because a contract has been signed agreeing upon a certain amount of time for you to be at the job site. You should remain there for the assigned number of hours unless you have been authorized by the agency to leave.

Client Plan of Care

When a client is accepted for services, an individualized Plan of Care is developed specifically for that individual. This is approved by the individual's physician (for skilled care services) or the Company's registered nurse (for personal care services) who works with the client and the client's family members, as appropriate. The Plan of Care is included in a packet of information given to the client by the Company and is left in the home in a folder labeled Five Star Home Health Care. Your first task, after you have introduced yourself to a client, will be to ask for the Plan of Care (also referred to as a "Care Plan"). The Plan of Care is your set of instructions specifying which services to provide the client and on which days. How well you familiarize yourself with the Plan of Care will determine the quality of care you give your client. We recommend that you come to our office and familiarize yourself with each client's Plan of Care before you meet the client for the first time. Also, review the Plan of Care regularly.

NEVER PROVIDE SERVICES THAT ARE NOT INCLUDED ON THE PLAN OF CARE. This includes things a client asks you to do which may injure you. (For example, moving heavy furniture.) If a situation arises that you feel requires a change in the Plan of Care, contact your supervisor. Changes may include a client who is weakening, losing weight, not sleeping at night, becoming increasingly confused or confrontational, etc. The Case Manager will work with the client and his/her family to make any necessary changes. When modifications are made to the Plan of Care, you will be informed prior to those changes going into effect. Remember, you are our eyes and ears with the client! Your observations are important and can really enrich the lives of your clients. Don't hesitate to communicate with us.

Because you are not licensed to do so, you should never give the client medical advice. Unless you are authorized to do so, you should not call the client's physician to report changes in his/her health condition. Changes in your client's health condition should be reported to the Company as soon as possible. The Company will contact the family and appropriate medical personnel.

Service Documentation Requirements: Personal Care Division

State regulations require you put the ALL of the following items on the Personal Care Aide Record (otherwise known as the timesheet). **You WILL NOT be paid on a timesheet that does not comply with these requirements:**

- Printed client's Name
- Complete date for each day worked – include the month, day, and year (Example: 8/19/11)
- Place check marks for each service that was provided to the recipient. It must match the Plan of Care exactly. Call the office if it does not or there is not a Plan of Care in the home.
- Your arrival time every day, including a.m. or p.m.
- Your departure time everyday, including a.m. or p.m.
- The total number of hours provided to the recipient for the day.
- The recipient or family member's signature.
- The date next to the recipient or family member's signature. The date **MUST** be the last day that was worked on that timesheet. Not before, not after.
- Caregiver signature.
- The date next to your signature for the last day that you worked on that timesheet. The date **MUST** be the last day that was worked on that timesheet. Not before, not after.
- Do not use white out to cover over errors. Mark one line through the error, initial and date the change, and re-write the correct information.
- Weekly Comments/Observations section has 4 Yes or No questions. You must check Yes or No to all 4 questions – you cannot leave it blank. If you check Yes to any question, you must write a comment

detailing what changes you observed. You only need to check Yes if a drastic change or major event occurred. If you check Yes and do not write a detailed comment, you WILL NOT get paid until a comment is added. You CANNOT write the same comments every week - no client is the same every week! See following examples:

Physical Condition: Jane complained of pain in her legs this week.

Emotional Condition: Although Jane is very happy when she talks to her son; she got a little depressed after she talked to him because she missed him.

Change in Activities: Jane normally takes a bath each day, but skipped Tues, Wed and Fri.

Response to Services: Jane did not want to take a shower on Wednesday; however, I was able to talk her into it. When Jane gets depressed she usually does not want to do anything, but I make her walk around with me and that usually makes her feel better. She thanked me for helping her.

EXAMPLES OF COMMENTS – DO NOT USE THE SAME COMMENTS EACH WEEK

Physical Condition – the definition is the physical well-being in which an individual is mechanically fit to perform daily activities and duties; anything to do with our bodies as a physical entity, internal and external organs.

Examples of things to comment on about Physical Health are:

- **Coordination** - better, worse, lack there of
- **Muscle Strength** – client was able to lift themselves up, client seemed weaker/stronger
- **Balance** – Balance was stronger, worse, better, client seemed wobbly on their feet when they stood up
- **Cardio Endurance** – Client seemed to be more out of breath after a walk, seemed to be able to walk farther distance
- **Hearing** – Client had a hard time hearing, tv has to be louder for her to hear, client did not hear the phone ring, did not respond when I asked them questions, etc.
- **Sight** – Improving, getting worse, client walked into more objects, etc.
- **Walking** – stronger, weaker, needed more assistance, less assistance, client seemed to shuffle more, is becoming more immobile and walking less all together.
- **Aches or Pains** – Client is starting to complain about pain in leg, etc. Comment on any ache or pain that they may mention. Note when they first mentioned it, was there an incident that led to that ache or pain, did pain seem to get worse or better as day/week went on?
- **Bruises or injuries** – new injuries – from what, when, where on body? Old injuries - improving, getting worse
- **Skin Condition** – redness, dry, cracked areas, odors, colors, etc.
- **Eating Habits** – poor/ good, picky, eating nutritious meals, good/ bad appetite, changes from previous days or weeks.
- **Managing of diseases or illnesses** – status or updates (diabetes, cancer, blood pressure, etc – are the getting worse, better, manageable, stable)
- **Sleeping Habits** – getting more or less sleep than usual, waking frequently, sleeping throughout day.
- Were there any changes in your client's dependability on the caregiver or family member for bathing, toileting, eating, dressing, etc. Are there changes in their bowel functions, bladder function, or joint motion? Do they need no help, physical assistance, or complete help performing any activity? Be as specific as you can!

Emotional Condition: One's ability to appropriately express their emotions; how one thinks, feels and copes with life; your Client's Mood. Comment on how they showed signs of their mood.

Examples of things to comment on about Psychological Health:

- **Depression and Anxiety** – moods and symptoms, did something prompt the depression or anxiety; does anything seem to make it better? Have they always had symptoms or have you just noticed it more recently?
- **Stress** – how to they handle change or any other stressors, do they seem to be stressed for no reason, how do they deal with stress, why are they stressed?
- **Moody** – Does their mood seem to change frequently, what emotions do they show when they are moody, does something cause them to be moody?
- **Memory** – do they seem to remember less or more, more confused, do not recognize people, give specific examples: client did not know the date, where she was, etc.

- **Feelings** – sad, happy, energetic, lethargic, irritable, paranoid, aggressive, disruptive, etc. Why are they having these feelings, how do they express these feeling?
- A huge part of mental health in clients is cognitive impairment.
Cognitive Impairment: severe deficit in mental capability that affects an individual's areas of functioning such as thought processes, problem solving, judgment, memory, or comprehension that interferes with things such as – reality orientation, ability to care for self, ability to recognize danger to self of others or impulse control.
- Please note any examples in which your client showed cognitive impairment.

Response to Your Care

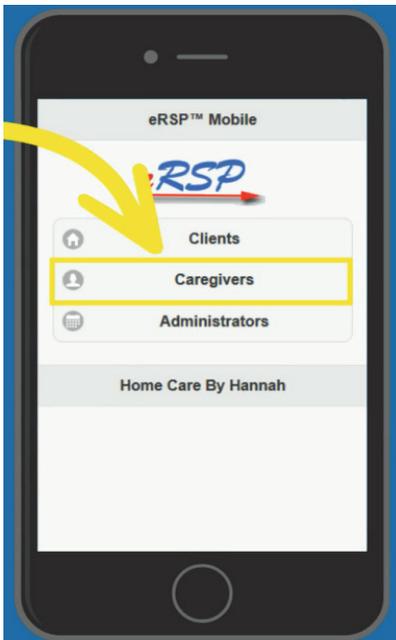
- If patient is not verbal and they smile, touch your hand, give eye contact, after you provide care.
- Hitting, lashing out, or screaming when you try to provide care.
- Pushing you away when you try to give care.
- A sigh or thank you after you reposition them, help them bathe, etc.
- Refusal to take medication, eat, shower, etc.

Electronic Visit Verification for Caregivers

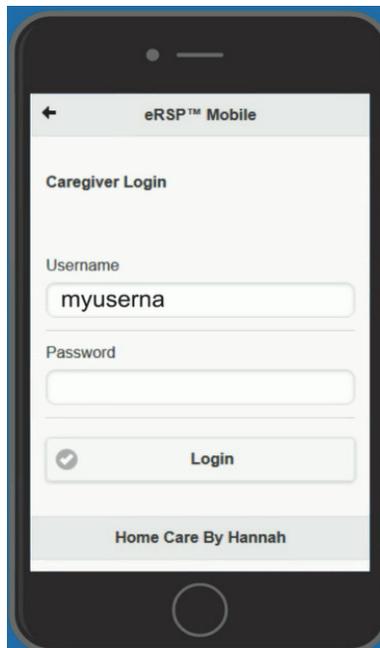
We use an electronic means of collecting timesheet information which is utilized at the start and end of the shift. Collecting a client signature is no longer required as the software captures your location. Paper timesheets are not accepted. Electronic Visit Verification instructions:

1) Open up Safari or other browser on your phone and go to this web site: **ayah.ersp.biz**

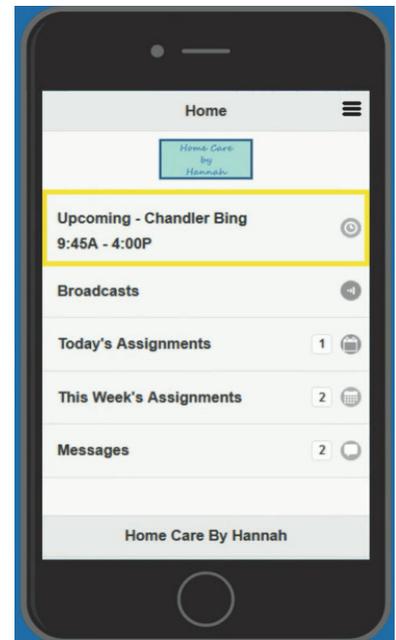
2) Select “Caregivers”



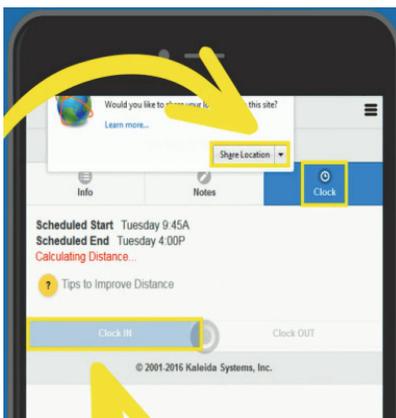
3) Enter your Username and Password



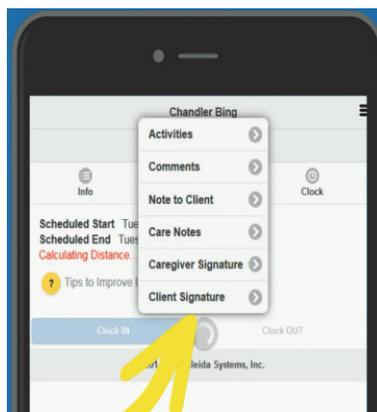
4) Find your shift



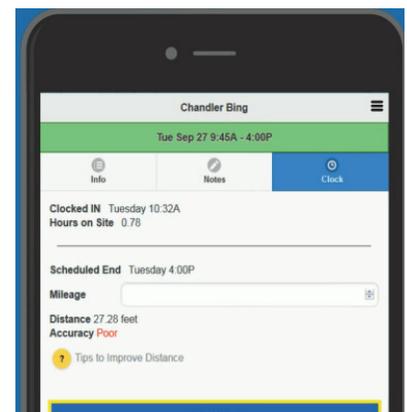
5) Hit “Clock”, Select Yes to share your location and then hit “clock in”



6) To clock out, click on the pencil to enter Completed Activities and Care Notes. Signatures are not needed!



7) Hit “Clock” to share your location and then hit “clock out”



Backup Procedures for Electronic Visit Verification without a SmartPhone

Clock In

1. Dial 1-877-599-6651 **FROM THE CLIENT'S PHONE**
2. Enter your ID number located on the back of your name badge
3. Press 1 to clock in

Clock Out

1. Dial 1-877-599-6651 **FROM THE CLIENT'S PHONE**
2. Enter your ID number located on the back of your name badge
3. Press 2 to clock out
4. Answer the activity questions by pressing 1 for Yes and 2 for No
5. Press 1 to enter Care Notes (Required)
6. Answer the Weekly Comments or Observations by pressing 1 for Yes and 2 for No
 1. Did you observe any change in the individual's physical condition?
 2. Did you observe any change in the individual's emotional condition?
 3. Was there any change in the individual's daily activities?
 4. Do you have an observation about the individual's response to services rendered?
 5. Additional Comments/Observations

If you answer "Yes" to any of these 5 Questions, please leave a voice memo, when prompted, at the end of your clock out.

Logging Client Transportation

You are required to log each transport on your timesheet if you used your own vehicle for the transport. Be sure to include the date, destination, total mileage, and client's initials for each separate transport. You will be reimbursed for your mileage, but only if you properly document it on the timesheet and your vehicle was used for the transport.

Service Documentation Requirements: Skilled Care Division

All visit notes and documentation are required within 24 business hours of the visit. Most visit documentation can and should be turned in same day. You will not be paid for a visit until the documentation is turned in, and if your visit documentation is not completed within the 24 hour time frame, your pay may be withheld according to the held pay standards listed in the section of this handbook labeled "Unexcused Absences". You will not get paid for any visits that are considered out of compliance for any reason until the compliance issues are corrected. For private duty nursing, weekly documentation has to be in the office no later than 5pm every Tuesday for the previous week's work.

Unapproved Abbreviations

DO NOT USE the following list of Abbreviations, Acronyms, AND Symbols:

Abbreviation	Potential Problem	Solution
c.c. (for cubic centimeter)	Mistaken for U (units) when poorly written	Write "ml" for millileters
S.C. or S.Q. (for subcutaneous)	Mistaken for SL for sublingual, or "5 every"	Write "Sub-Q", "subQ", or "subcutaneous"
U (units) IU (international units)	U mistaken for a 0 or number 4 IU can be mistaken for IV	Write "units" or "international units"
SL (sublingual)	Mistaken for SC (subcutaneous)	Write "sublingual"
ss (sliding scale)	Mistaken for 55	Write "sliding scale"
& (ampersand)	Mistaken for a number	Write "and"
Trailing zeros (2.0 vs 2)	Decimal not seen, leading to giving 10x	Never use a trailing zero

	the dose	
Leading decimal (.2 vs 0.2)	Decimal not seen, leading to giving 10x the dose	Always use a zero before the decimal when the dose is less than a whole unit
µg (micrograms)	Mistaken for mg (milligrams)	Write “micrograms”
QD (every day)	Mistaken for QID	Write “daily” or “every day”
QOD (every other day)	Mistaken for QD or QID	Write “every other day”
AD, AS, AU (right, left, both ears)	Mistaken for OD, OS, OU (left, right, both eyes)	Write “left ear”, “right ear”, or “both ears”
OD, OS, OU (right, left, both eyes)	Mistaken for AD, AS, AU (left, right, both ears)	Write “left eye”, “right eye”, or “both eyes”
HS (half strength)	Same abbreviation for HS (hour of sleep)	Write “half strength”
D/C (discharge)	Mistaken for discontinue	Write “discharge”
MS, MSO4, MgSO4	Confused for one another. Can mean morphine sulfate or magnesium sulfate.	Write “morphine sulfate” or “magnesium sulfate”
Mg (for microgram)	Mistaken for mg (milligrams) resulting in one thousand-fold dosing overdose	Write “mcg”
H.S. (for half strength or Latin abbreviation for bedtime)	Mistaken for either half-strength or hour of sleep (at bedtime). Q.H.S. mistaken for every hour. All can result in a dosing error.	Write “half strength” or “at bedtime”
T.I.W. (for three times a week)	Mistaken for three times a day or twice weekly resulting in an overdose.	Write “ 3 times weekly” or “three times weekly”

CLIENT CARE POLICIES

Respectful Interactions

Clients, their family members, and any visitors they may have while you are at the job site are to be treated with the utmost respect, dignity and courtesy at all times.

Personal Views

Never impose your personal values or views on your client, even if you feel it would help improve the quality of their life. This includes judgments about personal choices such as drinking, eating and smoking, or religious or political discussions. Remember that you are there to selflessly serve your client, staying within the boundaries set by the Care Plan at all times. If you are concerned about the choices a client is making, please call the office and speak with the Case Manager about your concerns, not the client.

Cultural Awareness

Cultural awareness involves developing sensitivity and understanding of another ethnic group. This usually involves internal changes in terms of attitudes and values. Awareness and sensitivity also refer to the qualities of openness and flexibility that people develop in relation to others. Be aware that cultural differences as well as similarities exist, without assigning values, i.e., better or worse, right or wrong, to those cultural differences. Cultural awareness and knowledge about individuals and groups of people into specific standards, policies, practices, and attitudes used in appropriate cultural settings will increase the quality of health care; thereby producing better health outcomes.

If you accept an assignment with a cross cultural client, ask your Case Manager to discuss with you ways to improve our care process by being more culturally aware of the following:

- Holidays that are celebrated
- Traditional foods and eating patterns
- How house chores are assigned to family members
- Observance of religious customs
- Traditional family interactions
- Traditional cures for colds and ailments
- Customary practices for death

Ethical Aspects of Services

The patient and/or family have the right to participate in any discussion concerning ethical issues regarding services. The Company's mechanisms for the consideration of ethical issues arising in the care of patients are:

- On a daily basis with the involved staff member and responsible supervisor on a case-by-case basis.
- During patient care conferences.
- During staff meetings.
- As a part of ongoing performance improvement and during performance improvement meetings. The PI Committee is the group designated by the Governing Body to address ethical issues as they arise. Ethical concerns and issues for action may be submitted to the PI Committee in person, by telephone or in writing.

You will be notified of any specific ethical issues as it relates to a patient prior to an assignment.

Gifts

Do not accept gifts from or give gifts to any client, or borrow money or possessions from your client. This could be misconstrued as payment for services given. It is also unprofessional to discuss your pay with the client, even if they inquire. If they do inquire, please refer them to the office.

Personal Contact Information

Never give your phone number or any other personal information to your client. Just as your client's personal information is confidential, so is yours. Any changes to your client's care, your work hours, etc., should be negotiated directly with the Company, not with the client.

Contact with Client Outside Scheduled Work Hours

Employees are not allowed on the property of any client when they are not scheduled for work. This includes the entire complex/property if your client lives in an apartment, retirement home, assisted living facility or nursing facility. If you have forgotten personal belongings or your timesheet, you must contact the office for approval before returning to the client's residence.

No Arguing Policy

Employees of the Company should not argue or "force" any client to perform any act that they choose not to. Doing so is considered to be a form of abuse. If a client refuses services, consult with your supervisor for the appropriate course of action. It is the right of each client to refuse any service. However it is your job to encourage, remind and allow the client to make the decision to participate in their care issues. Try to find ways to help the client see the benefits for the service, or try a different approach. If you feel a client is in harms way or is repeatedly refusing services listed on their Plan of Care, call your supervisor immediately. Remember: You are there to help your client meet their needs under the direction of the Company *and* your client.

Reporting Incidents

If incidents, accidents, or injuries occur at a job site, you should call your supervisor immediately, or as quickly as appropriate and possible. An incident includes, but is not limited to:

- Any event where a client or employee's health, safety, or welfare is adversely affected.
- Deviations from Company policies, procedures, or operating practices.
- Safety hazards.
- Employee lack of qualifications, training, etc.
- Any unusual occurrence including falls, client or visitor injuries, unprofessional conduct from staff, equipment malfunction, etc.

You may be required to provide an official transcript of the incident after reporting it.

When to call 911

If your client experiences any of the following or other unusual symptoms, Call 911, then call the Agency:

- Non-responsive OR less responsive than normal
- Drooling and loss of physical function
- When lips and fingernails are bluish in color
- When blood pressure is unusually high or low
- Excessive pain

- When a client is lethargic or very slow moving in thought and motion
- When there is a head wound
- Blood in stool or urine
- Nose bleeds that last for more than a couple of minutes
- Nose bleeds or other open cuts for anyone on Coumadin, aspirin therapy or other blood thinners
- If a client has fallen and has pain or the appearance of a broken bone
- If a client falls and cannot get up on their own or with very little assistance
- Extreme yellow color to the skin or eyes
- A temperature of over 100.5
- Unexplained vomiting
- Spontaneous loss of eyesight or hearing
- Leaning to one side
- Sweating when hands are cold or clammy
- Unusual confusion, stumbling or balance issues
- When the client is excessively combative or attacking
- Swollen tongue
- Inability to urinate or extremely painful urination
- Severe allergy attacks including food allergies, hives, and difficulty breathing
- Bleeding that doesn't stop with a compress
- Black toenails or fingernails
- Open sores that are oozing yellow or green mucous
- Shortness of breath
- Excessive dizziness

Medical Device Reporting Act

This Act requires the reporting of equipment suspected of causing any injury, illness, or death. In any event, you need to notify your supervisor immediately. You will be required to submit an incident report. You need to mention any suspect device that may have caused the incident. The Director of Clinical Services will complete the report necessary to submit to the Administrator for final approval and submission/filing with the FDA.

Policies on Advance Directives

All clients have the right to execute an Advance Directive. Advance Directives include:

- Living wills.
- Durable power of attorney for health care.
- Any written, signed and dated document executed by the patient, which expresses the patient's health care treatment decisions.
- Any statement (verbal or written) that revokes or modifies a previous directive becomes the current directive to be honored. Such revocation is to be noted in the patient's medical record.
- State law authorizing a written declaration directing the withholding or withdrawing of death-prolonging procedures does not also authorize withholding or withdrawing of nutrition and hydration (food and water).
- State law authorizing durable powers of attorney for health care does not authorize the intent to cause death by withholding or withdrawing of nutrition and hydration (food and water) which are able to be ingested through natural means.

All information regarding Advance Directives is gathered during the admission process. Employees performing an initial visit for a client are responsible for explaining and gathering information on Advance Directives and communicating that information to other staff via case conference. The information needed regarding Advance Directives is to be explained and gathered using the Five Star Home Health Care Patient Services Agreement. A copy is kept in the client folder or on the refrigerator. Staff is directed to follow the client's wishes, call 911 and remain with the client until emergency personnel arrive.

Use of English during Working Hours

As a health care provider, the goal of the Company is to help our clients and their families feel comfortable and secure and ensure that all conversation regarding the client's services and needs are clear. When staff speak English, there is less chance for confusion for clients and their families.

It is the policy of the Company that only English is spoken while working. You may speak a foreign language if you are asked to translate or your client talks to you in a language other than English.

Communicating with hearing, speech, or visually impaired

The Company provides for communication with persons who have impairments in communication, i.e., vision, cognitive, hearing or speech impaired, or Limited English Proficient persons. As employees, it is state mandated that you at least be able to read, write, and speak English to the degree necessary to perform the duties of the job.

You will be notified prior to assignment if any communication impairment exists. Remember to treat every patient with dignity and respect regardless of communication impairment.

If you speak a language other than English, notify your supervisor or the hiring manager immediately. You may be asked to provide interpreter services for the Company.

End of Life Care

The Registered Nurse (RN) will verify with the physician that the patient is in a terminal state and obtain specific care orders, including DNR if applicable. The RN will assess the patient and significant other's awareness and acceptance of the terminal diagnosis. The status of the following areas will be assessed:

- Physical, e.g., pain using a rating scale and any secondary symptoms.
- Emotional.
- Spiritual.
- Psychosocial.

Appropriate interventions to meet the patient/family's individual needs will be implemented.

- Patient/family comfort measures.
- Interventions for psychosocial, emotional and spiritual needs about death and grief.
- Listen, support, and counsel patient/caregiver.
- Assess pain level and obtain orders as indicated.
- Assess which secondary symptoms may respond to treatment and obtain orders.
- Refer to other services or community resources as indicated.
- Provision of bereavement services (directly or by referral) to help the family cope during the grieving process.

The following information will be documented:

- Education given for patient care.
- Information given to caregiver.
- Assessment of patient's condition including pain assessment:
 - Origin.
 - Location.
 - Severity based on a rating scale.
 - Any alleviating and exacerbating factors.
 - Current treatment response.
 - Prevention/treatment of secondary symptoms.
- Contacts with consults/referrals.
- Feedback concerning instructions.

Death of a Client: The Company establishes a procedure with each client regarding the actions they want taken upon the death of a client (when death is expected). This procedure is established when the client completes application for service and will be included in the Plan of Care.

When you are assigned to a client, any special instructions regarding a client's death will be given to you and will also be in the Plan of Care. If there are no special instructions, you should call 911 and then inform the Company as soon as possible so the family can be contacted. If the client is on Hospice, then Hospice must be called instead of 911.

Sentinel Event Policy

A sentinel event is an unexpected, unanticipated patient death or a major permanent loss of function or limb that is not related to the natural course of the patient's illness or underlying condition. Sentinel events can include:

- Unexpected, unanticipated death not related to the normal course of the patient's disease process.
- Rape or allegations of rape by an employee.
- Murder or allegations of murder by an employee.
- Blood transfusion reactions involving administration of blood/blood products having major blood group incompatibilities.
- Major permanent loss of function or limb not present at time of admission to Agency that requires continued treatment or lifestyle change.
- Any patient death, paralysis, coma or other major permanent loss of function associated with a medication error.
- Patient commits suicide within 72 hours of being discharged from a home care setting that provides staffed around-the-clock care.
- Unanticipated death or major permanent loss of function associated with a healthcare associated infection.
- An elopement, that is, unauthorized departure, of a patient from an around -the -clock care setting resulting in death (suicide, accidental death or homicide) or major permanent loss of function.
- Assault, homicide or other crime resulting in patient death or major permanent loss of function.
- A patient fall that results in death or major loss of function as a direct result of injuries sustained from the fall.

Should a Sentinel Event occur, notify your supervisor immediately. The Director of Clinical Services and the Administrator will initiate an intensive assessment/analysis of the sentinel event by performing a thorough and credible root cause analysis, which will focus on systems and processes. Appropriate staff, patient's physician and legal counsel will be involved in the root cause analysis.

POLICY ON ABUSE AND NEGLECT

Because the elderly and infirm are such vulnerable members of the community, they are typically more susceptible to situations of abuse and neglect. We are committed to doing all we can to prevent our clients from being abused or neglected in any way. We encourage you to use the definitions below as a guideline of what to avoid in the care of your clients.

Abuse is a term applied to a wide variety of actions that have the potential of harming the person toward whom they are directed. Generally, any harsh or rough treatment of an individual, whether physical or verbal, can injure them physically or psychologically.

Examples of physical abuse include but are not limited to: hitting; pushing or shoving; any rough treatment of the client during any assisted activity such as transfers, stand-by assists, dressing, bathing or feeding; and inappropriate touching.

Examples of verbal or emotional abuse include but are not limited to: yelling, name-calling, the use of foul or obscene language, prying or snooping into your client's personal affairs or possessions, and belittling the client in any way.

Neglect in this context is defined as depriving someone of his or her most basic needs. As such, it is a passive form of abuse and like other kinds of physical abuse can be potentially harmful, even life-threatening.

Examples of neglect include but are not limited to: being late for work (if you are the sole caregiver), abandoning a case, not following the care plan, sleeping on the job, failure to respond to a client's need or request in a timely fashion, or minimizing the seriousness of any of your client's reasonable complaints.

Sexual abuse is inappropriate sexual contact of criminal nature or interaction for gratification of the adult who is a caregiver and responsible for the patient or child's care. Sexual abuse includes sexual molestation, sexual assault, sexual exploitation, or sexual injury, but does not include sexual harassment. Any incidents of sexual abuse need to be reported to your supervisor immediately. Any incidents reasonably believed to have occurred will be reported to appropriate law enforcement agencies and regulatory agencies.

Examples of physical and behavioral evidence of sexual abuse include but are not limited to: difficulty in walking; torn, stained or bloody underwear; pain or itching in genital area; bruises or bleeding of the external genitalia; sexually transmitted diseases; reluctance to be left alone with a particular person; wearing lots of clothing, especially in bed; fear of touch; nightmare or fear of night; apprehension when sex is brought up.

Employees of the Company are mandatory reporters of abuse and neglect. If you see the above signs for abuse and neglect call your supervisor immediately. You can also report your findings to one of the appropriate agencies:

Child Protective Services – Virginia Department of Social Services, Hotline 1-800-552-7096
Adult Protective Services – Virginia Department of Social Services, Hotline 1-888-832-3858

CORPORATE COMPLIANCE PROGRAM

The Company has a policy of maintaining the highest level of professional and ethical standards in the conducts of its business. The Company places the highest importance on its reputation for honesty, integrity, and ethical standards. This Corporate Compliance Program (“Program”) is a reaffirmation of the importance of the highest level of ethical standards. This Program is consistent with the Charter of the Agency.

This Program details the Company's policies for all staff (employees and contractors). All staff will be oriented to the Program upon hire and reinforced on an ongoing basis. The Company is committed to a quality business and a reputation that values integrity, respect and truthfulness, and a strong commitment to the highest ethical standards. The Company has designated the Administrator as the Corporate Compliance Officer.

The principles within this Program apply to staff interactions with patients, and the employers that hire them, coworkers, vendors, government and regulatory agencies and the general public. The Program applies to all staff and employees, Governing Body and advisors. Company employees must be familiar with this Program and adhere to its guidelines.

The Corporate Compliance Program is not a comprehensive guide of all ethical issues that staff and employees may face, but merely highlights specific problems. In dealing with ethical problems not detailed in this Code, employees are expected to use common sense and moral judgment. If an employee has ethical questions, please contact the Corporate Compliance Officer. This policy may be modified or updated at any time. The Company welcomes any and all employee suggestions on changes to this Code.

Compliance with Applicable Laws & Regulations

The Company has policies to observe all laws, rules, and regulations of government agencies and authorities. If Federal, state or local law exists that is either contradictory or stricter than this policy, employees must apply the law.

Staff are expected to supply information to third parties that is in compliance with Federal and state applicable laws and regulations, including Medicare Conditions of Participation, Medicaid regulations, payor regulations, Virginia Department of Health home care licensure and any other published reimbursement guidelines.

Conflicts of Interest

Staff must avoid having a personal, business, financial, or other interest, activity or relationship outside the Company that has or may be in conflict with the Company. Any material transaction or relationship that may give rise to an actual or perceived conflict of interest should be discussed with the Company's Corporate Compliance Officer.

Conflicts of interest may include, but are not limited to, the following situations:

- Outside Employment - staff should not perform work or render direct consulting or managerial services for an organization or individual that competes or does business with the Company, without appropriate approval from management.
- Having a personal, social, or romantic relationship with a patient or other employee of the Company.

- Managers or supervisors may not engage in a sexual, romantic, or dating relationship with subordinate employees.
- Accepting loans or gifts of entertainment, food, or cash from patients, subordinate employees, regulatory or any outside concern that does or seeks to do business with or is a competitor to the Company.
- Obtaining a personal financial benefit in any sale or loan of Company property.
- Performing services for customers outside those consistent with the Company.
- Using or disclosing any confidential information gained during employment for a staff member's personal benefit or the benefit of others, including a future employer.

Information Accuracy and Truthfulness

All information provided by staff, including contracted staff, must be accurate and truthful. Such information may be verbal, written, fax or involve electronic submission and/or transmission of data. The Company requires all staff and employees to engage in the employment process in good faith. The Company has the right to terminate any employee for failing to participate in good faith by falsifying any information. Falsification is defined as fabrication, in whole or in part, of any information provided by a staff member. This includes, but is not limited to, any reformatting, redrafting or content deletion of documents, including home care record documentation and billing information.

Compliant Employment Practices

Discrimination and Harassment

- The Company prohibits discrimination and harassment of staff whether or not the incidents occur on Company premises and whether or not the incidents occur during business hours.
- The Company follows Federal, state, and local law to ensure equal recruitment, employment, compensation, development and advancement opportunity for all qualified individuals, and prohibits deliberate harassment based on Federally protected categories of race, color, religion, sex, national origin, age, or disability.
- Workplace Violence - The Company does not tolerate workplace violence including threats, threatening behavior, harassment, intimidation, assaults or similar conduct.
- Weapons Policy - Company staff may not carry firearms or other weapons on Company property, client property, referral source property or on any Company-related activities unless prior written explicit permission is obtained.
- Illegal Drugs and Alcohol Policy - Staff must not personally distribute, possess or use illegal or unauthorized drugs or alcohol on Company property, client property, referral source property or on any Company-related activities or in connection with any Company business.

Books & Records

Accurate and Complete Business Records - Employees must act in good faith not to misrepresent material facts in the Company's books and records or in any internal or external correspondence, memoranda, or communication of any type, including telephone or electronic communications.

Financial Reporting - All Company funds, assets, liabilities and receipts must be recorded in the company's general ledger with no discretion. There cannot be any "off the books" accounts.

Proper Maintenance of Records - The Company maintains documents in accordance with all applicable laws and regulations. If staff receive a subpoena, a request for records or other legal papers or if we have reason to believe that such a request or demand is likely, the law requires the Company to retain all relevant records.

Cooperation with Auditors - Staff must cooperate fully with duly authorized internal and outside auditors during examination of the Company's books, records, and operations.

External Communications

Business Communications - Staff must not make public statements regarding issues or matters of FSHHC about which they are not authorized spokespersons.

Advertising and Marketing - The Company takes necessary steps to ensure that all advertised products or services in any of its literature, exhibits or other public statements is true, supported by documentation, and does not mislead customers.

Use of Company Resources

Internet and Electronic Mail Policy

- Staff may use the Internet and send and receive electronic mail solely for business purposes.
- Company electronic mail system is a company resource, and the Company reserves the right to read, view and copy any email communications.
- Staff must take reasonable care not to disclose confidential information, or acquire unauthorized information over the Internet.

Equipment and Supplies - All equipment and supplies purchased by the Company remain Company property, including but not limited to office supplies, office furniture, fax machines, computers, software, hardware, medical supplies and equipment, and may not be used by staff for personal reasons.

Privacy & Confidentiality

Confidential Information - Company employees must exercise care to avoid disclosing non-public, internal, secret, or proprietary information related to the Company to unauthorized persons, either within or outside the Company during employment or afterwards, except as such disclosure is legally mandated or approved by the Company with prior, written explicit permission.

Employee Access to Confidential Information - Only Company staff that are duly authorized to know confidential information to conduct their business have access to confidential information and must take necessary steps to keep this information private and confidential.

Confidential Information of Employees - Employment records of staff are confidential and private. Records may only be disclosed if the employee provides a written release or required by applicable law. Health records and financial information of current and former staff must be protected as required by privacy laws and regulations.

Following with the Compliance Program

All staff must understand our compliance program and adhere to its guidelines. If questions arise please contact the Corporate Compliance Officer.

Supervisors - Supervisors must take reasonable care to ensure that subordinate employees are complying with these guidelines. Supervisors are responsible for misconduct by staff if the supervisor orders misconduct, ratifies the conduct, even by inaction; the supervisor has direct authority and knows of the conduct but fails to act appropriately; or should have known with reasonable diligence that the actions occurred.

Reporting Violations of the Compliance Program

Staff must report any actual or suspected violations of the compliance program to the Corporate Compliance Officer. Failure to report any actual or suspected violations is in itself a violation.

Non-Retaliation Policy: Staff will not be retaliated against or subject to any form of reprisal for raising a good faith concern under this policy or participating in an investigation into any such concerns. Retaliation is a serious violation of the compliance program and should be reported immediately.

Investigation of Alleged Violations of the Code: All inquiries, complaints, and reports will be promptly investigated. Staff are expected to cooperate in the investigation. Reasonable measures will be taken to preserve confidentiality of the claim and the identity of anyone who reports a suspected violation or participated in the investigation. If you are unsure whether a violation has occurred, the Company encourages you to seek advice from the Corporate Compliance before acting.

Confidential Disclosure: The Company honors the right of all staff to disclose any violations of this code in a confidential manner. Agency maintains a confidential disclosure program for reporting non-compliance issues. All staff and other covered persons have the right to report non-compliance issues or concerns in a confidential and anonymous manner. The Company pledges to maintain a non-retaliatory and non-retribution environment for all confidential disclosures. The Company will take any and all efforts to retain the confidentiality of any confidential disclosures. All concerns or issues reported will be reviewed and appropriate corrective action will be taken in response to any concerns or issues raised.

In order to facilitate the confidential disclosure aspect of this program, Five Star has implemented a suggestion box that is located in the common area of the office, as well as an e-mail address compliance@fshhc.com. This email will be monitored by the owner and Corporate Compliance Officer.

Zero-Tolerance Policy

The Company takes a zero-tolerance approach to violations of this program, the failure to report actual or suspected violations of the program, or retaliation against whistleblowers. Staff that are found to have violated this program or retaliated against whistleblowers could have their employment with the Company terminated.

STATEMENT OF UNDERSTANDING

By signing below, I acknowledge that I have received, read and understand the Employee Handbook for Five Star Home Health Care and agree to its terms of employment. I acknowledge that its purpose and content have been explained to me and I have been offered an opportunity to ask questions regarding it. I understand the Employee Handbook summarizes various employment policies and procedures applicable to my employment with the Company. I certify that I meet one of the following employment credentials and have provided authentic, original documentation: RN, LPN, PT, PTA, OT, COTA, SPT, SPTA, SW, Virginia CNA, Home Health Aide certification from verified completion of a nurse aide education program from a school approved by the Virginia Board of Nursing, completed a 40-hr Personal Care Aide training program from a DMAS-approved facility. I certify that I have provided the following original, authentic credentials: proof of U.S. worker eligibility, proof of TB test, car insurance information, voided check for direct deposit, e-mail address for pay stub delivery and CPR certification. I acknowledge and confirm that state regulations were reviewed with me for appropriate documentation as well as guidelines applicable to my role as an employee. State regulations reviewed include Virginia Department of Medical Assistive Services (DMAS), the Virginia Department of Health (VDH), the Code of Virginia and The Joint Commission (JCAHO). I further understand that the Employee Handbook is not an employment agreement or contract for employment. I have been told, and I understand, that my employment with the Company is "at-will" which means it may be terminated at any time, with or without cause, with or without notice, by either myself or the Company. I also understand that my job responsibilities may be changed, or my benefits altered after I accept employment with the Company, with or without cause and with or without notice. I understand that this Handbook supersedes any prior handbooks or policy manuals regarding employment with the Company. I understand that the Company may add to, modify, or delete any of the policies and procedures contained in the Employee Handbook from time to time and that I may receive verbal and/or written notice of such changes. I agree to perform my job and otherwise act in a manner consistent with the Employee Handbook and any subsequent additions, modification, or deletions, which may be implemented by the Company during my employment. I agree to read and comply with all rules, regulations and policies. I understand that all employees of the Company are employees at will and, as such, are free to resign at any time without a reason. The Company, likewise, retains the right to terminate an employee's employment at any time with or without a reason or notice. No oral statements or anything contained in this application or any other materials furnished by the Company, including but not limited to the Employee Handbook, provided to the employee is intended to be, nor should they be construed as, a guarantee that employment, work hours or any benefit is to be continued for any period of time. The terms of this at-will employment relationship cannot be altered. Any salary figures provided to an employee are stated for the sake of convenience or to facilitate comparisons and are not intended and do not create an employment contract for any specific period of time. The Company is committed to safeguarding the welfare of its clients which include vulnerable adults, children and individuals with disabilities. As part of that commitment and pursuant to the requirements of Federal and State regulations, this application includes a barrier crimes disclosure statement which must be completed in its entirety. The information provided will be verified through a national criminal background check. The Code of Virginia specifies that incomplete or false statements in an applicant's sworn statement or affirmation disclosing any criminal convictions or pending charges constitutes a misdemeanor offense. I hereby certify that the information contained within this application is true and correct to the best of my knowledge. I agree to have any of the statements verified by the Company. I authorize any past employer, personal reference, school or licensing body to provide the Company with information concerning my previous employment or personal history. Further, I release all parties and persons from any and all liability for any damages that may result from furnishing such information as well as from the use or disclosure of such information by the Company or any of its agents, employees, representatives or potential clients. I understand that any misrepresentation, falsification or material omission of information on this application may result in my failure to receive an offer of employment, or if I am hired, my dismissal from employment. The Company may provide any potential client my name, phone number and any information provided on this application or subsequent background research. I release the Company from any damages that may result from furnishing such information. I agree that my employment and compensation can be terminated with or without cause, and with or without notice, at anytime. If employed, I agree that if during the course of employment, the Company advances me money, or if I lose, destroy or fail to return any Company property, I authorize the Company to deduct from my wages sufficient funds to repay what I owe. Under penalty of perjury, I certify that the barrier crimes disclosure information I have provided is correct and complete. I understand that if I am hired, I can be terminated for any latent discovery of misrepresentations or omissions. I acknowledge that should my position require that I receive a computer key and/or password that I will not release that information to anyone. I understand the need and responsibility to maintain a high level of

security with computer access. I will not allow anyone to use my computer key/password and accept full responsibility for the security of my computer key/password. I understand that if given a Company device to perform my job, I am responsible for that Company property. Should any Company property be damaged or lost while in my possession, I will pay for repairs or replace the property. I understand that if I do not pay for repairs or replace the property my final pay will be held until all damages to property are restored. I authorize the Company to conduct a criminal background check, social security number history, address history, driver history check, credit check, Child Protective Services check, drug screening and any other forms of research to qualify you to perform the duties of the position. I understand that my employment is conditioned upon a satisfactory background check and this information may be reviewed or updated at any time during the course of my employment. I waive the right to notices afforded me by the Bullard-Plawecki Right to Know Act. The Company will make a copy of the report(s) available to you upon your written request. The Company is an equal opportunity employer and does not discriminate on the basis of race, gender, age, color, religion, national origin, martial status or disability. I acknowledge receipt and review of the following new hire documents and forms: I-9 form, W-4 form, VA-4 form, Child Protective Services (CPS) form, sample timesheet with instructions and additional forms as required. Please review and make sure you have completed all hiring documents in their entirety. I give my consent for Five Star Home Health Care to use my name, photograph and likeness to be used in its publications, including its website. I release the agency from any expectation of confidentiality or compensation. Updates to this Employee Handbook are done via the electronic version posted at www.fivestaremployees.com. If you would like to receive an alert when the Employee Handbook has changed, please email handbook@fshhc.com with your name and email address.

EMPLOYEE HANDBOOK ACKNOWLEDGEMENT – SIGNATURE PAGE

This page is to be completed by the employee and submitted to the agency for filing in the employee's record.

By signing below, I acknowledge that I have received, read, and understand the Employee Handbook for Five Star Home Health Care and agree to its terms of employment.

Employee Printed Name

Date

Employee Signature

Date

Agency Signature

Date