



**FreedomCare**  
COMPASSION • INDEPENDENCE • CHOICE

*DIRECT CARE WORKER  
(DCW)*

*EMPLOYEE HANDBOOK*

Rev. 5/2023

## PREFACE

We, at Freedom Care LLC's Home Care Agency ("**FreedomCare**") want to take this opportunity to welcome you to your employment with us. FreedomCare is a private Home Care Agency ("HCA") and Home Care Registry ("HCR") licensed by the Commonwealth of Pennsylvania and has an outstanding reputation for providing top quality home care services twenty-four hours a day, seven days a week.

## MISSION

Our mission is to provide quality, compassionate and supportive services in an ethical manner to home care and facility clients. These services, performed with dignity and respect, will be available to adults of all ages, regardless of race, creed, sex, gender identity, disability, or national origin. Our goal is to collaborate with clients and their families to maintain those clients in need of our services within their homes for as long as possible. The long-term goal is to increase the client's independence and to ensure a safe and effective discharge plan.

We hope that you will find satisfaction in being part of the team that provides those services to our clients.

## GENERAL PERSONNEL POLICY

FreedomCare hopes to see that its employees are happy and effective in their association with it. Therefore, FreedomCare reaffirms its commitment to the following policies:

- To treat each employee with consideration, respect and dignity.
- To offer an attractive and comfortable place of employment.
- To be an Equal Opportunity Employer. FreedomCare is dedicated to providing equal opportunity to all employees and applicants for employment. It is FreedomCare's policy to recruit, hire, train, and promote all employees and to administer all other personnel policies without regard to race, color, creed, ancestry, national origin, religion, age, sex, sexual orientation, gender identification or gender expression, marital status, military status, and without regard to the disability or handicap of qualified people, or on any other basis prohibited by applicable law.

These policies have created and maintained an atmosphere in which all employees of FreedomCare have cooperated with each other and with management to achieve an enthusiastically harmonious relationships between personnel and management.

## YOUR HANDBOOK

This Handbook applies to all FreedomCare employees of its Pennsylvania HCA and HCR and addresses the administrative aspects of your employment.

The Handbook is intended to provide you with general information about some of the administrative policies and procedures of FreedomCare. It may not, however include a description of all of the policies for all situations that may arise. Nor does this Handbook in any way constitute an employment contract. FreedomCare may, in its sole discretion, alter, reduce or eliminate the policies, practices and benefits described in this Handbook, in whole or in part, without prior notice. If you have any questions about the information contained in this Handbook, please contact FreedomCare's Administrator.

In addition to being familiar with the general policies discussed in this Handbook, you should fully understand your specific job duties and responsibilities to include how they help FreedomCare to accomplish its mission and successfully offer its services as described below.

## **PHILOSOPHY AND BACKGROUND**

FreedomCare has an outstanding reputation for providing top quality home care services 24 hours per day, 7 days a week. These services are performed with caring, compassion, and commitment to all its clients.

FreedomCare also supports its caregiver staff by providing continuing education opportunities for continued professional growth. FreedomCare is licensed by the Pennsylvania Department of Health to provide supportive home care services to clients who are in need of assistance with their activities of daily living providing in the following counties:

### **FREEDOMCARE SOUTH EAST**

1700 Market Street, Suite 1005

Philadelphia, PA 19103

Service Areas include:

Bucks, Chester, Delaware, Montgomery, Philadelphia

### **FREEDOMCARE NORTH EAST**

1300 Old Plank Road,

Mayfield PA 18433

Service Areas include:

Bradford, Carbon, Columbia, Lackawanna, Lehigh, Luzerne, Lycoming, Monroe, Northampton, Pike, Sullivan, Susquehanna, Tioga, Wayne, Wyoming

### **FREEDOMCARE NORTH WEST**

1001 State Street, Suite 1400

Erie, PA 16501

Service Areas include:

Cameron, Clarion, Clearfield, Crawford, Elk, Erie, Forest, Jefferson, McKean, Mercer, Potter, Venango, Warren

### **FREEDOMCARE SOUTH WEST**

429 Fourth Ave., Suite 300

Pittsburgh, PA 15219

Service Areas include:  
Allegheny, Armstrong, Beaver, Bedford, Blair, Butler, Cambria, Fayette, Greene, Indiana,  
Lawrence, Somerset, Washington, Westmoreland

**FREEDOMCARE SOUTH CENTRAL**

2225 Sycamore Street, Suite #620  
Harrisburg PA 17111

Service Areas include:  
Adams, Berks, Centre, Clinton, Cumberland, Dauphin, Franklin, Fulton, Huntingdon,  
Juniata, Lancaster, Lebanon, Mifflin, Montour, Northumberland, Perry, Schuylkill, Snyder,  
Union, York

Employees of FreedomCare represent FreedomCare. As an employee of FreedomCare, our DCWs are a very important aspect of our health care team. This team also includes the client, the family, physicians, Registered Nurses, therapists and social workers. At times, other agencies, are included in the services to our clients. Employees are expected to cooperate with the planning of the client care.

Therefore, it is important that each employee abide by FreedomCare policies and procedures, which allow us to continue with our commendable reputation in the community.

## COMPLIANCE PROGRAM

FreedomCare's compliance policies and procedures are available if requested from FreedomCare staff.

## PERFORMANCE IMPROVEMENT PROGRAM

The mission of FreedomCare is to provide care within the community by providing personal care and support services, enabling them to remain in their homes or to facilitate the transition into facility-based environment. Consistent with the mission, the objectives FreedomCare's Performance Improvement Program are:

- To promote a work environment that is customer driven, focusing on the needs of the clients and their family as well as the providers.
- To promote continuous improvement in our services to clients through education, and a collaborative care model.
- To promote continuous improvement on an organization wide basis through continuous measurement and assessment of those processes and functions that most affect client outcomes.
- To assess and ensure the competence of staff.

- To assess the needs and expectations of its clients, their families and the degree to which these expectation are met, to help determine opportunities for improvement.
- To ensure that information management processes provide relevant and timely information needed to assess its client's needs.
- To provide a systemic, data based approach to designing, measuring, assessing and improving the overall performance of FreedomCare.

## FRAUD AND ABUSE PREVENTION

FreedomCare is committed to preventing and detecting any fraud, waste or abuse in the agency related to Federal and State health care programs. FreedomCare prohibits the knowing submission of false claims for payment from a federal or state funded health care program. To assist us in meeting our legal and ethical obligation, any employee who reasonably suspects or is aware of the preparation or submission of a false claim should notify their supervisor immediately or the Administrator. FreedomCare retains the right to take appropriate action against any employee who has participated in a violation of Federal or State law or agency policy. FreedomCare will not tolerate retaliation against any employee for notifying FreedomCare regarding such an abuse or false claim.

## CONFIDENTIALITY POLICY

The services that FreedomCare provides for its clients are held to confidentiality and privacy standards. It is vital that all employees respect and maintain the confidential relationship between FreedomCare and each of its clients. Information about FreedomCare, including information about its business, operations, finances, plans, and clients must never be discussed with, or revealed to, people outside FreedomCare or be used for personal benefit either during or after your employment. All employees are required to sign an acknowledgement of receipt and review of FreedomCare's confidentiality policy. A copy is attached to this Handbook.

Other than for legitimate business purposes, no one is permitted to remove from its offices or make copies of any FreedomCare records, reports or documents without prior approval of the Administrator. Disclosure of confidential information could lead to discipline up to and including termination and other possible legal action. FreedomCare will require an employee to account for all documents and other materials previously entrusted to the employee. FreedomCare may seek injunctive and other relief from a court of law with respect to violations of this policy concerning confidentiality.

## OFFICE HOURS

### **Hours**

All jobs are classified as either salaried exempt, salaried non-exempt, or hourly non-exempt. These terms relate to the federal Fair Labor Standards Act, which describes the jobs for which you receive overtime pay. If your job is non-exempt, whether it is paid on a salaried or hourly

basis, it means that you are entitled to receive overtime pay (described below). The overtime provisions of this Handbook apply to all non-exempt employees.

Employees should anticipate that there may be times when they are asked to work in excess of 40 hours in a work week. All non-exempt employees will be paid overtime in accordance with federal and state law. As provided for in the collective bargaining agreement, hours not worked are not counted for the purpose of computing eligibility for overtime pay. Before performing any overtime, you must have the written approval of your Supervisor.

**Entry After Hours**

Only designated employees who have the approval of the Administrator and a key and have been given the security code are allowed to enter FreedomCare property after normal working hours.

**Lunch Hour**

For employees working in a Facility setting, lunch for each employee is thirty (30) minutes and is unpaid and is normally scheduled four hours after the start of your shift time.

For employees working in a Community setting, lunch hour will occur the same time as the patient in which you are servicing.

**OFFICE HOURS**

**General Number: 215-996-7140 (24 hours/7 days a week)**

1700 Market Street, Suite 1005 Philadelphia, PA 19103	2225 Sycamore Street, Suite #620 Harrisburg PA 17111
1300 Old Plank Road, Mayfield PA 18433	429 Fourth Ave., Suite 300 Pittsburgh, PA 15219
1001 State Street, Suite 1400 Erie, PA 16501	

Office Hours: 9AM- 5PM Monday through Friday

All other times; please see below;

\* After 5:00 PM daily, messages left on the **Voice Mail will NOT be picked up** until the next day. Therefore, if you need to communicate your concern immediately you must adhere to the following instructions;

**Emergencies after 5:00 PM** must be relayed to the FreedomCare On-Call Service and 911 when appropriate. Always identify yourself as a FreedomCare employee, state your concern and an appropriate contact will respond to you within half-hour.

On Call Tel Number: **215-996-7140**

## EMPLOYEE REQUIREMENTS

FreedomCare employees must submit the following documentation before they will be considered for employment:

- Passed a background check and received a child abuse clearance, if applicable
- TB screen less than one year old
- Demonstrated competency via one of the following: (1) valid nurses license; (2) passing a FreedomCare competency examination; (3) passing a nurse aide certification and training program sponsored by the Pennsylvania Department of Education, a 42 C.F.R. 484.36-compliant home health aide training program; a HCA/HCR Medicaid Waiver training program, or a Pennsylvania-regulations-approved training program
- Satisfactory face-to-face interview
- Two (2) satisfactory letters of reference

FreedomCare employees must annually pass a FreedomCare competency screening

Additional drug screens may be requested at random.

## PAYROLL/PAYROLL SCHEDULE

**PAY is delivered by direct deposit or paycards** on Fridays for the prior week. Paper checks are also available. **Electronic Time/Duty submissions must be made by close of business on the prior Monday before paychecks will be issued.** Employees may not leave the client to pick up paychecks without permission from the client or representative, and the Scheduling Supervisor. The employee may designate someone to pick up his or her paycheck. However, FreedomCare must be notified in writing and proper identification presented.

If you believe an error has been made in your paycheck, notify your Supervisor immediately.

FreedomCare is required by law to withhold certain amounts from each employee's salary on each payday for Federal and State income taxes, Social Security (FICA) and other legally required deductions. All amounts withheld for tax are turned over to the appropriate taxing authorities, where they are credited against each employee's final tax liability. Because the amount of tax withheld is determined by the number of exemptions claimed, it is important that you immediately advise your Coordinator/Supervisor of any changes that you wish to implement in your withholding status.

Promptly after the end of the calendar year, each employee will be furnished with a statement showing the gross salary he/she was paid for the year and the amounts withheld for the various taxing authorities, for Social Security and for other legally required deductions.

Any mandatory deductions to be made from your paycheck, such as court-ordered garnishments, will be explained whenever FreedomCare is ordered to make such deductions.

## **Payroll Advances**

FreedomCare cannot loan money to employees.

## **RULES OF CONDUCT**

In any organization, it is important that all employees work together for the good of the whole so that the rights and interests of both the organization and the employees are assured. This is particularly so within in a home care agency, where any failure to adhere to the high standard of behavior, affect the well-being of the clients entrusted to our care.

FreedomCare requires:

- Every effort must be made to maintain the professional, orderly, efficient and effective operation of FreedomCare. Employees must fully, faithfully and conscientiously perform all duties assigned and must promptly carry out all instructions given by a supervisor.
- All administrative policies, as described in this Handbook, must be adhered to by all of our employees.
- Employees shall not act beyond the authority given to them in the ordinary performance of their duties without prior specific instructions from management.
- No employee may accept or offer money, goods or any other form of benefit in connection with any business transaction.
- Direct Care Workers are not to provide financial management for the client. This includes all banking functions such as ATM functions, withdrawals, deposits and check cashing, etc.
- Client food stamps and public assistance funds are not to be picked up or signed for by Direct Care Workers. Client credit card purchases are not to be signed by the Direct Care Workers. DCWs are prohibited from using the client's credit cards. Benefit cards may be used on behalf of the client only, not for personal use, and the DCW must notify their supervisor before using the card.
- The utilization of any property for non-business purposes is strictly prohibited.
- All employees must comply with FreedomCare's Corporate Compliance Program policy and sign an acknowledgement of receipt and review of that policy. A copy of the Corporate Compliance Program Policy is attached to this Handbook.

FreedomCare employees may be disciplined for just cause, including and up to suspension and termination. Causes for immediate discharge include, but are not limited to:

- Failure to report to work (no call, no show)
- Reporting to work late without prior notification of five (5) hours notifying the office
- Failure to submit electronic time sheets/records requested by the office
- intentionally falsifying time sheets or any other statements
- Failure to submit to medical exams and testing as requested
- Failure to report changes in a client's condition or status, hazardous situations or any circumstance that could impact the safety or care of any client
- Failure to follow Infection Control Standards and process and Universal Precautions



- Permitting an unauthorized person to replace you at work, accepting cash, gifts or borrowing/lending money to/from any client/family member
- Failure in maintaining patient confidentiality (discussing client's/family matters only with office/nursing personnel acceptable)
- Reporting to work intoxicated
- Using or having in your possession alcohol or illegal drugs
- Making or receiving personal phone calls from your client's phone; (restrict cell phone use).
- Accepting personal visitors for yourself while at work with a client
- Driving a client/family in your vehicle without notifying the office and having releases signed
- Failure to follow FreedomCare policies and procedures
- Theft of any money or property
- Possession of any type of weapon or firearm while at work
- Negligence, abandonment of the client
- Verbal, psychological or physical abuse of the client
- insubordination
- Threatening or assaulting other employees
- Engaging in verbal or physical confrontations while at work either with co-worker, a patient, and a patient's family/friend.
- Calling an unauthorized strike or walkout
- Engaging in any business that is competitive with any aspect of the business that is being conducted by FreedomCare
- Provide services to any client that is not arranged for or contracted through FreedomCare
- Provide any services that are provided by FreedomCare at any location where FreedomCare provides services that is not arranged for or contracted through FreedomCare and for one (1) year after the expiration, termination or cancellation of work through FreedomCare.
- Accepting rides from a client's family/friends/ neighbors, et

## **DO'S AND DO NOTS**

### **DO**

- Clock in using the IVR system upon your arrival at the client's home and before you leave to report your time. Expect random calls from FreedomCare office.
- If you are not using the IVR system, complete Time Sheet accurately and honestly, have a patient's sign weekly and initial daily. Send Time Sheet immediately to the office after you finish the week of your patient's service. Time Sheet must reflect POC.
- If there is an emergency involving your client, call 911, and the FreedomCare office.
- If the client is to be transported to the hospital, remain with the client during the ambulance transport to the hospital, or until a family member relieves you. For contracted cases, notify FreedomCare before accompanying the client to hospital.

- Call the FreedomCare office at least one a week in advance to request time off
- If you encounter a problem and will be late in arriving to your client's home, call the client and assure them you are coming and advise them of what time they can expect you. When you arrive at the client's home, call your office to report your arrival time.
- If you are uncertain about a client's care or a family situation, discuss the problem with your Supervisor
- Keep a record of all items purchased for your client. Keep all receipts relating to those purchases and return to the client or the client's family.
- Always wear your FreedomCare identification badge visible to the patient.
- If a visitor from the contracting agency or any government agency comes to the patient's home you must request to see visitor's ID and write down visitor's name, agency name and get a phone number. You should not let people in the house people who do not identify themselves.
- Dress appropriately in clean clothing.
- Maintain a respectful attitude when speaking with the client, client's family, FreedomCare, or contract staff. Respect the patient's property, confidentiality and privacy at all times.
- Report any suspected client abuse to FreedomCare Supervisor immediately
- Notify FreedomCare office of any; signs and symptoms of infection, illness, change in condition or antibiotic medication prescribed for yourself or client.
- Notify FreedomCare office with any type of incident or accident regarding your client or yourself.
- Arrive at client's home at least 15 minutes early. You can introduce yourself and observe your surroundings. If you are relieving someone you can do a walk through the home, check on the client, and receive report of the client from the previous employee or caregiver.
- Always read the notices and memos you receive from FreedomCare agency
- Always obtain patient's signature on time sheets. If patient unable to sign obtain signatures from patient's family's members and put in parenthesis who signed ex. daughter, son and etc. Do not sign "unable to sign" for patient.

#### **DO NOT**

- Do not make phone calls from your client's home unless you are calling in your time to the FreedomCare office. **Always ask permission.** Cell phone calls should be limited to emergencies.
- Do not enter your client's home **unless your client is present. You should leave a client's home when the patient leaves.**
- Do not borrow, solicit, or ask the client for money, or gifts of any kind.
- Do not accept tips or gratuities.
- Do not make your own replacement arrangements.
- Do not bring unauthorized individuals to your client's home.
- Do not change your assigned hours without discussing it with your supervisor.
- Do not refer friends to your client for employment.
- Do not agree to be a witness to a legal document.

- Do not discuss dissatisfactions regarding time, salary, or other employees with your client or in front of your client.
- Do not discuss your personal problems or health with your client or the client's family. Do not use any of the patient's medical equipment or personal items for your own use (even a patient say it is OK).
- Do not give your client your home address or telephone number.
- Do not accept private employment from your client.
- Do not smoke while on duty in your client's home.
- Do not discuss hourly wage with clients of fellow employees.
- Do not administer medication (prescriptions or over-the-counter medications).
- Do not accept rides from client's family, neighbors, friends, etc.
- Do not confront family members. Notify FreedomCare Coordinator/ or Supervisor to report potential conflicts.
- Do not send a "Substitute" worker in your place
- Do not drink alcoholic beverages within 12 hours of your shift while working for FreedomCare HCA
- Do not drive the patient in either your own or his/her car
- Do not leave the patient alone. Wait until your relief has arrived and call your coordinator.

## BREAKS IN EMPLOYMENT

### **Resignation**

Employees resigning their employment with FreedomCare should do so with at least two weeks advance notice in writing. Employees who resign will be paid for unused vacation, but not unused sick or personal leave, if any. FreedomCare reserves the right to ask an employee who has resigned to leave his/her employment prior to the expiration of the two-week notice requirement.

### **Suspension or Termination**

FreedomCare may find it necessary to counsel, suspend (with or without compensation at management's discretion) or terminate the employment of an employee for actions that are or should be within the employee's control.

Some reasons for termination include, but are not limited to:

- Incompetence
- Irregular attendance
- Frequent tardiness
- Unauthorized absence during work time
- Unprofessional behavior
- Unsatisfactory references
- Insubordination
- Not being present at work station during work hours.
- Using personal cell phone, including texting, internet browsing, browsing cell phone or phone calls during work hours
- Excessive socializing with other employees
- Disorderly conduct

- Using abusive language
- Dishonesty or theft
- Failure to follow the policies set forth in the Handbook
- Conviction of a crime
- Damaging the property of FreedomCare
- Creating or contributing to unsafe or unsanitary conditions by act or omission
- Falsifying employment information or other records
- Engaging in conduct prohibited by law, such as racial discrimination, sexual harassment, and the like
- Engaging in threats or threatening conduct to others during working hours or on FreedomCare premises
- Fighting with another employee
- Possession, use or being under the influence of drugs, alcohol or any other intoxicant on FreedomCare premises, other than those prescribed by a medical doctor
- Violation of confidentiality policy as stated in this Handbook
- Violation of FreedomCare policies or procedures

The above reasons for involuntary termination are by way of example only and do not in any way change the at-will nature of your employment. FreedomCare will decide whether it will reduce its staff and which employees will be affected. FreedomCare also will decide whether an employee has engaged in or not engaged in conduct warranting discipline and whether such employee's employment will be terminated. Employees who are involuntarily terminated from their employment will not be paid for unused vacation, sick or personal time.

### **Procedures on Resignation, Layoff or Termination**

On or before the final working day and before obtaining a final payroll, employees must return to the Administrator their office keys and any and all property of FreedomCare, including records and documents. The Administrator or his/her designee will also explain the conversion and/or continuation privileges of any group insurance, if applicable.

### **Former Employees**

Depending on the circumstances, FreedomCare may consider a former employee for re-employment. Such applicants are subject to FreedomCare's standard pre-employment procedures. To be considered, an applicant must have been in good standing at the time of their previous termination of employment with FreedomCare.

## **WHAT IS EXPECTED OF ME**

### **At-Will Employment**

All employees' employment is "at-will." An employee may be terminated with or without notice and with or without cause at any time.

In the event an employee wishes to voluntarily terminate employment with FreedomCare, a written notification must be submitted two weeks prior to the intended final date of employment.

### **Employees Availability for Work**

If you do not work for ninety (90) days, and you are unable to advise FreedomCare when you are ready to work, you will be placed on inactive status and /or terminated from your employ with FreedomCare. Important: If you wish to return to work after being inactive or terminated you MUST contact the Human Resources Department to update your compliance requirements prior to starting work again.

### **Initial Training**

Prior to the first day of employment, each new DCW employee must attend FreedomCare's Orientation Program. Orientation will provide the employee with information on a variety of topics related to his/her duties.

All DCW staff must successfully complete a competency review as part of the orientation process and must demonstrate competence as required by FreedomCare prior to any assignment of duties. Completion of training and competency review is documented by the Administrator and verification of completion of training and competency review is maintained in the employee's personnel file.

The length of orientation depends on the specific staff position and the discretion of FreedomCare with regard to each employee.

### **Anniversary Date**

The first day you report to work is your official anniversary date. Your anniversary date is used to compute various conditions and benefits described in this manual.

### **Attendance and Punctuality**

You should be ready to start work promptly at the start of your shift, unless other arrangements have been made, and you should continue working until the end of your shift. FreedomCare believes its work schedule is fair and reasonable and expects to receive a full day's work for a full day's pay.

### **Absences**

Unexpected absences of employees interfere with the efficient operation of FreedomCare's business on a day-to-day basis, but FreedomCare understands that unforeseen circumstances may sometimes cause you to be late or absent from work without prior approval. If for some reason you are unable to report for work at the usual time, you, (not a relative, friend or other person) if at all possible, should notify your supervisor as soon as possible, but no later than five hours prior to your starting time, of the reason for the absence/tardiness and when you expect to report to work. An unexcused absence will result when you report your lateness or absence on time, but do not have an acceptable excuse.

Absenteeism and lateness are considered in determining an employee's eligibility for continued employment, salary increases and promotions. Additionally, if you are absent, arrive late, or leave early, or if you extend your lunch period beyond the allotted time, your pay may be reduced accordingly. Unpaid leave is not a right of the employee, but may be granted by the employer upon submission of a written request. If any employee must for personal reasons or

suddenly becomes ill and must leave his/her work assignment, the employee must notify his/her supervisor.

An employee who is absent for three (3) consecutive days without notifying his/her supervisor will be considered to have resigned voluntarily.

### **Electronic Verification of Services**

FreedomCare uses the HHA Exchange Time and Attendance System as its primary means of ensuring that caregivers are arriving at patient visits on time and are performing the appropriate duties outlined in the patient's plan of care, and that caregivers remain at the patient residence for the assigned number of hours. Through the Caller ID Verification method, the caregiver calls an automated Time and Attendance phone system to log and register their call in and call out.

### **Time Records**

Each non-exempt employee must record his/her time each workday on his/her timesheet and must electronically and personally sign his/her time sheet. Timesheets will be used to record actual hours worked and leave taken. Your time sheet must also have stapled to it any approved time off that you have requested from your supervisor.

Time sheets are due at the Administrator's Office no later than 12:00 noon the Monday before Friday payrolls. No time sheets will be processed without your supervisor's signature or, in the event your supervisor is unavailable, your supervisor's designee's signature. If your time sheet is not submitted on time, FreedomCare may not be able to process your paycheck for that payroll cycle.

Under no circumstances should an employee record time for another employee or sign another employee's time sheet for such other employee; such action could result in immediate termination for both employees. Likewise, any employee who reports time worked untruthfully or otherwise falsifies his/her timesheet will be subject to disciplinary action, up to and including dismissal.

### **Accidents and Safety**

Employees must inform their supervisor immediately upon becoming ill or injured while at work or any place else. Injured or ill employees may be entitled to workers' compensation or disability insurance benefits, and it is vital that incidents be reported promptly (see "Benefits – Insurance"). Maintaining the security of FreedomCare offices is every employee's responsibility. Develop habits that ensure security as a matter of course. Make sure your personal possessions are secure. FreedomCare is not responsible for lost, damaged or stolen personal property. You may only use, adjust and repair machines and equipment that you are qualified to operate. Always get assistance when lifting or pushing heavy objects. If you are unsure of a safety procedure, ask your supervisor.

Client incidents / accidents are required to be reported even if the employee was not working at the time or if the client claims he/she was not injured. Any time that the employee or client experience a change in condition, elevated temperature, or other signs and symptoms of illness or

infection, these must be reported to the FreedomCare Supervisor immediately so that appropriate intervention can be implemented.

If the FreedomCare employee or their client is placed on antibiotic treatment, the FreedomCare Supervisor must be notified immediately. All incidents, accidents, infections and illness reports are aggregated monthly and quarterly with comparisons made.

### **Outside Employment**

FreedomCare expects its employees to be alert and at peak efficiency during work hours. Therefore, employees must submit a written request and obtain prior written approval from the Administrator before they may accept another job while employed by FreedomCare. All employees are required to disclose all outside employment in accordance with this policy and procedure and receive approval from the Director of Human Resources before commencing any such outside employment.

Under no circumstances may an employee engage in outside professional activities or take an outside job, either for pay or as a donation of his/her personal time, with a client or competitor of FreedomCare; nor may they do work on their own if it competes in any way with the services we provide.

### **Security**

Maintaining the security of FreedomCare offices is every employee's responsibility. Develop habits that ensure security as a matter of course. For example:

- Know the location of all alarms and fire extinguishers, emergency preparedness protocols and familiarize yourself with the proper procedure for using equipment, should the need arise.
- When you leave FreedomCare's premises make sure that all entrances are properly locked and secured.
- Check the identity and nature of business of all unknown people requesting entry into FreedomCare's premises.

### **Personnel Records**

FreedomCare keeps complete record of necessary information about each employee. You are required to notify your Coordinator/Supervisor immediately of any change in your:

- Name
- Address
- Telephone number
- Marital status – for insurance and tax purposes
- Number of dependents – for insurance and tax purposes
- Other matters of similar nature

Upon written request to your Coordinator/Supervisor, you may review your personnel file at a mutually agreeable time during regular business hours, within seven (7) days of the submission of your written request. Employees may not remove documents from a personnel file.

### **Immigration Reform & Control Act of 1986 ("IRCA")**

Under IRCA, once an employee is hired, the employee must furnish FreedomCare with documents required by law and fill out Form I-9. Furthermore, employees must keep FreedomCare informed of changes in their immigration status.

### **Your Appearance**

The appearance of employees reflects upon the community's image of FreedomCare. Employees, therefore, are expected to avoid extremes, to be neat and well groomed, and to wear clothing and accessories which management deems appropriate. Personal appearance should be professional while at work. The following dress code requirements should be followed by all caregivers:

1. Wear clothing or accessories that will not present a potential safety hazard in performing any job function.
2. Closed toe shoes are recommended to protect feet.
3. Finger nails should be short and neatly trimmed.
4. Keep hair well-groomed and beard or mustache neatly trimmed.

### **Expense Reimbursement**

You must have your supervisor's authorization prior to incurring an expense on behalf of FreedomCare. To be reimbursed for all authorized expenses, you must submit an expense report or voucher accompanied by receipts and it must be approved by your supervisor. Unauthorized expenses will not be reimbursed. Expenses are to be submitted within one week of the time in which the pre-authorized expense was incurred. In order for FreedomCare to keep records and accounting accurate and current, expense reports or vouchers older than one (1) month will not be honored.

### **Personal Telephone Calls**

To maintain the efficiency of services provided to patients, personal phone calls, text messaging, and personal e-mail usage is not permitted during work hours, except in emergencies. Caregivers cannot make or receive personal telephone from the home of the patient. If an emergency arises, please call your Service coordinator who will assist you with any required communications. Before calling the FreedomCare office, always ask permission from the patient or responsible party to use their phone. If you have a camera phone, the camera is not to be used on FreedomCare premises under any circumstances.

### **Personal Visitors**

Personal visitors are not permitted in the workplace.

### **Social Networking Policy**

For our employees who engage in social networking by blogging, wiki posting, face booking, twittering, or any other on-line community, please remember that FreedomCare is an organization whose reputation and good will in the community is important to its success. Our employees are ambassadors of FreedomCare whether in the office, off-site, or on-line. Therefore, FreedomCare's standards of conduct apply to on-line activity and any on-line conduct that, if it occurred at work, would be grounds for discipline, up to and including termination of employment. We expect our employees to observe appropriate business decorum when communicating with others. Employees have the right to engage in concerted activities for the



purpose of collective bargaining or other mutual aid or protection. Company trade secrets and client information must be kept confidential and should not be shared outside the company. Similarly, any activities that occur at FreedomCare's facilities or client premises should not be shared outside the company. Do not post pictures of FreedomCare events or of our or any clients without express authorization from administration and do not identify any FreedomCare clients or employees by name or otherwise. FreedomCare employees who engage in social networking must also refrain from any conduct that involves harassment based on sex, race, religion or any other category protected by law, as well as from making threats of violence towards others, like hate based language and harassment or any other illegal conduct. Violations of any portion of this policy will not be tolerated and is grounds for immediate termination.

### **Alcohol and Illicit Drugs**

Employees are prohibited from unlawfully consuming, distributing, possessing, selling or using controlled substances while on duty. In addition, employees may not be under the influence of any controlled substance, such as drugs, or alcohol while at work, on company premises, or engaged in company business. FreedomCare personnel must not use at work alcohol or drugs of any kind (other than prescription medications that do not interfere with or negatively impact on an employee's ability to do his/her job). Anyone violating this policy may be subject to disciplinary action, up to and including termination.

FreedomCare reserves the right to conduct pre-employment, random, reasonable suspicion and post-accident drug testing. "Reasonable suspicion" is defined as a logical conclusion based on specific facts that an employee is under the influence of drugs or alcohol and includes circumstances where there may be concern for the compromise of the safety, well-being and/or security of the Agency, its employees and/or its clients. Any employee, who refuses to consent, fails to cooperate with the administration of a drug and/or alcohol test, or alters or attempts to alter the test results will be subject to disciplinary action up to an including termination of employment.

## **MISCELLANEOUS**

### **Agency Meetings**

On occasion, we may request that you attend a meeting sponsored by FreedomCare. If this is scheduled, **YOUR ATTENDANCE IS REQUIRED**. The unexcused failure to attend an agency-sponsored meeting may be cause for discipline, up to and including discharge.

### **Use of Social Security Numbers**

FreedomCare will not post or display an employee's social security number. Any file containing an employee's social security number has restricted access

### **No Solicitation/No Distribution**

An employee may not solicit or distribute literature for any cause or organization during his/her work time or during the work time of the employee being solicited or given literature.

An employee may not distribute literature in work areas at any time. In order to keep the office safe, clean and neat, literature may not be strewn or discarded on the premises.

Non-employees, of course, are not permitted to solicit or distribute literature at any time on FreedomCare's premises.

### **Grievance Procedure**

If you have a problem or complaint in connection with your duties, you shall discuss this with your direct supervisor to determine a satisfactory solution.

In the event that you are unable to resolve the problem with your supervisor, you may direct your complaint, in writing, to the Administrator. FreedomCare will try to resolve the grievance at this step in the procedure.

### **Photo Identification**

All FreedomCare employees must display at all times while on duty a photo ID provided by FreedomCare.

The identification card is part of Freedom Care LLC and will be returned to the agency upon termination of employment.

### **IDs and Visitors**

No vendor, visitor or client may have access to any part of your offices without a Visitor's Pass. Employees are discouraged from inviting or receiving friends, relatives, children and family members during work hours. Employees are required to always wear identification. Your supervisor or the office will provide you with an ID. If any employee sees any individual who is not wearing a Visitor or Employee ID Pass, please escort the person to reception to sign it.

### **Inclement Weather & "Acts of God"**

In the event that FreedomCare declares that its facility is closed due to inclement weather, power/utility failure, fire, flood, or some other "Act of God", employees are urged to come to work as soon as the weather permits that day. Any hours missed, must be taken as Personal Time or Vacation time on your time sheet.

### **Smoking Policy**

New York State and other jurisdictions have adopted laws that provide restrictions on smoking in the workplace. Employers must adopt, implement, and disseminate a written smoking policy. In order to comply with the law, FreedomCare adopts the following policy:  
Smoking will not be permitted in any offices of FreedomCare, Or in the residence of any client.

## **POLICY PROHIBITING SEXUAL AND OTHER UNLAWFUL HARASSMENT**

### **Policy Statement**

FreedomCare recognizes its responsibility to all employees to maintain a working environment free from all forms of discrimination and conduct that can be considered harassing, coercive, or

disruptive, including sexual harassment. Actions, words, jokes, or comments based on an individual's sex, race, color, national origin, age religion, disability, sexual orientation, or any other legally protected characteristic will not be tolerated. Any employee who is found to have engaged in sexual or other unlawful harassment shall be subject to appropriate disciplinary action, including discharge.

### **Sexual Harassment**

Sexual harassment is defined as follows:

“Unwelcome” sexual advances, request for sexual favors, sexually motivated physical contact or communication of a sexual nature when:

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

Sexual harassment includes unwelcome and personally offensive verbal behavior such as teasing or joking, sexual innuendo, suggestive comments or sexual propositions as well as physical behavior such as touching, patting, pinching or other inappropriate physical contact. Sexual harassment also includes non-verbal behavior such as displaying suggestive pictures or

### **Responsibilities and Complaint Procedure**

- Sexual or other unlawful harassment by any employee will not be tolerated. All employees will be expected to comply with this policy.
- Any employee who feels that he or she has been the subject of sexual or other unlawful harassment should report the incident to the Administrator. If the incident involves the Administrator, the employee should contact a supervisor or Director with whom they feel comfortable discussing the complaint.
- All complaints will be investigated in a timely manner and full consideration will be given to all the facts presented. If it is found after investigation that the complaint is, valid, appropriate action will be taken, up to and including immediate termination. FreedomCare will not tolerate retaliation against any employee for complaining about sexual or other unlawful harassment.

FreedomCare also recognizes that false accusations of sexual or other unlawful harassment can have serious effects on innocent people. We trust that all employees of FreedomCare will act responsibly to continue our pleasant working environment free of unlawful discrimination.

FreedomCare attempts to provide an open communication with our clients and staff. As an employee, **you are free to voice a complaint to any of our office staff members.** When a complaint is received, whether it is from a client or an employee, it is investigated and appropriate action is taken. Sometimes it may mean that you may be called into the office to complete the investigation.

The following people may be contacted regarding any complaints that you may have:

**FreedomCare's telephone number: 267-314-7003**

**Fraternization Policy**

In addition to FreedomCare's policy against sexual harassment, it is our policy to ensure that the work environment is free from intimate, romantic, or dating relationships between supervisors and their subordinates, or between employees involved in a power-differentiated relationship. FreedomCare believes that such power-differentiated work relationships can adversely affect company morale, operations, and productivity because of actual or even the appearance of favoritism, bias or unfair treatment. FreedomCare will take appropriate action against violators of this policy.

## APPENDIX

### ELECTRONIC TIME/DUTY SHEET COMPLETION INSTRUCTIONS

Directions for completing are as follows:

- Log in using the credentials we send you.
- Verify the client's name
- Under the client's information, in the box, fill in the month, day, time arrived, time left and total hours worked.
- At the END OF EACH DAY, place a check mark next to the services performed on that day. CHECK ONLY THE BOXES THAT YOU ACTUALLY PERFORMED!! If your client refuses any service you must notify the office.
- When the day is over, let your client sign on the respective day. You must sign next to your client's signature. DO NOT SIGN FOR YOUR CLIENT.

NEVER, NEVER SIGN OR INITIAL YOUR CLIENT'S NAME ON THE TIME/DUTY SHEET

**Falsification of the electronic or paper Time/Duty Sheet is grounds for immediate termination, and / or referral of the matter to the proper authorities.**

PAYCHECKS WILL NOT BE ISSUED UNTIL YOUR TIME/DUTY SHEETS ARE FILLED OUT CORRECTLY AND RECEIVED by FreedomCare.

### REPROTABLE SIGNS AND SYMPTOMS OF ILLNESS OR INFECTION

The following signs and symptoms of **POTENTIAL INFECTIONS (IN CLIENT OR EMPLOYEE) ARE TO BE REPORTED IMMEDIATELY** to the FreedomCare Supervisor:

- Elevated temperature / fever
- Cough (productive or non-productive)
- Sputum (amount, color, consistency, odor)
- Sore throat
- Mucus membrane (intact, broken)
- Ear pain (with or without drainage)
- Diarrhea
- Vomiting
- Difficulty urinating (pain, blood, odor increased frequency)
- Skin (integrity, color, breaks, bruises, rashes)
- Purulent drainage

- Antibiotic treatment
- Weakness
- Fatigue / lethargy
- Generalized body aches
- Decreased mobility
- Exposure to human or animal bites, food poisoning, or contact with blood products directly or via **needle stick**.

## EMERGENCY PROTOCOL

Refer to “When to Call an Ambulance” and “What is an Emergency” handouts.

When an employee determines that a life-threatening situation has arisen with his or her client, the employee will call 911 without delay. If a client experiences a sudden and adverse change, not necessarily life threatening, a call to 911 is appropriate. After 911 has been called, the employee is instructed to call the family or representative, the physician, and the FreedomCare office.

If the client is expected to be transported to a hospital, the employee must call the FreedomCare office or On-Call Coordinator to receive direction on whether or not to accompany the patient to the hospital or to remain with the client until a family representative arrives or until the client is discharged or admitted. In the event that your hourly assignment is completed, it is still necessary for you call the FreedomCare office for further instructions.

When handling client responsibility over to either to emergency response services, hospital staff or a family representative, remember to secure the client’s personal belongings with the responsible party. The following information should be available to emergency response services or hospital staff upon transfer or arrival to the emergency room:

- Emergency Kardex
- Medication Profile/List

## WHAT IS AN EMERGENCY?

**CHEST PAIN**

**DIFFICULTY BREATHING**

**BLEEDING THAT WILL NOT STOP**

**UNCONCIOUSNESS**

**BROKEN BONES**

## **POISONING**

## **SEIZURES**

## **CHOKING**

## **BURNS**

## **CALL 911**

**Report changes in your patient's condition immediately.**

### **PATIENT SAFETY GOALS**

In an effort to reduce medical errors and promote patient safety goals a focus on improving patient safety in various ways pertain to Homecare:

- Improve the accuracy of patient information
- Reduce the risk of health care-associated infections
- Reduce the risk of patient harm resulting from falls

We are to improve the accuracy of patient identification and make sure we are caring for the correct client by:

- Confirming address with the agency or contract
- Confirming with the client by asking them to identify themselves, if their mental capacity allows
- If the clients cannot identify themselves, check client area for any piece of mail, which is in plain view
- If you do not observe any mail in plain view, call the FreedomCare office and we will contact a next of kin to confirm address.

We are going to reduce the risk of health care-associated infections by:

- Complying with the current Centers for Disease Control and Prevention (CDC) hand hygiene guidelines, which are as follows:
  - Use of alcohol based hand rubs to disinfect our hand unless they are visibly soiled or you feel you have come into contact with client's blood and/or body fluids.
- When to disinfect our hands:
  - Upon arriving to client's home and before leaving
  - Before and after client care

- Before and after personal bathroom use
- Before putting gloves on and after removing gloves
- Before and after handling food
- Before and after meals
- After sneezing and coughing
- Whenever your hands are soiled
- If your hands are visibly soiled, you must then disinfect with hand washing using antibacterial soap and water. Always adhere to proper technique.

We will reduce the risk of client harm resulting from falls by:

- The Supervisor will complete a risk assessment on her initial visit and she will add her findings and plan to the written Plan of Care.
- DCW will maintain client safety and prevent falls by:
  - Making sure client area is free of any clutter or obstacles when they are ambulating
  - Making sure client has socks and proper fitting shoes on when ambulating
  - Ensure that client use their walker, cane, or crutches when they ambulate
  - Make sure there is good lighting
  - Remove any low lying furniture such as low coffee tables and foot stools
  - Make sure rugs have non-skid backing so they don't bunch up or move
  - Make sure banisters are securely attached
  - If client needs assistance in and out of the tub, inquire about grab bars, shower/tub chairs, or elevated toilet seats
  - Monitor your clients who are on multiple medications, are incontinent, have fallen before, have a fear of falling, or have neurological problems such as a stroke or Parkinson's disease
  - Report and changes in client's condition
  - Make sure that client can see out of their eyeglasses. If they cannot, let your Supervisor know.
  - Before leaving your client, ensure that they have what they need, such as the remote control for the television, the telephone is in reach. Ensure that their cane or walker or crutches are beside them and instruct the client to use their adaptive device and to take their time getting up.

## IN CASE OF FIRE

When assigned a client, upon entering the home for the first time, take note of exits, fire extinguishers, smoke alarms, and fire boxes.

**Report any smoke or suspected fires immediately to 911.**

If a fire occurs:

- **R - ESCUE**
  - Remove yourself and the client from the area
- **A - LARM**
  - Call 911 to activate the Fire Department



- **C - ONFINE**
  - Confine the fire by closing all doors and windows
- **E – XTINGUISH/EVACUATE**
  - Use fire extinguishers, or Evacuate the area if the fire is too large to extinguish

If the client has Oxygen, turn the Oxygen off immediately and pull the plug.

How to use a Fire Extinguisher:

- P Pull out the Safety pin
- A Aim the nozzle at the base of the flame
- S Squeeze the handle
- S Sweep across the flame from side to side until the fire appears out

## HIPAA – GUARDING YOUR CLIENT’S PRIVACY

For the first time the Privacy Rule sets national standards to protect health-related information, enforced by the federal government. The Privacy Rule regulates communications of protected health information (PHI).

- PHI is any health-related information that can be directly linked to a specific person.
- All ways of communicating are included, whether by written, oral, or electronic means.
- Your clients have placed their trust in you and the other staff members. It is your legal and ethical obligation to protect their health information to your best ability.
- **Do not give out any information to anyone;** if the client is alert and oriented and can communicate, pass all inquiries to them.
- Family and friends are very concerned and may pressure you for answers. Just refer them to the client or client’s designated representative.
- Health information that is needed to provide care may be shared with the doctor, nurse, physical therapist, home health aide, students, and others that provide direct care to the client.
- In case a visitor from the contracting agency or any government agency comes to the patient’s home DCW must request to see visitor’s ID and write down visitor’s name, agency name and get a phone number. DCW should not let in the house people who do not identify themselves.
- If an agency staff member comes to ask questions or to look at the client’s chart out of curiosity that is a breach of privacy.
- **Be careful about unknowingly giving out health information.** For example, if someone calls on the telephone for your client, and you reply, “I’m sorry. He can’t talk right now – he’s receiving his chemo”, you may have violated the client’s privacy. It’s safer to say, “Mr. Parker can’t come to the phone right now. May I take a message?”
- Always use care in discussing a client’s health information in the agency. Don’t hold discussions in the hallways or in a crowded room, elevators, or other public spaces.

- HIPAA requires that reasonable care be used to keep conversations as private as possible. For example, when discussing clients at the agency or in the home, speak in a low voice and stand apart from others who may be nearby.
- If you use a computer, make sure you log off whenever you leave the monitor to prevent others from gaining access to this information.
- Do not leave charts or other sensitive information anywhere others can view it.

## RIGHT AND ETHICS

### **Disclosure of AIDS/HIV Related Client Information**

FreedomCare will protect confidential AIDS/HIV related information in accordance with New York State Confidentiality Laws and Public Health Law section 2786 FreedomCare will continue its dedication to non-discriminatory practices when admitting and caring for persons with or pending test results for, the have or suspected of having AIDS/HIV Infection.

#### Employee Requirements:

- Every employee will be oriented to the Confidentiality and Disclosure policy initially and annually.
- Employee titles and functions will determines the limits of access to disclosure and will be provided with the information necessary to provide the appropriate care.
- Employees will demonstrate written competency in Confidentiality and Disclosure annually.
- Employees will follow protocols that prohibit discriminating against patients having or suspected of having AIDS/HIV infection

#### Disclosure of Confidential AIDS/HIV information:

- Health care workers who are accidentally exposed to potentially infectious body fluids may receive HIV-related information regarding the source of exposure.
- Health care workers on the team of the patient's existing provider may be advised of a patient's HIV-related information, but only to give necessary care on the treatment team of the patient.
- All requests for confidential AIDS/HIV related information will be screened by the Director of Patient Services and Administrator.

## CONFIDENTIAL AND DISCLOSURE

No person who obtains confidential AIDS/HIV related information, in the course of providing any health or social service or pursuant to the release of HIV-related information may not disclose or be compelled to disclose such information to another.

- Confidentiality of a protected person may be disclosed to authorized employees when medically necessary in order to provide timely care and treatment
- Health Staff Committees authorized to access medical records

## ENVIRONMENTAL SAFETY/HAZARDOUS MATERIALS AND WASTES

### **Policy**

FreedomCare manages hazardous materials and wastes based on New York State regulations and guidelines. Hazardous materials and wastes are defined as anything which contains toxic chemicals, medications, gases, or potentially infectious body fluids.

### **Procedure**

During orientation and annually thereafter, employees are educated regarding the handling and disposal of potentially hazardous products and the use of Standard Precautions.

Clients and caregivers are instructed and urged to follow Standard Precautions and the infection control guidelines provided to them during the intake and assessment process to include:

- Appropriate use of Personal Protective Equipment as needed.
- Practice hand hygiene routinely before and after patient care.
- Disposable items contaminated but not saturated with bodily fluids will be double bagged and disposed of in the regular household garbage.
- Dispose of any broken glass or sharps in a hard plastic puncture proof container with a secured cap.
- Hazardous spills should follow the protocol of FreedomCare's policy for cleaning and decontamination cleaned with a 10% bleach solution.
- Employees will have access to Material Safety Data Sheet information as required by OSHA

## BLOODBORN EXPOSURE

In compliance with OSHA recommendations, FreedomCare requires all employees to immediately report all Bloodborne Exposures. If you are exposed the following will occur in addition to the Bloodborne Exposure Policy protocols:

- Immediately rinse the location of the exposure
- The employee will contact the Director of Patient Services or the on-Call Nurse if after-hours, to notify of the exposure.
- FreedomCare will recommend but not limit you to immediately seek medical treatment at nearest location.
- FreedomCare will require a written statement of the exposure event from you.
- The employee will undergo a Post-Exposure Evaluation and Follow-Up Process by the Human Resources and Clinical Departments.

## **EMERGENCY PREPAREDNESS AND DISASTERS**

During emergencies, FreedomCare will attempt to contact all clients. Priority will be given to certain clients based on their acuity level and the type of emergency. It is important for you to know each client's PRIORITY LEVEL and TRANSPORTATION ASSISTANCE LEVEL. Please refer to your Emergency Kardex and Care Plan located in the home.

During inclement weather FreedomCare will make every effort to continue to service our clients. In the event of natural or manmade disasters, clients receiving care will continue to receive care if at all possible, with minimal disruption of service.

Employees are instructed to contact the FreedomCare office for instructions and remain alert for ongoing notifications throughout the disaster/emergency period.

If telephone services are interrupted, or roads are impassible, employees are instructed to remain at home or in a shelter until such services are restored.

FreedomCare will network with DOH Emergency Services disaster protocol to access transportation for clients and/or personnel out of the disaster area, should the need arise.

### **Electrical Outage**

Clients whose safety depends on electrically powered equipment will be given top priority. Clients will be transported to a safe area.

### **Natural Disasters**

Clients who have no family interaction will be transported to a safe area by the use of government resources.

### **Man-made Disasters**

Assistance will be provided to the FreedomCare client by the use of the community resources.

### **Mass Transit Delays/Strikes**

When an employee relies on mass transit to communicate to the FreedomCare client's residence, it is the responsibility of the employee to communicate with the client and the FreedomCare office regarding the potential delay while making other arrangements for transportation.

### **Telephone Outage**

The FreedomCare client will be assessed for risk factor without phone service. The employee will attempt to contact the FreedomCare office from a workable phone to receive instructions. If the employee is unable to locate a workable phone within the client's area, he or she should make every effort to remain with the client until adequate assistance arrives. Emergency use of beepers, cell phones, and messengers will be utilized as needed.

## CLIENT EMERGENCY

### What to do if:

- There is no answer at the door when you arrive at the client's home.
  - Call the FreedomCare office immediately. Do not leave the area until the client is located. You may use your cell phone, asks a neighbor to use their phone, or go to the nearest pay phone to call FreedomCare. After reporting to the office by phone, return to the client's residence.
  - Check all doors and windows for sight and sound of client. If in an apartment building, check with the manager or superintendent's office to see if they can open the door for you. The FreedomCare office staff will make every attempt to reach the client or responsible party. If FreedomCare is unable to determine the safety of the client, 911 will be called to gain entrance to the home. You may not leave the area of the residence until the safety of the client is determined.
  - In the event the client is found by the Police or EMS to be in the residence and is injured or sick, you must notify FreedomCare and accompany the client to the Emergency Room and stay with the client until relieved by a responsible party or the client is admitted to the hospital.
  - In the event of a death in the residence, call FreedomCare immediately; you must stay with the client until the responsible party releases you from the case.
  
- The client falls or has an injury or illness:
  - Call 911 and sit by the client reassuring him/her.
  - Call the FreedomCare office and the family or responsible party.
  - Never pick up the client after a fall. Call 911 and let EMS pick the client up and determine if there is an injury.
  - Remain with the client until FreedomCare releases you.

**If you are caring for a Hospice client, DO NOT CALL 911! Phone the Hospice agency for instructions.**

### **Deficit Reduction Act / False Claims Statement Fraud, Abuse, and Waste Prevention Program**

FreedomCare is committed to preventing and detecting any fraud, waste, or abuse in its organization related to Federal & State Health Care Programs. Every employee is to be honest and aware of the consequences of a non-compliant act and demonstrate a commitment to honest and responsible conduct.

#### **- Issues that should be reported are:**

- Breach of confidentiality
- Unethical relationships with vendors or contractors
- Fraudulent or false actions
- Improper billing practices

Unethical / inappropriate care of patient or equipment  
Unethical staff behavior  
Bribes or kickbacks

**How to report your concerns:**

Call FreedomCare’s Corporate Compliance Officer our Confidential Hotline at 877-695-6550

If the employee feels after a reasonable period of time no investigation has been initiated, then the employee has the right to bring his/her concern directly to the government agency under relevant Federal & State Laws. However, the employee should report any concerns about fraud, waste, or abuse to the Administrator/ Compliance officer prior to contacting government agencies. Failure to do so may constitute a breach of his/her duty of loyalty to FreedomCare.

No employee will be discharged, demoted, suspended, threatened, harassed, or discriminated against for making such reports in good faith. Any “whistleblower” that is discharged, demoted, suspended, threatened, harassed, or in any other manner discriminated against by FreedomCare, is entitled to reinstatement with seniority in accordance with the law.

Under New York State Labor Law, FreedomCare is prohibited from taking any retaliatory actions against an employee who discloses or threatens to disclose to a supervisor or a public body, an activity, policy, or practice that is in violation of law and that presents a substantial and specific danger to the public health or which constitutes the crime of health care fraud.

Copies of the laws mentioned above are available upon request to the Compliance Department.

**STAFF RIGHTS**

FreedomCare recognizes the right of its staff to refuse to participate in the care of a client due to a conflict with cultural values or religious beliefs. When this occurs, the staff member must notify his/her immediate supervisor to initiate the following process:

An alternate, qualified employee will be assigned to the client to prevent a delay or disruption in the client’s care. If a delay is anticipated, the client and/or representative along with the primary care physician, as necessary, will be notified immediately.

Once care responsibilities have been reassigned, the employee’s reason for refusal to participate in client care will be reviewed by members of the Ethics Advisory Committee to justify appropriateness of actions.

Conclusions of this review will be documented in the employee personnel file including actions to be taken by leadership. These actions may be reassigned of duties for the employee and/or disciplinary action against the employee.

In addition to acknowledging and addressing the staff’s cultural and ethical beliefs, leadership of FreedomCare encourages communication and sharing of ideas throughout the organization and

has established an “open door policy” for all staff to voice their concerns directly to senior management.

## HUMAN RESOURCES

### EMPLOYEE DESCRIPTION DCW

**POSITION:** Direct Care Worker (DCW)  
**REPORTS TO:** Operations Manager

#### **POSITION SUMMARY:**

A Direct Care Worker is a person who provided by a home care agency or referred by a home care registry to provide home care services, i.e., personal care, assistance with instrumental activities of daily living, companionship services, respite care, or specialized care, to a consumer. The DCW is under direct supervision of the licensed nurse.

#### **QUALIFICATIONS:**

(1) valid nurses license; (2) passing a FreedomCare competency examination; (3) passing a nurse aide certification and training program sponsored by the Pennsylvania Department of Education, a 42 C.F.R. 484.36-compliant home health aide training program; a HCA/HCR Medicaid Waiver training program, or a Pennsylvania-regulations-approved training program.

- Ability to speak, read and write in English sufficiently to document care provided on the DCW Time and Activity report and able to call agency to report change and/or issues related to the patient and/or 911 in case of an emergency.
- Ability to add and subtract two-digit numbers and to multiply and divide with 10’s and 100’s. Ability to perform these operations using units of American money and weight measurement, volume and distance.
- Ability to apply common sense understanding to carry out simple one or two step instructions. Ability to deal with standardized situations with only occasional or no variables.

#### **CONTACT:**

Most frequent contact:

Nature or Purpose:

Patients/Patient families;  
agency staff (coordinator, Supervisor)

Provide care and service  
Receive supervision, development of POC.

#### **EQUIPMENT OPERATION:**

Walker, Cane, Crutches, Wheelchair, Commode, Hospital Bed, Hoyer Lift, Household appliances (i.e. vacuum, refrigerator, stove, blender, toaster, etc.

**SPECIFIC DUTIES AND RESPONSIBILITIES:** In order to comply with the Americans with Disabilities Act (ADA), each essential duty should be indicated with an “x” in the ADA box. A duty is essential if: (1) the position exists to perform that duty; (2) it requires specialized skills and/or expertise; (3) it can only be performed by a limited number of available employees.

ADA	DUTIES / RESPONSIBILITIES
X	Preparing and serving normal diets. Assisting patient with eating, monitors intake.
X	Assisting with bathing of patient - in bed, tub and shower
X	Assisting with grooming, care of hair, including shampoo, shaving with electric razor only, and ordinary care of nails - this means soaking and filing nails.
X	Assisting with care of teeth and mouth.
X	Assisting patient on and off bedpan, commode and toilet.
X	Assisting patient in transferring from bed to chair, to wheelchair and in walking with or without devices.
X	Assisting patient with dressing
X	Assisting patient with self-administered, oral medications that have been ordered by the medical practitioner.
X	Use of special equipment i.e. hooyer lift.
X	Passive range of motion, turning and positioning.
X	Reporting any change in patient’s mental and physical condition or home situation to the Supervisor/Coordinator.
X	Making and changing bed/linens
X	Dusting and vacuuming the rooms the patient uses.
X	Tidying kitchen, Dishwashing.
X	Tidying bedroom
X	Tidying bathroom
X	Patient’s personal laundry; this may include necessary ironing and mending.
X	Provides a supportive environment and ongoing reality orientation to confused patients using appropriate interpersonal behavioral techniques.
X	Assists with self-administered medications.
X	Administer special skin care as directed
X	Collect stool, sputum and urine specimens using appropriate techniques

**THE DIRECT CARE WORKER WILL NOT PERFORM THESE FUNCTIONS UNDER ANY CIRCUMSTANCES:**

1. Foley catheter irrigation.
2. Apply a sterile dressing.
3. Give enemas or remove impactions.
4. Perform gastric lavage; gavage.
5. Applications of heat in any form.

**CUSTOMER SERVICE/INTERPERSONAL SKILL**

1. Assists other employees where needed;



2. Is responsible and cooperative with patients/families, supervisors, fellow employees.
3. Maintains friendly working atmosphere.
4. Maintains appropriate attitude.
5. Maintains appropriate appearance.
6. Accepts constructive criticism as evidenced by appropriate changes in behavior.
7. Utilizes established channels of communication.
8. Recognizes, accepts and respects people as individuals.
9. Recognizes limitations and seeks assistance appropriately.

**SPECIALIZED SKILLS AND TECHNICAL COMPETENCIES:**

1. Knowledge of safe and appropriate method of providing personal care.
2. Knowledge of meal preparation and basic nutrition.
3. Knowledge of environmental management and safety.

**PHYSICAL DEMANDS:** The physical demands described here are representative of those that must be met by an employee to successfully perform the essential functions of this job. Reasonable accommodations may be made to enable individuals with disabilities to perform essential functions.

Check one physical requirement which applies to this position:

- **MEDIUM WORK:** Exerting up to 50 pounds of force occasionally and/or up to 20 pounds of force frequently and/or up to 10 pounds of force constantly to move objects.

**WORK ENVIRONMENT:** Patient's home, facilities

**Confidentiality Statement:**

Agency records are maintained in a safe and secure area with specific access availability to ensure confidentiality. Agency records, files, documents and reports are the exclusive property of the Agency. Only authorized personnel will have access to clinical/financial/personnel records. All agency records, files, documents and Access to confidential employee/patient information files will be limited to agency personnel involved in the care and service of the patient. Agency staff with access to computer files holds all information in strictest confidence in the processing, storage and discarding of all data. Only authorized personnel will have access to written and computer data information; Authorized personnel will be assigned passwords/access codes to computer files necessary to conduct their responsibilities; Responsibilities of this job position has clearance for access to the following confidential information: Patient plans of care, identifying patient data.

I have been oriented to the agency's confidentiality policy. I understand that any Agency employees who do not honor the Confidentiality Policy are subject to termination and possible legal action. I agree to abide by the agency's confidentiality policy.

## ACKNOWLEDGEMENT OF RECEIPT OF HANDBOOK AND APPENDIX

I \_\_\_\_\_ acknowledge that I have received a copy of , and training on the FreedomCare employee Manual and Appendix including its Code of Conduct, as well as information about the federal and state laws pertaining to false claims and whistleblower protections and a summary of the Agency's policies and procedures for detecting and preventing fraud, waste, and abuse.

I understand the employee handbook can be amended or revised at any time by FreedomCare and that FreedomCare retains the right to alter, reduce or eliminate any pay practice, employment policy or benefit described in the Handbook or Appendix.

I further acknowledge that I understand my responsibility to read these materials, to conduct myself in accordance with their requirements, and to cooperate with the Agency in carrying out the objectives of the compliance program.

### **Acknowledged and Agreed:**

By: \_\_\_\_\_

Position: \_\_\_\_\_

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

The original of this form will be placed in your personnel file. If you so desire, a copy may be made of this form prior to submitting the original to the Administrator for your personnel file.