



Employee Policy Book

The following pages contain information regarding many of the policies and procedures of Home Again Living, Inc. (hereby referred to as “Home Again”). This is not an employment contract and is not intended to create contractual obligations of any kind.

The policies and procedures outlined in this handbook will be applied at the discretion of Home Again and Home Again reserves the right to deviate from the policies and procedures of this handbook, or to withdraw or change them at any time. We will notify you when an official change in policy or procedure has been made.

Home Again values the many talents and abilities of its employees and seeks to foster an open, cooperative, and dynamic environment where employees and the company alike can thrive. If you would like further information or have questions about any of the policies and procedures outlined in this handbook, please feel free to bring them to the attention of your management team.

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Home Again

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Facility/Community

BEDSIDE RAIL

Policy and Procedure

January 11, 2019

POLICY

It is the policy of Home Again Living Inc. that all residents will be free from chemical and physical restraints. All residents shall have the ability to interact freely with others within the environment. Bedrails are considered restraints, this includes any type of rail or transfer bars. The only time a bed rail can be used in the facility is when the Resident requests or approves of a device to be used to increase his/her independence and mobility. If the resident is unable to make such decision due to cognitive impairment, the resident's Activated Health Care POA, Physician, and Home Again Medical Director must all agree that the device is appropriate for safety and mobility means. In both instances a Bedside Rail Risk Assessment will be completed, the residents care plan will be updated, and a physician's order must be obtained. If it is found that a Bedside Rail is appropriate the following procedure will be followed.

PROCEDURE

1. The use of the Bedside Rails must first be evaluated for their appropriateness in relation to the Resident's condition. This evaluation must include input from Home Again Medical Manager and Community Director prior to usage. Alternatives must be explored, reasons for use, and condition of Resident (including cognitive status) must be documented initially in the Bedside Rail Risk Assessment. Examples of alternatives include but are not limited to:
 - Beds that can be raised and lowered to accommodate both the Resident and healthcare worker needs
 - Keeping the bed in the lowest position
 - Fall mat placed on the floor
 - Anticipation and services of Resident needs such as hunger, thirst, toileting needs, and pain.
2. The request for Bedside Rails or Transfer Bars must be made by the Resident and clearly documented in the Care Plan. Home Again will obtain a physician's order to be kept on file.
3. The resident or Activated POA must be advised of the risks of bedside rails including the dangers associated with their use prior to implementation. Home Again will provide the FDA Brochure "A Guide to Bed Safety" to the resident and/or Activated POA.
4. The continued use of Bed Rails will be reevaluated for their appropriateness quarterly and as needed.

ELECTRONIC RECORD KEEPING

Policy and Procedure

January 11, 2019

POLICY

It is the policy of Home Again Living to use automated record keeping systems. Home Again will maintain HIPPA compliance, unauthorized usage, and system oversight.

PROCEDURE

Automated record keeping systems will only be used by authorized personnel. The following is expected of each authorized individual per the level of authorizations and user groups:

Med Passer/Resident Assistants/Kitchen/RN Shall:

- Keep all login and passwords confidential
- Use a unique password with a combination of numbers, letters and symbols
- Verify the accuracy of all the information entered into the record
- Protect resident information by blacking out screen or closing computer screen when not in use
- Utilize training and continuing education provided

Super Users/System Administrators Shall:

- Identify personnel who have access and to what extent.
- Provide training
- Keep all login and passwords confidential
- Maintain processes for documentation scanned into the record
- Oversee the records for false, questionable or incomplete information
- Verify the accuracy of all the information entered into the record.
- Provide BAL surveyor with requested information within 2 hours of that request

If it is found an authorized individual has:

- Disclosed their password
- Falsified documentation
- Deleted documentation
- Allowed others to see information that would violate HIPPA

Any staff that is noted to be in violation of this policy under any circumstance can result in the following depending on the severity of the violation.

- Re-education
- Revocation of authorizations and user groups
- Verbal/Written Warnings
- Termination.

FACILITY RULES



March 16, 2011

POLICY

It is the policy of Home Again, both staff and Residents, to follow the Facility Rules listed below.

- Each Resident will treat others with respect.
- Respect each other's privacy; knock on doors before entering and do not go into other Residents rooms uninvited.
- Notify staff when you are leaving the Facility and when you plan on returning.
- This is a NON-SMOKING FACILITY INDOORS. An outside area is designated for smoking; please ask management for location and smoking policy.
- All personal items are to be kept in the Resident's room.
- Housing of pets is not permitted, visiting of pets is permitted but please check with Management regarding other Residents possible allergies or fears. A copy of vaccines, shots, and vet records may be requested from Management.
- No labor shall be required of the Resident unless for therapeutic reasons.
- All common areas are public areas; they are for the use of all Residents and visitors.
- Appropriate street clothing in the common area is to be worn.
- Please be prompt to meals at the designated times, meals are to be eaten in the dining room at 8:00am, 12:00pm, and 5:00pm.
- Residents must have a doctor's order to consume alcoholic beverages in the Facility. Alcohol will be stored by staff and monitored.
- We encourage visits from family and friends. Please be considerate of times.
- Residents and visitors are to keep noise at a minimal so not to interfere with other Residents during resting, bedtimes, or activities.
- Candles, extension cords, and space heaters are not allowed in the Facility.

FOOD PROGRAM

Policy and Procedure

October 30, 2017

BUDGET

The budget consists of inventory/food, supplies, and equipment. Monthly Budget to be set annually by Management. Kitchen Staff will fill out Monthly Food Budget Tracking Log (see attached) and submit to Management at the end of each month.

Inventory

- Kitchen Staff will review the Inventory Guide (see attached) each week prior to each order. All food, beverages, kitchen supplies, etc. will be listed on this guide. This guides will be attached to the Monthly Budget Tracking Log and submitted at the end of each month.
- All state and federal regulation regarding food storage shall be followed at all times.

Equipment and Supplies

- Kitchen staff may purchase items up to \$50 without Management approval by notifying Management after purchase. Anything that costs more than \$50 needs prior approval and should be requested to Management via email.

Ordering

- Food orders will be done on a weekly basis through our food vendor. No more than 2 trips to the grocery store each week is needed.
- Once a month a larger food warehouse food purchase will be done.

Food waste

- It is the goal of the kitchen staff to meet and prepare food only for the currently Resident census and dietary needs. Excessive leftovers being disposed of should be taken notice of for future reference. Management will periodically review amount of food waste and left overs.

Employee Eating/Drinking of Facility Inventory

- No staff may consume food or beverages purchased or prepared by Home Again without Management approval. Kitchen staff should not serve food or drinks to employees without prior approval. Food services are for Residents only.
 - Exceptions to this rule: Coffee and water are available for staff consumption at no cost.
 - Staff working on holidays (see employee handbook) are able to eat meals that is served on their shift.

FOOD PROGRAM

MENU

To manage our inventory and cost, we will follow a 4-week Menu Rotation. This will allow us to streamline our ordering and have a more set order guide as well as have the ability to budget more accurately. We will use a seasonal approach to menu planning; fall/winter, spring/summer.

KITCHEN APPEARANCE & PRESENTATION

The cleanliness of the food service area is extremely important to the health and overall wellness of our Residents. All state and federal regulation shall be followed at all times.

Cleaning / Maintenance

- The Kitchen staff is responsible for insuring that the overall cleanliness of the kitchen and dining room is maintained at all times.
- A daily kitchen log (see attached) will be kept and followed at all times to help guide the cleaning of the food service areas. However at times staff will need to address items not on the log when they arise.

FOOD SERVICE & PRESENTATION

The quality of the food service program is an important part of the service we provide Residents. The proper presentation and appearance of the food service area along with the service and quality meals provided by staff make for a successful food service program.

- All meals shall be prepared for serving at the scheduled meal times and at a quality consistent with a restaurant.
- Staff Appearance during food service.
 - All staff preparing or serving food shall follow all state and federal regulations at all times.
 - All staff preparing or serving food shall wear an apron and gloves; and a hair nets when necessary.
- Staff shall place food on plates in manor consistent with a restaurant quality presentation.
- Staff shall serve meals to Residents in manor consistent with a restaurant quality wait staff and shall stay in the dining area during meal times to meet the needs of Residents.

HUMIDIFIERS

Policy and Procedure

October 30, 2017

POLICY

It is the policy of Home Again Assisted Living to not to allow all types and kinds of humidifiers in any of Home Again Assisted Living Communities. Upon review, humidifiers have a negative effect on the fire and sprinkler system; damage to the sprinkler heads occur and cause the fire system to be triggered.

PROCEDURE

If a humidifier is found in any of Home Again Assisted Living Communities, Residents or families will be called and asked to remove the humidifier.

MEAL TIME

Policy and Procedure

December 5, 2011

POLICY

It is the policy of Home Again to provide meals to Resident's at 8:00am, 12:00pm, and 5:00pm. The Cook and RA staff is to work together to make setup, meal time, and clean up a smooth process. All staff, both Cook and RA's should be in the kitchen, working together to from before meal time to after cleanup.

PROCEDURE

Actual Procedure when Cook is preparing meals:

- RA to set tables 30 minutes before meal time.
- About 15 minutes before meal time, all RA's should start to gather individuals and assist to dining room.
- RA's are to offer beverages to Residents
- Cook will have meal ready at designated time, and will dish/serve plates to the pass though. Cook will identify to RA whose plate it is depending on dietary requirements.
- RA's are to serve plates to Residents.
- After meal is served, Cook will prepare and dish up desserts and put on cart or pass though for RA's.
- During meal, RA's are to check if Resident's need anything (refill, condiments, etc.)
- During meal, pass medications
- RA's to pick up dirty dishes as Residents finish meal, discard uneaten food, and put dishes to soak in bin.
- Cook is to be cleaning kitchen, doing dishes as RA's are bringing dirty dishes in.
- After Resident's are finished with meal and are leaving dining room, RA's are to help, when necessary, back to rooms or wherever they want to go.
- RA's not assisting Resident's should be wiping tables down/ pass though, cleaning coffee makers, sweeping floor, restocking tables.
- Both Cook and RA's are to remain in the kitchen/dining room area until cleanup is done.

MEAL TIME

Actual Procedure when RA is preparing meals:

- At start of shift, RA's are to review meal and prep-time and plan accordingly so that meal is served on time.
- RA to set tables 30 minutes before meal time.
- About 15 minutes before meal time, RA's should start to gather individuals and assist to dining room.
- RA's are to offer beverages to Residents
- RA's should have meal ready at designated time, and will dish/serve plates to the pass though. Make sure to know who gets special diets and serve accordingly.
- While one RA is dishing meals, the other RA's are to serve plates to Residents.
- After meal is served, RA will prepare and dish up desserts and put on cart or pass though for other RA's.
- During meal, RA's are to check if Resident's need anything (refill, condiments, etc.)
- During meal, pass medications
- RA's to pick up dirty dishes as Residents finish meal, discard uneaten food, and put dishes to soak in bin.
- RA's are to work together to clean up kitchen, do dishes, wipe tables down, restock tables, sweep floor, clean coffee pots.
- After Resident's are finished with meal and are leaving dining room, RA's are to help, when necessary, back to rooms or wherever they want to go.
- RA's are to remain in the kitchen/dining room area until cleanup is done.

MONITORING AND SEARCHES



January 8, 2019

All company property is subject to monitoring and review at all times. This includes, but is not limited to, desks, lockers, computers, email files. Reasons for searches and reviews include, but are not limited to, personal abuse of company property, theft investigation, and improper disclosure of confidential information.

Home Again retains the right to conduct searches at any time. This includes the right to search individual computers or files, even if protected by a password. Any employee that attempts to obtain or alter a password for the purposes of accessing restricted files will be subject to disciplinary action up to and including termination.

ON-CALL PHONE

Policy and Procedure

January 7, 2019

POLICY

On-Call is meant to be a resource for staff that are working that have questions, concerns, or staffing issues. When you are on-call be prepared to receive calls from all facilities and help the staff work through various needs. Being on-call may mean you need to spend time working either to help with an issue, to find coverage for a shift, or to physically go in. It is vitally important that the person that is on-call is helpful, positive, and friendly.

It is very important that we remember that the staff working are calling because they need guidance. They are not calling to bother you, they need something, and on-call is there for that very reason. We want all staff to feel supported so that they can provide the best care possible. We have guidelines for the staff on when to call the on-call phone. If they call for a reason that is not appropriate, answer the question and then let the Community Director know that they need to re-educate on when to call the on-call phone number.

PROCEDURE

We want to be consistent in the message we are giving staff when they call. In order to do that, Home Again Assisted Living has created a tutorial video to assist with all situations that may occur while on call.

PEST CONTROL

Policy and Procedure

April 10, 2011

POLICY

It is the policy of Home Again to monitor facility for possible insects, rodents, and vermin.

PROCEDURE

Management will use the services of a professional pest control company to provide monthly examination of facility. In the event the pest control company identifies an issue with insects, rodents, or vermin, the appropriate action will be taken to rid facility of issue.

PHONE OUTAGE

Policy and Procedure

February 2, 2015

POLICY

It is the policy of Home Again to have a backup plan in place for any time the facility phone or fax number is not working.

PROCEDURE

When the issue is discovered, Manager or Assistant Manager will contact phone/fax provider to report the issue. At the same time as reporting issue, Management will request that the phones be forwarded to the on-call cell phone until phones are repaired. If the fax number is not working, Management will forward to the designated fax number.

When facility phones are forwarded to the on-call cell phone, Management will be responsible for answering the phone. When Management is out of the building, the medication person will be responsible for answering and keeping the on-call cell phone on them at all times.

Management will be responsible for checking voicemail throughout the duration of phone outage and returning calls as needed.

Once phone/fax is working again Management will unforward the phone line and we will operate as normal.

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RESIDENT & EMPLOYEE BONUS PROGRAM

Policy and Procedure

April 24,2024

POLICY

Resident Referral

It is the policy of Home Again to have a Resident referral bonus program to thank current Residents and staff for referring new Residents to Home Again.

Employee Referral

It is the policy of Home Again Assisted Living to have a Staff Referral Bonus program in order to hire high quality staff to work for Home Again Assisted Living.

Sign On Bonus

It is the policy of Home Again Assisted Living to offer sign on bonuses to qualifying and quality staff.

Miscellaneous Bonus

It is the policy of Home Again Assisted Living to offer miscellaneous bonuses to employees who qualify.

PROCEDURE

Resident Referral*

The new Resident that was referred must be living Home Again at least 30 days before referral bonus will be paid. The new Resident or family must clearly identify the name of the referring Resident or Staff prior to moving in for a bonus to be earned. The amount of the referral bonus is \$500.00 (unless otherwise outlined). Once a referral has been made and the new Resident has moved into the facility, Management will notify Human Resources with the following information:

- Name of new Resident
- Name of existing Resident or Staff member that made referral
- All resident referrals amount by existing residents will be applied as a rent credit
- For a Staff member referral, the bonus amount will be paid on the payroll following eligibility for bonus.

*A new resident that was referred by an outside referral agency or that is member of a managed care organization is not eligible as a referral.

RESIDENT & EMPLOYEE BONUS PROGRAM

Staff Referral

When a staff member refers an individual to work Home Again Assisted Living and the individual is hired, the referring staff member will receive a \$500.00 bonus (unless otherwise outlined). The newly hired individual must be employed and in good employment standing, which means no corrective actions or disciplinary notices. This is based entirely on Human Resources discretion. At the end of the 90 day* probationary period, \$250.00 will be paid to referring employee.

After 6 months** if the referred employee is in good employment standing, the remainder of the bonus, \$250.00 will be paid to the referring employee.

If the newly hired or referring employee leaves, provides notice, is terminated, or receives any form of disciplinary action due to poor work performance, the referring employee is not eligible for the bonus.

The bonus amount will be paid on the payroll following their eligibility for the bonus.

*If the employee does not work 240 hours within their first 90 days of employment, based on their employment status and at management discretion they may be ineligible for the partial and/or upcoming 180-day bonus payout.

**If the employee does not work 520 hours within their first 180 days of employment, based on their employment status and at management discretion they may be ineligible for the partial and/or upcoming 180-day bonus payout.

Sign On Bonus

Qualifying staff will have a sign-on bonus outlined in the offer letter from Home Again at time of hire. Any sign-on bonus will be provided in writing for both staff and management to sign.

All additional pay outlined above will be paid as a bonus on the staff members paycheck and are subject to all normal taxes and withholdings. The payment of such a bonus is subject to the staff member following all Home Again policies and procedures and having no disciplinary action during such period. These additional payments to employees are subject to change or denial at the sole discretion of management.

RESIDENT & EMPLOYEE BONUS PROGRAM

Miscellaneous Bonus

This policy outlines the guidelines and procedures for awarding miscellaneous bonuses to employees of Home Again who demonstrate exceptional performance, contribute significantly to resident care and satisfaction, or go above and beyond their regular duties within the assisted living and memory care facility. This applies to all employees of Home Again. Miscellaneous bonuses are identified (but not limited to) shift incentives, golden ticket reimbursement and other awarded or offered bonuses.

Approval Process:

- Miscellaneous bonuses will be reviewed and approved by Human Resources/ Management.
- The decision to award a bonus will be based on the merit of the nomination.
- If an employee has any attendance or disciplinary concerns within the pay period that a miscellaneous bonus is given, the employee will no longer receive the bonus, even if the bonus is specific to a different shift. Please be aware that any pending bonus incentives will not be paid if an employee abandons their job before the payroll process is complete. It is essential to fulfill all scheduled shifts and complete the payroll process to be eligible for any bonus incentives.

Bonus Amount and Frequency

- The amount of the bonus may vary depending on the nature of the achievement or contribution and the available budget.
- Bonuses may be awarded on a one-time basis or as part of a recurring recognition program, depending on the circumstances and management discretion.

Taxation and Deductions

- Miscellaneous bonuses may be subject to applicable taxes and deductions as required by law.

SMOKING



January 7, 2019

POLICY

It is the policy of Home Again Assisted Living that we do not allow smoking inside facility. This includes e-cigarettes, vaporizers, etc. Any form of smoking is simply not allowed due to health and safety of all within building. All Home Again Assisted Living communities are smoke free buildings. Smoking outside of the facility may be allowed depending on the Resident's ability to do so safely. Staff may smoke on designated breaks and in designated areas only.

Resident:

For any Resident that would like to smoke, a smoking assessment must be completed in order to assess the Resident's ability to smoke and do so safely. If a Resident is found unable to do so, an agreed upon plan will be determined so that staff can assist the Resident to ensure safety of building and all within.

Staff:

Individuals may smoke outside of the facility at the designated smoking area. If you do not know where this area is, please communicate with your Community Director.

Cigarette butts should be properly put out and disposed of in designated container.

Smoking is only allowed on designated breaks (see the Breaks section in the Employee Handbook).

Excessive smoking, going out more than allotted breaks, is subject to disciplinary action based on Management discretion.

TRANSPORTATION

Policy and Procedure

January 1, 2019

POLICY

It is the policy of Home Again to assist and help coordinate transportation for Residents.

It is the policy of Home Again Assisted Living that any employee who drives a company owned or leased vehicle or who transports residents or other employees on company business time must;

- Be on the company approved driver list
- Have a valid driver's license
- Have a current driving record report on file in the Business Office
- Have a signed acknowledgement of the driving policy on file in the Business Office
- Must be using the vehicle for company business

*All drivers are subject to a check of their driving record at any time. If involved in an accident you may be subject to a record check and/or a drug/alcohol test.

PROCEDURE

Residents will be transported by family members, friends, or legal representative for medical appointments when at all possible. If Resident is part of a Managed Care program, facility is to transport individuals as it is covered within their provided rate.

If the above cannot be arranged, staff will attempt to contact public transportation such as local taxi cab, medical transport vans at the Resident's expenses.

If the above cannot be arranged, Home Again's transportation may be used; at a pre-determined rate at the Resident's expense based on the Admission or Risk Assessment Agreement. This is contingent on staff being available to provide care for remaining Residents at facility. These rides will be available on select days of the business week pending which community the Resident resides. Specific days are set up for each location. Residents may schedule appointments on only these dates. They may work with the Community Director or Medical Manager to schedule.

Drivers operating company vehicles on company business are covered by the company's liability insurance, **but if you do not comply with the Company driving policy you may not be protected under the Company's insurance.**

TRANSPORTATION

The driver and all passengers must always wear seat belts when the vehicle is in motion. A driver's failure to communicate and enforce this policy may result in the driver's loss of indemnification by the company's insurers and from suits arising from injured passengers.

Prohibited uses in the Vehicle while on Company Business

- Smoking/Tobacco Use
- Drinking of Alcohol
- Talking/texting on cell phone /using any hand-held device while driving
- Animals in the vehicles
- Radar detector

Driving Privately Owned Vehicles

Employees using their own vehicles on company business will be required to meet the requirements listed above and should be aware of the following:

- Your insurance coverage is primary, and your liability insurance coverage must have a minimum \$100,000 / \$300,000 liability.
- The company liability is secondary and may or may not cover losses in excess of the limits of your policy.
- Mileage: In accordance with IRS guidelines, mileage will be reimbursed at the published rate per mile for use or personal car for company related travel **if the travel is approved by the employee's manager**. Reimbursement for providing resident transportation must be on the approved form and submitted to manager for payment.

Revocation of Driving Privileges

Any employee who has obtained the following number of driver's license points or driving arrest will be prohibited from driving on company business:

- Six driver's license points
- Alcohol/drug related arrest / limited driving privilege
- Careless and Reckless arrest / conviction

When applicable, staff may go into the building where appointment is scheduled, stay with resident in waiting room, when resident is called into appointment, and staff is to remain in the waiting room unless resident asks for staff to accompany them into appointment. This will be an additional cost.

Staff is to return resident directly back to facility after completion of appointment.

VIOLENCE AND WEAPONS

Policy

January 8, 2019

Home Again takes threats of violence extremely seriously. Any act or threat of violence by or against any employee, Resident, Resident guest, supplier, partner, or visitor is strictly prohibited. This applies to all company employees on or off company property.

Any use or possession of weapons, whether illegal or not, is prohibited on company property, or while on complaint business. This includes knives, guns, martial arts weapons, or any other object that can be used as a weapon. Any employee caught possession a weapon will be disciplined up to termination.

Home Again

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Emergency

DISASTER READINESS AND TOTAL EVACUATION

Policy and Procedure

November 10, 2017

POLICY

It is the policy of Home Again to have regular drills related to disaster readiness and an organized plan and process for a total evacuation of facility. For fire drill and evacuation, please see Fire Drill and Evacuation Policy and Procedure.

PROCEDURE

Plan for Drills and Postings

- Semi-annual drills will be conducted and documented. This could be tornado, flooding, gas leak, etc.;
- One drill will be conducted annually during simulated sleeping hours;
- Resident evacuation assessments will be done on admission within 72 hours, change of condition, and/or annually;
- Exit diagrams shall be posted in facility, in a conspicuous place where it can be seen by Residents and staff, the diagram shall identify all exit routes;
- Staff will be made aware of any Resident who cannot be safely evacuated based on assessment; staff will instruct Resident to stay in room and will alert emergency personnel upon arrival.
- KNOX Box (locked box that has master facility key) is located outside front door; fire and police have the only key to KNOX box.

Plan for Evacuation

In the event the facility needs to be completely evacuated and Residents relocated, it has been set up to call and relocate to:

Columbus

Faith Lutheran Church

20 Faith Drive

Columbus WI 53925

Telephone: 920.623.3610

Cambridge

Faith Lutheran Church

20 Faith Drive

Columbus WI 53925

Telephone: 920.623.3610

Waunakee

First Presbyterian Church

5763 Co Rd Q

Waunakee, WI 53597

Telephone: 608-849-4625

If there is not sufficient room at the allocated locations, Residents will be placed in fellow Home Again Communities

DISASTER READINESS AND TOTAL EVACUATION

Staff will use facility bus, staff vehicles, and family member transportation to relocate Residents.

Food will be brought in via a service and/ or food will be bought and prepared on site if kitchen is available. This will depend on the amount of time Residents will be at temporary location.

Medications and charts will be transported to the above location; if medications were not removed, Management will contact Hometown Pharmacy for their assistance.

Families will be contacted and a decision on where Residents will continue to be housed made based on time away from the facility and reason for evacuation.

Plan for Tornado Watch

A Tornado Watch means weather conditions are such that a tornado is possible. In the event of a Tornado Watch, staff should follow the below procedure:

- Keep weather radio on and within hearing of staff;
- Close all drapes, windows, and doors in the facility;
- Remain calm and let Residents know of the Tornado Watch and that further actions will be needed if a Tornado Warning is issued.

Plan for Tornado Warning

A Tornado Warning means a tornado has been spotted and immediate action must be taken. In the event of a Tornado Watch, staff should follow the below procedure:

- Keep weather radio on and within hearing of staff;
- Close all drapes, windows, and doors in the facility;
- Gather pillows, blankets, your cellular phone, facility telephone, and weather radio;
- Take Residents and staff to storm shelter

In the event there is damage to the facility, staff should follow the process listed under Plan for Evacuation.

Plan for Gas Leak or Power Outage

In the event of a gas leak or power outage staff should follow the below procedure:

- Contact local utility to find out cause and extent of outage or leak;
- If evacuation is recommended, staff is to follow the process listed under Plan for Evacuation;
- If evacuation is not required contact Manager to determine best interim solution.

DISASTER READINESS AND TOTAL EVACUATION

Plan for Bomb Threat

In the event of a bomb threat staff should follow the below procedure:

- Call local emergency 911;
- Facility is to be evacuated immediately using the process listed under Plan for Evacuation;
- Call Manager;
- Residents will not return to facility until Manager is notified by the emergency personnel investigating threat it is safe.

Plan for Flood

If facility is in a flooded area and facility needs to be evacuated, staff should follow the process listed under Plan for Evacuation.

If temporary location is flooded, with the help of the American Red Cross and local emergency services, Residents will be moved to a safe location. Families to be notified and arrangements will be made with other health care facilities to assist in temporary relocation. Every effort will be made to gather medications and Resident charts to help with continuity of care of Residents.

Plan for Resident Refusal of Drill

In the event that a Resident refuses to participate in the drill, staff is to follow the below procedure:

- Encourage Resident to participate in drill with staff and other Residents;
- If emergency personnel are participating in drill have them encourage Resident to participate;
- Procedure with scheduled drill
- Document Resident refusal in appropriate locations.

After drill is completed:

- Express the importance of participating in drills to Resident. If Resident still refuses to participate;
- Call immediate family member and/or close friend who may have better means of getting the point across as to why participation in drill is important. Ask them to talk with Resident over phone or have them come to the facility if able;
- Document Resident refusal in appropriate locations.

Plan for Resident Refusal of Evacuation

In the event that a Resident refuses to evacuate, staff is to follow the below procedure:

- Encourage Resident to evacuate with other Residents;
- If Resident continues to refuse, one staff should remain with Resident until emergency personnel arrives. Staff is only to remain if it is safe to do so, it is not Home Again's expectation that staff risk their own safe evacuation;
- Inform emergency personnel that a Resident is still in building and provide any additional information.

ELEVATOR

Policy and Procedure

September 15, 2016

POLICY

It is the policy of Home Again Assisted Living to have a plan in place in case the elevator becomes out of service.

PROCEDURE

In the event of the elevator being out of service, staff will follow the below procedure:

- Contact our elevators service company and have someone come and assess as soon as possible.
- Notify management or on-call.
- Inform all other staff members and residents that the elevator is out of order.
- Assist all residents to meals and activities.

EMERGENCY OFFICE KEY

Policy and Procedure

April 12, 2011

POLICY

It is the policy of Home Again to make available to staff a master key when management is not on-site, that opens manager's office door.

PROCEDURE

In the event that staff on duty need to get into managers office while manager is not there and door is locked:

1. Call Manager or on-call emergency contact – phone numbers are on emergency call list in employee charting room
2. Manager or on-call emergency contact will give location of hidden key in the facility for staff to gain entrance.
3. Any reason for staff to gain entry into managers office will be of emergency means and management should have been called anyway (e.g. fire, access to locked chart information, employee files).
4. In the event of staff losing employee key ring or main door and/or other inside locked doors in facility, staff shall call manager for location of hidden key.

EXPOSURE CONTROL

Policy and Procedure

May 24, 2018

Home Again Assisted Living is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this goal, the following exposure control plan (ECP) is provided to eliminate or minimize occupational exposure to bloodborne pathogens in accordance with OSHA standard 29 CFR 1910.1030, "Occupational Exposure to Bloodborne Pathogens." The ECP is a key document to assist our organization in implementing and ensuring compliance with the standard, thereby protecting our employees.

This ECP includes:

- Determination of employee exposure
- Implementation of various methods of exposure control, including: Universal precautions
Engineering and work practice controls Personal protective equipment Housekeeping
- Hepatitis B vaccination
- Post-exposure evaluation and follow-up
- Communication of hazards to employees and training
- Recordkeeping
- Procedures for evaluating circumstances surrounding exposure incidents Implementation methods for these elements of the standard are discussed in the subsequent pages of this ECP.

The following is a list of job classifications in which some employees at our establishment have occupational exposure.

- Medical Director
- Medical Manager
- Community Director
- Resident Assistant
- Housekeeper
- Kitchen Staff

EXPOSURE CONTROL

METHODS OF IMPLEMENTATION AND CONTROL

Universal Precautions: All employees will utilize universal precautions. Exposure Control Plan Employees covered by the bloodborne pathogens standard receive an explanation of this ECP during their initial training session. It will also be reviewed in their annual refresher training. All employees can review this plan at any time during their work, this policy is on page 28.

Universal Standard Precautions:

- Wash hands immediately or as soon as feasible after removing gloves or another PPE.
- Remove PPE after it becomes contaminated and before leaving the work area.
- Used PPE may be disposed of in (List appropriate containers for storage, laundering, decontamination, or disposal.)
- Wear appropriate gloves when it is reasonably anticipated that there may be hand contact with blood or OPIM, and when handling or touching contaminated items or surfaces; replace gloves if torn, punctured or contaminated, or if their ability to function as a barrier is compromised.
- Utility gloves may be decontaminated for reuse if their integrity is not compromised; discard utility gloves if they show signs of cracking, peeling, tearing, puncturing, or deterioration.
- Never wash or decontaminate disposable gloves for reuse.
- Wear appropriate face and eye protection when splashes, sprays, spatters, or droplets of blood or OPIM pose a hazard to the eye, nose, or mouth.
- Remove immediately or as soon as feasible any garment contaminated by blood or OPIM, in such a way as to avoid contact with the outer surface.
- Contaminated sharps are discarded immediately or as soon as possible in containers that are closable, puncture-resistant, leak proof on sides and bottoms, and appropriately labeled.
- Sharps disposal containers are available the medication carts or in the medication chart room. Bins and pails (e.g., wash or emesis basins) are cleaned and decontaminated as soon as feasible after visible contamination.
- Broken glassware that may be contaminated is only picked up using mechanical means, such as a brush and dustpan.

EXPOSURE CONTROL

POST-EXPOSURE EVALUATION AND FOLLOW-UP

Should an exposure incident occur, contact the Medical Manager at the current location of exposure, or the On-Call Manager.

Following initial first aid (clean the wound, flush eyes or other mucous membrane, etc.), the following activities will be performed by Medical Manager or On-Call Manager:

- Document the routes of exposure and how the exposure occurred.
- Identify and document the source individual
- Send the individual to the closest hospital for testing and laboratory needs
- Decide to have the source individual tested as soon as possible to determine HIV, HCV, and HBV infectivity; document that the source individual's test results were conveyed to the employee's health care provider.
 - If the source individual is already known to be HIV, HCV and/or HBV positive, new testing need not be performed.

Assure that the exposed employee is provided with the source individual's test results and with information about applicable disclosure laws and regulations concerning the identity and infectious status of the source individual (e.g., laws protecting confidentiality).

ADMINISTRATION OF POST-EXPOSURE EVALUATION & FOLLOW-UP

The Medical Director and Medical Manager will investigate and document the exposure using the following as guidelines.

- a description of the employee's job duties relevant to the exposure incident
- route(s) of exposure
- circumstances of exposure
- if possible, results of the source individual's blood test

The investigation report will be sent to the Human Resources department for reporting and filing.

PROCEDURES FOR EVALUATING THE CIRCUMSTANCES SURROUNDING AN EXPOSURE INCIDENT

The Medical Director and Medical Manager will review the circumstances of all exposure incidents to determine if could have been prevented or if changes to any current processes need to be made.

EMPLOYEE TRAINING All employees who have occupational exposure to bloodborne pathogens receive initial and annual training conducted by each community as part of our yearly Standard Precautions training program.

FIRE DRILL AND EVACUATION

Policy and Procedure

October 16, 2018

POLICY

It is the policy of Home Again to have regular drills related to fire evacuation as well as an organized plan and process for a total evacuation of facility.

PROCEDURE

Plan for Fire Related Drills, Postings, and Inspections:

- Quarterly fire drills will be conducted and documented, alternating on all three shifts;
- One fire drill will be conducted annually during simulated sleeping hours;
- Resident evacuation assessments will be done upon admission and within 72 hours, change of condition, and/or annually;
- Fire inspections on sprinkler system, smoke detectors, and heat detectors as regulated by DHS 83;
- Alarms will automatically detect a fire and system will automatically call emergency responders.
- Exit diagrams shall be posted in facility, in a conspicuous place where it can be seen by Residents and staff, the diagram shall identify all exit routes;
- Staff will be made aware of any Resident who cannot be safely evacuated based upon assessment. Staff will instruct Resident to stay in room and will alert fire department upon arrival.
- KNOX Box (locked box that has master facility key) is located outside front door; fire and police have only key to KNOX box.

Plan for Fire and Evacuation:

If staff comes upon a fire in a Resident room or area, or the facility alarms sound staff is to follow the below procedure:

- Staff will remove Residents from room or area where fire is (location will be displayed on alarm system);
- Close door(s) to keep fire contained; close fire doors in hallway
- Pull fire alarm if alarm is not already sounding;
- Go to each Resident room and all common areas to alert/assist Residents from building;
- If Resident will not leave room, place garbage bin in front of closed door to indicate to emergency personnel assistance is needed.
- Assist in evacuation of Residents to safe outdoor area away from building;

FIRE DRILL AND EVACUATION

- Security Management Company will automatically call 911 when alarm sounds.
- Residents to meet in front of parking lot, near the grass.
- Take count of Residents;
- Get medication cart and charts to safe outdoor area away from building if safely possible;
- Meet fire department and give any information about fire and if any Residents are still in building;
- Once staff and Residents are safe and fire department has arrived call Management.

If a staff member feels they can put out a small fire, e.g. wastebasket fire using the fire extinguishers available they may, but it is not an expectation. It is more important to get Residents and staff out of the facility safely and wait for fire department and rescue services to arrive.

Plan for Resident Refusal of Drill:

In the event that a Resident refuses to participate in the fire drill, staff is to follow the below procedure:

- Encourage Resident to participate in drill with staff and other Residents;
- If emergency personnel are participating in drill have them encourage Resident to participate;
- Procedure with scheduled drill
- Document Resident refusal in appropriate locations.

After drill is completed:

- Express the importance of participating in drills to Resident. If Resident still refuses to participate;
- Call immediate family member and/or close friend who may have better means of getting the point across as to why participation in drill is important. Ask them to talk with Resident over phone or have them come to the facility if able;
- Document Resident refusal in appropriate locations.

FIRE DRILL AND EVACUATION

Plan for Resident Refusal of Evacuation:

In the event that a Resident refuses to evacuate in the event of an actual fire, staff is to follow the below procedure:

- Encourage Resident to evacuate with other Residents;
- If Resident continues to refuse, one staff should remain with Resident until emergency or fire department arrives. Staff is only to remain if it is safe to do so, it is not Home Again's expectation that staff risk their own safe evacuation;
- If staff needs to leave Resident to evacuate safely, shut door and put garbage bin in front of door.
- Inform fire department of Resident still in building and provide any additional information.

Plan for Total Evacuation of Building:

In the event the facility needs to be completely evacuated and Residents relocated, it has been set up to call and relocate to:

Columbus

Faith Lutheran Church
20 Faith Drive
Columbus WI 53925
Telephone: 920.623.3610

Cambridge

Faith Lutheran Church
20 Faith Drive
Columbus WI 53925
Telephone: 920.623.3610

Waunakee

First Presbyterian Church
5763 Co Rd Q
Waunakee, WI 53597
Telephone: 608-849-4625

If there is not sufficient room at the allocated locations, Residents will be relocated to fellow communities

Staff will use facility bus, staff vehicles, and family member transportation to relocate Residents.

Food will be brought in via a service and/ or food will be bought and prepared on site if kitchen is available. This will depend on the amount of time Residents will be at temporary location.

Medications and charts will be transported to the above location; if medications were not removed, Management will contact O'Connell's Pharmacy for their assistance.

Families will be contacted and a decision on where Residents will continue to be housed made based on time away from the facility and reason for evacuation.

FIRE DRILL AND EVACUATION

INTERNAL PROCESS ONLY

Per our regulations, we are required to hold quarterly fire drills and semi annual tornado drills. Part of that process is that we document each drill both in the log that is kept in the Community Maintenance Building Binder and for fire drills we also document in the individual resident charts.

Per regulation 83.47(2):

(d) Fire drills.

1. Fire evacuation drills shall be conducted at least quarterly with both employees and residents. Drills shall be limited to the employees scheduled to work at that time. Documentation shall include the date and time of the drill and the CBRF's total evacuation time. The CBRF shall record residents having an evacuation time greater than the time allowed under s. DHS 83.35 (5) and the type of assistance needed for evacuation. Fire evacuation drills may be announced in advance.
2. At least one fire evacuation drill shall be held annually that simulates the conditions during usual sleeping hours. Fire evacuation drills may be announced in advance. Drills shall be limited to the employees scheduled to work during the residents' normal sleeping hours.

(e) Other evacuation drills. Tornado, flooding, or other emergency or disaster evacuation drills shall be conducted at least semi-annually.

The following is the schedule I want every community to follow effective immediately.

Fire drills will be done:

January 7 at 11:45 am
April 8 at 11:45 am
July 15 at 11:45 am
November 12 at 6 am (night simulated)

Tornado drills will be done:

May 13 at 11:30 am
October 14 at 11:30 am

In addition to the Drill log (see attached for both logs) we also must update the Resident Evacuation Assessment in each Residents Chart. It will need to include the following:

- Date and time of drill
- If it was a night simulated one
- If they evacuated with a staff member or independent
- If they are a point of rescue

I have saved the attached forms in the Admin drive under:

G:\Home Again Assisted Living Management Drive\Facility-Building Maintenance\State Req Form

HEALTH/MEDICAL EMERGENCY

Policy and Procedure

December 26, 2017

POLICY

It is the policy of Home Again to respond to medical emergencies, serious illness or accidents in a clinical, efficient, and calm manner. However, it is in fact against company policy for any staff to initiate cardiopulmonary resuscitation ("CPR") in an event that a Resident goes into cardiac and/or pulmonary arrest, but to be sure to call 911. As shown in the Resident Agreement signed by Residents of Home Again Communities.

PROCEDURE

If a Resident is found unconscious and/or not breathing complete the following steps:

Remember, staff is not to initiate CPR in any event to a Resident.

Staff #1:

- Assess physical environment to make sure safe for staff and Resident
- Assess Residents condition and need for assistance;
- Immediately dial 911
 - Relay the following information: Resident name and condition, facility address and phone number, your name and job title
 - Follow instructions from emergency medical staff, unless it goes against Resident wishes when known
 - Stay with the Resident until emergency medical staff arrive

Staff #2: Locate Resident chart

- Take copy of facesheet and any Do Not Resuscitate (DNR) paperwork from under the Emergency tab in the chart.
- Make a copy of the medication administration records (MAR).

After emergency medical staff have arrived:

- Notify management
- They will advise you on the remaining actions necessary

HEALTH/MEDICAL EMERGENCY

Hopsice Patients

If DNR, staff is to:

- Assess physical environment to make sure safe for staff and Resident
- Assess Resident's condition and need for assistance;
- Call Hospice
- Stay with the Resident until further direction from Hospice

If full code, Staff #1 is to:

- Assess physical environment to make sure safe for staff and Resident
- Assess Residents condition and need for assistance;
- Immediately dial 911
 - Relay the following information: Resident name and condition, facility address and phone number, your name and job title
 - Follow instructions from emergency medical staff, unless it goes against resident wishes when known
 - Stay with the Resident until emergency medical staff arrive

Staff #2 is to:

- Locate Resident chart.
 - Take copy of facesheet, hospice form, and any DNR paperwork from under the Emergency tab in chart.
 - Make a copy of the MAR.

After emergency medical staff have arrived:

- Notify Management
- They will advise you on the remaining actions necessary

RESIDENT ELOPEMENT DRILL

Policy and Procedure

December 5, 2018

POLICY

It is the policy of Home Again to minimize the possibility of Residents eloping from facility. To prepare for such event, Elopement Drills will be conducted no less than quarterly throughout the year. For the purposes of this procedure, to elope means a Resident leaves the facility premises without staff knowledge, or the whereabouts of a Resident is unknown.

PROCEDURE

Plan for Elopement related drills, postings and evaluations:

- Elopement drills will be conducted quarterly.
- Egress doors, located in memory care only, will automatically detect an open door and sound if code is not entered properly.
- Staff will be made aware of Residents whom are at risk of elopement.
- Walkie talkie usage is enforced to ensure communication for these instances.
- Members of Management will roll play the following parts
 - Missing Resident
 - Police Officer
 - Additional Staff
 - Additional Family

Plan for Elopement and return:

- Resident sign in/out must be checked immediately upon knowledge of potential elopement.
- Immediately thereafter a Resident is suspected of elopement, staff will use walkie talkies to alert other staff using the following statement “Code Silver Room Number ____”.
- All Staff to Meet in suspected residents’ room.
- A search of facility grounds is necessary, staff will initiate a systematic room by room search of all common area rooms and Resident apartments (including bathrooms, stairwells and closets) in the entire community until the Resident is located or until it is determined that the Resident is not physically in the building. Staff will then begin to search the immediate grounds for the missing Resident.

RESIDENT ELOPEMENT DRILL

Possible situations and how to react;

- If Resident is found outside the facility and is becoming a threat to him/herself or others, contact 911. Please stay near or follow the Resident, however, if Resident is harmful, please keep a safe distance.
- All staff must use Facility Phones, Personal Cell Phones and Walkie Talkies to stay in communication with the facility, other staff and Management.
- If Resident is not found in facility or on grounds, staff to contact 911 within 15 minutes of knowing.

Specific Roles include the following:

Med Passer to:

- Alert Management/On Call
- Alert Family/Responsible party
- Assign and direct additional staff duties
- Make copies of Resident Photo

When police arrive, provide them with the following information:

- Picture of Resident;
- Full name with middle initial;
- DOB;
- Last known location;
- What Resident is wearing;
- How long they have been known to be missing;
- Any medical conditions (i.e. diabetes, seizures);

Additional staff members may be called in to help search for Resident.

Community Director to:

- Make proper safeguards for future
- Refer to DHS reporting guidelines, there are different guidelines for RCAC and CBRF as well as if/if not to contact the police.
- Stay in contact with family and Management
- Assess Resident for further elopement risk
- Implement elopement risk interventions
- Provide direction to Resident Assistants via incident report and/or Resident's care plan.

Medical Manager to:

- If Resident is found and returned safely back to the facility, check full set of vitals, skin check and observation/care note is to be completed.

Usage of an Elopement Drill Checklist will be used in each drill. This form must be filled out completely and reviewed with Management.

ELOPEMENT DRILL

Date:		
Facility:		
Time Resident was noticed missing:		
Staff Participants:		
Conducted by:		
Med Passer:		
Needed for Drill		
Police Officer:		
At what time were they called?		
Additional Roles:		
Missing Resident:		
Questions	Yes	No
Did staff use proper verbiage to alert others?		
Were current working employees wearing walkie talkies?		
Did staff Report to designated area?		
Did Staff Make copies of picture of Resident?		
Did staff check the sign in/ out form and resident areas?		
Did all the staff participate in a thorough search of the building and grounds as quickly as possible? Including these areas:		
<input type="checkbox"/> Common areas <input type="checkbox"/> Resident rooms <input type="checkbox"/> Meeting rooms <input type="checkbox"/> Bathrooms <input type="checkbox"/> Dining rooms <input type="checkbox"/> Kitchens <input type="checkbox"/> Stairwells <input type="checkbox"/> Outdoor areas		
Did staff notify Management?		
Did staff notify Family/Responsible party?		
Did staff call in other staff for assistance?		
If resident found and returned did Community Director set up measures to safeguard the resident in the future?		
How long did it take to find missing resident?		
Re-training needed?		
Notes		

Community Director Signature

Date

Home Again

Living. Assisted.



Employee

ATTENDANCE

Policy and Procedure

April 21, 2021

POLICY

It is the policy of Home Again Assisted Living to promote the efficient operation of the company and minimize unscheduled absences. Proper communication with your manager is critical to your employment when potential attendance issues occur.

Punctuality and regular attendance is a crucial responsibility of each employee at Home Again Assisted Living. Any tardiness or absence causes problems for fellow employees and residents in the building. When an employee is absent, others must perform their work, which diminishes the smooth functioning of the community.

Employees are expected to report to work as scheduled, on time and prepared. Employees are also expected to remain at work for their entire work schedule. Late arrival, early departure, or absences from scheduled hours are disruptive and must be avoided.

An employee who fails to report to work without notification to Management for a period of one day or more will be considered to have voluntarily terminated their employment relationship with Home Again Assisted Living.

If you call in on either day of your weekend shift and it is an unexcused absence, you may be subject to work the following weekend.

PROCEDURE

Schedules will be posted using OnShift Scheduling software. Once the schedule is posted the employee is responsible for finding their own coverage if not able to work assigned schedule. Request for weekends off will not be considered, you must find your own coverage for any weekend that you are scheduled. Any changes in the schedule must be submitted by both parties involved in the switch and approved by Home Again Management who will then make the changes on the schedule.

ATTENDANCE

Availability for Work

Employees must be available for work, if there is a change in your work availability status: decreasing hours, notice of absence for health reasons, or resigning, you must give a least a 2-week notice prior to the effective date of change. Not all requests will be approved and it will be determined by Management what is available. Requests for personal leave without pay are considered individually and granted at the discrete of Management. The reason for the request, the employees' length of service, the employees work record and the demands of the individuals' job are examples of the type of factors typically considered in evaluating a request for personal leave of absence. A request for personal leave of absence will be granted only if the employee is not eligible for any other type of leave. An employee may not be on personal leave of absence for more than 2 months in calendar year. If an employee takes a personal leave of absence their hours and shift is not guaranteed upon return.

Absence

Defined as: Absence is the failure of an employee to report for work when the employee is scheduled.

1. Excused absence occurs when the all following criteria are met:
 - The employee finds coverage on own prior to shift starting;
 - The reason is found credible or acceptable by management;
 - Management has approved such time off.
2. Tardiness occurs when an employee is scheduled and they are unable to report to work on time. Management needs to be notified if the employee is going to be late. If the employee is going to be 15 minutes or more late they need to find a replacement and notify management.
3. Unexcused absence occurs when one of the following conditions is met:
 - Coverage was not found prior to start of shift and approved by management
 - Unacceptable reason for missing scheduled hours of work as determined by Management;
 - Management has not pre-approved the scheduled hours off.
- a. If it is necessary for an employee to be absent or late to work because of illness or an emergency, you must find your own replacement for the shift and notify management, unexcused absences need to be reported no later than 8 hours prior to an employees scheduled work hours, EXCEPT in the case of an emergency. An emergency is an unforeseen, often dangerous situation requiring immediate action. If you are unable to call have someone else make the call for you.
- b. If an emergency or illness occurs, you must provide Management with **a written physicians note excusing you from work**. If a written physicians' note is not provided it is then considered to be an unexcused absence. A disciplinary action may then occur.

ATTENDANCE

3. Three occurrences related to unexcused absence may be subject to immediate termination. Disciplinary action will be taken according to the table listed below.

Important Definitions

- **Sufficient notice** – For an excused absence 14 day notice needs to be given. Unexcused absence requires 8 hour notice.
- **Occurrence** – This is when an employee has had an unexcused absence occur whether this be a tardy, leaving early, or missing an entire shift without Management approval. Exceptions to this will only be made by Management on individual basis. The Occurrence period is a calendar year from when first occurrence occurred.

OCCURRENCE	ACTION	DESCRIPTION
1st	Written Warning	
2nd	Final Written Warning or Termination	Final Warning or termination in which employee will be asked to return any company property and will be asked to take their belongings and leave the premise.
3rd	Terminations	Employee will be asked to return any company property and will be asked to take their belongings and leave the premise.

Please also refer to the Mandatory Stay Over Policy and Procedure in regard to shift coverage for the facility.

ATTENDANCE

ATTENDANCE AGREEMENT

Attendance at Home Again is crucial for the care of our residents and to provide support to our team. By signing below, you understand and agree that even ONE unexcused absence (especially during your training period) and, within your first 60 days of employment can result in immediate termination.

If you are unable to come to your shift you must give “sufficient notice”, according to the Home Again Attendance Policy and Procedure “sufficient notice” is defined as:

- 14-day notice needs to be given for an excused absence
- 8-hour notice for an unexcused absence (unless in emergency situations)

The following procedure **MUST** be followed for an absence:

1. Call to Management 8 hours before your scheduled shift.
 - During Business hours (Monday-Friday 8am-4pm) call the Community and speak with a Manager.
 - During NON-Business Hours call On-Call 608-289-0441
2. Begin to look for coverage for your shift, as this is **YOUR** responsibility.
 - Use OnShift
 - Call Community to get phone list
3. If you are experience an illness you **MUST** work with a member of our Medical Staff to determine and assess if your symptoms are substantial enough to keep you from working.
4. If a childcare need arises you **MUST** work your shift or cover your shift and provide documentation to Management. It is critical that our staff remain reliable to care for the needs of our residents.
5. If an emergency arises you **MUST** provide documentation to Management. This can include any supporting documentation such as:
 - Police Reports
 - Medical Excuses

Please sign below to show you understand the importance of the agreement above and that immediate termination can be the result of an unexcused absence during your first 90 days of employment.

Name

Date

Please sign below in agreeance that a member of management as discussed, the above agreement and you understand its importance.

Staff

Management

Date

BACKGROUND CHECKS

Policy and Procedure

March 10, 2011

POLICY

It is the policy of Home Again to conduct appropriate employment, licensure, criminal and caregiver background checks as required by DHS 83.17(1). All checks are conducted in compliance with applicable federal, state, or local laws and regulations.

PROCEDURE

New Hire

- The applicant will complete, sign, and date Home Again's Application for Employment, Criminal Background Disclosure Form, and the Background Information Disclosure (BID) form for caregivers.
- Management will receive completed forms and process the employment and background checks.
- When applicable, Management will view appropriate licensures and certifications on the State of Wisconsin licensure registry. Depending on the position applied, current licensure or certification may not be a disqualifier for employment.
- If results indicate convicted crimes or offenses found in 50.065, Stats, and ch. DHS 12, Appendix A, applicant is not eligible for hire unless the applicant has been approved under the department's rehabilitation process as defined in Ch. DHS12.
- If results indicate any other offenses than what is listed above, Management will determine if applicant is an appropriate hire in the assisted living setting.
- All results will be filed in the applicants personnel file.

Current Employees

- Criminal and caregiver background checks will be conducted every four (4) years for all employees.
- If position requires a license or certification, employee is responsible for getting Management a copy of renewal notice.
- All results will be filed in the employees personnel file.

Any and all convictions are reviewed and may be deemed ineligible for employment.

EMPLOYEE BREAK

Policy and Procedure

November 8, 2017

POLICY

Staff who work a full 8-hour shift will get one 20-minute break, these may be assigned by Management or may be worked out amongst the staff working. Staff working 4 hour shifts or less will be given one (1) 10-minute break. You are paid for the hours you are here, it is called an “on duty” break or meal period. You do not need to clock out. If a Resident needs assistance, you must be available. Or if there is more than one staff member on duty for your area, please be sure only one staff member is taking a break at a specified time. Please see information on the bulletin board in the employee chart room for more information from Wisconsin Department of Workforce.

PROCEDURE

Failure to comply with any of the above will result in a disciplinary action determined by Management.

BULLYING IN THE WORKPLACE

Policy and Procedure

November 10, 2017

POLICY

It is the policy of Home Again Assisted Living to have a zero tolerance of any of bullying or intimidation behaviors of all its employees.

PROCEDURE

Management will investigate all claims of any and all employees who are identified as involved in any sort of bullying behavior. The employee or employees will then be disciplined, up to and including termination.

Home Again Assisted Living defines bullying as repeated inappropriate behavior, either direct or indirect, whether verbal, physical or otherwise, conducted by one or more persons against another or others, at the place of work and/or in the course of employment. Such behavior violates Home Again's Standards of Conduct, which clearly states that all employees will be treated with dignity and respect.

Bullying may be intentional or unintentional. Home Again Assisted Living considers the following types of behavior examples of bullying:

- **Verbal bullying:** Slandering, ridiculing or maligning a person or his or her family; persistent name calling that is hurtful, insulting or humiliating; using a person as butt of jokes; abusive and offensive remarks.
- **Physical bullying:** Pushing, shoving, kicking, poking, tripping, assault or threat of physical assault, damage to a person's work area or property
- **Gesture bullying:** Nonverbal threatening gestures; any physical gesture that can convey threatening messages.
- **Exclusion:** Socially or physically excluding or disregarding a person in work-related activities.

CNA CONTINUING EDUCATION COURSE

Policy and Procedure

January 6, 2023

POLICY

It is the policy of Home Again Assisted Living to offer all qualifying staff the opportunity to take a certified nursing assistant course or to provide course reimbursement to those who complete the course outside of Home Again's partnership with Quality CNA.

PROCEDURE

After course completion, the employee must remain employed with Home Again for a minimum of 1 year and work a minimum of 415 hours within that year, or all the costs for the course that were covered by Home Again will be deducted from the employee's paycheck. If employee does not have a sufficient paycheck to cover the amount to Home Again, they will be required to pay Home Again within 30 days.

- **Option 1:** Home Again Assisted Living will cover up to \$700 in course costs for any CNA program outside of Home Again's partnership with Quality CNA. The total costs may include registration, course, textbooks, and exam fees. Other miscellaneous fees also have the potential of being paid for by Home Again Assisted Living per management discretion. If the amount exceeds \$700 it then becomes the employee's responsibility to cover the remaining costs.
- **Option 2:** Quality CNA will bill Home Again directly for any employee who completes this course and is employed with Home Again.

*If the Employee fails to pass the CNA course, reimbursement will not be provided and the employee will be billed by Home Again (if taken through Quality CNA).

By signing this application, the employee has read and understands the policy and procedure associated with the offering of the certified nursing assistant course.

Name (Print)

Hire Date

Signature

Date

COLLEGE SCHOLARSHIP

Policy and Procedure

June 2, 2021

POLICY

It is the policy of Home Again Assisted Living to offer qualifying staff the opportunity to receive a \$500 or \$250 college scholarship.

PROCEDURE

Any staff member who is enrolled in a college or university is eligible to receive a \$500 or \$250 college scholarship once yearly. If the employee chooses to apply to receive the scholarship they must select two of the following essay questions to answer:

List of Approved Essay Questions:

1. How has Home Again contributed to your future goals?
2. What was one of your most impactful learning experiences medically with Home Again?
3. What was one of your most impactful learning experiences professionally with Home Again?
4. What is one of the biggest challenges that the assisted living industry is currently facing?
How have you experienced this while working for Home Again? Provide suggestions on how you think Home Again can overcome this challenge.

All questions must be answered in depth, with a 500–1,000 word requirement, and submitted to management no later than July 1st. Management will review all essays and select the top two. The first place recipient will receive a \$500 scholarship and the second place recipient will receive a \$250 scholarship.

The selected essay winners will be announced at the staff meeting held in the month of August. The dollar amount of scholarship will be paid directly to the employee's school of choice.

COMMUNICABLE DISEASE SCREENING

Policy and Procedure

April 25, 2018

POLICY

It is the policy of Home Again that each new hire will be screened for communicable diseases upon hire and/or as needed thereafter.

PROCEDURE

Each new employee will be required to obtain a Tuberculin (TB) skin test upon hire.

This includes:

- An initial TB skin test administered by the facility RN, primary care physician, or primary care RN.
- The test will be read within 48–72 hours after administration.
- If the test is positive then the employee will be referred to their primary care physician for further care, in the event that a chest x-ray is necessary, the cost of that x-ray will be covered by employee, Home Again will not cover this cost.

Exceptions to receiving a Tuberculin (TB) skin test:

- Recent chest x-ray
- History of positive TB skin test, resulting in need for annual symptom assessment
- Recent TB blood test
- Recent TB skin test

CONFIDENTIAL INFORMATION/HIPPA



March 21, 2024

Home Again requires that employees do not disclose health information to be confidential by Home Again and requires new employees to sign a confidentiality agreement. Any questions about this should be address to Home Again Management.

The HIPAA Privacy Rule provides federal protections for personal health information held by covered entities and gives patients an array of rights with respect to that information. At the same time, the Privacy Rule is balanced so that it permits the disclosure of personal health information needed for patient care and other important purposes.

The Security Rule specifies a series of administrative, physical, and technical safeguards for covered entities to use to assure the confidentiality, integrity, and availability of electronic protected health information.

HIPAA Tips:

PHI Stands for Protected Health Information of our Residents and:

1. Relates to past, present, or future physical or mental health or condition, or treatment information; or
2. Relates to past, present, or future payments of health care or the Resident's finances; or
3. Is any identifiable information (e.g. name, address, phone number, birth date, death date, social security number, Medicare or Medicaid number.

It is each Home Again Assisted Living staff member's responsibility to protect the privacy and security of Residents PHI (protected health information) and to comply with Home Again Assisted Living's policy and procedure regarding PHI and confidentiality.

Please be vigilant about immediately retrieving PHI from the fax/printer/copy machine.

Please remember it is unlawful for any staff to access Resident information for which we have no need. Please only access Resident information that directly relates to your position and responsibility.

CONFLICTS OF INTEREST

Policy

January 8, 2019

Do not accept gifts, food, or any kind of money from the Resident and/or Resident Family/Friends. Do not ask Resident for any items that the Resident owns. This is grounds for immediate termination and reporting to the local authorities. If anyone approaches you with money or gift you must notify Management immediately.

CONSENT – TEXT/PHOTOGRAPHY



April 3, 2024

CONSENT TO PHOTOGRAPHY

Obtaining employee consent to photograph or record them in the workplace within Home Again Assisted Living. It aims to ensure that employees' privacy and dignity are respected while allowing for appropriate use of photography and recordings for business purposes.

Photography or recording of employees may be conducted for various business purposes, including but not limited to:

- Training purposes
- Promotional materials
- Internal communications
- Documentation of care procedures
(with appropriate safeguards to protect resident privacy)

TEXT MESSAGE CONSENT

To establish guidelines and procedures for obtaining consent from staff members to send text messages for communication, updates, and reminders related to work-related matters, events, and announcements.

- Text messages sent by the organization will be limited to essential communications, updates, and reminders related to work-related matters, events, and announcements.
- The frequency of text messages will be reasonable and in accordance with the consent provided by the staff member.

CONTROLLED SUBSTANCE COUNT

Policy and Procedure

April 12, 2017

POLICY

It is the policy of Home Again Assisted Living that the assigned on-coming and off-going medication administration employees count all controlled substances together. Then both employees are required to sign off on the controlled substance count form.

PROCEDURE

1. The on-coming medication administration employee will count each controlled substance in the lock box and verbalize the amount counted to the off-going medication administration employee.
 - ° This is to be done by moving the Medication Cart(s) into the Nurses Station under the camera monitoring.
2. The off-going medication administration employee will utilize the Controlled Substance Count and Sign binder to confirm that the amount verbalized from the on-coming staff matches the amount listed on each appropriate form.
3. When the count is complete both employees will sign the controlled substance count form.
4. If a discrepancy is found, both staff are to remain and attempt to find discrepancy. If the error is not found by 30 mins, staff is to contact management for further instructions.

DELEGATION OF DISPENSING MEDICATIONS FOR RESIDENTS

Policy and Procedure

April 9, 2011

POLICY

It is the policy of Home Again to delegate dispensing medications for residents leaving facility for appointments and visits.

PROCEDURE

1. Staff will check with Resident on time(s) they will be out of facility.
2. Individual envelopes are to be prepared for each schedule time of medication time (for example: noon, 2pm, 5pm, etc.)
3. Mark each envelope with name of resident and time to take medication.
4. Initial the box(es) on the medication sheet just like you would after administering the medication but circle your initials and write on the back that the meds were sent out with resident, resident out of facility , and the times of the meds sent (for example: noon, 2pm, 5pm, etc)
5. Staff on duty when resident returns need to check with resident or family to confirm medications were taken while out of facility.
6. Do not give medications to resident until they are ready to leave
7. Any questions call Manger or on call emergency contact.

Note: If a resident leaves facility without taking medications and upon return you have medications to administer but at a different time, you need to call Manager and discuss. We need to see if some medications are doubled up now and manager (with RN Consult) will decide on medication times.

DELEGATION OF TASKS

Policy and Procedures

April 9, 2011

POLICY

It is the policy of Home Again to have the facility RN delegate certain tasks, such as nebulizer administration, insulin administration, monitoring blood sugars, etc. to selected employees.

PROCEDURE

1. Manager and RN will determine which staff is appropriate to delegate task to.
2. RN will teach staff the task they are to do by giving them written and oral explanation of the procedure.
3. RN will demonstrate procedure to staff.
4. Staff will return demonstrate the procedure.
5. The staff will take a written test regarding the procedure that was just taught, when applicable.
6. When staff feels comfortable with procedure, they will be allowed to perform it and return demonstration is correct.
7. A written explanation will be placed in the staff file to verify that they received training and passed.

DISCIPLINARY PRACTICES



January 8, 2019

Problem Resolution

Home Again seeks to deal openly and directly with its employees and believes that communication between employees and Management is critical to solving problems. Employees that may have a problem with one another should attempt to resolve the problem themselves. If a resolution cannot be agreed upon, both employees should approach Management who will work with the employees to determine a resolution. In these instances, the decision of Management is final.

Discipline

Home Again policy is to attempt to deal constructively with employee performance problems and employee errors. The disciplinary process will be determined by any Policy and Procedure that is in effect of related problem or incident. If there is no specific Policy and Procedure then depending on the facts and circumstances, the discipline applied may include, among other things, oral or written warnings, probation, suspension without pay, or immediate termination of employment. Each situation will be considered in light of a variety of factors including, but not limited to, the seriousness of the situation, the employees past conduct and length of service, and the nature of the employees' previous performance or incidents involving the employee. Details of this process are outlined further in the Correction Action section below.

Corrective Action

Corrective Action is taken against an employee in response to a rule infraction or a violation of company policy. Correction action will continue until the violation or infraction is corrected. The corrective action will be determined by any Policy and Procedure that is in effect of related problem or incident. If not Policy and Procedure is in effect related to the problem or incident then the following will occur. A verbal warning, followed by a written warning that is placed in the employee's personnel folder. If more serious corrective action is required, the employee may be put on probation, or have employment terminated immediately.

Home Again considers some violations as grounds for immediate dismissal, including but limited to: insubordinate behavior, theft, destruction of company property, breach of confidentiality agreement, untruthfulness about personal background, drug or alcohol abuse, or threats of violence.

DRESS CODE

Policy and Procedure

April 23, 2018

POLICY

It is the policy of Home Again for Resident Assistants to wear scrubs and appropriate shoes while working a shift. Wearing scrubs allows the Residents and visitors to easily identify staff. This Policy and Procedure is in addition to the guidance provided in the Employee Handbook.

PROCEDURE

- Resident Assistants must wear scrub top and bottoms while working their shift. Staff may wear any color or design as long as it is deemed appropriate by Management.
- Staff may wear khaki capri-type pants but no shorts or pants above the knee are allowed, this is to accommodate for warm summer days.
- Under no circumstance is it okay for individuals to wear yoga pants or capris.
- Hooded sweatshirts are only to be worn if they are Home Again apparel with the Home Again logo.
- Each community may have special attire days for game days, if it is planned by the Community Director, this is approved by management.

Resident Assistants must wear proper shoes when working. Tennis shoes or nursing shoes (shoes that offer comfort, protection to feet and good support) are acceptable. No open toe shoes or sandals are allowed when Resident Assistants are working their shift.

Failure to do follow the Dress Code Policy and Procedure will result in the following:

1. First Notice will be a verbal notice to you to correct dress code before next scheduled shift;
2. Second Notice will be in writing for you to correct dress code before next scheduled shift;
3. Third Notice will be termination of employment.

EMPLOYEE APPRECIATION

Policy and Procedure

April 15, 2021

POLICY

It is the policy of Home Again Assisted Living to give employee appreciation gifts to regularly scheduled non-management staff.

PROCEDURE

All employees who are on track of working at least 400 hours per calendar year are eligible to receive the following:

Employee Appreciation Gifts for Non-Management Staff

YEARS OF SERVICE	GIFT
1	Home Again Embroidered Fleece Jacket
2	Employee Choice of 1 Item from Home Again Merchandise Website
3	\$300 bonus added to paycheck
4	\$400 bonus added to paycheck
5	\$500 bonus added to paycheck
6	\$600 bonus added to paycheck
7	\$700 bonus added to paycheck
8	\$800 bonus added to paycheck
9	\$900 bonus added to paycheck
10	\$1,000 bonus added to paycheck

Annual certificates of employment to be given out at monthly staff meeting. If the employee does not attend that staff meeting, their certificate will be presented to them at a later time.

EMPLOYEE NOTICE OF REPORTABLE CONDITIONS



March 21, 2024

In compliance with our established policies governing employee health, you must report the following conditions to the Manager or RN.

- Temperature of 100°F or greater;
- Nausea/Vomiting;
- Acute diarrheal illness (severe) with other symptoms (i.e., fever, abdominal cramps, bleeding, etc.) or diarrhea lasting longer than twenty-four (24) hours;
- Orofacial herpes simplex virus or herpetic whitlow;
- Diagnosed Streptococcal (Group A); sore throat;
- Head or body lice (Pediculosis)
- Skin lesions which are infected, especially on exposed body parts;
- Skin rash, poison ivy/oak, impetigo, or staph;
- Acute Upper Respiratory Infection (URI) or influenza (severe);
- Active infection with/or exposure to:
 - Hepatitis (jaundice);
 - Human immunodeficiency virus (HIV)(if HIV antibody positive);
 - Measles (if employee is not immune);
 - Mumps (if employee is not immune);
 - Rubella (if employee is not immune);
 - Herpes Simplex virus (if employee is not immune);
 - Varicella zoster (chicken pox/shingles) virus (if employee is not immune);
 - Tuberculosis
 - Needle sticks/sharps accidents, parenteral/mucous membrane or non-intact skin exposure to a resident's blood or body fluids;

History of back injury? (for training purposes) Yes/No

I understand that it is my responsibility to notify my Manager or RN of any potential that I may have of infection with an infectious disease. I understand that this notification is to protect myself, residents and other staff members.

EMPLOYEE TRANSPORT OF RESIDENT

Policy and Procedure

February 9, 2016

POLICY

It is the policy of Home Again Assisted Living that any employee who drives a company owned or leased vehicle or who transports residents or other employees on company business time must;

- Be on the company approved driver list
- Have a valid driver's license
- Have a current driving record report on file in the Business Office
- Have a signed acknowledgement of the driving policy on file in the Business Office
- Must be using the vehicle for company business

*All drivers are subject to a check of their driving record at **any time**. If involved in an accident you may be subject to a record check and/or a drug/alcohol test.

PROCEDURE

Drivers operating company vehicles on company business are covered by the company's liability insurance, but if you do not comply with the Company driving policy you may not be protected under the Company's insurance.

The driver and all passengers must wear seat belts at all times when the vehicle is in motion. A driver's failure to communicate and enforce this policy may result in the driver's loss of indemnification by the company's insurers and from suits arising from injured passengers

Prohibited uses in the Vehicle while on Company Business

- Smoking/Tobacco Use
- Drinking of Alcohol
- Talking/texting on cell phone /using any hand held device while driving
- Animals in the vehicles
- Radar detector

EMPLOYEE TRANSPORT OF RESIDENT

Driving Privately Owned Vehicles

Employees using their own vehicles on company business will be required to meet the requirements listed above and should be aware of the following:

- Your insurance coverage is primary and your liability insurance coverage must have a minimum \$100,000 / \$300,000 liability.
- The company liability is secondary and may or may not cover losses in excess of the limits of your policy.
- Mileage: In accordance with IRS guidelines, mileage will be reimbursed at the published rate per mile for use of personal car for company related travel as long as the travel is approved by the employee's manager. Reimbursement for providing resident transportation must be on the approved form and submitted to manager for payment.

Revocation of Driving Privileges

Any employee who has obtained the following number of driver's license points or driving arrest will be prohibited from driving on company business:

- Six driver's license points
- Alcohol/drug related arrest / limited driving privilege
- Careless and Reckless arrest / conviction

FAMILY AND MEDICAL LEAVES (FMLA)

Policy and Procedure

December 27, 2017

POLICY

It is the policy of Home Again Assisted Living Inc. to provide FMLA to eligible employees. The Family and Medical Leave Act (FMLA) entitles eligible employees of covered employers to take unpaid, job-protected leave for specified family and medical reasons.

PROCEDURE

Covered Employers

The FMLA only applies to employers that meet certain criteria. A covered employer is a:

- Private-sector employer, with 50 or more employees in 20 or more workweeks in the current or preceding calendar year, including a joint employer or successor in interest to a covered employer;
- Public agency, including a local, state, or Federal government agency, regardless of the number of employees it employs; or
- Public or private elementary or secondary school, regardless of the number of employees it employs.

Eligible Employees

Only eligible employees are entitled to take FMLA leave. An eligible employee is one who:

- Works for a covered employer;
- Has worked for the employer for at least 12 months;
- Has at least 1,250 hours of service for the employer during the 12-month period immediately preceding the leave; and
- Works at a location where the employer has at least 50 employees within 75 miles.

The 12 months of employment do not have to be consecutive. That means any time previously worked for the same employer (including seasonal work) could, in most cases, be used to meet the 12-month requirement. If the employee has a break in service that lasted seven years or more, the time worked prior to the break will not count unless the break is due to service covered by the Uniformed Services Employment and Reemployment Rights Act (USERRA), or there is a written agreement, including a collective bargaining agreement, outlining the employer's intention to rehire the employee after the break in service.

FAMILY AND MEDICAL LEAVES (FMLA)

Leave Entitlement

Eligible employees may take up to 12 workweeks of leave in a 12-month period for one of more of the following reasons:

- The birth of a son or daughter or placement of a son or daughter with the employee for adoption or foster care;
- To care for a spouse, son, daughter, or parent who has a serious health condition;
- For a serious health condition that makes the employee unable to perform the essential functions of his or her job; or
- For any qualifying exigency arising out of the fact that a spouse, son, daughter, or parent is a military member on covered active duty or call to covered active duty status.

An eligible employee may also take up to 26 workweeks of leave during a “single 12-month period” to care for a covered servicemember with serious injury or illness, when the employee is the spouse, son, daughter, parent, or next of kin of the servicemember. The “single 12-month period” for military caregiver leave is different from the 12-month period used for other FMLA leave reasons.

Under some circumstances, employees may take FMLA leave on an intermittent or reduced schedule basis. That means an employee may take leave in separate blocks of time or by reducing the time he or she works each day or week for a single qualifying reason. When leave is needed for planned medical treatment, the employee must make a reasonable effort to schedule treatment so as not to unduly disrupt the employer’s operations. If FMLA leave is for the birth, adoption, or foster placement of a child, use of intermittent or reduced schedule leave requires the employer’s approval.

Under certain conditions, employees may choose, or employers may require employees, to “substitute” (run concurrently) accrued paid leave, such as sick or vacation leave, to cover some or all the FMLA leave period. An employee’s ability to substitute accrued paid leave is determined by the terms and conditions of the employer’s normal leave policy.

NOTICE

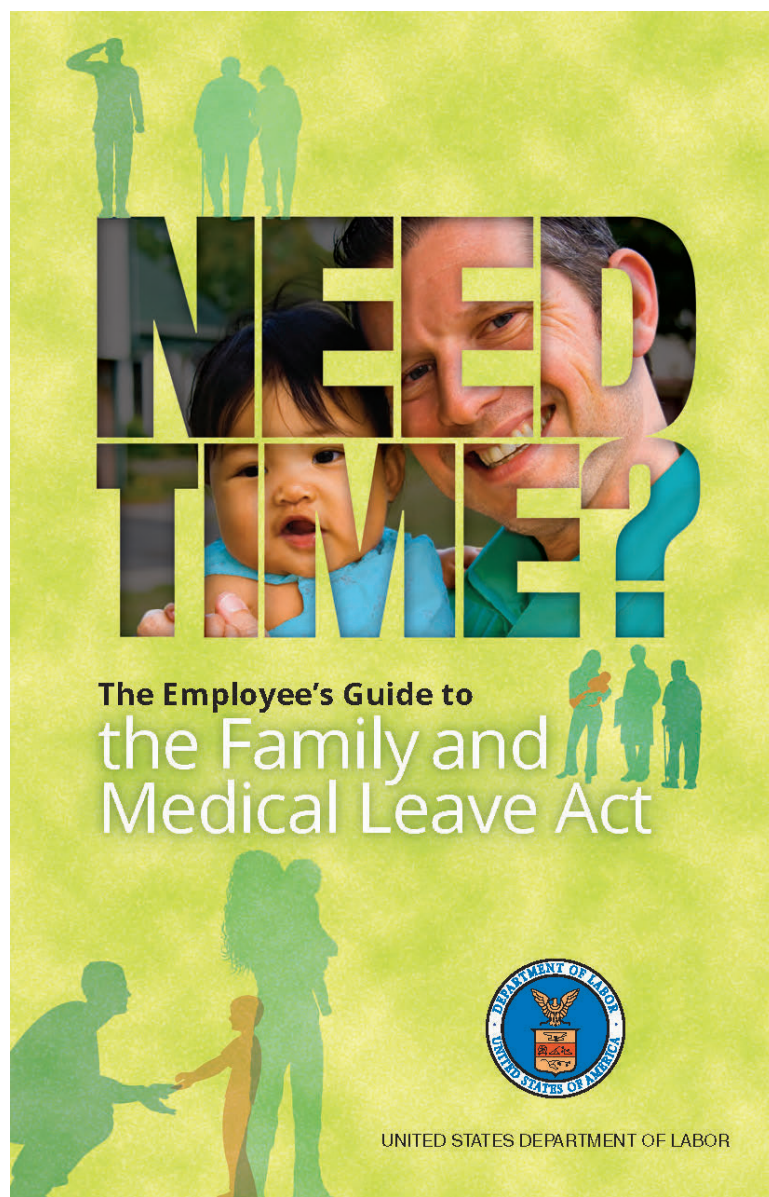
Employees must comply with their employer’s usual and customary requirements for requesting leave and provide enough information for their employer to reasonably determine whether the FMLA may apply to the leave request. Employees generally must request leave 30 days in advance when the need for leave is foreseeable. When the need for leave is foreseeable less than 30 days in advance or is unforeseeable, employees must provide notice as soon as possible and practicable under the circumstances. Please report leave directly to your Community Director or Human Resources Coordinator.

FAMILY AND MEDICAL LEAVE ACT

FMLA Booklet

June 2015

You can download a copy of the **Employee's Guide to the Family and Medical Leave Act** by clicking the image below.



FOOD AND BEVERAGES

Policy

January 8, 2019

Employees are not allowed to eat food purchased for Home Again. Any employee that is found eating food purchased by Home Again will be subject to disciplinary action. Exceptions to this is employees may have water and coffee, and when an Employee works on a holiday food will be provided. Employees may bring their own food and non-alcoholic drinks to work. They are to be labeled with staff name and date and kept in the designated refrigerator. If items are left in refrigerator for more than 3 days, they will be put in the garbage with no notice to staff member.

GOLDEN TICKET

Policy and Procedure

April 15, 2021

POLICY

It is the policy of Home Again Assisted Living to show appreciation of employees through “Golden Tickets” that are awarded manually as well as through OnShift Engage.

PROCEDURE

- Management staff can reward employees golden ticket points for various reasons including but not limited to; working as a team, picking up shifts, being mandated, staying late, showing up to work on time, leaving work on time, working consecutive shifts in a row, time worked with the company, etc. Some of these reasons will be auto-populated by OnShift and some will be manually rewarded through OnShift. When enough points are earned through OnShift, Management will then award you with a hard copy golden ticket that you are able to save in order to redeem specific items.
- GOLDEN TICKET POINTS ARE NOT A GUARANTEE.
- Any employee with golden ticket points may not share their points with another employee.
- Points are **no longer redeemable** if an employee quits or has been terminated for any reason.
- Golden tickets can be redeemed with the Community Director/Assistant Community Director of your community. Options for redemption are:
 1. 200 golden tickets can be redeemed for \$50.00 added to your paycheck. Turn in golden tickets to Community Director/Assistant Community Director, Community Director/Assistant Community Director then emails HR and sends golden tickets to main office by Friday before payroll.
 2. Visit Home Again’s Merchandise Website: <https://homeagain.itemorder.com/sale> for items available and golden ticket amounts required. Place order with the manager of your community.
- Each golden ticket given provides a number of points that the employee is receiving, based off of manager decision, each single point is worth items shown on the listed items on the next page.
- Thrive employees are ineligible for OnShift Engage rewards as the system does not allow for shared employees to earn. It is management’s discretion that thrive employees are accommodated differently.

GOLDEN TICKET

OnShift Engage Point Breakdown for ***Regular Employees***

AUTOMATICALLY REWARDED		MANUALLY REWARDED	
REASON	POINTS	REASON	POINTS
Worked 10 consecutive shifts.	10 points	Mandated full 8-hour shift.	15 points
Clocking in between 7 minutes early to 0 minutes late. Med passer will be allowed 10 minutes.	1 point	Mandated less than 8 hours.	10 points
Clocking out between 0 minutes after and 7 minutes after. *Med passer will be allowed 10 minutes*	1 point	Pick Up Shift (Even if they are in overtime. PRN employees will earn based on Manager discretion. PRN employees may not be eligible).	15 points
Completing a bi-weekly pulse survey that will be automatically sent to them to complete.	5 points	Employee of the month (top ranked employee in Engage).	10 points
Tenure Milestones: 7 days, 14 days, 21 days, 30 days, 60 days.	5 points	Awesome Job/Thank you	5 points
Tenure Milestones: 90 days, quarterly after that.	25 points		

HAND HYGIENE

Policy and Procedure

October 7, 2015

POLICY

It is the policy of Home Again that proper hand hygiene is completed to assist in the prevention of spreading infection and disease.

PROCEDURE

1. Hand hygiene must be performed before:
 - Having contact with residents
 - Putting on gloves
 - Handling food
 - Administering medication
2. Hand Hygiene must be performed after:
 - Having contact with resident's skin
 - Having contact with body fluids (even when gloves are worn)
 - Having contact with resident items such as dressings, dirty laundry, dishes or trash
 - Taking off gloves
 - Moving from parts of the resident's body that could be contaminated to clean parts of the resident's body
 - Using restroom
 - Coughing or sneezing
 - Smoking
3. How to properly use hand sanitizer
 - Apply hand sanitizer to the palm of one hand
 - Rub hands together until dry, covering all parts of the hand, especially fingertips and fingernails
 - Use enough hand sanitizer to take at least 15 seconds to dry
4. How to properly wash hands with soap and water
 - Wet hands with water
 - Apply soap
 - Rub hands together for at least 15 seconds, covering all parts of the hand, especially fingertips and fingernails
 - Rinse hands under running water and dry with a disposable towel
 - Use the towel to turn off the faucet
5. Wash with soap and water when hands are visibly dirty.

HEPATITIS B IMMUNIZATION CONSENT

Policy

April 3, 2024

POLICY

By law, the Hepatitis B vaccine series will be made available to employees within 10 days of initial assignment to a position presenting occupational exposure and completion of required training unless the employee has previously received the complete Hepatitis B series, antibody testing reveals the employee is immune, or the vaccine is contraindicated for medical reasons.

- I have reviewed a blood borne pathogen education (standard precautions) and training videotape or webinar.
- I understand that as part of my job, I may become exposed to blood or other potentially infectious items or materials that put me at risk of acquiring the Hepatitis B virus (HBV). Therefore, at no charge to myself, I have been offered the Hepatitis B vaccine, which is intended to render me immune to the HBV. At least three separate intramuscular injections are necessary to produce the desired immunity (sometimes additional injections are necessary to reach immunity), and all three doses are necessary for the vaccine to be effective. After the initial dose is given, repeat doses are given one month and six months later. There is a strong likelihood the vaccine will be successful if I receive all three doses, but there is a potential that even when administered properly the vaccine will not result in the desired immunity, such that there is a chance I may become infected with HBV even if I complete the full series.
- If the vaccine does not lead to the desired immunity (because I do not complete the three-dose series, or I choose not to receive supplemental injections if the first series does not develop immunity), or if I choose not to receive the vaccine at this time, I understand that I will need post-exposure treatment if I have a direct contact with blood, other body fluids, or other actually or potentially infected items, in order to address potential exposure concerns.

I have read and understand the information above. I understand that due to my occupational exposure to blood or other potentially infectious materials I may be at risk of acquiring hepatitis B virus (HBV) infection. I have been given the opportunity to be vaccinated with hepatitis B vaccine, at no charge to myself. However, I decline hepatitis B vaccination at this time. I understand that by declining this vaccine, I continue to be at risk of acquiring hepatitis B, a serious disease. If in the future I continue to have occupational exposure to blood or other potentially infectious materials and I want to be vaccinated with hepatitis B vaccine, I can receive the vaccination series at no charge to me.

HOLIDAY

Policy and Procedure

January 14, 2019

POLICY

It is the policy of Home Again Living, Inc. to pay eligible employees on company recognized holidays. In order to receive holiday pay, staff must work their scheduled day before and after the holiday. Holiday pay starts at 12 midnight on the holiday and ends at 11:59p on same day, unless otherwise stated. The following are recognized holidays for eligible employees:

- New Year's Day
- Memorial Day
- 4th of July
- Labor Day
- Thanksgiving
- Christmas Eve (any hours worked between 12PM and 11:59 PM)
- Christmas Day
- New Year's Eve (any hours worked between 5PM and 11:59 PM)

Note: Management will make reasonable efforts to accommodate holidays pertaining to an employee established beliefs that are not included in the above list. Employees should speak with Management to obtain approval for taking time off to observe such holidays.

PROCEDURE

- Holiday pay is paid at DOUBLE time the employee rate unless specifically stated otherwise.
- If an employee does not work on a holiday then they are not eligible for holiday pay.
- If a staff scheduled holiday falls on a regularly schedule off day staff is still required to work.
- Staff are able to switch with one another if they want a holiday off or want to work one they are not scheduled.
- Each year the holidays will rotate so that no one is required to work the same holiday two years in a row.
- The holiday rotation switches after New Year's Day.

***The holiday rotation schedule will be provided to you by the Director of your specified Community, note that the rotation may be different at each Community.

INFLUENZA VACCINE

Policy and Procedure

October 8, 2020

PURPOSE

It is critical that Home Again Assisted Living Ins. minimize exposure to and transmission of the influenza virus in the workplace by providing occupational protection to employees and thereby preventing exposure to our residents and members of the community which we serve. Annual influenza vaccination has been found to be both safe and effective in reducing the risk of influenza and health-care related transmission. The Centers for Disease Control and Prevention (CDC) recommend vaccination of all workers in health care settings. Research has shown that vaccination programs limited only to employees who actively seek the vaccine have lower effectiveness in protecting residents and employees.

POLICY

All Home Again employees will be required either to be vaccinated or provide a medical or religious waiver annually by October 31st. At the time of vaccination, employees must complete the Mandatory Influenza Vaccination (MIV) Form. Vaccines will be offered free of charge at various times to allow for 100% compliance.

PROCEDURE

General Requirements

All employees must complete the MIV Form by October 31st each year. Employees who decline the vaccination must provide a medical or religious waiver.

Any employee who is not compliant with this policy will be placed on unpaid administrative leave until documentation of vaccination or completed waiver is received.

After 45 days, if the employee has not provided documentation of vaccination or completed waiver, they will be terminated.

New employees who are hired during the influenza season must comply within 30 days of their hire date.

INFLUENZA VACCINE

Waivers

Medical Waiver: A medical waiver must be signed by the health care provider and returned to Home Again Human Resources by October 31st each year.

Religious Waiver: A religious waiver must be signed by the religious spiritual leader and returned to Home Again Human Resources by October 31st each year.

Employees who do not receive a flu vaccination and have provided a waiver will be required to wear a mask and face shield while working and within six feet of residents or a co-workers during influenza season. Influenza season and this requirement will be determined annual by Home Again's Medical team.

Records

Records will be maintained documenting vaccinations and waivers. If a national vaccine shortage occurs, the organization may revise, suspend or revoke all or part of this policy.

MANDATORY INFLUENZA VACCINATION FORM

☐ I agree to take the influenza vaccine.

☐ I received the influenza vaccine from another provider
(must provide documentation with location, date and proof of vaccination).

☐ I decline the influenza vaccine and have provided a medical or religious waiver:

☐ Medical Waiver

☐ Religious Waiver

I understand that I will be required to wear a mask within six feet of residents in a patient care area during flu season.

Name (Print)

Signature

Date

MEDICAL WAIVER

Name of Employee: _____

I, _____ (Print Physician Name) certify that the above employee is under my medical care and should be exempt from receiving the influenza vaccination due to medical reason(s).

Physician Signature

Date

Phone Number

Address

Email Address

RELIGIOUS WAIVER

I, _____ (Employee Name) under my religious belief, decline to receive the influenza vaccination. This need not be renewed annually.

Religious/Spiritual Leader Name (Print)

Signature

Date

Phone Number

Address

Email Address

INFLUENZA VACCINE

Suggested Communication to Staff

Beginning October 2020, Home Again Living will join the list of organizations that choose to make flu vaccinations mandatory for all employees unless a signed medical or religious waiver is completed. Like tuberculosis tests, we will provide flu shots at no cost to staff, and we will develop a plan to make receiving the vaccination as easy as possible. You will be notified of the details as we move closer to flu season.

Research shows that numerous health-care related organizations support mandatory vaccinations. Moreover, keeping staff health just makes sense. Our residents have the right to feel safe from exposure within our facilities. You and your coworkers have the right to work in an environment of health employees with communities as fully staffed as possible.

Thank you for your commitment to this very important issue. We owe it to our residents – and to each other – to roll up our sleeves and be immunized against influenza.

MANDATION

Policy and Procedure

January 14, 2019

POLICY

It is the policy of Home Again to ensure that all scheduled shifts are covered to provide a safe and functioning environment for our Residents and staff. Using industry standards, the Mandation Policy and Procedure was created.

PROCEDURE

If a staff member calls in/does not show for a scheduled shift for whatever reason, using the Employee Roster and Mandation Guide below, please determine which employee is to stay to cover the shift. Please follow the Mandation Guide and reach out to On-Call for assistance if needed. Once decision is determined, call On-Call to update them of whom did not show as well as whom is staying. The Employee Roster will be updated on a weekly basis by Management. If no communication is had based on a Mandation situation, roster will not be update because Management was not informed.

New staff members will be added to the Employee Roster within their first week of hire.

Mandation Guide provided in chart rooms:

Mandation is mandatory for the safety and wellbeing of our Residents. If someone does not show for their shift, it is a requirement that a staff member stays to ensure we have proper amounts of staff here to care for our Residents!	Go through the list of individuals that are working, if no mandation date is provided for multiple people, go by person that has worked here the least amount of time.
If Mandation occurs, please notify On-Call so that Management can follow up appropriately.	Individuals are NOT able to be mandated if.... <ol style="list-style-type: none">1. They have already worked a double.2. They are within their first 30 days of employment.3. They are Thrive Staff.4. They are in high school and it is a Sunday–Thursday for NOC shift during the school year.

MEDICATION ADMINISTRATION TRAINER

Policy and Procedure

October 30, 2017

POLICY

It is the policy of Home Again Assisted Living to have a designated medication administration trainer for all new employees whom have passed the medication administration course.

PROCEDURE

The medication administration trainer must maintain and possess a record of the following requirements: This includes but is not limited to:

- A good attendance standing per Home Again's attendance policy
- No form of corrective actions

This employee must be a role model who displays responsibility, organization, and leadership traits.

The applying employee must have no medication errors for a 6 month period of time and must be considered in a good overall employee standing.

The applicant must also have shift flexibility and must be employed for a minimum of six months before applying for the medication administration trainer position.

The medication administration trainer will train all medication administration passers within the guidelines of Home Again Assisted Living medication administration policy.

Any and all interested employees need to apply thru management and fill out an application. All applicants will be chosen at the discretion of the Community Director, Medical Director, and Human Resources Coordinator.

MEDICATION ERROR

Policy and Procedure

June 9, 2016

POLICY

It is the policy of Home Again Assisted Living to identify, investigate, and react in a prompt manner related to all aspects of our medication administration process.

Medication errors can cause adverse effects to our residents therefore it is extremely important that we are using the six rights of medication administration. This includes:

1. Right Resident
2. Resident Medication
3. Right Time
4. Right Route
5. Right Dose
6. Right Documentation

Remember that all occurrences can be avoided if all 6 rights of medication are followed and attention to detail is accomplished. Prompt response to potential errors is vital in keeping residents safe. Remember to stay calm, take your time, and when you don't know, DO NOT assume, ask management or contact the on-call phone.

When a PRN medication is given, 30 minutes later there is follow up to check if the medication has worked and proper documentation is completed.

1. A medication error is any incorrect or wrongful administration of a medication.
Such as:
 - a. Failure to administer proper dose or using the wrong route of administration.
 - b. Failure to administer the correct drug or formulation for a particular resident.
 - c. Failure to observe the correct time for administration of the drug.
 - d. Failure to observe that the medication was swallowed or taken by the resident.
 - e. Giving a resident the wrong medication.
(Automatically 2pts and disciplinary action begins).
 - f. Failure to properly document the medication task.
 - g. Giving a medication without proper training.

MEDICATION ERROR

2. Occurrence and disciplinary action:

a. Each error can accumulate either 0.5 or 1 full occurrence. Based on the severity or the medication error occurrences accumulate and correlate into disciplinary action.

(See Medication Occurrence Table below)

i. Errors that accumulate 0.5 of an occurrence are errors such as missing initials, punching the wrong dates without notifying manager, not notifying management of when using the last medication for re-order, forgetting to initial or date a patch, or forgetting to follow up on PRN use. Management reserves the right to assign half occurrences as seen fit. Therefore, it takes (2) 0.5 occurrences to begin disciplinary action.

1. Staff will be given 24 hours from the time of missed initial or PRN follow up to initial before it will count as an occurrence.

ii. Errors that accumulate 1 full occurrence are more severe, management will assign full occurrences as seen fit. Some examples include: giving a medication late without authorization, not giving a medication, or as determined by management not mentioned above, related to resident to safety.

iii. Errors that accumulate 2 full occurrences are errors that have a high potential for causing harm or do cause actual harm to a resident such as giving a wrong medication to the wrong resident. Other medication errors that are worth 2 occurrences are determined by management.

iv. Any medication error that causes direct negative or life threatening harm to a resident is subject to immediate termination. This is based on management discretion.

3. Occurrences are considered to be rolling. This means that after six months from the last occurrence everything starts over.

MEDICATION ERROR OCCURRENCE DISCIPLINARY ACTION

OCCURRENCE	ACTION	DESCRIPTION
1st	Oral Warning	Policy reviewed, medication administration safety reviewed, goals put into place to avoid medication errors.
2nd	Written Warning	Same as 1st occurrence, in addition, Medical Director will review the medication administration process with staff.
3rd	Taken off medication duty as seen fit by management.	Same as 1st occurrence, in addition staff will be removed from medication administration duty for a specific timeframe as determined by management.
4th	Taken off medication duty permanently.	Staff will be removed permanently from medication administration duties.

MISSSED INITIALS IN ECP MED PASS

Policy and Procedure

January 14, 2019

POLICY

It is the policy of Home Again to maintain accurate medication administration records for Residents.

PROCEDURE

Staff are to initial in the ECP Documentation Software for medication/treatments given to Residents.

- Staff is to identify correct Resident in ECP, correct medication, correct time and dosage, and correct delivery method; then click "Prep Med".
- Once medication is "punched out" and given, staff to initial in the correct medication time block in ECP; then click "Pass".

If initials are missed in ECP, Management is then notified, and the following actions will be taken:

- Verbal warning that initials were missed and need to be corrected;
- Written warning that initials were missed and need to be corrected;
- Termination, as determined by Management.

NEW HIRE AND TRAINING

Policy and Procedure

March 21, 2024

POLICY

It is the policy of Home Again Assisted Living to ensure that all employees are training correctly and completely prior to working with Residents of our community.

PROCEDURE

After successful completion of interview, this will follow: :

Recruiter

- New Hire Paperwork & Onboarding
 - This includes all state and federal required forms, Home Again Policy and Procedures, and other required readings and paperwork
 - Coordination of TB Screening; if needed
 - Coordinates Day 1 through 3 of training/orientation
 - NOC shift employees will work 2 day time shifts before transitioning to NOC shift
 - Sign Employee Up or Verification of complete Regulation Specific Trainings
 - Standard Precautions
 - Fire Safety
 - First Aid
 - Medication Administration
 - Other Regulation requirements which include:
 - Resident Rights
 - Client Group
 - Recognizing, Preventing, Managing and Responding to Challenging Behaviors
 - Provision of Personal Care (unless CNA)
 - Dietary Training (not applicable if only responsibility is delivering meals pre-made plates)
 - Paperwork is then sent to Community Directors or designated staffing personnel
 - Community Directors or designated staffing personnel have 24 hours after receiving papers to reach out to employee to touch base and introduce themselves.

NEW HIRE AND TRAINING

Day One

- Community Director/Staffing Director/Schedule Coordinator will go over the following:
 - Meet & Greet
 - TB/Covid/Drug Screen
 - Tour of facility and tour of where things are located (approx. 1 hours)
 - Meet Coworkers
 - Start Alea training-onsite
 - Staff Phone List
 - Appropriate Logins
 - Required paperwork from Human Resources Staff
 - Finalize template & remaining training schedule

Day Two

- Community Directors or designated staffing personnel will go over the following:
 - New Hire Training Checklist
 - Safe Resident Handling Checklist
- Medical Manager delegation and hands on physical training (training document provided to Medical team from Community Directors or designated staffing personnel):
 - Delegations
 - Cares and Physical Training – more to be provided with Resident Assistant Trainer
 - Review Blood Pressure and O2 procedure and training
- Continue to meet Coworkers and train on floor

Day Three

- Medical team reads TB
- Continue to meet coworkers
- Finish Alea training-if not already completed
- Continue to train on floor

All checklists and forms need to be completed and returned to main office 14 days after employees first day within the community. Checklists are:

- Attendance Agreement
- New Hire Training Checklist
- Medical New Hire Training Checklist
- Safe Resident Handling Checklist

All Alea orientation classes must be completed or employee is not eligible to work their next floor shift. Once all the above is completed, the new Resident Assistant will be on the schedule as a regular staff member. One week after the new Resident Assistant has been working on own as a regular staff the Community Director will review and follow up with the new employee as needed.

NEW HIRE AND TRAINING

Orientation

In accordance with federal law, both new employees and re-hires will be required to provide documentation of identity and eligibility to work in the United States. The 1-9 form will be used for this purpose.

New employees will also read and review the Employee Handbook and will be given the time to read it and ask any clarifying questions of Home Again Management. The signed copy of the Acknowledgement & Receipt of Understanding will be placed in the employee's personnel file.

Course Reimbursement Agreement

If my employment ends, for any reason, within six(6) months after completion of any or all training course(s), I will repay the course(s) cost. It will be deducted from the last paycheck that I receive from Home Again Assisted Living. The courses include the following; Standard Precautions, Fire Safety, First Aid & Choking, Challenging Behaviors, Dementia Generalist, Medication Administration, and Certified Nursing Assistant(CNA).

Reporting Changes

You are responsible for promptly notifying Home Again Management of any changes in your name, address, telephone number, marital status, citizenship, tax withholding allowances, emergency contact information.

Each employee is required to notify Home Again Management, in advance, of the dates of all approved vacation or leave time to be taken. See Time Off Request Policy and Procedure located on page 110.

NEW HIRE AND TRAINING

Job Classifications

Employees are classified by two major categories: “Exempt” or “Non-Exempt”. This handbook applies to both Exempt and Non-Exempt employees.

Exempt employees are generally salaried and fall into one or more of the following four classifications: executive, professional, administrative, or sales. These employees are exempt from the applicable provisions of state and federal wage and hour laws (FLSA).

Non-Exempt employees are eligible to receive overtime pay in accordance’s with state and federal wage and hour laws (FLSA). These employees are required to submit a time record for each pay period, approved by Home Again Management, for the purposes of tracking hours worked and calculating compensation.

Employees are also classified within one of the following three statuses:

Full-time: any employee that is regularly scheduled to work 32 hours a week or more. Fulltime employees are eligible for earned vacation time.

Part-time: any employee that is regularly scheduled to work less than 32 hours per week. Part- time employees are not eligible for standard company benefits.

Temporary: any temporary work that has a predetermined start and end date of employment. Temporary employees are not eligible for standard company benefits.

ON-SITE COMPUTER USAGE

Policy and Procedure

May 4, 2021

POLICY

It is the policy of Home Again Assisted Living to limit the usage of Home Again's computers to work use only. Computers may be used for ECP, iSolve self-service, company benefits portal, OnShift, clocking in/out, and continuing education. Any use beyond these guidelines must be approved by management.

PROCEDURE

Home Again computers will be checked regularly to ensure proper usage. Unless approved by management, any use of computers outside of these guidelines will result in disciplinary action and potentially termination.

OVERTIME



January 8, 2019

Non-exempt employees are to be paid time and a half (1.5) for work time that exceeds 40 hours during a scheduled work week. Employees must receive prior approval from Management to work any overtime hours.

The calculation of overtime hours will not include holiday or vacation days during the given scheduled workweek.

PAY INCREASES & PERFORMANCE REVIEWS



January 8, 2019

Salary increases are based on work performance or promotion, all salary increases are at the discretion of Management.

Performance Reviews

Every Home Again employee will be subject to a performance appraisal at least once per calendar year. Management will give these reviews. The reviews will focus on job-related performance. Goals and improvement plans will be mapped out at each review period and will be reviewed at the next year appraisal. Management will gather feedback from fellow employees and Residents/Family.

Performance reviews will determine salary increases and promotions. Employees will have the opportunity to thoroughly review all performance appraisals and provide a written opinion. All performance reviews and responses will become part of the employee personnel file.

PAY PERIOD

Policy and Procedure

May 4, 2021

POLICY

It is the policy of Home Again Living, Inc. to maintain a schedule for all employees. The schedule posted for employees is considered a pay period. It contains “Week One” and “Week Two”. Each week starts on Sunday at 12:00am and ends the following Saturday at 11:59pm.

PROCEDURE

Any shifts worked within “Week One” and “Week Two” will be paid on the corresponding pay period. This includes any “NOC” (overnight shifts). Any overnight hours worked on Saturdays will remain on the previous pay week.

Pay checks will either be direct deposited into employees’ bank account or mailed to their home. No paper checks will be available at the facility.

Payroll

Both exempt and nonexempt employees will have federal and state taxes withheld from their wages. Payroll checks will not be released prior to the set pay schedule for any reason, nor will they be released to anyone other than the employee.

PERSONAL PROPERTY

Policy

January 8, 2019

Home Again does not assume responsibility for any personal property located on its premises. Employees are to use their own discretion when choosing to bring personal property into the office and do so at their own risk. Additionally, employees may not bring or display in the facility any property that may be viewed as inappropriate or offensive to others. If staff has active medication prescriptions, they should not be brought into facility and must be locked in employee's car at all times.

PERSONAL SAFETY

Policy

January 8, 2019

The safety of each employees health and security is very important to Home Again. Management is willing to make reasonable efforts to address an employee's safety concerns. Employees should remember to use caution and good judgment in all activities and should notify Management if they believe there is a safety issue that should be addressed.

PHONE ETIQUETTE

Policy and Procedure

December 5, 2016

POLICY

It is the policy of Home Again Assisted Living to provide exceptional customer service. Answering the phone in a pleasant and helpful manner as well as taking detailed and complete messages for call back requests is vital for the successful communication to our customers.

PROCEDURE

When answering the phone make sure you do the following:

1. Answer the phone "Thank you for calling Home Again, this is NAME, how can I help you?"
2. Make sure you speak clearly and are smiling as you answer the phone; also identify yourself.
3. Before placing a caller on hold, ask their permission first and thank them.
4. Do not permit the phone to ring more than three times.
5. Always use a pleasant, congenial and friendly tone.
6. Never interrupt the person while he/she is talking to you.
7. Never engage in an argument with a caller.
8. Do not handle an unhappy caller's concern, have them speak with Management. If Management is not there or is not available kindly offer to take a message so that Management may contact them back.
9. Do not make it a habit of receiving personal calls at work.
10. Do not answer the phone if you are eating or chewing gum.

When taking messages for Management make sure you do the following:

1. Make sure you get the callers first and last name
2. The best number to call back at and best time to call.
3. Make sure you get the reason they are calling.
4. Inform them that Management will return their call as soon as they are able.

PRN EMPLOYEE

Policy and Procedure

January 14, 2019

POLICY

It is the policy of Home Again Living to hire, train and retain employees as our census, resident and scheduling needs allow. At times Home Again may hire PRN (as needed) Employees or an employee may request to drop down to PRN status.

PROCEDURE

A majority of Home Again PRN Employees are College Students. The following are expectations of PRN employees:

- PRN Employees that work at least 2 full shifts a month will get seniority for hours during Holidays/School Vacations/Breaks.
- PRN Employees who do not work at least 2 full shifts a month, and hours are not available at their home location will be offered hours with the Float Staff or at another facility.
- When returning to Home Again PRN Employees are expected to return to a "Current" status with any and all education, delegations and Resident update conference with the Medical Manager, Community Director and/or Lead RA within their first week back.

EMPLOYEE PTO

Policy and Procedure

January 1, 2023

POLICY

It is the policy of Home Again to provide paid vacation to eligible employees.

PROCEDURE

All employees working 36 hours or more in a week are eligible for PTO benefits.

Vacation accrual begins on the first day of full-time employment once eligible. Vacation is accrued according to the schedule in this policy. Vacation can be used after it is earned.

Vacation leave will not be earned during an unpaid leave of absence. When an employee takes PTO they will not accrue new PTO for those hours. All vacation time must be used prior to the calendar year end.

Vacation Accrual Schedule for Non-Management Staff

HOURS OF SERVICE	ACCRUAL RATE PER HOUR WORKED	ANNUALIZED / 40 HOUR WEEK
520 hours or less (<90 days)	N/A	N/A
520 to 1,664 hours (<1 year)	.01925	40
$< 3,328$ hours (1-2 years)	.0269	56
$< 6,656$ hours (2-4 years)	.0346	72
$> 6,656$ hours (4-7 years)	.0423	88
$> 11,648$ hours (7+ years)	.05	104

EMPLOYEE PTO

Procedures

To schedule vacation time, employees must submit a completed vacation request, found in OnShift, to the supervisor at least two weeks before the requested leave. Employees must ensure that they have enough accrued leave available to cover the dates requested.

Requests will be evaluated based on a number of factors, including operating and staffing requirements. The supervisor should indicate on the leave form whether the request has been approved or denied and should return the leave request form to the employee within three business days of the date the leave request form was submitted. If the request for vacation leave is denied, the supervisor should provide an explanation for the denial on the form returned to the employee.

Vacation Pay

Vacation will be paid at the employee's base rate at the time the leave is taken. Vacation pay does not include overtime or any special forms of compensation such as incentives, commissions, bonuses or shift differentials. If a holiday falls during the employee's vacation, and it is the employee's scheduled holiday that employee must find replacement coverage or they will be required to work their scheduled holiday.

Use of Vacation Leave for Sick Leave

Vacation hours may be used for sick leave, the same procedure for vacation time will apply.

Accrual of Vacation Leave

Home Again Living believes that vacation is important to the health and well-being of our employees and encourages all employees to utilize their vacation days. Therefore, Home Again Living will not accumulate unused vacation days or pay for unused vacation days. In the event special work demands prevent an employee from taking all available vacation days, however, a request may be made to carry over no more than 16 hours into the next vacation cycle. To be effective, approval must be in writing.

Termination

If an employee gives a written 2 week notice to leave position, all unused vacation time will be paid at the employee's base rate of pay at termination. If an employee does not give 2 weeks' notice to leave position no vacation will be paid to employee. If an employee is terminated by Management, no vacation will be paid to employee.

REFERENCE REQUEST

Policy and Procedure

October 1, 2017

POLICY

It is the policy of Home Again Assisted Living to only verify dates of employment and rehire eligibility for any former employee references checks.

PROCEDURE

When any Manager receives a reference request for a former employee they will only provide them with the following information.

- Dates of employment
- Verify if they are eligible for rehire or not.

Any other employment information requests will not be disclosed.

SEPARATION



January 8, 2019

Family and Medical Leave Act (FMLA)

As of 2017, Home Again offers FMLA to eligible employees with reasons as described in the FMLA Policy and Procedure as well as the attached 'Employees Guide to FMLA'.

Job Abandonment

Employees of Home Again that are absent for more than two (2) consecutive days without notifying a direct Manager are considered to have voluntarily abandoned their employment with the company. If an employee leaves during a shift without prior approval from Home Again Management it will be considered voluntarily abandoning their employment with the company. The effective date of termination will be the last full shift/day the employee reported for work. If an employee abandons a job, he or she will not be entitled to accrued vacation days if eligible. If an employee terminates employment and effective date is not 1 week from notice given to Management, this will be considered job abandonment.

Termination

Home Again does not have tenure or guaranteed employment. Employee or Home Again may terminate employees' employment at any time for any reason.

Termination may result from any of the following: (i) Corrective action measures, which include infractions or violation of company policies, (ii) layoffs, which include the elimination of an employee's job function or headcount reduction due to redundancy or cost reduction and (iii) involuntary dismissal, which may include poor performance or failure to demonstrate an acceptable attitude in the workplace.

The following are grounds for immediate termination of employment: Drug use, any threatening or harmful behavior toward another staff, Resident, or visitor, sleeping at work while on the clock

Termination Process

Home Again requires that employees return all documents, files, computer equipment, keys, uniforms, company tools, business credit cards, and other company owned property on or before the last day worked. When all company owned property has been collected, the employee will receive his or her final paycheck and any eligible vacation pay, when applicable.

SEVERE WEATHER ATTENDANCE

Policy and Procedure

January 6, 2016

POLICY

It is the policy of Home Again Assisted Living to promote the efficient operation of the community when there is severe weather.

PROCEDURE

Attendance is a crucial responsibility of each employee at Home Again Assisted Living when there is severe weather. Any tardiness or absence causes problems for fellow employees and residents in the building. When an employee is absent, others must perform their work, which diminishes the smooth functioning of the community.

Employees are expected to report to work as scheduled, on time and prepared. Employees are also expected to remain at work for their entire work schedule. Late arrival, early departure, or absences from scheduled hours are disruptive and must be avoided.

If the employee does not report to work as scheduled disciplinary action will occur in accordance to the Attendance Policy and Procedure.

SOCIAL MEDIA

Policy and Procedure

April 30, 2015

POLICY

It is the policy of Home Again to eliminate all use of social media regarding this facility, and residents/families. Social Media includes websites such as Facebook, Instagram, Snap Chat, Twitter, You Tube, and many others. This policy covers all existing and future social networking media.

PROCEDURE

Social Media includes websites such as Facebook, Instagram, Snap Chat, Twitter, You Tube, and many others. This policy covers all existing and future social networking media.

- Do not disclose any personal information on residents and their families.
- Staff will not post any pictures of residents and their families.
This includes any gifts received.

Any staff posting any information will be terminated immediately.

STAFF MEETINGS/TRAININGS

Policy

January 8, 2019

Employees are required to attend staff meetings. In the event a staff meeting interferes with an employee's regular schedule, no overtime hours will be paid for attendance. Home Again offers job-related training for employees, both State of Wisconsin required and best-practice training. Reimbursement may be required from Employee. See Course Reimbursement Agreement signed at time of new hire. Mileage will not be paid to employee for any trainings.

STANDARD EMPLOYMENT PRACTICES



January 8, 2019

At Will Employment

Home Again does not offer guaranteed employment. Unless Home Again has otherwise expressly agreed in writing, your employment is at will and may be terminated by you or by Home Again at any time, including after the evaluation period.

Equal Employment Opportunity

Home Again is an equal opportunity employer. Home Again will not tolerate discrimination against any employee because of race, color, national origin or ancestry, gender, age, religious convictions, or disability.

Home Again is committed to providing equal employment opportunities to all individuals without regard race, color, religion, sex, national origin, age, disability, marital status, sexual orientation, or any other characteristic protected by law. For further information about the applicability of Federal Equal Opportunity Laws, including the Americans with Disabilities Act, the Equal Pay Act, the Age Discrimination I Employment Act, contact Home Again Management.

Home Again will not discriminate on the basis of gender in compensation or benefits for women and men who work in the same establishment and perform jobs that require equal skill, effort, and responsibility and which are performed under similar conditions.

Home Again will make reasonable accommodations for qualified individuals with known disabilities unless doing so would result in an undue hardship. An employee with a disability for which reasonable accommodation is needed should contact Home Again Management to discuss possible solutions.

Employees with questions or concerns about any type of discrimination in the workplace are encouraged to bring these issues to the attention of Home Again Management. Employees can raise legitimate concerns and make good faith reports without fear of reprisal. Anyone found to be engaging in any type of unlawful discrimination will be subject to disciplinary action, up to and including discharge.

STANDARD EMPLOYMENT PRACTICES

Sexual and Other Unlawful Harassment

Home Again will endeavor to maintain a work environment that nourishes respect for the dignity of each individual. This policy is adopted in furtherance of that tradition.

It is against the policies of Home Again for an employee to harass another person because of the person's sex, race, color, religion, national origin, age, disability, sexual orientation, marital status, or other characteristic protected by law. Actions, words, jokes, or comments based on such characteristics will not be tolerated.

Consequently, it is against the policies of Home Again for an employee to sexually harass another person. Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature constitute sexual harassment when: (1) submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment; (2) submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual; or (3) such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or environment.

Any employee who believes that he or she is being unlawfully harassed should immediately contact Home Again Management.

All complaints of harassment will be promptly, thoroughly and confidentially investigated and, where necessary, appropriate corrective action will be taken. Any person found to have unlawfully harassed another employee will be subject to appropriate disciplinary action, up to and including discharge.

Immigration Law Compliance

Home Again does not hire anyone that is not a citizen of the United States, nor is not a noncitizen that is authorized to work in the United States under the Immigration Reform and Control Act of 1986. As a condition of employment, all new and past employees must show valid proof that they are eligible to work in the United States.

Criminal Convictions

Home Again reserves the right not to hire or retain anyone that has been convicted of a criminal offense. Conviction of a crime that involves dishonesty may result in an automatic termination of employment. Before any decision is made, the nature of the crime and circumstances surrounding the conviction will be considered.

Evaluation Period

During the first three (3) months of your employment with Home Again, you will be in an "evaluation period". During this time, Home Again Management will continually evaluate your performance and compatibility with Home Again. Should your performance not meet the standards set forth by Home Again or Home Again Management, your employment will be terminated.

STANDARD EMPLOYMENT PRACTICES

Standards of Conduct

Home Again expects that all employees conduct themselves in a professional and ethical manner at all times whether on facility premises or not. An employee should not conduct business that is unethical in any way, nor should an employee influence other employees to act unethically.

Furthermore, an employee should report any dishonest activities or damaging conduct to Home Again Management.

In the event that you become aware of another employee's behavior or actions, which you believe are inappropriate, illegal, problematic, or in any way inhibit or affect your job performance or the Home Again work environment, you should discuss such behavior or actions with Home Again Management. All reasonable concerns will be promptly, thoroughly and confidentially investigated by Home Again and, where necessary, appropriate corrective action will be taken. You should not discuss such actions or behavior with other Home Again employees. Your discussing such matters with other employees may – in and of itself– create an unacceptable work environment for which you will be held responsible and for which you may be disciplined in accordance with Home Again disciplinary policy.

Personnel File

Home Again keeps personnel files on each of its employees. These are confidential in nature and are managed by Home Again Management. They will not be copied or be removed from the premises unless there is a legitimate business reason to do so.

All employees may review his or her personnel file by contacting Home Again Management during normal business hours (8:00am–4:00pm). No employee may remove any document in his or her personnel file. If any copies of documents are requested by employee, a written request for copies of documents must be given to Home Again Management one (1) week prior to document copies needed.

STUDENT EMPLOYEE

Policy and Procedure

January 14, 2019

POLICY

It is the policy of Home Again Living to hire, train and mentor and retain student employees through a Youth Apprenticeship program as our census, resident and scheduling needs allow. All students under the age of 18 must have their CNA or scheduled test unless otherwise arranged.

PROCEDURE

Through the Youth Apprenticeship programs, we agree to:

- Provide a work-based learning experience for the length of agreement
- Pay the Youth Apprentice for all work performed during the program at no less than minimum wage
- Provide Workers Compensation for the Youth Apprentice for all hours worked
- Instruct the Youth Apprentice in the required competencies provided for this program
- Comply with all applicable state and federal child labor laws
- Ensure that safety instruction will be provided
- Authorize the Mentor to participate in progress reviews scheduled with the Youth Apprentice, Youth Apprentice's parent or guardian and school personnel.

Through the Youth Apprenticeship programs, the student agrees to:

- Disclose schedule needs or discrepancies conflicts upon hire
- Work every other weekend and at minimum 1 shift during every work week on average.
- Follow all Policy and Procedures of Home Again with the exception of the following:
 - Mandation Policy and Procedure – Student may not be Mandated from Sunday – Thursday during the school year or when there is school the following day.

SUBSTANCE ABUSE AND TESTING



November 11, 2013

OVERVIEW

Home Again (“the Home”) is committed to providing a safe, efficient and productive living environment for our residents and working environment for all employees. Consistent with this objective, the Home prohibits the use or possession of illegal drugs and the misuse of prescribed drugs.

Being at work in an impaired state or under the influence of alcohol or illegal drugs, or possessing or using illegal drugs during working time, or while at the Home will result in discipline, up to and including immediate termination from employment. An employee who is taking prescription medication in accordance with a valid prescription is not in violation of this policy. Employees should consult with their physician to ensure that they are able to safely perform their duties while taking the prescription medication. Employees should notify their supervisor when they are taking medication (prescription or over-the-counter) which might adversely affect their job performance or which might pose a threat to safety.

Any employee with a chemical dependency or use problem is urged to seek professional help.

INVESTIGATION POLICY

The Home reserves the right to question employees and all other persons entering and leaving the Home’s property, and to inspect any packages, parcels, purses, handbags, lunch boxes or any other possessions or articles carried to and from the Home. In addition, the Home reserves the right to search any employee’s locker, workspace, office, desk, files, drawers or any other area or article on the Home’s premises. All lockers, workspaces, offices, desks, files, drawers, computers and computer files are the property of the Home and are provided for the use of employees only during their employment with the Home. Inspections may be conducted at any time, without warning, in the Home’s sole discretion; this includes inspection of locked drawers, or areas.

SUBSTANCE ABUSE AND TESTING

TESTING FOR DRUGS AND ALCOHOL

The Home reserves the right to conduct drug and alcohol testing, to the full extent allowed by law, including under the following circumstances:

At Time of Hire

All new employees are subject to testing at time of accepted employment offer.

Random Testing

All employees are subject to random testing during employment at Home. Random testing will be given with no notice to employee and on a completely random basis.

Reasonable Suspicion

An employee may be tested when he/she exhibits behavior or actions indicating possible impairment that could be the result of the use of an illegal drug/substance or alcohol. Upon supervisor recommendation, and with the approval of management, employee behavior will be documented and arrangements will be made for the employee to be transported to an independent testing facility.

Worker Injury

An employee may be tested post-accident for any injury that requires outside medical treatment.

Initial drug testing will be conducted at the Home's expense. If an employee wishes to challenge test results, the costs of any retesting will be the employee's responsibility, unless the first test is found to have yielded a false positive result. Employees subject to Reasonable Suspicion testing will be suspended until such time as the results of testing are received by the Home. Employees will be paid during this time if the test result is negative. Any suspension for a positive test result will be unpaid.

Return to Duty

Any employee who has violated the terms of this Substance Abuse and Testing Policy, or who has tested positive for drugs or alcohol, if allowed to return to work, will be required to pass a drug and alcohol test prior to returning to work, and may be subject to random drug and alcohol testing thereafter.

SUBSTANCE ABUSE AND TESTING

REFUSAL TO SUBMIT TO TESTING

Any employee who fails to cooperate with, or refuses to submit to a drug or alcohol test under this Substance Abuse and Testing Policy will be terminated. For the purposes of this Substance Abuse and Testing Policy, “refuses to submit” includes, but is not limited to, failure to provide a specimen, failure to cooperate with the testing process, failure to report for a collection in a timely manner, failure to provide an adequate specimen without a legitimate medical condition preventing such compliance, or submitting an adulterated or substituted specimen.

Invalid Test Results

No action will be taken against an employee as a result of a positive test result subsequently found to be invalid.

Confidentiality

All medical information will be maintained in a separate medical file with confidentiality and access limited in accordance with applicable law.

TIME KEEPING

Policy

January 8, 2019

Employees are required to use the time clock. Only the employee may clock in and out of a shift. Instructions on how to clock in and out will be part of new employee orientation.

TIME OFF REQUEST

Policy and Procedure

January 7, 2019

POLICY

It is the policy of Home Again to allow staff to request time off as long as it does not interfere with the day-to-day functioning of the facility. Staff will use OnShift to manage their time off requests. If staff is eligible for vacation pay (PTO), they will receive it. Staff not eligible may request off without pay.

PROCEDURE

- Staff must request off using the OnShift scheduling system prior to the posting of the scheduled month in which they are requesting off. Schedulers will try to have the following months schedule posted on or near the 15th of the current month.
- Staff may not request off for their scheduled weekends, it is their responsibility to find coverage for their weekend shifts. As weekends are always the same, every other weekend, staff know when they are going to work throughout the year. Please be sure to communicate with your scheduler if you are wanting time off during your scheduled weekend and having no luck in finding coverage.
- Unless coverage is found, staff should not assume that just because they asked off, they will get it.
- Each Community may handle the exact details of time off a little differently, if you have any questions, please reach out to your scheduler for details.

Policy and Procedure

July 1, 2019

POLICY

It is the policy of Home Again to eliminate the use of cell phones, watches, laptops, tablets and other electronic devices. The devices must be kept in the lockers provided on site. The devices cannot be stored in the staff working areas. The devices may be accessed during work breaks but at this time only. Devices cannot be carried while working for any reason. Watches may be worn for health purposes only. If observed using a watch for any reason other than a documented health requirement, a corrective action may occur. Staff are not to text the On-Call phone for any reason with their personal phone.

PROCEDURE

Staff is not allowed to carry or use any of the above devices around the facility or in any resident room.

Any staff that is noted to be using the above devices under any circumstance will result in the following:

- First offense: verbal warning
- Second offense: written warning
- Third offense: possible termination

VISITORS TO EMPLOYEES

Policy

January 8, 2019

Staff may not have regular visitors when working shift. If a visitor is dropping off something to employee, the employee should meet visitor in front entry area. If employee is having repeat visitors during shift, disciplinary action up to and including termination will occur.

WALKIE & PENDANT FOB

Policy and Procedure

April 24, 2018

POLICY

It is the policy of Home Again Living to ensure that staff can be contacted at any point by a Resident or fellow staff member. Therefore, all staff members must have a walkie on them at all times. While working a shift, each staff member needs to sign out a walkie during each shift. The sign out sheets will be in each chart room, please be sure to sign out a walkie as you take one for your shift. Please do the same for the pendant fob sign out. This is very important at all times in case of emergency situations.

PROCEDURE

If staff member losses a pendant fob, the staff member will be charged \$10. If the staff member losses a walkie or causes damage to a walkie, the specified staff member will be charged for the price of the item.

WORKERS COMPENSATION & RETURN TO WORK PROGRAM



January 14, 2019

It is the policy of Home Again to provide a Return to Work Program that supports the practice of bringing injured employees back to work, as soon as they are medically able, to a position in our organization compatible with any physical restrictions they may have. We believe this practice serves the best interests of our employees and organization.

Workers Compensation

Home Again requires that all employees report job-related accidents or injuries to Management immediately, whether the accident occurred on or off facility premises. Failure to report an injury, regardless of how minor, could result in difficulty with employees claim.

All workers' compensation claims will be paid directly to employees and employees are expected to return to work immediately upon release of doctor. Home Again will attempt to make any reasonable accommodations needed but does not guarantee it. Each situation will be reviewed on a case-by-case situation by Home Again Management.

If you are injured at work, report the injury to Management immediately—no matter how minor the injury is. You must also fill out a First Report of Injury form, which is available upon request from Management and hand in immediately after the injury. Management will review,

WORKERS COMPENSATION & RETURN TO WORK PROGRAM

discuss, and investigate information listed on First Report of Injury form and situation where injury occurred. Management will report it to our organization's workers' compensation claims coordinator within 24 hours of receiving notification and completed form. Any questions concerning workers' compensation should be directed to Management.

Your supervisor and/or claims coordinator will help arrange for medical treatment following an injury. Prompt, quality medical treatment can be assured using the individuals primary care clinic.

Current positions may be modified to fit the medical limitations of injured employees by modifying workstations, altering specific tasks or working reduced hours. If this is not possible, temporary transitional jobs may be made available through a temporary assignment. Examples of these transitional jobs or tasks include:

- Part-time or limited work hours based on medical restrictions.
- Cook, Cleaning, or RA work based on physical requirements of medical restrictions.
- Same position but modified to meet medical restrictions.

Management and Staff will review and complete the Return to Work Restriction Agreement (attached to this Policy). This return-to-work program is an important part of our organization's commitment to manage work-related injuries in a way that's best for our employees and for this organization.

RETURN TO WORK RESTRICTION AGREEMENT

Employee Name: _____ Date: _____

Position: _____ Date of Injury: _____

Supervisor: _____ Injury: _____

Restrictions are attached from Dr. _____

Dated on: _____

Restrictions are in effect through: _____

(Note: It is your responsibility to obtain an updated restriction form from your doctor when your current restrictions expire. If you do not, you will be assumed to be able to return to full-duty work once current restrictions expire.)

I hereby acknowledge that I have been notified of and understand the following:

- ☐ The return-to-work recommendations as outlined by the treating physician apply to both work and home life and are not to be exceeded.
- ☐ If asked to work outside of these restrictions, immediately contact:
- ☐ Home Again Living, Inc. will adhere to the following restrictions for the above named employee and assure that work performed will be in consistent compliance of limitations outlined by the physician.

Employee Name and Date

Management Name and Date

 Home Again

Living. Assisted.



Resident

RCAC HOURS OF SERVICE

Policy and Procedure

October 5, 2014

POLICY

It is the policy of Home Again Assisted Living to provide a method to track Hours of Service as required by DHS 89.24.

PROCEDURE

Using the assessment and Risk Agreement form we will track the number of hours based on the level of care each Tenant requires. This will only be tracked when an individual is receiving cares provided by Home Again Assisted Living as documented in their Risk Agreement. No tenant will receive more than 28 hours of supportive, personal, and nursing services each week.

RCAC TENANT GRIEVANCE

Procedure

July 18. 2017

If a Tenant and or legal representative, family member has a concern or problem with a matter concerning a Tenant at the facility hopefully they will feel comfortable with bringing it to the attention of the staff and/or Management. If they feel the matter has not been handled correctly or has not been resolved, the person can file a formal grievance.

Filing a Grievance

- The party shall put in writing a statement describing his or her grievance to the facility manager. Please be specific.
- An investigation will be conducted concerning this grievance and its cause. Any person investigation the facts associated with a grievance shall not have had any involvement in the issue leading to the grievance.
- Any form of coercion to discourage or prevent any individual from filing a grievance or in retaliation for having filed a grievance is prohibited.
- If it is determined that a scheduled meeting is needed, one will be scheduled for all those involved.
- Within seven (7) days, if possible, a solution to this problem shall be determined and put forth.
- The party involved will receive a written summary of the grievance, the findings and the conclusions and any action taken to the tenant or the tenant's legal representative and the tenant's case manager, when applicable. A copy of this written summary will be placed in the tenant's office file.
- If the party remains unsatisfied with the results and or outcome, the grievance may be filed with other outside sources listed below. The facility is required to assist tenants with the grievance procedure.

RCAC TENANT GRIEVANCE

Department of Health Services

Division of Quality Assurance
Southern Regional Office –
Bureau of Assisted Living
P.O. Box 7940
Madison, WI 53707-7940
Office: 608-264-9888
Fax: 608-264-9889
ALRD: Alfred Johnson, 608-266-8598
To use the toll free number to file a
complaint dial 1-800-642-6552.

State of Wisconsin – Board on Aging & Long Term Care

1402 Pankratz Street, Suite 111
Madison, Wisconsin 53704
1-800-815-0015 Ombudsman Program/
Volunteer Program
1-800-242-1060 Medigap Helpline
1-855-677-2783 Medigap Part D &
Prescription Drug Helpline
Fax: 1-608-246-7001
Email: BOALTC@Wisconsin.Gov
Website: <http://longtermcare.wi.gov>

Disability Rights of Wisconsin, Inc.

Toll Free Number for Consumers and Family:
800-928-8778
131 W. Wilson St., Suite 700
Madison, WI 53703
608-267-0214
Fax: 608-267-0368
Toll Free: 800-928-8778*

Coalition of Wisconsin Aging Groups (CWAG)

CWAG Toll Free Number: 800.488.2596

- Elder Law Center
608.224.0606 or 800.488-2596
John Hendrick – ext. 328
Director, Legal and Program Services
- Elder Financial Empowerment Project &
Identity Theft Coalition Program
608.224.0606 or 800.488.2596
John Hendrick – ext. 328
Governmental Affairs Director
Elder Financial Empowerment Project
Director – Attorney
- Wisconsin SMP (Senior Medicare Patrol)
608.224.0606 or 800.488.2596
Kevin Brown – ext. 317 direct: 608.221.6101
Wisconsin SMP Project Director
Empowering Seniors to Prevent
Healthcare Fraud
Judy Steinke – ext. 342
CIRS-A (Certified Information and
Referral Specialist – Aging)
Wisconsin SMP Volunteer Coordinator
Will Armstrong – ext. 311 direct:
608.221.6121
SMP Capacity Building Grant Manager/Trainer

Alzheimer's & Dementia Alliance of Wisconsin

517 North Segoe Rd., Suite 301
Madison, WI 53705
Phone: 608.232.3400
Toll-free: 888.308.6251
Fax: 608.232.3407

I have read and understand the above:

Tenant or Legal Representative

Date

If Legal Representative, Legal Basis of Authority:

RCAC TENANT'S RIGHTS

We respect and support our tenants in exercising their rights.

October 30, 2017

In addition to the required DHS 89.33 Tenant Rights, listed below, Home Again Assisted Living, Inc. feels that every Tenant has the right to be treated with courtesy, respect, and have full recognition of their rights.

DHS 89.34 Rights of tenants. A tenant of a residential care apartment complex shall have all the rights listed in this section. These rights in no way limit or restrict any other rights of the individual under the U.S. Constitution, civil rights legislation or any other applicable statute, rule or regulation. Tenant rights are all of the following:

- (1) **COURTESY AND RESPECT.** To be treated with courtesy, respect and full recognition of the tenant's dignity and individuality by all employees of the facility and all employees of service providers under contract to the facility.
- (2) **PRIVACY.** To have privacy in his or her independent apartment and when receiving supportive, personal or nursing services.
- (3) **SELF-DIRECTION.** To make reasonable decisions relating to activities, daily routines, use of personal space, how to spend one's time and other aspects of life in the residential care apartment complex.
- (4) **MANAGEMENT OF FINANCIAL AFFAIRS.** To manage his or her own financial affairs unless the tenant delegates, in writing, responsibility for financial management to someone of the tenant's choosing or the tenant is adjudicated incompetent, in which case the guardian shall be responsible.
- (5) **SERVICE CHOICE.** To choose which services are included in the service agreement, including the right to refuse services provided that the refusal would not endanger the health or safety of the other tenants.
- (6) **CHOICE OF HEALTH CARE PROVIDERS.** To the facility's noninterference with the tenant's choice of his or her physician and providers of other medical, mental health and pharmaceutical services. A tenant shall not be required to use medical, mental health or pharmaceutical providers who are employed by or affiliated with the facility or to whom the tenant is referred by facility staff. A tenant's choice of providers of supportive, personal and nursing services from providers other than the residential care apartment complex is subject to the requirements of s. DHS 89.24 (2) (b).
- (7) **FURNISHINGS AND POSSESSIONS.** To furnish his or her independent apartment and to maintain personal possessions as space permits as long as the tenant does not unreasonably interfere with the other tenants' choices or endanger the health or safety of the other tenants.
- (8) **ASSOCIATION.** To receive visitors, meet with groups or participate in activities of the tenant's choice, including organizing and participating in tenant or family councils or groups provided that the health or safety of the other tenants is not endangered.
- (9) **MAIL.** To receive and send sealed, unopened mail, including packages. The residential care apartment complex shall give mail to tenants on the day it is received or as soon as possible thereafter.

RCAC TENANT'S RIGHTS

(10) TELEPHONE. To have a private telephone properly installed in his or her independent apartment.

(11) RELIGION. No tenant may be required to engage in any religious activity.

(12) CONFIDENTIALITY OF RECORDS. To have his or her medical, personal and financial records kept confidential consistent with all applicable federal and state statutes, rules and regulations. For the purposes of registration, certification and administration, staff of the residential care apartment complex, the department, and any county department of aging unit designated to administer the Medicaid waiver for those tenants whose services are paid for under s. 46.27 (11) or 46.277, Stats., shall have access to a tenant's records without the tenant's consent, but may not disclose the information except as permitted by law.

(13) ACCESS TO RECORDS. A tenant or tenant's designated representative may inspect, copy and challenge the accuracy of the tenant's records.

(14) DISCLOSURE OF PERSONAL INFORMATION. To have necessary discussion by facility employees regarding one's physical, mental or medical condition, services, payment sources and other personal affairs conducted discreetly, and to not have facility employees, staff or any service provider under contract with the facility indiscreetly disclosing personal information about oneself to other tenants.

(15) RECEIPT OF SERVICES. To receive services consistent with the service agreement and risk agreement.

(16) MEDICATIONS. Except as provided for in the service agreement or risk agreement, to have the facility not interfere with the tenant's ability to manage his or her own medications or, when the facility is managing the medications, to receive all prescribed medications in the dosage and at the intervals prescribed by the tenant's physician and to refuse a medication unless there is a court order.

(17) SAFE ENVIRONMENT. To a safe environment in which to live.

(18) FREEDOM FROM ABUSE. To be free from physical, sexual or emotional abuse, neglect or financial exploitation or misappropriation of property by the facility, it [MISSING SENTENCE]

The above information regarding the Tenant's rights has been reviewed with me by Facility staff.

Tenant's Signature: _____ **Date:** _____

Print Name: _____

Tenant's Legal Representative's Signature: _____ **Date:** _____

Legal Representative's Printed Name and Legal Basis of Authority: _____

Tenant's Family Member's Signature: _____ **Date:** _____

Print Name: _____

ABUSE INVESTIGATION

Policy and Procedure

April 7, 2011

POLICY

It is the policy of Home Again to ensure that all alleged violations involving mistreatment, neglect, or abuse, including injuries of unknown source, and misappropriating of Resident property, are reported immediately to Management. Management will promptly investigate any reported claims.

PROCEDURE

Should an incident or suspected incident abuse, neglect, or injury of an unknown source be reported, Management will immediately investigate the incident. Management will complete and submit the appropriate Bureau of Quality Assurance documentation.

An internal investigation will be conducted using the following:

- Review the completed Grievance/Complaint Report
- Interview the person(s) reporting the incident
- Interview any witnesses
- Interview the Resident
- Discuss Resident's current mental status with their physician.
- Interview staff who have had contact with the Resident during the period of alleged incident
- Interview family members, visitors
- Review all events leading up to the incident.

Each interview will be conducted separately and in a private location

Should a person disclose information that may be self-incrimination that individual will be informed of his/her rights to terminate the interview until such time his/her rights are protected (legal counsel).

Witness reports will be in writing, signed and dated.

The Ombudsmen may be notified regarding the abuse investigation being conducted.

While investigating the incident any accused employee will be denied unsupervised access to the Resident.

ABUSE INVESTIGATION

Management will keep the resident and his/her family or designee informed of the progress of the investigation. Upon completion of the investigation the results of the investigation and corrective action will be provided within five days of the completion of the incident.

Upon completion of the internal investigation the following will be mailed to the bureau of Quality Assurance within 5 business days from the initial report.

Should the investigation substantiate that Resident abuse occurred, Management will report the findings to the local police department, the Ombudsman, the Bureau of Quality Assurance/state licensing agency, and others as may be required within 5 days of the results of the investigation.

Should the investigation reveal that a false report was made, investigation shall cease. Residents, family members, Ombudsmen, state agencies will be notified of the findings.

ALCOHOL SERVING

Policy and Procedure

December 21, 2017

POLICY

It is the policy of Home Again Living to provide alcohol to our Residents, free of charge, based on approval of the Resident's primary physician.

PROCEDURE

- It is the procedure of Home Again Living to offer a 2-drink maximum to Residents whom are approved for alcohol consumption.
- Family may attend Home Again Living community events that have alcohol and it will be free of charge for these individuals as well. However, there will be a 2 drink maximum for these individuals as well and everyone must be at least 21 years of age.
- Home Again Living has the right to deny alcohol to any Resident, family member or visitor.

ESSENTIAL OIL THERAPY

Policy and Procedure

May 5, 2017

POLICY

It is the policy of Home Again Assisted Living to provide increased comfort and alleviation of symptoms through the safe and effective usage of plant essential oils.

PROCEDURE

- Staff may use and/or instruct the Resident in the use of essential oils for increased comfort and symptom management.
- A physician order is not required for the use of essential oils. Staff must document in the resident chart when essential oils are used and the outcome.
- Only Management supplied oils may be used. The Community Director, Medical Director and Medical Manager will assess the resident for symptoms and offer the appropriate oil. (See chart below)
- The use of essential oils are NEVER intended for oral ingestion. Essential oils at Home Again can only be applied through an inhalation, carrier oil or lotion method.
- Use of essential oils and type will be documented in the Resident's ISP.

INDICATIONS	ESSENTIAL OIL	APPLICATION
Anxiety	Lavender, Lime, Cypress, Basil, Sweet orange oil, Bergamot, Lemon, Cedarwood	Inhalation, carrier oil, lotion, diffuser
Paranoia	Clary Sage, Juniper,	Inhalation, carrier oil, lotion, diffuser
Insomnia	Lavender,	Inhalation, carrier oil, lotion, diffuser
Fatigue	Peppermint, Basil,	Inhalation, carrier oil, lotion, diffuser
Memory	Rosemary, Peppermint	Inhalation, carrier oil, lotion, diffuser

FEEDING TUBE



November 1, 2016

It is the policy of Home Again Assisted Living not to care for and/or admit Residents who have feeding tubes. Based on the nursing complexity of feeding tubes and the possible complications that arise from them, Home Again Assisted Living does not admit, retain, or care for any type of feeding tubes, all variations. Using the Guidelines for Registered Nurse Delegation, Medicare Skilled Care Definitions, Medicare Benefit Policy Manual and the local consultation of UW Hospital and Clinics Physicians and Nurse Practitioners, and Agrace Hospice, it was determined that non-medically licensed staff are not able to handle or manage feeding tubes and that feeding tubes are considered a skilled nursing care.

Should a Resident require a feeding tube while residing at Home Again Assisted Living, a discharge notice will be issued due to the care exceeding what the community is able to provide per our policy.

References

Medicare Benefit Policy Manual:

<https://www.cms.gov/Regulations-and-Guidance/Guidance/Manuals/downloads/bp102c08.pdf>

30.2.2 – Principles for Determining Whether a Service is Skilled (Rev. 179, Issued: 01-14-14, Effective: 01-07-14, Implementation: 01-07-14) A3-3132.1.B, SNF-214.1.B • If the inherent complexity of a service prescribed for a patient is such that it can be performed safely and/or effectively only by or under the general supervision of skilled nursing or skilled rehabilitation personnel, the service is a skilled service; e.g., the administration of intravenous feedings and intramuscular injections; the insertion of suprapubic catheters; and ultrasound, shortwave, and microwave therapy treatments.

CBRF HOURS OF SERVICE

Policy and Procedure

October 30, 2017

POLICY

It is the policy of Home Again Assisted Living to provide a method to track Hours of Service as required by DHS 83.

PROCEDURE

Using the assessment and Risk Agreement form we will track the number of hours based on the level of care each Resident requires. This will only be tracked when an individual is receiving cares provided by Home Again Assisted Living as documented in their Risk Agreement.

INVESTIGATION OF INJURIES OF UNKNOWN SOURCE

Policy and Procedure

July 25, 2017

POLICY

Home Again will ensure that all alleged violations involving mistreatment, neglect, or abuse including injuries of unknown source and misappropriation of Resident property are investigated.

PROCEDURE

The Manager will report any suspected injury of unknown source to the state agency by using the Caregiver Misconduct Incident Report form.

An injury of unknown source should be classified when one of the following conditions are met:

1. The source of injury was not observed by any person or the source of the injury could not be explained by the resident and;
2. The injury is suspicious because of the extent of the injury or the location of the injury or the number of injuries observed at a particular point in time, or the incidence of injuries over time.

Procedure

1. All injuries of unknown origin must be reported to the Manager or on call emergency contact.
2. The investigation is conducted by Management of Home Again.
3. Upon investigation, if the injury is determined to be explainable and documentation of the explanation is in Resident Chart, family and/or legal representative will be informed verbally and charted.
4. If it is determined that suspected or actual mistreatment, abuse or neglect has taken place. Management will:
 - a. Any Individual(s) suspected of mistreatment, abuse, or neglect of a Resident must be reassigned or suspended immediately without pay pending further investigation.
 - b. Prompt careful documentation of witness(es) is essential in helping to clarify issues and expedite the investigation. Witness (es) should be interviewed separately.
 - c. Witness(es) should be reminded not to discuss the events with anyone until the investigation is complete.
 - d. Information collected must be kept confidential as possible.

Policy and Procedure

January 22, 2019

POLICY

It is the policy of Home Again Assisted Living Inc. that within 30 days after admission and based on the assessment, the CBRF shall develop a comprehensive individual service plan for each resident. The individual service plan shall include all of the following Per DHS 83.35:

- Identify the resident's needs and desired outcomes.
- Identify the program services, frequency and
- Establish measurable goals with specific time limits for attainment.
- Specify methods for delivering needed care and who is responsible for delivering the care.

PROCEDURE

Development

The CBRF shall involve the resident and the resident's legal representative, as appropriate, in developing the individual service plan and the resident or the resident's legal representative shall sign the plan acknowledging their involvement in, understanding of and agreement with the plan. If a resident has a medical prognosis of terminal illness, a hospice program or home health care agency, shall, in cooperation with the CBRF, coordinate the development of the individual service plan and its approval.

The resident's case manager, if any, and any health care providers, shall be invited to participate in the development of the service plan.

Implementation

The CBRF shall implement and follow the individual service plan as written.

INDIVIDUAL SERVICE PLAN/ADMISSION AND CHANGE IN CARE

Individual Service Plan Review

Bi-yearly or when there is a change in a resident's needs, abilities or physical or mental condition, the individual service plan shall be reviewed and revised based on the assessment. All reviews of the individual service plan shall include input from the resident or legal representative, case manager, resident care staff, and other service providers as appropriate. The resident or resident's legal representative shall sign the individual service plan, acknowledging their involvement in, understanding of and agreement with the individual service plan.

Under the direction of the Medical Director the facility Medical Manager will ensure that appropriate signatures are captured, and an updated assessment is complete. If a rate change results the Community Director will ensure that the resident, or legal representative are available for a Care Conference to discuss the updated cares, and rate change.

Documentation of Review

The CBRF shall document any changes made as a result of the comprehensive individual service plan review. Community Director and Medical Manager must ensure they provide and get required signatures on the following:

- Initial ISP
- Updated ISP
- Rate Change Letter
- Assessment form

Electronic Documentation

Home Again utilizes Electronic Documentation for charting and the usage and creation of ISP. When it is so documented that a change is made the facility's Medical Manager will ensure that the ISP is printed, signed, uploaded to ECP and a copy saved in the Admission Folder kept in the Community Directors office.

MEDICATION PROGRAM

Policy and Procedure

January 14, 2019

POLICY

It is the policy of Home Again to provide medications to Residents as stated in DHS 83.37 and under the guidance of Resident's Practitioner and under the direction of facility Medical Manager.

PROCEDURE

- All medications will be requested, in writing, by Resident practitioner's order and kept on record.
- All medications will be provided and labeled by O'Connells Pharmacy in cassette packaging.
- Facility Medical Manager/Medical Director and pharmacy will provide a medication review within 30 days of admit and annually, or as medication regiment changes.
- All medications will be listed on the medication data sheet and stored in the Medication Binder.
- In the event a Resident would like to self-administer medications, Medical Manager or Medical Director will determine, with the Resident, the best way to meet the request. If it is determined that the Resident can safely self-administer based on the facility self-administer evaluation form, a lock box will be provided to store medications. Whether or not that lock box is used is based on the Resident's decision.
- When a medication is discontinued or unused, it will be returned to O'Connell's Pharmacy or destroyed.
- For any psychotropic medications, Medical Manager or Medical Director will oversee and work with pharmacy and practitioner as stated in DHS 83.37(h).
- For any schedule II medications, facility will maintain a proof-of-record log per DHS83.7.3 (j).
- In the event of a medication error, Medical Manager or Medical Director will report to practitioner immediately.
- In the event of Resident refusal of medication for 2 consecutive dates, Medical Manager or Medical Director will notify practitioner immediately.
- Medication information, including side effects, will be kept on file in Medication Information binder.
- Medication administration will be supervised or delegated by facility Medical Manager or Medical Director.
- Staff to hand Resident medication and watch as medication is swallowed.
- All medications will be kept in a locked and secured area in cassette packs or original containers.

REPORTING RESIDENT ABUSE, NEGLECT AND MISAPPROPRIATION

Policy and Procedure

March 21, 2011

POLICY

It is the policy of Home Again not to condone Resident abuse by anyone, including staff members, physicians, consultants, volunteers, and staff of other agencies, family members, legal guardian, other residents, friends, or other individuals.

PROCEDURE

1. Employees must report any suspected abuse or incidents of abuse to the Manager or on call emergency contact, as soon as noted.
2. If such incidents occur or are discovered after hours of management on site, the Manager is to be called at home and information of such incident.
3. When an alleged or suspected case of mistreatment, neglect, injuries of unknown source, or abuse is reports, the Manager will enact the procedures as outlined in the abuse Investigation Policy and Procedure.
4. All personnel, residents, family members, visitors are encouraged to report incidents of resident abuse or suspected abuse. Such reports may be made without fear of retaliation from facility or staff.
5. When an incident is suspected or determined, such incident must be reported to Management regardless of the time lapse since the incident occurred.
6. Upon receiving information concerning a report of abuse, Management will monitor the resident's emotions concerning the incident as well as the Residents reaction to his or her involvement in the investigation.
7. All phases of the investigation shall be kept confidential in accordance with the facilities policy governing confidentially of protected health information.
8. Any person who has knowledge or reason to believe that a resident has been a victim of mistreatment, abuse, neglect, or any other criminal offense must report the offence. Failure to report such may result in legal/criminal actions being filed against the individual withholding such information.

CATHETER CARE

Policy and Procedure

March 1, 2016

POLICY

It is the policy of Home Again Assisted Living to assist when catheter care is required for the health and wellbeing of the Resident. Home Again Assisted Living will never put in, manage, remove, change any part other than the catheter bag, or problem solve any issues related to catheter care.

PROCEDURE

- Home Again will never manage the actual care of any catheter.
- Home Again staff will empty catheter bag at least once per 8 hours, more when needed.
- Home Again staff will not record amount of urine in catheter bag unless specified by managing physician.
- Home Again staff will only be allowed to change the bag from “day” bag to “overnight” bag or from “overnight” bag to “day” bag utilizing standard clean precautions.
- This procedure must be delegated by the community RN.

RESIDENT GRIEVANCE

Procedure

July 18, 2017

If a Resident and or legal representative, family member has a concern or problem with a matter concerning a Resident at the facility hopefully they will feel comfortable with bringing it to the attention of the staff and/or Management. If they feel the matter has not been handled correctly or has not been resolved, the person can file a formal grievance.

Filing a Grievance

- The party shall put in writing a statement describing his or her grievance to the facility manager. Please be specific.
- An investigation will be conducted concerning this grievance and its cause. Any person investigation the facts associated with a grievance shall not have had any involvement in the issue leading to the grievance.
- Any form of coercion to discourage or prevent any individual from filing a grievance or in retaliation for having filed a grievance is prohibited.
- If it is determined that a scheduled meeting is needed, one will be scheduled for all those involved.
- Within seven (7) days, if possible, a solution to this problem shall be determined and put forth.
- The party involved will receive a written summary of the grievance, the findings and the conclusions and any action taken to the Resident or the Resident's legal representative and the Resident's case manager, when applicable. A copy of this written summary will be placed in the Resident's office file.
- If the party remains unsatisfied with the results and or outcome, the grievance may be filed with other outside sources listed below. The facility is required to assist Residents with the grievance procedure.

RESIDENT GRIEVANCE

Department of Health Services

Division of Quality Assurance
Southern Regional Office –
Bureau of Assisted Living
P.O. Box 7940
Madison, WI 53707-7940
Office: 608-264-9888
Fax: 608-264-9889
ALRD: Alfred Johnson, 608-266-8598
To use the toll free number to file a
complaint dial 1-800-642-6552.

State of Wisconsin – Board on Aging & Long Term Care

1402 Pankratz Street, Suite 111
Madison, Wisconsin 53704
1-800-815-0015 Ombudsman Program/
Volunteer Program
1-800-242-1060 Medigap Helpline
1-855-677-2783 Medigap Part D &
Prescription Drug Helpline
Fax: 1-608-246-7001
Email: BOALTC@Wisconsin.Gov
Website: <http://longtermcare.wi.gov>

Disability Rights of Wisconsin, Inc.

Toll Free Number for Consumers and Family:
800-928-8778
131 W. Wilson St., Suite 700
Madison, WI 53703
608-267-0214
Fax: 608-267-0368
Toll Free: 800-928-8778*

Coalition of Wisconsin Aging Groups (CWAG)

CWAG Toll Free Number: 800.488.2596

- Elder Law Center
608.224.0606 or 800.488-2596
John Hendrick – ext. 328
Director, Legal and Program Services
- Elder Financial Empowerment Project &
Identity Theft Coalition Program
608.224.0606 or 800.488.2596
John Hendrick – ext. 328
Governmental Affairs Director
Elder Financial Empowerment Project
Director – Attorney
- Wisconsin SMP (Senior Medicare Patrol)
608.224.0606 or 800.488.2596
Kevin Brown – ext. 317 direct: 608.221.6101
Wisconsin SMP Project Director
Empowering Seniors to Prevent
Healthcare Fraud
Judy Steinke – ext. 342
CIRS-A (Certified Information and
Referral Specialist – Aging)
Wisconsin SMP Volunteer Coordinator
Will Armstrong – ext. 311 direct:
608.221.6121
SMP Capacity Building Grant Manager/Trainer

Alzheimer's & Dementia Alliance of Wisconsin

517 North Segoe Rd., Suite 301
Madison, WI 53705
Phone: 608.232.3400
Toll-free: 888.308.6251
Fax: 608.232.3407

I have read and understand the above:

Tenant or Legal Representative

Date

If Legal Representative, Legal Basis of Authority:

RESIDENT PROTECTION – ABUSE INVESTIGATION

Policy and Procedure

March 21, 2011

POLICY

It is the policy of Home Again to protect the Resident from harm during an investigation of abuse allegations. During the investigation, residents will be protected from harm by the following measures.

PROCEDURE

1. Employee(s) accused of participating in the alleged abuse will be immediately reassigned to duties that do not involve resident contact or will be suspended without pay until the findings of the investigation has been reviewed by management.
2. If the alleged abuse involves Resident's family member, or visitor, outside agency, or volunteer, such person will not be permitted to have unsupervised visits with the Resident.
3. If the alleged abuse involved another resident, the accused resident's representative and physician shall be made aware of the alleged abuse incident and the accused resident will not be permitted to make visits to other resident rooms unattended. If necessary, the accused resident's family members may be required to provide assistance in meeting this requirement.

RESIDENT RIGHTS

We respect and support our residents in exercising their rights.

October 30, 2017

In addition to the required DHS 83.32 Resident Rights, listed below, Home Again Assisted Living, Inc. feels that every Resident has the right to be to be treated with courtesy, respect, and full recognition of the Resident's dignity and individuality. The required DHS 83.32 Resident Rights are provided here.

(3) RIGHTS OF RESIDENTS. Any form of coercion to discourage or prevent a resident or the resident's legal representative from exercising any of the rights under this subchapter is prohibited. Any form of retaliation against a resident or the resident's legal representative for exercising any of the rights in this subchapter, or against an employee or any other person who assists a resident or the resident's legal representative in the exercise of any of the resident rights in this subchapter, is prohibited. The rights established under this subsection do not apply to a resident in the legal custody of a government correctional agency, except as determined by a government correctional agency. In addition to the rights under s. 50.09, Stats., each resident shall have all of the following rights. s. 50.09 Stats, are available upon request of Management:

(a) Communications. Make and receive telephone calls within reasonable limits and in privacy. Home Again Assisted Living, Inc. shall provide a non-pay telephone for resident use. Home Again Assisted Living, Inc. may require residents who make long distance calls to do so at the resident's own expense. Residents may use facility phone any time they wish.

(b) Confidentiality. Confidentiality of health and personal information and records, and the right to approve or refuse release of that information to any individual outside Home Again Assisted Living, Inc., except when the resident is transferred to another facility or as required by law or third-party payment contracts and except as provided in s. 146.82 (2) and (3), Stats. Home Again Assisted Living, Inc. shall make the record available to the resident or the resident's legal representative for review. Copies of the record shall be made available within 30 days, if requested in writing, at a cost no greater than the cost of reproduction.

(c) Free from labor. Not be required by the Home Again Assisted Living, Inc. to perform labor that is of any financial benefit to Home Again Assisted Living, Inc. Home Again Assisted Living, Inc. may require personal housekeeping of the resident without compensation if it is for therapeutic purposes and is part of, and clearly identified in the resident's individual service plan.

(d) Freedom from mistreatment. Be free from physical, sexual and mental abuse and neglect, and from financial exploitation and misappropriation of property.

(e) Freedom from seclusion. Be free from seclusion.

RESIDENT RIGHTS

- (f) Freedom from chemical restraints. Be free from all chemical restraints.
- (g) Freedom from physical restraints. Be free from physical restraints except upon prior review and approval by the department upon written authorization from the resident's primary physician or advanced practice nurse prescriber as defined in s. N 8.02 (2). The department may place conditions on the use of a restraint to protect the health, safety, welfare and rights of the resident.
- (h) Receive medication. Receive all prescribed medications in the dosage and at intervals prescribed by a practitioner. The resident has the right to refuse medication unless the medication is court ordered.
- (i) Prompt and adequate treatment. Receive prompt and adequate treatment that is appropriate to the resident's needs.
- (j) Treatment options. Participate in the planning of care and treatment, be fully informed of care and treatment options and have the right to refuse any form of care or treatment unless the care or treatment has been ordered by a court.
- (k) Self-determination. Make decisions relating to care, activities, daily routines and other aspects of life which enhance the resident's self-reliance and support the resident's autonomy and decision making.
- (L) Least restrictive environment. Have the least restrictive conditions necessary to achieve the purposes of the resident's admission. Home Again Assisted Living, Inc. may not impose a curfew, rule or other restriction on a resident's freedom of choice.
- (m) Recording, filming, photographing. Not be recorded, filmed or photographed without informed, written consent by the resident or resident's legal representative. Home Again Assisted Living, Inc. may take a photograph for identification purposes. The department may photograph, record or film a resident pursuant to an inspection or investigation under s. 50.03 (2), Stats., without his or her written informed consent. Home Again Assisted Living, Inc. will provide to each Resident a Consent to Photograph form in which they may select the options in which they want photographs taken.
- (n) Safe environment. Live in a safe environment. Home Again Assisted Living, Inc. shall safeguard residents from environmental hazards to which it is likely the residents will be exposed, including both conditions that are hazardous to anyone and conditions that are hazardous to the resident because of the residents' conditions or disabilities.

RESIDENT RIGHTS

Residents Have the Following Rights

- Right to be treated with courtesy, respect, and full recognition of the resident's dignity and individuality.
- Right to private and unrestricted communications with family, medical personnel, attorney, and public officials.
- Right to send and receive mail and have private visits.
- Right to confidentiality of health and personal information and records, and the right to approve or refuse release of that information to any individual outside CBRF, except as specified in DHS 83.32(3)(b).
- Right for physical and emotional privacy in treatment, living arrangements, and caring for personal needs, including but not limited to privacy of visits by spouse, health care privacy and confidentiality of health and personal records.
- Right to access a telephone for private communications and to make and receive phone calls within reasonable limits and in privacy.
- Right to be free from physical, sexual, and mental abuse and neglect, and from financial exploitation and misappropriation of property.
- Right to be free from seclusion.
- Right to live in a safe environment, and to be safeguarded from environmental hazards.
- Right to be free from all chemical restraints.
- Right to be free from physical restraints, except upon review and approval by the Department of Health Services upon written authorization for the Residents primary physician or advanced practice nurse prescriber.
- Right to be free from mental and physical abuse, and free from chemical and physical restraints except as described in S.50.09(1)(k), Stats.
- Right to have the least restrictive conditions necessary to achieve the purposes of the Resident's admission.
- Right not to be required by the CBRF to perform labor that is of any financial benefit to the CBRF, or to perform services for the facility that are not included for therapeutic purposes in the Resident's plan of care.
- Right to present grievances on behalf of the resident or others, and to join with other within or outside the facility to work for improvements in resident care.
- Right to receive all prescribed medications in the dosage and at intervals prescribed by a practitioner. The Resident has the right to refuse medication unless the medication is court ordered.
- Right to use licensed, certified or registered provider of health care and pharmacist of the Resident's choice.

RESIDENT RIGHTS

- Right to receive prompt and adequate treatment that is appropriate to the Resident's needs, within the capacity of the facility.
- Right to participate in the planning of care and treatment, be fully informed of care and treatment options and have the right to refuse any form of care or treatment unless ordered by a court.
- Right to make decisions related to care, activities, daily routines and other aspects of life which enhance the Resident's self-reliance and support the Resident's autonomy and decision-making.
- Right not be recorded, filmed or photographed without informed, written consent by the Resident or the Resident's legal representative (except for photography for identification purposes, or by the Department of Health Services as part of an inspection or investigation).
- Right to retain and use personal clothing and effects and to retain, as space permits, other personal possessions in a reasonably secure manner.
- Right to participate in social, religious and community activities at Resident's discretion, unless medically contraindicated and documented in the resident's record.
- Right to manage their own financial affairs, unless the Resident delegates that responsibility in writing to the CBRF or another person, and the CBRF or the other person accepts that responsibility.
- Right to be fully informed, in writing, prior to or at the time of admission, of all services included in the per diem rate, other services available, and the charges for such services
Right to be informed in writing of changes in services or charges during the resident's stay.
- Right to be transferred or discharged, and to be given reasonable advance notice of any planned transfer or discharge and an explanation of the need for and alternatives to transfer or discharge (This section includes other related transfer and discharge rights.)
[S.50.09(1)(j),Stats]

SAFE RESIDENT HANDLING

Policy and Procedure

October 30, 2017

POLICY

It is the policy of Home Again Assisted Living to provide safe, quality care for each of its residents, as well as a safe work environment for its employees. Our goal is to maintain resident dignity and quality of care while safeguarding the health and safety of residents and staff members. The policy describes methods of ensuring safe transfer of residents, and addresses the roles of each member of the resident care team.

PROCEDURE

Lifting, Transferring, and Repositioning Residents

All resident transferring, repositioning, ambulating, and lifting will be done according to each individual resident's plan of care. Home Again Assisted Living Management will conduct the initial assessment to determine resident movement needs. On-going assessments will be conducted as the resident's physical condition changes. Mechanical lifting equipment and/or other approved resident handling aids should be used to minimize or eliminate manual lifting and handling of residents, except when necessary, such as in a medical or environmental emergency.

- Manual lifting of residents who are unable to bear weight will be eliminated.
- Home Again Assisted Living Management identify resident transfer needs and determine the appropriate transfer techniques and mobility assistance.
- There will be no manual two-person full weight lifts. If a resident requires so much assistance to need two caregivers to make the transfer, Home Again Assisted Living Management will re-evaluate appropriateness of placement in facility and any necessary adaptive equipment.
- Gait/transfer belts will be used where some degree of manual assistance is required for weight-bearing residents during ambulation and transfer activities. Be sure gait belts are used correctly. If staff needs training on belt usage, they are to contact Home Again Assisted Living Management.
- Home Again Assisted Living Management will work with external agencies, such as Hospice, Public funding, and Therapy, to determine actions and adaptive equipment for when a resident is bedbound due to end-of-life.
- If a fallen resident isn't able to get off the floor with minimal assistance, staff will contact the non-emergent EMS to assistance.

SAFE RESIDENT HANDLING

Our facility supports a minimal lift/low lift culture and strives for zero accidents. It is the expectation that all employees will take reasonable care while moving residents so as to protect themselves from injury as well as the residents. Training, coaching, and problem-solving provide the foundation for the program. Non-compliance with the minimal lift/low lift program will be handled in a similar manner as other safety infractions.

Training

- New Resident Assistants will receive hands-on training at the time of hire.
- All nursing staff must complete resident handling competencies annually.
- Training will be conducted on an as-needed basis for staff. This may include training on moving specific residents with complex transfer needs.

Roles and Responsibilities

Home Again Assisted Living Management shall:

- Support the implementation of this policy.
- Support a minimal lift/no lift culture of safety within the facility.
- Furnish sufficient number of lifting equipment and mechanical aids to allow staff to use them when needed for safe resident handling and movement.
- Provide staffing levels sufficient to comply with this policy.
- Ensure that all residents have been assessed to determine transfer and movement needs. Ensure that the assessment is updated as the residents' conditions change.
- Ensure the mechanical lifting devices and other equipment/aids are available, maintained in proper working order, and stored conveniently and safely.
- Ensure all employees have received initial training, annual training, and training as needed on transfer techniques and the use of mechanical devices.
- Ensure that all resident care staff complete annual competencies on transfer techniques and the use of mechanical devices.
- Ensure that staff are complying with safe resident handling tasks by using mechanical devices and handling aids.
- Instruct all staff to report injuries immediately.
- Complete investigative reports to identify failures in the system.

SAFE RESIDENT HANDLING

EMPLOYEES shall:

- Support a minimal lift/no lift culture of safety within the facility.
- Comply with all components of this policy.
- Use proper techniques, mechanical lifting devices, and other approved equipment/aids during performance of resident handling tasks.
- Notify the supervisor of any injury sustained while performing resident handling tasks.
- Notify supervisor of need for re-training in use of mechanical lifting devices, other equipment/aids and lifting/moving techniques.
- Notify supervisor whenever mechanical lifting devices are in need of repair or inoperable.
- Supply feedback to supervisors on residents' need for transfer, mobility or repositioning assistance and on implementation of this policy.

STATE OF WISCONSIN SELF REPORTING

Policy and Procedure

October 30, 2017

POLICY

It is the policy of Home Again Assisted Living to communicate to the State of Wisconsin Department of Health and Family Services any incident or accident resulting in serious injury requiring hospital admission or emergency room treatment of a resident as well as death or law enforcement personnel called to community.

PROCEDURE

For Injury or Resident Death Reporting

It is the responsibility of the Community Director to understand when to initiate a self-report to submit to the State of Wisconsin. See attached chart on itemized reporting requirements. In conjunction with the Community Medical Manager and Resident Assistant staff the Community Director will investigate and submit to the Chief Operations Officer the following information:

- Resident Name, age, and Community residing at
- Health and/or physical diagnosis
- Circumstance of injury including:
 - Does Resident use any adaption aids?
 - physical location of where injury happened
 - what the injury was
 - when and how was staff notified
 - what assessment and reaction did staff have
 - were emergency personnel called
- Is there a history of falls?
- Were there any changes to medication, recent infections, and/or changes in care that could have contributed to fall?
- What was the outcome of the fall? Was there a hospitalization, rehab stay, etc?

Once this information is submitted to the Chief Operations Officer, she will then finalize and complete the self-report and mail into the state. A copy of the report will be kept in the office.

STATE OF WISCONSIN SELF REPORTING

For Law Enforcement

It is the responsibility of the Community Director to understand when to initiate a self-report to submit to the State of Wisconsin for law enforcement personnel to community. See attached chart on itemized reporting requirements. In conjunction with the Community Director and Resident Assistant staff the Community Medical Manager/RN will investigate and submit to the Chief Operations Officer the following information:

- The circumstances of why law enforcement was called
- Detailed information on situation including names and titles of all individuals involved
- The resolution from law enforcement personnel

Investigation, Notification, and Reporting Requirements (DHS 83.12)

****All written reports to DHS must include, at a minimum, the time, date, place, individuals involved, details of the occurrence, and the action taken by the provider to ensure residents' health, safety and well-being. ** Must keep all related records for 2 years****

REQUIRED REPORTING	TIME FRAME TO REPORT	DETAILS FROM DHS
Injury requiring hospital admission or emergency room treatment	3 working days	Any incident or accident resulting in serious injury requiring hospital admission or emergency room treatment of a resident.
Resident death related to physical restraint, psychotropic medication or suicide.	24 Hours	No later than 24 hours after the death of a resident, the CBRF shall report the death to the department if there is reasonable cause to believe the death was related to the use of a physical restraint or psychotropic medication, or was a suicide.
Resident death related to an accident or injury.	3 working days	When a resident dies as a result of an incident or accident not related to the use of a physical restraint, psychotropic medication, or suicide, the CBRF shall send a report to the department within 3 working days of the resident's death.
Injuries of unknown source.	7 calendar days	INVESTIGATING INJURIES OF UNKNOWN SOURCE. (a) A CBRF shall investigate any of the following: 1. An injury that was not observed by any person. 2. The source of an injury to a resident that cannot be adequately explained by the resident. 3. An injury to a resident that appears suspicious because of the extent of the injury or the location of the injury on the resident. (b) The CBRF shall maintain documentation of each investigation of an injury referenced under par. (a).
Law enforcement personnel are called.	3 working days	Any time law enforcement personnel are called to the CBRF as a result of an incident that jeopardizes the health, safety, or welfare of residents or employees. The CBRF's report to the department shall provide a description of the circumstances requiring the law enforcement intervention. This reporting requirement does not apply to residents under the jurisdiction of government correctional agencies.

 Home Again

Living. Assisted.

Thank You!