



## **AMANI HEALTH CARE SERVICES LLC**

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# **EMPLOYEE HANDBOOK**



**MEFFORD, KNUTSON & ASSOCIATES, INC.**  
*Home Health Care Consulting Services*  
*Licensed Business Brokers*

**Revised01.13**

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**Handbook Acknowledgement**

## **WELCOME TO EMPLOYEES**

It is our pleasure to welcome you to **Amani Health Care Services, LLC!**

At **Amani Health Care Services, LLC** , our primary objective is providing “quality care with individual design” to our customers. Customers are clients, family, friends and members of the community, referral sources, and coworkers.

We can only meet this objective and fulfill our commitment through you. As an Employee of **Amani Health Care Services, LLC** you will perform your duties in a manner that consistently reflects your commitment. Your diligence and loyalty are necessary if we are all to effectively work together toward our common goal of providing the best possible home health care service.

**Read this Handbook carefully.** It has been developed to serve as a guide to our policies and practices that each Employee must know. **It is not an employment contract.** Employees should be aware that the policies set out in the Handbook are implemented at the discretion of management and may be applied, altered, or withdrawn at any time, and without notice. A copy of this Handbook is always available at the office. If any policy or statement in this manual needs further clarification, please contact a Supervisor.

Your best interests, those of **Amani Health Care Services, LLC**, and those of the people we serve depend on our working together effectively, in an atmosphere of trust and cooperation. We are glad you have chosen to become a part of this effort and we look forward to working with you as a part of our team!

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## AMANI HEALTH CARE SERVICES, LLC Employee Handbook

### AMANI HEALTH CARE SERVICES, LLC Standards

#### Amani Health Care Services, LLC STANDARDS

By accepting employment with us, each Employee has a responsibility to the company, their fellow Employees and their clients to adhere to certain rules of behavior and conduct. The purpose of these rules is not to restrict an Employee's rights, but rather to be certain that Employees understand what conduct is expected and necessary. Generally speaking, we expect each person to act in a mature and responsible manner at all times and to maintain the **Amani Health Care Services, LLC** standards listed below:

1. All Employees are expected to dress in a professional manner appropriate to the health care environment, or as directed by the client/family. This includes personal hygiene, jewelry, hair and makeup.
2. Always introduce yourself, your position and where you are from. ***You are required to have your nametag on your person at all time.*** If the client requests that you not wear it, you must still have it with you.
3. In conversations with clients, avoid topics such as religion, politics, and disclosures about personal problems. Keep the conversation client-centered and non-argumentative. It is not appropriate to discuss personal life with clients.
4. Each Employee is expected to arrive on time to all assignments. If an emergency or situation arises that causes anyone to be more than 15 minutes late, that Employee must notify the office so that the client can be called.
5. Use proper grammar, avoid profanities, and address your clients in a respectful manner.
6. During working hours, ***smoking is not permitted.***
7. ***Under no circumstances*** is an Employee to ask for or accept any money from the clients or take home property that belongs to the client.
8. No personal phone calls should be made or received by you while in the client's home. Messages or emergency calls for you should be relayed through the office. ***Also, do not give out Employee phone numbers to the client. If they need to reach an Employee, they can do so through the office.***
9. Employees are to have no personal visitors while providing care in the client's home.
10. Employees are not allowed to drink alcoholic beverages, or use any substance not prescribed by your physician, while you are working even if the client invites you to do so. Employees must not drink alcoholic beverages immediately before going to work in a client's home.
11. Do not discuss salary or personal financial situations with the clients. Refer all questions regarding the client's bill to **Amani Health Care Services, LLC** office.
12. Under no circumstance should an Employee give out their personal telephone number or cell phone number or the phone number of any other **Amani Health Care Services, LLC** Employee to a client.
13. All Employees are obligated to uphold the reputation of **Amani Health Care Services, LLC** ethical standards. If there is ever a doubt regarding whether an activity meets ethical standards, please discuss it with your immediate supervisor.
14. ***All Employees are expected to maintain accurate documentation of services provided and the exact times of the service as well as time cards.***
15. Employees are expected to maintain the confidentiality of the client, the client's record and the family, fellow Employees and **Amani Health Care Services, LLC**.

The above stated rules are to be observed by Employees at all times, and are not intended to be all-inclusive of the required discipline, proper standards of conduct or obligation of Employees. If there is any question or uncertainty regarding the above standards in the performance of your job at, contact your supervisor at once.

## **Amani Health Care Services, LLC PHILOSOPHY OF EMPLOYMENT**

It is our philosophy to utilize fair and effective employment policies. Our goals include:

- Conducting our business with integrity and efficiency while providing a pleasant and rewarding experience for all Employees.
- Respecting the individual rights of each Employee and treating all Employees with courtesy, dignity, and consideration.
- Seeking Employees of the highest quality and selecting Employees whose skills and abilities best match the job position.
- Providing financial rewards and promoting Employees on the basis of job performance.
- Maintaining our wages at rates comparable to rates paid by similar companies in our area, for similar work.
- Providing our Employees with the benefits of quality programs for life insurance, health and accident insurance.
- Providing paid time off and holidays for all eligible Employees.
- Providing safe, healthy, and harmonious working conditions.
- Making **Amani Health Care Services, LLC** a desirable place to work.

## **BUSINESS HOURS**

Office hours are from 9:00 AM to 5:00 PM Monday through Friday. There is designated on-call staff, including a registered nurse, after normal business hours to respond to client related Employee concerns and for emergencies. **Do not call on-call staff with questions that should be addressed to the office staff or case managers during normal business hours.**

## **EMPLOYEE RELATIONS**

**AGENCY NAME** believes that the work conditions, wages, and benefits that they offer to its Employees are competitive with those offered by other employers in this industry. If Employees have concerns about work conditions or compensation, they are strongly encouraged to voice these concerns openly and directly to their supervisor. If they do not feel comfortable talking with their supervisor, then they are encouraged to speak with the Compliance Officer.

Our experience has shown that when Employees deal openly and directly with supervisors, the work environment can be excellent, communication can be clear, and attitudes remain positive. Our goal is to amply demonstrate our commitment to Employees by responding effectively to Employee concerns.

## **EMPLOYMENT AT WILL**

Employment with **Amani Health Care Services, LLC** is at will and either **Amani Health Care Services, LLC** or an Employee may terminate the relationship at any time, with or without notice.

## **EQUAL EMPLOYMENT OPPORTUNITY**

It is the policy of **Amani Health Care Services, LLC** to provide equal opportunity employment in accordance with all applicable equal employment opportunity and affirmative action laws, regulations and statutes. This means that **Amani Health Care Services, LLC** pledges its best efforts to avoid discrimination or harassment against any Employee or applicant for employment, on the basis of race, creed, religion, national origin, sex, handicap or disability, age, marital status, sexual orientation or status with regard to disabled veterans, veterans of the Vietnam era, or those on public assistance. Further, **WE** will take affirmative action to ensure that no such discrimination exists in its employment practices. Such employment practices include but are not limited to: hiring, upgrading, demotion, transfer, recruitment or recruitment advertising, selection, layoff disciplinary action, termination, rates of pay or other forms of compensation, and selection for training including apprenticeship.

## **IMMIGRATION LAW COMPLIANCE**

**Amani Health Care Services, LLC** is committed to employing only United States citizens and aliens who are authorized to work in the United States. We do not unlawfully discriminate on the basis of citizenship or national origin.

In compliance with the Immigration Reform and Control Act of 1986, each new Employee, as a condition of employment, must complete the Employment Eligibility Verification Form I-9 and present documentation establishing identity and employment eligibility. Former Employees who are rehired must also complete the form if they have not completed an I-9 with **Amani Health Care Services, LLC** within the past three years, or if their previous I-9 is no longer retained or valid.



All documents must be genuine originals and relate to the Employee. If he or she fails to provide the documents needed to comply with the immigration law within the time allowed, **Amani Health Care Services, LLC** will consider the failure to be a refusal of the job offer. Employees will not be asked to provide more documentation than needed to verify their identity and right to employment in this country. Employees may contact the Corporate Office for a list of documents that are acceptable.

Employees may raise questions or complaints about immigration law compliance without fear of reprisal.

### **AMERICANS WITH DISABILITIES ACT (ADA)**

**Amani Health Care Services, LLC** actively supports the employment of people with disabilities and seeks to comply fully with the Americans with Disabilities Act.

Any Employee who believes that he/she requires an accommodation based on a disability in order to perform their job expectations may request reasonable accommodation.

Requests for accommodation should be submitted to the Employee's Supervisor. Any and all requests for accommodation will be promptly and carefully considered and will be arranged for as deemed reasonable. Employees may be required to provide a statement from their health care provider documenting the need for the accommodation.

### **QUALIFICATIONS FOR EMPLOYMENT**

**Amani Health Care Services, LLC** seeks to hire Employees who possess the skills and abilities which best meet the needs of the position for which they are being considered. Hiring decisions are based on a variety of factors, including but not limited to, an individual's level of education, past experience, performance in similar settings, and the applicant's ability to perform the duties as outlined in the job description. In addition, there may be certifications or licenses required for certain positions. These requirements may also be discussed in the job description where required by law. Applicants may be requested to produce evidence of meeting standards for employment. This may include physical examinations, health screenings, motor vehicle checks, criminal background checks, or other requirements.

### **APPLICATION FOR EMPLOYMENT**

Prior to employment, all job applicants are asked to complete an application for employment. Upon employment, the application will become a part of the Employee's personnel file.

### **EMPLOYEE RECORDS**

A personnel file will be maintained for all **Amani Health Care Services, LLC** Employees. It will contain necessary information for the administration of wages, benefits and job performance. Certain types of information, for example, medical information, must be maintained in separate files.

Once hired, each Employee will be enrolled through the completion of materials necessary for initial employment. These materials include but are not limited to:

1. Identifying information
2. Notice of whom to contact in the event of emergency
3. Application for employment
4. Payroll information (change of status form)

5. Employees Withholding Allowance Certificate (W-4)
6. I-9 Employment Eligibility Verification, (requires two adequate forms of identification)
7. Insurance enrollment materials
8. Other information as is appropriate for the job position or required by law

### **PERSONNEL DATA CHANGES**

To keep payroll, benefits, mailing lists and other information up to date, **Amani Health Care Services, LLC** , requests that the administration be informed of any change in Employee status. Changes in status include:

1. Address
2. Telephone Number
3. Name
4. Dependents or changes in tax exemption
5. Person to notify in case of an emergency
6. Insurance beneficiary
7. Retirement benefits beneficiary; and
8. Other pertinent or legally required information.

### **JOB DESCRIPTIONS**

Each position within the organization has a written job description. This is a written list of the general duties and responsibilities of the job that each Employee is required to perform. Every Employee is responsible for becoming familiar with their job description, and should there be any questions about its content, he/she is to seek clarification from their Supervisor. Job descriptions are guidelines and are not considered to be all-inclusive. Particular job duties *may* change from time to time and **Amani Health Care Services, LLC** reserves the right to modify job descriptions as it may deem appropriate.

### **WORK SCHEDULE**

The work schedule is issued by the staffing Supervisor. **AGENCY**'s work week begins on Monday and ends on Sunday.

### **COMMUNICATIONS**

Communication and information about topics affecting Employees will be mailed with paychecks or through scheduled meetings with a Supervisor.

### **ORIENTATION AND TRIAL EMPLOYMENT PERIOD**

Each Employee of **Amani Health Care Services, LLC** will be expected to complete an orientation to the agency and to the services provided to **AGENCY** clients.

Topics included in the orientation include:

- An overview of **Amani Health Care Services, LLC**'s mission, operation, and services
- A review of the Company's Organizational Chart
- Personnel policies, Employee Handbook
- Orientation to clinical and written policies
- Orientation to Minnesota Home Care licensure
- Types of care or services to be delivered in client's homes
- Client rights
- Vulnerable adult and child issues
- Safety issues
- Waste management and infection control
- Confidentiality of agency and client information
- Specific skills required by staff
- Employee expectations and competency – dress code
- Payroll and Employee benefit information
- Orientation to charting forms including time cards and submission requirements
- HIPAA Orientation
- Any additional pertinent or required information
- Clinical skill competency testing and demonstration

All Employees will be asked to sign the acknowledgment page, confidentiality agreement and return to work program form, verifying that they have received the information.

The first ninety (90) days of employment are considered the trial employment period. This is a time of learning for both the Employee and **Amani Health Care Services, LLC**. During this time each Employee will be oriented and trained in the responsibilities of their job. The Employee Handbook will be reviewed. In addition, performance will be evaluated by a Supervisor to determine each Employee's ability to perform the duties of the job. Each Employee too, may evaluate **Amani Health Care Services, LLC** to determine interest in continued employment.

#### **NEW EMPLOYEE HEALTH ASSESSMENT**

Employees may be required to have physical examinations or take screening tests to determine suitability for employment as determined by federal, state, or local laws. This may include general physical evaluations and testing for tuberculosis or other communicable diseases.

Examinations may be required prior to employment, on an annual basis, or at any time necessary to meet the requirements of law. The costs of any required medical examinations will be paid by **AGENCY NAME**. Employees are requested to review the amount of reimbursable expense with their Supervisor prior to the examination.

Applicants or Employees diagnosed or showing signs of communicable disease will be evaluated on a case by case basis, based on medical evidence, to determine the appropriate course of action.

**Mantoux:**

All Employees providing direct care must have a Mantoux test or chest x-ray indicating a negative tuberculosis result. If an Employee has had a negative Mantoux or chest x-ray within the last twelve (12) months, verification is required. If an Employee has NOT had a negative Mantoux within the past 12 months, a Mantoux test will be given at the time of hire. The state of Minnesota requires the Mantoux test to be administered every 2 years, but **Amani Health Care Services, LLC** procedures require the test be taken every twelve (12) months. Positive results will require documentation of a medical evaluation, which may consist of a Chest x-ray and/or preventive therapy. Verification of freedom from tuberculosis must be completed prior to assignment.

*Note: Exception to this policy are persons designated as PCA Choice Employees.*

**Hepatitis B Vaccine:**

The Hepatitis B vaccine and vaccination series will be made available to all Employees who are at risk of exposure to blood borne pathogens. Hepatitis B immunization is voluntary but recommended for those at risk. If Employee refuses the vaccine, they must sign a form to that effect

**LICENSURE/CERTIFICATION RENEWAL**

If a position requires licensure, registration or certification, it is the Employee's responsibility to keep those documents current. Updated information must be kept in each Employee's file and no one will be permitted to provide client care unless documentation is current.

**CONTINUING EDUCATION REQUIREMENT**

Continuing education requirements will be discussed at time of hire. **Regularly scheduled in-service programs will be offered for all Employees specific to their job classification.** It is the Employee's responsibility to attend the in-service programs and to comply with the in-service requirements of each position. Some in-service programs will be mandatory for staff to attend. These include Infection Control and Safety.

At the discretion of **Amani Health Care Services, LLC**, Employees may attend in-service education programs during the course of their workday and will be given time off with pay to attend such programs. Payment for registration fees and related expenses will be at the discretion of **Amani Health Care Services, LLC** and require prior approval from the Director of Clinical Services. (See Benefits Section for more detailed information)

**DRIVER'S LICENSE AND INSURABILITY**

Most positions require that Employees have a valid driver's license prior to beginning their employment. In this case, the Employee must maintain a valid license and maintain insurability as determined by the **Amani Health Care Services, LLC** insurance carrier.

If an Employee's driving privileges are restricted or revoked, the Employee must notify his or her Supervisor immediately. Loss of license, restriction, or failure to maintain insurability may result in job changes, disciplinary action and/or employment termination.

In some instances and depending upon the reason for loss of a license, Employees may be allowed to hold positions without a valid driver's license. This may include jobs that do not require driving, or where other

arrangements can be made to meet the requirements of the job description. In these instances, **Amani Health Care Services, LLC** must grant approval prior to the start or continuation of employment.

### **PERFORMANCE EVALUATIONS**

Work performance will be reviewed regularly by a Supervisor. Formal performance appraisals are conducted between each Employee and their Supervisor. Appraisals may be conducted at the end of the trial employment period or at other times deemed appropriate by a Supervisor. A performance appraisal may or may not be accompanied by a salary adjustment.

Although not limited to the following, the factors that may be considered in evaluating an Employee's performance may include:

1. Ability to perform the work
2. Job skills
3. Experience
4. Performance within the current position

### **TRAINING AND DEVELOPMENT**

It is the policy of **Amani Health Care Services, LLC** to provide its Employees with the opportunity to increase the skills necessary to perform their job duties and responsibilities. Employee development and training can occur through a variety of options.

Supervisors are responsible for recommending Employees for special training programs and for providing on-the-job training. All development and training opportunities that have fees or require expenses must be approved in advance by the Employee's Supervisor who is in charge of training. Approval is at the discretion of management and includes consideration of the need for the training and budgetary concerns. Upon prior approval, a portion of the fees may be paid by **Amani Health Care Services, LLC** after the successful completion of the course. (See *Continuing Education Reimbursement* section in the Benefits section of this handbook for more information)

### **PROMOTIONAL OPPORTUNITIES AND TRANSFERS**

As new positions are created, or when replacements are needed at various locations, **Amani Health Care Services, LLC** will attempt to make these needs known to all personnel. Employees who are interested in being considered for a particular opening must notify **Amani Health Care Services, LLC** of their interest in writing, including information about their education, experience, and interest. Employees should provide this notification for each opening in which they are interested.

A promotion is a reclassification to a more responsible job that is intended to be a regular assignment. Although not a complete list some of the factors that may be taken into account when considering an Employee for promotion include:

1. Ability to perform the work
2. Job skills
3. Experience
4. Performance within the current position.

## **OUTSIDE EMPLOYMENT**

An Employee may hold a job with another organization as long as he or she satisfactorily performs his or her job responsibilities with. **Amani Health Care Services, LLC** All Employees will be judged by the same performance standards and will be subject to **Amani Health Care Services, LLC** scheduling demands, regardless of any existing outside work requirements.

If **Amani Health Care Services, LLC** determines that an Employee's outside work interferes with performance or the ability to meet the requirements of **Amani Health Care Services, LLC** as they are modified from time to time, the Employee may be asked to terminate the outside employment if he or she wishes to remain with **Amani Health Care Services, LLC**.

Outside employment will present a conflict of interest if it has an adverse impact on **Amani Health Care Services, LLC** and, under those circumstances, may be grounds for termination.

## **EMPLOYMENT CLASSIFICATIONS**

It is the intent of **Amani Health Care Services, LLC** to clarify the definitions of employment classification so that Employees understand their employment status and benefit eligibility.

All Employees are required to complete bi-weekly timecards showing time worked and any paid days off.

**Exempt Employees** are executive and manager level Employees who are paid a salary, typically work at least 40 hours per week, supervise employees and meet the FLSA tests that exempt them from being paid overtime under FLSA. Exempt Employees are not paid for overtime worked but **Amani Health Care Services, LLC** does require these Employees to fill out a timecard showing any time taken off for vacation or sick hours.

All other Employees are **nonexempt Employees** and must maintain accurate records of actual hours worked. These records are required by governmental regulations and are used to calculate paychecks. At the end of each bi-weekly pay period, the Employee and his or her supervisor must sign the timecards verifying its correctness, before forwarding it to the payroll department.

An Employee's "exempt" or "nonexempt" classification may only be changed by the **Amani Health Care Services, LLC** management team.

In addition to the above categories, each Employee will belong to one of the following employment categories:

**REGULAR, FULL-TIME, BENEFITS-ELIGIBLE** Employees are those who are regularly scheduled to work 35 hours or more per week. Generally, they are eligible for **Amani Health Care Services, LLC** benefit package, subject to the terms, conditions, and limitations of each benefit program. Full-time Employees must work no less than 152 hours per month to maintain their full-time status. Regular, full-time Employees receive all legally mandated benefits such as Social Security and Workers' Compensation and are eligible for benefits made available by **Amani Health Care Services, LLC** as described in the Benefit section of this handbook.

**REGULAR, PART-TIME** Employees are those who are regularly scheduled to work less than 35 hours per week. If a part-time Employee works at least 152 hours per month for three consecutive months the part-time status will be changed to full-time status. Regular, part-time Employees receive all legally mandated benefits such as Social Security and Workers' Compensation and are eligible for some benefits made available by **AGENCY NAME** as described the Benefit section of this handbook.

**TEMPORARY, FULL-TIME OR PART-TIME** Employees are those whose services are intended to be of limited duration (i.e., filling in for illness, vacations, and summer months). Temporary, full-time and part-time Employees receive all legally mandated benefits such as Social Security and Workers' Compensation and are not eligible for **Amani Health Care Services, LLC** benefits. However, if

subsequently converted to and hired as a regular full-time or regular part-time Employee, length of service will be determined by the most recent hire date.

**PCA CHOICE, FULL-TIME OR PART-TIME** Employees are those Employees whose clients are enrolled in the PCA Choice Program through the Minnesota Department of Human Services. PCA Choice Employees are paid through the program and **Amani Health Care Services, LLC** acts only as a fiscal agent for client directed services. PCA Choice Employees receive all legally mandated benefits such as Social Security and Workers' Compensation; however, they are not eligible for any **Amani Health Care Services, LLC** benefits.

## **EMPLOYEE BENEFITS**

**Amani Health Care Services, LLC** has designed Company benefit programs for eligible Employees and for their families. Benefit eligibility is dependent upon a variety of factors, including Employee classification as described in the previous section. In addition, Employees are considered to be benefits-eligible after successfully completed a 90-day probationary period. Benefits-eligible Employees enroll for benefits within 30 days after gaining benefits-eligible status, during annual open enrollment or following a qualifying event. Examples of qualifying events include: marriage, divorce, death, birth or adoption of a child or termination of employment of a spouse where the spouse's benefit plan provides coverage. Eligibility and full participation are subject to the plan requirements of the specific benefit and Employee classification. More details of many of these programs can be found in the Addendum at the end of this handbook. ***Employees will pay their portion of their monthly deductibles for any elective benefits through payroll deduction which will be taken out of the last check of each month.***

Provide more information if your Agency provides any of the following benefits to employees:

- Holiday Pay
- Paid Time Off (PTO)
- Workers Compensation
- Health Insurance
- Group Life Insurance
- Dental Insurance
- Long-Term Disability Insurance
- 401K Plan
- AFLAC
- Continuing Education Reimbursement
- Benefits Continuation (COBRA)

**Amani Health Care Services, LLC** has the discretionary authority to interpret and construe plan or program provisions, and to determine the status of Employees, participants, and beneficiaries for the purposes of such plans or programs. **Amani Health Care Services, LLC** also retains the authority to determine the rights of Employees, participants and beneficiaries to benefits under the plans or programs, the amount thereof and the method and time or times of payment of benefits. **Amani Health Care Services, LLC** reserves the right to amend or terminate any or all of the Employee benefit programs described in this Employee Handbook at any time and for any reason.



## **ATTENDANCE AND REPORTING**

**Amani Health Care Services, LLC** relies on its Employees to contribute to the success of the organization. Regular attendance and punctuality at scheduled work times is of utmost importance. Attendance and punctuality is a consideration when we review recommendations for promotions, salary adjustments, and transfers. All changes in scheduling must be approved by the Staffing Supervisor; contacting the client is not adequate.

## **PUNCTUALITY**

All Employees will be expected to report at the scheduled work time. Each Employee must notify their direct Supervisor or designated on-call person as soon as he/she becomes aware that they will be unable to report to an assignment on time. Excessive tardiness will be subject to disciplinary action. Corrective measures will be taken if the problem is not voluntarily corrected.

## **ABSENTEEISM**

Each Employee must notify their Supervisor or designated on-call person if he/she will be absent from their assignment as soon as he/she becomes aware but no later than two (2) hours before the scheduled starting time. The expected duration of an absence should be communicated in advance, if possible. In the event of an emergency or hospitalization due to sudden illness or accident, the Employee's designated emergency contact should notify the Employee's Supervisor as soon as possible. A doctor's statement may be required for absenteeism due to illness at supervisory discretion. The doctor's statement must include the nature of the illness, the expected duration of the illness, and the anticipated return to work date. A release from the Employee physician, stating the return date for normal work duties may be requested by and should be submitted at the time of return. A chronic pattern of absenteeism will be subject to disciplinary action. **One instance of a "no-call/no-show" on a scheduled assignment is considered a voluntary resignation**

## **PAYROLL POLICIES**

**AMANI HEALTH CARE SERVICES, LLC** is responsible for keeping accurate record of the hours Employees work. Each Employee is responsible for completing their timecard accurately and on time. Falsifying a timecard will lead to disciplinary action or termination. At the time of orientation, timecard submission and pay dates will be discussed. Any error made in a paycheck must be reported immediately to a supervisor and to the payroll department. Employees should keep their check stub for their own personal records.

Before a paycheck is received, various deductions may have been made. The stub of a check will show exactly what deductions have been taken:

- **MANDATORY PAYROLL DEDUCTIONS**—certain deductions are required by law and must be taken from a payroll check. Examples of these deductions are: FICA (OASDI or Social Security Tax), Medicare Tax, Federal Income Tax and State Income Tax.
- **CHILD SUPPORT/ GARNISHMENTS**— **AMANI HEALTH CARE SERVICES, LLC** will comply with Federal law or applicable State laws that regulate garnishments.
- **VOLUNTARY PAYROLL DEDUCTIONS**—Additional voluntary deductions for insurance or retirement programs are available through **AMANI HEALTH CARE SERVICES, LLC** for eligible Employees. **Employees will pay their portion of their monthly deductibles for any elective benefits through payroll deduction which will be taken out of the last check of each month.** See Benefits section for more information.

## **PAY PERIOD**

Pay periods are every two weeks beginning on Monday and ending on Sunday. Employee's timesheets must be turned into the office weekly by 4:00pm on Tuesday. Timesheets that are not received in the office thirty (30) days after the Employee completed the work will be paid at minimum wage.

## **PAYCHECK OPTIONS**

Employees have the option of receiving their paycheck in one of two ways:

1. **Direct Deposit:** Employees who select this option will have their pay electronically deposited into their bank account each payday. Employees can have their entire pay deposited or just a portion of it. Each Employee receives a payroll advice detailing their deductions and net pay deposited to their account.
2. **Paper Check:** Employees may select to receive their pay by a traditional check that must be picked up at the **AMANI HEALTH CARE SERVICES, LLC** office on payday. Checks not picked up by 5:00pm on payday will be mailed to the Employee's home address.

## **TIME AND ATTENDANCE RECORDS**

Client-signed time and attendance records are required to be completed by all Employees. They are used to verify the hours worked and assure that appropriate compensation is provided. A Supervisor will explain the method used to record both time and attendance. Timesheets for each type of service are generally used by all non-exempt Employees.

Exempt Employees are also required to complete time and attendance records. These will generally be recorded on a calendar supplied by **AMANI HEALTH CARE SERVICES, LLC**. A Supervisor will inform the Employee of the method used to keep these records.

All time and attendance records must be signed by the Employee and the Client to verify actual days and hours worked. Each Employee's time records must be sent to the main office for processing, where they will be reviewed by the appropriate Supervisor and the payroll department.

Falsification of time and attendance records is a serious violation of work rules. Completing time and attendance records for another Employee or signing a client's name to a time sheet is not allowed. Either violation may subject an Employee to disciplinary action, up to and including termination.

## **OVERTIME**

**AGENCY NAME** follows both State and Federal rules and laws regarding overtime. According to these rules and laws, overtime is either paid after 40 hours or 48 hours, depending on the type of work performed. Employees working as PCA's are considered domestic workers and are paid overtime after working 48 hours in a standard work week. For all other services with the exception of respite care, overtime is paid after 40 hours. Specific rules apply to respite care and will be discussed with each Employee as these situations occur.

All overtime must have the prior approval of a Supervisor. Employees working overtime without the approval of a Supervisor may be subject to disciplinary action or possible termination of employment. Working at multiple sites does not mean an Employee can work 40 hours per week for each site. Employees involved in such situations must monitor their hours worked to ensure that their total hours worked do not exceed 40 hours (or 48 hours for PCAs) per work week.

All approved overtime pay will be at the rate of 1.5 times the rate of the Employee's regular hourly wage. As provided by law, time off for sick leave, vacation leave, or any leave of absence will not be considered as hours worked for purposes of performing overtime calculations.

### **TIME OFF REQUESTS**

Requests for time off or schedule changes must be submitted in writing to the Employee's immediate supervisor. Part-time Employees must notify their supervisor at least two weeks prior to the time they are requesting off. Full-time Employees must notify supervisor at least one month prior to time off. When more than one Employee requests the same day off, seniority, amount of advance notice and the needs of **AGENCY NAME** will be considered to determine which request will be approved. The supervisor has the final discretion for granting of time off. *(See Addendum for Vacation Request form)*

### **PERSONAL TIME OFF**

Appointments for personal business including medical and dental appointments should be made during non-working hours or late in the day, if possible. All appointments during working hours must be cleared with the Employee's supervisor before the day of the appointment. Employee's will be required to make up lost time from work, or take the time as unpaid, if the time absence is less than four hours. For any absence due to an appointment that is four or more hours, the Employee will be required to use their vacation time.

### **UNPAID TIME OFF**

Any Employee seeking to take unpaid time off must request it in writing on the Vacation Request Form. This request must be signed by the Employee's supervisor and given to Human Resources for final approval. Requests will be reviewed and approval will be based on a number of factors, including business needs and staffing requirements. Before any unpaid time off requests will be considered, Employees must exhaust all vacation and sick time.

### **DEATH IN THE FAMILY**

Bereavement leave is granted in the event of a death in the Employee's immediate family. Immediate family members include parents, parent-in-laws, grandparents, brother, sister, spouse/partner, child, stepchild and grandchild. The immediate Supervisor and Administrator must approve bereavement leaves. Funeral leave will be granted from the day of death through the day of burial to a maximum of three (3) scheduled working days with pay. Funeral leave will be granted only for those days that are regularly scheduled to work and will be paid prorated according to the hours worked during the past two payroll periods.

### **JURY / WITNESS DUTY**

**AMANI HEALTH CARE SERVICES, LLC** encourages Employees to fulfill their civic responsibilities by serving jury duty when required or appearing as a witness when subpoenaed

A copy of the jury duty notice or subpoena must be presented to the Employee's supervisor as soon as it is received. The supervisor has the right to check with the court clerk on dates of jury duty or dates of court appearances prior to approving pay for time not worked. Either **AMANI HEALTH CARE SERVICES, LLC** or the Employee may request an excuse or postponement from jury duty if, in **AMANI HEALTH CARE SERVICES, LLC** judgment, the Employee's absence would create serious operational difficulties.

On any day or half-day that a team member is excused from duty, the Employee is expected to return to work.

Employees may be asked to check in daily with their supervisor while on jury duty or witness duty.

Full-time Employees are paid at the regular rate of pay for any time in which they serve as a juror or witness. Any compensation received from the court for jury service should be turned over to **AGENCY NAME** and the Employee will be issued a regular paycheck for time scheduled for work. Part-time Employees are excused from work for jury or witness duties but do not receive pay during their absence. Exception: If the part-time Employee is subpoenaed to appear as a witness on behalf of the Agency, the Employee will be paid at the regular rate of pay.

*AMANI HEALTH CARE SERVICES, LLC* will continue to provide benefits for the full-term of the absence and PTO will continue to accrue.

This guideline does not apply to court appearances that are for an Employee's personal interest. In this event, PTO must be used.

## **LEAVES OF ABSENCE**

Leaves of absence without pay may be granted for medical, educational, family need, as well as military obligations. An Employee may apply for a leave of absence after completing a probationary period. Both the Employee's immediate supervisor and Human Resources must approve all leaves. Depending upon the type of leave requested, additional approvals may be required. A leave of absence assures the Employee of employment after leave but does not guarantee the same position.

## **FAMILY & MEDICAL LEAVE OF ABSENCE (FMLA)**

Employees are provided with up to 12 weeks of unpaid, job-protected leave for certain family and medical reasons. FMLA generally runs concurrently with other paid leave benefits.

Employees must meet the following requirements in order to be eligible for FMLA leave:

- Worked for *AMANI HEALTH CARE SERVICES, LLC* for at least 12 months whether they are consecutive or not, and
- Worked a minimum of 1,250 hours during the 12 months prior to the leave.

## **REASONS FOR TAKING LEAVE**

Any of the following is considered a "qualifying event" which would make an Employee potentially eligible for FMLA leave:

- Birth, adoption or placement of a child in foster care.
- Care of an Employee's spouse, domestic partner, child or parent who has a "serious health condition."
- Employee's own serious health condition that makes him or her unable to perform his or her job.

## **DEFINITION OF SERIOUS HEALTH CONDITION**

A serious health condition includes mental or physical conditions that involve continuing treatment by a health care provider, chronic conditions (i.e. asthma and diabetes) and conditions which require multiple treatments (i.e. dialysis and chemotherapy). Absences which do not require inpatient care and are not chronic conditions must generally be for more than three consecutive days. Short term conditions or conditions absent of complications and/or routine treatments do not constitute a serious health condition.

### **DURATION OF LEAVE**

Employees are allowed to take 12 workweeks of unpaid leave in a 12-month period for one or more qualifying events. The 12-month period begins with the first day of the first FMLA leave.

If an Employee returns to work and requests FMLA leave again within 12 months from the date of the first FMLA leave, the Employee is eligible to take the balance of the 12 weeks.

### **FMLA FOR BIRTH, ADOPTION OR PLACEMENT OF A CHILD IN FOSTER CARE**

The opportunity to take FMLA leave for the birth, adoption or placement of a foster child is available to Employees any time during the 12 months following the birth, adoption or placement.

#### **Intermittent Leave**

Intermittent leave or reduced leave is permitted to care for a spouse, same sex domestic partner, child or parent with a serious health condition or because of the Employee's own serious health condition. *AMANI HEALTH CARE SERVICES, LLC* may require an alternative work arrangement and schedule to accommodate the Employee's intermittent leave request.

its does not extend FMLA leave. FMLA leave runs concurrently with other time-off benefits.

### **JOB BENEFITS AND PROTECTION**

For the duration of FMLA leave, the Employee's health care benefit coverage will continue under the same conditions as on active status.

- The Employee is obligated to continue to pay his or her contribution to appropriate benefits to continue coverage. It is the responsibility of the Employee to send payment to Human Resources on a monthly basis for benefit continuation.
  - Failure of the Employee to pay his or her share may result in loss of coverage.
  - If the Employee chooses no to return to work for reasons other than a continued serious health condition, or other reasons beyond the Employee's control, *AMANI HEALTH CARE SERVICES, LLC* will require the Employee to reimburse *AMANI HEALTH CARE SERVICES, LLC* for the amount if paid for the Employee's health insurance premium during the leave period.
- Upon return from FMLA leave, the Employee will be restored to the original or equivalent position with the equivalent pay, benefits and other employment terms.
- The use of FMLA leave will not result in the loss of any employment benefit that accrued before the start of an Employee's leave.
- The Employee will continue to earn PTO and 401K benefits only for FMLA leave time that is paid.
- If the Employee is not able or chooses not to return to work at the end of FMLA leave on the scheduled return date, this will be considered a voluntary resignation from their employment and/or position, unless an extension is granted.

### **EXTENSION**

If the Employee is not able or chooses not to return to work on the scheduled return date, the Employee must request an extension through Human Resources. If the extension is approved, the Employee relinquishes the right to return to the same job and rate of pay and placement may depend on the availability of a vacancy for which the Employee is qualified.

### **NOTICE OF LEAVE**

To request an FMLA Leave of Absence, the Employee must provide a written request for leave at least 30 days in advance when the leave is “foreseeable.” If this is not possible, the Employee must give notice as soon as possible. The written request must include:

1. Nature of the leave
2. Date the leave commences
3. Expected return to work date
4. Intermittent schedule (if applicable)
5. Taking of leave may be denied or delayed if requirements are not met.

### **MEDICAL CERTIFICATIONS**

The Employee must provide a medical certification completed by the Employee and the health care provider to support the leave request because of a serious health condition of the Employee or a covered relative or same sex domestic partner.

- **AGENCY NAME** may require a second or third opinion (at **AGENCY NAME**’s expense) for an Employee reporting a serious health condition.
- A fitness for duty report to return to work is required from the attending licensed physician.

### **PERSONAL LEAVE OF ABSENCE**

An Employee may request a personal leave of absence without pay. Personal leaves may be granted for a variety of circumstances, including medical leave, family leave, and personal leave for travel, education, or other reasons. Supervisors have the authority to grant or deny a leave based on workload in the area as well as the Employee’s tenure and performance.

### **GUIDELINES**

- In order to ensure comparable treatment of all Employees, supervisors must consult with Human Resources whenever an Employee in their area(s) requests a personal leave for a week or more.
- Requests for personal leaves of absence must be submitted in writing and approved by the supervisor and the supervisor’s supervisor.
- Employees must use all available PTO before taking personal leave.
- A personal leave of absence for educational reasons may be approved only if the curriculum is of mutual benefit to the Employee and the Agency.
- A personal leave of absence of more than 30 days may affect a team member’s benefits eligibility. Contact Human Resources for more information.
- When personal leave ends, the Employee returns to the same or a similar position or, if a comparable one is not available, the Employee may be offered another suitable position, if available.
- If the Employee does not report to work on or before the expiration of the leave and does not get approval for an extension of the leave, the Agency will assume that the Employee has voluntarily terminated employment.

The Employee must submit the request for personal leave in writing, specifying the reason for the leave and the dates the Employee wants the leave to begin and end.

### **MILITARY LEAVES OF ABSENCE**

Employees who are inducted into the U.S. Armed Forces or who are reserve members of the U.S. Armed Forces or state militia groups will be granted leaves of absence for military service, training, or other obligations in compliance with state and federal laws. At the end of the leave, Employees have the right to return to the same position they held prior to the leave or to a position with equivalent seniority, pay and benefits.

Employees are expected to notify their supervisor as soon as possible and must provide a copy of their military orders prior to the start of the leave.

Human Resources should be contacted concerning the coordination of the Employee's pay and benefits while they are on military leave.

### **ACTIVE DUTY LEAVE OF ABSENCE**

Employees inducted into the U.S. Armed Forces or are acting under military orders for reasons other than two-week annual service obligations are eligible for re-employment after completing military service, provided:

- They show their orders to their supervisor as soon as they are received.
- They satisfactorily complete active duty service.
- They enter the military directly from their employment with the Agency.
- They apply for and are available for re-employment within 90 days after discharge from active duty. If Employees return from up to 6 months active duty for training, the Employee must apply within 30 days after discharge.

Full-time Employees who are required to serve in the military do not have to use PTO time during military leave.

### **MILITARY RESERVES OR NATIONAL GUARD LEAVE OF ABSENCE**

- Full-time Employees who serve in the U.S. Military Reserves or the National Guard may take the necessary time off without pay to fulfill this obligation.
- These Employees will keep all of their rights for continued employments under existing laws.
- Employees must not be discriminated against in pay, promotion, or job assignment upon return.

### **MILEAGE REIMBURSEMENT**

If a personal vehicle is used for *AMANI HEALTH CARE SERVICES, LLC* purposes, each Employee will be reimbursed for mileage at a rate determined by *AMANI HEALTH CARE SERVICES, LLC*. Personal vehicle insurance remains the primary carrier when using a personal vehicle for *AMANI HEALTH CARE SERVICES, LLC* purposes.

Mileage and work time starts at the first client's home or the office and ends at the last client's home or the office. Mileage will be paid when the Employee travels between client's homes and stays at each client's home for no more than four hours at a time. The Employee does NOT receive mileage reimbursement when the Employee is caring for one client a day, and staying four hours or more.

Mileage will be paid when submitted in the current pay period. The Mileage Log (*See Addendum for Mileage Log form*) must be completed correctly with start and stop name and address, start to finish odometer reading, calculated miles to be paid and turned in with charting and time records. All mileage must be documented on the mileage log and sent in with current timesheets. Mileage will not be paid if logs are not turned with time sheets for the time period the mileage was accrued.

The difference between what *AMANI HEALTH CARE SERVICES, LLC* pays and the mileage reimbursement allowed by the IRS may be tax deductible. Consult a tax accountant for further information.

## **REST AND MEAL PERIODS**

To the extent possible, meal periods will be provided in the middle of the Employee's work hours each day. Supervisors will schedule meal periods to accommodate operating requirements. Employees will be relieved of all active responsibilities and restrictions during meal periods and will not be compensated for that time.

## **EMERGENCY CLOSING**

At times, emergencies such as severe weather, fires, or power failures can disrupt company operations. In extreme cases, these circumstances may require the closing of a work facility.

The Office will announce whether operations will be closed. Unless there is such an announcement, Employees should assume that the offices are open and report for work. If an Employee fails to report to work even though an emergency closing has not been authorized, the time off must be taken as a vacation day or as unpaid time off.

As Employees are given an option to remain home during inclement weather, *AMANI HEALTH CARE SERVICES, LLC* will not be responsible for any personal injuries or property damage if they attempt to arrive at work. Employees are to use their best judgment in deciding whether it is reasonable to get to work.

When operations are officially closed due to emergency conditions, the time off from scheduled work will be paid. However, if the emergency closing is announced after the start of the workday, only those Employees at work at the time of the announcement will be paid for the remainder of their scheduled work period.

## **EMPLOYMENT TERMINATION**

When an Employee elects to voluntarily terminate employment, it is requested that a two-week written notice be provided to his or her Supervisor. This notice is to include the effective date, the reason for terminating, and the signature of the Employee. At *AMANI HEALTH CARE SERVICES, LLC* option, the Employee may continue to work during this fourteen (14) day period unless a satisfactory replacement can be found and trained sooner. Benefit hours earned will only be paid to those Employees who provide the required advance notice of resignation. A no show/ no call is considered a voluntary resignation.

Where possible, the process for terminating Employees will include at least the following:

1. Written letter of resignation (voluntary terminations only)
2. Completion of termination materials
  - a. Insurance continuation or termination
  - b. State unemployment requirements
  - c. Payroll change of status form
3. Return of keys and other *AMANI HEALTH CARE SERVICES, LLC* property



4. Exit interview with a Supervisor
5. Adjustment of paid time off and other benefits, if applicable
6. Final paycheck provided at next payroll date or as otherwise required

The process for involuntary terminations will be the same, with the exception of the written letter of resignation. The Supervisor is to make efforts toward completing each item, even though an involuntarily terminated Employee may refuse to participate. It is *AMANI HEALTH CARE SERVICES, LLC* policy to handle all terminations with respect, regardless of the circumstance.

## **HEALTH AND SAFETY PROGRAM**

The safety of our Employees is the foremost consideration in the operation of *AMANI HEALTH CARE SERVICES, LLC*. Accidents and injuries are not only costly to *AMANI HEALTH CARE SERVICES, LLC* and the individual workers, but are often disastrous to the future of their families. *AMANI HEALTH CARE SERVICES, LLC* endeavors to provide our Employees with a work place free of recognized health and safety hazards in an effort to conserve our human and financial resources. We will review annually the following health and safety program: A Workplace Accident and Injury Reduction Program (AWAIR).

The objective of our health and safety program is to prevent Employee accidents, injuries and illnesses through:

- Employee Right-to-Know Program
- Personal Protective Equipment
- Safety In-service
- Maintenance of safe and healthful working conditions
- Assure proper training for all Employees in job procedures

Although safety is the responsibility of every Employee, the management of *AMANI HEALTH CARE SERVICES, LLC* is responsible for the implementation, maintenance and enforcement of safety and health policies and procedures. Employees are responsible for day-to-day work activities and are responsible for complying with all safety regulations. They must notify their supervisor in the event of an accident or unsafe work conditions. Compliance with the following safety rules is required to help prevent injuries to individual Employees or others:

- a. Never report to work under the influence of alcoholic beverages or drugs nor shall any Employee consume, purchase or possess these items while working.
- b. Always use proper personal protective equipment for each assigned job.
- c. Always use proper technique for lifting, transferring or assisting clients.
- d. Employees must report all accidents and injuries to their supervisor immediately.
- e. Actively support and participate in *AMANI HEALTH CARE SERVICES, LLC* efforts to provide a workplace accident and injury reduction program.

Any Employee observed committing an unsafe act; violation of safety rules or causing an unsafe condition to exist will be stopped immediately. Instruction in the safe procedure will be given.

**Disciplinary action will be instituted for all staff that is noncompliant with the safety rules.**

Each Employee will receive orientation regarding the safety rules upon hire. Additionally, Employees will be kept aware of changes and additions to the program through Employee memos. Safety Training will include:

- Company safety policy
- Employee responsibilities
- Communication, hazard reporting, accident reporting
- Emergency plan
- Blood born pathogens
- Personal protective equipment
- Back safety

## **OCCURRENCE OF ACCIDENTS OR INJURIES**

In the event of an accident or injury, the safety of those involved is of primary importance. Aid should be administered immediately, as appropriate, to anyone injured. If there is any question about the seriousness of the injury, it is the Employee's responsibility to seek medical attention as soon as possible. Report all injuries, no matter how slight, to a Supervisor. Accident reports should be filled out promptly and given to the office. An accident/injury report is to be completed for all accidents and injuries. Qualifying accidents, injuries and illnesses must also be recorded on OSHA 200 forms.

## **RETURN-TO-WORK PROGRAM**

*AMANI HEALTH CARE SERVICES, LLC* Companies 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.

The prompt return of injured Employees to positions within their medical restrictions will minimize the impact of work-related injuries. Coming back to work early helps Employees remain functional as they recover while providing our organization with the valuable use of Employees' talents. It also helps control workers' compensation costs.

If an Employee is injured at work, report the injury to the staffing manager immediately – no matter how minor the injury is. **Fill out the First Report of Injury form completely and correctly and turn it in to the staffing manager or the claims coordinator.** The staffing manager will report it to our organization's worker compensation claims coordinator within 24 hours. **Any questions concerning workers' compensation should be directed to the claims coordinator, phone (612) 227-8737**

The staffing manager and/or claims coordinator will help arrange for medical treatment following an injury.

Current positions can 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.

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.

## **HEALTH AND SAFETY POLICY**

The personal health and safety of each Employee is of primary importance to *AMANI HEALTH CARE SERVICES, LLC*. In keeping with this, it is desire of *AMANI HEALTH CARE SERVICES, LLC* is to provide a safe working environment. To accomplish this, it is our policy to see that:

- Employees are provided with reasonable safeguards to ensure healthy and safe working conditions
- Employees are provided with a clean, safe, and healthy working environment
- Employees are trained in matters related to safety
- *AMANI HEALTH CARE SERVICES, LLC* complies with federal, state and local laws regarding accident prevention and working conditions

Together the Company and the Employee must accept the responsibility to make the workplace safe and healthy for everyone. Each Employee is responsible for cooperating with all aspects of Employee health and safety and to continuously practice safety while performing his/her duties.

## **ACCIDENT AND INJURY REDUCTION POLICY**

All Employees will receive the necessary orientation, education and training regarding universal precautions and are expected to follow universal blood and body-fluid precautions for each client to whom they provide services. Employees are expected to wear personal protective equipment at the proper times and in the proper environments. Supervisors will strictly enforce this policy. Employees found in non-compliance may be subject to disciplinary action.

*AMANI HEALTH CARE SERVICES, LLC* has developed its accident and injury reduction policy to create a work environment in which safe and healthful working conditions prevail. To this end, the accident and injury reduction policy includes:

- Detection and correction of unsafe circumstances, situations, activities, and events
- Detection and correction of unsafe individual actions, techniques, procedures, and requirements
- Revision of policies and procedures as necessary through analysis and evaluation of accidents resulting in injury, loss, or damage
- Control and awareness of unsafe acts and circumstances through reporting every accident resulting in injury, loss, or damage
- Improvement in our workplace by documenting each instance, and documenting the actions taken to decrease the opportunity for recurrence

## **REPORTING SAFETY AND HEALTH HAZARDS**

It is every Employee's duty to be aware of the need for a safe and healthy work environment. If an Employee sees, or becomes aware of any unsafe condition, they are asked to report it immediately to a Supervisor. Whenever possible, take steps to correct the unsafe condition on the spot. If a situation cannot be corrected, steps should be taken to warn and limit others' access to the unsafe condition. An Employee should not endanger him/herself to correct an unsafe condition.

## **EMERGENCIES**

If there is an emergency, or if there is a question about what to do, call 911 immediately. Contact your supervisor as soon as reasonably possible.

## **OCCUPATIONAL EXPOSURE**

If a client is suspected or known to have an infectious or contagious condition, Employees providing direct care will be advised and instructed on procedures specific to the suspected disease. Appropriate protective equipment will be made available which may include but not be limited to gloves, gowns, masks, and protective eye and face shields.

Specific infection control policies will be explained at time of orientation as well as post exposure procedures. It is the responsibility of the Employee to notify a Supervisor of any expected exposure concerns. Employees will be instructed on proper documentation requirements. Information obtained (other than occupational exposure) during the health screening process will be maintained in the Employee file and will be considered confidential. Any additional test(s) that are required by *AMANI HEALTH CARE SERVICES, LLC* or as directed by the State Health Department will be explained at the time of orientation.

## **HAZARDOUS SUBSTANCES AND HARMFUL PHYSICAL AGENTS**

Use of hazardous substances, infectious or harmful physical agents may be required at times to maintain a clean and safe environment. Examples include chemicals that are utilized in housekeeping or maintenance. To protect Employees and avoid significant exposure, the utilization of such substances by Employees shall be limited to a form, concentration, and manner that is the same as that available to the general population.

## **SUGGESTIONS AND COMPLAINTS**

It is the desire of *AMANI HEALTH CARE SERVICES, LLC*

*Mohammed Rashid*

*1 East 19th Street suite 201*

*Minneapolis, MN 55403* to address any suggestions for improvements or any complaints that an Employee has concerning their own, or *AMANI HEALTH CARE SERVICES, LLC* welfare. Employees should feel perfectly free to express themselves and to seek advice on any matter of concern, or to call attention to anything which may seem to be operating to a disadvantage. The Employee's standing with *AMANI HEALTH CARE SERVICES, LLC* will not suffer in any way because of any subject that might be raised.

*AMANI HEALTH CARE SERVICES, LLC* feels that most matters will be satisfactorily handled by discussing them with an immediate Supervisor. Employees will find that a frank discussion with their Supervisor is generally the easiest and most effective way of dealing with a problem. Supervisors are responsible for ensuring fair treatment is received in all matters affecting employment.

If an Employee is not satisfied with a Supervisor's assessment and response, or if the Employee feels that the matter lies beyond the Supervisor's jurisdiction, Employees are encouraged to utilize *AMANI HEALTH CARE SERVICES, LLC* Chain of Command as shown in the Organizational Chart. If the problem is still not resolved, the matter can be discussed with any officer either in person, by telephone, or by mail. Their address is as follows:

**AMANI HEALTH CARE SERVICES, LLC**  
**1 East 19th Street suite 201**  
**Minneapolis, MN 55403**

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## **AMANI HEALTH CARE SERVICES, LLC Employee Handbook**

### **Employee Conduct and Disciplinary Action**

#### **EMPLOYEE CONDUCT**

AMANI HEALTH CARE SERVICES, LLC will not tolerate incidents of intentional or willful maltreatment or neglect of people served. In the event any Employee mistreats an individual receiving services, the Employee will be subject to immediate discipline up to and including removal from scheduled hours or termination.

#### **USE OF AGENCY NAME PROPERTY**

All supplies, equipment or other AMANI HEALTH CARE SERVICES, LLC property is to be utilized for AGENCY use only. Before transporting or removing any Company property, authorization from a Supervisor is required.

#### **ANSWERING TELEPHONES**

The telephone is a primary source of business for AMANI HEALTH CARE SERVICES, LLC. Employees are to answer telephones in a courteous manner. Generally, they should first give the appropriate greeting, state their name, and then ask how they may help the caller. If unable to help the caller, direct him or her to the appropriate person, voice mail, and/or take a message to assure that someone will return the call. When taking a message, be sure to get the caller's name, telephone number, reason for calling and the date and time of the call. If an individual calls with a complaint, be sure to notify a Supervisor as soon as possible.

#### **USE OF TELEPHONES / CELL PHONES**

The use of AMANI HEALTH CARE SERVICES, LLC telephones for personal calls is discouraged. Any such use should be for emergencies or with the permission of a Supervisor. Any personal calls made or received by Employees should be limited to two (2) minutes duration. Personal long distance calls charged to AGENCY are not allowed.

Using personal cell phones at work should be kept to a minimum and only used on breaks.

#### **PERSONAL APPEARANCE AND DRESS CODE**

Dress, grooming and personal cleanliness standards contribute to the morale of all Employees and affect the business image AMANI HEALTH CARE SERVICES, LLC presents to the community.

##### **Dress Code / Attire**

During business hours, Employees are expected to present a clean, neat, and professional appearance and to dress according to the requirement of their positions. **Nametags must be worn by all employees at all times.** If a client requests that an Employee not wear their nametag, the Employee is still required to have it with them. Supervisors are responsible for clarifying standards of appropriate dress. This includes exceptions to these policies and unique situations. Two levels of dress are appropriate for staff based on the requirements of their positions. The levels are as follows:

##### **Field Staff**

Dress can be functional and appropriate to the role of service deliverers. Recommended apparel includes: pants or comparable bottoms, casual shirts, sweaters, polo shirts, collared shirts and t-shirts or sweatshirts in good condition without any offensive or inappropriate slogans.

##### **Office Staff**

## **AMANI HEALTH CARE SERVICES, LLC Employee Handbook**

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### **Employee Conduct and Disciplinary Action**

Business casual is required on all work days, for all Office Employees who are not involved in direct service.

Business casual would (minimally) include for men: collared dress shirt, turtleneck or sweater; collared polo shirts, long or short sleeved; slack (no blue jeans); appropriate shoes; and ties are optional.

Business casual for women: slacks (no blue jeans) or skirt (appropriate length); collared polo shirt, long or short sleeved; blouse, turtleneck or sweater; and appropriate shoes.

#### **Unacceptable Clothing at any time includes:**

- Clothing that is not in good condition
- Casual sandals or flip flops
- Excessively short clothing, including short mini-skirts
- Halter tops, midriff or crop tops, tank & tube tops
- Tight or poorly fitted garments
- Shorts
- Baseball caps
- Sheer or see-through clothing
- Clothing with distracting or inappropriate images or messages

#### **Grooming**

- **AMANI HEALTH CARE SERVICES, LLC** expects good personal hygiene at all time.
- Perfumes and fragrances should not be used in excess.
- Facial hair should be neatly trimmed and clean at all times.
- **AMANI HEALTH CARE SERVICES, LLC** recommends no visible tattoos. When tattoos are visible, they should not be excessive in size, not draw attention to location and not demonstrate a negative message or theme.
- Jewelry – Any jewelry worn should be minimal and in good taste. It should not interfere with direct patient care or other on-duty responsibilities. *In keeping with professional decorum, ears are the only exposed areas of the body on which pierced jewelry may be worn.*
- Nails should be clean, neatly maintained and an appropriate length for completing job responsibilities.
- Hair shall be clean and neatly maintained.

#### **DRUG AND ALCOHOL USE**

It is **AMANI HEALTH CARE SERVICES, LLC** intent to provide a drug-free, healthy, and safe workplace. To promote this goal, Employees are required to report to work in appropriate mental and physical condition to perform their jobs in a satisfactory manner.

While on **AMANI HEALTH CARE SERVICES, LLC** premises and while conducting business related activities off **AMANI HEALTH CARE SERVICES, LLC** premises, no Employee may possess illegal drug

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## **AMANI HEALTH CARE SERVICES, LLC Employee Handbook**

### **Employee Conduct and Disciplinary Action**

paraphernalia, nor may they use, possess, distribute, sell, or be under the influence of alcohol or illegal drugs. “Illegal drugs” means inhalants and controlled substances, and includes medications which contain a controlled substance which are used for a purpose, in an amount, or by a person for which they were not prescribed or intended.

The legal use of prescribed drugs is permitted on the job only if it does not impair an Employee’s ability to perform the essential functions of the job effectively and in a safe manner that does not endanger other individuals in the workplace.

Violation of this policy may lead to disciplinary action, up to and including immediate termination of employment or required participation in a substance abuse rehabilitation or treatment program. Such violation may also have legal consequences. The Employee is expected to cooperate with any investigation into violations of this policy.

#### **TOBACCO USE**

In keeping with **AMANI HEALTH CARE SERVICES, LLC** intent to provide a safe and healthy work environment, smoking or use of other tobacco products at the workplace is prohibited

#### **POSSESSION OF GUNS OR WEAPONS**

The possession of guns or other weapons of any type is strictly prohibited at all **AMANI HEALTH CARE SERVICES, LLC** facilities, in **AMANI HEALTH CARE SERVICES, LLC** vehicles, at **AMANI HEALTH CARE SERVICES, LLC** outings and at any time Employees are on duty or in the presence of people served by **AMANI HEALTH CARE SERVICES, LLC**

Violations of this policy may result in discipline up to and including termination of employment.

#### **ETHICAL BEHAVIOR/CONFLICT OF INTEREST**

**AMANI HEALTH CARE SERVICES, LLC** requires the very highest standards of integrity and ethical behavior from each Employee. It is the policy of **AMANI HEALTH CARE SERVICES, LLC** that no Employee shall engage in activities contrary to its interest or inconsistent with the responsibilities entrusted to them. In general, there is conflict whenever an Employee achieves personal gain or incurs obligation to others at the expense of **AMANI HEALTH CARE SERVICES, LLC**. Such personal gain need not be direct and might include gain by family members or relatives. If there is ever a doubt about the proper course of conduct in any situation, it should be discussed with a Supervisor or any member of management. The following list includes areas where a conflict of interest is likely to arise, but it is not meant to limit the areas where Employees should exercise discretion:

##### **Fraud and Abuse**

All **AMANI HEALTH CARE SERVICES, LLC** Employees are prohibited from engaging in any practice that constitutes fraud or abuse with regards to any customer or **AMANI HEALTH CARE SERVICES, LLC** funds. Any Employee who learns of a violation of this policy, or is unclear as to the application of this policy, should immediately contact their Supervisor or any officer of **AMANI HEALTH CARE SERVICES, LLC**

##### **Gifts**

Employees are prohibited from soliciting or accepting gifts, money, loans, special discounts for personal use, personal services or any other items of value from any consumer, family member of a consumer, vendor, supplier, or any other person outside **AMANI HEALTH CARE SERVICES, LLC** who has or is seeking to have a business relationship with **AMANI HEALTH CARE SERVICES, LLC**. Any such gifts or offers must



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be immediately reported to a Supervisor. The acceptance of such gifts can create the impression to consumers and their families, that the gifts are required in order for the consumer to receive appropriate levels of care. With vendors and suppliers, the acceptance of gifts can impact or be viewed as impacting objectivity in making business decisions.

Non-monetary gifts of nominal value under \$20.00 may be accepted from consumers under appropriate circumstances. i.e. bakery goods, candy, flowers, and/or arts and crafts. At no time should an Employee solicit, request or otherwise indicate gifts, payments, favors, etc., are expected.

Similarly, **AMANI HEALTH CARE SERVICES, LLC** policy prohibits the making of any offers or actual payments in cash or in kind, to any public Employee or official or any other person for the purpose of procuring business or other benefits for **AMANI HEALTH CARE SERVICES, LLC** or for personal benefit.

#### **Personal Financial Interest**

Employees who may have a personal financial interest in any transaction being contemplated by **AMANI HEALTH CARE SERVICES, LLC** must disclose this interest to their Supervisor or an officer of **AMANI HEALTH CARE SERVICES, LLC**

#### **Misuse of Information**

Misuse of inside information or confidential information not available to the public for personal or others' gain, to include client or Employee mailing lists or any use of such information to **AMANI HEALTH CARE SERVICES, LLC** disadvantage or the Employee's or others' improper advantage. This also includes Use of **AMANI HEALTH CARE SERVICES, LLC** resources to develop competitive programs for personal use or use by others.

#### **Political Contributions**

Payments, gifts, loans or the furnishing of services by **AMANI HEALTH CARE SERVICES, LLC** to any political party or committee, candidate for, or holder of a political office is prohibited. Employees are, of course, free to make any individual contributions that they desire, as long as the contributions are not funded or reimbursed in any way by **AMANI HEALTH CARE SERVICES, LLC**.

### **CONFIDENTIALITY OF AGENCY NAME INFORMATION**

**AMANI HEALTH CARE SERVICES, LLC** regards the confidentiality of its records as essential to the provision of services. Such information includes, but is not limited to, the following examples:

- Compensation Data
- Financial Information
- Customer Lists
- Marketing Strategy

Duplication of **AMANI HEALTH CARE SERVICES, LLC** or individual information for purposes outside of **AMANI HEALTH CARE SERVICES, LLC** must be approved by a Supervisor. Duplication of information that is not required as part of specified job duties is not allowed.

**AMANI HEALTH CARE SERVICES, LLC** reputation is a valuable asset. Disclosure of confidential information, or the spreading of libelous or malicious information about persons served by **AMANI HEALTH CARE SERVICES, LLC** its facilities or programs, other Employees, or services provided, may result in disciplinary action up to and including termination. Please note, however, that this policy shall in no way prohibit Employees from sharing information in the exercise of their rights guaranteed them under Section 7 of

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the National Labor Relations Act, from complying with any vulnerable adult, juvenile or other reporting requirements or from engaging in other legally protected communications.

#### **HARASSMENT/SEXUAL HARASSMENT**

It is the policy of **AMANI HEALTH CARE SERVICES, LLC** to abide by federal and state laws that prohibit sexual harassment and to maintain an employment atmosphere free of harassment, intimidation, or coercion. Supervisory and management personnel of the company are responsible for implementing this policy.

Harassment of an Employee by another Employee, client, or other person is a form of misconduct that undermines the integrity of the employment relationship and will not be tolerated. If the investigation into a complaint of harassment indicates that harassment has occurred, the offending Employee will be immediately terminated. Every effort will be made to correct and remove the harassing situation if a non-Employee is conducting the harassment.

In the event that a client or client's family member harasses an Employee, it is the Employees responsibility to report such behavior immediately to their supervisor who will institute follow-up action.

No Employee of **AMANI HEALTH CARE SERVICES, LLC** may engage in verbal or physical conduct that denigrates or shows hostility or aversion toward an individual because of that person's race, creed, color, religion, sex, national origin, marital status, status with regard to public assistance, disability, age, membership on a local human rights commission or sexual orientation, or that of the person's relatives, friends or associates, if the conduct:

- Has the purpose or effect of unreasonable interfering with the person's work performance; or
- Otherwise adversely affects that person's employment opportunities.

The following are examples of prohibited harassment. Please note that these are not the only examples. If an Employee has a question about whether conduct is permissible under this policy, they should discuss it with their supervisor or with Human Resources.

- Epithets, slurs or negative stereotypes;
- Intimidating or hostile acts based upon protected classification;
- Written or graphic material that denigrates or shows hostility or aversion to persons of a protected classification and that is posted or circulated on **AMANI HEALTH CARE SERVICES, LLC** property or in a client's home;

One form of prohibited harassment is sexual harassment. Sexual harassment is defined as:

- Making unwelcome sexual advances or requests for sexual favors or other verbal or physical conduct of a sexual nature a condition of any Employee's obtaining employment or continuing employment;
- Making submission to or rejection of such conduct the basis for employment decisions affecting an Employee; or
- Creating an intimidating, hostile or offensive working environment or otherwise substantially interfering with an individual's employment by such conduct; or
- Retaliating against an Employee for complaining about such conduct.

The following are examples of sexual harassment. Please note that these are not the only examples:

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- Unwelcome sexual flirtations, propositions, and invitations to events;
- Offensive physical contact or physical closeness;
- Use of words of a sexual nature describing body parts or sexual acts, tell “suggestive” jokes or stories, and conversation about sexual exploits or sexual desires;
- Displaying in the workplace sexually suggestive objects, pictures, cartoons, or representations of any action or subject which is sexual in nature and which can be perceived as offensive;
- Sabotaging an Employee’s character, reputation, work effects, or property because of sex;
- Direct or indirect suggestions that an Employee’s job security, job assignment, conditions of employment or opportunities for advancement depend in any way on the granting of sexual favors or relations.

#### **Complaints Relating To Prohibited Harassment**

An Employee who believes he or she has been subject to harassment prohibited by this policy should report the incident immediately to their supervisor or Human Resources.

The complaining Employee will be asked to put the facts surrounding the offensive conduct or communication in writing. Thereafter, the investigation may include interviews with the Employee making the charges, the accused Employee, or appropriate witnesses, depending upon the individual circumstances of the matter.

Determination of whether prohibited harassment occurred will be made on a case-by-case basis, depending upon the circumstances of the matter, including the type of harassment alleged, the context in which the alleged harassment occurred and any other facts deemed relevant. The Employee making the complaint will be advised of the final disposition of the matter.

#### **Penalties for Prohibited Harassment**

A violation of this policy may be grounds for immediate discipline, up to and including discharge, or other appropriate actions. Sanctions, in any, will be determined on a case-by-case basis, after a review of relevant information.

### **COMPUTER INFORMATION**

Any and all information compiled on work-time is considered **AMANI HEALTH CARE SERVICES, LLC** property. This includes all computer generated information whether prepared using personal or **AMANI HEALTH CARE SERVICES, LLC** computers. At the time of termination, all information created or stored by computer will remain in the possession of **AMANI HEALTH CARE SERVICES, LLC** and any and all copies of the information in the Employee's possession, whether in document or electronic form, must be returned to **AMANI HEALTH CARE SERVICES, LLC**

### **ELECTRONIC COMMUNICATIONS**

This policy defines appropriate usage of electronic communication resources provided to Agency Employees, and appropriate activities and conditions relating to the usage and communication of Agency information both within the organization and with outside entities. This policy statement covers the security, confidentiality and integrity of information obtained, created or maintained by **AMANI HEALTH CARE SERVICES, LLC** Employees.

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## **Employee Conduct and Disciplinary Action**

### **Guidelines:**

**AMANI HEALTH CARE SERVICES, LLC** provides access to various information technology resources for its Employees. These resources are provided to facilitate the creation and communication of business-related data in the most effective and efficient manner possible. Resources such as computers, the Internet, e-mail, telephone and fax are intended for Agency business only.

All data entered, created, received, stored or transmitted via Agency equipment is considered **AMANI HEALTH CARE SERVICES, LLC** property and is therefore subject to inspection, search and disclosure at all times by senior management. This is to safeguard the interests of **AMANI HEALTH CARE SERVICES, LLC** and protect it from potential liability.

### **Core Guidelines:**

Communications sent from the **AMANI HEALTH CARE SERVICES, LLC** network are identified as originating from the server and carry the company name. E-mail and Internet usage and communications must reflect well on the organization. Each Employee is responsible for using company E-mail and Internet resources in an acceptable manner.

- Passwords are confidential. Do not provide passwords to anyone except on a “need to know” basis for official Agency business purposes. Examples of people who may need to know a password are a supervisor needing access to a file in the absence of the staff member, or a member of the management team. Never log in to the health information system using someone else’s password, even if it seems like a timesaver. It is essential that the agency is able to tell who looks at what records, and that is not possible when Employees share passwords. Don’t write the password down, post it, or keep it where others can find it. Doing so puts information at risk.
- The electronic communications systems should be used in ways that further **AMANI HEALTH CARE SERVICES, LLC** business interests and support work on behalf of the company. Any use of **AMANI HEALTH CARE SERVICES, LLC** information or systems for the financial gain of an Employee or third party not relating to those interests is strictly prohibited.
- All language used in communications should be professional and courteous. Abusive or obscene content in communications is strictly prohibited.
- Use appropriate business English. In a culturally diverse environment such as the Agency, the use of slang, humor, sarcasm, or local terminology may not be correctly interpreted.
  - E-mail is no different than a written document. A file can be stored in the system indefinitely and can be reviewed, if necessary, during legal proceedings involving **AMANI HEALTH CARE SERVICES, LLC**. Take as much care in sending e-mail messages as with any confidential written document.
  - Treat all e-mail messages as public information. Senders have no control over messages once they are sent, and recipients may forward the messages to people not originally intended to receive them.
  - All internet communication should be treated as public information since those messages are not generally encrypted. No confidential or copyrighted information should be sent through the Internet.
  - Confidential information such as performance or disciplinary communications should never be sent electronically.
  - Staff members should use discretion when opening, downloading and saving files sent via e-mail or from the Internet. Prior to placing any file on the network, staff members should scan for viruses.

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#### **Software:**

Only software purchased and licensed by **AMANI HEALTH CARE SERVICES, LLC**, or personally purchased software approved by management, may be installed on **AMANI HEALTH CARE SERVICES, LLC** equipment. Management may periodically conduct an audit of installed computer software. Unauthorized software will be removed.

#### **Personal Use:**

E-mail is not meant for personal use at work. Sharing or opening attached files from unknown sources can open the door to viruses and hackers. Keep in mind that one can never be sure who will have access to a message on the receiving end.

#### **Prohibited Use:**

The following are areas that are expressly prohibited by **AMANI HEALTH CARE SERVICES, LLC**:

- Sending or receiving any data that may be construed to violate the values or harassment policies of **AMANI HEALTH CARE SERVICES, LLC**. This prohibition includes sexually explicit or offensive messages or images, cartoons or jokes, ethnic or religious slurs, racial epithets or any other statement or image that can be construed as harassment or disparagement;
- **AMANI HEALTH CARE SERVICES, LLC** computer-related resources may be used to knowingly violate the laws and regulations of the United States of America or any other nation or the laws and regulations of any state, city, province or other local jurisdiction in any material way;
- Use of any of **AMANI HEALTH CARE SERVICES, LLC** computer-related resources for illegal activity is grounds for immediate dismissal and we will cooperate with any legitimate law enforcement activity;
- **AMANI HEALTH CARE SERVICES, LLC** computer-related resources are not to be used to download, store, replicate or distribute software programs or data in violation of their applicable copyrights, licenses or proprietary rights;
- **AMANI HEALTH CARE SERVICES, LLC** computer-related resources are not to deliberately propagate any virus, worm, "Trojan" horse or trap-door program code;
- Private information (e.g. account numbers, identifying information ) is not to be accessed, copied or distributed for any reason except to perform company business in a manner consistent with the operating policies and procedures of **AMANI HEALTH CARE SERVICES, LLC**
- Passwords assigned to individuals are not to be disclosed to anyone;
- Accessing another Employee's personal files without their consent;
- Disruptive behavior such as introducing viruses or intentionally destroying or modifying files on the network;
- Intentional misuse of data or equipment;
- Collection and/or transmission of materials in violation of any federal, state or local law;
- Chain letters that are mailings with a request to recipients to continue distribution to others;
- Messages to other Employees that serve as advertising or solicitation for personal gain.
- Employees are to report violations of this policy to appropriate Company management personnel in a timely manner.

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## **AMANI HEALTH CARE SERVICES, LLC Employee Handbook**

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#### **SOLICITATION AND DISTRIBUTION**

In order to prevent disruptions in the operations of **AMANI HEALTH CARE SERVICES, LLC** facilities, to protect Employees from harassment and interference with their work, and to ensure a safe and supportive environment for our consumers, the following rules regarding solicitation and distribution of literature on **AMANI HEALTH CARE SERVICES, LLC** property must be observed. If any Employee becomes aware of a solicitation or distribution that is not in accord with these rules, he or she must inform his or her Supervisor immediately. Violation of these rules may result in disciplinary action up to and including employment termination.

Solicitation or distribution of literature of any kind and for any purpose by non-Employees is strictly prohibited anywhere on **AMANI HEALTH CARE SERVICES, LLC** property and controlled premises, including both work and non-work areas.

Distribution of literature of any kind and for any purpose by Employees is prohibited in all work areas at any time. With regard to community residence care facilities, "work areas" include all inside areas except office and Employee break areas.

Solicitation or distribution of literature of any kind by any Employee is prohibited during working time. "Working time" does not include break periods or meal times. Employees may solicit during non-working times provided that each of the Employees involved is on non-working time, and such activity is not carried out in the presence of consumers and does not interfere with nor detract from Employees' consumer care responsibilities.

This rule shall apply equally whether the solicitation or distribution of literature is for charitable, civic, organizational or any other reason.

#### **DISCIPLINARY ACTION/RESOLUTION**

Occurrence of any of the following violations **may result** in immediate termination without warning:

- Negligence or any careless action that endangers the life or safety of another person
- Unauthorized possession of dangerous or illegal firearms or weapons on **AMANI HEALTH CARE SERVICES, LLC** or client property. Willful violation of any **AMANI HEALTH CARE SERVICES, LLC** or client policy
- An act of harassment, sexual, racial or other
- Unsatisfactory or careless work, failure to meet **AMANI HEALTH CARE SERVICES, LLC** standards
- Obscene or abusive language toward any manager, Employee or client
- Indifference or rudeness towards a client or fellow Employee
- Immoral conduct or indecency on **AMANI HEALTH CARE SERVICES, LLC** or client property
- Threatening, intimidating or coercing fellow Employees on or off the premises--at any time, for any purpose
- Malicious gossip and/or spreading rumors, engaging in behavior designed to create discord and lack of harmony
- Sleeping on the job
- Theft of **AMANI HEALTH CARE SERVICES, LLC** or client property or the property of fellow Employees; unauthorized use or removal of **AMANI HEALTH CARE SERVICES, LLC** or client property

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- Insubordination or refusing to obey instructions properly issued by the Employee's supervisor pertaining to their work
- **Alteration of an Employee's own time records or attendance documents; altering another Employee's time records, or causing someone to alter or misrepresent time records**
- Failure to report an absence or late arrival; excessive absence or lateness.
- Willful violation of any **AMANI HEALTH CARE SERVICES, LLC** or client policy
- Willful violation of security or safety rules
- Dishonesty, willful falsification or misrepresentation on an application for employment or other work records; lying about sick or personal leave; falsifying or alteration of client records

Should an Employee's performance, work habits, overall behavior, conduct, or demeanor be unsatisfactory in the judgment of the company, based on violations of the above or of any other company policies, rules, or regulations, the Employee will be subject to disciplinary action, up to and including immediate termination. The company also may terminate an Employee's employment with or without cause.

When a supervisor discovers an infraction has occurred, it will be documented and the appropriate disciplinary action will occur. If client safety is compromised by an Employee's actions or if actions involve serious misconduct such as a breach of **AMANI HEALTH CARE SERVICES, LLC** policy or violation of the law, the supervisor may suspend them immediately and recommend termination.

The Employee and the supervisor will meet to discuss the infraction, the Employee will be asked to sign the disciplinary form. The report becomes a permanent part of the Employee's personnel record.

#### **EMPLOYEE GRIEVANCES**

A grievance is an Employee's written complaint concerning the interpretation or application of personnel policies or procedures, or concerning actions of others that the Employee deems to have created a hostile or discriminatory working environment.

All grievances must be filed in writing. The written documentation must clearly describe the nature of the complaint or dispute and identify it as a grievance. The date and signature of the individual filing the grievance must also be included.

#### **Formal Grievance Procedure:**

In the event that a conflict is not resolved to the Employee's satisfaction during informal discussions with the Employee's Supervisor, then the following procedures may be followed:

1. A grievance must be presented to the Employee's immediate Supervisor for discussion and resolution. If the immediate Supervisor is the subject of the dispute, the grievance may be presented to the Supervisor's superior.
2. Within 30 days of receipt of a grievance, the Supervisor or his or her superior will provide acknowledgment to the Employee that the grievance has been received. After the grievance is received, an investigation of the conflict will be conducted in a timely manner and the Employee will be provided with a response.
3. If the Employee is not satisfied with the response, the Employee may resubmit the grievance utilizing the Chain of Command as shown in the Organizational Chart. Another investigation and written response will be provided to the Employee.

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4. If the Employee is not satisfied with the investigation and response, the grievance may be filed with **AMANI HEALTH CARE SERVICES, LLC** Board of Directors at the following address:

**Amani Health Care Services ,LLC**  
**17595 Kenwood Trl Suite 270**  
**Lakeville, MN 55044**

The decision of the Board of Directors regarding the Employee's grievance will be the final decision of **AMANI HEALTH CARE SERVICES, LLC**



## **VULNERABLE ADULTS PROTECTION POLICY**

**AMANI HEALTH CARE SERVICES, LLC** staff will assess each client to determine the client's vulnerability to abuse or neglect. All Employees of home health agencies are mandated reporters if they suspect that a client is being abused or neglected. If any Employee of **AMANI HEALTH CARE SERVICES, LLC** is concerned that a client may be abused or neglected, concerns are to be immediately reported, directly to a nursing Supervisor or member of the management team. Reasonable judgment should be used when reporting, making certain that the abuse or neglect is apparent and not just merely hearsay.

When abuse or neglect is suspected or identified, **AMANI HEALTH CARE SERVICES, LLC** Employees will report those observations or findings. The Employee may report by phone or in person. The following information is to be included in the report:

- Persons involved including alleged victims, perpetrators, and witnesses
- Nature and extent of the suspected abuse or neglect and any disability of the victim
- When and where the abuse/neglect occurs
- Any evidence of previous abuse or neglect
- Individual creating the report
- Any additional information pertinent to the suspected abuse or neglect

When the information has been reported to the Supervisor, that person must assess and determine whether a report must be filed with the vulnerable adult/child division called the Common Entry point at the county in which the client resides. The Employee making the report will be notified about whether the report has been filed and if not, the reasons for not filing.

Any person who makes a report in good faith will have immunity from any civil liability that otherwise might result from the report. Failure to report is a misdemeanor and exposes the non-reporter to potential civil damages. Any person who intentionally makes a false report is guilty of a misdemeanor and shall be liable for actual civil damages suffered by the person or persons reported.

### Who is Considered Vulnerable?

1. Any person, regardless of age or where the person is living, who is unable or unlikely to report abuse without assistance because of mental or physical function impairment or his/her emotional status; or
2. Any person who lives in or receives services from a facility

### What is Abuse?

Abuse is the intentional and non-therapeutic infliction of pain or injury or any persistent course of conduct intended to produce mental or emotional distress. This implies hitting, striking or injury of a person or such conduct, including verbal abuse, intended to upset or disturb a person.

### What is Neglect?

Neglect means failure by a caregiver or family member to supply the vulnerable adult with necessary food, clothing, shelter, health care or supervision.

If abuse or neglect is suspected of a person who cannot reasonably ask for assistance or help, the Employee of **AGENCY NAME** has the responsibility to report the abuse or neglect. There may be times when the person is fully competent and does not wish for help. Their decision must be respected and in this instance, no report would be made.

## **CLIENT RIGHTS**

**AMANI HEALTH CARE SERVICES, LLC** Employees are expected to respect client rights at all times. The Home Care Client Bill of Rights will be explained during orientation. Each home care client will receive a copy of their rights during the admission visit. Clients are also informed of their right to contact the Home Health Agency Hotline Number provided by the Minnesota Department of Health.

If clients have complaints regarding their services, they are encouraged to state their complaint to the agency staff. If a complaint is received, report it to a Supervisor. **AMANI HEALTH CARE SERVICES, LLC** will make every attempt to respond to the clients concern. In the event the client does not feel the complaint has been heard or responded to, they may contact the Hotline Number and someone from the Department of Health will investigate.

### **CLIENT CONFIDENTIALITY**

By accepting employment with **AMANI HEALTH CARE SERVICES, LLC** each Employee is obligated to carefully refrain from discussing any client's condition or personal affairs with anyone outside **AMANI HEALTH CARE SERVICES, LLC** unless expressly authorized to do so. Do not pass on medical information to clients and visitors unless specifically instructed to do so by a Supervisor. In addition, all information seen or heard regarding clients, directly or indirectly, is completely confidential and not to be discussed even with family members.

An Employee's job requires that he/she be governed by high ethical standards. Failure to recognize the importance of confidentiality is not only a breach of professional ethics but can also involve an Employee in legal proceedings. Information about the clients or **AMANI HEALTH CARE SERVICES, LLC** is not to be given to the media. This is essential for the protection of both the client and **AMANI HEALTH CARE SERVICES, LLC** Agencies are bound by very strict laws regarding the release of information concerning clients.

Each Employee will be asked to sign a document that indicates understanding and agreement to abide by this policy. Any breach of this will result in disciplinary action, including possible immediate termination from employment.

### **HIPAA (HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT)**

HIPAA is a broad law that covers a variety of issues. One of its goals is to enable people to move easily from one health insurance plan to another as they change jobs or become unemployed and allow providers treating clients to share information more easily.

The law requires all health care organizations and payers to use standard formats for common transactions such as submitting a claim on a client's behalf. Today with e-mail, Internet access, and electronic records, it's much easier for providers to share records, but it is also much easier for people to misuse the information they contain. That is why HIPAA includes sections with requirements for protecting client privacy and ensuring security of health information.

**Under HIPAA it is illegal to release health information without permission or fail to adequately protect it from unauthorized release:**

- Knowingly releasing patient information in violation of HIPAA can result in a one-year jail sentence and a \$50,000.00 fine.
- Gaining access to health information under false pretenses can result in a five-year jail sentence and a \$100,000.00 fine.
- Releasing client information with harmful intent or selling the information can lead a 10-year jail sentence and a \$250,000.00 fine.

### **WHAT IS CONFIDENTIAL INFORMATION AND WHAT DO I NEED TO KNOW?**

Confidential information is identifying information about the person or their treatment, including: Name, address, age, social security number, diagnosis, medical history, medications, and observations of health status.

Doctors, nurses, therapists and other clinical staff use this information to determine how to treat clients. Billing departments need information to bill clients, insurance companies, Medicare and Medicaid. Office staff needs access to records to carry out the functions of their jobs. It is helpful to ask the following before looking at client information: Do I need to know this to do my job? What is the least amount of information that I need to do my job?

HIPAA requires health care workers to use or share only this “minimum necessary” information that is needed to do their jobs effectively. The minimum necessary requirement does not apply to uses and disclosures for treatment. Clinical staff is allowed to look at their client’s entire record and share information freely with other clinicians directly caring for that client.

### **WHO IS AUTHORIZED TO SEE INFORMATION?**

All members of the work force in an agency contribute to the quality of care. But that doesn’t mean everyone needs to see health information about clients. Many Employees have no access to client information on computer or on paper because they don’t need it to do their jobs. If an Employee does not need to know confidential client information, they should not look at medical records. Even if there is no access to records, it is part of each Employee’s job to help the agency keep its commitment to client confidentiality. If a violation is identified, report it to a Supervisor or directly to the Privacy Officer.

### **WHAT IF I OVERHEAR PRIVATE INFORMATION?**

Even if there is not a need to use client information in a job, there still will be occasions when confidential information is overheard or seen. When that happens, remember that the information is private, and cannot be repeated or shared with others. This rule applies even when the Employee ceases to work for this agency.

Clients may speak about their condition even though there is no need to know all this information. There’s nothing wrong with this, but remember that they trust that this information will be kept confidential.

If other Employees are over-heard discussing client care around people who don’t have the right to hear that information, remind them of the agency’s policy and let them know that they can be overheard. If this is a persistent problem and a risk to the client’s privacy, notify a Supervisor about the problem.

### **HOW TO PROTECT CONFIDENTIALITY:**

- Don’t assume that a client is comfortable with discussing his or her condition in front of or within earshot of family members and friends.
- Ask the client whether he or she wants to share information with specific individuals and obtain permission to do so. Before leaving copies of the client’s chart or other health information in the home, obtain client’s consent.
- Don’t leave client records, including any piece of paper, computer, or handheld device containing client health information, where others can see them.
- Don’t leave client files on a car seat, or in another client’s home.
- Keep client information where family members or guests will not see it.

- When rushing from one visit to the next, remember not to interfere with client privacy or jeopardize the confidentiality of client information in the process
- **DO NOT** fax information that contains client names and other protected information unless directed to do so and fax machines are secure.

**HELP THE CLIENTS UNDERSTAND THEIR RIGHTS.**

The Agency is required to provide a “Notice of Privacy Practices” to all clients that explains how we will use their information. AMANI HEALTH CARE SERVICES, LLC compliance officer of the AMANI HEALTH CARE SERVICES, LLC administrator must be notified of all requests for outside access to any clinical records and are the only ones with proper authority to release any client’s clinical records. Releasing a client’s records to any outside party without AMANI HEALTH CARE SERVICES, LLC knowledge and consent will result in immediate termination.

- Clients have the right to access their own records and to request amendments to them, if appropriate.
- Clients have the right to have confidential communication
- Clients have the right to limit the numbers of people who may access their records
- Clients have the right to be informed of when and to whom disclosures are made

**HOW DOES THE AGENCY PROTECT PRIVACY?**

Employees who use computerized records must not leave their computers logged in to the client information while they are not using them.

Computer screens containing client information must be turned away from the view of the public or of people passing by.

Discussions about client care must be kept private so that visitors and others do not overhear them.

The agency must monitor who gains access to records to ensure the records are being used appropriately.

Paper records that are no longer needed must always be shredded or placed in closed receptacles for delivery to a recycling Company that will shred them. They must never be placed in the garbage.

**EXCEPTIONS TO THE RULES:**

Sometimes the agency must release information regardless of whether the client approves. In most cases, the agency will inform clients when it is reporting their health information to police or others outside the agency, but there are cases in which clients do not have the right to control their information. **In all cases, the agency complies with the law and reports information when necessary. Again, this information should not be released without the knowledge and consent of the AMANI HEALTH CARE SERVICES, LLC compliance officer or the Administrator. Unless reporting this information is part of an Employee’s job, they should not be reporting it themselves.**

**TIMES WHEN AGENCY MAY RELEASE CONFIDENTIAL INFORMATION WITHOUT AUTHORIZATION:**

- State health agencies require providers to report them when clients have certain communicable diseases, even if the client doesn’t want the information reported.

- The Food and Drug Administration requires providers report certain information about medical devices that break or malfunction.
- Some states require physicians and other caregivers who suspect child abuse or domestic violence to report it to the police.
- Police have the right to request certain information about clients to determine whether they are suspects in a criminal investigation.
- The courts have the right to order providers to release client information.
- Providers must report cases of suspicious deaths and suspected crime victims.

### **RESPECT FOR CLIENT PROPERTY AND FINANCES**

**AMANI HEALTH CARE SERVICES, LLC** staff may not borrow a client's property, nor in any way convert a client's property to their own personal possession or that of anyone else. **AMANI HEALTH CARE SERVICES, LLC** personnel are expected to exercise care when handling client property and to obtain client approval in using client's property. Any damage or loss of client property must be reported to the responsible party and a Supervisor as soon as possible. An incident report must be filled out.

**AMANI HEALTH CARE SERVICES, LLC** staff may assist clients with household budgeting, including paying bills and purchasing household goods, but may not otherwise manage a client's property. **AMANI HEALTH CARE SERVICES, LLC** Employees must provide receipts to the client for all transactions and purchases paid with the client's funds. In the rare instance when receipts are not available, the transaction must be documented. **AMANI HEALTH CARE SERVICES, LLC** staff will provide these services as directed in the client's care plan. If these services are requested by the client and are not on the care plan, a Supervisor must be notified of this request.

Employees of **AMANI HEALTH CARE SERVICES, LLC** may not accept powers-of-attorney from clients for any purpose, and may not accept appointments as guardians or conservators unless there is a clear organizational separation between the Employee services and programs that appoints guardianship conservatorship.

### **INCIDENT REPORTING**

**AMANI HEALTH CARE SERVICES, LLC** is committed to providing a safe and healthy working environment. In the event that an unusual incident occurs while working in a client's home, a call should be immediately placed to the Employee's supervisor and a report of the incident filled out as soon after the incident as is safely possible. (See **Addendum for Incident Report form**)

Examples of incidents that the Employee observed or witnessed that require reporting include:

- A client's fall or injury.
- A medication error.
- Equipment failure causing real or potential harm to clients or Employees.
- Property damage.
- Theft.

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## **AMANI HEALTH CARE SERVICES Employee Handbook Employee Acknowledgement**

### **ACKNOWLEDGMENT**

**AMANI HEALTH CARE SERVICES, LLC** Employees are required to govern themselves by high ethical standards. Failure to recognize the importance of confidentiality is not only a breach of agency ethics, but can also involve an Employee in legal proceedings. Information about clients or the agency is not to be given to media. This is essential for protection of both the client and the agency. Agencies are bound by very strict laws regarding the release of information concerning clients.

- I have read and understand the documents contained in the Employee Handbook.
- I have received a copy of the Home Care Bill of Rights and have been fully informed of these client rights.
- I have read and understand **AMANI HEALTH CARE SERVICES, LLC** policies with regard to Equal Employment and Affirmative Action.
- I have read **AMANI HEALTH CARE SERVICES, LLC** Return-To-Work Program and understand that **AMANI HEALTH CARE SERVICES, LLC** 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.
- I agree to comply with all policies outlined in the Handbook as well as the other **AMANI HEALTH CARE SERVICES, LLC** policies and procedures reviewed during my orientation, including HIPAA requirements.
- I understand that this Handbook does not in any way constitute, and shall not be construed as an employment contract between **AMANI HEALTH CARE SERVICES, LLC** and myself or a promise of continued employment. All employment is at will.
- I understand that **AMANI HEALTH CARE SERVICES, LLC** reserves the right to establish, amend or abolish policies at any time as the needs of **AMANI HEALTH CARE SERVICES, LLC** may require.

### **Confidentiality of Client Information**

By accepting employment with **AMANI HEALTH CARE SERVICES, LLC**, I obligate myself to carefully refrain from discussing any client's condition or personal affairs with anyone outside the agency, unless expressly authorized to do so. I will not pass on medical information to clients and visitors unless I have been instructed to do so by my Supervisor. In addition, I understand that all information seen or heard regarding clients, directly or indirectly, is completely confidential and not to be discussed with anyone.

**I have read the information in the Employee Handbook. I further agree that I will abide by the client confidentiality agreement and realize that violating this policy may result in the immediate termination of my employment.**

Print Employee Name: \_\_\_\_\_

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

This acknowledgment is to be signed immediately and will be kept in your personnel file.