



Next Evolution

HEALTHCARE

*Evolving with our patients,
for our patients*

**NEXT EVOLUTION HEALTHCARE, INC.
EMPLOYEE HANDBOOK AND COMPANY
GUIDELINES**

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Revision 5/3/2021



WELCOME TO OUR FAMILY

This handbook (hereinafter “Handbook”) contains information regarding many of the policies and procedures of Next Evolution Healthcare Home, LLC, a State licensed Home Care Agency (hereinafter referred to as “NEHC”, “Agency” or “the Agency”). This Employee Handbook is intended to provide staff, interns and volunteers with a general understanding of the Agency’s personnel protocols, policies and Patient Consumer guidelines. This Handbook cannot anticipate every situation or answer every question about employment. **THIS HANDBOOK IS NOT AN EMPLOYMENT CONTRACT OR A LEGAL DOCUMENT.** In order to retain necessary flexibility in the administration of policies and procedures, NEHC reserves the right to change or revise policies, procedures and benefits described in this Handbook, other than the employment-at-will provisions, whenever NEHC determines that such action is warranted. None of the following policies or standards of conduct are intended, nor shall they have the effect of interfering or inhibiting any Employee in the exercise of any right guaranteed or protected by law.

EMPLOYMENT AT WILL:

It is the goal of this Agency to provide a positive work environment and a solid economic foundation upon which all Employees may build a future. However, NEHC also recognizes that Employees’ and management alike must sometimes initiate change. **In this regard, it is expressly understood that your employment is “at will.” Thus, you retain the right to terminate your employment with our Agency at any time for any reason and NEHC retains a corresponding right to end the employment relationship at any time for any reason.** This Handbook is not intended as a formal or exhaustive statement of Employee rights and responsibilities, nor is it a contract of employment. This Handbook is composed of general statements of NEHC’s current policies, rules, procedures and benefits. We feel strongly that we must retain flexibility to meet future economic challenges. Accordingly, NEHC reserves the right to amend, modify and/or eliminate any of these policies, rules, procedures and benefits at any time and at our sole discretion, with or without prior notice. On termination for any reason, you are only entitled to those benefits that are offered at the time your separation takes place. Any benefits offered in this Handbook apply only so long as this Handbook is current. They do not provide vested rights. This Handbook supersedes any previous oral or written provisions, descriptions or understandings of this Agency’s policies, rules, procedures and benefits. Any

variation from these policies will only be made upon written approval from the Administrator of this Agency.

EMPLOYEE INTRODUCTORY PERIOD:

All new Employees are in an introductory period during their first ninety (30) days of employment. During the introductory period, NEHC evaluates the Employee's work performance, including attendance and other work-related factors. NEHC is the sole judge in making all evaluations. We will continue to evaluate the work performance of each Employee who completes the introductory period. Employees' should use this introductory period to learn about NEHC in order to understand what we expect of our workers and understand the benefits of being an Employee.

EMPLOYEES IN THEIR INTRODUCTORY PERIOD ARE NOT ELIGIBLE TO PARTICIPATE IN COMPANY BENEFITS PLANS SUCH AS HEALTH INSURANCE AND PAID HOLIDAYS/SICK DAYS. ONCE AN EMPLOYEE SUCCESSFULLY COMPLETES THE INTRODUCTORY PERIOD, HE OR SHE WILL BE ELIGIBLE TO PARTICIPATE IN THE COMPANY'S BENEFIT PLANS IF SUCH BENEFITS ARE OFFERED. FAILURE TO ENROLL IN BENEFITS BY THE 60TH DAY OF EMPLOYMENT WILL BE CONSIDERED AN AUTOMATIC WAIVER OF BENEFITS AND EMPLOYEES WILL BE REQUIRED TO WAIT UNTIL THE NEXT OPEN ENROLLMENT PERIOD TO ENROLL.



EQUAL OPPORTUNITY AND NON-DISCRIMINATION POLICY:

NEHC affirms its personal commitment to fairness and equal opportunity for all Employees and Patient's it faithfully serves. NEHC values diversity and seeks the most qualified and talented Employees and Staff from diverse backgrounds.

POLICY:

No NEHC Employee shall discriminate against any other Employee, Patient or potential Patient for employment and or home care services because of race, color, religious creed, age, sex, ancestry, union membership, sexual orientation, gender identity, national or ethnic origin, disability or because the other Employee or Patient is/has been a victim of a violent crime (including crimes involving domestic violence). All matters related to recruiting, hiring, compensation, benefits, promotions, transfers, wellness programs, terminations, layoffs, returns from layoff, home care-sponsored training, education, and tuition reimbursement will be administered without regard to race, color, religious creed, age, sex, ancestry, union membership, sexual orientation, gender identity, national or ethnic origin, disability, and without regard to whether the person is a victim of a violent crime (including crimes involving domestic violence).

VIOLATIONS OF THIS POLICY:

All treatment on or at Patient assignment and NEHC offices must be free from discriminatory practices. Employees found to have violated this Policy will be subject to disciplinary action up to and including termination of employment.

ADA POLICY AND ACCOMMODATIONS:

NEHC will not engage in any unlawful discriminatory practices against any citizen, person, department, board, commission, institution, agency, state or local government, school district, or any entity or individual served/serviced by NEHC. In addition to the above and consistent with applicable law, it is the policy of NEHC not to discriminate against qualified individuals with disabilities. Reasonable accommodations will be provided in accordance with the law. Should you require additional services due to any injury and or disability please contact our office and alert us of such need or services and reasonable accommodations will be provided in accordance with the law.

CONTACT AND REPORT:

If you believe you have been sexually harassed in violation of NEHC's Sexual Harassment Policy, please contact the Agency Administrator IN ADDITION, you may contact:

The Office of Equal Opportunity

316-E Finance Building
Harrisburg, PA 17120-0018
(717) 705-3691

The Pennsylvania Human Relations Commission

301 Chestnut Street
Suite 300
Harrisburg, PA 17101-2515
(717) 783-8274

The Pennsylvania Department of Health

Health and Welfare Building
8th Floor West
625 Forster Street Harrisburg, PA 17120
1-800-254-5164



EMPLOYEE AND PATIENT SEXUAL HARASSMENT POLICY:

NEHC has pledged to preserve a working environment free from sexual harassment. Harassment is against the law and is a form of gender discrimination. The aim of this policy is to prevent harassment of any kind by anyone employed by or associated with the Agency.

POLICY:

Sexual harassment consists of unwelcome sexual advances, requests for sexual favors or unwanted sexual attention by anyone associated with the Agency, whether male or female. Harassment may include references to employment status or conditions or may serve to create a hostile, intimidating or uncomfortable work environment. Harassment includes, but is not limited to, obscene jokes, lewd comments, sexual depictions, repeated requests for dates, touching, staring or other sexual conduct committed either on or off company premises. "Victims of sexual harassment have the right to sue both the Agency and the perpetrator by contacting the Equal Employment Opportunity Commission or a state agency. For this reason and for the protection of all our Employees, NEHC seeks to prevent sexual harassment.

OBSERVE AND REPORT:

All NEHC Employees' are responsible for helping ensure that our workplace is kept free of sexual harassment. If you feel you have been a victim of sexual harassment, report the behavior to our Sexual Harassment Coordinator, the Administrator or to any Supervisor. If you have witnessed sexual harassment, you also are required to report the incident(s) so that prompt action(s) may be taken. All complaints will be treated seriously, kept as confidential as possible and investigated fully. NEHC expressly forbids any retaliation against Employees for reporting sexual harassment. If, however, the company finds that false charges have been filed, disciplinary action may be taken against anyone who provides false information. If an investigation confirms that sexual harassment has occurred, immediate action will be taken to put an end to the harassment.

VIOLATIONS OF THIS POLICY:

NEHC will take appropriate corrective actions against anyone found to be in violation of this policy, including possible immediate termination of employment.

CONTACT AND REPORT:

If you believe you have been sexually harassed in violation of NEHC's Sexual Harassment Policy, please contact the Agency Administrator IN ADDITION, you may contact:

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Health and Welfare Building
8th Floor West
625 Forster Street Harrisburg, PA 17120
1-800-254-5164



PATIENT GIFTS, FINANCIAL ABUSE RULES AND GUIDELINES:

PURPOSE:

1. To establish rules and guidelines for Employees caring for Patients at (NEHC).
2. To establish rules concerning Employee gifts, taking money, signing, receiving or endorsing personal checks from Patients', Patient's and or their family members.
3. To provide direction for Employees' and Staff when interacting with Patients and their families.
4. To minimize interruption of Patient care and Staff productivity.
5. To ensure that all Patient contact is consistent with NEHC Patient's Care mission.

DEFINITIONS:

PATIENT: Any person or their immediate family currently receiving any form of service(s) from NEHC.

POLICY:

All Patients including their immediate families that are actively receiving in-home care services will do so in accordance with NEHC policy. Employees shall interact with Patients and their families in a manner that meets ethical standards, avoids conflicts of interest, protects Patient confidentiality, does not interfere with the process of Patient care and encourages the appropriate home care services of the primary Patient at their residence. It is the responsibility of all Staff to monitor and assure that they are compliant with this Policy.

GIFTS FROM PATIENTS AND FAMILIES:

Gifts to Individuals: NEHC Policy strictly prohibits Employees and Staff from receiving any gift(s) which may improperly influence Employees in the conduct of their home care services and responsibilities in furtherance of this Policy, Patients and their families are prohibited from giving gift(s) of any kind to NEHC Employees or Staff.

This includes meals, food, gifts, gift cards and or related entertainment.

1. Employees and Staff are not allowed to have meals paid for by Patients' or its family.

2. Employees and Staff are not allowed to receive gifts, including money, gift cards, travel vouchers, personal checks, pens, books, souvenirs and any other items from Patients' and their family.
3. Employees and Staff are not permitted to sign or endorse Patients' and or its family checks.

DISCLOSURE:

All Employees and Staff are required to disclose to the AGENCY all donations, gifts, gratuities and other gifts offered by Patients and or its Family to assure compliance with this policy.

PROMOTIONAL MATERIALS NOT ALLOWED:

Employees and Staff are not permitted to distribute post or leave any non-NEHC printed or handwritten materials, advertisements, signs, or other promotional materials anywhere in the Patients residence or NEHC premises. Moreover, unsolicited educational, promotional, or informational materials may not be given to Patients and their families unless explicitly requested. All requested promotional materials must be approved before dissemination to Patients and or their family by the Agency Administrator.

PATIENT FINANCIAL INSTRUMENTS AND FIDUCIARY ROLE:

Employees and Staff are not permitted, at any time, during services to the Patient and their family, to offer, accept, receive and on enter into any fiduciary role (Power of Attorney, Guardian, Receivership, Trustee, and Administrator) or any other non-home caregiver role. Employees and Staff are not permitted at any time during services to Patient and their family, to offer, accept, receive, take, sign, endorse, cash and/or convert for personal use, any local, state, federal or other personal check(s) for made payable to a Patient and/or their family during or after services.

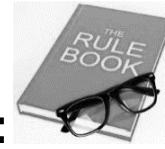
VIOLATIONS OF THIS POLICY:

1. Employees and Staff shall report noncompliance with these policies to their Supervisor and to the Agency Administrator.
2. The Agency Administrator will take action when violations are reported or uncovered; Supervisors are also responsible for enforcing these Policies within their departments.
3. Actions taken when Employees and Staff do not comply with this Policies can include any of the following:
 - a. Employees and Staff may be terminated and or suspended without further notice and or pay.

- b. Employees and Staff who violate **Section (B) Financial /Fiduciary Rules** may face criminal prosecution in addition to being immediately terminated.
- c. Patients and their families will be notified of any violations of this Policy.
- d. Patients and their family may face termination of service and restriction of future business if they continually ignore and/or repeatedly offer gifts to Employees and Staff.
- e. Reserved.

[THIS SECTION LEFT BLANK INTENTIONALLY]

EMPLOYEE WORK RULES OF CONDUCT



AT WORK OR PATIENT'S RESIDENCE:

PURPOSE:

NEHC has developed prohibited work rules all Employees should follow when at NEHC office and or its Patient residences.

POLICY:

This Policy helps ensure Employees' and Staff know what behavior is unacceptable at its office and at Patients' residence. The list of rules does not contain every possible standard of conduct expected from our Employees, **but** it states many of the more fundamental rules. If you are unsure about what is expected of you in a certain circumstance, please ask your Supervisor.

PROHIBITED CONDUCT INCLUDES:

Nothing in this prohibited work rules is intended to conflict with the NEHC's employment at-will policy. You hereby agree and understand that NEHC interpretation and judgment of whether a rule has been violated is final and binding on both you and the Agency.

1. Violating safety rules or Patient safety practices.
2. Engaging in horseplay, scuffling, or throwing things.
3. Failing to immediately and accurately report a personal or Patient related injury.
4. Being tardy or absent more than three (3) times without authorization or notification.
5. Missing two (2) consecutive scheduled workdays without notifying NEHC.
6. Contributing to unsanitary condition(s) or poor housekeeping of a Patient.
7. Smoking in unauthorized areas (NEHC and Patient's home).
8. Unauthorized use of NEHC or Patient phones and other work-related equipment.
9. Posting, altering, or removing any matter on bulletin boards on NEHC property.
10. Being dishonest or committing a fraudulent act(s) or acts of breach of trust.
11. Threatening, intimidating, coercing, or interfering with fellow Employees or Patient on NEHC/Patient property or on Agency business.
12. Using profane, abusive, or threatening language in front of Employees' or Patients'.
13. Engaging in emotional outburst and displaying hostility in front of Patients' or co-workers'.
14. Leaving your assigned Patient location during the shift without your Supervisor's permission.
15. Gross insubordination including willfully disobeying a Supervisor 's direct verbal or written instructions.
16. Working overtime without authorization or failure to work assigned posted hours.
17. Failing to follow job instructions, verbal or written, insubordination.
18. Stealing, misusing, destroying, or removing property from NEHC or Patient premises.
19. Using NEHC/Patient facilities, equipment time or materials without authorization.

20. Restricting production or causing, creating, or participating in a disruption of any kind during work time.
21. Provoking or instigating a fight or fighting during work hours, on NEHC or Patient property.
22. Engaging in criminal conduct whether it is related to job performance.
23. Sleeping on the job during work hours.
24. Falsifying any NEHC/Patient records or work logs, including employment information.
25. Recording the work time of another Employee.
26. Allowing any Employee to record your work time or allowing falsification of any Employee timecard.
27. Engaging in any conduct that NEHC, believes to be averse to the best interest of NEHC or the Patient.
28. Carrying firearm(s) or any other dangerous weapon(s) on NEHC or the Patient property.
29. Violating any NEHC rule, Policy and or safety procedure.
30. Being rude or disrespecting a Patient or a member of its family.
31. Violating the NEHC's number 1 rule # "The Patient is Always Right".
32. Reserved.

VIOLATIONS OF THIS POLICY:

Misconduct or violation of NEHC policies, rules or procedures may result in a verbal or written warning, a suspension with or without pay or if NEHC deems in its sole direction necessary immediate termination. NEHC will base the type of discipline it administers upon the facts of each particular case as determined by NEHC.

None of the above standards of conduct or work rules are intended, nor shall they have the effect of interfering or inhibiting any Employee in the exercise of any right guaranteed or protected by law.

KEY PERSONNEL AND CONTACT INFORMATION:

Caregiver Line - Monday to Friday, 9 am to 5 pm: (724) 550-4474

Emergency/On call Line - After hours & weekends: (724) 550-4474

Patient Line - Monday to Friday, 9 am to 5 pm: (724) 550-4474

Administrator personal line: (724) 570-2165

NOTE: The emergency/on call line will be answered 24 hours a day / 7 days a week, it should be used by caregivers to report last minute scheduling issues and other emergencies after hours and/or on weekends.

EMPLOYEE AVAILABILITY:



PURPOSE: NEHC, is committed to providing every DCW with a quality work shift and making every attempt to offer work hours and times that best suit them and their schedules all while ensuring the Agency is staffed properly at all times.

PERSONNEL: All DCW's who are assigned a full or part time Patient.

PROCEDURE: During orientation each Employee is asked to complete and sign a NEHC Availability Sheet. This sheet details the times each week that you as a DCW are available to work for NEHC. When new cases (Patient hours) become available, Staffing is performed using this information. Therefore, the more available time(s) each DCW can commit to - the more likely that they will be placed on the new case.

Should your availability change, please call the office to ensure that your caregiver availability profile is updated in the system. Each week a schedule will be created and communicated (via email, mail and/or phone) to each caregiver and Patient. Once this is done, each caregiver is expected to commit to the schedule and/or immediately call the office with questions or issues. If you don't get a weekly schedule by Wednesday (for the following week), please contact the office immediately. It is the caregiver's responsibility to know their schedule each week.

If you are scheduled for a shift and do not properly call out (TEXTING A MESSAGE IS NOT ALLOWED) there is an issue of Patient safety and well-being and NEHC must honor its commitments to our Patients therefore, this is grounds for immediate termination. In the event you are unable to report as scheduled, you must call your immediate supervisor (text message is not acceptable). This should be done no later than three (3) hours prior to your starting time and occur each day until you either return or are given other reporting instructions. Leaving a message with a co-worker does not relieve you of your reporting responsibility. If you fail to call in for two (2) consecutive workdays, NEHC will accept this as your voluntary resignation from the company.

EMPLOYEE ATTENDANCE POLICY

AGENCY EXPECTATIONS: NEHC expects all Employees to be on time, at work and ready to work a full shift as a condition of hire and continued employment. Absenteeism, early departures and late arrivals burden your fellow Employees. While it is recognized that it may be necessary for you to be absent occasionally, it is important that absences be kept to a minimum. You are expected to take care of personal affairs and obligations at a time other than during working hours. However, if it is necessary to be off for personal convenience, prior approval must be received from your immediate Supervisor. In reviewing that request, he or she will take into consideration the operating needs of his or her department. You may also want to review the policy on obtaining a leave of absence.

EMPLOYEE CALL-IN REQUIREMENTS: If you will be, absent from work for any reason, it is absolutely necessary for you to personally notify your Supervisor before the start of your scheduled shift; unless an unforeseeable event or an emergency prevents you from giving advance notice (TEXT MESSAGES ARE NOT PROPER NOTICE). In the case of an unforeseeable event or emergency, you must personally notify the Administrator within two (2) hours after the event or emergency. Notice of the Employee's absence from a spouse, parent or other person is **not acceptable**, unless an emergency prevents the Employee from personally contacting the Administrator. You must state why you are unable to attend work and must leave a phone number where you can be reached. Notifying NEHC of an absence or tardiness does not excuse the absence or tardiness. Upon request, **you must furnish proof satisfactory** to NEHC to substantiate the reason for absence or tardiness. Any Employee who knowingly falsifies information relating to their absence will be disciplined. Incarceration for any alleged criminal or civil law violation is not a valid excuse for not following this call-in policy. Failure to call in violates the call-in policy and will lead to disciplinary action up to and including discharge. If you fail to either call in or report to work for two (2) consecutive workdays, NEHC will accept this as your voluntary resignation from the Agency.

DOCTOR'S RELEASE AND STATUS REPORTS: A doctor's release may be required after any illness. A doctor's release will be required verifying that you are able to return to work following an injury or illness resulting in two (2) or more consecutive days' absence. If you are off work due to an injury or illness, you are required to contact your Supervisor once each week to report the status of your ailment and anticipated return-to-work date. Reporting requirements are the same for both on the job and off the job injuries and illnesses. NEHC may grant reasonable accommodation in complying with this Policy to individuals with disabilities if it does not cause undue hardship to NEHC's operations or cause a direct threat to health and safety of Patients and Employees'. However, regular attendance and promptness are considered part of each Employee's essential job functions.

VIOLATION OF POLICY: Excessive absenteeism or tardiness may lead to disciplinary action, up to and including termination of employment. Other continuing patterns of absences, early departures or tardiness, regardless of the exact number of days, may warrant disciplinary action or termination. NEHC may consider your record of tardiness, unexcused absences, excessive excused absences, suspensions, personal days off, leave of absence (except when provided according to state and federal law) and non-industrial sickness or injury resulting in time missed.



EMPLOYEE COMMUNICATIONS POLICIES:

TELEPHONE CALLS:

For our business, the telephone is an important link to our Patients and Employees and without it, NEHC would not be able to adequately support them and you. Proper and effective use of the telephone is critical to all of us. Personal telephone calls while at work can steal precious time and productivity and therefore should be limited and not to the detriment of care to the Patient and the NEHC's contracted services.

VEHICLES AND CELL PHONES:

The primary responsibility of an Employee driver is to operate a motor vehicle safely. The task of driving requires full attention and focus. Cell phone use can distract drivers from this task, risking harm to themselves, passengers and the general public. Therefore, the safest course of action is to completely refrain from using cell phones and or texting while driving.

PERSONAL CELL PHONES USAGE PROTOCOL:

NEHC is committed to providing a work environment that is safe, Patient focused, and free of unnecessary distractions related to personal cell phone usage. The use of cell phones or PDAs in the workplace or Patient's residence can interfere with the Patient care, Employee productivity, safety and can create issues regarding privacy, breach of HIPPA, Agency security, unacceptable customer service and loss of sensitive information.

CELL PHONE USAGE GUIDELINES:

Personal cell phone use is only allowed:

1. During breaks and/or lunches, and
2. Should only be utilized in designated areas permitted by the Patient.
3. Cell phones must be set to vibrate or silent mode instead of sounding ringtones

Cell phones must not interfere with Employee productivity, Patient safety or become a disturbance to Patient(s). Unless used for company related business, the company prohibits the use of the camera/video function on phones or PDA's in the workplace and at Patient's residences as a preventative step to secure Patient's privacy, HIPPA and other confidential Patient information. The Agency or its Patients' are not responsible and will not be liable for the loss or damage of personal cell phones or electronic devices brought into the workplace or Patients' residence.

MOBILE DEVICES AND USE OF HEADPHONES:

The Agency prohibits the use of personal mobile devices which include audio, video, and communication equipment while engaged in work activities at the Patients residence. This includes the use of electronic devices including but not limited to personal cell phones/PDAs used for voice, data, text, video, music or data functions. The use of mobile devices is allowed during designated breaks and lunch periods in designated areas (based on location). Agency issued mobile devices for work-related job requirements are permitted.

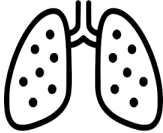
ELECTRONIC COMMUNICATION:

All electronic communication systems and all communications and information transmitted by, received from, or stored on any NEHC or Patient computer systems by Employees are the property of NEHC and as such are to be used solely for job-related purposes. The use of any software or business equipment, including, but not limited to, facsimiles, copiers, computers, cell phones, palm pilots, and copy machines, for private purposes (including games and other entertainment features) is strictly prohibited. Transmitting or displaying messages or pictures of a pornographic, sexist, racist, or otherwise offensive nature are also prohibited at NEHC's offices' and Patient residents.

EMPLOYEE PARKING:

Parking at NEHC facility may be provided. However, at Patient residences please respect the wishes of the Patient as to where they would like you to park.

TUBERCULOSIS SCREENING



COMPANY POLICY:

PURPOSE:

NEHC has established and maintains a Policy to comply with regulations pertaining to current and new office Staff, interns, volunteers and Employees regarding Tuberculosis testing and pre-hire (TB) screening.

POLICY:

All NEHC Employees, interns and volunteers who have direct Patient contact and contact with the public will be tested for active tuberculosis utilizing a two-step process in accordance with CDC guidelines prior to Patient contact and screened annually thereafter to prevent the potential infection and spread of TB and shall adhere to the following:

- This Agency requires all Staff, interns and volunteers whose functions require or necessitate contact with participants in or food preparation to be tested for TB prior to Patient contact per 4.4.2.6.1, and additionally screened in accordance with directives from the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services May 16, 2019; updated Guidelines.
- Provide pre-employment health screenings, which include a test for TB, within sixty (60) days prior to employment; it is NEHC policy not to provide any employment offers prior to receiving the applicants TB test results.
- NEHC Agency TB and Employment Policies provides for subsequent screening and or retesting only and after an occupational exposure in accordance with directives from the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services May 16, 2019, updated Guidelines.
- NEHC also maintains TB screening results in personnel records for at least three (3) years following termination of employment.
- NEHC TB and Employment Policies include temporarily relieving Employees from duty, any personnel with evidence of a physical illness that poses a threat to the health and safety of Patients, Staff and/or the public.

TUBERCULOSIS

TESTING + TREATMENT OF U.S. HEALTH CARE PERSONNEL

	2005 Recommendations	2019 Recommendations — Key Changes
Screening	<p>Recommended for all health care personnel pre-placement/upon hire*</p> <p>Annual screening may be recommended based on risk assessment of health care facility and setting</p>	<p>Individual baseline TB risk assessment added</p> <p>Annual TB screening no longer routinely recommended for most health care personnel unless occupational risk or ongoing exposure</p>
Post-exposure testing	<p>Recommended IGRA or TST test for all health care personnel when an exposure is recognized*</p> <p>If that test is negative, do another test 8–10 weeks after the last exposure*</p>	<p>No change</p>
Treatment of positive TB test	<p>Referral to determine whether latent TB infection (LTBI) treatment is indicated</p>	<p>Treatment is encouraged for all health care personnel with untreated LTBI</p> <p>Shorter course (3 to 4 month) treatments encouraged over the longer (6 or 9 month) regimens because they are easier to complete</p>
TB education	<p>Recommended annually for all health care personnel*</p>	<p>Annual education should include information about TB risk factors, the signs and symptoms of TB disease, and TB infection control policies and procedures</p>

*No change in the 2019 recommendations

Full recommendations available at cdc.gov/tb/topic/testing/healthcareworkers.htm



U.S. Department of Health and Human Services
Centers for Disease Control and Prevention



HIPAA COMPLIANCE ACKNOWLEDGEMENT:

PURPOSE:

To ensure Patients medical history and personal privacy are respected and protected, NEHC requires all Employees, Interns and Volunteers to comply with “PHI” or “HIPAA”.

POLICY:

NEHC is NOT a “covered entity” that is required to comply with “HIPAA”; however, NEHC, **voluntarily** complies with such laws accordingly. It is the policy of NEHC and its Employees to protect Patients’ privacy and provide for the security of all Protected Health Information “PHI” disclosed to NEHC and its Employees in connection with any and all retail pharmacy medical and non-medical services performed in compliance with the Health Insurance Portability and Accountability Act of 1996, 42 U.S.C. §1320d – 1320d-8 (“HIPAA”) and its implementing regulations promulgated by the U.S. Department of Health and Human Services, 45 C.F.R. Parts 160 and 164 (the “Privacy Rule”) and other applicable laws, as amended. “Protected Health Information” or “PHI” means any information, whether oral or recorded in any form or medium: (i) that relates to the past, present or future physical or mental condition of an individual; the provision of health care to an individual; or the past, present or future payment for the provision of health care to an individual; and (ii) that identifies the individual or with respect to which there is a reasonable basis to believe the information can be used to identify the individual, and shall have the meaning given to such term under the Privacy Rule, including, but not limited to, 45 C.F.R. Section 164.501.

In compliance with “PHI” and “HIPAA” guidelines, NEHC and its Employees hereby agree not to disclose Patient’s medical condition(s) and or history either during or after the term of employment to any third parties including but not limited to customers, relatives, friends, family friends, guest, or invitees of NEHC. Said medical history and records as described above is deemed confidential information of NEHC. Customers must provide NEHC with prior written permission before said confidential information will be released to any third-party including customer’s family, guest, invitees or agents.

COMPANY CONFIDENTIAL INFORMATION:

NEHC requires that Employees do not disclose individual salary information to coworkers, Patient's lists, NEHC operations or other information deemed confidential by NEHC. Any questions about this policy should be addressed to the Administrator and or NEHC legal representatives. Further, I am aware that, during the course of my employment, confidential information will be made available to me, for instance, marketing strategies, Patient lists, pricing policies and other information, I understand that this Information is proprietary and critical to the success of NEHC and must not be given out or used outside of NEHC premises or with non-NEHC Employees. In the event of termination of employment whether voluntary or involuntary, I hereby agree not to utilize or exploit this confidential information with any other individual or company and will immediately return all NEHC materials to include but not limited to; this Employee Handbook, Training Manual, Identification Badge, Patient Information Sheets, etc. I understand and agree that I will be financially responsible for any NEHC related materials that are not turned in upon termination and may be subject to a deduction in my pay from my last paycheck.

VIOLATION OF THIS POLICY: Any violations will result in disciplinary action up to and including immediate discharge.



EMPLOYEE RESTRICTIVE COVENANTS:

OUTSIDE EMPLOYMENT:

Outside employment can have a detrimental effect on performance and should be considered carefully. It will be considered a conflict of interest if it has any actual or potential adverse impact on the Agency. We expect that before you would pursue outside employment, you would discuss it with your Supervisor and garner support. Should your Supervisor determine that your outside work interferes with your performance or ability to meet the requirements of your job, you will be asked to terminate the outside employment.

NON-SOLICITATION OF PATIENTS:

As an Employee of NEHC and as a condition of employment you agree during your period of my employment and for twelve (12) months thereafter ("the Non-Solicitation Period"), you will not, directly or indirectly, engage solicit, provide services to or attempt to solicit or provide services to NEHC's current Patients at my termination; Patients for whom NEHC provided services within twelve (12) months prior to my termination and prospective Patients at the time of my termination from whom NEHC has or plans actively to solicit business.

NON-SOLICITATION OF EMPLOYEES:

During the entire Non-Solicitation Period, I will not, directly or indirectly, solicit, hire or attempt to persuade any Employee(s) or agent of NEHC to terminate his/her relationship with NEHC. I agree that the time period provided for non-competition and non-solicitation in this Agreement shall be extended for any period of time during which I am in violation of any of the provisions of this Agreement. I expressly agrees that any breach or threat of breach of this provision in the Handbook by me shall entitle NEHC, in addition to any other legal remedies at law or equity available to it, to apply to any court for an injunction, temporary and/or permanent, to present any violation of this provision within Agreement, and you recognizes, acknowledge and agree that such injunction would be necessary to protect NEHC business interests. NEHC shall also be entitled to recover the costs of prosecuting any action hereunder, including, but not limited to, reasonable attorneys' fees. In the event it is necessary for NEHC to sue to enforce the provisions of the restrictive covenant, the applicable period on non-competition by you shall be extended by a period of time equal to the duration of such litigation.

PERMISSION TO CONTACT 3RD PARTY:

You hereby agree and understand throughout the term of your employment and anytime thereafter during the non-solicitation period as described. You shall make full and complete

disclosure of the existence of these Non-solicitation and Clauses to any Home Care or Skilled Home Care Services business within twenty-five (25) miles of the NEHC offices. If you fail to do so and or if you are deemed to be in violation of these provision(s) in any way, you hereby authorize NEHC and or its legal representatives to contact and notify any third party that this provision of non-solicitation exists. As such, you hereby release and indemnify NEHC and or its legal representative of any liability, damages, claims or losses for such violation notification(s).

[THIS SECTION LEFT BLANK INTENTIONALLY]

JOB DESCRIPTION FOR:

Direct Care Worker

JOB CLASSIFICATION:

Non-Exempt

JOB SUMMARY:

Responsible for (Non-Medical), in-home provide for the comfort and general supervision of Patients as well as home management services. Provides companionship to those individuals requiring socialization and/or minimum guidance to assure a safe, protected, clean and orderly environment.

QUALIFICATIONS:

Minimum of ninth education; high school diploma or GED preferred. Must demonstrate satisfactory completions of any stated mandated training. Applicant must be bondable and meet or exceed minimum qualifications for each of the following background checks: criminal background investigation, professional reference checks and give permission to submit to random drug testing.

Must satisfactorily complete the following:

1. Complete and pass NEHC's Competency Training Test the following subject areas:
 - Confidentiality
 - Patient control and the independent living philosophy.
 - Instrumental activities of daily living.
 - Recognizing changes in the Patient that need to be addressed.
 - Basic infection control.
 - Universal precautions.
 - Handling of emergencies.
 - Documentation.
 - Recognizing and reporting abuse or neglect.
 - Dealing with difficult behaviors.

ESSENTIAL JOB FUNCTIONS:

1. Provide general attention to Patient's non-medical needs in accordance with a Plan of Care.
2. Provides companionship for Patients' including talking and listening, reading aloud, providing social and emotional support.
3. Promote the Patient's mental alertness through involvement in activities of interest.
4. Provides emotional support and promotes a sense of well-being,

5. Provide for a clean, safe, and healthy environment for Patients and family members. Provides light housekeeping tasks including laundering of Patient's garments and linens,
6. Prepare and serve meals as directed and ensure dishes are washed and kitchens is clean after each meal.
7. Assists Patient in completing necessary phone calls, letter writing, etc.
8. Accompanies Patient on walks, community trips, doctor's office, bank, beauty salons, etc.
9. Reminds patients to take self-administered medications.
10. Observes and reports any changes in the Patient's mental, physical, or emotional condition or home situation to immediate supervisor in a timely manner.

WORKING ENVIRONMENT:

Patient's home setting and automobile. Contact with blood or other body fluids may pose a risk for exposure to blood borne pathogens and infectious diseases.

POSITION PHYSICAL DEMANDS:

The work requires light physical exertion on a regular and recurring basis, such as driving, assisting the Patient in activities, and light housekeeping. You are regularly required to sit, walk, talk, hear and occasionally required to reach and lift. NEHC requires all employees prior to any offer of employment being extended; all employees must successfully pass a state mandatory criminal background check. NEHC is prohibited from hiring and or retaining any individual(s) with a prohibited conviction or Department of Aging ineligibility determination.

AS REQUIRED UNDER PA CODE § 611.52.(E) PROHIBITION:

The home care agency or home care registry may not hire, roster or retain an individual if the State Police criminal history record reveals a prohibited conviction listed in 6 Pa. Code § 15.143 (relating to facility responsibilities), or if the Department of Aging letter of determination states that the individual is not eligible for hire or roster.

I acknowledge receipt and understanding of this Job Description, I realize that this reflects a general list responsibility of the position, as well as a general description of the working environment and physical demands of the position I have accepted.

MANDATORY BACKGROUND



CRIMINAL CHECK AND EMPLOYEE CONSENT:

NEHC requires all employees prior to any offer of employment; all employees must successfully pass a state mandatory criminal background check. NEHC is prohibited from hiring and or retaining any individual(s) with a prohibited conviction or Department of Aging ineligibility determination.

NEHC Background Check Investigation adheres to the Background Investigation guidelines as required under PA Code § 611.52 (a-j).

(A) GENERAL RULE:

The home care agency or home care registry. An applicant for employment as a member of the office staff for the home care agency or home care registry and the owner or owners of the home care agency or home care registry also are required to obtain a criminal history report in accordance with requirements contained in this section.

(B) STATE POLICE CRIMINAL HISTORY RECORD:

If the individual required to submit or obtain a criminal history report has been a resident of this Commonwealth for 2 years preceding the date of the request for a criminal history report, the individual shall request a State Police criminal history record.

(C) FEDERAL CRIMINAL HISTORY RECORD:

If the individual required to submit or obtain a criminal history report has not been a resident of this Commonwealth for the 2 years immediately preceding the date of the request for a criminal history report, the individual shall obtain a Federal criminal history record and a letter of determination from the Department of Aging, based on the individual's Federal criminal history record, in accordance with 6 Pa. Code § 15.144(b) (relating to procedure).

(D) PROOF OF RESIDENCY:

The home care agency or home care registry may request an individual required to submit or obtain a criminal history record to furnish proof of residency through submission of any one of the following documents:

1. Motor vehicle records, such as a valid driver's license or a State-issued identification.
2. Housing records, such as mortgage records or rent receipts.
3. Public utility records and receipts, such as electric bills.
4. Local tax records.
5. A completed and signed, Federal, State or local income tax return with the applicant's name and address preprinted on it.
6. Employment records, including records of unemployment compensation.

(E) PROHIBITION:

The home care agency or home care registry may not hire, roster or retain an individual if the State Police criminal history record reveals a prohibited conviction listed in 6 Pa. Code § 15.143 (relating to facility responsibilities), or if the Department of Aging letter of determination states that the individual is not eligible for hire or roster.

(F) RECORDS MAINTAINED:

The home care agency or home care registry shall maintain files for direct care workers and members of the office staff which include copies of State Police criminal history records or Department of Aging letters of determination regarding Federal criminal history records. The files shall be available for Department inspection. The agency or registry shall maintain copies of the criminal history report for the agency or registry owners, which shall be available for Department inspection.

(G) CONFIDENTIALITY:

The home care agency or home care registry shall keep the information obtained from State Police criminal history records and Department of Aging letters of determination regarding Federal criminal history records confidential and use it solely to determine an applicant's eligibility to be hired, rostered or retained.

(H) OPPORTUNITY TO APPEAL:

If the decision not to hire, roster or retain an individual is based in whole or in part on State Police criminal history records, Department of Aging letters of determination regarding Federal criminal history records, or both, the home care agency or home care registry shall provide an affected individual with information on how to appeal to the sources of criminal history records if the individual believes the records are in error.

(I) EXCEPTIONS:

A direct care worker who has complied with this section and who transfers to another agency or registry owned and operated by the same entity is not required to obtain another criminal history report. A direct care worker employed or rostered by an entity that undergoes a change of ownership is not required to obtain another criminal history report to submit to the new owner.

(J) INDIVIDUALS CURRENTLY EMPLOYED OR ROSTERED:

A direct care worker and each member of the agency or registry office staff who is employed by or rostered by a home care agency or home care registry as of December 12, 2009, shall obtain and submit a State Police criminal history record or Department of Aging letter of determination, as applicable, to the home care agency or home care registry by April 12, 2010. This subsection does not apply if the home care agency or home care registry obtained a criminal history report meeting the requirements of this subsection when the direct care worker or office staff member was hired or rostered and a copy of the report is included in the individual's file. In connection with my application for employment, my continued employment, or in connection with my desire to engage in home care services for NEHC, I have been advised and I hereby consent and authorize either NEHC and its agent, at any time during my application process and/or employment, to obtain an investigative consumer report that will include, but not be limited to, a criminal record check, employment and education verifications, verifications of personal references and reputation; and driving record.

(K) EMPLOYEE AUTHORIZATION AND CONSENT:

I do hereby consent and authorize either NEHC or its agent to use any information provided on this form or during the application process in obtaining the investigative consumer report. I have been informed that I have the right to review and challenge any negative information that would adversely impact me or adversely affect a decision to offer employment. I agree to release, indemnify and hold harmless either NEHC or any consumer reporting agency used by either NEHC with regard to any information reported by the consumer reporting agency.

I understand that I am to be provided the name, address and telephone number of the consumer reporting agency and the nature and scope of the investigative report will be disclosed to me. I acknowledge that facsimile, copy or email of this document shall have the same validity, force and effect as the original.

Paid Time Off Policy

Effective 03/10/2020

Policy:

Hourly Employees:

Full time employees are eligible for PTO after ninety (30) days of employment the hourly employee will earn 0.7692307692 hours of PTO for every forty (40) hours worked totalling 40 hours per year. In addition to the accruing PTO each employee is entitled to eight (8) hours of PTO to use ANY day during the month of their birthday. This is our gift to them, to demonstrate our appreciation. The birthday PTO is a use it or lose it policy. The PTO will not have a cash out option, it does not roll into the next year. It must be used by the end of the fiscal year, June 30. Their year will begin on July 1 of every calendar year. Example: They are hired January 10, they begin accruing PTO after ninety (90) days, March 10. They will accrue for every forty (40.0) hours worked and must use what they have accrued by June 30.

After three (3) years with the company the PTO increases to 1.5384615385 hours earned for every forty (40) hours worked totaling eighty (80) hours of PTO to use annually. The PTO does not have a cash out policy and it does not roll over to the next fiscal year. The employee is entitled to eight (8) hours of PTO to use ANY day of their birthday month. The birthday PTO is use it or lose it, it does not roll over. This remains our gift to them, to demonstrate our appreciation. The fiscal year begins on July 1, and ends on June 30.

After six (6) years with the company the PTO increases to 3.0 hours earned for every forty (40) hours worked, totaling one hundred twenty (120) hours off annually. The PTO does not have a cash out option, and does not roll over into the next fiscal year. The employee is entitled to eight (8) hours of PTO to use ANY day of their birthday month. This remains our gift to them, to demonstrate continued appreciation. The birthday PTO is a use it or lose it opportunity, it must be used within the month of their birthday. The fiscal year begins on July 1 and ends on June 30.

After ten (10) years of service with the company the employee will earn 4.0 hours of PTO for every forty (40.0) hours worked, totaling one hundred sixty (160) hours to PTO to use annually. This is the maximum amount of PTO to be accrued. There is not a cash out option connected to this PTO, and there is no roll over of unused PTO into the next fiscal year. The employee will be given eight (8) additional hours of PTO in the month of their birthday to be used ANY day of their birthday month to demonstrate continued appreciation to our company. The birthday PTO is to be used only in the month of their birthday and if they do not use it they lose it. The fiscal year begins on July 1 and ends on June 30.

EMPLOYEE REQUESTED DAYS OFF POLICY AND PROCEDURE

EFFECTIVE 03/03/2020

Policy:

Time off should be requested at least four (4) weeks in advance of the requested day(s) off.

When requesting time off, please consider the time of the year, program/activities scheduled and other time off requests when making a request.

Procedure:

Field Staff:

Complete a TIME OFF REQUEST FORM and give it to your supervisor for approval.

Office Staff:

1. Place a TIME OFF REQUEST FORM in the "Request off binder"
2. File under the appropriate month of request
3. Place the request on the inserted calendar in the front of the binder

Scheduler:

Forward to the Field Management/Payroll Department, if PTO is being requested follow the next steps:

1. Once time has been approved, sign the request form
2. Copy in the employees file
3. Update the tracking spreadsheet
4. Email and/or mail copy to the employee.

EMPLOYEE CALL OFF POLICY AND PROCEDURE

EFFECTIVE 03/03/2020

Policy:

In the event an employee is unable to report to a scheduled appointment/shift, she/he must contact their immediate supervisor four (4) hours prior to the start time, and must do so each day until returning to work.

It is not sufficient to leave a voicemail message, text, or an email when calling off. An employee must actually speak to a member of the office staff. When calling off outside of office hours, the employee must call the main number and speak to the on-call person.

Failure to call in, will be considered a resignation of position if the employee does not speak to a member of the office staff with the reason for the no-show by the end of that business day.

Weekend Call Off Policy

I. PURPOSE

Identifies the steps Next Evolution will take to handle weekend calls offs and Weekend Warrior pay rates.

II. POLICY

Weekend call off policy includes all shifts beginning Friday 3pm through Monday 7am. This policy applies to all of Next Evolutions employees and will be applied consistently and fairly.

- Managers of Next Evolution will address any call offs falling within the time frame listed above in a prompt and timely manner in accordance with this policy
- This policy includes late reports and early leaves of greater than 15 minutes.

III. PROCEDURE(S)

1. Verbal warning
2. Official Written warning
3. Do Not Return Status to current facility working.

IV. FURTHER EXPLANATION

1. Do not return status may result in a lapse of schedule up to 2 weeks.
2. Call offs supported by a Physician's note will not be subject to disciplinary action of this policy.
3. Weekend Warriors facing disciplinary action of this policy will be removed from Weekend Warrior program and will be required to work 6 months without a call off in order for W/E Warrior rate to be reinstated.

Employee Holiday Policy

Effective date: 3/3/20

Purpose: To provide employees with paid time off to recognize major holidays

Policy: Eligible employees who work 32 hours or more a week are entitled to paid time for the following holidays: New Year's Day, Easter, Memorial Day, 4th of July, Labor Day, Thanksgiving Day and Christmas Day.

Procedures:

1. To be paid for the holiday, the employee must be in paid status on the last scheduled shift before and the first scheduled shift following the holiday. Employees are deemed to be in paid status when receiving regular, or PTO pay for shifts before and after the holiday.
2. Holiday is considered 12am - 11:59pm
3. Employees will receive time and a half for each holiday worked.

Bereavement Policy

Effective Date: 03/03/2020

Purpose: When a death occurs in an employee's immediate family, all regular full time employees may take (3) to (5) days off without pay, to attend the funeral or to make arrangements.

Immediate family members are defined as an employee's spouse, parents, stepparents, sisters, brothers, children, stepchildren, grandparents, father-in-law, mother-in-law, sister-in-law, brother-in-law, son-in-law, daughter-in-law, or grandchild.

Procedure:

1. The employee must notify the direct supervisor as soon as possible, allowing NEH to cover shifts.
2. NEH may require verification of the need for the bereavement leave, such as an obituary.
3. Additional unpaid time off may also be granted depending on the circumstances such as distance, the individual's responsibility for the funeral arrangements, and other circumstances as long as discussed with the direct supervisor. Human resources will need to determine whether additional considerations are needed.

Next Evolution understands the deep impact that death can have on an individual or a family. It is our intention to support employees during their times of grief and bereavement.

DISCIPLINARY POLICY **Effective 03/03/2020**

I. PURPOSE

Identifies the steps Next Evolution will take to handle any disciplinary issues.

II. POLICY

Disciplinary issues include allegations and/or complaints about a staff member, a breach of Next Evolution policies and procedures, and/or non-performance of duties where performance improvement planning has been addressed and not been successful. This policy applies to all of Next Evolutions employees and will be applied consistently and fairly.

- Managers of Next Evolution will address non-performance and potential disciplinary issues in a prompt and timely manner in accordance with this policy
- To ensure procedural fairness where an allegation may lead to a formal disciplinary process Next Evolution will ensure that the employee is informed of the allegation, notified of possible consequences of allegation is substantiated and has an opportunity to provide an explanation in relation to the allegation.

III PROCEDURE(S)

1. Verbal warning
2. Official Written warning
3. Disciplinary meeting
4. Final Written warning
5. Indefinite Suspension
6. Termination

SMOKING POLICY

EFFECTIVE 03/05/2020

Policy:

It is up to the discretion of the client/family as to whether you are permitted to smoke during your shift. However, company policy states that you are only permitted to smoke once every 4 hours worked, if your client is safe, stable and capable of being alone for that duration or if someone can be there with the client while you smoke.

Smoking is only permitted outside the home, even if the family tells you it is okay to smoke in the home. The garage is the exception to this rule, if they offer you a garage to smoke in, you may.

If you are working a pediatric/infant case, or a case with respiratory issues, please plan to wear a jacket over your clothing when you smoke the you will be able to take off after your cigarette. As healthcare professionals you will be up close and personal with your clients, especially these types of clients, smells tend to transfer and this can be detrimental to those clients and leave a negative impression on the families. Please leave the jacket in your vehicle, never take it into the home of your client.

If you are going to smoke you must take a bottle with you to dispose of your butts and ashes. You will take the bottle with you at the end of your shift, every shift. You may not take cigarettes from your client or their family, if offered. You must only smoke what you have brought with you to the shift.

Smoking is not permitted in your vehicle or the clients vehicle if you are transporting them or transporting with them to an appointment or running errands with them.

VEHICLE TRANSPORTATION POLICY

EFFECTIVE 03/03/2020

Policy:
HHA/CNA

You may be required to take your clients to and from appointments, or run errands with them or for them. If the client has a car available, you will be required to use their vehicle (motorcycles excluded). Please check with the office to verify that a copy of their insurance policy is on file before you drive their vehicle.

If the client does not have a vehicle, you may be required to drive the client to and from appointments in your own vehicle, or to run errands for the client in your own vehicle. In order to do so you must present the office with proof of auto insurance. You will need to update the office file each time your insurance renews.

REPORTING ABUSE / NEGLECT / EXPLOITATION

REPORTING:

- **ABUSE**
- **NEGLECT**
- **EXPLOITATION**

All agency staff are required to report suspected abuse/neglect/exploitation and develop a plan to minimize the risk of such. The home health employee is responsible for reporting and documenting.:

- A child's susceptibility to abuse including self-abuse and neglect
- Elderly individuals as well as children are susceptible to abuse as well
- Physical components, such as impairments and the ability of patient/caregiver to provide adequate care
- Mental impairments, such as mental retardation, Alzheimer's disease, disorientation, confusion, etc.
- Emotional status, such as passive personality, depression, etc.
- Physical environment, such as safety, in or outside the home. The employee is responsible for reporting all incidents to the DOPS and/or Supervisor. A written report may be forwarded for Social Services with the request for referral. The Supervisor will review the situation and investigate to determine if this is a reportable incident. If so, it will be reported to the appropriate agency or Adult/Child Protection Agency by the DOPS/Administrator designee.

Power of Attorney-Guardian Policy

Effective 03/03/2020

Policy:

No representative of Next Evolution Healthcare Inc may assume power of attorney or guardianship of a consumer receiving services by Next Evolution Healthcare Inc. Furthermore, no representative of Next Evolution Healthcare Inc. may assume power of attorney or guardianship of a consumer that has previously received services by the company representative while still employed with Next Evolution Healthcare Inc.

DRESS CODE POLICY

EFFECTIVE 3/4/2020

CNAs, HHAs, LPNs, and RNs must wear scrubs for every shift unless otherwise instructed by the office/client. Scrubs must be free of stains, and appropriately fitting. Scrubs can be printed or solid, however you cannot wear solid grey scrubs.

Your badge must be worn when you are on the clock with Next Evolution Healthcare Inc.

Care First Employees: MUST wear solid grey scrubs. The only exception is the week of a major holiday. Holiday related scrubs are permitted just for that week.

Your badge must be worn when you are on the clock with Next Evolution Healthcare Inc

CONFIDENTIALITY OF INFORMATION AGREEMENT

CONFIDENTIALITY OF INFORMATION

- All information designated confidential that is obtained or generated as a result of any or all of the operations of the agency will be dealt with in a confidential manner.
- All information that is gathered, maintained, or stored by the agency becomes the agency's property and cannot be released without proper authorization from the administration.
- Altering information is prohibited by the agency and by law. Correction of any identified erroneous information must be done according to agency policy.

WHAT WE CAN DO TO MAINTAIN CONFIDENTIALITY OF INFORMATION

- In order to protect any individual from invasion of privacy and to protect the interest of the agency, any information gathered for patient care or operations will be gathered, maintained and stored in such a manner as to assure confidentiality.
- Access to information will be limited to need to know basis to perform the scope of one's duties and responsibilities.
- Dissemination of information will be handled according to agency policy, and staff will be informed during orientation, will sign the acknowledgement of the confidentiality statement and it will be placed in the employee's personnel file.
- Proven violation of breach of the confidentiality agreement may be cause for immediate termination.

HEALTH & SAFETY AGREEMENT

I do understand the physical requirements of my job and understand proper lifting and moving techniques which I am expected to use in moving and lifting objects and/or patients.

I have been informed and do fully understand that any injury claimed by me while on the job must be reported immediately to my supervisor and documented on an Accident/Incident Report form. I understand that unless an incident report is completed immediately and signed by me, the agency may not consider a voluntary payment of any medical bills or any other benefits as a result of my injury. I further understand that if the accident/injury is proven to be a result of my failing to follow policy/procedure, the agency may not be expected to cover medical payments.

I do fully understand that i am not encouraged to lift or transfer any object or patient by myself unless I know that I can safely lift or transfer alone. If I believe there is no one readily available to assist me in lifting or moving patients or equipment while on duty, I am to wait until I can obtain assistance before moving or lifting.

COVID-19 ISOLATION AND EXPOSURE POLICY

I. PURPOSE

To establish a uniform expectation of NEH employees regarding exposure to Covid-19 issued by the governing bodies of Next Evolution Healthcare, Inc (i.e. OSHA, OLTL, Department of Health, CDC)

II. POLICY

Employees of NEH will be required to follow the CDC recommended exposure policy unless otherwise ordered by a Physician.

III. PROCEDURE(S)

- Active infection
 1. 5 day quarantine period
 2. 5 days following wearing a well fitted mask
- Exposure
 1. Asymptomatic- 5 day isolation plus 5 days mask
- Close Contact
 1. Boosted: No quarantine required
 2. Not vaccinated or boosted: 5 day quarantine

All exposures should wear a mask for 10 days after exposure

COVID-19 VACCINATION POLICY

I. PURPOSE

To establish a uniform expectation of NEH employees in response to the Covid-19 Vaccination mandate issued by the governing bodies of Next Evolution Healthcare, Inc (i.e. OSHA, OLTL, Department of Health, CDC)

II. POLICY

Employees of NEH will be required to provide either proof of full vaccination (2 doses for Pfizer and Moderna or Single dose of Johnson and Johnson) or a Medical or Religious exemption no later than February 26, 2022.

III. PROCEDURE(S)

- **Vaccination**

1. First dose must be received by January 27, 2022.
2. Second dose must be received by February 26, 2022

- **Exemption**

1. Approved religious or medical exemption must be on file at NEH office no later than February 1, 2022.
2. Medical exemptions must be signed by a medical professional
3. Religious exemptions must be submitted to Direct Field for approval

- **Failure to comply**

1. Failure to submit proof of vaccination or exemption by January 28, 2022 will result in a written warning.
2. Failure to submit proof of vaccination or exemption by February 15, 2022 will result in a 3 day suspension.

Failure to submit proof of vaccination or exemption by February 26, 2022 will result in termination of employment.

Medical/Dental/Vision Benefit Waiver Acknowledgement

I understand that Next Evolution Healthcare Inc has medical benefits available to all employees after 30 days. I acknowledge that I am aware of these benefits and understand that failure to opt into these benefits within the first 30 days of employment will result in forfeiture of these benefits until the next open enrollment period. I acknowledge that I understand that open enrollment period is in August of each calendar year. Failure to respond to email/phone/text attempts will be considered a willful waiver of these benefits. Next Evolution Healthcare Inc holds no liability in the event of this waiver.

OVERNIGHT SLEEP POLICY

I. PURPOSE

To establish a uniform policy of sleeping while working an overnight shift

II. POLICY

Employees are expected to remain awake and attentive to the client during overnight shifts.

III. PROCEDURE(S)

1. Employees are not permitted to sleep while on the clock at a client's home during overnight hours.
2. Employees will be subject to a separate overnight sleeping disciplinary policy if reports are made or they are caught sleeping while at a client's home.

OVERNIGHT SLEEP DISCIPLINARY POLICY

I. PURPOSE

To establish a uniform policy of the disciplinary policy for sleeping on an overnight shift

II. POLICY

Employees are expected to remain awake and attentive to the client during overnight shifts This policy outlines the disciplinary process for sleeping on an overnight shift..

III. PROCEDURE(S)

1. 1st offense-Verbal warning
2. 2nd offense-Written warning
3. 3rd offense-Termination

EVV POLICY

I. PURPOSE

Home care employees are required to use EVV (electronic visit verification) or telephony sign-in/sign-out and ensure visits and accurate records.

II. POLICY

Employees must sign in upon arrival of their shift using either their own personal electronic device or the client's phone in order to ensure proper billing and payment records are kept. NEH will strive to maintain a 95% or higher EVV accuracy rate.

III. PROCEDURE(S)

1. Employees will sign in and out promptly upon arrival and departure from their shift
2. EVV backing will monitor location for sign-in
3. If paper time sheet is required due to EVV failure, client signature is required to verify the time and completion of tasks.

Medcom Trainings

Effective 08/04/2020

Everyone is required to log into Medcom and complete the assigned training hours which will be assigned to each person within the first month of hire. Once you complete the Medcom training please email Heidi Fields at heidifields@nextevolutionhealthcare.com or call the office at 724-550-4474.

Covid-19 Weekly Testing Policy Acknowledgement

Updated 04/01/2022

This policy will be effective as of 04/01/2022, by the order of DOH (Department of Health); employees receiving a medical or religious exemption will be required to get a weekly Covid-19 test either at off site testing center (i.e. Rite Aid, Walgreens, etc) or at the Next Evolution Healthcare office at an office scheduled appointment.

Rapid Covid-Tests at Next Evolution Healthcare are at the cost of the employee, \$20/test, some outside testing locations offer free scheduled tests. . If the employee chooses to get their test at an off site location, they will need to email their results to the Direct Field Management. Lori Johnson lorijohnson@nextevolutionhealthcare.com. **Failure** to send in Covid results, **will result** in **disciplinary action** up to and including **termination**.

Testing through Next Evolution Healthcare will be a scheduled requirement on a weekly basis.

Medical/Dental/Vision Benefit Waiver Acknowledgement

I understand that Next Evolution Healthcare Inc has medical benefits available to all employees after 30 days. I acknowledge that I am aware of these benefits and understand that failure to opt into these benefits within the first 30 days of employment will result in forfeiture of these benefits until the next open enrollment period. I acknowledge that I understand that open enrollment period is in August of each calendar year. Failure to respond to email/phone/text attempts will be considered a willful waiver of these benefits. Next Evolution Healthcare Inc holds no liability in the event of this waiver.