

Employee Orientation Booklet

for

Home Health Aide



Care and Life LLC.

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HOME HEALTH AIDE

Some characteristics that patients and their families often look for in a home health aide:

- Trustworthiness /honesty
- Caring
- Patience
- Capability
- Good listener
- Promotion of independence
- Compatibility
- Reliability

Home Health Aide Duties:

- Monitor patient's condition by observing physical and mental condition and exercise.
- Supports patient's by providing housekeeping and laundry services and shopping for food.
- Supports patient's by helping fulfill other household requirements such as: preparing meals, snacks, running errands.
- Assisting patients by providing personal services using safe techniques such as: bathing (bed bath, tub, sponge, or shower bath), nail and skin care, dressing, grooming and oral hygiene.
- Helps patients care for themselves by teaching use of cane, walker, special utensils to eat, special techniques and equipment for personal hygiene.
- Helps family members care for the patient by teaching appropriate ways to lift, turn, and reposition. (Proper body mechanics)
- Measuring temperature, pulse, respiration or blood pressure.
- Intake and out take logs
- Practices safe transfer techniques and ambulation.
- Maintains a safe, secure, and healthy patient environment by following asepsis standards and procedures and maintains security precautions.
- Follows prescribed dietary requirements and nutrition standards.
- Records patient information by making entries into the patient journal: notifying nursing supervisor of changing or unusual conditions.
- Recognizing an emergency and knowing the emergency procedures
- Safe transfer techniques and ambulation 1) Normal range of motion and positioning 2) Adequate nutrition and fluid intake
- CPR trained

Home health aides **can't** do things such as medication administration and changing dressings.

Home health aides can assist with self-administered medications (only if the home health aide has completed the proper training).

Please call us before doing a task that is not understood or has not been previously performed.

The following are some examples of events that must be reported to your nursing supervisor:

- Changes in vital signs (high temperature above 100, below 95) pulse irregular (above 95.5, below 60), increase in pain.
- Changes in breathing or Increased SOB, coughing
- Changes in respiratory rate (above 105, below 60)
- Changes in level of alertness or orientation
- Bleeding, bruising
- Mental changes such as agitation, confusion, aggression, anger and when a patient isn't making sense when the patient is usually clear and alert, etc.
- Signs and symptoms of low blood sugar
- Profuse sweating
- Fever
- Swelling and/or redness in any location
- Skin breakdown or red and/or pink areas
- Pain, sudden onset worsening
- Swelling of extremities
- Falls(whether witnessed or not)
- Safety concerns regarding the patient or aide
- Not taking medications according to schedule
- Changes in eating habits
- Changes in weight
- Changes in bowel/urine output
- Changes in ambulation
- Changes in caregiver status
- Whether an ambulance has been to the patient's home since your last visit or is currently at your patient's home.
- Your patient dies or died since your last shift and you and/or the agency were not informed of the patient's death.
- Patient complaints such as a racing heartbeat, chest pain, etc.
- Verbal /physical abuse of patient and/or an aide
- Signs of abuse, neglect and exploitation
- Lack of food, liquids, heat, cooling or money to cover these items
- Lack of necessary items for care
- Lack of clean linen, clothing, toiletries
- A Death in the patient's family
- Any changes or other information that affects your patient
- When you, to your best judgment, believe the patient needs to be seen by the doctor.

Charting: Complete, Accurate and charted in a timely manner!

Just think: "When in doubt call it in."

Any changes in current status need to be reported immediately to change Plan of Care.

REPORTING:

Document in your notes to **Who**, **What** and **When** you reported.

- Name of person you reported the problem to
- What specifically you reported about the patient
- When you reported and When the incident occurred

The H.H.A./C.N.A. **does not do the following:**

- Administer medications.
- Change sterile dressings
- Perform a gastric lavage.
- Irrigate body cavities such as enema or a colostomy or wound.
- Catheterize a patient.
- Apply heat by any method.
- Care for a tracheotomy tube.
- Any personal health services which are not included by the R.N. in the patient plan of care.

DOCUMENTATION

What to document

- Observations
- Daily Measurements
- Safety Issues
- Client Statements & Complaints
- Unusual Events

Observations: What you see, hear, feel, and smell.

Charting:

If you left out vital information please call the supervisor as soon as possible. Absolutely never correct someone else's charting error. Instead, tell that person that you noticed a mistake in their documentation and inform the supervisor. If you make a mistake in your documentation, for those not using Savvi Care systems, do not use white out, write a line through the mistake. Initials next to it and write correct statement.

Document, Document, Document

It is important to document. If you do not document, even though you may have done the task, its as though you didn't do it according to the patient's charts. **"IF YOU DIDN'T DOCUMENT IT, IT WASN'T DONE"**

Care and Life LLC. Home Health Services

Policy and Procedures

Updated 08/30/16

Welcome to CARE AND LIFE LLC. Home Health Services! By following the Standards and Procedures set forth, we can help ensure a successful career with this company.

1. Dress code is strictly enforced. All employees are expected to dress in an appropriate manner as set by the health care environment, or as directed by the facility. This includes one's personal hygiene and hair. Please no smoking in the presence of a patient or patient family/friend. The first scrub top and bottoms are provided by the company with the company name. Any additional scrubs must be purchased through Care and Life LLC.
2. Always wear your CARE AND LIFE LLC. Company I.D. badge while on duty. Never wear badge while off duty. All employees with direct contact to patients must carry their CPR card on their person.
3. Employees are expected to arrive on time to all assignments. We do understand some situations are out of ones control. If an emergency or any situation should cause you to be ten minutes late or more, or to be absent entirely from your assignment, you must notify CARE AND LIFE LLC. **DO NOT CALL YOUR PATIENT**
4. Making or receiving personal phone calls while on duty is prohibited. You may call CARE AND LIFE LLC.'s Chief Executive Officers cell at (585)- 313-7164- 24/7 if you need to cancel or reschedule your assignment on non- business days or if after 5:00 p.m. . If calling during regular office business hours you may contact Care and Life LLC's Administrator. **A NO CALL, NO SHOW, IS GROUNDS FOR TERMINATION!**
5. If you have any problem, incident or accident while on duty, do not discuss it with the patient and/or their family/friends immediately. You are required to call the office at (863)- 940- 4938. If you're supposed to be relieved by another employee, do not leave until your relief person has arrived. If the patient asks you to stay longer than the assigned time or to leave earlier, please call CARE AND LIFE LLC. first, for approval.
6. Unlicensed personnel (Home Health Aide) hereby acknowledge that they will not under any circumstances dispense or administer any medication. You may assist patient with their medications only if you have completed the required hours in how to assist with self administration of medications.
7. You are under no circumstance allowed to ask or accept any money from your patient or take home any property that belongs to the patient.
8. There will be no involvement with the patient's financial affairs, this includes check writing, without written approval from CARE AND LIFE LLC.'S Administrator or CEO.
9. Every employee is expected to honor the confidentiality of any patient information which is obtained during your employment.
10. We ask that you do not discuss your salary or any other personal affairs with the patient.
11. As an employee of CARE AND LIFE LLC., you are not authorized to accept any direct employment that may be offered to you by your patient or patient family/friend. If you are requested to do so, please have the client contact us.
12. Your skill note must be signed by the patient after completion of your skill intervention or personal care services. Skill notes without patient signatures will not be accepted.

Mission statement

Great Care, Long life.

CARE AND LIFE LLC. will mainly focus on the quality of life. Our priority will and shall remain the welfare of each and every one of our patients. We strive to give the best possible care to individuals in need. This may include, but not limited to; the elderly, individuals with conditions since birth, disabilities, and those of whom that may just be recovering from a procedure and need short-term care until they can, “get back on their feet.” To those people we say, “We are here for you!”

We are striving to be the company that patients look to. Those individuals who just need that extra hand to go about their day. Also, be of assistance to those who need a substantial amount of help to where it may impede their ability to live out their day to day activities. Our help can range from Activities of daily living (ADLs) to Instrumental activities of daily living(IADLs)

Our ultimate goal is to help our patients live life to the fullest. To share part of their everyday life with people who give them love, support, help and confidence.

Vision Statement

The vision of Care and Life LLC. is to reach the largest number of elderly and in need people in our community and thus, facilitate their ability to enjoy a better quality of life.

Staff

Our goal is to hire competent staff. Staff that is well-trained in caring, meeting the need of our patients, the patient’s families and the communities we serve. Each staff member must meet the education and training of the state of Florida for their service requirements. We encourage and support continuing education.

ORIENTATION PROGRAM

COMMUNICATION CHANNELS

1. Face- to- Face
2. Mobile
3. Electronic
4. Written

CHANNELS OF COMMUNICATION

- A. Scheduling and cancelations need to be done through the office.
- B. All scheduling changes must be communicated to the supervisor
- C. It is in your best interest to call the office every week to make sure your schedule is set. Scheduling may be subject to change.
- D. Each staff member is responsible for keeping track of their own hours. You may work no more than 30 hours weekly until otherwise.
- E. Call the patient right before you go to their home. We are not liable to be paid if the patient is not home.
- F. Report **any** problems to your supervisor. A supervisor is on call 24 hours a day to handle questions about patient care.

DRESS CODE (Home Health Aides)

- A. Scrub uniforms provided via Care and Life LLC. and ID badges.
- B. Appropriate personal hygiene and overall appearance.
- C. We ask that you refrain from wearing scrubs from any other business while visiting a patient of Care and Life LLC.

OFFICE PERSONNEL

All staff members must be dressed in a professional manner. This includes the following:

1. Dress slacks/nice jeans (no holes) and dress shirts are preferred.
2. Skirts should fall below your mid-thigh.
3. No tights or leggings pants.
4. No see-through material.
5. No exposed midriff.
6. All clothing must be clean and professional.
7. Clean tennis shoes.

ORIENTATION PROGRAM (Continued)

TIME SHEETS

- A. The work-week begins on Sunday 12:00 a.m. and ends on Saturday at 11:59 p.m. If using our SAVVIL CARE Program APP to sign in and fill out nurse's notes, disregard the following.
 - a. Time sheets must be completely filled out and turned in with your nurses notes no later than Monday at 4:30 p.m. Any late entries will cause a delay in pay and you will not receive payment for the week until the following week.
- B. Days worked on time sheets and notes **MUST CORRESPOND**.
- C. There is a drop box outside the exit door for delivery over the weekend or for non-regular business hours. (currently in progress of establishing. If any questions ask your administrator)

PAYMENT PROCEDURES

Expect pay check via direct deposit every Friday before noon. If for some reason you are not paid by said time, please feel free to call the office at (863)-940-4938

TRANSPORTING PATIENTS

Only if patient has signed a waiver contract.

ERRANDS FOR PATIENTS

Only if patient has a waiver contract can the Aide assist with shopping or picking up prescriptions. Patient must have check made to establishment and return any change with a receipt. Any patient who is confused, call the Care and Life administrator to act as a witness regarding patients request.

EMERGENCY

In a case in which the patient needs to be moved to a safe place or shelter during an emergency, the home health aide will still be able to provide care as long as the special needs forms are properly filled out upon admission.

ABSENCE

- A. Absence must be reported to the office immediately – 24 hours in advance, if possible; eight hours in case of sudden illness.
- B. Do not force yourself to a shift if there is a possibility you may not show.
- C. Late cancellations or no shows may result in termination.

CANCELLATION POLICY

- A. We will allow one cancellation within a two-month period during the first six months of employment.
- B. Two cancellations occurring within a two-month period will result in a warning.
- C. Three cancellations within a two-month period will result in the employee being placed on a ninety (90) day probation.
- D. Four cancellations within a two-month period is a violation of probation and could result in termination.
- E. Any employee leaving as assignment before the end of their assigned shift will be immediately terminated.
- F. Refusals to work will be documented in the employee's file.

ORIENTATION PROGRAM (Continued)

We need reliable home health aides, so excessive refusals will result in fewer calls for work.

TERMINATIONS

If resigning from Care and Life LLC., we ask that you please give the Agency as much notice as possible. Fourteen days written notice is required. At the time of termination, before the final paycheck can be released, all agency property must be returned including; identification badges, etc, before the next regularly scheduled payday.

It is of concern to Care and Life LLC. when an employee is either terminated or resigns. Therefore we request each resigning employee to take part in an exit interview with the registered nurse. Please contact the office to arrange a convenient time for the interview for both parties. Any information gathered will be kept confidence.

BENEFITS

- A. All employees are covered by NSO: Malpractice Insurance.
- B. Any accident/incident while on a shift **MUST** be reported to the office within 24 hours of occurrence.

PATIENTS' RIGHTS

- A. The patient's Bill of Rights will be given to all patients on admission. Please become familiar with this policy.
- B. Write the patient's home phone number, patient's doctor's phone number, and Care and Life LLC.'s phone number on the front of the folder, if not already done so by the nurse supervisor.

SAFETY PRACTICES

- A. Follow Universal Precautions at all times. Read basic infection control and prevention.
 - a. Online: <https://www.cdc.gov/hai/pdfs/guidelines/basic-infection-controlprevention-plan-2011.pdf>
 - b. Print out: <http://www.cdc.gov/HAI/settings/outpatient/basic-infection-controlprevention-plan-2011/fundamental-of-infection-prevention.html>
 - c. Print out: <http://www.cdc.gov/HAI/settings/outpatient/basic-infection-controlprevention-plan-2011/standard-precautions.html>
- B. This includes taking measures to ensure the client's safety and any addressing and concerns you have about possible safety hazards in the client's environment.

EMERGENCY PRACTICES

- A. Dial 911.
- B. Take care of the patient and notify the doctor.
- C. Call the office.

ORIENTATION PROGRAM (Continued)

PERFORMANCE EVALUATION PROCEDURES

- A. The first Evaluation will be ninety (90) days from your first work day. (the first actual visit) and will be once a year after that.
- B. HHAs will receive supervisory visit reports from skilled nurses.

As previously stated all employees will have a performance evaluation just prior to the end of the initial probation period. Performance Evaluations will continue to be completed prior to each hiring date anniversary. For all Home health aides, as part of their performance evaluation it will include in-home visits to observe performance will be completed.

PROBATIONARY PERIOD

All new employees are on a 90-day probationary period. It is during this time that you and your nurse supervisor will have the chance to determine whether the work is appropriate for you. We will do our best to find the best training for you to do your job properly. An evaluation of the employee's performance will be completed prior to the end of the probationary period. During the 90-day probation period, if either Care and Life or the employee wishes to terminate employment, they may do so. If all has progressed adequately, you will be recommended for continued employment. Pay increases will not be given during this probationary period.

IDENTIFICATION BADGE

One identification badge will be issued by the office to each new employee at no charge. The badge must be worn during all shifts . If the identification badge is lost or misplaced, a charge of \$35.00 will be made for a replacement. Upon termination, your identification badge must be returned to the nurse supervisor in order to receive your final paycheck.

PHYSICAL/HEALTH EXAMINATIONS

Prior to starting work, new employees must complete the initial physical examination form and a PPD Skin Test and/or Chest X-Ray. Employment is dependent upon the results of these tests. PPD Skin Tests are then required yearly for all employees. If a PPD Skin Test is positive, a Chest X-Ray is required; however, only one Chest X-Ray is required every three years.

SOLICITATION

No solicitation is allowed by employees. Breaking this rule can lead to disciplinary action.

CONFIDENTIAL INFORMATION

While working for Care and Life, you may hear statements regarding patients, doctors, nurses and others which may be considered confidential. All employees are directed, therefore, not to discuss outside of Care and Life LLC. or even with other employees the information that was overheard, unless it is deemed a necessary part of the employees' job. Casual conversations amongst fellow employees may be overheard and thus violate other privacy rights. Termination may be sought out if there is a failure to maintain confidential information.

ORIENTATION PROGRAM (Continued)

EMPLOYEE FILES

To keep payroll, mailing addresses, and other information as up to date as possible, we ask that our employees inform our Administrator of any changes in status. These changes include changes in: name, telephone number, address, marital status, dependents, emergency contact, licensure and registration information. All employee information is stored in the main office. Only the employee and his or her supervisor are allowed to see the records. Any outside source seeking information will be thoroughly screened and controlled by the administrator.

RULES OF CONDUCT

Our goal with our employees is to be as fair as possible in the handling of personnel.

All warnings will be verbal warning and/or written and will be kept on file in the employee's Personnel file. Employees can be placed on temporary probation at any time after they receive a warning. The Warning Form will need to be signed by the employee as well as give the employee an opportunity to leave a comment.

Violations ranking:

- **Level 1**
 - ✓ Verbal warning (documentation recorded in Personnel file).
 - ✓ Written warning (recorded in Personnel file). ○ Suspension for 1-10 days
 - ✓ Discharge for repeated violations (any offense)
- **Level 2**
 - ✓ Discharge

Violations of any of the rules may result in disciplinary action or even discharge and include, **but are not limited to**, the following:

Level 1 Violations

- Using timing unwisely/ inefficient performance of duties.
- Failure to attend scheduled meetings, education and training sessions.
- Tardy without sensible excuse (greater than one time per month is considered a violation).
- Inconsiderate treatment of others.
- Not wearing appropriate scrubs
- Disregard of personal hygiene.
- Not wearing or showing identification badge.

ORIENTATION PROGRAM (Continued)

Level 2 Violations:

- Striking a patient and/or family/friend of the patients
- Sexual harassment.
- Stealing, abusing, or possession of Care and Life LLC. supplies without the consent of the agency.
- In possession of personal belongings of a patient or fellow employees without the owners consent.
- Allowing non-employees such as the employee's friends, family, etc. in the patient's homes, etc.
- Fighting or provoking a fight on patient's property or on agency property.
- Noncompliance and/or refusal to perform assigned duties.
- Offensive or immoral conduct on agency property or patient property.
- Falsifying documentation of any kind.
- Possessing dangerous weapons while on duty.
- In possession of unauthorized intoxicants, drugs or narcotics onto agency property/patient property. Consuming and/or under the influence of intoxicants, drugs or narcotics while on duty.
- Altering a time sheets

Employee Appeal Procedure:

An employee may appeal discharge. We are aware that there can sometimes be honest misunderstandings. If the employee in question wishes to file an appeal they can do so following these steps:

- Step 1: Discuss their complaint with the supervisor. Complaint could be a misunderstanding. The supervisor will give the employee an answer within 3 business days. During the appeal process, the employee will not be eligible to work.
- Step 2: If the employees is not happy with the decision they may take their complaint to the CEO by writing the problem in letter. The supervisor will reply to the complaint. The CEO will have five business days to make a decision on whether to discharge the employee and will explain the final decision fully to the employee.

WORKERS' COMPENSATION

Any accident or injury on duty must be reported to the supervisor immediately. Incident reports must be made on **ALL** accidents. Workers' Compensation benefits depend on this report. Care and Life LLC. **will not be responsible** for conditions that may happen after a time lapse from the accident date unless a report has been made initially.

EQUAL EMPLOYMENT OPPORTUNITY

The company is an Equal Opportunity Employer. Equal employment opportunity means we will give all employees equal employment opportunity consideration without regard to race, color, religion, gender, gender identity, national origin, age, disability, veteran status or any other status protected under local, State or Federal law.

ORIENTATION PROGRAM (Continued)

NON-DISCRIMINATION POLICY

No client or employee will face discrimination on the basis of race, color, religion, gender, gender identity, national origin, age, disability, veteran status or any other status will be tolerated. If any discrimination were to occur it should be reported promptly to your supervisor.

HARASSMENT POLICY

Sexual harassment will not be tolerated by a patients and employees. If at any point a patient or employee believes they have been sexually harassed they may discuss their concerns with the appropriate supervisor.

PROCEDURE TO FILE A COMPLAINT

CARE AND LIFE LLC. will take every complaint from patients, families and employees seriously and will give it the appropriate attention. In order for the complaint to receive our proper attention, the following steps will need to the quickest response.

1. If this is a privacy complaint, you will receive a formal response from the CEO. All other patient comments and concerns will be handled by the supervisor.
2. Please be assured that your complaint will be kept confidential.
3. Contact the nursing supervisor immediately and give details of the complaint
4. Complete the *Complaint Form* that was included as part of your admission process. It should be in your home folder. You will be kept up to date on all action that is taken.
5. The patient/family will be contacted by the administrator and if needed, a meeting will be scheduled.
6. If the situation remains unresolved it will be reviewed by the administrator and CEO for resolution.

HOME CARE STAFF

1. Identification Badge must be worn and visible at all times while on shift. No other badges are permitted.
2. Jewelry should be kept to a minimum.
3. Perfumes/colognes **must be avoided** when working with allergic tendencies and patients with respiratory diseases.

ASSIGNMENT POLICY

All staff assignments are done under the direction of the R.N. Supervisor. The assignments are made after an examination of staff profiles for skill level and technical abilities, and review of patient data and thus, anticipated compatibility.

ACCEPTANCE OF PATIENT

Patients are accepted on the basis of an expectation that the health care needs can be met adequately by the Agency in the patient's home. Care follows a written Plan of Care.

ORIENTATION PROGRAM (Continued)

PERSONNEL POLICIES

Care and Life shall have written policies and procedures to ensure adequate and appropriate services. All employees working for the agency will be required to read and sign the *Employee Orientation Booklet* as an indication that they have read and understood Care and Life LLC. policies.

Requirements:

- Prior to any contact with patients, the employee must submit a statement from an appropriately licensed health care professional year, stating that the employee shows no apparent signs/symptoms of communicable disease and that the employee is physically capable of performing the duties that this job requires. Also, the results of a tuberculosis (TB) test. If employee has a positive TB, they need to submit a statement from an appropriately licensed health care professional that the employee does not constitute a risk of communicating tuberculosis.
- Each year, all employees shall:
 - a. Obtain consent from an appropriately licensed health care professional. The consent must state that the employee is not at risk of communicating diseases, such as tuberculosis, to any person under the care of CARE AND LIFE LLC.
 - b. Be required to receive a minimum of two hours of HIV training disease.
 - c. An annual mandatory orientation will be held for all health personnel which will inform all personnel of any changes in State/Federal rules as well as any new policies of Care and Life.
 - d. Be given a job description of each position will be given to the appropriate personnel
 - e. The agency maintains a file of all employees. These files shall include:
 - i. Name
 - ii. Address
 - iii. Social security number
 - iv. Date of birth
 - v. Name and address of emergency contact and/or guardian
 - vi. Qualifications, licensure or registration,
 - vii. Contracts (if applicable)
 - viii. Date of employment
 - ix. Date of separation from the agency (if applicable)
 - x. Continuing education and in-service training for Home Health Aides (Information kept in a separate filing system maintained for this purpose and will be available for inspection within three hours of request (aides are required to do 12 hours of In-service training)).
 - f. Care and Life will maintain a record of the employment history of all agency personnel.

EXPIRED ITEMS ON FILE

- A. We will do our best to notify you of expiring items (physical, TB screening, CPR, license, etc.) but, it is ultimately the responsibility of the employee to keep up to date information.
- B. Expired items will result in immediate cancellation of all work until item is updated.