

ILLINOIS ORIENTATION

Created in accordance with the laws / rules / regulations of the state of Illinois



What is Village Caregiving?

A privately owned personal services agency, recognized as a Foreign Limited Liability Company (LLC) in Illinois

- Owned/Operated by people with roots in the community
- Licensed as a "Home Services Agency" to provide non-medical services as defined by Illinois law
- Dedicated to providing quality care to its clients
- · Dedicated to the communities it serves

Illinois Law

Section 245.210 Services – Home Services Agencies

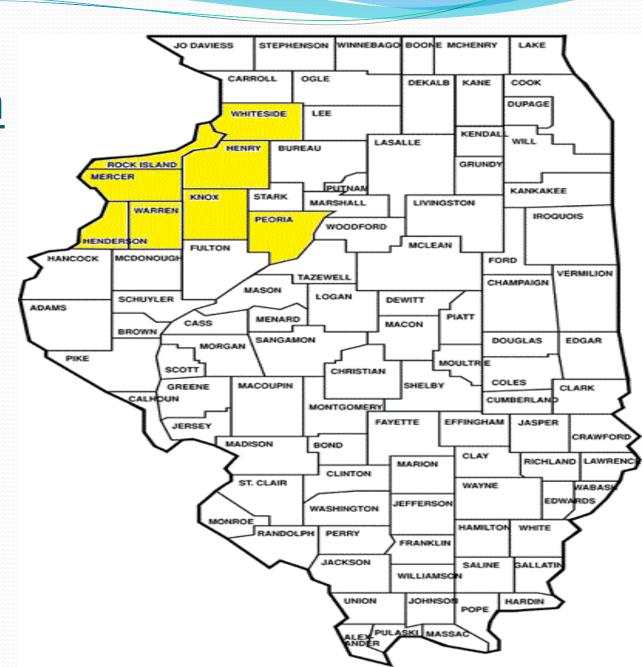
Agencies licensed as home services agencies shall provide non-medical services, a) which may be provided directly by agency staff or through a contractual purchase of services, that are intended to assist clients with activities of daily living. Services may include, but are not limited to, activity of daily living support, personal care, medication reminding, housekeeping services, personal laundry, cooking, shopping, assistance in getting to and from appointments, maintenance of household records, and companionship. Each agency shall maintain a listing of the types of services offered by the agency, and the scope of the work to be provided under each area, which the agency shall distribute to clients before contracting with the client, with the signed contract, and when changes occur.

Anti-Discrimination

Village Caregiving does not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, military status, or any other reason, in any of its activities or operations. We are committed to providing an inclusive and welcoming environment for all. Village Caregiving is an equal opportunity employer.



Service Area



Management Staff Requirements

- Each Village Caregiving location employs a manager.
- The manager is responsible for the organization and daily operation of the Village Caregiving location.
 - All Village Caregiving employees and clients will have reasonable access to the manager on a 24/7 basis via a 24/7 cell phone.
- The manager will designate one or more individuals to act on behalf of or perform all responsibilities while the manager is unavailable.
- The manager will coordinate between clients, RNs, and direct care staff to ensure personal services are delivered as requested.
- The manager will investigate and remedy client grievances/complaints and respond in a timely manner.
- The manager may prepare a service plan for a client before providing personal services for a client.

Third Party Agreement Requirements

- b) If the agency provides services under contractual arrangements with a third party, it shall have a written agreement that includes, but is not limited to, the following:
 - 1) A detailed description of the services to be provided;
 - 2) Provisions for adherence to all applicable agency policies and personnel requirements, including requirements for initial health evaluations and employee health policies, and criminal background checks if applicable;
 - 3) Designation of full responsibility for agency control over contracted services;
 - 4) Procedures for submitting clinical and progress notes;
 - 5) Charges for contracted services;
 - A statement of responsibility of liability and insurance coverage (employment, workers' compensation) and taxes, including employment and Social Security taxes;
 - 7) The period of time the written agreement is in effect;
 - 8) Date and signatures of appropriate authorities; and
 - 9) Provisions for termination of services.

Client Agreement Requirements

- written contractual agreement between the client and the agency that includes, but is not limited to:
 - 1) Indication and assurance of compliance by the agency with the requirements of the Act, including the Health Care Worker Background Check Act;
 - 2) Identification of parties responsible for payment of employment taxes, Social Security taxes, and workers' compensation;
 - 3) Information on the parties responsible for supervising workers, as well as hiring, firing and discipline of in-home services workers;
 - 4) Identification of the charges to be paid, payment schedule, and to whom the client, or person acting on behalf of the client, is to make payments for services under the contract;
 - 5) Time period for the contractual arrangement and conditions for termination of the contract; and
 - 6) Contact information for the client to use in case of concerns, complaints, or questions on care to be provided.

Health Care Worker Background Check Act

- Village Caregiving conducts background checks on employees in accordance with the Illinois Health Care Worker Background Check Act. (225 ILCS 46), which requires Village Caregiving employees to have fingerprint criminal background checks collected through IDPH-approved livescan vendors with the results reported electronically to the Illinois Health Care Worker Registry
- Providers must certify compliance with all requirements and regulations issued pursuant to the Act. The law requires Providers to terminate employees found to have:
 - Disqualifying criminal convictions unless there is a waiver granted by IDPH, or
 - Substantiated findings of physical or sexual abuse, neglect, or financial exploitation, or
 - Indicated findings of abuse or neglect reported by the DCFS Central Register/Child Abuse and Neglect Tracking System (CANTS) unless there is a waiver granted by DHS, or
 - Their name is listed on the HFS Office of the Inspector General Sanction List as not authorized for employment unless their employment is approved by HFS.

Direct Care Staff Requirements

- Prior to providing home services for a client, applicants may submit to and complete:
 - Substance abuse test
 - Tuberculosis (TB) evaluation
 - If symptoms or other risk factors are present, Village Caregiving may request applicants to complete a baseline two-step tuberculin skin test using the Mantoux method or a quantiferon-TB assay unless the individual has documentation that a tuberculin skin test has been applied at any time during the previous 12 months and the result was negative





Documentation will be kept confidential and in employee files. Records of current employees will be maintained on the agency's premises or accessible via a central computer file.



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

'No change in the 2019 recommendations

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



Staff Training

Joint Committee on Administrative Rules

ADMINISTRATIVE CODE

TITLE 77: PUBLIC HEALTH

CHAPTER I: DEPARTMENT OF PUBLIC HEALTH

SUBCHAPTER b: HOSPITALS AND AMBULATORY CARE FACILITIES

PART 245 HOME HEALTH, HOME SERVICES, AND HOME NURSING AGENCY CODE

SECTION 245.71 QUALIFICATIONS AND REQUIREMENTS FOR HOME SERVICES

WORKERS

Section 245.71 Qualifications and Requirements for Home Services Workers

- a) Each agency shall ensure and shall maintain documentation in the home services worker's employee file that all persons employed or providing services as an inhome services worker, and who are not otherwise licensed, certified or registered in accordance with Illinois law to render this care, comply with the following conditions:
 - 1) Does not have a disqualifying background check under the requirements of the Health Care Worker Background Check Act without a waiver;
 - 2) Has a copy of his or her Social Security card; and
 - 3) Has a visa or proof of citizenship in compliance with federal requirements for employment.

c) Each home services agency shall provide or arrange for a minimum of eight hours of training for each home services worker. Four hours of training shall be provided prior to the home services worker's first assignment, and the remaining four hours shall be provided within the worker's first 30 days after employment. The training shall include the components of subsection (d). The home services agency may accept proof that the worker has successfully completed a training program at or through another licensed home services agency within the prior year (previous 365 days) in lieu of providing or arranging for training, including a CNA who is approved on the Health Care Worker Registry. The agency shall give the home service worker, with proof of prior training within the prior year, and the CNA a competency evaluation prior to his or her first assignment. The home services agency shall not give a worker an assignment until the worker has first passed a competency evaluation given by the agency of the topics included in the first four hours of training. The competency evaluation shall ensure that the home services worker is competent to provide the services required in his or her first assignment. The worker shall be similarly tested following the remaining four hours of training.

- d) The placement agency may accept proof that the worker has successfully completed a training program at or through another licensed home services agency within the prior year (previous 365 days). The home services placement agency shall not give a worker an assignment until the worker has first passed a competency evaluation given by the agency. The competency evaluation shall ensure that the home services worker is competent to provide the services required in his or her assignment. The competency evaluation or proof of prior training at a licensed home services agency within the prior year shall address each of the following subjects:
- VCG-IL-ORT 1) The employee's job responsibilities and limitations;
- ITK1040132 2) Communication skills relating to persons who are hard of hearing, have dementia, or have other special needs;
- Observing, reporting and documenting client status and the care or service provided, including changes in functional ability and mental status demonstrated by the client;
- ITK1040016 4)
 Performing personal care tasks for clients, including: bathing; skin care; hair care; nail care; mouth care; shaving; dressing; feeding; assistance with ambulation; exercise and transfers; positioning; toileting; and medication reminding;
- ITK1040052 5) Assisting in the use of specific adaptive equipment, such as a mechanical lifting device, if the worker will be working with clients who use the device;
- ITK1040151 6) Basic hygiene and basic infection prevention and control practices;
- ITK1040122 7) Maintaining a clean, safe and healthy environment;

ITK1040122 8)	Basic personal and environmental safety precautions;
ITK1040102 9) ITK1040173	Recognizing emergencies and initiating emergency procedures, including basic first aid and implementation of a client's emergency preparedness plan;
ITK1040021 10)	Confidentiality of client's personal, financial and health information;
ITK1040210 ITK1040028 11)	Understanding dementia;
ITK1040132 12) ITK1040059 12)	Problem solving skills to care for patients with dementia who exhibit challenging behavior;
ITK1040035 ITK1040147 13)	Behaviors that would constitute abuse or neglect and the legal prohibitions against these behaviors, as well as knowledge and understanding of abuse and neglect prevention and reporting requirements; and
ITK1040033 ITK1040030 14)	Any other task that the agency may choose to have the worker perform.

e) All home services workers shall complete a minimum of eight hours of training during each year of employment to maintain placement availability, based on either a calendar year or an anniversary date basis, whichever is selected by the agency. The initial eight hours of training required in subsection (c) shall satisfy the annual training requirement for the home services worker's first year of employment. The

annual training can include self-study courses with demonstration of learned concepts that are applicable to the employee's responsibilities. Training shall include:

- ITK1040021 ITK1040174
- 1) Promoting client dignity, independence, self-determination, privacy, choice and rights;
- ITK1040173
- 2) Disaster procedures;
- ITK1040151
- 3) Hygiene and infection control; and
- ITK1040035
- 4) Abuse and neglect prevention and reporting requirements.
- f) All training shall be documented with the date of the training; the length of time spent on each training topic; instructors and their qualifications; short description of content; and staff member's signature.

Illinois Department of Public Health

health care worker registry

A home health or home nursing agency shall not employ an individual as a home health aide unless the agency has inquired of the Department as to information in the Health Care Worker Registry concerning findings of abuse, neglect or misappropriation of property.

(Source: Amended at 43 Ill. Reg. 9134, effective August 12, 2019)

Competency Based Curriculum

Village Caregiving's training meets the definition of "competency based curriculum," and is designed to provide the skills needed to perform certain tasks and activities. The curriculum has goals, objectives, and an evaluation system to demonstrate

competency in training areas.

Village Caregiving's training has been developed and will be conducted by an RN or documented specialist.

Competency Based Curriculum

Village Caregiving partners with In the Know / Home Care Pulse, a nationally recognized training specialist, with support from Village Caregiving RNs and managers, to train employees and provide updates on important issues. If you would like additional training on specific skills, conditions, or situations, please ask. These resources are available to you at all times.







A Client Care Module: Understanding Abuse

SUMMARY OF TOPIC

What is Abuse? Abuse is some action by a trusted individual that causes physical and/or emotional harm to the victim. There are a number of different kinds of abuse, including physical abuse, emotional abuse (includes verbal abuse), sexual abuse and financial abuse (including identity theft)

FOCUS ON CHILD ABUSE

Child abuse can happen in any type of family—small, large, rich, poor, white, black, etc. It can also happen to children of all ages.

What are the signs? Abused children might:

- Say they deserve to be punished.
- Act frightened of parents or other adults.
- Get scared when other kids cry.
- Be very quiet or very aggressive.
- Sit and stare into space.
- Be afraid to go home.
- Act much older than they are.
- Try to get attention by being "naughty".
- Try to run away from home.

FOCUS ON ELDER ABUSE

Elderly people are more likely to be abused if:

- · They are physically and/or mentally impaired.
- They are isolated from their family or community.
- Their caregivers are stressed out.
- Their caregiver is a family member with emotional problems or who is addicted to drugs or alcohol.

Know the signs! It should send up a red flag if:

- The client is punished for being incontinent.
- You hear a client being threatened.
- You hear two different stories about how the client got a bruise or other injury.
- A family member refuses to allow you to complete the client's care.

NURSING ASSISTANTS ARE MANDATED REPORTERS!

A Mandated Reporter is a professional who has regular contact with vulnerable people—and is required to report to the proper authorities if abuse is observed or suspected. You can make reports anonymously, but you can also be charged with negligence for failing to make a report.

- ⇒ Studies have shown that 93% of nursing assistants have seen or heard of a client being mistreated by a family member or a coworker. You and your coworkers have to work together to prevent abuse.
- ⇒ Whistleblowers are heroes who speak out when they witness abuse in the workplace, and have the power to make it STOP!

Medications



Village Caregiving home services workers MAY

Remind a client when to take medications and observe to ensure that the client takes the medication as directed

Hand the client's medication to the client.

If the client is unable to open the medication, a home services worker may open the unit dose or medication organizer, remove the medication from a medication organizer, and close the medication organizer for the client.

Village Caregiving home services workers **SHALL NOT** Instill eye, ear, or nasal drops;

Mix, compound, convert, or calculate medication doses;

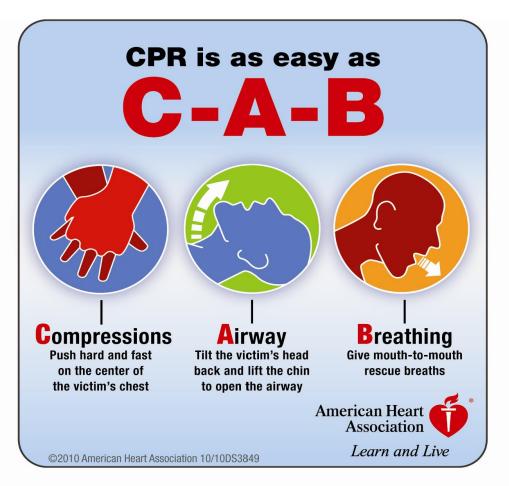
Prepare syringes for injection or administer medications by an injectable route;

Administer medications in any way.

Cardiopulmonary Resuscitation (CPR)

Direct care staff authorized to provide care in a client's home may be formally trained in CPR by an RN.

CPR is an emergency procedure, performed in an effort to manually preserve intact brain function until further measures are taken to restore spontaneous blood circulation and breathing in a person in cardiac arrest.



First Aid

Direct care staff authorized to provide care in a client's home may be formally trained in First Aid by an RN. The main goals of First Aid are to 1) preserve life; 2) prevent further harm; and 3) promote recovery.

First Aid is the provision of initial care for an illness or injury until appropriate medical treatment can be accessed. First Aid generally consists of a series of simple, and in some cases, potentially life-saving techniques that an individual can be trained to perform with minimal equipment.







An Infection Control Module: Infection Control in Home Care

SUMMARY OF TOPIC

Infection control in home care can be difficult. Home health aides never know what they might encounter at each visit. The single most important thing you can do to prevent spreading germs from client to client is to wash your hands! But there are other ways to prevent infection in specific situations:

Situation	Infection Control Tips		
Body Fluids & Bathrooms	If you use an antibacterial cleaner, be sure to follow the directions on the container carefully. Some of them need to be left on a surface for up to two minutes before being wiped away. (And, rememberdiluted bleach needs to stay on a surface for 10 minutes to disinfect it properly!) If "accidents" are a common problem with clients, suggest that the family buy an enzyme-based carpet cleaner (available at pet stores). The enzymes "eat" the bacteria in urine that cause odor.		
Laundry	 To "disinfect" laundry, use water that is at least 140 degrees F. Even when using hot water, it's best to wash heavily soiled items separately. To keep germs from building up on damp laundry, dry it (or hang it to dry) as soon as the wash cycle is finished. Be sure to wash your hands after touching or sorting any dirty laundry—and after transferring wet laundry to the dryer. 		
Used Needles	 While home health aides are not supposed to handle "sharps", studies have shown that clients often leave used needles and syringes for their aides to dispose of. Your agency may provide sharps containers for clients. If not, help the family arrange for disposal at a drop-off collection site, through a mail-back service or a special waste pick-up. 		
Household Pests	 Keep kitchens and other rooms as free of food as possible. Wipe all kitchen surfaces with soap and water to get rid of spills and grease. Tell your supervisor and/or your agency's social worker about any pest infestation in a client's home Pests can be dangerous, especially for the elderly and people with respiratory problems. 		
Kitchen Germs	 When you clean the kitchen, work from high to low—with the floor being the last surface you clean (However, if the dirty water used to clean the floor has to be emptied into the kitchen sink, clean the sink last.) Remember that germs can hide and multiply easily on your client's can opener, faucet and kitchen sponge or dishcloth. To keep from spreading germs around when you mop, rinse the mop often. If a floor is very dirty, dump the mop water several times and continue with clean rinse water. 		





An Infection Control Module: Infection Control in Home Care

SUMMARY OF TOPIC

Situation	Infection Control Tips
Food Safety	CLEAN: Wash hands and surfaces frequently. SEPARATE: Don't cross-contaminate. COOK: Cook foods to proper temperatures. CHILL: Refrigerate foods promptly.
Pets	 Have clients wash their hands thoroughly with soap and running water after contact with animals. This is especially important before preparing or eating food. Be extra cautious around reptiles, baby chicks, ducklings, pupples and kittens. Young animals are more likely to spread infection. Be sure that you wash your hands after contact with a client's pet, its feces and/or dog treats. (Some treats may be contaminated with salmonella.)

MORE HOME CARE INFECTION CONTROL TIPS

- If part of your care plan is to clean the client's living space, try to think outside the box. Germs may be hiding
 in places you're not cleaning. For example, studies show that these common it
 toilet bowl: the kitchen sink, the telephone receiver, doorknobs, the television
 top of a desk or bedside table.
- A great way to disinfect a sponge is to put it through the dishwasher every other
 dishwasher at a client's home? Be sure to allow the sponge to dry out between
 discard it after three weeks.
- Washing sheets cleans them of dust mites and other allergens. It takes a
 professional pesticide treatment and professional laundering at high
 temperatures to get rid of bed bugs.
- Remember that a good disinfectant cleaner should state on the container that kills 99.9% of germs and bacteria.
- When the weather allows, let some fresh air and sunshine into your clients' homes. The fresh air offers extra oxygen and reduces stuffy odors. And, the he





An Infection Control Module: Standard Precautions

SUMMARY OF TOPIC

Standard precautions are the "common sense" infection control guidelines you should follow as you perform your daily tasks with clients. They apply to ALL your clients, no matter what their diagnosis—even if they don't seem sick!

The TOP TEN STANDARD PRECAUTIONS GUIDELINES (recommended by the CDC) are:

- 1. Wash your hands before and after any contact with a client or the client's environment.
- Wear gloves when you have to touch blood, body fluids, secretions, excretions, contaminated items, mucous membranes, or any non-intact skin.
- 3. Wear a gown as needed to protect your skin and clothing from body fluids.
- Wear a mask or goggles if you might get splashed or sprayed by blood or other body fluid.
- 5. Use gloves and caution with sharps and NEVER recap a needle or syringe.
- 6. Disinfect the environment routinely.
- 7. Dispose of contaminated waste according to workplace policy.
- Disinfect shared client equipment.
- 9. Clearly label specimens, such as urine, stool or sputum.
- 10. Use a mouthpiece when performing CPR.

KNOW YOUR TRANSMISSION BASED PRECAUTIONS

PRECAUTION	WHAT EQUIPMENT IS NEEDED?	WHEN IS THIS USED?	
Respiratory Hygiene & Cough Etiquette	Cover your nose and mouth with a tissue or the inside of the elbow when coughing or sneezing; dispose of tissues properly; and perform frequent handwashing.	For anyone with a cough or cold symptoms, especially a fever.	
Contact Precautions	Gloves and gown must be worn for all contact with the client and the client's environment.	MRSA, VRE, e-coli, pink eye and hepatitis A.	
Droplet Precautions	A mask must be worn within 3 feet of the client.	Pertussis, flu, strep throat, mumps, and rubella.	
Airborne Precautions	A mask must be worn when you are in the same room as the client.	Measles, chickenpox, and shingles.	
Expanded Airborne Precautions	A fit tested respirator must be worn for all contact with the client.	Tuberculosis (TB), smallpox and SARS	

Skills

Often, clients deviate from routines and normal behavior when they are having health issues. Although caregivers do not diagnose or treat health issues, caregivers may recognize health issues and contact health care providers before issues become worse. **Your caregiver role is key**.



Think of yourself as a canary in a coal mine. Miners would place canaries in underground mines to make sure the air supply was safe. As long as the canary kept singing, the miners knew their air supply was safe. Caregivers are like those canaries in the homes of clients.

Personal Attendant Skills training is provided using online courses provided by In the Know, with support from a Village Caregiving RN.





A Client Care Module: Helping with Activities of Daily Living

SUMMARY OF TOPIC

What are ADLs? ADLs, or <u>Activities of Daily Living</u>, are all those <u>basic self-care activities</u> that people without an illness or injury normally do for themselves. These activities include bathing, oral hygiene, toileting, dressing, grooming, eating and safe transfers. Depending on your workplace and/or the client's insurance, reimbursement for client care may be based on how much ADL assistance you provide for your clients.

TIPS FOR ASSISTING WITH ACTIVITIES OF DAILY LIVING

Develop a routine with your client. Provide assistance with ADLs at the same time of day the client would normally do that activity. For example, if your client normally likes to get washed and brush her teeth before breakfast, then help her with those tasks at that time.

Include the client in the activity. Ask and encourage clients to participate in personal care and give them time to perform the activity.

Never rush a client through ADLs. Remember, the goal is increase the person's ability to do this task independently. If you rush, or get impatient and do it yourself, you deprive the person of the opportunity to regain this skill. This means you will <u>ALWAYS</u> have to do it!

Give a head start. Set up the items needed for the client to perform the activity independently. For example, put toothpaste on the toothbrush and place it near the client.

Keep it simple. Break complex tasks down into smaller steps. Provide cues for activities to be completed. For example, "Here is the wash cloth. Wash your face." Or, "Pick up the brush and brush your hair."

Use the "hand-over-hand" method. If your client does not respond to your verbal cues, try the hand-overhand method. You do this by placing your hand on top of the client's hand and performing the activity together.

Be patient. Allow your clients to do as much of the activity as possible, even if it takes longer for the task to be completed.

Be positive. Encourage clients who try to do things for themselves. Show them that you are confident in their abilities.

Record the correct information! When documenting ADLs, two pieces of information are critical—what actually happened and how much you helped.

HIPAA

The Health Insurance Portability & Accountability Act (HIPAA) provides federal protections for Protected Health Information (PHI) held by covered entities and gives patients an array of rights with respect to that information. At the same time, HIPAA is balanced so that it permits the disclosure of PHI needed for patient care and other important purposes.

Village Caregiving, as a covered entity under HIPAA, provides this training to caregivers regarding the responsibilities related to securing and protecting PHI. HIPAA training is provided using the WV Medicaid Module and/or using online course provided by In the Know, with support from a Village Caregiving RN.



HIPAA

In addition to HIPAA and other laws/rules/regulations, Village Caregiving policy states that client PHI (including pictures) may not be posted on social media, even if the client gives permission. This is important to protect the company, yourself, and your client.

NEVER POST ABOUT CLIENTS

Read posts back to yourself before posting to be sure you are not posting PHI

ONLY USE SECURE MESSAGING

Use passcodes and other security measure on your devices to protect PHI



Be careful not to cross a line with private discussions







A Risk Management Module: Client Safety Tips

SUMMARY OF TOPIC

What's the big deal about client safety? One in five Americans report that they or a family member have experienced a medical error of some kind. This could be a fall, an infection, a medication error, a surgical error or an equipment malfunction.

FOCUS ON FALLS:

Remember: A falls assessment must be done within 14 days of admission. It's a good idea to know who is responsible for doing your client's falls assessment. You must know your client's fall risk level in order to take the proper precautions. Be sure to report any changes in status to the nurse so the fall risk can be adjusted.

FOCUS ON PREVENTING INFECTIONS:

Wash your hands, wash your hands, wash your hands. Then, wash your hands again! The most important thing you can do to prevent infection is WASH YOUR HANDS! You can also teach your client to request ALL caregivers wash their hands before and after care. And, teach family members about the importance of washing hands before and after visits!

FOCUS ON EQUIPMENT SAFETY:

Assistive equipment is available to your client to help encourage safe independence. *If the equipment itself is not safe—the purpose is LOST!* Perform regular inspections of your client's equipment and make sure your client is using the equipment properly.

FOCUS ON PRESSURE SORES:

A client who develops a pressure sore has been neglected in some way. Clients who cannot move independently need to be re-positioned every two hours. Skin should be kept clean and dry and checked at least once a day for reddened areas. If you notice an area of redness, report it immediately so intervention can be started.

FOCUS ON MEDICATION:

Even though you may not be formally trained in medication administration, you can still develop a basic understanding of common side effects of frequently used medications. Knowing the side effects and reporting any observations you make can save your client's life!

FOCUS ON MEAL TIME:

Meal times should be fun and relaxing. Never rush a meal! Pay attention to your client's ability to chew and swallow. Report any changes immediately if you think the diet order is not appropriate for your client's abilities. If you have not been trained on how to perform the Heimlich Maneuver on a choking person, ask your supervisor for a demonstration!

Standard of Conduct

- Village Caregiving employees must conduct themselves in a responsible, professional, and ethical manner at all times.
 Village Caregiving employees are expected to be honest and respectful with other employees, clients, and Village Caregiving staff members, be on time and prepared for shifts, and turn in hours worked / expenses in a truthful, accurate, and timely manner.
- Village Caregiving's reputation is earned by the quality of its services. Our dedication to quality sets us apart from others.
- Taking pride in our communities and improving the lives of our clients, who are also our neighbors and friends, matters most.

Standard of Conduct

- If an employee violates this Standard, Village Caregiving staff will communicate that violation verbally, in writing, or via digital communication (phone, text, etc), a record of which may be kept in the employee's personnel file. Violations may result in discipline or termination of employment.
- If you absolutely must miss a shift or call off, please be sure to let Village Caregiving staff know – call, text, email – <u>something!</u> – please give plenty of notice so your shift can be filled and services provided.

Complaint Investigations

- Village Caregiving shall investigate a complaint made by a client, the client's family, or the client's personal representative regarding:
 - Service that is or fails to be furnished; and
 - Lack of respect for the client's property by anyone furnishing services on behalf of Village Caregiving.
- Village Caregiving shall document the complaint and the resolution of the complaint.

Dress Code

Village Caregiving requires employees to dress in appropriate, responsible, professional clothing, taking into consideration the services being provided. For example, scrubs are acceptable, especially in situations where movement should not be restricted. Dress of any kind that may result in increased risk of accident is not allowed. For example, sandals are not allowed. Also, be sure to consider hair, nails, etc.



Personal Protective Equipment (PPE)

Village Caregiving provides PPE such as gloves, masks, gowns, face shields, sanitizer, etc, at its offices. Please let Village Caregiving staff members know if you need PPE, if you are running out of supplies, etc. You will be given PPE for free. Remember to stay safe!



Name Tags

Village Caregiving may require employees to wear name tags which should be visible at all times. This is important because Village Caregiving employees may work in a variety of settings, such as client homes, nursing homes, assisted living facilities, hospitals, or other places in the community. It is important that employees are clearly identified as Village Caregiving employees to avoid confusion. Your name tag may contain your job title or NPI #.



Benefits



As an Applicable Large Employer (ALE) under the Patient Protection and Affordable Care Act (ACA), Village Caregiving may offer health insurance benefits to full-time, eligible employees. At your time of hire or during an open enrollment period, you may be offered information and participation in the Village Caregiving group health insurance plan, along with your our of pocket obligations. If you accept this offering, you will be asked to complete several documents. If you decline this offering, you will be asked to sign a Waiver of Medical Coverage for that year.

Responsibility

Caregivers are likely to work with the elderly, persons with behavioral disorders, and distinct categories of physical and cognitive disabilities.

Elderly: old age or approaching old age; past middle age; later in life.

<u>Behavioral Disorders</u>: disorders characterized by disruptive behaviors such as conduct disorder, oppositional defiant disorder, and attention-deficit/hyperactivity disorder.

<u>Physical and Cognitive Disabilities</u>: motor, sensory, or cognitive impairments that substantially limit one or more major life activities.

<u>Remember</u>: in case of an emergency, stabilize the situation, call 911, notify Village Caregiving, and notify the client's designated representative.

<u>Insurance</u>

Village Caregiving carries professional and general liability insurance which covers all Village Caregiving employees acting within their scope of employment. Our clients and their families place great trust in us, and with that trust comes great responsibility.



Transportation

Village Caregiving requires a valid driver's license, registration, automobile insurance, and a safe driving record in order to transport a client.

It is not appropriate for a caregiver to "borrow" a client's car for personal purposes.

If a caregiver is asked to offer transportation to a client for approved activities, that caregiver will be reimbursed for mileage at the current IRS rate. Please discuss transportation with the office manager before transporting a client.



Transportation

Realize that auto insurance follows the automobile. If you are in an accident, your auto insurance is the primary insurer.

Village Caregiving has hired/nonowned auto insurance, but that insurance is only a secondary insurer.

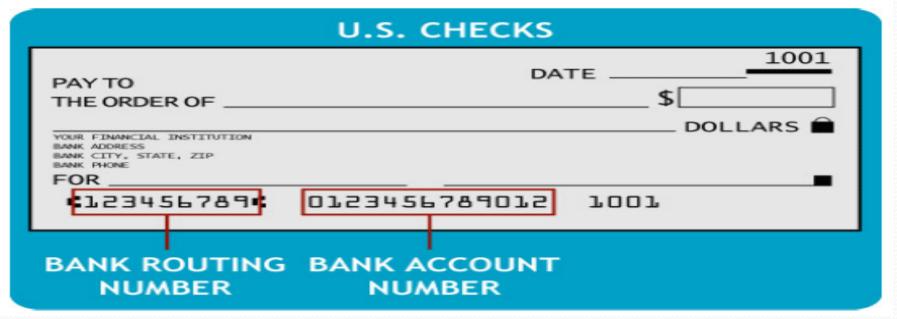
Put simply, you are responsible for driving safely and obeying all traffic laws/rules/regulations. If you are not confident in this, do not transport clients.





Payroll

 Village Caregiving pays all employees via direct deposit. You will need to have a bank account or pay card that accepts direct deposit transactions. When you are hired, Village Caregiving will collect your banking information: bank name, routing #, and account #. This allows Village Caregiving to make debits and credits to your account.



Payroll

- If your banking information, mailing address, or tax status changes throughout the year, please notify Village Caregiving as soon as possible so that we can update your employee profile.
- Village Caregiving uses Heartland as its payroll service. You will receive an email from Heartland explaining how to create an account.
- This account will allow you to access your pay stubs, W-2, and other payroll related documents without asking Village Caregiving for them.

Heartland

Payroll





- Village Caregiving direct care staff are W-2 employees, which means all required tax withholdings, including federal, state, and local taxes will be withheld from paychecks.
- Village Caregiving covers employees with workers' compensation and unemployment benefits.
- Village Caregiving follows all applicable Fair Labor Standards Act laws/rules/regulations related to minimum wage, overtime, etc.

Workers' Compensation

- Village Caregiving policy: employees must report workplace accidents, incidents, and injuries immediately, before the end of the shift.
- Village Caregiving policy: injured employees may be offered "restricted" or "light duty" tasks, to accommodate an injury or restriction/limitation ordered by an employee's health care provider. Employees must be willing to operate under these modified roles to remain employed by Village Caregiving.





Time Sheets / Billing

- Village Caregiving will provide time sheets where staff will keep track of their time spent with clients, expenses, comments, notes, etc.
- For some private payment members, Village Caregiving will generate invoices which will clearly document how many hours each caregiver worked and which days were worked, including expenses.
- It is not appropriate to accept gifts, money, and/or valuables from a member without disclosure to Village Caregiving.

Emergencies

- Remember, in case of an emergency, dial 911.
- Next, use all reasonable means to contact the client's designated emergency contact or the people requested by the member.
- Next, contact Village Caregiving staff.
- Remain with the client's until the emergency situation has been resolved in a safe, reasonable manner.





Remember to take care of yourself and your basic needs. Being a caregiver is hard work!

You are always allowed to take a break to use the restroom, have a quick bite to eat, collect yourself after stressful situations, etc.

Do not neglect self care!

Collaboration

Some clients have other health care providers and people in their homes at the same time as Village Caregiving caregivers.

Please be courteous and respectful – quality care requires collaboration with others and a person-centered plan.

Your roles and responsibilities in a client's home will be clearly defined. If you have a question, please ask Village Caregiving staff.

Your roles are very important, as you are likely to be present in a client's home more often than others in terms of hours per day.

Our members trust you to protect and care for them - value that trust.

Electronic Visit Verification (EVV)



Village Caregiving may required that staff use EVV to chart information about their visits. Village Caregiving contracts with HHAX for EVV services.



You may be assigned a username, password, and National Provider Identification Number (NPI#), which allows you to chart information about your visit, location, services provided, etc. You can access this information using an app on your smartphone.

Thank you for your attention!



Questions?

These training materials are not all-inclusive of the training provided by Village Caregiving. Also included and relevant are discussions with Village Caregiving RNs, managers, and other training materials.



Name:	
Answers Correct:	of 15 (must answer 12 of 15 correctly)
Provided and scored by:	, RN
Date:/	/

- 1. Village Caregiving serves clients at multiple locations in Illinois?
 - 1. True
 - 2. False
- 2. Village Caregiving has an anti-discrimination policy? True or False?
 - 1. True
 - 2. False
- 3. A set of procedural directives and guidelines were published in 1987 by the Centers for Disease Control and Prevention as recommendations to protect health care workers.
 - 1. True
 - 2. False
- 4. Direct care staff must complete the following before providing services:
 - 1. Criminal record check
 - 2. Competency evaluation in service tasks
 - 3. Drug/TB screening

5.	Village Caregiving's training meets the definition of "competency-based curriculum?" True or False? 1. True 2. False
6.	Village Caregiving has a tolerance policy for drug abuse/misuse. 1. Zero 2. Variable
7.	 Village Caregiving provides training on the following topics: 1. Abuse/Neglect/Exploitation 2. HIPAA 3. Personal Care Tasks
8.	Village Caregiving has a Standard of Conduct that must be followed?

1. True

2. False

- 9. HIPAA stands for the Health Insurance Portability and Accountability Act? True or False?
 - 1. True
 - 2. False
- 10. Caring for a client ethically while in the home means putting the best interest of the client/member as your highest priority?
 - 1. True
 - 2. False
- 11. Village Caregiving offers specialized training created by which company?
 - 1. Relias
 - 2. In the Know/Home Care Pulse
 - 3. CDC

- 12. Direct care staff must follow a strict process to facilitate the self-administration of medication?
 - 1. True
 - 2. False
- 13. Village Caregiving may use an electronic visit verification (EVV) system which allows staff to clock in/out, share a location, and chart services provided?
 - 1. True
 - 2. False
- 14. In order to transport a client in your vehicle, you must have:
 - 1. Valid Driver's License
 - 2. Valid Registration
 - 3. Car Insurance
 - 4. Reason to transport the client according to the Service Plan
- 15. Village Caregiving covers all employees with professional and general liability insurance and workers' compensation coverage as long as the employee is acting legally and within the scope of their employment. True or False?
 - True
 - 2. False