

SPECIAL INSTRUCTIONS

1. Staffing:

Parttime and oncall personnel may be utilized in instances when the type of work, working schedule, and duration of employment permit.

2. Minors:

State and federal legislation imposes certain limitations on the employment of persons under the age of 18. Therefore, applicants shall be required to furnish proof of age after an offer of employment has been made. Offers of employment shall be automatically revoked when applicants under 18 are not able to provide a work permit.

3. Interviews:

Preemployment interviews are required for all positions. Interviews may be scheduled according to agency needs. Applicants who qualify for employment will be referred to the responsible supervisor for a second interview. The final decision to hire shall be made by the supervisor and approved by the Administrator. The job offer will be made by the immediate supervisor.

4. Tests:

Written skills tests and competency testing shall be administered to all Home Health Aides.

Competency assessment tools will be used to evaluate clinical staff in defined areas based on job expectations.

5. Human Immunodeficiency Virus (HIV):

Equal employment opportunities shall be provided to persons who test positive for HIV or related conditions.

6. Health Screening:

Health Screening is required by all employees for TB testing (*refer to Health Screening Policy*). Reliant Home Health reserves the right to request any applicant (after an offer of employment is extended) or current employee, to undergo a physical examination where the position or physical condition of the individual may warrant.

7. Reference Check:

Information supplied on the application form or during an interview will be subject to verification. Reference checks shall be made by Reliant Home Health and may be conducted by phone or mail.

8. License Certification:

For professional positions, all applicants must be able to furnish for inspection their current license or certificate. A copy of the applicant's original license or certificate shall be retained for the employment file. Reliant Home Health shall obtain copies of updated licensure on an ongoing basis.

RELIANT HOME HEALTH INC PRIVACY STATEMENT

THIS NOTICE DESCRIBES HOW MEDICAL INFORMATION ABOUT YOU MAY BE

DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION

WHEN THIS NOTICE APPLIES:

We may share health information about you with your doctor , insurance company and administrative activities

OUR OBLIGATIONS :

We are required by law to:

- . Maintain the confidentiality of protecting health information
- . Give you this notice of your legal duties and privacy practices regarding health information about you.

The Following are the terms of our notice that are currently in effect:

HOW WE MAY USE AND DISCLOSE HEALTH INFORMAION

The following categories of activities describes the ways that we may use and disclose health information that identifies you. Some of the categories include examples but not every type user disclosure included in the category is listed.

1) **For TREATMENT:** We may use Health information to treat you or provide you with the health care services. We may disclose health information to doctors, Nurses, Technicians or other personnel, including people outside our facilities who may be involve in your medical care. For example we may tell your primary physician about the care we provide you or give health information to a specialist to provide you with the additional services as appropriate for treatment purpose.

2)

2) For Payment

: We may use and disclose health information so that we or others may bill or receive payment from you, from the government program or an insurance company or other responsible third party for the treatment and services you receive. For example, we may give health information about your treatment so that they will pay for such treatment

3) **For health care operation:** We may use and disclose health information for health care operations, which are administrative activities involve in running a health care system. These uses and disclosure are necessary to maintain high quality care when delivering services to our patients and for our business and management purposes. For example we may use health information to review the adequacy and quality of the care that our patient receives and the efficiency of our activities.

4) APPOINTMENT REMINDERS, TREATMENT ALTERNATIVE AND HEALTH RELATED

BENEFITS AND SERVICES: We may use and disclose health information to contact you as a reminder that you have an appointment with us. We may use and disclose health information to tell you about treatment options or alternatives or health relate benefits to services that may be of interest to you

5) **INDIVIDUALS INVOLVE IN YOUR CARE OR PAYMENT FOR YOUR CARE:** We may disclose health information to a person, such as a family member or friend who is involve in your medical care or helps pay for your care. We also may notify your family about your location or general conditions or disclose such information to an entity assisting in a disaster relief effort.

6) **AS REQUIRED BY LAW:** We will disclose your health information when required to do so by international, federal, state or local law.

7) **TO AVERT A SERIOUS THREAT TO HEALTH OR SAFETY:** We may use and disclose health information when necessary to prevent serious threat to your health and safety or the health and safety of the public or another person Any disclosure however, will be to someone who may be able to prevent the threat.

8) **BUSINESS ASSOCIATES:** we may disclose health information to the business associates that we engage to provide services on our behalf if the information is necessary for such services. For

example, we may use another company to perform services on our behalf. All of our business associates are obligated, under contract with us to protect the privacy of your information and are not allowed to use or disclose any information other than as specified in our contract with them

9) **WORKERS COMPENSATION:** We may disclose your information as authorized by and to the extent necessary to comply with laws relating to workers compensation or similar programs. These programs provide benefits for work related injuries or illness.

10) **We may disclose health information for public health activities.** These activities generally includes disclosure to prevent or control disease , injury or disability, report births and deaths , report child abuse or neglect, report reactions to medications or problems with products. Notify people of recalls of products they may be using. Track certain products and monitor their use an effectiveness, if authorized by law, notify a person who may have been expose to a disease or may be at risk for contracting or spreading a disease or condition and conduct medical surveillance of our facilities in certain limited circumstances concerning workplace illness or injury. We may also release health information to an appropriate government authority if we believe a patient has been the victim of abuse or neglect or domestic violence. However, we will only release this information if you agree or when we are required or authorized by the law.

11) **HEALTH OVERSIGHT ACTIVITIES:** We may disclose health information to a health oversight agency for activities authorized by law. These oversight activities includes for example investigations, inspections and licensure of our facilities and providers. These activities are necessary for the government to monitor the health care system, government programs and compliance with civil rights law

12) **LAWSUITS AND DISPUTES:** If you are involved in a lawsuit or a dispute, we may disclose health information in response to a court or administration order. We may also disclose health information in response to a subpoena, discovery request or other lawful process by someone else involved in the disputes, but only if efforts have been made to tell you about the request to obtain an order protecting the information request.

13) **LAW ENFORCEMENT:** We may release health information if asked by a law enforcement officials as follows: - In response to a court order, subpoena, warrant , summons or similar process

- limited information to identify or locate a suspect fugitive, material witness or missing person
- about a victim of a crime of under certain limited circumstances , we are unable to obtain the person's agreement
- About a death we believe may be the result of criminal conduct
- About criminal conduct on our premises
- -in emergencies circumstances to report a crime , the location of a crime or victims or identity description or location of the person who committed the crime

14) **NATIOANAL SECURITY AND INTELLIGENCE ACTIVITIES.** We may disclose health information to authorized federal officials for intelligence, counter intelligence and other national security activities authorized by law.

16) **INMATES OR INDIVIDUAL IN CUSTDY:** In the case of inmates of a correctional institution or that are under the custody of a law enforcement official, we may release information to the appropriate correctional institution or law enforcement official. This information would be made only if necessary

- A) for the institution to provide you with related health care
- B) to protect your health and safety of others
- C) for the safety and security of the correctional institution

HOW WE MAY USE DISCLOSE HIV/AIDS INFORMATION

We may use medical records and information relating to HIV/AIDS, So that we can provide you with a care ,assure payment for our services and in administrative activities to assure the quality of our care and the safety of our workforce and other patients. We may disclose this information outside reliant home health Inc. only with your written consent, pursuant to a court order or required law.

YOUR RIGHTS:

You have the following rights, subjects to certain limitations and regarding health information we maintain about you:

a) **RIGHT TO INSPECT AND COPY:** Right to inspect and copy health information we maintain about you

b) **RIGHT TO AMEND:** If you feel the health information we have is incorrect or incomplete, you may ask us to amend the information and you have the right to request an amendment for as long as the information is maintained by or for us .you must tell us the reason for your request. We are not required to agree to your amendment

c) **RIGHT TO ACCOUNTING OF DISCLOSURE:** You have the right to request an accounting of certain disclosure of health information we made.

d) **RIGHT TO REQUEST RESTRICTIONS:** You have the right to request a restriction or limitation on the health information we use or disclose for treatment, payment or health care operations. We are not required to agree to your request. You have the right to request limit on the health information we disclose about you to someone who is involve in your care or the payment for your care, like a family member or friend. For example, you could ask that we not share information about your illness with your spouse. If we agree to your request, we will comply with your request unless we need to use the information in certain emergency situations.

e) **RIGHT TO REQUEST CONFIDENTIAL COMMUNICATIONS:** You have the right to request that we communicate with you about medical matters a certain way or at a certain location. For example you can ask that we contact you only by mail or at work. Your request must specify how or where you wish to be contacted .we will accommodate reasonable request.

f) **RIGHTS TO A COPY OF THIS NOTICE:** You have the right to a copy of this notice. You may ask us to give you a copy of this notice at anytime. Even if you agreed to receive this notice electronically, you are still entitled to a copy of this notice.

HOW TO EXERCISE YOUR RIGHT

Only our quality review coordinator can grant your request to exercise any of your rights described in this notice. To exercise any of the right, you must send a request in writing to our quality review coordinator

**ATTN: QUALITY REVIEW COORDINATOR
RELIANT HOME HEALTH
677 SPRING MEADOW DR
WESTMISTER MD 21158**

No other person, staff member or nurse or therapist is authorized to grant any request to exercise the right describe in the notice

CHANGES TO THIS NOTICE.

We reserve the right to change this notice. We reserve the right to make the revised or changed notice effective for health information we already have as well As any information we receive in the future. We will post a copy of the current notice at our office. The notice will contain the

effective date on the page in the top left hand corner.

COMPLAINTS AND QUESTIONS

If you believe your rights have been violated, you may file a complaint with Maryland Office of Health Care Quality, Tel; 1800-492-6005 to file a complaint. You may also contact our Quality review coordinator at the address listed above. All complaints must be made in writing. You will not be penalized for filing a complaint

Scope of Services

Purpose:

To describe the services that are provided by Reliant Home Health, and the population for which we provide our care and services.

Policy:

Reliant Home Health, Inc is a Residential Service Agency registered in the State of Maryland that provides services for all ages in Prince Georges County, Montgomery County, Frederick County, Anne Arundel County, Baltimore County, Baltimore City, Howard County, Harford County, and Carroll County.

Agency will provide intermittent, part-time or extended hours of skilled nursing and home health aide services to clients in their places of residence. The intermittent or part-time services shall be provided on a visiting basis. Services may be provided under arrangements with another agency or organization

Services will be coordinated by the Registered Nurse managing the care. This will include implementing, revising, and updating the Plan of Care; physician conferencing; scheduling of visits; supervision of health team members; and conferencing with health team members to plan and evaluate client care.

Services shall be available seven (7) days a week, 24 hours per day. Telephone answering service will be supplied twenty-four hours per day, seven days a week. On call nurses will carry pagers for contact in the event of an emergency.

All services not furnished directly, are monitored and controlled by the parent agency. Appropriate administrative records shall be maintained for each sub-unit.

The qualifications and competence of the individual(s) providing service are appropriate to client needs and the required services and comply with applicable laws and regulations

Agency maintains business hours Monday through Friday, 8:00 a.m. to 5:00 p.m., except during holidays or as authorized by the Administrator.

EMPLOYEE RIGHTS

POLICY

Reliant Home Health does not discriminate against clients or staff. No client will have an interruption of service because of staff refusal to provide care.

Employees have the right not to participate in cares or treatments that are in conflict with their cultural values or religious beliefs. Employees have the right to be treated with respect by Reliant Home Health staff, supervisors and clients.

Employees have the right to be informed of risks associated with client assignments.

Employees have the right to orientation and training specific to job functions and responsibilities.

Employees have the right to have supervisory/management expertise available to them when they are working.

PURPOSE

To ensure there is no disruption of service based on discriminatory factors.

To identify an employee's right to not participate in activities that are in conflict with his/her cultural values or religious beliefs.

PROCEDURE

All Reliant Home Health staff are oriented to Reliant Home Health' policy of non-discrimination.

Prospective employees and Reliant Home Health representative shall discuss performance expectation during the interview process. This would include rotating work schedules, weekend assignments, etc. If a prospective employee is not available for such a schedule, the employment offer may be deferred based on the inability to meet expected job requirements.

Employees will be informed of availability of supervisors and the right to expect thorough orientation to all client assignments.

Employees will be given specific information about client diagnosis and cares to assure appropriate skills are present.

After an employment offer has been made and accepted by the applicant, Reliant Home Health representative may ask if, based on religious or cultural beliefs, there are client populations or types of care they would not be able to provide care.

Employees with religious beliefs celebrated on nontraditional Reliant Home Health holidays will be instructed to request personal time off in such situations. Time may or may not be paid depending on employment status. Adequate notice must be given to allow Reliant Home Health to arrange alternate staffing.

Specific client care activities or procedures which are in conflict with religious belief or cultural practice may be refused by employees without fear of discrimination or reprisals.

Situations where employees request not to work in certain geographic areas or refuse to perform activities they do not feel qualified for will be addressed in competency assessment and staff safety policies and procedures. Employee concerns will be addressed with their immediate supervisor and/or Director of Nursing, as appropriate.