

ARKANSAS-BASED HOME HEALTH CARE AGENCY

POLICIES & PROCEDURES MANUAL



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ARKANSAS-BASED HOME HEALTH CARE AGENCY

POLICIES AND PROCEDURES MANUAL

PART 1: INTRODUCTION

1.0 About this Manual

Welcome to the [COMPANY NAME] Policy and Procedure Manual. This document serves as a critical resource for all employees, providing clear guidance on our operations, standards, and the regulatory landscape that governs our services. It is designed to ensure that our team is well-informed, compliant, and equipped to deliver exceptional care to our clients, aligning with our commitment to excellence and integrity in home health care services.

1.1 Purpose of the Manual

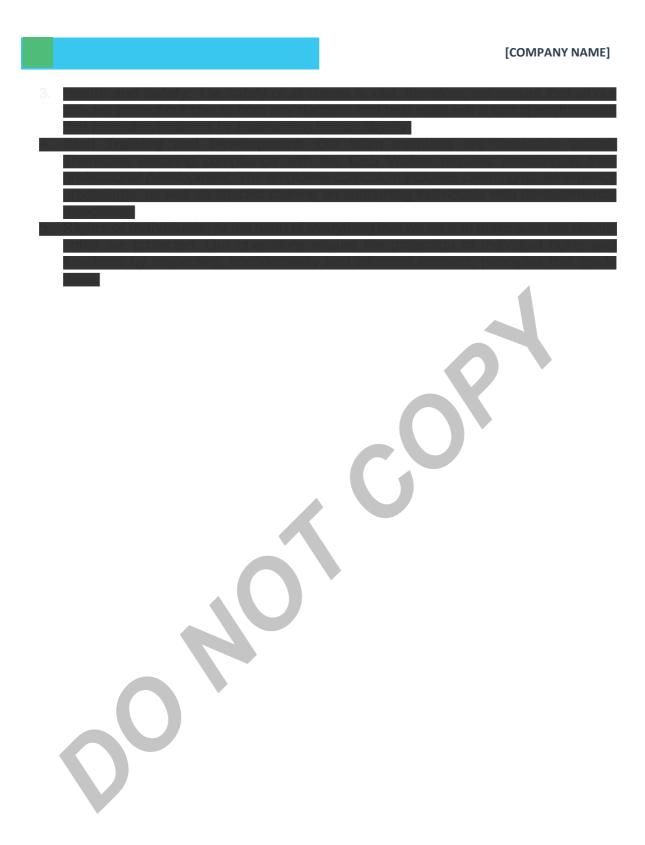
The main objectives of this manual are as follows:

- To Inform: This manual offers comprehensive information about operational guidelines, ethical principles and procedural instructions that form the basis for daily work at all levels. It is, therefore, a reference tool that enables each member of staff to understand his/her duties within the broader context of the organization and legal requirements.
- To Guide: Decision-making requires some structured framework so as not to affect
 the quality of care we serve or provide. This manual is crucial when working through
 difficult situations ensuring that our actions are always aimed at the well-being of the
 client audience including conformity with regulatory standards.
- 3. **To Comply:** The aim here is to outline certain stipulations provided by the Arkansas Department of Human Services concerning Community Employment Supports (CES) waiver. Observance of these standards is not only a statutory obligation but also an ethical one indicating that we care for people whom we support.

1.2 Overview of CES Waiver Standards Compliance

The Community and Employment Supports (CES) Waiver is a pivotal framework established by the Arkansas Department of Human Services. It is designed to provide support for individuals with developmental disabilities, enabling them to live more independently and engage more fully in their communities. Compliance with the CES Waiver is a critical aspect of our operations, as it directly impacts the quality and scope of services we can offer our clients.

Key components include:	of the	CES	Waiver	standards	that	our	policies	and	procedures	align	with
1. Person-C	entere	d Pla	nning:	Our servic	es ar	e ta	ilored to	mee	et the unique	e need	ds of
each clier	it, resp	ecting) their p	references	i, goa	als, a	and aspi	ratio	ns. This ind	ividua	lizec
approach	ensure	s that	the car	e plans are	effe	ctive	e while e	mpov	vering them	leadir	ng to
ndepende	ence ar	nd cor	nmunity	involveme	nt.						
Quality A	ssura	nce a	nd Imp	rovement	: Oui	r sei	vices ac	there	e to best pra	actice	s fol
quality car	re throu	ugh c	ontinuot	ıs monitori	ng. T	hes	e activiti	es in	clude perioc	lic rev	iews
of our prod	cesses	, cust	omer fe	edback me	chan	isms	s, and tra	aining	g programs t	or sta	ff on



PART 2: GOVERNANCE AND ADMINISTRATION

2.0 Board of Directors

2.1 Policy Statement

The [COMPANY NAME] considers the Board of Directors as the body responsible	e for guiding
it in terms of strategic direction, financial viability as well as overall governance.	The agency
ensures its operations are consistent with its mission, values, as well as regulate	ns set up by
ine Arkansas Department of Human Services especially relating to Cita	munity and
employment Supports (CES) Walver. This policy commits the Board to Alles Va	leadership.

2.2 Scope

This part outlines roles, responsibilities as well as processes that govern actions performed by all members of the Board of Directors. It includes board structure, qualifications for board membership, and specific duties expected from every member.

2.3 Definition

 Board of Directors – A collective term referring to a group of elected or appointed officials who oversee [COMPANY NAME] activities towards strategic direction setting, financial soundness maintenance, and legal/ethical standards compliance.

2.4 Specific Policies

1.	Composition and Selection: Membership on this board shall reflect diversity with people who have experience in health care delivery systems or finance besides those from law enforcement agencies or social service organizations being preferred over others in different areas such as nursing or administration etc.
	others in different areas such as hursing of administration etc.
	o principals of parties sionalism, commitment to the agency's mission, and the capacity
	view coals. This balance extends not only to the diverse viewpoints of our
	ploy as but also includes the interests of our stakeholders
2.	Term and Succession: An elected member can serve
	un and again for office if re-elected during that period whereas there should also be
	plan for future leaders which could include staggered terms among other
	considerations like orientation new entrants into such positions will need to undergo
	raining provided here CES waiver standards among other things ensure leaders learn
3.	Roles and Responsibilities: The main duties of a board member are deciding the
	strategic course that the agency should follow,
	inancial records in order while monitoring the CEO/Executive Director by whom they
	are hired, and also looking at whether an organization complies fully with legal norms.
	his means that members have to communicate about what they do both inside and
4.	Meetings and Decision-making: They hold quarterly meetings as stipulated within

their constitutions besides any additional ones that may arise;

5. Conflict of Interest: Board members must comply with

2.5 Detailed Procedures

1. Orientation and Training:

2. Evaluation and Performance:

3. Communication with Stakeholders:

4. Financial Oversight:

5. Compliance Monitoring:

3.0 Board Meeting Schedule

3.1 Policy Statement

[COMPANY NAME] is strongly committed to maintaining the highest standard	•	
and accountability. A fundamental part of this commitment is the regular, effective convening of the Board of Directors' meetings	structurea,	and
planning, oversight, decision-making, and ensuring that what ICOMPANY N	AME] does	is in
ine with its mission as well as what the Arkansas Department of Human S	ervices (AL	HS)
reduites autoritude Community and Employment Supports (CES) walker it bio	ovides princi	DI GE

3.2 Scope

This policy applies to all members of the Board of Directors at [COMPANY NAME] and outlines how often they will have their board meetings scheduled, conducted, and documented so that state laws or corporate bylaws are not broken.

3.3 Definition

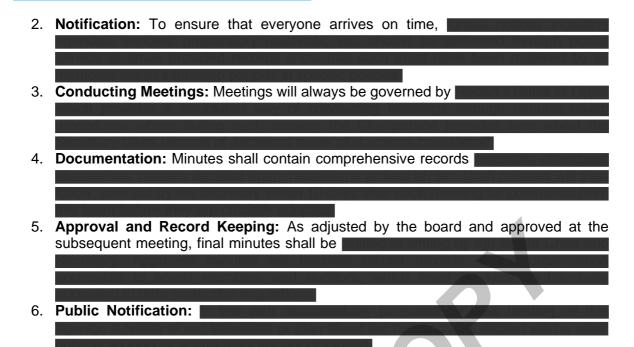
i. **Board Meeting:** A formally arranged gathering of the [COMPANY NAME]'s Board of Directors called upon to discuss its strategic operational governance.

3.4 Specific Policies

1.	Frequency and Timing:
	or when directed by my vill. Voter Challiperson request
2.	Annual Calendar:
	elistripulitori (orellisto)
3.	Special Meetings:
	handed over with a seven days prior to the meeting to all BODs setting out agenda
4	
4.	Quorum:
	son. If it does not occur then there cannot be a valid meeting since no actions
5.	Agenda Preparation and Distribution:
	the agenda with assistance from the chair of the board prior to the scheduled meeting
	so that it has been shared with other members at least every live days before they card

3.5 Detailed Procedures

 Scheduling: Board meetings are coordinated by the Chief Executive Assistant or his/her assistant



4.0 Nepotism at the Board Level

4.1 Policy Statement

[COMPANY NAME] commits to maintaining the highest standards of integrity, fairness, and professionalism in all aspects of its governance and administration.

4.2 Scope

This policy applies to all current and prospective members of the Board of Directors, executive leadership, and any individual involved in the nomination, selection, or governance processes within the [COMPANY NAME]. It encompasses all actions, decisions, and practices related to board composition and function.

4.3 Definition

i. **Nepotism:** The practice of giving preferential treatment to relatives or friends, especially by providing them with jobs or opportunities due to personal relationship rather than their abilities or qualifications.

4.4 Specific Policies

1.	Board Composition and Selection: The process of selecting board members must be based on
	the ability to contribute the transfer is effectiveness. Relations by blood or marriage to current board me time. It executive staff shall not be a factor in board selection
	Conflict of Interest Disclosure: All board members and candidates for board positions must disclose
	Decision-Making Process: In situations where nepotism could be perceived,
	Transparency and Accountability: The board shall maintain transparency
	with this policy.

4.5 Detailed Procedures

Disclosure and Documentation: All potential conflicts of interest,

Recusal and Abstention: Board members identified as having a potential conflict of interest

Monitoring and Enforcement:

Periodic Policy Review: This policy shall be reviewed

5.0 Conflict of Interest Policy

5.1 Policy Statement

[COMPANY NAME] is committed to the highest ethical standards and integrity in its operations and governance.

5.2 Scope

This policy applies to all members of the Board of Directors including officers as well as any individual who takes part in decision-making at [COMPANY NAME]. I

5.3 Definition

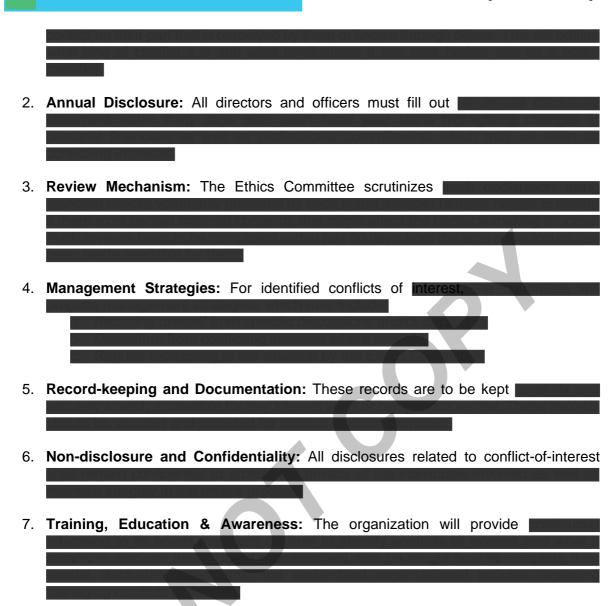
Conflict of Interest: A situation whereby a member or officer within an organization either directly or indirectly has a vested interest be it personal, financial, or professional that could influence or appear like influencing his/her decisions relating to policies processes procedures activities undertaken by such an organization.

5.4 Specific Policies

Identification & Disclosure: All board members are expected to identify potential conflicts I **Annual Disclosure Statements:** Review & Decision-making: The Ethics Committee will consider whether there is anything wrong with any given disclosure made in this way: **Recusal & Abstention:** Any board member with conflicting interests 5. Documentation:

5.5 Detailed Procedures

1. **Disclosure process:** Board members should submit



6.0 Board Training

6.1 Policy Statement

[COMPANY NAME] is dedicated to ensuring all its board members are informed, competent, and fully equipped with adequate skills needed

6.2 Scope of Training

The training program addresses several topics related to healthcare agency management which may include but are not limited to

6.3 Definition

- i. **Compliance:** Conformity with legal provisions laid down by statutes or enacted by agencies relevant to the company's operations.
- ii. **Board Training:** Structured educational programs designed to improve board member skills, knowledge, and effectiveness such as conferences, seminars, webinars, and retreats self-study courses which are available only upon request.

6.4 Specific Policies

1.	Mandatory Participation:
	participate in any both in time of that might be developed from time to time within which
	officeholders are expected to develop a similar understanding regarding their roles and
	responsivilles as well we learning about the context under which they operate.
2.	Customized Training Plans:
	needs of the Board and individual learning requirements, recognizing the diverse
	by delivery levels of experience among Board members
3.	Annual Training Requirements:
	ber a hours of training every year, by either its bylaws or governance policies, to
	ke by a updated on industry best practices and evolving regulations.
4.	Training Records:
	by board members, session topics, dates, durations, and attendance list; this promotes
	transparancy and accountability chaying angoing growth for its mambars

6.5 Detailed Procedures

	Training	Needs	Assessment:	Each year	the Board	Chair t	ogether	with	the
	CEO/Exe	cutive D	irector works w	th a designa	ted training	g coordin	ator to c	leterm	ine
	what kind	d of train	ling is needed t	or improving	on areas	dentified	through	previ	ous
	evaluation	ns condu	cted upon board	S					
2.	Develop	ment of 7	Training Progra	m: Based on	the needs	assessm	ent done	earlie	r, a
	complete	training	program will be	created spelli	nd out exac	ct areas t	nat redui	re furt	her

earning alliong other things e.g., topic coverage, type (in person of offinite), timeline
plus resource requirements. Such programs must be approved by the Board.
Implementation:
and implementing the training program, including securing facilitators, scheduling
sessions, and distributing materials.
Evaluation of Training Effectiveness:
members will be requested to give their views on how effective the training was through
giving constructive criticism and feedback on the course's content, delivery techniques
employed, and its applicability to roles played by them. The information will be used to
make necessary changes to the program.
Compliance Monitoring:
supervise adherence to this requirement so that all directors have completed their
mandatory hours of training annually. If there is no compliance, correct te actions will
Reporting: An annual report containing highlights about trait and statistics about
participation rates, and appraisals shall be presented at the Board level to
ISINSAATANNA ANT SICONUMANING AS ISINSAS II SIINING IS CONCEIL.

7.0 Board Financial Oversight

7.1 Policy Statement

[COMPANY NAME] is committed to maintaining the highest standards of financial oversight which ensures that its resources are utilized effectively, ethically, and in compliance with the relevant laws and regulations.

7.2 Scope of Oversight

This policy applies to all financial activities and transactions of the [COMPANY NAME];

7.3 Definitions

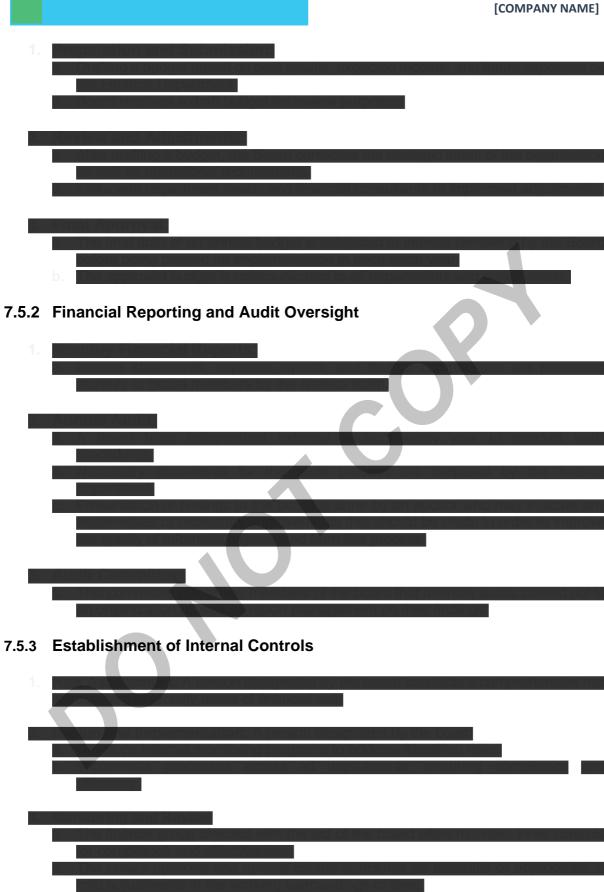
- Financial Oversight: The procedure through which members of the Board manage finances strategy creation, planning, accountability, reporting, and internal control to see that they are directed toward the mission, the regulatory stipulations, and industry best practices.
- ii. Internal Controls: Mechanisms and procedures created to ensure the protection of tangible items, fraud detection and prevention, completeness and accuracy of all accounting records, and compliance with the legislative process and financial reporting best practices.

7.4 Specific Policies

Budget Approval:
should on ture has within strategic goals while meeting operational needs as well as
Financial Reporting:
cisio, making processes through complete, accurate reports.
Audit Oversight:
the according to accounting
Internal Controls:
secure the company's properties and make its report reliable for decision-making
purposes.
Investment and Risk Management:

7.5 Detailed Procedures

7.5.1 Budget Approval Process



PART 3: PERSONNEL AND EMPLOYMENT POLICIES

8.0 Personnel

8.1 Policy Statement

[COMPANY NAME] commits itself to maintaining a competent, moral, diverse workforce

8.2 Scope

This policy applies to all employees including full-time, part-time, contract, and temporary staff engaged in providing in-home care services; beginning from recruitment through hiring until training, performance appraisal then termination.

8.3 Specific Policies

1. Recruitment and Hiring



2. Training and Professional Development



3. Performance Evaluation



5. Equal Employment Opportunity



1. Recruitment and Hiring



2. Training and Professional Development



3. Performance Evaluation



4. Workplace Safety



5. Equal Employment Opportunity



9.0 Pre-employment, Random and After Accidents Drug Screening

The [COMPANY NAME] is dedicated to ensuring a safe, productive, and drug-free work environment.

9.2 Scope and Drug Testing Procedures

This policy applies to all potential and current employees of the [COMPANY NAME].

9.3 Specific Policies

- 1. Pre-Employment Screening: All job
- 2. Random Testing: |
- 3. Post-Accident Testing:

9.4 Detailed Procedures

- 1. Notification and Consent:
- en ellipida
- 2. Testing Process:
- 3.
- abuse treatment, der Arkansas state laws
- 4.



10.0 Staff's Name on Maltreatment Registry

10.1 Policy Statement

[COMPANY NAME] is committed to providing safe, compassionate, and high-quality care to all clients.

10.2 Scope and Background Checks

This policy applies to all current and prospective employees,

10.3 Definitions

- i. **Maltreatment Registry**: A database maintained by state or federal agencies listing individuals found to have abused, neglected, or exploited vulnerable populations.
- ii. **Background Check**: The process of verifying information provided by or about an employee, including criminal history, employment history, and status on the Maltreatment Registry.

10.4 Specific Policies

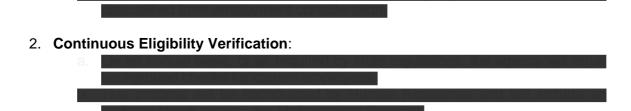
Pre-Employment Screening:

Continuous Eligibility Verification:

Reporting Obligations

10.5 Detailed Procedures

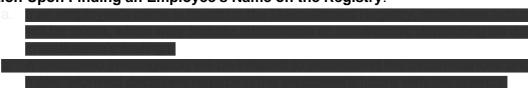
1. Pre-Employment Screening:



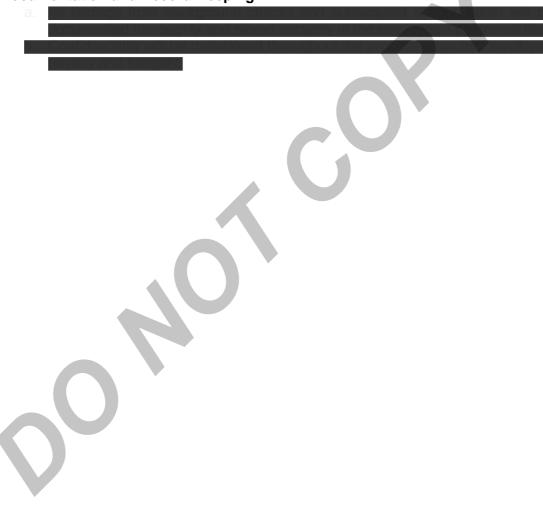




4. Action Upon Finding an Employee's Name on the Registry:



5. Documentation and Record-Keeping:



11.0 Staff Recruitment and Retention

11.1 Policy Statement

The [COMPANY NAME] is committed to the systematic recruitment, hiring, and retention of competent, qualified staff

11.2 Scope

This policy applies to all employment activities within the [COMPANY NAME], including but not limited to

11.3 Definitions

- i. **Recruitment**: The process of attracting, selecting, and appointing suitable candidates for jobs within the organization, either from within or outside the agency.
- ii. **Retention**: The organization's ability to retain its employees through various strategies, incentives, and a supportive work environment.

11.4 Specific Policies

Equal Employment Opportunity:
employment decisions and base for merit, qualifications, and abilities, without
discrimination based on taxe, color religion, sex, national origin, age, disability, or any
Recruitment Process:
that includes the loss lication of vacancies, job posting, application screening
Professional Programment
Professional Development:
evaluation of the state of the
Performance Evaluation:
itex backs recognize achievement, and identify areas for improvement and
Employee Benefits:
nearm instrance terrement parts pain time on, and diner incentives to emance loc

11.5 Detailed Procedures

- 1. Identification of Vacancy:
 - a. The department manager identifies a vacancy or new position and submits a job requisition form to the Human Resources (HR) department detailing the job requirements, qualifications, and responsibilities.
- 2. Job Posting:

Aceks on this he extended denerround on the bosinous redollernerns
 pplication Screening: HR reviews all applications to screen for minimum qualifications, experience, a suitability for the position. Shortlisted candidates are contacted for the in interview.
nterviewing:
 A selection panel, including the department manager and HR representations of the property of the conducts interviews with sportlisted candidates, focusing on their qualifications.
experience, and lit with the agency's culture and values
Calidicales thay undergo several fouries of the position
election and Offer:
randidate evaluations. His extends a job offer to the candidate outling
Upon acceptance, his coordinates the enboarding process, fictuding background
nboarding and Integration:
prientation, training, and mentor to to interest them into the agency and it
rofessional Development:
employees are end rates to participate in professional developing opportunities, including work lops, conferences, and continuing educations
erformance Evaluation:
Supervisors control to require performance evaluations to provide feedba
etention Strategies:
to the one providing competitive compensation and benefits, and promotion

HR creates a job description and posts the vacancy on the agency's website, job boards, and relevant professional networks.

12.0 Access to Staff Files

12.1 Policy Statement

[COMPANY NAME] is committed to maintaining the confidentiality, integrity, and accessibility of

12.2 Scope and Access Guidelines

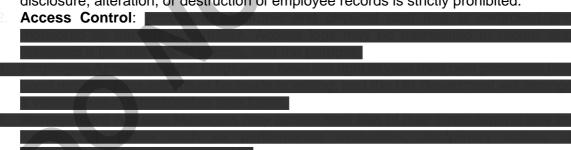
This policy applies to all employee files maintained by the [COMPANY NAME],

12.3 Definitions

- i. **Staff Files**: All paper-based or electronic records that contain employment-related information for current and former employees.
- ii. **Authorized Personnel**: Individuals granted permission to access staff files based on their role within the organization or under legal requirements.

12.4 Specific Policies

1. **Confidentiality**: All staff files must be treated as confidential. Unauthorized access, disclosure, alteration, or destruction of employee records is strictly prohibited.



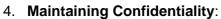
12.5 Detailed Procedures

1. Requesting Access:











5. Updating and Correcting Records:



13.0 Students, Interns, Volunteers, and Trainees

13.1 Policy Statement	1	3.	1	Pol	icy	Stat	em	ent
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[COMPANY NAME] is committed to supporting the educational and professional development of students, interns, volunteers, and trainees.
earning environment that contributes significantly to the development of future heatingar
13.2 Scope and Participation
This policy applies to all students, interns, volunteers, and trainees

13.3 Definitions

- i. **Students**: Individuals enrolled in educational institutions who are engaging in practical experience at the [COMPANY NAME] as part of their academic curriculum.
- ii. **Interns**: Individuals, typically post-secondary students or recent graduates, participating in supervised practical experience to gain professional skills.
- iii. **Volunteers**: Individuals who willingly offer their services without financial compensation to contribute to the [COMPANY NAME]'s mission.
- iv. **Trainees**: New or existing employees undergoing initial training or professional development activities to enhance their skills and effectiveness within the agency.

13.4 Specific Policies

1. Selection and Onboarding:
 All stricipans must undergo a selection process that includes application and a selection process.
to the ensures that participants are oriented and trained appropriately to
2. Supervision:
Viucipants are assigned a supervisor or mentor who provides guidance
reedback, and support throughout their engagement with the ICOMPANY NAME
3. Confidentiality:
elements must adhere to all confidentiality and privacy policies protecting clien
4. Evaluation:
Regular evaluations are conducted to assess participants, performance, provide
constructive feedback, and identify areas for improvement.



13.5 Detailed Procedures

1. Application and Selection Process:



2. Orientation and Training:



3. Assignment of Supervisor/Mentor:



4. Performance Evaluation:



5. Completion and Feedback:



14.0 Staff Training

14.1 Policy Statement

[COMPANY NAME] commits to maintaining the highest standard of care through comprehensive, ongoing staff training.

14.2 Scope of Training Requirements

This policy applies to all employees of [COMPANY NAME],

14.3 Definitions

- i. **Home Health Aide (HHA):** A person providing personal care or related services to clients in their homes under the supervision of a registered nurse or licensed therapist.
- ii. **Personal Care Aide (PCA):** Similar to an HHA, a PCA assists clients with daily living activities, focusing on non-clinical needs.
- iii. **Clinical Practice Hours:** Hands-on training sessions in a real-world setting, allowing trainees to apply theoretical knowledge to practice.

14.4 Specific Policies

Mandatory Training Program:

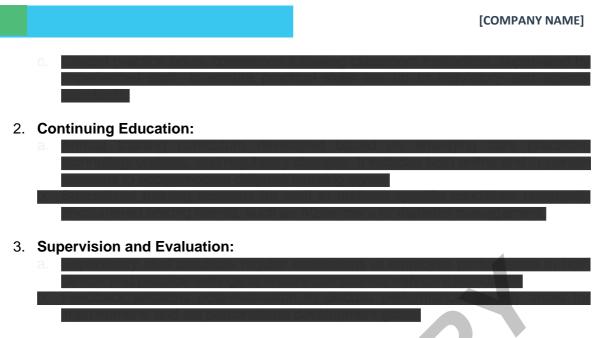
Continuing Education:

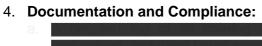
Clinical Practice Hours:

Training Records:

14.5 Detailed Procedures

1. Initial Training Program:







PART 4: CLIENT RIGHTS AND SAFETY

15.0 Individual Rights

15.1 Policy Statement

[COMPANY NAME] is unwavering in its commitment to upholding the rights of its clients, ensuring they receive respectful, dignified, and personalized care.

15.2 Scope

This policy extends to all clients served by [COMPANY NAME]

15.3 Definitions

- Individual Rights: The fundamental rights afforded to every client, including respect for their autonomy, dignity, privacy, and the right to be informed and involved in their care decisions.
- ii. **Autonomy:** The right of clients to make their own choices regarding their care, including the refusal or acceptance of treatments.
- iii. **Privacy:** The right to confidentiality regarding personal and health information.
- iv. **Dignity:** The recognition of the inherent worth of each individual, ensuring they are treated with respect and care that upholds their value as human beings.

15.4 Specific Policies

1. Respect for Client Autonomy

a. Clients retain the right to make informed decisions about their care, including the right to accept or refuse treatments.

2. Guarantee of Privacy and Confidentiality

a. All client information must be handled with strict confidentiality, adhering to federal and state regulations.

3. Commitment to Upholding Dignity

a. Care practices must respect each client's personal values, beliefs, and unique identity.

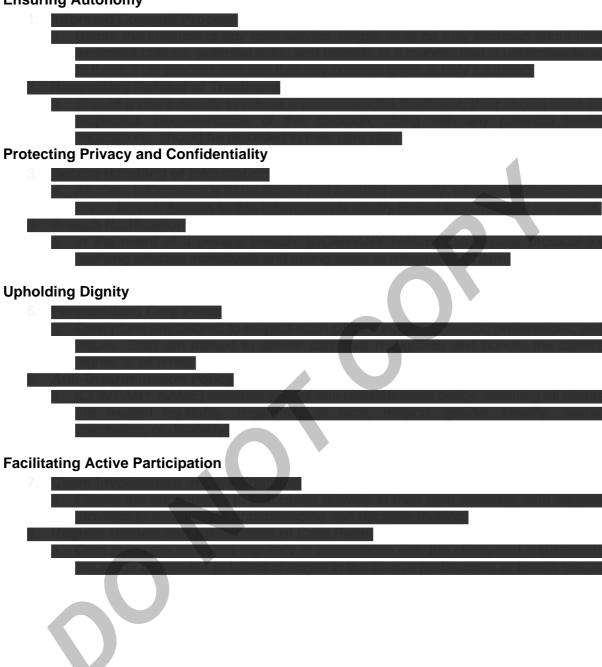
4. Active Participation and Informed Decision-Making

a. Clients should be actively involved in all aspects of their care planning and decision-making processes.



15.5 Detailed Procedures

Ensuring Autonomy



16.0 Confidential Billing and Information

16.1 Policy Statement

[COMPANY NAME] is committed to maintaining the highest standards of confidentiality and privacy concerning our client's personal and financial information.

16.2 Scope

This policy applies to all employees, contractors, and associates of the [COMPANY NAME],

16.3 Definitions

- i. **Personal Health Information (PHI):** Any information, whether oral or recorded in any form or medium, that relates to the health condition, provision of health care, or payment for the provision of health care to an individual.
- ii. **Confidential Billing Information:** Information related to charges for health care services provided to an individual that is protected under federal and state laws.

16.4 Specific Policies

Authorization Requirement:

Minimum Necessary Use:

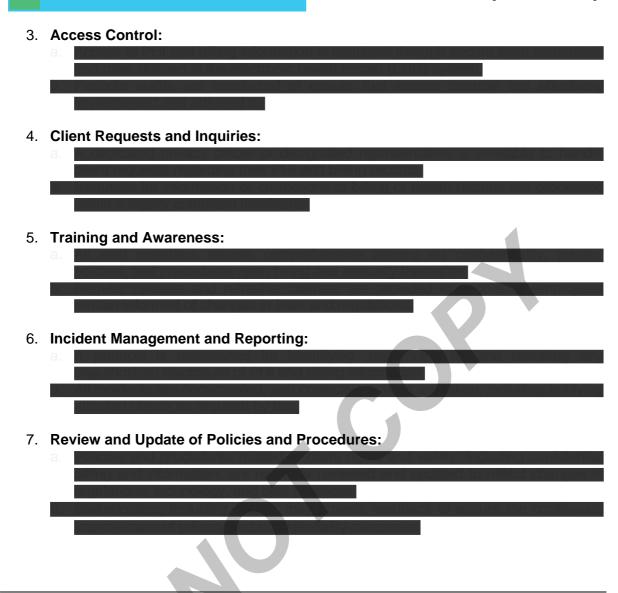
Secure Storage:

Disposal:

16.5 Detailed Procedures

1. Receiving and Recording Information:





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