

COMPASSIONATE HOME CARE

# EMPLOYEE HANDBOOK

**Revised October 2026**

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## 1. INTRODUCTION

Primex Healthcare Services, Inc. is committed to delivering compassionate, high-quality home health care. This handbook outlines the policies, procedures, and expectations that apply to all employees. It ensures compliance with:

- California Title 22
- Fair Labor Standards Act (FLSA)
- California Labor Code
- OSHA
- HIPAA
- FMLA/CFRA

### 1.1 Employment At-Will

Employment is at-will, meaning either the employee or the agency may terminate employment at any time, with or without cause, and with or without notice, as long as the reason is lawful.

### 1.2 Non-Discrimination Policy

Primex does not discriminate based on race, color, religion, sex, national origin, age, disability, sexual orientation, gender identity, or any other protected status.

### 1.3 Mission & Values

- Compassion: Providing empathetic care to those we serve.
- Excellence: Striving for the highest quality in clinical delivery.
- Integrity: Adhering to strict moral and ethical principles.
- Accountability: Taking ownership of actions and outcomes.
- Collaboration: Working together with patients, families, and healthcare teams.

## 2. EMPLOYMENT POLICIES

- Job classifications: Full-time, part-time, per-diem, exempt, non-exempt.
- Introductory period: First 90 days of employment. Completion of the introductory




period is used solely to evaluate performance and job fit; it does not automatically guarantee a wage increase or a change in employment status.

- Annual performance evaluations: Conducted yearly to review clinical performance, compliance, and core competency metrics.

## 3. WORK STANDARDS & CONDUCT

Includes:

- Attendance & punctuality
- Dress code
- Code of conduct
- Confidentiality (HIPAA)
- Professional boundaries
- Anti-harassment
- Workplace safety
- Social media policy
- Cell phone use

## 4. OPERATIONAL EXPECTATIONS

Includes:

- Documentation standards
- 24-hour documentation rule
- Clinical tools
- MD notification protocol
- Incident reporting

Supply request process

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Scheduling expectations

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Communication expectations

## 5. WAGE & HOUR POLICIES

This section includes all required wage-and-hour policies.

### 5.1 Workweek & Workday Definition Policy

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Workweek: Sunday 12:00 AM to Saturday 11:59 PM

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Workday: 12:00 AM to 11:59 PM

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Overnight Shifts: Entire shift is assigned to the day it begins.

### 5.2 Pay Schedule

Employees are paid weekly, every Friday, for the workweek ending the previous Saturday.

### 5.3 Timekeeping Policy

Employees must:

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Accurately record all hours worked.

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Record start/end times, visit times, and travel time.

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Submit corrections within 24 hours.

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Report discrepancies immediately.

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Rounding: Time is rounded to the nearest 6-minute increment.

### 5.4 Overtime & Double-Time Policy

California law requires:

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Time-and-a-half after 8 hours in a day.

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Time-and-a-half after 40 hours in a week.

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Double-time after 12 hours in a day.

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Seventh consecutive day: First 8 hours = time-and-a-half; Hours 9+ = double-time.



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Overtime must be approved unless required for patient safety.

### 5.5 Holiday Pay Policy

Primex recognizes four paid holidays:

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Independence Day — July 4

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Labor Day — First Monday in September

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Thanksgiving Day — Fourth Thursday in November

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Christmas Day — December 25

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Holiday Premium: Employees working on these holidays receive time-and-a-half for hours worked on the holiday calendar date.

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Overnight Shifts: Hours worked after midnight on the holiday are paid at the holiday premium rate.

### 5.6 Meal & Rest Break Policy

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Rest Breaks (Paid): 10-minute paid rest break for every 4 hours worked.

•

Meal Breaks (Paid): 30-minute paid meal break for shifts over 5 hours. Primex pays all meal breaks due to the nature of home health work.

•

Missed Break Premium: Employees must report missed breaks; premium pay will be added as required.

### 5.7 Travel Time & Mileage Policy

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Travel Time (Paid): Paid for travel between patients and required agency travel (meetings, supply pickup, etc.). Not paid for travel from home to first patient or last patient to home.

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Mileage Reimbursement: Reimbursed at the IRS standard rate for patient-to-patient travel and required agency travel. Mileage is not reimbursed for commuting.

### 5.8 Direct Deposit Policy

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Direct deposit is optional.

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Paper checks are available at no cost.



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Primex covers all payroll processing fees.

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Employees cannot be charged for direct deposit.

### 5.9 Sick Leave Policy

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Accrual: Employees accrue 1 hour of paid sick leave for every 30 hours worked. Maximum accrual cap: 40 hours. Accrual stops once the cap is reached and resumes when the balance falls below 40 hours.

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Use: Employees may begin using sick leave after 90 days of employment. Employees may use at least 24 hours per year.

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Doctor's Note Requirement: A doctor's note is required for absences of three (3) or more consecutive days.

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Call-Off Procedure: Employees must notify the office, not the patient, when calling off for any reason.

### 5.10 On-Call Policy

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On-call employees receive a flat on-call stipend, visit pay for call-outs, and travel time and mileage reimbursement.

•

On-call employees must answer calls promptly, respond to urgent patient needs, and document all calls and visits.

### 5.11 Compensation & Performance Reviews

Primex Healthcare Services, Inc. strives to maintain a competitive compensation structure. All employee wage rates are established at the time of hire based on market standards, experience, and specific job responsibilities.

•

Discretionary Nature of Raises: Pay increases are entirely at the discretion of management. They are not automatic, nor are they guaranteed based solely on length of service or the completion of milestones (including the 90-day introductory period).

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Evaluation Criteria: Any adjustment to an employee’s rate of pay is strictly dependent upon three primary pillars:

1. The employee achieving an overall satisfactory or higher rating on their performance evaluation (e.g., meeting all behavioral, documentation, and clinical care standards).

2. The absolute absence of outstanding patient, care team, or caregiver complaints.
3. The agency's current operational budget, financial parameters, and market rates.

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Review Timeline: Formal compensation reviews generally occur in conjunction with annual performance evaluations. Management may, at its sole discretion, review an employee's compensation outside this window if substantial shifts in operational needs or job responsibilities occur.

## 6. EMPLOYEE BENEFITS

Includes:

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Paid sick leave

•

Paid holidays (4)

•

Workers' compensation

•

FMLA/CFRA

•

Training and education

## 7. SAFETY & INFECTION CONTROL

Includes:

•

OSHA compliance

•

Exposure control plan

•

Bloodborne pathogen procedures

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Post-exposure steps

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Emergency procedures

## 8. ELECTRONIC VISIT VERIFICATION (EVV) POLICY

Employees must:

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Clock in/out using EVV.

## 5.12 Holiday Time-Off Requests and Scheduling Policy

Primex Healthcare Services Inc. recognizes employees' personal and family commitments during holidays. As a home healthcare agency, Primex must also maintain adequate staffing and continuity of patient care.

### Advance Notice

Employees requesting planned time off during major holidays, including Thanksgiving, Christmas, New Year's Day, and other recognized holidays, must submit their requests at least **30 calendar days in advance**. Whenever possible, 45 days' notice is encouraged to facilitate scheduling and patient coverage.

### Request and Approval

All planned holiday time-off requests must be submitted in writing to the Administrator or designated supervisor. Requests are subject to approval based on patient care needs, staffing availability, previously approved requests, and fair scheduling practices. Time off is not approved until management provides written confirmation.

### Previously Accepted Assignments

Employees who have accepted patient care assignments are expected to fulfill those commitments unless a schedule change has been approved. Employees must promptly notify management if an unforeseen circumstance prevents them from completing an assignment.

### Per Diem Employees

Per diem employees are expected to communicate their availability for major holidays in advance. Availability will be considered when assignments are offered, consistent with their employment arrangements.

### Exceptions and Protected Leave

Management may consider requests submitted with less than 30 days' notice when staffing permits. This advance-notice requirement does not apply to legally protected sick leave, family or medical leave, reasonable accommodations, or other protected absences. Applicable laws and agency leave policies govern those situations.

### Patient Care Continuity

Primex will make reasonable efforts to accommodate employee requests while ensuring safe staffing, timely communication, and uninterrupted patient care. Employees must not independently cancel scheduled patient visits or arrange replacement coverage without management authorization.


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- Record visit times accurately.
- Document location as required.

## 9. TELEHEALTH POLICY

Telehealth may be used for:

- Supervisory visits
- Patient education
- Care coordination
- Employees must follow HIPAA and agency protocols.

## 10. DISCIPLINARY PROCEDURES

Includes:

- Verbal warnings
- Written warnings
- Suspension
- Termination
- Grounds for Immediate Termination: HIPAA violations, abuse or neglect, fraud, insubordination, repeated misconduct, patient abandonment, falsification of documentation.
- Reassignment or Termination: Clinicians may be reassigned or terminated at any time due to: patient complaints, caregiver complaints, performance concerns, documentation issues, professionalism issues, operational needs, or any lawful reason consistent with at-will employment.

## 11. COMPLAINT & GRIEVANCE POLICY

Employees may report concerns without fear of retaliation.

## 12. ACKNOWLEDGMENT OF RECEIPT

I acknowledge that:

- I have received the Primex Healthcare Services, Inc. Employee Handbook (Revised October 2026).
- I understand that the policies, compensation schedules, and benefits outlined herein may be modified at any time by management.
- I understand that my employment is at-will.
- I am responsible for reading and complying with all policies outlined within this handbook.

Employee Signature

Date

## 13. CLINICAL & REGULATORY COMPLIANCE

*(CMS Conditions of Participation + California Title 22 Aligned)*

### 13.1 PATIENT RIGHTS & STAFF RESPONSIBILITIES

All employees must respect and protect patient rights at all times. Patients have the right to: be informed of their care and treatment, participate in care planning, refuse care or treatment, be treated with dignity and respect, privacy and confidentiality (HIPAA), be free from abuse, neglect, and exploitation, voice grievances without retaliation, and receive care without discrimination.

- Patients have the right to file a complaint with the agency and with the California Department of Public Health (CDPH). Staff must provide complaint information upon request. Patient rights information must be provided to the patient upon admission.
- Staff Responsibility: Immediately report any violation of patient rights. Document patient refusals and notify the nurse/physician as required.

### 13.2 ABUSE, NEGLECT & MANDATED REPORTING

All employees are mandated reporters under California law. Abuse includes physical, emotional, or sexual abuse, neglect (failure to provide care), and financial exploitation.

- Reporting Requirements: Immediate verbal report to supervisor and appropriate authority. Written report within required timeframe (per CA law). Do NOT investigate — only report. Report to Adult Protective Services (APS) or appropriate authority.

Timeline: Immediately (phone) and written report within 24 hours (or per CA law). Failure to report may result in termination and legal consequences.

### 13.3 HOMEBOUND STATUS & SKILLED NEED

Services must meet medical necessity criteria.

- Homebound Definition: Patient has difficulty leaving home due to illness or injury, requires assistance or supportive devices, or leaving home is a considerable and taxing effort.
- Skilled Need Includes: Assessment and monitoring of condition, medication management, disease education, wound care or clinical interventions.
- Staff must document: Why the patient is homebound and why services require skilled care.

### 13.4 PLAN OF CARE (POC) COMPLIANCE

All care must follow a physician-ordered Plan of Care. Only an RN/Therapist establishes and updates the POC. LVNs and HHAs must follow the POC exactly. All services must be provided under a physician-signed plan of care and within ordered frequencies.

- Staff MUST: Not alter care without physician/RN direction, report changes in condition immediately, and document all care consistent with the POC.

### 13.5 CLINICAL SUPERVISION REQUIREMENTS

- RN Supervision: LVNs and HHAs are supervised by an RN. An RN supervisory visit must occur at least every 14 days for HHAs (or per regulation). Supervisory visits must be documented and included in the patient record.
- HHA Supervision: Conducted per regulatory requirements (e.g., every 14 days when applicable) and must be documented.
- Staff Responsibility: Follow supervision instructions and participate in supervisory visits.

### 13.6 INFECTION CONTROL & PREVENTION

All staff must follow infection control protocols.

- Standard Precautions: Hand hygiene before and after patient contact, use of PPE (gloves, masks, etc.), and proper disposal of biohazard materials.
- Staff must: Report infections or exposure immediately, follow post-exposure protocols, and educate patients on infection prevention.

### 13.7 EMERGENCY PREPAREDNESS

Employees must follow agency emergency protocols. In emergencies: Call 911 if life-threatening, notify the RN/Administrator, and follow the patient emergency plan. Staff must know emergency contacts, be prepared for disasters (fire, earthquake, power outage), and be familiar with each patient's individualized emergency preparedness plan.

### 13.8 DOCUMENTATION STANDARDS (CLINICAL)

All documentation must be accurate, timely (within 24 hours), complete, and legible. It must include: skilled need, patient condition, interventions performed, patient response, and the plan for the next visit. Documentation should be completed at or near the time of visit whenever possible.

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Documentation Rules: No falsification, no backdating, and late entries must be labeled. Corrections must follow the proper amendment process. All patient information must be securely maintained and protected in accordance with HIPAA regulations.

### 13.9 MEDICATION SAFETY

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Staff must: Perform medication reconciliation (when applicable), monitor for side effects, and report adverse reactions immediately.

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High-Risk Medications: Require close monitoring and documentation.

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Home Health Aides (HHAs): Are not permitted to administer medications.

### 13.10 FIELD SAFETY & PATIENT ENVIRONMENT

Employees must ensure a safe care environment. Employees have the right to refuse to provide care in unsafe conditions.

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If unsafe: Do NOT proceed if there is immediate danger. Leave the location if necessary and notify a supervisor.

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Examples: Aggressive behavior, unsafe home conditions, environmental hazards.

### 13.11 ETHICS, FRAUD, WASTE & ABUSE

Employees must not bill for services not rendered, falsify documentation, or accept kickbacks or incentives. Violations result in immediate termination and possible legal action.

### 13.12 CLINICAL ESCALATION PROTOCOL

Staff must escalate when there is a change in condition, abnormal vital signs, falls or injury, medication issues, or patient refusal of critical care. Patient refusals must be documented and reported to the RN/physician as appropriate. All incidents must also be reported using the agency Incident Report form per policy.

- Notify: RN Supervisor, Physician (if required), and Emergency services (if needed).
- Examples include: Significant change in condition, abnormal vital signs, medication reactions, or new symptoms. Staff must educate the patient on the risks of refusal and document the education provided.

### 13.13 CULTURAL COMPETENCY

Employees must respect patient beliefs, culture, and language, use interpreter services when needed, and provide culturally sensitive care.

### 13.14 CHAIN OF COMMAND

- HHA to LVN/RN to DPCS to Administrator
- All staff must practice within their licensed scope under California law.

### 13.15 VISIT COMPLETION EXPECTATION

A visit is not considered complete until documentation is finalized.

### 13.16 STAFF TRAINING & COMPETENCY

All employees must complete orientation, annual training, and competency evaluations. Staff must demonstrate competency in infection control, documentation, patient safety, emergency procedures, and scope of practice. Training records are maintained in employee files.

| | |
|---|---|
| Employee Name | Date |
| Employee Signature | Date |