THE GREGORY KISTLER TREATMENT CENTER

PERSONNEL POLICY MANUAL

MISSION STATEMENT

The mission of The Gregory Kistler Treatment Center is to provide support and learning opportunities in the community for children and adults with developmental disabilities and to provide all individuals an opportunity for a full and productive life through therapy and waiver services.

PERSONNEL POLICY

Approved Annually by the Board of Directors

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I. RESPONSIBILITY

A. The Executive Director of The Gregory Kistler Treatment Center, Inc. hereinafter referred to as the "Center", has responsibility for administering written personnel policies approved by the Board of Directors. To handle situations not covered by written policies, the Executive Director may take problem-solving action without Board approval, keeping the President informed of significant outcomes that may indicate the need for future development of formal policies. Changes or amendments to personnel policies will be effective when approved by the Board of Directors.

B. Only the Board of Directors or Executive Director has the authority to enter into agreements with third parties.

II. EMPLOYMENT

A. The Gregory Kistler Treatment Center does not and shall not discriminate on the basis of race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status, in any of its activities or operations. These activities include, but are not limited to, hiring and firing of staff, selection of volunteers and vendors, and provision of services. We are committed to providing an inclusive and welcoming environment for all members of our staff, clients, volunteers, contractors, subcontractors, and vendors.

B. Employees are hired for an unspecific duration and without a guarantee of employment for any specific length of time. Employment is at the mutual consent of the employee and the Center. Schedules are not permanent, and the hours and days can change at any time. The Center reserves the right to hire, promote, demote, discharge, or terminate employment and compensation at any time, with or without cause, and with or without advance notice.

C. Attendance: Timely and regular attendance is an expectation of performance for all employees. To ensure adequate staffing, positive employee morale, and to meet expected productivity standards throughout the organization, employees will be held accountable for adhering to their workplace schedule. Tardies, excessive absences, or a pattern in absences will result in a meeting with Administration.

In the event an employee is unable to meet this expectation, he/she must obtain approval from their supervisor in advance of any schedule changes. This approval includes requests to use PTO, sick leave, Christmas holiday week, a personal day off, as well as late arrivals to or early departures from work.

Center-based and contract staff members are required to notify his or her immediate supervisor at least one hour prior to the start of the workday when unable to report to work on scheduled workdays. In addition, all staff are required to leave a message on voicemail at the Center.

Direct care staff members are required to notify their immediate supervisor at least 24 hours prior to the start of the work shift when unable to report to work. In an emergency, direct care staff members are required to inform their supervisor of the need to be absent as soon as the situation occurs. Staff members are required to speak with their supervisor regarding all attendance matters – text message and voicemail only is not acceptable.

In the case where a direct care staff member is working with a person served and the need occurs to leave due to a personal emergency; their supervisor must be notified. The direct care staff member is required to stay with the person served until another staff member arrives.

All schedule changes must be preapproved by the waiver supervisor. Examples include, but are not limited to, leaving the person served home due to a personal emergency, switching shifts with another employee, and before working an unscheduled shift requested by someone other than your supervisor.

It is not acceptable to claim hours for payment that were not worked and make them up later, even if the parent/guardian agrees.

Community based staff – pets, children, grandchildren, or others may not be present in the workplace.

D. Employees are required to maintain their professional licenses and certifications and to provide proof of licensure and certification annually or as issued by the regulatory agency. Financial responsibility rests with the employee.

E. Name badges must be worn during working hours unless the employee is employed in the Autism Waiver department or as direct care staff in the Community Employment Supports Waiver department. If the name badge interferes with the provision of treatment, it may be removed temporarily. Each employee will be provided with one name badge. Thereafter, the badge will be replaced at cost.

F. The Center is a non-smoking/non-tobacco facility. Smoking, including e-cigarettes, and the use of tobacco is prohibited inside the facility, on Center property, and in personal vehicles when providing transportation for persons served.

III. CONFLICT OF INTEREST

It is Center policy that employees acting on the Center's behalf must be free from conflicts of interest that could adversely influence their judgment, objectivity, or loyalty to the Center and the people that we serve.

To avoid actual or potential conflicts of interest Center-based employees may not enter into any agreement, ownership, or any other form of relationship with an external business, employer, or individual where such relationships may conflict with the business, contracts, services, or interests of the Center without approval of the Executive Director. These relationships may include, but are not limited to:

- The same or similar type of business as that being performed by the Center.
- Private care or supervision of persons served by the Center.
- The use of the Center's assets or resources for personal or business use or financial benefit.

IV. DRESS CODE

Center based – Employees are required to dress in business casual to represent the Center as approved by the Executive Director. Jeans may only be worn on Fridays.

Community based – Employees are required to dress in a manner appropriate to represent the Center as approved by the Department Director or Executive Director. Employees must always appear neat and clean, appropriate hygiene, appropriate length, and free of any visible holes or tears.

V. JURY DUTY

The Center provides full time and part time employees time off from work with pay for time spent serving as a juror or testifying as a witness when subpoenaed for work-related business.

Upon receipt of notification from the state or federal courts of an obligation to serve on a jury or act as a court witness, employees must notify their supervisor. Employees are required to provide a copy of the subpoena or jury summons.

VI. INFECTION CONTROL

Skin tests for tuberculosis are required annually for therapists and therapy assistants

Bloodborne pathogens training will be provided upon hire and annually. Employees will be given the option to choose or refuse the Hepatitis B vaccine. The employee will not incur any expense for the vaccine. Employees with infectious diseases will be prohibited from contact with persons served until a physician's release has been provided to the Department Director or Executive Director.

VII. BACKGROUND CHECKS

A completed Adult Maltreatment Central Registry check is required for the employee, their spouse, and any children or other adult over the age of eighteen (18) that resides in a residence where a person served is approved and permitted to stay overnight. An applicant whose name appears on either registry will not be hired. If the applicant has already been hired, employment will be terminated. The person served will not be allowed to visit or stay overnight in a home where the name of the spouse, and any children or other adult over the age of (18), appear on the registry. Subsequent checks will be required every 5 years.

A completed Child Maltreatment Central Registry check is required for the employee, their spouse, and any child or other adult over the age of eighteen (18) that resides in a residence where the person served is approved and permitted to stay overnight. An applicant whose name appears on either registry will not be hired. If the applicant has already been hired, employment will be terminated. The person served will not be allowed to visit or stay overnight in a home where the name of the spouse, and any children or other adult over the age of (18) that resides in the residence, appears on the registry. Subsequent checks will be required every 2 years.

A successfully passed criminal background check is required for the employee, their spouse, and any children or other adult over the age of eighteen (18) that resides in a residence where a person served is approved and permitted to stay overnight. Subsequent checks will be required every 5 years.

Background checks will be obtained within thirty (30) days of employment.

Background checks may be repeated at any time in response to information received. For example, in response to a complaint received such as an employee's license has expired or an employee has been convicted of a crime, the appropriate verification method will be initiated.

VIII. DRUGS AND ALCOHOL

The Center is committed to protecting the safety, health, and well-being of all employees and persons served. We recognize that alcohol abuse and drug use compromise this dedication.

We have established a drug and alcohol policy that balances our respect for individuals with the need to maintain an alcohol and drug-free environment.

This policy applies during all working hours and whenever conducting business or representing the Center. Any individual who is applying for a position or conducts business for the Center whether on Center Property or other areas is covered by the drug and alcohol policy. This policy applies to the use of alcohol and drug use away from the workplace or off duty when such use affects the behavior and/or judgment of the employee while on duty.

In accordance with Amendment 98 to the Arkansas Constitution, Act 593 of 2017, and Act 740 of 2017, the Center is adopting the following written drug and alcohol policy. This policy applies to all compensated and volunteer employees of the Center.

Those employees who possess a patient issued medical marijuana card, the card must be presented to Human Resources at time of hire and always be date valid while employed.

1. Definitions

As used in this policy, the following terms mean:

a. "Drug" means any substance considered unlawful under the Controlled Substances Act, or the metabolite of the substance.
b. "Property" means: (1) all land, buildings, structures, parking lots, equipment and means of transportation owned, possessed, or leased by the Center; (2) all land, buildings, structures, parking lots, equipment and means of transportation owned, possessed, or leased by the Center's disabled persons served or their guardians or families; and (3) all land, building, structures, parking lots, equipment and means of transportation own, possessed, or leased by the Employee during the hours the Employee is caring for disabled persons served who are present with the Employee.
c. "Safety-sensitive position" means a position in which the employee or volunteer operates a motor vehicle, utilizes equipment or machinery, is responsible for developmentally disabled persons receiving care under the Medicaid Waiver programs, or is in direct contact providing therapy or other services to Center patients.

2. Standards of Conduct

a. The following constitute the Center's rules regarding drug and alcohol abuse:

1. All employees are prohibited from being under the influence of illegal drugs, non-prescribed drugs, alcohol, or medically recommended marijuana during working hours and on Center property.

2. It is a violation of the Center's drug and alcohol policy to use, possess, sell, trade, and/or offer for sale alcohol and illegal drugs on Center property. The illegal or unauthorized use of prescription drugs is also prohibited.

3. No prescription drugs may be brought onto Center Property by any person other than the person for whom it is prescribed. Medically recommended marijuana may not be brought onto Center property by any person, including the employee or volunteer for whom it was recommended. Such drugs may be used only in the manner, combination, and quantity prescribed and recommended. If the use of such drugs (or over-the-counter drugs) may affect behavior or job performance, or if employees are in safety-sensitive

positions, employees must advise their supervisors in writing of the use of such drugs (or over-the-counter drugs. The employee does NOT have to disclose which drug or for what medical condition the drug was ingested.

4. Employees may not use medically recommended marijuana on Center property. The Center may exclude employees and volunteers from safety-sensitive positions when the Center has a good faith belief the current use of marijuana or other drugs may impair employees' job performance, ability to perform job duties, or potentially cause a lapse of attention that could result in injury, illness or death thereby placing Center persons served/patients at risk.

5. All employees are required to refrain from reporting to work or be subject to duty while their ability to perform job duties is impaired due to the on-duty or off-duty use of alcohol or other drugs, including without limitation medically recommended marijuana. It is the employee's responsibility to use the appropriate call-in procedure to avoid unsafe workplace practices.

6. Prior to duty, employees must disclose in writing that they have ingested an impairing drug, whether legal or illegal, over the counter, or prescription. The employee does NOT have to disclose which drug or for what medical condition the drug was ingested

b. Violation of the above standards, including a violation discovered or confirmed by a positive drug of alcohol test or test confirming impairment by medically recommended marijuana will result in termination.

3. <u>Drug Testing Policy</u>

a. Periodic drug or alcohol testing may be conducted under the following circumstances:

1. At the time of application for employment
2. On a random basis
3. If the Center believes that an employee has been observed possessing or using a prohibited substance on the job
4. When the Center reasonably believes that an employee may be affected by the use of drugs, alcohol or medically recommended marijuana
5. When the Center reasonably believes that an employee is impaired during work hours or while engaged in Center business
6. Any employee who has had a positive drug test may be subjected to periodic, random testing, for a period of one year from the date of the positive drug test
7. Any employee who has a test which reflects impairment due to the use of medically recommended marijuana may be subjected to periodic, random testing for a period of one year from the date of the test
8. After a workplace injury or accident

b. Refusal to participate in drug, alcohol, or medically recommended marijuana impairment testing when requested to do so, or refusal to accept the terms and conditions of testing as specified in this policy, may result in disciplinary action, up to and including termination of employment. Prospective employees who refuse to undergo drug testing are not eligible for hire.

c. Employees have the right, upon written request, to obtain a copy of the written test results.

d. The testing will be performed at a designated clinic and all test results will be kept confidential. Access to this information is limited to those who have a legitimate need to know in compliance with relevant laws and management policies.

4. Testing Procedures

a. Testing will ordinarily be conducted during, immediately before, or immediately after, regularly scheduled work periods. For current Center employees, time spent in testing, and in traveling to and from the regular work site to the place of testing, is compensable work time.

b. Upon being hired by the Center, employees will be sent for a pre-placement drug test.

c. Random testing will be performed on an intermittent basis. Employees tested will be selected at random by the designated drug screening company.

d. Testing will ensue immediately following any accident/incident where medical treatment is required or could potentially arise in the future, testing will ensue. Vehicle accidents require immediate mandatory drug testing, regardless of whether a personal injury occurred or not.

e. Reasonable suspicion drug testing will be administered upon specific personal observation that an employee may be under the influence of drugs or alcohol. This suspicion may be reported by any employee to a supervisor. Observations that constitute a factual basis for reasonable suspicion may include symptoms related to, but are not limited to: speech, walking, standing, physical dexterity, agility, coordination, actions movement, appearance, clothing, odor, or other irrational or unusual behavior inconsistent with usual conduct. A supervisor will drive the employee to the drug testing site. The employee will be placed on unpaid leave pending test results.

f. Testing will be conducted under the conditions outlined by the third-party testing facility. A Medical Review Officer will determine whether an employee who tests positive for a drug has a legitimate reason for using the drug, such as a current prescription from a licensed physician.

g. Following a positive test result, employees have the right to explain that result, upon request, in a confidential setting. If an employee receives a call from the drug screening company, the employee must return the call or disciplinary action may occur, up to and including termination.

5. Employee Assistance

Employees with substance abuse problems are encouraged to seek assistance for a substance abuse problem because continued job performance problems, attendance problems, or behavioral problems will jeopardize an employee's employment.

6. Employee Notifications

Each employee has a responsibility to immediately report unsafe working conditions or hazardous activities that may jeopardize work safety, Center persons served/patients, or other employees, including any violation of this policy. Any employee who fails to report such a violation will be subject to discipline, up to and including termination from employment.

Employees must notify the Center of any criminal drug statute conviction for a violation occurring in the workplace within five calendar days of the conviction. Failure to do so may result in disciplinary action, up to and including termination.

IX. CONFIDENTIALITY

Confidentiality regarding those we serve, our employees, our donors, and the operation of the Center is of the utmost importance. Therefore, the following Confidentiality Agreement and Privacy Policy have been developed.

Confidentiality Agreement

I understand that The Gregory Kistler Treatment Center has a legal and ethical responsibility to maintain the privacy of those we serve, including obligations to protect the confidentiality of medical information and other confidential information such as financial data and operational information pertaining to the organization.

I understand that during the course of my employment with The Gregory Kistler Treatment Center, I may hear or see personal medical information or other confidential information.

As a condition of my employment with The Gregory Kistler Treatment Center, I understand that I must comply with this Agreement:

- I will disclose patient information and/or confidential information only if such disclosure complies with The Gregory Kistler Treatment Center's policies and is required for the performance of my job.
- My personal access code(s), user ID(s), access key(s), and password(s) used to access computer systems or other equipment, if any, are to be kept confidential at all times.
- I will not access or view any information other than what is required to do my job. If I have any question about whether access to certain information is required for me to do my job, I will immediately ask my supervisor for clarification.
- I understand that any medical information or confidential information that I access or view at The Gregory Kistler Treatment Center does not belong to me.
- I will not discuss any information pertaining to the organization in an area where unauthorized individuals may hear such information (for example, in hallways, restaurants, on public transportation, and at social events). I understand that it is not acceptable to discuss any organization information outside the organization even if specifics such as names are not used.
- I will not make inquiries about any organizational information for any individual or party who does not have proper authorization to access such information.
- I will not make any unauthorized transmissions, copies, disclosures, inquiries, modifications, or purgings of medical information, confidential information, or Kistler Center forms.
- Such unauthorized transmissions include but are not limited to removing and/or transferring medical information, confidential information, or Kistler Center information from the organization's computer system to unauthorized locations (for instance, home).
- Upon termination of my employment with The Gregory Kistler Treatment Center, I will immediately return all property (ie: keys, documents, ID badges, etc.) to the Kistler Center.
- I agree that my obligations under this Agreement regarding medical information and confidential information will continue after the termination of my employment with The Gregory Kistler Treatment Center.

- I understand that violation of the Agreement may result in disciplinary action, up to and including termination of my employment, as well as potential personal, civil, and criminal legal penalties.

Privacy Policy

The purpose of this policy is to ensure that our organization maintains the necessary healthcare records and other PHI to provide the highest quality healthcare possible while protecting the confidentiality of the PHI of those we serve. All employees must agree that they will:

- Collect, use and disclose PHI only in conformance with state and federal laws and current person served covenants and/or authorizations, as appropriate. Employees will not use or disclose PHI for uses other than treatment, payment, and operations without an authorization from the person served, except when required by law.
- Recognize that PHI must be accurate, timely, and complete.
- Implement reasonable measures to protect the integrity of all PHI.
- Recognize that the person served has a right to privacy.
- Recognize that person served expect and deserve to be always treated with dignity.
- Recognize that the person served has a right to inspect and obtain a copy of his or her PHI and to request an amendment to the medical record.

All employees of The Gregory Kistler Treatment Center must adhere to this policy. Violations of this policy will not be tolerated and are grounds for disciplinary action, up to and including termination of employment, as well as potential personal, civil, and criminal legal penalties.

Privacy Practices

As Required by the Privacy Regulations Created as a Result of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

THIS NOTICE DESCRIBES HOW HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED, AND HOW YOU CAN GET ACCESS TO YOUR INDIVIDUALLY INDENTIFIABLE HEALTH INFORMATION. PLEASE REVIEW THIS DOCUMENT CAREFULLY.

A. OUR COMMITMENT TO YOUR PRIVACY

The Gregory Kistler Treatment Center is dedicated to maintaining the privacy of individually identifiable health information as protected by law, including the Health Insurance Portability and Accountability Act (HIPAA). In conducting our business, we will create records regarding you and the treatment and services we provide to you. We are required by law to maintain the confidentiality of health information that identifies you. This information is referred to as protected health information or PHI. We are required by law to provide you with this notice of our legal duties and the privacy practices that we maintain in our organization concerning your PHI. By federal and state law, we must follow the terms of the Notice of Privacy Practices that we have in effect at the time.

This notice contains the following required information:

- How we may use and disclose your PHI
- Your privacy rights and PHI
- Our obligations concerning the use and disclosure of your PHI

The terms of this notice apply to all records containing your PHI that are created or retained by our organization. We reserve the right to revise or amend this Notice of Privacy Practices. Any revision or amendment to this notice will be effective for all of your records that our organization has created or maintained in the past, and for any of your records that we may create or maintain in the future. Our organization will always post a copy of our current Privacy Notice in our offices in a visible location, and you may request a copy of our current Notice at any time.

B. IF YOU HAVE QUESTIONS ABOUT THIS NOTICE, PLEASE CONTACT**:**

Privacy Officer
Gina Mann, Executive Director
The Gregory Kistler Treatment Center
3304 South M Street
Fort Smith, AR 72903
479-785-4677

C. WE MAY USE AND DISCLOSE YOUR PROTECTED HEALTH INFORMATION (PHI) IN THE FOLLOWING WAYS:

1. **Treatment –** Our organization may use your PHI to treat you. For example, we may ask you to have evaluations, and we may use the results to help us develop an individual plan for services. Many of the people who work for our organization, including, but not limited to, our therapists may use or disclose our PHI in order to treat you or to assist others in your treatment. Additionally, we may also disclose your PHI to your primary care physician or other outside health care providers for purposes related to your treatment. Finally, we may disclose your PHI to family members or others who may assist in your care.
2. **Payment –** Our organization may use and disclose your PHI in order to bill and collect payment for the services and items you may receive from us. For example, we may contact your health insurer, including Medicaid, to certify that you are eligible for benefits and what range of benefits, and we may provide your insurer with details regarding your treatment to determine if your insurer will cover, or pay for, your treatment. We may disclose your PHI to Medicaid and other payors or providers to coordinate and assist their billing efforts. We also may use and disclose your PHI to obtain payment from third parties that may be responsible for such costs, such as family members. Also, we may use your PHI to bill you directly for services and items.
3. **Health Care Operations –** Our organization may use and disclose your PHI to operate our business. For example, we may use your PHI to evaluate the quality of care you received from us, or to conduct cost-management and business planning activities for our organization. We may disclose your PHI to other health care providers and entities to assist in their health care operations.
4. **Appointment Reminders –** Our organization may use and disclose your PHI to contact you and remind you of an appointment.
5. **Treatment Options –** Our organization may use and disclose your PHI to inform you of potential treatment options or alternatives.
6. **Health-Related Benefits and Services –** Our organization may use and disclose your PHI to inform you of health-related benefits or services that may be of interest to you.
7. **Fundraising –** You may be contacted to raise funds for our organization.
8. **Release of Information to Family/Friends –** Our organization may release your PHI to a friend or family member that is involved in your care, or who assists in taking care of you. For example, a guardian, caretaker, or friend may accompany the individual to therapy and participate in the therapy session.
9. **Disclosures Required by Law –** Our organization will use and disclose your PHI when we are required to do so by federal, state, or local law.

D. USE AND DISCLOSURE OF YOUR PHI IN CERTAIN SPECIAL CIRCUMSTANCES

The following categories describe unique scenarios in which we may use or disclose your protected health information (PHI):

1. **Public Health Risks –** Our organization may disclose your PHI to public health authorities that are authorized by law to collect information for the purpose of:

    - Maintaining vital records, such as births and deaths
    - Reporting child abuse or neglect
    - Preventing or controlling disease, injury, or disability
    - Notifying a person regarding potential exposure to a communicable disease
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    - Notifying a person regarding a potential risk for spreading or contracting a disease
    - Reporting reactions to drugs or problem with products or devices
    - Notifying individuals if a product or device they may be using has been recalled

2. **Health Oversight Activities** – Our organization may disclose your PHI to a health oversight agency for activities authorized by law. Oversight activities may include, but are not limited to, investigations, inspections, audits, surveys, licensure and disciplinary actions; civil, administrative, and criminal procedures or actions; or other activities necessary for the government to monitor government programs, compliance with civil rights, and the health care system in general.
3. **Lawsuits and Similar Proceedings –** Our organization may use and disclose your PHI in response to a court or administrative order if you are involved in a lawsuit or similar proceeding. We may also disclose your PHI in response to a discovery request, subpoena, or other lawful process by another party involved in the dispute, but only if we have made an effort to inform you of the request or to obtain an order protecting the information the party has requested.
4. **Law Enforcement –** Our organization may release PHI if asked to do so by a law enforcement official. Examples include, but are not limited to:

    - Regarding a crime victim in certain situation, we are unable to obtain the person's agreement
    - Concerning a death, we believe has resulted from criminal conduct
    - Regarding criminal conduct at our facility
    - In response to a warrant, summons, court order, subpoena or similar legal process
    - To identify/locate a suspect, material witness, fugitive, or missing person
    - In an emergency, to report a crime including, but not limited to, the location or victim(s) of the crime, and the description, identity, or location of the perpetrator

5. **Deceased Persons –** Our organization may release PHI to a medical examiner or coroner to identify cause of death.
6. **Research –** Our organization may use and disclose your PHI for research purposes in certain limited circumstances. We will obtain your written authorization to use your PHI for research purposes except when Internal or Review Board, or Privacy Board has determined that the waiver of your authorization satisfies the following: 1-the use or disclosure involves no more than a minimal risk to your privacy based on the following: a- an adequate plan to protect the identifiers from improper use and disclosure;

b-an adequate plan to destroy the identifiers at the earliest opportunity consistent with the research (unless there is a health or research justification for retaining the identifiers or such retention is otherwise required by law; and c-adequate written assurances that the PHI will not be re-used or disclosed to any other person or entity (except as required by law) for authorized oversight of the research study, or for other research for which the use or disclosure would otherwise be permitted; 2-the research could not practicably be conducted without the waiver; and 3-the reason could not practicably be conducted without access to and use of the PHI.

7. **Serious Threats to Health or Safety –** Our organization may use and disclose your PHI when necessary to reduce or prevent a serious threat to your health and safety or the health and safety of another individual or the public.
   Under these circumstances, we will only make disclosures to a person or organization able to help prevent the threat.
8. **National Security –** Our organization may disclose your PHI to federal officials for intelligence and national security activities authorized by law.
9. **Workers Compensation –** Our organization may release your PHI for workers' compensation and similar programs.

E. YOUR RIGHTS REGARDING YOUR PHI

You have the following rights regarding the protected health information (PHI) that we maintain about you:

1. **Confidential Communications –** You have the right to request that our organization communicate with you about your health and related issues in a particular manner or at a certain location. For example, you may ask if we contact you at home, rather than work. In order to request a type of confidential communication, you must make a written request to the Privacy Officer specifying the requested method of contact, or the location where you wish to be contacted. Our organization will accommodate **reasonable** requests. You do not need to give a reason for your request.
2. **Requesting Restrictions –** You have the right to request a restriction in our use or disclosure of your PHI for treatment, payment, or health care operations. Additionally, you have the right to request that we restrict our disclosure of your PHI to only certain individuals involved in your care or the payment for your care, such as family members, guardians, and friends. **We are not required to agree to your request**. However, if we do agree, we are bound by our agreement except when otherwise required by law, in emergencies, or when the information is necessary to treat you. In order to request a restriction in our use or disclosure of your PHI, you must make your request in writing to the Privacy Officer. Your request must be described in a clear and concise fashion:

   - The information you wish is restricted
   - Whether you are requesting limiting our organization's internal use, outside disclosure or both
   - To whom you want the limits to apply

3. **Inspection and copies –** You have the right to inspect and obtain a copy of the PHI that may be used to make decisions about you, including medical records and billing records, but not including psychotherapy notes. You must submit your request in writing to the Privacy Officer in order to inspect and/or obtain a copy of your PHI. Our organization may charge a fee for the costs of copying, mailing, labor, and supplies associated with your request. Our organization may deny your request to inspect and/or copy in certain limited circumstances. However, you may request a review of our denial. Another licensed health care professional chosen by us will conduct a review.

4. **Amendment –** You may ask us to amend your health information if you believe it is incorrect or incomplete, and you may request an amendment for as long as the information is kept by or for our organization.
   To request an amendment, your request must be made in writing and submitted to the Privacy Officer. You must provide us with a reason that supports your request for amendment. Our organization will deny your request if you fail to submit your request and reason in writing. Also, we may deny your request if you ask us to amend information that is in our opinion: a-accurate and complete; b-not part of the PHI kept by or for our organization; c-not part of the PHI which you would be permitted to inspect and copy; or d-not created by our organization, unless the individual or entity that created the information is not available to amend the information.
5. **Accounting of Disclosures –** All of our persons served have the right to request an accounting of disclosures. An accounting of disclosures is a list of certain non-routine disclosures our organization has made of your PHI. For example, for non-treatment, non-payment, or non-operations purposes. It is not required that we document use of your PHI as part of the routine care in our organization. For example, the therapists share information with each other and the physician, and the billing department using your information to file your insurance claim. Also, we are not required to document disclosures made pursuant to an authorization signed by you. In order to obtain an accounting of disclosures, you must submit your request in writing to the Privacy Officer. All requests for an accounting of disclosures must state a time period, which may not be longer than six (6) years from the date of disclosure and may not include dates before April 14, 2003. The first list you request within a 12-month period is free of charge. Our organization may charge you for additional lists within the same 12-month period. Our organization will notify you of the costs involved with additional requests and you may withdraw your request before you incur any costs.
6. **Right to a Paper Copy of This Notice –** You are entitled to receive a paper copy of our Notice of Privacy Practices. You may ask us to give you a copy of this notice at any time. To obtain a copy of this notice, contact the Administrative Assistant or Privacy Officer.
7. **Right to File a Complaint –** If you believe your privacy rights have been violated, you may file a complaint with our organization or with the Secretary of the Department of Health and Human Services. To file a complaint with our organization, contact the Privacy Officer. We urge you to give us the opportunity to address your concerns and to file your complaint with us first. All complaints must be submitted in writing. **You will not be penalized for filing a complaint.**
8. **Right to Provide an Authorization for Other Uses and Disclosures –** Our organization will obtain your written authorization for uses and disclosures that are not identified by this notice or permitted by applicable law. Any authorization you provide to us regarding the use and disclosure of your PHI may be revoked at any time **in writing**. After you revoke your authorization, we will no longer use or disclose your PHI for the reasons described in the authorization. Please note, however, that we are required to retain records of your care.

If you have any questions regarding this notice or our health information privacy policies, please contact the Executive Director.

X. RELATIONSHIPS IN THE WORKPLACE

The Gregory Kistler Treatment Center is a family-friendly workplace committed to maintaining an environment where staff can work together to provide outstanding service to our persons served, families, and to the community. The Center recognizes relationships may occur between co-workers that may affect operations. When this situation occurs, appropriate action will be taken to prevent disruption of operations and to maintain a positive working relationship among co-workers.

A “relative” under this policy is defined as a parent, stepparent, grandparent, step-grandparent, spouse, ex-spouse, child, stepchild, aunt, uncle, brother, step-brother, sister, step-sister, known cousin, niece, nephew, in-law, “significant other” or relative of the “significant other” of the co-workers.

Every effort must be made to avoid conflict of interest, nepotism, or the appearance of favoritism.

Family Members Working at the Center

The Center will use sound judgment in the placement of related employees in accordance with the following guidelines:

- Individuals who are related by blood or marriage or who reside in the same household are permitted to work at the Center, provided no direct reporting or supervisor to subordinate relationship exists. No employee is permitted to work at the Center when a relative’s work responsibilities, salary, hours, career progress, benefits or other terms and conditions of employment could be influenced by a relative.
- Co-workers are responsible for notifying their supervisors if they believe this policy may apply to them or if they have a relative within their sphere of influence.
- Failure to properly disclose that a relationship exists or failure to cooperate in resolving the conflict may result in corrective action up to and including immediate termination.
- After hire, if co-workers become relatives with a relationship that would violate this policy, the co-workers will be advised that one will be required to resign unless a suitable transfer can be arranged within 90 days from the date of the change.
- Once hired, co-workers cannot be transferred into such a reporting relationship.
- If through reorganization, related co-workers are placed in a position that violates this policy, the co-workers will be advised that one of them will be required to find and obtain a suitable transfer within 90 days from the date of the relationship change or will be required to resign.

Relationships at Work

Co-workers are encouraged to socialize and develop professional relationships with co-workers, provided that these relationships do not interfere with the work performance of either individual or with the effective functioning of the work group. Co-workers who engage in personal relationships (including romantic and sexual relationships) should be aware of their professional responsibilities and will be responsible for ensuring that the relationship does not raise concerns about favoritism, bias, ethics and conflict of interest. In cases of doubt, advice and counsel should be sought from the co-worker’s supervisor.

Romantic or sexual relationships between co-workers where one individual has influence or control over the other's conditions of employment are inappropriate and prohibited. These relationships, even if consensual, may ultimately result in conflict or difficulties in the workplace. If such a relationship currently exists or develops, it must be immediately disclosed to the supervisor.

The supervisor who has influence or control over the other's conditions of employment is obligated to disclose his/her relationship to their supervisor. The other co-worker involved in the relationship is also strongly encouraged to disclose the relationship to their supervisor. The supervisor must contact the Executive Director to decide the necessary actions to be taken.

Relationships with Persons Served

Employees are prohibited from forming or being in a romantic relationship with a persons served or their family members.

General

If a relationship is deemed to be inappropriate under the policy guidelines, the supervisor, after consultation with the Executive Director, will take appropriate action. Actions taken may include, but are not limited to, a transfer to another work group, transfer to another position, a change in shift, a change in reporting structure, corrective action, or discharge. If a co-worker, whether or not involved in the relationship, believes that he/she has been, or is being, adversely impacted by a relationship, he/she is encouraged to contact the Executive Director. When relationships develop into situations that may be viewed as harassment or discrimination, co-workers should refer to the Sexual Harassment policy. If questions or concerns arise regarding harassment or discrimination, co-workers should immediately contact the Executive Director. Willful violation of this policy by a co-worker is grounds for severe disciplinary action, up to and including immediate termination.

XI. DRIVER REQUIREMENTS WHILE ON CENTER BUSINESS

The Center is committed to helping ensure employee safety and the safety of others. Since your job duties may require you to drive your personal vehicle for Center business, the following requirements apply:

- Must have a valid driver's license.
- Must provide proof of insurance and registration to the Center upon hire and as renewed.
- Must have proof of insurance and registration, as required by applicable state law, in your vehicle at all times.
- Must have an acceptable driving record for transporting persons served, verified at hire and annually.

Driver Acceptability Matrix

Number of Moving Violations Within past 5 Years	Number of Accidents Within Past 5 Years				Number of DUI or DWI Within Past 5 Years
	0	1	2	3	1 or more
0	Clear	Acceptable	Borderline	Prohibited	Prohibited
1	Acceptable	Acceptable	Borderline	Prohibited	Prohibited
2	Acceptable	Borderline	Prohibited	Prohibited	Prohibited
3	Borderline	Prohibited	Prohibited	Prohibited	Prohibited
4	Prohibited	Prohibited	Prohibited	Prohibited	Prohibited
5	Prohibited	Prohibited	Prohibited	Prohibited	Prohibited

Borderline	Acceptability subject to no further deterioration in the record.
Prohibited	Not acceptable for employment.

Basic Vehicle Operation Guidelines

- Always use seat belts for drivers and all passengers.
- Never leave a person served unattended in a vehicle.
- Always lock the vehicle
- Avoid driving in dangerous conditions, such as inclement weather and when drowsy.
- Use child-lock when appropriate.

- Report all ticket violations while driving on Center business to your supervisor immediately.
- Report a revoked or suspended driver's license to your supervisor immediately.
- No alcohol or narcotics are allowed in a vehicle while on Center business.

Defensive Driving Guidelines

- Obey all traffic laws.
- Drive defensively, anticipating what other drivers might do.
- Always maintain a safe following distance, keeping a two second interval between your vehicle and the vehicle immediately ahead.
- Yield the right of way at all traffic signals and signs. Pedestrians and bicycles in the roadway always have the right of way.
- Honor posted speed limits knowing that a slower rate of speed may be required due to traffic or weather conditions.
- Use turning signals.
- When stopping behind another vehicle, leave enough space so you can see the rear wheels of the car in front.
- Avoid backing when possible.
- Check behind your vehicle before backing and back to the driver's side. Do not back around a corner or into an area of no visibility.
- Aggressive driving is prohibited.

Accident Procedures

- Call for medical aid, if necessary.
- All accidents, regardless of severity, must be reported to the police immediately.
- Report the accident to your supervisor immediately.
- Do not discuss the accident with anyone at the scene except the police and emergency personnel and do not argue with anyone.
- Drug testing is required immediately post-accident, regardless of personal injury.
- In case of accident, the employee's insurance is primary.

Cell Phone Usage

- Use of cell phones, iPads, tablets, netbooks, and similar electronic devices while driving is prohibited.
- Supervisors may use hands-free equipment to make or answer calls while driving without violating this policy. However, safety must always be the first priority. The call must be brief. Additionally, if weather, traffic, or other conditions warrant, you must either end the conversation or pull over and safely park your vehicle before resuming the call.
- Texting is allowed only when the vehicle is safely parked.
- GPS systems must be voice-activated and must not require the driver to look away from the road to follow instructions.

Drivers are required to know and obey all traffic rules and laws, regardless of whether those rules and laws were expressly mentioned in this policy or not. Failure to do so could result in disciplinary action, up to and including termination, at the sole discretion of The Gregory Kistler Treatment Center.

XII. EMPLOYEE FILES

A personnel file is maintained for each employee and will contain, at a minimum, the following documents:

- job application

- reference checks
- drug screens, including post motor vehicle accident
- adult and child registry checks and criminal background record
- waiver and DDS acknowledgements
- DDS employment determination letter
- TB tests (if applicable)
- training documentation
- credential documents and current licenses/certification
- hepatitis B vaccination or refusal

Personnel files are stored in Laserfiche and/or the CES waiver software program. To respect each employee's privacy, permission to access is restricted electronically. The Executive Director, Department Director, and Human Resource personnel may have access to personnel files for the purpose of updating and maintaining the records. All others requiring access will be provided with temporary access on a need-to-know basis only and will be required to document their name, date, and reason for access in the employee's file.
Employees may view his or her personnel file during normal business hours by contacting management.

The file must be viewed in the presence of management and employees may not alter or remove any document from his or her personnel file. Five pages will be printed at no charge. Additional pages may be printed at twenty-five cents per page.

When a person served resides in an alternate living home, all individuals over the age of 18 living in the home are required to have a background check. A closed file within the employee's file will contain the results of these background checks.

XIII. COMMUNITY EMPLOYMENT SERVICES WAIVER STAFF TRAINING

CPR/First Aid training is required for Direct Care Staff and Waiver Managers prior to providing supportive living services. Any supportive living services provided prior to receiving CPR/First Aid certification can only be performed in a training role.

Orientation Training

Prior to beginning service delivery, direct care staff will receive the amount of individualized, person served-specific training that is necessary to be able to effectively and safely provide direct care services based on the Person-Centered Service Plan (PCSP) and needs of each person served. Training will include, but is not limited to:

Back Safety
Blood Borne Pathogens
Fraud, Waste, & Abuse
HIPAA
Drug Policy & Screenings
Health, Safety, & Welfare Practices
Privacy Policy
Consumer Directed Care Act
Guardianship
Beneficiary Financial Safeguards
Community Integration Training

Emergency & Evacuation Procedures
Incident Reporting, DDS Grievance Procedure
Maltreatment Reporting
State Mandated Report Requirements & Policies/Procedures
Person's Served Rights and Responsibilities
Cultural Competency
Behavioral Management Training - trauma care, verbal intervention, de-escalation techniques (person served specifics prior to care if on a behavioral plan)
Restraints & Seclusion
Trauma-informed care
Person Served - specific training prior to care should include:
Treatment Plan
Diagnosis and Medical Needs
Medication Management Plan
Nurse Practice Act

Training is required each time a PCSP is updated, amended, or renewed.

Continued Training

Direct care staff will receive annual training that covers Orientation Training topics and the following:

Personnel Requirements (Job Description)
First Aid/CPR certification, Adult/Child Maltreatment & Criminal Background checks, Driver's License, Auto Insurance, Auto Registration, Driving Record, Staff Meetings, Behavior training (TBM), Medication Management Training

Health and safety practices
First Aid/CPR-renewed every 2 years.
Infection Control Plan
Blood Borne Pathogens

Additional training may be given by the Waiver Director, Waiver Nurse, or Executive Director on a case-by-case basis, depending on the needs of the staff.
Documentation evidencing all training will be maintained in the personnel file of all direct care staff.

XIV. INCLEMENT WEATHER AND EMERGENCY CLOSING

Community Based Hourly Staff – Some employees may be required to work during inclement weather to meet the needs of those we serve. In these situations, coordination will occur between the administrative staff and the affected employees. Employees will be paid for the number of hours actually worked.

Center-Based Employees – When the Center closes early or is closed due to inclement weather, employees will receive regular compensation for the day. The center follows the school closing announcements to ensure safety is set in that area.

This policy applies to disasters and other unforeseen situations.

XV. EMPLOYEE BENEFITS

Center-Based Employees

All full-time (40+ hours per week) center-based employees will now accrue 112 PTO hours annually for continuous employment of years 1-10 and 152 PTO hours annually for continuous employment of years 11+, the PTO will be accrued by pay periods at an accrued rate as listed below. Employees begin accruing leave on their first day of employment, however they will be eligible to request PTO after their first 30 days of employment.

Continuous Employment, Years 1-10	4.307 hours per pay period
Continuous Employment, Years 11 +	5.846 hours per pay period

All center-based employees will receive 11 paid holidays per year as listed below, the office will be closed on these days:

New Year's Day
Memorial Day
July 4th, Independence Day
Labor Day
Personal Day
Thanksgiving
Day After Thanksgiving
Christmas Eve
Christmas Day
2 days during Christmas Break

Accrued leave: End of year:
An employee can:

- Carry over a maximum of 40 hours of PTO
  - Carry over is automatically scheduled

  OR
- Cash out up to a maximum of 40 hours of PTO
  - The employee who chooses to cash out hours, must submit the PTO Cash Out Request Form.

Community-Based Employees

Includes employees who are assigned to the following job classifications:

- Direct Care Specialist
- Lead & Line Therapists

All full-time (40+ hours per week, but no greater than 60 hours per week) community-based employees will now accrue 112 PTO hours annually for continuous employment of years 1-10 and 152 PTO hours annually for continuous employment of years 11+, the PTO will be accrued by pay periods at an accrued rate as listed below. Employees begin accruing leave on their first day of employment, however they will be eligible to request PTO after their first 30 days of employment.

Continuous Employment, Years 1-10	4.307 hours per pay period
Continuous Employment, Years 11 +	5.846 hours per pay period

Some employees are required to work on holidays to meet the needs of those we serve or to maintain business operations. In these situations, the employee will be paid time and a half for the time worked on a holiday. Holiday pay will only apply to those on the schedule

Holidays include:

New Year's Day	Thanksgiving
Memorial Day	Day after Thanksgiving
Independence Day	Christmas Eve
Labor Day	Christmas Day

Accrued leave: End of year:

An employee can:

- Carry over a maximum of 40 hours of PTO
  - Carry over is automatically scheduled

OR

- Cash out up to a maximum of 40 hours of PTO
  - The employee who chooses to cash out hours, must notify HR via leave@kistlercenter.org email.

Health Insurance: A group health insurance policy is available to employees working 30 hours each week or 130 hours per month. The eligibility period is the 1st of the month following 30 days of employment. The employer will make a defined contribution to the premium as determined annually.

Employees must work the required number of hours (30 hours) scheduled to maintain coverage.

Supplemental Policies: Other insurance products, such as but not limited to, dental, vision, critical illness, life, long term disability, and short-term disability are available. The employee pays 100% of the premium for these products.
Employees must work the required number of hours scheduled (30 hours) to maintain coverage.

Cafeteria Plan: A cafeteria plan, authorized by Section 125 of the Internal Revenue Code, is available for the payroll deduction of certain fringe benefits.

Retirement Plan: Employees are eligible to participate and defer in the employer sponsored 403 (b) retirement plan upon hire. Employees are eligible for employer match after 6 months of continuous employment. Employer will match employee contributions up to 2.5% of earnings.

Years of Vesting Service	Vested Interest
Less than 1	0%
1, but less than 2	25%
2, but less than 3	50%
3, but less than 4	75%
4 or more	100%

All employees are covered by Worker's Compensation and professional liability insurance.

Federally designated amount is paid by the Center toward employee's Social Security.

Full-Time Employee: As it relates to Kistler Center benefits, a **full-time employee** is one who is designated as *full-time* in their personnel record and who works at least or more than 40 hours per week.

Part-Time Employee: As it relates to Kistler Center PTO and sick leave benefits, a **part-time employee** is one who is designated *part-time* in their personnel record and who works less than 40 hours per week.

Sick Leave:

Centered-Based Employees

All full-time (40+ hours per week) center-based employees will now accrue 80 hours of sick leave annually, the sick leave will be accrued by pay periods at an accrual rate as listed below. A maximum of 240 hours can be maintained in an employee's sick leave bank. If sick leave has been utilized to a 0 hr. balance, they must then use their PTO hours to cover their leave. Physician verification of illness or accident may be required

Continuous Employment, Years 1-10	3.076 hours per pay period

Applying for Leave: An employee in need of a sick or PTO day must complete a *Time Off Request Form* and turn into the Executive Director or Waiver Director for approval. This form must be completed at least 48 hours prior to the absence. If the absence is unplanned, you must notify the Executive Director, call the center, and complete a Time Off Request Form upon return to work.

Community-Based Employees

All full-time (40+ hours per week) community-based employees will now accrue 80 hours of sick leave annually. A maximum of 240 hours can be maintained in an employee's sick leave bank. If sick leave has been utilized to a 0 hr. balance, they must then use their PTO hours to cover their leave. Physician verification of illness or accident may be required.

Applying for PTO Leave: A full-time employee must complete the *Leave Request Form* and email the form leave@kistlercenter.org. Send this email to the Waiver HR Manager and Waiver Scheduling Specialist at least two weeks in advance from the absence for approval. The time limit allows for the Scheduling Specialist to find a replacement to cover the shift.

Applying for Sick Leave: Employees who are sick must notify the Waiver Scheduling Specialist and CCS immediately. If after hours, the on-call staff must be notified. This will help ensure the shift is covered.

Staff members using more than 3 days of sick time consecutively will require a doctor note to be given to Administration and/or Human resources. On the fourth day of the absence, Human Resources will discuss FMLA policy with staff.

Bereavement Leave: When a full-time employee is absent from work because of a death in the immediate family, the employee will be compensated for loss in pay for up to ~~3~~ 5 consecutive scheduled workdays. The immediate family includes spouse, children, stepchildren (that live in the home) mother, father, siblings, in-laws, grandparents, aunts, uncles, nieces, nephews, and cousins. Bereavement leave is available to full-time employees after 1 month of continuous employment.

Family Medical Leave Act: This policy provides employees with a general description of their FMLA rights and obligations. Any conflict between this policy and the FMLA is resolved in favor of the FMLA.

The Kistler Center recognizes that situations can arise that require an employee to be absent for serious illness and other family obligations. In compliance with all provisions of the Family and Medical Leave Act (FMLA), the following types of leave are available to eligible employees:

FMLA Eligibility

To be eligible for an FMLA leave, an employee must have worked for The Gregory Kistler Treatment Center, or one of its wholly owned subsidiaries, for a total of at least 12 months, have worked at least 1,250 hours in the 12 months preceding the leave, and work at a site with at least 50 employees within 75 miles.

If employees are at a location that has fewer than 50 employees in a 75-mile radius, the employees are not eligible for leave under FMLA. However, employees will be eligible for FMLA under the Kistler Center's policy. This leave under the Kistler Center's policy will be administered under the same provisions that are covered under FMLA with the exception that leave may be granted based on the operational needs of the specific Kistler Center location involved.

An eligible employee is entitled to take up to 12 weeks of FMLA leave during a 12-month period for basic leave and up to 26 weeks of FMLA leave during a 12-month period for military family leave.

The 12-month period is defined as a rolling 12-month period measured backward from the date an employee uses any FMLA leave.

Basic Leave

- Incapacity due to pregnancy, prenatal medical care or childbirth
- To care for the employee's child after birth, or placement for adoption, or foster care
- To care for the employee's spouse, child (under 18, unless special circumstances exist), or parent with a serious health condition
- A serious health condition of the employee that makes the employee unable to perform the functions of his or her job

Military Family Leave

- A covered family member's active duty or call to active-duty status in the National Guard or Reserves in support of a contingency operation, and
- Caring for an injured or ill covered service member

FMLA-E request form must be used to submit a written request for FMLA leave. The completed form must be submitted to the Human Resources Manager. If an employee is physically unable to complete form FMLA-E, a responsible family member or Kistler Center Department Director or Executive Director may complete and submit the form on behalf of the employee.

Employees must provide sufficient information for the Kistler Center to determine if the leave may qualify for FMLA protection and the anticipated timing and duration of the leave. Sufficient information may include that the employee is unable to perform the essential job functions, the family member is unable to perform daily activities, the need for hospitalization or continuing treatment by a health care provider, or circumstances supporting the need for military family leave.

Employees must also inform the Kistler Center if the requested leave is for a reason for which FMLA leave was previously taken or certified.

Employees requesting leave will be informed whether or not they are eligible for leave under FMLA. Notification of eligibility and rights and responsibilities will normally be provided using form WH-381. If an employee is eligible, the Kistler Center will specify any additional information required. A reason will be provided when the employee is not eligible.

Certification and Recertification

Even though an employee may meet eligibility requirements for taking FMLA leave and have FMLA leave available in the applicable 12-month period, it still must be determined if the planned absence qualifies as FMLA leave. The required certification to make this determination should be covered in one of the following circumstances:

- An employee seeking FMLA leave due to the employee's serious health condition must submit a medical certification issued by the employee's health care provider, form WH-380-E.
- An employee seeking FMLA leave to care for a covered family member with a serious health condition must submit a medical certification issued by the health care provider of the covered family member, form WH-380-F.
- An employee seeking FMLA leave due to a qualifying exigency must submit a certification of the qualifying exigency for military family leave, form WH-384.
- An employee seeking FMLA leave due to a serious injury or illness of a covered service member must submit a certification providing sufficient facts to support the request for leave, form WH-385.

Failure to provide complete, timely, and sufficient medical certification for the employee's own serious health condition, to support a request for an FMLA leave to care for a covered family member with a serious health condition, and/or to support a request for an FMLA leave to care for a covered service member may result in denial of the leave or the leave not being designated as FMLA leave. If the leave is not designated as FMLA, an employee is not entitled to FMLA benefits, including continuation of health care benefits. Employees have 15 calendar days following receipt of the Notice of Eligibility, form WH-381, to return the form to the Department Director or Executive Director.

Failure to provide all requested information to support a request for FMLA leave due to a qualifying exigency may result in denial of the request for FMLA leave. Additional information about this type of leave is provided on form WH-385.

Periodic reports and recertification are required regarding the conditions that prompted the leave to be taken, the employee's status, and the employee's intention to return to work. The appropriate frequency of these required reports and recertifications will be determined for the leave situation. Failure to provide these periodic reports and recertifications may result in suspension of the approved leave or disciplinary action up to and including discharge.

Use of Leave

Employees are not required to use FMLA leave entitlement in one block. Leave can be taken intermittently or on a reduced schedule when medically necessary. Employees must make reasonable efforts to schedule leave for planned medical treatments so as not to unduly disrupt Kistler Center operations. Leave due to qualifying requirements may also be taken on an intermittent basis.

Employees are required to use all paid time off (CTO and sick leave) available to them during any leave under this policy.

If a company-observed holiday falls in a week in which an employee is on FMLA leave for the full week, the holiday will count as a day of FMLA leave. If the employee works part of the week in which a holiday falls, the day will not count as a day of FMLA leave.

If a company-observed holiday occurs during the paid portion of an employee's leave, an eligible employee will be paid for the holiday. If a company-observed holiday falls during the unpaid portion of a leave, the employee will not be paid for the holiday.

Ordinarily, no combination of family leave and medical leave can exceed the 12-week maximum limit. Consideration may be given to an extension. However, an extension beyond the initial 12 weeks during a 12-month period will not guarantee a return to the same or equivalent position in which previously employed.

Designation of Leave

Any leave covered under FMLA will be designated as FMLA leave. Form WH-382 will normally be used to notify employees whether the leave is designated as FMLA leave and the amount of leave that will be counted against the employee's FMLA leave entitlement.

In order to properly designate leave time, the Kistler Center may exercise its right to authenticate that a certification document came from the health care provider indicated. With the employee's permission, the Kistler Center may contact the health care provider for clarification of information on the form, (ie: unable to read handwriting and need to know what the form states). A second and third opinion medical certification may be obtained at the Kistler Center's expense.

If the employee is considered a "key employee" as defined by FMLA, restoration to employment may be denied following FMLA leave on the grounds that such restoration will cause substantial and grievous economic injury to the Kistler Center.

Activities While on FMLA Leave

While on FMLA leave, no employee may engage in any activity, including other employment or work, that violates the employee's medical restrictions. If an employee chooses to work for someone else in a capacity that does not violate his/her medical restrictions, CTO and sick leave will not be paid.

Definitions

12 Month Period – a "rolling" 12-month period measured backward from the date an employee uses any FMLA leave. For the use of the 26 weeks of FMLA leave to care for an injured or ill covered service member, the 12-month period begins on the first day the employee takes FMLA leave to care for a covered service member and ends 12 months after that date.

Serious Health Condition – an illness, injury, impairment, or physical or mental condition that involves either an overnight stay in a medical care facility, or continuing treatment by a health care provider for a condition that either prevents the employee from performing the functions of the employee's job or prevents the qualified family member from participating in school or other daily activities.

A serious health condition includes treatment by a health care provider and:

- A period of incapacity due to pregnancy or prenatal care
- A period of incapacity due to a chronic condition which
    a. Requires periodic visits for treatment by a health care provider
    b. Continues over an extended period, and
    c. May cause an episode rather than a continuing period of incapacity
- A period of incapacity due to a permanent or long-term condition
- Conditions requiring multiple treatments by a health care provider, for any period of absence

Absences for pregnancy and chronic serious health conditions qualify even though an employee does not receive treatment from a health care provider during the absence, and even if the absence does not last more than three consecutive, full calendar days.

Continuing Treatment – a serious health condition involving continuing treatment by a health care provider means a period of incapacity of more than three (3) full consecutive calendar days combined with:

- At least two treatments, in-person, by a health care provider within 30 days of the first day of incapacity or
- Treatment, in-person, by a health care provider at least once results in a regimen of continuing treatment under the supervision of the health care provider.
- The first, or only, in-person treatment visit must take place within seven (7) days of the first day of incapacity. "Incapacity" means inability to work, attend school, or perform other regular daily activities due to the serious health condition, or treatment, or recovery from the serious health condition.

Military Family Leave – eligible employees with a spouse, son, daughter, or parent on active duty or called to active-duty status in the National Guard or Reserves in support of a contingency operation may use their 12 weeks leave entitlement to address certain qualifying exigencies.

Qualifying Exigencies – may include attending certain military events, arranging for alternative childcare, addressing certain financial and legal arrangements, attending certain counseling sessions, attending post-deployment reintegration briefing, and special circumstances (if both the Kistler Center and the employee agree to the leave).

Covered Service Member – The FMLA permits eligible employees to take up to 26 weeks of leave to care for a covered service member during a single 12-month period. A covered service member is a current member of the Armed Forces, including a member of the National Guard or Reserves, who has a serious injury or illness incurred in the line of duty while on active duty that may render the service member medically unfit to perform his or her duties. Leave to care for an injured or ill service member, when combined with other FMLA-qualifying leave, may not exceed 26 weeks in a single 12-month period.

Benefits Continuation and Other Protection

If the employee's leave qualifies as FMLA leave and the employee is covered by the Kistler Center's health benefit plans, including medical insurance, the Kistler Center will maintain the employee's coverage as if the employee had continued to work, provided the employee makes appropriate premium payments. The employee will be responsible for making arrangement to continue to pay his/her share of the premium payment on all benefits that are continued during the leave. If payment is more than 20 days late, coverage may be dropped. Any past due payments will be collected from the employee.

All health benefit plan premiums paid for an employee by the Kistler Center during a leave must be repaid by the employee if the employee fails to return from leave, except if the reason is the continuation, recurrence, or onset of a serious health condition, or because of circumstance beyond the employee's control. Failure to return for other than these conditions is considered a qualifying event under COBRA, ie: continuation of specified health related benefits.

Return to Work

Most employees returning from FMLA leave will be restored to their original or equivalent position with equivalent pay, benefits, and other employment terms.

If the circumstances of an employee's leave change and he/she is able to return to work earlier than the date originally indicated, the employee is required to notify his/her supervisor at least two (2) workdays prior to the date he/she intends to report for work. If the employee's supervisor is unavailable, notification should be made to the next level of supervision.
When an employee takes leave because of his/her own health condition, he/she is required to provide fitness and ability to return to work statement from a licensed health care provider before he/she resumes his/her job duties. If such certification is not timely, the employee's return to work may be delayed until certification is provided. A list of the essential functions of the employee's position should be attached to the Designation Notice, form WH-382, provided to the employee. If it is not, the employee should request a copy from his/her supervisor to provide to the health care provider when requesting the fitness-for-duty certification. The fitness-for-duty certification must address the employee's ability to perform the essential functions listed. The Kistler Center reserves the right to determine which health care provider is appropriate given the circumstances. If an employee fails to, or cannot provide a fitness-for-duty certification, employment may be terminated.

For employees medically certified with permanent or indefinite serious health conditions the employee may be required to present a fitness-for-duty certification in conjunction with an FMLA absence which occurs more than six (6) months after the previous medical certification.

If an employee fails to report to work promptly at the end of the approved leave period, the Kistler Center will assume that the employee has resigned.

Other Rights and Obligations
The FMLA makes it unlawful and the Kistler Center will not:

- Interfere with, restrain, or deny the exercise of any right provided under the FMLA.
- Retaliate, discharge, or discriminate against any person for opposing any practice made unlawful by FMLA or for involvement in any proceeding under or relating to FMLA.

The Kistler Center will display the current poster for FMLA notices.

XVI. COMPENSATION

The full-time work week is 40 or more hours per week. Overtime must be pre-authorized by the Department Director or Executive Director. Overtime for nonexempt employees will be computed at time-and-a-half for hours worked over 40 hours per week. Exempt employees are not eligible for overtime pay.

Employees must accurately record all hours worked to ensure they are properly paid as required by law. It is your responsibility to inform the Center if you work overtime. The Center relies upon accurate reporting of overtime hours in paying its employees. If you fail to obtain pre-authorization for overtime and/or fail to accurately report overtime worked, it could result in disciplinary action up to and including discharge.

Some positions at the Center may involve taking after-hours phone calls for Center business. It is your responsibility to accurately report each minute of work accomplished after hours on phone calls regarding Center business. If you fail to accurately report your after-hours phone calls, it could result in disciplinary action up to and including discharge.

The work week begins at 12:01 a.m. Saturday and continues through 12:00 midnight Friday for purposes of calculating payroll and overtime. Payday will be bi-weekly (every other week) on Friday.

CES Waiver employees are required to complete EVV clock in on the waiver software program. The EVV clock in should occur at the actual arrival and departure time at the persons served home. All Center-based and Autism Waiver employees are required to complete a time sheet. The time sheets must be turned in on the last working day of the pay period on the time sheet.

Payroll can only be processed upon receipt of a signed and approved time sheet. Failure to turn in a signed time sheet may result in a delay in issuing a paycheck until the next pay period.

Any questions concerning the accuracy of payroll should be discussed with the payroll clerk. Nominal errors on payroll checks will be corrected on the next scheduled payday. Payroll corrections must be submitted by the Department Director or Executive Director for approval.

XVII. ANNUAL EMPLOYEE EVALUATION:

Annual Employee Evaluation Center-Based Employees

The employee review is an ongoing process that results in a written review and is based on the performance and goals for the upcoming year and job-related conduct. Although typically performed annually, employee evaluation may be conducted at any time. The primary objectives in the employee recognition process are:

- To provide feedback on an employee's job performance
- To set goals for the next year in areas that an employee may improve.
- Allow employee feedback regarding job duties and responsibilities.
- To review the appropriateness of the job description.

The supervisor completes the employee recognition report with a higher level of management prior to final discussion with the employee. Employees are given the opportunity to provide their perceptions of their performance by making notes in the provided area on the employee evaluation form.

A 30–90-day performance improvement plan (PIP) may be developed for any employee who receives an oral or written disciplinary action during the year. The supervisor may meet with the employee during the 30–90-day period and will meet with the employee at the conclusion of the PIP period to provide the employee with an evaluation of the employee's performance for the PIP period. If currently, the employee has demonstrated satisfactory improvement, no further action is necessary.

An employee may be subject to demotion or termination of employment for failure to make satisfactory improvement. It is not required that the employee be demoted prior to termination of employment. A PIP may be provided at any time when unsatisfactory performance needs to be addressed. A PIP does not preclude an employee from being terminated from employment, with or without cause.

Autism Waiver & Community Employment Supports Waiver

While a written performance evaluation is not required, employee performance will be monitored and addressed on an on-going basis with the goal of commending an employee on their job performance and improving job performance by providing constructive criticism.

A Disciplinary/Counseling Report may be utilized as a means to communicate a need for improvement. A Performance Improvement Plan (PIP) may be developed to address any area,

providing specific information as to what needs to be improved and what action will result if the employee fails to show satisfactory improvement.

The supervisor may meet with the employee during the 30–90-day period and will meet with the employee at the conclusion of the PIP period to provide the employee with an evaluation of the employee's performance for the PIP period. If currently, the employee has demonstrated satisfactory improvement, no further action is necessary.

An employee may be subject to demotion or termination of employment for failure to make satisfactory improvement. It is not required that the employee be demoted prior to termination of employment. A PIP may be provided at any time when unsatisfactory performance needs to be addressed. A PIP does not preclude an employee from being terminated from employment, with or without cause.

Job Description

Job descriptions defining the duties, responsibilities, and qualifications of all positions will be maintained. The skills and characteristics needed to achieve the required tasks, the supervisor, and positions to be supervised will be identified. In addition, job descriptions will be reviewed annually and updated as needed.

XVIII. INFORMATION SECURITY

Computer information systems and networks are an integral part of business at The Gregory Kistler Center. The Center has made a substantial investment in financial resources to create these systems.

The following policies and directives have been established in order to:

- Protect this investment.
- Safeguard the information contained within these systems.
- Reduce business and legal risk.
- Protect the reputation of the Center.

Violations will result in disciplinary action up to and including termination.

POLICY

Access to email and the Internet is provided to employees for the benefit of the Center. With it, employees can access our web-based application services, electronic filing, research information critical to our services, and communicate through email. The Internet also contains considerable risk and inappropriate material. To ensure that all employees are responsible and productive email and Internet users and to protect the Center's interests, the following guidelines have been established for using email and the Internet.

The use of email and the internet is considered part of the Center's business communications and are not to be considered private or personal to any individual employee. The Center reserves and will exercise the right to monitor both amount and content and to audit, intercept, access, and disclose all matters on the Center's media systems and services at any time, with or without notice. This includes emails on personal accounts accessed through Center resources, as use of personal email through Center resources is not private. The Center's failure to monitor situations does not waive the Center's right to monitor.

Acceptable Use

Employees using email and the Internet represent the Center and are responsible for ensuring that email and the Internet are used in an effective, ethical, and lawful manner. Examples of acceptable use are:

- Using the Internet to conduct Center business.
- Using email to conduct Center business.
- Limited use of email and the internet for personal use provided it does not preempt business use.
- Although occasional personal use of email and the internet is permitted, the principal purpose of email and the internet is for Center business.

Unacceptable Use

Employees must not use email and the Internet for purposes that are illegal, unethical, harmful to the Center, or nonproductive. Examples of unacceptable use are:

- Sending or forwarding emails and documents from Center resources to personal email accounts or downloading to an unregistered device.
- Using personal email for correspondence related to Center business.
- Sending or forwarding chain email messages and messages containing instructions to forward the message to others.
- Indiscriminately broadcasting email or sending the same message to multiple recipients or distribution lists unrelated to work.
- Personal use of social media sites such as, but not limited to, Facebook and MySpace and blogs and microblogs such as Twitter and YouTube.
- Allowing persons served or their family members' access to and use of Center computers and devices.
- Allowing relatives or friends access to and use of Center computers and devices.
- Inserting attachments to email messages unrelated to work.
- Opening attachments to email messages unrelated to work.
- Subscribing to mailing lists and reminders unrelated to work.
- Using excessive time for personal email and web browsing.
- Including gossip or other personal information about yourself or others in an email.
- Instant messaging.
- Replying to spam – just delete the message.
- Transmitting or accessing any content that is offensive, harassing, or fraudulent.
- Streaming transmissions, audio or video, unrelated to business.
- Conducting a personal business during work hours.
- Intentionally using Internet facilities to disable, impair, or overload the performance of any computer system or network, or to circumvent any system intended to protect the privacy or security of another user.
- Cracking in all forms is expressly forbidden.

Employee Responsibilities

An employee who uses the internet or email will:

- Ensure that communications are for professional reasons and that they do not interfere with their productivity or the productivity of others.

- Be responsible for the content of all text, audio, and images placed or sent over the Internet.
- Attach his or her name and privacy disclosure to all outbound email.
- Know and abide by all applicable Center policies concerning security and confidentiality issues.
- Avoid transmission of patient data and other confidential information outside of our internal network unless encrypted.
- Avoid forwarding Center related emails to a personal email account.
- Avoid sending Center related documents to a personal email account.
- Delete and report to the supervisor any emails and documents sent accidentally or not to a personal email account.
- Register any devices used to store, send, or receive any information about the Center such as, but not limited to, USB drives, laptops, and smart phones.
- Immediately report any device lost/stolen with any information related to the Center.

All communications, including text and images, can be disclosed to law enforcement or other third parties without prior consent of the sender or receiver. This means, don't put anything into your email messages that you wouldn't want to see on the front page of the newspaper or be required to explain in a court of law.

Computer Viruses

Computer viruses are programs designed to make unauthorized changes to programs and data. Viruses can cause destruction of Center resources. It is important to know that:

- Computer viruses are much easier to prevent than cure.
- Defenses against computer viruses include protection against unauthorized access to computer systems, using only trusted sources for data and programs, and maintaining anti-virus software.
- The Center will install appropriate anti-virus software on all computers.

Employee Responsibilities

- Not knowingly introduce a computer virus into Center computers.
- Not load CDs, USBs, or other media of unknown origin or unrelated to work.
- Not tamper with the ant-virus software.
- Never open email attachments that end with ".exe", ".bat", ".bas", or other known executable identifiers.
- Any employee who suspects that their workstation has been infected by a virus will immediately power off the workstation and notify Center management. This is one of the very few times that a normal shut down is discouraged.
- Screen savers and desktop backgrounds from the Microsoft website only may be downloaded for use.
- Only download files that are required to perform your job functions.
- If unsure about a file, a suspicious email, or notice, ask.

ACCESS CODES AND PASSWORDS

The confidentiality and integrity of data stored on computer systems, laptops, and cell phones, whether Center-owned or personal (if used for Center business), must be protected by access controls to ensure that only authorized employees have access. This access will be restricted to only those capabilities that are appropriate to each employee's job duties.

Center Responsibilities

- Center management will be responsible for the administration of access controls to all Center computer systems.
- Management will process user adds, deletes, and changes.
- Management will maintain a list of administrative access codes and passwords and keep this list in a secure area.

Employee Responsibilities

- Use their personal username and password.
- Be responsible for all computer transactions that are made with their user ID and password.
- Not disclose passwords to others. Report password breach to Center management so the password can be changed immediately.
- Usernames and passwords must not be shared, except as designated by Center management.
- Ensure that a password is used to access personal cell phones and laptops, if used for Center business.

CELL PHONE USAGE

All personal cell phones must be silent or vibrate during working hours, with the exception of administrative staff and CES waiver CCSs.

Although occasional personal cell phone use is permitted, calls or text messaging must be brief and not preempt Center business.

Personal use of social media sites such as, but not limited to, Facebook, Twitter, Instagram, X (formerly known as twitter) and YouTube during working hours, whether from Center resources or personal cell phones, is not acceptable. All employees of the Center cannot post non-family person served on any platform of personal social media.

All voicemail, email, and text messages composed, sent, or received on a cell phone provided by the Center are not considered private or personal to any individual employee.
The Center reserves and will exercise the right to monitor both amount and content and to review, audit, intercept, access, and disclose all matters on cell phones provided by the Center at any time, with or without notice.

Use of cell phones, iPads, tablets, netbooks, and similar electronic devices while driving is prohibited. Supervisors may use hands-free equipment to make or answer calls while driving without violating this policy. However, safety must always be the first priority. The call must be brief.

Additionally, if weather, traffic, or other conditions warrant, you must either end the conversation or pull over and safely park your vehicle before resuming the call. Texting is allowed only when the vehicle is safely parked.

MAIL POLICY

Mail addressed to an employee at The Gregory Kistler Treatment Center is expected to be business related and will be opened unless it is marked “confidential” or “personal”. Employees are responsible for ensuring that personal mail is sent to a personal address.

ELECTRONIC MEDICAL RECORDS

Electronic medical records (EMR) are to be accessed via a secure wifi network only. Do not access EMR on an unsecured wifi network whether it is from a private location, such as your home, or a public location, such as a restaurant.

XIX. DISCIPLINE

It is the policy of the Center to utilize progressive discipline when the Center deems it appropriate. It is intended that discipline be administered fairly, without prejudice, and only for cause. Disciplinary actions may be of three levels: verbal and written warnings, probation, and termination.

The frequency and/or severity of misconduct determine which level of disciplinary action may be utilized. Progressive discipline may not be utilized for all offenses. The Center reserves the right to depart from this policy of progressive discipline and immediately discharge any employee in its sole discretion. An employee may appeal any disciplinary action utilizing the Conflict Resolution procedure.

All employees are employed at will, and both the employee and the Center may terminate the employment relationship at any time, with or without cause, without following any specific procedure.
The Center reserves the right to hire, promote, demote, discharge, or terminate employment and compensation at any time, with or without cause, and with or without advance notice.

Warnings – A supervisor may address disciplinary issues with either verbal or written warnings prior to taking further disciplinary action.
Documentation of written warnings will be signed by the supervisor and the employee and stored in the employee's personnel file.

Probation – An employee may be placed on probation with the approval of the Executive Director or designee. The supervisor and Department Director are responsible for explaining the conditions of probation, monitoring, and evaluating the performance of the employee on probation. The Department Director or supervisor, when there is not a Department Director, with approval from the Executive Director or designer, may extend the probationary period. An employee may be terminated at any time during the probation if the employee violates the terms of probation.

Termination – The Department Director or supervisor, when there is not a Department Director, may terminate employees only with the approval of the Executive Director.
All action taken by the Department Director or supervisor will be in writing and stored in the employee's personnel file.

XX. CONFLICT RESOLUTION

The Gregory Kistler Center strives to provide an atmosphere conducive to resolving any conflicts that may arise. There are three supervisory scenarios that may exist with procedures to follow for each circumstance. If there is a Department Director, follow steps 1, 2, and 3a. If there is not a Department Director, follow steps 1 and 3a. In those circumstances, where the Executive Director is the immediate supervisor, follow steps 1 and 3b.

Step 1. Discuss the issue with your immediate supervisor.

Step 2. If the situation is not resolved satisfactorily, the employee may contact the Department Director in writing within seven working days, clearly stating the conflict requiring resolution. The Department Director will schedule a meeting with the employees within seven working days to discuss their concerns. If needed, a meeting will be scheduled with all parties involved. The decision of the Department Director will be recorded, and a copy will be provided to all parties involved.

Step 3a. If the situation is not resolved satisfactorily, the employee may contact the Executive Director within seven working days and provide a written statement of the conflict requiring resolution and a written request for a meeting with the Executive Director. The decision of the Executive Director will be recorded, and a copy will be provided to all parties involved. The decision of the Executive Director is final. The Executive Director will inform the Board of Directors of any situations that may indicate the need for future development of formal policies.

Step 3b. If the situation is not resolved satisfactorily, the employee may contact the Executive Director within seven working days and provide a written statement of the conflict requiring resolution and a written request for a meeting with the President of the Board of Directors. The decision of the President of the Board of Directors will be recorded, and a copy will be provided to all parties involved. The decision of the President of the Board of Directors is final. The President of the Board of Directors will inform the Board of Directors of any situations that may indicate the need for future development of formal policies.

XXI. SEXUAL HARASSMENT

All employees are responsible for ensuring that the workplace is free from sexual harassment. Sexual harassment is defined as unwelcome or unwanted behavior of a sexual nature. Sexual harassment occurs when submission to or rejection of this conduct explicitly or implicitly affects employment, unreasonably interferes with an employee's work performance or creates an intimidating, hostile or offensive work environment.

Examples of sexual harassment include, but are not limited to:

- Unwanted jokes, gestures, and comments.
- Touching and any other bodily contact such as scratching or patting a coworker's back, grabbing an employee around the waist, or interfering with an employee's ability to move.
- Repeated requests for dates that are turned down or unwanted flirting.
- Displaying sexually suggestive objects, pictures, posters, or jokes.
- Playing sexually suggestive music.
- Requests for sexual acts or favors.

Any employee who has complaint of sexual harassment at work by anyone, including supervisors, co-workers or visitors, should first clearly inform the harasser that his or her behavior is offensive or unwelcome and request that the behavior stop. If the behavior continues, the employee must immediately bring the matter to the attention of his or her supervisor. The supervisor will conduct an investigation of the complaint. If the situation is not resolved satisfactorily, the Conflict Resolution policy may be utilized. If the investigation reveals that the charges were brought falsely and with malicious intent, the complainant may be subject to disciplinary action, including termination. Retaliation for a complaint of sexual harassment or for cooperating with an investigation of the complaint is prohibited.

XXII. SEXUAL INCIDENTS INVOLVING PERSONS SERVED

Incidents involving inappropriate sexual activity with persons served will be investigated immediately and appropriate action taken to ensure the health and safety of those we serve. Employees must take all action necessary to stop suspected or attempted rape and immediately report such incidents to the department director.

The department director will immediately investigate the sexual incident. The department director will report the incident to the local police, Adult Protective Services or Department of Children and Family Services, and DDS using the appropriate reporting methods. If sexual intercourse or deviate sexual activity with a person, not his or her spouse, who is incapable of consent is suspected, the person served must be taken to the hospital emergency room. The Center employee should recommend rape protocol to the emergency room personnel to determine if intercourse or rape occurred. If the person served refuses emergency treatment, this must be recorded in the progress note and incident report.

The guardian, if applicable, and the family when the person served is a minor, will be notified. If the person served is an adult, he or she may choose for the family not to be informed of the incident.

Note: Arkansas statute 5-14-105, Carnal abuse in the second degree.
A person commits carnal abuse in the second degree if he or she engages in sexual intercourse or deviates sexual activity with a person not his or her spouse who is incapable of consent. Carnal abuse in the second degree is a Class C felony.

XXIII. Workers' Compensation:

The Gregory Kistler Treatment Center strives to assist employees to return to work as soon as possible following a work-related injury or illness. However, this policy is not intended to supersede or modify the procedures applicable to employees eligible for reasonable accommodation or covered under the American with Disabilities Act or leave benefits under the Family and Medical Leave Act. This policy applies only to employees who are receiving workers' compensation benefits. The Gregory Kistler Treatment Center does not allow "light duty" or "transitional work" in Direct Support areas or positions due to safety issues. However, transitional work may be available outside of the Direct Support area for employees on workers' compensation.

Return To Work:
Transitional Work:
Transitional work is defined as temporary, modified work assignments consistent with the treating physician's work restrictions. The employee agrees not to work beyond his/her physical limitations and will immediately bring such an assignment to the attention of the assigned program coordinator. There is no right of refusal if transitional work is provided. Employees will dress in the appropriate attire of the transitional work environment while in the transitional work program.

If the employee's health status changes, it must be reported immediately to the assigned program coordinator. When an employee is released to participate in the transitional work program, he/she does not have the option to substitute paid sick leave because he/she does not personally feel ready to perform transitional work.

If an employee is unable to report for work for personal reasons, he/she must call and report to the assigned program coordinator. All employees will abide by the work and safety rules at the location of their transitional work assignment.

Whenever possible, transitional work will be made available to injured workers to minimize or eliminate time lost from work. The Center cannot guarantee transitional work and is under no obligation to offer or create any specific position for the purposes of offering transitional work. Availability of work may make it necessary to transfer employees from one department to another.

Regular work hours and days off may be changed while in the transitional work program. Work hours will be determined by the assigned program coordinator. The pay rate will be the worker's normal pay rate. Overtime for transitional work must be pre-authorized by the Department Director or Executive Director. If an employee works overtime without prior approval, The Gregory Kistler Treatment Center will pay the employee for the overtime worked. However, the employee may be disciplined for failing to obtain pre-approval to work overtime, up to and including, termination from all employment with the Center.

The Center will not take any retaliatory action against any employee engaged in transitional work. However, workers in transitional work environments are subject to all the rules and policies applicable to that work area and may be disciplined accordingly for violations.

Employees with restrictions that would permanently prevent them from returning to their former position, or an available position, will remain off work and are not eligible for transitional work.

XXIV. WORKPLACE VIOLENCE

The purpose of the Workplace Violence Policy is to support a work environment in which violent or potentially violent situations are effectively addressed with a focus on prevention by increasing employee understanding of the nature of workplace violence and by promoting mutual respect within the workplace.

Workplace violence refers to physical acts of violence or threats to harm a person or property and to abusive behaviors whether verbal, psychological, or physical.

More specifically:

- Verbal abuse can be unwelcome, embarrassing, offensive, threatening, or degrading language.
- Psychological abuse is an act that provokes fear or diminishes a person's dignity or self-esteem.
- Sexual abuse is any unwelcome verbal or physical assault.

Workplace violence includes, but is not limited to:

- Intimidating or bullying others
- Abusive language
- Physical assault
- Threatening behavior, whether electronic, physical, verbal, or written
- Concealing or using a weapon such a firearm or knife
- Sexual, racial, or religious harassment

Zero Tolerance

The Kistler Center has a zero-tolerance policy and will not tolerate violence, threats, harassment, intimidation, and other disruptive behavior, either physical or verbal that occurs in the workplace.

Employee cooperation is needed to implement this policy effectively and to maintain a safe working environment. Do not ignore violence, threatening, intimidating, or other disruptive behavior. If you observe or experience such behavior, report it immediately to your supervisor or a member of management.

The Kistler Center will promptly investigate any:

- Physical or verbal altercation
- Threats of violence
- Other conduct that threatens the health or safety of other employees or the public

The Kistler Center will use discretion and take all reasonable steps to protect the confidentiality of the individual making a report. Employees will be removed immediately from providing care to patients/persons served while the investigation is being conducted. In order to maintain workplace safety and the integrity of its investigation, the Center may suspend employees, either with or without pay, pending investigation.

Anyone whom the Kistler Center determines has engaged in threats of, or actual, violence or other conduct that violates these guidelines will be subject to prompt disciplinary action, up to and including termination of employment.

General Safety Practices

Never hesitate to call the police (911) if you have safety concerns or are confronted with a potentially violent situation. It is better to have called unnecessarily than not to have appropriate personnel available when there is a threatening situation. Never attempt to physically restrain or physically remove a threatening or violent individual by yourself.

Handguns

The Arkansas Code Annotated Section 5-73-326 allows employees to store a handgun within the employee's own vehicle in the employer's parking lot. To qualify as a covered employee under the law, the handgun must be legally possessed and kept for lawful purposes. In addition:

- The handgun must be concealed from sight and stored in a locked private vehicle and stored within a locked personal handgun storage container designed for the safe storage of a handgun when the employee exits their vehicle.
- The employee must retain possession of the key to the personal handgun storage container.
- A handgun may not be stored or transported within a company car.
- When an employee's personal vehicle is being used to transport persons served/patients served by Kistler Center, any handgun within the vehicle must be concealed from sight in a locked personal handgun storage container designed for the safe storage of a handgun.

An employee may not store or transport a handgun in the Kistler Center's parking lot under the following circumstances:

- The employee is the subject of an active or pending employment disciplinary proceeding.
- The employer reasonably believes the employee is in illegal possession of the handgun.
- The employee has not been issued a concealed carry license, or at any time after being issued a license, has been adjudicated mentally incompetent or not guilty in a legal proceeding by reason of mental disease or defect.

- The private motor vehicle is not permitted in the parking lot for reasons unrelated to the employee's transportation, storage, or possession of a handgun.

Discipline

Disciplinary action, up to and including termination, removal from the premises, and possible civil action may result when, among other things:

- An employee displays their weapon in plain sight at the Kistler Center, including within the employee's car while in the Kistler Center's parking lot.
- An employee commits acts or threats of violence.

XXV. WHISTLEBLOWER

If any employee reasonably believes that some policy, practice, or activity of The Gregory Kistler Treatment Center is in violation of law, the Conflict Resolution policy may be followed.

It is the intent of The Gregory Kistler Treatment Center to adhere to all laws and regulations that apply to the organization. The purpose of this policy is to support the organization's goal of legal compliance. The support of all employees is necessary to achieve compliance with various laws and regulations. An employee is protected from retaliation only if the employee brings the alleged unlawful activity, policy, or practice to the attention of The Gregory Kistler Treatment Center and provides the Center with a reasonable opportunity to investigate and correct the alleged unlawful activity. The protection described below is only available to employees that comply with this requirement.

The Gregory Kistler Treatment Center will not retaliate against an employee who in good faith has made a protest or raised a complaint against some practice of the Center, or of another individual or entity with whom the organization has a business relationship, based on a reasonable belief that the practice is in violation of law or a clear mandate of public policy.

The Gregory Kistler Treatment Center will not retaliate against employees who disclose or threaten to disclose to a supervisor or a public body, any activity, policy, or practice of the organization that the employee reasonably believes is in violation of a law, rule, or regulation mandated pursuant to law or a clear mandate of public policy.

XXVI. TERMINATION OF EMPLOYMENT

RESIGNATION:

A 30-day notice of resignation is required for employees classified as leadership employees. A two-week notice of resignation is required for employees to be classified as a center or community- based employee. All resignations must be in writing. Employees may submit their own letter or may complete the Employee Resignation Form. Management reserves the right to pay out the notice rather than allowing the employee to work in situations where job or business needs warrant. Such a decision should not be perceived as reflecting negatively on the employee, given that it may be due to a variety of reasons not known to the individual or other employees.

PTO will be paid at termination of employment except for involuntary termination (other than workforce reduction), quitting without notice, and failing to work out notice (without approval).

Sick leave will not be paid after a resignation notice has been rendered.

All property of the Center must be returned to the supervisor prior to issuing the final paycheck.

All monetary obligations to the Center must be settled prior to issuing the final paycheck.

XXVII. SUBJECT TO CHANGE

Policies are subject to review and change at any time upon approval of the Board of Directors.

Receipt of Policy

My signature below indicates that I have received a copy of the Personnel Policy, that I have reviewed the policy with a supervisor or representative, and that I understand the policy and have been given the opportunity to ask questions regarding the policy. I agree to comply with the Center's Personnel Policy and procedures. I understand that failure to comply with these policies and expectations may result in disciplinary action, up to and including, termination.

_____ _____

Employee Signature Date

_____

Print Name

_____ _____

Supervisor or Representative Signature Date