

# Employer/Member Training Resource



**fa,inc.**

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This resource is for members/employers who hire and are responsible for training their care provider to meet the Managed Care Organization (MCO) Training and Documentation Standards for Supportive Home Care set by Wisconsin’s Department of Health Services Department of Health Services Division of Long Term Care<sup>1</sup>.



**This resource should never replace actual instructions given by a member. Fiscal Assistance, Inc. serves only as a fiscal agent, and is in no way liable to any user or anyone for decisions made or actions taken based on reliance of information contained in this resource.**

Role	Company & Name	Things to Contact About	Phone/Email								
Care Manager		-Care plan -Number of hours available to work per week -Documenting emergencies -Resolving conflict -Training questions/concerns -When you don't know who you should contact									
Fiscal Agent	Fiscal Assistance, Inc.	-Timesheets -Change of address or name -Payroll/Direct deposit -Paperwork -Employment verification -W-2s	General Line: (855) 201-4230 <table border="1"> <tr> <td>CARE WI</td> <td>(608) 819-7752</td> </tr> <tr> <td>My Choice</td> <td>(608) 819-7752</td> </tr> <tr> <td>iCare</td> <td>(608) 819-7734</td> </tr> <tr> <td>CLTS/Children</td> <td>(608) 819-7739</td> </tr> </table>	CARE WI	(608) 819-7752	My Choice	(608) 819-7752	iCare	(608) 819-7734	CLTS/Children	(608) 819-7739
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iCare	(608) 819-7734										
CLTS/Children	(608) 819-7739										
Member/Employer	The employer/member is their own entity	-Scheduling & time-off -Timesheet verification & signatures -Training									
Care provider/Employee	Employees work for the member/employer and are in no way employed by Fiscal Assistance, Inc.										

\*In the interest of consistency, this publication will use the titles "member" and "care provider". Please note in other contexts the member is also referred to as the employer, and the care provider can also be known as the employee

<sup>1</sup> <https://www.dhs.wisconsin.gov/publications/p01602.pdf>  
Cover page clipart provided by <http://www.clipartoo.com/>

# Policies, Procedures, & Expectations

## Self-Determination & Self-Directed Supports Philosophy

Self-determination refers to the individual having control over all aspects of their life, and exercising basic rights such as citizenship, liberty, and the pursuit of happiness. Self-directing homecare includes developing a service plan, selecting and scheduling caregivers.



### How Caregivers Can Promote Self-Determination

- Ask questions and listen to member's preferences and expectations
- Always keep in mind the member decides if services are satisfactory
  - Communicate scheduling changes or requests
  - Respect personal property

### Rights of the Member

A member's rights include (but are not limited to):

- \* Interviewing, hiring, firing, scheduling and training their care providers. Members may designate these tasks to another trusted individual
- \* Consideration, respect, and dignity
- \* Refusing medical care
- \* Being informed of all changes in services and service providers *before* they occur
- \* Personal information kept confidential
- \* Awareness of what information is being written about them or shared with others
- \* Involvement in care and service planning and having preferences understood and accommodated to the furthest extent possible
- \* Support in registering complaints about the agency when services violate member's rights

### Care Provider Roles & Responsibilities

In-home caregivers provide services, as needed related to personal care, household chores, meal preparation, assist in running errands, accompany to appointments, and much more. Carefully review the member's individualized care plan.

## Expectations of Care-Providers

- Follow agreed upon work schedule
- Arrive on time
- Provide safe and high quality services in a thorough and caring manner
- Be professional
- Respect the member's dignity, privacy, property, religion, and culture
- Uphold member confidentiality
- Family members and others (including small children or friends) **may not** be present at the member's home during scheduled work hours without their permission
- Cell phones should not be used without the permission of the member
- Gifts, loans, and money should not be accepted from members. This could be interpreted as theft by other family or concerned parties
- Do not argue, criticize, or swear at or around the member
- Suspected abuse or neglect must be reported
- Verbal, physical, or sexual abuse/misconduct will be reported to legal authorities

*Remember: the member is depending upon you.  
Failing to meet these expectations puts them at risk.*

## Confidentiality

### HIPAA

The Health Insurance Portability and Accountability Act of 1996 lawfully protects the privacy of a person's medical information. In-home care providers have access to a member's private information. Care providers agree that they will not share this information with *family, friends, other members they work for, or any other party outside the care-giving relationship.*

Examples of confidential information are:

- Prescriptions
- Care plan
- Name, address, email, or other contact information
- Financial information



Fiscal Assistance staff and the member's care team are considered parties with which you can discuss member information with the purpose of providing quality services.

### How to Safeguard Information

- ✓ Be aware of what you say, where you say it, and to whom
- ✓ Move to another room when talking about private information
- ✓ Don't leave private information in a voicemail
- ✓ Do not talk about health information
- ✓ Speak with the member about who their care team includes and who you are permitted to share private information

### Reporting Abuse and Neglect

In-home care providers are **legally mandated to report any suspected abuse, neglect or misappropriation (theft).** Never ignore a situation you feel may be unsafe or harmful. As a mandatory reporter, failure to report any suspected abuse, neglect, or misappropriation may result in fines and/or other legal action. Reports are *anonymous*. See the Appendix for your county's contact information to report neglect and/or abuse.

#### **Abuse & Neglect Terminology to Know**

Adult at risk- any adult who has a physical or mental condition that impairs the ability to care for their needs and who has experienced, is experiencing, or is at risk of experiencing abuse, neglect, self-neglect, and/or financial exploitation.

Abuse- includes physical, emotional, and sexual abuse. Treatment without consent and unreasonable confinement or restraint are also considered forms of abuse.

3 Forms of Abuse
<p><u>Physical Abuse</u>-intentional or reckless infliction of physical pain or injury, illness, or any impairment of physical condition.</p> <p><u>Emotional Abuse</u>- language or behavior that serves no legitimate purpose and is intended to intimidate, humiliate, threaten, frighten, or otherwise harass the individual to whom the conduct or language is directed.</p> <p><u>Sexual abuse</u>- sexual contact or intercourse with another person without consent.</p>

## SPOTTING THE SIGNS OF ELDER ABUSE

Abuse can happen to any older person, by a loved one, a hired caregiver, or a stranger. Abuse can happen at home, at a relative's home, or in an eldercare facility.



Watch for these signs of abuse:



- ▶ Seems **depressed, confused, or withdrawn**



- ▶ **Isolated** from friends and family



- ▶ Has **unexplained bruises, burns, or scars**



- ▶ Appears **dirty, underfed, dehydrated, over- or undermedicated**, or not receiving needed care for medical problems



- ▶ Has **bed sores** or other preventable conditions



- ▶ Recent **changes in banking or spending patterns**

Treatment without consent- The administration of medication or the performance of psychosurgery, electro-convulsive therapy, or experimental research on an individual who has not provided informed consent, with the knowledge that no lawful authority exists of the administration or performance.

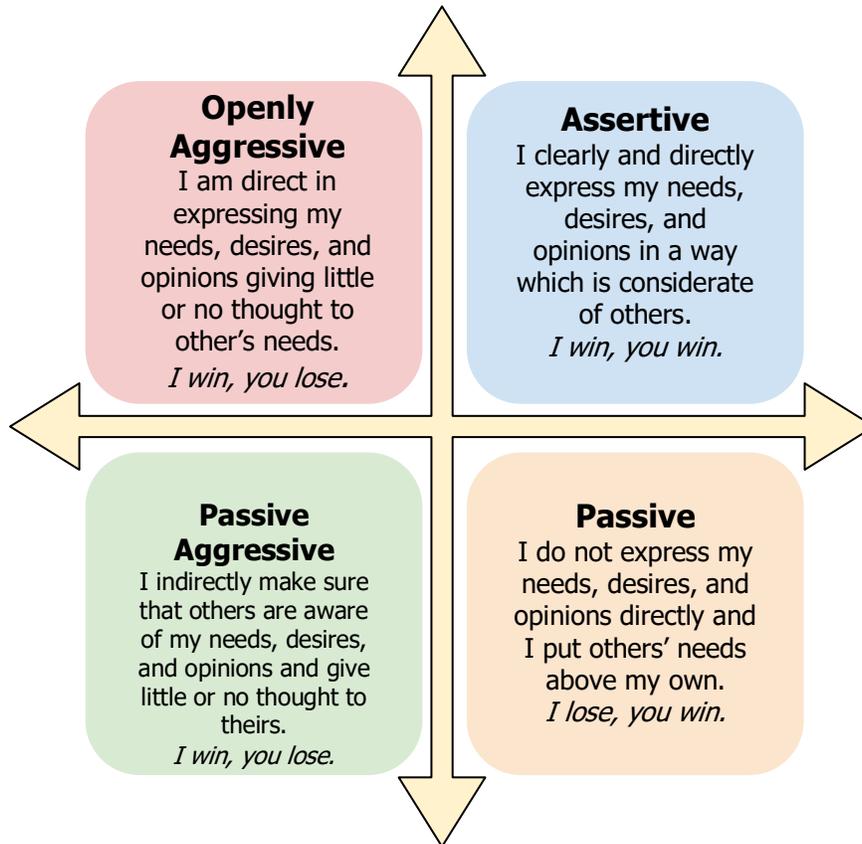
Unreasonable confinement or restraint- the intentional and unnecessary confinement of an individual in a locked room, involuntary separation from his or her living area, use of physical restraints, or the provision of unnecessary or excessive medication.

Neglect- the failure of a caregiver, as evidenced by an act, omission, or course of conduct, to endeavor to secure or maintain adequate care, services, or supervision for an individual, including food, clothing, shelter, or physical or mental health care, and creating significant risk or danger to the individual's physical or mental health.

Financial Exploitation- Can be any of the following:

- Obtaining an individual's money or property by deceiving or enticing the individual.
- Forcing, compelling, or coercing an individual to give, sell at less than fair market value, or in other ways transfer money or property against their will without informed consent.
- Theft
- The substantial failure or neglect of a fiscal agent to fulfill their responsibilities.
- Unauthorized use of an entity's identifying information or documents.
- Forgery

## Assertive Communication



Straightforward, professional, and respectful communication with the member is critical. Be clear about your expectations and maintain open lines of communication. *Assertive communication* ensures that both the care-provider and the member's needs are being met.

## Respect of Personal Property

To ensure that you are respecting the member's property, remember to do the following:

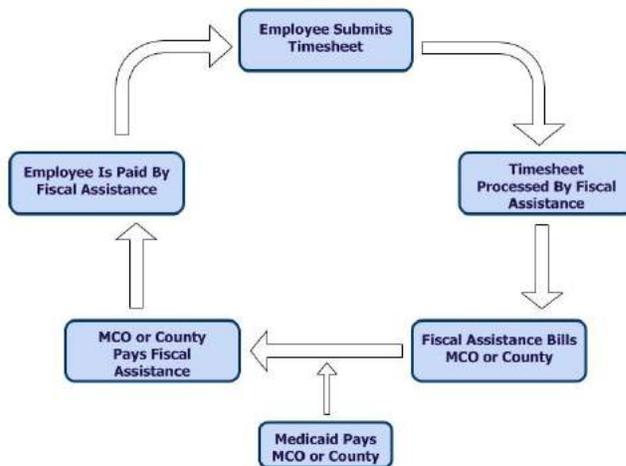
- ◆ Return items to their proper place.
- ◆ Do not borrow or take anything from the member even if they offer as a friendly gesture.
- ◆ Do not use their internet, telephone, or other services for personal use.
- ◆ **NEVER LEND/BORROW MONEY TO/FROM MEMBERS.**

## Billing & Payment Information

Questions regarding timesheets and reimbursements can be directed towards your care manager or Fiscal Assistance. Forms can be found at the website below.

**fa,inc.**

**4646 S. Biltmore Lane  
Madison, WI 53718  
Phone: 855.201.4230  
Fax: 844.650.1968  
Timesheet Fax: 844.727.7533  
[www.fiscalassistance.org](http://www.fiscalassistance.org)**



The graphic to the left illustrates the importance of submitting a timesheet correctly and on time. This complex process begins only when the timesheet is submitted.

### Training Verification Form (TVF)

A copy of the training verification form is provided in the application packet for all new care providers. **All care providers are required to have this form completed with their signature and the member they work for.** Care provider must have a TVF signed for EACH MEMBER they work for. This form is proof that the care provider and member agree they are trained to perform the job duties. Completed forms are turned into Fiscal Assistance. Additional copies are available on the Fiscal Assistance website listed above.

# **Recognizing & Responding to Emergencies**

Emergency plans should be discussed between the caregiver and member before they begin providing services. If there is no emergency or accident plan in place, contact the member's care manager. Use the space below to fill in the applicable emergency contacts for the member.

	Name	Telephone Number
Primary Emergency Contact		
Secondary Emergency Contact		
Care Manager		

**In an immediate or life threatening injury, call 911.** Care providers should be aware of the member's address and other applicable information to provide emergency dispatchers.



## **Emergency Preparedness**

Although it is not the care provider's responsibility to assemble an emergency kit, it is a good idea to discuss the availability of the following items:

- ✓ Fire extinguisher
- ✓ Battery-operated radio
- ✓ Flashlight
- ✓ Extra medication, oxygen, food for service animals, and other necessary medical supplies
- ✓ First-aid kit
- ✓ Extra blankets
- ✓ Change of clothing, rain gear, shoes
- ✓ Water
  - A gallon per person per day. Container should be identified with storage date and replaced every six months.

## Escape Routes

In the event of a fire, gas leak, or other emergency it is important to establish an escape route with the member. The following should be considered when planning an escape route:

- Floor plan of the building
- Stairs/elevators
- Windows
- Exits
- Safe place to wait outside for emergency responders
- Assistance the member may require

## Fires

- Do not try to fight a fire.
- Act fast, exit the home immediately, and do not stop for possessions or pets.
- Call 911 after reaching a safe area outside.
- Never go back into a burning building for any reason.



**DO NOT SMOKE WHILE OXYGEN IS IN USE.**

## Severe Weather

Contact the member's care manager with questions regarding the member's care plan during inclement weather. Always follow advisements from local government and weather forecasters.

<b>Snow</b>	<b>Flood</b>	<b>Thunderstorm/ Tornado</b>	<b>Heat Wave</b>
Be prepared to adjust care providing schedule if heavy snow is predicted.	Seek higher ground and stay away from windows.	Seek shelter on the lowest level, preferably a basement. If there is no basement, stay in a room with no windows, such as a bathroom or a closet.	Wear lightweight clothing and drink plenty of water. Be aware of your member takes medication that makes them especially vulnerable to extreme temperatures.

# Member Specific Information

## Supplies and Equipment Inventory

Use the list below to check the box next to supplies your member uses, and discuss where these items can be found. Cut out and keep this list somewhere safe and refer back to it as needed.



Item	Location
<input type="checkbox"/> Glasses	
<input type="checkbox"/> Eating Utensils	
<input type="checkbox"/> Straws	
<input type="checkbox"/> Oxygen	
<input type="checkbox"/> Hearing Devices	
<input type="checkbox"/> Dialysis Equipment	
<input type="checkbox"/> Sanitary Supplies	
<input type="checkbox"/> Urinary/Ostomy Supplies	
<input type="checkbox"/> Mobility Aids <ul style="list-style-type: none"> <li><input type="checkbox"/> Walker</li> <li><input type="checkbox"/> Cane</li> <li><input type="checkbox"/> Wheelchair</li> <li><input type="checkbox"/> Other _____</li> </ul>	
<input type="checkbox"/> Dentures	
<input type="checkbox"/> Equipment Batteries	
<input type="checkbox"/> Leg/Ankle/Wrist Braces	
<input type="checkbox"/> Other _____	
<input type="checkbox"/> Other _____	
<input type="checkbox"/> Other _____	

## Universal Precautions



Universal precautions are strategies used to prevent the spread of germs and infection. Some infections that can be transmitted through contact with blood and body fluids include: HIV, Hepatitis A, B, C, Staph and Strep infections, salmonella, pneumonia, Syphilis, TB, Malaria, Measles, Chicken Pox, Herpes, Urinary tract infections and Blood infections<sup>3</sup>.

### Universal Precautions Strategies

When to wear disposable gloves	When to wash hands	Other things to consider
<p>Near or direct touching of blood or body fluids</p> <p>Caring for cuts, breaks, or openings in the skin</p> <p>Assisting with toileting, bathing, tooth brushing, laundry and any other potential contact with urine, feces, vomit, soiled linens or clothing</p>	<p>Arrival at member's home</p> <p>After removing disposable gloves</p> <p>Before and after contact with the member</p> <p>After smoking, taking out the garbage</p> <p>After using the restroom, blowing nose, or touching mouth</p> <p>Before, during and after preparing meals</p>	<p>Handle razor blades and needle sharps carefully</p> <p>When cleaning all bodily fluids use detergent, water, and disinfecting solution (recommended one part bleach to nine parts water)</p> <p>Treat all soiled linens and clothing as infectious</p> <p>Place all soiled articles into a plastic bag and wash in hot water (160°F) with detergent for 25 minutes</p>

<sup>3</sup> <https://www.osha.gov/SLTC/etools/hospital/hazards/univprec/univ.html>

## Activities of Daily Living

Activities of daily living (ADLs) are actions performed on a daily basis necessary for living at home or in the community. Members may need full, partial, or no assistance with these tasks. The table below outlines the 5 categories and examples of ADLs<sup>4</sup>.

1. Personal Hygiene	Bathing/showering, grooming, nail & oral care
2. Dressing	Physically dressing & undressing, making appropriate clothing decisions
3. Eating	Feeding, preparing food and making proper meal choices
4. Maintaining continence	Using the restroom and cleaning oneself
5. Transferring & Mobility	Moving from seated to standing, in/out of bed and moving from one place to another

Care providers should be trained on the ADLs their member requires assistance with prior to working. The member's care plan, provided by their care manager, outlines these ADLs. Care providers that feel they are not being properly trained (either by the member or other designated person) should contact the member's care manager or primary contact. Fiscal Assistance does not provide care training. See page 7 for the member's care manager name and contact information.

### Bathing

Determine the member's preferred bathing schedule. Protect the member from slipping or falling. Utilize shower chair & handrails if necessary. Check the water temperature with the member to avoid scalding. Be mindful of the member's privacy by keeping them covered, or the shower curtain closed, as much as possible.

### Transferring/Positioning

Transferring your member may mean from their wheelchair to bed, assistance in navigating walkways, or in and out of the car. While they will teach you how to comfortably transfer them, the following are also important things to remember:



- ★ Plan the move and know what you can and cannot do.
- ★ Tell the person what you are going to do.
- ★ Place transfer surfaces (wheelchair & bed) close

<sup>4</sup> <https://www.payingforseniorcare.com/longtermcare/activities-of-daily-living.html>

- ★ together.
- ★ Check the wheelchair. Are the brakes locked? Are armrests and footrests swung out of the way?
- ★ Let the person look at the place where they will be transferred to.
- ★ If the person is able, place their hands on the bed or chair so he/she can help with the movement. If the person has had a stroke or is afraid, have him/her clasp his/her hands close to his/her chest.
- ★ Before starting a move, count with the person, “1-2-3”<sup>5</sup>.

### **Body Mechanics**

Maintaining proper body movements is essential to avoid injury while providing in-home care. Some general considerations:

- Allow the patient to help as much as possible
- Estimate the patient’s weight and mentally practice
- Keep your feet shoulder width apart.
- Keep the person (or object) as close to your body as possible
- Tighten your stomach muscles
- Bend knees and hips, and keep your back in a neutral position throughout the movement
- Lift with your legs, NOT your back
- Do not twist your back as you lift. To turn when lifting, pivot your feet
- Do not hesitate to bring comments or concerns to the member’s care manager and/or primary contact<sup>6</sup>

### **Driving Safety**

A member’s care plan *may include* providing transportation to medical appointments or daily errands. Keep these driving safety standards in mind:

- Buckle up!
- Obey all traffic laws
- Keep your vehicle registration, license and insurance up-to-date and all documentation in the vehicle
- Eliminate all distractions (cell phone, GPS, radio)



<sup>5</sup> <https://www.healogics.com/wound-care-patient-information/transferring-patients-safely/>

<sup>6</sup> <https://www.myshepherdconnection.org/sci/body-mechanics>

# Providing Quality Household Services

Household services is defined as cleaning, organizing, meal preparation, nutrition/special diets, doing laundry, etc. Not all members require assistance with these tasks. If you are uncertain whether these services are included in the member’s care plan, contact their care manager.

The following tips and considerations should not replace the member’s preferences and directives.

## Cleaning

The member is responsible for providing all cleaning materials. Using unfamiliar products may cause skin or breathing irritation.

Creating a daily, weekly and monthly cleaning checklist with the member can help you organize your work and save time. Inquire with their care manager if there is some form of checklist that corresponds with the care plan.

## Nutrition & Diet

The following information should not override the member’s decision of what, when and how much they choose to eat. There may also be a custom nutrition plan in place. If not, the following is USDA recommendations of daily essential nutrients<sup>7</sup>:

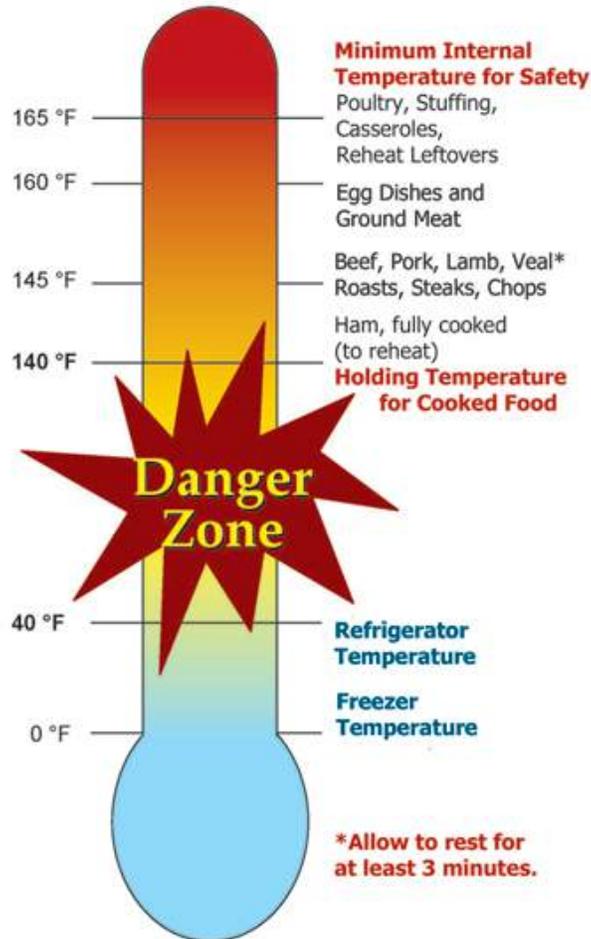
Food Group Amounts for 2,200 Calories a Day				
				
<b>2 cups</b>	<b>3 cups</b>	<b>7 ounces</b>	<b>6 ounces</b>	<b>3 cups</b>
Focus on whole fruits  Focus on whole fruits that are fresh, frozen, canned, or dried.	Vary your veggies  Choose a variety of colorful fresh, frozen, and canned vegetables—make sure to include dark green, red, and orange choices.	Make half your grains whole grains  Find whole-grain foods by reading the Nutrition Facts label and ingredients list.	Vary your protein routine  Mix up your protein foods to include seafood, beans and peas, unsalted nuts and seeds, soy products, eggs, and lean meats and poultry.	Move to low-fat or fat-free milk or yogurt  Choose fat-free milk, yogurt, and soy beverages (soy milk) to cut back on your saturated fat.
<div style="display: flex; align-items: center; justify-content: center;"> <div style="background-color: #e91e63; color: white; padding: 5px; margin-right: 10px;"><b>Limit</b></div> <div> <p>Drink and eat less sodium, saturated fat, and added sugars. Limit:</p> <ul style="list-style-type: none"> <li>Sodium to <b>2,300 milligrams</b> a day.</li> <li>Saturated fat to <b>24 grams</b> a day.</li> <li>Added sugars to <b>55 grams</b> a day.</li> </ul> </div> </div>				

<sup>7</sup> Based on a 2,200 daily calorie diet [https://choosemyplate-prod.azureedge.net/sites/default/files/myplate/checklists/MyPlatePlan\\_2200cals\\_Age14plus.pdf](https://choosemyplate-prod.azureedge.net/sites/default/files/myplate/checklists/MyPlatePlan_2200cals_Age14plus.pdf)

## Other Dietary Considerations

- ❖ Discuss with the member or primary support in detail if they require a soft, puree, diabetic, low calorie, thickened liquid, dairy/gluten-free, or any other restrictions. Get to know these requirements and do not stray from them.
- ❖ Note food allergies and anticipate potential situations the member may come into contact.
- ❖ Respect cultural and/or religious preferences. These may change depending on time and space. Never assume what they may or may not eat.
- ❖ Maintain safe cooking temperatures, prevent cross contamination and store food properly. Always label and date leftovers placed in refrigerator. Throw away leftovers after three days.
- ❖ Avoid leaving food uncovered.

*Keep cold food cold  
Hot food hot  
When in doubt, throw it out*



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<sup>8</sup> [https://www.fsis.usda.gov/wps/portal/fsis/topics/food-safety-education/get-answers/food-safety-fact-sheets/safe-food-handling/danger-zone-40-f-140-f/CT\\_Index](https://www.fsis.usda.gov/wps/portal/fsis/topics/food-safety-education/get-answers/food-safety-fact-sheets/safe-food-handling/danger-zone-40-f-140-f/CT_Index)

# **What Employers Need to Know**

This section outlines the rights and responsibilities of being an employer. Keeping these issues in mind will protect you and your worker<sup>9</sup>.

## **Maintaining a Safe Workplace**

It is important to keep your home safe for your employee. To avoid slips, falls, or other injuries:

- Clean up or warn employee of spills and/or wet surfaces
- Keep stairs and flooring in good repair
- If you have pets, make sure they cannot bite or scratch your employee

## **Making Hiring and Firing Decisions**

### **Terminating Employees**

Do not hesitate to terminate an employee who does not meet your needs. Most employment relationships are considered employment "at will" which means you can terminate an employee for any reason or no reason at all, so long as your reason is not discriminatory, retaliatory (see discussion below) or otherwise unlawful.

To avoid a claim for breach of contract, do not make any promises to your employee that you will keep him employed for a certain period of time or that you would only fire him for a specific reason. Remember that a contract does not always have to be in writing to be legally binding. Spoken statements and promises can sometimes create legal obligations.

### **Avoiding Illegal Discrimination and Retaliation**

In many states it is illegal to discriminate against employees based on certain factors, which can include race, color, religion, sex, national origin, marital status and sexual orientation. This means that you must not hire, fire, or harass employees based on such factors. While your employee is with you, be careful not to express any personal opinions that could be interpreted as discriminatory. Even if you are in your own home, the home is considered a workplace while your employee is there, and workplace discrimination and harassment are prohibited by law. Do not allow friends or family to behave in ways that could be considered discriminatory or harassing towards your employee. As the employer, you could be held responsible for their behavior if you allow it to continue. Sexual harassment is also illegal. It includes unwelcome sexual

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<sup>9</sup> The following section was written by Trustees of Boston College, National Resource Center for Participant-Directed Services. ©2014 by Trustees of Boston College, National Resource Center for Participant-Directed Services. This information in this resource is for informational purposes only and not for the purpose of providing legal advice.

advances that can be physical or verbal, such as offensive comments or gestures that create a hostile environment. Remember that the harasser can be someone other than the employer, such as a guest visiting your home or someone who lives with you. It is also illegal to fire employees in retaliation for reporting a crime or irregularity. For example, if an employee believes that an employer is misusing Medicaid funds and reports it to the authorities, it would be illegal to fire the employee in retaliation.

### **Providing References for Former Employees**

Be careful when talking about your reasons for terminating employees, because you could risk a claim of discrimination or defamation (saying things about the employee who harms them). If you are asked for a reference about a former employee and cannot provide a positive one, it is safest not to provide a reference at all.

## What Family Members and Authorized Representatives Need to Know

### **Your Duty as Representative**

In participant-directed programs, usually the participant (the person receiving services) is the employer. It is not unusual, however, for the participant to be unable or unwilling to serve as the employer. In those cases, the participant will designate a "representative" to serve as the employer. If you are designated as an authorized representative, you have a fiduciary duty to the participant. "Fiduciary" means you must always act in the best interest of the participant and not in your own interest. Program funds must always be spent for the participant's benefit, not your own benefit.

### **Hiring and Training Employees**

If the participant is likely to injure himself or others, you have a duty to warn employees of the risk and instruct them how to best handle it. Make sure to hire only employees who can deal with situations that arise. Ask them to confirm that they understand the risks and are willing and able to handle them. If you are a parent, you must exercise reasonable care to control your minor child as best as you can, even if you are not listed as an authorized representative for the child. It is important to hire employees who are able to deal with any risks they may encounter when caring for your child. You should warn employees ahead of time of risks, and explain how to best handle situations that may come up.

### **Mandatory Reporter Duty**

As an authorized representative, you may have a legal duty to report to the authorities if you suspect or notice that the participant is being abused by a family member, an employee, or some other person. Many states have "mandatory reporter" laws that could require you to report abuse of a child, an elderly adult or a person with a disability. You may have a duty to report the abuse even if the abuser is a member of your own family or the participant's family.

## Worker's Compensation Insurance

It is important to maintain a worker's compensation insurance policy, because such insurance will pay for claims if an employee is injured on the job. If an employee is injured while at work, the employer is liable even if the injury is not the employer's fault. For example, if your employee drives to the grocery store on your behalf and is injured when a careless driver hits her car, the employee could ask you for compensation even though you could not have prevented the accident. This is because employers have to compensate employees for injuries sustained on the job. A worker's compensation insurance policy will pay for such claims.

## Liability Insurance

Worker's compensation will pay when your employee is injured, but what happens when someone else is injured? As an employer, you may be liable when your employee injures someone else, even if the injury is not your fault. For example, if your employee causes a car accident while driving you to an appointment and injures a third party, the third party could sue you because your employee caused the accident while on the job. Employment-related claims like wrongful termination, discrimination, or defamation are another source of liability that is not covered by worker's compensation insurance. Some homeowner's, renter's, or liability insurance policies will cover such claims. However, the terms of insurance policies vary, so you should read the terms and consult with an insurance agent before you start your participant direction program. You may consider an addition to your homeowner's or renter's policy, or a separate liability insurance policy, to be covered for liability risks related to domestic employees.

# **Complaint and Grievance Policy**

**Policy:** All individuals receiving services from FA Inc. have the right to file a complaint or grievance regarding services they are receiving from FA Inc. All clients will receive a copy of the Complaint and Grievance Policy upon enrollment. FA Inc. does not allow retribution against any client or guardian who makes a complaint or grievance.

Any concern of fraud, waste, or abuse should be reported immediately to the Program Administrator to be handled in accordance with FA Inc. Fraud Allegation Policy.

## **Definitions:**

Informal Complaint/Grievance: A concern, issue or difficulty that can be resolved through discussion with the FA Inc. staff person involved, or his/her Supervisor.

Formal Complaint/Grievance: A concern, issue or difficulty that may relate to staff member treatment, care or services, alleged discrimination or client rights matters that cannot be resolved through discussion with the staff member or his/her Supervisor.

Confidentiality: All complaints and grievance are confidential, and the name or other identifying information of the complainant or client will not be released to any person whose knowledge of that information is not necessary for the resolution of the complaint or grievance. A person **filing a grievance on behalf of a client**, who is not a parent of a minor or a guardian, **does not have a right to get confidential information** about the client, and may receive such information as part of the investigation or resolution of the grievance **only** with the informed **written consent** of the client, guardian, or parent of a minor if the parent's consent is required for release of information.

## **Process:**

### Informal Complaint/Grievance:

FA Inc. is committed to providing quality, person-centered services to all individuals we serve. In the event a client, or guardian acting on behalf of the client, has a concern about the services provided by FA Inc., FA Inc. encourages clients and guardians to speak about the concerns with the staff member directly involved right away so that the concern can be resolved.

If the concern is not resolved at that step, FA Inc. encourages clients and guardians to speak with the Program or Department Supervisor. FA Inc. strives to resolve Informal Complaints/Grievances within 5 (five) business days of complaint receipt.

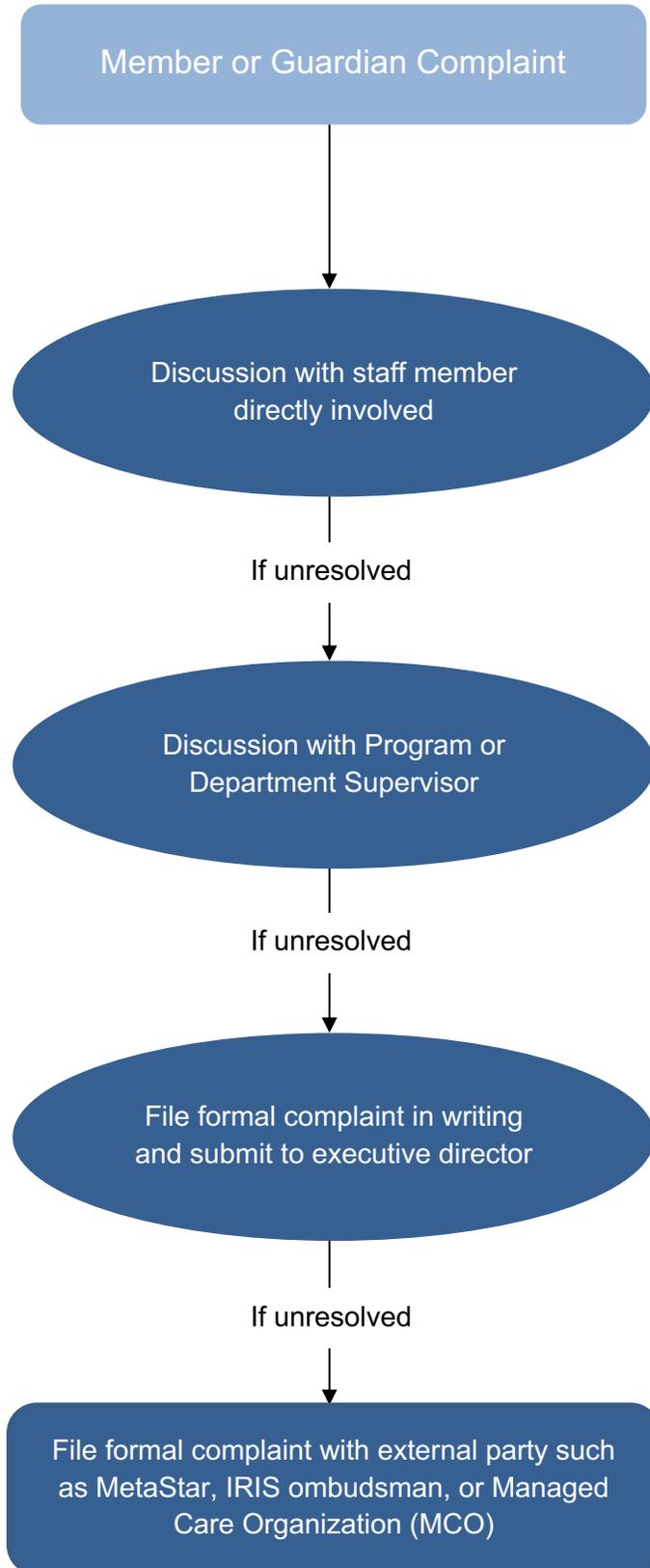
Formal Complaint/Grievance:

If a client or guardian wishes to by-pass the Informal Complaint/Grievance process, or is not satisfied with the outcome of the Informal Complaint/Grievance process, a Formal Complaint/Grievance should be submitted in writing to the Executive Director using the FA Inc. Formal Complaint Grievance Form within 5 (five) business days of the incident, or day the Informal Complaint/Grievance process ended. The Formal Complaint/Grievance will be investigated, and FA Inc. will resolve the matter, in writing, within 5 (five) business days after the Formal Complaint/Grievance is received.

If the client or guardian is not satisfied with the decision of the Executive Director, clients or guardians can file a complaint or grievance with external organizations.

- If you are an IRIS participant:
  - Contact MetaStar using the toll-free complaint and grievance hotline at 888-203-8338 or by email at [dhsirisgrievances@dhs.wisconsin.gov](mailto:dhsirisgrievances@dhs.wisconsin.gov)
  - If you are between the ages of 18-59, you can also contact the IRIS ombudsman, Disability Rights Wisconsin, for assistance by calling 800-928-8778. Disability Rights Wisconsin has offices in Rice Lake, Madison, and Milwaukee.
  - If you are age 60 or above, you can contact the IRIS ombudsman, Board on Aging and Long-Term Care, for assistance by calling 800-815-0015.
- If you are a member of a Managed Care Organization (MCO):
  - Contact your Care Management Team

## Fiscal Assistance, Inc. Complaint Process



## **Glossary**

Activities of Daily Living (ADLs)- The things we normally do in daily living including any daily activity we perform for self-care such as feeding ourselves, bathing, dressing, grooming, work, homemaking, and leisure. The ability or inability to perform ADLs can be used as a very practical measure of ability/disability in many disorders.

Adult-at-Risk- Any person aged 18 years to 59 years' old who is or may be in need of community care services by reason of mental illness, physical or cognitive disability, or sensory impairment who is or may be unable to take care of themselves or unable to protect themselves against harm or exploitation.

Care Manager/Case Manager - Employed by a MCO (Managed Care Organization) or contracted by Dane/Sauk County Human Services, and is a primary contact for the member regarding general questions/concerns.

Care provider- Also known as an employee/worker. The care provider is employed by the member. The services provided are based on the activities of daily living the member requires assistance.

Elder-at-Risk- Any person aged 60 years and over who is or may be in need of community care services by reason of mental illness, physical or cognitive disability, or sensory impairment who is or may be unable to take care of themselves or unable to protect themselves against harm or exploitation.

HIPAA (Health Insurance Portability and Accountability Act)- United States legislation that provides data privacy and security provisions for safeguarding medical information.

Mandatory reporter- A person who is legally required to report any suspicion of abuse or neglect to relevant authorities.

Member- Also known as an employer. The member is provided services by their care provider/employee based on the activities of daily living they need assistance with.

Self-Determination- Refers to the individual having control over all aspects of their life, and exercising basic rights such as citizenship, liberty, and the pursuit of happiness. Self-determining homecare includes developing a service plan, selecting and scheduling care providers.

Universal precautions- the practice of avoiding contact with bodily fluids, by means of wearing nonporous articles such as medical gloves, goggles and face shields. Universal precautions are used to prevent the spread of infection and disease.

## **Appendix**

As a mandatory reporter, you are obligated to report suspected abuse or neglect. If you find yourself in this situation, use the table below to find your county and corresponding contact information to report abuse or neglect. Note: Contacts are dependent on the victim's age.

<b>County</b>	<b>Victim is a Child (0-17) OR Victim is an Adult (18-59)</b>	<b>Victim is an Elder (59 &amp; older)</b>
Adams	Health & Human Services Dept. 608-339-4505	County Aging Unit 608-339-4505
Ashland	Human Services Dept. 715-682-7023	Human Services Dept. 715-682-7004
Barron	Dept. of Health & Human Services 715-537-5691	Dept. of Health & Human Services 715-537-5691
Bayfield	Dept. of Human Services 715-373-6144	Dept. of Human Services 715-373-6144
Brown	Dept. of Health & Human Services 920-448-6000	Dept. of Health & Human Services 920-448-6000
Buffalo	Dept. of Health & Human Services 608-685-4412	Dept. of Health & Human Services 608-685-4412
Burnett	Dept. of Health & Human Services 715-349-7600	Dept. of Health & Human Services 715-349-7600
Calumet	Dept. of Human Services 920-849-1400	Dept. of Human Services 920-849-1400
Chippewa	Dept. of Human Services 833-327-7233	Dept. of Human Services 715-726-7788
Clark	Dept. of Social Services 715-743-5233	Dept. of Social Services 715-743-5233
Columbia	Dept. of Health & Human Services 608-742-9227	ADRC of Columbia County 608-742-9233
Crawford	Dept. of Human Services 608-326-0241	Dept. of Human Services 608-326-8414
Dane	Dept. of Human Services 608-261-5437	Dept. of Human Services-Area Agency on Aging 608-261-9933
Dodge	Human Services & Health Dept. 920-386-3750	Human Services & Health Dept. 920-386-3580
Door	Dept. of Health & Human Services 920-746-7155	Social Services Senior Resource Center 920-746-7155 (press option 2)
Douglas	Dept. of Health & Human Services 715-395-1304	Dept. of Health & Human Services 715-395-1304
Dunn	Dept. of Human Services 715-232-1116	Dept. of Human Services 715-232-4006
Eau Claire	Dept. of Human Services 715-839-2300	Dept. of Human Services 715-839-2300
Florence	Dept. of Human Services 715-528-3296	Dept. of Human Services 715-528-3296
Fond du Lac	Dept. of Social Services 920-929-3400	Dept. of Social Services 920-929-3466
Forest	Social Services Dept. 715-478-3351	Social Services Dept. 715-478-7709
Grant	Dept. of Social Services	Dept. of Social Services

	608-723-2136	608-723-2136
Green	Human Services Dept. 608-328-9393	Human Services Dept. 608-328-9393
Green Lake	Dept. of Health & Human Services 920-294-4070	ADRC of Green Lake County 877-883-5378
Iowa	Dept. of Social Services 608-930-9801	Dept. of Social Services 608-930-9835
Iron	Human Services Dept. 715-561-3636	Human Services Dept. 715-561-3636
Jackson	Dept. of Health & Human Services 715-284-4301	Dept. of Health & Human Services 715-284-4301
Jefferson	Human Services Dept. 920-674-3105	Human Services Dept. 920-674-3105
Juneau County	Dept. of Human Services 608-847-2400	Dept. of Human Services 608-847-2400
Kenosha County	Dept. of Human Services 262-697-4500	Center of Aging & Long Term Care 262-605-6646
Kewaunee County	Dept. of Human Services 920-388-7030	Dept. of Human Services 920-388-3100
La Crosse	Human Services Dept. 608-784-4357	Human Services Dept. 608-785-5700
Lafayette	Human Services 608-776-4800	Human Services 608-776-4960
Langlade	Dept. of Social Services 715-627-6500	Dept. of Social Services 715-841-5160
Lincoln	Dept. of Social Services 715-536-6200	Dept. of Social Services 715-841-5160
Manitowoc	Human Services Dept. 920-683-4230	ADRC of Manitowoc Co. 920-683-4180
Marathon	Dept. of Social Services 715-261-7500	North Central Health Care-Adult Protective Services 715-841-5160
Marinette	Dept. of Health & Human Services 715-732-7700	Dept. of Health & Human Services 608-297-2115
Marquette	Dept. of Human Services 608-297-3124	Dept. of Human Services 608-297-3124
Menominee	Human Services Dept. 715-799-3861	Human Services Dept. 715-799-3861
Milwaukee	Child Protective Services 414-220-7233	Dept. on Aging 414-289-6874
Monroe	Dept. of Human Services 833-327-7233	Dept. of Human Services 608-269-8600
Oconto	Dept. of Health & Human Services 920-834-7000	Dept. of Health & Human Services 800-649-6568
Oneida	Dept. of Social Services 715-362-5695	Dept. of Social Services 715-362-5695
Outagamie	Dept. of Health & Human Services 920-832-5161	Dept. of Health & Human Services 920-832-4646
Ozaukee	Dept. of Human Services 262-238-8200	Dept. of Human Services 262-238-8200
Pepin	Dept. of Human Services	Dept. of Human Services

	833-327-7233	715-672-8941
Pierce	Dept. of Human Services 715-273-6766	ADRC of Pierce County 715-273-6780
Polk	Human Services Dept. 715-485-8400	Human Services Dept. 715-485-8400
Portage	Health & Human Services Dept. 715-345-5350	Health & Human Services Dept. 715-345-5350
Price	Dept. of Human Services 715-339-2158	Dept. of Human Services 715-339-2158
Racine	Human Services Dept. 262-638-7720	Human Services Dept. 608-647-8821
Richland	Health & Human Services Dept. 608-647-8821	Health & Human Services Dept. 608-647-8821
Rock	Human Services Dept. 608-757-5200	Rock Co. ADRC 608-741-3600
Rusk	Dept. of Health & Human Services 715-532-2299	Dept. of Health & Human Services 715-532-2299
St. Croix	Dept. of Health & Human Services 715-246-8260	ADRC of St. Croix 715-381-4360
Sauk	Dept. of Human Services 608-355-4200	Dept. of Human Services 608-355-4200
Sawyer	Dept. of Health & Human Services 715-634-4806	Dept. of Health & Human Services 715-634-4806
Shawano	Dept. of Human Services 715-526-4700	Dept. of Human Services 715-526-4700
Sheboygan	Health & Human Services Dept. 920-459-3207	ADRC of Sheboygan Co. 920-467-4100
Taylor	Human Services Dept. 833-327-7233	Human Services Dept. 715-748-2200
Trempealeau	Dept. of Human Services 715-538-2311 ext. 290	Dept. of Human Services 715-538-2311 ext. 290
Vernon	Dept. of Human Services 608-637-5210	Dept. of Human Services 608-637-5210
Vilas	Dept. of Social Services 715-479-3668	Dept. of Social Services 715-479-3668
Walworth	Dept. of Health & Human Services 262-741-3200	Dept. of Health & Human Services 262-741-3200
Washburn	Health & Human Services Dept. 715-468-4747	Health & Human Services Dept. 715-468-4747
Washington	Human Services Dept. 262-335-4610	Human Services Dept. 262-365-5757
Waukesha	Dept. of Health & Human Services 262-548-7212	ADRC of Waukesha Co. 262-548-7848
Waupaca	Dept. of Health & Human Services 715-258-6300	Dept. of Health & Human Services 715-258-6300
Waushara	Dept. of Human Services 920-787-6550	Dept. of Human Services 920-787-6550
Winnebago	Dept. of Human Services 920-236-4615	Dept. of Human Services 1-877-886-2372
Wood	Human Services Dept. 715-421-8600	Marshfield: 715-421-2345 Wisconsin Rapids: 715-384-5555

