

# Lifeworks

A nonprofit serving  
people with disabilities

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## EMPLOYEE HANDBOOK FOR PERSONAL SUPPORT, RESPITE, & HOMEMAKER

January 2020

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## **ABOUT LIFEWORKS**

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Lifeworks is a Minnesota 501(c)(3) nonprofit organization founded in 1965 by parents of children with disabilities.

Through Fiscal Support, Employment, and Day Services, as well as through partnerships with nearly 300 businesses, Lifeworks provides support to 2,500 individuals with disabilities and their families throughout the Twin Cities and greater Minnesota.

## **LIFEWORKS MISSION**

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The Lifeworks mission is to serve our community and people with disabilities as we live and work together.

## **LIFEWORKS VISION**

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We envision a community where people with disabilities are more broadly valued, hired by employers, receiving support, and participating in ordinary activities.

## **LIFEWORKS VALUES**

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The Lifeworks values, listed below, are a guiding light behind our mission, the foundation of our culture, and a reflection of our philosophy.

- Integrity
- Respect
- Empowerment
- Collaboration
- Innovation
- Accountability



## PEOPLE WE SERVE

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Lifeworks provides a breadth of services to people with disabilities and their families that help them to live full and integrated lives.

### **PERSONAL SUPPORT:**

Personal Support services are available through the federally approved BI, CAC, CADI and DD waiver plans and must follow Minnesota Statute 245D Basic services compliance standards.

Services through this program must relate to supports identified in the person's service plan.

Personal Support is a service provided in the person's home or community to achieve their full potential, increase independence, and meet community inclusion goals that are important to and important for the person and based on their assessed need.

### **RESPIRE:**

Respite services are available through the federally approved BI, CAC, CADI, EW, and DD waiver plans and must follow Minnesota Statute 245D Basic services compliance standards.

Respite is a one to one service that provides short-term care due to the absence, or need for relief of the primary caregiver. Respite may be provided in the person's home.

In-home or out-of-home Respite settings must meet provider licensure qualifications.

### **HOMEMAKER:**

Homemaker services are available through the federally approved BI, CAC, CADI, EW, and DD waiver plans and must follow Minnesota Statute 245D Basic services compliance standards. This service can be delivered when the participant is unable to manage general cleaning and household activities, or when the primary caregiver who is regularly responsible for these activities is unable to manage them.

Lifeworks provides basic Homemaker services which includes light household cleaning. These services must be authorized by the county. For Homemaker services, independent contractors are not allowed. The person providing this service must be an employee of Lifeworks who has passed a fingerprinting background check.

### **BOARD OF DIRECTORS:**

Lifeworks is governed by a volunteer Board of Directors. Board members are listed on our external web site, [www.lifeworks.org](http://www.lifeworks.org). The president and CEO of Lifeworks reports to the Board of Directors.

### **CONNECT WITH US:**

A Lifeworks Representative will be able to assist you when you call 651-454-2732 or toll free at 1-866-454-2732 between the hours of 8:00 a.m. and 4:30 p.m. Monday through Friday with the exception of holidays. Lifeworks' web site address is [www.lifeworks.org](http://www.lifeworks.org) and our main fax line is 651-454-2773. The HR email address is [HR-ServiceCoordination@lifeworks.org](mailto:HR-ServiceCoordination@lifeworks.org). The Training email address is [trainingdept@lifeworks.org](mailto:trainingdept@lifeworks.org).

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# **Pay and Benefits**

## **TYPES OF POSITIONS:**

### **Full Time Personal Support, Respite, or Homemaker Employee**

Those non-exempt employees scheduled to work at least 30 hours per week on a continuous basis.

### **Part Time Personal Support, Respite, or Homemaker Employee**

Those non-exempt employees scheduled to work less than 30 hours per week on a continuous basis.

### **Age Requirements for Personal Support, Respite & Homemaker**

Personal Support employees must be 18 years of age when completing the hiring paperwork.

Respite employees must be 18 years of age when completing the hiring paperwork.

Homemaker employees must be 16 years of age when completing the hiring paperwork.

## **WORK SCHEDULES AND PAY:**

### **Work Schedules**

Employees work schedules vary and are contingent on the level of supports and funding the person is authorized to use from Minnesota Department of Human Services. Work schedules are subject to change. Employees may not work any hours while the service recipient is in the hospital, care facility, or incarcerated.

Any employee needing time during work hours to express breast milk for her infant child should speak to the Authorized Representative to discuss arrangements and a space to do this.

### **Definition of the Work Week**

The work week, for payroll purposes, begins on Sunday at 12:00 a.m. and ends on Saturday at 11:59:59 p.m.

### **Time Entry Policy**

Employees must record their work hours. You may record only your own work hours, not those of your co-workers. An employee must submit hours worked to the Authorized Representative no later than employee's last shift of the pay period.

Authorized Representatives must approve the hours worked submitted by employees. Time submissions are due to Lifeworks by noon on Monday following the close of a pay period.

The following guidelines are required when submitting work time:

- Pay period or weekly beginning and end dates should always start with a Sunday date and end with a Saturday date.
- Record daily time in 15 minute increments:
  - 15 minutes = 0.25
  - 30 minutes = 0.50
  - 45 minutes = 0.75

The payroll schedule is available on [www.lifeworks.org](http://www.lifeworks.org).

Late time submissions will be processed and paid the following pay period.

### **Overtime and Holidays**

Overtime is not allowed for any employee supporting a person using Personal Support, Respite or Homemaker services. Work hours combined with training hours may not exceed 40 hours in a work week. An Employee working unauthorized time beyond their scheduled hours will be warned and, if necessary, disciplined up to and including termination.

Holidays are considered a regular work day. When an employee is scheduled to work on a holiday, the employee will receive their regular rate of pay for hours worked that day.

### **PAYCHECKS:**

#### **Payroll Period**

Employees are paid every other Friday for 26 pay periods. If Friday is a bank holiday, the pay date will be the last previous business day. The paycheck covers the days worked in the two weeks prior to the week in which the paycheck is received.

#### **Paycheck Distribution**

Lifeworks provides direct deposit that ensures proper payment of wages on pay day. A Direct Deposit Authorization form is available on the Lifeworks website and should be mailed to Lifeworks or emailed to [payroll@lifeworks.org](mailto:payroll@lifeworks.org) once completed. A written request for cancellation of a direct deposit is required.

Paystubs are available online at JAT. You should receive information about using this online system when you are hired. Contact [payroll@lifeworks.org](mailto:payroll@lifeworks.org) for additional information about accessing your paystub online.

#### **Payroll Deductions**

Payroll deductions for all employees are the standard deductions: Social Security, Medicare, and state and federal withholding tax. Other deductions, e.g., retirement, savings, etc., may be made with the employee's authorization.

If you are an employee who is eligible and enrolls in Lifeworks health insurance benefits, and you do not work within the two week pay schedule, Lifeworks reserves the right to deduct the missed premium(s) from all future checks until your premiums are paid in full.

#### **Wage Attachments**

In the event that a wage attachment is issued against an employee's salary through proper judicial process, the organization will withhold such portion of his or her salary as the law requires. An employee will be informed of the deduction by the payroll department before it becomes effective with the next paycheck.

#### **Over Payments**

In the event of an over payment, payroll will work with the employee, Authorized Representative and Service Coordinator to rectify the issue and collect the overage as soon as possible either by payroll deduction(s) or specific agreed upon payment arrangements. All overpayments need to be collected prior to calendar year end.

## **Replacement Checks**

Contact the payroll department to request a replacement check in the event that your paycheck is lost. Lifeworks charges a \$25.00 fee for this service.

## **Stop Payment Authorization**

If a replacement check is requested, please contact the payroll department. Lifeworks charges a \$25.00 fee for this service.

## **IRS Form W2**

IRS Forms W-2 are mailed to employees by January 31 of each year. In the event an employee has lost his or her paper copy of Form W-2, an employee may request a duplicate copy in writing and must include a \$10.00 fee payable to Lifeworks.

## **Pay Structure for Personal Support, Respite and Homemaker Employees**

Lifeworks complies with all Minnesota State, county, and city minimum wage ordinances. The wages for Personal Support, Respite and Homemaker positions are in part determined by a person's budget approved by their county. Wage increases and decreases are also determined in part by a person's budget and input from the Authorized Representative.

## **Discussion of Wages**

Lifeworks does not prohibit employees from discussing wages nor does it require employees to sign a waiver or other documents that takes away their right to disclose their wages. Lifeworks will not take any adverse employment action against an employee for disclosing their own wages or discussing another employee's wages that have been disclosed voluntarily.

## **Final Pay for Terminated Employees**

An employee, who is terminated, either voluntarily or involuntarily, will receive wages for hours worked paid through the last day actually worked.

## **MILEAGE REIMBURSEMENT:**

Mileage reimbursement may be allowed under certain programs or services. Please contact the Service Coordinator and Authorized Representative to learn if you would be eligible to receive mileage reimbursement.

Mileage may be reimbursed up to a pre-approved limit only when the expense is incurred while providing paid support, while driving a personal vehicle, and the person served is present.

## **FAMILY AND MEDICAL LEAVE ACT (FMLA):**

The Family Medical Leave Act of 1993 requires certain employers to allow eligible employees to take unpaid, job-protected leaves for certain family and medical events. It is intended to assist employees in reaching a balance between family and work responsibilities with as little conflict as possible.

## **Employee Eligibility Criteria for FMLA**

To be eligible for FMLA leave, an employee must be:

- Employed at least 12 months prior to the commencement of the leave ***and***
- Worked at least 1,250 hours during the 12-month period prior to the commencement of the leave.

Eligible employees of Lifeworks are entitled under the Family and Medical Leave Act (FMLA) to take up to twelve weeks unpaid leave during any twelve-month period (an eligible employee of a covered service member may be entitled to a combined total of 26 work weeks of leave during a 12-month period to care for the service member); for the birth, adoption, or foster care placement of a child; to care for a child, disabled adult son or daughter, spouse, or parent with a serious health condition; or because of the employee's own serious health condition.

### **Reasons for the Leave**

In order to qualify for leave under this policy, the employee must be taking the leave for one of these reasons:

- Birth of a child or placement of a child for adoption or foster care. Leave must commence within 12 months of the birth or placement
- To care for a spouse, child or parent with a serious health condition
- To care for a spouse, son, daughter or parent on active duty in the Regular Armed Forces, National Guard and Reserves because of any qualifying exigency (as determined by the Secretary of State)
- To care for a spouse, son, daughter, parent, or next of kin who is a member of the Armed Forces who suffered a serious injury or illness in the line of duty on covered active duty in Regular Armed Forces
- The serious health condition of the employee

If you wish to inquire about your eligibility status for this leave or if you wish to have a complete copy of the policy, please contact Human Resources department at 651-454-2732.

### **JURY DUTY:**

Employees summoned for jury duty or subpoenaed as a witness, except for self-incurred situations, shall be granted a leave of absence with pay. An employee called for jury duty will be paid their regular rate of pay less the amount received from the court for the time spent in court. Employees should not sign over their court paid jury duty check to Lifeworks. Employees are expected to return to work in the event they are not on call and not required in court.

Employees summoned for jury duty must inform their Authorized Representative. Upon completion of the jury duty, the employee must submit a copy of the jury duty pay voucher and subpoena notice to the payroll department.

### **INCLEMENT WEATHER:**

All employees should decide for themselves whether it is safe to report to work. If unable to attend their scheduled shift, employees should contact their Authorized Representatives as soon as possible.

### **INSURANCE:**

#### **Liability Insurance**

Lifeworks has liability insurance to protect the organization, its employees, and volunteers against lawsuits by persons other than employees on charges of malpractice and negligence.

#### **Statutory Insurance Requirements**

Lifeworks recommends that all employees have liability limits of \$100,000 per person, \$300,000

per occurrence, \$50,000 per vehicle/property or a combined single limit of \$300,000.

### **Thrift Retirement Plan**

As a Lifeworks employee you are eligible to make elective deferrals from your paychecks into the Thrift Retirement Plan (the "Plan"). The Plan offers a convenient way for employees to save money for your retirement through payroll deductions. Lifeworks does not contribute matching contributions to the Plan on the employee's behalf. If you would like a printed copy of the SPD or if you're interested in enrolling in the Plan, please contact Mass Mutual at [www.retiresmart.com](http://www.retiresmart.com), or 1-800-743-5274 to receive assistance with enrollment in the Plan. Employees may start making contributions into the Plan at any time.

### **EMPLOYEE TRAINING:**

Personal Support and Respite are programs licensed by the State of Minnesota. Per MN Statute 245D.09, subdivision 4 and 4a, each new employee has to complete specific content during orientation. To ensure compliance with our license and to ensure timely employee onboarding, each new employee must complete orientation **prior** to working with the person served.

We expect that new employees spend 8-10 hours on new employee orientation content. We expect that employees with less than five years of experience spend 10-12 hours learning annual training content. We expect that employees with five or more years of experience spend 6-8 hours learning annual training content.

Lifeworks is able to verify both the date and length of time an employee is logged onto the online learning system. To ensure accurate and responsible use of public funds and to minimize risk of fraud and abuse, Lifeworks will randomly cross reference the time an employee submits and the time and dates logged onto the online learning system. When there are discrepancies between hours registered in the online learning system and the employee's submitted training hours, the Service Coordinator will contact the Authorized Representative and employee to determine the correct hours for payment.

Employee will submit their training dates and hours to the Authorized Representative. Authorized Representatives submit the employee's training hours to Lifeworks Services.

Homemaker employees do not need to complete orientation and annual training.

### **New Employee Orientation**

To ensure we are in compliance with our state license as well as uphold timely employee onboarding each new employee must complete orientation **prior** to working with the person served.

The process for new employee orientation is as follows:

- Once the employee has been cleared for employment by Human Resources, the new employee will receive training information from our Training Coordinator.
  - This information will include an introduction to our online learning management system and an outline of the assigned courses.
  - The new employee will complete the training online on a device of his/her own; at a public computer; or at Lifeworks in our learning lab during an orientation session arranged with the Training Coordinator.

- The Authorized Representative will provide a copy of the person's current Coordinated Service and Support Plan Addendum (CSSPA), and Individual Abuse Prevention Plan (IAPP) for review.
- The new employee will complete the assigned training. When the training is complete, the Service Coordinator will have a phone conversation with the employee regarding the person's CSSPA and IAPP to ensure competence before releasing the employee to start working with the person.
- The Service Coordinator will notify the Authorized Representative when this phone conversation is complete and the employee is ready to begin working with the person.

## **Annual Training**

The annual training will be assigned to employees throughout the year according to the person's served last name. The rotation will continue year to year with the employee's training window moving up two months each year.

Annual training notifications will be communicated twice before commencement of the training. The first notification will be sent to the Authorized Representative and the employee in the month prior to beginning so there is time to schedule training into each employee's work week. Overtime is not allowed, even to complete annual training. Combined annual training and direct service hours may not exceed 40 hours per week per employee.

The second notification will be directly to each employee on the first day of the month in which the assigned training is due. This notification will inform the employees that the required trainings have been assigned in the online learning management system and that they have until the last day of the month to complete all required training.

Employees are expected to complete all of the annual training assignments within the month that they are assigned. The employee will be suspended from working on the last day of the month if the training is not complete. The employee will be given a brief extension to complete training while not working directly with the person served. Failure to complete the annual training in the designated time frame could impact employment up to and including termination.

## **Annual Review of the Person's CSSPA and IAPP**

The person served has an annual meeting each year. The person's CSSPA and IAPP are updated at this meeting. All employees must review the person's updated CSSPA and IAPP, per MN Statute 245D.

- To ensure all employees meet this requirement,
  - The Authorized Representative will provide a copy of the recently updated CSSPA and IAPP to the employee.
  - After reviewing the person's CSSPA and IAPP, the employee will log into the online learning system and check an acknowledgment that this annual review is complete and the employee understands the person's support needs.

Employees will be informed of the deadline to complete this annual review. The employee will be suspended on the last day of the review period if the training is not complete. The employee will be given a brief extension to review the person's CSSPA and IAPP while not working directly with the person served. Failure to complete the annual training in the designated time frame could impact employment up to and including termination.

## **Annual Training for Employees Who Started Working Mid-Year**

New employees will complete new employee orientation which will meet the annual training requirement for the year. However, in order to stay aligned with the annual training schedule, the new employee may do orientation and annual training in the same year.

# **Health and Safety**

The health and safety of employees is a priority for Lifeworks. Our objective is to prevent and reduce the occurrence of disabling injuries. All employees need to understand and follow safety rules and procedures.

### **EMPLOYEE INJURIES:**

Employees who have a work-related injury or disease should report it immediately to their Authorized Representative and Human Resources. A First Report of Injury form must be completed and sent to Human Resources. An incident report must also be completed and sent to the Service Coordinator.

### **TOBACCO FREE WORKPLACE:**

Smoking, use of chewing tobacco or inhaling or exhaling of vapor from e-cigarettes or electronic delivery device are only permitted in designated areas and when it does not interfere with providing quality services and supervision to individuals being served. Smoking is not allowed in vehicles or whenever an employee is directly supporting a person who is a non-smoker.

### **ALCOHOL AND DRUG-FREE WORKPLACE:**

Lifeworks does not permit employees, subcontractors, and volunteers to be under the influence of alcohol, or illegal drugs or impaired by any chemical or prescription/legal drug while on duty, transporting person(s) served, accompanying them into the community. The policy applies to all employees providing basic services under the Personal Support, Respite and Homemaker programs.

# **Code of Conduct**

### **POLICY:**

All Lifeworks employees are responsible to read, understand, and comply with the Code of Conduct along with the supporting policies and standards set forth.

### **PURPOSE:**

Ethics refers to a code of conduct based on moral duties and obligations which indicate how people should behave. It deals with the ability to distinguish right from wrong and the commitment to do what is right. The purpose of the Code of Ethics is to provide standards of ethical behavior for employees when that behavior directly relates to the mission of the organization.

### **CODE OF ETHICS:**

#### **Responsibility to the Individuals We Serve**

- I shall treat the individuals I serve with the utmost dignity, free from ridicule.
- I shall not use my professional relationship with the person served to further my own interests.

- I shall interact with individuals I serve in a manner which is respectful of their humanity and rights as persons.
- I shall be aware of my potential influence on persons served and will not exploit their trust.
- I will not witness documents or co-sign any legal documents
- I shall follow all state and federal laws and rules regulating services to the person served.
- I shall afford the same consideration to all individuals I provide service for regardless of whether I normally work with them or not.
- I shall demonstrate a genuine interest in all persons served and dedicate myself to their best interests and empowerment.
- I shall provide the opportunity for reasonable risk in growth experiences for the individuals I serve.
- I shall not discriminate against or refuse services to any person on the basis of race, gender, creed, color, religion, national origin, age, public assistance status, marital status, sexual orientation, veteran status, physical or mental disabilities, or any other category protected by law.

### **Confidentiality (see Privacy Policy)**

- I shall respect the privacy of individuals and hold in confidence all information obtained in the course of professional service. Therefore, I will not disclose information regarding persons served to anyone except:
  1. As mandated by law;
  2. To prevent a clear and present danger to a person or persons;
  3. When there is an authorization for release of information previously obtained in writing and then only the information as indicated on the authorization.
- I recognize that confidentiality and privacy requirements apply also to colleagues who do not work directly with the said person served.
- I shall be responsible to store or dispose of persons served records in ways that maintain confidentiality.
- I shall possess a professional attitude which upholds the confidentiality of persons served, colleagues, and the organization.
- I shall, upon my termination of employment, maintain the same level of honor regarding confidentiality as during my employment.

### **Responsibility to Colleagues**

- I shall respect the rights and views of fellow colleagues and treat them with fairness, courtesy and good faith.
- I shall be aware of my potential influence on colleagues and will not exploit their trust.
- I shall not engage in or condone any form of harassment of or discrimination against colleagues.
- I shall extend respect and cooperation to colleagues within and external to the organization.
- If I have the responsibility for employing or evaluating the performance of other staff, I shall do so in a responsible, fair, considerate and equitable manner which provides the opportunity for growth.
- I shall respect the confidences of my colleagues.
- If I know firsthand that a colleague has violated ethical or legal standards, I shall take whatever action is needed to prevent any further violations from occurring, including speaking with my colleague and/or reporting the violation to my supervisor if necessary.

- If it is reported to me that a colleague has violated ethical or legal standards, I shall ensure that the report is communicated to my colleague's supervisor.

### **Professional Responsibility**

- I have a total commitment to provide the highest quality of service to those individuals I serve.
- I have a continuing commitment to assess my own personal strengths, biases and effectiveness.
- I shall strive to become and remain proficient in the performance of the work for which I was hired.
- I shall act in accordance with the highest standards of integrity.
- I shall seek assistance and advice on problems outside the recognized bounds of my competence.

### **Responsibility to Lifeworks**

- I shall work to improve the effectiveness and efficiency of services provided by Lifeworks.
- I shall not fundraise for my personal causes unless approved by Human Resources.
- I shall act to prevent and eliminate discrimination in work assignments and in personnel policies or practices.
- I shall use the resources of Lifeworks only for the purposes for which they were intended.
- I shall fulfill any and all commitments made by me to Lifeworks.
- I shall maintain respect for Lifeworks policies, procedures and management decisions and will take the initiative toward improving them when it will better serve the best interests of the persons served.
- I shall support the integrity and reputation of Lifeworks.
- I shall keep confidential all information related to the business of Lifeworks that the organization does not make available to the public, including but not limited to client, personnel, financial, and other business information. I understand that I can discuss wages and conditions of employment.
- I shall resign if I cannot maintain respect for Lifeworks policies, procedures, and management decisions and support the integrity and reputation of Lifeworks.

### **VIOLATION OF POLICY:**

Employees who violate the Code of Ethics may be subject to disciplinary action up to and including termination of employment.

## **Conflict of Interest**

It is the policy of Lifeworks to ensure smooth operations and avoid conflict of interest by requiring all Lifeworks employees (including management) to promptly disclose to their Authorized Representative and the Human Resources department any private or personal interest which may appear to either influence their objective exercise of duties or compromise their ability to perform their job. If the disclosed conflict of interest is deemed unacceptable to Lifeworks, the employee must take prompt action to eliminate the conflict of interest and/or make it acceptable to Lifeworks.

Lifeworks employees shall not accept any personal gift or personal payment from any person, company or organization which does business with Lifeworks, seeks to do business with

Lifeworks, or is a competitor of Lifeworks. This will not, however, apply to modest non-cash gifts (fairly valued at no more than \$50) or to larger non-cash gifts (such as the use of sporting event tickets) which my Authorized Representative and Service Coordinator has approved in writing in advance. In no case should an employee accept any personal cash gifts.

## **Whistleblower Policy**

### **POLICY:**

Lifeworks requires that all Lifeworks Personnel will, in connection with all Lifeworks matters, observe high standards of business and personal ethics, practice honesty and integrity, comply with all applicable laws and regulations, comply with all Lifeworks policies, and report violations or suspected violations in accordance with this Whistleblower Policy.

Lifeworks seeks to have an open door policy and encourages all Lifeworks Personnel to share their questions, concerns, suggestions, or complaints regarding the organization ("**Issues**") with those within the organization who can address them properly, on the basis set out in this Policy. All Lifeworks Personnel are encouraged to ask questions if they are unsure about how to proceed or whether conduct violates the law or Lifeworks policies.

It is the policy of Lifeworks that no Lifeworks Personnel who, in good faith, report a violation of applicable laws, regulations, or Lifeworks Policies in accordance with this Policy shall suffer harassment, retaliation, or adverse employment consequences as a result of making such a report. Any Lifeworks Personnel who so retaliates against anyone who, in good faith, has reported an Issue under this Policy is subject to discipline up to and including termination of employment or relationship with Lifeworks.

It is the policy of Lifeworks that appropriate Lifeworks authorities will take prompt action to investigate and resolve any Issues reported under this Policy on a timely basis or within 30 days.

### **RIGHTS AND RESPONSIBILITIES, COMPLIANCE AUTHORITIES:**

The CEO will act as Chief Compliance Officer for Lifeworks and will have overall responsibility for the implementation and administration of this Policy. The CEO may delegate responsibilities under this Policy to a Compliance Officer and/or Compliance Department, who will report to the CEO and/or Board of Directors with respect to matters relating to this Policy.

The Chief Compliance Officer (and/or his/her designee) will annually report compliance activity to the Audit and Investment Committee for presentation to the full Board. The Audit and Investment Committee may in its discretion report any matters subject to this policy to the full Board or Directors.

### **REPORTING OF ISSUES:**

#### **Internal Channels**

Lifeworks Personnel are encouraged to report issues through internal channels, as follows:

- An employee should first present an issue to his or her Authorized Representative. However, if the employee is not comfortable speaking with the Authorized Representative about the issue or is not satisfied with the Authorized Representative's response, the

employee is encouraged to present the issue to the Human Resources Department or the Compliance Department.

- Any Lifeworks Personnel may report an issue directly to the CEO, a member of the Board of Directors, or the organization's outside legal counsel after attempting to report the issue to Human Resource or the Compliance Department.

### **Whistleblower Hotline**

Alternatively, employees may report issues at any time to the Lifeworks Whistleblower Hotline, staffed by an independent whistleblower hotline company retained to anonymously and confidentially accept messages about issues relating to Lifeworks. Issues can be communicated to the Lifeworks Whistleblower Hotline as follows:

- By leaving a message at the following toll-free telephone number: **1-877-767-7781**. Callers to this number will be assigned a five-digit case number for the reported Issue. Callers should record the case number at the time of the call because the case number cannot be recovered after the call has ended. The hotline company is responsible for transcribing the caller's message, deleting it from its system and sending the message to appropriate authorities at Lifeworks. A caller may check the status of his/her reported issue at any time by calling the above number and entering the assigned five digit case number.
- By sending an email to **Lifeworks@getintouch.com**. The hotline company is responsible for removing the origination address and forwarding just the content of the message to appropriate authorities at Lifeworks.

Lifeworks Personnel are encouraged to direct questions to Authorized Representatives and Human Resources, and officials if they are unsure about how to proceed or whether specific conduct violates the law or Lifeworks policies.

### **Handling and Reporting Issues**

The Chief Compliance Officer (or his/her designee) is responsible for investigating and resolving all reported issues, except if the issue involves:

- the **CEO**, the Board (other than the CEO) will be responsible for investigating and resolving the issue;
- a **Board member**, the remainder of the Board will be responsible for investigating and resolving the issue; and
- the **CEO and one or more members of the Board**, the remaining members of the Board will be responsible for investigating and resolving the issue; or
- **matters involving corporate accounting practices, internal controls, or auditing matters** (other than minor matters involving no alleged misconduct or potentially material financial implications), the Audit and Investment Committee of the Board of Directors will be responsible for investigating and resolving the issue.

The person(s) responsible for investigating and resolving a reported issue will:

- promptly and thoroughly investigate the matter made the subject of the reported issue;
- acknowledge receipt of the reported issue to the individual reporting it (if his/her identity is known);
- involve other Lifeworks personnel, as appropriate, to assist in the investigation and resolution of the issue;
- seek the advice and counsel relative to legal matters;

- institute appropriate measures, if warranted, to correct and resolve the matter made the subject of the issue;
- document the investigation and resolution of the issue.

### **Requirement of Good Faith**

Anyone filing a complaint concerning a violation or suspected violations must be acting in good faith and have reasonable grounds for believing the information disclosed indicates a violation. Lifeworks Personnel are not free to make statements or disclosures knowing they are false or that they are in reckless disregard of the truth. Any allegations that prove not to be substantiated and which were maliciously made or knowingly false will be viewed as a serious disciplinary offense.

### **Confidentiality**

All Lifeworks personnel involved in the investigation and resolution of any reported issues under this Policy will (to the greatest extent consistent with a thorough investigation, the discharge of legal obligations and the proper resolution of the issue) maintain in confidence the identity of the person reporting the Issue and the subject of the reported Issue.

The successful business operation and reputation of Lifeworks is built upon principles of lawful behavior, fair dealing and ethical conduct. This policy is intended to reflect the commitment of Lifeworks to comply with all applicable laws, rules, regulations and standards; to conduct business in an ethical manner, in accordance with the letter, spirit, and intent of the law; and to refrain from any illegal, dishonest, or unethical conduct.

Lifeworks is dedicated to the delivery of services to individuals with disabilities using the highest standards of accountability for service delivery, administration, business marketing, and financial management. In order to achieve these goals and to be a good corporate citizen, maintain and enhance its reputation, satisfy the requirements of certifying agencies, be a good business partner and avoid exposure to liabilities, Lifeworks and its Personnel will, in good faith and to the greatest extent possible, conduct Lifeworks business so as to:

- meet or exceed high standards of business ethics;
- comply with all applicable federal, state, and local laws, rules, and regulations;
- comply with all contractual requirements to which it has agreed;
- meet or exceed all standards and best practice guidelines applicable to its business;
- prevent and detect fraud, fiscal mismanagement and misappropriation of funds.

### **PRIVACY POLICY:**

See Lifeworks Privacy Policies addendum A for the entire policy.

### **HIPAA SECURITY POLICY:**

See Lifeworks HIPAA Security Rule Policies addendum B for the entire policy.

### **FRAUD, WASTE AND ABUSE POLICY:**

See Lifeworks Fraud, Waste and Abuse Policy addendum C for the entire policy.

### **DRUG AND ALCOHOL FREE WORKPLACE POLICY:**

See Lifeworks Drug and Alcohol Free Workplace Policy for Basic Services addendum D for the entire policy.

## **INCIDENT RESPONSE, REPORTING, AND REVIEW POLICY FOR BASIC SERVICES:**

See Lifeworks Incident Response, Reporting, and Review Policy for Basic Services addendum E for the entire policy.

## **Equal Employment Opportunity:**

Lifeworks is committed to providing equal opportunity in all phases of employment and employee relations. Authorized Representative's interview and offer direct support positions to job candidates applying to support people served in their homes. Lifeworks processes the hiring paperwork and supports the hiring process, ensuring the employee is eligible to work with a vulnerable adult or minor.

It is Lifeworks' policy to grant equal employment opportunities to all qualified persons without regard to age, race, color, creed, gender (including pregnancy), sexual orientation, marital status, familial status, religion, national origin, physical or mental disability, genetic information, or past, present, or future membership in a Uniformed Services of the United States, status with respect to Public Assistance or activity in a human rights commission, or any other status protected by the law or regulations where we operate.

Lifeworks will not discriminate against any such qualified person and will treat qualified persons equally in all employment practices such as the following: job application procedures, hiring, advancement or discharge of employees, rate of pay or other forms of compensation, benefits, and all other terms, conditions, and privileges of employment.

If any employee or applicant for employment believes he or she has been treated in a way that violates this policy, contact Human Resources at 651-454-2732, or 2965 Lone Oak Drive, Suite 160, Eagan, Minnesota, 55121. Responsible parties will investigate allegations of discrimination or harassment as confidentially and promptly as possible, and Lifeworks will take appropriate action in response to these investigations.

### **DISABILITY REASONABLE ACCOMMODATION:**

Lifeworks complies with the state and federal laws regarding disabilities. Lifeworks does not discriminate against applicants and employees based on physical or mental disabilities. Lifeworks will work to accommodate a reasonable request for accommodation, so long as that request does not pose an undue hardship upon the organization. Lifeworks provides accommodations to disabled and pregnant employees consistent with state and federal law. If you believe you require an accommodation, please contact Lifeworks' Human Resources Department.

### **GENETIC INFORMATION NONDISCRIMINATION ACT:**

Lifeworks will comply with the Genetic Information Nondiscrimination Act (GINA) which prohibits employers from using genetic information to affect the hiring of an individual or to affect the terms, conditions, privileges, benefits or termination of employment unless Lifeworks can prove this information is job related and consistent with business necessity.

### **CONCERNS AND COMPLAINT REPORTING:**

Any applicant or employee who feels he has been treated in any way that violates this policy should contact Human Resources. Allegations of discrimination will be investigated promptly. No adverse action will be taken against any applicant or employee reporting a possible violation of

this policy.

# **Harassment and Discrimination Policy**

## **PURPOSE OF THIS POLICY:**

It is a policy of Lifeworks that all employees have a right to work in an environment free from unlawful discrimination and harassment. The mission of Lifeworks is best accomplished in an atmosphere of professionalism which in turn is supported by mutual respect and trust.

Lifeworks expects all employees to work toward this goal.

Harassment based on a person's race, color, national origin, sex, disability, age, marital status, familial status, status with regard to public assistance, or any other legally protected class status is strictly prohibited by Lifeworks.

## **DEFINITIONS OF SEXUAL AND OTHER FORMS OF HARASSMENT:**

Harassment prohibited under this policy consists of:

- unwelcome conduct based on a person's race, color, creed, religion, national origin, sex, sexual orientation, disability, age, marital status, familial status, status with regard to public assistance, or any other protected class status
  - when submission to such conduct is: a condition of one's employment or a basis for an employment decision;
  - or
  - when such conduct has the purpose or effect of: interfering with one's job performance; or creating an intimidating, hostile, or offensive work environment.

Some examples of conduct that could be considered harassment include the following types of action when they are taken based on protected class status:

- unwelcome abusive, intimidating, insulting, or degrading remarks;
- displaying objects, cartoons, pictures, or stories which may be perceived as offensive or demeaning; or
- threats, demands, or suggestions that an employee's work status, advancement, or other terms and conditions of employment are contingent upon the toleration of or acquiescence to unwelcome harassment.

One form of prohibited harassment is sexual harassment. Sexual harassment includes:

- unwelcome sexual advances, requests for sexual favors, sexually motivated physical contact, or other verbal or physical conduct or communication of a sexual nature
  - when submission to such conduct is: a condition of one's employment or a basis for an employment decision; or
  - when such conduct has the purpose or effect of: interfering with job performance; or creating an intimidating, hostile, or offensive work environment.

Some examples of conduct that may be sexual harassment under this policy include:

- unwelcome abusive, intimidating, insulting, or degrading remarks or conduct of a sexual nature;

- use of offensive or demeaning words of a sexual nature, telling suggestive jokes or stories, and conversations about sexual exploits, sexual preferences, and desires;
- displaying sexually suggestive objects, cartoons, pictures, or stories which may be perceived as offensive or demeaning;
- threats, demands, or suggestions that an employee's work status, advancement, or other terms and conditions of employment are contingent upon the employee's toleration of or acquiescence to unwelcome sexual advances;
- unwelcome sexual flirtations, propositions, or invitations to social engagements; or
- unwelcome and objectionable physical contact or physical proximity.

Lifeworks prohibits harassment based on a protected class status in any form, including verbal, physical, and visual harassment.

### **SCOPE OF POLICY:**

This policy prohibits harassment against any employee, person served, or volunteer of Lifeworks by a member of the same sex or a member of the opposite sex.

In addition, this policy prohibits sexual harassment and any other form of harassment by any individual, including supervisors and/or managers, Authorized Representatives, employees, coworkers.

### **REPORTING HARASSMENT:**

If at any time you feel that you are being harassed, or you believe that another Lifeworks employee or person served or volunteer is being harassed, you should immediately contact Human Resources at Lifeworks administration.

Lifeworks wants to resolve any problems, but it can do so only if it is aware of them. Lifeworks encourages any individual who believes he or she is being harassed, or who has the belief that another Lifeworks employee, person served, or volunteer is being harassed, to report any and all incidents of perceived harassment. Lifeworks will investigate harassment complaints as appropriate, and take other appropriate action. Any person who is found to have violated this policy on harassment and non-discrimination will be subject to appropriate corrective action, which may include discipline up to and including termination of employment.

### **CONFIDENTIALITY:**

Lifeworks will maintain confidentiality to the extent possible reasonably possible under the circumstances, however, the disclosure of some information may be necessary in the course of investigation or responding to an issue.

### **NO RETALIATION:**

Retaliation against any individual for making a complaint under this policy, for opposing harassment, or for participating in an investigation of any claim regarding harassment or inappropriate behavior is strictly prohibited.

If you feel that you have experienced such retaliation, you should immediately report any such retaliation to Human Resources at Lifeworks administration.

## **EMPLOYEE RESPONSIBILITIES:**

All employees are responsible for maintaining a working environment free of harassment and discrimination. Any individual who is found to have engaged in behavior prohibited by this policy will be subject to corrective action, which may include discipline up to and including termination.

It is the responsibility of ALL employees to:

- Read and abide by this policy. If you have any questions about the policy, please contact the Human Resources Department at Lifeworks administration. Refrain from engaging in acts of harassment or acts that can be construed as harassment.
- Immediately report any acts of harassment or acts that can be construed as harassment.
- Cooperate with any investigation regarding harassment or inappropriate conduct.
- Maintain the confidentiality of any complaint or information received or provided in the course of an investigation, only disclosing information to those Lifeworks Personnel or representatives with a need to know the complaint or information.
- Refrain from speculation and from drawing conclusions or gossiping about the subject matter or individuals involved in claims of harassment or the investigation of such claims.
- Refrain from taking any adverse or retaliatory action against any individual who has made a claim of harassment, opposed harassment, or participated in the investigation of any claim regarding harassment or inappropriate behavior.

## **QUESTIONS ABOUT POLICY:**

Any questions about this policy or related matters should be referred to the Human Resources Department at Lifeworks administration.

# **Grievance Policy and Procedure**

## **POLICY:**

Lifeworks Services, Inc. recognizes that our employees and the people we serve sometimes have concerns which result in grievances, complaints, or misunderstandings. It is important that these concerns, regardless of severity, be addressed and resolved to keep the channels of communication open. We are committed to providing a simple process for the people served in our program and their authorized or legal representatives to bring grievances forward. We are further committed to having grievances resolved in a timely manner.

## **PROCEDURE:**

- Service Initiation: People receiving services and their case manager will be notified of this policy, and be provided a copy, within five working days of service initiation.
- People receiving services or their authorized or legal representatives should speak to a staff person they feel comfortable with about their concern or complaint. Staff will respond in a manner that resolves the concern. If after this conversation, however, the service recipient believes the concern or complaint has not been resolved, people receiving services may clearly inform the staff person that they are filing a formal grievance; and may request staff assistance in filing a grievance.
- Upon request, staff will provide assistance to service recipients and their authorized representatives including the name, address, and telephone number of outside agencies who can assist the service recipient in filing a formal grievance with Lifeworks.
- Formal grievances can be sent to the Director of Quality, Compliance and Continuous

Improvement, who may be reached at: Lifeworks Services, Inc., 2965 Lone Oak Drive, Suite 160, Eagan, MN 55121, 651-454-2732.

- Lifeworks will respond promptly to grievances that affect the health and safety of service recipients. All others will be responded to within 14 calendar days of the receipt of the grievance. Lifeworks will resolve the grievance within 30 calendar days of the receipt. If we are unable to resolve the issue within 30 calendar days, Lifeworks will document the reason for the delay and a plan for resolution.
- Employees of Lifeworks are also able to file a formal grievance and may request the assistance of human resources. Lifeworks will follow the guidelines outlined in the applicable Collective Bargaining Agreement (union contract).
- Filed grievances will be reviewed by the Compliance Committee to evaluate if policies and procedures were followed; if policies & procedures are adequate; if additional staff training is needed; if the grievance is similar to past concerns with the persons, staff or services involved; and if there is a need for a corrective action to protect the health and safety of persons receiving services.
- Based on the Compliance Committee review, Lifeworks will develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performances by staff or the company, if any.
- Lifeworks will provide a written summary of the grievance and a notice of the grievance resolution to the person and case manager regarding the nature of the grievance, the date the grievance was received, the results of the review of the grievance and the resolution including any corrective action taken. Grievance records are maintained for a minimum of 7 years.
- The grievance summary and resolution notice will be maintained in the person's record.
- If implementation of the corrective action plan is not sufficient to resolve the grievance, Lifeworks will arrange for a hearing, including the presence of a neutral party in accordance with the American Board of Arbitration guidelines.
- The action of filing a formal grievance, if done in good faith, will not result in retaliation or present a barrier to services.
- If maltreatment is suspected, reports to the Minnesota Adult Abuse Reporting Center (MAARC) should be made by calling 1-844-880-1574.

### **RESPONSE TO SUBPOENAS, SEARCH WARRANTS, INVESTIGATIONS AND OTHER LEGAL ACTIONS:**

If a subpoena, search warrant, investigation, or legal action is initiated against Lifeworks, the staff person in receipt of such documents or action must immediately notify their supervisor and Authorized Representative. If your Authorized Representative is not available, contact Human Resources. Lifeworks will provide employees with the assistance needed to fulfill the requirements outlined by the document or issuer of the action.

## **Discipline and Terminations**

### **DISCIPLINARY ACTION:**

Examples of activities that may result in disciplinary action are:

#### **Misconduct**

Misconduct is defined as behavior which is contrary to regulations or norms which the organization could reasonably expect to be followed.

## **Violation of Lifeworks Code of Ethics, Policies, or Procedures**

The code of ethics and Lifeworks.

## **Breach of Privacy Policies**

Impermissible use of or disclosure of Protected Health Information.

## **Illegal Activities**

Activities which violate federal, state or local law, and which occur during, or are associated with, the conduct of Lifeworks business.

## **Endangering or Abusing Workplace Property or Threatening the Physical Well-being of Employees or Persons Served**

Any unsafe, reckless, destructive or violent action which could harm employees or persons served or result in the destruction of workplace property.

## **Falsification of Records**

This includes, but is not limited to, falsifying data on employment forms, time cards, training records, medical records or reports, expense reports, and other job-related documents.

## **EMPLOYEE TERMINATION:**

Lifeworks recognizes that there will be employee terminations, both voluntary and involuntary; it is the organization's intent to uniformly process such terminations. The Authorized Representative or Service Coordinator is responsible for initiating termination procedures that affect an employee by contacting Human Resources to ensure proper procedures are followed prior to any action being taken. The fiscal services manager should also be notified.

## **Employee's Responsibilities during a Voluntary Termination**

The employee should submit a letter of resignation including a mutually agreed upon final day of work to the Authorized Representative

## **Discharge**

When the seriousness of a single offense or prior attempts at corrective discipline indicate that employment should no longer be continued or when mandatory training is not complete within designated timeframe an involuntary discharge may occur.

## **Final Pay for Terminated Employees**

An employee, who is terminated, either voluntarily or involuntarily, will receive regular wages paid through the last day actually worked.

# **Employee Guidelines**

## **PERSONNEL RECORDS:**

### **Notice of Rights Regarding Personnel Records**

Minnesota law gives you certain rights and remedies relating to your personnel record. For example, you have the right to review your personnel record both during your employment and after it ends. A request to review your personnel file must be made in writing to Human Resources. The file of a current employee will be made available at Lifeworks administration during normal business hours. Lifeworks reserves the right to deny a request to review a

personnel file if the request is not made in good faith.

An employee who disputes information in their personnel file may submit a written statement, not to exceed five pages, which will be placed in the personnel file. Lifeworks will not retaliate against anyone who asserts their rights under the law. Penalties may be assessed for a violation of Minnesota statutes relating to personnel records review. A claim asserting a violation of personnel records laws must generally be brought within one year of actual or constructive discovery of the violation.

For a detailed explanation of your rights and remedies, see Minn. Stat. 181.960 – 965. This notice is provided pursuant to Minn. Stat. 181.96

Lifeworks maintains personnel records for employees which are confidential. Only those with direct need to know are permitted to access these records. Access is limited to relevant information only and is monitored by Human Resources. All requests for information from personnel records should be made in writing and sent to Human Resources. Employee medical information is maintained in a separate file.

### **Federal I-9 Forms**

Lifeworks complies with all applicable employment laws and does not employ unauthorized workers. Employment eligibility verification is done through the Federal E-Verify system.

### **APPLICANT BACKGROUND CHECK:**

#### **Employees**

Lifeworks complies with Minnesota Statute 254C and the Department of Human Services to conduct fingerprinting background studies. The purpose is to establish procedures and standards for background studies of individuals affiliated with programs to protect the health, safety, and rights of persons served by those programs.

### **Change of Name or Address**

Employees should promptly report any change in their name, phone numbers, or address to their immediate supervisor and the Human Resources department by the use of the online form link on the Fiscal Support Forms page of the website.

Legal name changes require a copy of the employee's new social security card, a new W4 and a completed staff information form available by contacting Human Resources at 651-454-2732.

### **EMPLOYEE REFERENCES:**

#### **Verification of Employment**

Verification of employment will be given only by Human Resources and/or the payroll department. A phone reference will include the employee's title, dates of employment at Lifeworks, and the employee's job responsibilities. Lifeworks will send a copy of a verification letter to another organization and file a copy of the letter in the employee's personnel file.

#### **Credit References**

Requests for credit information are completed by payroll. Payroll verifies the employee's dates of employment, position, title, and full or part-time employment. Salary information is verified only in writing and upon the employee's written request. It is the policy of Lifeworks to not forecast future employment.

## **Performance Reviews**

Performance reviews are completed annually and are a collaborative process between the Authorized Representative and the Service Coordinator.

# **Transportation**

## **TICKETS-TRAFFIC AND MOVING VIOLATIONS:**

Lifeworks will not pay for traffic tickets and moving violations. Lifeworks requires all staff driving any vehicle to report any traffic tickets or moving violations to their supervisor.

## **REPORTING VEHICLE ACCIDENTS:**

All Lifeworks employees who are involved in a vehicle accident whether driving the person's family's vehicle or their own vehicle while on Lifeworks time must complete an incident report.

If the employee is injured, the authorize representative must contact Lifeworks Services immediately, work with service coordination and **Human Resources** to complete a First Report of Injury form, give a copy to the employee and forward the original to **Human Resources** within 24 hours of notification of injury. Employees may also be subject to reasonable suspicion testing under Lifeworks Drug and Alcohol-Free Workplace.

# **Professional Conduct**

All Lifeworks employees are representatives of the organization and should always present a professional image to the public. Lifeworks image and professional reputation depend on the professional conduct of its staff. It is important to use professional etiquette with all people supported through Lifeworks (people using services, families, community members, and Lifeworks staff) to provide the highest quality customer service.

## **COMMUNICATING IN PERSON, WRITING, AND ON THE PHONE:**

Communication should be professional, kind, and nonjudgmental. Employees should not use curse words or inappropriate slang as part of their conversations with the person served, families or community members.

## **DRESS:**

All employees are expected to present a neat and professional appearance while at work or when officially representing the organization, themselves, and the person whom they support.

Shirts or other apparel with beer, cigarette, drug-related or offensive wording or graphics are not acceptable. Tops must completely cover the wearer's front and back torso and top of the shoulder (no athletic tank tops, halter tops or spaghetti straps). Hats/caps should only be worn inside for religious or medical reasons.

Pants or shirts with holes, tears, or excessive wear are not appropriate: No cut-offs, frayed ends, or spandex. Shorts, skirts, and dresses should be of a professional length.

For safety, open-toed shoes may not be worn when the employee is working with people who use a wheelchair for mobility.

**Perfume and cologne should be worn sparingly or not at all due to employees and persons served who have allergies or sensitivity to certain chemicals.**

**COMMUNICATING ON SOCIAL MEDIA:**

**The Following Standards Must be Adhered to:**

1. If engaging during work hours, be sure to have your supervisor's permission
2. Never engage on or through your personal channels while working with persons served
3. If engaging with Lifeworks social media channels via your personal social media accounts and especially if you list Lifeworks as your employer on those channels, your personal profile photo must follow the professionalism standards in this employee handbook.
4. When engaging or posting:
  - Stick to your area of expertise and provide unique, individual perspectives on what's going on at Lifeworks and in the world.
  - Post meaningful, respectful comments – in other words, no spam and no remarks that are off-topic, offensive, unprofessional, or inappropriate.
  - Always pause and think before posting. That said, reply to comments in a timely manner, when a response is appropriate.
  - Respect proprietary information and content, and confidentiality.
  - When disagreeing with others' opinions, keep it appropriate and polite.
  - Be respectful of Lifeworks customers and don't mention them by name.

**FACEBOOK, INSTAGRAM, AND OTHER SOCIAL MEDIA PERSONAL CONNECTION SITES:**

When adding co-workers, the person, or the person's family members as friends on Facebook or other social media personal connection sites, be mindful that your profile and postings will be available to those people. For example, you may not want to friend your supervisor or vice versa.

Also be respectful of other another employee's decisions, boundaries, and interests in engagement when contacting and requesting to be connected to one another.

If you choose to "friend" people using services, remember that they have access to your personal profile and will still associate you as an employee and with Lifeworks when viewing your profile.

Choosing to list Lifeworks as your employer in any personal social media profiles connects your posts, your comments, your opinions, your photos, and your other social media contacts with Lifeworks Services. To avoid connecting your personal online presence with an employer, you may want to consider describing your employment as "direct support professional for people with disabilities" rather than listing a specific employer. If you have questions about this, please contact the Human Resources department at Lifeworks Services.

**PERSONAL RELATIONSHIPS WITH PEOPLE USING SERVICES AND FAMILY MEMBERS OUTSIDE OF WORK HOURS:**

You were likely offered a position to support the person you work with because of your relationship with that person and his or her family members. This may make it challenging at times to know when you're spending time with someone as a friend or a paid employee.

When you are working scheduled hours with the person served, you are considered a paid

employee and should conduct yourself as such. You should have a set schedule provided to you by the Authorized Representative on a regular basis.

When you are not “on the clock”, you may choose to spend time with the person served and his or her family if this is something you would typically do as a their friend or extended family member, but these are not considered paid work hours.

## **Administrative**

### **USE OF EQUIPMENT:**

#### **Computers**

Lifeworks does not provide phones or personal computers for employees. Employees are encouraged to use their own computers, tablets and phones to access training and the Lifeworks website. Many community centers and libraries have computers for public use, as well.

Lifeworks does provide a computer and printer at Admin in Eagan if an employee does not have access to a computer to complete an application. Lifeworks also provides access to our computer learning lab by appointment with our Training Coordinator to complete orientation and annual training.

#### **Mobile Phone, Smartphone, and Text Messaging Guidelines**

Minnesota law and Lifeworks policy state that there is to be no mobile phone usage while driving any vehicle including making or taking calls, checking voicemail, email, or text messaging. If you absolutely need to take or make a call, pull over and stop in a safe place.

Lifeworks expects all employees to observe good safety habits when using mobile phones in their personal vehicles. All use of mobile phones while operating personal vehicles for Lifeworks business is prohibited unless use is through hands-free voice-activated technology, Bluetooth wireless car systems, or mobile phone headsets. It is not acceptable use to touch your mobile phone to initiate or answer a call while operating a personal vehicle during working hours.

Employees must also use discretion in where and when they have conversations, answer emails, or text message, particularly if the information is sensitive or should remain confidential. If taking pictures of persons served, see HIPAA Privacy Policy regulations and guidelines. Violation of this policy is also a violation of Minnesota law and subject to the disciplinary action policy.

#### **Solicitations**

Lifeworks will not solicit a person for donations if that person requests that Lifeworks stop sending solicitations. Submit this request by calling Lifeworks at 651-454-2732.

# ADDENDUM A--LIFEWORKS PRIVACY POLICY

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## **PURPOSE:**

Lifeworks Services is committed to conducting business in compliance with all applicable laws, regulations and Lifeworks policies. These approved "**Lifeworks Privacy Policies**" have been developed to comply with the Health Insurance Portability and Accountability Act (as amended by the Health Information Technology for Economic and Clinical Health [HITECH] Act) (collectively called "**HIPAA**"), the Minnesota Government Data Practices Act ("**MGDPA**"), and the Minnesota Health Records Act ("**MHRA**"). These Lifeworks Privacy Policies cover the approach of Lifeworks to comply with state and federal privacy laws, including the HIPAA Privacy Regulations. Lifeworks may be subject to additional privacy laws and regulations on a contractual basis; such contractual requirements supplement these Lifeworks Privacy Policies.

## **SCOPE:**

These Lifeworks Privacy Policies apply to protected health information created, received, or maintained by Lifeworks on behalf of its clients. All Lifeworks Personnel are responsible for being aware of, and complying with these laws, related regulations, these Lifeworks Privacy Policies and the Lifeworks Privacy Procedures, and additional contractual requirements, as appropriate. "**Lifeworks Personnel**" means paid and unpaid staff (including employees and contractors), volunteers, student interns and other persons who work for or on behalf of Lifeworks. "**Lifeworks Privacy Procedures**" means the various procedure documents referenced in these Lifeworks Privacy Policies.

## **EFFECTIVE DATE:**

These Lifeworks Privacy Policies have been in effect as of April 14, 2003. The latest update is December 9, 2016.

## **EXPIRATION DATE:**

These Lifeworks Privacy Policies have no expiration date. They will remain in effect until amended or replaced.

## **POLICIES OWNER:**

The Quality and Compliance Manager is assigned the responsibility of managing these Privacy Policies. Please direct questions regarding these Policies to:

**Connie Giles**  
**Quality and Compliance Manager**  
**Lifeworks Services**  
**2965 Lone Oak Drive, Suite 160**  
**Eagan, MN 55121**

## **INTRODUCTION:**

Lifeworks is obligated to comply with data privacy laws and regulations issued under the federal Health Insurance Portability and Accountability Act (as amended by the Health Information Technology for Economic and Clinical Health [HITECH] Act) (collectively called "**HIPAA**"), the Minnesota Health Records Act ("**MHRA**"), and the state Minnesota Government Data Practices Act ("**MGDPA**"). HIPAA laws and regulations and the MHRA apply to only health related

information, whereas MGDPA applies to all individually identifiable information about an individual that is collected by a Minnesota state agency (or, in the case of Lifeworks, a non-profit organization that contracts with state agencies).

In situations when both the federal and the state laws apply, but appear to be conflicting, Lifeworks will comply with the more stringent of the two with regards to the particular use, disclosure, and/or type of protected health information.

MGDPA, MHRA and HIPAA give individuals certain rights, such as to be informed about the information we maintain about them at Lifeworks, how we use that information, and to whom we disclose it.

All Lifeworks Personnel must comply with these Privacy Policies to maintain the privacy of the information Lifeworks processes and handles, and also to ensure that Lifeworks complies fully with all applicable federal and state privacy protection laws and regulations.

Protecting customer and client information is of utmost importance to Lifeworks. Personnel violating privacy policies are subject to disciplinary action up to and including possible termination of employment and possible criminal prosecution.

HIPAA regulations cover both security and privacy. Security and privacy are distinct, but related.

The **HIPAA Privacy Rule** focuses on the use and disclosure of individuals' health information, called "protected health information" or "PHI", by organizations subject to the Privacy Rule, such as Lifeworks. It also establishes rights of an individual to control the use of his or her personal information. The Privacy Rule covers the confidentiality of PHI in all formats including electronic, paper and oral. Confidentiality is an assurance that the information will be safeguarded from unauthorized disclosure. Lifeworks' policies and procedures governing the use and disclosure of PHI are set forth in ***Lifeworks Privacy Policies***.

The **HIPAA Security Rule** focuses on administrative, technical and physical safeguards specifically as they relate to electronic PHI (ePHI). Protection of ePHI data from unauthorized access, whether external or internal, stored or in transit, is all essential to the Security Rule.

#### References:

Minn. Stat. §13.02, subd. 7; §13.05, subd. 6

Minn. Stat. §144.292; §144.293

Preamble to HIPAA Regulations

45 CFR § 164.501

#### **PROTECTED HEALTH INFORMATION (PHI) DEFINED:**

MGDPA classifies certain individually identifiable information about an individual that is collected by a government entity as private. HIPAA further categorizes certain *individually identifiable health information* held or transmitted by a covered entity or its business associate as protected. Similarly, MHRA provides protections for patient health records. Lifeworks combines these classifications and defines "**Protected Health Information**" (or "**PHI**") as: health information about an individual (including clinical, financial, demographic, and lifestyle related information) which is accessed, created, modified, received or maintained by Lifeworks or Lifeworks Personnel (in any form or media, whether electronic, oral or paper) and which independently or collectively could be used to individually identify a person.

This includes a person's name and/or information such as:

- Dates: birth, admissions, discharge, death
- Gender
- Medical records number
- Health plan beneficiary numbers
- Geographical subdivision smaller than a state (address, zip code, etc.)
- Phone number, email address, fax number
- License numbers
- Vehicle identification numbers (such as license plate numbers)
- Full face photographic images (and any comparable images)
- Social Security Number
- Device identifiers (such as serial numbers)
- URLs (Internet Resource Locators)
- Internet Protocol (IP) address
- Biometric identifiers (such as finger prints and voice prints)
- Other unique identifiers that can be attributed to a specific individual

The following are a few examples of information that may be considered or may contain PHI:

- Diagnosis of a certain condition
- Procedure codes on claim forms
- Explanation of Benefits (EOB)
- Enrollment/change of status data
- Past, present or future payment for health care

References:

Minn. Stat. §13.02, subd 7, subd. 12

Minn. Stat. §144.293

45 CFR § 160.103

### **OTHER DEFINITIONS:**

Unless otherwise defined in these Policies, capitalized terms will be as defined in HIPAA, MHRA, and MGDPA.

References:

Minn. Stat. §13.02

Minn. Stat. §144.291

45 CFR § 160.103

### **POLICIES:**

Many of the following Lifeworks Privacy Policies have related Lifeworks Privacy Procedures and /or forms that give further detail to the implementation of the policy. Lifeworks Personnel shall comply with the then-current procedures and use the then-current versions of the referenced forms, all of which are incorporated into these policies by reference.

### **DISCLOSURE OF AND ACCESS TO PHI:**

Lifeworks will disclose or provide access to PHI only to:

those Lifeworks Personnel who are either bound by law or written agreement to maintain the PHI in accordance with state and federal law and regulations and this Lifeworks Privacy Policy; those Business Associates which are party to a signed Business Associate Agreement approved as to form by Lifeworks' General Counsel; and/or others to whom it is authorized, required or

permitted to disclose PHI under the terms of these Lifeworks Privacy Policies.

Access to and disclosures of PHI allowed or required by these Lifeworks Privacy Policies will be made only by the Lifeworks Personnel designated in the applicable procedures, or in the absence of such designation, only with the prior approval of the Quality and Compliance Manager.

### **NOTICE OF PRIVACY PRACTICES:**

Lifeworks is legally obligated to inform the individual (or his/her legal representative) of the individual's privacy rights by supplying him/her with a copy of the **Notice of Privacy Practices** (sometimes called "**NPP**") at the earliest possible time. Lifeworks staff shall inform the legal representative (or the individual, if acting as his/her own guardian) of these rights at the time of a new referral by providing the Notice of Privacy Practices. In all cases, the NPP will be provided no later than the date of the first service delivery, or in the case of any emergency, as soon as reasonably practicable after the emergency situation ends. Lifeworks will attempt to obtain the signature of the individual (or his/her legal representative) to acknowledge the NPP. Lifeworks will document attempts to gain this signature. A legal representative who has signed on behalf of an individual has the responsibility to inform the individual of his/her privacy rights under the NPP. Lifeworks will also have copies of the NPP available at its facilities, and will post the NPP in a clear and prominent location. Lifeworks will make the NPP available to an individual upon request.

Lifeworks will comply with all documentation requirements, including the requirement to retain copies of the NPP and any written acknowledgments of receipt of the NPP.

Lifeworks Personnel shall only use and disclose PHI in accordance with the terms of these Lifeworks Privacy Policies and the Notice of Privacy Practices, or as otherwise required and permitted by law. Lifeworks may make future changes to the NPP in order to comply with any changes to privacy laws or to make improvements to internal privacy practices. Lifeworks will provide the individual with a revised NPP and inform the individual of his/her privacy rights under the new policy if Lifeworks' Privacy Policies change (including its need for access to, use of, or sharing of PHI).

Lifeworks is required under MGDPA to provide a Tennessen warning, which is very similar to the NPP. The contents of Lifeworks' NPP will satisfy the Tennessen warning requirements.

Please see the **Notice of Privacy Practices** form for further details.

References:

Minn. Stat. §13.04, subd. 2

45 CFR § 164.520

### **USES AND DISCLOSURES OF PHI FOR TREATMENT, PAYMENT, AND OPERATIONS:**

For treatment, payment, and operations, Lifeworks may use and disclose PHI of an individual (as detailed in the Notice of Privacy Practices) after the individual (or the individual's legal representative) has received and acknowledged the Notice of Privacy Practices, provided that Lifeworks obtains a signed and dated consent from the individual prior to any disclosure of PHI. This consent requirement may be satisfied by a signed and dated acknowledgement to the Notice of Privacy Practices. Please see the **Notice of Privacy Practices** form for further details. However, if the individual does not sign the Notice of Privacy Practices, Lifeworks must obtain a specific signed and dated consent prior to disclosing the individual's health records.

There are certain situations in which consent is not required prior to disclosure. Lifeworks

Personnel should consult the Quality and Compliance Manager to determine whether these exceptions apply.

References:

Minn. Stat. §13.02, subd 12; §13.461, subd. 2; §245.467, subd. 4,5,6

Minn. Stat. §144.293

45 CFR § 164.506

**REQUIRED USES AND DISCLOSURES OF PHI:**

The following are situations when Lifeworks is required to disclose PHI according to federal or state law:

**INDIVIDUAL'S REQUEST:**

Lifeworks must disclose an Individual's PHI to that Individual if he or she requests his or her own PHI.

**DEPARTMENT OF HEALTH AND HUMAN SERVICES:**

Lifeworks must disclose PHI to the Department of Health and Human Services if that agency requests it for compliance or enforcement purposes.

Please see the **Notice of Privacy Practices** form for further details.

References:

Minn. Stat. §13.04, subd. 3

Minn. Stat. §13.05, subd. 3, subd. 4

45 CFR § 164.512

**PERMITTED USES AND DISCLOSURES OF PHI:**

The following are situations when Lifeworks may, under certain circumstances, be permitted by federal and state law to disclose and/or use PHI without prior authorization from the individual. Prior to using or disclosing information, Lifeworks Personnel must discuss each situation at hand with the Quality and Compliance Manager to ensure that such disclosure is permitted under HIPAA, MHRA, and MGDPA.

**DISCLOSURES REQUIRED BY LAW:**

Certain disclosures are required by law (meaning a mandate contained in law that compels an entity to make a use or disclosure of PHI and that is enforceable in a court of law.) Lifeworks may disclose PHI where required by law, including but not limited to the following:

- Court orders and court-ordered warrants;
- Subpoenas or summons issued by a court, grand jury, a governmental or tribal inspector general, or an administrative body authorized to require the production of information;
- A civil or an authorized investigative demand;
- Medicare conditions of participation with respect to health care providers participating in the program; and
- Statutes or regulations that require the production of information, including those which require such information if payment is sought under a government program providing public benefits.

### **PUBLIC HEALTH:**

Lifeworks may disclose PHI to a public health authority that is permitted by law to collect or receive the information. The disclosure may be necessary to do the following:

- Prevent or control disease, injury, or disability;
- Report births and deaths;
- Report reactions to medications or problems with products;
- Notify a person who may have been exposed to a communicable disease or may be at risk for contracting or spreading a disease or condition;
- Notify the appropriate government authority if Lifeworks believes:
  - An individual has been the victim of abuse, neglect, or domestic violence; or
  - The use or disclosure of PHI is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.

### **OVERSIGHT:**

Lifeworks may disclose PHI to an oversight agency for activities authorized by law, such as audits, investigations, and inspections. These oversight agencies include government agencies that oversee the health care system, government benefit programs, other government regulatory programs, and civil rights laws.

### **LEGAL PROCEEDINGS:**

Lifeworks may disclose PHI during any judicial or administrative proceeding in response to a court order or administrative tribunal (provided such a disclosure is consistent with the disclosure expressly authorized in the order), and in certain conditions in response to a subpoena, discovery request, or other lawful processes.

#### Law Enforcement

Lifeworks may disclose PHI to a law enforcement official if required by law, including laws that require the reporting of certain types of wounds or other physical injuries, or in compliance with a court order, subpoena, or administrative request in certain situations. Lifeworks may also disclose PHI for law enforcement purposes, including the following, provided certain requirements are satisfied:

- To identify or locate a suspect, fugitive, material witness, or missing person, provided the information disclosed is limited to that permitted by HIPAA;
- Information pertaining to victims of a crime;
- Deaths suspected from criminal conduct;
- Crimes occurring at a Lifeworks site; and
- Reporting crime in emergencies.

### **RESEARCH:**

Lifeworks may, when authorized by law, use and/or disclose PHI for research purposes in accordance with HIPAA and MHRA.

### **CORONERS, MEDICAL EXAMINERS AND FUNERAL DIRECTORS:**

Lifeworks may disclose PHI to coroners or medical examiners for the purpose of identifying the deceased or determining a cause of death, and to funeral directors to the extent necessary to carry out their duties with respect to the decedent prior to and/or in reasonable anticipation and to the extent otherwise allowed under state law.

### **WORKER'S COMPENSATION:**

Lifeworks may disclose PHI to comply with workers' compensation laws and other similar legally

established programs.

### **DISCLOSURES BY WHISTLEBLOWERS:**

If a Lifeworks Personnel member or a Business Associate believes in good faith that the conduct of Lifeworks is unlawful or otherwise violates professional or clinical standards, or that the care, services, or conditions provided by the Lifeworks potentially endangers one or more people or the public, then the Lifeworks Personnel or Business Associate may disclose relevant PHI to:

- a Health Oversight Agency or Public Health Authority that is authorized by law to investigate or oversee the conduct of Lifeworks;
- an appropriate health care accreditation organization responsible for standards of professional conduct; or
- an attorney retained by or on behalf of the whistleblower for the purposes of determining the disclosing whistleblower's legal options.

This rule only applies to whistleblower actions against Lifeworks, not actions to expose alleged illegal or wrongful conduct of another person.

### **DISCLOSURES BY CRIME VICTIMS:**

A Lifeworks Personnel member who is the victim of a criminal act may disclose limited PHI to a law enforcement official when such PHI is about the suspected perpetrator of the criminal act.

Please see the **Notice of Privacy Practices** form for further details.

References:

Minn. Stat. §13.04, subd. 3

Minn. Stat. §13.05, subd. 3, subd. 4

45 CFR § 164.512

45 CFR § 164.502

### **AUTHORIZATION FOR MARKETING, FUNDRAISING, OR OTHER SPECIFIC USES OR DISCLOSURES OF PHI:**

Lifeworks will require a specific authorization from the individual prior to disclosure and/or use of his/her PHI for any purposes not listed above, including:

- Marketing;
- Fundraising (more than demographic information, date of service, treating physician, outcome information, and health insurance status);
- Research (more than limited data sets);
- Psychotherapy Notes;
- Sale of PHI;
- Disclosure to persons not involved in the individual's care;
- Purposes not noted or covered by the NPP; or
- Purposes not listed above as either required or permitted.

Lifeworks staff will use reasonable means to verify the authenticity of any authorization prior to using or disclosing PHI per such authorization. Lifeworks staff will also verify the identity and authority of a person requesting PHI as required by HIPAA and Lifeworks Privacy Policies.

References:

45 CFR § 164.508

42 USC 17936

### **MINIMUM NECESSARY USE AND DISCLOSURE OF PHI:**

Lifeworks will make reasonable efforts to limit the use and disclosure of PHI to the minimum extent necessary to accomplish the applicable purpose. Lifeworks will grant access to PHI to Lifeworks Personnel based on the assigned job responsibilities and recommendations from the Human Resources Department and Information Technology Department. Lifeworks will grant access to PHI to Business Associates only to the extent required for the performance of their contracted duties. The access privileges will not exceed those necessary to accomplish the assigned tasks. Except for disclosures made for treatment purposes, all access to and uses and disclosures of PHI will be limited to the minimum extent necessary to accomplish the applicable purpose. When responding to a unique or otherwise non-routine request for disclosure, Lifeworks Personnel will review the request with the Quality and Compliance Manager to ensure Lifeworks discloses information in accordance with this minimum necessary standard.

References:

45 CFR § 164.502(b),  
45 CFR § 164.514(d)

### **RESTRICTION OF USES OR DISCLOSURES OF PHI:**

Lifeworks will give serious consideration to all requests by the legal representative of an individual (or the individual, if acting as his/her own guardian) for restrictions on uses and disclosures of PHI and will respond to such requests in accordance with the applicable Lifeworks Privacy Procedures and applicable law. Lifeworks is not required to comply with such requests or agree to such restrictions, except that Lifeworks must abide by the requested restriction if:

- the disclosure is for the purpose of carrying out payment or health care operations and is not otherwise required by law, and
- the PHI pertains solely to a health care item or service for which Lifeworks has been paid in full, either by the individual or by a person (other than a health plan) on behalf of the individual.

All Lifeworks Personnel will observe and comply with any such restriction that has been reviewed and approved by the Lifeworks Quality and Compliance Manager, who will communicate approved restrictions in accordance with the applicable Lifeworks Privacy Procedure. Individuals can request to end restrictions at any time by writing to the Lifeworks Quality and Compliance Manager.

Please see **Notice of Privacy Practices** form for further details. All requests regarding restrictions must be in writing and sent to:

**Connie Giles**  
**Quality and Compliance Manager**  
**Lifeworks Services**  
**2965 Lone Oak Drive, Suite 160**  
**Eagan, MN 55121**

References:

45 CFR § 164.522  
42 USC 17935(a)

### **ACCESS BY INDIVIDUAL TO PHI:**

Lifeworks will provide the individual with access to his/her PHI when he/she requests access, unless it has been determined by a competent medical authority that it would be harmful to him or her. Lifeworks will use all reasonable efforts to provide access promptly and in any event within the time frames established by HIPAA and MGDPA. Lifeworks will inform the individual of the location of his/her PHI if Lifeworks does not physically possess the PHI but knows where it is located. Certain PHI (psychotherapy notes; information compiled in reasonable anticipation of, or use in, a civil, criminal, or administrative action or proceeding; and protected information that is subject to law that prohibits access to PHI) is restricted by law and, under certain circumstances, may not be accessed by the individual and/or Lifeworks. Lifeworks will promptly notify the individual of the decision to agree or deny the request. Lifeworks may charge the individual a reasonable per-page cost for copies of PHI it makes at the individual's request. Please see the **Notice of Privacy Practices** form.

#### References:

Minn. Stat. § 13.04, subd. 3  
45 CFR § 164.524

### **ACCESS BY LEGAL REPRESENTATIVES:**

Lifeworks will allow a parent of a minor child, guardian, or other legal representative of an individual the same right to access PHI as the individual, except as provided by law (such as in cases of abuse, where granting access could endanger the individual or someone else). Lifeworks will observe the relevant state, local, and other applicable laws when disclosing information about minors to parents.

#### References:

Minn. Stat. § 13.04, subd. 3  
Minn. Stat. § 13.02, subd. 8  
45 CFR § 164.502(g)

### **AMENDMENT OF PHI:**

An individual (and his/her legal representative) has the right to request amendments to the individual's PHI or a record about the individual in a designated record set that is maintained by Lifeworks. Lifeworks requires individuals to make requests for amendments in writing and to provide a reason to support a requested amendment. The Lifeworks Quality and Compliance Manager will respond to all written requests for amendment of PHI in a timely manner in accordance with the requirements of state and federal law. Lifeworks will comply with all record keeping requirements of HIPAA, and will append or otherwise link an individual's request for an amendment with other information, such as Lifeworks' denial of the request and/or the individual's statement of disagreement, if any. Lifeworks will comply with HIPAA rules pertaining to future disclosures.

If Lifeworks is informed by another organization of an amendment to an individual's PHI, Lifeworks must amend the PHI by, at a minimum, identifying the records in the designated record set that are affected by the amendment and appending or otherwise providing a link to the location of the amendment.

If Lifeworks determines that a requested amendment is appropriate, it will make the correction and document a corresponding amendment of the PHI within the timeframe required by the

MGDPA. Lifeworks will also document the titles of the people or offices responsible for receiving and processing request for amendments by individuals, and retain the documentation in accordance with HIPAA. Lifeworks will provide a notice of corrections to the individual and any persons or organization that was previously provided with the incomplete or incorrect PHI.

References:

Minn. Stat. § 13.04, subd. 4

45 CFR § 164.526

### **CONFIDENTIAL/ALTERNATIVE COMMUNICATIONS OF PHI:**

An individual (and his/her legal representative) has the right to request alternative and confidential forms of communications relative to his/her PHI. Lifeworks will accommodate reasonable written requests for such confidential communication. Please see **Notice of Privacy Practices** form for further details.

References:

45 CFR § 164.522(b)

### **ACCOUNTING FOR DISCLOSURE OF PHI:**

An individual (and his/her legal representative) has the right to request an accounting of Lifeworks disclosures of the individual's PHI. Upon written request on behalf of the individual, the Lifeworks Quality and Compliance Manager will in a timely manner provide the requester with an accounting of all disclosures of PHI to the extent required by the HIPAA Privacy Rule and HITECH Act requirements. Lifeworks is not required by law to provide an accounting of disclosures: (1) that were authorized in writing by the individual; (2) to the individual; (3) made for the purpose of treatment, payment, or health care operations; (4) incidental to a use or disclosure that is otherwise permitted or required; (5) for Lifeworks' facility directory; (6) to law enforcement officials or correctional institutions having lawful custody of an inmate; (7) as part of a limited set of data; or (8) made for national security purposes. Likewise, Lifeworks is not required by law to provide an accounting of disclosures made more than 6 years prior to the date of request. Please see the **Notice of Privacy Practices** form for further detail.

References:

45 CFR § 164.528

### **MARKETING AND FUNDRAISING ACTIVITIES:**

Lifeworks will use or disclose PHI for marketing activities only after obtaining a valid authorization. "Marketing" is defined in the HITECH Act and generally means a communication about a product or service that encourages recipients of the communication to purchase or use the product or service, but excludes (among other things) communications for certain treatment and health care operations purposes, including case management or care coordination for an individual, or to direct or recommend alternative treatments, therapies, health care providers, or settings of care to the individual. Marketing in the form of a face-to-face communication or a promotional gift of nominal value does not require an authorization.

Lifeworks also considers as marketing the use of name and likeness (video, audio, image, and photograph) for publicity, education, and communications via the following delivery methods: video tape, DVD, and CD-ROM, broadcast and print media, advertising, the internet and

business applicable social media channels.

Lifeworks may use limited PHI about individuals for the purpose of raising funds for its own benefit without prior authorization. This PHI is limited to the following: (1) demographic information; (2) dates of service; (3) department of service information; (4) treating physician; (5) outcome information; and (6) health insurance status. Lifeworks must include in all fundraising materials a description of how the individual may opt out of receiving any further fundraising communications, and may not make fundraising communications to individuals who decide to opt out.

References:

45 CFR § 164.508(a)(3)

45 CFR § 164.514

42 USC 17936

### **DE-IDENTIFIED DATA AND LIMITED DATA SETS:**

Lifeworks may use and disclose PHI that has been properly de-identified (summary data), without authorization, for research, public health, or healthcare operations purposes. De-identified PHI means information that does not directly identify an individual, or that indirectly could be used to identify an individual. The Lifeworks Quality and Compliance Manager will comply with HIPAA requirements when making a determination that health information is not individually identifiable health information.

References:

Minn. Stat. § 13.02, subd. 19

Minn. Stat. § 13.05, subd. 7

45 CFR § 164.514

### **PRIVACY COMPLAINTS:**

Lifeworks Quality and Compliance Manager will promptly (and in any event, within timeframes required by law) respond to all written complaints relating to compliance by Lifeworks with federal and state privacy laws and with Lifeworks Privacy Policies. The Quality and Compliance Manager will notify the individual in writing of the results of the complaint. Please see the **Notice of Privacy Practices** form for further details.

References:

Minn. Stat. § 13.04, subd. 4

45 CFR § 164.530(d)

### **PROHIBITED ACTIVITIES:**

No Lifeworks Personnel or Business Associate may engage in any intimidating or retaliatory acts against persons who file complaints or otherwise exercise their privacy rights under state and federal regulations. No Lifeworks Personnel or Business Associate may require individuals to waive their privacy rights or condition treatment, payment, enrollment, or eligibility for benefits on the provision of an authorization to disclose PHI. Lifeworks employees and Business Associates may not receive direct or indirect compensation for disclosure of or access to PHI about an individual without his/her prior specific written authorization.

References:

45 CFR. § 164.530(g, h)

**VERIFICATION OF IDENTITY AND AUTHORITY:**

Lifeworks will verify the identity of any person or organization requesting PHI and the authority of such person or organization to receive a disclosure of or access to the PHI before such disclosure or access is granted.

References:

45 CFR § 164.514(d)

**MITIGATION:**

Lifeworks will, to the extent practicable, mitigate any harmful effect known to Lifeworks of a use or disclosure (by Lifeworks Personnel or a Business Associate) of PHI in violation of applicable privacy laws or the Lifeworks Privacy Policies and related procedures.

References:

45 CFR § 164.530(f)

**SAFEGUARDS:**

Lifeworks will implement appropriate administrative, technical, and physical safeguards to protect the privacy of PHI in any form, and to protect against intentional or unintentional use or disclosure in violation of applicable privacy laws or the Lifeworks Privacy Policies and related procedures. Please see **Lifeworks HIPAA Security Rule Policies** for further details.

References:

Minn. Stat. § 13.05, subd. 5

45 CFR § 164.530(c)

**BUSINESS ASSOCIATES:**

Lifeworks may share PHI with Business Associates only under the terms of a signed Business Associate Agreement (“**BAA**”) in a form approved by Lifeworks’ General Counsel. The term “Business Associates” is as defined in HIPAA.

In certain instances, Lifeworks may have access to third-party PHI as a Business Associate for a Covered Entity (defined by HIPAA). Lifeworks will always offer its pre-approved form of BAA to the third party, and if such BAA is not agreed upon, Lifeworks will enter into a BAA approved by both Lifeworks General Counsel and the third party. Lifeworks will comply with the terms of any signed BAA. Lifeworks will comply with all HIPAA and MGDPA requirements even in the absence of a signed Business Associate Agreement. Any BAA with a third party Covered Entity must be in a form approved by Lifeworks’ General Counsel.

References:

Minn. Stat. § 13.05, subd. 6

45 CFR. § 164.502(e)

42 USC 17934

42 USC 17938

**TRAINING AND AWARENESS:**

Lifeworks will train all Lifeworks Personnel who may have access to PHI on the Lifeworks Privacy Policies and related procedures. New Lifeworks Personnel who may have access to PHI will be

trained within one week of their start date, provided, however, that such New Lifeworks Personnel will not be given access to PHI until they have received such training. Existing Lifeworks Personnel who may have access to PHI will receive ongoing awareness training and will attend formal training at least annually. Lifeworks will document the training for which Lifeworks Personnel participate, including the date and topics of the training.

References:

45 CFR § 164.530(b)

### **SANCTIONS:**

Lifeworks will apply disciplinary sanctions to any Lifeworks Personnel who violate the Lifeworks Privacy Policies or any related procedures. Sanctions include disciplinary actions up to and possibly including termination of employment and reporting to law enforcement authorities. The sanctions are determined by the severity of each individual violation, potential violation and breach regarding PHI.

References:

Minn. Stat. § 13.09

45 CFR § 164.530(e)

42 USC 17939

### **RETENTION OF PRIVACY RECORDS:**

Lifeworks will retain all privacy records in accordance with the requirements of HIPAA, MGDPA and other applicable law, or such longer period specified by Lifeworks records retention policy.

References:

CFR § 164.530(j) & Minn. Statute § 13

### **COOPERATE WITH PRIVACY OVERSIGHT AUTHORITIES:**

Lifeworks will fully support and cooperate with oversight agencies such as the Office for Civil Rights of the Department of Health and Human Services during investigations and other efforts to ensure the protection of PHI. All Lifeworks Personnel are expected to cooperate fully with all such privacy compliance reviews and investigations.

References:

45 CFR § 164.512 (d)

### **BREACH NOTIFICATION:**

Lifeworks will promptly address breaches of unsecured PHI in compliance with the HIPAA Breach Notification Rules and other applicable laws. All Lifeworks Personnel that become aware of a breach, or suspected breach respecting PHI, must report it to their direct supervisor and/or the Quality and Compliance Manager. The direct supervisor, in turn, will promptly notify the Quality and Compliance Manager of the report. In the event of a breach respecting PHI, Lifeworks will provide notification of the breach to the affected individuals, and, in certain circumstances, the Secretary of the Department of Health and Human Services and/or to the media in accordance with the requirements of HIPAA and MGDPA. All media communications relating to breaches of unsecured PHI must be in compliance with the Lifeworks Crisis Communication Plan as specified in the Employee Handbook.

References:

Minn. Stat. §13.055  
45 CFR § 164.400-414  
42 USC 17932

### **RESOURCES USED TO COMPILE THIS DOCUMENT:**

The following are examples that are referenced within, or were used as a resource to create this document.

- Beaver, Kevin & Herold, Rebecca, (2004). *The Practical Guide to HIPAA Privacy and Security Compliance*. CRC Press LLC.
- Minnesota Government Data Practices Act, Overview, Updated July 2010.
- Website: [hhs.gov](http://hhs.gov); HITECH updates, Summary of Privacy and Security Rules, etc.
- Website: <http://www.hhs.gov/ocr/privacy/hipaa/understanding/coveridentities/hitechact.pdf> ; HITECH Act
- Website: <http://ecfr.gpoaccess.gov/cgi/t/text/text-idx?c=ecfr&sid=13b1d095dc07d04cee8de60554d44a26&rgn=div5&view=text&node=45:1.0.1.3.73&idno=45#45:1.0.1.3.73.5.27.6>; Electronic Code of Federal Regulations, Title 45, Part 164 (HIPAA).
- Sibley County: HIPAA Policies and Procedures, Administrative Forms, 2004.
- Washington University in St. Louis, HIPAA Privacy Policies, Procedures, and forms; updated 2003-2010; website and links: <https://secpriv.wusm.wustl.edu/privacy/HIPAA%20Privacy%20Policies/Forms/AllItems.aspx>
- HIPAA Privacy Rule (45 CFR Part 160 and Subparts A and E of Part 164)
- The Minnesota Government Data Practices Act
- The Minnesota Health Records Act

# ADDENDUM B--LIFEWORKS HIPAA SECURITY RULE POLICIES

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## **PURPOSE:**

The Lifeworks HIPAA Security Rule Policies specifically focuses on protecting the confidentiality, integrity, and availability of electronic protected health information (ePHI).

Confidentiality is the assurance that ePHI data is shared only among authorized persons or organizations.

Integrity is the assurance that ePHI data is not changed in an unauthorized way. Most important to HIPAA, data integrity ensures that Lifeworks can rely on the accuracy of the data.

Availability is the assurance that systems responsible for delivering, storing, and processing ePHI data are accessible by authorized persons when needed under both routine and emergency circumstances.

## **SCOPE:**

All Lifeworks Personnel are responsible for being aware of, and complying with these policies.

**"Lifeworks Personnel"** means paid and unpaid staff (including employees and contractors), volunteers, student interns, and other persons who work for or on behalf of Lifeworks.

**"Lifeworks Security Procedures"** means the various procedure documents referenced in these Lifeworks HIPAA Security Rule Policies.

## **EFFECTIVE DATE:**

Lifeworks Security responsibilities have been in effect since April 2003, the latest update is December 9, 2016.

## **EXPIRATION DATE:**

Lifeworks HIPAA Security Rule Policies has no expiration date. They will remain in effect until amended or replaced.

## **POLICY OWNER:**

The Director of Information Technology is assigned the responsibility of overseeing the Lifeworks HIPAA Security Rule Policies. Enforcement of these policies and subsequent procedures is managed by the Lifeworks Information Security Office (LISO). Please direct questions regarding these Policies to:

**Connie Giles**  
**Quality and Compliance Manager**  
**Lifeworks Services**  
**2965 Lone Oak Drive, Suite 160**  
**Eagan, MN 55121**

## **INTRODUCTION:**

HIPAA regulations cover both security and privacy. Security and privacy are distinct, but related.

- The **HIPAA Privacy Rule** focuses on the use and disclosure of individuals' health information, called "protected health information" or "PHI", by organizations subject to the Privacy Rule, such as Lifeworks. It also establishes rights of an individual to control the use of his or her personal information. The Privacy Rule covers the confidentiality of PHI in all formats including electronic, paper and oral. Confidentiality is an assurance that the information will be safeguarded from unauthorized disclosure. Lifeworks policies and procedures governing the use and disclosure of PHI are set forth in ***Lifeworks Privacy Policies***.
- The **HIPAA Security Rule** focuses on administrative, technical, and physical safeguards specifically as they relate to electronic PHI (ePHI). Protection of ePHI data from unauthorized access, whether external or internal, stored or in transit, is all essential to the Security Rule.

## **POLICIES:**

### **Administrative Safeguards**

#### **Security Management Process**

##### Risk Assessment

The Lifeworks Quality and Compliance Manager, in collaboration with the Director of Information Technology, shall establish procedures for and perform a Security Risk Assessment. The Security Risk Assessment shall include an accurate and thorough assessment of the potential risks and vulnerabilities to ePHI held by Lifeworks. The Risk Assessment shall be documented and identified risks shall then be mitigated by Lifeworks to the best of its abilities within the reasonable constraints of cost, staff, technical infrastructure, hardware, and software capabilities.

As part of the Security Risk Assessment, the Lifeworks Quality and Compliance Manager, in collaboration with Lifeworks department managers, shall perform system specific risk assessments of selected individual critical systems containing ePHI. These risk assessments shall be documented and shall provide a baseline for subsequent reviews.

Data owners shall assist with the Security Risk Assessment. On a continuing basis, the Lifeworks Quality and Compliance Manager shall implement a procedure to identify ePHI systems or categories of systems that warrant assessment by data owners who store, access, transmit, or receive electronic Protected Health Information (ePHI). Data owners shall review all systems and applications with ePHI for which they are responsible and evaluate their vulnerabilities to threats as outlined by Information Technology (IT). Analysis must be done to determine what technical, physical, and administrative safeguards are required and how best to implement those safeguards. In performing this analysis, data owners shall utilize procedures developed by the Lifeworks Quality and Compliance Manager.

##### Risk Management

Risks identified in the risk assessment process shall be added to the Lifeworks Enterprise Risk Management Plan. Threshold values shall be determined that indicate the severity of the

indicator based on the recorded value. These indicators shall be updated periodically and audited by the Lifeworks Quality and Compliance Manager.

Risks identified and added to the Lifeworks Enterprise Risk Management Plan shall be reviewed by the Lifeworks Executive Team.

#### **SANCTIONS:**

Lifeworks will apply disciplinary sanctions to any Lifeworks Personnel who violate the Lifeworks Security Policies or any related procedures. Sanctions include disciplinary actions up to and possibly including termination of employment and reporting to law enforcement authorities. The sanctions are determined by the severity of each individual violation, potential violation, and breach regarding PHI.

#### **INFORMATION SYSTEM ACTIVITY REVIEW:**

The Lifeworks Information Security Office (LISO) will develop systems and procedures to identify, track, and periodically audit ePHI Systems for compliance with all applicable laws, regulations, and Lifeworks policies and procedures including all HIPAA regulations. In addition, LISO will develop criteria for use in reporting aimed at identifying activity that deviates from HIPAA requirements.

#### **ACTIVITY REVIEW SCOPE:**

LISO will implement these procedures to review records of information system activity. LISO will work with system owners and administrators to ensure that compliance is achieved, and will examine the procedures used to review system logs.

In particular, LISO's activity review process shall include an audit of system activity logs and reports. This process may include a review of the following types of system activity information either as a full review, as a spot check, or sampling:

- Review of Security Incidents Response reports
- System user privileges grants and changes logs
- User-level system access logs
- User level system activity logs
- User level transaction log reports
- Exception reports

#### **WORKFORCE SECURITY:**

Lifeworks shall adopt procedures to ensure that all members of the workforce, including Lifeworks Personnel, have appropriate access to ePHI and do not have unnecessary or inappropriate access. This includes procedures to ensure workforce members that work with, or have access to, ePHI are appropriately authorized and supervised. Lifeworks will use its **Minimum Necessary Use and Disclosure of PHI** policy, which is one of its HIPAA Privacy Policies, and other policies as appropriate, as the basis for the type and extent of authorized access to ePHI.

Lifeworks Personnel shall not be allowed access to ePHI or to areas where ePHI might be accessed until proper authorization is granted. Only authorized Lifeworks Personnel, who have a need for specific information in order to fulfill their respective job responsibilities, shall be authorized to access ePHI or areas where ePHI might be accessed.

To ensure that workforce access to ePHI is appropriate, each supervisor shall review the access levels of his or her staff on a periodic basis and make revisions as necessary. Lifeworks shall adopt procedures to terminate access to ePHI when access to ePHI is no longer appropriate, including when the employment or engagement of Lifeworks Personnel ends.

### **INFORMATION ACCESS MANAGEMENT:**

The Lifeworks IT department is responsible for systems that collect, maintain, use or transmit ePHI and will grant access to system users following a formal request made by the supervisor of the specific user and/or data owner. Access to the system(s) will be limited to specific, defined, documented and approved applications and levels of access rights.

#### **Access Authorization**

Requests for granting workforce access to ePHI or systems that contain ePHI must be authorized by the supervisor of the specific user and/or data owner.

#### **Access Establishment and Modification**

Once a supervisor has authorized and approved access of Lifeworks Personnel to ePHI or systems that contain ePHI, the supervisor shall make a formal request to the Lifeworks IT department. The Lifeworks IT department is responsible for systems that collect, maintain, use or transmit ePHI, and will then grant access as authorized. Access to the system(s) will be limited to specific, defined, documented and approved applications and levels of access rights.

When a Lifeworks Personnel member's access to ePHI or systems that contain ePHI must be modified (including increases, reductions, and terminations to access), the supervisor of the specific Lifeworks Personnel member and/or data owner shall notify the Lifeworks IT department of such modification. The Lifeworks IT department shall then modify the Lifeworks Personnel member's access rights as appropriate.

#### **Security Awareness and Training**

Lifeworks will train all Lifeworks Personnel who may have access to PHI/ePHI on the Lifeworks Privacy and HIPAA Security Rule Policies and related procedures. New Lifeworks Personnel who may have access to PHI/ePHI will be trained within one week of their start date, provided, however, that such new Lifeworks Personnel will not be given access to PHI/ePHI until they have received such training. Existing Lifeworks Personnel who may have access to PHI/ePHI will receive ongoing awareness training and will attend formal training at least annually. Lifeworks will document the training for which Lifeworks Personnel participate, including the date and topics of the training.

#### **Security Reminders**

Lifeworks will provide HIPAA training to all Lifeworks Personnel who have access to PHI and ePHI. Training will be conducted regularly and will include regular security reminders regarding changes to Lifeworks Privacy and HIPAA Security Rule Policies, and new or updated state and federal regulations.

#### **Security Incident**

A "Security Incident" is defined as an attempted or successful unauthorized access, use, disclosure, modification, or destruction of information or interference with a Lifeworks system (including but not limited to hardware, software, and data applications). (45 CFR 164.304) All

incidents, threats, or violations that affect or may affect the confidentiality, integrity, or availability of ePHI are considered Security Incidents.

Security Incidents must be reported to the Lifeworks Information Security Office (LISO) as soon as discovered. Lifeworks shall develop procedures for the reporting, processing, and responding to suspected or known Security Incidents so that Lifeworks may investigate, mitigate, and report such Security Incidents as appropriate. All Lifeworks Personnel shall be trained on these Security Incident policies.

### **Contingency Plan**

LISO will establish (and implement as needed) procedures for responding to an emergency or other occurrence (for example, fire, vandalism, system failure, and natural disaster) that damages systems that contain ePHI. The Contingency Plan policies and procedures will include a Data Backup Plan, a Disaster Recovery Plan, an Emergency Mode Operation Plan, a Testing and Revision Procedure, and an Applications and Data Criticality Analysis.

### **Evaluation**

Lifeworks will evaluate the technical and non-technical implementations of its HIPAA Security Rule Policies and procedures. This evaluation will be completed on an "as needed" basis, but not less than once a year. The purpose of this evaluation will be to determine the effectiveness of the policies as well as to ensure compliance with state and federal regulations such as HIPAA.

This evaluation will occur annually, as well as when any of the following events occur:

- There is a change to any state or federal regulation that may affect the HIPAA Security Rule Policies
- There is a new state or federal regulation that may affect the HIPAA Security Rule Policies
- Lifeworks experiences an environmental or operational change that may affect the security of ePHI
- There has been a significant breach of security or other security incidents within Lifeworks
- Any other time the Quality and Compliance Manager determines there is a need to evaluate the HIPAA Security Rule Policies

### **BUSINESS ASSOCIATES AGREEMENTS:**

Lifeworks shall enter into a written agreement with any person or entity ("Business Associate") that performs functions or activities on behalf of, or provides certain services to, Lifeworks that involves access to PHI. These written agreements ("Business Associate Agreements") shall ensure that the Business Associate will appropriately safeguard PHI and shall clarify and limit, as appropriate, the permissible uses and disclosures of PHI by the Business Associate. Lifeworks requires all Business Associate Agreements to be modified with Addendums or revised for compliance with the HIPAA Security Rule.

### **PHYSICAL SAFEGUARDS:**

#### **Facility Access Controls**

Lifeworks will establish and implement policies and procedures to limit the physical access to its electronic information systems and the facilities in which they are housed, while ensuring that properly authorized access is allowed.

Lifeworks will allow authorized facility access in support of restoration of lost data under the Disaster Recovery Plan, Emergency Plan, and Contingency Operations Plan in the event of an

emergency.

### **Facility Security Plan**

Lifeworks safeguards the facilities (including the equipment present in all such facilities) and premises that house systems that maintain ePHI from unauthorized physical access, tampering and theft.

Lifeworks controls and validates a person's access to facilities based on their role or function, including visitor control and control of access to software programs for testing and revision.

### **Maintenance Record**

The Director of Information Technology will identify the physical components that are essential to security. The Director of Information Technology must oversee any security-relevant physical repair or modifications. A maintenance record must be created for each repair or modification made to the physical site, facility, or building. Such information must be securely stored.

### **Workstation Use**

Lifeworks is committed to maintaining high workstation security standards for all of its workstation locations. All users of Lifeworks information resources are expected to utilize such resources in a responsible, ethical, and legal manner consistent with Lifeworks policies. Lifeworks electronic resources may not be used to damage, impair, disrupt, or in any way purposefully, recklessly, or negligently damage Lifeworks networks or computers or external networks or computers.

Emails and databases that include ePHI may be accessed only by authorized Lifeworks Personnel. Lifeworks Personnel are permitted to access Lifeworks systems using remote access. Lifeworks Personnel are permitted to use personally owned technology personal computers to access Lifeworks systems that contain ePHI, including email, through a secure remote access gateway. Lifeworks Personnel are not permitted to use personally owned smartphones or tablets to access Lifeworks systems that contain ePHI, including email.

Lifeworks requires reasonable physical safeguards be implemented for all workstations and other electronic devices that access, collect, maintain, use or transmit ePHI, including personal computers. Physical safeguards should reasonably prevent the theft of or unauthorized access to electronic devices that access, store, or transmit ePHI. Physical safeguards required for all electronic devices include:

- Requiring users log-in with unique passwords
- Automatically logging users off when they leave a computer for an extended period of time
- Using and continuously updating antivirus software
- Identifying all of the workstations that may be used to access ePHI (laptops, desktop computers, personal devices) and tracking usage

### **Device and Media Controls**

Lifeworks will monitor and track the receipt and removal of hardware and electronic media that contain ePHI into and out of a facility, and the movement of these items within a facility.

## **Media Reuse and Disposal**

Prior to disposal of hardware or media that contains or previously contained ePHI, the IT department will securely overwrite all of the data on the device and/or media will be physically destroyed.

Prior to reuse of hardware or media that contains or previously contained ePHI, the IT department will take appropriate steps to erase all data. For example, when a Lifeworks Personnel member leaves Lifeworks, their computer must be re-imaged before being assigned to a new employee.

The IT department will document the steps taken in compliance with this media reuse and disposal policy.

## **TECHNICAL SAFEGUARDS:**

### **Access Controls**

The IT department, responsible for systems that collect, maintain, use or transmit ePHI, will grant access to system users following a formal request made by the supervisor of the specific user and/or data owner. Access to the system(s) will be limited to specific, defined, documented, and approved applications and levels of access rights.

Every user of systems holding or using ePHI shall have a unique user name and password to allow Lifeworks to identify and track user access. When an electronic session has become inactive for a designated period of time, the session is automatically terminated. To restart a session, users are required to sign in using their username and password.

Lifeworks shall develop policies and procedures to ensure that ePHI is accessible by approved Lifeworks Personnel in an emergency situation in which normal access to systems and ePHI is not available. Emergency situations include, but are not limited to, fire, vandalism, terrorism, system failure, natural disaster, or other situations in which there is a loss of or damage to data and systems containing ePHI.

### **Audit Controls**

Lifeworks will identify critical systems that require event auditing capabilities and will implement auditing mechanisms on such systems. At a minimum, event auditing capabilities will be enabled on all systems that process, transmit, and/or store ePHI. Events to be audited may include, and are not limited to, logins, logouts, and file accesses, deletions, and modifications.

### **Integrity Controls**

Lifeworks requires that critical ePHI be protected against unauthorized alteration or destruction. Lifeworks will maintain integrity controls to ensure the validity of information used, stored, and disclosed by Lifeworks.

### **Authentication**

To ensure that all individuals or entities that access ePHI have been appropriately authenticated, procedures must be implemented that address the following:

- Lifeworks Personnel seeking access to any network, system, or application that contains ePHI must satisfy a user authentication mechanism such as unique user identification and password, biometric input, or a user identification smart card to verify their authenticity.
- Lifeworks Personnel seeking access to any network, system, or application must not misrepresent themselves by using another person's User ID and Password, smart card, or other authentication information.
- Lifeworks Personnel are not permitted to allow other persons or entities to use their unique User ID and password, smart card, or other authentication information.
- A reasonable effort must be made to verify the authenticity of the receiving person or entity prior to transmitting ePHI.

## **TRANSMISSION CONTROLS:**

### **Transmission Integrity**

Lifeworks will maintain integrity controls to ensure the validity of information transmitted over the network infrastructure.

Lifeworks will determine the types of information that require technical security measures to guard against unauthorized access when such information is being transmitted over open and other networks. This information includes, but is not limited to ePHI. Lifeworks will determine the types of integrity controls to implement to secure ePHI transmitted over open and other networks. The IT department shall be responsible for implementing such controls.

### **Transmission Encryption**

Lifeworks will:

- Use encryption as much as possible to protect data
- Encrypt all outbound emails containing a Social Security Number
- Use next-generation firewall(s) to secure the corporate network
- Deploy Intrusion Prevention Systems (IPS)

### **Rights and Responsibilities**

All Lifeworks Personnel, as defined in Scope, are responsible for being aware of and complying with these policies. Specific duties for implementing these policies can be found in the corresponding Security Processes and Procedures. Non-compliance with these policies will result in disciplinary actions as detailed in the Disciplinary Actions Policy. There are both civil and criminal penalties for failure to comply with HIPAA regulations.

Lifeworks will retain any policies, procedures, and other security program documentation for six years from the date when it was last in effect. Lifeworks will make this policy available to anyone who is responsible for implementing them, and will review and update these policies periodically and in response to environmental or operational changes affecting the security of ePHI.

## Resources

HIPAA Security Rule (45 CFR Part 160 and Subparts A and C of Part 164)

Beaver, Kevin and Herold, Rebecca, (2004). The Practical Guide to HIPAA Privacy and Security Compliance. CRC Press LLC.

<http://www.hhs.gov/ocr/privacy/hipaa/understanding/srsummary.html>

<http://www.creighton.edu/doit/policies/hipaa/index.php>

<http://policies.georgetown.edu/hipaa/sections/security/62953.html>

<http://hipaa.yale.edu/security/index.html#policyandguidelines>

# ADDENDUM C—FRAUD, WASTE AND ABUSE POLICY

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## **PURPOSE:**

In addition to general legal compliance, Lifeworks must ensure at all times that conduct does not violate applicable fraud and abuse laws, including the federal and state False Claims Act, as well as section 1902(a)(68)(A) of the Social Security Act. These laws help prevent and detect fraud, waste, and abuse in the public health care programs that support services, and benefit the public and the people Lifeworks serves by ensuring public programs pay for legitimate and quality health and social services.

## **SCOPE:**

This policy applies to all employees, officers, Board members, contractors, volunteers, business associates, and other stakeholders ("Personnel").

## **POLICY:**

It is the Policy of Lifeworks that all Personnel will comply with applicable laws and best practice respecting the prevention, detection and reporting of fraud, waste and abuse in connection with Lifeworks programs and the provision of services to Lifeworks clients.

In particular, no Lifeworks Personnel shall engage in (or assist other to engage in) any of the following prohibited practices:

- Submitting false or misleading claims to the government or to a third party or other payer. This would include submitting claims for services that were not actually provided, claims which characterize the service differently than the service actually provided, or claims which do not otherwise comply with applicable billing rules.
- Making false representations to any person or entity to obtain payment for any service or to gain or retain participation in a program. All communication with government and third party or their payers must be truthful and accurate. Lifeworks receives government money – all time cards, time studies, attendance records, and other applicable documentation must be filled out accurately.
- Failing to properly document service provided.
- Offering anything, in cash or in kind, to obtain or encourage referrals. Any arrangement, contract, gift, or social engagement with anyone who may be a referral source (such as a case manager) must be approved by the President of Lifeworks or Senior Vice President of Services and Operations.
- Offering anything, in cash or in kind, to any individual we serve or potential client to influence the individual to attend a program or otherwise receive services from Lifeworks.

In addition, all Personnel shall promptly report any suspected violations of these prohibitions to the Director of Quality, Compliance and Continuous Improvement and shall cooperate with any investigations of such matters by the Director of Quality, Compliance and Continuous Improvement and legal counsel.

## **RIGHTS AND RESPONSIBILITIES:**

The penalties for violating this Policy, even unintentionally, can be extremely high for Lifeworks and potentially for those involved in the violation. Accordingly, compliance with this Policy will be the responsibility of all employees, as well as all directors, Board members, officers, volunteers, and contractors.

Lifeworks must maintain documentation that upon employment and annually thereafter, staff providing a service have attested to reviewing and understanding the following statement: "It is a federal crime to provide materially false information on service billings for medical assistance or services provided under a federally approved waiver plan as authorized under Minnesota Statutes, sections 256B.0913, Section 256B.092, and 256B.49."

The Board will be responsible to understand the content of this Policy and exercise reasonable oversight.

The Chief Executive Officer (CEO) will serve as the Compliance Officer, having responsibility for enterprise-wide compliance, ethics, and business practices, including this policy. The CEO will designate a Director of Quality, Compliance and Continuous Improvement to monitor and report on matters pertaining to compliance with this policy.

The members of the Executive Leadership Team will be responsible for assuring the implementation of this policy in their respective management areas.

The Director of Quality, Compliance and Continuous Improvement will: (1) provide and coordinate training of personnel relative to the organization's procedures for addressing allegations of fraud, waste, abuse and other wrongdoing; (2) investigate all reports of violations of this Policy; (3) as required by law (and with advice of counsel, as appropriate) report any violations of this Policy to appropriate authorities; and (4) have authority and ability to report violations of this Policy by the CEO or other high-level managers directly to the Board of Directors.

At least once per year, the CEO and/or the Director of Quality, Compliance and Continuous Improvement will report to the Board any substantiated fraud, waste, or abuse situations and subsequent reports to the DHS Office of the Inspector General (OIG).

Disregarding or failing to comply with this Policy could lead to disciplinary action, up to and including, possible termination.

## **RESOURCES:**

CARF Accreditation Handbook

Fraud, Waste and Abuse Policy from the State of Minnesota

Deficit Reduction Act of 2005

Employee Handbook

Internal Review Procedure

# ADDENDUM D—DRUG & ALCOHOL FREE WORKPLACE POLICY FOR BASIC SERVICES

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## **POLICY:**

Lifeworks Services, Inc. does not permit employees, subcontractors, and volunteers to be under the influence of alcohol, or illegal drugs or impaired by any chemical or prescription/legal drug while on duty, transporting person(s) served, accompanying them into the community. The policy applies to all employees providing basic services under the Personal Support/Respite Program.

## **PROCEDURE:**

- All employees are expected to report for work free from the effects of illegal drugs and alcohol.
- All employees must be free from the abuse of prescription/legal drugs or being in any manner under the influence of a chemical that impairs their ability to provide services or care.
- Employees also must notify their responsible party and Lifeworks supervisor of the use of prescribed medications or over-the-counter medications that may affect the individual's ability to work with vulnerable people or in any other way adversely affect the employee's ability to function while on the job.
- The use, possession, sale, distribution, transportation, or being under the influence of, drugs or alcohol while working is strictly prohibited.
- All employees are expected to report to their responsible party and Lifeworks supervisor any observations of other employees engaging in activities that are in direct violation of this policy including but not limited to: suspected alcohol and drug possession, use or distribution thereof, odor of alcohol on the breath, observations of impaired motor skills, speech, unusual behavior or appearance.
- Employees who engage in any of the prohibited conduct listed above are in violation of this policy and are subject to corrective action up to and including termination at Lifeworks.
- Any employee convicted of criminal drug use or activity must notify their Lifeworks supervisor no later than five (5) days after the conviction. Criminal conviction for the sale of narcotics, illegal drugs or controlled substances will result in corrective action up to and including termination.
- Lifeworks designated staff person will notify the appropriate law enforcement agency when we have reasonable suspicion to believe that an employee may have illegal drugs in his/her possession while on duty during work hours. Where appropriate, we will also notify licensing boards.
- Employees needing help with drug or alcohol dependency are encouraged to seek assistance through our Employee Assistance Program, which is available to employees. The number is 1-877-757-7587.

# ADDENDUM E—INCIDENT RESPONSE, REPORTING AND REVIEW POLICY FOR BASIC SERVICES

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## **POLICY:**

Lifeworks Services, Inc. will respond to incidents as defined in MN Statutes, section 245D.02, subdivision 11, that occur while providing services to protect the health and safety of and minimize risk of harm to the person(s) served. Staff will address all incidents procedure outlined in this policy and act immediately to ensure the safety of persons served. After the situation has been resolved and/or the person(s) involved are no longer in immediate danger, staff will complete the necessary documentation in order to comply with licensing requirements.

## **PROCEDURE:**

### **Defining Incidents**

A. An incident is defined as an occurrence which involves a person and requires the program to make a response that is not a part of the program's ordinary provision of services to that person, and includes:

1. Serious injury of a person:
  - a. Fractures
  - b. Dislocations
  - c. Evidence of internal injuries
  - d. Head injuries with loss of consciousness
  - e. Lacerations involving injuries to tendons or organs and those for which complications are present
  - f. Extensive second or third degree burns and other burns for which complications are present
  - g. Extensive second or third degree frostbite and others for which complications are present
  - h. Irreversible mobility or avulsion of teeth
  - i. Injuries to eyeball
  - j. Ingestion of foreign substances and objects that are harmful
  - k. Near drowning
  - l. Heat exhaustion or sunstroke
  - m. All other injuries considered serious by a physician involving complications of a previous injury or medical treatment
2. Death of person served.
3. Any medical emergency, unexpected serious illness, or significant unexpected changes in an illness or medical condition of a person that requires the program to call "911," physician treatment, or hospitalization.
4. Any mental health crisis that requires the program to call "911," or a mental health crisis intervention.
5. An act or situation involving a person that requires the program to call "911," law enforcement, or the fire department.
6. A person's unauthorized or unexplained absence from a program.
7. Conduct by a person served against another person served that:

- a. Is so severe, pervasive, or objectively offensive that it substantially interferes with a person's opportunities to participate in or receive service or support
  - b. Places the person in actual and reasonable fear of harm
  - c. Places the person in actual and reasonable fear of damage to property of the person
  - d. Substantially disrupts the orderly operation of the program
8. Any sexual activity between persons receiving services involving force or coercion.
- "Force" means the infliction, attempted infliction, or threatened infliction by the actor of bodily or commission or threat of any other" crime by the actor against the complainant or another, harm which (a) causes the complainant to reasonably believe that the actor has the present ability to execute the threat and (b) if the actor does not have a significant relationship to the complainant, also causes the complainant to submit
  - "Coercion" means words or circumstances that cause the complainant reasonably to fear that the actor will inflict bodily harm upon, or hold in confinement, the complainant or another, or force the complainant to submit to sexual penetration or contact, but proof of coercion does not require proof of a specific act or threat
9. Any use of manual restraint
10. A report of alleged or suspected child or vulnerable adult maltreatment

### **RESPONDING TO INCIDENTS:**

#### **A. Staff will respond to incidents according to the following plans:**

1. Serious injury
  - a. In the event of a serious injury, staff will provide emergency first aid following instructions received during training
  - b. Summon additional staff, if they are immediately available, to assist in providing emergency first aid or seeking emergency medical care
  - c. Seek medical attention, including calling "911" for emergency medical care, as soon as possible
2. Death
  - a. If staff are alone, immediately call "911" and follow directives given to you by the emergency responder
  - b. If there is another person(s) with you, ask them to call "911", and follow directives given to you by the emergency responder
3. Medical emergency, unexpected serious illness, or significant unexpected change in an illness or medical condition
  - a. Assess if the person requires the program to call "911", seek physician treatment, or hospitalization.
  - b. When staff believes that a person is experiencing a life threatening medical emergency they must immediately call "911"
  - c. Staff will provide emergency first aid as trained or directed until further emergency medical care arrives at the program or the person is taken to a physician or hospital for treatment
4. Mental health crisis
  - a. Staff will contact "911," a mental health crisis intervention team, or a similar mental health response team or service when available and appropriate, and explain the situation and that the person is having a mental health crisis
  - b. Staff will follow any instructions provided by the "911" operator or the mental health crisis intervention team contact person

5. Requiring "911," law enforcement, or fire department
  - a. For incidents requiring law enforcement, or fire department, staff will call "911"
  - b. For non-emergency incidents requiring the law enforcement, staff will call the non-emergency law enforcement number in that area
  - c. For non-emergency incidents requiring the fire department, staff will call the non-emergency fire department number in that area
  - d. Staff will explain to the need for assistance to the emergency personnel
  - e. Staff will answer all questions asked and follow instruction given by the emergency personnel responding to the call
6. Unauthorized or unexplained absence
  - a. If the person has a specific plan outlined in his/her coordinated services and support plan addendum to address strategies in the event of unauthorized or unexplained absences that procedure should be implemented immediately, unless special circumstances warrant otherwise
  - b. An immediate and thorough search of the immediate area that the person was last seen will be completed by staff
  - c. If after no more than 15 minutes, the search of surrounding area is unsuccessful, staff will contact law enforcement authorities
  - d. After contacting law enforcement, staff will notify the legal representative
  - e. The legal representative will continue to monitor the situation until the individual is located
  - f. If there is reasonable suspicion that abuse and/or neglect led to or resulted from the unauthorized or unexplained absence, staff will report immediately in accordance with applicable policies and procedures for reporting and reviewing maltreatment of vulnerable adults or minors
7. Conduct of the person
  - a. Follow the persons individualized strategies in a person's coordinated service and support plan (CSSP), CSSP Addendum and positive support strategies and techniques
  - b. After the situation is brought under control, question the person(s) as to any injuries and visually observe their condition for any signs of injury. If injuries are noted, provide necessary treatment and contact medical personnel if indicated
8. Sexual activity involving force or coercion
  - a. Staff will follow any procedures as directed by the Individual Abuse Prevention Plans and/or Coordinated Service and Support Plan Addendums, as applicable
  - b. Instruct the person in a calm, matter-of-fact, and non-judgmental manner to discontinue the activity. Do not react emotionally to the person's interaction. Verbally direct each person to separate area
  - c. If the person does not respond to a verbal redirection, intervene to protect the person from force or coercion, following the EUMR Policy as needed
  - d. If the persons are unclothed, staff will provide them with a robe or other appropriate garment and will discourage the person from bathing, washing, changing clothing or redressing in clothing that they were wearing
  - e. Staff will call "911" in order to seek medical attention if necessary and inform law enforcement
  - f. To the extent possible, staff will visually examine persons served for signs of physical injury and document any findings
  - g. If the incident resulted in injury, staff will provide necessary treatment according to their training

9. Emergency use of manual restraint (EUMR)
  - a. Follow the EUMR Policy
10. Maltreatment
  - a. Follow the Maltreatment of Vulnerable Adults and Minors Reporting Policy

## **REPORTING INCIDENTS:**

### **A. Completing a report**

1. Incident reports will be completed as soon as possible after the occurrence, but no later than 24 hours after the incident occurred or the program became aware of the occurrence. The written report will include:
  - a. The name of the person or persons involved in the incident
  - b. The date, time, and location of the incident
  - c. A description of the incident
  - d. A description of the response to the incident and whether a person's coordinated service and support plan addendum or program policies and procedures were implemented as applicable
  - e. The name of the staff person or persons who responded to the incident
- f. The results of the review of the incident (see section IV)
2. If the incident involves more than one person, this program will not disclose personally identifiable information about any other person when making the report to the legal representative or designated emergency contact and case manager, unless this program has consent of the person. The written report will not contain the name or initials of the other person(s) involved in the incident

### **B. Reporting incidents to team members**

1. All incidents must be reported to the person's legal representative or designated emergency contact and case manager:
  - a. Within 24 hours of the incident occurring while services were provided
  - b. Within 24 hours of discovery or receipt of information that an incident occurred
  - c. As otherwise directed in a person's coordinated service and support plan or coordinated service and support plan addendum
2. This program will not report an incident when it has a reason to know that the incident has already been reported
3. Any emergency use of manual restraint of a person must be verbally reported to the person's legal representative or designated emergency contact and case manager within 24 hours of the occurrence. The written report must be completed according to the requirements in the program's emergency use of manual restraint policy

### **C. Additional reporting requirements for deaths and serious injuries**

1. A report of the death or serious injury of a person must be reported to the Department of Human Services Licensing Division
2. A report must be made within 24 hours of the death or serious injury occurring while services were provided or within 24 hours of receipt of information that the death or serious injury occurred
3. This program will not report a death or serious injury when it has a reason to know that the death or serious injury has already been reported to the required agencies

### **D. Additional reporting requirements for maltreatment**

1. When reporting maltreatment, this program must inform the case manager unless there is reason to believe that the case manager is involved in the suspected maltreatment
2. The report to the case manager must disclose the nature of the activity or occurrence reported and the agency that received the maltreatment report

- E. Additional reporting requirements for emergency use of manual restraint (EUMR)
1. Follow the EUMR Policy

### **REVIEWING INCIDENTS:**

- A. Conducting a review of incidents and emergencies
1. The review will be completed by Lifeworks Incident Review Committee
  2. The review will be completed **within 5 working days of receiving the incident**
  3. The review will ensure that the written report provides a written summary of the incident
  4. The review will identify trends or patterns
  5. When corrective action is needed, a staff person will be assigned to take the corrective action within a specified time period
- B. Conducting an internal review of incident reports of deaths and serious injuries
1. The review will be completed by Lifeworks Incident Review Committee
  2. The review will be completed **within 30 calendar** days of the death or serious injury
  3. The internal review must include an evaluation of whether:
    - a. Related policies and procedures were followed
    - b. The policies and procedures were adequate
    - c. There is need for additional staff training
    - d. The reported event is similar to past events with the persons or the services involved to identify incident patterns
    - e. There is need for corrective action by the program to protect the health and safety of the persons receiving services and to reduce future occurrences
  4. Based on the results of the internal review, the program must develop, document, and implement a corrective action plan designed to correct current lapses and prevent future lapses in performance by staff or the program, if any
  5. The internal review of all incidents of emergency use of manual restraints must be completed according to the requirements in the program's emergency use of manual restraints policy

### **RECORD KEEPING PROCEDURES:**

- A. The review of an incident will be documented on the "Incident Review Committee quarterly analysis of Incidents" form and will include identifying the summary of incidents
- B. Incident reports will be maintained in Human Resources Department