



CALIFORNIA
PARTICIPANT DIRECTED SERVICES
PARTICIPANT HANDBOOK

CO EMPLOYER OPTION



Welcome and thank you for choosing Mains'l as your financial management services company (FMS). We look forward to working with you.

The purpose of this handbook is to:

- Provide information to guide you through the enrollment process with Mains'l.
- Provide information to assist you in managing employees in your role as a co-employer with Mains'l.
- Provide you with policies and procedures for using and managing your services.

Enclosed is the paperwork to enroll with Mains'l as your FMS provider. Please read the documents, complete, sign and date, and return to us.

1. New Consumer Information Form
2. Consent Form
3. Notice of Privacy Practices Acknowledgement of Receipt
4. Employee Job Description

Please note: Services cannot begin and employees may not work until you receive notification from Mains'l Services that:

- 1) Consumer enrollment is complete**
- 2) Employee has been cleared to begin work**
- 3) Authorization has been received from the regional center.**

Any services provided before this and any employee hours worked would be unauthorized and will not be able to be paid.

Please read through the rest of the handbook and let us know if you have any questions. The rest of the packet contains information for you to keep and use as a resource in managing your services.

- Notice of Privacy Practices for Consumers
- FMS Program Description- Co Employer Option
- Hiring and Managing Employees – Human Resources 101
- Payroll Calendar & Payroll Policy and Procedure.

Thank you for choosing Mains'l as your partner in managing your participant directed services. We appreciate you!

Sincerely,

Your Participant Directed Services Manager Team
(866) 767-4296



Participant Directed Services Manager
7000 78th Ave N
Brooklyn Park, MN 55445
Direct: 763-416-9113 or 866-767-4296
Fax: 763-416-9195
Email: JMBergquist@mainsl.com

NEW CONSUMER INFORMATION

Consumer Information:

Name: UCI# DOB
Address:
City: Zip:
Home Phone: Cell:

Family:

Name: Language:
Relationship: E-mail:
Address:
City: Zip:
Home Phone: Cell:

Service Coordinator:

Name: Regional Center
Phone: E-mail:

Authorization:

Service Type(s) : FEA Co Employer
Hours: per Day Week
Month Quarter
First Aid & CPR Required ? Yes No

Notes/Other info from Service Coordinator

Empty box for notes/other info from service coordinator

OFFICE USE ONLY:
Date referral received:
Date Intake Forms sent: by



NOTICE OF PRIVACY PRACTICES ACKNOWLEDGEMENT OF RECEIPT

Name of person receiving services: _____

By signing this form, you acknowledge receipt of the *Notice of Privacy Practices* of Mains'l. Our *Notice of Privacy Practices* provides information about how we may use and disclose your protected health information. We encourage you to read it in full.

Our *Notice of Privacy Practices* is subject to change. If we change our notice, we will send you a copy of the revised notice and post it on our website at www.mainsl.com.

If you have any question about our *Notice of Privacy Practices*, please contact human resources at 763-416-9134 or Mains'l, 7000 78th Ave N, Brooklyn Park MN 55445.

I acknowledge receipt of the *Notice of Privacy Practices* of Mains'l.

MANAGING PARTY SIGNATURE

DATE

JOB TITLE: Personal Attendant

personal attendant definition ([IWC Order 15-2001](#)) "Personal attendant" includes babysitters and means any person employed by a private householder or by any third party employer recognized in the healthcare industry to work in a private household, to supervise, feed, or dress a child or person who by reason of advanced age, physical disability, or mental deficiency needs supervision. The status of "personal attendant" shall apply when no significant amount of work other than the foregoing is required.

Employees will at all times ensure the health and safety of the individual they are working with.

REPORTING RELATIONSHIP

Employees will report directly to the managing party/supervisor/person receiving services. Employees are responsible for reporting any suspected verbal, emotional, physical, or financial abuse, as well as any suspected neglect, within 24 hours of initial knowledge of the abuse or neglect situation. Employees will contact the FMS Manager as soon as possible if there is a serious injury or hospitalization of the person they work with.

ESSENTIAL JOB DUTIES AND RESPONSIBILITIES:

CORRESPONDENCE/MAIL (what role will the employee play in answering your phone, opening your mail, computer email, is personal use of home telephone allowed)

SCHEDULE (what are your expectations around shift timelines, notification of tardiness or inability to work, consequences for consistent missed work)

TIMESHEETS

Timesheets must be completed by the employee and approved by the managing party by the due dates given at orientation. Timesheets must be filled out correctly and completely to be paid on time. Timesheets are legal documents. Putting false information on a timesheet can result in termination of employment and fraud charges. Questions about payroll or timesheets should be directed to the FMS Manager.

KNOWLEDGE/EDUCATION/EXPERIENCE (what requirements or expectations do you have in regards to employee's knowledge and education)

Managing Party Signature _____ Date: _____

I have reviewed and agree to the responsibilities of the job on _____ date.

Employee Signature: _____ Print Name: _____



FINANCIAL MANAGEMENT SERVICES (FMS) PROGRAM DESCRIPTION CO-EMPLOYER OPTION

The Mains' I FMS Program employs staff chosen by the individual receiving services or their family member/managing party. In the FMS Co-Employer option, the consumer or family member is the person designated to manage the services and supervise the employee(s).

Refer to Mains' I Payroll Policy and Procedure, as well as Employee Selection and Employee Orientation Policies and Procedures, for guidelines and assistance around the selection and employment of employees.

Mains' I will enter into an agreement with the consumer or family at the time of enrollment. The agreement will define the roles and responsibilities of the consumer/family/managing party and Mains' I. Failure to comply with Mains' I and/or the California Department of Developmental Services policies and procedures may result in termination of services.

Services can begin after Mains' I has received the following:

- ✓ Mains' I enrollment paperwork
- ✓ Mains' I new employee paperwork
- ✓ Regional Center referral
- ✓ Regional Center service authorizations

Mains' I will bill the funding source(s) for the employer related costs and staffing provided to the individual receiving services. Mains' I distributes the dollars to the employees per Mains' I Payroll Policy and Procedure.

While employee selection is determined by the family, within guidelines, once an employee is hired they become an employee of Mains' I. Should the family determine that an employee is no longer appropriate to continue providing services in that setting, the employee continues to be employed by Mains' I. Mains' I would like to partner with the individual receiving services and their family as they dismiss any employees.



* Copy for you to keep

NOTICE OF PRIVACY PRACTICES FOR CONSUMERS

This notice takes effect April 14, 2003

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review this notice carefully.

The privacy of your protected health information is important to us.

WHAT'S INCLUDED IN THIS NOTICE

- ✓ Your Protected Health Information (PHI)
- ✓ Questions and Answers
- ✓ How We Safeguard Your Protected Health Information
- ✓ Permitted Uses and Disclosures of Protected Health Information
- ✓ Your Rights Concerning Your Protected Health Information

Your Protected Health Information

This **Notice of Privacy Practices** is directed to all consumers. It describes how we may collect, use and disclose your protected PHI, and your rights concerning your PHI. PHI includes:

- Medical information
- Individually identifiable information, such as;
 - ✓ Your name
 - ✓ Your address
 - ✓ Your telephone number
 - ✓ Your consumer number

We understand the sensitivity of privacy issues. We recognize that protecting the privacy and security of the PHI we obtain about you is an important responsibility.

We are required to maintain the privacy of your PHI and to provide you with this notice about our legal duties and privacy practices. We will abide by the privacy practices described in this notice.

- We reserve the right to change our privacy practices and the terms of this notice.
- We will send a new notice to you prior to making a significant change in our privacy practices.
- Any changes will apply to all information we have, including PHI created or received before we change this notice.

Minnesota Patient Consent for Disclosure

For most disclosures of your health information we are required by State of Minnesota Laws to obtain a written consent from you, unless the disclosure is authorized by Law. This consent may be obtained at the beginning of your treatment, during the first delivery of health care service, or at a later point in your care, when the need arises to disclose your health information to others outside of our organization.

How We Safeguard Your Protected Health Information

We are committed to maintaining the security and confidentiality of the information we receive on your behalf. We maintain physical, electronic, and procedural safeguards that comply with Federal and State laws to protect information against unauthorized access and use.

The Privacy Officer, i.e., the Vice President of Human Resources, has the overall responsibility of implementing and enforcing policies and procedures to safeguard your protected health information against inappropriate access, use, and disclosure.

Permitted Uses and Disclosures of Protected Health Information

We use and disclose protected health information in a number of different ways. The following are a few examples of the uses and disclosures of your PHI that are permitted we are permitted by law to make without your authorization.

- Treatment** – We may use and disclose your PHI about you to provide, coordinate, or manage your health care and related services. This may include communicating with other health care providers regarding your treatment and coordinating and managing the delivery of health services with others. **Payment** – We will use and disclose your medical information to others to bill for services provided to you. For example: a bill may be sent to a third party payer. The information on or accompanying the bill may include information that identifies you, as well as your diagnosis. Sharing information allows us to ask for payment before we provide the services.
- Health Care Operations** – We may use and disclose your PHI in performing business activities. For example: members of our maintenance task force or members of the quality improvement team may use information in your health record to assess the care and outcomes in your case. This information will then be used in an effort to continually improve the quality and effectiveness of the service we provide.

We may also disclose your protected health information with third party “business associates” that perform payment or health care operations activities for us on your behalf. So that your health information is protected, we require the business associate to sign a contract ensuring their commitment to protect your PHI consistent with this notice and to appropriately safeguard your information. In addition, the law permits us to use or disclose your PHI in the following situations without authorization:

- Required By Law** – We may use and disclose your protected health information to the extent that we are required to do so by State and Federal law.
- Public Health** – We may use and disclose your protected health information to an authorized public health authority for purposes of public health activities. i.e., when exposed to a communicable disease.
- Abuse or Neglect** – We may make disclosures to government authorities concerning abuse, neglect or domestic violence.
- Health Oversight** – We may disclose your protected health information to a government agency authorized to oversee the healthcare system or government programs, including audits, investigations, inspections, and licensure activities.
- Legal Proceeding** – We may disclose your protected health information in the course of any legal proceeding, in response to an order of a court or administrative judge and, in certain cases, in response to a subpoena, discovery request, or other lawful process.
- Law Enforcement** – We may disclose your protected health information under limited circumstances to law enforcement officials, i.e., in response to a warrant or subpoena or for the purpose of identifying or locating a suspect, witness or missing persons or to provide information concerning victims of crimes.
- Coroners and Medical Examiners** – We may disclose your protected health information in certain circumstances.
- Research** – We may disclose your protected health information to researchers, provided that certain established measures are taken to protect your privacy.
- Threat to Health or Safety** – We may disclose your protected health information to the extent necessary to avert a serious and imminent threat to your health or safety or to the health or safety of others.

Any uses and disclosures not described in this notice will require your written authorization. If you give us an authorization, you may cancel it in writing at any time.

Your Rights Concerning Your Protected Health Information

We would like you to know that you have additional rights with respect to your protected health information

- Right to Request Restrictions** – You have the right to ask us to place restrictions on the way we use or disclose your PHI. Contact Human Resources for correct procedures on this process.
- Confidential Communications** – We will accommodate reasonable requests to communicate with you about your PHI through alternative means or to alternative locations, if requested in writing.
- Access to PHI** – You have the right to receive a copy of protected health information about you. You must make your request in writing to access copies of your records and provide us with the specific information we need to fulfill your request.
- Amendment of PHI** – You have the right to ask us to amend any PHI about you. All requests for amendments must be in writing. Contact Human Resources for the correct procedures on this process.
- Accounting of Certain Disclosures** – You have the right to have us provide you an accounting of times when we have disclosed your PHI for any purpose other the following: ✓ Treatment, payment, or health care operations as described in this notice; ✓ Disclosures that you or your personal representative have authorized; or ✓ Certain other disclosures, such as disclosures for national security purposes. All requests for an accounting must be in writing. We will require you to provide us with the specific information we need to fulfill your request.

“This accounting requirement applies for six years from the date of the disclosure, beginning with disclosures occurring after April 14, 2003.”

Questions and Answers

Q: Will you give my protected health information to my family or others?

A: We may share protected health information about you with a family member or another in two ways:

1. You are present, either in person or on the telephone, and give us permission to talk to the other person, or
2. You sign an authorization form.

Q: Who should I contact to get more information or to get an additional copy of this notice?

A: For additional information, questions about this *Notice of Privacy Practices*, or if you want another copy, please call 763- 494-4553 or write: Mains’l, ATTN: Vice President of Human Resources at 7000 78th Ave N., Brooklyn Park MN 55445

Q: What should I do if I believe my privacy rights have been violated?

A: If you think that we may have violated your privacy rights, or you disagree with a decision we made about access to your protected health information, you may either:

1. Call the Human Resources Department at 763-494-4553.
2. File a written complaint with Mains’l, ATTN: Vice President of Human Resources at 7000 78th Ave N, Brooklyn Park MN 55445. (Call to obtain a complaint form), or
3. Notify the Secretary of the U.S. Department of Health and Human Services (HHS). Send your complaint to:

Medical Privacy
Complaint Division Office for Civil Rights
U.S. Department of Health and Human Services
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, DC, 20201

We emphasize that we will not take retaliatory action against you if you file a complaint about our privacy practices either with us or HHS.



HIRING AND MANAGING EMPLOYEES (Human Resources 101)

Within this Human Services (HR) 101 guide, you will find information about being a co-employer with Mains'l in the FMS Program. This is meant to be a guide or resource only, and does not apply to every situation you may encounter. If you have specific human resource questions, please contact your participant directed services manager.

Recruiting Employees

Finding employees is a responsibility you assume in all models of participant directed services. Below are some avenues to consider when recruiting employees:

- Talk to friends, family members, and neighbors who already know you or the person receiving the supports. Building on established relationships can make it easier on everybody.
- Visit your local schools, community centers, or other community organizations. Talk to counselors and staff or see if you can put up an ad.
- Run an ad in the local paper or place an ad online.

Tips on Interviewing and Hiring

- Tell the potential employee what you expect of them; explain the hours you want to them to work, what sort of tasks you expect them to perform, etc.
- Ask applicants about their experiences with working with people who need assistance; did they work with children and/or adults? Have with they worked with people with special needs?
- Try to gain an understanding of the person's attitudes, personality, values; do they fit with the job requirements?
- Do they have flexible schedules, or do they need to have a set routine? Does that work for you?
- Do they have reliable transportation?
- Give them various examples of experiences they may have working in your home; ask them how they would deal with certain scenarios.
- Ask open ended questions; avoid questions employees can answer "yes" or "no."

Suggested Interview Questions

- *Training...*
 - ◆ Have you been certified in First Aid and/or CPR?
 - ◆ What kind of training have you had to meet the needs of this job?

- *Work history and experiences...*
 - ◆ How long were you in your most recent position? Why did you leave?
 - ◆ What do you know about (name of a specific disability)? (if applicable)
 - ◆ Where have you worked before? What were your duties?

- *Work style/methods...*
 - ◆ Describe a meaningful experience you've had with a person for whom you have provided care.
 - ◆ How do you handle someone who is angry, stubborn, or fearful?
 - ◆ What types of activities have you done with people in the past?

- *Specific tasks...*
 - ◆ Have you had experience cooking for other people?
 - ◆ Would you be able to transfer someone from a wheelchair into a car or onto a bed or chair?

- *Comfort Zones...*
 - ◆ Is there anything in the job description that you are uncomfortable doing?
 - ◆ How do you feel about assisting a person with personal hygiene?
 - ◆ Do you mind being around someone who smokes? Being around animals?
 - ◆ How do you feel about caring for someone with a disability and/or memory loss?

- *Other possible questions...*
 - ◆ What kind of time commitment are you willing to make?
 - ◆ What do you enjoy/find challenging about this field?
 - ◆ Can you give me two (2) work related and one (1) personal reference?
 - ◆ Do you keep in touch with any families you once worked for?

Work Week/Overtime

The work week is from Sunday at 12:00 a.m. to Saturday at 11:59 p.m. Each employee working in the FMS program is designated as “exempt” (hourly), in accordance with federal and state law. Hourly employees are paid for their time actually worked, and are NOT subject to overtime pay.

Child Labor Law

Employees are required to be at least 18 years old or older.

Tips on Training

When providing training to your employees, make sure you, and/or the person actually receiving the supports, are involved in training as much as possible. On-the-job training is always most effective.

Tips on Disciplining/Removing Employee

- If you have issues or concerns with your employee, discuss it with them immediately, and communicate your expectations to them. Document what you discuss and the outcome/expectations in which you agree.
- You decide if/when you want an employee to be removed from your home. However, they remain an employee of Mains'l. You must contact your Mains'l participant directed services manager if you are planning to dismiss an employee.

Illegal and Inappropriate Interview Questions

Under Title VII of the Civil Rights Act, it is illegal to ask questions regarding a candidate’s race, color, age, sex, sexual orientation, religion and national origin. Any direct or indirect attempt to solicit information regarding these categories is illegal.

The American with Disabilities Act prohibits discrimination against individuals with disabilities. This means it is illegal to refer directly to an individual’s disability with regards to potential job tasks.

Under the Employment Act, it is illegal to discriminate on the basis of a person’s age. This means that it is illegal to solicit information regarding a candidate’s age during an interview.

It is also inappropriate and illegal to ask questions regarding marital status, organizational affiliation, status of personal health, economic status, number of children, means of child care, citizenship status, and workers’ compensation history.

The following are examples of inappropriate or illegal questions in each category:

- *Race or color...*

- ◆ What nationality are you?
- ◆ Where did you get your accent?
- ◆ Where does your last name come from?

- *Sex and sexual orientation...*

- ◆ Are you heterosexual?
- ◆ Do you consider yourself homosexual?

- *Religious Affiliation...*

- ◆ Are you involved with any religious groups?
- ◆ Where do you go to church?
- ◆ Would your religion prevent you from working weekends?

- *Disability...*

- ◆ Would you consider yourself disabled?
- ◆ Could you perform this job from your wheelchair?

- *Age...*

- ◆ What is your date of birth?
- ◆ What year did you graduate from high school?

- *Marital/Family Status...*

- ◆ Are you pregnant?
- ◆ Do you have children?
- ◆ Are you married?
- ◆ What arrangements have you made for children?
- ◆ Would your family mind if you traveled or worked weekends?

- *Economic Status...*

- ◆ Are there problems with your credit rating?
- ◆ Have you ever had trouble with collection agencies?
- ◆ Do you have a mortgage?

- *Personal Health Status...*

- ◆ Are you healthy?
- ◆ How many days were you absent from work last year?
- ◆ Have you ever been hospitalized?
- ◆ Do you have HIV?

- *Other...*

- ◆ Are you a U.S. citizen?
- ◆ Have you ever filed Worker's Compensation?
- ◆ Were you admitted under an Affirmative Action Program?

**MAINS'L CALIFORNIA FMS INC.
2012 Payroll Calendar**

	Timesheets Due		
	Pay Periods	To Your Supervisor	Pay Dates
1	12/18/11 to 12/31/11	01/02/12	01/11/12
2	01/01/12 to 01/14/12	01/16/12	01/25/12
3	01/15/12 to 01/28/12	01/30/12	02/08/12
4	01/29/12 to 02/11/12	02/13/12	02/22/12
5	02/12/12 to 02/25/12	02/27/12	03/07/12
6	02/26/12 to 03/10/12	03/12/12	03/21/12
7	03/11/12 to 03/24/12	03/26/12	04/04/12
8	03/25/12 to 04/07/12	04/09/12	04/18/12
9	04/08/12 to 04/21/12	04/23/12	05/02/12
10	04/22/12 to 05/05/12	05/07/12	05/16/12
11	05/06/12 to 05/19/12	05/21/12	05/30/12
12	05/20/12 to 06/02/12	06/04/12	06/13/12
13	06/03/12 to 06/16/12	06/18/12	06/27/12
14	06/17/12 to 06/30/12	07/02/12	07/11/12
15	07/01/12 to 07/14/12	07/16/12	07/25/12
16	07/15/12 to 07/28/12	07/30/12	08/08/12
17	07/29/12 to 08/11/12	08/13/12	08/22/12
18	08/12/12 to 08/25/12	08/27/12	09/05/12
19	08/26/12 to 09/08/12	09/10/12	09/19/12
20	09/09/12 to 09/22/12	09/24/12	10/03/12
21	09/23/12 to 10/06/12	10/08/12	10/17/12
22	10/07/12 to 10/20/12	10/22/12	10/31/12
23	10/21/12 to 11/03/12	11/05/12	11/14/12
24	11/04/12 to 11/17/12	11/19/12	11/28/12
25	11/18/12 to 12/01/12	12/03/12	12/12/12
26	12/02/12 to 12/15/12	12/17/12	12/26/12
1	12/16/12 to 12/29/12	12/31/12	01/09/13
2	12/30/12 to 01/12/13	01/14/13	01/23/13

* Make sure you've signed your timesheet.

* Make sure the consumer/family member/managing party has signed your timesheet showing their approval.

Fax completed timesheets to Mains'l FMS at (763) 416-9195 OR

E-Mail completed timesheets to jmbergquist@mainsl.com



Payroll Policy & Procedures Mains'l is committed to accurately pay employees in compliance with all applicable state and federal laws. Mains'l will never knowingly fail or refuse to pay an employee the full amount she or he is entitled by law for work performed.

Employment Category

Each employee working in the FMS program is designated as "exempt" (hourly) in accordance with federal and state law. Hourly employees are paid for the time they actually worked and are NOT subject to overtime pay.

Overtime

Employees working in FMS services are not allowed to work overtime. Overtime rules for the state of California as follows; A Live In Employee cannot work more than 5 days in a work week without a 24 hour period of time off and cannot work more than a 12 hours span within each work day. A Non Live In Employee cannot work more than 8 hours in a day, more than 40 hours in a work week, and more than 6 days in a work week. Instances where overtime will be necessary due to an emergency need to be communicated to the Mains'l FMS Manager.

Protection of Employee Rights: Mains'l will protect the rights of each employee to receive compensation according to the law. Violations of this policy may result in disciplinary action, up to and including termination of employment.

Record All Time Worked And Review Pay Stubs: The employee must correctly record all time worked on the timesheet and review the pay stubs promptly to identify and report any suspected errors. Mains'l makes every effort to ensure employees are paid correctly. Occasionally inadvertent mistakes happen. When mistakes are made by Mains'l, we will promptly make any corrections necessary to provide employees with the pay they were entitled. Errors on the part of the employee will be corrected on the following pay period once any necessary changes are made to timesheets and are approved.

How to Raise a Question or Concern about Pay or a Payroll Deduction: If an employee has questions about pay (over or under payment) or any deduction from pay, they should immediately contact their Supervisor. State, Federal, Social Security, Medicare taxes, garnishments and levies (if applicable), are deducted automatically per regulations. No other deductions are made unless required or allowed by law or prior authorization.

The Supervisor will contact Mains'l to look into reports. If an employee has been paid incorrectly, or if Mains'l determines that a deduction was improperly made, Mains'l will reimburse the employee as promptly as possible. If an employee has been overpaid, the employee is required to return overpayment immediately.

Payroll Errors: In the event an error is discovered during payroll processing, the following steps will be done to correct: Mains'l will contact the Supervisor notifying them of the error. A deadline will be set for the revision to be submitted to payroll. If the deadline passes without the revision submitted to payroll the entry or entries affected by the error will be voided and the employee will need to submit the correction with the next payroll.

Errors, which can be corrected by a member of Mains'I management, include: Incorrect pay code, incorrect employee number, incorrect department, or consumer number.

Errors, which must be corrected by the employee, include: error in day and or date worked, incorrect or missing AM/PM, missing or incorrect start or end time. When overlapping or duplicate hours are entered on the timesheet, the employee is responsible for submitting a corrected timesheet. The revised time may be processed with the next payroll if not submitted in time.

Regular Attendance is an Essential Job Function and Attendance is a Performance Issue: Regular work attendance is essential. The failure of any employee to meet attendance expectations may result in disciplinary action up to and including termination of employment. For these and other reasons, it is important for employees to accurately record the time they work.

Paydays: Refer to the Payroll Calendar for exact pay periods, when timesheets are due and pay dates. All employees are paid via electronic direct deposit. Employees may choose to have their Pay Stubs mailed or e-mailed. Paycheck stubs will include earnings for all work performed through the end of the previous payroll period. The regular work week is defined as the week running from Sunday at 12:00 a.m. to the following Saturday at 12:00 a.m. Advances of payroll are not made for any reason.

Employees are responsible for notifying the Supervisor of any changes in their bank account numbers and address. If an employee requests a change in the direct deposit, a manual check may be issued the pay period following the request.

Mains'I is not responsible for any delays in mail service or electronic deposits in the employee's designated bank account. A manual replacement check will not be processed until verification is completed by payroll.

Holidays: The Supervisor determines if employees work on holidays. Employees will be paid their regular hourly wage if they work on a holiday. Time and on half is not paid for hours worked.

Record of Time Worked: It is the employee's responsibility to submit an accurate and complete timesheet by the due date and time. The Supervisor is responsible for verifying that the hours worked by the employee and the pay codes used are accurate. It is the consumer or Supervisor's responsibility to ensure employees are working as stated on their timesheet. This protects the employee, the consumer, and Mains'I from incorrect or false time recording.

Employees should not work any hours that are not scheduled or requested unless pre-authorized by the Supervisor in consultation with the Service Coordinator. Employees should not start work early, finish work late, or perform extra work unless pre-authorized. Any employee who fails to report or inaccurately reports hours worked will be subject to disciplinary action, up to and including termination.

It is a violation of policy for any employee to falsify a timesheet, or to alter another employee's timesheet. If any manager, consumer, or employee instructs an employee to either (1) incorrectly or falsely under-report or over-report hours worked, or (2) alter another employee's time records to inaccurately or falsely report that employee's hours worked, the situation should be immediately reported to the vice president of human resources, or Mains'I FMS Manager.

Questions or Concerns about This Fair Pay Policy: If there are questions or concerns about this Fair Pay Policy and Procedure, please contact Mains'I.