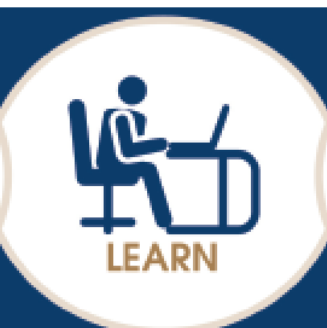




PIONEER  RESOURCES

Policies & Procedures

**EMPLOYEE HANDBOOK
2024-2025**



**www.PioneerResources.org
231.773.5355**



POLICY AND PROCEDURE MANUAL

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At Pioneer Resources, we are committed to making a meaningful and lasting impact on the lives of those we serve, and you are part of that mission. Our success is built on the invaluable contributions of our staff who provide vital services—from residential support and transportation to training, ABA therapy, and recreational opportunities.

As you begin or continue your journey with us, I encourage you to invest time in familiarizing yourself with our employee policy manual. It will serve as a guide for our policies, procedures, and standards, helping you understand the values and expectations that shape the quality of care we deliver.

Your role is critical to our mission, and we believe that you are our best ambassador. Whether you're interacting with individuals we support, their families, or the broader community, your actions speak volumes about who we are as an agency. Please share your pride in being a part of this exceptional team.

Every nonprofit is driven by a clear purpose, and at Pioneer Resources, our mission and vision guide everything we do. I invite you to join me in fully embracing and committing to:

Our Mission:

Helping people with disabilities and seniors achieve independence and dignity by creating opportunities for their active participation in the community.

Our Vision:

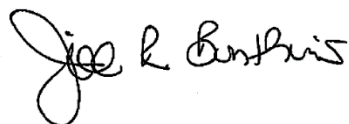
To be the premier service provider in the community, empowered by a workforce characterized by the highest level of quality and compassion, dedicated to making a meaningful difference in the lives of those we serve.

At Pioneer Resources, we are focused on providing:

- **A place to live:** Affordable housing and specialized homes.
- **A place to learn:** Vocational training, ABA therapy, and community living supports.
- **A place to grow and play:** Inclusive camping and recreational programs.
- **A way to get there:** Comprehensive transportation services.

As a member of the Pioneer Resources family, you are part of something bigger than yourself—something that touches the lives of individuals with disabilities, seniors, their families, and the wider community. Together, we can achieve remarkable things. I look forward to the positive impact we will continue to make.

Warm regards,



Jill R. Bonthuis

Chief Executive Officer

Policy and Procedure Manual Applicability

This handbook applies to all individuals employed by Pioneer Resources, Inc., including hourly, salaried, temporary, seasonal, and contracted employees, unless otherwise specified in a union contract. The policies outlined in this document also extend to all associated corporations of Pioneer Resources, Inc. (Pioneer Resources, Pioneer, PR), namely Pioneer Arbour, Pioneer House and West Michigan Therapy (WMT) Non Profit Housing.

The primary purpose of this manual is to provide comprehensive information to all employees regarding the established policies and procedures within our organization. In cases where the terms of a policy, procedure, or benefit differ based on an employee's classification, these specific terms relevant to the employee's classification will be explicitly detailed.

Terms of Employment: At-Will Employer

Pioneer Resources, Inc. is an at-will employer. This means that the employment relationship is for an indefinite period of time and can be terminated at any time, with or without cause, and with or without notice by either the employer or the employee. This document is not a contract.

The provisions contained in this book supersede any and all contrary representations that have been made either by Pioneer Resources or its employees.

No employee, supervisor, Director, Manager or other person (except the CEO in a document or letter that is specifically for that purpose and signed by the CEO) has the authority to enter into any employment agreements on behalf of the company for any specified period of time, pursuant to any particular conditions, or to make any agreement that is in disagreement with the terms expressed in this manual.

Policy and Procedure Manual Amendments

Supersedes All Others

Pioneer Resources reserves the right and the discretion to amend, delete, or change benefits, compensation, and policies at the discretion of the agency as explained in the Terms of Employment Policy. Updates to this manual will be made, as necessary, by placing updates in the document and removing superseded or deleted policies. Changes are effective immediately.

Equal Employment Opportunity (EEO) Statement

Pioneer Resources is an equal opportunity and affirmative action employer committed to diversifying its workforce. It is Pioneer Resources' policy to provide equal employment opportunities to applicants for employment, employees, volunteers, volunteer Board Members, students and interns without regard to race, color, religion, sex (including pregnancy, childbirth, breastfeeding, or related medical conditions), gender identity or expression, national origin, ancestry, age, disability, legally protected medical condition, genetic information, marital status, sexual orientation, protected veteran status, military status, citizenship status or any other status that is protected by law. Pioneer Resources also does not discriminate against applicants or employees because they have inquired about, discussed, or disclosed their own pay, or the pay of another employee or applicant.

All aspects of employment, including but not limited to recruitment, hiring, promotions, transfers, compensation, benefits, discipline, training and educational opportunities will be made on the basis of individual abilities and qualifications without regard to any legally protected category. An employee's protected characteristic will only be considered when it constitutes a bona fide occupational qualification.

Employment opportunities are based upon the individual's ability to perform the job. Pioneer Resources will provide reasonable accommodations when necessary to support the employee and the advancement of individuals with disabilities who are otherwise qualified to perform the essential job functions, with or without accommodations, as long as doing so does not cause an undue hardship for the organization.

At Pioneer Resources, we believe that every employee, through their diverse abilities and experiences, can contribute to our growth, resident and/or participant of services, and the community we serve. We embrace diversity and are committed to providing equal opportunity to all employees and applicants. If you have a disability, and require reasonable accommodations in the application process, contact the Human Resources department at (231) 773-5355, via email at HRGroup@pioneerresources.org, or stop by/apply in person at 1145 Wesley Ave, Muskegon, MI 49442 and we will be happy to assist you. We will only share your accommodation request with those individuals who have a specific need to know. The request for an accommodation will not affect Pioneer Resources' hiring decisions. All other submissions should be performed online.

Company Statement

All employees are required to uphold the values of Pioneer Resources, Inc. LEAD is the Acronym used to remind us all which values we agree to uphold: Listen, Empathy, Acknowledge and Dignity.

Listen – employees and volunteers will listen to the needs of our employees, participants, and people we serve to provide high quality services to individuals in need;

Empathy – employees and volunteers will be empathetic and recognize the humanity in each person that we have contracted with by treating everyone with respect and kindness;

Acknowledge – employees and volunteers will acknowledge persons served in order to best meet their individual needs. Pioneer Resources, Inc. will also acknowledge the needs of its employees to ensure employees have all the tools needed to best meet the mission of Pioneer Resources;

Dignity – employees and volunteers will take every step possible to show compassion to each other and persons served to respect the inherent value and worth of each person.

All employees are required to comply with the policies, procedures, and safety programs of Pioneer Resources.

All employees are required to uphold standards for CARF.

Employees are required to follow all state and federal laws and regulations including, but not limited to, those related to Recipient Rights, Confidentiality, and the Health Insurance Portability and Accountability Act (HIPAA).

Core Principles

Pioneer Resources is committed to conducting business in accordance with the highest ethical principles and best practices. Agency employees, board members and volunteers shall strive to conduct business in good faith, with integrity, and in accordance with the law, contractual obligations, and policies defined by the governing body.

In pursuit of ethical behavior and practices, Pioneer Resources explicitly acknowledges that the following core principles should guide and inform decision making.

- **Quality:** Pioneer Resources' employees and volunteers believe in providing high quality services to individuals in need.
- **Dignity and Worth of Every Individual:** Pioneer Resources respects the dignity and worth of every individual regardless of individual characteristics.
- **Integrity:** Pioneer Resources' employees and volunteers shall strive to act honestly and responsibly.
- **Competence:** Pioneer Resources' employees and volunteers shall continually strive to learn about persons served and methodologies used to provide support. Employees and volunteers should represent themselves as competent only within the boundaries of training received and experience acquired.
- **Cultural Competency and Diversity:** Pioneer Resources' employees and volunteers shall strive to be sensitive to the variety of cultural backgrounds and differences among persons served, coworkers or within the communities in which the organization operates.
- **Privacy and Confidentiality:** Pioneer Resources will respect rights to privacy and

protect the confidentiality of information. Information will only be conveyed when there is explicit permission to transmit such. Information will be shared in a manner that complies with local, state, and federal statutes governing such transmission.

- **Stewardship of Resources:** Pioneer Resources' employees and volunteers have a duty to avoid wasting funds, property and natural resources.

Corporate Compliance Policy

Purpose

To establish a system of corporate compliance and outline ethical standards of conduct that reflect the commitment of Pioneer Resources, Inc. to comply with all applicable laws, regulations and requirements, and meet the highest standards of ethical conduct possible.

Policy

It is the policy of Pioneer Resources to conduct itself as a good organizational citizen, exhibiting professionalism, integrity, and honesty in all activities.

Furthermore, it is the policy of Pioneer Resources to attempt to prevent errors, criminal and unethical conduct, and any false claims related to the provision of services.

This includes responsibilities pertaining to the ordering, provision, marketing, documentation, coding, or billing of services reimbursable by Federal Health Care programs.

This also applies in the preparation of claims, reports or other requests for reimbursement for such items or services within the statutes, regulations and written directives of Medicare, Medicaid, and all other Federal Health Care Programs (as defined in 42 U.S.C. § 1320 a-7b(f)), hereinafter collectively referred to as the "Federal Health Care Programs."

Finally, it is the policy of Pioneer Resources to protect employees who report cases of suspected or alleged fraud or abuse by ensuring "no-reprisal" for reporting.

Background Information (Including Definition)

Corporate Compliance Officer: A staff member shall be designated to serve as Pioneer Resources' "Compliance Officer." Duties shall include:

1. Monitoring matters pertaining to corporate compliance
2. Conducting corporate compliance risk assessments
3. Reporting on matters pertaining to corporate compliance
4. Internal auditing activities

Training: Employees will receive training in "Corporate Compliance" upon hire and on a yearly basis which will include:

1. Role of the Compliance Officer
2. Procedures for allegations of fraud, waste, abuse and other wrongdoing

3. How to report

Risk Areas: Areas of agency activity where there is a risk of financial fraud or abuse include the following, although the list is not necessarily exhaustive:

1. Billing (duplicate billing)
2. Upcoding (using an erroneous billing code that results in a higher payment than the service actually delivered)
3. Filing claims for services not provided, that were unnecessary, receiving kickbacks or other benefits in return for providing an unnecessary service, or referring someone to another provider in return for kickbacks or benefits

All employees are expected to become familiar with the rights of the persons served by Pioneer Resources.

Ethical conduct refers to exercising honesty in all decisions related to the areas of business above. It also refers to the following expectations with regard to treatment of the persons served by employees and volunteers of Pioneer Resources:

1. Treating the persons served without discrimination
2. Maintaining the confidentiality of all records
3. Providing care in a way that is respectful of each person's needs and wishes
4. Treating all persons served with dignity and respect
5. Involving the persons served (and/or legal representatives) in decisions about care
6. Providing information to the persons served needed to help make informed decisions
7. Providing access to information and records about care or services being provided

Monitoring Corporate Compliance Risks can be facilitated through multiple entities of the leadership team through monthly review of services vs billing, review of financial reports to budget reports, and assurance to education and awareness sessions for employees. Additional mitigation efforts include monthly review of the financial reports by the Finance Committee of the board and the annual auditing of Pioneer Resources financial activities by an independent firm.

Reporting Procedures: Employees who suspect abuse of a person served by Pioneer Resources should follow procedures outlined via the Recipient Rights system and Recipient Rights policies.

Those policies, especially the Recipient Rights Policy adopted by HealthWest, PACE Lifecircles, the Lakeshore Regional Entity or any other entity that by which Pioneer Resources, Inc. has contractually agreed to abide, are included by reference as part of this policy.

If it is felt that the rights of a recipient were violated, the employee, volunteer, family member or anyone acting on behalf of a recipient of services may contact the local Recipient Rights Officer by visiting, writing or calling the Recipient Rights office.

Employees who suspect corporate fraud, waste or abuse or other wrong doing are strongly encouraged to contact their immediate supervisor, or the Corporate Compliance Officer (Jamie Mead at jmead@pioneerresources.org) to report the alleged misconduct and to complete the

[Corporate Compliance Form.](#)

If the supervisor is involved in the alleged misconduct, employees are encouraged to contact the Corporate Compliance Officer directly. Contact information is listed on the Corporate Compliance Form.

If the allegation is against the CEO, a third party will be coordinated with to assume the responsibility of investigations.

Methods of Contact

1. Telephone: An employee may call the Corporate Compliance Officer, Jamie Mead at 231-260-0415. An employee may make a report anonymously; if the employee chooses this option, the Corporate Compliance Officer will give the employee a four digit identification number. The Officer may ask the anonymous reporter to call back within one week with the four digit identification number in case there are additional questions that may need to be asked of the reporter. Contact information for the Corporate Compliance Officer is listed on the Pioneer Resources, Inc. Corporate Compliance form.
2. Mail: A written reporting form will be made available at Pioneer Resources at all times for staff to disclose wrong-doing. All information should be completely filled out and submitted through the mail to the Corporate Compliance Officer at 1145 Wesley Ave., Muskegon, MI 49442. Employees are encouraged to disclose their identity, but they may remain anonymous. When submitting anonymously, the employee should establish a four digit identification code to identify him/herself on the report. For anonymous reports, the Corporate Compliance Officer will ask questions on the above specified number. The reporting employee shall respond to these questions in writing to the Corporate Compliance Officer through the mail.

Alternate: If the Corporate Compliance Officer is the subject of possible unethical or improper conduct, the employee is to file the report with the CEO at 231-557-4241. If it involves both parties, the employee should contact the President of the Board of Directors at WeessieM@hccc-health.org.

Investigation

The Compliance Officer will investigate the complaint within seven (7) working days and will provide an adequate and timely decision within 10 business days. If the allegation is against the CEO, a third party will be coordinated with to assume the responsibility of investigating.

Effective: 02/05/03

Revised: 04/02/19, 04/11/22, 09/23/22, 10/16/23

Reviewed: 09/23/20, 09/13/21, 04/11/22, 02/23/23, 10/31/23, 10/7/24

Organizational Code of Ethics

Policy

It is the policy of Pioneer Resources to perform all its operations in an environment characterized by strict conformance with the highest standards of ethical conduct and accountability for business, marketing, contractual relationships, service delivery, professional responsibilities, and human resources.

Legal and Business Affairs

- Pioneer Resources will adhere to its obligations as defined by the Internal Revenue Service regulations governing 501(c) (3) organizations.
- Pioneer Resources will adhere to obligations defined by the State of Michigan with regard to corporations, solicitation of funds and rules for licensed establishments.
- Pioneer Resources will abide by generally accepted accounting principles and conduct appropriate annual audits and reviews.
- The organization shall strive to comply with contractual requirements defined by funders and units of government.
- The organization will comply with hiring practices and complete and maintain I-9 for all employees hired for employment.
- Pioneer Resources will conduct business in accordance with sound business principles and moral practices.

Code of Ethics Regarding Financial Practices:

1. All financial practices of Pioneer Resources shall conform to applicable state and federal laws and tax filing requirements.
2. All donor-restricted funds will be used in a manner that is consistent with the intent of the donor.
3. All funds will be used in the most effective and efficient manner to achieve the mission of the organization. Appropriate policies regarding use of funds, including an annual budget, will be adopted and utilized in the decision making process with regards to the allocation of funds.
4. All fund development activities will conform to ethical standards, regulatory reporting and maintain confidentiality when requested by the donor.
5. The agency investment policy shall guide the agency's long-term and short-term investment strategies.

Code of Ethics Regarding Marketing:

Marketing is defined as interfacing with any part or facet of the public in an attempt to enroll persons in the service delivery system, as well as encouraging people to donate financial resources and/or services, and any other related activities.

1. All statements about Pioneer Resources made either orally or in writing by any Board member, volunteer or employee shall be entirely accurate. Representatives of the agency will refrain from making statements unless they are authorized to do so by the Office and Marketing Manager or the CEO.

2. Every attempt will be made to portray the agency honestly in all official literature, including but not limited to: the organization's annual report, social media, promotional brochures, grant requests, videos, etc.
3. Pioneer Resources recognizes the value of treating agencies performing similar work in the community with respect. It will not engage in activities for the sole purpose of undermining the reputation of such organizations or detracting from the ability of such organizations to fulfill their mission of serving individuals with disabilities.

Code of Ethics Regarding Contractual Relationships:

Employees must refrain from taking unilateral actions with the intent to bind the organization legally or ethically. The Chief Executive Officer or the CEO's designee is the only employee authorized to sign and/or bind Pioneer Resources, Inc. into any type of contractual relationship.

Code of Ethics Regarding Conflict of Interest:

All persons connected with Pioneer Resources, Inc. shall:

1. Refrain from using the organization's resources for personal gain. In other words, no person shall use employee time, mailing lists, equipment, money, or any other Pioneer Resources property for private gain.
2. Disclose any real or potential conflict of interest.
3. Refrain from taking unilateral actions with the intent to bind the organization legally or ethically, where such actions should be taken by a group of people collectively. For example, individual board members do not have the right to enter into contracts on behalf of Pioneer Resources, Inc.
4. Avoid personal relationships outside of providing billable services to clients to prevent a real or perceived conflict of interest.
5. Make all decisions based on the best interests of the organization as a whole.

Code of Ethics Regarding Social Media:

Pioneer Resources utilizes social media to ensure a positive reputation of the agency and to promote the ethics and values of the agency in all ways. Employees may not connect, portray or represent Pioneer Resources, or any of the participants thereof, on social media unless they have authorization from the Office and Marketing Manager.

Persons served must provide written consent in order to have their likeness on company social media. Negative comments related to Pioneer Resources and/or its related entities by an employee will be grounds for disciplinary action, up to and including separation of employment.

Code of Ethics Regarding Exchanges of Gifts, Money and Gratuities:

No individual shall accept gifts, favors, entertainment, or other items of value that may compromise their decision-making abilities. The offer and/or acceptance of any questionable benefit must be reported to the Corporate Compliance Officer immediately (see Corporate Compliance Policy for further details).

The offer by any employee of money, services, or other things of value with the expectation of influencing the judgment, integrity, or decision-making ability of any person served, customer, government official or other person having business dealings with Pioneer Resources is expressly prohibited. The request for, or knowledge of, provisions of such benefit must be reported immediately to the Corporate Compliance Officer.

All gifts from persons served to employees must be disclosed to management. Gifts, money, and/or gratuities to or from persons served, or their parents/care providers, are prohibited when:

1. The gift would be illegal or unethical.
2. It is made as part of an agreement to do anything in return/exchange.
3. Has a value beyond what is normal and customary courtesy (\$25).
4. Is made in an effort to influence the actions of the recipient.
5. May create the appearance or perception of a conflict of interest.

Code of Ethics Regarding Personal Fundraising:

Fundraising activities, general solicitation, and distributions of other materials, which are of no direct benefit to persons with disabilities, are prohibited on work time and in work areas.

Code of Ethics Regarding Personal Property:

Pioneer Resources, Inc. does not encourage or discourage employees from selling personal property during their own personal time (breaks, meal periods) to other employees.

Employees must obtain the approval of management in order to engage in such activity on agency property. Pioneer Resources is not responsible for such transactions. The organization expects all employees to respect and safeguard its property, the personal property of persons served, visitors, and other employees.

Code of Ethics Regarding Boundaries:

Professional boundaries are required to be maintained at all times between employees and persons served. As such, any type of personal relationship is strictly prohibited, including but not limited to dating, sexual activities, and personal relationships that extend beyond the scope of providing billable service.

Code of Ethics Regarding Witnessing of Documents:

It is best practice for the witnessing of legal documents to be done by a Notary Public. When this is required, staff should contact the administrative office to make arrangements to have signatures notarized. If this is not possible, or if there are questions, staff should consult their supervisor for direction.

Code of Ethics Regarding Service Delivery and Professional Responsibility:

1. Pioneer Resources is committed to being a center of excellence in its service delivery. A center of excellence is about maintaining high standards and a passion for constantly seeking to improve.

2. Persons served give up no legal rights when they agree to participate in a program operated by Pioneer Resources, Inc. All legal rights of persons served shall be fully recognized.
3. Persons served must be treated with dignity and respect at all times.
4. Every reasonable effort will be made to reduce, mitigate, or eliminate attitudinal, architectural, and communication barriers that may exist.
5. All organizational activities must be conducted in an environment that promotes the process of assisting persons served achieve their full, individual potential.
6. The files relating to persons served shall be strictly confidential. Only those persons authorized for valid reasons relating to the quality of service delivered shall have access to the files.
7. Input from persons served shall be recognized as paramount to the successful delivery and evaluation of services rendered, and shall be received in a respectful and thoughtful manner.

Code of Ethics Regarding Human Resources:

1. Contribute to the agency's success by ensuring adherence with legal requirements.
2. Commit to strengthen competencies on a continuous basis.
3. Contribute to the evolution of the department, the agency, and the growth of human capital through coaching and training.
4. Make every effort to achieve the highest levels of service, performance and corporate responsibility while advocating for the appropriate treatment and appreciation of our employees and the people we serve.
5. Promote equity, inclusion, justice, respect and dignity in the workplace, personal and professional responsibility.
6. Adhere to hiring practices and state and federal guidelines.

Code of Ethics Regarding Agency Fundraising:

Per the fundraising policy, fundraising activities will comply with applicable local, state and federal rules and regulations. Fundraising activities will be authorized by the CEO and/or committee authorized by the same. Checks and balances will be established to ensure the proper handling of funds raised and to prevent theft or fraud. Employees and volunteers responsible for fundraising activities will conduct themselves with professionalism and in accordance with the highest ethical principles.

Policy on Waste, Fraud, Abuse, and Other Wrongdoing:

Pioneer Resources is dedicated to the delivery of services in an environment characterized by strict conformance with the highest standards of accountability for administration, service delivery, business, marketing, human resources, and financial management. The leadership of Pioneer Resources is fully committed to the need to prevent and detect fraud, fiscal mismanagement and misappropriation of funds.

Pioneer Resources is committed to the establishment, implementation and maintenance of a corporate compliance program to ensure ongoing monitoring and compliance with all legal and regulatory requirements. The program will emphasize:

1. Prevention of wrong doing—whether intentional or unintentional.
2. Immediate reporting and investigation of questionable activities and practices without consequences to the reporting source.
3. Timely correction of any situation that puts Pioneer Resources, its leadership or employees, funding sources or persons served, at risk.

Stewardship of Resources and the Environment

Employees and volunteers of the organization pledge to conserve property and natural resources whenever possible.

Efforts toward conservation include, but are not limited to:

- Reducing consumption of energy, including all kinds of fuel, whenever possible.
- Safe and careful use of property so as to preserve its useful life.
- Recycling.
- Conservative use of water.
- Practicing green design and building techniques to maximize efficiency, durability, and savings (finding the balance between high-quality construction and low environmental impact).

Procedures for Reporting/ Corporate Compliance: Duty to Report and Non-Reprisal

The employees and volunteers of Pioneer Resources have a duty to report violations of this Code of Ethics. Complaint forms and further explanations are found in the Policy and Procedure Manual or may be reported verbally to our Compliance Officer at jmead@pioneerresources.org, or mailed to: Pioneer Resources Compliance Officer, 1145 Wesley Ave Muskegon, MI 49442.

Investigation and process will follow the procedures described in the Corporate Compliance Policy.

Reporting should occur when:

1. It is felt that the rights of a recipient were violated, the employee, volunteer, family member or anyone acting on behalf of a recipient of services may contact the local Recipient Rights Officer by visiting, writing or calling the Recipient Rights office.
2. Employees who suspect corporate fraud, waste or abuse or other wrong doing are strongly encouraged to contact their immediate supervisor or Corporate Compliance Officer to report the alleged misconduct and complete the Corporate Compliance Form.
3. If the supervisor is involved in the alleged misconduct, employees are encouraged to contact the Corporate Compliance Officer directly. Contact information is listed on the Corporate Compliance Form.

Investigations - No Reprisal Approach

Complaints received by the Corporate Compliance Officer, or alternate if the complaint involves the Corporate Compliance Officer, shall be brought to the attention of the CEO and

shall be investigated. Any person who is found to have violated the Code of Ethics may be disciplined up to and including separation of employment.

It is the policy of Pioneer Resources, Inc. to protect employees who report cases of suspected or alleged fraud or abuse or violations of this code of ethics by ensuring no-reprisal for reporting.

Investigation

The Compliance Officer will investigate on the complaint within seven (7) working days and will provide an adequate and timely decision within 10 business days.

Employees, board members and volunteers will be trained on the above Code of Ethics at time of onboarding and annually thereafter. Each have an obligation to report any of the above code of ethics violations along with their other ethical obligations listed below.

Code of Ethics Regarding Board Members:

Pioneer Resources, Inc. believes strongly that its members must uphold the highest standards of ethical, professional behavior, and to:

1. Hold paramount the safety, health, and welfare of the public in the performance of professional duties.
2. Act in such a manner as to uphold and enhance personal and professional honor, integrity, and dignity of the profession.
3. Treat with respect and consideration all persons, regardless of race, religion, gender, abilities, age, or national origin.
4. Engage in carrying out Pioneer Resources' mission in a professional manner.
5. Collaborate with, and support, other professionals in carrying out Pioneer Resources' mission.
6. Build professional reputations on the merit of services.
7. Uphold all applicable laws and regulations.
8. Refrain from taking any action(s) that would cause, or appear to cause, a conflict of interest.
9. Accept ultimate responsibility for all policies and activities of the organization, relying on good faith in the reports and statements of agency employees, while using the reasonable power of inquiry where justified, to ensure that information presented to the board is accurate and truthful.
10. Ensure that revenues from all sources are used prudently and in accordance with established policies, in accordance with the mission of the organization, and in compliance (if applicable) with the intent of the donor.

Code of Ethics Regarding Employees:

1. Adopt as their highest job-related priority, the delivery of high quality programming to the persons served.
2. Maintain a climate of trust, loyalty, and mutual respect for all Pioneer Resources' constituents, specifically including other employees.
3. Strive for personal and professional growth in an effort to improve effectiveness.

4. Provide truthful and comprehensive information in response to a legitimate inquiry by any appropriate official, regardless of whether that inquiry is an informal question or a formal investigation.
5. Strive to maintain a positive attitude.
6. Uphold all applicable laws and regulations.
7. Strive to be effective stewards of the agency's resources, both human and financial.
8. Present to the community-at-large, a professional demeanor intended to reflect positively on Pioneer Resources as an organization worthy of public support.

Code of Ethics Regarding Volunteers:

All volunteers will:

1. Treat all other volunteers, board members, employees, donors, persons served, and persons doing business with Pioneer Resources, with respect.
2. Refrain from taking any action(s) that would cause, or appear to cause, a conflict of interest.
3. Present information to the community-at-large that fairly reflects the truth about Pioneer Resources activities, financial status, etc.
4. Engage in activities on behalf of Pioneer Resources only with appropriate authorization from a volunteer coordinator, or an employee who has the authority to approve volunteer activities.

Advocacy Efforts and Corporate Citizenship for Persons Served

Pioneer Resources supports a variety of advocacy efforts throughout each calendar year. As active members of the Incompass Michigan, MALA, IDD Consortium, DCW taskforce, and Autism Alliance, we advocate for services, funding, inclusion and best practices for individuals with disabilities.

Pioneer Resources offers advocacy training to family members, persons served, employees and board members. The CEO of the organization serves on local boards as well as the Incompass MI board, the organization is engaged with the community Area Agency on Aging, the Human Resources Talent Manager serves as the Treasurer on the Board of Directors for the Disability Network, we offer a community sensory garden, and we provide multiple social media engagement opportunities for the community to understand the need for inclusion for individuals with disabilities and seniors.

Effective: 10/24/16

Revised 08/23/19, 11/02/23

Reviewed: 09/18/20, 09/21/21, 04/11/22, 09/23/23, 10/7/24

Contractual Obligation

Upon hire all positions are to be put through the state and electronic data base to obtain an initial examination of federal and state databases' of excluded parties and litigation checks.

State and electronic database will check the following data bases:

1. OIG
2. Sanctioned Provider List
3. Nurses Aid Abuse
4. Public Sex Offenders Registry

Group home staff (because they are fingerprinted) are in the LARA data base and registered so that if they become ineligible for employment due to infractions occurring after new hire, Pioneer Resources is notified.

All other staff, including:

1. Drivers
2. Administration
3. Directors
4. Community Living Services
5. Vocational Services
6. Maintenance
7. Specialty Services
8. Pioneer Trails

...must have an **initial** and **monthly** LARA check of the OIG, Sanctioned Provider List, Nurses Aid Abuse and Public Sex Offenders Registry.

iCHAT inquiries must be done on all employees every two (2) years.

If activity comes back as excluded or contains a criminal conviction, notify the CEO as there are reporting requirements to CMHSP.

Effective: 09/27/20

Revised:

Reviewed: 09/27/21, 09/26/22, 10/16/23, 10/7/24

Employment Practices

Cultural Competence, Diversity & Inclusion Policy

Pioneer Resources is committed to fostering, cultivating, and preserving a culture of diversity and inclusion.

Our human capital is our most valuable asset. The collective sum of the individual differences, life experiences, knowledge, inventiveness, innovation, self-expression, unique capabilities, and talent that our employees invest in their work, represents a significant part of not only our culture, but also our reputation and company's achievement.

We embrace and encourage our employee's differences in age, color, disability, ethnicity, family or marital status, culture, spiritual beliefs, gender identity or expression, language, national origin, physical and mental ability, political affiliation, race, sexual orientation, socio-economic status, language, veteran status, and other characteristics that make our employees unique.

Pioneer Resources diversity initiatives are applicable, but not limited to:

- Our practices and policies on recruitment and selection
- Compensation and benefits
- Professional development and training
- Promotions
- Transfers
- Social and recreational programs
- Layoffs
- Terminations
- The ongoing development of a work environment built on the premise of gender and diversity equity that encourages and enforces:
 - Respectful communication and cooperation between all employees.
 - Teamwork and employee participation, permitting the representation of all groups and employee perspectives.
 - Work/life balance through flexible work schedules to accommodate employees' varying needs.
 - Employer and employee contributions to the communities we serve to promote a greater understanding and respect for diversity.
 - persons served, family and stakeholders are reflected in our board, engaged in planning and provided input to our services

All employees of Pioneer Resources have a responsibility to always treat others with dignity and respect. All employees are expected to exhibit conduct that reflects inclusion during work, at work functions on or off the work site, and at all other company-sponsored and participative

events.

All employees are also required to attend and complete annual diversity awareness training to enhance their knowledge to fulfill this responsibility.

Any employee found to have exhibited any inappropriate conduct or behavior against others may be subject to disciplinary action, up to and including separation of employment.

Employees who believe they have been subjected to any kind of discrimination that conflicts with the company's diversity policy and initiatives should seek assistance from a supervisor or a Human Resources representative.

Effective: 09/27/22

Revised:

Reviewed: 09/27/22, 11/03/23, 10/7/24

Employee Relations Philosophy

Pioneer Resources is a non-profit organization that is dedicated to serving the community with high-quality programs and services. The experience that Pioneer Resources' employees create for those we serve must reflect the values of the organization.

Pioneer Resources recognizes the importance of developing and maintaining a positive and professional work environment that is built upon mutual trust and respect.

All employees of Pioneer Resources are expected to demonstrate competence within their job classification and to promote teamwork and respect for each other and those we serve.

Employees are recruited, hired, trained and offered continuing employment according to the needs of Pioneer Resources and the people it serves. No guarantees are made to the length of employment, availability of work, conditions of on-going employment, wage levels or fringe benefits.

Employees are given regular, timely and objective feedback of their work performance. Employees are compensated for work performed on behalf of Pioneer Resources through a competitive total rewards strategy.

Employees are treated with respect and dignity and we ask all employees to understand the significance and impact of the work performed for the community on behalf of Pioneer Resources.

Pioneer Resources, Inc. cares about what employees think and how they feel about the work environment; therefore, we ask all employees to participate in employee surveys and other activities that will help make Pioneer Resources an employment destination.

We appreciate the opportunity to work with our employees to resolve issues and to facilitate a professional and caring environment. We encourage employees to work directly with their supervisor when a question or concern arises. We recognize that this may not always be possible; in these circumstances Human Resources is ready to provide support.

Effective: 10/24/16

Revised: 08/23/19

Reviewed: 09/18/20, 9/21/21, 09/27/22, 11/03/23, 10/07/24

Reasonable Accommodation

Commitment to Accessibility

At Pioneer Resources, we are committed to providing equal employment opportunities to all employees and applicants. We strive to create an inclusive and accessible work environment for individuals with disabilities and will make reasonable accommodations to ensure that individuals can perform their job duties effectively and safely.

What is a Reasonable Accommodation?

A reasonable accommodation is a modification or adjustment to a job, the work environment, or the way things are usually done that enables an individual with a disability to have an equal opportunity to perform the essential functions of their job. Reasonable accommodations may also include adjustments to the hiring process for applicants with disabilities.

Examples of Reasonable Accommodations

Reasonable accommodations may include, but are not limited to:

- Making facilities accessible
- Modifying work schedules or allowing for remote work
- Adjusting job duties or reassigning tasks
- Providing assistive devices, tools, or technology
- Allowing leave for medical treatment or recuperation
- Modifying training materials, policies, or practices

Requesting an Accommodation

Employees or applicants who believe they need a reasonable accommodation to perform the essential functions of their job should contact Human Resources as soon as possible. The company will engage in an interactive process to assess the request and determine what accommodation, if any, is appropriate based on individual needs and the operational needs of the company.

Employees may be required to provide documentation from a healthcare provider confirming the disability and the need for an accommodation. All information will be kept confidential and shared only with those directly involved in the accommodation process.

Interactive Process

When a reasonable accommodation request is made, we will work with the employee or applicant through an interactive process to:

- Understand the nature of the accommodation request
- Determine the essential functions of the job
- Explore potential accommodations that allow the employee to perform the essential duties
- Assess whether the accommodation can be provided without causing undue hardship to the organization

Undue Hardship

The company is committed to providing accommodations unless doing so would cause undue hardship. An undue hardship refers to a significant difficulty or expense in relation to the size, resources, and structure of the company. Each request will be assessed on a case-by-case basis, and we will make every effort to provide accommodations whenever possible.

State and Federal Laws

Our policy complies with the Americans with Disabilities Act (ADA) and the Michigan Persons with Disabilities Civil Rights Act (PDCRA). These laws protect individuals with disabilities from discrimination and ensure they have access to reasonable accommodations in the workplace.

Non-Retaliation

We strictly prohibit retaliation against any employee or applicant who requests a reasonable accommodation or otherwise exercises their rights under federal or state disability laws. Any employee who feels they have been subject to retaliation should immediately report the matter to Human Resources.

Pregnant Workers Fairness Act

Purpose

Effective June 27, 2023 the Pregnant Workers Fairness Act (PWFA) was amended to require employers to provide “reasonable accommodations” for an employee’s known limitations related to pregnancy, childbirth, or related medical conditions, unless the accommodation will cause the employer an “undue hardship.”

Policy Provisions

Pioneer Resources adopts this policy to support the health and well-being of employees and unborn children by providing a workplace environment that accommodates the needs of pregnant mothers.

The PWFA does not replace other legislation protecting expectant mother’s rights, including Title VII of the Civil Rights Act (anti-discrimination), the America with Disabilities (ADA) Act, the

Family Medical Leave (FMLA) Act, or the Providing Urgent Maternal Protections for Nursing Mothers (PUMP) Act.

Required Procedures

Employees seeking accommodations under this provision should contact their supervisor and/or Human Resources to request accommodations. The request need not be formal and/or prescribed on any specific document; a verbal accommodation request made by an employee (or their representative), to the employer (Pioneer Resources' supervisor and/or Human Resources) is enough to start the interactive discussion process.

In general,

1. All accommodation requests under the PWFA will trigger an interactive interview process in which the Human Resources department will meet with the employee and their supervisor to discuss their known limitations, how said limitations may affect their ability to perform the primary functions of their job, and what accommodations can be made to assist them with the specified limitations.
2. Human Resources will provide a final response to the accommodation requests within ten (10) business days; the response will be provided to the employee and their supervisor who will be responsible for ensuring the accommodations are met.
3. A determination as to whether a reasonable accommodation can be provided will be made on a case-by-case basis.

Under no circumstances will Pioneer Resources:

- Require a covered employee to accept an accommodation without a discussion about the request occurring between the employee and Pioneer.
- Deny a job or other employment opportunity to a qualified employee or applicant based on the person's need for a reasonable accommodation.
- Require an employee to take leave if another reasonable accommodation can be provided that would let the employee keep working.
- Retaliate against an individual for reporting or opposing unlawful discrimination under the PWFA or participating in a PWFA proceeding (such as an investigation).
- Interfere with any individual's rights under the PWFA.

References: U.S. Equal Employment Opportunity Commission (<https://www.eeoc.gov/wysk/what-you-should-know-about-pregnant-workers-fairness-act>).

Effective: 06/27/23

Revised:

Reviewed: 09/20/23

Breastfeeding Policy

Purpose

In 2010 the Fair Labor Standards Act was amended to require employers to provide rest breaks and a private space to employees who are nursing mothers, in order to allow them to express breast milk for their nursing children.

Policy Provisions

Pioneer Resources adopts this policy to support the health and well-being of the employees and their infant children by providing a workplace environment that accommodates the needs of nursing mothers.

Required Procedures

Employees seeking accommodations under this provision should contact their supervisor and the Human Resources department to identify a time and private space where the employee can express and store milk. Specific accommodations will be made on a case-by-case basis and will vary based on the assigned program and/or work location.

For the purpose of this policy a nursing mother is defined as: a mother who has given birth within the previous twelve (12) months or has adopted an infant. Nursing mothers can utilize this policy's provisions for one year after their child's birth.

1. Nursing mothers and management will work with Human Resources to address any issues or concerns that arise from this policy.
2. Nursing mothers should not be disturbed with work issues when using the lactation room.
3. Nursing mothers must work with their supervisors when leaving the work area to mitigate disruption to the operations of work.
4. All employees will respect and support nursing mothers utilizing this policy and abide by Pioneer Resources' discrimination and harassment policies.
5. In the event there is more than one nursing mother in a location, an alternating schedule will be established.
6. Under no circumstances will the designated lactation room be a restroom.
7. In the event that an office space is dual purposed as an office and a lactation room, the office must be immediately made available if/when the nursing mother needs to express milk.

References: United States Department of Labor, Wage and Hour Division Section 7(r)
https://www.dol.gov/whd/nursingmothers/Sec7rFLSA_btnm.htm.

Effective: 08/01/19

Revised: 09/01/20, 11/03/23

Reviewed: 09/27/22, 11/03/23, 10/24/24

Orientation and Training

Purpose

To identify the orientation, training, competency, and credentialing requirements for Pioneer Resources staff.

Policy

It is the policy of Pioneer Resources to provide or arrange for the provision of training for all staff working directly with students, residents and/or participants of services. Additionally, it is the policy of Pioneer Resources to require staff to demonstrate competency in performing the tasks to which they are, or may be assigned, and to possess good moral character. Finally, Pioneer Resources supports the concept of continuing education for all staff through staff development programs, workshops, seminars and other training opportunities related to fulfilling the goals of Pioneer.

Background Information (Including Definition)

Competency is defined as the personal ability to perform the elements of a task, including intellectual and physical skills. Competency may be determined by demonstration, testing, or verified experiences.

Credentials or credentialing refers to evidence of a person's qualifications, licensure, certification or status. Requirements vary from position to position and may include evidence of academic degrees, state licenses, certificates of completion of training, and other evidence or authority.

Procedures

1. Upon hire, the Human Resource department shall secure the following information regarding a new employee, which may be used to determine credentials and competency:
 - a. Criminal history report
 - b. Motor Vehicle Report (Driver's License)/ Secretary of State's database of driving records.
 - c. References from previous employers, when possible (the preferred number of references is three; personal references may also be used as appropriate).
 - d. Additional information which may be gathered including but not limited to:
 - i. Recipient Rights reports
 - ii. Reports from the state nurse's aide registry, if applicable.
 - iii. Certified transcripts or state licenses, if applicable.
 - e. Degrees, licenses, certifications will also be confirmed upon hire for appropriate positions requiring advanced knowledge and competence.
2. Within one month of being hired, all employees working directly with PR students, residents and/or participants of services, must have or receive the following in-service training:

- a. Emergency first aid (or possess a current Red Cross first aid card), C.P.R. (or possess a current Red Cross or Heart Association C.P.R. card).
 - b. Review of Pioneer Resources policies and procedures, including Blood Borne Infectious Diseases.
 - c. Recipient Rights training
 - d. Infection Prevention & Control Policy
 - e. Other, as specified by the new employee's supervisor
3. Within 90 days of being hired, all employees must attend Pioneer Resources' New Hire Orientation.
 - a. May be in person or online
 - b. Reviews Pioneer's operations, programs, Human Resources procedures, and program curriculum
4. Training is to be arranged and scheduled by the employee's supervisor.
5. Training will be conducted by Pioneer Resources and/or others as deemed appropriate.
6. Training records will be kept in the personnel record.
7. New non-direct care staff will receive training as specified and arranged by their immediate supervisor.
8. Employees wishing to take part in continuing education programs outside of Pioneer Resources, must follow those procedures outlined in the Staff Development policy.
9. At periodic intervals, staff training needs will be reviewed to determine when refresher CPR, First Aid, Recipient Rights and MANDT courses are required/preferred.
10. When Pioneer Resources, or a third party with whom the agency contracts, requires completion of prescribed training (i.e. group home curriculum or Department of Education Bus Driver Training), Pioneer shall cover the cost of training and the employee's wages during such. In the event an employee does not successfully complete the training requirements, but wishes to take the training again, the employee may do so at his or her own expense without pay.

New direct care staff in group homes must successfully complete required Community Mental Health (CMH) training applicable to the county of the residents being served.

References: CARF Recommendations, SHRM best practices, CMH requirements.

Effective 03/11/03

Revised: 10/14/20, 11/03/23

Reviewed: 05/30/19, 10/14/20, 08/23/21, 09/27/22, 11/03/23, 10/24/24

Pay Practice and Methods of Wage Payments

Purpose

To identify Pioneer Resources, Inc.'s pay philosophies, pay practices, and the standard methods of payment of Pioneer employees.

Pay

Pioneer Resources wants to recruit, retain and reward high performing talent. By investing in people, Pioneer offers competitive and legally compliant pay practices for all hours worked and time off for eligible employees according to the pay policies and procedures of the organization, as well as, Federal and State requirements.

Annually, Pioneer Resources conducts a compensation market analysis to determine competitiveness specific to our industry, organization size, geographic location and job category. Discrimination and equity testing is also conducted on an annual basis.

Placement within the pay band is also evaluated annually or as market supply and demand fluctuates.

Pioneer Resources, Inc. determines new hire pay by evaluating such things as skills, competencies, years of experience, education, and qualifications to do the job.

Pay systems have been developed with the following objectives:

1. Fairness of pay internally.
2. Competitive pay levels as compared externally.
3. To contribute to employee motivation and development.
4. To contribute to meeting the strategic plans and organizational objectives.

Background Information (Including Definition)

Full Time: Consistently and customarily scheduled to work for 30 or more hours per week.

Part Time: Consistently and customarily scheduled to work for less than 30 hours per week.

Exempt Status: Employee classification that is paid an annual salary and is not entitled to overtime pay.

Non-Exempt Status: Employee classification that is paid an hourly rate of pay and is entitled to over time when the hours worked in a standard work week (Sunday-Saturday) exceeds forty (40).

Pay Period: A prescribed fourteen day period during which an employee performs work and for which an employee is paid. Pioneer Resources' pay periods run from Sunday through the second Saturday.

Procedures

Wage Increases: Wages are established and adjusted to maintain a competitive wage scale with other employers in the local market, to keep pace with the economy, and to recognize and reward employee performance.

Annual salary increases are proposed by the CEO and the Director of Human Resources, and

approved by the Board of Directors during the budget planning and development process.

Out-of-cycle or promotional increases must be approved by the CEO and then documented on the "Wage Change Form," which must be signed by the CEO or Director of Human Resources. Adjustments of an employee's next performance review and pay review dates are at the discretion of the CEO and Board of Pioneer Resources if an out of cycle or promotional increase occurs.

Employees who are actively on formal discipline, performance improvement plans, or suspension are not eligible for the annual increase. This does not apply to wage increases mandated by state or federal law and/or collection bargaining agreements.

If an employee's performance review score is below a meets expectations, that employee will be automatically placed on a performance improvement plan and they will not receive their annual increase until the performance improvement plan is completed. Upon successful completion of performance improvement, the annual increase will become effective the first day of the next pay period (Sunday; day one of a new pay period after the completion date).

Pay Day and Direct Deposit: The normal pay period runs fourteen working days from Sunday of the first week to Saturday of the second week; employees receive paychecks every two weeks. Pioneer Resources will directly deposit into a bank or credit union. The choice of direct deposit is offered to all employees upon hire. Employees may change direct deposit accounts at any time by completing the applicable form on-line. Pioneer also offers the ADP Wisely pay card as long as the agency is continuing its partnership with ADP.

Work Schedules: Due to the type of services Pioneer Resources offers to the community, schedules are developed to meet the unique and specific needs of the program and/or facility. Work schedules will vary and are based solely on the treatment needs of persons served. For those employees who work within administrative services, the typical workday is normally eight (8) hours, Monday through Friday, not including lunch. The beginning and ending hours of operation vary by site and are based on the operational needs of the facility as established by the director of the program/department. Administration office hours generally begin at 8:00 a.m. and end at 4:30 p.m.

Employees may occasionally be reassigned and may be required to work overtime based on the operational needs of the organization. With the exception of approved time off, all employees are expected to work all regularly scheduled hours, arriving on time, be at their workstation ready to perform their job function and work through their scheduled quitting time. Working remotely can only be approved by the CEO of Pioneer Resources.

If an employee is unable to work their scheduled hours, it is the employee's responsibility to discuss the issue and/or concern with their direct supervisor as soon as they become aware of the conflict, or at least 1 hour before the start of their shift.

Meal Periods: Meal periods are based upon the needs of the department and set by the supervisor.

Meal periods for employees working in specialized residential care facilities are considered paid worked time. Employees may not leave the program while on shift to run personal errands or to go get food.

Pioneer Resources does not have formal break periods during the workday; instead

employees may step away from their workstation as needed to remain alert and to tend to personal needs.

Employees will be notified if time away from their workstation is excessive, negatively impacts operational efficiencies, or any contractual obligations involving resident/participant care.

Recording Time Worked: All Pioneer Resources' hourly employees are required to utilize the designated time keeping system to accurately record all hours worked, including the beginning and ending of a meal period. At no time should another Pioneer Resource employee punch in or out for another employee, or have another employee punch them in or out for work. Violations of this policy are subject to termination.

In cases when the employee fails to accurately record time worked, they are required to report to their direct supervisor within the same day so the necessary corrections can be made through electronic means.

Overtime Pay and Calculations:

From time to time, employees are required to work overtime to meet Pioneer Resources' operational and/or business needs. Overtime payments apply to all non-exempt (hourly) employees who have actual work time exceeding 40 hours during a standard work week (Sunday-Saturday). Non-residential overtime must be approved by the employee's supervisor **prior** to working the overtime shift. Pioneer Resources' employees who work overtime without prior approval will be paid for their time worked and may be subject to disciplinary action.

Overtime will be paid at one and a half (1-1/2) times the employee's regular hourly base rate for non-exempt (hourly) employees.

PTO, holiday, jury duty, bereavement and supplemental pay items, do not count towards weekly overtime calculations.

Holiday Pay: When working on a recognized paid holiday, eligible full-time employees will receive time and a half for hours worked in addition to standard holiday pay. Part-time employees who work on a recognized holiday will receive time and a half, but are not eligible for holiday pay. In order to determine holiday worked overtime and holiday pay calculations, holiday calendars will be issued annually by the Human Resources department, as approved by the CEO.

After Hours On-Call Rotation: To ensure adequate after-hours coverage, Pioneer Resources, Inc. pays on-call compensation to exempt and non-exempt professional employees in specific departments and job titles that have been identified and authorized as being part of the after-hours on-call rotation. Employees who are on-call must be available to respond from a remote location, or by returning to the work location when needed.

Employees who are included in the after-hour on-call rotation will be compensated according to departmental/budgetary guidelines.

Payroll Deductions: Payroll deductions are taken against an employee's gross pay each payday as required for federal, state, local income taxes, social security taxes and garnishments. Deductions are calculated as required by law and as modified by deductions claimed on the employee's tax form on file with Pioneer Resources. Employees may change income tax withholding levels at any time by completing an online process.

Pioneer Resources offers programs and benefits beyond those required by law such as

medical, dental and vision insurances and 403 (b). Eligible employees may voluntarily authorize additional deductions from their paychecks to cover the costs of their participation in these programs.

Procedures

1. All Pioneer employees shall be paid by one of three major means. They are:
 - a. Hourly Wage
 - b. Annual Salary
 - c. Specialized Contract
2. Hourly wage and annual salary employees shall be paid once every fourteen days, on the Friday following the completion of a pay period. There are 26 pay periods per year.
3. Hourly wage employees shall record all hours worked by utilizing electronic time and attendance processes available via employee's computer, employee group kiosk (computer), or phone when they arrive and leave work. If electronic methods are not available to off-site employees, these employees shall use a paper time sheet prepared by themselves with approval of their supervisor.
4. All recorded hours, whether generated by electronic means or paper time sheets, shall be verified/entered by supervisors or department heads, approved in ADP by 2:00 p.m. on the Monday following the completion of the pay period. All paper time sheets should be submitted to Human Resources for document retention purposes.
5. Salaried employees may be required to punch or complete time sheets, at the discretion of the CEO and/or the Board.
6. Payment to hourly wage employees shall be based upon total verified hours. Payment to annually salaried employees shall be based upon 1/26 of the annual salary paid per pay period.
7. Payroll checks, Pay Cards, or electronic deposit verifications shall be issued to the employee only, unless written authorization to do otherwise is provided by the employee. Verifications may be delivered via the Internet.
 - Direct deposit to an employee's personal bank account is preferred to ensure timely receipt for hours worked.
 - Paper payroll checks will be issued by ADP and delivered or picked-up by staff.
 - Paper payroll checks can be held at the administrative office (Central Wing) through the end of pay day for direct pick-up by employees during regular business hours 8:00am-4:30pm.
 - Any paper payroll checks not picked up directly by staff on pay day, will be placed in the mail the following business day (typically Monday), and be mailed via standard USPS delivery to the employee's mailing address on file and may result in delayed receipt of funds due to time delays caused by the post office.
 - Employee will be notified, usually via text, that they have a paycheck available for pick-up at the front desk on pay day; they may respond at

any time to mail it to their address of record instead of waiting until Monday to do so.

- Pioneer offers this alternative pick-up option in order to help avoid potential stop payment fees on checks never received by staff, and to allow staff the option of obtaining their pay check on pay day without any delay.
- If an employee receives three consecutive paper payroll checks, they will be automatically assigned a Wisely Pay Card for future payroll (direct deposit and/or the Wisely Pay Card are the two supported forms of employee payroll processing).
- If an employee does not have an account to direct deposit their payroll checks, a pay card will be made available to the employee at no cost by ADP (Wisely Pay Card).

If an employee feels that an error has been made in regards to payroll, an appointment should be made with the supervisor to rectify the problem. Verified and documented payroll shortages less than \$50 will be corrected on the subsequent paycheck. Any exceptions to this must be approved by the Director of Human Resources. Payroll errors greater than \$50 will be corrected by a separate check.

References: Paid Time Off, Paid Holidays, Overtime, Family Medical Leave, Fair Labor Standards Act, Pioneer Pay Practices

Effective: 03/01/99

Revised: 05/16/19, 10/28/21, 09/27/22, 11/03/23

Reviewed: 09/14/20, 09/30/21, 09/27/22, 11/03/23, 10/24/24

Performance Evaluations

Purpose

To establish a regular and standard method for evaluating employee performance in order to:

- Promote continual improvement of the skill levels of employees
- Ensure that our resident and/or participant of services are receiving the best possible services
- Maximize the organization's success in a challenging and evolving environment
- Ensure compliance with recognized standards of practice for clinical professionals, paraprofessionals, and direct care staff
- Ensure safety and high-quality service to the resident and/or participant of services by verifying competencies in skill/performance areas for employees providing therapeutic interventions.

Policy

It is policy of Pioneer Resources to maintain both an initial and an ongoing system for

evaluating the overall performance of Pioneer Resources' employees. Investing in the development and success of Pioneer Resources' employees is part of their organizational strategy. Elevating the success of our employees, elevates the care we provide for those we serve.

Background Information (Including Definition)

Performance Reviews: All staff shall maintain appropriate degrees, certifications and participate in development opportunities, in order to perform at the highest level to help achieve overall organizational success.

- a. All licensed professional/paraprofessional staff (licensed, certified or registered) shall receive an annual performance evaluation that specifically rates their clinical performance in the treatment areas outlined in their job descriptions.
 - b. All licensed and certified clinical staff shall be required to provide evidence of relevant education, certifications, and licenses upon initial employment and periodically as licenses and certifications are renewed.
2. All direct care workers will receive an initial 90-day and annual performance evaluation that specifically rates their competencies in providing care to the population they serve.
 - a. All direct care staff shall be required to provide evidence of relevant education, certifications, and completed trainings upon initial employment and periodically as credentials are renewed.
3. All business professionals shall receive an initial 90-day and annual performance evaluation to measure competency and success in areas of responsibility.

Continuing Education: Continuing education is intended to help employees enhance, develop, or refine skills to improve the performance of Pioneer Resources. The cost of staff development for pre-approved activities is the responsibility of the organization. Activities may include national, state, regional conferences and conventions, visits to other programs in the U.S., short term training programs or seminars sponsored by certified/recognized service providers, formal education classes sponsored by junior colleges, colleges, universities, or where appropriate, trade/technical schools.

Staff Development: Staff development may be required to fulfill the conditions of designated positions. Employees may be required to complete on-the-job training. Employees may also be required to attend mandated training required by licensing or accreditation bodies, orientation training, or other training that does not fall under the scope of this policy. Staff may be required to obtain professional training to establish competency levels.

Procedures

1. All employees newly hired by Pioneer Resources into an established job classification (with formal job description), and all employees newly promoted to a higher job classification, shall be considered to be on a probationary status for 90 days from the date of hire or promotion.
2. At the time of hire or promotion, Pioneer Resources' supervisory or administrative staff shall review the job description with the employee.
3. After the completion of the 90 day probationary period, the employee's immediate

supervisor shall complete a "90 day Evaluation" on the employee. This report must be discussed with the employee and shall bear directly on the future status of the employee.

4. The Supervisor/Director will assess the training requirements for the program service the employee is providing. Training sessions will be assigned so the employee will maintain current certifications in the required training curriculum.
5. The following are the responsibilities of professional licensed employees:
 - a. Interpretation of all referral information when available
 - b. The completion of an initial clinical assessment
 - c. The development of a treatment plan of care based on initial evaluation, including desired outcomes (goals)
6. Determination of the portions of the program to be delegated to paraprofessionals will be made by direct supervisor(s).
7. All non-seasonal staff shall be evaluated by means of an approved annual employee evaluation. The evaluation shall be reviewed by both the employee and the employee's immediate supervisor, on or near the employee's anniversary of employment.
8. Disagreements in ratings shall be discussed between the employee and the supervisor.
9. Results of this evaluation along with other available information shall be used to help determine salary raises and/or position promotions.
10. All evaluations completed on Pioneer Resources employees shall be made a permanent part of the employee's personnel record.
11. The following are responsibilities of professionals and paraprofessionals:
 - a. Timely review of treatment documentation, re-evaluation of treatment goals and plan of care as needed, accountability for documentation of treatment and dissemination of written and oral reports and discharge planning.
 - b. Verification of competency will be indicated with the date recorded next to each skill area indicating satisfactory performance was demonstrated, as well as the initials of each trainer participating in the supervision and the employee.
12. When competency is not demonstrated in a particular area in the Record of Competency, the employee will not perform that service or function. A plan for improvement will be developed. The area that needs improvement will be re-evaluated after 30 days. Completed Records of Competency will be attached to the annual performance evaluation and filed in the personnel record of the employee. Employees will obtain ongoing training and instruction throughout the year to maintain high quality resident and/or participant of services care.
13. Employees and their supervisors are ultimately responsible for identifying and/or developing learning opportunities to promote employees' skill development and career enhancement as identified through Performance Evaluations and could include Team Assessments.
14. If an employee scores below a meets expectations on a performance review in that total score, the employee will be automatically placed on a performance improvement plan

(PIP). See Pay Practice and Methods of Wage and Salary Payments Policy and/or Employee Relations and Attendance Policy for additional information.

15. All staff development activities shall align with the stated program needs as identified through Pioneer Resources, Inc. strategic and annual plans, Quality Assurance and Improvement Reviews, and recommendation from regulatory, certification and licensing agencies. Staff development activities are to be included in the budget planning process and should be a budgeted line item.
16. The Job Description should be reviewed with the employee in conjunction with the evaluation. If changes are noted and/or suggested, the supervisor / Director will turn in the information with the evaluation. The job description will be assessed and changed, if necessary, in coordination with the Director of Human Resources and the CEO.
17. Pioneer Resources' CEO shall be evaluated by a committee of the Board.

References: SHRM best practices in performance evaluation systems and CARF Standards.

Effective: 03/01/99

Revised: 09/27/22

Reviewed: 09/14/20, 08/23/21, 09/24/22, 10/24/24

Bonus Practice

Purpose

To define conditions under which employees may receive bonuses.

Policy

It is the policy of Pioneer Resources to award bonuses to employees who meet conditions of eligibility established by the Board of Directors. Bonuses are paid at the sole discretion of Pioneer Resources. The eligibility and criterion for bonuses may change at any time at the discretion of the Board of Directors or CEO based upon the varying conditions of the business.

Background Information (Including Definition)

1. A bonus is a cash award paid to an employee who meets conditions of eligibility established by the Board of Directors. A bonus is not an increase in pay. A bonus may be a set amount established by the Board or a percentage of wages or salary. A bonus is an award made to an employee or group of employees and does not entitle the employee or group of employees to yearly awards unless specifically directed by the Board.
2. Taxes will be deducted from bonuses paid to employees and remitted to the appropriate governmental unit if required by law.
3. Only the Board of Directors shall be authorized to grant bonuses through actions or

through approval of annual budget. The Organization shall establish specific criteria for any bonus granted. The Board may approve bonuses based on the following criteria or some combination of the following:

- a. Tenure or longevity
- b. Meritorious service
- c. Achievement in education or in-service
- d. Other reasonable measures delineated by the Board

Procedures

The CEO or any member of the Board of Directors may request the payment of a bonus. All such requests shall:

1. Be submitted to the President of the Board of Directors at least 30 days in advance of the proposed award;
2. List the specific criteria which will make employees eligible;
3. List the employees by name or classification who will be eligible;
4. Establish the cost of the bonus to the agency.
5. Bonuses shall not be paid without specific Board action.
6. Bonuses shall be reported as expenses to the appropriate department and appear as part of the financial statement prepared for the Board of Directors.

Effective: 02/01/99

Revised: 05/30/19

Reviewed: 09/14/20, 08/23/21, 09/28/22, 11/03/23, 10/15/24

Overtime & FLSA Classification

Purpose

To define exempt and nonexempt status under the Fair Labor Standards Act (FLSA) and the terms under which employees of Pioneer Resources, Inc. are eligible for overtime pay.

Policy

It is the policy of Pioneer Resources to appropriately classify employees according to the Fair Labor Standards Act so that nonexempt employees receive payment of overtime. These payments are in accordance with Department of Labor regulations.

Background Information (Including Definition)

1. Overtime - non-exempt job categories are eligible for overtime pay. Overtime must be at the request of, or approved in advance, by the employer.

2. Exempt job classifications are paid on an annual salary basis and do not receive overtime.
3. Overtime as defined shall be paid at one and one-half (1 1/2) times the normal hourly wage rate.

Jobs are classified as exempt or nonexempt. For most employees, however, whether they are exempt or nonexempt depends on:

- (a) how much they are paid
- (b) how they are paid, and
- (c) what kind of work they do

With few exceptions, to be exempt an employee must:

- (a) be paid at least \$35,568 per year (\$684.00 per week), and
- (b) be paid on a salary basis, and also
- (c) perform exempt job duties.

These requirements are outlined in the FLSA Regulations (as issued by the U.S. Department of Labor). *Most employees must meet all three tests to be exempt.*

It is the actual job tasks that must be evaluated, along with how the particular job tasks fit into the employer's overall operations.

There are three typical categories of exempt job duties: executive, professional and administrative.

Exempt Executive Job Duties

Job duties are exempt executive job duties if the employee:

1. Regularly supervises two or more other employees
2. Has management as the primary duty of the position
3. Has some genuine input into the job status of other employees (such as hiring, firing, promotions, or assignments)

The supervision must be a regular part of the employee's job and must be of other employees. Supervision of non-employees does not meet the standard.

In addition, the supervisory employee must have management as the primary duty of the position. The FLSA regulations contain a list of typical management duties. These include (in addition to supervision):

1. Interviewing, selecting, and training employees
2. Setting rates of pay and hours of work
3. Maintaining production or sales records (beyond merely clerical)
4. Appraising productivity, handling employee grievances or complaints, or disciplining employees
5. Determining work techniques
6. Planning the work
7. Apportioning work among employees
8. Determining the types of equipment to be used in performing work or materials needed

9. Planning budgets for work
10. Monitoring work for legal or regulatory compliance
11. Providing for safety and security of the workplace

Determining whether an employee has management as the primary duty of the position requires case-by-case evaluation. A standard is to determine if the employee is in charge of a department or subdivision of the enterprise (such as a shift).

The final requirement for the executive exemption is that the employee have genuine input into personnel matters. This does not require that the employee be the final decision maker on such matters, but rather that the employee's input is given particular weight.

Exempt Professional Job Duties

The job duties of the traditional learned professions are exempt. These include lawyers, doctors, dentists, teachers, architects, and clergy. Also included are registered nurses (but not LPNs), accountants (but not bookkeepers), engineers (who have engineering degrees or the equivalent and perform work of the sort usually performed by licensed professional engineers), actuaries, scientists (but not technicians), pharmacists, and other employees who perform work requiring advanced knowledge similar to that historically associated with the traditional learned professions.

Some employees may also perform creative professional job duties which are exempt. This classification applies to jobs such as actors, musicians, composers, writers, cartoonists, and some journalists. It is meant to cover employees in these kinds of jobs whose work requires invention, imagination, originality or talent, who contribute a unique interpretation or analysis.

Exempt Administrative Job Duties

The regulatory definition provides that exempt administrative job duties are for office work (no manual work), which is directly related to management or general business operations of the employer or the employer's customers. It must also be a primary component of which involves the exercise of independent judgment and discretion about matters of significance.

The administrative exemption is designed for relatively high-level employees whose main job is to keep the business running.

Procedures

1. Nonexempt employees are to record hours worked; overtime is paid at one and one-half (1 1/2) times the normal hourly wage rate for worked hours in excess of 40 per work week.
2. Department heads or supervisors shall authorize payment of overtime.
3. Classification of employees must be coordinated through the Human Resources department.

References: U.S. Department of Labor Fair Labor Standards Act (FSLA)

Effective: 03/01/99

Revised: 05/16/19, 10/24/24, 11/20/24

Revised: 09/25/20, 08/23/21, 09/28/22, 11/03/23, 10/24/24

Position Control Policy

Purpose

To describe the approval process for position control by which Pioneer Resources, Inc. hires and removes positions.

Policy

It is the policy of Pioneer Resources to approve the hiring, promotion, or creation of a new position or removal of a position (position elimination) functions according to standard procedures as well as State and Federal regulations

Procedures

- a. All new Pioneer Resources, Inc. positions shall be established and/or eliminated by the CEO in conjunction with the Board of Director's approved annual budgetary guidelines. Positions exceeding the annual budget shall be approved by the Board of Directors.
- b. All new Pioneer Resources' positions shall have job descriptions, educational and experience requirements, and a salary/wage rate established prior to approval of the position.
- c. Authorization for the hiring or filling of any newly created or vacant position within Pioneer Resources shall authorized by the CEO. When authorization to hire or fill any position has been established, that function shall be conducted according to the Recruitment, Hiring and Pre-Employment Requirements Policy, as well as the Internal Selection Process Policy.

Effective: 09/20/04

Revised: 06/03/19, 08/23/21, 09/28/22, 11/03/23

Reviewed: 09/25/20, 08/23/21, 09/28/22, 11/03/23, 10/24/24

Recruitment, Hiring & Pre-Employment Requirements

Purpose

Pioneer Resources believes that hiring the best qualified individuals to fill positions within the organization contributes to the overall strategic success of Pioneer Resources. Each employee, while employed, is hired to make significant contributions to Pioneer Resources' mission, vision and values. The purpose of this policy is to define the recruitment, hiring, pre-employment and on-boarding process at Pioneer Resources.

Pioneer Resources is an equal opportunity and affirmative action employer committed to diversifying its workforce. It is Pioneer Resources' policy to provide equal employment opportunities to applicants for employment, employees, volunteers, volunteer Board Members, students and interns without regard to race, color, religion, sex (including pregnancy, childbirth, breastfeeding, or related medical conditions), gender identity or expression, national origin,

ancestry, age, disability, legally protected medical condition, genetic information, marital status, sexual orientation, protected veteran status, military status, citizenship status or any other status that is protected by law. Pioneer Resources also does not discriminate against applicants or employees because they have inquired about, discussed, or disclosed their own pay or the pay of another employee or applicant.

All aspects of employment, including but not limited to recruitment, hiring, promotions, transfers, compensation, benefits, discipline, training and educational opportunities will be made on the basis of individual abilities and qualifications without regard to any legally protected category. An employee's protected characteristic will only be considered when it constitutes a bona fide occupational qualification.

Employment opportunities are based upon the individual's ability to perform the job. Pioneer Resources will provide reasonable accommodations when necessary to support the employee and the advancement of individuals with disabilities who are otherwise qualified to perform the essential job functions, with or without accommodations, as long as doing so does not cause an undue hardship for the organization.

At Pioneer Resources, we believe that every employee, through their diverse abilities and experiences, can contribute to our growth, resident and/or participant of services, and the community we serve. We embrace diversity and are committed to providing equal opportunity to all employees and applicants. If you have a disability, and require reasonable accommodations in the application process, call Human Resources at (231) 773-5355, via email at HRGroup@pioneerresources.org, or in person at 1145 Wesley Ave, Muskegon, MI 49442. We will be happy to assist you. We will only share your accommodation request with those individuals who have a specific need to know. The request for an accommodation will not affect Pioneer Resources' hiring decisions. All other submissions should be performed online.

Recruiting Procedures

1. Job Requisition Request: Job requisition request must be completed in the Applicant Tracking System to fill open positions within Pioneer Resources. Requests must be approved in accordance to the program/department budget and following the approval process outlined in the Position Control Policy.
2. Job Postings: All job openings will remain posted for a minimum of three (3) days or until the position has been filled, the posting period has expired, or if the position has been placed on hold. Positions may be canceled at any time for any reason at the discretion of the Board of Directors, CEO and/or the Director of Human Resources.

During periods of re-organization, restructuring, or the natural progress of an individual career path, positions may not be posted.

Positions posted for the Center for Autism, Group CLS and SIL locations will include notifications that all applicants must have documentation from the Michigan Department of Human Services that they have not been named in a central registry case as a perpetrator of child abuse or child neglect.

All applicants for a posted position will be considered on the basis of their qualifications, their ability to perform the job successfully as well as their ability to perform the essential functions of the position with or without accommodation.

Recruitment/Advertising:

Positions are able to be posted with a variety of cost effective job boards, social media sites, trade magazines, newspapers, college and university placement offices, churches, and other on-line recruitment sites. Human Resources is responsible for placing all recruitment advertisements.

Interview Process:

Open positions for residential homes, will be sourced, pre-screened, interviewed and hired by Human Resources staff and/or their designee.

For all other open positions, the hiring supervisor will source, pre-screen applications, and complete the initial interview (pre-screen) to determine the best candidate pool. Human Resources personnel is available to assist with pre-screening applicants upon the hiring supervisor's request.

The hiring supervisor will decide upon the composition of the interview, individual or team, and the standard interview tool. If a team interview is conducted, a structured interview process is recommended.

After interviews have been completed, the hiring supervisor is required to forward the applications, resumes, interview tools and all notes for all candidates that have been interviewed, to Human Resources.

Human Resources will notify applicants who are not selected for positions at Pioneer Resources as requested by the hiring supervisor and will retain all the candidate information for each open position as required by law.

Rehire Waiting Period

There is a mandatory waiting period of 75 days before a former employee may be rehired.

Former employees returning more than 75 days from the termination date will be required to complete the full pre-employment screening process as indicated below.

Pre-Employment Process

Once the conditional offer of employment has been extended by the hiring supervisor and/or Human Resources, and accepted by the candidate, the pre-employment testing and verification process must be completed. The hiring supervisor should forward the new hire information immediately to Human Resources once the candidate accepts the conditional job offer.

1. The Human Resources team will assign the new hire tasks within 24hrs, schedule the pre-employment assessments as applicable, including but not limited to: drug screen, physical, back screening, and TB test.
2. Upon acceptance of the conditional offer of employment, Human Resources will run background checks and schedule the new hire for fingerprinting as needed.
3. All results from pre-employment assessments, screenings and tests, must be received by Human Resources prior to assigning a start date. An HR representative will notify the hiring supervisor when the applicant is officially able to start employment.
4. The hiring supervisor will schedule both the all staff new hire orientation and any

position specific new hire orientation/training.

5. Due to the efforts involved in the onboarding process and the cost associated with the pre-employment assessments, Human Resources has the discretion to rescind employment offers for any of the following:
 - a. Failure to complete the new hire paperwork
 - b. Failure to attend a scheduled pre-employment assessment
 - c. Failure to have a TB test read
 - d. Failure of a pre-employment background requirement
 - e. If the behavior of the candidate/new hire violates the company's mission, values or behavioral expectations of kindness, respect and dignity.
6. Fingerprints are required for those going into Group Homes.

Using the Compliance Checklist, Human Resources will process applicable verification checks, for compliance purposes, within the counties we serve.

1. Reference Checks: Once a candidate has been identified for hire, the hiring supervisor or HR Team will initiate the necessary, and required, reference checks.
 - a. For credentialed positions, at least three (3) professional references must be obtained that are not related to the candidate and must date back to include at least five (5) years of work history.
 - b. For all other positions at least three (3) employment verifications and/or personal or professional references must be obtained.
 - c. For the Autism program the above requirements apply; however, three (3) references and/or employment verifications are required and all should be unrelated to the candidate.
 - d. If hiring a candidate with no prior work experience, references may include school related contacts or volunteer related experience.
2. Central Registry Clearance: Transportation, group CLS, SIL locations, administrative staff and Center for Autism employees, are required to submit a Central Registry Clearance form.
 - a. Once a candidate has been identified for hire, the Human Resources Team will submit the completed Central Registry Clearance form to the Michigan Department of Health and Human Services for processing.
 - b. Human Resources will then work with MDHHS to receive the results.
 - c. When an out of state registry form is required, the HR team will submit the necessary forms to the state specific agency.
 - d. After successfully passing the screening, the candidate will be able to start with Pioneer Resources.
 - e. If unable to successfully pass the Central Registry Clearance, the candidate will no longer be eligible for employment with Pioneer Resources and the offer will be rescinded.

3. Conditional Offers of Employment: The hiring supervisor will extend a conditional offer of employment until the successful completion and outcome of pre-employment testing, compliance checks, verification process, and satisfactory responses from candidates' references.
4. Criminal background checks will be reviewed by the HR team in accordance with the State of Michigan's criminal background check guidelines.
5. Failure to successfully complete, and pass, the pre-employment process will result in a rescinded offer.
6. MVR (Motor Vehicle Report): Candidates hired to perform driving duties (drivers), or those who are considered to be occasional drivers, must meet the following criteria at all times (in the event that the new hire doesn't meet the driving requirements for Pioneer Resources, the HR Team will contact the hiring supervisor):
 - a. Each employee must have a current, valid driver's license that has been issued for a period of at least three years.
 - b. Must maintain a clean driving record (i.e., must remain insurable under Pioneer Resources' liability insurance policy and maintain less than six (6) points within a three year period).
7. Employees driving a company vehicle or driving on company business must observe all safety, traffic and criminal laws of the state in which they are driving.
 - a. No driver may consume alcohol or illegal drugs while driving a company vehicle, or prior to the employee's shift.
 - b. No driver may consume or use any substance, regardless of legality or prescription status, if it negatively affects the driver's ability to safely operate a motor vehicle and carry out other work related duties (i.e. - would be impaired or driving ability would be diminished).
 - c. No driver may pick up or transport non-employees while in a company vehicle or while performing company business.
8. Anything a driver does in connection with the operation of a motor vehicle can affect that driver's fitness for duty or insurability as a driver.
 - a. Regardless of fault, circumstances, on-or-off duty status, time, or place, any driver who receives a traffic citation from, or is arrested by a law enforcement officer, or who is involved in any kind of accident while driving, must report the event to their immediate supervisor, who will then work with HR.
 - b. Upon such notification, a member of HR will run the motor vehicle report (MVR).
 - c. This report will be used to determine insurability under PR's liability insurance.
9. If at any time during the course of employment an employee violates any part of this policy, or becomes uninsurable as a driver will be subject to reassignment and/or disciplinary action up to and including separation from Pioneer Resources.

- a. Employees who are reassigned may also be subject to a reduction in pay.
- b. Employees who refuse the voluntary assignment will be considered to have voluntarily resigned.

Verification of License

Candidates hired to perform clinical services will be required to successfully complete the verification process. The following agencies provide verification of the requirements: the Michigan Department of Licensing and Regulatory Affairs Bureau of Professional Licensing, the Michigan Certification Board for Addiction Professionals, the MDCH Sanction Provider List of the National Practitioner Databank and the Office of Inspector General (OIG) Exclusions Database.

This process, along with the verification from the Office of Recipient Rights (ORR) and the finger printing process that is completed at the time of on-boarding, are used to demonstrate that those hired meet the “good moral character” standard as required by the administrative licensing rules, funding agencies and other regulatory bodies.

References: Pioneer Resources’ Policy and Procedure Manual; CMH contract, DCH certification requirements, DCIS licensing requirements & accreditation standards (CARF); Good Moral Character Document; Licensing Rules for Child Care Centers, R 400.8125 Staff and volunteers; Licensing Rules for Child Care Institutions.

Effective: 08/01/19

Revised: 11/03/23, 10/24/24, 02/21/25

Reviewed: 09/01/20, 08/31/21, 09/01/22, 11/03/23, 10/24/24

Internal Selection Process Policy

Purpose

Pioneer Resources’ internal selection process is designed to promote the engagement and retention of key talent across the system. It also provides a fair, systematic, and reliable basis for selecting the best qualified candidate for open positions that supports equal opportunity.

Policy Provisions

1. When a vacancy or new position is posted, Pioneer Resources, Inc. encourages internal candidates who meet the minimum qualifications to apply in writing to the hiring supervisor and/or through the Pioneer Resources’ Recruitment Dashboard in ADP. When specialized skills or qualifications are required, the position may be posted externally.
2. During periods of re-organization, restructuring, or the natural progression of an individual career path, positions may not be posted. This option is at the discretion of the CEO and/or the Director of Human Resources.

3. Internal candidates applying for positions within The Center for Autism, Group CLS, or SILs must have documentation from the Michigan Department of Human Services stating that they have not been named in a central registry case as perpetrator of child abuse or child neglect, on file prior to their starting date within the program.
4. Internal candidates applying at the Center for Autism who have resided outside of the State of Michigan as an adult within the past ten (10) years immediately preceding the date of application, shall have the applicable central registry documentation from other state agencies, and any responses received, on file prior to their starting date with the program. A request will be made to update references when an employee is transferring to the Center for Autism program. Annual evaluations related to job function may be accepted as a reference.

Required Procedures

Promotions/Internal Transfers: Internal candidates must have been in their current position for at least six (6) months and be in good standing. Good standing is defined as an employee who has successfully completed their orientation period, has no active (within the last 6 months) formal written disciplines or performance improvement plans, and has consistent and predictable attendance. Exceptions to this policy must be approved by the CEO and/or Director of Human Resources.

Internal candidates must put requests in writing to the hiring supervisor and Human Resources to be considered for the posted position(s).

Human Resources will review the request to determine if the applicant meets the minimum qualifications of the position, is in good standing and has worked in their current position for at least six (6) months.

Qualified and eligible internal applicants will be forwarded to the hiring supervisor for review and consideration.

The hiring supervisor will call the current supervisor of the candidate to obtain a reference. This conversation will confirm the good-standing of the employee. If the candidate is in good-standing, the hiring supervisor may proceed with the interview and selection process.

If internal applicants do not meet the minimum requirements for the open position they will not be interviewed; however, Human Resources will communicate development opportunities with the employee, as to ready the employee for the next opportunity.

Once an internal candidate has been selected for hire and an offer has been accepted, Human Resources will complete the following process:

1. Obtain a new TB test as required
2. Obtain updated fingerprint results as required by licensing agencies
3. Office of Recipient Rights check as needed
4. Verify education and/or licensing as applicable
5. MVR search if needed

Once the hiring supervisor has selected the final candidate, Human Resources will begin coordinating the hiring process. This process includes compensation approval and extending

the contingent offer of employment. After the interviews have been completed the hiring supervisor is required to forward the interview selection forms, applications and resumes to Human Resources for record retention.

Human Resources will communicate with all internal candidates who are not selected for positions at Pioneer Resources, Inc. at the request of the hiring supervisor and will retain all the candidate information for each requisition as required by law.

Upon acceptance, the date of the transition will be coordinated between both the current and accepting supervisor. For the purposes of this policy, the standard transition period for hourly employees is two (2) weeks and for salaried employees is three (3) weeks.

Human Resources will work with applicable staff to ensure all necessary paperwork has been completed prior to the requisition being closed.

Change in Status

When a staffing need has been identified, the hiring supervisor will be responsible for the submission of a job requisition request; this includes changes in hours worked.

Employees wishing to change status or programs within Pioneer Resources, are required to formally write and forward the request to the hiring supervisor. The hiring supervisor accepts or declines the request, fills out the employee change form and forwards this information to the Human Resources department.

References: CMH contract, DCH certification requirements, DCIS licensing requirements & accreditation standards (CARF), Licensing Rules for Child Care Institutions, Licensing Rules for Child Care Centers, R 400.8125 Staff and volunteers, Recruitment, Hiring, & Pre-employment Requirements Policy.

Effective: 06/01/19

Revised: 09/01/20

Reviewed: 08/01/21, 09/01/22, 11/03/23, 10/24/24

Volunteer Screening

Purpose

Establish a pre-placement screening process and an ongoing training and evaluation process for volunteers to protect individuals served by Pioneer Resources.

Policy

It is the policy of Pioneer Resources to promote a safe environment for those we serve; therefore, background screening of volunteers who will have, as part or all of their functions, frequent access to minors under the age of 18, or persons with intellectual or physical impairments, is required. Volunteers working with one or both of these vulnerable populations,

must wait prior to beginning their work until after the background screening process has been completed.

Background Information (Including Definition)

Activity: Any event or activity sponsored by Pioneer Resources.

Minor: Anyone under the age of 18.

Supervisor: Person to whom the volunteer reports.

1. The supervisor may be any employee of Pioneer Resources authorized by a department head to supervise volunteers.
2. The supervisor has the authority to accept or decline the placement of a volunteer or remove a volunteer, conduct disciplinary measures, and direct the work of the position(s) reporting to him/her.

Volunteer: A person volunteering time and services without any present or future expectation of payment or benefits of any kind.

This is not an employment relationship and the volunteer is under no obligation to provide time, duties of resources other than what he or she chooses to freely provide.

Resident or person receiving services: A child or adult who, as a result of mental or physical disability, would be dependent upon the volunteer for safety and security.

Procedures

Volunteer Job Descriptions: Each volunteer job will be defined as to qualifications, responsibilities, and limitations of the position. The job description will provide the basis for recruitment, screening, training, supervision, identification of positions requiring criminal background screening, and evaluation of volunteers.

Volunteer Background Screening Notification: Volunteers must be notified either verbally or in writing, that extraordinary screening (such as criminal background checks) will be necessary before they will be allowed to begin any activity with those populations.

Volunteers applying to work with persons receiving services will be required to provide authorization for a Criminal Record Check. Volunteers who do not meet the criteria as issued by the Michigan Workforce Background Check Program shall not be offered a volunteer position.

Volunteer Applications: All volunteers are required to complete a Volunteer Application and Volunteer acknowledgment.

Volunteer Interviews: The supervisor shall interview prospective volunteers before selection. It is recommended that the interview process be consistent among all the volunteers selected for interview. It is recommended that volunteers interviewed but not selected be advised by phone or mail that a selection has been made.

Volunteer References: Referencing is a means of verifying the information presented by the volunteer through the application and interview process. During the screening process, should it become necessary, the volunteer may be asked for additional references. Past employment and/or character references may be checked by phone, fax or mail by the supervisor or Director of Human Resources. A minimum of two references must be submitted, with three

being preferred.

Rechecks: Each calendar year each department will provide a listing of current volunteers whose service requires activities with persons receiving services. A request for a new criminal record background check will be made of each volunteer every two years. The volunteer may continue to participate in activities during the time of the recheck.

Volunteers and Standard Policies and Procedures: Volunteers shall be obligated to abide by all Pioneer Resources' policies and procedures which are relevant to the area to which the volunteer is assigned. The supervisor or Director of Human Resources shall ensure that volunteers are provided with copies of those policies or access to electronic copies.

Training:

1. The volunteer's assigned supervisor shall be responsible for providing training with respect to the specific job description.
2. Volunteers shall also receive training with respect to confidentiality and HIPAA requirements, the rights of individuals served, and infection control procedures, if applicable. These trainings may be provided by the supervisor, another trainer within the agency, HealthWest trainer or a recognized online course.

References: Michigan P.A. 27, 28 & 29 of 2006, Michigan State Police IChat System, Michigan Workforce Background Check Program Legal Guide at <http://www.miltcpartnership.org/Documents/LegalGuide.pdf>.

Effective Date: 11/02/11

Revised Date: 05/28/19

Reviewed Date: 09/30/20, 09/29/21, 09/23/22, 11/03/23, 10/24/24

Employee Referral Program

Description

Pioneer Resources is always looking for good people, and you can help. Research has shown, and our own experience supports, that new hires who come into a company through employee referrals are excellent contributors, stay with the company longer and are more cost-effective recruits.

That's where you come in! If you know someone who would be a good addition to Pioneer Resources you may be awarded a referral bonus of \$100.00 (less taxes) if you refer a candidate, they are hired and they maintain voluntary employment for a minimum of 30 calendar days.

An add-on referral bonus of \$100.00 (less taxes) will be paid to both you and the referred employee upon successful completion of the referred employee's 90-day performance evaluation/review.

Employees must refer candidates to Human Resources using the referred by line on the employment application to be eligible for a referral bonus.

Program Rules

1. All Pioneer Resources' employees are eligible for the referral bonus.
2. Temporary, seasonal, and contract employees are not eligible candidates for referral awards.
3. Referred employees must not have worked for Pioneer Resources within the last twelve (12) months for either the referrer or referred employees to be eligible for the bonus.
4. To be eligible for an award, an employee must be referenced on the new employee's employment application.
5. The referring employee must agree to have his or her name used when the company contacts the candidate.
6. The first employee to refer a candidate will be the only referring employee eligible for payment.
7. Only candidates who meet the essential qualifications for the position will be considered.
8. All candidates will be evaluated for employment consistent with company policies and procedures.
9. All information regarding the hiring decision will remain strictly confidential.
10. Any disputes or interpretations of this employee referral program will be handled through the Human Resources department.
11. All referral bonus payments will be paid within 30 days after successfully completing the payment requirements as stated above.
12. Must be an active employee with Pioneer Resources at the time of payment to be eligible to receive such.

Effective Date: 10/1/20

Revised Date: 06/25/21, 08/23/21, 03/24/22, 08/11/22, 11/02/23

Reviewed: 80/11/22, 11/02/23, 10/24/24

Succession Planning

Purpose

Recognizing that changes in management are inevitable, Pioneer Resources, Inc. has established a succession plan to provide continuity in Leadership, Supervision, and Management positions and to avoid extended and costly vacancies in key positions.

Pioneer Resources' succession plan is designed to identify and prepare candidates for next-level management positions that become vacant due to retirement, resignation, death or new business opportunities.

Policy

It is the policy of Pioneer Resources, Inc. to assess the management/leadership needs of the agency in order to ensure the selection of qualified leaders that are diverse and a good fit for the organization's mission and goals, as well as have the necessary skills for the organization. The Director of the department alongside Human Resources is responsible for the identification of workforce readiness. This is the assessment of current workforce skills and gaps in competency and knowledge and developing a plan of action to address and prepare the workforce for success.

Procedures

Annually, (April) the CEO and management team will meet to discuss the department's succession plan. Each department Director will:

1. Present to the CEO a review of their departmental succession plan
2. Identify key positions and incumbents targeted for succession planning. This should include an analysis of planned retirements, potential turnover, etc.
3. Identify individuals who show the potential needed for progression into the targeted positions and leadership within the company and their current readiness for promotion using the 9-Box Employee Readiness Grid ([p:/Forms/Succession Planning](#)).
4. Outline the actions taken in the previous six months to prepare identified individuals to assume a greater role of responsibility in the future.
5. Create a development plan for each employee and define the costs of said development in which to provide in the annual budget planning process, using the Career Development Plan ([p:/Forms/Succession Planning](#)).

Directors will also be responsible for developing a "How to do my Job" plan to ensure that each program and/or department of Pioneer Resources is covered when employees turnover, on vacation, on leave, or turn in notice of voluntary resignation or are separated from employment.

1. Each Director is to develop an overall written plan of action stating how coverage will continue for those Pioneer Resources serves given the above conditions.
2. Each Director shall present this contingency plan along with the annual budget so any cost associated with this plan is accounted for within the budget planning process.
3. The CEO and the Director of Human Resources will approve the contingency plan(s).
4. The Director is responsible for updating this contingency staffing plan annually.
5. The Director is responsible for providing updates to both the CEO and the Director of Human Resources should there be changes to the plan.

Directors in collaboration with the Human Resource Department are responsible for developing its future workforce needs based upon the changing labor market, trends in turnover/industry, change in services provided, development of new services or programs, and identifying talent gaps.

References: CARF, SHRM

Effective Date: 08/01/19

Revised date: 09/23/20, 09/07/21, 09/23/22, 10/16/23, 10/24/24

Reviewed Date: 10/16/23, 10/24/24

Employment of Individuals with Criminal History

Purpose

This policy creates an internal structure to review and make recommendations regarding employability of employees and applicants with criminal convictions while maintaining high quality of care provided to those we serve.

Policy Provisions

It is Pioneer Resources' policy to abide by the "Good Moral Character" standards outlined by licensing and other regulatory agents. Pioneer Resources, Inc. recognizes that criminal convictions do not necessarily indicate a lack of good moral character or indicate predictable harm or risk. As a result, Pioneer Resources has adopted these procedures to consider new employment of applicants or continuing employment of employees with a criminal conviction.

Procedures

1. Criminal record checks will be completed as part of an applicant's pre-employment screening. Applicants, employees who have lived outside the state of prospective employment during the prior ten years will be required to provide their former addresses.
2. Each applicant will be required to sign a release allowing Pioneer Resources to check all applicable sources for information related to criminal convictions.
3. Criminal record checks will be conducted through applicable state background check systems.
4. Offers of employment are contingent upon an acceptable criminal record history.
5. Pioneer Resources will consider the following in determining suitability for employment:
 - a. all applicable state regulations;
 - b. licensing rules;
 - c. length of time since conviction;
 - d. age at the time of conviction;
 - e. program for which candidate is being considered;

- f. the circumstances surrounding the offenses resulting in conviction;
 - g. evidence of rehabilitation (i.e. written reference from parole officers, former employers, etc.);
 - h. nature of offense leading to conviction;
 - i. disclosure of the offense leading to conviction on application;
 - j. sustained employment success since last conviction;
 - k. type (s) of conviction given the population Pioneer serves.
6. In instances where the applicant and/or the employee will have direct access to, or provide direct services to, individuals who reside in Adult Foster Care Facilities (AFC), the application of R 400.1151 and R 400.734b shall be applied.
 7. Any person who meet exclusionary criteria will not be considered for employment/hire within the licensed residential facilities of Pioneer Resources, Inc. All other convictions involving violence, assault, sexual and/or child abuse or misconduct, use of a weapon, drug trafficking, domestic violence or any other felony offenses, will be reviewed on a case by case basis applying licensing standards of exclusions.
 8. Upon the conformation of an exclusionary conviction as outlined in licensing standards the immediate termination of employment shall occur.
 9. If criminal record checks reveal a past conviction not disclosed on the application, applicant or employee will be disqualified from consideration for employment, or continued employment for falsification of a legal document.
 10. After hire, criminal record checks will be completed monthly.
 11. If information is obtained that warrants the need for a criminal record check it may be conducted at any time.
 12. All employees are required to disclose a criminal conviction or charges pending occurring during the employee's employment and within five days of a conviction. It is the employee's responsibility to immediately communicate this information to the Human Resources department.
 13. Criminal convictions occurring during employment may be grounds for immediate separation of employment.
 14. Employees whose job requires them to drive are required to disclose moving violations that may affect their eligibility to drive legally within five days of the moving violation.
 15. Because Pioneer Resources desires to provide work placement services to a uniquely disadvantaged population, Pioneer may hire individuals irrespective of provisions noted within this policy who have been recently released from jail or prison, or who have a criminal history including misdemeanor or felony convictions. These individuals may be considered for open positions within Pioneer Resources, Inc. janitorial services as available. The purpose of hiring individuals with criminal backgrounds (who may have recently been incarcerated and out of the work force) is to provide a period of stable work history and/or work experience so more job opportunities become possible to the individual.

References: Recruitment, Hiring and Pre-Employment Requirements, Good Moral Character Document, Adult Foster Care Facility Licensing Act (Excerpt) R400.73b, EEOC Guidelines

Effective: 08/01/19

Revised: 11/03/23

Reviewed: 09/25/20, 08/23/21, 09/27/22, 10/24/24

Recordkeeping

Personnel Files Bullard-Plawecki Right-to-Know Act

Purpose

To define and demonstrate legal compliance with the Bullard-Plawecki Right-to-Know Act for personnel records.

Policy

It is the policy of Pioneer Resources to construct and maintain a record or file on each employee. All information collected, assembled, or maintained by governmental bodies pursuant to law or ordinance, or in connection with the transaction of official business, is public information unless otherwise excluded by law. Personnel records are those confidential records which are maintained for each employee. The files are kept in a fireproof, locked cabinet with limited access. All personnel records are the property of Pioneer Resources, Inc.

Background Information (Including Definition)

This policy is adopted to comply with the Bullard-Plawecki Right-to-Know Act. This act is designed to permit employees the right to review personnel records, to provide consistent procedures for review, to prescribe the information which may be contained in the personnel record and the disclosure of personnel record information that is in accordance with existing laws regarding the maintenance, access, security and retention of employees' records or files and general files.

The Personnel Record (423.501): The official, or master, personnel file that includes documents with original authorization signatures, or the authorized electronic creation of such, relating to an individual's employment with Pioneer Resources. The personnel record will include job-related documents used to make decisions in determining an employee's qualifications for employment, promotion, transfer, compensation, or disciplinary action. The personnel record should only contain information pertaining to the individual employee. No information on other employees, or other individuals, may be placed in the personnel record.

A personnel record shall not include:

1. Employee references supplied to an employer, if the identity of the person making the reference would be disclosed.
2. Materials related to the employer's staff planning with respect to more than one employee.
3. Medical records or reports.
4. Information of a personal nature that would violate a person's privacy.
5. Investigative reports.
6. Grievance records.
7. Records maintained by an educational institute which are directly related to a student and are considered to be education records.
8. Records kept by an executive, administrative or professional employee, remain in the sole possession of the maker of the record, are not accessible or shared with other persons. However, a record concerning an occurrence or fact about an employee kept pursuant to this subparagraph may be entered into a personnel record, if entered not more than six (6) months after the date of the occurrence or the date of the fact becomes known.

Personnel Record Information (423.502): Which is not included in the personnel record but should have been as required by this act, shall not be used by an employer in a judicial or quasi-judicial proceeding. Omitted information may be used if deemed unintentional by the judge and approved by the employee.

Review of Personnel Record by Employee (423.503-423.504): An employer upon written request shall provide the employee with an opportunity to periodically review, at reasonable intervals, generally not more than two (2) times in a fiscal year, the personnel record. The review shall take place in the Human Resource Department during normal business hours (8:00 a.m. – 4:30 p.m. Monday through Friday).

Employees of Pioneer Resources have the right to inspect, copy and dispute information contained in the personnel file. If the employee disputes information contained in the personnel file and an agreement cannot be reached between the employer and the employee, the employee may submit a written statement, not to exceed five (5) pages, explaining the employee's position. This statement will be maintained in the personnel file until the disputed information is removed.

Copies of the personnel record will be at the expense of the employee making the request. The customary copy fee will be charged per copy.

Divulgence of Disciplinary Records (423.506-423.507): An employer of a former employee shall not divulge a disciplinary report, letter of reprimand, or other disciplinary action to a third party, to a party who is not part of Pioneer Resources, or to a party who is not part of a labor organization representing the employee, without written notice.

Hence, before any disciplinary report, letter of reprimand or other disciplinary action is disclosed to a third party, the following must occur:

- A written notice to the employee will be mailed to the employee by first class mail to the

last known address on file with Human Resources and shall be mailed on or before the day the information is divulged from the personnel record.

- This requirement is not necessary if any of the following occurs:
 1. The employee specifically waives written notice as part of a written and signed employment application with another employer.
 2. The disclosure is ordered in a legal action or arbitration to a party to that legal action or arbitration.
 3. Information that is required by a governmental agency as the result of a claim or complaint by an employee.
 4. A representative from Human Resources will review a personnel record before releasing information to a third party (except when a release is ordered in a legal action or arbitration to a party to that legal action or arbitration) and delete discipline reports, letters of reprimand, or other records of disciplinary action which are more than four (4) years old.
 5. Court orders and/or subpoenas will be carefully reviewed before they are honored regarding employment records. For example, unless proper waivers are given certain medical records, attorney-client records, which are given privilege protection under Michigan laws will be carefully reviewed before the court order or subpoena is honored.
 6. Under no circumstances should an employee's Social Security number be disclosed under the Freedom of Information Act (FOIA).
 7. Upon termination of an employee, all files, or a copy of all files held by an individual department, shall be submitted to the Human Resources Department.

Any employee seen removing original documents from his/her personnel record, or that of another employee's file, without proper authorization shall be subject to disciplinary action up to and including immediate separation of employment.

Procedural Records:

- Personnel File Audit Checklist

Employment/Orientation Records:

- Application and/or resume
- Offer of employment letter
- Job description (signed)
- Confidentiality, non-compete or other employment agreements
- New-hire checklist
- Handbook acknowledgement
- Drug testing policy acknowledgement and consent form
- Background check consent form

Performance Records:

- Performance evaluations
- Self-evaluations

- Orientation evaluation
- Disciplinary write-ups
- Notes to file on verbal counseling/discipline
- Awards or recognition for exemplary performance

Training Records:

- Required training(s)
- Certifications
- New-hire orientation training checklist
- Job-specific safety training checklist
- New-hire safety training checklist
- Harassment training acknowledgement
- Workplace Violence acknowledgement

Store these types of documents separate from personnel record:

1. I-9 Forms and copies of identification (if kept)
2. Investigation notes and reports
3. Drug test and background check results
4. Payroll records containing social security numbers or other protected information, including W-4s and garnishment orders
5. Medical records including medical exams, disability benefits claim forms, EAP referrals, and results of drug and alcohol tests, reimbursement requests for medical expenses, health-related information about employee or employee family members, and any documents about past or present health, medical condition, or disabilities.
6. Confidential records including anything that has protected or sensitive information such as date of birth, marital status, religious beliefs, etc.
7. Consumer-related credit information, credit reports, and personal or financial data.

References: Bullard-Plawecki Employee Right-to-Know Act (Public Act #397 of 1978), SHRM Personnel File Audit Checklist

Effective: 05/16/19

Revised: 11/02/23

Reviewed: 09/23/20, 09/7/21, 09/23/22, 11/02/23, 10/24/24

HIPAA and Group Health Plan Policy

Purpose

The purpose of this policy is to define how protected health information created or received by the group health programs of the Pioneer Resource Employee Benefit plan may be disclosed, stored, or accessed by employees or the plan administrator. This policy does not apply to health information received by Pioneer Resources in its role as an employer, including administration of disability and life insurance, workers' compensation, FMLA, or employment policies. Insured health care plans sponsored by Pioneer Resources, Inc. are subject to the insurance company's privacy practices.

Under the Health Insurance Portability and Accountability Act of 1996 (HIPAA), you have certain rights with respect to your Protected Health Information (PHI), including the right to know how your PHI may be used by a group health plan.

This Notice of Privacy Practices (Notice) covers the following group health plans (collectively referred to as the "Plan"):

1. Medical
2. Dental
3. Vision
4. Additional Voluntary Health Plans (i.e. – Short/Long Term Disability, Life and/or Accidental Death and Dismemberment (AD&D) Insurance Policies)
5. Employee Assistance Program (EAP)
6. Workers' Compensation
7. Disability

Policy Provisions

The plan is required by law to maintain the privacy of your PHI and to provide this notice to you pursuant to HIPAA. This notice describes how your PHI may be used or disclosed to carry out treatment, payment health care operations, or for any other purposes that are permitted or required by law. This notice also provides you with the following important information:

1. Your privacy rights with respect to your PHI;
2. The Plan's duties with respect to your PHI;
3. Your right to file a complaint with the Plan's Privacy Officer and/or to the Secretary of the Office of Civil Rights of the U.S. Department of Health and Human Services; and
4. The person or office to contact for further information about the Plan's privacy practices.

PHI is health information (including genetic information) in any form (oral, written, electronic) that:

1. Is created or received by, or on behalf of, the Plan.
2. Relates to your past, present or future physical or mental condition.
3. The provision of health care services to you, or the payment for those health care services.
4. Identifies you, or the information could be used to reasonably identify you.

Health information your employer receives during the course of performing non-plan functions is not PHI. For example, health information you submit to your employer to document a leave of absence under the Family and Medical Leave Act is not PHI.

Required Procedures

Section 1. USES AND DISCLOSURES OF YOUR PHI

Under HIPAA, the Plan may use or disclose your PHI under certain circumstances without your consent, authorization or opportunity to agree or object. Such uses and disclosures fall within the categories described below. Note that not every permissible use or disclosure in a category is listed; however, all the ways in which the Plan is permitted to use or disclose PHI will fall within one of the categories.

General Uses and Disclosures

Treatment: The plan may use and/or disclose your PHI to help you obtain treatment and/or services from providers. Treatment includes the provision, coordination or management of health care and related services. It also includes, but is not limited to, consultations and referrals between one or more of your providers. For example, the plan may disclose to a treating orthodontist, the name of your treating dentist so that the orthodontist may ask for your dental x-rays from the treating dentist. The plan may also disclose information about your prior prescriptions to a pharmacist to determine if any medicines contraindicate a pending prescription.

Payment: The plan may use and/or disclose your PHI in order to determine your eligibility for benefits, to facilitate payment of your health claims and to determine benefit responsibility. Payment includes, but is not limited to, billing, claims management, subrogation, plan reimbursement reviews for medical necessity and appropriateness of care and utilization review and reauthorizations. For example, the plan may tell a doctor whether you are eligible for coverage or what percentage of the bill will be paid by the plan. The plan may also disclose your PHI to another entity to assist with the adjudication, subrogation of health claims, or to another health plan to coordinate payment of benefits.

Plan Sponsor: For purposes of administering the plan, the plan may disclose your PHI to certain employees of Pioneer Resources. However, these employees will only use or disclose such information as necessary to perform administration functions for the plan or as otherwise required by HIPAA, unless you have authorized further disclosures. Your PHI cannot be used for employment purposes without your specific authorization.

Required by Law: The plan may disclose your PHI when required to do so by federal, state, or local law. For example, the plan may disclose your PHI when required by public health disclosure laws.

Health or Safety: The plan may disclose and/or use your PHI when necessary to prevent a serious threat to your health or safety or the health or safety of another individual or the public. Under the circumstances, any disclosure will be made only to the person or entity able to help prevent the threat.

Special Situations: In addition to the above, the following categories describe other possible ways that the plan may use and disclose your PHI without your consent, authorization or opportunity to agree or object. Note that not every permissible use or disclosure in a category

is listed; however, all the ways in which the plan is permitted to use or disclose PHI will fall within one of the categories.

Public Health Activities: The plan may disclose your PHI when permitted for purposes of public health actions, including when necessary to report child abuse, neglect or domestic violence, to report reactions to drugs or problems with products or devices, and to notify individuals about a product recall. Your PHI may also be used or disclosed if you have been exposed to a communicable disease or are at risk of spreading a disease or condition.

Health Oversight: The plan may disclose your PHI to a public health oversight agency for oversight activities authorized by law.

Oversight activities can include:

- Civil, administrative or criminal actions, audits and inspections, licensure or disciplinary actions (for example, to investigate complaints against providers).
- Other activities necessary for appropriate oversight of government benefit programs (for example, to investigate Medicare or Medicaid fraud).
- Compliance with civil rights laws and the health care system in general.
- Lawsuits, Judicial and Administrative Proceedings; if you are involved in a lawsuit or similar proceeding, the plan may disclose:
 - In response to a court or administrative order.
 - In response to a subpoena, discovery request or other lawful process by another individual involved in the dispute, provided certain conditions are met, such as being given satisfactory assurances to the plan that the requesting party has made a good faith attempt to provide written notice to you, the notice provided sufficient information about the proceeding to permit you to raise an objection, and no objections were raised or were resolved in favor of disclosure by the court or tribunal.

Law Enforcement: The plan may disclose your PHI when required for law enforcement purposes, including for the purposes of identifying or locating a suspect, fugitive, material witness or missing person. *Exceptions may apply; see Section 5: Reproductive Health below for further information.*

Coroners, Medical Examiners and Funeral Directors: The plan may disclose your PHI when required to be given to a coroner or medical examiner for the purpose of identifying a deceased person, determining a cause of death or other duties as authorized by law. Also, disclosure is permitted to funeral directors, consistent with applicable law, as necessary to carry out their duties with respect to the decedent.

Workers' Compensation: The plan may release your PHI for workers' compensation or similar programs that provide benefits for work-related injuries or illness.

National Security and Intelligence: The plan may release PHI to authorized federal officials for intelligence, counter-intelligence, and other national security activities authorized by law.

Military and Veterans: If you are a member of the armed forces, the plan may disclose your PHI as required by military command authorities. The plan may also release PHI about foreign military personnel to the appropriate foreign military authority.

Organ and Tissue Donations: If you are an organ donor, the plan may disclose your PHI to organizations that handle organ procurement or organ, eye or tissue transplantation or to an organ donation bank, as necessary to facilitate organ or tissue donation and transplantation.

Research: The plan may disclose your PHI for research when the individual identifiers have been removed, or when the institutional review board or privacy board, has reviewed the research proposal and established protocols to ensure the privacy of the requested information, and approves the research.

Required Disclosure to Secretary: The plan is required to disclose your PHI to the Secretary of the U.S. Department of Health and Human Services when the Secretary is investigating or determining the plan's compliance with HIPAA.

Disclosure to Family Members and Personal Representatives: The plan may disclose your PHI to family members, other relatives and your close personal friends, but only to the extent that it is directly relevant to such individual's involvement with a coverage, eligibility or payment matter relating to your care, unless you have requested, and the plan has agreed, not to disclose your PHI to such individuals. The plan will disclose your PHI to an individual authorized by you, or to an individual designated as your personal representative, provided the plan has received the appropriate authorization and/or supporting documents. Your personal representative will be required to produce evidence of his/her authority to act on your behalf before that person will be given access to your PHI or allowed to take any action for you. Proof of such authority may take one of the following forms:

1. A power of attorney for health care purposes, notarized by a notary public;
2. A court order of appointment of the person as the conservator or guardian of the individual
3. An individual who is the parent of a minor child.

However, the plan will not disclose information to an individual, including your personal representative, if it has a reasonable belief that:

- You have been, or may be, subjected to domestic violence, abuse or neglect by such person.
- Treating such person as your personal representative could endanger you.
- In the exercise of professional judgment, it is not in your best interest to disclose the PHI.
- This also applies to personal representatives of minors.

Authorization: Any uses or disclosures of your PHI not described above will be made only with your written authorization, including the disclosure of Substance Use Disorder (SUD) records as requested. Most disclosures involving psychotherapy notes will require your written authorization. In addition, the plan generally cannot use your PHI for marketing purposes or engage in the sale of your PHI without your written authorization. You may revoke your written authorization at any time, so long as the revocation is in writing.

Once the plan receives your authorization, it will only be effective for future uses and disclosures. It will not be effective for any information that may have been used or disclosed in reliance upon the written authorization prior to receiving your written revocation.

Section 2. RIGHTS OF INDIVIDUALS

You have the following rights with respect to your PHI:

- Right to request restrictions on PHI uses and disclosures.
- You may request in writing that the plan restrict or limit its uses and disclosures of your PHI to carry out treatment, payment, or health care operations, or to limit disclosures to family members, relatives, friends or other persons identified by you who are involved in your care or payment for your care.
 - For example, you could request that the plan not use or disclose specific information about a specific medical procedure you had.
 - However, the plan is not required to agree to your request.
- Right to request confidential communications.
 - You have the right to request that the Plan communicate with you about medical matters in a certain way or at a certain location.
 - For example, you may ask that we only contact you at work or by mail.
 - The plan will not ask you the reason for your request, which must specify how or where you wish to be contacted.
 - The plan will accommodate all reasonable requests to receive communications of PHI by alternative means if you clearly provide information that the disclosure of all, or part of, your PHI could endanger you.

Right to Inspect and Copy PHI

You have a right of access to inspect and obtain a copy of your PHI (including electronic PHI) contained in the plan's "designated record set," for as long as the PHI is maintained by the plan in a designated record set. If you request a copy of the information, the plan may charge you a reasonable fee for the costs of copying, mailing or other supplies associated with your request.

Designated Record Set

A designated record set includes:

- The medical records and billing records about an individual maintained by, or for, a covered health care provider.
- Enrollment, payment, billing, claims adjudication and case or medical management record systems maintained by, or for, a health plan.
- Other information used in whole or in part, by or, for the covered entity to make decisions about the individual.
 - Information used for quality control or a peer review analysis and not used to make decisions about individuals is not in the designated record set.

If your request is granted, the requested information will be provided to you within 30 days after the receipt of your request in the form and format requested, if it is readily producible in such form and format, or if not, in a readable hard copy form (or a readable electronic form and format in the case of PHI maintained in designated records sets electronically) or such other

form and format as agreed upon by you and the plan. If the plan is unable to comply with request within the 30-day deadline, a one-time 30-day extension is permissible. In such case, you will receive notification of the need for an extension within the initial 30-day period.

Please note that your right does not apply to psychotherapy notes or information compiled in reasonable anticipation of a legal proceeding. The plan may deny your request to inspect and copy your PHI in very limited circumstances. If access is denied, you or your personal representative will be provided with a written denial setting forth the basis for the denial, a description of how you may exercise those review rights and a description of how you may complain to the Secretary of the U.S. Department of Health and Human Services.

Right to Amend PHI

If you believe that the PHI plan has about you is incorrect or incomplete, you have the right to request in writing that the plan amend your PHI or a record contained in a designated record set for as long as the PHI is maintained by the plan in the designated record set. The plan has 60 days after the request is made to act on the request. However, a single 30-day extension is allowed if the plan is unable to comply with the deadline.

The plan may deny your request for an amendment if it is not in writing or does not include a reason to support the request. In addition, the plan may deny your request if you ask for the amendment of information that:

1. Is not part of the medical information kept by, or for, the plan.
2. Was not created by the plan, unless the person or entity that created the information is no longer available to make the amendment.
3. Is not part of the information that you would be permitted to inspect or copy.
4. Is already accurate and complete.

If the request is denied in whole or in part, the plan must provide you with a written denial that explains the basis for the denial. You have the right to file a written statement of disagreement and any future disclosures of the disputed information will include your statement.

The Right to Receive an Accounting of PHI Disclosures

You have the right to receive a list of disclosures of your PHI that have been made by the plan on or after April 14, 2003 (or January 1, 2011 in the case of disclosures of your PHI from electronic health records maintained by the plan, if any) over a period of up to six years (three years in the case of disclosures from an electronic health record) prior to the date of your request.

Certain disclosures are not required to be included in such accounting of disclosures, including but not limited to disclosures made by the plan:

1. For treatment, payment or health care operations (unless the disclosure is made from an electronic health record).
2. In accordance with your authorization.
3. If you request more than one accounting disclosures within a 12-month period, the plan may charge a reasonable, cost-based fee for each subsequent accounting disclosure request.

The Right to Receive a Paper Copy of This Notice upon Request

You have the right to receive a paper copy of this notice even if you have agreed to receive this notice electronically.

To exercise any of your HIPAA rights described above, you or your personal representative must contact the CEO or the Director of Human Resources in writing at Pioneer Resources, or by calling 231-773-5355. You or your personal representative may be required to complete a form required by the plan in connection with your specific request.

Section 3. THE PLAN'S DUTIES

Notice of Privacy Practices. The plan is required by law to provide individuals covered under the plan with notice of its legal duties and privacy practices. The plan is required to comply with the terms of this notice. However, the plan reserves the right to change its privacy practices and to apply the changes to any PHI received or maintained by the plan prior to that date. In the event of any material change to this notice, a revised version of this notice will be distributed to all individuals covered under the plan within 60 days of the effective date of such change by first-class U.S. mail, with other plan communications, or by electronic disclosure as permitted by law.

Breach Notification. The plan has a legal duty to notify you following the discovery of a breach involving your unsecured PHI.

Minimum Necessary Standard. When using or disclosing PHI, the plan will use and/or disclose only the minimum amount of PHI necessary to accomplish the intended purposes of the use or disclosure. However, the minimum necessary standard will not apply in the following situations:

1. Disclosure to, or requests by, a health care provider for treatment.
2. Uses or disclosures made to you.
3. Uses or disclosures that are required by law.

Section 4. COMPLAINTS

If you believe that your privacy rights have been violated, you may file a complaint with the plan or with the appropriate regional office of the Office for Civil Rights of the U.S. Department of Health and Human Services: to file a complaint with the plan, contact the CEO or Director of Human Resources at Pioneer Resources.

You will not be penalized, or in any other way retaliated against, for filing a complaint with the Office of Civil Rights or with the plan.

Section 5. REPRODUCTIVE HEALTH

The HIPAA Privacy Rule to Support Reproductive Health Care privacy (effective June 25, 2024) prohibits a regulated entity from using or disclosing an individual's PHI for the purpose of conducting a criminal, civil, or administrative investigation into or imposing criminal, civil or administrative liability on any person for the mere act of seeking, obtaining, providing or facilitating reproductive health care that is lawful under the circumstances in which it is provided.

Lawful means that it is either:

1. Lawful under the circumstances in which the healthcare is provided and in the state that it is provided, or

2. Protected, required, or authorized by federal law, including the United States Constitution, regardless of the state in which such health care is provided.

Reproductive healthcare is defined as “healthcare that affects the health of the individual in all matters relating to the reproductive system and to its functions and processes.” Regulated entities must first obtain an attestation that a requested use or disclosure of information potentially related to reproductive health care is not for prohibited purposes. Such attestation shall be provided on a standalone basis, not connected to or accompanied by other documents, for:

1. Health oversight activities
2. Judicial and administrative proceedings
3. Law enforcement purposes
4. Disclosures to coroners and medical examiners

These protections apply to all persons, as defined as “a natural person (meaning a human being who is born alive), trust or estate, partnership, corporation, professional association or corporation, or other entity, public or private.”

Section 6. ADDITIONAL INFORMATION

If you have any questions regarding this notice or the subjects addressed in it, you may contact the CEO or the Director of Human Resources in writing at Pioneer Resources, Inc. or by calling 231-773-5355.

References: SHRM, HIPAA Journal

Effective: 06/03/19

Revised: 11/02/23, 12/20/24

Reviewed: 09/28/20, 09/27/21, 09/26/22, 11/02/23

Document Retention and Destruction Policy

Document Destruction

The Document Retention and Destruction Policy identifies the record retention responsibilities of staff, volunteers, members of the board of directors, and outsiders for maintaining and documenting the storage and destruction of the Pioneer Resources’ documents and records.

Pioneer Resources staff, volunteers, members of the board of directors, committee members and outsiders (independent contractors via agreements with them) are required to honor the following rules:

- a. Paper or electronic documents indicated under the terms for retention in the following section will be transferred and maintained by program directors.
- b. All other paper documents will be destroyed after three years;

- c. All other electronic documents will be deleted from all individual computers, databases, networks, and back-up storage after one year;
- d. No paper or electronic documents will be destroyed or deleted if pertinent to any ongoing or anticipated government investigation, proceeding or private litigation (check with legal counsel or the Human Resources department for any current or foreseen litigation if employees have not been notified); and
- e. No paper or electronic documents will be destroyed or deleted as required to comply with government auditing standards (Single Audit Act).

Record Retention

Type of Document	Minimum Requirement
Accounts payable ledgers and schedules	6 years
Accounts receivable ledgers and schedules	6 years
Audit reports	Permanently
Bank reconciliations	3 years
Bank statements	3 years
Checks (for important payments and purchases)	Permanently
Checks (other)	6 years
Contracts, mortgages, notes, and leases (expired)	6 years
Contracts (still in effect)	Contract period
Contracts (expired)	6 years
Correspondence (general)	3 years
Correspondence (legal and important matters)	Permanently
Correspondence (with customers and vendors)	1 years
Deeds, mortgages, and bills of sale	Permanently
Depreciation schedules	Permanently
Duplicate deposit slips	1 years
Employment applications	3 years
Employment tax records	6 years
Expense analyses/expense distribution schedules	6 years
General and private ledgers, year end trial balances	Permanently
Year-end financial statements	Permanently

Type of Document	Minimum Requirement
Insurance records, current accident reports, claims, and so on (active and expired)	6 years
Insurance policies – expired	3 years
Internal audit reports	3 years
Internal reports	3 years
Inventory records for products, materials, and supplies	6 years
Investment trade confirmations	Permanently
Invoices (to customers, from vendors)	6 years
IRS agent reports	Permanently
Legal records, correspondence and other important matters	Permanently
Minute books, bylaws, and charter	Permanently
Mortgages, bills of sale	Permanently
Notes receivable ledgers, schedules	6 years
Patents and related papers	Permanently
Payroll records and summaries	6 years
Personnel files (terminated employees)	7 years
Petty Cash Vouchers	3 years
Property appraisals by outside appraisers	Permanently
Property records	Permanently
Retirement and pension records	Permanently
Tax returns and worksheets	Permanently
Timesheets	6 years
Trademark registrations and copyrights	Permanently
Travel and entertainment records	6 years
Withholding tax statements	6 years

HUD Documents	Minimum Requirement
Tenant application – while resident	Permanently
Tenant applications – on wait list	Permanently

Tenant applications – removed from wait list or residency	3 years
Initial rejection or removal notice	3 years
Tenant applicant reply to rejection or removal notice	3 years
Owners response to tenant application replies to rejection or removal	3 years
Owners reasons for removal from waitlist or residency	3 years

MDOT Documents	Minimum Requirement
Management audit files	7 years
Bus and marine request files	6 years
Bus compliance monitor files	6 years
Annual legislative reports	6 years
Federal grant files	3 years after grant is closed
Transit facility and passenger boat files	40 years after useful life
Passenger terminal records	3 years MDOT no longer owns facility
Intercity passenger research	6 years
Transit agency training records	5 years
Passenger project records	7 years after contract close
Regulatory records – insurance and vehicle safety inspections	3 years
Regulatory records – investigation and enforcement	4 years
Regulatory records – authority issuance	Permanent
Intercity bus equipment program records	7 years after MDOT no longer owns vehicle
Local bus vehicle and vehicle equip. program records	6 years after contract expires
MDOT Documents	Minimum Requirements
Special audit records	4 years after project close
Project checklists	4 years after final payment is made and audit is completed

Resources: National Council of Nonprofits www.councilofnonprofits.org; Board Source Record Retention and Document Destruction Policy—Download 4 Samples (E-Policy Sampler) www.boardsource.org/Bookstore.asp?Type=epolicy&Item=1071; Independent Sector www.independentsector.org/issues/sarbanesoxley.html; AICPA Management of an Accounting

Handbook—2003 and IRS Appendix Document
www.cpa2biz.com/AST/Main/CPA2BIZ_Primary/PracticeManagement/PracticeAdministration/PRDOVR~PC-090407/PC-090407.jsp; Guide to Record Retention Requirements in the Code of Federal Regulations: Contact the Superintendent of Documents, U.S. Government Printing Office, Washington, D.C. 20402-9325 or from CCH, Inc. at www.onlinestore.cch.com; SHRM https://www.shrm.org/resourcesandtools/tools-and-samples/policies/pages/cms_017186.aspx; and MDOT Retention Schedule provided by MDOT project manager.

Effective: 09/01/20

Reviewed: 10/21/21, 9/27/22

Revised: 03/30/22, 10/24/24

Environmental-Friendly Paper Reduction Policy

Purpose

Pioneer Resources, Inc. recognizes the importance of environmental responsibility and is committed to minimizing our impact on the environment. One significant aspect of this commitment is the reduction of paper usage within our organization. This policy outlines our commitment to decreasing paper consumption and promoting environmentally sustainable practices throughout our operations.

Procedures

- **Digital Documentation:** To reduce paper usage, we encourage all employees to prioritize digital documentation for internal and external communications, where possible.
 - This includes, but is not limited to, emails, electronic reports, electronic signatures, and shared online platforms.
- **Print Reduction:** Employees are expected to minimize unnecessary printing.
 - When printing is required, double-sided (duplex) printing is to be used whenever possible to optimize paper utilization.
 - Employees should also use electronic communication and storage systems, such as cloud-based platforms, for information sharing and archiving.
- **Reuse and Recycle:** Whenever possible, employees should reuse paper for internal drafts, note-taking, or as scrap paper.
 - When paper is no longer needed, it should be placed in designated recycling bins, ensuring responsible disposal.
 - In the case the papers contain HIPAA protected information, papers should be deposited into a shred receptacle.
- **Paperless Meetings:** Whenever practical, meetings and presentations should be conducted using electronic devices to avoid printed handouts and documents.

- If printed materials are necessary, they should be printed in a minimized, eco-friendly format.
- **Procurement Considerations:** When purchasing paper products, consideration should be given to the use of recycled and sustainably sourced paper materials.
 - Efforts should also be made to procure paper products with reduced packaging waste.
- **Educational Initiatives:** Pioneer Resources, Inc. will implement educational programs and awareness campaigns to inform and engage employees in the paper reduction effort.
 - These initiatives will encourage best practices and the importance of sustainability.

Responsibilities

Management: The management team is responsible for enforcing this policy and ensuring that sustainable practices are promoted within the organization.

Employees: All employees are expected to adhere to this policy and actively participate in the reduction of paper usage in their daily work activities.

Compliance and Reporting

Employees who become aware of non-compliance with this policy, or have suggestions for further reducing paper consumption, are encouraged to report their concerns to their immediate supervisor, or to the lead of this strategic planning goal/area.

Policy Review

This policy will be reviewed regularly to assess its effectiveness in reducing paper usage and to make necessary adjustments to align with changing environmental standards and practices.

Pioneer Resources, Inc. is committed to continually improving our environmental practices and reducing paper usage. By adhering to this policy, we contribute to a more sustainable and eco-friendly workplace.

Effective: 10/16/23

Revised:

Reviewed: 11/17/23

Professional Considerations

Employment of Relatives and Personal Relationships

Purpose

To establish guidelines to avoid any actual or perceived conflict of interest created by personal relationships and/or minimize the risk of sexual harassment/hostile work environment related claims.

Background Information (Including Definition)

1. Relatives: includes a spouse, parent, parent-in-law, child, grandparent, grandchild, sister/brother, sister/brother-in-law, aunt/uncle, niece/nephew, and/or any individual with whom an employee has a relative-type relationship (i.e. – step sister, raised together no blood relation, etc.).
2. A personal relationship includes, but is not limited to the following activities: dating, sharing the same household, or other activities that may give rise to an inherent subjectivity or conflict of interest.

Policy

1. Supervisors may not hire, promote or directly supervise any person with whom they are related to and/or have a personal relationship, nor may they engage in any personal relationships with their subordinates, including interns or temporary staff. Direct supervision of an employee may be granted to another supervisor if a relative works within the same department as that department supervisor.
2. The employer reserves the right to use its sole discretion in hiring, assigning and transferring relatives or personal acquaintances in a manner designed to eliminate potential conflicts of interest or other employment complaints.

Procedures

1. An employee must notify the employer if his or her relationship to another employee fits the definitions above of relative and/or personal relationship (whether upon hire or changes after hire).
2. If a personal relationship develops between a supervisor and subordinate, both employees are required to inform the appropriate Director.
3. The employer will take action that is fair and equitable to eliminate any direct reporting or management relationship between employees who are defined as relatives and/or whom are involved in a personal relationship.
4. The employer reserves the right to use its sole discretion in hiring, assigning and transferring relatives or employees who have personal relationships with coworkers in a manner designed to eliminate potential conflicts of interest or other employment

complaints. If no reasonable transfer or reassignment is possible, the employer reserves the right to separate employment of one or both parties.

5. The employer may change the placement of relatives and individuals involved in a personal relationship, regardless of whether there is a direct reporting or management hierarchy, if the employer determines that the personal relationship actually, or potentially, interferes with the employees' job performance.

Effective Date: 01/02/02

Revised Date: 06/7/19, 09/29/22, 11/2/23

Reviewed: 09/2/20, 09/16/21, 09/29/22, 11/2/23, 10/24/24

Staff and Resident Professional Service Relationship

Purpose

The purpose of this policy is to define appropriate and professional service relationships with persons served and to protect residents, employees, and Pioneer Resources from harmful relationships.

Policy Provisions

1. Every resident must be treated with dignity and respect.
2. Every employee, supervisor, manager, director, CEO and Board Member must be treated with dignity and respect.
3. Intimate or sexual relationships between employees and persons served or the recipient of any Pioneer Resources' service is strictly forbidden. Violations of this policy and work rule will result in immediate separation and will be prosecuted to the fullest extent of the law if applicable.
4. Exploitation of persons served or the recipient of any Pioneer Resources' service that involves the misappropriation or misuse of their property or money for the benefit of the employee is also strictly forbidden. Violations of this policy and work rule will result in disciplinary action up to and including separation.
5. Employees' interaction with residents must:
 - a. Reflect resident and or participant of service's needs, choices, preferences, and individuality;
 - b. Meet the highest professional, ethical, moral and legal standards;
 - c. Be fully consistent with Pioneer Resources, Inc.'s mission, values, policies, and treatment guidelines.
6. Professional Work Relationships with residents outside of work:
 - a. Must be approved by the resident and, if applicable, the resident's guardian;

- b. Must be approved by the supervisor or manager, conducted during voluntary hours, and must be substantially different activities from those that are performed during paid work time;
 - c. May be further defined by program/department;
 - d. Approvals must be documented and placed within the personnel record.
- 7. The privacy of each resident must be respected. Resident information must be communicated only for the purpose of benefit to the resident or protection of the resident (e.g., suspected abuse, exploitation, and endangerment must be reported in accordance with organizational standards and funder requirements).
- 8. Employees must advocate for residents, particularly for those who are unable to advocate for themselves.

Required Procedures

- 1. All newly hired employees will acknowledge receipt of this policy through their onboarding process.
- 2. Supervisors are also expected to review the policy with all newly hired employees and then at staff meetings on, at least, an annual basis.
- 3. Employees are responsible for maintaining a healthy professional relationship with persons served and are expected to discuss unclear relationships with their supervisors.

References: Good Moral Character, Licensing Standards, CARF Standards-dignity and respect

Effective Date: 07/15/19

Reviewed/Revised Date: 11/02/23

Reviewed Date: 09/23/20, 09/27/21, 09/26/22, 11/02/23, 10/21/24

Attire and Appearance

Purpose

To describe the attire and appearance expectations for residential and program staff.

Policy

It is the goal of Pioneer Resources to provide a professional work environment that is consistent with our mission and values. The personal appearance of employees contributes greatly to the impression made to the persons served and our communities.

Background Information (Including Definition)

None

Procedures

Employees of Pioneer Resources, Inc. are expected to use good judgment as it relates to their personal appearance and appropriate clothing attire.

Clothing

1. Clothing should reflect the agency's goal to promote inclusion and community integration; to help achieve this goal staff may not wear "scrubs" (outfits typically worn in medical and nursing facilities).
2. Clothing should be neat, clean, and appropriate for the work environment.
3. Should an employee's personal appearance, clothing, or hygiene be deemed inappropriate by Pioneer Resources' supervisory or management staff, the employee may be required to leave work and return when the changes have been made. Any time missed for this reason will be without pay. Excessive violations will be cause for disciplinary action.

The examples noted below are considered inappropriate and will not be acceptable:

1. Clothing with lewd or obscene pictures.
2. Clothing that is ripped, dirty or stained.
3. Clothing that is too revealing (above mid-thigh length, low cut tops, extremely tight fitting shirts, or exposed underwear).
4. Midriff or crop top shirts.
5. Unusually long fingernails; fingernail tips should be kept to ¼ inch or less.
6. Strong Odors; strong odors must be controlled, including:
 - a. Body odor
 - b. Tobacco
 - c. Perfumes, after shaves and scented lotions

Certain scents can cause allergic reactions in some individuals. Therefore the use of those products must be avoided when working with individuals served and/or co-workers.

Hair

Hair should be neat and clean. When assisting residents or program participants, care should be taken to keep long hair out of the reach of the persons served. The hairstyle should not interfere with the work to be performed, create a safety hazard, or cause distractions in the workplace. Facial hair must be kept neatly trimmed.

Jewelry

Jewelry (necklaces, bracelets, earrings and any other exposed body piercing) should be kept to a minimum and care taken to avoid possible safety issues to self, residents or program participants (examples – a long necklace could get caught in a wheelchair while providing care, or someone could accidentally pull out an earring).

Footwear

Pioneer Resources, Inc. employees are expected to wear proper footwear that will prevent slips, trips and falls and provides protection from harmful heavy objects when appropriate.

Footwear requirements for employees who perform direct support services (residential, community integration, individual CLS, skill building, etc.) include:

1. Shoes must have closed or strapped backs, closed toe and the entire foot must be securely covered.
2. Shoes should have a wide based heel and heels should be no higher than two inches.
3. Shoes must be worn at all times while on duty. Slippers or bare feet are unacceptable.

At the discretion of the supervisor, manager, program director, or CEO, exceptions to rules about footwear and clothing may be made for program functions that occur at camp or at a similar recreational function.

Accessories

Accessories may limit an employee's ability to perform their duties or may pose a safety threat and may be prohibited while on duty. These articles include, but are not limited to: necklaces, long earrings or other visible body jewelry, hair accessories, rings, wristbands, bracelets, belts, torn or mutilated clothing, and scarfs.

Employees who have questions regarding this policy, or who are unsure if something is appropriate or not should consult with their supervisor or manager.

Employees who are seeking a medical or religious accommodation are required to contact the Human Resources department.

Effective Date: 05/25/00

Revised Date: 12/10/19

Reviewed Date: 09/15/20, 09/16/21, 09/26/22, 11/02/23, 10/24/24

Gifts Policy

Purpose

To establish the agency's policy and procedure on the acceptance, exchange, and giving of gifts involving persons served and employees.

Policy

It is the policy of Pioneer Resources, Inc. to avoid favoritism and ensure equitable treatment for all, therefore, employees may not receive compensation for services rendered from any individual, agency, or group other than the corporation for which they work. In addition, employees may not accept gifts of money from persons served under most circumstances. Individuals enrolled in programs or residents may give gift items to employees only under controlled circumstances.

ABA Program-Behavior Analysts in the ABA program cannot accept gifts of any kind as this constitutes a multiple relationship. Families can donate to the program.

Procedures

Listed below are the procedures for controlling the acceptance, exchange, and giving of gifts:

1. Anyone, including parents or guardians of the persons served by Pioneer Resources who desire to give gifts, goods, or services to staff will be referred to the supervisor, manager, or program Director.
2. Residential or program staff are to contact the supervisor, manager, or program Director if they are not on site when someone wishes to present a gift or donation.
3. The supervisor, manager, or program Director will make arrangements to accept non-monetary donations on behalf of the agency or site. The donations will be used as directed. If not earmarked for a specific purpose, it will be used in an appropriate manner. The supervisor, manager, or program Director may review such instances with the CEO and/or the payee (if applicable).
4. In a residential setting, the home encourages the giving of gifts by friends and relatives to residents at the home, but reserves the right to refuse inappropriate or impractical gift items.
5. Employees may not give money to individual persons served. Employees may donate money to a home or program site.
6. Employees may not give items of value to individual persons served under most circumstances. Exceptions should be discussed with the supervisor, manager, or program Director.
7. Employees desiring to donate money should contact Pioneer Resources' CEO.
8. Employees desiring to donate items of value (\$25 or more in value) should contact the supervisor, manager, or program Director.
9. The supervisor, manager, or program Director should inform the administrative office of any gift worth \$25.00 or more. This is done to track the value of the gift and to send a thank you card.
10. Employees are always encouraged to indicate their personal interest and concern for persons served, but in ways other than giving or receiving personal gifts.
11. If a person served wishes to give an employee a gift for an event such as a bridal/baby shower or wedding, the supervisor, manager, or program Director must first obtain approval from the person's legal guardian, if applicable. When possible, this approval should be in written form, signed and entered into the person's record, with a statement indicating the purpose for the gift. Electronic forms of communication such as email or text message may be utilized as long as the required information is included.
12. If a parent or guardian wishes to give a monetary gift to staff (cash, check, gift card, etc.), the gift should be delivered to Pioneer Resources' administrative office, or given to the supervisor, manager, or program Director, who will bring it to the administrative office for processing (Pioneer Resources, Inc. is required to report donations). The

address is: Pioneer Resources, 1145 Wesley Avenue, Muskegon, MI 49442 (231-773-5355).

13. If the monetary gift is left with staff it is the responsibility of the staff person who receives the gift to immediately contact the supervisor, manager, or program Director.
14. The supervisor, manager, or program Director will report the gift to the administrative office on the next business day.

Effective Date: 03/29/01

Revised Date: 05/27/19

Reviewed Date: 09/23/20, 09/27/21, 09/26/22, 11/02/23, 10/24/24

Fundraising

The Board of Directors of Pioneer Resources, Inc. recognizes that the organization engages in fundraising and solicitation activity from time to time. In order to comply with federal, state and local laws, as well as applicable ethical norms and standards regarding fundraising activity, the Board has established this fundraising policy.

1. **Oversight:** All fundraising activity or action on behalf of any said program or benefit to Pioneer Resources is approved by the CEO only. The Fund Development Committee of the board shall annually review all fundraising activity by Pioneer Resources.
2. **Use of Fundraising Professionals:** Third parties not directly affiliated with the Pioneer Resources, Inc. must have written permission from Pioneer Resources prior to any solicitation on behalf of the organization. Third party fundraisers engaged by Pioneer must be registered with appropriate state and local authorities, and their representation of the organization must be evidenced by a written agreement approved by Pioneer Resources, Inc.
3. **Truth and Accuracy:**
 - a. All solicitation and fundraising materials and other communications to donors and the public shall clearly identify Pioneer Resources, Inc. and be accurate and truthful.
 - b. The CEO or designated employee shall review fundraising or solicitation materials prior to publication for:
 - i. Material omissions or exaggerations of fact
 - ii. Use of misleading photographs
 - iii. Any other communication which would tend to create a false impression or misunderstanding
 - iv. Any statements or content that would tend to create unrealistic donor expectations of what the donor's gift will actually accomplish.
 - v. To ensure the appropriate permission from guardian or person has been obtained in writing for such usage.

4. **Donor Acknowledgement:** Pioneer Resources, Inc. shall provide all donors with specific acknowledgements of charitable contributions, where applicable, in accordance with legal requirements for proper donor substantiation and Pioneer Resources' disclosure.
5. **Supervision and Training:** Pioneer Resources shall provide appropriate training and supervision of the people soliciting funds on its behalf, whether employees or third party representatives, including training to attempt to avoid use of techniques that are coercive, intimidating or intended to harass potential donors. Training shall be initially and on an ongoing basis.
6. **Cash Accounting and Handling:**
 - a. Cash should never be left unattended at an event.
 - b. Any staff handling cash on behalf of the agency shall require signatures of two unrelated parties as to the total cash counted and documentation provided to the finance office including these signatures.
 - c. No cash is to be kept overnight by staff. All cash must be brought back to the main office and placed in the safe. A finance designated staff to accept cash after fundraiser must be defined on the fundraising application.
7. **Donor Hardships:** Pioneer Resources, Inc. shall attempt to avoid accepting a gift from or entering into a contract with a prospective donor which would knowingly place a hardship on the donor, or place the donor's future well-being in jeopardy.
8. **Compensation:** Pioneer Resources, Inc. shall pay fundraisers no more than reasonable compensation for their services. Pioneer Resources shall not compensate internal or external fundraisers based on commission or a percentage of the amount raised.
9. **Donor Privacy Policy:** Pioneer Resources, Inc. respects the privacy of donors.
 - a. Pioneer Resources shall not sell or otherwise make available the names and contact information of its donors, except where disclosure is required by law (without providing them an opportunity at least once a year to opt out of the use of their names and contact information).
 - b. Pioneer Resources, Inc. shall not send mailings on behalf of other organizations.
 - c. Pioneer Resources, Inc. shall provide a clear, prominent and easily accessible privacy policy on any of its websites that tells visitors:
 - i. What information, if any, is being collected about them and how this information will be used;
 - ii. How to access personal information collected and request correction;
 - iii. How to inform Pioneer Resources that the visitor does not wish his/her personal information to be shared outside of the organization.
 - iv. What security measures Pioneer Resources has in place to protect personal information.

10. **Compliance with the Law:** In addition to any other requirements of this policy, all fundraising activities for Pioneer Resources, Inc. shall be conducted in accordance with applicable law.

References: Donation Income Form, Fundraising Approval Form, and Fundraising Tracking Tool.

Effective: 09/23/19

Revised: 2/26/20, 10/16/23

Reviewed: 09/23/20, 09/07/21, 09/26/22, 10/16/23, 10/15/24

Solicitation and Distribution

In an effort to maintain a professional work environment, employees may not solicit, promote, or distribute literature in work areas, or while working. This includes sales and fundraising materials. Non- Pioneer Resource employees are prohibited from interrupting employees who are working. Non-Pioneer employees are prohibited from soliciting or distributing literature on Pioneer Resources, Inc. premises. Exceptions to this policy must be approved by the CEO.

Effective Date: 08/01/19

Revised: 11/02/23

Reviewed: 09/23/20, 09/16/21, 09/26/22, 11/02/23, 10/15/24

Fringe Benefits

Fringe Benefits Eligibility

Purpose

To define conditions under which employees of Pioneer Resources, Inc. qualify for fringe benefits.

Policy

It is the policy of Pioneer Resources to provide certain fringe benefits to its employees. These

benefits are predicated upon standard eligibility requirements. The employer's at-will employment clause is not affected by the definitions below.

1. **Seasonal Employee** – An employee who is hired with the understanding that the duration of the job for which the employee was hired will not exceed 120 days.
2. **Regular Employee** – An employee who is hired with the understanding that the duration of the job for which the employee was hired will exceed 120 days.
3. **Part Time Employee** – An employee who is consistently and customarily scheduled to work for less than 30 hours per week.
4. **Full Time Employee** – An employee who is consistently and customarily scheduled to work for 30 or more hours per week.
5. **Variable Hour Employee** – An employee who works in a job where hours fluctuate in a manner that precludes the employer from definitively knowing at hire whether the employee will average more than 30 hours per week.

Procedures

Supervisors will determine initial status and include the information in the employment offer upon hire.

General eligibility requirements for benefits are listed below, although these eligibility requirements may change from time to time as providers of benefits change or contracts, rules, regulations, or internal policies are altered.

Pioneer Resources may provide any or all of the following benefits to Part Time, Variable Hour and Full Time employees in addition to those which are legally mandated:

- a. Health insurance or HMO membership
- b. Full time employees and qualified variable hour employees are eligible for an employer paid allowance toward health insurance. The Board of Directors and Administration reserve the right to change the amount of allowances consistent with budgetary and economic constraints.
- c. Paid time off:
 - i. All paid employees are eligible to accrue paid time off (PTO).
 - ii. Paid time off accrues per a particular formula based on hours worked; see the Paid Time-off Policy for additional information.
- d. Retirement Plan:
 - i. To qualify for-an agency paid retirement plan an employee must be 21 years of age.
 - ii. They must also have worked a minimum of (1000) hours in the previous twelve month period, either for Pioneer Resources, or for another agency using the same retirement system.
 - iii. *Note:* Changes made to employee deferrals will have a cut off time of 5pm on the Thursday of the last week of the pay period; anything made after that will not be applied until the next payroll.

- e. Life insurance, Short Term Disability and Long Term Disability insurance may be provided for regular, full time employees.
- f. Pioneer Resources, Inc. provides paid holidays to regular, full time employees and holiday pay to employees working on holidays as defined in Pioneer's Holiday Policy.

The Pioneer Resources Board of Directors may alter or waive fringe benefit requirements to establish special contract arrangements with staff.

References: Policies on PTO, Policy on Paid Holidays, Policy on Administrative Leave

Revised: 09/25/20

Revised: 01/5/21, 09/30/22

Reviewed: 08/31/21, 09/30/22, 11/01/23, 10/24/24

Eligibility for Health Insurance Continuation

Purpose

To clarify conditions under which employees' eligibility for health insurance may change.

Policy

It is the policy of Pioneer Resources, Inc. to comply with all applicable laws, rules, and regulations relative to Workers' Compensation insurance, the Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), the Affordable Care Act (ACA), and the Family and Medical Leave Act (FMLA), and to avoid conflicts and contradictions in the application of these policies to the extent possible.

Background Information (Including Definition)

1. This policy is an attempt to clarify eligibility and set a standard for all employees that will avoid discrimination and undue hardship on either the employee or Pioneer Resources with respect to coordination of benefits.
2. Health insurance benefit: the benefit allowance granted to full time employees under the organization's plan for health insurance.
3. The allowance may vary by budget year or board directive, but is generally differentiated by:
 - a. Coverage for employee only.
 - b. Coverage for employee plus one dependent.
 - c. Coverage for employee and family.
 - d. Health insurance benefit also refers to the alternative health plan offered to eligible part time employees.

4. Full time employees are eligible for an employer paid allowance toward the health insurance benefit.
5. Variable hour employees may be eligible for health insurance depending on the outcome of calculations related to the “look back” period; part time employees may be eligible for an alternative health plan if they meet the criteria established by the plan.

Procedures

1. When an employee voluntarily resigns his or her position with Pioneer Resources, is laid off or separated by Pioneer Resources, or undergoes another qualifying event such as a job reclassification, he or she will be informed of the right to continued coverage under the agency's health plan consistent with the provisions of COBRA, by a standard form letter that details these rights and responsibilities.
2. When an employee is absent from work due to a work related injury and is drawing Workers' Compensation, Pioneer Resources will continue the health care benefit at the organization's expense for the remainder of the month during which the injury occurred and for the following three months.
3. After this period of time, Pioneer Resources will inform the employee, the Workers' Compensation insurance provider, and the health insurance provider of its intent to discontinue coverage; in most cases, the employee will qualify for continued coverage under the provisions of COBRA.
4. If an employee requests a leave under the Family and Medical Leave Act (FMLA), the organization will pay the employer's contribution of health insurance benefit or premium for the duration of the leave as required by the Act; the employee must continue to pay his or her portion of the premium during the leave, if applicable.
5. It is the policy of Pioneer Resources, Inc. not to allow an employee to draw his or her paid leave (i.e. – PTO) while receiving compensation from the organization's Workers' Compensation insurance company.

In the event an employee requests, and is approved for, a leave of absence for nonmedical reasons, and the leave will exceed the employee's paid time off (PTO) leave accrual, it is the policy of Pioneer Resources to pay the employers contribution of health insurance premium for the remainder of the month during which the leave was granted only for the period of time during which the employee draws paid leave.

For example, if someone takes six weeks of unpaid leave, of which the first week is paid using PTO, health insurance benefits will be active through the end of the month in which the first week of PTO ends. If the PTO week is 01/01-01/05, insurance benefits will continue through the end of January.

References: Consolidated Omnibus Budget Reconciliation Act of 1985 (COBRA), the Affordable Care Act (ACA), and the Family and Medical Leave Act.

Effective: 09/25/20

Revised: 11/01/23

Reviewed: 09/25/20, 08/31/21, 09/30/22, 11/01/23, 10/24/24

Invest in People - Employee Development

Purpose

To describe the policy of Pioneer Resources' intent to invest in people through development opportunities.

Policy

It is the policy of Pioneer Resources, Inc. to encourage the professional growth, improvement of job skills, and education level of its employees.

Background Information (Including Definition)

- a. Staff development refers to the level of education, expertise or skill attained or achieved by employees; to promote ongoing education and development, Pioneer Resources may arrange for, or accommodate, one or more of the following on behalf of employees:
 - a. Attending seminars, conferences, or workshops.
 - b. Attending college and university courses.
 - c. Visiting other facilities or programs.
 - d. Participation in professional organizations or related meetings.
 - e. Exchanging staff with other agencies or organizations for purposes of teaching, research, information exchange, or consultation.
- b. Staff development functions must be related to job skill requirements.
- c. Pioneer Resources may or may not contribute toward the cost of functions requested by the employee.
 - a. Each request shall be treated individually and decisions shall be made based on the perceived value of the event and the financial resources of Pioneer at that time.
 - b. For staff development functions which are mandated by the organization, Pioneer Resources will pay for the event, travel, and accommodations during travel.

Procedures

1. Bulletins or announcements received at Pioneer Resources concerning staff development opportunities shall be circulated to staff that may have interest.
2. Staff desiring to attend a staff development function must:
 - a. Submit a request to the employee's immediate supervisor specifying when, where, how, what, why and what the total expected cost of the desired function will be.
 - b. Supervisor must forward the request and recommendation to the CEO or their designee. If administrative leave would be required to attend the function, procedures for requesting such leave must be followed (Pioneer Resources Administrative Leave Policy).
 - c. The CEO shall forward the approval, denial, and/or any stipulating conditions to the employee's supervisor.

3. Any workshops or seminars conducted by Pioneer Resources staff for other groups should be cleared through the CEO's office.

Effective: 03/01/03

Revised: 05/30/19, 09/30/22

Reviewed: 09/25/20, 08/31/21, 09/30/22, 11/01/23, 10/24/24

Bereavement Leave

Pioneer Resources will grant qualifying employees bereavement leave paid at the employee's regular pay rate when a death occurs in an employee's immediate family.

Immediate family is defined as:

- Father, Mother
- Brother, Sister
- Grandparents
- Spouse
- Children, Grandchildren

In-laws and/or "Step" of the current, legally recognized, spouse of any of the above family members are included in the definition (i.e. – step son, mother in-law, grandma in-law).

All regularly scheduled full time employees may take up to 16 hours total (up to 8 hours per day), and all part time employees may take up to 8 hours total (up to 4 hours per day) with regular pay as defined above.

Procedure:

Employees will be required to notify their direct supervisor of the need for bereavement leave and their supervisor will provide them with approval for said leave. Upon return from approved bereavement leave the employee will be required to provide the Human Resources Department, and/or department head, a funeral leave bulletin within two working days of their return from said leave. Other proof of death items may also be accepted as an alternative to a funeral bulletin such as an obituary, death certificate, etc. Alternative documents will be evaluated and approved by the Human Resources department and/or CEO on a case by case basis.

1. Bereavement leave compensation shall not be considered hours worked and shall not count toward overtime.
2. Bereavement leave compensation shall be awarded based on the policy above; however, the employee's total hours shall not exceed 40 hours in a single work week (i.e. employee takes a day off for bereavement but picks up additional shifts during the week and has a total of 35 hours; a maximum of 5 hours of bereavement shall be awarded).

3. Adequate payroll processing time shall be considered in the awarding of this leave time pay.

Additional Time Off: Pioneer Resources understands the deep impact that death can have on an individual or family. Therefore, additional non-paid time off may be granted through the process of an unpaid leave application, or through the use of approved paid time off (PTO) use.

It is the company's intention to support employees during times of grief and bereavement.

Resources: Unpaid Leave Policy, and Paid Time Off Policy

Effective: 4/1/19

Revised: 11/01/23, 10/24/24

Reviewed: 9/25/20, 8/31/21, 09/30/22, 11/01/23, 10/24/24

Fringe Benefit-Paid Time Off (PTO)

Purpose

To define the conditions under which employees of Pioneer Resources qualify for the employer paid benefit of Paid Time Off (PTO).

Policy

It is the policy of Pioneer Resources, Inc. to offer the benefit of Paid Time Off to eligible employees. The Board of Directors encourages employees to take an extended vacation away from the work place at least once per year.

Background Information (Including Definition)

1. Paid Time Off (PTO) combines vacation time, sick time, and personal time into one paid leave system.
2. PTO may be used for vacation, illness/injury for employee or covered family member, Earned Sick Time Act (ESTA) leave reasons, medical treatment, preventative care, additional bereavement, for absences caused by domestic violence or sexual assault of an employee or covered family member, and/or other personal reasons.
3. PTO is credited to all employees (i.e. regular full time, regular part time and/or seasonal staff).
4. The defined benefit year for using and accruing PTO as defined by policy is the agency's fiscal year, October 1st through September 30th each year.
5. All PTO will be paid at the employee's regular rate of pay; if a variable hour employee, PTO will be paid out based on the rate of pay used the week prior to the employee's leave.
6. In accruing PTO, employee will receive at least one (1) hour of paid time off for every thirty (30) hours worked (salary positions will be assumed to work forty (40) hours per

week) as prescribed in Michigan's Earned Sick Time Act (ESTA).

7. Regular part-time (PT) staff accrual multiplier is .0333 (one hour for every thirty hours worked).
8. Regular full-time (FT) staff accrue PTO as shown on the schedule below:

Years of Service	Months of Service	Accrual Rate per Hour Worked	Annual PTO Use Limit
PT Part-time	Ongoing	.0333	160 Hours
FT 0 - 3 Years	0 – 47 months	.03846	200 Hours
FT 4 - 6 Years	48 – 83 months	.0577	200 Hours
FT 7 + Years	84+ months	.0769	200 Hours

9. "Years of Service" is calculated from an employee's current date of hire.
10. There is no cap/limit on the number of paid time off hours an employee can earn.
11. There is no cap/limit on the number of hours that an employee may rollover from year to year.
12. Supervisors, Managers, Directors, the CEO, and salaried administrative employees shall receive an additional PTO accrual of .019 per hour according to the years of service rules indicated on the schedule above for full time employees (i.e. – a manager who has been with Pioneer Resources for four years shall accrue paid time off at a rate of .0767 (.0577 + 0.19).
13. The CEO's paid time off accrual will be determined by the Board of Directors based on a yearly contracted rate.
14. Known PTO requests should be submitted electronically, or in writing, to the employee's immediate supervisor for approval seven (7) days in advance when foreseeable, or as soon as possible when unforeseeable (*Note: Pioneer Resources reserves the right to enforce the company call-in procedure; employees not following this procedure may be denied the use of paid time off and/or subject to corrective action as allowable by law*).
15. If PTO use is requested for an unscheduled and/or emergency incident such as illness, the following procedure must be followed (failure to follow this procedure may result in disciplinary action up to, and including, separation of employment):
 - a. An employee who cannot report to his/her regular work station due to illness must notify his or her Supervisor or designee of the absence no later than one (1) hour prior to the start of the scheduled work shift.
 - b. Upon returning from sick or medical leave, an employee must request PTO within one (1) working day from the first date returned.

16. The employer reserves the right to approve or deny all PTO requests, unless being used for a qualifying ESTA reason, in order to ensure staffing levels meet the needs of the business; an employee's immediate supervisor will inform the employee if their PTO request has been approved or denied in writing (electronically or on paper) and/or verbally.

PTO Use:

- Waiting period – there will be no waiting period before an eligible employee can begin accruing PTO, but the following waiting periods are applicable before an employee may begin using the accrued paid time off:
 1. For all regular or variable hour salary and/or hourly employees, PTO cannot be utilized until the 90th calendar day following the employee's date of hire.
 2. For all seasonal employees, PTO cannot be utilized until the 120th calendar day following the employee's date of hire.
- PTO must be used by the employee in one-hour increments.
- PTO may not be applied in advance before it is accrued.
- PTO may be used during the same week as a holiday or absence, however PTO hours may not exceed the regularly scheduled days/hours, including regular hours worked, in a one-week pay period.
- PTO used for a protected leave under Michigan's Earned Sick Time Act (ESTA) will be allowed for:
 - The employee's or the employee's family member's mental or physical illness, injury, or health condition; medical diagnosis, care, or treatment of the employee's mental or physical illness, injury, or health condition; or preventative medical care for the employee.
 - If the employee or the employee's family member is a victim of domestic violence or sexual assault, for medical care or psychological or other counseling for physical or psychological injury or disability; to obtain services from a victim services organization; to relocate due to domestic violence or sexual assault; to obtain legal services; or to participate in any civil or criminal proceedings related to or resulting from the domestic violence or sexual assault.
 - For meetings at a child's school or place of care related to the child's health or disability, or the effects of domestic violence or sexual assault on the child.
 - For closure of the employee's place of business by order of a public official due to a public health emergency; for an employee's need to care for a child whose school or place of care has been closed by order of a public official due to a public health emergency; or when it has been determined by the health authorities having jurisdiction or by a health care provider that the employee's or employee's family member's presence in the community would jeopardize the health of others because of the employee's or family member's exposure to a communicable disease.
- PTO leave used for an illness in excess of more than three consecutive days will automatically trigger an FMLA request.

- The employer reserves the right to request a physician's statement to ensure the safety of all employees, participants, visitors and parties that may come into contact with provided services for any leave of absence lasting longer than three consecutive days.
- PTO may not be used for time off from work for disciplinary reasons.
- At the time of separation from employment, unused PTO up to a maximum of forty (40) hours shall be paid by the employer when the following conditions have been met:
 1. The employer was given a two-week notice and the employee fulfilled the notice.
 2. The employee was not in the new hire 90 day probation period.
 3. The employee was not terminated due to absenteeism, misconduct, violation of any company policy, and/or negligence.
 4. The employee has not taken a PTO buyout in the previous three (3) months.
 5. Employees on a temporary leave of absence, or where the agency has reduced an employee's hours temporarily, will forfeit PTO being paid out upon separation, even if the above 1 through 4 terms were met.
 6. Employees covered by the General Teamsters Union will receive a PTO payout based on the terms and conditions set forth in the contract.
- In the event of a state/national emergency, a temporary leave of absence, or a layoff, the agency reserves the right to limit PTO use for all employees.
- Any absence, late arrival and/or early departure reported to the agency that is covered by a protected Earned Sick Time Act (ESTA) leave, will result in the use of PTO.
- Any absence, late arrival and/or early departure reported to the agency that is not covered by a protected Earned Sick Time Act (ESTA) leave will:
 - Result in corrective action as defined by the agency's Employee Relations & Attendance Policy if no PTO is utilized.
 - Not result in corrective action as defined by the agency's Employee Relations & Attendance Policy if PTO is utilized.

References: Family Medical Leave Act of 1993 (FMLA) policy, State of MI Earned Sick Time Act (eff. 02/21/2025), Hours of Work Compensation Policy, Unpaid Leave Policy, Call In Policy, PTO Buyout Policy, Families First Coronavirus Response Act.

Effective Date: 03/29/19

Reviewed: 03/25/20, 10/2/20, 09/28/22

Revised: 08/31/21, 11/01/23, 10/24/24, 02/21/25

Fringe Benefits-Paid Time Off Buyout

Purpose

To define conditions under which employees accrued paid time off may be redeemed for a cash payout.

Policy

It is the policy of Pioneer Resources, Inc. to provide time off with pay to its eligible employees. It is also the policy of Pioneer Resources, Inc. to permit employees to redeem, under certain conditions, accrued PTO hours as a cash payout or as a rollover to an approved account with the agency's provider of retirement plans.

Background Information (Including Definition)

1. Paid time off (PTO) combines vacation, sick time, and/or personal time into one time off policy.
2. PTO may be used for vacation, sick days, doctor appointments, or other personal reasons.
3. PTO accrues to both exempt and non-exempt employees.
4. An employee considered part time may request a cash payment in lieu of PTO if the employee has an accrued balance of more than 64 hours of PTO.
5. An employee considered full time may request a cash payment in lieu of PTO if the employee has an accrued balance of more than 80 hours of PTO.

Procedures

- Employees must request a PTO buyout on the form prescribed by the agency.
- An employee may not draw down their PTO banks below the minimums described above (64 for hours for part time employees and 80 hours for full time employees).
- Employees must request payment for a minimum of eight (8) hours, with a maximum of forty (40) hours, in minimum one (1) hour increments.
- Employees accruing PTO at a rate lower than .0769 may only take up to one (1) PTO buyout per rolling calendar year, up to a maximum of 40 hours, as long as all other requirements of this policy are met.
- Employees who accrue PTO at a minimum rate of .0769 may take up to two (2) PTO buyouts per rolling calendar year, of up to 40 hours each, as long as they satisfy all other requirements of this policy; the two PTO buyout requests are required to be at least 90 days apart.
- In the event where an employee is experiencing a hardship, the agency will consider allowing a PTO buyout of over 40 hours or more frequency than allowed per year. This request will have to be approved by the CEO.
- PTO buyout forms must be submitted to the employee's immediate supervisor for review; the supervisor shall verify that the employee is in good standing and sign the form.

- A supervisor should discuss with the employee the relative advantages of taking time away from work versus a cash payment.
- The supervisor shall forward the request to Human Resources for review and verification of accrued PTO.
- Human Resources shall add the PTO buyout to the next available pay date, given proper payroll processing time has been provided and that all other conditions of this policy have been met.
- The agency reserves the right to limit or eliminate requests for PTO buyouts should it impact the fiscal responsibility of the agency.

References: Policies on PTO

Effective Date: 10/1/18

Revised Date: 03/25/20, 11/2/21, 11/01/23

Reviewed: 09/25/20, 08/31/21, 09/30/22, 11/01/23, 10/24/24, 02/21/25

Paid Holidays

Purpose

To define conditions under which Pioneer Resources' employees qualify for paid holidays.

Policy

It is agency policy to provide paid holidays to its qualified employees.

Background Information (Including Definition)

Pioneer Resources' defined holidays include:

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

Floating Holiday

Pioneer Resources offers a floating holiday. This is a paid incentive day offered to all full-time, non-bargaining employees, which can be used for any approved time off and is intended to allow for the celebration of holidays unique to each individual employee. The floating holiday

is not included in overtime calculations and can not be used when other agency pay is present in excess of a standard eight (8) hour work day.

It also can not be used to cover an absence that has not been approved in advance (i.e. – sick day and/or other personal absence not scheduled before it occurred).

Procedures

1. Paid holidays are credited to all full-time, non-bargaining employees at the employee's regular rate of pay for eight (8) hours a day.
2. See Teamsters contract for union employee's holiday benefit schedule.
3. Part time and full time employees who work on a holiday at the employer's request, shall receive 1.5 times his/her regular pay for the first eight (8) hours worked (time and a half).
4. Hours worked in excess of eight (8) on the actual holiday, at the employer's request, shall be compensated at two (2) times regular hourly pay (double-time).
5. Employees on FMLA who are not using PTO or working intermittently are not eligible for holiday pay.
6. Employees who call in sick the day before a holiday, on the day of the holiday, or the day after a holiday, will be required to present a physician's excuse in order to receive holiday pay.

Effective Date: 01/01/01

Revised: 02/24/20, 09/30/22, 10/31/23

Reviewed: 09/25/20, 08/31/21, 09/30/22, 10/24/24

Wages Due to Closures and/or Inclement Weather

Full-time hourly program (ABA, Group CLS, and Vocational) as well as hourly maintenance, mechanic and hourly office staff who are unable to work from home, shall receive four (4) hours normal pay for any regularly scheduled day in which programs and/or offices are closed due to inclement weather and/or other agency defined emergent closure (up to a maximum of sixteen (16) hours per fiscal year).

The employer may require employees to report if there are duties to perform in their department, or another department, if it is safe to do so. If it is impossible for an employee to report, he/she will be permitted to use their available Paid Time Off up to a maximum of eight (8) hours per day.

Effective: 07/23/19

Revised: 10/16/23

Reviewed: 09/23/20, 09/13/21, 10/6/21, 09/23/22, 10/31/23, 10/15/24

Employee Obligations

Employee Relations & Attendance Policy

Purpose

This policy describes the behavioral and performance expectations, as well as commitments, along with the employee disciplinary outcomes, that all Pioneer Resources, Inc. employees are expected to follow in support of the mission, vision and values of the organization. It is further used to set forth Pioneer Resources' policies and procedures for handling employee absences and tardiness, in order to promote the efficient operation of the company and minimize unscheduled absences.

Policy

Punctual and regular attendance is an essential responsibility of each employee at Pioneer Resources. Employees are expected to report to work as scheduled, on time and prepared to start working. Employees are also expected to remain at work for their entire schedule. Late arrival, early departure, or other absences from scheduled hours are disruptive and must be avoided.

Furthermore, as in any organization, a code of conduct is necessary to establish and maintain a productive, respectful, and fair working environment. Pioneer Resources, Inc. supports a progressive discipline path when possible, to address patterns of inappropriate and unacceptable work performance, as well as behavior where individuals must be held accountable. All employees of Pioneer Resources are required to adhere to certain rules of conduct necessary for the success of business operations. Disruptive acts interfere with the health, safety, and treatment of person's served, visitors or fellow employees.

The progressive discipline path does not waive at-will status. It is to be used as an outline to fairly and consistently apply standard discipline rules to each employee within the organization. Each infraction must be reviewed on a case by case basis depending upon the severity of the incident, employee standing, and tenure. Nothing in this policy is intended to limit in any way the organization's right to terminate employees at any time for any reason, with or without cause, or with or without advance notice.

Pioneer Resources, Inc. may impose disciplinary action in those instances where management decides it is appropriate. Pioneer Resources reserves the right to terminate employment without appeal in certain situations such as intentional abuse and/or neglect that results in the death of persons served, unlawful harassment, workplace violence, sexual relations with persons served, and any other actions that contribute to, or create, a hostile work environment.

There is no effective method of predetermining the seriousness, effect of any one violation, the organization's policies, or of making an exhaustive list of all possible violations. The severity of the disciplinary action depends on the nature and frequency of the offense, the seriousness of the infraction or performance/behavior, the employee's past record, and any other mitigating

circumstances.

When discipline must be applied, directors and supervisors *must always* consider the employee's employment record when deciding upon what discipline path to apply. Directors and supervisors need to review the personnel record and look at the previous 12 months from the date of the infraction that just occurred. If the employment record is clear then follow the appropriate progressive discipline path outlined below. If the record indicates other infraction activity within the last 12 months, consult with the Human Resources department.

When the need for verbal counseling and/or formal discipline has been identified, it is expected that the discipline is issued as soon as possible. This will help to ensure areas of poor performance, or lack of understanding, are addressed in a timely manner.

Background Information (Including Definition)

Behavioral Expectations and Commitments:

1. **We expect** excellence in every employee's work **and are committed to** exceeding performance measures to provide the highest quality treatment to persons served while also being effective stewards of our resources.
2. **We expect** every Pioneer Resources, Inc. employee to project a positive and professional image in their attitudes and behavior, holding people accountable for treating persons served and co-workers with dignity and respect, while embracing diversity and inclusion. When it is appropriate laugh, smile and have fun at work.
3. **We expect** open communications within the organization, **are committed to** a visible leadership presence, and to ensuring that our communications have been fully and accurately conveyed.
4. **We expect** that all Pioneer Resources, Inc. employees will take responsibility for their professional growth and development, **and are committed to** providing all employees with the time, tools, education and training that they need to be successful in their jobs.
5. **We expect** Pioneer Resources, Inc. employees to make efficient and productive use of their time **and are committed to** keeping focused on key priorities, avoiding unnecessary meetings and assignments, planning our work so as to reduce stress levels for support staff, as well as being on time and fully prepared for meetings while being courteous and attentive throughout.
6. **We expect** every Pioneer Resources, Inc. employee to act with integrity, and are committed to a zero tolerance policy for dishonesty, abusive or unethical behavior, unlawful harassment, discrimination, or theft, and to create a safe environment where employees can report problems without fear of retaliation. We recognize that each of us has the need to be heard and accept the reality that being heard does not mean that our recommendations or ideas will be implemented or followed.

Absence and Unscheduled Absences

Absence, or unscheduled absence, is defined as the failure of an employee to report for work when they are scheduled to do so. These absences may be with or without a doctor's note, and follow all proper notification procedures as identified below.

PTO utilized for any protected reason under Michigan's Earned Sick Time Act (ESTA) will be

allowed without recourse/corrective action. Pioneer Resources reserves the right to request a doctor's note for any protected ESTA leave lasting more than three consecutive days; a doctor's note will not be required for protected ESTA leave lasting less than three full consecutive days. If requested, the agency will reimburse the employee for any out of pocket costs associated with said request.

In general, a protected leave under ESTA includes:

- a. The employee's or the employee's family member's mental or physical illness, injury, or health condition; medical diagnosis, care, or treatment of the employee's mental or physical illness, injury, or health condition; or preventative medical care for the employee.
- b. If the employee or the employee's family member is a victim of domestic violence or sexual assault, for medical care or psychological or other counseling for physical or psychological injury or disability; to obtain services from a victim services organization; to relocate due to domestic violence or sexual assault; to obtain legal services; or to participate in any civil or criminal proceedings related to or resulting from the domestic violence or sexual assault.
- c. For meetings at a child's school or place of care related to the child's health or disability, or the effects of domestic violence or sexual assault on the child.
- d. For closure of the employee's place of business by order of a public official due to a public health emergency; for an employee's need to care for a child whose school or place of care has been closed by order of a public official due to a public health emergency; or when it has been determined by the health authorities having jurisdiction or by a health care provider that the employee's or employee's family member's presence in the community would jeopardize the health of others because of the employee's or family member's exposure to a communicable disease.

Tardiness and Early Departures

You are considered late after eight (8) minutes from your scheduled start time. For example, you were scheduled to be at work at 6:00am, but punched in at 6:08am, you are considered to be late. If you punch in within seven (7) minutes of your scheduled start time, you are considered to be on time. Employees are expected to report to work and return from breaks at the scheduled time. If employees cannot report to work as scheduled, they must notify their supervisor no later than one (1) hour before their scheduled starting time.

Employees who must leave work before the end of their scheduled shift must notify a supervisor immediately. In the licensed group home setting, relief staff must arrive and be ready to perform duties prior to leaving your shift regardless of the circumstances. Failure to maintain proper staffing levels may be deemed as job abandonment and subject to increased disciplinary measures.

Violations to the Attendance Policy

Violations to the Attendance Policy are defined by two categories when evaluating the progression disciplinary path needed within a twelve (12) month period:

- Unscheduled absences, early departures, and failures to attend mandated trainings are combined into one category.

- Tardiness (late arrivals) is a separate category.

No Call, No Show

No call, no show occurs when an employee is absent from work and has not notified their supervisor. A no call, no show policy sets expectations and explains the repercussions for missing a scheduled shift without following the prescribed notification procedures.

12 Month Rolling Calendar

The twelve (12) month period is a “rolling window” for evaluating an employee’s performance history, is measured from the current date back twelve (12) months, not a calendar year.

Job Abandonment

Any employee who fails to report to work for a period of three (3) consecutive days or more without notifying his or her supervisor, will be considered to have abandoned the job and voluntarily terminated the employment relationship.

Pioneer Resources’ Progressive Discipline Process:

Corrective Actions

This list is not designed to be exhaustive, rather as a guide to escalate an employee’s disciplinary actions.

Verbal Counseling (VC): Action taken by the supervisor when there has been an infraction of a work rule, or when unsatisfactory performance or behavior occurs. The supervisor will document the event and then meet with the employee to discuss the issue or concern. Verbal counseling is given to alert the employee that their behavior or job performance is unacceptable in order to give them an opportunity to show improvement.

Written Warning (WW): Action taken by the supervisor when the infraction or performance issues are too severe for verbal counseling, or the pattern of unacceptable behavior or performance has not improved. The supervisor will document the event and meet with the employee to review. An employee who is given a written warning is required to sign the document as verification that the written warning was shared. At the discretion of the employee, written comments may be added to the warning. The employee is expected to, and responsible for, demonstrating sustained and continuous improvement.

Suspension without Pay (S-1, S-3): Action taken by the supervisor when the employee has already received formal discipline, or when the severity of the event dictates this action is appropriate.

- The employee may be given a disciplinary suspension without pay for a specified period of time.
 - When there is a suspension, a written report of suspension will be presented to the employee.
 - An employee who is given a report of suspension is required to sign it as verification that the report was shared with them.
 - If the employee refuses to sign, the supervisor will document a refusal to sign.
 - Refusing to sign the document does not change the effectiveness of the disciplinary

action.

- Disciplinary suspensions are typically issued as one day off work without pay (S-1), or three days off work without pay (S-3).
- Any employee who is suspended from work without pay for any period of time, will be required to enter into a Performance Improvement Plan (PIP) in addition to the suspension.
- PTO can not be used while an employee is on a mandated suspension.

Immediate Suspension (IM): May be used when urgent circumstances make the attendance at work dangerous to the employee or others, when an investigation is needed, or when circumstances seriously impair the employee's effectiveness on the job.

- Immediate suspensions are typically for unknown periods of time (i.e. – waiting for drug testing results and/or the completion of an investigation).
- When there is an immediate suspension, the employee will be provided a notice of suspension so they can be prepared for the next step of the process.
- Failure to attend and/or cooperate with the process will result in the separation of employment.
- At the discretion of the employee, written comments may be added to reports of suspension.
- All reports of suspension will be placed in the employee's personnel record.

Notice of Separation/Termination (T): As noted above, separation of employment may be immediate and without warning based on the facts and circumstances of the situation.

- When there is a notice of separation, the employee will be provided a copy.
- If the employee is unable to receive the copy in person, a copy will be mailed to them via certified mail through the United States Postal Service.
- At the discretion of the employee, written comments may be added to notices of separation.
- All notices will be placed in the personnel record.

Employee Grievance (EG): Action taken by the employee if the employee disputes or disagrees with an action taken through the progressive discipline process. The employee has five (5) days from the date of the disciplinary action to contact the Human Resources department. The employee will be responsible for presenting the information to support the reason(s) for dispute. Human Resources will apply the dispute resolution process, while communicating with all involved parties. Refer to Pioneer Resources' Employee Grievance Policy for further details.

Performance Improvement Plan (PIP): A PIP is a tool used to define inappropriate behaviors and/or poor work performance indicators that require immediate and sustained improvement. It requires interaction between the supervisor and the employee, in order to achieve said results.

- The PIP should indicate the violation(s) and what steps the employee will take to avoid any future instance(s).

- It should be a well thought-out plan that shows achievable milestones for the employee to work through.
- It is the goal of Pioneer Resources, Inc. to coach employees on poor behavior/performance indicators, in order to aid them in avoiding future violations.
- Any employee placed on suspension will also be required to enter into a Performance Improvement Plan immediately following their return to work.

Approval of Suspensions and Terminations

All suspensions and separations of employment **must be** reviewed by the Director of Human Resources or the CEO **prior** to any action being taken.

The following list of infractions is intended to provide a general list of prohibited conduct and is not intended to be all-inclusive or absolute. It should not be considered to cover all situations that may result in disciplinary action, nor does it limit the right of management to take the appropriate course of action in any specific incident or situation. Pioneer Resources, Inc. reserves the right to terminate an employee at-will, at any time, with or without advance notice, and with or without reason.

Work Behavior Infractions		Progressive Path of Discipline			
Progressive Disciplinary Action Key	VC=Verbal Coaching	WW=Written Warning			
	S-1=One Day Suspension	S-3=Three Day Suspension			
	FW=Final Warning	T=Separation/Termination			
<i>Infraction</i>		<i>1st</i>	<i>2nd</i>	<i>3rd</i>	<i>4th</i>
Refusal or failure to follow company policies, procedures and/or standards of conduct.		VC	WW	T	
Creating an intimidating or hostile work environment.		T			
Theft, abuse or sabotage of company property.		T			
Intentionally disclosing or misusing confidential or protected health information.		T			
Intentionally engaging in discriminatory behavior that is in violation of applicable laws and regulations.		T			
Threatening, intimidating, disrespecting, or assaulting a person served, director, supervisor, or co-worker.		T			
Fighting or engaging in threatening or violent behavior, or behaving in a way that could provoke violence among co-workers and/or persons served.		T			
The intentional abuse or neglect of persons served that result in hospitalization, serious harm and/or		T			

death.				
Being in possession, or the sale of illegal substances, on Pioneer Resources' property.	T			
Violation of dress code and/or footwear policy, enforced by supervisor.	VC	WW	S-1 w/ PIP	T
Being under, or the appearance of being under, the influence of alcohol and/or illegal drugs on company premises, or while conducting business on behalf of the organization. Reasonable suspicion procedures should be coordinated with the Director of Human Resources.	T			
Refusal to submit to inspection of work areas/lockers.	T			
Refusal to submit to a drug/alcohol test, or leave the occupational provider without submitting an acceptable urine sample.	T			
Insubordination, refusal of work assignments, verbal or written.	WW	FW	T	
Being uncooperative during internal / external investigations.	T			
Possession of firearms or weapons on Pioneer Resources, Inc. property.	T			
Failure to follow reporting guidelines of the organization or the funding/licensing agency.	WW	S-1 w/ PIP	T	
Unauthorized or excessive use of cellular devices that negatively impacts operational efficiencies, job duties, treatment services to persons served, or driving while performing company business.	WW	S-3 w/ PIP	T	
Unsatisfactory job performance; failure to perform the essential functions and responsibilities of your position at a satisfactory level including special projects and assignments.	VC	WW	FW w/ PIP	T
Being less than alert while on duty	FW	T		
Unauthorized sleeping while on shift.	S-3 w/ PIP	T		
Performing personal business while on shift without supervisory approval.	WW	FW	T	

Falsifying documents related to employment, persons served, or any other organizational document.	T			
Falsifying time card.	T			
Substantiated violation of any outside licensed or regulatory agency.	This will be reviewed on a case-by-case basis based on the level of severity. CEO/ Director of Human Resources must ensure consistent practice when administering discipline.			
Abuse and/or neglect of persons served.	T			
Leaving persons served unattended.	T			
Exploitation of persons served that involves the misappropriation or misuse of that person's property or funds for the benefit of the individual other than the resident and or participant of services.	T			
Not completing shift duties/assignments or not completing requested instructions from supervisor.	WW	FW	T	
Leaving work without proper authorization.	FW	T		
Not completing shift notes (electronic record within the designated time frame).	WW	S-1 w/ PIP	T	
Use of obscene/foul language or gestures.	FW	T		
Inappropriate behaviors/attitudes that negatively impact residents or persons served that do not rise to the level of threatening, intimidation, and/or creating a hostile work environment. Note: Violations in this category must be reviewed by the Director of HR and/or the CEO prior to issuing any formal reprimand to ensure unbiased application.	WW	FW w/ PIP	T	
Endangering the safety of others, persons served, or your own personal safety.	FW	T		
Unauthorized use of company materials (telephone, vehicle, computer, etc.)	FW	S-3 w/ PIP	T	
Refusal to follow guidelines of PPE Policy and Procedures	WW	FW	T	

While driving, collision with a stationary object or vehicle. Termination of employment to happen upon fifth instance.	VC	WW	S-1 w/ PIP	S-3 w/ PIP
Medication Passing Errors	1st	2nd	3rd	4th
Failure to correctly follow medication and treatment administration, documentation, handling and transporting procedures that result in an error(s)/mistake(s). <i>This is a standard disciplinary path; in the case of more egregious or intentional acts of abuse or neglect, disciplinary proceedings may be escalated as needed. Exceptions to this policy must be approved by the CEO.</i> Termination of employment shall occur upon the 5th violation; all terminations must be approved by the CEO or Director of Human Resources, prior to taking action.	VC	WW <i>Review proper med procedures with mgr</i>	WW <i>& PIP with no more than one error in the next 12 mths and re-train (Med Admin & Monitoring as well as Med Types, Uses & Effects)</i>	FW

Attendance Policy Violations		Progressive Path of Discipline				
Progressive Disciplinary Action Key	VC=Verbal Coaching	WW=Written Warning				
	S-1=One Day Suspension	S-3=Three Day Suspension				
	FW=Final Warning	T=Separation/Termination				
Unscheduled Absences Leave utilizing PTO and/or a protected ESTA reason, will not result in a corrective action.	2nd	3rd	4th	5th	6th	
Upon the second occurrence of an unscheduled absence, begin escalating disciplinary action as prescribed here (<i>unscheduled absences, failure to attend mandated trainings, or early departure of a shift with coverage, are all treated as unscheduled absences and follow this progressive disciplinary path using a rolling 12-month look back period</i>).	VC	WW	WW w/ PIP	FW	T	
Failure to attend, arrive on time, or stay for the duration of a mandated/schedule training session, will be handled like an unscheduled absence. Upon the second occurrence of an unscheduled absence, begin escalating disciplinary action. See above.	Combine instances with unscheduled absences above.					
Failure to remain for the full duration of your scheduled shift even though coverage arrived and relieved you of your duties (leaving a shift without	Combine instances with unscheduled absences above.					

coverage is considered job abandonment; see below).					
Tardiness	2nd	3rd	4th	5th	6th
Upon the second occurrence of a late arrival/tardy (arriving more than seven (7) minutes beyond the start of your scheduled shift), begin escalating disciplinary action as prescribed here (<i>instances of tardiness are counted separate from unscheduled absences</i>).	VC	WW	WW w/ PIP	FW	T
Mandated Programs/Job Abandonment	1st				
Failure to follow shift coverage rules within a mandated program (i.e.-abandoning a scheduled shift without proper coverage in place). Mitigating circumstances may be taken into consideration; all exceptions to this policy must be approved by the CEO.	T				
No Call, No Show	1st	2nd			
No call-no show; failure to show up for a shift without following proper call-in procedures.	FW	T			

HIPAA Infractions		Progressive Path of Discipline			
Progressive Disciplinary Action Key	VC=Verbal Coaching	WW=Written Warning			
	S-1=One Day Suspension	S-3=Three Day Suspension			
	FW=Final Warning	T=Separation/Termination			
Release of Private/Confidential Information		1st	2nd	3rd	4th
HIPAA violations (unauthorized release of protected medical information).		Violations will be reviewed on a case by case basis, and any disciplinary action will be measured against whether the infraction was accidental or deliberate.			
Release of confidential information about persons served.		Violations will be reviewed on a case by case basis, and any disciplinary action will be measured against whether the infraction was accidental or deliberate.			

Procedures

Verbal Counseling: Verbal reprimand may be given by a service area supervisor.

- An employee is expected to take responsibility and to correct the reprimanded behavior and/or performance.
- Although the terminology implies verbal counseling, a written record is to be prepared indicating that the counseling occurred, along with the necessary improvements that are expected.
- Repeated instances of the same and/or similar actions shall warrant a written reprimand at the next offense.

Written Warning: A written reprimand shall be prepared detailing the action or behavior to be corrected and shall give instructions for future conduct.

- It shall describe further disciplinary action to be taken if the problem is not corrected.
- The document must be dated and signed by the supervisor.
- The document must be available to the employee.
- The employee should sign or initial the copy, electronic or otherwise, indicating they received the document, and the date which they received it.
- The signed copy shall be filed in the employee's personnel record.
- If the employee refuses to sign the reprimand, this should be noted by the supervisor on the document.
- The employee may write a rebuttal or response to any written disciplinary action that is placed in the personnel record.

Suspension: Suspension without pay may only be provided by a supervisor with consultation from the CEO or Director of Human Resources.

- Such action shall be taken based upon careful consideration of the circumstances of the offense, including previous disciplinary actions.
- Notification of suspension without pay shall be written, detailing the reasons for the suspension, and indicating the duration of the suspension.
 - The document must be dated and signed by the person taking the action.
 - The document must be delivered (electronically or in person) to the employee.
 - The employee must sign (electronically or otherwise).
 - The signed copy shall be filed in the employee's personnel record (electronic or otherwise).
 - If the employee refuses to sign the suspension notice, this shall be noted on the document.

- Employees who receive a report of suspension may also be required to complete additional trainings that will help them learn how to improve their work performance and/or change their behavior.
- The employee will also be required to develop a Performance Improvement Plan (PIP) upon returning to work with the supervisor/manager's assistance.
- Failure to attend scheduled training classes, or completing the PIP, may result in separation of employment.
- Suspensions without pay may range from one to three working days.
- During such suspensions, the employee is not entitled to PTO, or any other form of benefit pay.

Termination/Separation of Employment: Separation of employment shall only occur with the consent of the CEO or Director of Human Resources.

Notification of separation shall be written, designating all reasons for, and the effective date of, the separation. The separated employee shall receive pay and benefits only for days worked through the effective date of the separation.

- The notification of separation must be dated and signed by the person taking the action.
- The notification must be delivered electronically, delivered via hard copy in person, or via certified mail through the United States Postal Service.
- A copy of the notification shall be filed in the employee's personnel record.
- If the employee refuses to sign the termination/separation notice, this shall be noted on the document.

Any form of disciplinary action may be appealed via the process in the Employee Grievance Policy.

References: James Reasons Culpability Model, State & Federal employment law.

Effective: 11/17/17

Revised: 12/23/19, 09/29/22, 10/26/22, 10/31/23

Reviewed: 09/28/20, 09/13/21, 09/29/22, 10/26/22, 10/31/23, 10/24/24, 02/21/25

Workplace Violence

Purpose

Pioneer Resources is committed to preventing workplace violence and to maintaining a safe work environment. Pioneer Resources prohibits any language or actions by employees (that may occur onsite or offsite during work-related activities or where the employee is representing the organization) that could create an intimidating or threatening (including bullying behaviors) effect on another employee, temporary staff, contractor, student, volunteer, persons served, funding agencies, vendors or visitors.

Policy Provisions

It is important that every employee understand there is no such thing as an idle threat. Any threatening statement or gesture will be interpreted as intent to carry it out. Because Pioneer Resources has a zero-tolerance policy, employees using the defense of “it was only a joke,” or “fooling around,” or engaging in “horseplay,” will not be tolerated.

- Pioneer Resources, Inc. prohibits the possession of weapons firearms, knives, explosives and other dangerous or hazardous devices or substances on company property. This includes individuals who have obtained a concealed carry weapons permit or Concealed Pistol License (CPL).
- Pioneer Resources, Inc. prohibits the use of its resources to threaten, stalk, or harass anyone at, or outside of, the workplace; these resources may include, but not limited to computer, phone/text/instant messaging, or email.
- Pioneer Resources, Inc. treats threats being sent in an abusive personal relationship as it does any other form of violence.
 - Employees are encouraged to report safety concerns with regard to spouse/domestic partner violence.
 - In support of employees involved in these types of incidents, Pioneer Resources may refer them to the company’s Employee Assistance Program (EAP).
 - The Director of Human Resources will help develop a safety plan to help minimize potential risks.

Definitions:

Workplace: All Pioneer Resources’ property and any other locations where employees perform their work or represent the organization.

Violence: Direct or indirect verbal or physical threats, threatening language, or any other acts of aggression or violence made toward another person. It may include physical harm or damage to property.

Procedures

Knowledge of any indirect or direct threats of violence, incidents of actual violence and suspicious individuals or activities, should be reported immediately to a supervisor, Human

Resources, or any member of Pioneer Resources' management team.

Employees should not ignore violent, threatening, harassing, intimidating, or other disruptive behaviors. If in doubt about anyone's safety due to another person's strange behavior or you suspect that a life-threatening situation may arise, do not hesitate to call 911.

Behavior that appears erratic, abusive, threatening, or bullying by anyone on Pioneer Resources' property should be reported immediately to a member of the management staff and the Director of Human Resources.

Domestic Violence

Threats/Violence from a spouse/domestic partner of any kind is a concern of Pioneer Resources. Threats of this nature not only endangers the victim, but others in the workplace, and should be reported to the supervisor and the Director of Human Resources.

- Employees should promptly inform Human Resources of any protective or restraining order that they have obtained that lists the workplace as a protected area.
- Out of concern for the victims of these activities, Human Resources may refer these employees to Pioneer Resources' Employee Assistance Program (EAP) for additional support.
- The Director of Human Resources will help develop a safety plan to help minimize potential risks.
- When reporting a threat of incident of violence, the employee should be as specific and detailed, as possible.
- Employees should not place themselves in danger, nor should they attempt to intercede during an incident.
- Pioneer Resources, Inc. encourages employees to bring their disputes to the attention of their supervisor, or the Director of Human Resources, before the situation escalates.

Pioneer Resources will not discipline employees for raising such concerns. Retaliation for reporting will not be tolerated. No one will be retaliated against regarding employment opportunities, compensation, work assignments, or any other terms and conditions of employment for submitting a report or for participating in an investigation.

False claims will be subject to disciplinary action up to, and including, termination of employment.

Training

Workplace violence training is conducted upon hire during New Hire Orientation and on an annual basis. This training is conducted to help minimize workplace violence and to help employees identify situations that are likely to result in workplace violence, as well as how to report such activities.

Investigations and Enforcement

Pioneer Resources will promptly and thoroughly investigate all reports of threats of violence, incidents of actual violence, and/or of suspicious individuals or activities.

Furthermore, Pioneer Resources will not retaliate against employees making good-faith reports

of violence, threats, or suspicious individuals or activities. However, disciplinary action will be taken against an employee for making false reports/claims/statements, up to and including termination.

Confidentiality of employees reporting violations will be protected to the extent deemed reasonable and appropriate by the Director of Human Resources. Only those individuals with a legitimate need to know will be informed. This may include the person(s) who are the subject of the report.

In order to maintain workplace safety and the integrity of an investigation, Pioneer Resources will suspend an employee(s) suspected of workplace violence or threats of violence. This suspension could be with/without pay, pending the outcome of the investigation.

Workplace Searches and Inspections

In order to protect the safety of our employees, persons served, funding agencies, vendors or visitors and to prevent the use of possession of weapons in the workplace, Pioneer Resources, Inc. reserves the right to conduct a search of any employee's work area, property, or equipment. In the event of a search and a violation is revealed, the offending employee(s) will be subject to disciplinary action, up to and including separation of employment. Any illegal activity discovered will be referred to the appropriate law enforcement agency.

- Anyone found to be responsible for threats, of or actual violence or other conduct related to this policy, will be subject to prompt disciplinary action up to and including termination of employment.
- Failure to report or attempts to cover up any threats or acts of violence will result in disciplinary action, up to and including termination.

The CEO and/or the Director of Human Resources will decide whether Pioneer Resources' Workplace Violence Policy has been violated and determine appropriate corrective actions.

Effective: 06/11/19

Revised:

Reviewed: 09/28/20, 08/31/21, 09/23/22, 10/30/23

Anti-Harassment & Complaint Procedure

Objective

Pioneer Resources, Inc. strives to create and maintain a work environment in which people are treated with dignity, decency and respect. The environment of the agency should be characterized by mutual trust and the absence of intimidation, oppression and exploitation.

Pioneer Resources will not tolerate discrimination or harassment of any kind. Through

enforcement of this policy and by education of employees, Pioneer will seek to prevent, correct and discipline behavior that violates this policy.

All employees, regardless of their positions, are covered by and are expected to comply with this policy and to take appropriate measures to ensure that prohibited conduct does not occur.

Pioneer Resources employees are to rely on the values set forth in our LEAD acronym L=Listen E= Empathy A=Acknowledge D= Dignity. Utilizing this value systems in every conversation, whether within employee to supervisor, supervisor to Director, employee to family member or person served, or employee to community partners is an expectation of all employees

Appropriate disciplinary action will be taken against any employee who violates this policy. Based on the seriousness of the offense, disciplinary action may include verbal or written reprimand, suspension, or separation of employment.

Directors, Managers and supervisors who **knowingly** allow or tolerate discrimination, harassment or retaliation, including the failure to immediately report such misconduct to Human Resources, are in violation of this policy and subject to discipline.

Prohibited Conduct Under This Policy

Pioneer Resources through harassment laws and regulations, enforces this policy in accordance with the following definitions and guidelines:

Discrimination

It is a violation of Pioneer Resources' policy to discriminate in the provision of employment opportunities, benefits or privileges, to create discriminatory work conditions, or to use discriminatory evaluative standards in employment, if the basis of that discriminatory treatment is, in whole or in part, the person's race, color, national origin, age, religion, disability status, gender, sexual orientation, gender identity, genetic information or marital status.

Discrimination of this kind may also be strictly prohibited by a variety of federal, state and local laws, including Title VII of the Civil Rights Act of 1964, the Age Discrimination Act of 1967, and the Americans with Disabilities Act of 1990. This policy is intended to comply with the prohibitions stated in these anti-discrimination laws.

Discrimination in violation of this policy will be subject to disciplinary measures up to and including separation of employment.

Harassment

Pioneer Resources prohibits harassment of any kind, including sexual harassment, and will take appropriate and immediate action in response to complaints or knowledge of violations of this policy. For purposes of this policy, harassment is any verbal or physical conduct designed to threaten, intimidate or coerce an employee, co-worker, or any person working for or on behalf of Pioneer Resources or any person receiving services of Pioneer Resources Inc.

The following examples of harassment are intended to be guidelines and are not exclusive when determining whether there has been a violation of this policy:

1. Verbal harassment includes comments that are offensive or unwelcome regarding a person's national origin, race, color, religion, gender, sexual orientation, age, body, disability or appearance, including untrue characterizations, slurs and negative stereotyping.
2. Nonverbal harassment includes distribution, display or discussion of any written or graphic material that ridicules, diminishes, insults, belittles or shows hostility, aversion or disrespect toward an individual or group because of national origin, race, color, religion, age, gender, sexual orientation, pregnancy, appearance, disability, sexual identity, marital status or other protected status.

Sexual Harassment

Sexual harassment is a form of unlawful employment discrimination under Title VII of the Civil Rights Act of 1964 and is prohibited under Pioneer Resources' anti-harassment policy.

According to the Equal Employment Opportunity Commission (EEOC), sexual harassment is defined as "unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature ... when ... submission to or rejection of such conduct is used as the basis for employment decisions ... or such conduct has the purpose or effect of ... creating an intimidating, hostile or offensive working environment."

Sexual harassment occurs when unsolicited and unwelcome sexual advances, requests for sexual favors, or other verbal or physical conduct of a sexual nature:

1. Is made explicitly or implicitly a term or condition of employment.
2. Is used as a basis for an employment decision.
3. Unreasonably interferes with an employee's work performance or creates an intimidating, hostile or otherwise offensive environment.

Sexual harassment may take different forms. The following examples of sexual harassment are intended to be guidelines and are not exclusive when determining whether there has been a violation of this policy:

1. Verbal sexual harassment includes:
 - a. Innuendoes, suggestive comments, jokes of a sexual nature, sexual propositions, lewd remarks and threats.
 - b. Requests for any type of sexual favor (this includes repeated, unwelcome requests for dates).
 - c. Verbal abuse or "kidding" that is oriented toward a prohibitive form of harassment, including that which is sexual in nature and unwelcome.
2. Nonverbal sexual harassment includes:
 - a. The distribution, display or discussion of any written or graphic material, including calendars, posters and cartoons that are sexually suggestive or show hostility toward an individual or group because of sex.
 - b. Suggestive or insulting sounds such as leering/staring, whistling or other inappropriate sounds, and/or obscene gestures.

- c. Content in letters, notes, facsimiles, e-mails, photos, text messages, tweets and Internet postings.
 - d. Other forms of communication that are sexual in nature and offensive.
- 3. Physical sexual harassment includes:
 - a. Unwelcome, unwanted physical contact, including touching, tickling, pinching, patting, brushing up against, hugging, cornering, kissing, fondling, and/or forced sexual intercourse or assault.

Courteous, mutually respectful, pleasant, non-coercive interactions between employees that are appropriate in the workplace and acceptable to, welcomed by both parties are not considered to be harassment, including sexual harassment.

Consensual Romantic or Sexual Relationships

Pioneer Resources prohibits romantic or sexual relationships between a director or other supervisory employee and his or her staff (an employee who reports directly or indirectly to that person) because such relationships tend to create compromising conflicts of interest or the appearance of such conflicts. In addition, such a relationship may give rise to the perception by others that there is favoritism or bias in employment decisions affecting the staff employee.

Moreover, given the uneven balance of power within such relationships, consent by the staff member is suspect and may be viewed by others, or at a later date by the staff member, as having been given as the result of coercion or intimidation. The atmosphere created by such appearances of bias, favoritism, intimidation, coercion or exploitation, undermines the spirit of trust and mutual respect that is essential to a healthy work environment. If there is such a relationship, the parties need to be aware that one or both may be moved to a different department or other actions may be taken. Please see Employment of Relatives and Personal Relationships Policy for further reference and information.

If any employee of Pioneer Resources, Inc. enters into a consensual relationship that is romantic or sexual in nature with a member of their staff (an employee who reports directly or indirectly to them), or if one of the parties is in a supervisory capacity in the same department in which the other party works, the parties must notify the Director of Human Resources or the CEO within one week.

Due to the potential issues regarding quid pro quo harassment, Pioneer Resources has made reporting mandatory. This requirement does not apply to employees who do not work in the same department or to parties where neither one supervises or otherwise manages responsibilities over the other.

Once the relationship is made known to Pioneer Resources, the CEO and the Director of Human Resources will review the situation with in light of all the facts (reporting relationship between the parties, effect on co-workers, job titles of the parties, etc.) and will determine whether one or both parties need to be moved to another job or department.

If it is determined that one party must be moved, and there are jobs in other departments available for both, the parties may decide who will be the one to apply for a new position. If the

parties cannot amicably come to a decision, or the party is not chosen for the position to which he or she applied, the Director of Human Resources and CEO will decide which party will be moved. That decision will be based on which move will be least disruptive to the organization as a whole.

If no other jobs are available for either party, the parties will be given the option of terminating their relationship or resigning.

Retaliation

No hardship, loss, benefit or penalty may be imposed on an employee in response to:

1. Filing or responding to a bona fide complaint of discrimination or harassment.
2. Appearing as a witness in the investigation of a complaint.
3. Serving as an investigator of a complaint.

Lodging a bona fide complaint will in no way be used against the employee or have an adverse impact on the individual's employment status. However, filing groundless or malicious complaints is an abuse of this policy and will be treated as a violation.

Any person who is found to have violated this aspect of the policy will be subject to discipline up to and including termination of employment.

Confidentiality

All complaints and investigations are treated confidentially to the extent possible, and information is disclosed strictly on a need-to-know basis. The identity of the complainant is usually revealed to the parties involved during the investigation, and the Director of Human Resources will take adequate steps to ensure that the complainant is protected from retaliation during and after the investigation. All information pertaining to a complaint or investigation under this policy will be maintained in secure files within the HR department.

Complaint Procedure

Pioneer Resources has established the following procedure for lodging a complaint of harassment, discrimination or retaliation. The company will treat all aspects of the procedure confidentially to the extent reasonably possible.

Complaints should be submitted as soon as possible after an incident has occurred, preferably in writing. The Director of Human Resources may assist the complainant in completing a written statement, or in the event an employee refuses to provide information in writing, the Director of Human Resources will dictate the verbal complaint.

If the complaint involves the Director of Human Resources, the complaint should be directed to the CEO.

If the complaint involves the CEO, the complaint should be directed to the President of the Board and investigation to be facilitated by the BOD or an external third party as deemed appropriate by the Board of Directors.

1. Upon receiving a complaint, or being advised by a supervisor or Director that violation of

this policy may be occurring, the Director of Human Resources will notify the CEO and review the complaint with the company's legal counsel.

2. The Director of Human Resources will initiate an investigation, or delegate to a designee, to determine whether there is a reasonable basis for believing that the alleged violation of this policy occurred.
3. If necessary, the complainant and the respondent will be separated during the course of the investigation, either through internal transfer or administrative leave.
4. During the investigation, the Director of Human Resources together with legal counsel or other management employees, will interview the complainant, the respondent and any witnesses to determine whether the alleged conduct occurred.
5. Upon conclusion of an investigation, the Director of Human Resources or other person(s) conducting the investigation will submit a written report of his or her findings to the company.
6. If it is determined that a violation of this policy has occurred, the Director of Human Resources will recommend appropriate disciplinary action; the appropriate action will depend on the following factors:
 - a. The severity, frequency and pervasiveness of the conduct.
 - b. Prior complaints made by the complainant.
 - c. Prior complaints made against the respondent.
 - d. The quality of the evidence (e.g., firsthand knowledge, credible corroboration).
7. If the investigation is inconclusive or if it is determined that there has been no violation of policy but potentially problematic conduct may have occurred, the Director of Human Resources may recommend appropriate preventive action.
8. The CEO will review the investigative report and any statements submitted by the complainant or respondent, discuss results of the investigation with the Director of Human Resources and other management staff as appropriate, and decide what action, if any, will be taken.
9. Once a final decision is made by the CEO, the Director of Human Resources will meet with the complainant and the respondent separately and notify them of the findings of the investigation.
10. If disciplinary action is to be taken, the respondent will be informed of the nature of the discipline and how it will be executed.

Alternative legal remedies

Nothing in this policy may prevent the complainant or the respondent from pursuing formal legal remedies or resolution through local, state or federal agencies or the courts.

References: SHRM and the EEOC.

Effective Date: 06/01/19

Revised: 10/16/23

Reviewed: 09/23/20, 09/13/21, 09/23/22, 10/30/23, 10/21/24

Bullying

Objective

The purpose of this policy is to communicate to all employees, including supervisors, managers, Directors and executives, that Pioneer Resources will not ***in any instance*** tolerate bullying behavior. Employees found in violation of this policy will be disciplined, up to and including separation.

Definition

Pioneer Resources, Inc. defines bullying as repeated, health-harming mistreatment of one or more person(s) by one or more perpetrators. It is abusive conduct that includes:

- Threatening, humiliating or intimidating behaviors
- Interference/sabotage that prevents work from getting done
- Verbal abuse

Such behavior violates Pioneer Resources' Code of Ethics, which clearly states that all employees will be treated with dignity and respect.

Examples

Pioneer Resources considers the following types of behaviors as bullying:

- **Verbal bullying:**
 - Slandering, ridiculing or maligning a person or his or her family.
 - Persistent name-calling that is hurtful, insulting or humiliating.
 - Using a person as the butt of jokes.
 - Abusive and offensive remarks.
- **Physical bullying:**
 - Pushing, shoving, kicking, poking, tripping, assault or threat of physical assault, or damage to a person's work area or property.

- **Gesture bullying:**
 - Nonverbal gestures that can convey threatening messages.
- **Exclusion:**
 - Socially or physically excluding or disregarding a person in work-related activities.

In addition, the following examples may constitute or contribute to evidence of bullying in the workplace:

- Persistent singling out of one person.
- Shouting or raising one's voice at an individual in public or in private.
- Using obscene or intimidating gestures.
- Not allowing the person to speak or express themselves (i.e.: ignoring or interrupting).
- Personal insults and use of offensive nicknames.
- Public humiliation in any form.
- Constant criticism on matters unrelated or minimally related to the person's job performance or description.
- Public reprimands.
- Repeatedly accusing someone of errors that cannot be documented.
- Deliberately interfering with mail and other communications.
- Spreading rumors and gossip regarding individuals.
- Encouraging others to disregard a supervisor's instructions.
- Manipulating the ability of someone to do his or her work (i.e: overloading, under loading, withholding information, setting deadlines that cannot be met, and giving deliberately ambiguous instructions).
- Assigning menial tasks not in keeping with the normal responsibilities of the job.
- Taking credit for another person's ideas.
- Refusing reasonable requests for leave in the absence of work-related reasons for such.
- Deliberately excluding an individual or isolating them from work-related activities, such as meetings.
- Unwanted physical contact, physical abuse or threats of abuse to an individual or an individual's property (defacing or marking up property).

Individuals who feel they have experienced bullying should report this to their supervisor, manager, or the Director of Human Resources before the conduct becomes severe or pervasive.

- If the complaint involves the Director of Human Resources, the complaint should be directed to the CEO.
- If the complaint involves the CEO, the complaint should be directed to the president of the board; subsequent investigation(s) should be facilitated by the Board of Directors, or an external third party as requested by the BOD.

All employees are strongly encouraged to report any bullying conduct they experience or witness as soon as possible, in order to allow Pioneer Resources to take appropriate action.

Resources: SHRM and the EEOC.

Effective Date: 06/01/19

Revised: 10/16/23

Reviewed: 09/23/20, 09/13/21, 09/22/22, 10/30/23

Medication and Treatment Error Reporting

Purpose

To establish promptness, uniformity, and consistency in reporting medication/treatment errors.

Policy

Errors made during the course of caring for a person served in a Pioneer Resources' residential or program setting must be documented and reported by the person discovering the error.

Background Information (Including Definition)

Medication/treatment errors:

1. Wrong person was given a medication or treatment.
2. Wrong dosage was given to a person.
3. Missed or late medications (wrong time) or treatments.
4. A medication or treatment was administered by the wrong route.
5. Not accurately recording the distribution of medications or the application of treatments, including missing signature on the Medication Administration Record (MAR).

Procedures:

1. Upon finding a medication or treatment error, staff are to contact the residential/program supervisor, manager, or designee, if applicable. The assigned RN/medical professional will be contacted for errors that could adversely affect the person's health. An Incident Report must be completed.
2. With the exception of a refused or dropped medication or treatment, all other medication or treatment errors also require the completion of a Pioneer Resources "Critical Incident" report.
3. Reports shall contain the following information:
 - a. Date the error occurred
 - b. Date error found

- c. Name and case number of person involved
- d. Name of staff involved in the error
- e. A complete description of error made

The report shall be reviewed and signed by the residential/program supervisor, manager, or program Director. The residential/program supervisor, manager, or program Director will take any corrective action measures necessary to help avoid this type of error in the future.

The Incident Report will be scanned and sent to the following email addresses:

- 1. HealthWest: incidentreports@healthwest.net
- 2. Pioneer Resources: reporting@pioneerresources.org

Critical Incident Reports will be scanned and sent to reporting@pioneerresources.org

References:

Medication and Treatment Monitoring & Management Policy; Critical & Non-Critical Incident Reporting

Effective Date: 03/29/01

Revised Date: 11/02/23, 10/21/24

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/21/24

Critical and Non-Critical Incident Reporting

Purpose

To ensure timely review, uniformity, and consistency in reporting unusual incidents or critical incidents involving a person served that adversely disrupts the normal routine, causes harm or disrupts management or administration.

Policy

It is the policy of the agency to safeguard recipients of services from abuse and neglect and to ensure a responsive system of accountability.

All suspected instances of abuse or neglect as well as unusual and critical incidents shall be reported, reviewed and when appropriate, investigated, so that appropriate follow-up care and/or remedial action is taken to ensure the safe and humane treatment of the person served.

It is also the policy of this agency to protect employees or their representatives from any form of reprisal for testifying or providing information during an investigation.

Background Information (Including Definition)

Non-Critical Incident: An occurrence that does not meet the criteria of a “critical incident” but is significant enough to warrant documenting the incident on an Incident Report form.

Non-critical incidents include, but are not limited to:

1. Refused or dropped medication or treatment
2. A minor cut or scrape that requires nothing more than basic first aid performed by trained staff
3. A fall that does not required medical attention
4. Charting/documentation error

Critical Incident: An occurrence that disrupts or adversely affects the course of treatment or care of an individual, home or program management, or administration; and shall include but is not limited to the following:

- Medication errors and treatment errors
- Use of seclusion
- Use of restraint
- Incidents involving injury
- Communicable disease
- Infection control
- Aggression or violence
- Use and unauthorized possession of weapons
- Wandering
- Elopement
- Vehicular accidents
- Biohazardous accidents
- Unauthorized use and possession of legal or illegal substances
- Abuse
- Neglect
- Suicide and attempted suicide
- Sexual assault
- Overdose or suspected overdose
- Other sentinel events
- Inappropriate sexual acts, defined as sexual contact between two persons served if the clinical team has determined that one or more cannot consent.
- Suspected criminal offenses involving the persons served.

Sentinel Event: An unexpected occurrence involving:

- Death
- Serious physical injury or the risk thereof (this specifically includes loss of limb or function)
- Serious psychological injury or the risk thereof

The phrase “or risk thereof” includes any process variation for which a recurrence would carry a significant chance of a serious adverse outcome. Such events are called sentinel because

they signal the need for immediate investigation and response.

Procedures

Reporting and Documentation

1. Employees or volunteers shall immediately report all unusual incidents on the "Incident Report" form.
2. Reports should be detailed, clear and concise, with all requested information on the form to be completed in its entirety.
3. In the course of normal routines, staff shall observe all individuals in their care for signs of changes in condition, such as bruises, bumps, limping, etc.
 - a. A check must be done of proper logs for reports of an explanation of any injuries discovered.
 - b. Unexplained injuries or inadequately logged or reported responses shall be verbally reported to the residential manager/designee, program supervisor, or program Director immediately, and reported on an incident report.

Incident reports *other than* suspected Abuse, Neglect, Serious Physical Injury, Death, Sexual Abuse or Criminal Offenses involving a resident or program participant will proceed as follows:

Employees or volunteers who witness, discover, or are notified of an unusual incident as described above shall:

1. Protect, comfort and ensure treatment of the individual as necessary.
2. Verbally notify the residential manager/designee, program supervisor, or program Director immediately.
3. Report the unusual incident on an incident report form.
4. The completed form is to be placed by the reporting person in the specified area at the site as soon as possible, but in no case later than the end of the shift on which the incident occurred.
5. In incidents involving unauthorized leaves (LOA), complete additional reporting if required by the referring entity.

Remedial Action - Unusual Incident

Residential managers/designee, program supervisors, or program Directors notified of an unusual incident shall:

1. Take further action necessary to ensure treatment, comfort and protection of the individual when verbally notified.
2. If the incident involves an injury that may require further treatment, ensures that an appropriate medical clinic or emergency room (ER) provides immediate treatment.
3. Ensure that the incident report is complete and provide further information that may explain the cause of the incident, administrative action to remedy and/or prevent reoccurrence and sign.

4. Ensure that the completed incident report forms are forwarded to the supports coordinator. Retain a copy for review.

Incident reports of suspected Abuse, Neglect, Serious Physical Injury, Death, Sexual Abuse or Criminal Offense involving a person or persons served will proceed as follows:

Employees and/or volunteer shall:

1. Protect, comfort, and ensure treatment of the individual as necessary.
2. Verbally notify the residential manager/designee, program supervisor, or program Director immediately.
3. Report the unusual incident on an incident report form and place it in the area designated by the residential manager/designee, program supervisor, or program Director.
4. If the incident involves a death in a licensed home, in addition, follow policy and procedure for "Death of a Person Served".

Remedial Action- Critical Incidents

The residential manager/designee, program supervisor, or program Director shall:

1. Ensure that the incident report form is completed.
2. Make sure the RN or 911 is contacted, if needed.
3. Make sure the supports coordinator is contacted, if necessary.
4. When appropriate, reassign or suspend the suspected employee or volunteer pending further investigation.

Critical incidents shall be reported immediately to the residential manager/designee, program supervisor, or program Director and the supports coordinator. The residential manager/designee, program supervisor, or program Director will notify the CEO. A critical incident form will be completed in combination with an incident report. Director will document critical incident on the tracking form found under performance indicators folder on public.

When appropriate, required public agencies; i.e., Department of Health and Human Services for abuse or neglect, local police for adult assault, Department of Public Health for epidemic or communicable disease, shall be notified. The Office of Recipient Rights shall also be notified.

For licensed residential settings, during evenings, nights, weekends and holidays, the designated on call staff for a home is responsible for obtaining written reports that are properly dated and signed from appropriate persons relative to the incident. These reports shall be forwarded to the residential manager or program Director.

- The residential manager, program Director, and /or CEO shall cooperate with all police, licensing and recipient rights investigations.
- All staff involved shall maintain confidentiality relative to the incident with the exception of cooperating with law enforcement, licensing, or recipient rights personnel. All staff are prohibited from posting information on social media.
- In the case of a person served who has or will provide testimony, it is forbidden for other

employees to discuss the incident or testimony with the person served or other persons unless the inquiring person has been requested to make an objective investigation of the matter.

- When pressure, undue influence or reprisal is evident or threatened, any employee exerting such influence will receive appropriate disciplinary action, up to and including dismissal.
- When the incident results in media coverage, only the Pioneer Resources, Inc. CEO shall give out information to any media in regard to the incident

Debriefing

Critical incident debriefing shall be arranged for the staff involved in the incident, especially in the case of death, severe injury to a person served or staff, or suicide attempts.

1. In the case of expected death, a trained counselor, clergy or volunteer from a local hospice organization may be utilized to provide debriefing and grief counseling. This shall not be mandated, but should be offered to an individual staff member or team if the situation warrants.
2. In the instance of severe injury or unexpected death, especially due to violence, or a suicide attempt, critical incident debriefing should be arranged as soon as possible as follows:
 - a. The residential manager, program supervisor, or program Director should contact the CEO and the therapist assigned to the individual's case, if applicable. In most cases this will be a staff member of the referring agency.
 - b. The residential manager, program supervisor, or program Director, in collaboration with the CEO and/or the therapist assigned to the individual's case (if applicable) will arrange for individual or group sessions with all involved to assist in determining what occurred, what impact this has had on all those involved, what follow-up counseling or training may be required, and what might need to be changed to prevent reoccurrence.
 - c. If the therapist is not trained in critical incident debriefing, the residential manager, program supervisor, or program Director in collaboration with the therapist, shall identify an individual who is trained, e.g. the Muskegon Police Department has trained experts in this area as well as the local community mental health agency.

Completed Incident Reports will be scanned and sent to the following email addresses within one business day of the incident (immediate notification to the CEO and CCO must also be made via email, in person, or by phone):

- HealthWest: incidentreports@healthwest.net
- Pioneer Resources: reporting@pioneerresources.org

Review of Incidents

The agency will compile and review monthly and annually all the Incident Reports filed and will seek to address causes and trends in order to develop preventative measures, additional trainings, and improvement of overall services.

Effective Date: 03/29/01

Revised: 05/27/01, 02/10/21, 11/02/23

Reviewed: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/21/24

Training “No Show” Fee

To protect Pioneer Resources from fines and penalties that are the result of an individual employee’s failure to follow through on scheduled training.

Policy

It is the policy of Pioneer Resources that all employees shall attend and successfully complete both initial and update training as scheduled.

Background Information (Including Definition)

“No Show” Fee: If an employee fails to attend training conducted by HealthWest or a similar body, Pioneer Resources is charged a “No Show” fee. The current fee charged by HealthWest is \$25.00 per employee, per missed training session. Additional fees and/or different amounts may apply depending on who is providing the training.

Procedures

1. Department managers/supervisors are responsible for scheduling all employee training.
2. Department managers/supervisors are to inform employees, in writing, of all scheduled training.
3. Employees are expected to attend and successfully complete all training as scheduled.
4. “No Show” fee: employees who fail to attend scheduled training are required to reimburse Pioneer Resources for all “No Show” charges billed. If an employee was scheduled for a morning class and an afternoon class and did not show for either one, they will be charged one time each for both missed classes, so two charges total.
5. Employees must follow established call off procedure as soon as it becomes apparent that she or he will be unable to attend scheduled training.
6. Training fines may be waived for valid medical or emergency situations. The proper

- call off procedure must still be followed, and proof of emergency may be requested.
7. Fines for missed training will be paid through payroll deduction.
Managers/supervisors must have employees sign the appropriate form indicating understanding and permission for payroll deduction.
 8. Employees who miss scheduled training sessions may be subject to disciplinary action.

Effective Date: 01/01/06

Revised Date: 04/10/19, 09/26/22

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/24/24

Call Off Procedure

Purpose

To describe the format to be utilized for call-off situations.

Policy

It is the policy of Pioneer Resources, Inc. to provide clear procedures for handling staff call-offs.

Procedure

1. Contact the supervisor, manager, or designee:
 - a. Employees must personally call the supervisor, manager, or designee at least one hour before the scheduled shift, or as soon as it becomes evident that a call-off may be necessary.
 - b. If the supervisor, manager, or designee doesn't answer, leave a voice message and ask for a return call.
 - c. If unable to leave a voice message, or if you do not receive a return call within 10 minutes contact the next person on the calling hierarchy (please see your supervisor or manager for the specific calling hierarchy for your department).
 - d. You must speak directly with someone on the calling hierarchy when reporting an absence.
 - e. Using text or email to call off is not the proper procedure and should be avoided. If it is absolutely necessary to call off via text or email you may be required to provide proof of necessity, or the call off may be considered unexcused. In all cases, if you do not receive a response from the supervisor, manager, or designee you must continue reaching out per the hierarchy until you receive a response.
2. Employees in the residential and skill building programs are requested to try and find a qualified replacement staff to cover the shift they are scheduled

to work:

- a. Call part time staff first, then full time staff, if needed.
 - b. Attempt to switch shifts with a coworker if possible to help avoid overtime.
 - c. Overtime should be avoided whenever possible, and must be approved in advance by the supervisor, manager, or designee.
3. When a replacement is found, contact the supervisor, manager, or designee for approval.
 - a. In case of serious illness or emergency, contact the supervisor, manager, or designee, explain the situation, and she or he will find replacement coverage:
 - b. Employees may be asked to show proof of call off reason or verification or emergency may be required, even if the shift is covered.
 - c. Employees will be expected to submit written verification from a doctor regarding ability to resume work after three consecutive days of missed shifts.
 - d. If proof of call off is not submitted as requested, any shifts missed will be considered unexcused absences.
 4. Employee telephone numbers are maintained in the residential and skill building departments. It is the employee's responsibility to update their phone information as it changes, and to access the calling list as needed for shift coverage.
 5. Use of PTO may not be approved if proper call-off procedures are not followed.
 6. Excessive absences may be cause for disciplinary action.

Reference: Employee Relations and Attendance policy.

Effective Date: 02/02/00

Revised Date: 05/27/19, 11/01/21

Reviewed Date: 09/29/20, 09/27/21, 11/01/21, 09/26/22, 11/02/23, 10/21/24

Outside Employment (Moonlighting)

Objective

Pioneer Resources recognizes that some employees may need, or want, to hold additional jobs outside their employment with the company. Employees of Pioneer Resources, Inc. are permitted to engage in outside work or hold other jobs, subject to certain restrictions based on reasonable business concerns.

Procedures

Pioneer Resources applies this policy consistently and without discrimination to all employees,

and in compliance with all applicable employment and labor laws and regulations. The following rules for outside employment apply to all employees notifying their supervisors or Directors of their intent to engage in outside employment:

1. Work-related activities and conduct away from Pioneer Resources must not compete with, conflict with or compromise the company's interests or adversely affect job performance and the ability to fulfill all responsibilities to Pioneer Resources.
 - a. Employees are prohibited from performing any services for customers of Pioneer Resources, Inc. that are normally performed by the organization.
 - b. This prohibition also extends to the unauthorized use of any company tools or equipment and the unauthorized use or application of any company confidential information.
 - c. In addition, employees may not solicit or conduct any outside business during work time for Pioneer Resources that has not been previously authorized by the CEO.
2. Pioneer Resources' employees must carefully consider the demands that additional work activity will create before accepting outside employment.
 - a. Outside employment will not be considered an excuse for poor job performance, absenteeism, tardiness, leaving early, refusal to travel, or refusal to work overtime or different hours.
 - b. If outside work activity causes or contributes to job-related problems at Pioneer Resources, the employee will be asked to discontinue the outside employment, and the employee may be subject to the normal disciplinary procedures for dealing with the resulting job-related problem(s).
3. Employees may not use Pioneer Resources' unapproved PTO to perform work for another employer.
4. If an employee's outside employment presents a conflict of interest with Pioneer Resources, as defined in Pioneer's Code of Ethics, or if such outside employment has any potential for negative impact on Pioneer Resources, the employee will be asked to terminate the outside employment.
5. Fraudulent use of company PTO or an employee's refusal to comply with Pioneer Resources' reasonable request to terminate outside employment, may result in immediate termination of employment with Pioneer Resources.
6. Employees who have secondary, or seek secondary employment, must fill out the Second Job (Moonlighting) Disclosure Form and have it evaluated by their Supervisor and/or department Director.

Effective Date: 05/04/20

Revised Date:

Reviewed Date: 09/22/20, 08/23/21, 09/23/22, 10/30/23, 10/24/24

Smoke Free Environment

Purpose

To establish rules governing smoking by residents, program participants, staff and visitors.

Policy

It is the policy of Pioneer Resources that persons served, staff and visitors shall not be subjected to secondhand smoke and that smoking shall occur only as outlined below.

Background Information (Including Definition)

The definition of smoking for the purpose of this policy is the burning of a lighted cigar, cigarette, pipe, or any other matter or substance that contains a tobacco product or emits a vapor.

Procedures

- Smoking is not allowed inside any agency operated residence, program site, office building, or any other building owned, occupied or rented by the agency, including inside of garages.
- Smoking is not allowed in any Pioneer Resources' vehicles; vehicle refers to buses, vans, automobiles, and light duty trucks (pickups) owned or leased by Pioneer Resources, Inc. for official business.
- Smoking is not allowed in staff's personal vehicles while on duty and transporting persons served.
- With the exception of residential sites, Pioneer Resources' properties are smoke free and smoking is not allowed on the grounds.
- Residential staff must remain close to the home in case of emergency, so they are unable to leave the premises to smoke; smoking is allowed only in the designated area outside of the home.
- Employees with smoking or vaping materials in their possession must keep these locked at all times while on company property, at residential homes or at program sites.
- Smoking by Pioneer Resources' employees is to be done only while on a designated break.
- Employees of Pioneer Resources, Inc. are not to smoke with, or around, program participants.
- Those employees who are smoking are expected to be courteous regarding secondhand smoke and not smoke in the vicinity of non-smokers.
- Doorways and open windows must remain free from smoke.
- Ashtrays and other smoking paraphernalia may not be utilized or stored within agency operated residences and garages, program sites, or office buildings unless designated

by the agency.

- All smoking materials must be safely extinguished in approved receptacles.
- Persons served by the agency wishing to smoke should consult with their physician and clinical team prior to smoking; should it be determined by a physician and/or the clinical team that an individual is incapable of safely keeping matches, lighters and smoking materials, this individual will require direct staff observation or assistance while smoking.
- Anyone finding someone smoking inside must ask the person to immediately extinguish the cigarette, cigar, pipe or other smoking paraphernalia, and inform the individual that they are in violation of state law and subject to penalties.
- Any visitor refusing to smoke in the designated area will be asked to leave the premises.

References: Act 188 – Smoking Ban in Public Places, Workplaces and Food Service Establishments Effective May 1, 2010.

Effective: 07/28/04

Revised: 02/11/19

Reviewed: 02/11/19, 09/23/20, 09/7/21, 09/29/22, 10/30/23, 10/24/24

Agency Vehicles and Transportation Persons Served

Purpose

This policy defines acceptable drivers, conditions of use of Pioneer Resources, Inc. agency vehicles and/or personal vehicles being used for work; and practices and safety procedures relative to the transport of persons served by employees of the agency.

Policy

It is the intent of Pioneer Resources, Inc. to ensure that all company business requiring use of a vehicle, occurs in a vehicle which is in safe operating condition, properly licensed and insured; and that all employees obey all of the safety laws and regulations of any state in which they operate.

Background Information (Including Definition)

1. Pioneer Resources encourages use of agency owned and insured vehicles for agency business whenever possible.
2. *Vehicle* refers to buses, vans, automobiles, and light duty trucks owned or leased by

Pioneer Resources for official business.

3. Personally owned vehicle means a motor vehicle owned by an agency employee, which has been authorized for use on Pioneer Resources' business.
4. Agency vehicle use is limited to transportation and errands that are work related, Pioneer Resources owned vehicles are not to be used for personal business.
5. Driver exclusion: drivers excluded by Pioneer's commercial insurer(s), or those who have been deemed "unacceptable" to drive an agency vehicle or personal vehicle on agency business, are prohibited from any driving on company time and will be required to provide Pioneer Resources with a written confirmation that they will not drive.
6. Prohibited conduct: conduct which impairs an individual's ability to safely operate a motor vehicle.
7. Motor Vehicle Record (MVR): motor vehicle driving report obtained from the State of Michigan.

Eligibility

Motor Vehicle Records: If an employee drives on company time for any reason, Pioneer Resources will obtain and review a copy of the employee's motor vehicle record (MVR) for acceptability upon hire, annually and whenever MVR activity takes place. Pioneer Resources' commercial insurer provider also reviews employee driving records for acceptability. Employee's will be provided with a copy of the motor vehicle report if any adverse action is being considered because of his or her driving record.

Acceptable Driver Criteria

1. Must have and maintain a valid Michigan's driver license with less than six (6) points.
2. Must have three (3) or more years of licensed driving experience.

Unacceptable Driver Criteria

Employees deemed "unacceptable" are excluded from driving any agency vehicle, or a personal vehicle on agency business, when the MVR has any of the following during the most recent three-year period:

1. Driver's license that is suspended by the Secretary of State or a court of law.
2. Six (6) points on a published motor vehicle report unless approved by the Employer's motor vehicle insurer.
3. Speeding 25 MPH or more above the speed limit; or reckless driving, three or more moving violations and/or two or more at-fault accidents; hit and run or leaving the scene of an accident; DWI, DUI or other drug offense.

Agency Vehicles

When an Agency employee, in conjunction with normal duties on the job, is required to transport a passenger or perform an errand that requires driving, the employee should:

1. Request the use of vehicles owned or leased and insured by the agency from their supervisor, following the proper vehicle sign-out protocols.
2. Complete a daily pre-trip inspection of the assigned vehicle and report any deficiencies or concerns to their supervisor immediately.
3. Ensure that any assigned vehicles are clean and in good working order. It is the responsibility of each vehicle operator to ensure that the vehicle's interior is clean when returning it.
4. Acquaint themselves with the instrument panel of the vehicle and monitor these instruments while driving.
5. Complete a daily travel log with the following information:
 - a. Date
 - b. Starting odometer reading
 - c. Destination
 - d. Finishing odometer reading
 - e. Passenger count
 - f. Printed name and signature/initials of the driver

Anyone operating an agency vehicle is required to have a mobile device in the vehicle in case of emergency.

Records

1. Completed vehicle log pages will be removed and forwarded to the Administration office to compile mileage for tax rebates and DOT reporting.
2. If the vehicle is equipped with an electronic tablet to record information, follow the protocols for the tablet.

Use of Vehicles

1. Approval by the supervisor or Director must be obtained prior to anyone other than Pioneer Resources' employees and residents or participants riding in an agency vehicle.
2. Ensure the vehicle carries only the number of passengers that can be safely seated.
3. Ensure individuals transported have a safe and orderly ride, through enforcement of agency safety rules.
4. Operator and passengers must wear safety belts and shoulder harnesses whenever traveling in agency vehicles.
5. Maintain safe and courteous driving habits at all times, obey all Michigan safety laws and regulations, and adhere to all traffic laws and rules of the road.
6. Vehicles should not be driven over off-road terrain or on narrow trails where damage may occur.

7. Parking of a Pioneer Resources' vehicle at the driver's home must be approved by the CEO and requires a signed agreement reflecting the employee's understanding of the conditions set forth in this section. The determination of which vehicles may be parked at the driver's residence will be based solely upon the issue of efficiency and not on driver convenience.
8. All doors will be locked and windows closed whenever a vehicle is left unattended.

Prohibited Activity

Pioneer Resources **prohibits** the following activity while operating a motor vehicle owned or leased by the Employer or a personal motor vehicle on company time:

1. Non-business use of agency vehicles.
2. Doing any other activity while driving (such as eating, drinking, applying make-up, using cell phone, or wearing ear buds, etc.).
3. Use of cell phones while driving vehicles.
4. Reckless or careless driving of any sort.
5. Driving under the influence of any alcohol or drug, except prescription drugs which do not impair an individual's ability to operate a motor vehicle.
6. Relatives or friends who are not employees or contractors of Pioneer Resources may not ride in agency owned vehicles without approval from the CEO.
7. Using a vehicle for an illegal purpose.

Note: In the event of an emergency, Pioneer Resources encourages employees to use their personal device if there is a need to call the police, fire department, or for a medical emergency.

Personal Vehicles

1. Employees who wish to use their personal vehicle for work-related purposes must furnish their supervisor a copy of their most recent registration and the insurance certificate showing the minimum liability coverage amount of \$100,000 and effective date. The supervisor will turn the documents into the Human Resources department for retention.
2. Staff members must have approval from their supervisor to transport persons served in their personal vehicles. The vehicles will be required to meet safety standards and the employee must provide insurance certification as noted in item one above prior to transporting person served.
3. An employee may use his or her own automobile and receive reimbursement for the mileage associated with the pre-approved work task. Pioneer Resources will furnish the employee a reimbursement log.

4. Pioneer Resources, Inc. reserves the right to inspect vehicles as needed to ensure safety.

Rental Vehicles

It may become necessary to rent a vehicle for use while on company business. If this is the case, the Employee will be required to obey all rules and regulations of the rental contract and rental company.

Accidents

1. The operator is responsible to report any accident or moving violations which occur to the supervisor or Director immediately; and complete and turn-in the Vehicle Accident Report and the Employee Accident/Injury/Incident Report the same day, or no later than 24 hours.
2. Accidents incurred on personal time or in non-agency vehicles must be verbally reported prior to the start of the next shift and in writing immediately thereafter.
3. If the Employee rents a vehicle in his or her own name and an accident occurs, the rental company may look to the Employee for reimbursement of property damage to its vehicle and its loss of profits while the vehicle is being repaired. The Employer will not indemnify the Employee in this situation, so it is the Employee's obligation to purchase the collision damage waiver and otherwise protect him/herself.

Violations of Policy

1. Policy violations may result in disciplinary actions up to and including termination.
2. Employees are required to report any violation of this policy of which they are aware, by anyone, to their supervisor verbally and thereafter in writing.

Statement of Driving Responsibility

1. As an employee, I understand that I will be required to drive the Pioneer Resources' vehicles while on duty or may need to use my own vehicle to conduct business for the agency.
2. I understand I must maintain a current, valid Michigan driver's license and that I must maintain a safe driving record, with less than six (6) points on my Michigan MVR for satisfactory job performance.
3. I hereby consent to allowing Pioneer Resources to verify this statement through obtaining a copy of my MVR to be used for an employment purpose not prohibited by law. I hereby release Pioneer Resources from all liability that may result from obtaining this information.
4. I understand that determination of safe driving will include annual or periodic reviews of my Master Driving Record on file with the Michigan Department of State or other states.

5. I agree to advise Pioneer Resources of any traffic citations or convictions including alcohol related motor vehicle convictions to which I am found guilty or plead responsible or guilty.

References: Vehicle Request / Sign-out Log, Mileage Reimbursement Log, Vehicle Accident Procedures, Vehicle Accident Report, and Employee Accident/Injury/Incident Report.

Effective Date: 05/24/2011

Revised Date: 08/24/2020

Reviewed Date: 09/29/2020, 09/18/21, 09/27/22, 10/18/23, 10/25/24

Vehicle Accident Procedures

Purpose

The purpose of this policy is to establish procedures to deal with traffic accidents involving Pioneer Resources, Inc. agency vehicles and/or personal vehicles.

Policy

Pioneer Resources requires all employees to obey all of the safety laws and regulations of any state in which they operate a vehicle; and to take precautions to protect passengers, employees and the public from harm in the event of an accident involving a vehicle.

Background Information and Definition

Vehicle refers to any motor vehicle including buses, vans, automobiles or light duty trucks owned or leased by Pioneer Resources for official business. Personal vehicles used by employees for official business are also included.

Accident Procedures

1. Pull off the road (if possible), turn off the ignition, remove key and activate hazard lights.
2. If it is a serious accident, evacuate all passengers by whatever means possible and move them at least 100 feet from the vehicle.
3. Call 911.
4. Check all passengers for injuries; administer first-aid and/or CPR (if you are qualified).
5. At least one staff member must remain with passengers at all times.

All Accidents

1. Contact your Supervisor or Director. Let them know if the vehicle is drivable, if it needs

to be towed and will a back-up vehicle be needed to transport passengers involved.

2. When circumstances allow, collect, and write down basic information about the accident on the Pioneer Resources' [Motor Vehicle Accident Report Form](#), which includes the following steps:
 - a. Take pictures of the vehicles involved
 - b. Record the names and addresses of other drivers, including: driver license number, auto insurance company and vehicle license number
 - c. Record damage done to the vehicle and/or property
 - d. Record the name, address and phone number of witnesses
 - e. Record the name, address and phone number of all passengers
 - f. Describe accident in detail, including location, weather and road conditions
3. Supervisors will follow **FTA Post Accident Test Criteria** for all drivers and complete the FTA Post Accident Decision Making form (located p:/Supervisor Resources/Post Accident FTA Guidelines). The form will determine whether or not this is an FTA defined accident and if any drug and/or alcohol testing is required.
4. If the accident is defined as an FTA accident, drivers must be taken by their supervisor or Director for post-accident drug (32 hours for drugs) and alcohol (2-8 hours for alcohol) testing within FTA time frames, if **ANY** of the following conditions occur:
 - a. If there is a fatality.
 - b. If any vehicle involved must be towed away from the scene.
 - c. If our public transit vehicle must be taken out of service.
 - d. If medical attention is required on or away from the scene of the accident above and beyond simple first aid immediately following the accident.
5. The completed Motor Vehicle Accident Report Form should be submitted to your Supervisor, Director or the CEO within eight (8) hours. All documentation related to the accident (police report, passenger list, etc.) should also be submitted.
6. Staff on-board the vehicle when the accident occurred must complete an Employee Accident, Injury, Incident Report within eight (8) hours. The report is required even if there is no apparent injury to the employee.
7. The Supervisor will submit the Motor Vehicle Accident Report Form to the Director of Business within 24 hours.
8. The Director of Business and Fleet Manager will review the accident, inform the insurance carrier, and handle the claims process.
9. The Director of Business will email to the Human Resources department within 48 hours of the incident:
 - a. The completed motor vehicle accident report form.
 - b. The completed employee accident, injury, incident report.
 - c. A copy of any applicable disciplinary action.

10. Complete an Incident Report for each resident and or participant of services present during the accident and submit to your Supervisor or Director. No matter how minor an accident may seem, if a resident or participant is in the vehicle when an accident occurs the following people must be contacted by the Supervisor or Director:
 - a. On-Call Registered Nurse, if applicable.
 - b. Supports Coordinator / social worker connected to the individual at the agency they are referred by.
 - c. Guardian or designated emergency contact.
11. A copy of the police report will be obtained by the Director.
12. Accident procedures shall be reviewed annually with all drivers.

References: Employee Accident, Injury, and Incident Report, Health West Incident Report, Motor Vehicle Accident Report, and FTA Post Accident Test Criteria.

Effective Date: 03/29/01

Revised Date: 04/19/19, 9/28/21, 10/24/24

Reviewed Date: 09/29/20, 9/28/21, 9/28/22, 10/18/23, 10/24/24

Use of Technology

Purpose

To establish the guidelines for our employees use of technology (Personal owned devices and or company owned devices).

Policy

We recognize that mobile devices (phones, tablets, laptops) have become an integral part of everyday life. They may be a great asset if used correctly for productivity through apps, calendars, business programs, calls, etc. Technology may also cause problems when used imprudently or excessively. Employees using these items for personal use could result in damage or loss to these items. This policy explains what happens in the event a Pioneer Resources owned device sustains damage or is lost.

Definitions and Background Information

Cell Phone: Pioneer Resources provides cell phones to staff that can be used for both personal and professional use. Employees who are assigned an agency phone are required to utilize this phone for all work related calls/ texts.

Laptop: Pioneer Resources provides laptop computers to staff that can be used for both personal and professional use.

Tablet: Pioneer Resources provides tablets to staff that can be used for both personal and professional use

Broken: A device is classified as broken when it can no longer function in the capacity needed for an employee's job to be completed or when its appearance does not represent Pioneer Resources in a professional manner.

Lost: A device is classified as lost if the employee who was in possession of the device can no longer locate it.

Procedures

Employees may not access company information, emails or files on any device which is not owned by the agency, without prior, and specific, permission from the CEO.

Despite their benefits, technology may cause problems in the workplace. Pioneer Resources expects our employees to:

1. Use their technology prudently during working hours.
2. Turn off, or place on silent or vibrate, technology devices when instructed to do so by a supervisor, when in meetings or trainings, or when in program service.

How to Properly Use Technology Devices in the Workplace

The use of cell phones, tablets and laptops may benefit employees and the organization in allowing employees to be more efficient in their work.

1. Employees can use their personal phones, tablets during breaks or at lunch hour and while in a stationary vehicle, if no individuals receiving services are present.
2. Employees may use personal cell phones while at work on an infrequent basis. If an employee's use of a personal cell phone causes disruptions or loss in productivity, the employee may become subject to disciplinary action.
3. In the event of an emergency situation, Pioneer Resources encourages employees to use their personal device if there is a need to call the police, fire department, or for a medical emergency.
4. HIPAA related communication is only permitted on agency owned devices if appropriate consent forms are in place and utilizing encryption when sending outside the agency.

Non-Negotiable Prohibited Use

Pioneer Resources, Inc. considers the following items **nonnegotiable** and will not be tolerated:

1. Employees will not use electronic devices when their attention and focus should be on an individual receiving services, or the tasks of their position.
2. Use their devices' camera or microphone to record confidential information.

3. Use their devices to conduct any live video feed via phone calls, social media or to use their devices' camera or microphone to record conversations or meetings without the other participant(s)'s knowledge. Michigan laws require all parties to the conversation to consent to being taped.
4. Use their phones in areas where phone use is explicitly prohibited (e.g. hospitals, doctor's offices, etc.)
5. Use their devices for any reason while driving a company vehicle.
6. Use of agency email on a device that is not agency owned as this is a risk for privacy information to be unprotected unless specifically approved by the CEO.
7. Prohibited communications while at work and or at any time on an agency owned device include:
 - a. Discriminatory or harassing messages
 - b. Obscene, sexually explicit or pornographic
 - c. Derogatory statements of any group or individuals
 - d. Defamatory or threatening statements
8. Sending of any communication or photos of individuals receiving services related HIPAA information (name, address, photo, any other personal info) from a non-agency owned device is prohibited. Download, upload or view inappropriate, illegal, or obscene material.
9. Sharing of company passwords systems or accounts and or access to information not authorized for use.
10. Downloading of programs and or software not authorized by agency
11. The sending of HIPAA information via email to outside agencies without encryption.
12. The willful introduction of computer viruses or other disruptive/ destructive programs into the organization's network or into external networks.
13. Use of company email for solicitation of personal means
14. Messages or information placed on online sites or forums that reflect poorly on Pioneer Resources

Damaged/Lost Devices

1. If your phone is broken:
 - Pioneer Resources will deduct up to \$150 from your pay to cover the cost to repair/replace your device. Pioneer Resources does reserve the right to reduce or waive this fee depending on the reason the device is broken.
2. If you lose your phone:
 - Pioneer Resources will deduct up to \$250 from your pay to cover the cost of replacing your device. Pioneer Resources does reserve the right to reduce or waive this fee depending on the reason the device is lost

3. If your laptop is broken:
 - Pioneer Resources will deduct up to \$250 from your pay to cover the cost to repair/replace your device. Pioneer Resources does reserve the right to reduce or waive this fee depending on the reason the device is broken.
4. If you lose your laptop:
 - Pioneer Resources will deduct up to \$500 from your pay to cover the cost of replacing your device. Pioneer Resources does reserve the right to reduce or waive this fee depending on the reason the device is lost.
5. If your tablet is broken:
 - Pioneer Resources will deduct up to \$200 from your pay to cover the cost to repair/replace your device. Pioneer Resources does reserve the right to reduce or waive this fee depending on the reason the device is broken.
6. If you lose your tablet:
 - Pioneer Resources will deduct up to \$400 from your pay to cover the cost to replace your device. Pioneer Resources does reserve the right to reduce or waive this fee depending on the reason the device is lost.
7. Accessories:
 - If accessories such as, but not limited to, chargers, USB cable, keyboard, mouse etc. are not returned when an employee turns in their devices, Pioneer Resources does reserve the right to withdraw up to \$10 per item not returned from the employee's last paycheck.

Note: The fee that would be deducted in any of the above situations would not be more than the cost Pioneer Resources pays to fix/replace your device.

Violations

Any employee who abuses the privilege of their access to email, internet, messaging, or damages/loses their agency owned devices, will be subject to corrective action, including possible termination of employment, legal action, and criminal liability.

User Agreement of Company Owned Technology

Pioneer Resources provides technology items such as tablets, phones and or laptops to staff in certain programs for the purpose of collecting documentation about services provided.

1. Staff will be trained on how to correctly use the device.
2. Staff are responsible for taking proper care of the device and always keeping it secure.
3. Staff will be held financially responsible for lost or stolen devices

Tablet Use

Staff utilizing tablets for Therap, or any other company record system for company documentation use are to use this device for work purposes only and only during work hours.

The Agency is charged additional fees when tablets exceed the contracted data plan.

1. Staff will ensure the tablet is connected to WIFI in order to connect to the internet. This will stop the device from going over plan limits and incurring additional data expenses.
2. Overage charges that are gained on the device due to personal use will be the responsibility of the employee.

Disciplinary Consequences

The Agency retains the right to monitor employees for excessive or inappropriate use of their technology devices. If an employee's device usage causes a decline in productivity or interferes with operations, the Supervisor will work with the employee to create a usage plan. Employees may face severe disciplinary action up to and including termination, in cases when they:

1. Disregard the Non-Negotiable items in the *Non-Negotiable Prohibited Use* section above or verbal or written direction of their supervisor.
2. Violate company confidentiality policy
3. Cause an accident by recklessly using their mobile devices
4. Use a personal device to obtain company related information

References: Organizational Code of Ethics, and Privacy of Persons Served.

Effective: 07/01/19

Revised: 09/23/20

Reviewed: 09/7/21, 04/20/22, 09/22/22, 10/16/23, 10/21/24

Abuse or Molestation

Purpose

Pioneer Resources, Inc. provides procedures for employees, volunteers, board members, individuals receiving services or any other victims of abuse, sexual abuse, molestation or misconduct to report such acts.

Policy

Pioneer Resources does not permit actual or threatened acts of physical or mental abuse, sexual abuse, sexual molestation, or sexual misconduct ("prohibited conduct") to occur in the workplace or at any activity sponsored by or related to it. In order to make this "zero—tolerance" policy clear to all employees, volunteers, individuals receiving services and staff

members, we have adopted mandatory procedures that employees, volunteers, individuals receiving services, family members, board members, and victims must follow when they reasonably suspect, learn of, or witness prohibited conduct.

Abuse or molestation means each, every, and all actual, threatened, or alleged acts of physical or mental abuse, sexual abuse, sexual molestation or sexual misconduct performed by one person or by two or more persons acting together.

Unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct or communication constitute harassment when:

1. Submission to the conduct or communication is made a condition of employment;
2. Submission to or rejection of the conduct or communication by an individual is used as factor in an employment decision affecting the employee; or
3. The conduct or communication has the purpose or effect of substantially interfering with an individual's employment or creating an intimidating, hostile or offensive work environment.

Reporting Procedure

Any employee, volunteer, individual receiving services, family member, board member, or member of the community who learns of, or has a reasonable suspicion of prohibited conduct must immediately report it to their supervisor and or contact Pioneer Resources at 231-773-5355 to report this. All reports will be provided directly to the CEO.

If the victim is a vulnerable adult; abuse, or neglect will be reported by this designee to the local or state police and/or Adult Protective Services (APS) Agency. If a child is the victim of abuse or neglect the designee will report it to the local or state police and/or Child Abuse Agency. Appropriate family members of the victim must be notified immediately of suspected child abuse or neglect.

Investigation & Follow Up

Pioneer Resources will take allegations of prohibited conduct seriously. Once an allegation is reported we will promptly, thoroughly, and impartially initiate an investigation to determine whether there is a reasonable basis to believe that the prohibited conduct has occurred and that it was committed by the target(s) of the investigation. The investigation may be undertaken by an internal team comprised of fellow employees or we may hire an independent third party. We will cooperate fully with any investigation conducted by law enforcement or regulatory agencies, and we may refer the complaint and the result of our investigation to those agencies. We reserve the right to place the target(s) of the investigation on an involuntary leave of absence or reassigning that person to responsibilities that do not involve personal contact with individuals or clients. To the fullest extent possible, but consistent with our legal obligation to report suspected prohibited conduct to appropriate authorities, we will endeavor to keep the identity (ies) of the target(s) and the alleged victim(s) confidential.

If the investigation substantiates the allegation, our policy provides for disciplinary penalties, including but not limited to termination of the target's relationship with our organization.

Retaliation Prohibited

We prohibit retaliation against anyone, including an employee, volunteer, board member, student or individual, who in good faith reports prohibited conduct. Retaliation against a participant in the investigation is also prohibited.

Anyone who retaliates against someone who has made a good faith allegation of prohibited conduct or intentionally provides false information to that effect will be subject to discipline, up to and including termination.

Annual Review

This information is to be reviewed annually by all Pioneer Resources employees.

Effective Date: 08/01/17

Reviewed Date: 09/17/19, 09/03/20, 09/07/21, 09/23/22, 11/02/23, 10/21/24

Drug Free Workplace

Purpose

To provide direction to the agency with respect to dealing with the use, sale or possession of drugs or controlled substances in the work place.

Policy

It is the policy of Pioneer Resources, Inc. to maintain a safe and healthy work environment free of drug and alcohol abuse. The agency reserves the right to:

1. Request that an employee undergo drug/alcohol testing at any given time to ensure compliance with federal regulations.
2. The agency reserves the right to terminate any employee who engages in the use, sale, or possession of alcohol, legal or illegal drugs while on the job or on company property.
3. Pioneer Resources regards substance abuse as a disease which disrupts family and social life, as well as productivity and safety in the work place, and shall endeavor steps including education, referral for testing or treatment, and investigation and discipline as circumstances warrant.

Background Information (Including Definition)

1. Alcohol consumption is forbidden on Pioneer Resources' property and no drugs other than those issued under a doctor's prescription, or those sold "over the counter," shall be utilized on Pioneer Resources' property; employees who report for work while intoxicated or under the influence of un-prescribed legal or illegal substances will be subject to disciplinary action.
2. Reasonable Suspicion - the following are the *primary* types of behavior which may result in a decision to request that an employee undergo drug/alcohol testing:
 - Motor instability or staggered gait
 - Flushing of skin
 - Alcohol odor
 - Marijuana, or other controlled drug, odor
 - Dilated pupils or bloodshot eyes
 - Drowsiness or stupor
 - Unusually loud or aggressive talking
 - Incoherent or slurred speech
 - Unexplained accidents
 - Personal admission that they will fail testing and/or have violated this policy

Note: Pioneer Resources, Inc. reserves the right to utilize other indicators as a reason to request that an employee undergo drug/alcohol testing, in accordance with Reasonable Suspicion training guidelines.

Procedures

1. An employee who is taking a drug or other medication, whether or not prescribed by a physician, which is known or advertised as affecting or impairing judgment, coordination, or other senses, must notify his or her supervisor, the department head or the Director of Human Resources prior to commencing work.
 - a. Information supplied by an employee relative to the use of drugs or medications will be treated in a confidential manner.
 - b. The supervisor or administrator may require the employee to take a leave of absence or comply with other remedies if it is determined that use of the substance will affect the employee's ability to perform their work in a safe manner.
2. The unlawful manufacturing, distribution, dispensing, possession, or use of a controlled substance is prohibited at all Pioneer Resources facilities/work sites; violation of this will result in separation of employment.
3. An employee who observes another employee displaying erratic behavior which any reasonable person may attribute to the use of drugs or alcohol, should report the behavior to the immediate supervisor of the individual displaying the erratic behavior; in the absence of the immediate supervisor, the report should be made to the department

head or Director of Human Resources.

4. The supervisor or administrator who is notified shall observe the employee, complete an observation form ([Reasonable Suspicion Checklist](#)), and determine if there is reasonable cause to take the employee for drug testing.
5. If there is reasonable cause to suspect a violation of policy, the supervisor or administrator shall confront the employee in the presence of another supervisor/manager if available, and in a confidential setting. The decision to confront any employee should be based upon more than one sign of erratic behavior. The employee shall be asked to provide an explanation for the observed behavior.
6. If there is reasonable cause to believe the employee is under the influence of alcohol or an illegal drug, the employee:
 - a. Shall be referred for testing to Workplace Health clinic or another clinic designated by administration.
 - b. Shall not be permitted to continue working, nor shall the employee be allowed to drive a vehicle. If necessary, the employee's supervisor or an administrator shall transport the employee to the clinic.
 - c. Shall be suspended from work without pay until the results of testing are available; employees who test negative shall be made whole for lost wages.
7. Refusal of testing shall be treated the same as a positive determination.
8. The agency supports confirmation of all positive tests; confirmation shall be coordinated with the Workplace Health clinic or other designated clinic and recognized laboratory.
9. Employees who test positive for alcohol, but whose blood level is below that which is considered legally impaired in Michigan shall be suspended without pay for the remainder of their shift and may be subject to disciplinary action up to and including separation.
10. The agency reserves the right to require testing of any employee driving a company vehicle who is involved in an accident involving substantial property damage, an injury demanding immediate medical treatment other than first aid at the site, or a fatality; in such instances, the driver shall be transported to the testing clinic by a supervisor, administrator, another employee designated by the supervisor or administrator, or a law enforcement officer.
11. An employee may use accumulated PTO, or apply for a Leave of Absence, to participate in a substance abuse treatment program.
12. The agency is not liable for the cost of a treatment program, but will attempt to coordinate payment for substance abuse treatment programs with the agency's provider of health insurance for covered employees as available.
13. Upon request, the CEO of the agency and/or The Director of Human Resources will

assist employees with referrals to available substance abuse treatment programs or the agency Employee Assistance Program.

14. All drug testing information relating to individuals, and observation reports should be treated confidentially by individuals authorized to review records.
15. An exception to the no alcohol on premises rule may be granted by the CEO or board president for special events or fundraisers held on agency property and during which employees are not responsible for the care or supervision of persons supported by Pioneer Resources.
16. Employees are required to notify Pioneer Resources within five calendar days if he or she is convicted of a violation of a criminal drug statute which occurred in the workplace; failure to do so will lead to disciplinary action up to and including separation.

Training

All Supervisors, Managers, Directors or other personnel providing direct supervision of an employee who is deemed as holding a Safety Sensitive position with Pioneer Resources, will be required to take Reasonable Suspicion Training. Training to refresh knowledge is recommended at least once every two years. Free training can be taken through the National RTAP educational library at: <https://elearning.nationalrtap.org/User-Login?returnurl=%2f>.

References: MDOT Regulations, and Reasonable Suspicion Checklist.

Effective Date: 05/24/11

Revised Date: 11/29/19, 04/8/22, 10/30/23, 10/24/24

Reviewed Date: 09/3/20, 08/31/21, 09/27/22, 10/30/23, 10/24/24

Zero Tolerance Policy - Marijuana

On November 6, 2018, Michigan voters approved the Michigan Regulation and Taxation of Marijuana Act, legalizing the recreational use and possession of marijuana for persons aged 21 and older. Despite the recent changes in the state of Michigan, marijuana remains illegal under federal law. Because of the vulnerable population Pioneer Resources serves, as well as the important care Pioneer provides to the community, our drug policy remains to be **zero tolerance**.

This notice is intended to remind employees of the agency's **zero tolerance policy**.

Specifically:

1. The Act does not change federal law, which still prohibits use, possession, cultivation

and delivery of marijuana, or federal regulations such as the Department of Transportation's (DOTs) guidelines required for all agency drivers, or Center for Medicare/Medicaid Services (CMS) conditions of participation.

2. The Act does not require an employer to permit or accommodate marijuana in the workplace.
3. The Act does not prohibit an employer from disciplining an employee for violating a workplace drug policy; in other words, an employer may continue to test and may refuse to hire, may discharge or otherwise discipline an employee who violates a workplace policy.
4. The Act does not permit an employee to report to work while under the influence of marijuana or any substance.
5. The Act does not permit a person to consume marijuana in a public place or smoke marijuana where prohibited by the owner, occupier or director of the property/site.

The existing **zero tolerance** drug and alcohol testing policy that Pioneer Resources currently utilizes remains in full force and effect. This policy can be found in the Pioneer Resources' Policy and Procedure Manual. Should you have any questions regarding this policy or its administration, please contact the Human Resource department.

Effective: 11/16/18

Revised: 05/23/20, 10/30/23

Reviewed: 09/3/20, 08/31/21, 09/27/22, 10/30/23, 10/24/24

Federal Deficit Reduction Act (DRA) of 2005

Background and Definitions

What is the Deficit Reduction Act of 2005 ("DRA")?

On February 8, 2006, President Bush signed the Deficit Reduction Act of 2005 (the "DRA"). The DRA is legislation addressing deficit reductions ranging from education to housing and Medicare to Medicaid. It imposes mandatory compliance obligations on any entity that receives annual Medicaid payments of at least \$5 million under a state Medicaid plan.

What are the compliance obligations of the Deficit Reduction Act of 2005 ("DRA")?

Any entity that annually receives at least \$5 million in Medicaid payments ("Qualifying Entity") is required to establish written policies and procedures about federal and state false claims

laws and whistleblower protections. In addition, the DRA requires Qualifying Entities to include these policies and procedures in their employee handbooks. Qualifying failure to comply with these requirements may render a Qualifying Entity ineligible to receive Medicaid payments. In addition to forfeiting Medicaid payments, any Qualifying Entity that knowingly violates the education requirements or is in non-compliance with the requirements may be penalized for submitting false claims under the federal False Claims Act.

What is the False Claims Act?

The False Claims Act prohibits any person from knowingly presenting, or causing to be presented, a false or fraudulent claim for payment or approval of government funds. Under the federal False Claims Act, any person who knowingly submits a false or fraudulent claim to a state Medicaid program is liable to the federal government for three times the amount of the federal government's damages plus penalties of \$5,000 to \$10,000 per false or fraudulent claim.

Compliance

What are the DRA Education Requirements?

As a condition of receiving Medicaid payments, Qualifying Entities must establish written policies and procedures that provide detailed information to all employees, contractors, and agents regarding:

1. The federal False Claims Act;
2. Administrative remedies for false claims and statements;
3. Any state laws pertaining to civil or criminal penalties for false claims and statements; and the whistleblower protections under such laws.

How does Pioneer Resources policies comply with the DRA education requirements?

Pioneer Resources Inc. has written policies that include specific details regarding policies/procedures for detecting and preventing fraud, waste, and abuse. The policies incorporate requirements under State of Michigan law. Pioneer Resources' Employee Code of Conduct has been updated with DRA information and includes references covering the laws described above, the rights of employees to be protected as whistleblowers, and the training required for employees on detecting fraud, waste, and abuse. For more information on the UC Whistleblower policies visit: Information on reporting in Michigan can be found here:

<https://audgen.michigan.gov/report-fraud/>

Reporting

Employees can complete and submit a State claim here:

[Fraud/Waste/Abuse Allegation Form](#), which will result in your allegation being e-mailed to our Fraud/Waste/Abuse Hotline staff. Once received, the information on the form will be handled in the most confidential manner allowed by law.

Those who report such suspected violations may remain anonymous and are protected from retaliation by both Federal & State law as well as Pioneer Resources corporate compliance policies.

What do I need to do? What types of activities should be reported?

If you suspect instances of fraud, submission of false medical billing claims or other non-compliance with federal, state, local laws, regulations or Pioneer Resources policies, you should report it. Any activity by a Pioneer Resources employee that violates any state or federal law or regulation (e.g., corruption, malfeasance, bribery, theft or misuse of government property, fraud, coercion, or conversation); or wastes money, or involves gross misconduct, gross incompetence, or gross inefficiency can be reported.

What are examples of a false claim?

Under the federal False Claims Act (FAC), the federal government prosecutes, criminally or civilly, individuals or entities who submit or cause to be submitted, claims for payment by the government, when the claims are false. In the healthcare industry, this includes Medicare, Medicaid and other federal healthcare programs. Examples that may create a false claim include but are not limited to: billing twice for the same service; billing for services not rendered; billing for medically unnecessary services or falsifying certificates of medical necessity; unbundling or billing separately for services that should be billed as one; creating false medical records or treatment plans to increase payments; failing to report and refund overpayments or credit balances; physician billing for services rendered by medical students, interns, residents or fellows in teaching hospitals; and giving and/or receiving unlawful inducements to healthcare providers for referrals for services.

FCA whistleblowers (or relators as they are referred to in the law) must be original sources of the allegations, thus they cannot use published accounts of fraud allegations or information that has already come to the attention of the government.

FCA whistleblowers are protected by the law from retaliation in any form as the result of their whistle blowing. These protections include reinstatement without loss of seniority if fired, recovery of two times lost wages plus interest and recovery of attorney fees and other reasonable costs in connection with pursuing a retaliation claim.

Prevention

What can Pioneer Resources do to prevent false claims?

Pioneer Resources has Directors of service areas. They are charged with operation oversight and compliance to the FCA. They are charged with reviewing and validating services of employees within their departments. Training of employees on all policies relating to reporting abuse, neglect, fraud and waste is completed upon hire and policies are reviewed yearly. Pioneer Resources has a Corporate Compliance Officer (CCO) who responds to all reports and who is charged with establishing a culture of compliance with all laws and regulations that affect the operations of Pioneer Resources.

Pioneer Resources Compliance officer can be reach at 231-773-5355.

The CCO also investigates all reports of compliance violations and takes corrective action, if violations are found. The Director of Finance reviews and ensures that billing of payors is done properly. Monthly review of billing is completed by Director of Programs along with the Finance department to ensure accuracy and to ensure that claims are properly documented, coded and submitted as required by the government and private payors.

Effective: 09/09/21

Revised:

Reviewed: 09/23/22, 11/17/23, 10/21/24

Artificial Intelligence (AI)

Purpose

Pioneer Resources recognizes the importance of Artificial Intelligence (AI) in achieving its mission and goals. This AI Policy outlines the guidelines and principles governing the use of AI technologies within our organization. This policy applies to all employees.

AI technologies at Pioneer Resources are intended to enhance decision-making, improve efficiency, and support our services, while upholding our values of transparency, fairness, and ethical AI use.

Procedures and Oversight (Including Definitions)

Data Protection: All AI use shall adhere to applicable HIPAA data privacy regulations and internal data protection policies. Access to personal and sensitive information must be strictly controlled.

Data Security: Data used in AI models must be appropriately safeguarded. This includes encryption, access controls, and periodic security audits.

Accountability: Employees working with AI are responsible for the outcomes of the AI systems they oversee. This includes monitoring, auditing, and addressing any biases or issues that may arise.

Bias Mitigation: AI systems must be designed to mitigate bias and discrimination, especially when dealing with sensitive data or decisions that may impact individuals.

Regular Audits: Regular audits of AI systems should be conducted to identify and rectify any unfair or discriminatory outcomes.

Employee Training: Pioneer Resources will invest in ongoing training and development programs for employees who work with AI to ensure they are equipped with the necessary skills and knowledge for responsible, appropriate and ethical use.

Risk Assessment: Periodic risk assessments will be conducted to identify and mitigate potential risks associated with AI systems.

Legal and Ethical Use

Legal and Ethical Compliance: AI use must comply with all relevant laws and ethical standards, including but not limited to discrimination, privacy, and intellectual property rights.

Human Oversight: Human oversight is essential in critical decision-making processes involving AI. Final decisions should be made by humans, not AI systems.

Communication (transparency with stakeholders): Pioneer Resources shall communicate its use of AI to stakeholders, clients, and employees, especially when AI plays a significant role in decision-making.

Enforcement and Policy Review

Pioneer Resources is committed to the responsible and ethical use of AI technologies to further our mission and enhance our services. This policy serves as a foundation for AI-related activities, underlining Pioneer's commitment to transparency, fairness, and data privacy. Employees are expected to abide by this policy and contribute to the ethical and secure use of AI within our organization.

Non-Compliance: Non-compliance with this AI Policy may result in disciplinary action, up to and including, termination of employment or contract.

Whistleblowing: Pioneer Resources Inc. encourages employees to report any concerns regarding AI use, including ethical issues and potential violations of this policy, through established reporting channels.

Policy Review: This AI Policy will be reviewed periodically to ensure alignment with evolving technology, regulations, and organizational needs.

Effective: 10/17/23

Revised: 11/17/23

Reviewed: 11/17/23, 10/21/24

Pet Policy – Central Wing

Purpose

At Pioneer Resources Inc., we understand the positive impact that well-behaved dogs can have on the workplace. Our Pet Policy – Central Wing is designed to ensure a dog-friendly environment in the Central Wing of the Wesley Campus, while respecting the rights and needs of all employees.

Privilege, Not a Right: Bringing your dog to work is a privilege, not a right. We ask all dog owners to use sound judgment, be respectful, and prioritize the comfort and productivity of their colleagues.

Respect for Coworkers: If your dog's presence causes discomfort or distraction to coworkers, please be considerate of their needs, which always come first. Everyone has the right to a safe and focused work environment.

Guidelines for Dog Owners

- **Permission Required:** permission is required before bringing your dog to work.
- **Vaccination Records:** You will be required to ensure that your dog is up to date with vaccinations and provide proof prior to bringing your dog to work.
- **Non-Aggressive Behavior:** Dogs are required to be friendly to all humans and people; dogs that misbehave will be asked to stay home.
- **Flea-Free Environment:** Maintain a flea-free environment for your dog to keep the workplace comfortable for everyone; if your dog has an unfortunate bout of the “itchies” due to fleas, please let him rest comfortably at home!
- **Clean Up After Your Dog:** There is a designated outdoor site on the West Side of building for dogs to relieve themselves; utilize provided bags to pick up after your dog. Please only allow your dog to relive themselves in this designated area.
- **Avoid Special Events:** Refrain from bringing your dog to work on days when there are special events in the building.
- **Limit Number of Dog Visitors:** Due to the nature of our work, we will limit the number of dogs to four (4) in the central wing (this does not include Scooter, our therapy dog).
- **Leash Requirement:** Keep your dog on a leash at all times in public areas of the building.
- **Loose Dogs in Suites:** If your dog is loose in a suite, close the doors or place a gate across the opening that they cannot get over.
- **Damage Responsibility:** If your dog damages Pioneer Resources Inc. property, you will be responsible for the repair, cleaning or replacement costs.
- **Exclusionary Areas:** Dogs are not allowed in cafeteria/kitchen areas or in the sensory garden area, with the exception of guide dogs; pups can be on cement only in the sensory area if leashed and under control and should not be allowed to relieve themselves on any plants.
- **Accidents and Cleanup:** If your dog has an accident, use a carpet cleaner that removes urine scent and thoroughly clean the area. This helps prevent other dogs from having accidents.

- **Treats:** Please ask the owner if their dog can have treats prior to sharing with them; treats should also be limited to one per day in order to not over-stuff the pups.

Compliance and Cooperation

Pioneer Resources Inc. encourages a dog-friendly environment within the Central Wing, provided it is done responsibly and with respect for coworkers. By following these guidelines, we can ensure that our canine companions contribute positively to the workplace, making it a comfortable and enjoyable space for all.

All employees are expected to adhere to this Pet Policy in order to maintain a harmonious and dog-friendly workplace.

Effective: 11/03/23

Revised:

Reviewed: 11/17/23, 10/21/24

Site Standards

Purpose

To establish the inspection criteria for Program Directors, ensuring a comprehensive and precise assessment of their designated program areas on a quarterly basis.

Policy

It is the policy of Pioneer Resources, Inc. to inspect all owned and leased properties in order to maintain the physical integrity of our sites. This is to include West, East, Central, Transportation, and the SIL and residential home common areas, as well as other rented properties.

Procedures

Bi-annual physical assessments of all owned and leased properties will be completed by assigned personnel and feedback provided to Managers/Directors. This is in place to ensure compliance with established standards and to protect the integrity of our investments.

Personal Work Spaces:

- In order to maintain safe working environments:
 - Surfaces should be wiped clean and free from dust.
 - Trash should be properly disposed of.
 - Areas around the desk and floor should be free from clutter and bags.
 - No Protected Health Information (PHI) materials should be left on desks; all private health-related documents should be locked in a secure location.

- In order to limit maintenance, aid our cleaners, and reduce costs:
 - Windowsills should be kept clear with the exception of plants.
 - Desks should be clear of clutter and contain a limited number of personal items.
 - Only command hooks and strips should be used; use of nails or other items that create holes in objects must be approved by the CEO.
 - Paint colors can only be altered with the approval of the CEO and/or CCO..

Common or Program Areas:

- In order to maintain a safe working environment:
 - All areas should be free from clutter and well-organized.
 - Program areas should remain orderly and clutter-free.
 - All program materials should be stored in a closed cabinet.
 - Dishes should be washed and put away daily.
 - Any personal items left in the fridge for one week will be disposed of.
 - No doors should be sustained in an open position with a door stop; if required a maintenance request should be submitted and the maintenance department will assess the need.
- In order to limit maintenance, aid our cleaners, and reduce costs:
 - No items should be taped to windows, appliances, or any structure.
 - All countertops should be clear of unnecessary items.
 - Employees should not leave personal items in program spaces or common areas.
 - Windowsills should be kept clear with the exception of plants.
 - Paint colors can only be altered with the approval of the CEO and/or CCO.

Compliance and Cooperation

Remember to communicate this policy clearly to all employees and provide them with any necessary training or resources to help them comply. Regularly conduct inspections and address any non-compliance promptly to maintain a clean and organized work environment.

Effective: 11/03/23

Revised: 10/22/24

Reviewed: 11/17/23, 10/22/24

Workplace Health, Safety & Security

Work-Related Injury Procedure

Purpose

To describe the procedure for handling, reporting, documenting and investigating accidents or illnesses affecting Pioneer Resources' employees while, during, and in the course of, employment.

Policy

It is the policy of Pioneer Resources, Inc. to instruct its employees, supervisors, and Directors in taking the appropriate steps in the event of workplace accident, injury or illness. First priority is that the employee receives the appropriate medical treatment and supervisors and Directors know the appropriate steps/documentation in handling the event for compliance.

Background Information (Including Definition)

Employee personal injury form: A standardized document approved by administration and the workers' compensation insurance carrier that is intended to capture the details related to the occurrence of an accident or injury that occurs on the job.

Basic report of injury form: A standardized document recognized by the State of Michigan and/or the agency's workers compensation insurance carrier that is used to report absences from work totaling seven (7) days or more due to work related accident or injury.

Procedures

Following a work-related accident or injury, an investigation must be promptly conducted to ensure accurate information is obtained. The [National Safety Council](#) (NSC) defines an accident as an "unplanned, undesired event, not necessarily resulting in injury, but damaging to property and/or interrupting the activity in process."

The NSC defines an incident as "an undesired event that may cause personal harm or other damage."

Although the [Occupational Safety and Health Administration](#) (OSHA) does not have specific standards for accident investigation, as a best practice, all accidents and incidents should be investigated regardless of severity. Near-miss incidents in which no damage or harm resulted, should also be included. Completing an accident investigation will be beneficial in determining safety hazards or safety training that will need to be addressed to reduce the risk of future injuries.

Step 1: Assess the Injury

When a workplace accident occurs, the first thing to do is to identify any injured employees and assess the severity of the injury. Once the severity of the injury has been ascertained, the employer must determine if immediate medical attention is necessary.

Employees must report a workplace accident, injury or illness immediately to their immediate supervisor or the Human Resources department.

Step 2: Obtain Medical Treatment if Necessary

If no medical attention or only first-aid is required, the assessing manager/Director may proceed to Step 3.

If immediate medical attention is necessary:

- The employee should follow the TeleCompCare instructions using this [form](#), or by calling 1-866-323-4227 (Pioneer Resources account number: 21008).
- If the injury is an emergency situation, the employer should have a Director take the employee to the nearest emergency room or urgent care facility, or call 911 to request medical assistance to the worksite depending on the severity.

The Emergency room should only be used when medically required.

Once the severity of the injury is assessed the assessing manager/Director should provide the employee with all appropriate forms related to medical treatment for work-related injuries. This will include some or all of the following forms:

- a. If time allows, the supervisor will fill out an Authorization & Consent for Treatment Form which is to accompany the injured employee.
- b. Workers' compensation panel of physicians.
- c. Return to work form for completion by the physician.
- d. Copy of the employee's job description (to provide to the physician).
- e. Copy of the company's light duty policy.

Completion of these forms will provide valuable information to help the employer determine the best way to accommodate the employee's return to work and to promote a healthy recovery from the sustained injuries.

In the event of a severe injury, the department Director and/or the Human Resources department will provide the appropriate forms to the care providers.

Step 3: Interview Injured Employee and Witness(es)

Once the injured employee's medical needs have been seen to, the next step is to interview the employee and gather information on what, when, how and why the injury occurred. The injured employee should complete an [incident report](#) to provide an overview of what happened to cause the accident. The employer should interview all witnesses who have first-hand knowledge of the accident, and each witness should complete a witness statement. The supervisor is to complete an incident report that details what they witnessed or any history of

the work environment that may have led to the accident.

Questions to ask during the investigation might include:

- a. What was the employee doing at the time of the accident?
- b. Was the employee qualified to perform this operation?
- c. Were company procedures being followed?
- d. Is the job or process new?
- e. Were proper tools or equipment being used?
- f. Was the proper supervision being provided?
- g. Had the employee received training on this operation prior to the accident?
- h. Where did the accident take place?
- i. What was the physical condition of the area when the accident occurred (for example, was the temperature of the area hot or cold; if outside, was it wet or muddy; was debris in the way or was the area clear)?
- j. What were witnesses doing at the time of the accident?
- k. What immediate or temporary action could have prevented the accident, or minimized its effect?
- l. What long-term or permanent action could have prevented the accident, or minimized its effect?
- m. Had corrective action been recommended in the past but not adopted?

Investigations will be done by the supervisor of the injured employee. Completed investigative reports are to be turned in to the Director of Human Resources.

Step 4: Observe Accident Scene and Analyze the Facts

Next, employers should observe the accident scene and take photographs of the area, including objects, wet floors and equipment that may have contributed to the accident (i.e., filing cabinet drawer was left open and employee tripped over the drawer; electrical cord was exposed, and employee tripped over cord; crack in concrete floor caused an uneven surface).

Action plans should be immediately implemented to correct any issues that can be addressed to ensure that the work area is safe for employees and participants, such as tagging out faulty equipment. Some questions that the Human Resources department or department Director may look to answer while observing the scene include:

- a. What prompted this investigation?
- b. Why did the incident occur?
- c. What are the facts surrounding the occurrence? (This is the heart of the investigation—the investigator must determine who, what, when, where and why.)
- d. Has a previous action been taken to correct the problem? If so, what was it? Why did it fail this time?
- e. What should be done going forward to correct the problem?
- f. Is there a new method that should be used to correct the problem? Is there a way to eliminate the cause(s) of the incident?
- g. What training is required?

Employers should document any actions they have taken to secure an unsafe worksite.

The pictures, investigative notes, documents and action plans are to be turned in to the Director of Human Resources.

Step 5: File a Workers' Compensation Claim

Next, the Human Resources department should contact their insurance carrier and file a work-related [injury report](#). All information required by the insurance carrier should be provided; employers should also provide statements and any other relevant supporting documentation, including available doctor's notes, therapy and medical treatment statements, and a return-to-work statement.

Filing of Workers' Compensation reports and OSHA reports are the responsibility of the Director of Human Resources.

Step 6: Follow Up

The Human Resource department will follow up with the employee after the accident investigation has concluded to see how the employee is doing. If the employee has returned to work with restrictions, make sure the employee is working within the stated restrictions. If returned under light-duty, make sure the employee is adhering to work rules as well as any and all restrictions.

Step 7: Corrective Action

Corrective action should be identified in terms of how to prevent a recurrence and improve the overall operations of the company. If an employee violated a major or minor safety rule, Pioneer Resources will need to follow its Employee Relations and Attendance Policy disciplinary guidelines and take the corrective action up to and including separation if necessary. Taking immediate corrective action will ensure workplace safety and help reduce or eliminate work-related injuries. Thorough investigations will help Pioneer Resources identify causes of accidents and will reveal any accident trends. Data driven discussions will be presented to the management team by the Director of Human Resources.

References: SHRM-Process for workplace injury investigations, OSHA, Workers' Compensation best practices-RTW/HUB, and the National Safety Council (NSC).

Effective Date: 03/01/99

Revised Date: 09/30/20, 03/15/21, 11/02/23

Reviewed Date: 09/27/21, 09/26/22, 11/02/23, 10/25/24

Blood-borne Infectious Diseases–Exposure Plan

Purpose

To help educate and protect staff and the persons served by Pioneer Resources with regard to blood-borne infectious diseases.

Policy

Pioneer Resources, Inc. is committed to providing a safe and healthful work environment for our entire staff. In pursuit of this goal, the following information is provided to eliminate or minimize occupational exposure to Blood-borne infectious diseases.

Background Information (Including Definition)

1. **Acquired Immunodeficiency Syndrome (AIDS):** A disease caused by the Human Immunodeficiency Virus (HIV). A person's immune system is severely damaged by AIDS and has difficulty fighting diseases and certain cancers. Symptoms can include extreme weight loss, white coating of the tongue/mouth, night sweats, fever, swollen lymph glands, shortness of breath, dry cough, chronic diarrhea, sensitivity to bruising and bleeding from skin lesions, and mental disorientation. There is currently no vaccine or cure for AIDS.
2. **Blood-borne Infectious Disease:** A disease caused by Blood-borne pathogens and transmitted from one individual to another by transfer of the organism through direct contact with the blood product of the infected individual to that of a non-infected individual. These are not known to be spread by casual contact.
3. **Blood-borne Pathogens:** Infectious materials in blood that can cause disease in humans, including hepatitis B and C and human immunodeficiency virus, or HIV.
4. **Engineering Controls:** Devices that isolate or remove the Blood-borne pathogen hazard from the workplace. Engineering controls include sharps disposal containers, self-sheathing needles, and safer medical devices such as sharps with engineered sharps-injury protection and needleless systems.
5. **Exposure Determination:** Job classifications in which all employees in those jobs have anticipated occupational exposure:
 - a. Residential Support Staff
 - b. Residential Managers
 - c. Community Living Support Staff

Other employees whose job responsibilities may at some time entail occupational exposure:

- a. Vocational Instructor/ET specialist
- b. Camp Counselors
- c. Camp Health Officer
- d. Behavioral Analyst Technician
- e. Trainers/Mentors

6. **Exposure Incident:** A specific eye, mouth, other mucous membrane, non-intact skin or parenteral contact with blood or other potentially infectious materials (OPIM) that results from the performance of an employee's duties.
7. **Hand Hygiene:** Cleaning your hands by using either handwashing (washing hands with soap and water), antiseptic hand wash, antiseptic hand rub (i.e. alcohol-based hand sanitizer including foam or gel), or surgical hand antisepsis.
8. **Hepatitis B Virus (HBV):** An inflammation of the liver caused by a viral infection. The virus is present in the blood, blood products, and other body fluids of an infected individual, and transmission occurs through direct contact with the infected individual's body fluids. Symptoms may include fever, fatigue, and loss of appetite, nausea, vomiting, abdominal pain, clay-colored bowel movements, joint pain and jaundice.
9. **Hepatitis C Virus (HCV):** A liver disease caused by a viral infection. HCV infection sometimes results in an acute illness, but most often becomes a chronic condition that can lead to cirrhosis of the liver and liver cancer. There are treatments for Hepatitis C and it can be cured.
10. **Human Immunodeficiency Virus (HIV):** HIV attacks white blood cells and destroys the body's ability to fight infection. People infected with HIV may not feel or look sick. This virus is transmitted through the semen, vaginal discharge, blood or blood products of HIV- infected individuals. HIV destroys the cells that make up the body's immune system. Without these cells (T-lymphocytes) the body cannot defend itself and disease and infections then invade the body. There is currently no vaccine against HIV.
11. **Infection Control:** Refers to policies and procedures used to minimize the risk of spreading infections.
12. **Infectious Disease:** A disease (such as influenza, malaria, meningitis, rabies or tetanus) caused by the entrance into the body of pathogenic agents or microorganisms (such as bacteria, viruses, protozoans, or fungi) which grow and multiply there.
13. **Occupational Exposure:** Any reasonably anticipated skin, eye, mucous membrane, or parenteral contact with blood or any other potentially infectious materials (OPIM) that may result from the performance of an employee's duties.
14. **Parenteral Contact:** The piercing of mucous membrane or skin; examples include needle sticks, bites, cuts, and tattooing.
15. **Personal Protective Equipment (PPE):** Specialized clothing or equipment provided to any employee with occupational exposure to eliminate or minimize the risk of infectious materials entering the employee's body through apparent or unapparent skin lesions or entry through the membranes of the eyes, nose or mouth. Personal protective equipment may include gloves, gowns, face shields or masks, eye protection and CPR breathing barriers or ventilation devices.
16. **Potentially Infectious Materials:** Include semen, vaginal secretions, saliva in dental

procedures, amniotic fluid and any fluid or solid that is visibly contaminated with blood.

17. **Universal Precautions:** An approach to infection control whereby all human blood and certain human body fluids are treated as if known to be infectious for HIV, HBV, HCV, and other blood-borne pathogens. (Note: universal precautions do not apply to feces, nasal secretions, sweat, tears, vomitus or urine unless they are visibly contaminated with blood).
18. **Work Practice Controls:** Practices that reduce the likelihood of exposure by changing the way a task is performed. This includes appropriate hand washing procedures, procedures for sharps disposal, laundry handling and contaminated material cleaning.

Employee Education and Training

- All new employees will receive general training in the areas of infection control and blood-borne infectious diseases within 10 days of hire. Training will be provided by Pioneer Resources' staff or contractors who are specifically trained in this area. Existing employees will receive update training at least annually or as new information becomes available. All employees can review this plan at any time during their work shifts via the intranet, or by contacting the site supervisor. If requested, we will provide an employee with a copy of the Exposure Control Plan (ECP) free of charge and within 15 days of the request.
- All employees with occupational exposure to blood-borne pathogens will be provided with training about the hazards associated with blood and other potentially infectious materials (OPIM) and the protective measures to be taken to minimize the risk of occupational exposure.
- Effective training of this blood-borne infectious diseases- exposure control plan will ensure that employees understand hazards associated with blood-borne pathogens, universal precautions, modes of transmission, personal protective equipment (PPE), the use of engineering and work practice controls, equipment cleaning and disinfecting and reporting an exposure incident.
- Employees must be trained to identify tasks which put them at risk for exposure and to utilize the proper protective measures. Occupational exposure could include any task that puts the employee at risk of contracting potentially infectious materials. This could be everything from applying Band-Aids to cleaning up rest rooms, to major trauma treatment.
- Employee training programs shall include at minimum:
 1. Access to a copy of this policy
 2. Epidemiology and symptoms
 3. Modes of transmission
 4. Recognizing high exposure risk tasks
 5. Engineering and work practice controls
 6. Personal Protective Equipment (PPE) - types, limitations, location, proper use,

- decontamination and disposal
 - 7. Choice of appropriate PPE for incident
 - 8. Hepatitis B Vaccination Information
 - 9. Exposure incident reporting and post-exposure follow-up procedures
 - 10. The use of biohazard signs, labels, and bags
- Employees are required to be trained in the appropriate actions to be taken in an emergency involving exposure to blood and other potentially infectious materials (OPIM).
 - Employees are to be informed as to the reasons why they should participate in Hepatitis B Vaccination and post-exposure evaluation and follow-up.
 - Training is to be provided at the time of initial work assignment (within 10 working days) and at least annually thereafter.
 - Training materials must be appropriate to employee's vocabulary, educational level and language.
 - Training records must be maintained for three years from the date of training and include the following:
 1. Name and job title of each attendee
 2. Summary of training sessions
 3. Name and qualifications of trainer(s)
 4. Dates of initial and follow-up training

Engineering and Work Practice Controls

1. Employees shall wash their hands as soon as possible after removing their gloves or other personal protective equipment. If hand washing is not feasible, the employer shall provide an appropriate antiseptic hand cleanser.
2. Used needles/sharps shall not be bent, broken, recapped or re-sheathed by hand. Sharps will be placed intact into an appropriate sharps container.
3. Eating, drinking, smoking, applying cosmetics or lip balm, and handling contact lenses are prohibited in areas where there is reasonable likelihood of occupational exposure.

Personal Protective Equipment

1. Personal Protective Equipment (PPE) shall be provided by the agency to any employee with occupational exposure to eliminate or minimize the risk of infectious materials entering into the worker's body through apparent or unapparent skin lesions or entry through the membranes of the eyes, nose or mouth.
2. "Appropriate PPE" consists of, but is not limited to: gloves, gowns, lab coats, face shields or masks, eye protection and CPR breathing barriers or ventilation devices.
3. It is the employer's responsibility to examine and evaluate the effectiveness of PPE as

well as Engineering and Work Practice Controls on a ‘regular schedule’ to ensure their effectiveness and to replace, repair or reevaluate as necessary.

4. Note: OSHA prefers well developed and documented Engineering and Work Practice Controls over the reliance on employees using Personal Protective Equipment.

Methods of Compliance

1. **Gloves:** Gloves are to be worn when it can be reasonably anticipated that there will be hand contact with blood or other potentially infectious materials (OPIM), mucous membranes or non-intact skin. Disposable (single use only) gloves can be made of vinyl or nitrile, and are to be replaced when visibly soiled, torn, punctured or when the barrier is compromised. Due to the large number of people with an allergy, latex gloves will not be supplied. Disposable gloves shall not be washed or disinfected for reuse. Appropriate sizes must be available. Utility (reusable) gloves can be reused after decontamination. Utility (reusable) gloves must be discarded if cracked, peeling, discolored, torn, punctured or exhibiting other signs of deterioration.
2. **Masks, Eye Protection and Face Shields:** Masks in combination with eye protection devices (such as goggles or glasses with solid side shields, or chin length face shields) shall be worn whenever splashes, spray, splatter or droplets of blood or other potentially infectious materials (OPIM) may be generated.
3. **Gowns, Aprons, and Other Protective Body Coverings:** Worn whenever there is potential body, head, foot or clothing exposure. The type and characteristics will depend upon the task and degree of exposure anticipated.
4. **CPR Breathing Barriers:** CPR breathing barriers should be used whenever CPR is rendered.

Universal Precautions for Direct Care Personnel

Staff will utilize universal precautions with all potentially infectious material. Equipment includes:

1. Gloves
2. Masks
3. Protective Eye Wear
4. Gowns
5. Puncture-proof (sharps) containers
6. Pocket Masks (CPR Breathing Barriers), Ambu Bags
7. Bleach-fresh mixture of one part bleach per ten parts water
8. Hand washing soap/ready access to sink/antiseptic hand cleanser

Each site supervisor is responsible to ensure that appropriate equipment is ordered, supplied and available to staff.

Procedures for Use of Personal Protective Equipment

- **Gloves:** Wear gloves for direct contact with mucous membranes, non-intact skin,

when handling blood and body fluids, when touching items or surfaces soiled with blood and body fluids. Gloves will be discarded after single resident and or participant of services use and hands washed immediately. Wearing gloves is especially important for employees who have cuts and abrasions on their hands.

- **Hand Washing:** Wash hands after each resident and or participant of services contact and immediately after coming in contact with blood and body fluids. Hands must be washed with liquid soap and warm running water. Hands are to be rubbed vigorously for at least 20 seconds, covering all surfaces of the hands and fingers. Nails are to be scrubbed by rubbing them against the palms of your hands. Rinse hands with water, dry hands thoroughly with a paper towel, then turn off the faucet using the paper towel. Refrain from direct contact if you have open, draining lesions or dermatitis. Hand sanitizer with a minimum of 60% alcohol may be used in place of hand washing until such time as hand washing can be completed. Follow the directions on the sanitizer regarding the proper amount to use, and rub your hands together until dry.
- **Gowns:** Wear gowns when spraying/splattering blood or body fluids is likely.
- **Masks and Protective Eye Wear:** Wear masks and protective eye wear when spraying/splattering blood or body fluids is likely.
- **Needles and Sharps:** Do not recap, purposefully bend, break, remove needles from disposable syringes or otherwise manipulate by hand. Place into puncture-resistant biohazard collection containers (sharps containers) as close as possible to the area in which they are used. At the time of discard, the biohazard collection container (sharps containers) should be sealed. Full sharps containers shall be disposed of per regulations of the Muskegon County Health Department (231-724-1293).
- **Breathing Barriers/Pocket Masks/Ambu Bags:** Use a breathing barrier or other ventilation devices to minimize the risk of exposure during mouth-to- mouth resuscitation.
- **Blood or Body Fluid Spills:** Flood the area with disinfectant solution (fresh mixture of one part bleach per ten parts water) and allow it to stand for at least 10 minutes. Use appropriate material to absorb the solution, and dispose of it in the biohazard container.
- **Cleaning Equipment, Toys, and other Household Objects:** Objects visibly soiled with blood or body fluids will be cleaned with disinfectant solution (fresh mixture of one part bleach per ten parts water or a commercial disinfectant).
- **Soiled Linen or Clothing:** Linen or clothing containing potentially infectious materials (PIM) should be handled as little as possible. Gloves are to be worn when handling linen or clothing soiled with blood or body fluids. All soiled linen or clothing should be bagged at the location where it was used. Linen or clothing soiled with

blood should be placed and transported in bags that prevent leakage. Normal laundry cycles should be used according to the washer and detergent manufacturer's recommendations.

- **Soiled Disposable Items:** Place soiled disposable articles in provided containers away from resident and or participant of services care areas.
- **Isolation of Resident and/or Participant of Services:** Will be used only if there is reason to believe there is danger of environmental contamination. Residents and/or participants of services known to be positive for a Blood-borne disease, but with no other clinical symptoms requiring additional barriers do not require private rooms or isolation. Isolation shall require prior approval from the Behavior Support Committee.
- **Dishes:** No special dishes or utensils are required. If a dishwasher is unavailable, visibly contaminated dishes should be carried directly to the dish washing area, washed in soap and hot water, rinsed in hot water, rinsed a final time in a bleach/water solution (one tablespoon bleach to one gallon water), and allowed to air dry. Gloves should be worn when handling dishes visibly contaminated with body fluids and hands should be washed after removing gloves.

Waste Disposal and Residential Housekeeping Practices

Regulated Waste: means liquid or semi-liquid blood or other potentially infectious materials; contaminated items that would release blood or other potentially infectious materials if compressed; items that are caked with dried blood or other potentially infectious materials; contaminated sharps, and microbiological waste containing blood or other potentially infectious materials.

- All regulated waste destined for disposal shall be placed in closable leak proof containers or bags that are color coded/labeled biohazard or appropriate "sharps containers".
- Disposal of all regulated waste shall be in accordance with applicable federal, state and local regulation.
- Warning labels shall be affixed to containers of potentially infectious materials, refrigerators/ freezers containing potentially infectious materials and other containers used to store or transport potentially infectious waste or materials.
- Labels shall be fluorescent orange or red-orange (or predominately so) with printing in contrasting color.
- Labels shall be an integral part of the containers.
- Red bags or containers may be substituted for biohazard labels.
- Site supervisors shall ensure the work site is maintained in a clean and sanitary condition.
- Site supervisors shall determine and implement an appropriate written schedule for

cleaning and the appropriate method of decontamination necessary (depending on the facility, type of soil present, etc.)

- All equipment, environmental surfaces and work surfaces shall be decontaminated as soon as possible after contact with blood or other potentially infectious materials.
- All bins, pails, cans and similar receptacles intended for reuse which have a likelihood for becoming contaminated with potentially infectious materials shall be inspected and decontaminated on a routine basis or cleaned and decontaminated immediately or as soon as possible upon visible contamination.
- Broken glass which may be contaminated shall not be picked up directly with the hands. Mechanical means must be used (broom, cardboard, etc.).
- Laundry contaminated with potentially infectious materials shall be treated as contaminated and shall be handled as little as possible with a minimum of agitation.
- Contaminated laundry shall be placed and transported in bags that are labeled/color coded. If contaminated laundry is wet, then put into a leak proof outside bag.
- Staff performing laundry assignments shall wear appropriate PPE when in contact with contaminated laundry.

Hepatitis B (HBV) Vaccinations

- According to the CDC, HBV vaccinations are the most important part of HBV infection control because gloves and other PPE do not prevent puncture wounds or unanticipated exposures.
- HBV vaccinations shall be made available to all employees free of charge who have anticipated occupational exposure after they have received training and within 10 working days of initial assessment.
- If employee had previous HBV vaccination, or if antibody testing reveals own immunity, then the HBV vaccination is not necessary.
- If the employee initially declines the HBV vaccination and then requests it at a later date, the employer shall provide for the vaccination at that time.
- Employers shall ensure that employees who decline to accept the Hepatitis B vaccination offered by the employer sign the "Hepatitis B Vaccination" form.
- HBV vaccinations are typically given in two to three doses over a six month period following the health care providers recommendation (per the CDC, not all adults need the third booster dose of the vaccine).
- According to the U.S. Department of Labor, Occupational Safety and Health Administration (OSHA) - "more than 90 percent of those vaccinated will develop immunity to the hepatitis B virus. To ensure immunity, it is important for individuals to receive all three injections. At this point it is unclear how long the immunity lasts, so booster shots may be required at some point in the future".

- Post exposure prophylaxis for Hepatitis B Immune Globulin (HBIG) is approximately 75% effective if given as soon as possible after an HBV positive exposure.

Resident and/or Participant of Services Testing

- Testing for HIV will not be mandatory to be eligible for Pioneer Resources' services.
- An individual exhibiting symptoms of HIV infection and who has participated in high risk behaviors may be referred for testing with their consent.
- Persons requesting testing will be referred to the Muskegon County Health Department or to their private physician.
- Results of HIV testing shall remain confidential and release of resident and or participant of services identifying HIV/AIDS related personal information shall comply with Section 330.1748 of the Michigan Mental Health Code and PA 488 as amended.

Infection Precautions

- Person-Centered Plans (PCP) will address infection precautions when appropriate for persons with HBV, HCV, or HIV.
- Precautions shall be the least restrictive in nature which meet the care needs of the individual considering level of functioning, medical condition and behavior.
- The presence of a diagnosis of AIDS does not indicate isolation as a matter of routine.
- Infection control procedures are based on the concept of Universal Precautions.

Resident and/or Participant of Services Education

All persons known to be HIV infected will receive education and counseling regarding their social responsibility to modify behaviors so as to minimize the transmission of the virus. This may include:

1. Referral for notification of sex and needles-sharing partners
2. Practice of protected sex, and
3. That Public Act 490 of 1988 makes it a felony for a person who knows he or she is infected with HIV to engage in sexual penetration with another person without having first informed the other person that he or she is HIV infected.

Resident and/or Participant of Services Confidentiality

- Release of resident and or participant of services information related to HIV/AIDS will comply with Section 330.1748 of the Michigan Mental Health Code and Public Act 488 of 1988 as amended.
- For each request for information, a specific release for HIV/AIDS information shall be obtained.

- Any release of information for a person served by Pioneer Resources shall be coordinated with the assigned supports coordinator or social worker from the contract agency prior to the release of information.
- Release of HIV/AIDS specific information may be required:
 1. To comply with Department of Community Health reporting mandates
 2. To comply with Department of Health and Human Services (licensing) reporting mandates
 3. To provide necessary urgent medical care when circumstances are life threatening and consent cannot be obtained

Response to Employee Exposure

- An employee shall notify their supervisor, or designee, immediately upon exposure.
- The employee's supervisor, or designee, shall notify the Pioneer Resources, Inc. Administrative Office at 231-773-5355 when a staff person experiences exposure to blood and/or body fluids.
- The site supervisor, or designee, will instruct the employee to **contact "TeleCompCare" at 866-323-4227 and speak to the Registered Nurse**. The Pioneer Resources' account number is **21008**.
- If the Registered Nurse advises that immediate treatment is needed, the site supervisor, or designee will then arrange transportation to an appropriate clinic or emergency room, by ambulance if necessary.
- Upon notification, the Administrative Office will provide authorization for the employee to receive treatment. Routine non-emergency treatment will be authorized to occur at the Occupational Health Clinic.
- The treating health care professional is to be provided with a description of the employee's duties and occupational exposure.
- When staff is exposed to blood and/or body fluids of a resident and/or participant of services, the site supervisor, or designee, may request that he or she participate in screening for Hepatitis and/or HIV/AIDS if recommended by the treating physician. Appropriate consent forms must be obtained to authorize testing and release results. If consent is not obtained, Pioneer Resources, Inc. staff shall document that legally required consent could not be obtained.
- If the resident and or participant of services is already known to be infected with HBV or HIV, testing will not be repeated.
- When injury or exposure to infectious disease occurs, the site supervisor is responsible to complete an [Accident Report Form](#) in consultation with the injured/exposed employee and any witnesses. This form shall be sent reporting@pioneerresources.org.

- The site supervisor will conduct an investigation to determine the cause of the injury/exposure and to make recommendations to Administration which may assist in preventing future incidents.
- When staff receive injury/exposure they should follow these procedures:
 1. Immediately contact the site supervisor/designee
 2. Apply minor first aid as needed
 3. Obtain treatment at our Workplace Health Clinic, if open. When injuries occur outside of business hours staff may be treated at a Hospital Emergency Room.
- Pioneer Resources' administration shall obtain and provide employees with copies of the evaluating health care professional's written opinion within 15 days of completion of the evaluation, if the treating clinic does not provide this information.
- An accurate exposure record for each employee with an occupational exposure incident will be established and maintained. The record shall include:
 1. Name of employee and social security number
 2. Copy of employee's HBV vaccination record
 3. Copy of medical testing and findings
 4. Copy of health care professional's written opinion
 5. The record must be retained for the duration of employment plus 30 years.
 6. Employee confidentiality shall be ensured.

References: Centers for Disease Control (CDC), Michigan Department of Health and Human Services, Licensing and Regulatory Affairs, BCAL3265 (Rev. 1-16), Assessment Plan for AFC Residents, section VI Occupational Safety and Health Administration (OSHA), and section 330.1748 of the Michigan Mental Health Code Public Act 488 of 1988 as amended.

Effective Date: 03/01/99

Reviewed/Revised Date: 12/19/19, 08/04/21, 10/25/24

Reviewed Date: 09/29/20, 09/26/22, 11/02/23, 10/25/24

Infection Prevention & Control

Purpose

To help educate and protect staff and the persons served by Pioneer Resources through the consistent use of infection control practices.

Policy

Pioneer Resources, Inc. is committed to providing a safe and healthful environment for our

staff and the people we serve. Pioneer Resources' decisions involving persons who have communicable diseases shall be based on current and well-informed medical judgments concerning the disease, the risks of transmitting the illness to others, the symptoms and special circumstances of each individual who has a communicable disease, and a careful weighing of the identified risks and the available alternative for responding to an employee and persons served with a communicable disease.

In pursuit of this goal, the following information is provided to eliminate or minimize occupational exposure to infection.

Staying Home When Ill

Many times, with the best of intentions, employees report to work even though they feel ill. Pioneer Resources provides paid time off to compensate employees who are unable to work due to illness or are required to care for ill family members.

Because we are an agency that provides Health care services to participants, residents and riders who may be at a higher level of risk from contagious illness, it is critical that employees do not report to work while they are ill and/or experiencing the following symptoms: fever, cough, sore throat, runny or stuffy nose, body aches, headaches, chills and/or extreme fatigue.

Employees who report to work ill will be sent home, and will be provided guidance on when they can return in accordance with the health guidelines provided by the CDC:

- A physician's note or contractual partner policy that prescribes a higher level of precaution in the event of an infectious disease confirmed diagnosis, or exposure to an individual with a confirmed diagnosis, will supersede the requirements in this policy.
- Unless otherwise specified through public health mandates, or specific CDC guidance, all other instances of illness should be handled in the following manner: [CDC Respiratory Illness Guidelines](#).

Background Information (Including Definition)

- **Infection:** The invasion and growth of germs in the body.
- **Infection Control:** Refers to policies and procedures used to minimize the risk of spreading infections.
- **Infectious Disease:** A disease such as Cholera, Influenza, SARS (Severe Acute Respirator Syndrome), SARS-CoV-2 (Covid-19), Monkey Pox, Malaria, Meningitis, Rabies, Tetanus, or Tuberculosis, caused by the entrance into the body of pathogenic agents or microorganisms (such as bacteria, viruses, protozoans, or fungi) which grow and multiply there.
- **Communicable/Contagious Disease:** An infectious disease such as Cholera, Influenza, SARS, Covid-19, Monkey Pox, Malaria, Measles, Meningitis, or Tuberculosis, that is transmissible by contact with infected individuals, their bodily discharges and/or bodily fluids (such as respiratory droplets, blood or semen), by contact with

contaminated surfaces or objects, by ingestion of contaminated food or water, or by direct or indirect contact with disease vectors (such as mosquitos, fleas, or mice).

Note: The terms contagious disease and communicable disease are often used interchangeably. However, communicable diseases such as malaria or schistosomiasis that are spread by contact with disease vectors (such as mosquitos or ticks) are not typically considered to be “contagious” diseases since they cannot be spread from direct contact with another person.

- **How Infections Spread:** Germs are a part of everyday life and are found in our air, soil, water, and in/on our bodies. Some germs are helpful, others are harmful. Many germs live in and on our bodies without causing harm, and some even help us to stay healthy. Only a small portion of germs are known to cause infection.
- **How Do Infections Occur?** An infection occurs when germs enter the body, increase in number, and cause a reaction of the body.

Three things are necessary for an infection to occur:

1. **Source:** places where infectious agents (germs) live (e.g., sinks, surfaces, human skin, etc.).
2. **Susceptible Person:** with a way for germs to enter the body.
3. **Transmission:** a way germs are moved to the susceptible person.

Infection Control Basics

There are two tiers of recommended precautions to prevent the spread of infections in healthcare settings: Standard Precautions and Transmission-Based Precautions.

1. **Standard Precautions for All Resident/Participant Care:** Standard precautions are used for all resident/participant care. They're based on a risk assessment and make use of common sense practices and personal protective equipment use that protect healthcare providers from infection and prevent the spread of infection from person to person:
 - a. Perform hand hygiene.
 - b. Use personal protective equipment (PPE) whenever there is an expectation of possible exposure to infectious material, such as disposable gloves.
 - c. Follow respiratory hygiene/cough etiquette principles.
 - d. Ensure appropriate resident/participant placement.
 - e. Properly handle, clean and disinfect resident/participant care equipment and instruments/devices.
 - f. Clean and disinfect the environment appropriately.
 - g. Handle textiles and laundry carefully.
 - h. Follow safe injection practices.
 - i. Ensure healthcare worker safety including proper handling of needles and sharps.

- j. If you are sick, do not come to work – utilize/follow the proper call-in procedures until you are well.
2. **Transmission-Based Precautions:** Transmission-based precautions are used in addition to Standard Precautions for residents/participants with known or suspected infections.
 1. Transmission-Based Precautions are the second tier of basic infection control and are to be used in addition to Standard Precautions for residents/participants who may be infected or colonized with certain infectious agents for which additional precautions are needed to prevent infection transmission.
 2. Precautions may include having the person not share a room, limit transport and movement of the person, use disposable or dedicated resident/participant care equipment and prioritizing the cleaning and disinfection of the room.
 3. Although masks are no longer required for daily use, when there is a known transmission-based infection present in a person served, disposable masks will be required for all staff while within six-feet of the infected individual in order to prevent further spreading of the illness.
 4. When deemed necessary for the safety of residents, participants, staff and volunteers, additional increased safety measures may be approved by the CEO, such as requiring the use of full PPE, additional isolation/quarantine guidelines, etc.

Procedures

All staff of Pioneer Resources, Inc. are expected to understand and utilize the following policies and procedures to help prevent/control infection:

- Blood-borne Infectious Diseases – Exposure Control Plan
- Sharps – Use, Containment & Disposal Policy
- First Aid Kits
- Handling Suspicious Letters & Packages
- Physical Health (incidental reporting of persons served)
- Critical and Non-Critical Incident Reporting
- Hand Washing

Requests for Medical Information and/or Documentation

If you are out sick or show symptoms of being ill, it may become necessary to request information from you and/or your health care provider. In general, we would request medical information to confirm your need to be absent, to show whether and how an absence relates to the infection, and to know that it is appropriate for you to return to work. As always, we expect and appreciate your cooperation if and when medical information is sought.

Confidentiality of Medical Information

Our policy is to treat any medical information as a confidential medical record. In furtherance

of this policy, any disclosure of medical information is in limited circumstances with supervisors, managers, first aid and safety personnel, and government officials as required by law and/or on a need to know basis.

References: Cdc.gov/infection control, Cdc.gov/handwashing, SHRM guidance on infectious disease control policies, Cdc.gov/communicablediseases, and the Michigan Dept. of Health and Human Services Covid-19 Endemic Guidance 04/21/23.

Effective Date: 07/20/21

Revised Date: 04/27/23, 09/20/23, 11/02/23

Reviewed Date: 11/17/22, 05/26/23, 09/20/23, 11/02/23, 10/25/24

Hand Hygiene

Purpose

To help educate and protect staff and the persons served by Pioneer Resources through the consistent use of hand hygiene practices.

Policy

Pioneer Resources is committed to providing a safe and healthful environment for our staff and the people we serve. In pursuit of this goal, the following hand hygiene information is provided to eliminate or minimize occupational exposure to infection.

Background Information (Including Definition)

Hand Hygiene: Cleaning your hands by using either handwashing (washing hands with soap and water), antiseptic hand wash, antiseptic hand rub (i.e. alcohol-based hand sanitizer including foam or gel), or surgical hand antisepsis.

Procedures

When to Wash Hands: At a minimum, hand hygiene is to be performed:

- Before and after administering medications or treatments
- After contact with blood or body fluids
- Before preparing or serving food
- Before and after eating food
- Before and after treating a cut or wound
- Before and after caring for someone who is sick with vomiting or diarrhea
- After assisting someone who used the toilet
- When they are visibly soiled or contaminated

- After coughing or nose blowing
- After using the toilet
- After touching an animal
- After touching garbage
- After touching your eyes, nose, or mouth
- After touching your mask
- Entering and leaving a public place
- Touching an item or surface that may be frequently touched by other people, such as door handles, tables, gas pumps, shopping carts, or electronic cashier registers/screens

Proper Hand Washing Procedure:

1. **Wet** your hands with clean, running water (warm or cold) and apply soap.
2. **Lather** your hands by rubbing them together with the soap. Lather the backs of your hands, between your fingers, and under your nails.
3. **Scrub** your hands for at least 20 seconds. (equivalent to singing the “Happy Birthday” song from beginning to end twice).
4. **Rinse** your hands well under clean, running water.
5. **Dry** your hands using a clean towel or air dry them.
6. **Turn** off the tap with the towel, or your elbow.

Hand Sanitizer: If soap and water are not readily available, you can use an alcohol-based hand sanitizer that contains at least 60% alcohol. Some notes:

- Sanitizers do **not** get rid of all types of germs.
- Hand sanitizers may not be as effective when hands are visibly dirty or greasy.
- Hand sanitizers might not remove harmful chemicals from hands like pesticides and heavy metals.

How to Use Hand Sanitizer:

1. Apply the gel product to the palm of one hand (read the label to learn the correct amount).
2. Rub your hands together.
3. Rub the gel over all the surfaces of your hands and fingers until your hands are dry. This should take around 20 seconds.

Wash your hands with soap and running water as soon as you are able to do so.

References: [Cdc.gov/handwashing](https://www.cdc.gov/handwashing)

Effective Date: 07/20/21

Revised Date:

Reviewed Date: 09/26/22, 11/02/23, 10/21/24

Sharps-Use, Containment and Disposal

Purpose

To define Pioneer Resources' plan regarding the identification, containment and disposal of "sharps".

Policy

Pioneer Resources' staff will properly identify, contain, and dispose of sharps utilized within the agency's residential facilities and program sites.

Background Information (Including Definition)

Sharps include needles, syringes, blades, pipettes, and contaminated broken glass.

Procedures

Sharps shall be placed in properly labeled, rigid, puncture-resistance containers at the site of use (bending, clipping, breaking, and recapping are prohibited), sealed when near the $\frac{3}{4}$ full mark, and disposed of at an approved disposal site.

Current locations include:

1. Benson Sav-Mor Pharmacy, 961 Spring Street, Muskegon, MI 49442
2. Hackley Professional Center, 1675 Leahy Street, Muskegon, MI 49442

The following supplies shall be made available to staff for handling infectious medical waste:

1. Needle disposal containers.
2. Personal Protective Equipment (PPEs); including gloves, masks, goggles and gowns (all PPEs are provided by Pioneer Resources, Inc. at no cost to staff).

References: Blood-borne Infectious Diseases- Exposure Control Plan Policy.

Effective Date: 02/17/05

Reviewed/Revised Date: 12/19/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 10/10/23, 10/22/24

Telehealth Service Delivery

Purpose

In response to the global pandemic, Pioneer Resources offers some services via telehealth delivery options to ensure continuity of services for program participants.

Policy

Pioneer Resources, Inc. ensures a policy reflective to telehealth services is in place when face-to-face or limited face-to-face services are unavailable. This policy ensures adherence to confidentiality and ethical standards for telehealth service.

Procedures

These procedures were developed in accordance with the provisions made by MDHHS allowing programs to provide Telehealth Services.

- To prepare for implementation of Telehealth Service Delivery, Pioneer Resources obtained authorizations for telehealth services from the defined Community Mental Health Agency engaged with the persons served.
- The programs defined the applicable virtual format that would be utilized to meet confidentiality standard as well as access for persons served and family members.
- Verbal consent was obtained originally from all persons served, authorized family member, or guardian to provide telehealth services, written consent to be obtained for services to continue beyond state mandated closures.
- Telehealth sessions do not occur unless the client signs into the session, thus indicating consent to participate in telehealth session.
- Telehealth sessions are not audio or video recorded, nor are photographs taken during a Telehealth session unless a signed consent is on file.
- Services through telehealth are based on the goals defined within the person served plan of service or vocational plan.
- Staff are required to adhere to Pioneer Resources' Use of Technology Policy, Security & Confidentiality of HIPAA Information Policy, Person Centered Planning Policy, Privacy policy, Organizational Code of Ethics in the provision of Telehealth Services.
- The staff will schedule telehealth sessions in coordination with person served/ family member/ guardian and ensure all necessary materials are ready prior to the start of the Telehealth session.
- Documentation standards for specific services will remain in place through in person or Telehealth services
- Service outcome measures will review ongoing effectiveness of Telehealth services

References: Use of Technology Policy, Security & Confidentiality of HIPAA Information Policy, Person Centered Planning Policy, Privacy policy, and Organizational Code of Ethics.

Effective Date: 01/18/21

Revised Date:

Reviewed Date: 09/27/21, 09/26/22, 11/02/23, 10/22/24

UL Approval

Purpose

To establish an electrical safety feature for all electrical appliances brought into a home or program site.

Policy

In an effort to prevent electrical shocks and/or a fire all electrical appliances brought into a Pioneer Resources' facility must have an Underwriters Laboratories (UL) tag.

Background Information (Including Definition)

UL: Underwriters Laboratories

UL Function: The Underwriters Laboratories sets standards for different product categories and tests products to make sure they meet the standards.

Procedures

1. All electrical appliances brought into a Pioneer Resources' site must be inspected by staff to verify it has a valid UL tag.
2. Upon locating the UL tag, staff should write their initials on the tag using a marker or pen, or enter the information on a UL inspection document.
3. If the appliance does not have a UL tag the appliance cannot be plugged in and must be removed from the premises.
4. Electrical appliances that should have a UL tag include: microwaves, ovens, refrigerators, dishwashers, washing machines, dryers, toasters, coffee makers, blenders, and some power tools.

Effective: 02/09/05

Revised Date: 12/20/18

Reviewed Date: 01/12/19, 09/29/20, 09/27/21, 09/26/22, 10/10/23

Emergency Supplies

Purpose

To ensure that all licensed group homes are supplied with appropriate emergency supplies, to be utilized when it is necessary to shelter in place.

Policy

It is the policy of Pioneer Resources, Inc. that all licensed group homes will be equipped with

the following emergency supplies:

1. A minimum of 3 days nonperishable, easy to prepare food
2. A minimum of one gallon bottled drinking water per person (including staff)
3. Water for flushing toilets
4. Disposable table settings & wet wipes
5. Non-rinsing antiseptic hand cleanser
6. Flashlights with extra batteries
7. Extra essential resident-specific needs as defined by the residential manager

Background Information (Including Definition)

Emergency situations are defined as, but not limited to the following:

1. Power Failures
2. When weather conditions prevent travel from the home
3. When Police or Authorities deny travel on roads
4. Natural disasters

Procedures

1. The residential manager of each licensed group home will ensure the emergency supplies listed above are kept on hand as appropriate for that home.
2. Emergency food types will vary for each home, depending on resident diet specifics.
3. Emergency food and water will be kept in a designated spot in each home and labeled for emergency use only.
4. Emergency food and water expiration dates will be checked at least every three months and discarded if expired, or if it will be expiring before the next scheduled check. Discarded food or water will be replaced right away.
5. Flashlights and extra batteries will be kept in a designated spot in each home. Flashlights will be routinely checked to ensure they are in proper working order. Expiration dates on extra batteries will be checked routinely and replaced when expired.

Effective Date: 01/21/19

Revised Date: 02/17/00

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/21/24

First Aid Kits

Purpose

To ensure that all homes, program sites and vehicles are supplied with an appropriate first aid kit.

Policy

It is the policy of this agency that first aid kits are located in an area that allows for easy access and are used whenever first aid treatment is needed for persons served, staff or visitors.

Background Information (Including Definition)

First Aid: Emergency treatment for injury or sudden illness.

Procedure

1. At least one staff working with residents or program participants must be certified by the American Red Cross or American Heart Association training curriculum to assist in first aid treatment.
2. When an item in a first aid kit is used, it will be replaced so the kit is kept fully stocked.
3. The container must be clearly marked as holding "First Aid" supplies, and must contain at least the following items:
 - a. Antibiotic Ointment
 - b. Band-Aids (assorted sizes)
 - c. Sterile Gauze Dressing (assorted sizes)
 - d. Adhesive Tape
 - e. Vinyl Gloves (due to possible allergic reaction latex gloves will not be used)
 - f. CPR Breathing Barrier
 - g. Burn Relief Pads
 - h. Insect Sting Pads
 - i. Alcohol Cleansing Wipes
 - j. Instant Cold Compress
 - k. Antiseptic Towelettes
 - l. Tweezers
 - m. Scissors
 - n. Cotton Tipped Applicators

Effective Date: 08/21/03

Revised Date: 09/29/20

Reviewed Date: 09/27/21, 09/26/22, 10/10/23, 10/21/24

Winter Safety Measures in Licensed Residences

Purpose

To provide a uniform procedure for snow/ice removal and to ensure that people living in group homes are offered clothing choices appropriate for winter weather.

Policy

It is the policy of Pioneer Resources that the sidewalks, patios and driveways at each group home shall remain free of snow/ice and that the people living in group homes shall be assisted in selecting clothing appropriate to weather conditions.

Procedures

1. Snow and/or ice shall be removed from all sidewalks and patios as it accumulates. On duty staff should alternate snow/ice removal if it needs to be done more than once per shift. Safety shoe cleats are provided in each home and staff are to wear these while clearing snow and putting down ice melt.
2. Snow/ice must be removed the entire length and width of all sidewalks and patios.
3. Rock salt or ice melt is to be put down after snow/ice removal.
4. Most group homes have contracts for snow removal of driveways, however, this is generally done only once per day. Home staff are responsible for additional snow removal in the driveway should the snow continue after the driveway has been plowed.
5. As needed, home staff will assist the people we serve in making clothing choices appropriate for winter weather. Dressing in layers is helpful as clothing items can be added or removed as needed. Long-sleeved shirts and long pants should be offered. If a short sleeved shirt is chosen, suggest that a sweater or cardigan be worn over it.
6. As needed, home staff will make sure that full winter wear is offered to residents prior to leaving the home (coats, hats, boots, mittens, scarves). Should someone choose to not wear an item, such as a hat or mittens, the item should be tucked into a pocket so that it is available should the person change his/her mind. For people wearing boots, shoes should be taken along to change upon arrival at the destination.
7. Winter wear should be put on just before leaving the home and taken off as soon as the person is indoors.
8. Home staff should be aware of health care plans and are to contact the residential manager or designee if it is believed that someone should not leave the home due to weather conditions.
9. The home vehicle is to be warmed up and all snow/ice removed from windows, roof and lights prior to driving.
10. Home staff should plan ahead and adjust travel time due to road and weather

conditions.

11. While outdoors, staff should walk carefully on potentially slippery surfaces, and assist residents as needed to try to minimize slips/falls.

12. Home staff should dress in clothing appropriate to weather conditions.

Effective Date: 05/25/00

Revised Date: 11/02/23

Reviewed Date: 01/21/19, 09/29/20, 09/27/21, 09/26/22, 11/02/23, 08/28/24

Threatening Situations

Purpose

To describe procedures to be followed should a threatening situation occur.

Policy

It is the policy of Pioneer Resources, Inc. to protect the persons served, employees, and visitors to the agency, to the extent possible, in the event that a threatening situation occurs on site, or while employees and the persons served are in the community.

Background Information (Including Definition)

Verbal threats can be described as the words of a person or persons who vocalize or otherwise express the intent to do harm to persons served, employees, or visitors of the agency.

Physical threats include any action that harms, or could potentially harm, the persons served, employees, or visitors of the agency.

Physical threats include, but are not limited to: striking, pushing, restraining, abduction attempt, wielding a knife or other sharp object, and an active shooter.

Procedures

If in a building equipped with an emergency notification system, the receptionist should activate the alert. Available staff who hear the alarm should send at least one staff, preferably two, to check on the receptionist. Additional available staff should prepare to evacuate the building and contact 911, if warranted.

The agency-adopted code for notifying others to contact 911 is “**Call Mr. Green**”. This code may be given verbally or written on paper, if silence is necessary.

Threatening Situation

Run

If there is an accessible escape path, attempt to evacuate the premises.

Be sure to:

1. Have an escape route and plan in mind.
2. Notify others to evacuate the area.
3. Assist the persons served, coworkers and visitors to evacuate.
4. Evacuate yourself and the persons served regardless of whether others agree to follow.
5. Leave personal belongings behind.
6. Prevent individuals from entering an area where the attacker may be.

Communicate

- The person that first observes should call 911.
- Contact your Director immediately and confirm that you have called 911 and report the threatening situation.
- Director will contact CEO for instructions.
- The Director on site will communicate out to Supervisors next instructions. In the event that a Director is not on site contact the nearest Supervisor/Manager.
- Supervisors will contact their teams and staff and provide directions. Remind staff to keep phone lines clear for further instructions or updates.

Hide

If evacuation is not possible, find a place for yourself, the persons served, coworkers, and visitors to hide where the attacker is less likely to find you.

Your hiding place should:

1. Be out of the attacker's view.
2. Provide protection if shots are fired in your direction (i.e. a room with a closed and locked door).
3. Not trap you or restrict your options for movement.
4. If outside, hiding places may include behind bushes, trees, buildings, vehicles or cement walls).

To prevent an attacker from entering your hiding place:

1. Lock the door.
2. Blockade the door with heavy furniture.

If the attacker is nearby:

1. Lock the door.
2. Silence your cell phone(s).
3. Turn off any source of noise (i.e. radios, televisions).
4. Hide behind large items (i.e. cabinets, desks).

5. Remain quiet, and encourage others to remain quiet.

If evacuation and hiding are not possible:

1. Remain calm.
2. Dial 911, if possible, to alert police to the attacker's location.
3. If you cannot speak, leave the line open and allow the dispatcher to listen.

Fight

As a last resort, and only when your life is in imminent danger, attempt to disrupt, disarm and/or incapacitate the attacker by:

1. Acting as aggressively as possible against him/her.
2. Throwing items and improvising weapons.
3. Yelling
4. Committing to your actions (fight as hard as you can).

After the Threatening Situation Has Ended

1. Conduct a head count to make sure everyone is present.
2. Check yourself, persons served, coworkers, and visitors for injuries, and take action based on what you find (i.e. administer first aid per training, or call 911 if advanced medical assistance is needed).
3. Contact the manager/supervisor/designee, Program Director, or CEO and follow her/his instructions.
4. CEO will communicate further instructions and provide updates and the "All Clear" to Directors who will contact department Supervisors/Managers.
5. Cooperate fully with law enforcement personnel.

Active Shooter – Arrival of Law Enforcement

- Remain calm and follow officer's instructions.
- Put down any items in your hands (i.e. bags, jackets).
- Immediately raise hands and spread fingers (if law enforcement personnel tell a person served to raise her/his hands, and the person is physically or intellectually incapable of doing so, calmly explain the situation to the officer).
- Keep hands visible at all times.
- Avoid making quick movements toward officers such as holding on to them for safety.
- Avoid pointing, screaming, and/or yelling.
- If an officer tells you to evacuate the area, do as instructed.

Information to Provide to Emergency Personnel

You may be asked questions, such as:

1. Location of the active shooter
2. Number of shooters, if more than one
3. Physical description of shooter(s)

4. Number of potential victims at the location

References: U.S. Department of Homeland Security's Active Shooter, How to Respond publication and Pioneer Resources' Policies and Procedures: Bomb Threat, Handling Suspicious Letters and Packages, and Workplace Violence.

Effective Date: 07/01/16

Revised Date: 12/27/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 10/10/23, 10/21/24

Tornado Procedures

Purpose

To establish an emergency tornado procedure and schedule for drills in residential settings and program sites.

Policy

In order to ensure the safety and well-being of persons served and staff, the following tornado procedures will be practiced and utilized whenever weather conditions warrant such action.

Background Information (Including Definition)

- Tornado Watch - Weather conditions are such that a tornado could be expected to develop.
- Tornado Warning - A tornado has actually been sighted, and it is time to take cover.
- All Clear - The danger of a tornado is over for this particular location and time.
- Alert to Conditions - All staff will be alert to potential tornado conditions. When such conditions exist, the staff will monitor a TV and/or battery-operated radio for pertinent information.
- Tornado Season – April through October..

Procedures

1. When a tornado **watch** forecast is heard, or weather conditions are such that a tornado might occur, on duty staff will have all residents and or participants of services inside or make arrangements for other suitable shelter if some distance away from a home or program site. A battery-operated radio or TV will be tuned in to a local channel/station and monitored continually upon hearing of a tornado watch.
2. When in a tornado watch, on duty staff will prepare the home or building and residents

and or participants of services as follows:

- a. Ready safety area by removing all wall hangings and furniture (to help avoid possible injury due to falling objects).
 - b. Pillows, blankets, coats should be available for people to cover their face and head in the event of a warning, to protect them from falling objects or flying glass.
3. In the event that a tornado **warning** is received, the staff will:
- a. Move everyone to the bathroom/hallway or designated shelter place (keep away from windows).
 - b. Use pillows to shield each persons' face and head from flying glass or falling objects.
 - c. If time permits - close the bedroom or other interior doors to prevent glass from flying into the hallway.
 - d. Staff will seek shelter in the bathroom/hallway/designated shelter area with the persons served.
 - e. Staff will try to keep everyone calm, and their heads and faces protected.
4. When the All Clear is given, staff will check for possible injuries and apply first aid if needed.
5. Medical assistance will be requested in the event of serious injury. The emergency assistance phone number is 911.
6. A staff person shall check the building for damage and possible danger prior to assisting people from the safety area. If the building is not safe, staff will assist everyone to a safe area outside until other arrangements are made for shelter.
7. Buildings will be straightened and returned to as normal a condition as possible under the circumstances.
8. In the event of damage to the building staff are to contact the residential or program manager or designee.
9. This tornado procedure will be practiced once per month during the tornado season.
10. Records of the date, time, and an evaluation of performance during the drills will be maintained.

Effective Date: 03/29/01

Revised Date: 01/21/19, 10/21/24

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 10/10/23, 10/21/24

Fire Evacuation Procedure

Purpose

To establish the procedure for fire evacuations from residential and program sites.

Policy

It is policy of Pioneer Resources that all sites staffed by agency employees will protect and safeguard the well-being of the persons served, staff, volunteers, and visitors.

Procedures

In the event of an actual fire the following procedures will be followed:

1. A fire alarm will be pulled or will sound.
2. Staff will evacuate all persons in the building to a designated place of safety.
3. The designated place of safety must be far enough away from the structure to ensure safety, taking into consideration potential traffic hazards and fire equipment.
4. If the weather is inclement and a vehicle is available, the vehicle can be used as temporary shelter if it is parked in a safe location, generally at least 50 feet from the structure. One staff shall remain with the vehicle if the keys are in the ignition.
5. If a minor fire is present in the structure, the first responsibility of staff is to ensure the safety of persons served and for protection of life and limb of all involved. Staff should not attempt to extinguish the fire in most circumstances unless the fire is blocking modes of egress to a person.

Evacuation Plan

1. A written plan for evacuation shall exist for each site and a diagram of exit locations and routes to be followed to reach the nearest exit shall be posted. It shall be the responsibility of the residential manager/site supervisor or program Director to ensure that plans are current and posted.
2. All staff shall be in-serviced on the evacuation plan within the first 30 days of employment or prior to working without the presence of experienced, trained staff.
3. Evacuation drills for residential programs shall be held at least quarterly, once per shift during each quarter, and shall be documented.
4. Evacuation drills for program sites shall be held at least semi-annually and shall be documented.
5. Fire drill logs shall be retained at each site and held for at least the past twelve months.
6. Fire drill logs shall be available for inspection by state licensing personnel, fire marshal, accreditation officials, or safety committee members.

Effective Date: 03/20/01

Revised Date: 01/21/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 10/10/23, 10/21/24

Bomb Threat

Purpose

To describe procedures to be followed in the event of a bomb threat.

Policy

It is the policy of Pioneer Resources to protect and safeguard the well-being of the persons served and staff through preparedness for emergencies.

Procedures


If a bomb threat is received via telephone at an agency site, **DO NOT** pull the fire alarm, touch light switches or electrical cords, or place a call from a cell phone (hard-wired/land line phone is approved if available) while inside the building.

The staff person who received the call should:

1. Signal to any other staff present and inform them of the bomb threat. Request the person to begin shelter in place procedures of everyone in the building, and to call 9-1-1.
2. Follow the procedures on the Homeland Security Bomb Threat document that is on the page following this policy.
3. If there is no one else available to begin shelter in place procedures and contact 9-1-1, if possible to do so, staff should keep talking to the caller while sheltering in place and contacting 911.
4. Keep the caller on the line as long as possible. Ask the caller to repeat the message. As much as is possible, record every word spoken by the caller. If the caller does not indicate the location of the bomb, or time of detonation, ask for this information.
5. Inform the caller that the building is occupied, and the detonation of the bomb could result in death or serious injury to innocent people.
6. Pay attention to background noises which may contain a clue about the caller's location (motors running, background music, traffic noise, etc.).
7. Listen closely to the voice – male or female, calm or excited, accents or impediments, etc.
8. Report the information you have obtained to the police.
9. All staff will cooperate fully with the authorities in any subsequent investigation.
10. Once everyone is safely sheltered, complete a "head count" to make sure everyone is

present.

11. No one will return to worksites until an “all clear” signal has been announced by police or fire department personnel.
12. If unable to return to your work site or asked to exit the building for an extended period of time, alternate shelter arrangements will be made- please contact your Supervisor, Manager, Director or CEO immediately.
13. As soon as possible, the staff who received the bomb threat is to complete an Incident Report.
14. This policy will be reviewed with new staff during initial training, and with all staff on an annual basis. Example situations will be used to test staff reactions and ability to follow procedures.

BOMB THREAT PROCEDURES	BOMB THREAT CHECKLIST																																																																																													
<p><i>This quick reference checklist is designed to help employees and decision makers of commercial facilities, schools, etc. respond to a bomb threat in an orderly and controlled manner with the first responders and other stakeholders.</i></p> <p>Most bomb threats are received by phone. Bomb threats are serious until proven otherwise. Act quickly, but remain calm and obtain information with the checklist on the reverse of this card.</p> <p>If a bomb threat is received by phone:</p> <ol style="list-style-type: none">1. Remain calm. Keep the caller on the line for as long as possible. DO NOT HANG UP, even if the caller does.2. Listen carefully. Be polite and show interest.3. Try to keep the caller talking to learn more information.4. If possible, write a note to a colleague to call the authorities or, as soon as the caller hangs up, immediately notify them yourself.5. If your phone has a display, copy the number and/or letters on the window display.6. Complete the Bomb Threat Checklist immediately. Write down as much detail as you can remember. Try to get exact words.7. Immediately upon termination of call, DO NOT HANG UP, but from a different phone, contact authorities immediately with information and await instructions. <p>If a bomb threat is received by handwritten note:</p> <ul style="list-style-type: none">• Call _____• Handle note as minimally as possible. <p>If a bomb threat is received by e-mail:</p> <ul style="list-style-type: none">• Call _____• Do not delete the message. <p>Signs of a suspicious package:</p> <table border="0"><tr><td>• No return address</td><td>• Poorly handwritten</td></tr><tr><td>• Excessive postage</td><td>• Misspelled words</td></tr><tr><td>• Stains</td><td>• Incorrect titles</td></tr><tr><td>• Strange odor</td><td>• Foreign postage</td></tr><tr><td>• Strange sounds</td><td>• Restrictive notes</td></tr><tr><td>• Unexpected delivery</td><td></td></tr></table> <p>* Refer to your local bomb threat emergency response plan for evacuation criteria</p> <p>DO NOT:</p> <ul style="list-style-type: none">• Use two-way radios or cellular phone. Radio signals have the potential to detonate a bomb.• Touch or move a suspicious package. <p>WHO TO CONTACT (Select One)</p> <ul style="list-style-type: none">• 911• Follow your local guidelines <p>For more information about this form contact the DHS Office for Bombing Prevention at OBP@dhs.gov</p> <p> Homeland Security</p> <p>2014</p>	• No return address	• Poorly handwritten	• Excessive postage	• Misspelled words	• Stains	• Incorrect titles	• Strange odor	• Foreign postage	• Strange sounds	• Restrictive notes	• Unexpected delivery		<p>DATE: _____ TIME: _____</p> <p>TIME CALLER HUNG UP: _____ PHONE NUMBER WHERE CALL RECEIVED: _____</p> <p>Ask Caller:</p> <ul style="list-style-type: none">• Where is the bomb located? (building, floor, room, etc.) _____• When will it go off? _____• What does it look like? _____• What kind of bomb is it? _____• What will make it explode? _____• Did you place the bomb? Yes No• Why? _____• What is your name? _____ <p>Exact Words of Threat:</p> <p>_____</p> <p>_____</p> <p>_____</p> <p>Information About Caller:</p> <ul style="list-style-type: none">• Where is the caller located? (background/level of noise) _____• Estimated age: _____• Is voice familiar? If so, who does it sound like? _____• Other points: _____ <table border="1"><thead><tr><th>Caller's Voice</th><th>Background Sounds</th><th>Threat Language</th></tr></thead><tbody><tr><td><input type="checkbox"/> Female</td><td><input type="checkbox"/> Animal noises</td><td><input type="checkbox"/> Incoherent</td></tr><tr><td><input type="checkbox"/> Male</td><td><input type="checkbox"/> House noises</td><td><input type="checkbox"/> Message read</td></tr><tr><td><input type="checkbox"/> Accent</td><td><input type="checkbox"/> Kitchen noises</td><td><input type="checkbox"/> Taped message</td></tr><tr><td><input type="checkbox"/> Angry</td><td><input type="checkbox"/> Street noises</td><td><input type="checkbox"/> Irrational</td></tr><tr><td><input type="checkbox"/> Calm</td><td><input type="checkbox"/> Booth</td><td><input type="checkbox"/> Profane</td></tr><tr><td><input type="checkbox"/> Clearing throat</td><td><input type="checkbox"/> PA system</td><td><input type="checkbox"/> Well-spoken</td></tr><tr><td><input type="checkbox"/> Coughing</td><td><input type="checkbox"/> Conversation</td><td></td></tr><tr><td><input type="checkbox"/> Creaking voice</td><td><input type="checkbox"/> Music</td><td></td></tr><tr><td><input type="checkbox"/> Crying</td><td><input type="checkbox"/> Motor</td><td></td></tr><tr><td><input type="checkbox"/> Deep</td><td><input type="checkbox"/> Clear</td><td></td></tr><tr><td><input type="checkbox"/> Deep breathing</td><td><input type="checkbox"/> Static</td><td></td></tr><tr><td><input type="checkbox"/> Disguised</td><td><input type="checkbox"/> Office machinery</td><td></td></tr><tr><td><input type="checkbox"/> Distinct</td><td><input type="checkbox"/> Factory machinery</td><td></td></tr><tr><td><input type="checkbox"/> Excited</td><td><input type="checkbox"/> Local</td><td></td></tr><tr><td><input type="checkbox"/> Laughter</td><td><input type="checkbox"/> Long Distance</td><td></td></tr><tr><td><input type="checkbox"/> Lip</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Loud</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Nasal</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Normal</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Ragged</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Rapid</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Raspy</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Slow</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Slurred</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Soft</td><td></td><td></td></tr><tr><td><input type="checkbox"/> Stutter</td><td></td><td></td></tr></tbody></table> <p>Other Information:</p> <p>_____</p> <p>_____</p> <p>_____</p>	Caller's Voice	Background Sounds	Threat Language	<input type="checkbox"/> Female	<input type="checkbox"/> Animal noises	<input type="checkbox"/> Incoherent	<input type="checkbox"/> Male	<input type="checkbox"/> House noises	<input type="checkbox"/> Message read	<input type="checkbox"/> Accent	<input type="checkbox"/> Kitchen noises	<input type="checkbox"/> Taped message	<input type="checkbox"/> Angry	<input type="checkbox"/> Street noises	<input type="checkbox"/> Irrational	<input type="checkbox"/> Calm	<input type="checkbox"/> Booth	<input type="checkbox"/> Profane	<input type="checkbox"/> Clearing throat	<input type="checkbox"/> PA system	<input type="checkbox"/> Well-spoken	<input type="checkbox"/> Coughing	<input type="checkbox"/> Conversation		<input type="checkbox"/> Creaking voice	<input type="checkbox"/> Music		<input type="checkbox"/> Crying	<input type="checkbox"/> Motor		<input type="checkbox"/> Deep	<input type="checkbox"/> Clear		<input type="checkbox"/> Deep breathing	<input type="checkbox"/> Static		<input type="checkbox"/> Disguised	<input type="checkbox"/> Office machinery		<input type="checkbox"/> Distinct	<input type="checkbox"/> Factory machinery		<input type="checkbox"/> Excited	<input type="checkbox"/> Local		<input type="checkbox"/> Laughter	<input type="checkbox"/> Long Distance		<input type="checkbox"/> Lip			<input type="checkbox"/> Loud			<input type="checkbox"/> Nasal			<input type="checkbox"/> Normal			<input type="checkbox"/> Ragged			<input type="checkbox"/> Rapid			<input type="checkbox"/> Raspy			<input type="checkbox"/> Slow			<input type="checkbox"/> Slurred			<input type="checkbox"/> Soft			<input type="checkbox"/> Stutter		
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References: Homeland Security [Bomb Threat Checklist](#)

Effective Date: 07/27/04

Revised Date: 09/18/20, 09/27/21, 9/28/22

Reviewed Date: 09/26/22, 10/10/23, 10/21/24

Handling Suspicious Letters and Packages

Purpose

To educate and protect staff and persons served in handling mail and other incoming packages.

Policy

It is the policy of the agency to protect and safeguard the well-being of staff and persons served.

Procedures

Recommendations for Handling Suspicious Letters and Packages:

General Mail Handling:

1. Open all mail with a letter opener
2. Don't disturb the contents of the envelope or package
3. Don't blow into envelopes
4. Don't shake or pour out contents
5. Keep hands away from nose and mouth while opening mail
6. Wash hands after handling mail

Things that may cause Suspicion:

1. Envelope with powder or powder-like substance
2. Excessive tape or string
3. Lopsided or oddly shaped envelope
4. Title but no name on letter/package
5. No return address on letter/package

How to Handle a Suspect Package or Letter:

1. Don't shake or empty the contents
2. Keep hands away from mouth, nose, and eyes
3. If an unknown substance spills from the envelope, don't try to clean it up
4. Wash hands with soap and water
5. Report incident immediately to supervisor and to the Federal Protective Services at **1-877-437-7411** so they may notify appropriate authorities.

References: Homeland Security, the Federal Protective Service, and www.dhs.gov.

Effective Date: 07/01/16

Revised Date: 01/22/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 10/10/23, 10/21/24

Hazardous Materials

Purpose

To establish guidelines regarding the disposal of a range of substances that may be considered hazardous to the environment.

Policy

It is the policy of Pioneer Resources to be a good steward of the environment, to protect the persons served and to protect employees from exposure to hazardous materials to the extent possible.

Furthermore, it is the policy of PR to cooperate with local authorities who have expertise in the handling of hazardous materials.

Background Information / Definitions

Hazardous materials may refer to cleaners, solvents, paints, and various chemicals.

Hazardous materials may also include fluorescent light bulbs, appliances or components of appliances, computers and other electronic equipment, and cell phones, although this list is not meant to be exhaustive.

Procedures

Pioneer Resources' employees who are dealing with biohazards should consult the Blood-borne Infectious Diseases – Infection Control policy, and follow the procedures outlined.

1. Employees who are required to handle hazardous materials should follow the instructions provided by the manufacturer.
2. Storage of hazardous materials should be according to manufacturers' instructions.
3. Additionally, materials that are considered hazardous shall be stored in approved containers, and wherever possible should be kept under lock and key, or minimally, not stored in areas where there is regular access by the public or persons served.
4. Disposal of hazardous materials should be as directed by the Pioneer Resources Inc. "Blood-borne Infectious Diseases – Infection Control" policy, if applicable, or according to the guide published by the County of Muskegon. This guide is appended and is considered a part of this policy. Instructions for disposal of hazardous waste can also be found at <http://www.co.muskegon.mi.us/sustainability/index.html>

References: Blood-borne Infectious Diseases – Infection Control policy and Sharps – Use, Containment and Disposal of Policy.

Effective Date: 03/22/12

Revised Date: 02/02/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 10/10/23, 10/21/24

Flooding

Purpose

To provide guidance to staff and persons served in the event of a flood.

Policy

It is the policy of the organization to protect staff, residents, and program participants during a flooding situation or order to evacuate.

Background Information (Including Definition)

Order to Evacuate: Generally, a warning from local law enforcement or civil defense organization that flooding is expected to occur in a particular vicinity, communicated by radio, television, text message or siren.

Procedures

1. Staff should monitor local radio, television or Internet sites during severe weather, particularly thunderstorms or lengthy rain storms for advice from law enforcement or civil defense.
2. If an order to evacuate is issued for the vicinity of a residential site or program operated by Pioneer Resources, staff should, whenever possible:
 - a. Leave early enough to avoid being trapped by severe weather.
 - b. Follow recommended evacuation routes; do not take shortcuts.
 - c. Be alert for road hazards such as washed out bridges or roads or downed power lines.
 - d. Do not drive into flooded areas. It only takes a few inches of flowing water to disable driving.
 - e. Take emergency supplies or bags if available.
 - f. Secure the site by closing doors and windows.
 - g. Unplug electrical appliances. Refrigerators and freezers may be left running if building flooding is not predicted.
 - h. Turn off gas, water or electricity if recommended by authorities issuing the evacuation order.
 - i. Wear sturdy shoes and clothing that provides protection.
 - j. If there are insufficient vehicles available to evacuate everyone, contact the Pioneer Resources' transportation department immediately and request assistance. Pioneer Resources' fleet is listed with the County of Muskegon as a provider in the event of mass evacuations. After business hours, weekends or holidays – if a residential site must evacuate, other homes should be contacted to see if a vehicle is available to assist in the evacuation.
3. Staff may follow instructions for alternative living arrangements unless these areas are also included in an evacuation order or impossible to access due to evacuation routes.

4. If staff are not able to reach alternative living sites, they should proceed to the nearest shelter designated by the authorities. This will be a site on higher ground away from the flooding.
5. In the event of a flash flood and water entering a residence or program site operated by Pioneer Resources, staff should turn off electricity if possible, close doors, maintain all residents or program participants within eyesight, seek refuge on tables or beds if available, and call 911 for further instructions. Staff should alert emergency personnel to the presence of vulnerable individuals, if applicable.

Reference: Alternate Living Arrangements policy

Effective Date: 01/01/16

Revised Date: 01/24/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 10/10/23, 10/22/24

Power Failures & Generator Procedures

Purpose

To describe procedures to be followed in the event there is a power failure at an agency site.

Policy

It is the policy of the agency to protect and safeguard the well-being of persons served and staff through preparedness for emergencies. Occasionally through unforeseen circumstances, a property may lose electrical power. This is a particularly critical issue at resident occupied properties.

Background Information (Including Definition)

Power failure refers to the interruption of natural gas or electricity, generally from public utilities. Lack of phone or Internet is considered less of an emergency.

Procedures for Residential Settings

1. All specialized group homes are equipped with a generator that should automatically come on in the event of a power outage. Pioneer House is to follow the procedures described below. If the generator in a specialized home fails to function, that home is to follow these procedures as well.
2. When the supply of electricity or gas to a group home is interrupted, staff should immediately check to see that no residents have been placed in immediate jeopardy as a result of the power failure. Visual contact should be made with everyone by at

least one staff. If the group home is equipped with emergency lighting it should automatically come on when the power fails.

3. Staff should check to see if telephone service has been interrupted by the power outage. If not, staff should notify the Residential Manager/designee, Program Director or CEO.
4. Staff should ascertain the predicted length of the outage. The approximate length of the outage can be determined by accessing the Consumer Energy Outage Center, and/or the Outage Map: **1-800- 477-5050 or check their Website:**
<https://www.consumersenergy.com/outages/outage-center>
5. Staff should gather the supply of flashlights and other emergency supplies and utilize as needed.
6. If the supply of heat or air conditioning has been interrupted, staff should avoid opening and closing doors to the outside as much as possible to retain a constant temperature.
7. Staff should turn on a battery-operated radio to a local channel to see if information is being disseminated concerning the power outage. If telephone service is available, staff should check with utility companies concerning the potential duration of the outage.
8. Computers, televisions, stoves, and stereos should be placed in the OFF position to avoid any damage when power returns. Furnace should be on the lowest temperature setting.
9. In group homes, if the temperature drops or elevates to an unacceptable range, the manager/designee will contact maintenance personnel to obtain a generator. If a generator is unavailable, alternate shelter arrangements will be made (see procedures listed below for obtaining a generator).
10. Staff should take precautions to keep the persons served warm in the event of no heat by offering additional clothing and/or blankets. In the event of no air conditioning, staff should encourage people to dress lightly and not to engage in strenuous activities.
11. Staff will contact the Property Maintenance Supervisor (Mike 231-747-0128), if it appears the outage will last longer than six (6) hours or if there are other circumstances that may require a generator to be installed.
12. Certain circumstances will affect the amount of time a home/building may be without power. For example: If it is very late at night and residents are asleep, the situation may not be urgent, and the property can wait longer than six hours. On the other hand, if it is cold outside and the furnace is compromised, a generator may be required in less than six hours. Other circumstances to consider in regarding how long to wait before hooking up a generator are:
 - a. MDHHS licensing requires that adult foster care homes maintain a temperature

- range of 68-72 degrees Fahrenheit.
- b. Extreme heat or cold may adversely affect the persons served who have medical concerns.
 - c. If a resident is required to wear oxygen, and power is needed to run the machine.
13. Staff and the Property Maintenance Supervisor will decide what the appropriate amount of time is to deliver a portable generator and install it.
- a. Maintenance technicians will install the generator and start it. They will also check to make sure power is being supplied to the property (NOTE: generators do not have the capacity to run all electrical devices at a property; only critical items and outlets will be powered).
 - b. Staff will call the Property Maintenance Supervisor when the power has been fully restored.
 - c. When power is fully restored, the Property Maintenance Supervisor will be responsible for removing the portable generator and returning it to storage.
 - d. The calling hierarchy to follow when trying to access a Generator:
 - i. **Mike Rivenbark, Property Maint. Sup.: 231-747-0128 (Call 1st)**
 - ii. **Gregory Sischo, Director of Business: 231-730-2221 (Call 2nd)**
14. This policy will be reviewed with staff on an annual basis. Example situations will be used to test staff reactions and ability to follow procedures.

Procedures for Program Sites

1. When the supply of electricity or gas to a program site is interrupted, staff should immediately check to see that no participants have been placed in jeopardy as a result. Visual contact should be made with everyone by at least one member of staff. If the program site is equipped with emergency lighting it should automatically come on when the power fails.
2. Staff should check to see if telephone service has been interrupted. If not, staff should notify the Program Director if not on site or the CEO.
3. Staff should gather the supply of flashlights and other emergency supplies and utilize as needed. Since most programs occur during daylight hours, there should be ample ambient light in most spaces.
4. If the supply of heat or air conditioning has been interrupted, staff should avoid opening and closing doors to the outside as much as possible to retain temperatures.
5. Staff should turn on a battery-operated radio to a local channel to see if information is being disseminated concerning the outage.
6. Computers, televisions, stoves, and other appliances should be placed in the OFF position to avoid damage when power returns. Furnaces should be set at the lowest temperature.
7. Staff should take precautions to keep people warm in the event of no heat by offering

additional clothing or blankets. In the event of no air conditioning, staff should encourage people to dress lightly and not to engage in strenuous activities.

8. If the news via radio or news obtained by contracting utilities indicates that a utility may be out for more than two hours, staff should contact the Transportation department to see if transportation home can be arranged for participants who rely on agency or public transportation. If transportation cannot be arranged, staff should contact the residences of persons served, notifying them of the outage and determining if parents or residential providers can pick up participants and take them home or to a place of safety. If not, staff should help shelter in place.
9. In many cases, participants may choose to leave on their own. Staff should be knowledgeable of those who are able to do so or for whom independent travel is specified in the Person-Centered Plan. If the outage is due to a storm or natural disaster and independent travel appears risky, staff should discourage a participant from leaving and help them shelter in place. If a participant ignores the warning, staff should contact the participant's home or supports coordinator if possible.

Effective Date: 01/01/16

Revised Date: 12/27/23

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 10/10/23, 10/22/24

Emergency Systems – Testing and Maintenance

Purpose

To define Pioneer Resources' plan regarding the routine testing and maintenance of emergency systems.

Policy

It is the policy of Pioneer Resources to test and maintain emergency systems according to manufacturers' recommendations, licensing requirements, partner contracts, CARF guidelines, LRE requirements, or other governmental rules or regulations.

Background Information (Including Definition)

Emergency equipment/systems include, but are not necessarily limited to:

- Carbon monoxide detectors
- Emergency lighting
- Fire extinguishers
- Internal sprinkler systems
- Smoke detectors

- AED units

Procedures

1. Emergency systems maintenance is to be completed per manufacturer instructions.
2. Emergency systems checks are to be completed at least monthly.
3. Emergency systems checks are to be documented on the appropriate log.
4. Any issues found during the test are to be immediately reported to the Director, Manager and/or Supervisor of the department.

Effective: 03/21/23

Revised:

Reviewed: 11/17/23, 10/25/24

Guidelines for Administrative Operations

Background

When utilities fail, the situation may be just irritating or lead to loss of productivity. At other times, it may become dangerous. Much depends on the duration of the power outage and weather conditions. The Risk Management Committee developed these guidelines to assist with decision making. It was the belief of the committee that a strict policy could not be written since every situation is different. The following are elements that should go into decision making. Each department head or Director should make a decision for the individuals reporting to him or her, taking these items into consideration.

Procedures

Electrical Outage

1. Someone should attempt to contact the power company for an estimate of restoration.
2. There is usually enough ambient light in a Pioneer Resources building that small tasks can be completed, e.g. filing, cleaning, etc. It is not unreasonable to ask an employee to perform such work for one to two hours.
3. Flashlights or other battery powered devices should be kept on site to access those areas that may not have sufficient ambient light, such as restrooms.
4. If the temperature goes above 80 degrees or below 65 degrees, employees should be given the choice to leave work with no adverse consequences.
5. Hourly staff who leave due to a power outage will not be paid for time away from work unless they choose to use paid time off.
6. If an hourly staff person is given permission to leave but chooses to stay, it is up to the department head or Director to decide if the employee can be productive and safe.

Internet Outage

1. Usually the Internet provider will be contacted for an estimate of restoration.
2. This is considered an inconvenience, not a reason for leaving work. All agency cell phones offer Hot Spot to internet connection that can be utilized during outages. Department heads or Directors should assign work that does not require an Internet connection.
3. Natural Gas Outage While rare, it could happen. The same guidelines for temperature apply.

Effective Date: 07/27/04

Reviewed/Revised Date: 01/31/19, 01/14/21, 09/27/21

Reviewed Date: 09/26/22, 11/02/2, 10/21/24

Closures and/or Inclement Weather

Purpose

To provide a uniform procedure for alerting and deploying staff when weather conditions may be harmful to staff, to ensure employee safety, and/or to determine a need for any program/service closure.

Policy

It is the policy of Pioneer Resources, Inc. that Personnel, participants, and property be protected from harmful or damaging weather in as much as it is possible. It is also defined that programs and services of Pioneer Resources operate to meet participant needs unless there is a cause for closure.

Procedures for closures due to inclement weather:

1. The CEO will activate the Inclement Weather Policy for Pioneer Resources, Inc. if, in consultation with the Director of Business, they determine if the weather is threatening enough as to cause harm or injury.
2. The activation of the Inclement Weather Policy will take place no later than 6:00 AM of the day in question or as soon as a reasonable decision can be made for safety.
3. The CEO will have the ability to close all, or part of the company based on the circumstances.
4. Inclement weather conditions: transportation will be cancelled due to the school systems where transportation is being provided. **PACE will define if they cancel transportation for their program.** All agency programs will be maintained open and Directors will work to maintain staffing to meet needs. If FT staff are not needed at the

program, they may be required to utilize PTO. Staff will not transport any clients unless permitted by the supervisor.

5. Weather Crisis: In the event that the agency closes due to the weather, all staff will be notified via a text and/or email. Salary staff can work remotely and are asked not to report to work sites for their own safety. All hourly employees who are asked to stay home and if displaced from their scheduled work due to closure, will be provided the closure pay provided per the Inclement Weather policy up to the allowable use as available within their service area. Employees may be required to utilize PTO for any remaining hours not covered by Inclement Weather policy. Employees that are deemed essential must report to work, or if they are unable to drive due to the weather, they must contact the Property and Maintenance Supervisor and/or Director of Business, who will assist in arranging transportation.
 - i. Essential staff include: Director of Business, Property Maintenance Supervisor, Maintenance staff, Snow Plow staff, Fleet Manager and Residential staff at group homes and SIL settings.
 - ii. CLS staff will reschedule with their participants within the same week if possible. If client has an immediate need staff is to contact the program Director to discuss how to meet the need.
6. The CEO or appointed designee will notify local media outlets as appropriate.
7. The CEO or appointed designee will notify the Directors/supervisors who in turn will notify hourly employees under their direction.
8. This policy will repeat for each day in question. If the Inclement Weather Policy is not activated, employees must return to work according to their normal schedule.

Procedures for closures due to other means:

Directors of service areas will contact the CEO to discuss the need for a closure of a specific service, route, area or function of programming and cause for closure.

1. The Director of service area will provide to the CEO the reason for suggested close and the financial loss of the temporary closure.
2. **CEO will determine the feasibility of closure.**
3. Directors will communicate to funders, persons served and others involved on the status of the closure.
4. Directors will work to resume services as soon as feasible.

5. Employees in the designated area, if displaced from their scheduled work due to closure, will be provided the closure pay provided per the Inclement Weather policy as available within their service area.

Effective Date: 05/01/19

Revised Date: 04/02/19, 10/03/21

Reviewed Date: 09/29/20, 09/27/21, 09/23/22, 10/18/23, 10/21/24

Lifts and Transfers

Purpose

To describe the policy on proper lift/transfer procedures that are to be used by all group home staff or program staff assisting with personal care or transfers.

Policy

It is the policy of Pioneer Resources that relevant staff shall receive initial, annual and PRN training on proper lift/transfer procedures and that these procedures will be utilized at all times for the safety of both persons served and staff.

Background Information (Including Definition)

Physical Lift/Transfer: One or two staff physically lift/transfer a person from one position to another.

Mechanical Lift: A mechanical or hydraulic device used to safely lift/transfer a person from one position to another.

Procedures

1. Newly hired staff are to receive their official lift/transfer training prior to working a regular shift.
2. Staff must use the mechanical lift for all *routine* lifts/transfers which involve a resident or program participant who cannot bear weight and pivot with the assistance of staff.
3. During an emergency evacuation where timeliness is essential, staff may use a two person, top and bottom lift to transfer someone into position for evacuation purposes. Staff should always follow proper lift/transfer procedures.

4. Should the mechanical lift malfunction, staff may use a two person, top and bottom lift to transfer someone, always following proper lift/transfer procedures. Notify the residential manager, site supervisor, program director, or on call person immediately concerning a non-working mechanical lift so it can be repaired as soon as possible.

References: Lift/Transfer training.

Effective Date: 06/11/01

Reviewed/Revised Date: 03/26/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Water and Boating Safety

Purpose

The purpose is to set guidelines for the safety of the staff and campers participating in boating activities.

Activity Leader Qualifications

An aquatic lifeguard/supervisor shall be an adult who has satisfactorily completed training and certification which is equivalent to the requirements for advanced lifesaving and cardiopulmonary resuscitation as set forth in the American National Red Cross manuals.

An aquatic observer shall be not less than 18 years of age and shall have satisfactorily completed training which is equivalent to the requirements of the basic water safety course as set forth in the American National Red Cross manuals.

Activity Staff-to-Camper-Ratio

An aquatic supervisor and 1 aquatic observer shall be on duty for 20 or fewer campers involved in an aquatic activity. One additional aquatic observer shall be on duty for every 3 campers per the 1:3 ratios.

Classification and Limitations of Campers

All campers will be given instruction to advance their skills in boating and swimming. All campers will be given a swim test on the first day of camp (weather permitting) to determine swimming level and area allowed to swim in. Shallow water only will be allowed unless a swim test determined by camp lifeguard is passed satisfactory. If this is not the case the deep end will be allowed wearing a lifejacket and having a staff accompany them, keeping with the 1:3 ratios. All campers will be instructed in the rules of the waterfront, boating and the Lost Swimmer or Boater Procedure

Inspection of the Activity Area

The aquatic supervisor will determine if the area is safe for waterfront activities by; watching the weather and removing any sharp objects around the beach area. The supervisor will be responsible for making sure all safety equipment is available and in proper working order.

Inspection and Maintenance of Equipment

The aquatic staff will provide safety inspections for all equipment before programs begin. Staff is responsible for maintaining aquatic equipment and reporting broken equipment to the Director. Ex: PFD, first aid kit, whistles and throwing device.

Safety Precautions

All staff is responsible for keeping participants safe during aquatic activities. All participants must wear a PFD while boating. Instructions and guidelines will be provided to all participants before engaging in the activity. Lifeguards will be required to be certified in first aid and CPR.

Procedures

The facilitator will determine how many people will be allowed to boat at one time and cover all safety, emergency rules. Participants must be checked in and out of the boating activity. Communicate with the aquatic supervisor and lifeguards for a safe and fun experience.

Effective: 09/30/20

Revised:

Reviewed: 09/30/20, 09/07/21, 09/23/22, 09/11/24

Service Animals

Purpose

Pioneer Resources is committed to reasonably accommodating persons with disabilities who require the assistance of service animals.

Policy

It is the policy of Pioneer Resources to reasonably accommodate the use of a service animal by a person with disabilities when said person is utilizing services provided by the agency.

Procedures

Service animals are allowed in any of the facilities or vehicles that Pioneer Resources operates and provides services in. The agency will transport any service animal that demonstrates controlled behavior at all times. If a service animal poses a safety threat to any employee or participant, Pioneer Resources, Inc. reserves the right to ask that the service animal be

removed from the premises.

If there is a question as to whether or not an animal is a service animal, the employee should ask only the following question: "I need to ask you if this is a defined service animal?"

If there is further questioning/concern that the animal is not a service animal, the employee should contact Human Resources or their supervisor immediately.

Effective Date: 02/01/20

Revised Date:

Review Date: 9/17/20, 09/07/21, 09/27/22, 10/16/23 10/21/24

Information Systems Security

Purpose and Procedures

To ensure that Pioneer Resources maintains compliance with CARF standard 1.J.3.d the following procedures will be followed:

1. It is the policy of Pioneer Resources to treat all transmissions over the agency's network as private; however, the use of the corporate network and computing resources is strictly by permission of Pioneer Resources and privacy is not guaranteed.
2. All users of Pioneer Resources' computing and network resources must be aware that privacy of electronic communication and/or stored data files may be routinely compromised by:
 - a. Inadvertent capture of transmission contents during network performance monitoring or troubleshooting.
 - b. Uncovering of transmission contents in computer memory within the store-and-forward systems that move data through the network.
 - c. Other maintenance activities that trap, copy, archive, or otherwise unintentionally preserve portions of messages within company networks.
3. If the contracted IT Department/ Pioneer Resources inadvertently discover messages or data files within its network that leads it to suspect the presence of illegal activities or activities that violate Pioneer Resources policies, it will be free to use that discovered information to pursue investigations or to inform the appropriate authorities.
4. Pioneer Resources reserves the right to take whatever steps are necessary to investigate possible network security threats, suspected violations of agency regulations, or to assist appropriate authorities to investigate suspected illegal activities. On rare occasions, and with the approval of the Chief Executive Officer and/or their

designee, files belonging to individuals and/or communications between individuals may be captured, logged, and examined.

5. Ultimate Software has the capability for an administrator to see an audit trail of who & when an end-user changed an employee or client record.

Data Export and Transfer Capabilities

1. Data that must be moved within Pioneer Resources' network is to be transferred only via business provided secure transfer mechanisms (e.g., encrypted USB keys, file shares, email etc.).
2. Pioneer Resources will provide you with systems or devices that fit this purpose. You must not use other mechanisms to handle in scope data. This includes the use of non-business provided USB drives or mobile devices.
3. If you have a question regarding use of a transfer mechanism, or it does not meet your business purpose you must raise this with your department head.
4. If you have been assigned the ability to work remotely you must take extra precaution to ensure that data is appropriately handled. Seek guidance from your immediate supervisor if you are unsure as to your responsibilities.

Decommissioning of Physical Hardware and Data Destruction

1. Equipment that contains electronic storage (physical disks, tape cartridge, CDs, printer ribbons, flash drives, printer and copier hard drives, etc.) to store data, which is to be discontinued, must have all sensitive data deemed unreadable and unrecoverable before the device can be sent to salvage. The following methods are authorized for this purpose:
 - a. Overwriting Magnetic Media - Overwriting uses a program to write binary data sector by sector onto the media that requires sanitization.
 - b. Degaussing - Degaussing consists of using strong magnets or electric degaussing equipment to magnetically scramble the data on a hard drive into an unrecoverable state.
 - c. Physical Destruction – implies complete destruction of media by means of crushing or disassembling the asset and ensuring no data can be extracted or recreated.
2. All other IT equipment which is to be discontinued will just be sent to Verdant for clearing and insurances that any information reserved are held on item. Then item shall be sent to salvage.

Protection From Malicious Activities

1. Any activities with the intention to create and/or distribute malicious programs into Pioneer Resources' networks (e.g., viruses, worms, Trojan horse's logic bombs, etc.) are prohibited.

2. Pioneer Resources utilizes a hardware firewall (Cisco Meraki MX64 & MX84) that monitors all incoming network traffic.
3. Pioneer Resources employ a service within manage and scan all incoming email for spam and virus content. It is installed and configured to scan and update automatically on every server and workstation.
4. If a virus is detected on your workstation contact the Verdant IT Department immediately.
5. New employees with access to a company email must be trained in cyber-security before they are allowed use of said email.
 - a. Cyber-security training
 - b. All email users must take a training every year as a refresher.
 - c. A copy of completed training is to be held by Next IT and in HR folders

Effective Date: 09/01/21

Revised Date:

Reviewed Date: 09/23/22, 10/16/23, 10/21/24

Licensing and Program Regulatory

Subpoenas and Warrants

Purpose

To give guidance to staff of Pioneer Resources in responding to subpoenas and search warrants.

Policy

It is the policy of Pioneer Resources, Inc. to:

1. Comply with applicable federal and state laws and ordinances, including the Michigan Mental Health Code.
2. Protect resident and or participant of services confidentiality and privileged communications, releasing confidential information only with proper authorization.

Background Information (Including Definition)

Subpoena

1. A subpoena is a directive to produce described documents or other items of tangible property in the possession or control of the party served.
2. A subpoena may also be an order for a person to appear and produce documents or provide testimony (witness subpoena).
3. Subpoenas may be issued by attorneys or courts in connection with civil litigation, and may also be issued by some federal and state governmental agencies.
4. Rules governing subpoenas provide the party served with a definite time to respond and include methods for challenging the subpoena's validity based on such factors as the method of service or the relevance of the items sought.

Search Warrant

1. A search warrant is an order issued by a magistrate or judge authorizing law enforcement officers to search a particular place for specific documents or tangible property or for types of documents or property.
2. Search warrants are utilized in criminal investigations and are ordinarily granted to government investigators without notice to either the party being investigated or the party whose property is to be searched.
3. The only requirement for a search warrant is that the government establishes "probable cause" to believe that valid grounds exist to support the search. Probable cause is commonly established by an affidavit prepared by a government investigator.

Procedures

Subpoena: If a subpoena is served at a facility operated by Pioneer Resources, the employee should:

1. Request Identification.

If a law enforcement officer attempts to serve a subpoena at a facility owned or operated by Pioneer Resources, then staff shall ask for proper identification from law enforcement officers.

2. If the individual is named -
 - a. Resident and or participant of services Subpoena: Staff person may attempt to receive the subpoena on their behalf, and immediately notify their supervisor and the Recipient Rights Officer at Community Mental Health Agency and/or contracting entity.
 - b. Employee Subpoena and employee is present: Request employee to speak with the officer.
 - c. Employee Subpoena and employee is not present: Staff should direct the officer

to the administrative building at 1145 Wesley Ave. Muskegon MI 49442 If a subpoena is served at the administrative office and names a particular employee, who is not present, then an administrative staff person may provide the officer with the home address of the employee named in the subpoena.

Search Warrant Enforcement:

If a law enforcement officer attempts to enforce a search warrant at a facility owned or operated by Pioneer Resources, Inc., then staff shall:

1. Ask for proper identification from law enforcement officers
2. Read the search warrant and attempt to determine the scope of the search and jurisdiction rights, e.g. is it limited to certain areas or types of property.
3. Notify the supervisor immediately and allow the officer(s) to proceed without interference.
4. The supervisor shall notify the CEO of Pioneer Resources as soon as possible. The CEO may choose to consult legal counsel and/or the Board of Directors as appropriate.

Resident and or participant of services presence or property

If the search involves a site serving residents and or participants of services during which residents and or participants of services were present or any property of a resident and or participant of services then the CEO shall notify the Recipient Rights Officer at local Community Mental Health Agency and/or the Contracting Entity.

References: CMH Policy #04-005

Effective: 01/02/08

Revised: 05/14/19

Reviewed: 05/14/19, 9/23/20, 9/7/21, 9/23/22, 10/16/23, 10/21/24

Physical Health of Person's Served (Reporting)

Purpose

To establish and maintain a practice of properly noting and reporting signs of injury or disease among persons served by the agency

Policy

It is the policy of the agency that any disease or suspicion of disease, and all injuries, both accountable and unaccountable, will be duly noted for appropriate action.

Procedures

1. Staff will be alert for signs of injury. While assisting with personal care, including clothing & brief changes, toileting, and bathing provides the ideal opportunity for observation of persons served for signs of changes in condition, such as bruises, bumps, limping, etc. A check must be done of proper logs or incident reports for possible explanation of any injuries discovered.
2. Unexplained injuries or inadequately logged or reported responses shall be verbally reported to the residential manager, program supervisor or designee immediately and reported on an incident report. If reporting is relative to the resident of a residential setting, any new injury or illness must be noted in the home log and the individual's chart.
3. Emergencies should receive immediate attention by notifying the residential manager, program supervisor or designee.

Effective Date: 03/29/01

Reviewed/Revised Date: 12/19/18

Reviewed Date: 12/19/18, 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Weight (Resident)

Purpose

To establish a policy and procedure for obtaining the weight of all residents living in a licensed adult foster care setting.

Policy

It is the policy of this home to weigh each person at least monthly.

Procedures

1. All residents will have a base weight taken and recorded at the time of admission to the home.
2. Weights are to be obtained at least monthly on all residents and recorded on Weight records in individual charts and/or on Medication Administration Records (MARs).
3. For accuracy purposes, weigh approximately the same time of day each month with the same amount/type of clothing.
4. Encourage the person to remain as still as possible while on the scale to receive an accurate weight.
5. When weighing someone on a wheelchair scale be sure to first:

- a. Weigh the wheelchair itself, along with any "extras" such as lap tray, foot pedals, etc.
 - b. Weigh the person while in the wheelchair.
 - c. Deduct the wheelchair weight from the total.
6. If there is a difference of five or more pounds from the last weight taken, the person should be weighed again within five days.

Effective Date: 03/29/01

Revised Date: 12/19/18

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Diets

Purpose

To ensure that the nutritional needs are met for each person living in a licensed adult foster care group home are met.

Policy

Pioneer Resources, Inc. staff will follow all diets as prescribed by a physician.

Background Information (Including Definition)

None.

Procedures

1. Each person living in a licensed group home will be provided a minimum of three regular, nutritious meals each day.
2. Meals shall be of proper form, consistency and temperature.
3. Per licensing regulations – not more than 14 hours shall lapse between the evening and morning meal. Residents can choose when they want to eat, however, home staff must make sure to *offer* the morning meal within the 14 hour time frame.
4. Each person living in a licensed group home should have a diet order written by a physician.
5. Prescribed diets will be followed as ordered.
6. If there is no diet order prescribed by a physician, home staff will offer the person a general diet.
7. Diet orders will be maintained in the person's chart.

8. If a person served needs assistance with eating or drinking, that information will be entered into his or her individual plan of service (IPOS) and a program, guideline or instructional sheet should be made available for home staff to follow.
9. Menus will be written and posted at least one week in advance.
10. Any change or substitution made to the posted menu shall be noted and considered as part of the original menu.
11. If a person served doesn't like what is on the menu for a specific meal, he or she can choose something from the "Alternate Meal Choices" list, which is posted in or near the kitchen.
12. Records of menus, including special diets, are to be maintained on the premises for a minimum of one year, and shall be made available for review when requested by licensing personnel.

References: Michigan Licensing and Regulatory Affairs (LARA), and Licensing Rules for Adult Foster Care Small Group Homes.

Effective Date: 08/01/96

Reviewed/Revised Date: 01/21/19

Reviewed Date: 01/21/19, 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Medications and Treatments Monitoring & Management

Purpose

To establish procedures for monitoring and managing medications and treatments prescribed for individuals served by Pioneer Resources.

Policy

It is the policy of Pioneer Resources that medications and treatments prescribed for individuals receiving services will be managed in a safe and effective manner.

Background Information (Including Definition)

1. **Administering Medications:** Administering a prescribed medication and dosage, via the prescribed route, to the appropriate resident and or participant of services at the time indicated it is to be given; within one half hour preceding and following the designated time.
2. **Administering Treatments:** Applying a prescribed treatment to the affected area(s) of the appropriate resident and or participant of services at the time it is designated to be given, within one half hour preceding and following the designated time.

3. **Documentation:** Information recorded on the Medication Administration Record (MAR) after administering a medication or treatment.
4. **Group Home:** A licensed Adult Foster Care (AFC) residential setting
5. **HP:** Health Professional – a Physician, Physician's Assistant (PA), Nurse Practitioner (NP) or Registered Nurse (RN) licensed in Michigan.
6. **HW:** HealthWest, formerly known as Community Mental Health/Muskegon.
7. **MAR - Medication Administration Record:** The Medication Administration Record (MAR) lists the name of current medications or treatments, dose, route and time to be administered.
8. **Med Person:** The trained staff assigned to administer medications and treatments during the shift.
9. **Med Time:** The time of day the medication or treatment is to be administered. Unless otherwise ordered, the time period in which medications or treatments may be administered is 30 minutes before through 30 minutes after the prescribed hour.
10. **PRN:** A medication or treatment which is administered on an "as needed" basis.
11. **Program Participant:** An individual receiving services provided by Pioneer Resources.
12. **Resident:** An individual receiving services provided by Pioneer Resources, Inc. in a residential setting.

Procedures

1. Staff Credentials and Competencies

- a. All medications and treatments are administered by trained staff.
- b. Prior to handling and administering medications and treatments staff must:
 - i. Successfully complete "medication administration" training provided by the contract agency.
 - ii. Successfully complete resident/program participant specific medication and treatment training provided by the residential/program supervisor or designee.
 - iii. Update training for medication administration will be completed with all group home staff not less than once each year.
 - iv. Proof of training will be maintained in personnel files.

2. Physician Orders and Guardian Authorizations

- a. No medication or treatment will be administered without a current physician order. This order will be filed in the individual's chart and stored in the group home or program site.
- b. No medication or treatment will be administered without a current guardian authorization, if applicable. This authorization will be filed in the individual's chart and stored at the group home or program site.

3. Safe Handling of Medications and Treatments – Receiving and Dispensing –

Group Homes

- a. Medications and treatments are delivered by the contract pharmacy.
- b. Staff inventory the medications and treatments after delivery.
- c. Any discrepancy between the invoice and actual medications and treatments delivered are to be brought to the attention of the residential supervisor or designee before the end of the shift, and an Incident Report is to be completed.
- d. The residential manager or designee will contact the pharmacy on the next business day.
- e. Medications and treatments are to be secured in a locked cabinet or drawer after the inventory has been completed.

4. Safe Handling of Medications and Treatments – Receiving and Dispensing – Program Sites

- a. Medications are generally delivered by group home staff or family/guardian. If a program participant wishes to hold and self-dispense medications or treatments needed during program hours, that person must meet criteria as outlined in #9 – “Self-Administration of Medications or Treatments”.
- b. Program staff inventory the medications upon delivery. Any discrepancy between the invoice and the actual medication is to be brought to the attention of the site supervisor or program director before the end of the work day, and an Incident Report is to be completed. The site supervisor or program director will contact the group home or family/guardian that same day.
- c. Medications and treatments are secured in locked cabinets or drawers after the inventory has been completed.

5. Safe Handling of Medications and Treatments – Receiving and Delivering – Transportation

- a. Transportation staff do not administer medications or treatments.
- b. Drivers providing transportation services to LifeCircles/Pace will follow that agency’s policies and procedures regarding assisting the individuals served by that program in picking up and taking home their medications or treatments from the contract pharmacy.

6. Medication and Treatment Storage Requirements

- a. All medications and treatments will be stored per manufacturer, or health professional recommendation.
- b. All medications and treatments not requiring refrigeration will be stored in locked cabinets or drawers.
- c. Locked medicine cabinets or drawers will be in a location within the group home or program site which provides for cool, dry storage and protection from excess heat or light sources.

- d. All medications and treatments requiring refrigeration will be stored in a locked box and placed in a refrigerator in the group home or program site.
- e. Keys for the medication storage cabinets, drawers and locked boxes shall be secured at all times so as to ensure residents or program participants do not have easy access to them.

7. Administering Medications and Treatments -via EMAR or Paper MAR

Trained staff administer medication by following the “6 R's”:

- a. Right Medication
- b. Right Dosage
- c. Right Person
- d. Right Time
- e. Right Route
- f. Right Documentation

8. Documentation

- a. EMAR: Medications and Treatments are scanned into computer and an electronic signature is used after administration
- b. Paper MAR: The Medication Administration Record (MAR) is to be initialed by the assigned “med person” immediately **after** administering medications and treatments.
- c. Paper MAR: On the first work day every month, the bottom of each person’s MAR must be fully signed by all staff who are trained to administer medications and treatments to that person. This will require multiple initials as most MARs have more than one page.

9. Safe Disposal of Medications

- a. If a medication becomes contaminated it is to be placed in an envelope or plastic bag. The person’s name, medication name and date is to be written on the envelope or plastic bag, and then locked in the medication cabinet or drawer.
- b. The supervisor or designee is to be notified, and an Incident Report completed.
- c. Discontinued, expired, excess or unused medications shall be disposed of by the residential manager or designee at a local medication disposal drop-off site.

10. Self-Administration of Medications and Treatments; If a resident of a group home, or a program participant wishes to self-administer his or her medications and treatments:

- a. This information must be included in the person’s Individual Plan of Service (IPOS).
- b. Written procedures/guidelines must be in place regarding safe medication or treatment administration, storage, and transportation.

11. Purchase of Medications and Treatments, and Shortages

- a. Routine medications are obtained from the contract pharmacy.
- b. Other pharmacies may be used to obtain medications which are newly prescribed, or medications which were not delivered by contract pharmacy in time to administer.
- c. Medications are either on “auto-delivery” from the pharmacy, or the residential manager/designee places an order with the pharmacy by telephone or fax.
- d. In the event of a medication shortage home staff shall contact the residential manager or designee. The pharmacy shall be contacted, and if unable to deliver the medication then the residential manager/designee will attempt to obtain the medication through a local pharmacy. A list of local pharmacies used, along with telephone number and address shall be maintained in the home.
- e. If unable to obtain the medication by the next prescribed administration time, the contract RN or prescribing physician shall be notified by the residential manager/designee, and an Incident Report will be completed.

12. Required Transportation and Delivery of Medications and Treatment – Group Homes

- a. If medications or treatments for an individual living in a group home are needed while the person is attending a day activity program, home staff will transport the medication or treatment in the original packaging and deliver it to the assigned med person at the program site.
- b. A signed receipt must be obtained and filed in the group home.

13. Off-Site Use of Medications and Treatments

- a. If a resident or program participant will need medication while in the community, staff who accompany the individual will bring the medication in the original packaging and administer at the ordered time.
- b. Special storage requirements (temperature, light, etc.) will be followed as required.

14. Documentation of the Benefits of Lack Thereof of “As Needed” (PRN) Medications

- a. Staff will obtain authorization for the symptoms occurring to ensure correct PRN is given
- b. Documentation on MAR will include the following information:
 - i. Date
 - ii. Time PRN was administered
 - iii. Medication and dosage
 - iv. Injection site (IA)
 - v. Reason given
 - vi. Results or response, or lack thereof (60 minutes after administering PRN)
 - vii. Time noted

viii. Initials of the staff administering the PRN

15. Complying with Applicable Laws and Regulations Regulated to the Delivery of Medications and Controlled Substances

- a. Pioneer Resources, Inc. follows the regulations set forth by the contract agency/agencies, as well as the DHHS LARA licensing rules and regulations for adult foster care homes.
- b. Annual Physician's Orders are incorporated into the person's overall Individual Plan of Service (IPOS).
- c. The contract pharmacy informs the home of controlled substances and sends a count sheet with the medication when it is delivered.

16. Documentation/Confirmation for Consent for each Medication that is Administered

- a. An annual consent to administer medication is signed by the individual served or guardian (if applicable).
- b. This authorization will be filed in the individual's chart, and stored at the group home or program site.

17. Integration of Prescribed Medications into the Individual Plan of Service (IPOS) of an Individual Served by Pioneer Resources

- a. Prescribed medications are reviewed annually by the prescribing professional and listed on the annual health review form.
- b. Prescribed medications are reviewed at least annually by the clinical team during the Individual Plan of Service (IPOS) planning process.
- c. Prescribed medications are listed on the individual's Medication Administration Record (MAR).
- d. Prescribed medications are administered as required.

18. Identification, Documentation and Reporting of Reactions to Medications and Medication Errors, including to the Prescribing Professional

- a. Identifying Reactions:
 - i. Symptoms of an adverse reaction to a medication may include changes in breathing, nausea, pain, diarrhea or loose stools; swelling, unusual color to skin, rash, or a change in behavior.
 - ii. The medication is to be stopped if it is believed an adverse reaction is occurring.
 - iii. The contact RN or prescribing professional will be contacted and directions followed.
 - iv. The following documentation will be completed – progress note, Incident Report, and a memo to all staff to inform them of the reaction.
 - v. Incident Reports concerning medication reactions will be reviewed at least

annually.

- b. Identifying Medication Errors A medication error has occurred if:
 - i. The medication was not administered at the correct time.
 - ii. The medication was not administered by the correct route.
 - iii. The medication was not administered in the correct dosage.
 - iv. The medication was administered to the wrong person.
 - v. The wrong medication was administered.
 - vi. The medication was administered for the wrong reason.
 - vii. The medication was not signed for as having been administered on the MAR.
 - viii. The medication was signed for as having been administered, however, evidence is present which proves the medication was not administered.
 - ix. The medication was signed as having been administered on the wrong date on the MAR.
 - x. The medication was not available to be administered.
- c. **Reporting Medication Errors:**
 - i. Staff are to contact the residential manager/program supervisor, or designee and follow her or his directions.
 - ii. An Incident Report will be completed.
 - iii. The residential manager/program supervisor will take corrective action measures in an attempt to avoid additional errors being made.

19. Medication-Related Emergency

- a. In the event of a medication-related emergency the Poison Control Center (1-800-222-1222) or 9-1-1 will be contacted and instructions followed.
- b. Information regarding the medication-related emergency (name of medication, dosage, time taken, etc.) is to be relayed to Poison Control or 9-1-1 personnel.
- c. Vomiting will not be induced unless instructed to do so by Poison Control or 9-1-1 personnel.

20. Hour Availability of Medical Consultation for Medication-Related Issues

- a. In the event of a life-threatening issue staff are to call 9-1-1.
- b. Medical consultation for non-life threatening medication-related issues is available from 7:00am - 11:00pm. The residential manager will be in charge of assessing non-life threatening medication-related issues outside of these hours.
- c. The calling hierarchy for medication-related issues is:
 - i. RN or other health professional from the contract agency
 - ii. Prescribing professional
 - iii. Contract Pharmacy. Additional resources include:
 - iv. Local pharmacies
 - v. Local hospital emergency departments
 - vi. The Poison Control Center

- d. Telephone numbers for all medical resources are posted in each group home.

21. Medication Packaging and Labeling, including Over the Counter Medication

- a. All medications are to be kept in the original packaging.
- b. Medication labels must have the name of the individual, name of medication, dosage, route, and time to be administered.
- c. Staff must take care to make sure the label has all necessary information, and matches the information on the MAR. If the label and MAR do not match, staff are not to administer the medication. The residential manager or designee is to be contacted and instructions followed.
- d. The contract agency's RN, prescribing professional or pharmacy will be contacted regarding the discrepancy, and an Incident Report will be completed.

22. Medication Refusals

- a. Individuals have the right to refuse to take medications.
- b. Individuals will be encouraged to take prescribed medications, and reminded of the health reasons for taking medications.
- c. If an individual continues to refuse to take medications, then the wasted medications are to be bagged, labeled and secured in the locked medicine cabinet or drawer for disposal.
- d. The residential manager/program supervisor or designee is to be notified and an Incident Report completed.

23. Medication Information – Teaching Sheets, Group Homes

Each prescribed medication will have a medication information sheet kept on file for staff review. This information includes:

- a. Name and dosage of medication
- b. Directions for use
- c. Prescribing professional
- d. Pharmacist
- e. Medication Warnings
- f. Medication Uses
- g. How to Use Medication
- h. Side Effects

24. Prescription Orders

Staff may not accept verbal medication orders. All orders must be in writing by the prescribing professional.

References: State of Michigan Department of Health and Human Services, Licensing and Regulatory Affairs (LARA), Bureau of Children and Adult Licensing, Licensing Rules for Adult Foster Care Small Group Homes (12 or less), R 400.14304(m) – Resident rights, licensee responsibilities and R 400.14312, Resident Medications; HealthWest, Appendix A, Medication Administration Guidelines; HealthWest, Appendix B, List of Approved Medical Abbreviations and Symbols; HealthWest, Class Description, Medication Administration; Office of National Drug Control Policy, Federal Guidelines, Proper Disposal of Prescription Drugs (October 2009), website – www.WhiteHouseDrugPolicy.gov; Pioneer Resources' Policies and Procedures, Medication, Treatment or Charting Errors.

Effective Date: 02/18/13

Revised Date: 05/26/19, 10/22/24

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Medical Emergencies

Purpose

To establish the procedure for handling medical emergencies.

Policy

All staff working in residential settings or program sites shall be sufficiently trained to deal with medical emergencies, within reason. No expectation is established as a result of this policy that staff will have the same degree of expertise as paramedics or 911 responders.

Procedures

1. Staff working in residential settings or program sites shall follow the techniques and/or administer aid as taught in CPR and First Aid classes in the event of a medical emergency.
2. If necessary, staff shall call 911 for professional assistance.
3. The appropriate first aid procedure will be utilized until professional assistance arrives.
4. Any staff not needed to attend to the medical emergency should continue to attend to the needs of any other residents or program participants who may be present; comforting and reassuring them as needed.
5. If all staff are needed to attend to the medical emergency, and there are other residents or program participants in the building or vicinity, staff should verbally reassure each person until such time as staff are able to attend to their needs.

6. This policy will be reviewed with staff on an annual basis. Example situations will be used to test staff reactions and ability to follow procedures.

Effective Date: 07/27/04

Revised Date: 01/21/19

Reviewed Date: 01/21/19, 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Admissions Criteria

Purpose

To describe criteria for the admission of an individual to a program or residential setting operated by Pioneer Resources.

Policy

It is the policy of Pioneer Resources, Inc. that individuals wishing to be admitted to a program or residential setting must meet admission criteria.

Background Information (Including Definition)

Admission Criteria: Specific criteria that must be met for an individual to participate in a program or residential setting operated by Pioneer Resources.

Ineligibility: If an individual does not meet admission criteria, Pioneer Resources will inform the individual, guardian and/or supports coordinator of the area(s) of need. If at a later date admission criteria can be met, the individual will be considered for admission.

Waiting List: An individual who does meet admission criteria may be placed on a waiting list if he or she wishes to be admitted to a residential setting or program provided by Pioneer Resources, and any of the following occurs:

1. There is currently no opening available in the program or residential setting.
2. There are no staff available to begin the service.
3. The specific staff person requested by the individual is not currently available.

If placed on a "waiting list" the individual will be notified when an opening/staff becomes available.

Eligibility Requirements for Admission

Licensed Residential

Prospective residents shall:

- Exercise free choice in electing whether to reside in a Pioneer Resources' group home; if person is not capable of expressing choice, he or she must have a legal guardian or representative capable of making an informed choice.
- Be at least 18 years of age.

- Be eligible for SSI or have access to private-pay funds.
- Be diagnosed as having a qualifying disability.
- Acceptable Behavioral Needs:
 - Pioneer Resources, Inc. shall accept residents who need assistance with behavior intervention as long as that person does not require isolation or restraint, or pose a significant safety risk to self or others.
 - Interventions to address unacceptable behavior shall be specified in the written assessment plan, and employed in accordance with that plan.
 - Methods of behavior intervention shall be positive and relevant to the needs of the resident.
 - If a specialized intervention is needed to address the unique programmatic needs of a resident, the specialized intervention shall be developed in consultation with, or obtained from, professionals who are licensed or certified in that scope of practice.
 - Staff responsible for implementing the resident's written assessment plan shall be trained in the applicable behavior intervention techniques. Intervention techniques shall not be used for the purpose of punishment, discipline, or for the convenience of staff.
- Acceptable Medical Needs: Pioneer Resources shall accept residents who need assistance with medications and treatments, assistance for lifts, transfers or ambulation, seizure disorders, feeding tubes, etc.
- Unacceptable Behavioral Needs: Pioneer Resources, Inc. shall not accept or retain a resident who requires isolation or restraint, or who poses a significant safety risk to self or others.
- Unacceptable Medical Needs: Pioneer Resources shall not accept, retain, or care for a person who requires continuous nursing care. This does not preclude the accommodation of a person who becomes temporarily ill while in the home, but who does not require continuous nursing care.

Group Community Living Supports

Prospective program participants shall:

1. Be 18 years of age or older.
2. Express an interest in practicing social skills, exploring the community, being independent, and self-empowerment.
3. Have an intellectual and/or developmental disability.
4. Have a referral from HealthWest and Ottawa CMH.
5. Be Medicaid eligible; or private pay may be accepted.

Skill Building

Prospective program participants shall:

1. Be 18 years of age and have exited their school setting.
2. Be Medicaid eligible; private pay options are also available.
3. Have a DD and/or MI impairment.
4. Have vocational goals toward community employment or volunteering.
5. Be referred by HealthWest.

Vocational Training

Prospective program participants shall:

1. Be at least 14 years of age
2. Have a DD and/or MI impairment
3. Be referred by MRS
4. Funded by MRS
5. Private pay options available

ABA Services

1. Initial assessments that identify qualified children for ABA services under Medicaid must occur through the regional mental health authority.
 - a. HealthWest is the authority in Muskegon County.
 - b. Ottawa County Community Mental Health Services (CMH) is the authority in Ottawa County.
2. All Medicaid referrals for ABA services will come from HealthWest or Ottawa CMH to one of the providers in the region including Pioneer Resources.
3. Currently Pioneer Resources, Inc. also accepts Blue Cross Blue Shield and Blue Care Network private insurance.
 - a. Families covered by these insurances must have their child assessed at one of the approved autism evaluation centers before being referred to a provider such as Pioneer Resources.
 - b. In our region, these are:

Pine Rest Christian Mental Health Services

300 68th Street, P.O. Box 165
Grand Rapids, MI 49501-0165
(616) 258-7500

Spectrum Health Medical Group

100 Michigan Street
Grand Rapids, MI 49503
(616) 267-2830

Transportation

Prospective Transportation Passengers shall:

1. Be referred through contracts with local agencies
2. Current contracts include HealthWest, Ottawa CMH, Pace LifeCircles, Head Start,

Cherry Health, Wesley School and Evergreen

3. All payments are billed through the contracted agency

Procedures

Licensed Residential

1. Pre-Admission Written Assessment: There must be a written assessment of a prospective resident prior to admission which covers:
 - a. If the amount of personal care, supervision, and protection that is required by the person is available in the home.
 - b. If the kinds of services, skills, and physical accommodations that are required to meet the person needs are available in the home.
 - c. If the person appears to be compatible with other residents of the home.
2. Assessment Plan: At the time of admission, and at least annually, a written Assessment Plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and representatives of Pioneer Resources. A copy of the resident's written Assessment Plan shall be on file in the home. In the case of emergency admission, the initial written Assessment Plan must be in place within 15 days.
3. Resident Care Agreement: At the time of a person's admission, Pioneer Resources, Inc. shall complete a written Resident Care Agreement.
 - a. A Resident Care Agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and representatives of Pioneer Resources, which specifies the responsibilities of each party.
 - b. A department Resident Care Agreement form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department (State of Michigan, Department of Licensing and Regulatory Affairs).
 - c. A resident shall be provided the care and services as stated in the written Resident Care Agreement.
 - d. A representative of Pioneer Resources, Inc. shall orientate, explain, complete and provide the resident with the following information: Resident Rights, Admission and Discharge policies, Resident Funds, part 1, Funds and Valuables policy, Refund policy, and Grievance Procedures.
4. Health Care Appraisal: A written health care appraisal shall be provided by the resident or the resident's designated representative at the time of admission.
 - a. The written health care appraisal must have been completed within the 90 day period before the resident's admission to the home.
 - b. A written health care appraisal shall be completed at least annually.
 - c. If a written health care appraisal is not available at the time of an emergency admission, Pioneer Resources, Inc. shall require that the appraisal be obtained not later than 30 days after admission.

- d. A department Health Care Appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department (State of Michigan, Department of Licensing and Regulatory Affairs).
- 5. Emergency Admission: Pre-Admission Written Assessment; there must be an assessment of a prospective resident prior to admission which covers:
 - a. If the amount of personal care, supervision, and protection that is required by the resident is available in the home.
 - b. If the kinds of services, skills, and physical accommodations that are required of the home to meet the resident's needs are available in the home.
 - c. If the resident appears to be compatible with other residents of the home.
- 6. Emergency Admission - Resident Care Agreement: At the time of a resident's admission, Pioneer Resources, Inc. shall complete a written Resident Care Agreement.
 - a. A Resident Care Agreement is the document which is established between the resident or the resident's designated representative, the responsible agency, if applicable, and representatives of Pioneer Resources, which specifies the responsibilities of each party.
 - b. A department Resident Care Agreement form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department (State of Michigan, Department of Licensing and Regulatory Affairs).
 - c. A resident shall be provided the care and services as stated in the written Resident Care Agreement.
 - d. A representative of Pioneer Resources shall orientate, explain, complete and provide the resident with the following information: Resident Rights, Admission and Discharge policies, Resident Funds, part 1, Funds and Valuables policy, Refund policy, and Grievance Procedures.
- 7. Emergency Admission - Written Assessment Plan:
 - a. At the time of admission, and at least annually, a written assessment plan shall be completed with the resident or the resident's designated representative, the responsible agency, if applicable, and representatives of Pioneer Resources.
 - b. A copy of the resident's written assessment plan shall be on file in the home. In the case of emergency admission, the initial assessment plan must be in place within 15 days.
- 8. Emergency Admission - Written Health Care Appraisal:
 - a. A written health care appraisal shall be provided by the resident or the resident's designated representative at the time of admission.
 - b. The written health care appraisal must have been completed within the 90 day period before the resident's admission to the home.
 - c. A written health care appraisal shall be completed at least annually.
 - d. If a written health care appraisal is not available at the time of an emergency admission, Pioneer Resources shall require that the appraisal be obtained not later than 30 days after admission.

- e. A department health care appraisal form shall be used unless prior authorization for a substitute form has been granted, in writing, by the department (State of Michigan, Department of Licensing and Regulatory Affairs).
- 9. Services and Program Contract Agreements: Pioneer Resources operates licensed adult foster care homes under contract with a county community mental health agency, e.g. HealthWest, and LifeCircles Pace.
- 10. Pioneer Resources, Inc. shall not discriminate on the basis of race, religion, color, sex, sexual orientation, or national origin.
- 11. In addition to the Resident Care Agreement and Assessment Plan, the prospective resident (or guardian, if applicable) must first review and agree to the following documents prior to admission:
 - a. **Residential Handbook:** The handbook includes information regarding choices for services provided, accessibility, community access, Pioneer Resources' policies and procedures, conflict resolution, rights and responsibilities, and the admission and discharge process.
 - b. **Residential Services Lease Agreement:** The lease includes information regarding written agreements describing services a resident may receive in the home, resident rights and responsibilities, admission and discharge process, and fees that residents must pay to live in the home. The lease also describes procedures that are in place to help protect a resident from being wrongfully discharged from the home.

References: Michigan Department of Health and Human Services (MDHHS), Department of Licensing and Regulatory Affairs (LARA), Adult Foster Care Licensing.

Effective Date:04/11/94

Revised Date: 05/28/19

Reviewed Date: 09/29/20 09/27/21, 09/26/22, 11/02/23, 10/22/24

Discharge Criteria

Purpose

To describe the circumstances and procedures under which a person served may be discharged from a program or residential setting operated by Pioneer Resources.

Policy

It is the policy of Pioneer Resources, Inc. to follow established discharge criteria with persons served in a program or residential setting.

Licensed Residential Discharge Procedures

1. Pioneer Resources shall provide a resident and their designated representative, if applicable, with a 30-day written notice before discharge from the home.
 - a. The written notice shall state the reasons for discharge.
 - b. A copy of the written notice shall be sent to the responsible agency.
 - c. The provisions of this policy do not preclude Pioneer Resources, Inc. from providing other legal notice as required by law.
2. Possible reasons for issuing a resident a 30-day notice includes, but are not limited to:
 - a. Behavioral needs which require isolation or restraint, or which pose a significant safety risk to self or others.
 - b. Not participating in decision making.
 - c. Not treating others with dignity and respect.
 - d. Not affording housemates privacy.
 - e. Not participating in safety drills (fire, tornado, etc.).
 - f. Not following Pioneer Resources, Inc. policies and procedures as outlined in the Residential Handbook, including those regarding smoking, alcohol, weapons, and illegal drugs.
3. The “30-Day Discharge Notice” form shall be completed and distributed as required.
4. Pioneer Resources may discharge a resident before the 30-day notice when the agency has determined and documented that any of the following exists:
 - a. Substantial risk to the resident due to the inability of the home to meet the resident's needs or ensure the safety and well-being of other residents of the home.
 - b. Substantial risk or an occurrence of self-destructive behavior.
 - c. Substantial risk or an occurrence of serious physical assault.
 - d. Substantial risk or an occurrence of the destruction of property.
5. In such a case as cited above, Pioneer Resources, Inc. will notify in writing the resident, the resident's designated representative, the responsible agency, and the adult foster care licensing consultant not less than 24 hours before discharge; the “Written Notification of Discharge” will include the following information:
 - a. The reason for the proposed discharge, including the specific nature of the substantial risk.
 - b. The alternatives to discharge that have been attempted by the agency.
 - c. The location to which the resident will be discharged, if known.
 - d. Before the emergency discharge occurs, the licensee will confer with the responsible agency or, if the resident does not have a responsible agency, with adult protective services and the local community mental health emergency response service regarding the proposed discharge.
 - a. If the responsible agency or adult protective services does not agree with Pioneer Resources that emergency discharge is justified, the resident will not be discharged from the home until agreement is reached with the

responsible agency or adult protective services.

6. The "Written Notification of Discharge" form shall be completed and distributed as required when proposing a less than 30-day discharge of a resident; this form includes the procedure for contacting the required persons and agencies.
7. Pioneer Resources, Inc.'s policies and procedures concerning resident refunds shall be consulted and followed when discharging a resident.

Non-Residential Program Discharges

The following items are identified reasons for discharging participants from non-residential programs.

Community Living Supports (Individual) and Community Connections

1. Achieved all goals.
2. Moved out of county.
3. Unhappy with services.
4. Deceased.
5. Refused services.
6. Other.

Vocational Training and Skill Building

1. Achieved all goals.
2. Moved out of county.
3. Unhappy with services.
4. Deceased.
5. Refused services.
6. Other.

ABA Services

1. The client has achieved treatment goals.
2. The client no longer meets the diagnostic criteria for ASD (as measured by appropriate standardized protocols).
3. The client does not demonstrate progress towards goals for successive authorization periods.
4. The family is interested in discontinuing services.
5. The family and provider are not able to reconcile important issues in treatment planning and delivery.
6. The client's insurance status changed.
7. The client transferred to a different provider.

Transportation

1. Not following bus rules.
2. Harassing driver or other passengers.
3. Attendance issues (progressive "no shows").
4. Left the program.

References: Michigan Department of Health and Human Services (MDHHS), Department of Licensing and Regulatory Affairs (LARA), Adult Foster Care Licensing.

Effective Date: 03/29/01

Reviewed/Revised Date: 05/28/19

Reviewed Date: 05/28/19, 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Pioneer Resources, Inc. Services
30-Day Discharge Notice

Name: _____ Date of Notice: _____

Please be advised that Pioneer Resources, Inc. is hereby issuing this “30-Day Discharge Notice” from the _____ home for the resident listed above.

You must vacate the premises by: _____

Specific reason(s) for discharge: _____

Please Note:

1. Personal property and belongings are to be removed from the home when you leave. Any personal property and belongings that are left at the home after discharge shall be inventoried and stored by Pioneer Resources. You and your designated representative, if applicable, shall be notified by registered mail of the existence of property and belongings. Personal property and belongings that remain unclaimed, or for which arrangements have not been made, may be disposed of by Pioneer Resources, Inc. after 30 days from the date that written notification is sent to you and your designated representative, if applicable, per licensing rule R 400.14315 (16) – “Handling of resident funds and valuables.”
2. Refunds shall be made per the agreement outlined in the Pioneer Resources’ Policy and Procedure “Refunds.”

PIONEER RESOURCES INC. Staff Signature & Title

Date

Cc _____, Designated Representative

Cc _____, Responsible Agency

Revised 03/02/18, PR/ah

Pioneer Resources Licensed Residential Services

Written Notification of Discharge

Name

:

Today's

Date:

Please be advised that Pioneer Resources, Inc. is hereby issuing to you this
"Written Notification of Discharge" from the _____ home.

You will need to vacate the
premises by:

Reason(s) for discharge, including the specific nature of the substantial risk:

Alternatives to discharge that have been attempted by Pioneer Resources:

Location to which you will be discharged (if known):

Notifications

The following people/agencies are to be contacted in writing not less than 24 hours before discharge:

Resident:	_____	Date	_____
		:	
Designated Representative:	_____	Date	_____
		:	
Responsible Agency:	_____	Date	_____
		:	
AFC Licensing Consultant:	_____	Date	_____
		:	
Other:	_____	Date	_____
		:	

Please Note:

1. Personal property and belongings are to be removed from the home when you leave. Any personal property and belongings that are left at the home after discharge shall be inventoried and stored by Pioneer Resources. You and your designated representative, if applicable, shall be notified by registered mail of the existence of property and belongings. Personal property and belongings that remain unclaimed, or for which arrangements have not been made, may be disposed of by Pioneer Resources, Inc. after 30 days from the date that written notification is sent to you and your designated representative, if applicable. Per licensing rule R 400.14315 (16) – “Handling of resident funds and valuables.”
2. Refunds shall be made per the agreement outlined in the Pioneer Resources’ Policy and Procedure “Refunds.”

PIONEER RESOURCES INC. Staff Signature & Title	Date

Refunds

Purpose

To describe procedures for refunding monthly charges or funds held by the agency on behalf of a person served by Pioneer Resources, Inc. in a licensed adult foster care (AFC) home.

Policy

It is the policy of Pioneer Resources to refund monthly charges in a timely manner when a person leaves a licensed AFC home operated by the agency.

Background Information (Including Definition)

Nothing in this policy is meant to detract from or contradict procedures specified for the ongoing handling of a person's allowances or monthly charges. Refunds to persons served shall also be consistent with procedures required by the U.S. Dept. of Housing and Urban Development relative to any lease, if applicable.

Refunds will also be given when it has been determined that a person is at risk pursuant to the provision of Sections 11 and 11a to 11f of Act No. 280 of the Public Acts of 1939, as amended, and/or due to substantial noncompliance with these licensing rules which results in the department taking action to issue a provisional license or to revoke or summarily suspend, or refuse to renew, a license and the person relocates.

Procedures

1. As soon as it is known that a person is leaving a licensed adult foster care home operated by the agency, notification of the move-out date shall be provided to the residential manager and the accounting office. Whenever possible, this notice shall be in writing, signed by the person and/or his or her representative. The notice shall list a forwarding address.
2. When a person leaves and charges have been collected in advance, Pioneer Resources shall refund to the person a prorated amount based upon the number of days that he or she lived in the home during the month.
3. When notification is provided in advance (a minimum of three working days), refunds to the person shall occur within 24 hours of the date he or she last resided in the home. Refund checks shall be placed in the U.S. mail within 24 hours or hand delivered to the person.
4. When an emergency discharge occurs or there is less than three working days advance notice of a person leaving, a refund shall be made within three working days of the date he or she last resided in the home. Refund checks shall be mailed within three working days or hand delivered to the person within three working days.
5. Personal allowance funds or other personal monies belonging to the person served and held by the residential supervisor or designee shall be returned to the person prior to him or her leaving, or on the same day he or she leaves. An up to date accounting of personal funds shall be provided to the person or his/her representative. A receipt shall

be signed by the person or his/her representative and kept by the agency.

References: Discharge from a Licensed AFC Home policy, State of Michigan, Department of Licensing and Regulatory Affairs, R.400.14315 (14) – Handling of Resident Funds and Valuables.

Effective Date: 04/05/07

Reviewed/Revised Date: 01/31/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/25/24

Security & Confidentiality of HIPAA Information

Purpose

To outline the policies and procedures relative to the security and confidentiality of records at programs and residential settings operated by the agency.

Policy

It is the policy of Pioneer Resources, Inc. to take precautions to ensure the confidentiality of HIPAA protected information of the persons served.

Procedures

1. The residential manager/site supervisor, program director or CEO shall identify those records and charts which contain personal data, diagnosis, or treatment procedures relative to persons served.
2. The records identified per above shall be stored in lockable areas whenever they are not in use.
3. Visitors to the residence/site will not be allowed to review any records without the consent of the person served and/or legal guardian.
4. Records shall not be taken or copies made without the consent of the person served and/or legal guardian, unless obligated to do so by police, contract agency, LARA, Office of Recipient Rights, Adult Protective Services or other similar agency.
5. Staff will discuss resident and or participant of services related confidential information only with authorized individuals, including:
 - a. Employees of Pioneer Resources within the specific program or residential setting (co-workers and manager), program director and CEO.
 - b. Employees from the contract agency who are assigned to a person served, including the case manager, RN, OT and PT; state of Michigan licensing consultants, and the

officer/advisor from the Office of Recipient Rights. Employees from other agencies may be authorized to review or receive related to the person served at the direction of the Pioneer Resources' residential manager/ site supervisor, program director or CEO.

- c. Employees should use good judgment in discussing the resident's and/or participant of service's usual daily activities and should refer any questions to the appropriate team members for which they have no direct knowledge of, or for which they are not qualified to answer (i.e., the person's official diagnosis and prognosis, the scientific reason(s) for the selection of the particular treatment plan, information regarding the person's social history, etc.).
 - d. Employees should make a special effort to either provide requested information to the guardian of a resident/participant of services as appropriate, or to refer them to the residential manager, site supervisor, or case manager.
 - e. Guardians wishing to review the record of the person served should make arrangements with the case manager.
- 6. Employees who terminate their employment with Pioneer Resources shall be required to return all keys as a condition of receiving their last paycheck.
 - 7. The program director and CEO shall determine when conditions warrant changing the locks on a site.
 - 8. Staff shall not engage in the practice of hiding keys inside or outside the building for the convenience of others.
 - 9. Individuals who knowingly violate these procedures or who violate the confidentiality of records, shall be subject to disciplinary action.

References: Pioneer Resources' Employee Relations & Attendance policy, Recipient Rights Policy, and Security & Confidentiality of HIPAA Information policy.

Effective Date: 10/03/05

Revised Date: 03/10/19, 10/22/24

Reviewed Date: 03/10/19, 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Person Centered Planning

Purpose

To establish and maintain consistent procedures for the offer and execution of Person-Centered Planning to the persons served by Pioneer Resources.

Policy

It is the policy of Pioneer Resources, Inc. to comply with the Michigan Department of Health and Human Services (MDHHS) "Person-Centered Planning" policy.

Background Information (Including Definition)

Person-Centered Planning: A process for planning and supporting the individual receiving services that builds upon the individual's capacity to engage in activities that promote community life and that honors the individual's preferences, choices, and abilities.

Procedures

1. Upon hire, staff will complete "Person-Centered Planning" training.
2. Staff will receive annual update training in "Person-Centered Planning".
3. To the best of their abilities, staff will assist the persons served in planning and carrying out their individual goals.

Reference: Michigan Department of Health and Human Service (MDHHS), Behavioral Health and Developmental Disabilities Administration, "Person-Centered Planning" policy, dated June 05, 2017.

Effective Date: 04/15/08

Revised Date: 05/28/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Daily Logs - Specialized Licensed Group Homes

Purpose

To establish a means of logging significant events of day-to-day operations in licensed group homes.

Policy

Home staff will complete a Daily Log for each shift worked.

Background Information (Including Definition)

Daily Log: A paper or electronic document to log significant events.

Procedures

1. Staff on each shift will complete the Daily Home Record Log form indicated for their use.
2. The Daily Log will include the following information:
 - a. Date

- b. Full name of all on duty staff
- c. Significant events, which include:
 - i. Staff in and out
 - ii. Medications and treatments administered
 - iii. Meals and snack served
 - iv. Visitors
 - v. Outings
 - vi. Appointments
 - vii. Calls from medical personnel
3. Unusual events or occurrences
4. Staff are to read all logs completed since the last shift worked to bring them up to date as to significant events of the preceding shifts.
5. At the end of the calendar month, the residential manager or designee will file paper logs for future reference.
6. The completed logs will be retained on site for a minimum of 12 months.

Reference: Daily Log forms

Effective Date: 09/01/96

Revised Date: 03/28/19

Reviewed Date: 03/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Bed Checks (In Specialized Licensed AFC Homes)

Purpose

To describe the means by which staff in specialized AFC homes assesses the needs of a person served during hours of sleep.

Policy

It is the policy of Pioneer Resources that residential staff shall conduct bed checks as defined in a resident's individual plan of service (IPOS).

Background Information (Including Definition)

- **Conducting Bed Checks:** Per HCBS standards, bed checks are only to be conducted when the person served has a specific need, and the information must be included in the person's individual plan of service (IPOS).
- **Bed Check:** Reasons for conducting a bed check include, but are not limited to: visually and/or physically checking a person served for discomfort, incontinence, properly

functioning specialty medical equipment, illness.

Procedures

1. On duty staff will conduct bed checks for residents who have a defined need that is documented in their individual plan of service (IPOS).
2. Bed checks are to be completed quietly and with as little light as possible.
3. In a shared bedroom, if one resident is in need of bed checks and the other is not, staff will take extra care to use only the amount of light needed, and will be as quiet as possible to limit disturbance to the roommate.
4. If, during a bed check a resident appears ill, staff are to follow standard procedures for illness.
5. If, during a bed check, a resident appears to not be breathing, staff are to immediately call 9-1-1 and begin administering CPR. Once EMS arrives, staff are to contact the residential manager/designee and follow her or his instructions.
6. If, during a bed check, a resident is missing, staff are to immediately look for the person. If the person cannot be found in the home or on the property 9-1-1 is to be called. Staff will then contact the residential manager/designee and follow her or his instructions.

References: Missing Resident or Program Participant policy and Death of a Person Served policy.

Effective Date: 03/29/01

Revised Date: 09/29/20

Reviewed Date: 03/10/19, 09/27/21, 09/26/22, 11/02/23, 10/25/24

Designated Person for Licensed Homes

Purpose

To clarify who the "designated person" is in each licensed adult foster care (AFC) home.

Policy

It is the policy of Pioneer Resources, Inc. that the residential manager of each group home is considered the "designated person" for the purpose of dealing with all resident and home concerns.

In the absence of the residential manager, an "on-call staff" will be considered the "designated person."

Background Information (Including Definition)

On Call Staff: A residential support staff who is trained to take care of resident and home

concerns in the absence of the residential manager.

Procedures

1. The “Designated Person” information will be clearly indicated on the “Emergency Phone Numbers” list, and posted where all staff can easily see it.
2. The “Designated Person” information will be kept updated with current names and numbers.

References: Emergency Phone Numbers list.

Effective Date: 05/25/00

Reviewed/Revised Date: 01/31/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/25/24

Death of a Person Served

Purpose

To establish procedures to follow after the death of a person served by Pioneer Resources in a residential setting.

Policy

When a resident or tenant expires, arrangements and disposition of assets will be handled in an appropriate and expedient manner which will respect the rights, privileges and intent of the deceased individual as well as the members of the decedent's family. Disposition shall also be consistent with tenant/landlord laws.

Background Information (Including Definition)

Resident or tenant – a person who resides in a licensed adult foster care home or supported living apartment building owned or operated by Pioneer Resources.

Procedures

Deaths of all residents or tenants will be handled as follows:

1. Home staff, residential manager, Director of Residential Services, or Director of Business will follow the proper calling hierarchy to inform Pioneer Resources, Inc. and referring agency personnel of death.
2. Unexpected deaths will be investigated immediately in cooperation with personnel from the referring agency and law enforcement.
3. Staff notified of the death of a resident or tenant will immediately contact the manager or Director in charge of the residential site, then complete an incident report, if appropriate.

- a. The manager or Director will immediately notify the referring agency personnel.
- b. The manager or Director will notify Pioneer Resources, Inc.'s CEO.
- c. Notification of next of kin shall be the responsibility of the referring agency personnel, if appropriate or specified by the referring organization.
 - a. When there is no referring agency personnel involved, it may fall to law enforcement to notify next of kin.
 - b. Pioneer Resources, Inc. shall cooperate with the law enforcement to identify emergency contacts.
 - c. If law enforcement is not involved, the Pioneer Resources' Director of Residential Services or Director of Business may contact next of kin.

Effective Date: 03/29/01

Reviewed/Revised Date: 05/29/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/25/24

Visitation and Leave of Absence

Purpose

To define the agency's policies and procedures regarding visitation to a residential setting.

Policy

The people living in licensed adult foster care (AFC) homes operated by Pioneer Resources, Inc. are encouraged to maintain contact with family and friends.

Background Information (Including Definition)

1. **In-Home Visit:** Visiting with family or friends at the home.
2. **Leave of Absence (LOA):** The resident is away from the home on an outing with a friend or family member.
3. **Extended Visit:** The resident is away from the home on an outing that is expected to last overnight or longer with a friend or family member.
4. **Family Member:** Parent, grandparent, sibling, aunt, uncle, niece, nephew, cousin.
5. **Friend:** A non-related person who is significant to the resident.

Procedures

In-Home Visit

- Residents are encouraged to visit with family members and friends.
- Unless otherwise specified in an individual's person-centered plan, or in a written

“Housemate’s Agreement”, residents may have visitors at any time.

- Visitors are encouraged to call ahead prior to visiting to make sure the person will be available.
- Unless otherwise specified in an individual’s person-centered plan, residents have the right to have visitors of their choosing.
- To maintain privacy and confidentiality visitors are asked to check in with home staff upon arrival.
- Home staff may ask visitors for identification prior to coming inside the home.
- Visitors will be asked to sign in on a visitation log.
- Home staff will make sure the date, visitor’s name, and resident’s name are all properly recorded on the visitation log.
- Home staff will assist in locating an area in the home which can afford some degree of privacy while visiting.
- Home staff should ensure that the privacy and rights of other residents are not violated by visitors. To help accomplish this we ask that visitors not go into bedrooms of other residents, and that they ask a staff member the location of a rest room for their use.
- Home staff will document all visits on the daily log, and in the resident’s progress notes. If, after receiving a visitor, a resident is found to have any unusual marks, cuts, abrasions, bruises, scratches, etc. that were not noticed prior to the visit, home staff will also complete an Incident Report and the person on call will be notified.
- If home staff believe that a visitor presents a health or safety threat to any of the residents of the home, they will not allow the person inside the home. If the visitor is already in the home, staff will politely ask them to leave. Home staff will inform the person that the visit cannot occur at this time; they will offer to take the person’s name and number and tell them someone will contact them the next business day. If the person persists, home staff will contact the residential manager/designee and request assistance. If home staff feel threatened by the visitor they are to call 911 and then the residential manager/designee.

Leave of Absence

- Unless otherwise specified in an individual’s person-centered plan, residents of this home may go on a leave of absence with friends or family members.
- If home staff are not sure if a visitor is authorized to take a resident on a leave of absence, they will contact the person on call, and the guardian will then be contacted for authorization.
- If the guardian is not available to provide authorization, the visitor will be asked to reschedule the leave of absence after authorization from the guardian is obtained. Home staff will ask for the visitor’s contact information and give it to the residential

manager/designee.

- If home staff believe that going on a leave of absence could present a health or safety threat to a resident the residential manager/designee will be contacted and the concern addressed.
- Visitors requesting to take a resident away from the home will be expected to sign the LOA form at the time of departure.
- Home staff will arrange for any medications, extra clothing or spending money the resident may need while on the leave of absence; these items will be documented on the LOA form and the visitor will be required to sign as having received the items.
- If possible, advanced notice of a leave of absence is appreciated so there is enough time to make all needed arrangements.
- When the resident returns home, staff will collect all items that were sent, including unused medications, medication containers, clothing, money and receipts.
- If the resident, friend or family member wants to extend the amount of time for the leave of absence, home staff will contact the residential manager/designee and arrangements will be made for any additional medications or other items that may be needed due to the extended time away from home.
- Home staff will document the leave of absence, including who the resident left with, destination (if known), time of departure and time of return on the daily log, resident's progress notes and outings log. If any unusual marks, cuts, abrasions, bruises, scratches, etc., are found after a resident returns from a leave of absence, home staff will also complete an Incident Report and the residential manager/designee will be notified.

Extended Visit

- If the leave of absence will be overnight or longer, staff will make arrangements to have enough medications, clothing, personal care items, etc. that the resident may need packed prior to the visit.
- If possible, advanced notice of an extended visit is appreciated so there is enough time to make all needed arrangements.

References: State of Michigan, Department of Licensing and Regulatory Affairs (LARA), Bureau of Community and Health Systems, Adult Foster Care Licensing, Resident Rights for AFC Group Homes.

Effective Date: 03/29/01

Reviewed/Revised Date: 01/31/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/25/24

Visits by Regulatory Agency Staff

Purpose

To establish agency policy concerning visits to a residential or program site by staff of regulatory agencies.

Policy

Staff of regulatory agencies legitimately involved with the regulation of a residential or program site will be admitted.

Background Information (Including Definition)

The regulatory agencies that may have jurisdiction over agency residents or programs are listed below. Other agencies given regulatory responsibility for the home or program may be added to those listed:

- Office of Recipient Rights
- Michigan Department of Licensing and Regulatory Affairs, including licensing consultants
- Michigan Department of Health and Human Services, including protective services
- Michigan State Police Fire Marshall
- LifeCircles/Pace
- HealthWest
- Lakeshore Regional Entity
- The U.S. Department of Housing and Urban Development and its subcontractors, e.g. Michigan Multifamily Asset Directors or Housing Compliance Specialists

Procedures

When a staff person from a regulatory agency that is responsible for an aspect of the operation of a residence or program comes to visit, the procedure described below is to be followed by residential or program staff:

1. Obtain verification of identity.
2. Admit persons with proper identification.
3. Immediately notify the program supervisor or residential manager/designee of the visitor.
4. The program supervisor or residential manager/designee shall notify the program Director, CEO and/or supports coordinator of the visitor, if necessary.
5. Staff are to respond to questions that are appropriate to their job classification in the agency, if warranted.

6. Staff are to refer the visitor to the program supervisor or residential manager/designee for any information he or she is unable to supply.

Effective Date: 03/29/01

Revised Date: 03/27/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/25/24

Missing Resident or Program Participant

Purpose

To establish a policy and procedure in the event a person served by Pioneer Resources, Inc. is missing.

Policy

Responsible actions shall be taken in the event a person served by Pioneer Resources is missing.

Background Information (Including Definition)

- **Resident:** An individual who resides in a licensed residential setting.
- **Program Participant:** An individual who participates in a non-residential program offered by Pioneer Resources.

Procedures

1. Unless otherwise specified in the person's Assessment Plan or person-centered plan, if a resident of a licensed residential setting is determined to be missing, all available staff should immediately search the home, grounds, and immediate neighborhood.
"Available staff" is defined as any staff above the "staff-to-resident" ratio required for this home. After searching the home and grounds, if there are no staff available to leave the premises to search for the missing person, on duty staff are to immediately contact 911 and then the residential manager/designee, Director of Residential Services, or the CEO.
2. Unless otherwise specified in a person's Assessment Plan or person-centered plan, if the resident is not located on or off the property, staff should immediately contact 911, and then the Residential Manager/designee, Director of Residential Services, or CEO.
3. When notifying local law enforcement authorities (911) staff should be prepared to provide a description of the person, including clothing last known to be worn. A recent photo of the resident may be furnished to the police, if available.
4. The residential manager/designee, Director of Residential Services, or CEO shall report the absence of the resident to the guardian (if applicable) and the assigned supports

coordinator from the referring agency.

5. Prior to the end of the shift, home staff are to complete an incident report concerning the missing resident, including all the steps followed per above.
6. When the resident is found, staff shall ensure that he or she is not injured in any way. If any injuries are apparent, then staff should follow the appropriate course of action for emergency medical treatment.
7. Staff are to continue to attend to the needs of the other residents in the home; comforting and reassuring them as needed.
8. This policy will be reviewed with staff on an annual basis. Example situations will be used to test staff reactions and ability to follow procedures.
9. **Non-Residential Program Participants:** Unless otherwise specified in a participant's person-centered plan, if a participant in a program is missing, the staff should immediately search the building/grounds (any required "staff-to-participant" ratio should be maintained at all times), and report the missing person to the program supervisor, program coordinator, or program Director.
10. Unless otherwise specified in a participant's person-centered plan, the program supervisor, program coordinator, or program Director should contact the participant's home or supports coordinator to determine if the participant usually safely navigates the community on their own.
 - a. A determination shall be made by the program supervisor, program coordinator, or program Director, and the participant's home staff/family, or supports coordinator as to whether or not the situation constitutes an emergency.
 - b. If an emergency situation is considered to exist due to the person being a danger to themselves or others, then 911 shall be notified.
 - c. If it is determined that the participant routinely navigates the community on his/her own, it is not necessary to contact 911 and arrangements should be made between concerned parties to communicate regularly until the individual is located.
11. When the program participant is found, staff shall ensure that he or she is not injured in any way. If any injuries are apparent, then staff should follow the appropriate course of action for emergency medical treatment.

References: Medical Emergencies policy.

Effective Date: 07/27/04

Reviewed/Revised Date: 03/27/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/25/24

Alternate Living Arrangements – Licensed AFC Home

Purpose

To establish the procedure for alternate living arrangements in the event that a group home becomes unfit for occupancy.

Policy

It is the policy of Pioneer Resources, Inc. that alternate living quarters and other essential services continue to be provided to residents when they are temporarily unable to live in their home.

Background Information (Including Definition)

Reasons that a group home may be temporarily unfit for occupancy include, but are not limited to: damage caused by power outage, vandalism, bomb, flood, fire, tornado or other natural disaster.

Procedures

1. In the event that a group home becomes unfit for occupancy, on duty staff will immediately contact the residential manager/designee.
2. If possible, on duty staff will gather items needed to properly care for the residents of the home. These items include, but are not limited to: medications, information charts, clothing and adaptive equipment. An "Essential Items" list will be maintained in the Emergency Procedures book.
3. The residential manager/designee shall contact a local, accessible hotel or motel and make arrangements for rooms. East wing of the Wesley campus may also be used for temporary shelter. An "Alternate Housing Options" list will be maintained in the Emergency Procedures book.
4. The residential manager/designee will then contact on duty staff and inform them where to take the residents. If the home vehicle is damaged, alternate transportation will be found.
5. The residential manager/designee will contact guardians and supports coordinators to inform them of the evacuation of the home and alternate living location.
6. If staff were unable to gather items prior to leaving the group home, the residential manager/designee will be responsible for ensuring that all essential services continue to be provided to residents. These services include clothing, proper nutrition, medications, other health-related needs such as blood testing equipment for a person with diabetes, and adaptive equipment. Case managers may be contacted for assistance.

7. This policy will be reviewed with home staff on an annual basis. Example situations will be used to test staff reactions and ability to follow procedures.

References: Continuation of Operations Plan (COOP), Alternate Housing Options and Essential Items lists maintained in Emergency Procedures book in each group home.

Effective Date: 05/19/05

Revised Date: 03/16/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/25/24

Clothing and Personal Property

Purpose

To outline group home policy regarding access to and inventory of clothing and personal property.

Policy

Unless otherwise specified in a resident's person-centered plan, the people living in this group home have the right to store, secure and access their clothing and personal property.

Background Information (Including Definition)

Clothing and Personal Property

1. Any item purchased for or by a resident with his or her own money.
2. Items purchased by family or friends are also the personal property of that resident.
3. Property which is donated to the home for a specific resident is considered to be his or her personal property.

Valuables

"Personal property of a resident, which includes jewelry, furniture, electronic equipment, appliances, and clothing items that have a value of more than \$25.00" (as defined in the rules and regulations set forth by the State of Michigan, Department of Licensing and Regulatory Affairs (LARA)).

Procedures

Initial Inventory of Valuables

1. In a licensed residential setting, an inventory must be completed of all "valuables" brought into the home upon admission.
2. To have a clear accounting of all personal belongings at admission, this inventory will include all clothing and personal property, regardless of value.

3. If not already done, clothing and personal property will be marked with an engraver or permanent marker with the resident's name or initials. After admission, all new clothing and personal property brought in the home will also be marked with the resident's name or initials.
4. Markings should be done in an inconspicuous location on each item.
5. The initial inventory of valuables shall be maintained in the resident's file.

Clothing

1. Residents of this home are encouraged to choose the clothing he or she wishes to purchase and wear.
2. If needed, home staff will assist in choosing weather and activity-appropriate clothing.

Personal Property

1. Residents are welcome to keep personal items in their bedroom.
2. We ask that the available space is taken into account prior to bringing in large items or large quantities of items.
3. Unless otherwise specified in a resident's person-centered plan, if a resident wishes to secure their personal belongings by locking them:
 - a. If the resident has their own room, he or she can lock their bedroom door.
 - b. If the resident shares a bedroom, he or she can obtain a lockable container (safe, locked, cabinet, etc.) and secure belongings inside.

Annual Inventory

1. Clothing and personal property are to be inventoried by home staff and the resident on an annual basis.
2. Residents have the right to refuse the annual inventory.
3. If the resident refuses the inventory, home staff will note the refusal on the inventory log.
4. Annual inventory logs will be maintained in the home for a minimum of three years.

References: State of Michigan, Department of Licensing and Regulatory Affairs (LARA).

Effective Date: 03/29/01

Reviewed/Revised Date: 02/01/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/25/24

Resident Communication- Mail and Telephone

Purpose

To identify the rights of persons served in a residential setting pertaining to mail and telephone use.

Policy

Unless otherwise specified in an individual's person-centered plan, residents have the right to send mail to, and receive mail from, whomever they choose. Residents also have the right to make telephone calls to, and receive telephone calls from, whomever they choose.

Procedures

Mail

1. The residential manager or designee will ensure that residents are assisted as needed in obtaining writing paper, pens, pencils, stamps, or access to electronic means for writing and sending mail.
2. The residential manager or designee will ensure that residents are assisted in writing letters as needed.
3. The residential manager or designee will open, or will assist residents in opening, business mail that is addressed to the resident. This is done so that Medicare, Medicaid, Food Stamps and other benefits will not be lost.
4. The residential manager or designee will ensure that all personal mail addressed to a resident is made available to that person.
5. The residential manager or designee will ensure that residents are assisted in reading their mail as needed.

Telephone

1. The home has a shared-use telephone. It is used both for personal and business calls.
2. Residents are welcome to use the telephone to make and receive calls.
3. Residents are asked to be mindful of others in the home who may also wish to use the telephone.
4. Home staff will assist residents with making or receiving telephone calls as needed.
5. A cordless telephone may be available for a resident to use in their bedroom, or another room in the home which affords privacy during the call.
6. Residents have the right to install a separate telephone line, or use a personal cell phone at their own expense.

7. Home staff will assist residents in using their personal phones as needed.

References: Your Rights When Receiving Mental Health Services in Michigan - MDHHS
Office of Recipient Rights and Resident Rights for AFC Group Homes - State of Michigan,
Department of Licensing and Regulatory Affairs (LARA).

Effective Date: 03/29/01

Reviewed/Revised Date: 02/03/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/25/24

Staff Coverage in Licensed Homes

Purpose

To describe the minimum amount of staff coverage that must be maintained in licensed group homes.

Policy

It is the policy of Pioneer Resources, Inc. that an appropriate number of staff shall be on duty at all times to help ensure the safety of the people living in licensed group homes.

Background Information (Including Definition)

State licenses indicate minimum staffing levels based on the number of residents at any given time.

Procedures

1. Each residential manager will maintain a current staffing pattern indicating the specific staffing needs on each shift, and is responsible for scheduling the minimum number of staff required.
2. Home staff are to make sure the minimum number of on-duty staff are in the home at all times. No outings or appointments may be carried out if doing so would cause a staff shortage. Should staff find that there was not enough coverage in the home due to an outing or appointment, they are to contact the residential manager/designee for instructions.
3. The residential manager will instruct staff as to what circumstances allow one employee to be in the home with persons served by themselves, including:
 - a. Staff must receive prior authorization from the residential manager/designee to leave one staff in the home.
 - b. The maximum number of persons served that can be present in the home with one staff.

- c. The maximum amount of time one staff can be left in the home with that number of persons served.
 - d. Person-Centered Plan and licensing requirements.
- 4. No on-duty staff may leave the home without prior authorization from the residential manager/designee.
 - a. Should a personal emergency arise, staff are to contact the residential manager/designee and inform her or him of the situation, then if required to do so by the person on call, wait until a replacement staff has arrived before leaving the home.
 - b. Regardless of whether or not there are enough staff on duty in the home for minimum coverage, any staff person leaving the home without prior authorization from the residential manager/designee will be considered to have voluntarily quit their job.
 - c. If this occurs the Director of Residential Services is to be immediately informed, and a Recipient Rights Complaint form shall be filed with the Office of Recipient Rights.
- 5. Should a staff person have a medical restriction which prohibits her or him from physically lifting/transferring people who are non-ambulatory, that staff cannot be counted when scheduling the minimum number of on duty staff for that shift.

Effective Date: 05/25/00

Revised Date: 02/03/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 10/30/23, 10/25/24

Pets

Purpose

To establish the agency's policy and procedure on pets in residential and program settings.

Policy

Having a pet in the workplace has scientifically documented benefits to people and the work place. Pets can bring joy to a work setting, they can provide for work-life balance and can reduce stress.

Residential and Program sites will utilize the guidelines below as a basis for bringing a pet into a residential or administrative location (Central Wing administrative staff should refer to the Pet Policy – Central Wing for guidance).

Background Information (Including Definition)

Reasons pets may not be allowed include:

1. Allergic reaction to pets
2. Fear of pets
3. Safety of individuals and/or other pets

Acceptable pets include:

1. Fish in a bowl or aquarium
2. A bird in a cage (residential only)
3. A warm-blooded mammal
 - a. Dog
 - b. Cat
 - c. Hamster in a cage (residential only)
 - d. Guinea Pig in a cage (residential only)

Procedures for Pets in Residential Settings

1. Unless otherwise specified in an individual's person-centered plan, pets may be allowed in residential settings.
2. Fish in a bowl or aquarium may be kept in the person's bedroom. All other pets must be approved in advance by the residential manager.
3. Housemates must agree to have a dog or cat in the home.
4. There is a limit of one dog or cat per home.
5. Pets shall not exceed 30 pounds in weight.
6. The pet owner is responsible for all costs associated with their pet.
7. The pet must be properly vaccinated for rabies prior to entering the home, and all local licensing requirements must be met. Vaccines must be updated as suggested by a veterinarian, and written proof shall be required.
8. A dog or cat must be neutered or spayed prior to being allowed into the home.
9. The pet owner is responsible for the maintenance and upkeep of the pet to ensure that it receives the proper standard of care, and humane treatment. Upkeep includes feeding, bathing, health, waste removal, and keeping cages, bowls, aquariums and litter boxes clean, with no noticeable odors.
10. The pet owner will be responsible for damages caused by the pet.
11. The pet owner must ensure that the pet does not wander into neighboring yards.
12. The pet owner is responsible for any outdoor debris or damage caused by the pet.
13. Violations of these rules may be cause for revoking authorization for the pet to reside in the home.

Procedures for Pets in Program Settings:

1. Employee must speak with their supervisor prior to bringing pets on site.
2. Supervisor will assess the setting and determine if the pet meets the following standards:
 - a. The supervisor would need to determine if the pet would in any way divert from work or provide a hindrance/disruption to service.
 - b. Employees in the department must agree to have a dog or cat in the work area; things such as personal allergies, temperament of the animal, and/or an individual's comfortability level with cats or dogs, should be taken into consideration and respected.
3. The number of pets brought into a single program space should not exceed three (3) at one time in order to maintain an appropriate atmosphere that promotes a positive work environment and minimizes the chaos that multiple animals in the same space can create. If an excess number of pets are present at one time, individuals may be asked to contain their animal within the walls of their private office space and/or to bring them home.
4. Fish in a bowl or aquarium may be kept in the person's private office; shared office spaces should agree collaboratively to have an office fish.
5. Pets should not exceed 30 pounds in weight; exceptions to this must be approved by the CEO.
6. The pet owner is responsible for all costs associated with their pet.
7. The pet must be properly vaccinated for rabies prior to entering the office, and all local licensing requirements must be met.
8. Vaccines must be updated as suggested by a veterinarian, and written proof shall be required, and remain on file, for the duration of the vaccination/treatment validity period (i.e. – rabies shots are typically valid for a three-year period).
9. A dog or cat must be neutered or spayed prior to being allowed into the office.
10. The pet owner is responsible for the maintenance and upkeep of the pet to ensure that it receives the proper standard of care and humane treatment. Upkeep includes feeding, bathing, health, waste removal, and keeping cages, bowls, aquariums and litter boxes clean, with no noticeable odors.
11. The pet owner will be responsible for damages and any/all liability caused by the pet.
12. The pet owner must ensure that the pet does not wander into neighboring businesses/homes, or wander without proper supervision.
13. The pet owner is responsible for any outdoor debris or damage caused by the pet.

14. Violations of these rules may be cause for revoking authorization for the pet to be brought into the office.

Effective Date: 02/28/18

Revised Date: 10/26/22, 09/11/24

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 10/26/22, 11/02/23, 10/25/24

Use of Alcohol

Purpose

To establish the policy and procedure for the consumption of alcohol by residents in a group home.

Policy

It is the policy of Pioneer Resources, Inc. that, unless otherwise specified in a person-centered plan, anyone living in this residential setting who is 21 years or older has the right to consume alcohol.

Procedures

Person-Centered Plan – Alcohol Restriction

If it is specified in the person-centered plan that alcohol should not be consumed by the resident, and the person still chooses to consume alcohol, that resident will be bound by all procedures described in #2 below.

Group home staff:

1. Will verbally remind the resident of his or her written agreement in the person-centered plan to not consume alcohol.
2. Will not give or loan a resident money to purchase alcohol.
3. Will not attempt to physically stop the person from the consumption of alcohol.
4. Will not assume responsibility for providing a locked container/cabinet to store alcohol.
5. Will not transport a resident to purchase alcohol.
6. Will inform the residential manager or person on call that the resident chooses to drink alcohol.
7. Will inform any other interested party (guardian, case manager, etc.) who has requested to be informed if the resident chooses to drink alcohol.
8. Will write an Incident Report.
9. Will observe the resident for any adverse reaction after consuming alcohol.

Person-Centered Plan – No Alcohol Restriction

If a resident's person-centered plan indicates that alcohol may be consumed, the plan must include information as to the method of purchasing alcohol, any limits to the types or amounts of alcohol to consume in a specific time frame, and any location restrictions when consuming alcohol. In addition, if the resident plans to bring alcohol into the home, specific information must be documented in the person-centered plan regarding the amount of alcohol the resident may keep in the home and safe storage procedures of alcohol (meaning the alcohol must be kept locked in a secure container/cabinet so no housemates are able to access it).

Group home staff:

1. Will not give or loan a resident money to purchase alcohol.
2. Will not assume responsibility for providing a locked container/cabinet to store alcohol.
3. Will not transport a resident to purchase alcohol in a store, or to a bar or tavern to consume alcohol if his or her person-centered plan excludes purchasing alcohol, or drinking alcohol in such an establishment.
4. Will encourage the resident to follow the alcohol guidelines agreed to in his or her person-centered plan.
5. Will write an Incident Report and contact the residential manager or on-call assistant should any instances of inappropriate or unsafe behavior occur when a resident consumes alcohol.

Effective Date: 03/01/18

Revised Date: 02/03/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/25/24

HCBS Standards

Purpose

To describe standards required by Home and Community Based Services (HCBS).

Policy

It is the policy of Pioneer Resources, Inc. to follow required HCBS standards.

Background Information (Including Definition)

This policy covers standards as outlined in the document "HCBS Provider Standards Checklist", dated March 2018.

If a standard cannot be met due to a health or safety concern, the individual or guardian must agree to the restriction, in writing, in his or her person-centered plan. If the restriction will affect other individual's living in the home, then each individual or guardian must agree to the restriction, in writing, in his or her person-centered plan.

Procedures

1. Individuals live and/or receive services and supports in a setting where there is regular (more than once per week) opportunity for contact with people not receiving services.
2. The residence allows friends and family to visit without rules on hours or times.
3. Each individual will have a lease or residential care agreement for the residential setting.
4. The lease will explain how a discharge happens and what to do if you do not wish to move.
5. Individuals are provided with information on how to request new housing.
6. Information about filing a complaint is posted in a way individuals can understand and use.
7. Individuals will receive information regarding who to call to file an anonymous complaint.
8. Staff are to talk about an individuals' personal issues in private only.
9. Individuals have access to their personal funds.
10. Individuals have control over their personal funds.
11. Individuals have a place to store and secure their belongings away from others.
12. Individuals pick the agency who provides their residential services and supports.
13. Individuals pick the residential support staff who provide their services and supports.
14. Individuals can change their services and supports as they wish.
15. Individuals have the option of having their own bedroom if consistent with their resources.
16. Individual can pick their roommate(s).
17. Individuals can close and lock their bedroom door.
18. Individuals can close and lock their bathroom door.
19. Staff are to ask before entering an individuals' living areas (bedroom, bathroom).
20. Individuals choose what they eat.
21. Individuals choose to eat alone or with others.
22. Individuals have access to food at any time.
23. Individuals can choose what clothes to wear.

24. Individuals have access to a communication device.
25. Individuals can use the communication device in a private place.
26. The inside of the home is free from cameras, visual monitors, or audio monitors.
27. If an individual needs help with personal care, the individual will receive this support in privacy.
28. With or without support, individuals can arrange and control their personal schedule of daily appointments and activities (e.g. personal care, events, etc.).
29. Individuals have full access to the kitchen and may access it at any time.
30. Individuals have full access to the dining area and may access it at any time.
31. Individuals have full access to the main laundry area and may access it at any time.
32. Individuals have full access to a comfortable seating area and may access it at any time.
33. Individuals have full access to the bathroom and may access it at any time.
34. Staff will ensure there is space within the home for individuals to meet with visitors and have private conversations.
35. Individuals can choose to come and go from the home when they want.
36. Individuals can move inside and outside the home when they want.
37. The homes are physically accessible to all individuals.
38. Individuals can reach and use the home's appliances as they need.
39. The homes are free of gates, locked doors, or other ways to block individuals from entering or exiting certain areas of their home.
40. Accessible transportation is available for individuals to make trips to the community.
41. Individuals have a way to access the community where public transit is limited or unavailable.

References: HCBS Provider Standards Checklist and Program Handbook

Effective Date: 05/13/19

Revised Date: 09/29/20

Reviewed Date: 09/27/21, 09/26/22, 11/02/23, 10/25/24

Positive Behavioral Interventions - Persons Served

Purpose

To ensure that methods of adverse behavioral interventions are positive and appropriate for the needs of each individual served by Pioneer Resources.

Policy

Pioneer Resources, Inc. is committed to building and maintaining positive relationships with the individuals served in a manner that nurtures personal growth and dignity.

It is further the policy of Pioneer Resources that the use of “seclusion” or “restraint” is strictly prohibited.

Background Information (Including Definition)

Restraint, Seclusion and Physical Management

The Office of Recipient Rights “Restraint, Seclusion and Physical Management” policy (04-009) definitions:

- **Physical Management:** A technique used by staff as an emergency intervention to restrict the movement of a recipient by direct physical contact to prevent the recipient from harming self or others.
- **Restraint:** The use of a physical device to restrict an individual’s movement. Restraint does not include the use of a device primarily intended to provide anatomical support.
- **Seclusion:** The temporary placement of a recipient in a room, alone, where egress is prevented by any means.

The Mandt System

A comprehensive, integrated approach to preventing, de-escalating, and if necessary, intervening when the behavior of an individual poses a threat of harm to themselves and/or others. The focus of the Mandt System is on building healthy relationships between all the stakeholders in human service settings in order to facilitate the development of an organizational culture that provides the emotional, psychological, and physical safety needed in order to teach new behaviors to replace the behaviors that are labeled “challenging”.

Mandt System “Relational” Skills

- Building Healthy Relationships - Foundational Beliefs, Working as a Team, Dealing with Emotions, Causes of Stress and Crisis Cycle.
- Building Healthy Communication - Nonverbal Elements of Communication, Vocal Elements in Communication, Verbal Elements in Communication and Strategies for De-escalation.
- Building Healthy Conflict Resolution - Communication through Problem Solving Techniques.

Mandt System “Conceptual” Skills

- Trauma Informed Cultures - To help staff better work with people who have experienced trauma.
- Positive Behavior Interventions and Support - Supporting people, not just their behaviors.
- Regulatory and Legal Issues - Foundational legal and liability issues regarding support.

Mandt System Technical Skills

- Assisting - Body Mechanics, stances, physical supports to assist people.
- Separating - Physical techniques in separating people.
- Physical Restraint - Physical techniques to keep people safe.

Mandt System Physical Interaction Skills

- Physical Releases, wrist holds, finger holds, clothing holds, biting, hair pulling
- Escorting
- Three Person Physical Assisting
- One Person Support using a Side Body Hug
- Two Person Support using a Side Body Hug
- One Person, One Arm Supporting Skill
- One Person, Two Arm Supporting Skill

Mandt Prohibited Practices

- Pain Compliance, trigger points, pressure points
- Hyper-extension of any part of the body
- Pressure or weight on chest, lungs, sternum, diaphragm, back, or upper abdomen
- Any technique that obstructs or restricts circulation of blood, and/or airway
- Straddling or sitting on any part of the body
- Any type of choking, hand chokes, arm chokes
- Any technique that involves pushing into the person’s mouth, nose, eyes, or any part of the face, or covering the face or body
- Any technique that involves substantial risk of injury
- Any technique that forces the person to the floor, chair, wall, etc.
- Any manual restraint that maintains a person on the floor in any position (prone, supine, side-lying)

Procedures

1. Positive behavioral interventions are to be implemented prior to the use of restrictive procedures and in conjunction with any restrictive procedures.
2. Pioneer Resources' staff may not use "isolation" with a person served.
3. Staff are to use the skills learned in Mandt training to deal with maladaptive or inappropriate behaviors without undue force that could lead to the injury of a person served.
4. New staff in programs required by contract will receive initial training within 60 days of hire, and/or prior to working independently with individuals receiving services.
5. Mandt training includes:
 - a. Building positive relationships with the persons served.
 - b. Evaluating the environment and personal stressors
 - c. Using appropriate interaction to promote:
 - i. Prevention of unsafe behavior
 - ii. De-escalation
 - iii. Socially acceptable behavior
 - iv. Empowering the persons served to change their own behavior
6. Staff who are trained in the Mandt System will use the "Relational" skills taught to build and maintain positive relationships with individuals receiving services.
7. Staff who are trained in the Mandt System will use the skills taught to keep individuals receiving services, themselves, and others safe in the workplace and in the community.
8. Only those staff who are trained in approved physical intervention techniques via the Mandt System may physically intervene or participate in physical intervention with individuals receiving services.
9. Staff will use Mandt-approved physical management at the least restrictive level necessary, and only as an emergency response when the individual represents danger to self or others.
10. No physical management technique may be used for more than 15 minutes at a time. Staff must release their hold and monitor the individual's response. If the behavior that warranted physical management recurs, then the technique may be repeated two times up to a maximum of 45 minutes to the least restrictive level necessary for safety and assisting the individual in regaining self-control.
11. If an individual's behaviors reach the level of threat of lethal, staff shall call 911 for the protection of other recipients and staff. The staff must try less restrictive measures first.
12. Physical management shall be performed in front of other staff if practical.
13. The implementing staff must document all instances of physical management including the technique used and the length held in:

- a. The progress notes of the individual's record
- b. The data collection sheet accompanying a Behavior Support Plan
- c. An Incident Report form

14. All staff will receive update training on an annual basis.

References: Office of Recipient Rights Restraint, Seclusion and Physical Management policy (04-009); Michigan Mental Health Code 740, 742, 744; Michigan Department of Health and Human Services (MDHHS); Licensing and Regulatory Affairs (LARA) R 400.14308; Resident Behavior Interventions Prohibited and R 400.14309, Crisis Intervention; and the Mandt System®

Effective Date: 04/03/19

Revised Date: 12/10/19

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23

Rights Restrictions

Purpose

To ensure that any restriction to the rights of an individual served by Pioneer Resources, Inc. is necessary for their health or safety, agreed upon in writing by the person served and/or the person's legal guardian, and is regularly reviewed for continued necessity.

Policy

Pioneer Resources, Inc. is committed to protecting the rights of the individuals served, in the least restrictive environment possible. Restrictions will only be put in place for the health and safety of a person served following HCBS guidelines. If a restriction is necessary it shall only be enforced after all required agreements and documentation have been acquired.

Background Information (Including Definition)

Restrictions may include, but are not limited to:

- Coming and going from the home without staff assistance
- Use of outside door safety alarms
- Use of half doors
- Use of locked doors

Procedures

1. If a rights restriction is necessary for health or safety reasons, the restriction must be agreed upon by the individual, legal guardian, if applicable, residential manager or residential Director, and supports coordinator of the responsible agency, if applicable.

2. The restriction must be clearly described in the following documents, and signed by all responsible parties:
 - a. Assessment Plan for AFC Residents (if applicable)
 - b. The individual's Person-Centered Plan
3. Restrictions will be reviewed at least annually, and removed when possible.
4. If an individual's restriction will affect other housemates or program participants, the restriction must be agreed upon in writing by all other individuals and legal guardians, if applicable.

References: Michigan Department of Health and Human Services (MDHHS), Licensing and Regulatory Affairs (LARA), "*Assessment Plan for AFC Residents*" (BCAL-3265); Michigan Department of Health and Human Services (MDHHS), Licensing and Regulatory Affairs (LARA), Resident Rights for AFC Group Homes; MDHHS, Office of Recipient Rights, Your Rights When Receiving Mental Health Services in Michigan; Home and Community Based Services (HCBS) standards; and CARF, Employment and Community Services Standards

Effective Date: 12/10/19

Revised Date:

Reviewed Date: 09/29/20, 09/27/21, 09/26/22, 11/02/23, 10/22/24

Complaint and Conflict Resolution

Purpose

To describe the means by which people receiving services from Pioneer Resources, Inc. or their guardians may submit concerns or complaints about the way services are (or were) provided or denied; and to describe procedures for resolving conflicts.

Policy

It is the policy of Pioneer Resources to address conflicts and complaints involving individuals served by the agency as expeditiously as possible. We will attempt to resolve conflicts and act on complaints via the simplest and least formal method first, with more formal steps and appeals within the corporate structure following.

Abide by relevant policies of recipient rights and protective services and to refer complaints to the proper authorities, simultaneous with internal procedures, if a situation warrants it.

Provide a method to register complaints and grievances that ensure that complaints are treated constructively and do not result in retaliation or the placement of barriers to further service.

Background Information (Including Definition)

1. This policy is intended to give persons served, parents, or guardians a means to bring a complaint or grievance to the attention of appropriate agency personnel and outline how Pioneer Resources as a private, nonprofit service provider will handle or process these complaints or conflicts.
2. This policy is not intended to add, detract or change formal complaint or grievance procedures which exist as a result of federal or state law or county or municipal policy or ordinance, nor is it meant to replace quality control mechanisms, satisfaction surveys, or ongoing informal dialogue with person served and their representatives.

Procedures

1. Recipients of service and their representatives should be notified upon intake concerning this policy and the procedures outlined.
2. Individuals wishing to file a grievance or make a complaint may do so in person, in writing using the [complaint and conflict resolution form](#), or by telephone. Complainants may be assisted by an advocacy organization or personal advocate.
3. If an employee of Pioneer Resources becomes aware that a person has a complaint about an employee, policy or procedure of the agency, and has reason to believe that the person will require assistance to communicate the complaint, the employee should provide assistance. If assisting the person will result in a conflict of interest situation, e.g. the complaint involves the employee, the person should be referred to his or her resident advocate or the area supervisor for assistance.
4. Persons served should be offered the opportunity to contact an independent advocacy organization such as the Arc or the Disability Network.
5. The following guidelines apply to complaints or concerns about an employee of Pioneer Resources:
6. The person making the complaint or grievance is asked to document the complaint on the form indicated in #2 above submit it to the individual listed below. If someone wishes to make the complaint verbally, he or she should contact the person below and register their concern by telephone or through a personal meeting. In this case the person receiving the complaint shall write down the relevant information using the form.
 - a. Direct concerns or complaints about an employee to: Compliance Officer, Pioneer Resources, 1145 Wesley Avenue, Muskegon, MI 49442 or 231-773-5355.
 - b. The Compliance Officer shall, immediately after receiving the complaint, notify both the supervisor of the employee in question and the supervisor's immediate superior. It is important that both be notified to achieve checks and balances.
 - c. The supervisor shall review the complaint and conduct an investigation. They may interview the complainant, relevant parties and witnesses, if applicable.
 - d. The supervisor shall provide a written response to the complainant within 10

working days; the CEO and Department Director shall receive a copy of the response.

- e. A complainant may appeal the decision of the supervisor by directing their complaint to the CEO, 1145 Wesley Avenue, Muskegon, MI 49442, 231-773-5355.
7. The following guidelines apply to complaints or concerns about a policy or procedure of Pioneer Resources:
- a. The person making the complaint or grievance is asked to document the complaint on the appropriate form and submit it to the CEO.
 - I. If someone wishes to make the complaint verbally, they should contact the CEO and register their concern by telephone or through a personal meeting.
 - II. In this case the CEO shall write down the relevant information using the form.
 - b. The CEO shall review the complaint and conduct an investigation.
 - I. They may interview the complainant and other relevant parties, if applicable.
 - II. An effort shall be made to determine if a policy or procedure was implemented correctly or if the practice itself provides legitimate grounds for the complaint.
 - III. The CEO should seek input from the appropriate department head.
 - IV. The CEO shall provide a written response to the complainant within 15 working days.
 - V. Copies of the complainant and the response shall be reviewed by the Executive Committee of the Board of Directors, which may or may not act to change a policy.
 - c. All other forms of complaints should be addressed to the CEO at the address above.
8. Appeals
- a. In the event that a complainant does not believe a complaint has been resolved satisfactorily, they may request review by an independent advocacy organization. The request should be made in writing to the CEO.
 - b. If a request for an appeal is received, Pioneer Resources will forward the request and all written forms and determinations from previous steps to an independent advocacy organization such as those listed in the references below.
 - c. Alternatively, the complainant may request that the matter be referred to the Mediation and Restorative Services. If confidential information is to be conveyed appropriate release shall be obtained.

9. Analysis; An annual analysis will occur of all complaints to review process and procedures and initiate modifications as necessary.

References: Recipient Rights Policy, Arc Muskegon, 601 Terrace, Suite 101 Muskegon, MI 49440, 231-777-2006, Disability Network (a CIL), 27 E. Clay, Muskegon, MI 49442, 231-722-0088, and Mediation & Restorative Services, 27 E Clay, Muskegon, MI 49442, 231-727-6001

Effective Date: 09/16/04

Reviewed/Revised Date: 11/02/23

Reviewed Date: 09/27/21, 09/28/22, 11/02/23, 10/25/24

Privacy

Purpose

Pioneer Resources, Inc. is committed to protecting your privacy. You can visit all portions of www.pioneerresources.org without identifying yourself or revealing any personal information.

Policy

Email Information

Should you choose to correspond with us through email, we may retain the content of your email messages together with your email address and our responses. We provide the same protections for these electronic communications that we employ in the maintenance of information received by mail and telephone.

How Do We Use the Information That You Provide To Us?

We use personal information solely for purposes of customer service.

How Do We Protect Your Information?

Email that you may send to us may not be secure unless we advise you that security measures will be in place prior to your transmitting the information. For this reason, we ask that you do not send confidential information to us through an unsecured e-mail.

Employee Access

In general, our practices limit employee access to confidential information and limit the use and disclosure of such information to authorized persons.

Do We Disclose Information To Outside Parties?

Pioneer Resources, Inc. does not sell or otherwise disclose user information outside the organization.

What About Legally Compelled Disclosure Of Information?

We may disclose information when legally compelled to do so; that is, when we, in good faith, believe that the law requires it or for the protection of our legal rights.

Changes to This Privacy Policy

Pioneer Resources, Inc. reserves the right to update this policy as policies and best practices require such changes.

Questions and Suggestions

If you have questions or suggestions, please contact us at:

Pioneer Resources
1145 Wesley Avenue
Muskegon, MI 49442
231-773-5355

Effective Date: 12/20/16

Revised Date: 11/02/23

Reviewed Date: 09/29/20 09/27/21, 09/26/22, 11/02/23, 10/25/24

Problem Solving

Employee Grievances

Purpose

To establish a standardized and equitable procedure by which employees may appeal management actions and/or decisions which affect the employee's compensation, disciplinary actions or conditions of employment.

Policy

When it is not possible to settle a misunderstanding or disagreement between the employee and Director, or the employee does not agree with a discipline decision, it is the policy of Pioneer Resources, Inc. to give all employees an opportunity to appeal management decisions and actions which impact the employee's compensation or terms and conditions of employment.

Background Information (Including Definition)

1. Employees can appeal decisions and/or actions which affect the employee's compensation, disciplinary actions, or conditions of employment.
2. Informal processes for settling disputes include meeting privately with the supervisor who took the action with which the employee disagrees, airing all pertinent facts and reasons for the disagreement.
3. Process which provides the employee an opportunity for writing a rebuttal for all employment related documents placed in the personnel file.

Procedures

1. An employee must exhaust informal processes for settling disputes prior to filing a formal grievance.
2. Any employee wishing to file a formal grievance concerning compensation, disciplinary actions or conditions of employment must file a [PIONEER RESOURCES INC. Grievance Form](#) with the Director of Human Resources within five (5) working days of the date the action was brought to the attention of the employee.
3. All grievance forms must be delivered in person, by certified/registered mail with return receipt requested, or submitted electronically. The form must contain the reasons why the employee feels the action(s) is unjust and must specify the remedial action requested.
4. The Director of Human Resources shall, within ten (10) working days from the date of receipt of the grievance form, investigate the circumstances and render a decision on the grievance. This decision shall be in writing and on the originally filed grievance form. A copy of this complete form shall be available upon request. The employee rebuttal, investigation notes and the outcome documents will be kept in a confidential investigation file.
5. The employee shall, within five (5) working days from the date of receipt of the outcome of the grievance, decide to file any further action. Otherwise, the issue shall be considered closed by the decision as it was rendered.
6. The employee does have the option to write a rebuttal in response to the discipline document placed in the personnel record. The rebuttal is attached to the discipline or performance document that the employee disagrees with or disputes. If the employee wants to take further action; the employee must request a hearing with the Personnel Committee of the Board of Directors. This shall be done by written memorandum to Pioneer Resources' CEO which is either hand delivered or sent via certified or registered mail. This memo must explain why the decision rendered was unsatisfactory to the employee; must specify further remedial action necessary; and must request a hearing with the Personnel Committee.

7. Pioneer Resources' CEO shall forward the hearing request to the Chairperson of the Personnel Committee. They shall also attach a copy of the hearing request memo to the grievance form filed in the employee's record, shall furnish the Committee with any required or requested information concerning the grievance, and shall assist the Committee in any way to conduct the hearing.
8. The Personnel Committee shall conduct the hearing within thirty (30) business days from the date of receipt of the request. The Committee may conduct the hearing in any way it desires (formally or informally) and may request any party (or parties) to participate. Decisions of the Committee shall be put in writing and shall be delivered to the employee and Pioneer Resources, Inc.'s CEO, and a copy shall be placed in the employee's personnel record.
9. This hearing process represents the final level of solution available within the Pioneer Resources' structure and the decision of the Personnel Committee shall be considered final.

References: Bullard-Plawecki Right-to-Know.

Effective: 05/17/19

Revised: 6/4/19

Reviewed: 9/23/20, 9/16/21, 9/23/22, 10/30/22, 10/30/23, 10/25/24

Employee Complaint and Conflict Resolution

Purpose

To describe the means by which employees of Pioneer Resources, Inc. may submit concerns or complaints about their work environment, a conflict with another employee or supervisor, or a conflict with the agency as a whole.

Policy

It is the policy of Pioneer Resources to address conflicts and complaints involving employees of the agency as effectively as possible. We will attempt to resolve conflicts and act on complaints via the simplest and least formal method first. If unsuccessful, more formal steps and appeals within the corporate structure will be followed.

Background Information (Including Definition)

This policy is intended to give employees a means to bring a complaint or grievance to the attention of appropriate agency personnel, and outline how Pioneer Resources as a private, nonprofit service provider will handle or process these complaints or conflicts. This policy is not intended to add, detract or change formal complaint or grievance procedures, which exist as a

result of federal or state law, county or municipal policy, or ordinance, nor is it meant to replace quality control mechanisms, satisfaction surveys, or ongoing informal dialogue with persons served and their representatives.

Procedures

1. Employees should start with the least formal option first should a complaint or conflict arise that does not violate an agency policy.
2. The first step is bring the concern/complaint to the person in question.
 - a. Employees should try to solve their concerns/complaints between themselves and the person where the conflict has arisen, prior to escalation.
 - b. This applies for all situations where a policy has not been broken; if a policy has been broken, the employee should notify his/her supervisor immediately.
 - c. The employees who are having a conflict should work towards a solution that will satisfy all parties and not impact any person's ability to do their job.
3. If the employees are unable to solve their concern, they should contact their supervisor to help find resolution.
 - a. Once notified, the supervisor should set up a meeting to mediate within five (5) business days of being notified of the complaint.
 - b. The employees and their supervisor(s) should meet to solve the conflict in a way that satisfies all parties involved.
4. If the supervisor is unable to solve the concern, the employee who brought forth the concern should fill out the [Complaint and Conflict Resolution form](#) and submit it to the department Director.
 - a. The department Director should then partner with the Director of Human Resources to review, investigate, and meet with the complainant within five (5) business days to remedy a solution.
 - b. The solution should be submitted in writing to the complainant.
5. If this solution does not meet the complainant's expectations, the complainant should appeal to the CEO within five (5) business days of the solution being presented.
 - a. The CEO shall review the complaint and conduct an investigation. They may interview the complainant and other relevant parties, as applicable. An effort shall be made to determine if a policy or procedure was implemented correctly, or if the practice itself provides legitimate grounds for the complaint. The CEO should seek input from the appropriate department head(s).
 - b. The CEO shall provide a written response to the complainant within 15 working days. Copies of the complainant and the response shall be reviewed by the Executive Committee of the Board of Directors, which may or may not act to change a policy.
6. Appeals.
 - a. In the event that a complainant does not believe a complaint has been resolved satisfactorily, he or she may request review by the Personnel Committee of the

Board of Pioneer Resources.

- b. If a request for an appeal is received, Pioneer Resources, Inc. will forward the request, and all written forms and determinations from previous steps, to the Personnel Committee of the Board of Pioneer Resources.
- c. The Personnel Committee's ruling shall be final.
 - I. A written response will be prepared by the Personnel Committee and forwarded to the CEO for distribution to the parties involved.
 - II. All complaints shall be reviewed and responded to by the Personnel Committee within 30 business days.

References: Complaint and Conflict Resolution Policy.

Effective Date: 10/13/20

Revised: 10/30/23

Reviewed: 9/16/21, 9/23/22, 10/30/23, 10/25/24

Financial Policies

Purchases with Company Funds

Purpose

To establish the procedures to follow when making purchases on behalf of Pioneer Resources, Inc., Pioneer Arbour, Inc. and Pioneer House, Inc. and for actions required on behalf of the work of the emergency management of Lazarus Place.

Policy

It is the policy of Pioneer Resources, Inc. to issue authorized purchasers a corporate credit card for routine and non-routine company expenses. When available, this is the preferred payment option.

When purchasing fuel for company vehicles that vehicle's fleet card is to be used for payment.

Other payment options for routine and non-routine expenses can be developed with consent of the finance department.

Background Information (Including Definition)

1. Routine Purchases

- a. In general consumable supply items can be considered routine:
 - i. Groceries for group homes.
 - ii. Household supplies such as toilet paper, light bulbs, and cleaning supplies.
- b. Routine auto maintenance, including tire repair, tire rotation, and lube/oil changes either purchased by fleet management or sent to a vendor by fleet management.

2. Non-Routine Purchases

- a. Non-consumable items with a price greater \$100
 - i. Examples: Desk chairs, household furniture, and minor equipment over \$100 but less than \$4,999.
- b. Capital purchases, equipment or furniture over \$5,000.
 - i. Examples: Essential appliances such as washing machine, dryer, dishwasher, refrigerator, stove needed to ensure function of the home.
- c. Auto repairs purchased through fleet management.

Procedures

1. Routine Purchases

- a. All purchases must be supported by documentation in the form of an itemized receipt from the vendor and submitted to the Finance Department or to the online Blackbaud system within five (5) business days of purchase with the following exceptions:
 - i. Fuel Purchases – Fuel for Agency vehicles should be paid with the fueling card assigned to that vehicle. The corporate credit card may be used for gasoline purchases in an emergency situation where the fueling charge system is not working, or if a fueling charge station is not available when out of town.
 - ii. Fuel costs for employees utilizing their personal vehicle are compensated by submitting mileage reimbursement requests through their supervisor, who will turn it into the Finance Department for entry into the system. Finance will then forward to the Human Resources Department for reimbursement through payroll.
- b. Supporting documentation received directly from a vendor into the Finance Department will be submitted to the appropriate department director or CEO for authorization with the following exception:
 - i. Blanket Approvals / Contracts: Vendors that supply goods that are common and the purchase cycle is predictable and routine may be issued a Blanket Approval for purchases up to a specific dollar amount or for a specific period of time, or a combination of the two. These blanket approvals are to be reviewed as part of the annual budget process and during contract renewals. Examples would

- include such things as utility payments or service contracts. Example: The IT service contract is renewed and approved by the CEO, the monthly payments to that vendor do not need additional approvals as long as they are within the scope of the agreed upon current contract.
- ii. Example: A group home's monthly cable bill is paid automatically via the accounts payable credit card, the expense is compared to the amount budgeted but direct approval for payment by the Group Home Director is not needed.
- c. Budgeting Process – to be completed by the department Director:
- i. Vendors who will present multiple invoices for payment over numerous accounting periods for a good or service should be specifically entered into the budgeting software.
 - ii. Example: The agency hires a single lawn maintenance service to care for multiple properties. The contracts are tied to a specific property and the costs are fixed at a "not to exceed" price. The vendor would reference the cost that is assigned to specific property on its invoice enabling the agency to monitor costs to date, costs to complete, and costs by property efficiently and effectively by comparing actual expenses to those budgeted. The actual vendor or contract would be specifically allocated in the budget software.
 - iii. All other expenses will be entered in the budgeting software prior to budget approval utilizing the general ledger account and program assignment.
 - iv. Example: Medical expenses are entered in the budget software under the account code 52200 and to the cost center 01-340. As expense are received from various vendors they are coded into the financial software utilizing the supporting documents received.
 - v. The department director is responsible for comparing approved support and the available budget for that department or program. The department director is required to review this monthly for accuracy.

2. Non Routine Purchases

- a. Approval Process:
- i. Any non-budgeted purchases over \$100 must be approved through department director or their delegate director.
 - ii. Any non-budgeted purchase over \$250 must obtain pre-approval from the Director of Finance and or the CEO
 - iii. \$2,500 and over – there must be three (3) bids acquired before CEO and Finance Committee approval.
 - iv. The Director of Finance, Director of Business and/or CEO can authorize approval for non-budgeted essential appliances without finance committee approval. Examples: washing machine, dryer, dishwasher, refrigerator, stove and other appliances needed to ensure function of the home.
 - v. Grant, donation, and similarly funded expenditures made outside of the approved budget do not require prior authorization of the board, CEO, or Director of

Finance so long as they do not exceed the revenue received.

- b. Once approved, all purchases must be supported by documentation in the form of an itemized receipt from the vendor and purchased with the agency assigned credit card. Itemized receipts are to be submitted within five (5) business days into the Blackbaud online site. If expense requires a check request please complete a check request form: (found at P:\Forms\Financial Request Form\Check Request.doc) and submit to acctspayable@pioneerresources.org. Supporting documentation received directly from a vendor into the Finance Department will be submitted to the appropriate department director or CEO for payment authorization.
- c. Budgeting Process – to be completed by the department director:
 - i. Vendors who will present multiple invoices for payment over numerous accounting periods for a good or service should be specifically entered into the budgeting software.
 - ii. Example: The agency contracts for painting for multiple property improvements. The contracts are tied to a specific property and the costs are fixed at a “not to exceed” price. The vendor would reference the cost that is assigned to specific property on its invoice enabling the agency to monitor costs to date, costs to complete, and costs by property efficiently and effectively by comparing actual expenses to those budgeted. The actual vendor or contract would be specifically allocated in the budget software.
 - iii. All other non-routine expenses, to the extent they are known or expected, will be entered in the budgeting software utilizing the general ledger account and program assignment.
 - iv. Example: A supervisor's computer will exceed its planned life in the upcoming budget year. The estimated replacement cost is entered in the budget software under the account code 50125 and the appropriate cost center. When the purchase is planned to be completed the Director approves the purchase, the purchase is made either utilizing the VISA card, a vendor check is requested to the Finance Department, or the invoice will be paid when submitted to the Finance Department.
 - v. The department director is responsible for comparing approved support and the available budget for that department or program.

Effective Date: 4/27/00

Revised: 10/18/22

Reviewed: 11/8/23

Reimbursement for Travel

Purpose

To establish a system whereby employees of Pioneer Resources, Inc. may request reimbursement for agency approved travel, lodging or meals.

Policy

It is the policy of Pioneer Resources, Inc. to reimburse employees for out-of-pocket expenses incurred while conducting approved agency business.

Background Information (Including Definition)

1. Documentation - All reimbursements requested must be supported by copies or receipts.
2. Lodging - Motel, hotel; or similar accommodations which must be used by an employee in order to efficiently conduct approved agency business. Lodging reimbursement would only be granted when the employee is required to spend a night at least 75 miles from the agency. Lodging expenses should be approved in advance.
3. Meals - Any regular meals which must be eaten away from home in order to conduct approved agency business. Meal allowances are based on the GSA website*** for location. If conference or event includes meal, agency will not reimburse for meal outside of event. Any cost incurred over the location allowable limit will be the responsibility of the employee and paid back through payroll withholding.
4. Travel - Travel refers to the use of an employee's personal vehicle for the conduct of approved agency business. If more than one employee is traveling to the same work destination, the agency requires ride share and only one mileage reimbursement will be allowable. Travel mileage is calculated from point of departure to point of return.
5. Travel Rate - Travel Reimbursement rate for mileage is established by the agency and adjusted to match the federal mileage rate.
6. Commercial Airfare: Costs in excess of the basic least expensive accommodations class offered by commercial airlines are disallowed through company funds, employee may utilize their personal funds for upgrades.
7. Agency credit cards may not be utilized for costs related to expenditures of spouse and/or any other non-agency employees.

Procedures

1. All requests for travel must be budgeted into the program expense by the program director prior to engaging in the business which would warrant the reimbursement. In all cases it shall be the option of the employer to approve or deny reimbursement requests.
2. Requests should be in simple written form and should state the reasons for the request and the estimated amounts. This occurs during the succession plan development and during the budgeting process. (Advanced requests need not be made for mileage

incurred while traveling in Michigan.)

3. Mileage requests must show date of travel; reason for travel; points of departure and return; destination; and total miles driven. It should be turned in bi-weekly/ or monthly and will be paid out through the regular payroll process.
 - a. Mileage should be submitted for payment by the 5th of the month, for the previous month (or sooner), in order to maintain expenses in the correct accounting period.
 - b. Pioneer Resources' fiscal year begins October 1st and ends September 30th.
 - i. All mileage requests made must be done so in the fiscal year the expenses were incurred.
 - ii. If submitting expenses from September, the request(s) must be submitted for processing by October 5th.
 - c. Any mileage requests outside of the above stated timeframes will be considered untimely.
 - d. Untimely mileage reimbursement requests will be denied.
4. Employees are to utilize their work credit card for these purchases and document accordingly upon return. All documentation/ receipts must show specific itemized purchases. (No receipts will be accepted for reimbursement that are showing totals only)
5. When the employee returns from the approved business, receipts shall be presented through the online credit card system and any discrepancies between amount advanced and actual receipts shall be rectified.
 - a. The agency will pay for reasonable and customary charges for meals and up to \$5.00 of non-meal items. (Based on the GSA site*** based on location)
 - b. In most cases, breakfast will not be paid for the first day of travel.
 - c. Similarly, the last meal of a travel day is generally not paid for if the employee will be home before 6:00 p.m.
 - d. In no instance will the agency pay for the purchase of alcoholic beverages.
6. The supervisor shall approve, deny, or modify charges on the credit card once verifying all receipts and the cost against the budgeted amount.
7. If any payment is to be made to the employee, the reimbursement is generally added to the employee's paycheck.

References: GSA Meal and Incidentals calculator:

Find M&IE total and breakdown by meal for travel in the continental U.S

1. Determine the location where you will be working while on official travel.

2. Look up the location-specific information at www.gsa.gov/perdiem.
3. On the results page, find the row for your specific location and note the amount listed for M&IE total, breakfast, lunch, dinner, incidentals, and first and last day of travel.

Effective Date: 7/16/16

Revised:

Reviewed: 10/18/22, 11/8/23

Petty Cash Use

Purpose

To establish the procedures to follow when using a Petty Cash Fund for company purchases.

Policy

Pioneer Resources, Inc. permits departments, on an as needed basis to hold cash, in an imprest account (.e.g. a Petty Cash Fund) to make payments in cash for small expenses that are approved in advance for Pioneer Resources, Inc., Pioneer House and or Pioneer Arbour.

Employees who have access to and are responsible for the funds held in the Petty Cash Fund shall adhere to the Petty Cash Fund guidelines listed below.

Background Information (Including Definition)

1. The establishment of all Petty Cash funds must be established by the Finance Department, must be replenished with funds from the Finance Department, and upon its termination, all residual funds must be returned to the Finance Department; along with a complete accounting of all additions to and subtraction from the fund subsequent to the most recent audited balance.
2. The use of the Petty Cash Fund for payment is to be limited to small cash expenses.
3. The Petty Cash Fund may be used to reimburse an employee for expenses paid out of pocket, if a receipt is provided for the item to be reimbursed.
 - a. *Reimbursement Example:* An employee uses their funds to purchase postage for the group home and brings a receipt from the post office. The employee can be reimbursed for the expenditure.
 - b. *Non-Reimbursement Example:* An employee says they spent \$5 for fuel for the group home van, but does not have receipt. The employee cannot be reimbursed for the expenditure.

Procedures

1. All purchases must be supported by documentation in the form of detailed receipts from the vendor. Undocumented purchases are the responsibility of the Director of the Petty

Cash Fund.

2. Petty Cash expenditures must be for the benefit of the residents only. Petty Cash Funds are not to be used to benefit employees. Example: Purchasing flowers, cakes, cards and other miscellaneous items for an employee.
3. Each month, the Supervisor, or his or her designee, will reconcile the cash balance in their possession to what is recorded in Blackbaud. The cash on hand plus the receipts held for disbursement should equal what was allotted to them.
4. At least quarterly, all petty cash accounts held in both the cash on hand held plus the receipts held for disbursement will be compared with the balances expected per the general ledger. The funds will be counted by an individual with either knowledge or custody of the funds and then recounted by a member of the finance department. All discrepancies will be investigated and reconciled. If there is a discrepancy, the frequency of the audit will be increased until there are at least 4 consecutive months of accurate reporting.
5. Any violation of these guidelines shall be dealt with according to the Cash Shortages Policy.

References: Cash Shortages policy and Credit Card Reconciliation policy.

Effective Date: 4/27/00

Revised Date: 5/1/19

Reviewed: 10/18/22, 11/01/23

Personal Funds of Persons Served

Purpose

To establish the procedure for requesting, receiving, recording, holding, and distributing the personal funds of persons served in residential settings.

Policy

Upon request from a resident, guardian, or payee, the residential supervisor/designee shall accept a resident's personal funds to be held in trust. The care of a resident's personal funds that have been accepted by Pioneer Resources, Inc. for safekeeping shall be treated as a trust obligation. When asked by the resident, guardian, or payee to hold and distribute personal funds, the residential supervisor/designee will make sure procedures are followed so that all funds are protected, accounted for, and utilized solely for the person's benefit.

When a resident chooses to be wholly responsible for her or his personal funds, Pioneer Resources shall require a statement signed by the resident, guardian, or payee which

acknowledges that Pioneer Resources, Inc. will not assume responsibility for requesting, receiving, recording, holding or distributing personal funds. This statement will be written on the Resident Care Agreement. Residents who are in charge of their own personal funds will be encouraged to keep less than \$200.00 on hand. As needed, Pioneer Resources' staff will assist the person with the cashing of checks, will encourage the person to safeguard her or his money, and to budget for desired items or activities.

Cash Shortages: The disciplinary steps will parallel the progressive practices documented in Employee Relations & Attendance Policy.

Background Information (Including Definition)

- **Personal Funds:** Personal spending money.
- **CFRA:** "Client Fund Release Authorization". This form may be used to request personal spending money on the resident's behalf.
- **Joint Checking Account:** Checking account used solely for resident personal funds. Individual checking account ledgers shall be maintained for each person. Funds belonging to one person shall not be used for another person. The residential supervisor, program Director and CEO will have the only authorized signatures on the joint checking account.
- **Cash Account:** Personal spending money which is kept in the group home. No more than \$200.00 may be held in the cash account for each resident. A minimum of \$20.00 is to be maintained in each person's cash account. When a resident has less than \$20.00 spending money the residential supervisor/designee shall request additional funds for that person. All cash shall be secured in a locked cash box within a locked cabinet or drawer. Only the residential supervisor/designee shall have access to the keys, and she or he is responsible for signing out cash to the resident or residential support staff assigned to assist that person.
- **Designee:** A home assistant (HA) or a specific residential support staff (RSS) entrusted with the duty to safeguard, distribute and account for resident's personal funds.
- **Informed Consent for Expenditure of Funds:** Informed consent is given when the resident, guardian, or payee agrees to the following on the "AFC – Resident Care Agreement" – "I agree to have the licensee manage funds and account for financial transactions on my behalf. Expenditures of my personal funds over the amount of \$(fill in the blank) require my prior written approval". In general, it is anticipated that the person served will be present when making purchases using personal spending money. Exceptions include when purchasing items for the person for birthday or Christmas gifts, or if the person served asks that we make a specific purchase for her or him.
- **Funds Transactions Signatures:** All resident funds transactions shall require the signature of the resident, guardian, or payee, and the residential supervisor/designee, or prior written approval from the resident, guardian, or payee. In licensed residential

programs the AFC-Resident Care Agreement and Assessment Plan for AFC Residents will serve as prior written approval when the resident, guardian, or payee has agreed to have the licensee manage personal funds and account for financial transactions on the resident's behalf.

Procedures

To ensure accountability and documentation for resident's personal funds, the following procedures will be adhered to:

1. Requesting Money

- a. Request to Contract Agency: The residential supervisor/designee may request money for personal spending for a person served by completing a form approved by the contract agency. The current HealthWest form is titled "Client Fund Release Authorization" (CFRA). Requests may originate with the resident or home staff, but must be submitted by the residential supervisor/designee. The completed CFRA request may be submitted to the supports coordinator of the contract agency.
- b. Request to Guardian or Other Payee: The residential supervisor/designee may request money for personal spending for a resident by contacting the guardian or other payee directly. This request may be done via CFRA, telephone, e-mail or in person.

2. Receiving Money

- a. All funds received shall be deposited into the beneficial owner's account within two business days.
- b. Checks: Checks should be made out in the name of the group home. The residential supervisor/designee shall deposit checks into the joint checking account. This transaction shall be documented on the joint checking account ledger, and also on the resident's individual "Checking Account" ledger. A check may then be written to withdraw some or all of the money and the cash shall be transferred to the resident's individual cash account. This transaction shall be documented on the person's individual "Cash Account" ledger.
- c. Paychecks: If a resident receives paychecks, the method by which checks are deposited/cashed must be agreed upon by the resident, guardian, or payee and the residential supervisor/designee. This procedure shall be documented and the document signed by each person involved in the decision-making.
- d. Cash: Checks are the preferred method of receiving money for the persons served. If cash is received the residential supervisor/designee shall complete a written receipt, provide the original receipt to the person giving the money and maintain a copy of the receipt in the home for auditing purposes.
- e. Monetary Gifts and Donations: Monetary gifts and donations shall be deposited into the resident's cash account or the joint checking account, and documented on the appropriate individual ledger.

- f. Remote Deposit Capture (RDC): The negotiation of checks using a remote deposit capture process in which pictures of the checks are taken and the corresponding deposits made to the residents' accounts using a mobile device, is allowed when the following procedures are followed:
 - a. All RDC requirements from Pioneer Resources' authorized bank of deposit shall be followed.
 - b. Home manager will write "For Deposit Only RDC" on the back of the check as the endorsement in order to indicate this is a remotely deposited item.
 - c. A picture of the check will be taken in accordance with bank specifications; ONLY a Pioneer Resources' issued phone can be used to capture images – NO PERSONAL DEVICES should ever be used in order to protect the privacy and potential HIPAA information of persons' served.
 - d. Home manager will send an email or text to Accounts Payable (AcctsPayable@pioneerresources.org) with an image of the deposited item.
 - i. Accounts Payable representative shall receive the image of the deposited check.
 - ii. Accounts Payable representative will approve/confirm that the image of the check was received and is a good image.
 - iii. Home manager may dispose of the physical paper check AFTER ACCOUNTS PAYABLE HAS APPROVED THE IMAGE; manager must receive approval from AP prior to destroying the item (for security purposes, paper checks should not be kept past receiving the approval from AP).
 - iv. Accounts Payable representative will archive the electronic image of the deposited item for a minimum of 45 days.

3. Recording Transactions and Holding Money

- a. Deposits: Deposits made to the joint checking account shall be detailed according to funds received for each individual.
- b. Joint Checking Account:
 - i. The residential supervisor/designee shall maintain individual "Checking Account" ledgers, separate from the check book register, showing each resident's funds in the joint checking account.
 - ii. If an interest-bearing checking account is used, interest will be divided equally between each resident utilizing the account. In the event of an uneven amount of interest, the residential supervisor/designee will alternate which individuals receive extra interest added to their checking ledger. It is expected that any excess interest allocated to an individual would be no more than one cent per month.

- c. Cash Account: The residential supervisor/designee shall maintain a separate cash account in the home for each resident, with individual "Cash Account" ledgers. All transactions shall be documented on the person's "Cash Account" ledger.
- d. Cash: Cash kept in the home shall be kept under lock and key and may only be accessed by the residential supervisor/designee. Less than \$200.00 should be maintained in individual cash accounts.
- e. In instances where a resident accumulates a substantial sum of money, the residential supervisor/designee shall consult with the resident, guardian, or payee, or the assigned supports coordinator regarding the disposition of excess funds.

4. Distributing Personal Funds

- a. When personal funds are to be used the residential supervisor/designee shall sign out a specific amount of cash to the resident or residential support staff assigned to assist the person.
- b. When home staff accompany a resident on an outing and that person spends some or all of their personal funds, the resident or staff must obtain a receipt for each purchase. These receipts shall then be turned in to the residential supervisor/designee, along with any remaining money (unless the resident chooses to keep the remainder of his or her personal funds).
- c. The residential supervisor/designee shall verify and secure the receipts. Expenditures shall be recorded on the appropriate ledger. Unused funds shall be returned to the proper account.
- d. Procedure for purchases made using a check or debit card:
 - i. Check: The residential supervisor shall write a check payable to the vendor. The resident's name or initials shall be written in the note section on the check. This transaction will be recorded on the joint checking account ledger and on the resident's individual checking account ledger.
 - ii. Debit Card: The residential supervisor shall use the checking account debit card for the purchase. Purchase information shall be recorded on the joint checking account ledger and on the resident's individual checking account ledger.
- e. If a purchase needs to be made before a resident's money has been received, the residential supervisor/designee may use a Pioneer Resources' credit card. When the money arrives it will be deposited into the joint checking account and a check will be made out to Pioneer Resources, Inc. to reimburse the purchase.

5. Account Reconciliation

- a. Audits:
 - i. A monthly audit of resident funds shall be conducted by the residential supervisor/designee. Individual receipts will be checked against the cash or checking ledger for each person. Ledgers shall be checked for accuracy,

- including adding all individual checking ledgers together to ensure the total matches that of the most recent statement, and any cash held for a resident shall be counted and matched against the cash ledger.
- ii. A member of the Finance Department will review the resident fund accounts. This will be done at least quarterly but with more frequency if reconciliation discrepancies are an issue.
 - iii. Additional audits may be conducted by contract agency staff, licensing personnel and PR staff. During those audits the residential supervisor/designee is expected to be present.
- b. Resident Access to Account Information:
- i. A copy of individual cash and checking ledgers will be copied or printed and distributed to each resident on a monthly basis.
 - ii. A complete accounting of all resident funds held by PR will be made available to the resident, guardian, or payee on no less than an annual basis.
 - iii. Upon request of the resident, guardian or payee, an accounting of a resident's funds shall be provided not more than five (5) banking days after the request is made, and at the time of the resident's discharge from the home. To request an accounting of personal funds the resident, guardian, or payee is to contact the residential supervisor.
- c. Copies of audits will be maintained in the home for the current year as well as the last three years.

References: Discharge from a Licensed AFC Home policy; Refunds policy; Michigan Department of Licensing and Regulatory Affairs, Bureau of Community and Health Systems, Adult Foster Care and Camp Licensing Division, Licensing Rules for Adult Foster Care Small Group Homes (12 or less); Michigan Department of Licensing and Regulatory Affairs, Bureau of Community and Health Systems, BCAL-2318, Resident Funds Record Part I; Michigan Department of Licensing and Regulatory Affairs, Bureau of Community and Health Systems, BCAL-2319, Resident Funds Part II; Michigan Department of Licensing and Regulatory Affairs, Bureau of Community and Health Systems, BCAL-3265, Assessment Plan for AFC Residents; Michigan Department of Licensing and Regulatory Affairs, Bureau of Community and Health Systems, BCAL-3266, AFC - Resident Care Agreement; and CARF Employment and Community Services Standards, Financial Planning and Management.

Effective Date: 03/29/01

Revised Date: 03/27/19, 09/11/24, 11/15/24

Reviewed Date: 09/30/21, 09/30/22, 09/29/23

Cash Shortages

Purpose

To describe guidelines for disciplinary action to be imposed in situations where there are cash shortages. Only designated employees can handle cash for the agency.

Policy

It is the policy of Pioneer Resources to clearly describe and define grounds of employee disciplinary action and to designate procedures by which such action may be taken.

Background Information (Including Definition)

The following are the types of cash shortages which could occur within the daily operations of the agency:

Petty cash

- Failure to attach a receipt to the Petty cash slip indicating specific expenditures; (failure to submit a receipt nullifies eligibility for reimbursement).
- Lack of accuracy in counting money back.
- Failure to have a designated caretaker of the Petty cash box who is systematic in maintaining its control.

Procedures

Petty Cash

1. Designate one person to monitor.
2. Only reimburse expenditures for which there is a voucher affixed to a petty cash slip which has been authorized by the department Director.
3. If not convenient to make reimbursements at a quiet time, balance out by the close of the work day.
4. Cash Shortages: The disciplinary steps will parallel the progressive practices documented in Employee Relations & Attendance Policy unless:
 - a. It is determined that the actions were not malicious in nature.
 - b. The dollar value of the shortage is immaterial.
 - c. The employee responsible for the funds at the time of the infraction is relinquished from all duties associated with cash handling activities.

Effective Date: 09/30/21

Revised Date: 09/30/22

Reviewed: 10/18/22, 11/08/23

Credit Card Reconciliation

Purpose

Employees must understand the responsibility of using a corporate credit card for purchases in the daily operations of the business.

Policy

Employees holding Pioneer Resources, Inc. corporate credit cards shall follow the listed procedures for reconciliation of purchases.

Background Information (Including Definition)

Original receipts for purchases must be retained by the cardholder.

Procedures

1. Receipts for purchases must be safeguarded as if they are cash; they provide evidence to the independent auditors that the purchase was necessary and the price was reasonable. Original receipts are required under GAAP (Generally Accepted Accounting Principles.)
2. The card holder is required to submit all receipts for purchases made on a company issued credit card. Timeliness is implied to mean appropriate coding should be completed at least once per week. The submission process is as follows:
 - a. The card holder must log into the financial software to code these expenditures and match the transactions associated with their card that Visa has honored with the receipts that the card holder obtained at the time of purchase.
 - b. Receipts will be required for all purchases and the receipt must be uploaded and linked to the corresponding transaction.
 - c. The card holder must "code" the invoice using account numbers, department numbers and company codes as provided in the system.
 - d. The cardholder must itemize the purchase to capture enough data to accurately record the nature of such. If items that are purchased are dis-similar but delineated on a single invoice, it is the responsibility of the cardholder to delineate their submission as well.
 - e. Pioneer Resources is tax exempt and purchases on behalf of the agency should reflect this by not including sales tax.
 - f. Once all items on the cardholder's statement have the correct account number(s), department number(s) and company codes, and the receipt attached, their card is considered reconciled.
3. Original receipts must be retained until the card holder is notified by their direct supervisor or the Finance Department that they can be destroyed (this includes storage in paper or electronic format).
4. Missing receipts will be identified and the card holder notified and given the opportunity to supply the document.

- a. The employee's director must then review the documents attached to the receipt to determine if the receipt is the correct receipt that adequately supports the specifics of the transaction, and must confirm that the coding will accurately record the company code, the departmental classification(s) and the expense grouping. Once the Director is satisfied, they will approve the entry.
 - b. A final reconciliation is performed by the finance department to ensure that all individuals holding cards are included and a review of the account number(s).
 - c. Undocumented purchases will be the responsibility of the cardholder.
5. If receipts cannot be produced by the cardholder reimbursement must be made to Pioneer Resources, Inc.
6. If the cardholder is missing a receipt, it is the responsibility of the card holder to request a copy of the receipt from the credit card company.
7. The card is not to be utilized for personal employee expenses. The card may be used for registration and travel expenses to meetings and conferences, with the prior approval of Administration through the budgeting process.
8. The card is not to be given to another employee to utilize without a Director's approval.
9. Use of this corporate credit card for personal expenses can result in disciplinary action and up to termination of employment.
10. Lost or stolen credit card purchases are the responsibility of the card holder.
11. Undocumented purchases will be recovered through payroll deduction and the deduction will be itemized on the pay stub. To ensure that you have received, read and understand our Credit Card Purchase Policy and Settlement Procedure, you will be asked to sign a copy of this policy for the Finance Department prior to receiving your card.

References: Purchases with Company Funds policy and Credit Card Reconciliation policy.

Effective Date: 6/16/10

Revised Date: 5/1/19

Reviewed: 10/18/22, 11/08/23

Leave Of Absence & Work Schedules

Administrative Leave

Purpose

To define conditions under which employees of Pioneer Resources, Inc. qualify for administrative leave.

Policy

It is the policy of Pioneer Resources to grant its eligible employees administrative leave for purposes described below.

Background Information (Including Definition)

Administrative Leave: Leave time which is granted by the employer for special purposes not covered by other forms of leave. Situations for which administrative leave that may be legitimately requested or granted include, but are not necessarily limited to:

- a. Attendance at conferences, workshops, and seminars which are work related and for which the employee is away from his normal work station for at least one day.
- b. Compulsory jury duty.
- c. Other duties required by federal or state law not covered in other sections of this policy manual.

Procedures

1. An employee must request administrative leave from their immediate supervisor.
2. The request should be made at least five working days in advance of the desired leave date, when possible, and must specify:
 - a. Reason for the leave request.
 - b. Duration of the leave requested.
 - c. Provisions to be made to cover job duties and responsibilities, during the leave period.
3. Requests shall be reviewed by the employee's supervisor. Supervisor shall forward the request, along with their recommendations, to the CEO. Only the CEO, their designee, or the Administrative Committee of the Board shall approve administrative leave requests.
4. Requests with approval, denial, or stipulating conditions shall be routed through the employee's supervisor and returned to the employee as promptly

as possible.

5. The employee granted administrative leave shall be responsible for completing any necessary arrangements for departure, and that all necessary personnel/departments are aware of the leave as needed.
6. Administrative leave days are paid by the employer according to principles described in the policies governing compensation.
7. Exceptions to these principles include:
 - a. Administrative leave granted for any purpose in which the employee is paid a wage, stipend, gratuity, etc., by another entity shall not be paid in duplicate by Pioneer Resources.
 - b. PR will pay the difference in amount between the normal PR wage and the amount paid by the other entity, if the normal PR wage is in excess of the other.
 - c. To receive such differential payment, the employee must furnish evidence to the Human Resources department of the amount paid by another entity. This must be done by the Friday preceding the next scheduled PR pay day to receive payment on the next pay date.
 - d. Any payment known to be received by the employee from another entity during an administrative leave must be explained in detail during the original leave request.
8. Duration of paid administrative leave shall be at the discretion of the employer.
9. Employees requesting administrative leave for jury duty or military duty must show proof of being called for such duties. This proof must be submitted with the request.
10. Administrative leave cannot be accumulated, nor can it be carried from year to year.
11. Administrative leave requests may be required to be submitted in writing as requested by the employee's immediate supervisor and/or CEO.

Effective: 03/01/99

Revised: 05/30/19, 09/30/22, 10/27/23

Reviewed: 9/28/20, 8/31/21, 09/30/22, 10/27/23, 10/25/24

Family Medical Leave Act

Purpose

The purpose of this policy is to ensure that the agency is in compliance with the Family and Medical Leave Act (FMLA) of 1993. The function of this policy is to provide employees with a general description of their rights and responsibilities under FMLA.

Policy

Under this policy, Pioneer Resources will provide eligible employees meeting the FMLA criterion up to 12-weeks of leave during a 12-month period (or up to 26-weeks of military caregivers leave to care for a covered service member with a serious injury or illness).

Background Information (Including Definition)

Eligibility; in general, to be eligible an employee must:

- Have been employed for at least 12 months or 52-weeks. The 12-months do not need to be consecutive. Separate periods of employment will be counted, provided that the break in service does not exceed 7 years. Separate periods of employment will be counted if the break in service exceeds 7 years due to National Guard or Reserve military obligations.
- The employee must have worked at least 1,250 hours in the 12 months immediately preceding the commencement of the leave. The 1,250 hours do not include time spent on paid or unpaid leave. Consequently, these hours of leave should not be counted in determining the 1,250 hours eligibility test for an employee under FMLA.
- The employee must work in a worksite where 50 or more employees are employed by the company within 75 miles of that office or worksite. The distance is to be calculated by using available transportation by the most direct route.
- Pioneer Resources, Inc. uses a look back period for eligibility based upon a “rolling” 12-month period.

Type of leave covered; to qualify as FMLA leave under this policy, the leave must be for one of the following reasons:

- The birth of a child, and in order to care for that child.
- The placement of a child for adoption or foster care and to care for the newly placed child.
- To care for a spouse, child, or parent with a serious health condition (as defined below).
- An employee may take leave because of a serious health condition (as defined below) that makes the employee unable to perform the essential functions of his or her position.

Under the FMLA, a “spouse” means a husband or wife. Husband or wife refers to:

- The other person with whom an individual entered into marriage as defined or recognized under state law for purposes of marriage in the state in which the marriage was entered into; or
- In the case of a marriage entered into outside of any state, if the marriage is valid; or
- In the place where entered into could have been entered into in at least one state.

This definition includes an individual in a same-sex or common-law marriage that either:

1. Was entered into in a state that recognizes such marriages; or
2. If entered into outside of any state, is valid in the place where entered into and could have been entered into in one state.

A serious health condition is defined as a condition that requires inpatient care at a hospital,

hospice or residential medical care facility, including any period of incapacity or any subsequent treatment in connection with such inpatient care or a condition that requires continuing care by a licensed health care provider.

This policy covers illnesses of a serious and long-term nature, resulting in recurring or lengthy absences. Generally, a chronic or long-term health condition that would result in a period of three (3) consecutive days of incapacity, with the first visit to the health care provider within seven (7) days of the onset of the capacity, and a second visit within 30 days of the incapacity, would be considered a serious health condition. For chronic conditions requiring periodic health care visits for treatment, such visits must take place at least twice a year.

1. Qualifying urgent leave for families of members of the National Guard, Reserves or of a regular component of the Armed Forces when the covered military member is on covered active duty, or called to covered active duty.
2. An employee whose spouse, son, daughter or parent has either been notified of an impending call to duty, order to covered active military duty, or who is already on covered active duty, may take up to 12-weeks of leave for reasons related to, or affected by, the family member's call-up service. The qualifying order must be one of the following:
 - a. Short-notice deployment.
 - b. Military events and activities.
 - c. Child-care and school activities.
 - d. Financial and legal arrangements.
 - e. Counseling.
 - f. Rest and recuperation.
 - g. Post-deployment activities.
 - h. Additional activities that arise out of active duty, provided that the employer and employee agree, including agreement on timing and duration of leave.
 - i. Eligible employees are entitled to FMLA leave to care for a current member of the Armed Forces, including a member of the National Guard or Reserve, a member of the Armed Forces, or a member of the National Guard or Reserve who is on the temporary disability retired list who has a serious injury or illness incurred in the line of duty on active duty for which he or she is undergoing medical treatment, recuperation, or therapy; or otherwise in outpatient status; or otherwise on the temporary disability retired list. Eligible employees may not take leave under this provision to care for former members of the Armed Forces, former members of the National Guard and Reserve, or members on the permanent disability retired list.

Amount of Leave

An eligible employee can take up to 12 weeks for the FMLA circumstances outlined in this policy. The company will measure the 12-month period as a "rolling" 12-month period measured backward from the date an employee uses any leave under this policy. Each time an employee takes leave, the company will compute the amount of leave the employee has

taken under this policy in the last 12-months and subtract it from the 12 weeks of available leave. The balance remaining is the amount the employee is entitled to take at that time.

An eligible employee can take up to 26 weeks for FMLA circumstances for military caregiver leave during a single 12-month period. For this military caregiver leave, the company will measure the 12-month period as a rolling 12-month period measured forward. FMLA leave taken for other FMLA circumstances will be deducted from the total 26 weeks available.

If a husband and wife both work for Pioneer Resources and each wishes to take leave for the birth of a child, adoption or placement of a child in foster care, or to care for a parent (but not a parent in-law) with a serious health condition, the husband and wife may only take a combined total of 12-weeks of leave. If a husband and wife both work for Pioneer Resources and each wishes to take leave to care for a covered injured or ill service member, the husband and wife may only take a combined total of 26 weeks of leave.

Procedures

1. FMLA Request and Notification to Employer
 - a. In the case of leave for birth or placement of a child, the employee must provide 30 days advance notice before the date on which the leave would begin. If the employee is unable to provide a 30 day notice, then he or she must provide notice as soon as possible.
 - b. In the case of leave for a serious medical condition, the medical notice must be provided in a timely fashion by a certified medical professional. Medical notice is to include:
 - The date on which the serious health condition in question began.
 - The probable duration of the condition.
 - Appropriate medical facts regarding the condition.
 - A statement that the employee is needed to care for a spouse, parent, or child, or that the employee is unable to perform his or her functions.
 - An estimate of the time required.
2. Intermittent Leave
 - a. Leave may be taken on an intermittent or reduced work schedule for the birth or adoption of a child.
 - b. If the employee requests intermittent leave based on planned treatment, the dates and duration of treatment(s) should be given.
 - a. Employees are required to make a reasonable effort to schedule the treatment so as not to unduly disrupt the operations of the employer.
 - b. Employees are required to provide 30 days advance notice, or if the treatment is in less than 30 days, as such notice is possible.
 - c. Leave may be taken on an intermittent or reduced work schedule for a serious health condition of the employee, employee's spouse, child, or parent if the intermittent leave is medically necessary and proper evidence is furnished to the agency upon request. An intermittent leave, or reduced work schedule, may not exceed 12 work weeks in the aggregate and must be completed within one year of

- beginning the leave.
- d. If an employee requests intermittent leave that is foreseeable, the agency reserves the right to transfer the employee to an alternative position for which the employee is qualified, and which better accommodates recurring periods of leave, than does the employee's regular position. The alternative position shall have equivalent pay and benefits. The employee will be returned to his or her former position at the conclusion of the leave, or 12 months, whichever occurs first.
3. Accrued Paid Time Off (PTO) use is required while on FMLA leave. PTO may be used to cover your cost of premium payments for health benefits while on leave.
 4. Health Insurance Benefits
 - a. While an employee is on leave, Pioneer Resources, Inc. will continue the employee's health benefits during the leave period at the same level, and under the same conditions, as if the employee had continued to work.
 - b. If the employee chooses not to return to work for reasons other than a continued serious health condition of the employee, the employee's family member, or circumstances beyond the employee's control, Pioneer Resources will require the employee to reimburse the company the amount it paid for the employee's health insurance premium during the leave period.
 5. Notice of Eligibility
 - a. BASIC (Pioneer Resources' FMLA provider) will provide the employee with a 'Notice of Eligibility' typically within five business days of receipt of the employee's notification to the employer of the need for FMLA leave.
 - b. The notice will inform the employee if they are eligible for leave under FMLA.
 - c. BASIC will notify the employee in writing via mail if they require additional information in order for them to determine if the absence qualifies under the FMLA. Additional information may include:
 - i. Sufficient certification to support the request. A certification form that sets forth the information necessary to support the request for FMLA leave will be supplied to the employee.
 - ii. Sufficient documentation to establish the required relationship between the employee and family member.
 - iii. Other information specific to the employee's situation.
 - iv. When certification is requested, we will allow 15 calendar days from receipt of the notice to return the certification or required medical documentation.
 - d. Human Resources will remain in contact with the employee to provide instructions of all rights and responsibilities.
 - e. If sufficient information is not provided in a timely manner, the employee will not qualify for protection under the FMLA.
 6. Employee Responsibilities While on Approved FMLA Leave (if your leave does qualify as FMLA leave, HR will notify you of any of the following responsibilities):
 - a. Contact Human Resources to make arrangements for the premium payments on

your health insurance to maintain benefits while you are on leave; there is a minimum 30 day grace period in which to make premium payments.

- i. If payment is not made timely, your group health insurance may be cancelled, provided we notify you in writing at least 15 days in advance; or
 - ii. At our option, we may pay your share of the premiums during the FMLA leave and recover these payments from you upon your return to work.
 - b. All PTO balances must be exhausted as indicated above.
 - c. We may determine that you are considered a “key employee” as defined in the Family Medical Leave Act. As a “key employee,” restoration to employment may be denied following FMLA leave on the grounds that such restoration will cause substantial, and grievous, economic injury to Pioneer Resources.
 - d. You may be required to furnish us with periodic reports of your status and intent to return to work as appropriate for the particular leave situation.
 - e. You may be asked to provide a fitness for duty clearance from a health care provider.
7. Employee Rights when Taking FMLA Leave (if your leave qualifies as FMLA leave you will have the following rights):
- a. Your health benefits must be maintained during any period of unpaid leave under the same conditions as if you continued to work.
 - b. You must be reinstated to the same, or an equivalent job, with the same pay, benefits, and terms and conditions of employment upon your return from FMLA protected leave.
 - c. If your leave extends beyond the end of your FMLA entitlement, you do not have return rights under FMLA. However, you may have rights under the American’s with Disability Act.

References: Family and Medical Leave Act of 1993, Public Law 103-3 (February 5, 1993), 107 Stat. 6 (29 U.S.C. 2601 et seq., as amended).

Effective: 01/01/01

Revised: 05/28/19

Reviewed: 9/28/20, 8/31/21, 09/30/22, 10/27/23, 10/25/24

Unpaid Leave (Work-Life Balance)

Purpose

Pioneer Resources, Inc. is committed to balancing the personal needs of its employees with those of the company and recognizes that on occasion, employees may require a personal leave of absence from their position for various reasons that are not covered by federal or state law.

The purpose of this policy is to establish who is eligible for an unpaid leave of absence, the process to request an unpaid leave of absence, and the requirements expected of an employee once an unpaid leave of absence has been approved.

What this policy does not do is guarantee that the employee will have the same or equal position when they return from an approved unpaid leave of absence. The policy is a gesture of goodwill that the company will agree to work with an employee to try and maintain employment, if reasonable, and is not to be construed as an implied contract of employment.

Policy

Employees may request an unpaid leave of absence from their job for the following reasons:

- Medical or physical/behavioral leave (self)
- Medical or physical/behavioral leave (family)
- Medical or physical/behavioral leave (other)
- Religious reasons
- Extended bereavement leave
- Educational reasons
- Personal tragedy (such as an accident or fire) for self or immediate family member

Eligibility for Unpaid Leave of Absence

The following qualifications must be met by the employee before a request for unpaid leave will be considered:

1. An employee is a regularly scheduled part-time or full-time employee; seasonal or temporary employees are not eligible.
2. An employee must have completed 6-months of consecutive employment with Pioneer Resources, Inc.
3. An employee must be in good standing and not in a formal performance improvement plan.
4. An employee is not eligible for FMLA.
5. An employee has no Paid Time Off (PTO) available, or if time is available, it must be exhausted.
6. The leave of absence must have a start date and end date.
7. The duration is intended to last longer than three business days.

How to Submit a Request

To request an unpaid leave of absence from your position, an "Unpaid Leave of Absence Request Form" must be completed and turned into your Supervisor. This form may be requested from your Supervisor, Director, or Human Resources. A request may be made for up to 12 weeks at a time for one reason, similar to FMLA.

Considerations

Once a request for an unpaid leave of absence has been submitted, the employee's supervisor

will consider the circumstances that surround the request including qualifications, reason, time requested off, and the number of previously approved requests for unpaid leave in the past year.

To ensure consistent and fair application of the policy, a decision may include consultation with the Human Resources and, if necessary, the CEO. The approval/denial process may take up to five (5) to ten (10) business days and the employee will be notified by the Supervisor.

Obligations While on an Approved Unpaid Leave of Absence and Returning From Unpaid Leave

1. The employee is to communicate with the human resources department every thirty (30) days on the intent to return.
2. The employee may be subject to require a fit-for-duty statement by a physician.
3. The employee may be subject to all pre-employment background checks including a physical and drug screen.
4. The employee is expected to return by the date agreed on the approved request form. If the employee does not return by the date approved, the employee's resignation date will be the last day the employee worked at the company.

Policy Limitations on Employment

While on an unpaid leave of absence, an employee's status will change to "Inactive". A change in employment status may result in a "qualifying life event" where the employee may be eligible for continued health coverage at full cost to the employee through COBRA. See policy regarding COBRA. The employee will not be eligible to accrue any benefits while on an approved unpaid leave.

When an employee returns back to work, typically the benefits they had before the leave will resume and begin to accrue again, but this may depend on the length of the absence approved.

For more information on how your employment and benefit may be affected, contact Human Resources.

Record Keeping:

The conditions under which an employee is granted an unpaid leave of absence are to be documented by the Supervisor and Human Resources Department. A copy of this communication will be kept in the employee's personnel record.

For a fillable version of this form, please access Unpaid Leave of Absence Form

Effective: 09/13/21

Revised: 10/27/23

Reviewed: 09/30/22, 10/27/23, 10/25/24

Military Leave (USERRA)

Purpose

To define the policy on obligations under the Uniformed Services Employment and Reemployment Rights Act (USERRA).

Policy

The employer will comply with its obligations under the Uniformed Services Employment and Reemployment Rights Act (USERRA) which was signed by the President on October 13, 1994. The Act applies to persons who perform duty, voluntarily or involuntarily, in the "uniformed services." These services include the Army, Navy, Marine Corps, Air Force, Coast Guard and Public Health Service Commissioned Corps, including their reserve components. Federal training or service in the National Guard and Air National Guard also provides rights under USERRA.

Background Information (Including Definition)

1. "Uniformed services" include active duty, active duty for training, inactive duty training (such as drills), and initial active duty training, as well as absence from an employment position for an examination to determine fitness to perform any such duty. USERRA covers all employees except those serving in positions where there is "no reasonable expectation that employment will continue indefinitely or for a significant period."
2. The following five eligibility criteria must be met for an employee to be entitled to the rights provided under this law: The employee,
 - a. Must have held a civilian job;
 - b. Must have given notice to the employer that he or she was leaving the job for service in the uniformed services;
 - c. Must not have a period of service exceeding five years (see exception below);
 - d. Must have been released from service under honorable conditions; and
 - e. Must have reported back to the civilian job in a timely manner or have submitted a timely application for re-employment.

Procedures

1. USERRA establishes a five-year cumulative total on military service with a single employer, with certain exceptions allowed for call-ups during emergencies, for reserve drills and annually scheduled active duty for training, etc. USERRA also allows an employee to complete an initial period of active duty that exceeds five years, e.g. enlistees in the Navy's nuclear power program who are required to serve six years.
2. Pursuant to this law the following are employee time limits for returning to work, with the exception of fitness for service examinations:
 - a. Less than 31 days service; by the beginning of the first regularly scheduled work period after the end of the last calendar day of duty plus time required to return home safely. If this is impossible or unreasonable, then as soon as possible.
 - b. 31 to 180 days; application for re-employment must be submitted no later than 14

- days after completion of a person's service. If this is impossible or unreasonable through no fault of the person, then as soon as possible.
- c. 181 days or more; application for reemployment must be submitted no later than 90 days after completion of a person's military service.
 - d. Service-connected injury or illness; reporting or application deadlines are extended for up to two years for persons who are hospitalized or convalescing.
3. Pursuant to USERRA the employer provides health benefits continuation for service members and their families during military service for up to 18 months. USERRA decrees that re-employed persons pension plan benefits be accrued during military service, regardless of whether the plan is a defined benefit plan or a defined contribution plan.

References: Uniformed Services Employment and Reemployment Rights Act (USERRA); October 13, 1994.

Effective Date: 1/2/02

Revised Date: 6/7/19

Reviewed Date: 9/3/20, 9/13/21, 09/30/22, 10/27/23, 10/25/24

Telecommuting and Remote Work

Purpose

To define conditions under which employees may be considered to be **at work** or **on the job** if they are working from home (or another site) by means of a secure Internet connection, laptop, phone system or other method.

Policy

It is the policy of Pioneer Resources, Inc. to be flexible in defining when an employee is “**at work**” for the sake of both the organization and the employee. Furthermore, it is the policy of Pioneer Resources to utilize the organization’s investment in technology to support the agency and its employees when situations arise that permit employees to be productive when they cannot occupy their normal work station(s) for limited periods.

Background Information (Including Definition)

1. Pioneer Resources, Inc. does not employ people on a permanent basis who can be described as *telecommuters*. Rather, the terms *telecommuting* and *working from home* are intended to describe scenarios in which employees may perform a portion of their job(s) from home (or another site).
2. Common technology that may contribute to an employee being productive from home

includes the following (the list is not meant to be exhaustive):

- a. High speed connection to the internet or hotspot
 - b. Agency owned laptop
 - c. Agency owned cell phone
3. Pioneer Resources may make available one or all of the above to an employee to permit them to be productive from home, but shall not be obligated to provide the technology at agency expense.
 4. **Staff are not to utilize personal owned computers or phones to access agency email and/or information as this may contribute to corruptive risk to the agency technology system and/or the unauthorized release of HIPAA related information.** The use of personal devices for work related responsibilities can only be authorized by the CEO under specific guidelines.
 5. It is recognized that not every position lends itself to working from home. This policy is intended to apply to those positions whose work product is primarily written material, data, or intellectual property. For some employees the production of written material, data or intellectual property may represent a portion of their job description, or an employee may be involved in a specific project that permits them to be productive from home. Every instance of telecommuting needs to be evaluated. Please see the following procedures.

Procedures

An employee offering to work from home shall develop a written plan with his or her immediate supervisor. At minimum, the plan shall include:

- a. A general description of the work to be performed at home
 - b. The available agency owned technology to support the work
 - c. The specific hours the employee will work from home (work from home requires having availability to receive and send communication via phone or email, or recover/save information to the Public Drive)
 - d. A plan to work from home shall be limited to no more than 25 hours per week unless a state order is in place that would prevent full time work on site.
1. The plan to work from home shall be submitted to the CEO and approved prior to beginning the work from home schedule.
 2. Every plan shall be reviewed on at least an annual basis, or as requested by the CEO.
 3. If an employee has a medical need to work from home full time, that employee shall submit a written plan and furnish medical evidence (a physician's statement) that the employee is not able to return to his or her customary work station; the physician's statement should reference that work from home is medically necessary.
 4. An employee working from home will be expected to utilize paid time off (PTO) for the

difference between the hours worked from home and any non-work hours defined in the employee's normal workweek.

5. If the employee is on an approved FMLA leave then the difference between hours worked from home and the employee's normal work week will require PTO utilization then FMLA hours.
6. If working from home is an accommodation within a return-to-work plan under worker's compensation, limitations still apply. Working from home in all cases will be considered an accommodation, not a workstation.
7. All employees working from home will ensure their work is completed in a private area that allows for confidentiality. The workspace should include locking ability when any work related documentation is brought home in order to maintain confidentiality.
8. All employees will engage in remote work meetings as scheduled and required through virtual means with visual and audio capabilities, as well as abide by the professional attire and presentation required for their role.
9. Employees will not record any virtual meeting without the informed consent of all engaged parties and shall not exceed the extended permissions or be utilized outside of the intended use.

Special exceptions to this policy may be made by the CEO on a case by case basis as deemed necessary and must not interfere with the employee's ability to maintain their work load.

References: Family and Medical Leave Act policy and Paid Time Off policy.

Effective Date: 6/25/07

Revised: 09/23/20, 10/27/23

Reviewed: 04/20/19, 02/08/21, 9/7/21, 9/23/22, 10/27/23, 10/25/24

Office Hours and Flex Time

Purpose

To promote flexibility for the employees of Pioneer Resources, Inc. as long as there is no disruption in services.

Policy

It is the policy of Pioneer Resources to provide a degree of flexibility in structuring the daily work schedules of employees as available based on job duties.

Background Information (Including Definition)

In general, the programs and services delivered by Pioneer Resources shall be operational within the established business hours of the agency (8:00 a.m. to 4:30 p.m.). Exceptions to Pioneer's operating hours are common based on PR's multifaceted activities and are entirely acceptable for any program, service, or staff member where such an exception makes good business sense.

Procedures

1. Unless otherwise specified, full-time staff are expected to work a minimum eight hour day, forty-hour week.
2. Due to the nature of the agency's business, meetings, activities, and other work related efforts that can occur outside of regular business hours, it is acceptable for staff to flex their work schedule in order to stay within the boundaries of a forty hour week. As co-workers need to be able to communicate with each other at known times, changes to schedules should always be approved by your immediate supervisor so they can communicate if/when you may or may not be available.
 - a. Any deviations from your approved standard schedule, must be reviewed with your immediate supervisor and approved in advance of flexing/changing your standard work schedule.
 - b. Any last minute/emergency deviations from your schedule when your supervisor is not available, should be communicated to them immediately via email or text with an in-person follow-up at the soonest available time.
 - c. This includes remote work as available; if you have a standard work schedule, whether you are in the office or off-site, it should be maintained – deviations should be approved by your supervisor in advance (i.e. – flexing time for a non-work related appointment must be approved by your supervisor prior to changing your schedule).
3. "Flex time" implies that an employee's hours may be structured similar to the following examples:
 - a. A staff person who worked two extra hours on a given day to attend a special meeting might wish to work two fewer hours on another day, when the workload permits.
 - b. An employee who normally works from 8:00 a.m. to 4:30 p.m. might wish to work a certain day from 10:00 a.m. to 6:30 p.m. in order to attend a late meeting.
4. Any use of "flex time" must adhere to the following conditions:
 - a. Use of flex time must be with the full knowledge and permission of the employee's direct supervisor.
 - b. The employee is directly responsible for fulfilling all job expectations and requirements; work schedules may not be altered if it interferes with, or prohibits, that responsibility.
 - c. Schedule alterations must be accomplished within the span of a single pay

period; extra hours worked in one pay period may not be compensated in another pay period.

5. None of the above provisions are intended to negate the PR policy on overtime. Schedule alterations must be made at the employer's request, or at the employee's request with the employer's full agreement. Overtime is only paid in excess of the standard 40 hour work week, regardless of how many hours are worked in a single day.

Effective Date: 03/01/99

Revised: 10/27/23

Reviewed: 09/23/20, 09/07/21, 09/23/22, 10/25/24

Agency Overview

Program and Outcomes Evaluation

Purpose

To establish the guidelines for the agency to evaluate the outcomes and efficiencies of services provided to individuals.

Guidelines

All programs within Pioneer Resources, Inc. will conduct an outcome evaluation process which enables the organization to regularly review the results of services and the benefits to the individuals served. This information will be presented to the Board of Directors at least annually and integrated into decision-making processes at all levels within the organization.

Expectations

The following expectations will be used to develop and maintain a program evaluation system for each program:

1. The program evaluation system will measure the outcomes resulting from the services provided for all individuals served, or a representative sample of those served, as well as progress towards those ends. Areas to be measured include efficiency, effectiveness, service access and satisfaction.
2. A program plan of outcomes will be developed yearly. The Plan will include a description of the characteristics of the individuals served, an assessment of their needs, and development of service outcome goals and objectives. The methods and time frames for collecting, processing, reporting, and disseminating the program evaluation data.
3. This report will reflect the measures of program effectiveness and efficiency in delivery of services. It will measure our support of service access and measure the satisfaction

of the individual's life because of the service and an interpretation of the results. This report will be due in February of each year and will be distributed to stakeholders, family members and persons served through access on our website.

4. Program evaluation information will be used to discontinue, maintain, or improve the services; impact programmatic and administrative functions; determine the appropriateness of the services, impact our strategic planning process and confirm that the organization portrays itself and its services in an accurate manner.

Review

The CEO and CCO will periodically review the overall adequacy of the program evaluation system. The review will focus on the meaningfulness of the information collected and the usefulness of the information in relation to the program mission, vision and the services provided.

Effective Date: 9/29/18

Revised Date: 10/27/23

Review Date: 9/24/20, 9/7/21, 9/23/22, 10/8/23, 10/22/24

Safety Assessment

Purpose

To establish agency policy on employee safety and accident prevention.

Policy

It is the policy of Pioneer Resources, Inc. to provide and maintain a safe and healthy working environment for all employees. All levels of management have a primary responsibility to the safety of employees and must apply continuous effort toward the promotion and enforcement of safe working conditions and practices.

Procedures

1. A Safety Committee Leader shall be appointed and chaired by a member of the committee.
 - a. This committee shall meet no less than quarterly and shall review safety inspection data, employee recommendations, accident/incident reports, etc.
 - b. This committee shall be charged with formulating suggested changes or modifications to policies, procedures, etc., related to employee and general safety factors.
2. Department heads/area supervisors shall be responsible for the investigation of all employee accidents and the completion of "Employee Accident/ Injury/ Incident Report" forms.

3. All employees are responsible for taking notice of potentially unsafe conditions and for reporting them to department heads/area supervisors on prescribed forms. These shall be forwarded with recommendations to the chairperson of the Safety Committee.
4. Safety concerns and critical incidents will be analyzed monthly. A culmination review of the trends and actual reports on a yearly basis will be analyzed by the Director Team.
5. Suggested goals and changes to ensure a safer environment will be placed in the Risk Plan Assessment

Effective: 09/18/19

Revised:

Reviewed: 9/24/20, 9/7/21, 9/23/22, 9/28/22, 10/27/23, 10/25/24

Room Reservations and Rental

Purpose

To establish rules related to the use of Big Blue Lake, Twin Lake, or other such meeting spaces located at 1145 Wesley Ave., with regards to authorized users, fees, security and other pertinent issues.

Policy

It is the policy of Pioneer Resources, Inc. to utilize assets first and foremost to support its mission of assisting people with disabilities in attaining independence and dignity by creation opportunities for participation in the community.

It is expected that buildings and equipment will be used primarily for functions that support persons served and/or functions for staff and volunteers related to this mission.

It is also the policy of Pioneer Resources to share resources with other public and nonprofit agencies in the community, to the extent feasible, to provide accessibility and resources.

Background Information (Including Definitions)

Big Blue Lake refers to the large meeting room at Pioneer Central, the administration wing located at 1145 Wesley Ave., including the installed audio-visual equipment. Other meeting spaces may be available for use on a case-by-case basis.

Tenant refers to any entity with which Pioneer Resources has entered into an ongoing rental agreement for offices or common space at 1145 E. Wesley Ave.

Nonprofit agency refers to tax-exempt charitable organizations. This may include unincorporated associations and groups whose mission is entirely charitable or philanthropic.

Public agency refers to a school district or unit of local, state or national government.

After hours refers to times and days of the week when the agency is not normally open for business, such as after 4:30 p.m. on a weekday or weekends.

Procedures

1. Programs of Pioneer Resources or its tenants receive priority in booking Big Blue Lake.
2. Reservations may be placed with the Office Manager or Human Resources Admin (front reception desk) at Pioneer Resources and will be recorded on a first come, first served basis. Rental agreements must be approved by the CEO.
3. Public and nonprofit agencies may request use of Big Blue Lake or other spaces by completing a prescribed form and submitting it to the Office Manager or Human Resources Admin (front reception desk). At this time, rental requests from outside entities will only be considered if they fall within our normal business hours, unless by special permission from our CEO.
 - a. Authorized staff shall confirm availability to ensure that Pioneer Resources has no prior claim for use of this room.
 - b. The requesting party shall be notified by phone or email concerning availability and any applicable fees or conditions.
 - c. Directions shall be provided on how to access the room, as well as the requirements for the room after each use.
4. When the room is utilized by Pioneer Resources or a tenant, building integrity and security shall be the responsibility of the staff person in charge of the meeting.
 - a. Integrity refers to assuring that the room is left in the same condition in which it was found.
 - b. Security refers to closing any windows or propped doors before leaving the premises, and not leaving the premises unattended before the doors are scheduled to be locked.

When the room is utilized by other nonprofit or public agencies, building integrity and security shall be accomplished in one of the following ways:

- If a Pioneer Resources or tenant employee is present, that individual may assume responsibility;
- If no Pioneer Resources or tenant employee is present, or able to accept responsibility, the organization shall name an individual to be responsible on the reservation form, and Pioneer shall approve or disapprove of the arrangement;
- If no responsible party is named or approved, the renter may be charged for the hourly cost to have a Pioneer Resources employee assume responsibility.

Fees

1. No fees apply to Pioneer Resources or tenant programs.
2. The fee for use of the room by public and nonprofit agencies shall be a flat fee of \$50 for events lasting four hours or less, or a flat fee of \$100 for events lasting more than four hours.
3. Weekend and after hours rentals are only allowed by Pioneer Resources employees except by special permission from the CEO. In the case of a non-employee after-hours rental, a minimum charge of \$25 will be charged for programming the doors and locking system for the rental event. If an employee is

required to remain on the premises during the rental period, the hourly rate shall be \$20 per hour in addition to the lock/unlock charge.

4. Use of the room by Pioneer Resources' employees or its tenants for functions which are unrelated to agency business shall be permitted under the following conditions:
 - a. The time and date has not been previously booked by Pioneer Resources or its tenants,
 - b. The employee/tenant assumes responsibility for building integrity and security.
 - c. The employee/tenant will be present throughout the event.
 - d. The employee pays the same fee(s) listed in #3 above.
5. Use of the room by vendors associated with Pioneer Resources or its tenants is permitted for training purposes if reservations are made consistent with #2 and #3 above.
6. Consumption of alcohol at any event is prohibited except by special permission of the CEO or Board of Directors.
7. All users must comply with Pioneer Resources' Smoke Free Environment Policy.

References: Room Reservation Form.

Effective: 10/01/23

Revised:

Reviewed: 11/17/23

Employee Acknowledgements

Receipt of Acknowledgement

I have received access to a copy of Pioneer Resources' Employee Policy and Procedure Manual. I fully understand that I will abide by the policies and procedures contained within. I understand that it is my responsibility to read this Handbook and to ask my direct supervisor or the Human Resources department questions about the policies and procedures.

I understand that this Policy and Procedure Manual is not a contract of employment or an employment agreement, expressed or implied, between Pioneer Resources and myself, nor a legal document and that I should not view it as a contract of employment or an employment agreement.

I also understand and agree that I am an at-will employee, which means that my employment is for no definite period and I may be terminated any time by Pioneer Resources, Inc. or I may choose to end my employment with Pioneer Resources, Inc. with or without cause, and with or without any prior notice.

I also understand that no supervisor or any other representative of Pioneer Resources, other than the CEO or Board of Directors, has the authority to enter into an agreement with me for employment for any specified period of time or make any arrangement with me contrary to the provisions contained in the Employee Policy and Procedure Manual. Furthermore, any such agreement must be in writing, signed by the CEO of Pioneer Resources before it will be deemed effective.

I also understand that I must file any and all claims and/or lawsuits arising out of, or pertaining in any way to, my employment, or termination of employment, within twelve months of the event giving rise to the claim and/or lawsuit, unless the applicable statute of limitations is shorter than 12 months, in which case the shorter period will apply.

All decisions by Pioneer Resources as to the intent, interpretation or application of any information contained in the Employee Policy and Procedure Manual, or any other of its policies and procedures shall be binding upon the employee. Pioneer Resources may exercise its sole discretion in applying and interpreting its policies and may deviate as needed to appropriately handle and resolve specific situations.

I understand this Manual takes precedence over, supersedes and revokes any previous versions, memorandum, bulletin, policy, or procedure issued prior the date signed below. I also understand that Pioneer Resources reserves the right to change, modify, delete, or alter the policies at any time, at its sole discretion.

Employee Signature: _____ Date: _____

Employee Name: _____ Date: _____

(Please print)

Employee Acknowledgements

(Initial here)_____ Pioneer Resource Policy and Procedure Handbook

By initialing above and signing below, I acknowledge that I have been given instructions on how to access and have been given the opportunity to print a copy of the PR Policy and Procedure Handbook and agree to read, understand the contents, and abide by the terms contained therein. I understand that the only purpose of the PR Policy and Procedure Handbook is to provide information. I understand that the policy, procedure or handbook does not create any contractual obligations on the part of the agency or myself. It remains my responsibility to read updates and changes or new policies and procedures distributed by PR.

(Initial here)_____ Workplace Violence, Harassment, Sexual Harassment, Harassment Complaint & Reporting Procedure

By initialing and signing above, I acknowledge that I have been given instructions on how to access and have been given the opportunity to print a copy of the following policies and procedures for Workplace Violence, Harassment, and Sexual Harassment and understand how to make a formal complaint using the process outlined in the policy Harassment Complaint Reporting Procedure. I agree to attend training, read and understand the contents, and to abide by the terms and reporting requirements contained therein.

(Initial here) _____ The Family and Medical Leave Act and The Americans with Disabilities Act

By initialing and signing above, I acknowledge that I have been given instructions on how to access and have been given the opportunity to print a copy of the following policies and procedures for my rights and responsibilities under FMLA and ADA. I agree to read and understand the contents, and to abide by the terms and reporting requirements contained therein.

(Initial here)_____ Employee Benefit Guides and Summary Plan Documents

By initialing, above and signing below, I acknowledge that I have been given instructions on how to access and have been given the opportunity to print a copy of the Employee Benefits Guide and/or Plan Summary Documents. I also acknowledge that communication about benefit design; my employer posts open enrollment, changes and plan summary documents electronically through email, intranet, employee portal and text. I understand that it remains my responsibility to read updates and changes or new information regarding employee benefits.

(Initial here)_____ Job Descriptions –Understanding Your Role within the Agency & Performance Evaluations

By initialing, above and signing below, I acknowledge that my job role has been reviewed and I have been given a copy of my job role and performance evaluation competencies' measurements, expectations and responsibilities. I understand the contents, and agree to abide by the terms contained therein.

(Initial here)_____ Medication Management

By initialing above and signing below, I acknowledge that my Medication Management has been reviewed and I have been given the opportunity to print a copy of the policy that governs Medication Management. I understand the contents, and agree to abide by the terms contained therein.

(Initial here)_____ Use of Technology

By initialing, above and signing below, I acknowledge that Use of Technology policy has been reviewed and I have been given the opportunity to print a copy of the policy that governs Technology and my responsibilities. I understand the contents, and agree to abide by the terms contained therein.

Initial here) _____ Sexual Abuse, Sexual Misconduct and Molestation Policy

By initialing above and signing below, I acknowledge that I verify that I have received, read, understand the physical, mental abuse and or sexual abuse, sexual misconduct and sexual molestation policy and I understand I am bound to follow the policy and its contents, and agree to abide by the terms contained therein.

Initial here)_____ Driving Responsibility

By initialing above and signing below, I acknowledge that I verify that I have read, understand and that I am in compliance the policy on employee use of agency owned and personal vehicles while on company time. I understand the contents, and agree to abide by the terms contained therein.

(Initial here)_____ Company purchases / Use of Corporate Credit Card

By initialing above and signing below, I acknowledge that I understand the responsibilities defined in the Company Purchases Policy as well as the Credit Card Reconciliation policy and I agree to abide by the terms contained therein.

(Initial here)_____ Health & Safety

By initialing above and signing below, I acknowledge that I have been given instructions on how to access and have been given the opportunity to print a copy of the Workplace Related Injury or Illness Reporting, Blood-Borne Infectious Disease Exposure Plan, Sharps-Use, Containment & Disposal, Emergency Supplies, First Aid Kits, and Hazardous Materials Policies. I understand the contents, and agree to abide by the terms contained therein.

(Initial here)_____ Identify Unsafe Environmental Factors & Evacuation Procedures and Emergency Response

By initialing above and signing below, I acknowledge that I have been given instructions on how to access and have been given the opportunity to print a copy of the Winter Safety Measures, Tornado Procedure, Fire Evacuation Procedure, Bomb Threat, Handling Suspicious Letter & Packages, Flooding and Boat Safety. I understand the contents, and agree to abide by the terms contained therein.

(Initial here)_____ Identification of Critical Incidents

By initialing above and signing below, I acknowledge that I have been given instructions on how to access and have been given the opportunity to print a copy of the Critical & Noncritical Incident Reporting, Medication & Treatment Error Reporting, Vehicle Accident Procedure, Sexual Abuse or Molestation and Missing Resident or Program Participant. I understand the contents, and agree to abide by the terms contained therein.

(Initial here)_____ Code of Ethics and Corporate Compliance

By initialing, above and signing below, I acknowledge that I have been given instructions on how to access and have been given the opportunity to print a copy of the Code of Ethics and the Corporate Compliance Plan. I understand the contents, and agree to abide by the terms contained therein.

(Initial here)_____ Confidentiality Statement of Understanding

By initialing, above and signing below, I acknowledge that I have been given instructions on how to access and have been given the opportunity to print a copy of the Security & Confidentiality of HIPAA Information. I understand the contents, and agree to abide by the terms contained therein. I acknowledge that Violations of confidentiality may result in termination for failure to comply with the policy.

(Initial here)_____ Outside Employment (Moonlighting)

By initialing, above and signing below, I acknowledge that the Outside Employment Policy has been reviewed and I have been given an opportunity to disclose any other employment I currently have. I understand the contents, and agree to abide by the terms contained therein.

(Initial here)_____ Agency Vehicles and Transportation of Persons Served

By initialing above and signing below, I acknowledge that the Agency Vehicles and Transportation of Persons Served Policy has been reviewed and. I understand the contents, and agree to abide by the terms contained therein.

(Initial here)_____ Employee Relations

By initialing above and signing below, I acknowledge that I have reviewed the Employee Relations policy. I understand the contents, and agree to abide by the terms contained therein.

(Initial here)_____ **Positive Behavioral Interventions with the Persons Served**

By initialing above and signing below, I acknowledge that I have reviewed the Positive Behavioral Interventions with the person served policy. I understand the contents, and agree to abide by the terms contained therein.

Employee Name (Printed): _____

Employee Signature:_____

Program/dept. Name: _____Date:_____