

Purpose: To clearly define the application requirements, causes for exemption, causes for removal, complaint process and appeals process for In-Home Supportive Services (IHSS) Registry Providers and Recipients.

Objective: To treat all IHSS Registry Providers and Recipients in a fair and consistent manner with regards to exemption, discipline and removal.

Obtaining Active Status on the Registry

1. All potential IHSS Registry Providers must complete the following:
 - 1.1. IHSS Provider Orientation
 - 1.2. Link2Care Paperwork (Application & Disclosure forms)
 - 1.3. LiveScan Fingerprinting Process
 - 1.4. Department of Justice (DOJ) Background Check
 - 1.5. Link2Care Training class
 - 1.6. Cardio-Pulmonary Resuscitation (CPR) Certification
 - 1.6.1. A current CPR card will be accepted in lieu of attending another class.
This card must be at least 1 year from expiration to be accepted.
 - 1.7. Provide a copy of a valid photo I.D. and original social security card as proof they are eligible to work in the U.S.
 - 1.8. Must have use of vehicle for transportation.
 - 1.9. Be willing to work in one of the under served areas of the County (Oakdale, Patterson, or Newman).
 - 1.10. Be willing to work weekends and holidays.
 - 1.11. Be willing to do all personal care (dressing, bathing, bowel and bladder care, etc.) for both men and women.
2. Once the above has been completed and the Provider has been cleared to work, a Provider will be placed as active on the IHSS Registry and will be referred by

Link2Care staff according to the Registry Referral Policy (unless otherwise requested by the Provider).

Exclusions, Removal and Suspension from the Registry

1. A Provider may be excluded from the Registry for the following reasons:
 - 1.1. Failing to complete any of the requirements listed in Section 1.
 - 1.2. A conviction of certain offenses as listed on the State of California (SOC) 426C.
2. A Registry Provider may be removed from the Registry for the following reasons:
 - 2.1. Failing to disclose information on the Criminal Disclosure Form.
 - 2.2. A background check results in information about a conviction(s) that was not disclosed by the Provider.
 - 2.3. A background investigation reveals a conviction that prevents the Provider from being on the Registry (Tier 1 or Tier 2 crime).
 - 2.4. When Link2Care staff receive a subsequent notification of a conviction that prevents the Provider from being on the Registry (Tier 1 or Tier 2 crime).
3. A Registry Provider may be placed on Inactive status for the following reasons:
 - 3.1. The Provider requests to be inactive.
 - 3.2. A serious complaint is received, and an investigation is being conducted.
 - 3.3. Inability to reach the Provider.
 - 3.3.1. This includes, but is not limited to: disconnected phone numbers and calls to the Provider that are not returned within 48 hours.

Complaints regarding Providers

1. Complaints received from Recipients or IHSS staff will be investigated by Link2Care staff. Complaints from other sources (i.e. other Providers or the general public) may be investigated by Social Workers (SW), Social Service Assistants (SSA), Special Investigators, Adult Protective Services (APS), or Link2Care staff.
2. Complaints are classified as either “major” or “minor”.
 - 2.1. Major complaints are offenses that indicate abuse, assault, fraud, theft, etc.

- 2.2. Minor complaints are offenses such as no call/no show, late to work, poor work performance, etc.
3. All complaints against Providers will be documented in the Registry database and the Registry Specialist (RS) will call the Provider to discuss the complaint.
 - 3.1. If a message has to be left for a Provider, the RS will not disclose that there has been a complaint, just that a return call is needed.
 - 3.2. The Provider response to the complaint will be documented in the Registry database, but the complaint will not be removed.
4. Three minor complaints within two years will result in removal from the Registry for 6 months. The suspended Provider will be sent a letter by the Link2Care Executive Director (ED) informing the Provider of the suspension. The letter will explain the appeals process and give the Provider an opportunity to respond to complaints.
 - 4.1. Complaints will continue to be tracked on a “rolling year” basis. Complaints more than two years (rolling years) old will not be held against the Provider.
 - 4.1.1. If a suspended Provider is reinstated and a complaint is received, complaints received within the past two years will continue to count towards suspension. For example, a Provider receives complaints on 1/1/10, 3/1/10 and 6/1/10 which triggers a suspension. The Provider is reinstated 1/1/11. An additional complaint is received 3/1/11. The previous complaints would still be on the record, resulting in a second suspension for that Provider.
 - 4.2. A Recipient may only log one minor complaint against a Provider. If the Recipient continues to employ a Provider after a complaint, any subsequent complaints will not be held against the Provider.
 - 4.2.1. This “double jeopardy” protection for Providers is due to the “three strikes” policy, which states any three complaints, even if they cannot be proven, can be grounds for suspension from the Registry.
5. If a Provider has been previously suspended due to complaints, and receives enough complaints to be suspended a second time, the second suspension will last for a period of one year.

6. If a Provider has two previous suspensions based on complaints, and receives enough complaints to be suspended a third time, they will be permanently removed from the Registry.
7. One major complaint against a Provider will result in suspension, and possible removal from the Registry.
 - 7.1. The Provider name and details of the complaint may be referred to APS, Special Investigators, SW, SSA or Link2Care staff for further investigation.
 - 7.2. The ED will review all major complaints once the complainant and Provider have been interviewed by the RS. The ED will determine whether to remove the suspension or remove the Provider from the Registry.

Appeals process for Providers who have been Excluded, Removed or Suspended

1. A Provider who has been excluded, removed, or suspended may request a review of their case from the ED. If the ED feels there are extenuating circumstances to be considered, the Provider's case will be brought to the In-Home Supportive Services Advisory Committee (IHSSAC) for review.
2. The IHSSAC requests the Provider produce a detailed statement of the incident resulting in suspension and the reason(s) the suspension should not be imposed.
3. The IHSSAC will make a decision regarding the status of the Registry Provider.
4. A Provider excluded from the Registry is not necessarily excluded from working for the IHSS program.
5. If a Provider appeals a decision based on a major complaint in which the original decision is upheld, the Provider may reapply to be the Registry after a suspension of one year. If a subsequent major complaint is received and sustained (despite the appeals process) the Provider will be permanently removed from the Registry.

Complaints regarding Recipients

1. Complaints received from Providers will be investigated by SW, SSA, Special Investigators, APS or Link2Care staff.

2. Complaints are classified as either “major” or “minor”.
 - 2.1. Major complaints are offenses that indicate abuse, sexual harassment, failure to pay Share of Cost, etc.
 - 2.2. Minor complaints are offenses such as failure to sign timecards, failure to follow IHSS policies for tasks, various domestic complaints, and abuse of the Provider Registry (excessive requests for Providers within a short time frame).
3. All complaints against Recipients will be documented in the Registry database.
4. The RS will call the Recipient’s SW to discuss any complaints received.
5. Major complaints will be discussed with the complainant and the IHSS Review Team. The IHSS Review Team may consist of any of the following: RS, SSA, the Recipient’s SW, SW Supervisor, IHSS Manager, or the ED.
 - 5.1. If a major complaint is substantiated, and Link2Care feels that sending a Provider to the environment would constitute exposure to abuse, sexual harassment, or other violation of labor law policies, the Recipient’s Registry privileges will be suspended for a period of six months. The ED will send a letter to the Recipient explaining the reason for removal and option to appeal.
 - 5.2. If a second major complaint is received against a Recipient who has been previously suspended, the Recipient may not request Providers from the Registry for a period of one year.
 - 5.3. For the protection of Registry Providers, a Recipient who has two previous suspensions and receives a third major complaint may no longer request Providers from the Registry.
 - 5.4. Services through IHSS will not be denied or changed as a result of this process.
6. Minor complaints against the Recipient will be reported to the Recipient’s SW, with a request that the complaint be investigated and reminders of appropriate behavior be given to the Recipient if necessary.
 - 6.1. If three minor complaints against a Recipient are received, Link2Care staff will request the SW or SSA meet with the Recipient to discuss appropriate hiring and employment techniques.

- 6.2. If the Recipient continues to receive minor complaints or abuse the Registry system, the ED will review the case to determine if the Recipient is abusing the system.
- 6.3. If the ED substantiates the claims of abuse, a letter will be sent to the Recipient explaining the complaint and appeals process. The Recipient may not request Providers from the Registry for a period of six months.
- 6.4. If three additional minor complaints are received against a Recipient who has been previously suspended, and the ED substantiates the additional claims, the Recipient may not request Providers from the Registry for a period of one year.
- 6.5. For the protection of Registry Providers, a Recipient who has two previous suspensions and receives three additional substantiated minor complaints, this Recipient may no longer request Providers from the Registry.
- 6.6. Services through IHSS will not be denied or changed as a result of this process.

Appeals process for Recipients

6. A Recipient who has been excluded or removed may request a review of their case from the ED. If the ED feels there are extenuating circumstances to be considered, the Recipient's case will be brought to the IHSS Review Team for reconsideration.
7. The IHSS Review Team may contact the Recipient or request the Recipient provide a detailed statement of the incident resulting in suspension and reasons the Recipient feels the suspension or exclusion should be reversed.
8. The IHSS Review Team will make a determination regarding the Recipient's Registry privileges.
9. Being excluded from the IHSS Registry has no effect on the Recipient's IHSS rights or authorized services.