

New Employee

A new employee in an Adult day care is an individual recently hired to provide care, support, and assistance to elderly or disabled adults attending the facility.

Adding Employee Information

Note: All Fields marked with * are mandatory and must be filled out, otherwise the system will generate an error indicating that the required information is missing.

1. Locate the +Add option under Employee Tab.



2. Click +Add option to update the Employee Information. Enter the Employee information in the required field and Click Next option.

Employee InformationEmployee DocumentEmployee SchedulePersonal Time OffCalendarNotesCertificateChecklistPreferences

Employee InformationEmployee DetailsAdditional contactsEmail SignatureEmployee Billing Hours

Employee Information

Designation

Select Designation

Last Name*

Last Name

Gender*

Select Gender

Apartment No

Apartment No

State Registration ID

State Registration ID

Group(s)

Select

Employee ID*

Employee ID

Email*

Email

Hire Date*

MM/DD/YYYY

City*

City

Professional License Number

Professional License Number

Account Status

LockedUnlocked

First Name*

First Name

Date Of Birth*

MM/DD/YYYY

Facility

Select Facility

Zip Code*

XXXXX

Latitude

Latitude

Update Location

YesNo

Middle Name

Middle Name

Address*

Address

State*

Select State

Longitude

Longitude

Cancel

Next

3. The Employee details screen appears. In Employee details, update the username with the format (first name initials and last name). Also enter the 4 digit IVR Pin which is used to login using Mobile Application for each employee. The user can add the signature of the Employee by using the option Upload Signature. After completing the required field, Click Next option.

Employee InformationEmployee DocumentEmployee SchedulePersonal Time OffCalendarNotesCertificateChecklistPreferences

Employee InformationEmployee DetailsAdditional contactsEmail SignatureEmployee Billing Hours

Username*

Username

Role *

Select Role

4 digit IVR Pin ?

4 digit IVR Pin

Skills

Select Skills

Preferences

Enter Preference

Signature

Upload Signature

Note*:Preferable image ratio: 1:4 (80 X 320) and maximum allowed file size: 2MB.

Signature

SSN ?

XXX-XX-XXXX

Mobile Number / IVR ID ?

(XXX) XXX-XXXX

HHA NPI # ?

HHA NPI #

Service*

Select

Previous

Next

4. The Additional Contacts screen appears in which the user can update the additional contact details of the employee by using the +Add New Contact option and Click Save button.

Employee InformationEmployee DocumentEmployee SchedulePersonal Time OffCalendarNotesCertificateChecklistPreferences

Employee InformationEmployee DetailsAdditional contactsEmail SignatureEmployee Billing Hours

Additional contacts

+ Add New Contact

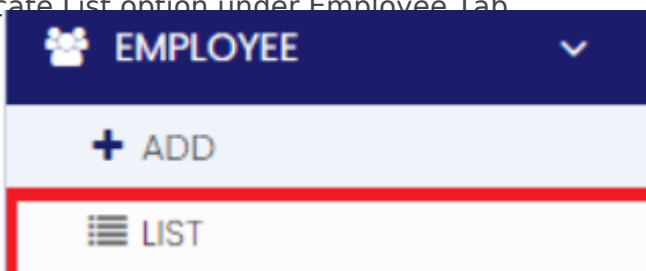
Note*: Employee Address is compulsory. Please click on "Add New Contact" button to add new contact details.

PreviousSave

Editing Employees Information

To navigate through the process of editing Employee information, follow these steps:

1. Locate List option under Employee Tab



2. Select the Employee from the list to edit the information. Click the blue color Edit option under Action on the right side of the screen for editing the Employee information or click on the Employee name.

LIST OF EMPLOYEES

Employee ID	Name	Email	Designation	Role	Mobile Number	Group(s)		
Employee ID	Name	Email	Designation	Select Role	Mobile Number	Select	Search	Reset
<input type="checkbox"/>	T 008	Tanya Catts	101hunter101sam@gmail.com	Registered Nurse	Registered Nurse	(666) 666-6666	Demo ALEX	<input checked="" type="checkbox"/>
<input type="checkbox"/>	D E01	David D	david@myezcare.com	Administrator	Super Admin	(343) 535-3535		<input checked="" type="checkbox"/>
<input type="checkbox"/>	M Maria456	Maria Garcia	Maria@gamil.com	Registered Nurse	HHA	(789) 787-9878		<input checked="" type="checkbox"/>
<input type="checkbox"/>	W William1122	William Garcia	William@gmail.com	PCA/CNA	Office Assistant	(789) 787-8778		<input checked="" type="checkbox"/>
<input type="checkbox"/>	J James789	James Johnson	James@gmail.com	Service Facilitator	Clinical Team	(457) 878-7887		<input checked="" type="checkbox"/>
<input type="checkbox"/>	M DEMO-12	Moshe Lubel	moshe@zrpath.com	Administrative	Super Admin	N/A		<input checked="" type="checkbox"/>
<input type="checkbox"/>	F 12398	fayyaz m	fahadneyamjr@gmail.com	Administrator	PCA/CNA	(031) 311-1019		<input checked="" type="checkbox"/>
<input type="checkbox"/>	J James123	James Smith	jamessmith@gmail.com	Administrator	Administrator	(123) 456-7899		<input checked="" type="checkbox"/>
<input type="checkbox"/>	R Robert321	Robert Smith	Robert@gmail.com	Administrative	Clinical Team	(656) 565-6665		<input checked="" type="checkbox"/>
<input type="checkbox"/>	A E-Demo-001	Alex Toth	paymagnet@gmail.com	Administrator	Administrator	(347) 480-9560	Demo ALEX	<input checked="" type="checkbox"/>

3. The following screen appears to edit the required information of the Employee.

Employee Information

Employee Document

Employee Schedule

Personal Time Off

Calendar

Notes

Certificate

Checklist

Preferences

Employee Information

Employee Details

Additional contacts

Email Signature

Employee Billing Hours

MYEZCARE2

Tanya Catts
Registered Nurse
EMP ID : 008

Signature

Powered by Myezcare LLC

Print

Employee Information

Designation

Registered Nurse

Employee ID*

008

First Name*

Tanya

Middle Name

Middle Name

Last Name*

Catts

Email*

101hunter101sam@gmail.com

Date Of Birth*

05/30/2022

Associated With*

Home Care

Gender*

Female

Hire Date*

06/01/2022

Facility

Select Facility

Address*

3445 Pacific Coast Highway

Apartment No

Apartment No

City*

Torrance

Zip Code*

90505

State*

California

State Registration ID

State Registration ID

Professional License Number

Professional License Number

Latitude

33.802169

Longitude

-118.3452008

Group(s)

Demo Alex

Account Status

Locked ☒ Unlocked

Cancel

Next

Employee InformationEmployee DocumentEmployee SchedulePersonal Time OffCalendarNotesCertificateChecklistPreferences

Employee InformationEmployee DetailsAdditional contactsEmail SignatureEmployee Billing Hours

Username*

tanya

Password

Password

Resend Registration Email

Role*

Registered Nurse

4 digit IVR Pin?

1234

Skills

Select Skills

Preferences

Enter Preference

Signature

Upload Signature

Note*:Preferable image ratio: 1:4 (80 X 320) and maximum allowed file size: 2MB.

Signature

SSN?

XXX-XX-XXXX

Confirm Password

Confirm Password

Mobile Number / IVR ID?

(666) 666-6666

HHA NPI #?

HHA NPI #

Service*

Personal Care

Previous

Next

Click Update option in Additional contact screen to update the information for the Employee.

Employee InformationEmployee DocumentEmployee SchedulePersonal Time OffCalendarNotesCertificateChecklistPreferences

Employee InformationEmployee DetailsAdditional contactsEmail SignatureEmployee Billing Hours

Additional contacts

+ Add New Contact

Note*: Employee Address is compulsory. Please click on "Add New Contact" button to add new contact details.

Contact Type	Name	Phone	Address	Email	Added By	Actions
Relative 2	Garcia, Henry	(789) 876-5454	N/A	N/A	Admin, Master	✎ ✕

PreviousUpdate

Email signature

The user can update the email signature by using the email signature option. Update the required information and Click Save option.

Employee Tab>>List>>Employee name>>Email signature

Employee InformationEmployee DocumentEmployee SchedulePersonal Time OffCalendarNotesCertificateChecklistPreferences

Employee InformationEmployee DetailsAdditional contactsEmail SignatureEmployee Billing Hours

Email Signature

Name*

Name

Description

B

I

U

T

Save

Employee Billing Hours

In Employee Billing Hours option, the user can update the Regular working hours, Regular Working / Hour Rate and Overtime Rate of the employee.

Employee Tab>>List>>Employee name>>Employee Billing Hours

Employee InformationEmployee DocumentEmployee SchedulePersonal Time OffCalendarNotesCertificateChecklistPreferences

Employee InformationEmployee DetailsAdditional contactsEmail SignatureEmployee Billing Hours

Employee Working Hours/Rate

Regular Working Hours

per

Day

Regular Working/Hour Rate

Overtime/Hour Rate

Save

Cancel

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