

CHC Onsite Program

Labor Law 101

A One-Of-A-Kind Employment Law Program Exclusively for Home Care Providers

Employment issues can lead to major liabilities for home care agencies if not handled properly. Join the Department of Labor and home care labor and employment attorneys for this NEW full day program dedicated to labor law. This program will provide key legal requirements in the employment arena, tailored for home care agencies' operations. The following areas of law will be covered:

- Wage and hour requirements for home health aides and exempt employees
- CDPAP and how to structure relationships with personal assistants and consumers
- Employee leave rights, including Family and Medical Leave, NYS Paid Family Leave, and NYC Earned Sick Time
- Discrimination and harassment

Whether you are a new home care agency or have been in business for years, plan to attend this informative program that will give you practical and up-to-date labor law information!

Who Should Attend

Owners, Executives, Administrators, Supervisors, CEOs, COOs, Financial Personnel, Supervisors & Managers of NYS Home Care Agencies.

When & Where

June 6, 2017, 10:00 am – 4:00 pm

1540 Broadway

24th Floor

New York City, NY 10036

Sponsored by **Hodgson Russ**

Deadline to register: June 2

[Click here](#) to register instantly online or; complete the attached registration form and fax or mail with your payment; or visit www.chcfoundation.org to register.

Presenters:

Frank King, Chief Labor Standards Investigator with NYS Department of Labor

Peter Godfrey, Esq., Partner

Peter concentrates his practice on management-side labor and employment law and employment tax issues. He represents employers in matters such as wage and hour litigation, including class actions, labor negotiations and arbitrations, employment taxation and worker classification matters, executive compensation and non-compete matters, Worker Adjustment and Retraining Notification (WARN) Act, and other employment-related litigation and employment-related contracts.

John M. Godwin, Esq., Partner

John's practice area focuses on all aspects of worker classification, Federal and State Worker Adjustment and Retraining Notification (WARN) Act compliance, wage and hour matters, and drafting and advising businesses on employment agreements, with a specific focus on restrictive covenants and compensation plans.

Emina Poricanin, Esq., Senior Associate

Emina counsels public and private sector employers in all aspects of labor and employment law. She represents employers in arbitration proceedings and before the State Division of Human Rights, Equal Employment Opportunity Commission, and Federal and State courts, and has worked on cases before the National Labor Relations Board, the Public Employment Relations Board, and Federal and State departments of labor.

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Complete and return the form below with your payment, [click here](#) to register instantly online or, visit www.chcfoundation.org.
Fee includes program tuition, materials, lunch and breaks.

Pricing	First Registrant	Additional Registrant**
HCP Chapter Members	\$289	\$269
HCP Members	\$299	\$279
Non-Members	\$399	\$379

****After the first registrant, additional registrants from the same company will receive a \$20 discount off their individual registration. Please send separate form for each registrant. Credit card information only needs to be included on one form for multiple registrants from the same company.**

Cancellations received five days prior to the event will receive a refund, less a \$50 administrative fee. No refunds will be issued after that date; no refunds for no-shows. Substitutions from the same company will be accepted and must be submitted prior to event date. **An additional 10% fee will apply for walk-ins.**

Please PRINT CLEARLY OR TYPE. Use separate form for each registrant.

Name: _____
Title: _____
Company: _____
Street Address: _____
City: _____ State: _____ Zip: _____
Phone: _____ Fax: _____
Email: _____

Dietary Requirements*: Kosher Vegetarian Other _____

***Only those who indicate requests here will be guaranteed.**

Payment Information (0606172012)

Amount Enclosed: \$ _____ Make checks payable to "CHC."

Please complete for credit card payments:

MasterCard Visa Discover Card #: _____

Exp. Date: _____ 3 or 4-digit security code: _____ (located on front or back of card)

Cardholder Name: _____ Signature: _____

Mail, fax or email registration to:

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chc@chcfoundation.org