

Consumer Notice to Members

TO: _____ (Member's Name)

Thank you for your trust in allowing us to provide Personal Care services. It is important for you to know the following about Homecare by Wesley's operations:

1. All of our Member Services Providers are supervised daily by reporting to our office before and after they provide your services.
2. We assign duties to the Provider based on the services you need (or as directed by yourself and/or your payer).
3. We require the following of each Provider we hire. If these requirements are not met, we have policies on discipline and/or termination of employment. A Homecare by Wesley Member Services Provider:
 - a. Must pass a criminal background check
 - b. Must pass drug screen
 - c. Must receive positive references from the majority of individuals they've given us to contact
 - d. Must have appropriate credentials, licensure or certification (if required) and adequate training to provide services to you
 - e. Must have a valid Tennessee driver's license and current proof of insurance

We provide each of our Member Services Providers with the following:

1. Identification as one of our Providers
2. Payroll, taxes, social security, workers' compensation insurance;
3. Homecare by Wesley Providers are not exempt from overtime.

Your signature below acknowledges that you have been advised of our company's policies. Again, thank you for your confidence and should you have any issues during the course of your services, please let us know by calling 901-380-4880 or email at info@homecarebywesley.org.

Member or Member's Representative's Signature and Date

Member's RIGHTS and Responsibilities

Effective: 03-02-2015

To be treated with consideration, dignity and respect.

To be informed about your care and to be involved in your care planning.

To be informed of any changes in your care, including the type, amount and frequency of care.

To refuse all or part of your care and be informed of what such refusal would mean.

To be given a choice of qualified providers and to get information about the provider.

To receive information that is clear and easy to read.

To be provided assistance if information is not clear on what is written.

To have information about you treated confidentially and to limit access to your records.

To be informed of any costs to you before care is started and when there are any changes in costs.

To file complaints about your care:

- Members have the right to voice grievances to an outside representative of your choice with freedom from restraint, interference, coercion, discrimination or reprisal.
- Members have the right to be protected by the licensee from neglect, from physical, verbal and emotional abuse (including corporal punishment), and from all forms of exploitation; and
- Members have the right to be assisted by the licensee in the exercise of the civil rights.

To treat your property and personal belongings with respect.

To talk with your doctor and other persons responsible for your care.

To receive services on time and in a professional manner.

You are not required to make public statements which acknowledge gratitude to Wesley Home Services.

You are not required to perform in public gatherings for Homecare by Wesley or other Wesley Programs.

You are not required to have your photographs used without your written consent or your guardian's consent.

MEMBER RESPONSIBILITIES

To promptly inform the Member Services Provider if you will be away from home when services are scheduled.

To report changes in your health or living conditions to Homecare by Wesley's Member Services Manager

To treat your Member Services Provider with respect and consideration.

To cooperate with Homecare by Wesley and to ask questions if you do not understand instructions or information given to you.

To provide a safe home environment so that services can be safely given to you.

To inform the Homecare by Wesley Member Services Manager of any problems 901-380-4880

To give your permission in writing for release of information when needed to assure that you get appropriate care.

To tell your Member Services Provider if you move or change your telephone number.

GRIEVANCE PROCEDURE

Effective: 03-02-2015

Homecare by Wesley accepts all without regard to age, sex, race, national origin, handicap, creed, or religion, political affiliation or participation or marital status. If a Member has a serious complaint about not receiving adequate service or feels they have been discriminated against, they have the right to file a complaint with Homecare by Wesley with no penalty or reprisal to them. They can receive assistance from staff in filing a grievance. The grievance steps are as follows:

1. If a Member or an applicant has a problem, question, complaint or grievance, they should contact the Member Services Manager.
2. After discussing the complaint with the client, the MSM will inform the General Manager. If the complaint cannot be resolved, the complainant will be assisted in preparing a formal, written complaint to the General Manager.
3. The General Manager will review the complaint and make a recommendation for action. If the recommendation is unsatisfactory to the complainant, the General Manager will refer the complainant to the Agency's Grievance Committee.
4. The Grievance Committee shall conduct an investigation, as deemed appropriate given the circumstances, and shall seek to mediate and resolve the complaint. Findings of the Committee will be given to the complainant in writing within ten (10) days following the hearing.
5. If the complainant is not satisfied with the decision of the Grievance Committee, then the complainant may request a hearing from the Department of Human Services or other appropriate Department.

Service Descriptions

...including Enrollment and Termination processes

Effective: 03-02-2015

The following describe the services provided by Homecare by Wesley.

POLICY: To insure that services are offered and delivered appropriately, Homecare by Wesley employees will be accessible and available to discuss and explain each service available prior to delivery.

Homemaker

General household activities and chores such as sweeping, mopping, dusting, changing linens, making beds, washing dishes, doing personal laundry, ironing, mending, meal preparation and/or education about preparation of nutritious appetizing meals, assistance with maintenance of safe environment and errands such as grocery shopping and having prescriptions filled. Homemaker services are to be provided when the consumer is unable to perform such activities and the individual regularly responsible for these activities is unable to perform such activities for the enrollee.

Personal Care Services

Personal Care services provide personal assistance, stand-by assistance, or supervision with eating, bathing, dressing, personal hygiene, meal preparation and other activities of daily living. When specified in the plan of care, this service may also include such housekeeping chores as bed making, dusting and vacuuming, which are incidental to the care furnished, or which are essential to the health and welfare of the individual, rather than the individual's family.

Personal Care Attendant

Intermittent provision of direct assistance with the activities such as toileting, bathing, dressing, personal hygiene, eating, meal preparation (excluding the cost of food), budget management, attending appointments, and interpersonal and social skill building to enable the enrollee to live in a community setting.

In-Home Respite

Services provided to individuals unable to care for themselves, furnished on a short-term basis because of the absence or need for relief of those persons normally providing the care. May be provided inpatient or in-home.

Enrollment and Termination of Services

Enrollment in services provided by Homecare by Wesley shall occur at the discretion of the Member/Member's Family and/or at the discretion of the applicable Managed Care Organization.

Enrollment will commence with the following information collected and retained in the Member's file:

- a. Name, address, telephone number, gender, Date of Birth
- b. Date of service enrollment
- c. Name, address, telephone number of an emergency contact
- d. Written fee agreement signed by the Member, Member's representative or legal representative including:
 1. Fee or fees to be paid
 2. Services covered by the fee structure
 3. Any additional charges for services not covered by basic service fee
- e. Written acknowledgement that the Member or Member's representative has been informed of the Member's rights and responsibilities
- f. A written service plan or assessment for the type, frequency, duration and amount of services to be provided
- g. A written consent for services by the Member or Member's representative

Services may be terminated for any reason by either party upon written notice at least 24 hours prior to the next scheduled service appointment.