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A logo with a stethoscope and a heart

Description automatically generated with medium confidence

**Client Handbook**

Last Updated: 03/28/2023

***Care For You @ Home, LLC***

**AHCA # 3021108**

We are located at:

19105 US HWY 41   
 Suite 300

Lutz Florida, 33558

352-860-0885

Our Administrative Office hours are:

AVAILABLE BY PHONE 24-7

**Monday to Friday ................... 11 am to 4 pm**

**Saturday and Sunday .............. Closed**

**Holidays .................................. Closed**

Our Services are available **24 hours per day, 7 days per week.**

**How To Reach US:**

It’s easy to reach us, just give us a call. The phone number for C4u@Home is 352-860-0885.

or if you prefer, our email address is **chconsulting2528@gmail.com** . When you call the office during

normal business hours, our supervisor will usually answer the phone.

He/She will direct you to the person you need to talk to or help you immediately.

If you call after service hours, you will be forwarded to our on-call supervisor.

Please remember that appointments cancelled less than 24 hours in advance are still

charged the minimum service visit.

If you get our voicemail after hours, please leave a message and we will call you

back as soon as we return to the office, usually the next business morning.

Anyone can leave a message for us whenever they want. Our phones are also able to receive text

messages.

We do check our messages after hours and on weekends, If you receive our voicemail and have

an emergency matter that must be addressed immediately, please let us know to

it’s an emergency and would like someone to call immediately.

**MISSION, VISION & VALUES**

**Our Mission**

**Care for you @ Home**. is committed to helping our seniors stay

independent in their own homes for as long as possible while

exceeding our client’s expectations. We will treat each of our clients

with honesty, integrity, reliability, respect and consistency while

honoring their privacy, dignity, property and family customs.

We accomplish this by employing only first-rate Homemakers and Companions

Who embrace the values of C4U@ Home LLC. Every Caregiver will

show their joy of providing seniors with excellent relationships by maintaining

GBH’s high level of ethics and integrity, and give their

very best in everything they do, day after day.

**Our Vision**

Care for You @ Home LLC. provides the very best of Caregiver services to

seniors of communities we serve. Our clients enjoy reliable,

trustworthy, knowledgeable and compassionate care services in a

consistent manner which exceeds client expectations on a regular

basis.

**Homemakers Motto**:

“I will perform all my services and duties with honesty, integrity,

confidence, compassion, cheerfulness and dedication. In all my service

I will treat each client as if they are my family, with honor, respect and

dignity.”

**Care for You @ Home LLC. Values:**

* *Consistency*
* *Honesty & Integrity*
* *Compassion*
* *Professional*

**About our services:**

Care for You @ Home, LLC. is an agency licensed through AHCA. We are a Caregiver service provider designed to employ and/or contract with individuals to do housekeeping, cook, run errands, and provide companionship to the elderly and adults with disabilities.

**Hourly and Overnight Companion or Sitter or (24 hour)**

Care for You @ Home, LLC. provides hourly and 24-Hour supervisory services. Whichever you need, Care for you @ Home LLC. has you covered. Around-the-clock care gives you and your family peace of mind that your senior loved one will be safe and comfortable at all times of the day and night. Conditions such as Alzheimer’s disease, where your loved one may have difficulty sleeping and have needs that may require someone who is awake at all hours especially during the night as well as during the day. 24-hour care ensures that someone is always available to assure that your loved one is guided to get to and from the bathroom or prevent wandering. Someone is always awake and attending to needs immediately as they arise.

**What Homemakers/Companions can and can not do:**

Companion and personal care are generally considered non-skilled or non-medical care that does not require a nurse’s specialized expertise, training, and skills.

**What caregivers do**

These types of care aides may visit clients in-home for a few hours each day or they may work with one client full-time. They can provide emotional support and help with basic household and personal care tasks to help seniors function more independently. These kinds of aides are also called homemakers or home care aides.

Shift lengths and tasks vary depending on the care needs and care goals of the clients and their families. Standard duties of an in-home personal care aide or companion may include:

Light housekeeping tasks, such as doing laundry or washing dishes.

Running errands.

Preparing meals.

Helping with grooming and dressing.

Providing transportation.Offering companionship, such as playing games or reading.

**What caregivers don’t do**

Skilled medical care

While guidelines vary by state, non-medical aides and companions typically cannot assist with tasks that require medical training, Wilson says. For example, a non-medical personal care aide cannot assist with changing a catheter or applying dressings or bandages for a surgical wound.

**Heavy-duty housekeeping**

The term “light housekeeping” is often misunderstood. Most of the misunderstanding comes from the fact that we typically do not define housekeeping in our own homes in degrees of light, medium or heavy. Light housekeeping should be thought of in terms of tasks completed by a personal attendant.

Light housekeeping might include watering plants, dusting surfaces or emptying the trash. It does not include more demanding tasks, such as:

Moving heavy furniture.

Washing windows.

Scrubbing floors or carpets.

Outside chores, such as shoveling snow or mowing the lawn.

**START/END OF SHIFT**

Your Caregiver will start at the requested time agreed upon and will leave at the end of the shift on the agreed time made.

**INVOICE/PAYMENT**

For Care for you @ Home, LLC. to ensure that the Caregivers receive their pay at the end of the week, Care for you @ Home, LLC. will bill the Client one week in advance. Payment will be required on every Monday.

**SUPERVISORY VISITS**

Care for you @ Home is dedicated to our clients and want to ensure that we are providing the best quality services possible to our clients. From time to time, a supervisor may come out to visit the home to ensure that all is going well within the environment.

**HOLIDAYS**

The following days are considered HOLIDAYS according to Care 4 U @ Home’s policy and the Clients will be expected to pay the Homemakers Holiday pay. Those holidays are:

**• Easter**

**• Memorial Day (Recognized)**

**• Fourth of July**

**• Labor Day (Recognized)**

**• Thanksgiving Day**

**• Christmas Eve**

**• Christmas**

**• New Years Eve**

**• New Years Day**

**WHAT WILL YOUR CAREGIVER BE EXPECTED TO DO IF THEY SUSPECT ABUSE**

When our Homemakers/Companions suspect elder abuse, it is NOT their job to prove elder abuse is occurring. However, they are required to contact the Department of Elder affairs and file a complaint and provide the authorities with a detailed report that shows why they believe elder abuse is happening.

**The Adult Protective Services Program is responsible for preventing further harm to vulnerable adults who are victims of abuse, neglect, exploitation or self-neglect. (Chapter 415, F.S.). These adults may experience abuse, neglect, or exploitation by second parties or may fail to take care of themselves adequately. Florida statutes require any person who knows or who has reasonable cause to suspect any abuse of vulnerable adults to report that information to the Florida Abuse Hotline. That number is 1-800-96-ABUSE.**

I \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (Client Name) have received a copy of the Clients

Handbook provided to me by (GBH Rep.) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ on \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (DATE)

Client’s Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

C4U@H Rep. Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_