



April 2011 – Inservice



Time Sheets

Time Slips are ALWAYS due by **9am** every Monday.

No exceptions! None, not even Holidays!

They must be 100% accurate & complete to be processed. If you turn in your time slips LATE, you will be paid LATE.

Always turn in your time slips the week they are due. DO NOT hold time slips to turn in with another week. Even if you only worked one day, we still need it the week they are due. If you DO NOT turn them in the week they are due, you are putting yourself at risk for disciplinary action. Your rate of pay for those hours may also be reduced to minimum wage, and if the time slips are for any prior month, other than the one we are in, your rate of pay **WILL** be reduced to minimum wage for those hours.

They must be 100% accurate & complete to be processed.

This means:

1. They must have a time in and time out
2. They must be initialed daily by the client.
3. They must have the client's name at the top.
4. They must have the client signature at the bottom at the end of the week.
5. They must have the CNA's printed and signed name at the bottom.
6. They must have tasks checked daily. These must match what is assigned on the Care Plan.
7. They must have notes on the back when time is missed.
 - a. "out" is not a note. "dr" is not a note. "hospital" is not a note. You must specify who had the app't, who went to the hospital, out where? We must have specific reasons as to why we missed service.
 - b. You may have notified Akiyah of your absence but it is required to document on your time slip what that reason is.
8. They must have vital signs recorded as assigned on the individuals Care Plan.
9. They must be done in Blue or Black ink only.
10. They must be clean and neat.
11. You cannot use white out for any reason on a Time Sheet.
12. You must separate Time Sheets for separate months.
13. Do not put staples in your time sheets.

Possible Scenarios:

1. Client does not want a bath
 - a. Call the office immediately.
 - b. Document on the back of the time sheet why the bath was not desired.(and make deviations)
 - c. Ask supervisor what time you should leave due to refusal of bath.
2. Client not home
 - a. Call the office immediately(before you leave the client's property)
 - b. Document on the back of your time sheet that client was not home
 - c. We as an agency need to try and locate the client.
3. Client tells you to leave early.
 - a. Call the office immediately.
 - b. Document on the back of your time sheet why they asked you to leave early.(make deviations)
4. You write an incorrect time on your time sheet.
 - a. Make sure to correct time so it is legible.
 - b. Have the Client initial the change.
5. Something spills on your Time Slip.
 - a. Re-Do the Time Slip. We cannot put a NASTY Time Slip in the Client's record.

Time Sheets are a Medical Document which becomes a part of the Client's Medical Record when processed. You, as the Author of the Time Sheet must make any, and all corrections to this document.

Time Sheets must be complete, Correct and Legible to be put in a Client's Record.

TIME SHEET INSERVICE POST TEST Name : _____

1. TIME SHEETS ARE DUE BY _____AM ON MONDAY.
TRUE FALSE
2. I MUST HAVE THE CLIENT INITIAL MY TIME SLIPS EVERY DAY.
TRUE FALSE
3. WHITE OUT IS ACCEPTABLE FOR MISTAKE CORRECTS.
TRUE FALSE
4. FOLLOWING THE CARE PLAN MEANS CHECKING EVERYTHING REGARDLESS OF WHAT IS ASSIGNED.
TRUE FALSE
6. I DO NOT NEED NOTES ON MY TIME SHEET FOR ANY REASON.
TRUE FALSE
7. TIME SHEETS MUST BE IN _____ OR _____ INK, ACCURATE, _____ AND NEAT.
8. I DO NOT NEED TO CALL THE OFFICE WHEN MY CLIENT REFUSES BATHING.
TRUE FALSE
9. THE BACK OF MY TIME SHEET IS FOR VENTING ABOUT MY CLIENT.
TRUE FALSE
10. IF I SPILL SOMETHING ON MY TIME SHEET I SHOULD JUST TURN IT IN LIKE IT IS AND I WILL STILL GET PAID FOR IT.
TRUE FALSE
11. SHOULD I SEPARATE MY TIME SHEETS AT THE END/BEGINNING OF THE MONTH?

12. TIME SHEETS DO NOT NEED TO BE TURNED IN ON A HOLIDAY.
TRUE FALSE
13. I CAN SUBMIT A PAPER WITH MY HOURS ON IT IF I RUN OUT OF TIME SHEETS.
TRUE FALSE

ANGEL HANDS HOME CARE

2722 N Church Street Suite E
Greensboro, NC 27405
(336) 375-8288



ATTENTION ALL ANGEL HANDS EMPLOYEES!!!!

TELEPHONE: You should limit your personal use of the phone. You should request that your family members limit their calls to you while on assignment. If there is an emergency in which they need to contact you immediately, advise them to call the NURSE AID/ANGEL HANDS HOME CARE office and we will get in contact with you and have you return their call as soon as possible. **IT IS ABSOLUTELY FORBIDDEN TO USE THE PHONE OF A RESIDENT OR A FACILITY AND OR HOME CARE CLIENT FOR A LONG DISTANCE CALL.** This is grounds for immediate termination for cause. If you wish to carry your cell phone in the facility or in the home of your client it should be kept on silent at all times, and only used in an emergency situation.

PLEASE SIGN AND RETURN TO HUMAN RESOURCES, THIS WILL BECOME A PART OF YOUR PERMANENT FILE.

Signature _____ (seal)

Date: _____