

HOMECARE *worker guide*

**CLIENT-EMPLOYED
PROVIDER PROGRAM**



Helpful phone numbers

**Homecare Union Benefits Board (HUBB)
— (Health Insurance)**
(503) 364-HUBB (4822) Salem
1-(866)- 364-HUBB (4822) toll free
www.hubbinsurance.org

**Service Employees' International Union
The Homecare Workers' Union — SEIU**
Local 503, OPEU
PO Box 12159
Salem, OR 97309-0159
1-877-451-0002 or
1-800-527-9374 x 454
www.seiu503.org

Internal Revenue Service
1-800-829-1040
(7 a.m. to 10 p.m. Monday — Friday)
www.irs.gov

Oregon Department of Revenue
503-947-1488
www.oregon.gov/DOR
Taxpayer questions: 503-378-4988
and 1-800-356-4222

Oregon Home Care Commission
Cheryl Sanders, Executive Director
(503) 378-2733
cheryl.sanders@state.or.us
Worker's compensation information or to
file a claim 1-888-365-0001 and Salem area
503-378-3099

SPD Provider Payments Unit
(For returned provider checks and
W2 forms) 1-800-241-3013
SPD Direct Deposit Unit
PO Box 14960
500 Summer St, NE
Salem, OR 97309-5045
1-800-241-3013

Oregon Department of Human Services
(DHS) Web site
www.oregon.gov/DHS

- Seniors and People with Disabilities
www.oregon.gov/DHS/spwpd

Oregon Employment Department
Metro Valley/UI Center toll free
1-877-877-1781
Check Web site for other locations
www.oregon.gov/EMPLO

**SAIF Corporation — Workers'
Compensation Insurance**
www.saif.com/worker/workers_86.htm
1-800-285-8525
saifinfo@saif.com

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Introduction

The Client-Employed Provider (CEP) program

This guide is a resource for Homecare Workers (HCWs) in the Client-Employed Provider (CEP) Program. As a HCW you may be involved in providing a wide range of in-home services, including support and assistance with activities of daily living, to enable your employer to continue to live in his or her own home.



Community-Based Services

The choice to receive services in the community

Community-based services are a very important part of Oregon's long-term care system which includes in-home services, adult foster care, assisted living facilities and residential care facilities. The Oregon Department of Human Services (DHS) has made a strong commitment to Oregon's seniors and adults with disabilities by offering them choices about the way they want to live and how they want to be assisted. Living in their own homes, rather than moving to a care facility, offers seniors and persons with disabilities dignity, choice and independence.

Oregon Home Care Commission

In 2000, the citizens of Oregon voted to amend the state constitution to create the Home Care Commission. The commission is responsible for ensuring the quality of homecare services that are funded by the Department of Human Services for seniors and people with disabilities. The commission has four major responsibilities:

- To define the qualifications of Homecare Workers;
- To create a statewide registry of Homecare Workers;
- To provide training opportunities for Homecare Workers and consumers; and
- To serve as the “employer of record” for purposes of collective bargaining for Homecare Workers whose pay comes from public funds.

The Oregon Home Care Commission also takes the initial report and conducts interviews with homecare worker, client-employer and case manager for all workers. Compensation claims filed by Homecare Workers.

Nine commissioners are appointed by the governor for three-year terms. Five are consumers of homecare services. The other four represent the Department of Human Services (DHS), the Governor’s Commission on Senior Services, the Oregon Disabilities Commission and the Oregon Association of Area Agencies on Aging and Disabilities. The Oregon Home Care Commission meets monthly in Salem and meetings are open to the public.

SEIU, Local 503, OPEU

Service Employees International Union (SEIU) Local 503, the Oregon Public Employee’s Union (OPEU), is the union that exclusively covers approximately 13,000 publicly funded Homecare Workers in the State of Oregon. In 2001, Homecare Workers voted in a union election 92 percent in favor of having a union. Their first bargaining agreement, signed in 2003, gave Homecare Workers health insurance, workers’ compensation and wage increases.

All publicly funded Homecare Workers are equally represented by SEIU and covered by the articles in the collective bargaining agreement. Those HCWs who work more than 32 hours per month are either SEIU members or fair share payers. Those HCWs with fewer than 32 hours per month are still covered by the same protections in the union contract. Information about the contract provision is available through SEIU.

The CEP Program

Homecare Worker enrollment standards

As a Homecare Worker, you are an employee of the client-employer. However, DHS is responsible for provider enrollment and payment for the authorized services you provide.

A HCW must meet certain standards to be enrolled and receive payment through the CEP Program. These standards include:

- Maintaining a drug-free work place;
- Be approved through the criminal history check process as defined in the Oregon Administrative Rules (criminal history checks are conducted at least every other year);
- Having the skills, knowledge, and abilities to perform, or learn to perform, the required work;
- Being 18 years of age or older;
- Being legally authorized to work in the United States; and
- Completion of a mandatory orientation about the CEP Program through a local SPD/AAA office.
- Completion of an application packet. You can get this packet from the local SPD/AAA office. The application packet includes:
 - » *The Homecare Worker application form (SDS 0355);*
 - » *In-Home Services Provider Enrollment form (SDS 736);*
 - » *Criminal History Release Authorization (DHS 0301AD);*
 - » *INS Employment Eligibility Verification (INS Form I-9);*
 - » *Employee's Withholding Allowance Certificate (IRS Form W-4)* for income tax withholding;
 - » *Client-Employer's Right to Confidentiality (SDS 0356);* and
 - » *Request for Direct Deposit (DHS 7262H)* (note: enrollment is voluntary so completing this form is optional).



Employment and Enrollment Roles and Responsibilities:

1. As a **Homecare Worker** you are the employee of the client-employer. Here are some of the responsibilities you need to meet in order be hired by the client-employer and to enroll in the Client-Employed Provider Program:
 - Meet SPD Homecare Worker enrollment criteria
 - Complete Homecare Worker application packet
 - Attend mandatory orientation
 - Pass the criminal history check
 - Complete a new criminal history check authorization form when requested by the local office
 - Provide only authorized tasks
 - Provide quality services
 - Arrive to work on time
 - Ask employer for preferences in receiving services
 - Practice universal precautions to prevent the spread of disease
 - Contact your employer’s Case Manager for changes in your employer’s service needs
 - Maintain valid driver’s license and necessary auto insurance if transporting the client-employer

2. The **Client-Employer**, or **consumer** of services, is the person you provide services for, and who hires you and supervises your work. The client-employer has the right and the responsibility to hire, fire, schedule work, supervise and direct employees that provide services. The client-employer may also have a **designated representative** such as a family member or friend to help him or her meet some of these employer responsibilities.

Here are some of the responsibilities the Client-Employer needs to meet:

- Find, screen, interview and hire a Homecare Worker/employee
- Check employee references
- Develop a work schedule (days, times) with the employee

- Train and supervise employees
- Maintain employment records
- Establish job expectations and develop an employment agreement
- Terminate the employment relationship when the employer is unsatisfied
- Provide the Task List of services (authorized by the Case Manager) to the employee
- Review tasks with employee and how services should be provided
- Assess the quality of the services and address any performance deficiencies
- Verify auto insurance and DMV license if the employee will be transporting the client-employer
- Report employee terminations, new employees and any provider violations to the local SPD/AAA office

3. Seniors and People with Disabilities Division (SPD) or Area Agency on Aging (AAA) is the local office where your employer's Case Manager works. The Case Manager authorizes the number of hours of services your employer can receive each month and authorizes payment to you. The authorized hours are based on the assessed service needs of the client-employer. The local office processes your enrollment as a provider in the Client-Employed Provider Program and issues you a provider number for payment. The local SPD/AAA office also has a support specialist who processes vouchers and issues your provider payments.

Here are some of the local SPD/AAA office responsibilities:

- Assess client service needs annually and when needs change
- Provide any available referral list of Homecare Workers to the client-employer when requested
- Process enrollment forms for Homecare Workers
- Conduct criminal history checks for Homecare Workers
- Develop Service Plan and Task List with client-employer
- Provide ongoing monitoring of the Service Plan
- Ensure program regulations are met
- Provide protective services for the client-employer

- Identify and make referrals for assistive devices for the client-employer when indicated
- Handle Homecare Worker re-enrollment including new criminal history checks
- Issue payments to Homecare Workers and withhold taxes
- Monitor that paid services are being provided
- Assess natural supports and evaluate the cost effectiveness of the services authorized
- Terminate Homecare Worker enrollment when a program violation occurs
- Seniors and People with Disabilities is a Division within the Department of Human Services (DHS). Although payments are processed in the local SPD/AAA office, checks are sent from the SPD central office in Salem, Oregon. When requests are made by the local office, SPD central office issues provider numbers and also handles voluntary enrollment in Direct Deposit.

Types of Homecare Workers (HCWs)

Live-in HCWs

Live-in HCWs live in their employer's home and are available to provide services to the employer twenty-four hours a day during the time they are scheduled to work. Payment is based on the service needs of the employer. Some hours are unpaid based on the hours a HCW is expected to be able to sleep. In order to be considered a live-in service, there must be at least one Homecare Worker in the plan providing 24 hour availability for five days in a calendar week. See also Section F of this guide for "Additional Expectations of Live-In HCWs."

Hourly HCWs

The schedule for an Hourly Homecare Worker can vary. Some work a number of hours per day, others may work only a few hours per month. Wages are paid based on the individual employer's Service Plan and the number of hours authorized and worked.

Relief Worker

A relief worker is a HCW who provides substitute services for a twenty-four hour Live-in HCW who is taking his/her paid time off in a twenty-four hour block(s).

Fill-in Worker

A Fill-in Worker is a HCW who provides substitute services for a twenty-four hour Live-in HCW who has no accrued paid leave to take. The pay rate for the Fill-in Worker is the same rate as the Live-in provider.

Short-term or On-Call HCWs

Short term assignments are available for HCWs who want to fill in as a substitute (often on short notice), either for a family member who normally provides unpaid support, or for times when the regular HCW becomes ill or is otherwise unavailable during a period of leave without pay. These short-term or on-call HCWs are paid as either hourly or Live-in Homecare Workers for a limited period of time for each client-employer.

Types of services

SPD can pay Homecare workers to provide the following services to eligible client employers.

Activities of daily living (ADLs)

Mobility (ambulation and transferring), bathing, grooming, personal hygiene, dressing, eating, elimination (toileting, bowel and bladder care) and cognition/behavior.

Self-management tasks (or Instrumental activities of daily living)

Housekeeping, meal preparation, shopping, laundry, transportation, medication and oxygen management.

24-hour availability

24-hour availability means the availability and responsibility of a Homecare Worker to meet unscheduled ADL and self-management needs of a client-employer as those needs arise over a 24-hour period. Only live-in Homecare Workers are authorized for this type of service.

Types of SPD Programs that include Homecare Worker Services



1. **In-Home Services**

In-Home Services are funded through Oregon's Medicaid Home and Community Based waiver. These individuals are considered eligible for services in a nursing facility but are selecting services at home instead. Individuals who are eligible for this program also receive medical coverage through the Department of Medical Assistance Programs (DMAP). The majority of Homecare Workers provide services to individuals under this program.

2. **Spousal Pay Program**

The Spousal Pay Program is also funded through Oregon's Home and Community Based waiver but the program has stricter criteria for an individual to qualify. This is because it is unusual for the federal government to approve a program that allows payment to a provider who is a spouse. The applicant must have a progressive, debilitating disease, a spinal cord injury or another illness with permanent impairment that significantly limits activities of daily living. The individual must be assessed by two different SPD/AAA workers as requiring full assistance in four out of the six Activities of Daily Living. The spouse must have the health and capability to provide services to the individual and must actually provide the principal care. Since spouses are expected to provide some level of help to one another, the service hours for self-management tasks and 24-hour availability are reduced by one-half of the hours.

3. **State Plan Personal Care**

State Plan Personal Care services are covered under Oregon's state plan. Oregon's state plan is what covers medical benefits like the Oregon Health Plan. Unlike In-Home Services recipients, these individuals are eligible for medical coverage whether or not they qualify for personal care services. The services are limited to 20 hours per eligible individual per month. Many of the individuals receiving State Plan Personal Care have service needs that are not as great as those under the In-Home Services Program. People receiving State Plan Personal Care services are not necessarily eligible for nursing facility services.

4. **Oregon Project Independence**

Oregon Project Independence is a state funded in-home services program. Currently, the state subsidizes the cost of in-home services for eligible individuals

who are 60 years of age or older. These individuals do not receive medical coverage from the state with their service benefits. OPI is not a Medicaid program. In fact, those eligible for Medicaid are not eligible for OPI. It is often used for individuals that do not meet the income criteria for Medicaid or for those who do not want to be on the Medicaid program. OPI Service Plans tend to have fewer authorized hours per month than plans for Medicaid In-Home Services.

The Service Plan and Task List

The Service Plan (SDS 546 form) and the Task List (SDS 598 form) are the documents that show what hours and services the SPD/AAA Case Manager has authorized you to provide for the employer. Once the Case Manager completes an assessment, they work with the client-employer to develop a plan showing the services that will be provided. This document is called the Service Plan. Only those services described as activities of daily living, self-management tasks and 24 hour availability in the “Types of Services” section in this guide are covered. You cannot be paid through SPD/AAA to provide other services, for example yard work or pet care.

Other SPD in-home services programs, such as the Independent Choices Program (ICP), do not use Homecare Workers. Providers who work for individuals in the ICP are not Homecare Workers covered under the collective bargaining agreement with SEIU. This means providers who work for ICP client-employers are not entitled to collectively bargained benefits such as paid leave, healthcare insurance or bargained wage rates.

The Service Plan lists the number of hours authorized for each task. The Task List gives a more detailed list of instructions for the tasks that are authorized. For example, the Service Plan may authorize hours for housekeeping, but the Task List might specify if that included dusting, mopping or washing dishes. (See sample Task List on page 10.)

The Case Manager should give two copies of the Task List to the client-employer. One of the copies is for the client-employer to give you since they are your employer. If the client-employer does not give you a copy, you can contact the client-employer’s Case Manager to send you a copy of the Task List.

It is important to know what tasks are authorized. Those are the only tasks you can be paid for through the Client-Employed Provider Program. You can only provide services to the eligible consumer identified on the Service Plan and Task List. You cannot be paid to provide services to other members of the household, such as the consumer’s spouse or children. If you have any questions about whether you should be providing a service, contact the Case Manager.



Task List

SDS 0598

Client

Date

Date sent

Case number

Prime number

Program

Branch code

Worker

Worker Ph #

Client/Employer 1

Name _____ Phone _____
 Street address _____
 City _____ State _____ Zip _____

Homecare Worker/Employee 2

Name _____ Provider # _____
 Street address _____
 City _____ State _____ Zip _____
 Phone _____ Mileage Authorization per Month: _____
 Hours Authorized: ADL IADL 24-Hr Avail.
 Maximum hours authorized per month for all services: _____

Tasks To Be Completed 3

<p>Bathing</p> <input type="checkbox"/> Bathing and washing hair <input type="checkbox"/> Getting in or out of shower or tub	<p>Personal Hygiene</p> <input type="checkbox"/> Shaving <input type="checkbox"/> Denture care <input type="checkbox"/> Brushing teeth/caring for mouth
<p>Dressing</p> <input type="checkbox"/> Assist with dressing/undressing	<p>Grooming</p> <input type="checkbox"/> Nail care (<i>toenail/fingernail</i>) <input type="checkbox"/> Brushing and combing hair
<p>Toileting</p> <input type="checkbox"/> Getting to and from the toilet <input type="checkbox"/> Assist with using bedpan <input type="checkbox"/> Urinal <input type="checkbox"/> Commode <input type="checkbox"/> Wiping/cleansing afterward <input type="checkbox"/> Cleaning assistive devices <input type="checkbox"/> Adjusting clothing before/after	<p>Cognition</p> <input type="checkbox"/> Memory <input type="checkbox"/> Wandering <input type="checkbox"/> Coping with change <input type="checkbox"/> Making decisions <input type="checkbox"/> Help with confusion <input type="checkbox"/> Help understanding basic health and safety needs <input type="checkbox"/> Responding to behaviors
<p>Bowel</p> <input type="checkbox"/> Changing incontinence supplies <input type="checkbox"/> Digital stimulation <input type="checkbox"/> Ostomy care <input type="checkbox"/> Toileting schedule <input type="checkbox"/> Suppository insertion <input type="checkbox"/> Enemas	<p>Bladder</p> <input type="checkbox"/> Changing incontinence supplies <input type="checkbox"/> Catheter care <input type="checkbox"/> Ostomy care <input type="checkbox"/> Toileting schedule <input type="checkbox"/> Monitoring for infection

Tasks To Be Completed – (continued)		3
<p><u>Eating</u></p> <input type="checkbox"/> Feeding or cueing during eating <input type="checkbox"/> Monitoring to prevent choking <input type="checkbox"/> Assistance with special utensils <input type="checkbox"/> Tube feeding <input type="checkbox"/> Nutritional IV set up	<p><u>Medication/Oxygen</u></p> <input type="checkbox"/> Giving medicines <input type="checkbox"/> Giving oxygen <input type="checkbox"/> Reminding or organizing <input type="checkbox"/> Checking for effect <input type="checkbox"/> Assuring adequate oxygen supply	
<p><u>Transfer</u></p> <input type="checkbox"/> Moving to or from a chair, bed or wheelchair inside the home	<p><u>Mobility/Ambulation</u></p> <input type="checkbox"/> Assistance moving around inside home <input type="checkbox"/> Assistance moving around outside	
<p><u>Meal Preparation</u> <i>(basic nutrition)</i></p> <input type="checkbox"/> Cutting food <input type="checkbox"/> Placing food/utensils within reach <input type="checkbox"/> Breakfast <input type="checkbox"/> Lunch <input type="checkbox"/> Dinner	<p><u>Transportation</u></p> <input type="checkbox"/> Assisting during a ride <input type="checkbox"/> Assist to get in/out of a vehicle <input type="checkbox"/> Arranging a ride	
<p><u>Housekeeping (HK)</u></p> <input type="checkbox"/> Wiping surfaces <input type="checkbox"/> Dusting <input type="checkbox"/> Cleaning floors <input type="checkbox"/> Making bed <input type="checkbox"/> Cleaning dishes <input type="checkbox"/> Taking out the garbage	<p><u>24-Hour Availability</u></p> <input type="checkbox"/> Meet needs that arise throughout a 24-hour period; includes night needs	
<p><u>Laundry</u> <i>(included in HK hours)</i></p> <input type="checkbox"/> Gather and wash soiled clothing and linens <input type="checkbox"/> Use washing machines/dryers <input type="checkbox"/> Hang/fold/put away clothing	<p><u>Shopping</u></p> <p>Driving to/from and purchasing goods needed for health & safety related to the service plan:</p> <input type="checkbox"/> Food <input type="checkbox"/> Clothing <input type="checkbox"/> Medicine <p>Note: Medical Transportation is not included</p>	

○ Required medical treatments/procedures:

Remarks/Special Instructions	4

Authorizing Signature (Case Manager/Unit Manager)	Date
Signature Client/Employer	Date
Signature Homecare Worker	Date

Contract registered nurse (CRN)

The client-employer's Case Manager may authorize a Contract RN assessment. The CRN can help review medication safety issues, nutritional needs, assess skin problems or other medical issues of the client-employer and make recommendations. There are some special nursing tasks (like insulin injections) the CRN can delegate to a capable Homecare Worker. Delegation means a registered nurse authorizes an unlicensed person to perform tasks of nursing care in selected situations and indicates that authorization in writing. CRN's can also provide teaching and training specific to the employer's service needs, such as how to safely provide transferring assistance.

Job responsibilities & standards

Expectations

- Be sure that you fully understand your job responsibilities as described in the Service Plan or Task List. If your employer does not give you a current Task List you can request one from your employer's Case Manager. If you are asked to do a task that is not on the list, tell your employer that you must check with his or her Case Manager.
- Provide advance notice, whenever possible, if you will not be able to be at your employer's home when you are scheduled to work. If you are sick or unable to make it to your employer's home, it is your responsibility to notify your employer as soon as possible.
- Report any change in the health condition or circumstances of your employer to his or her Case Manager. Changes that need to be reported include illness, hospitalization or other situations affecting the client-employer or his or her service needs.
- Call your employer's Case Manager if you are in doubt about how to handle a situation or problem.
- Do not discuss any personal or medical information about your employer. This information is confidential and should not be discussed with others. If you have any concerns about the client-employer's medical or personal information, contact the Case Manager.
- Do not exchange money or personal property (e. g., borrowing, lending and selling anything with your employer is not allowed). You should not accept gifts from your employer.
- Always get receipts for shopping or any other transactions that you handle for your employer. Keep a record of the money you receive from your employer and the change returned to the employer after shopping or completing other transactions.



- Maintain a daily record of the dates and hours you work for your employer to support the hours you claim on your voucher. Keep copies of your vouchers for your records.
- Notify your employer and his or her Case Manager if you plan to quit your job. Give as much notice as possible, preferably two weeks. Also give plenty of advance notice if you are planning to be gone temporarily.
- Keep the SPD/AAA staff informed of your availability, current address and telephone number to avoid payment delays and to receive work-related information.
- Show respect for your employer's home and personal belongings through common courtesies, such as asking permission to smoke or use the telephone.
- Demonstrate respect for your employer by maintaining a neat and clean appearance.
- Some employers have allergies to perfumes, colognes and other fragrances. Ask your employer if he/she has allergies before bringing scented products, flowers or plants into the home.
- Before bringing others to your employer's home, not only must you receive permission but you must consider any safety, health risks, inconvenience or discomfort that may affect your employer.
- Each employer may have different skills or experience in directing his or her own services. Some employers may not tell you what they want done or how to do it, but it is important that you encourage their involvement in decisions about their services whenever you can. Ask what their preferences are and what kind of assistance they like to receive when performing each task.
- Do not discuss your personal problems or concerns with your employer unless it is necessary to share information that affects your ability to provide services.
- Be aware of potential safety hazards in your employer's home. If the problem can not be resolved with the employer, ask the employer's Case Manager for suggestions.

Confidentiality

As a HCW you will often have access to personal information about your employer. You are legally obligated to keep that information absolutely confidential. Unless your employer gives you specific permission, do not talk about your employer's personal information to anyone, except the employer's Case Manager or other SPD/AAA office representatives.

Your employer's personal information may include:

- The fact that your employer receives any public assistance from the State of Oregon, the Department of Human Services or the local Senior or Disability Services office.
- The fact that your employer needs any type of assistance in meeting his or her service needs (such as walking, dressing, eating).
- **Financial information:** Information about the employer's resources, including property, accounts, the type of income he or she receives, or other financial activities.
- **Medical or health information** such as medical diagnoses, health status, cognitive problems, mental or emotional disorders, lab results or medication the employer takes.
- **Other personal information** about the employer such as his or her age, religious affiliation, interpersonal relationships or other personal matters.



You must sign a confidentiality statement in order to work as a Homecare Worker. There may be serious consequences for all persons involved if confidentiality is broken:

- Your employer could be embarrassed or humiliated
- Other people could use information you shared about your employer to harm or take advantage of him/her
- Your employer could lose trust in you
- You could lose your job as a HCW
- You could be excluded from future work as a HCW.

Abuse issues

Some people, including Case Managers, nurses and home health aides, are “mandatory abuse reporters.” They are required to report any suspected abuse of an older adult or person with disabilities. If you, as a HCW, see indications of abuse, we strongly encourage you to report it to the local SPD/AAA office serving your employer. Complaints can be made anonymously.

Abuse includes:

- **Abandonment** — Leaving or deserting an older adult or person with disabilities who cannot care for themselves and depends on the care provider for help. *Examples: Not showing up or showing up late for a period of time that will endanger the consumer’s health, safety and welfare.*
- **Financial exploitation** — Illegally or improperly using another person’s money or resources for personal profit or gain. *Examples: Forging the client’s signature, using the client’s credit cards or taking the client’s personal items or medication. To protect yourself from accusations of financial exploitation, you should never borrow money from your employer, and you should keep receipts for all purchases you make for your employer. For tasks such as shopping, you may want to keep a written record of money received from your employer and the change returned to them.*
- **Neglect** — Failing, whether intentional or due to carelessness, inadequate experience, training or skill, to provide basic care or services to a person as agreed to by legal, contractual or otherwise assumed responsibility. *Examples: Denying medication or medical care, failing to provide needed services.*
- **Physical abuse** — Using excessive force or physical assault, such as hitting, slapping, biting, pinching or shoving a person.
- **Psychological abuse** — Using derogatory names, phrases or profanity; ridiculing, harassing, coercing, threatening or intimidating a person; or anything that denies their civil rights or that results in emotional injury. *Example: Threatening by using “or else” statements.*
- **Sexual abuse** — Sexual contact or conduct that is forced, tricked, threatened or otherwise coerced upon another person. *Examples: Unwanted touching or sexual remarks, sharing unwanted sexual stories or information.*
- **Self-neglect** — When a person cannot understand the consequences of their actions or inactions that affect their basic well-being and may lead to self harm or endangerment.

Additional Expectations of Live-In Homecare Workers

Live-in Homecare Workers provide a service to the employer called twenty-four hour availability. Twenty-four hour availability assumes the Homecare Worker will be available to address the service needs of the employer throughout a twenty-four hour period. A Homecare Worker who works outside the eligible individual's home or building during the work periods the HCW is on duty as a Homecare Worker, is not considered available to meet the service needs of the individual. This means that Live-In Homecare Workers cannot work outside the employer's home on the days or work periods when they are being paid by SPD/AAA to provide services to the employer.



Additional Expectations of Spousal Pay Homecare Workers

Under the Spousal Pay Program, a legally married spouse can be the Live-In Homecare Worker for a husband or wife who is eligible for the Spousal Pay Program. In addition to special approval criteria for the SPD/AAA client, the Spousal Pay Homecare Worker has additional responsibilities beyond the re-enrollment criteria for all Homecare Workers.

- The Spousal Pay Homecare Worker must be able to demonstrate the capability and health to provide the services and must actually provide the principal care, including the majority of service plan hours, for which payment has been authorized.
- During absences of leave without pay, the Spousal Pay Homecare Worker needs to secure a substitute provider to perform the authorized duties normally performed by the Spousal Pay Provider. Leave without pay means time that is not covered by the Spousal Pay Homecare Worker's live in paid leave benefit.
- The Spousal Pay Homecare Worker must arrange for adequate coverage to meet the service needs and pay the substitute provider for periods of leave without pay. DHS is not responsible for paying a substitute provider during leave without pay.

Conditions of employment

Getting started

You must have all of the following in order to become a provider:

- Completed provider application packet from the local SPD/AAA office.
- Proof of lawfully residing in the United States and other required documentation, (e.g., birth certificate, passport, or driver's license) which must be viewed by the local SPD/AAA office in order to complete the I-9 form.
- Criminal history check. Fingerprints may also be required based on criminal history or if you have lived outside the state or country within the last three years.
- Completed W-4 form.
- Confidentiality agreement signed in the local office.

After your application has been approved, you will be issued a provider number. This number is issued from the SPD central office in Salem. This provider number shows you are enrolled in the Client-Employed Provider Program. It is used for issuing provider payments to you.

Criminal History Checks

The criminal history check is part of the Homecare Worker enrollment process through the SPD/AAA local office. The Homecare Worker applicant completes an authorization form to run a background check and the results are sent to an authorized staff person at the local office. When the results come back, the staff person conducts a "weighing test" to determine if the applicant is approved to work.

If the applicant has an arrest, conviction or something else in their history, the staff person looks at several factors. The authorized staff person might consider how long ago the event happened, whether the applicant completed some type of treatment or rehabilitation, if there is a history of other crimes, and what kind of services the applicant would be providing. Sometimes an individual with an arrest that happened a long time ago can still be approved to work. Some applicants receive a limited enrollment as a restricted Homecare Worker, which means they are approved to work just for one family member or friend.

By law, the authorized staff person at the local office cannot share the results of criminal background check - not even with potential employers. The local office can only tell your potential employer whether you passed or didn't pass the criminal history check. Applicants denied based on criminal history can't be paid by DHS to provide services to DHS clients. Those applicants that are denied based on a criminal history check can appeal the decision in an informal conference, and in a hearing. If an applicant wins the hearing, it means he or she can be approved for enrollment in the Client-Employed Provider Program. It does not mean, however, that a specific employer is required to hire that applicant.

The local SPD/AAA office will conduct criminal history re-checks at least once every two years, if not annually. The local office will ask you to sign a new criminal history check authorization form. You need to complete and return the form right away to keep your provider enrollment active.

The local office can run a new criminal history check for a Homecare Worker at any time based on information received in the local office such as a complaint or an article in the newspaper about an arrest. If you are arrested, you should notify the local office.

Homecare Worker Orientation

The Homecare Worker orientation provides basic information about universal precautions to prevent the spread of disease, confidentiality, abuse and neglect rules and how to get paid through the Client-Employed Provider Program. All local SPD/AAA offices provide the mandatory orientation for new Homecare Workers.

You are required to attend this orientation within 30 days of becoming employed. If an orientation is not available in the local area within thirty days, the local office can allow you 90 days to complete the orientation. Your provider enrollment will be inactivated if you do not complete the orientation within 90 days. That means you would not be able to be paid to provide services.

Specific training on providing assistance with daily activities (such as transferring or bathing) is not included in the orientation. The client-employer will provide specific training to you about assisting with those services. For professional development, you may also choose to attend caregiver related training in your community or offered through the Home Care Commission.

Registry and Referral System

The Home Care Commission (HCC) has created a statewide Registry and Referral System (RRS). By the end of 2008, the system will be available statewide. This system will be used by employers to find homecare workers.

The Registry is available on the Internet at: www.or-hcc.org.

Providers who want to be referred to employers who need in-home services must apply at one of the SPD or AAA local offices. Information on the registry application requires HCWs to identify where and when they want to work as well as the services they are willing to provide. To be referred for work, HCWs must be approved through the process outlined in the Conditions of Employment section.

The local office enters the application information into the Registry and Referral System the first time. After that, it is the responsibility of the HCWs to keep their information current. If information is not updated at least every 60 days, the HCW will not be referred for work.

If you have questions about the Registry, please contact the Home Care Commission at 503-378-4050 or toll free at 877-867-0077.

*If the Registry and Referral System is not yet active in your area, please contact the CEP Support Specialist in the local SPD/AAA office to find out more about being referred for work.

Infection Control

As a Homecare Worker you come into close contact with your employer while providing services. You want to be able to protect yourself and your employer from germs and contagious diseases. The best way to prevent infection and the spread of disease is by practicing universal and standard precautions.

Standard precautions define all the steps that should be taken to prevent the spread of infection from person to person when you might expect to have contact with bodily fluids. Body fluids include blood, secretions (such as phlegm) and excretions (such as urine and feces, not including sweat). You may come into contact with bodily fluids from non-intact skin (such as an open wound) or mucous membranes (such as the mouth cavity).

The precautions you take might depend upon the amount of contact you expect to have with your employer. Standard precautions include the use of one or more of the following practices:

- Hand washing
- Use of latex or other protective gloves
- Masks, eye protection and/or face shield
- Proper environmental cleaning, such as using a bleach-based cleaner or mixture of bleach with water to kill infectious germs. Bleach kills all germs which include bacteria, viruses and fungi. Anti-bacterial cleaning agents are only designed to stop bacteria
- Proper handling of soiled supplies or assistive devices
- Minimal handling of soiled linen
- Proper disposal of needles

Universal precautions are guidelines to protect health care workers, as well as employers, from exposure to HIV (the virus that causes AIDS), hepatitis B and other blood-borne germs. Following these guidelines, health care workers treat blood, certain body fluids and tissue from all employers as if they were infectious.

Under universal precautions, health care workers wear protective equipment such as face masks and latex, vinyl or nitrile disposable gloves to avoid exposing skin or mucus membranes to infected fluids.

Other ways health care workers protect themselves include washing hands, not recapping needles after an injection, and disposing of needles and other sharp tools in puncture-proof containers. These procedures also protect employers from exposure to Homecare Workers' body fluids.

It is important to take precautions just as if every one of your employers has a contagious disease. Your employer may choose not to share their medical information and diagnoses with you and he or she is not required to disclose this information. Due to confidentiality, local SPD/AAA employees would not be able to inform you if an employer has certain illnesses including HIV or AIDS. The only information the local office will share is information necessary for you to provide the authorized services your employer needs.

As a Homecare Worker, you may prefer not to tell your employer about an illness that you have. If the necessary precautions are taken, both the employer and Homecare Worker will be protected from blood-borne diseases and other illnesses.

Although it may be harder to prevent the spread of colds and flu, standard precautions like frequent hand washing will greatly reduce these instances. For more information about proper hand washing, cleaning and sanitizing, see the Home Care Commission's publication *Safety Manual for Homecare Workers (DHS 9062)*. A self-study course about infection is available to HCW's at: www.dhs.state.or.us/spd/tools/cm/homecare/infection_control.pdf.

Food Safety in Preparing Meals

Older adults and people with disabilities can be susceptible to contracting foodborne illnesses. Advanced age and chronic diseases can weaken the immune system. When certain disease-causing bacteria or pathogens contaminate food, they can cause foodborne illness. Here are a few simple precautions you can take when preparing food to reduce the risk of foodborne illness.

Washing Hands – To avoid being a source of foodborne illness, wash your hands with soap and water before preparing food. Wash hands in warm soapy water for at least 20 seconds before and after handling food and after using the bathroom.

Cleaning Surfaces - Frequently wash surfaces like cutting boards, dishes, utensils, and counter tops with hot soapy water after preparing each food item and before going on to the next food item. If you use plastic or other non-porous cutting boards, run them through the dishwasher after use. When cleaning kitchen surfaces, consider using paper towels. If using cloth towels, wash them often in the hot cycle of the washing machine.

Keep Foods Separate - Avoid cross-contamination by washing hands, utensils and cutting boards after they have been in contact with raw meat or poultry and before they touch another food. Either use separate cutting boards for raw meat and produce or wash cutting boards between the preparation of raw meat, poultry and seafood products and the preparation of uncooked produce. Keep raw meat, poultry or seafood separate from other foods such as fruits and vegetables that will be eaten raw. Keep kitchen utensils used for raw meat separate. Put cooked meat on a clean platter, rather back on one that held the raw meat.

Refrigeration and Thawing - Refrigerate leftovers promptly. Bacteria can grow quickly at room temperature, so refrigerate leftover foods if they are not going to be eaten within 4 hours. Large volumes of food will cool more quickly if they are divided into several shallow containers for refrigeration.

It is safer to thaw food in the refrigerator, in cold water, or in the microwave rather than on the counter or at room temperature. If you thaw food in cold water or in the microwave, you should cook it immediately.

Cook Meat, Poultry and Eggs Thoroughly - Use a thermometer to measure the internal temperature of meat so you can be sure that it is cooked sufficiently to kill bacteria. For example, ground beef should be cooked to an internal temperature of 160° F. Be sure to purchase pasteurized eggs and cook the eggs until the yolk is firm.

Washing and Storing Produce - Rinse fresh fruits and vegetables in running tap water to remove visible dirt and grime. Remove and discard the outermost leaves of a head of lettuce or cabbage. Avoid leaving cut produce at room temperature for many hours.

Certain perishable fresh fruits and vegetables (like strawberries, lettuce, herbs, and mushrooms) can be best maintained by storing in a clean refrigerator at a temperature of 40° F or below. If you are not sure whether an item should be refrigerated to maintain quality, or safety, ask your grocer. All produce that is purchased pre-cut or peeled should be refrigerated to maintain both quality and safety.

Foodborne Illness - Foodborne illness often presents in a person as flu-like symptoms such as nausea, vomiting, diarrhea and fever. Contact a physician immediately if you think you or your employer have acquired a foodborne illness or food poisoning. Here are some resources for more information about food safety and foodborne illnesses:

- The Centers for Disease Control and Prevention
Telephone: 1-800-311-3435, Web site: www.cdc.gov.
- The United States Department of Agriculture (USDA), Food Safety and Inspection Service (FSIS)
Technical Service Center - Hotline: 1-800-233-3935
Email: TechCenter@fsis.usda.gov, Web site: www.fsis.usda.gov
- USDA FSIS Publication “Food Safety for Older Adults”
Web site: www.fsis.usda.gov/PDF/Food_Safety_for_Older_Adults.pdf

Gloves and protective masks

Following health precautions helps protect you and your employer from getting sick. Homecare Workers should use disposable gloves and protective masks to protect against the spread of disease when they assist an employer with personal care tasks like bathing and toileting.

Most client-employers who receive Medicaid should be able to get protective gloves and masks covered through their medical card coverage. Many local medical supply companies accept Medicaid and can deliver these supplies to the client-employer's home. Your employer can find more information about how to get these items covered by calling the health plan phone number on his or her medical card.

While your employer is waiting for the insurance approval, he or she can contact the local SPD/AAA office to get a month's supply of protective gloves and masks for you to use. The gloves and masks are covered in order to protect you from coming in contact with bodily fluids while providing services to your employer. Gloves and masks are not covered for general housekeeping tasks.

If your client-employer was denied coverage for gloves and masks by Medicaid, or is on the Oregon Project Independence Program and does not have insurance coverage for these supplies, he or she can order gloves or masks from the local SPD/AAA office. Homecare Workers can pick up these supplies at the local SPD/AAA office on behalf of your employer.

If you have an allergy to latex gloves, let the local SPD/AAA office know. They can order disposable vinyl or nitrile gloves instead.

Denial or Termination of Homecare Worker enrollment

DHS may deny an application or terminate the enrollment for a Homecare Worker in the Client-Employed Provider Program when:

- The applicant or HCW violates the requirement to maintain a drug-free workplace.
 - » “Violation of a Drug-Free Workplace” means there was a substantiated complaint against the Homecare Worker for:
 - (a) Being intoxicated by alcohol or drugs while responsible for the care of the client, while in the client's home, or while transporting the client; or

- (b) Manufacturing or distributing drugs while providing authorized services to the client or while in the client's home.
- The applicant or HCW violates protective service, abuse and neglect laws.
 - » “Violations of Protective Service and Abuse Rules” means the Homecare Worker violated protective service and abuse rules. Abuse includes physical abuse, emotional or verbal abuse, financial exploitation, sexual abuse (including inappropriate sexual advances), neglect of care, abandonment, and denying medical care or treatment. Abuse also includes the use of medications or physical restraints when used to discipline the client or for the convenience of the provider.
- The applicant or HCW has committed fiscal improprieties.
 - » “Fiscal Improprieties” means the Homecare Worker committed financial misconduct involving the client's money, property or benefits. Improprieties include, but are not limited to, financial exploitation, borrowing money from the client, taking the client's property or money, having the client purchase items for the Homecare Worker, forging the client's signature, falsifying payment records, claiming payment for hours not worked, or similar acts intentionally committed for financial gain.
- The applicant or HCW does not have the skills, knowledge or ability to adequately or safely provide services.
 - » “Lack of Skills, Knowledge and Ability to Adequately or Safely Perform the Required Work” means the Homecare Worker does not possess the skills to perform services needed by SPD clients. The Homecare Worker may not be physically, mentally, or emotionally capable of providing services to seniors and persons with disabilities. Their lack of skills may put clients at risk, because they fail to perform, or learn to perform, their duties adequately to meet the needs of the client.
- The applicant or HCW has an unacceptable criminal history;
 - » “Unacceptable Criminal History” means that a criminal history check and fitness determination have been conducted resulting in a “denied” status.
- The applicant or HCW is not 18 years of age;
- The applicant or HCW has engaged in unacceptable conduct at work.
 - » “Unacceptable Conduct at Work” means the Homecare Worker has repeatedly engaged in one or more of the following behaviors:
 - (a) Delay in their arrival to work or absences from work not prior-scheduled with the client, that are either unsatisfactory to the client or that neglect the client's service needs; or
 - (b) Inviting unwelcome guests or pets into the client's home, resulting in the client's dissatisfaction or inattention to the client's service needs.

- The applicant or HCW has been excluded by the United States Department of Health and Human Services, Office of Inspector General from participation in Medicaid, Medicare and all other federal health care programs;
- DHS has information that enrolling the applicant as a Homecare Worker or keeping the HCW would put vulnerable clients at risk; or
- The applicant failed to complete the mandatory Homecare Worker orientation arranged through a local SPD/AAA office within ninety (90) days of enrollment.

Ending Work for a Specific Employer

It is always courteous if both the client-employer and the Homecare Worker give as much notice as possible before ending an employment relationship. Many employers ask their Homecare Worker to sign an employment agreement that states that the HCW will inform him/her with two weeks advance notice before stopping work. Unless you have a written agreement, your employer is not required to give you two weeks notice. Oregon Statute (ORS) 410.608 states that a senior or person with a disability who hires a Homecare Worker “has the right to terminate the employment of the Homecare Worker at any time and for any reason.”

When you end a job, be sure to make arrangements to have the client-employer sign your payment voucher for your final work hours. If it is not possible to get the client-employer or his/her representative to sign your voucher, you can contact the Case Manager. The Case Manager or a manager in the local office may be able to sign off on your final hours in place of the client-employer.

Be sure to return any keys your employer gave you for entering his/her home or vehicle. You also need to contact the local SPD/AAA office to stop the payment vouchers from being issued.

Roles and Responsibilities – Payment and Benefits

1. The **Homecare Worker** has the following responsibilities in the payment process and with any benefits they may be eligible for:
 - Track hours worked and services provided
 - Sign the voucher and return it to the local office after the Client-Employer signs
 - Provide only authorized tasks
 - Arrange schedule changes or absences with employer
 - Contact the Case Manager when the client's condition changes
 - Prior-authorize paid leave with client-employer and local office
 - Report work-related injuries to Oregon Home Care Commission
 - Complete a W-4 form (tax withholding info) and return to local office
 - Enroll in health insurance (through HUBB - the Homecare Union Benefits Board), if eligible
 - Enroll in direct deposit if desired (voluntary)

2. The **Client-Employer** or **consumer** of services has the following responsibilities in the payment process:
 - Maintain calendar or record of days and times employee worked
 - Verify the hours and mileage claimed on the voucher were actually worked before signing
 - Sign the employee's voucher at the end of each payment period
 - Approve scheduled time off for all employee leave: paid or not
 - Arrange relief worker during paid leave periods
 - Cooperate in providing information needed for processing workers compensation claims and coverage
 - Report changes in service needs or hours to the Case Manager
 - Participate in the development of the Service Plan and Task List with the Case Manager.

3. The **SPD/AAA local office** has the following responsibilities in the payment process:
- Develop Service Plan and Task List with client-employer
 - Authorize in-home services hours and any service mileage
 - Approve and issue provider payments
 - Re-enrollment: verify the Homecare Worker remains qualified for payment
 - Approve requests to take paid leave and authorize payment
 - Respond to unemployment claims
 - Provide requested information to insurance company for workers' compensation claims

Getting paid

Use the following steps to make sure that you receive your correct paycheck in a timely manner:

1. Once your employer has hired you and notified the Case Manager, you will receive a payment voucher (form SDS 598B) from DHS by mail. (See sample on page 33.)
2. The payment voucher will show your employer's name, your name and address, and the authorized service hours (and mileage, if applicable). If you have more than one employer, you will receive a payment voucher for each employer.
3. After you have completed all of the service hours for the pay period, and the voucher has been verified and signed by both you and your employer, mail your payment voucher to the local SPD/AAA Office.
4. The local SPD/AAA office will check to make sure everything is correct and will process the payment electronically.
5. DHS will prepare and mail a check to you at the address you have provided. Please be sure you provide your current mailing address. Checks will not be forwarded. Undeliverable checks will be return to the SPD Central office Provider Payment Unit.
6. If the voucher has been completed and submitted correctly, paychecks are normally issued within three working days, excluding Oregon and federal holidays.
7. Within a few days after you have received your paycheck, you should also receive a payment voucher to use for the next pay period.
8. DHS is making payments to you on behalf of the client, your employer, for all

in-home services authorized in the Service Plan. This payment is considered as payment-in-full for the services you have provided. Under no circumstances should you ask for, or accept, any additional payment for these services from the client, the client's family or any other source.

Tracking time

Both you and your employer should keep separate records of the hours that you work so there are no misunderstandings or mistakes on your paycheck.

Decide on a method for tracking your hours. We strongly encourage you to keep a monthly calendar to record the days and times that you worked. Make sure that you do not work more than the maximum number of authorized hours. Hours worked that were not prior authorized by the Case Manager may not be paid. Keeping accurate records helps to resolve any misunderstandings about the hours you worked and helps to avoid mistakes on your paycheck.

The payment voucher

Your provider payment will be issued after you turn in a completed payment voucher (SDS 598B) to the local SPD/AAA office. This voucher is considered your time sheet and is a claim submitted to SPD for payment of services provided. The SDS 598B is processed and issued through the local SPD/AAA office, but is mailed from SPD central office in Salem.

SPD/AAA will send you two copies of each payment voucher. One copy is for your records. The other copy needs to be completed, signed by you and your employer and returned to the local office. The voucher will cover one pay period. You should list only the hours worked during that period. When you sign the voucher you are confirming that you worked the number of hours you are claiming for that pay period up to the maximum. Most Homecare Workers get paid one time per month, but you can choose to be paid twice per month. If you would like to be paid twice a month, notify the client's Case Manager. It is important to review the dates of the pay period and the hours worked on the voucher before signing. Be sure to check for accuracy and completeness.

You are responsible for returning the signed voucher to the local SPD/AAA office. Do not turn in the voucher before the end of the payment period. If you haven't received a check within 10 days of submitting a completed voucher to the local office, please call the local office.

Common mistakes that could delay your payment:

- Incomplete information
- Not having the payment voucher signed by you and your employer
- Using a pencil to fill out or sign the payment voucher: ink is required
- The numbers or writing cannot be read — be sure to write clearly
- Covering mistakes with correction fluid — instead, cross out any mistakes and have your employer initial all corrections
- Entering half hours incorrectly —half hours must be written in decimals (for *Example*: one hour and a half should be recorded as 1.5 hours)
- Mailing your payment voucher before the last day you worked in the pay period — the payment voucher should be mailed after completion of the service hours for the payment period
- Claiming more hours than are authorized for payment
- Claiming more mileage than is authorized
- Mailing the payment voucher late.

Instructions for completing the voucher:

The following sections are pre-filled by SPD.

Side 1 contains basic information that is pre-filled such as the local office branch name, address and phone number, the voucher number, provider name and address and provider number. It also includes the provider certification section, which is a confirmation that you understand the conditions for payment. Side 2 contains additional information that is pre-filled as follows:

- Voucher number
- Provider name and provider number
- Client name and client number
- Service period authorized
- Services authorized
- Hourly wage and authorized hours
- Transportation rate and authorized miles

Sections of the voucher that must be completed by the Homecare Worker:

You must complete these sections on side 2 of the voucher to be paid.

- **Service Period Worked**
 - » Enter the month, **first** day, and year of the pay period.
 - » Enter the month, **last** day, and year you worked in the pay period.
 - If you get paid once per month, and you work for a full month, this will be the first and last day of the month that you worked.
If you get paid twice per month you will get two sets of vouchers. There are two copies of the voucher in each set.
 - ◇ The first pay period would be the 1st through the 15th of the month.
 - ◇ The second pay period is the 16th of the month through the 30th/31st of the month. For a leap year, the last day is the 29th. These dates are pre-printed in the authorized dates section.
 - If you are leaving a job the ending date for the service period worked is the last day you worked for that employer.
- **Hours Worked** – Complete the hours worked for the service category up to the maximum authorized for that line in the authorized hours column. Enter the hours worked for each category on each line. The total must not exceed the total listed under Authorized Hours.
 - » See the section on “Types of Services” in this guide for a description of Activities of Daily Living (ADL), Self-Management Tasks and 24 Hour Availability.
 - » Refer to “Commonly Used Terms” at the back of this guide for a description of Minimal Assist, Substantial Assist and Full Assist hours in the service plan.
- **Actual Miles** - Enter the exact amount of any Service Plan-related mileage driven while transporting the client-employer. You can only enter mileage if it was prior-authorized by the Case Manager. If any miles are prior-authorized, they will be displayed in the pre-printed “Authorized Miles” column. To claim payment for the mileage, you must actually provide the transportation for your employer using your personal motor vehicle. You can only claim mileage up to the maximum authorized on the voucher.
- **Provider Signature and Date** – Sign to confirm you completed the service hours and any mileage you are claiming and list the date when you signed the voucher. *Note: you cannot sign or return the voucher for payment prior to completing the service hours for the pay period.*
- **“I no longer work for this client”** – If your job with a specific client- employer has ended, enter the last date you have worked for that employer. This date should match the one you entered as the end date under “Service Period Worked.”

Payment Voucher

State of Oregon
 Department of Human Services
 Seniors and People with Disabilities

Cost Center: 3417
 Voucher No:

Case Worker:

Provider Name

Provider Number:

Client Name:

Client Number:

Service Period

Authorized: (03/01/2008) thru (03/31/2008)

Worked: (/ /) thru (/ /)

Services Authorized (see front of voucher for definitions): Hourly HCW

	Hr Wage:	Authorized Hours:	Hours Worked:
ADL Full Assist	\$9.90	12.50	_____
ADL Substantial Assist	\$9.90	13.00	_____
ADL Minimal Assist	\$9.90	2.00	_____
Self Management	\$9.90	33.00	_____
Total Hours:		60.50	_____
Transportation:	Rate:	Authorized Miles:	Actual Miles:
Mileage	\$.48	65	_____

I have read the Provider Certification statement on the front of this payment voucher. I have not worked more than the maximum hours for the service period. By signing this invoice, I certify the above information is true, accurate and complete.

Provider Signature _____ Date _____

I no longer work for this client as of __/__/____ (Last day worked).

CLIENT CERTIFICATION: By signing this invoice, I certify that the services described above were received by me. I hereby designate the Department an agent for the purpose of doing all that is required of myself pursuant of Section 3504 of the Internal Revenue Code. (This designation is not applicable if the payee is a private firm or agency employee.)

Client/Employer Signature _____ Date _____

Employer must sign and date this field in order for the Homecare Worker to get paid:

- **Client/Employer Signature and Date** – Your employer or his or her designated representative must sign the voucher to confirm that the service hours in the pay period have been completed. If your employer is in the hospital or otherwise unavailable, contact your employer’s Case Manager to see if he or she can sign on behalf of the employer. As the employee you cannot sign for the client-employer. *Note: It is fraud to forge a client-employer’s signature. Forging the client-employer’s signature will result in termination of provider enrollment with SPD.*

Never ask the client to sign a blank voucher.

After completing the authorized hours at the end of the pay period, submit your voucher for payment by dropping it off at the SPD/AAA office in person or by mailing it to the address on the voucher. You may not fax your voucher as original signatures are required. Keep one copy of the voucher for your records. Federal law requires that you keep your copy of the voucher for three years.

Remittance advice

The remittance advice comes with your paycheck. It shows you the employers you worked for, the service period(s) you worked, the hours you worked for each employer and the hourly rate. It also shows you any mileage reimbursement that was paid. DHS reports the amount shown as “taxable wages” to the Internal Revenue Service. The amount is reported on your W2 form. Mileage reimbursements are not considered taxable wages.

Voucher-ICN, Cost Code, Prime ID — Each voucher has a unique number so that authorization and payment can be tracked. The cost code is the identification number for the local SPD/AAA office. The Prime ID is the identification number for the employer.

Adjustment (ADJ RSN) — The adjustment codes are explained toward the bottom of the remittance advice. Adjustments include underpayments and overpayments.

Underpayments — An underpayment is when the Homecare Worker was issued less payment than the amount they were authorized to receive based on hours worked. The adjustment results in an additional amount paid to the Homecare Worker.

Deductions

FICA (The Federal Insurance Contributions Act) is deducted from your wages and goes towards Social Security and Medicare.

Workers' Compensation (WCD) — An employment tax called the “benefit fund assessment” is deducted from your wages. This tax goes to pay for “return to work services” for Homecare Workers who are injured on the job.

SEIU Deduction — Union dues are deducted for Homecare Workers included in the bargaining unit who are working more than 32 hours per month. SEIU handles questions about union dues.

Overpayments (OVP) — An overpayment is when a payment is made to a Homecare Worker that is more than the person was authorized to receive. When this happens, overpayments are deducted from the HCW's wages until the full amount is paid back.

Garnishments - These are deductions ordered by the courts such as for child support, IRS back taxes and educational loans. Any garnishment will appear on the “Provider/Employee Earnings Summary.” If there is not a garnishment, you will not see this section on the remittance advice.

Your tax responsibilities

State and federal income taxes — SPD began withholding state and federal income tax for Homecare Workers effective 7/1/2005 as part of an agreement under the Home Care Commission's collective bargaining agreement with SEIU Local, 503, OPEU. When you enroll as a Homecare Worker you complete the IRS W-4 form in your application packet. On the W-4 form you indicate the amount of withholdings based on your filing status (e.g. married or single) and the number of withholdings. You need to return the W-4 form to the local SPD or AAA office. The local office will enter the information about your filing status and withholdings so the appropriate amount is withheld from your provider paychecks.

SPD/AAA is not able to give you any tax advice about the number of withholdings to select and cannot help you complete the W-4 form. To get assistance with completing the W-4 form, you will need to contact the IRS or Oregon Department of Revenue. You can also contact a tax expert or find information on the Internet that may help answer your questions.

If you don't return a completed W-4 form, the highest tax withholding rate will be applied to your payments. You may file a new W-4 form at any time to change your filing status and withholdings. However, claims cannot be adjusted to issue refunds back to you for previously withheld amounts. Instead the amounts withheld will be forwarded to the IRS and the Department of Revenue. You will need to resolve the difference in the amount of taxes you paid and the amount of taxes you owed when you file your taxes.

Some Homecare Workers claim exempt status on their W-4 form. Those who file exempt status need to complete a new W-4 form each year. This is because the exemption only lasts one year, usually ending in February of the following year. The exact expiration date is listed on the W-4 form for the current year. SPD may send you a new W-4 form if you worked as a Homecare Worker the previous year and claimed exempt status. If you don't receive a new W-4 form, you can always print off a copy of the W-4 form for the current year from the IRS website: www.IRS.gov. You will need to return the completed W-4 form to the local SPD/AAA office.

At the beginning of the year, SPD central office will mail you your W-2 form (the record of your earnings for the previous year that is filed with your income tax return) no later than January 31st. You can use the information on the W-2 form to file your taxes.

Important reminder

Please report address changes to the local SPD/AAA office even if you are not currently working for a SPD/AAA employer so that your W-2 is mailed to the correct address.

Mileage

Mileage reimbursement must be pre-approved by your employer's Case Manager. The authorized mileage amount will be listed on the payment voucher. Mileage reimbursement will only include Service Plan-related mileage, not medical transportation. You must have a valid driver's license and be using your personal motor vehicle to be reimbursed for mileage. Your employer may ask to verify your driver's license and proof of auto insurance.

SPD/AAA will not authorize reimbursement for travel to or from the residence of the Homecare Worker. Transportation and mileage may only be authorized from the

home of the employer to the destination(s) authorized in the Service Plan and back to the eligible individual's home. DHS is not responsible for any vehicle damage or personal injury sustained while using a personal motor vehicle to transport your employer, except as may be covered by workers' compensation.

Homecare Worker Benefits

Direct Deposit

Direct Deposit (also known as an electronic funds transfer) provides a more secure way of getting your provider payment directly deposited into your account. Direct Deposit can prevent checks from getting stolen or lost in the mail, and can save you a trip to cash or deposit your check. A Homecare Worker who enrolls in Direct Deposit continues to receive a monthly remittance advice showing the employer(s) he or she worked for and the amount paid.

Direct Deposit is voluntary for those Homecare Workers who choose to sign up. It is not mandatory. A *Request for Direct Deposit form (SDS 7262H)* will be included in your Homecare application packet. You need to return the *Request for Direct Deposit form (7262H)* to the SPD Direct Deposit Unit at the address on the form. The form also requires you to attach a voided check for all requests involving checking accounts. All Direct Deposit requests are entered at SPD central office.

If you do not sign up for Direct Deposit when you enroll as a Homecare Worker, you can sign up later at any time by completing the *Request for Direct Deposit form (7262H)*. This form is available at the local SPD/AAA office. You can also cancel direct deposit at any time by sending a written, dated and signed statement requesting that Direct Deposit be canceled, or you may complete the *(SDS 7263) Request to Cancel Direct Deposit form*. Send your form or your statement to the SPD/AAA office.

Electronic deposits take three banking days to get from the Department to the Homecare Worker's bank. Banking days are Monday - Friday, excluding holidays. Oregon Administrative Rules require all state funds, including provider payments, to go through a clearinghouse at the State Treasury before they are sent electronically to the Homecare Worker's bank or financial institution. This process takes extra time.

Your bank or financial institution may have its own schedule for processing direct deposits. Some financial institutions process electronic deposits once per day, others process deposits twice per day. The time of day when deposits are processed can also vary. You should check with your bank or financial institution to find out when the direct deposit will be processed and your funds will be available to you.

Homecare Workers are responsible for verifying that electronic funds are received in their bank account prior to making purchases. DHS is not responsible for any insufficient funds charges on the HCWs account. DHS will not reimburse any overdraft charges resulting from expenditures before funds were available.

FICA/Medicare tax withholding

The Federal Insurance Contribution Act (FICA) is an employment tax. FICA withholdings go towards an individual's Social Security and Medicare benefits. FICA withholdings are sent to Social Security Administration and applied toward an individual's Social Security Benefits and Medicare account.

As a Homecare Worker, your share of FICA is automatically withheld from your provider payment check and sent to Social Security Administration. At the end of the tax year, some individuals receive a FICA tax refund. The FICA refund will be based on the total gross earnings earned by the provider in an entire year. If the provider earns less than the federal standard set by the IRS and Social Security, then the provider can receive a FICA refund. Questions about FICA deductions can be directed to the Internal Revenue Service at 1-800-829-1040.

Paid leave

Live-in Homecare Workers and Spousal Pay Program Homecare Workers – Spousal Pay and Live-in HCWs that are the only live-in Homecare Workers for a client during a month, will earn one 24-hour period of leave each month. If you work part of a month as a live-in, or if there is more than one live-in Homecare Worker for the same client, you can receive part of the 24-hour leave. Live-in HCWs can earn up to a total of 144 hours of accrued leave.

Coordinate with your employer and his or her Case Manager when you want to take the leave. The employer will need to approve your time off and arrange a relief

Homecare Worker. The Case Manager will need to authorize payment for the leave period and verify that you have earned the amount of paid leave you want to take.

You must use the paid leave in 24-hour blocks. If your employment ends, you will keep your accrued leave if you become employed again as a live-in Homecare Worker with another employer within one year. If you begin working as an hourly provider, you may convert up to 32 hours of your leave accrued as a Live-in into hourly paid leave. Fifty percent of accrued paid leave that has not been taken by January 31 will be cashed out. The Live-in HCW will be sent the cash out and his/her leave balance will be reduced by half.

Hourly Homecare Workers — Starting July 1st of each year, Homecare Workers who worked 80 authorized and paid hours in any one of the following months: April or May or June, will earn 16 hours of paid leave to use between July 1st and June 30th of the current year. On February 1st of each year, Homecare Workers who worked 80 authorized and paid hours in any one of the three following months: November or December or January, will be credited with 16 hours of paid time off. One 16 hour block of paid leave will be credited to each eligible Homecare Worker, irrespective of the number of employers served. For each period, accrued leave that has not been used by January 31 of each year will be cashed out. HCWs will receive this payment and their accrued leave balance will be reduced to zero.

When you use your leave, it must be taken in one eight-hour block or in amounts that are the same as your normal workday. Also, your employer and his or her Case Manager must authorize you to take the time off. Homecare Workers can't be paid for leave time unless the time off work is actually taken.

Unemployment insurance

Unemployment insurance replaces part of the income you lose when you become unemployed. It is a benefit available to eligible workers who are out of work through no fault of their own.

Who is eligible?

You must be considered "laid off," rather than terminated, and you are required to be actively seeking employment. You need to contact your local SPD/AAA office to let them know you are seeking new employers. If the local office keeps a registry of Homecare Workers, be sure your current contact information is on the provider list.

Who is not eligible?

If you were terminated from employment by the employer, for good cause, or your payment authorization was terminated by DHS, you are not eligible for unemployment compensation.

What happens when a Homecare Worker applies for unemployment insurance?

When a Homecare Worker applies for unemployment compensation, the Employment Department will send a notice that a claim has been filed to either the local or central office of DHS. Although you are employed by your employer, the Employment Department considers DHS to be the employer for purposes of unemployment compensation. DHS has the right to respond to that notice. If the Homecare Worker is found eligible for unemployment and DHS disagrees based on information that the Homecare Worker has been terminated for cause, or that there is other work available, DHS will appeal that decision. Either side will be able to request a hearing and appeal if they disagree with the Employment Department's decision whether to allow or deny benefits.

Getting your job-related questions answered

As a Homecare Worker, you will be communicating primarily with the CEP Support Specialist, your employer's Case Manager and the Homecare Workers' Union.

The CEP Support Specialist answers questions related to Homecare Worker enrollment and payment processes. The CEP Support Specialist may also:

- Provide application packets
- Provide orientation information
- Work with the DHS Criminal Records Unit to process criminal history checks
- Process provider enrollment requests and obtain and provider numbers from SPD central office in Salem
- Process vouchers and issue payments

The Case Manager handles all questions related to an individual client-employer such as:

- The Service Plan and Task List
- Number of hours and mileage authorized for the client-employer
- Hourly wage rates
- Authorizing payment for paid leave requests
- Any changes in your employer's service needs

The Homecare Workers' Union (SEIU 503, OPEU) handles all questions relating to union membership, representation and benefits such as:

- Grievances
- Union membership enrollment
- Dues deductions
- Termination appeal rights
- The collective bargaining agreement (union contract)
- Membership benefits (life insurance, Mastercard, etc.)
- Local office bulletin boards

The Home Care Commission answers questions about training available for Homecare Workers and employers. The Home Care Commission also handles questions related to the statewide registry of Homecare Workers.

Workers' compensation — The Oregon Home Care Commission also handles the initial reports and interviews of Homecare Workers who are injured on the job. The toll free number for reporting a work related injury and filing a claim is : 1-888-365-0001 or, in the Salem area, please call (503) 378-3099. SDS0415D brochure entitled, "Homecare Worker Worker's Compensation Brochure-what to do if you are injured on the job" is available on request.

Health insurance — Questions regarding health insurance benefits should be directed to the Homecare Union Benefits Board (HUBB) at 1-866-364-4822.



Appendix I:

Commonly used terms

The Client-Employed Provider Program may have terms that are unfamiliar to you. Here are some of the commonly used terms and their definitions:

- **Activities of Daily Living (ADL)** — means those personal, functional activities required by an individual for continued well-being, which are essential for health and safety. Activities include eating, dressing/grooming, bathing/personal hygiene, mobility (ambulation and transfer), elimination (toileting, bowel and bladder management), and cognition/behavior as defined in OAR chapter 411, division 015.
- **Area Agency on Aging (AAA)** — means the Department of Human Services (DHS) designated agency charged with the responsibility to provide a comprehensive and coordinated system of services to seniors and individuals with disabilities in a local planning and service area.
- **Assistive Devices** — means any category of durable medical equipment, mechanical apparatus, electrical appliance, or instrument of technology used to assist and enhance an individual's independence in performing any activity of daily living (ADL).
- **Case Manager** — means an SPD or AAA employee who assesses the service needs of an applicant, determines eligibility, and offers service choices to the eligible individual (your employer). The Case Manager authorizes and implements the service plan, and monitors the services delivered.
- **Client** — See “Employer”
- **Client-Employed Provider (CEP) Program** — means the SPD program wherein the provider is directly employed by the SPD/AAA client (consumer) and provides either hourly or live-in services. In some aspects of the employer and employee relationship, the Department of Human Services acts as an agent for the Client-Employer.
- **Consumer** – See “Employer”
- **Employer** or **Client-Employer** — means the individual eligible for Medicaid paid in-home services who employs a Homecare Worker to provide his or her services. This individual may be referred to as a client in connection with benefits received from the Department of Human Services. You may also hear this individual referred to as the consumer of in-home services.
- **FICA** or **Federal Insurance Contributions Act** — means the tax imposed on employers and employees that funds the Social Security system and federal

Medicare benefits.

- **Full assistance in determining Service Plan hours** — means the client-employer needs assistance from another person through all phases of the activity of daily living or self-management task, every time the activity or task is attempted.
- **Homecare Worker (HCW)** — means a provider, as described in OAR 411-031-0040, that is directly employed by the SPD/AAA client and provides either hourly or live-in services to eligible individuals. The term Homecare Worker includes client-employed providers in the Spousal Pay and Oregon Project Independence Programs. It also includes client-employed providers that provide State Plan Personal Care services to seniors and people with physical disabilities. The term does not include Independent Choices Program providers nor Personal Care Attendants enrolled through Developmental Disability services or the Addictions and Mental Health Division.
- **Hourly services** — means the in-home services, including Activities of Daily Living and self-management services that are provided at regularly scheduled times.
- **Independent** — means a client-employer does not meet SPD's definition for requiring assistance from another person in completing an activity of daily living or self-management task. The individual may still need help but not at the level or frequency at which DHS provides assistance.
- **In-Home Support Services** — means the assistance provided to an eligible individual with activities of daily living and self-management tasks that helps an individual to stay in his or her own home.
- **Live-in services** — means those Client-Employed Provider Program services provided when a SPD/AAA client requires ADL, self-management tasks, and twenty-four hour availability. Live-in service plans must include at least one Homecare Worker providing twenty-four hour availability for a minimum of five days in a calendar week.



- **Medication and Oxygen Management** — Medication Management means assistance with ordering, organizing and administering prescribed medications. Administering prescribed medications includes pills, drops, ointments, creams, injections, inhalers and suppositories. Oxygen management means assisting with the administration of oxygen, monitoring the equipment and assuring adequate oxygen supply.
- **Minimal assistance** — in determining Service Plan hours means a client-employer is able to perform the majority of a task but requires some assistance from another person.
- **Natural Supports** — means the resources available to an individual from their relatives, friends, significant others, neighbors, roommates and the community. Services provided by natural supports are resources not paid for by the Department.
- **Personal Care Services** — a more general term that describes the assistance with daily activities that an individual receives from a provider. Personal care services include activities of daily living such as assistance with bathing and toileting but may also include medically-related services that are not covered in a service plan authorized by SPD. This term is not to be confused with State Plan Personal Care services. State Plan Personal Care is an SPD program with specific guidelines for eligibility and service planning.
- **Provider** — means the person (employee) hired by a client-employer to render services authorized by SPD/AAA. Provider is a more general term that describes Homecare Workers and other healthcare workers who deliver personal care services.
- **Self-management** or “**Instrumental Activities of Daily Living (IADL)**” — means those activities, other than activities of daily living, required by an individual to continue independent living (i.e. medication and oxygen management, transportation, meal preparation, shopping, and client-focused housekeeping).
- **Seniors and People with Disabilities (SPD)** — means the part of the Department of Human Services responsible for the administration of programs to seniors and people with physical disabilities. Services are provided to individuals through local SPD and Area Agencies on Aging (AAA) offices.
- **Service need** — means the assistance an individual requires from another person with ADLs, self-management tasks or 24-hour availability.
- **Service Plan** — A plan developed by the Case Manager in conjunction with the client-employer based on the service needs of the client-employer. The plan authorizes the services to be provided, identifies the maximum hours for

those services, and indicates the hourly rates for the services approved by SPD/AAA.

- **Substantial assistance in determining Service Plan hours** — means a client-employer can perform only a small portion of an activity without assistance from another person.
- **Twenty-Four Hour Availability** — means the availability and responsibility of an employee to meet activities of daily living and self-management needs of an eligible individual as need by that person over a twenty-four hour period. The needs may occur at unscheduled times. These services are provided by a live-in employee and are exempt from federal and state minimum wage and overtime requirements.

Appendix II:

Nutrition Information for Preparing Meals

For more info contact the U.S. Department of Agriculture Web site:
www.mypyramid.gov.

You may need to prepare meals for your employer if meal preparation is authorized in your employer's Service Plan. Your employer will tell you his or her food and meal preferences and you need to follow these preferences in preparing his or her meals. Check with your employer to see if any special diet has been prescribed by his or her physician.

It's important that you know what foods provide good nutrition. Nutrients are vital for energy and health and for maintaining and healing our bodies. Information is included below about the nutrients that are needed in balanced amounts for the body to function properly.

Meat and Beans

Sources: meat, poultry, fish, eggs, dairy products, beans, peas, nuts. Meat and beans include proteins, which function as building blocks for bones, muscles, cartilage, skin, and blood. Most meat and poultry choices should be lean or low-fat. Foods high in saturated fat and cholesterol may have health implications.

Grains

Sources: bread, grains, cereal, oatmeal, rice, potatoes, pasta, beans. Grains are important sources of dietary fiber and minerals. Fiber is important for proper bowel function. It helps reduce constipation. Foods with fiber help provide a feeling of fullness with fewer calories.

Fruit

Sources: Apples, bananas, oranges, berries, plums, melons, grapes. Fruits provide nutrients vital for health and maintenance of your body. People who eat more fruits and vegetables as part of an overall healthy diet are likely to have a reduced risk of some chronic diseases.

Vegetables

Sources: spinach, carrots, green beans, mushrooms, tomatoes, lettuce. Vegetables are important sources of many nutrients, including potassium, dietary fiber, folate (folic acid), vitamin A, vitamin E, and vitamin C. Most vegetables are naturally low in fat and calories. None have cholesterol.

Milk

Sources: milk, cheese, yogurt, ice cream, cottage cheese. A diet rich in milk products can reduce the risk of low bone mass throughout the life cycle. Most milk group choices should be fat-free or low-fat.

Oils

Sources: cooking oils, margarine, butter, also found in fish, nuts, avocados, mayonnaise, salad dressing. Oils contain “essential fatty acids” necessary for health. Oils are also a major source of vitamin E.

Fluid

The average adult needs about 2.5 liters of water each day. Water makes up approximately two-thirds of each person’s body weight. Water helps control the body’s temperature and is released through perspiration. A person who loses too much water can become dehydrated, leading to serious, even fatal health results.

Warning signs to watch for

If you are concerned your employer may be malnourished or dehydrated, and you are unable to address that concern with your employer or his or her designated representative, call the Case Manager and/or the physician.

Some of the warning signs of malnutrition include:

- Loss of appetite
- Pronounced weight loss without dieting
- Listlessness and apathy
- Hair and skin changes
- A swollen abdomen
- Excessive water retention
- Poor wound healing and bruising easily
- Low protein levels in lab results

Some of the warning signs of dehydration are:

- Dry, sticky mouth
- Sleepiness or tiredness
- Thirst
- Decreased urine output
- Muscle weakness
- Headache
- Dizziness or lightheadedness
- Irritability and confusion
- Very dry mouth, skin and mucous membranes
- Lack of sweating
- Low blood pressure
- Rapid heartbeat
- Fever
- Little or no urination — any urine that is produced will be dark yellow or amber. Clear or light-colored urine means you're well hydrated.

Appendix III:

Client-Employed Provider Program Homecare Workers' Guide

If the local SPD/AAA office instructs you to complete this form to verify you have fulfilled the requirement for mandatory orientation, please read, sign, detach and return this form to the local SPD/AAA office.

BY SIGNING THIS PAGE I AM CONFIRMING:

- That I have read all of the pages in the CEP Homecare Workers' Guide (SDS 9046a)
- That I understand the information contained in this guide including the topics on:
 - » Homecare Worker Job Responsibilities and Expectations
 - » Confidentiality
 - » Abuse and neglect
 - » The role of the consumer as the employer
 - » Infection control and food safety in preparing meals
 - » The role of the local office in prior-authorizing payment
- Tracking the hours worked and submitting the completed voucher for payment
- That I know I can contact the local SPD/AAA office if I have any questions or concerns about the information provided in the Homecare Workers' Guide.

Signature of Homecare Worker

Date

FOR OFFICE USE ONLY	
<input type="checkbox"/> Signed form meets alternate method of orientation	Provider No. _____
<input type="checkbox"/> Form signed in addition to in-class orientation	
<input type="checkbox"/> Date signed form received by local office: _____	<input type="checkbox"/> Career HCW <input type="checkbox"/> Restricted HCW
<input type="checkbox"/> Local office staff initials: _____	
<input type="checkbox"/> HCC staff initials, if verified by HCC: _____	



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