

LEND A HAND COMPANION CARE & TRANSPORT SERVICES, LLC.

We are committed to helping our clients and their loved ones remain independent.

Clients Responsibilities

- Provide accurate information related to services needed and services provided.
- Inform 'Lend a Hand' if you are unable to keep any appointments with the companion or if the companion does not keep any appointments with you. 'Lend a Hand' must be notified (via voicemail, email or text) 24 hours in advance of cancellation of services to prevent from being charged for those hours of service.
- Inform 'Lend a Hand' of any changes in the clients' health status.
- Be considerate and cooperative with all 'Lend a Hand' personnel.
- Cooperate with health workers without discrimination as to race, color, sex, religion, national ethnic origin.
- Plan for the payment of 'Lend a Hand' on a weekly basis. Communicate any problems or issues related to services provided by 'Lend a Hand'.

Our Responsibilities

- Service without discrimination as to race, color, sex, religion, age, handicap, marital status, national or ethnic origin.
- A reasonable and timely response by 'Lend a Hand' to a request of services.
- Be given a statement of the services available from 'Lend a Hand'.
- Have all information provided to them in a timely manner.
- Participate in the planning of the services and be advised in advance of any changes to the service plan.
- Be informed of when and how services will be provided, and the name and functions of any person providing services.
- Process patient complaints about services provided or not provided. Complaints concerning lack of respect for property by anyone furnishing services on behalf of 'Lend a Hand'.

____ Daily/Hourly Rate of Service | ____ Days of Service | ____ # of Hours/Day

I have reviewed and understand my client responsibilities.

Signature of Client or Authorized Family Member: _____

(Print Name) _____ Date: _____

Signature of LAH Representative: _____

(Print Name) _____ Date: _____