HOME SERVICE WORKER INFORMATION

Name:					
Last		First]	MI	
Address:			Apt. No		
	City	Stat	te	Zip	
Phone:	Cell:		Fax/Other:		
Date of Birth:	Social Security Number:				

HOME SERVICE PLACEMENT AGENCY RESPONSIBILITIES

A. Home Services: Total Staffing Network (TSN) is very proud of the commitment made by our team who are dedicated to caring for and working with individuals who want to maintain an undiminished quality of life. TSN is a *Placement agency that places a worker for private hire by a consumer in that consumer's residence for purposes of providing home services.* (Section 2.12 of the Act)

Total Staffing Network, Inc is an Agency licensed as a home service placement agency and is in the business of securing or attempting to secure work for hire for persons seeking work or workers for employers. The placement agency (TSN) shall not be the employer of the home service worker for whom it procures, offers, refers, provides, or attempts to provide work. TSN shall comply with the Health Care Worker Background Check Act [225 ILCS 46] and the Health Care Worker Background Check Code (77 Ill. Adm. Code 955). This contract shall remain in effect with placement of worker with client for 3 months but not to exceed 12 months.

- **B.** Home Service Worker: TSN placement agency shall not be the employer of the home service worker for whom it procures, offers, refers, provides or attempts to provide work. The home services worker shall perform services pursuant to Section 245.71 without any direction, control or supervision exercised by the home services placement agency with respect to performing the home services work. Following the placement of the worker with the client, the placement agency shall not have any control of the worker's assignments or duties or assist the client in the payment of the home service worker. The placement agency shall not provide ongoing support and administrative management of the client's needs.
- C. Employer of home service Worker: Client/responsible party will be the employer of the home service worker and will be responsible for payment of all wages, employment taxes and unemployment insurance including the withholding of applicable social security, federal and state income taxes. Client/responsible party and home service worker are responsible for workers compensation, non-owned auto, liability and fidelity bond insurance coverage.



- **D. Supervision:** The client/responsible party will be responsible for assignment of duties, supervising the provisions of equipment or materials for the in-home services worker's use in providing services to the client. Oversee and monitor the day-to-day services of the home service worker. Client will be responsible for hiring, firing, and disciplining the in-home service worker.
- **E. Training:** Home service worker wishing to remain eligible for placement by TSN shall provide proof of a minimum of eight hours of in-service training per year.
- **F. Billing:** TSN will bill the home service worker a one-time fee for placement of \$_____ (equivalent to two weeks of home service worker's pay). The agency will allow the home service worker to pay 50% when the contract is initiated and 50% at the start of the 3rd week of placement.

All placement fees will be payable to the placement agency, Total Staffing Network, Inc. Payments are to be mailed to: TOTAL STAFFING NETWORK, INC 330 Georgetown Sq Ste 106 Wood Dale, IL 60191.

G. Protective Equipment: In accordance with the requirements of the Centers for Disease Control and Prevention (CDC) and the Occupational Safety and Health Administration (OSHA), client shall supply gloves and any other protective equipment necessary to prevent the transmission of infection when working with home service workers. Client shall provide supplies or reimburse home service placed worker to meet the requirements of the CDC and OSHA.

Questions/Comments/Concerns/Complaints: TSN's business office is open from 9:00 AM - 5:00 PM Monday through Friday. Oreanthi Stellatos, Administrator, is available 24 hours a day, 7 days a week by calling 773-321-0893. TSN's email address is totalstaffingnetwork@gmail.com.

TSN takes all complaints seriously. The process for resolving a complaint is to contact the Administrator, Oreanthi (Anthi) Stellatos to share the feedback with her. She will investigate the issue in compliance with the private employment agency act and will return your call with her findings/resolution to the problem within 24 hours from when the complaint was reported.

Below is a complete list of contact information for the department on aging and the department of children and family services to report abuse, neglect or financial exploitation along with a list of what constitutes abuse, neglect or financial exploitation.

To report suspected abuse, neglect, or financial exploitation of an adult age 60 or older or a person with disabilities age 18-59 call the statewide, 24-hour Adult Protective Services Hotline: 1-866-800-1409, 1-888-206-1327 (TTY).

For residents who live in nursing facilities, call the Illinois Department of Public Health's Nursing Home Complaint Hotline: 1-800-252-4343.

For residents who live in Supportive Living Facilities (SLFs), call the Illinois Department of Healthcare and Family Services' SLF Complaint Hotline: 1-800-226-0768.

Chicago Department on Aging: 312-744-0784 DuPage County: Northeastern Illinois Agency on Aging 630-293-5990 Senior Helpline: 1-800-252-8966 **A.** Treatment of client and caregiver: The home service worker understands that TSN is an Equal Opportunity Employer and does not discriminate based on age, race, creed, color, natural origin, marital status, disability, or sexual orientation. All TSN home service workers and clients are entitled to be treated respectfully and to be free from all forms of abuse or harassment A. Schedule: Home service worker staff will create a work schedule with the client on mutually agreed upon times. This schedule may be modified as desired by the client/responsible party and the home service worker. Changes are to be confirmed with the client/responsible party and the home service worker. B. Caregiver Rates: Service expected rates: \$ per hour \$ per day C. TERMINATION, MODIFICATION OR AMENDING OF SERVICE The client/responsible party may terminate, modify, or amend this Home Service Placement Agreement by providing at least a twenty-four (24) hours' notice to TSN prior to worker placement. If a placed worker does not work out for the client during the 3-month period the agency will abide by our refund policy guidelines. The undersigned has read and has been given the opportunity to discuss and understand this Home Service Placement Services Agreement and agrees to be legally bound to all the terms and conditions. Use of TSN home service placement services are at your own risk and no guarantee on services can be made. This Home Services Agreement shall remain in effect until terminated by either the client/responsible party or Total Staffing Network Inc. Furthermore, by signing below the responsible party is in acceptance of the terms and conditions of this agreement. Acceptance means a mutual agreement, verbal or written, between employee and employer as to starting salary, position, and time and place of employment. Signature of home service worker: ______ Date: _____

Signature of TSN Representative: Date:



TOTAL STAFFING NETWORK HOME SERVICE WORKER PLACEMENT CONTRACT

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hone Number:
esponsible Party:
hone Number :
tart date: