



Time Sheet

EMPLOYEE'S NAME (Print first and last name):

MEMBER'S NAME (Print first and last name):

Payroll Submission Deadline: 1st and 16th of every month by 5:00pm
 (Week begins on Sunday ends Saturday)

Day of Week:	Date:	Service Type	Time in	Time Out	Total Hours
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
END OF WEEK 1 (SUNDAY – SATURDAY)			TOTAL WORK WEEK HOURS:		
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
END OF WEEK 2 (SUNDAY – SATURDAY)			TOTAL WORK WEEK HOURS:		
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
END OF WEEK 3 (SUNDAY – SATURDAY)			TOTAL WORK WEEK HOURS:		
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	
			am pm	am pm	

TOTAL HOURS :

Signatures indicate services have been completed according to times entered above and in compliance with requirements and specifications listed on the back of this page.

Member/Member Rep. Signature:

Date:

Employee Signature:

Date:

Return to: **Inspire Inc.** 4203 E. Indian School Rd. Suite 200 Phoenix, AZ 85018
 Fax: 602-258-0200 / Phone: 602-258-0900



1. Obtain AUTHORIZATION PRIOR to doing any service by calling Inspire. You may not exceed the hours authorized.
2. For a person new to you, staff must receive orientation to the specific needs of the individual to whom you will be providing the services. Arrange for an orientation prior to doing service. Review and update Orientation Form at the time of the orientation. Keep a copy with you when you work with the person. Record orientation time on the Time sheet and have family sign the first time service line.
3. Provide first aid and appropriate attention to injury and illness. Then call your Coordinator when an incident report is appropriate.
4. Maintain current Article 9, FIRST AID, CPR, and Direct Care Worker certification and other training as required.
5. Provide for the safety of the person you are serving and contact Inspire if any incident occurs.
6. Notify the family and your Coordinator as much in advance as possible (at least 48 hours notice is required) to cancel any previously arranged services.
7. In general, services are to occur in the home of the person you are serving on a one-to-one basis. Variations may occur and must be prior approved. Services provided to more than 1 person at the same time are subject to a group rate. Contact your Coordinator for details.
8. If approval is given by a Coordinator, occasionally staff may provide transportation as a part of the service being provided. If transportation is provided the following must be in place: A.) The individual(s) must be securely fastened in restraints that are age and weight appropriate, as required by State law. B.) The vehicle in which transportation is provided must have valid license plates. C.) The vehicle shall be constructed for the transportation of persons. All seats shall be fastened to the body of the vehicle and individuals properly seated when the vehicle is in operation. The vehicle must have seat belts installed and operational for safe passenger utilization. D.) Persons providing transportation must be a minimum of eighteen years of age, possess and maintain a valid Arizona operator's license, and have proof of Arizona required insurance and auto registration on file at Inspire prior to transporting and E) Vehicles used for transporting Persons Served will be inspected by Inspire at least annually.
9. Time sheets and accompanying Progress Notes are due on the 1st and 16th of each month by 5pm. Please ask your Coordinator if you have questions. Time sheets need to be submitted to your local Inspire office.
10. Notify Inspire of changes in your phone number or address; or the phone and address of the parent/guardian, Consumer, or name and phone number of the Case Manager.
11. Services are intended only for the person listed on this Time sheet.
12. All Time sheets must be submitted on the 1st and the 16th of each month by 5:00pm.
13. A work week begins on a Sunday and end on Saturday.
14. Overtime is considered over 40hours in a given work week (Sunday to Saturday) – Overtime MUST be approved by the Program Coordinator.

RESPIRE (RSP) Service Description - this service provides short-term (or intermittent) care and supervision to provide relief to primary caregivers of the Consumer. May be required to be available on a 24-hour basis. Service Goal - To improve emotional and mental well being of eligible individuals. 1. Provide supervision of the individual for the period of time authorized by Inspire. 2. Provide for the social, emotional, and physical needs of the individual during the stay. 3. Ensure that the individual receives medication as prescribed. (Please note this does not mean to administer medications.) 4. Ensure provision of food to meet daily dietary needs, including a therapeutic diet if prescribed. 5. Carry out the Individual Support Plan goals and objectives during the stay, as requested by the individual or individual's parent or guardian. 6. You may provide respite service for up to 3 persons at any one time, only when you meet one of the following conditions: A) The Persons Served all live in the same household where the DSP is doing the service (example; foster care home), B) The respite service is done in some type of community setting, C) In your home, if you are an IN-HOME certified DSP, OR D) A home where the DSP is doing respite must be IN-HOME certified (EXAMPLE: A DSP comes to an in-home DSP's home for two children while the in-home DSP takes a third child to therapy). Families and Case Managers must give prior written permission to Inspire when serving more than 3 persons. The setting where respite is given must meet certain safety standards if not in the person's own home. 7. Thirteen to twenty-four consecutive hours of respite are generally paid at the respite day rate. Contact your Coordinator for the definition of consecutive hours of respite and the day rate. 8. Services provided to more than 1 person at the same time are subject to a group rate. Contact your Coordinator for details. 9. Provide respite service in your home only if your home has been certified for IN-HOME respite. 10. Record actual contact hours on Time sheet. 11. Carry out the Individual Support Plan goals and objectives during the stay, as requested by the Consumer/family.

ATTENDANT CARE (ATC) Service Description - This service provides a qualified individual to provide needed services in order that the Consumer may remain in his/her home or participate in work/community. Service Goal – This service is intended to assist an individual to attain or maintain safe and sanitary living conditions and/or maintain personal cleanliness and activities of daily living. This service is intended to serve the person in their own home. Attendant Care is a combination of both Personal Care and Housekeeping – Chore/Homemaker Services. Attendant Care also includes carrying out and recording all tasks in conjunction with the Individual Service Plan (ISP) and submitting Progress Notes each pay period with Time sheets to your local Inspire office. Check off duties performed as established by the ISP and attend ISP meetings, if applicable.

HABILITATION (HAH/HA) Service Description - This service provides a variety of interventions such as rehabilitative therapies, special developmental skills, behavior intervention and sensorimotor development designed to maximize the functioning of persons with developmental disabilities. Service Goal - To enable individuals to acquire knowledge and skills. To increase or maintain self-sufficiency of eligible individuals. To provide training/assistance in essential activities required to meet personal, physical and social needs. To maintain the health and safety of eligible individuals. To provide services in a manner which supports and enhances independence, self esteem, mutual respect, value and dignity. Generally speaking this service is to occur in the home of the Consumer, their own bank, their own post office, etc. and should not occur in the home of the DSP. Habilitation can provide instruction in the following areas: A) the use of alternative and/or adaptive communication skills B) activities related to routine household maintenance C) food and nutrition D) care of clothing E) household budgeting F) consumer education G) personal grooming, hygiene and dressing. Inspire habilitation can plan or provide training in H) toileting skills I) eating and/or drinking functions J) first aid treatment, recognition of symptoms of illness, and prevention of accidents and illness K) physical exercise and conditioning and/or body movements and facial expressions L) social skills and self-concept development M) memory and organizational skills, sequential thinking, planning, problem-solving and decision making N) Carry out recommendations of a qualified health professional. O) Provide training in special developmental skills P) Provide training in sensorimotor development Q) Other areas as requested by the case manager. Provide assistance to supervisory and administrative staff in the development of service policies, methodologies and service programs such as identifying strengths and needs and participate in the ISP process. Record data on objectives each day habilitation takes place. Submit Progress Notes with Time sheets to your local Inspire office. Attend meetings as requested for input to ISP.