

Always Care of Georgia Inc. d/b/a Always-Care Nursing Service [ACNS]

PO Box 52248, Atlanta GA 30355-0248 Voice:404 266-8773 [800-989-7828]
Main FAX: 404-233-8098 [800-989-8098]

Form 1144G-PCA-OTC R010610
© 2010 Always Care USA Inc.

PCA - Certification of Companionship Exemption Under the Fair Labor Standards Act (FSLA)

PCA - List All Clients & Hours {Same as on Time Slips, Rounded to Nearest 1/4 Hour} worked for

this Week Ending Friday (W/E) Date: ___/___/___ ACNS (PCA) Employee # _ _ _ _ _

Name: _____ Hours: _____ Name: _____ Hours: _____

Name: _____ Hours: _____ Total Hours this week for ALL Clients: _____

Employee Name (Print): (L) _____, (F) _____, (MI) _____

** READ ME ** Always Care Nursing Service [ACNS] Policies [A, B, C] & Frequently Asked Questions [Q1-Q9] **

- A. Effective Saturday 07/14/07 for Week Ending Friday 07/20/07 and thereafter - ACNS will not pay overtime...
B. HOURLY PCA's will not provide "companionship services" which include household work...
C. This policy and certification requirements, does not apply to any Always Care employee working as: Licensed Nurses [RN/LPN], Hourly Home Managers [HM], Companion/Sitters [CP], Well Baby Sitters [BS], Mother Helpers [MH] or Non Licensed Live-In's. { For More Information - See the FAQ's Below }
Q1. To whom do these Always Care Policies and Procedures apply to?
A: Only Personal Care Assistants (PCA's) who work more than 40 Hours Per Week (Sat. to Friday).
Q2. Is this more than 40+ Hours for each client?
A: No - It is the TOTAL hours worked for ALL Always Care Clients that PCA works for each week.
Q3. When must the PCA Certification Form be submitted?
A: If PCA works 40+ Hours, Certification Form Must Be Submitted with your Time Slips for that Week.
Q4. Do I need a form for each client?
A: No - Only one certification form is needed from each PCA per week who works over 40 hours.
Q5. May I FAX the Certification Form, and Time Slips?
A: Yes - A Faxed Copy of the Certification will be OK. If PCA is on a case that uses the new Time Slip FAX Copy it is only Time Slip needed. If AC case must use the 3 part Time Slip, OK to FAX, but the White & Yellow copies must be received in the ACNS Office before the PCA's check can be released.
Q6. What if I submit some time slips and not others?
Q7. What if I work more than 40 hours and do not submit this {Certification} form?
Q8. What if I forget to initial either statement below, and/or forget to sign the certification form?
Q9. What if I fail to submit important and necessary information on time, will I get my paycheck as normal?
A. Answers to Questions, 6, 7, 8, and 9 Above. Unfortunately, ACNS NEEDS ALL of your Time Slips, and the Properly Completed Certification Form, including your initials in the appropriate area, and with your signature, BEFORE ACNS CAN CORRECTLY DETERMINE YOUR WEEKS PAY! Therefore, if any necessary information is missing, it will be necessary to delay the processing of your pay, until the next pay period after we receive all necessary and correct information needed from you {Time Slips & Certification Form}.

I certify that in the course of providing companionship services to the care of the aged or infirm persons to whom I was assigned, such a meal preparation, bed making and washing of clothes. I HAVE NOT spent more than 20 percent of my total weekly hours worked during the above noted ACNS work week, performing general household work not directly related to the care of the aged or infirm person.

In the course of providing companionship services I certify that I HAVE performed general household work not directly related to the care of the aged or infirm persons exceeding 20 percent of the total weekly hours worked during the above noted ACNS work week, and that I was given permission to do so, in advance, by the ACNS

Nurse Supervisor listed below:

(ACNS Nurse Supervisor Name) _____, on (Date) ___/___/___, at (Time) _____

(Employee Signature) X _____ Reviewed by ACNS: (Initials) _____