Client Handbook

Acts of Service Home Care LLC

Hockley, TX 77447

NON-MEDICAL PERSONAL ASSISTANCE SERVICES

Effective: January 2025

Revised: September 19, 2026

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Keep this handbook where you and your authorized support person can find it. For questions, call 346-200-9886.

Home Care Agency Introduction

Welcome to Acts of Service Home Care LLC. We provide non-medical personal assistance services that support daily living, personal choice and independence. Our agency is licensed in the State of Texas and is located in Hockley, TX 77447.

We work with you and, with your permission, your family or legally authorized representative to identify the support you need. Before services begin, we determine whether our staff and resources can safely meet your needs. Your individualized service plan describes the tasks, schedule and supervision agreed upon.

Caregivers assist with approved daily activities and report concerns to the agency. Our services do not replace your physician, emergency medical services or separately arranged skilled health care. We do not diagnose illnesses, prescribe treatment or change medications.

We communicate with you and people you authorize, or your legally authorized representative, as permitted by law. You may ask questions, request changes or raise concerns at any time.

Business Location and Contacts
Acts of Service Home Care LLC
Hockley, TX 77447
Office: 346-200-9886
After hours: 346-645-0447 or 936-419-2078
Email: info@actsofservicehomecare.com

Office hours: Monday-Friday, 9:00 AM-4:00 PM.
Administrator: Chauntevia Nicholson
Alternate Administrator: Nicole Solis, RN
For emergencies or immediate danger, call 911.

Company Hours of Operation

Monday-Friday: 9:00 AM-4:00 PM
Saturday and Sunday: Office closed.

Office hours describe when routine office business is conducted. Your approved service schedule is stated in your individualized service plan. Do not assume that office closure cancels an agreed visit, or that an after-hours contact number guarantees an unscheduled visit.

For a scheduling problem, missed visit or concern outside office hours, call **346-645-0447** or **936-419-2078**. If you cannot reach one number, try the other and use your agreed backup plan when needed. For a medical emergency, call 911 first.

Home Care Services
Services may include personal care, mobility assistance, meal preparation, light housekeeping, companionship and respite support. Specific tasks are provided only when included in your agreed service plan and within staff competence and the agency's service scope.

Appointment accompaniment: Staff may accompany you and your family to appointments Monday-Friday, 9:00 AM-4:00 PM. Your family arranges transportation. We do not currently transport clients in staff personal vehicles. Contact the office in advance to coordinate the visit and any applicable charges.

Notify the office as soon as possible about a schedule change or cancellation. Cancellation terms, minimum visits and any associated charges must be disclosed in your written service agreement.

Business Licensing and Service Scope

Acts of Service Home Care LLC is licensed in the State of Texas. Information about our license is available from the office upon request. This handbook does not claim independent accreditation.

Non-medical personal assistance
We help with daily activities identified in your individualized service plan. We explain which needs we can meet before accepting you for services. If your needs change beyond our available services or staff capabilities, we discuss appropriate arrangements with you.

Medication reminders and assistance
A reminder prompts you to take your own medication as directed by your prescriber. Assistance with self-administration is provided only when permitted, specifically assessed and authorized in your plan, and within staff training and applicable rules. Staff do not independently choose medicines, decide doses, change directions or make clinical judgments.

This handbook does not authorize medication administration or other delegated health-related tasks. Such tasks require a separate assessment and all applicable nursing, delegation, training, documentation and supervision requirements before they can be accepted or performed. Ask the office whether a requested task is available.

Specialized and additional services
A diagnosis such as dementia, diabetes or Parkinson's disease does not mean that medical treatment or a specialized program is included. We assess the actual assistance needed and assign staff with appropriate competence. Pet or plant care, shopping, errands and exercise assistance are not automatically included; the office must approve the task and record any agreed limits in the service plan.

Caregivers may not add services or change the plan on their own. Contact the office to request additional assistance.

Client Rights and Responsibilities

Before services begin, we explain your rights and responsibilities in a way you can understand, offer help exercising them, and document that explanation and your understanding. Ask for assistance with language, communication or accessibility needs.

You have the right to:
- Respect, dignity, privacy and consideration for your person, property, culture and individual needs.
- Be free from abuse, neglect, exploitation, discrimination and retaliation.
- Confidential treatment of your personal and health records.
- Advance information about proposed services, expected outcomes, limitations, barriers and changes.
- Participate in planning services and changes, give informed consent, and refuse care or services.
- Learn before services begin what you, a payer or another funding source is expected to pay.
- Ask questions, receive help understanding your rights, and request a caregiver change.
- Voice concerns about care provided, care not provided or disrespect for property, and contact HHSC directly without reprisal.

Your legally authorized representative may exercise rights to the extent permitted by law. Written consent specifying the services is obtained from you or your authorized representative before service delivery. A request for a different caregiver is reviewed with you; a particular worker cannot be guaranteed.

Your responsibilities: Provide accurate information about your needs, preferences and safety concerns; tell us about important changes; treat staff respectfully; help maintain a safe place for agreed services; notify the office about schedule changes; and meet the payment terms you agreed to. Discuss any part of the plan you do not want or cannot follow.

These responsibilities do not limit your right to refuse services or complain. Your complaint does not have to be submitted internally before you contact HHSC. See page 14 for contacts and procedures, and page 16 for additional rights of clients age 60 or older.

Reference: 26 TAC 558.282; Texas Human Resources Code Chapter 102.

Payment and Billing

Rates are discussed directly with each client. No prices are quoted in this handbook. Before services begin, we discuss your services, applicable charges, payment terms and expected sources of payment with you. The agreed charges and terms are documented in your written service agreement, and you receive a copy. Ask questions before agreeing to services or charges you do not understand.

Your written agreement and rate schedule identify:
- Service rates, billing frequency and payment due dates.
- Accepted payment methods and any required authorization for automatic payments.
- Minimum visit lengths, deposits and how any deposit is applied or refunded.
- Cancellation, rescheduling, missed-visit and refund terms.
- Any holiday, overtime, accompaniment, mileage, late-payment or payment-processing charges that actually apply.
- Your responsibility when a payer denies or limits coverage, as disclosed and permitted by law.

An item listed above is not a charge simply because it appears in this handbook. Applicable amounts and terms must be disclosed in your agreement before they are applied. We explain changes affecting your services or charges in advance and obtain required agreement or consent.

Insurance and public benefits
Acts of Service Home Care does not currently accept Medicaid. Accepted payment arrangements are discussed directly with you and identified in your service agreement. This handbook does not represent that the agency participates in Medicare or any particular insurance plan.

Original Medicare does not pay for stand-alone custodial or personal care when that is the only care needed. Any private insurance, long-term care insurance or Medicare Advantage payment arrangement must be confirmed with the office and payer before services begin. Eligibility, covered benefits, provider participation and any required authorization vary; coverage or reimbursement is not guaranteed.

We provide an itemized invoice showing services and charges. For a question or disputed charge, contact 346-200-9886 or info@actsofservicehomecare.com. Billing concerns may also be raised through the grievance process on page 14.

References: 26 TAC 558.292; Medicare home health coverage.

Home Care Services

Your individualized service plan determines which services you receive. Tasks must match your preferences, assessed needs, safe working conditions and the competence of the assigned caregiver.

Personal care: Agreed assistance with bathing, dressing, grooming, toileting, eating and other daily activities, with attention to privacy and dignity.

Mobility: Agreed help with positioning, transfers and walking using the methods and equipment identified in your plan. Tell us about falls, new weakness, equipment problems or a change in the help you need. Staff must not attempt an unsafe transfer or use unfamiliar equipment.

Companionship and respite: Conversation, social interaction and agreed supervision or support while a usual caregiver takes a break. The plan states the schedule and assistance to be provided.

Homemaking: Agreed meal preparation, laundry and light housekeeping related to your needs. Tell us about allergies, food preferences and prescribed dietary restrictions. Caregivers do not prescribe diets or medical treatment.

Medication support: Reminders or permitted assistance with self-administration only as described on page 5 and in your service plan. Direct medication questions or suspected adverse effects to the appropriate health professional; call 911 for an emergency.

Appointment accompaniment: We may accompany you and your family during working hours, Monday-Friday, 9:00 AM-4:00 PM. The family arranges transportation. Staff personal vehicles are not used to transport clients. Confirm scheduling, mobility assistance and any charges with the office beforehand.

Caregivers report changes or unmet needs to the supervisor. Services outside the agreed plan require office review. You may refuse any task and discuss alternatives with the agency.

Care Plan Development

For personal assistance services, your care plan is called an **individualized service plan (ISP)**. It is based on a supervisor's on-site visit where services will primarily be delivered. This review determines your assistance needs and whether the agency can meet them; it is not a substitute for a medical evaluation.

The plan records:
- The services, tasks, supplies and equipment to be provided.
- Where services will be delivered.
- The frequency and duration of visits and planned start date.
- Applicable charges paid by you or another responsible person, or charges on request.
- How services and staff will be supervised.

We develop the plan with you and appropriate authorized participants. The client or family and the agency agree to and sign the ISP, with representative authority confirmed where relevant. We obtain the client's or legally authorized representative's separate informed consent for services as required.

The written service agreement explains the services, supervision, rights, charges and complaint process. Admission information also addresses advance directives, emergency contacts, backup arrangements and privacy authorizations. You receive the applicable documents and explanations before services start.

Keeping your plan current
Tell us about changes in mobility, memory, medications, daily activities, household conditions or available support. The supervisor reviews the need for reassessment or changes. We consult you or your authorized representative before changing services and document the agreed plan.

Caregivers document the services delivered and significant concerns. The agency reviews service delivery and supervision needs, including your feedback. Family members receive information only with your authorization or another lawful basis.

References: 26 TAC 558.404(f)-(g), 558.282 and 558.292.

Caregiver Selection and Training

We select and assign caregivers based on the duties to be performed, applicable qualifications and demonstrated ability to provide the assistance identified in your plan.

Screening

The agency completes required employment, criminal-history and applicable registry checks in accordance with Texas requirements. Screening and personnel records are maintained by the agency. No caregiver is assigned tasks solely because the caregiver has previously held a health care job.

Orientation and competence

Staff receive orientation to agency policies, client rights, confidentiality, reporting concerns, infection prevention, emergency procedures and their assigned responsibilities. The agency evaluates task competence and provides instruction and supervision appropriate to the work.

Additional skills are assessed before a caregiver is assigned a task that requires them. A client's diagnosis does not by itself establish that a caregiver has specialized certification. Ask the office about the training relevant to your particular needs.

Professional boundaries

Caregivers follow the agreed service plan and report concerns to the supervisor. They must not independently change medication instructions, provide medical advice beyond their role, borrow money, use client property for personal benefit or pressure clients into gifts or financial arrangements.

Please report a concern about staff behavior, competence or safety to the Administrator or Alternate Administrator. You may request a change in caregiver without retaliation. We discuss available arrangements with you.

Supervision

A qualified agency supervisor oversees services according to the supervision plan and applicable rules. This handbook does not promise routine RN supervision. If a separately approved task requires nursing involvement or delegation, the necessary nursing oversight must be arranged before the task begins.

References: 26 TAC 558.245 and 558.404; applicable Texas background-check and registry requirements.

Communication and Reporting

Contact the office at **346-200-9886** during Monday-Friday, 9:00 AM-4:00 PM. After hours, call **346-645-0447** or **936-419-2078**. Routine written questions may be emailed to **info@actsofservicehomecare.com**. Email is not an emergency response service.

Tell us promptly about changes in your condition, a fall, new safety concerns, dissatisfaction with services or a caregiver who has not arrived. Caregivers report significant observations to the supervisor and record services provided. A concerning symptom may require your health professional or emergency medical services.

Privacy and authorized contacts
We protect personal and health information and share it only as authorized or otherwise permitted or required by law. Family relationship alone does not automatically authorize routine updates or access to records.

You may identify the people with whom we may discuss your services and the information we may share. Tell the office if you wish to change or withdraw an authorization. A legally authorized representative may act within the limits of that authority. Required reporting and other lawful disclosures are not prevented by withdrawal of an authorization.

To request access to your records, ask for a correction, discuss a privacy concern or request applicable privacy notices, contact the Administrator or Alternate Administrator. We explain the process, verify identity and authority, and respond under applicable requirements. Avoid including unnecessary sensitive information in ordinary email.

Caregiver continuity and missed visits
We try to maintain consistent assignments. When a worker cannot attend, the office contacts you about available qualified replacement staff and agreed backup arrangements. We cannot guarantee a particular worker or immediate replacement in every situation. We will explain any service interruption and coordinate the next steps with you.

If a missed visit puts your immediate health or safety at risk, use your emergency plan and call 911 when appropriate. Do not wait for an email response.

Client Safety and Emergencies

For a medical emergency or immediate danger, call 911. Examples include severe breathing difficulty, suspected stroke, chest pain, uncontrolled bleeding or loss of consciousness. Follow dispatcher instructions. Contact the agency after emergency help is requested when it is safe to do so.

Our caregivers provide assistance within their training and role, notify appropriate help, and report the event to the agency. This handbook does not promise that every caregiver holds CPR/AED certification or that the agency provides a monitored emergency-response device.

Home safety
Work with us to keep pathways and work areas safe. Tell the office about transfer hazards, falls, unsafe equipment, smoking or oxygen hazards, aggressive pets, weapons or threats. Staff report unsafe conditions and seek supervisor assistance before attempting unsafe tasks.

Infection prevention
Staff follow applicable hand hygiene, standard precautions and protective-equipment procedures. Tell us about symptoms of contagious illness or a diagnosed infection so we can plan services safely. Discuss needed supplies and protective measures with the office.

Abuse, neglect and exploitation
You have the right to be free from mistreatment and misuse of your money or property. Report concerns immediately to the Administrator or Alternate Administrator or directly to HHSC at 1-800-458-9858. You do not have to confront the person involved or prove the allegation before raising a concern.

The agency takes prompt steps to protect clients, investigates allegations and makes required reports. Staff, volunteers and contractors may not retaliate against a person who raises a concern or provides information in good faith. See page 14 for the investigation and reporting process.

A personal emergency response device, if you independently obtain one, does not replace calling 911 or having an agreed emergency and backup plan.

Emergency Planning and Advance Directives

Your individualized emergency and backup arrangements

At admission, we discuss who to contact and how essential needs will be addressed if a visit is interrupted. Keep a current copy of your plan accessible. Include your preferred contact and alternate, important health contacts, essential assistance, mobility/equipment needs, and the people or services able to help.

Plan with your household for severe weather, power loss, flooding and evacuation or sheltering. Discuss transportation arrangements with your family or local emergency resources; the agency does not provide client transportation in staff personal vehicles. Identify medications, supplies, food, water, communication methods and power-dependent equipment needs with the appropriate health professionals.

Tell the office if you may need evacuation assistance. We will discuss available local resources and assist with applicable emergency-assistance registration when requested and required. Registration is not a guarantee of rescue or transportation. Follow local emergency instructions and call 911 for immediate danger.

If travel or conditions become unsafe, the agency will communicate service changes as practicable and coordinate the agreed backup arrangements. We do not guarantee uninterrupted visits during a disaster. Notify us when your location or emergency contacts change.

Advance directives

You may obtain information about a medical power of attorney, directive to physicians, and an out-of-hospital do-not-resuscitate order under Texas law. Ask your health professional about their purpose and requirements. Give the agency copies of applicable documents and tell us about changes or a designated decision-maker.

An advance directive is not required to receive our services. Staff follow applicable law, agency procedures and valid documents within their role; they do not interpret unclear medical instructions independently. Emergency medical decisions should be addressed with the appropriate health professional or emergency responders.

References: 26 TAC 558.256, 558.290 and 558.292; Texas Health and Safety Code Chapter 166.

Complaints and Grievances

You may complain about services, staff, billing, safety or respect for property without discrimination or retaliation. You may contact HHSC directly at any time; you need not complete our internal process first.

Internal process: Contact Chauntevia Nicholson, Administrator, or Nicole Solis, RN, Alternate Administrator.
Office: 346-200-9886 | Monday-Friday, 9:00 AM-4:00 PM
After hours: 346-645-0447 or 936-419-2078
Email: info@actsofservicehomecare.com
Agency: Acts of Service Home Care LLC, Hockley, TX 77447

Complaints may be verbal, written, anonymous or submitted by someone assisting you. No special form is required. Describe the concern and, if you choose, how to reach you. Staff can help you communicate a complaint. If your concern involves one administrator, you may contact the other or HHSC directly.

Investigation: We respond promptly, document receipt and begin investigating within 10 calendar days after receipt. We document all parts of the investigation and complete it and its documentation within 30 calendar days unless reasonable cause for delay is documented. We explain the outcome and corrective action when completed. If delayed, we provide the reason and expected completion date when contact information is available.

HHSC Complaint and Incident Intake
Phone: 1-800-458-9858 (home health/PAS complaint option)
Email: ciicomplaints@hhs.texas.gov
Mail: Texas Health and Human Services Commission, Complaint and Incident Intake, P.O. Box 149030, Austin, TX 78714-9030.
Online: HHSC: How Do I Make a Complaint about an HHS Service Provider?
On a printed copy, visit hhs.texas.gov and search that page title.

Abuse, neglect or exploitation (ANE): Allegations involving agency employees, volunteers or contractors are investigated immediately upon witnessing an act or receiving an allegation. When the agency has cause to believe ANE occurred, required reporting to HHSC is immediate, within 24 hours; the provider investigation report is due no later than the 10th day after reporting. The grievance process does not delay these duties. **Call 911 for immediate danger or a medical emergency.**

References: 26 TAC 558.249, 558.250 and 558.282; HHSC HCSSA ANE reporting guidance.

Termination or Transfer of Services

You may refuse services or request that services end. Please contact the office as soon as possible; 24 hours' notice is requested when practical to coordinate staffing. This request does not restrict your right to refuse care. Any cancellation charge must be disclosed in your agreement and permitted by law.

The agency discusses service concerns and reasonable solutions with you before an agency-initiated discharge when circumstances permit. Reasons may include needs that cannot be met safely, services no longer needed, serious safety risks, cessation of agency services or nonpayment after appropriate notices. Complaining or exercising your rights is not a reason for retaliation or discharge.

Ordinary notice
For an agency-initiated transfer or discharge, we deliver written notice by hand or mail at least five days before the effective date and notify an attending physician or practitioner involved in your agency care. If mailed, notice is sent at least eight working days beforehand, and we speak with you by phone or in person at least five days beforehand to confirm awareness.

The notice explains the reason, effective date and available transition arrangements. We document required notice, contacts and practitioner notification in your record and coordinate information with a receiving provider as authorized or required.

Exceptions to advance notice
26 TAC 558.295(e) permits exceptions for a client request, medical transfer need, a disaster threatening safety, staff/client protection after documented reasonable notification efforts, physician orders, or nonpayment except where federal law prohibits it. An exception is applied only when its conditions are met and documented; an ordinary disagreement or complaint is not automatically a safety emergency.

For clients age 60 or older, the agency also observes the discharge protections in Texas Human Resources Code Chapter 102. Nonpayment requires reasonable and appropriate notices; discharge must have a lawful basis. Any additional applicable payer or legal protections are honored.

Message of Appreciation
Thank you for allowing Acts of Service Home Care to support you. We aim to handle changes and transitions with respect for your choices, dignity and continuity of care.

References: 26 TAC 558.295; Texas Human Resources Code 102.003.

Additional Rights of Clients Age 60 or Older

Texas Human Resources Code Chapter 102 protects adults age 60 or older. The following summary supplements the rights on page 6; it does not limit the full law. Ask the office for a copy and help understanding your rights.

You retain civil rights without coercion or reprisal; dignity and nondiscriminatory treatment; personal choice; freedom from abuse, neglect, exploitation and improper restraint; and the ability to communicate in your native language. We do not use restraints for discipline or convenience.

You may complain anonymously or through someone you choose and receive a prompt response without punishment. You retain privacy in personal care, communications, mail and visits; social, religious and community participation; personal possessions; and the right to refuse work for a service provider.

You may manage your finances or choose lawful assistance, obtain relevant financial accounting, and access confidential personal and clinical records. You may choose a physician, receive understandable information about your condition and care, participate in care planning and refuse treatment with the required explanation and acknowledgment of consequences.

You may make advance directives, appoint a medical decision-maker and designate a guardian in advance of need. Within 30 days of admission, applicable Medicare/Medicaid eligibility and covered-service information must be explained, including services for which you may not be charged. This rights notice does not guarantee benefits or agency participation. Acts of Service Home Care does not currently accept Medicaid.

Transfer or discharge must rest on a lawful basis, such as unmet needs, improvement, health/safety risks, provider closure or program withdrawal, or nonpayment after reasonable notices. The statute has additional residential-facility provisions; our non-medical home services are not residential placement.

The agency provides the full applicable rights notice and records receipt for clients age 60 or older. If you believe a right has been denied, contact the Administrator or Alternate Administrator or use the HHSC complaint options on page 14.

Read the full Texas Human Resources Code Chapter 102. The office can provide a printed copy.

Closing Statement and Handbook Receipt

Thank you for choosing Acts of Service Home Care. Your signed service agreement and individualized service plan describe your services and charges. We explain changes before they affect services and obtain required consent. Nothing in this handbook limits your legal rights.

Administrator: Chauntevia Nicholson
Alternate Administrator: Nicole Solis, RN
Company: Acts of Service Home Care
Location: Hockley, TX 77447

Acknowledge receipt by email
Please reply to the email that delivered this handbook. Send your reply to **info@actsofservicehomecare.com**. Include the client's name, the date received and, if someone replies for the client, that person's name and relationship or authority.

You may use this wording:

"I acknowledge receipt of the Acts of Service Home Care Client Handbook, effective January 2025, revised September 19, 2026, including information on client rights and responsibilities, grievances, service scope, payment disclosures, safety and advance directives.

Client name: _____
Date received: _____
Name of person replying: _____
Relationship/authority, if applicable: _____"

The agency retains the acknowledgment email in the client record. If you need help replying or cannot use email, contact the office so staff can assist and document receipt through an accessible method.

Receipt does not waive your rights or replace separate consent to services, the signed service agreement, the individualized service plan or other required acknowledgments. We explain your rights and document understanding separately. Ask us about any document you have not received or do not understand.

Office: 346-200-9886
After hours: 346-645-0447 or 936-419-2078