



URGENT

Dear Clients,

The Department of Mental Health and Hygiene requires all personal care agencies to have an advance directive in client's file. The agency is also required to keep a current plan of care visible in the client's home. This folder consists of an advance directive, current plan of care, client handbook, staff contact information, ISAS instructions, and missing time form. Please keep the folder in an accessible place in case of an emergency. Convenient locations maybe on top of the refrigerator, specified cabinet or drawer, any place in the home where it can be accessed by an employee. Do not keep folder where you keep valuables, money or important documents.

Please review advance directives. Discuss options and decisions with family and friends. The directives must have client's signature and one witness signature. The witness must provide printed name address and phone number. Please return document to the office immediately. We must have original signatures. Please mail advance directive back to the office or we can schedule for a staff member to pick it up. If we do not receive document services maybe interrupted. If you wish not to delegate Advance Directives at this time, please sign form declining to sign. We cannot provide services if we are out of compliance with state's regulation. Please complete form and return document. If you have any questions, please call 301-341-2273.

Thank you,

Office Staff

P.O BOX 6028
Largo, Maryland 20792
Phone: (301)-341-2273 Fax: (301)-341-2274

Community Health Care, Inc.
Communityhealthcareinc.com



I _____, received Advance Directives from Community Health Care Inc.

_____, I am declining to sign .

Date _____

Signature _____

P.O BOX 6028
Largo, Maryland 20792
Phone: (301)-341-2273 Fax: (301)-341-2274