Sr M Warnes

BUFF: Pr 8838909



Medical Service / Nursing Service - Retirement Village.

These are the services that will be done by us.

1.Clinic

Half day 1 x Nursing Sister(5 days morning 8-1 pm and 0ne full day , 11h00- 18h00 for the residents who are still employed.)

2. 24 hr. Caregivers (staff nurses or Enrolled Nursing Assistants) optional.

Recommends 24 hr. basic healthcare care in the estate, due to your high risk cases.

(It will be ensured that the carers can do Cardio Pulmonary Resuscitation and Diabetes Management, the caregiver can call the ambulance or Sr on call for 1st assessment.).

Sr on standby (to be reassessed after 6 months only) Sr Warnes/relief will be on standby until such time that you have more residents.

Objective.

To ensure daily nursing care and nursing safety; meaning, are you up and active.

Duties.

To have a clinic from 8 until 13h00 daily a week and one clinic from 10h00 pm-18h00 for the working residents.(to be assessed)

To have staff (carers) there day and night with the Nursing Sr on standby after 1 pm daily.

To increase the service as the retirement complex grows = increase costs, but since the levy is based on a sliding scale for every ten houses build, the price will be adjusted.

Please note, that you will have an annual increase, but as the complex is build and developed your medical levy will be reduced and be set at approximately R375.00 per1 person unit and 2 persons, household R500.00. There is a reduction of R125.00 per two person's unit. (can be discussed) Please note, this option is only for the independent living option.

All assessments will be done by the Sister before admission to HCRE. (she will be able to recommend whether the comorbidities in conjunction with a resident's age and illness, will allow independent care to the sales persons. (recommendation)

We work on a projected independence for 5 years from moving into HCRE

A full medical /nursing assessment is to be done once per annum, depending on the risk of a resident. If the resident is high risk, more (2 official nursing assessments) will be done, but regular care will be given.

Example, if you are known to be a diabetic then random glucose tests will be done and if you suffer from hypertension, then you will be monitored .All this is to make sure that your medication works and also to prevent complications.

Certain referrals and recommendations can be done.

Liaison with your Doctor can be done, if you agree.

Confidentiality is of outmost importance.

To ensure immediate basic nursing care e.g. first aid or safety and to call the emergency care and transport to the nearest hospital if needed. (also the 24-hour caregiver/Nurse)

We have an agreement with Meditech ambulance services for the immediate stabilization of patients at a negotiated price of R350.00 for the client's cost. (your medical aid will not cover this cost.

A negotiated price transport from the hospital or to hospital.

If you are on a Medical Aid, then your Medical Aid will be charged, if you have the option available.

To ensure that no person becomes isolated and lonely, due to depression and or other reasons.

To encourage social activities among the residents e.g. social evening, talks and walks egg health and social, exercises, movies and tea mornings, knitting etc.

To encourage that a library is started and managed by one **willing** resident.

Daily rounds will be done by the clinic caregiver to see that the residents are up and about and their conditions are satisfactory. The clinic will be a certain number of hours and the Sister will do visits to the not so good residents first, then to the well residents.

To check that residents are healthy and safe. (caregivers)If they have to see that a resident takes her or his tablets and or eat, then they are there for that purpose.

Some people forget to drink and so many problems can start that way?

Urinary tract infections and dehydration and a common one is confusion.

Research and observation has shown that older people land up in hospital, often with dehydration, which can lead to many other illnesses.

The caregivers will report to the Sister, whom will then go and see "concerned cases"

Post hospitalization care:

Three days intermittent if the person needs continuous care
This will come out of your levy, but three days only. Always get
a letter from your Doctor. You might need extended homecare,
then Sr Warnes will apply for preauthorization from your
medical aid and supply staff under supervision. (This is
independent)

Should you need to extend the service, it will be seen as private and will be for the resident's costs.

A separate contract will be signed and it will be seen as private.

This service is to be paid by the resident and then the resident will claim the reimbursement back from the Medical Aid.

This will be treated under my Private Nursing Practitioners practice.

This will be a separate service and supervised by the Sr. on duty.

By having the company's caregivers, you will have control as they will be monitored.

Costs.

Medical levy monthly. <u>R 500</u> plus VAT per 2 persons' household and R375.00 plus VAT per one person household. (according to our agreement) (refer to sliding scale and economics) these are for independent living only.

Please note, an annual increase according to the then present interest rate (as at Jan 1 of each year) is charged.

I hope this meet with your approval.

This will cover the basic clinic requirements e.g.

- 1. Staff costs/Professional costs
- 2. Bp monitoring, temperature, oxygen.
- 3. Urine tests, IF MORE THAN ONCE, THEN YOU PAY FOR OTHERS.
- 4. Basic general Nursing assessment per annum. Please note the annual assessment is done according to the medical risk of the resident. E.g. It might be requested twice or three times.
- 5. Glucose test/ IF You need this regularly, then you will have to supply your own stock.
- 6 .Nebulization with your own medicine.

- 7. Neurobion (prescription needed according to new government pharmacy rules) or other vitamin injections (supplied by resident) and kept by yourself in your fridge.
- 8. Other intramuscular injections as prescribed by the resident's doctor. (you can get the prescriptions and it will be given to you.) Please note, your surgical items are also requested, otherwise we will charge for the swab, syringe and needles.
- 9 .Dressings, basic from clinic supply. Please note if the dressings are very frequent, then it will be at a cost of R59.20 per dressing.
- 10. Big and complexed dressings, the resident supply/or you will have to pay for the stock. (or your medical aid)

If it's very complicated then we will refer you to a wound care specialist, but for your costs.

10 Prepacking of your medicine.

There is a specific rate included.

Should you need any further information or clarity, please do not hesitate to contact me.

Sr/Mrs. M Warnes. Pr. 8838909

Email:marjoriewarnes@gmail.com

Sr M Warnes

BUFF: Pr 8838909



Medical Service / Nursing Service - Retirement Village.

These are the services that will be done by us.

1.Clinic

Half day 1 x Nursing Sister(5 days morning 8-1 pm and 0ne full day , 11h00- 18h00 for the residents who are still employed.)

2. 24 hr. Caregivers (staff nurses or Enrolled Nursing Assistants) optional.

Recommends 24 hr. basic healthcare care in the estate, due to your high risk cases.

(It will be ensured that the carers can do Cardio Pulmonary Resuscitation and Diabetes Management, the caregiver can call the ambulance or Sr on call for 1st assessment.).

Sr on standby (to be reassessed after 6 months only) Sr Warnes/relief will be on standby until such time that you have more residents.

Objective.

To ensure daily nursing care and nursing safety; meaning, are you up and active.

Duties.

To have a clinic from 8 until 13h00 daily a week and one clinic from 10h00 pm-18h00 for the working residents.(to be assessed)

To have staff (carers) there day and night with the Nursing Sr on standby after 1 pm daily.

To increase the service as the retirement complex grows = increase costs, but since the levy is based on a sliding scale for every ten houses build, the price will be adjusted.

Please note, that you will have an annual increase, but as the complex is build and developed your medical levy will be reduced and be set at approximately R375.00 per1 person unit and 2 persons, household R500.00. There is a reduction of R125.00 per two person's unit. (can be discussed) Please note, this option is only for the independent living option.

All assessments will be done by the Sister before admission to HCRE. (she will be able to recommend whether the comorbidities in conjunction with a resident's age and illness, will allow independent care to the sales persons. (recommendation)

We work on a projected independence for 5 years from moving into HCRE

A full medical /nursing assessment is to be done once per annum, depending on the risk of a resident. If the resident is high risk, more (2 official nursing assessments) will be done, but regular care will be given.

Example, if you are known to be a diabetic then random glucose tests will be done and if you suffer from hypertension, then you will be monitored .All this is to make sure that your medication works and also to prevent complications.

Certain referrals and recommendations can be done.

Liaison with your Doctor can be done, if you agree.

Confidentiality is of outmost importance.

To ensure immediate basic nursing care e.g. first aid or safety and to call the emergency care and transport to the nearest hospital if needed. (also the 24-hour caregiver/Nurse)

We have an agreement with Meditech ambulance services for the immediate stabilization of patients at a negotiated price of R350.00 for the client's cost. (your medical aid will not cover this cost.

A negotiated price transport from the hospital or to hospital.

If you are on a Medical Aid, then your Medical Aid will be charged, if you have the option available.

To ensure that no person becomes isolated and lonely, due to depression and or other reasons.

To encourage social activities among the residents e.g. social evening, talks and walks egg health and social, exercises, movies and tea mornings, knitting etc.

To encourage that a library is started and managed by one **willing** resident.

Daily rounds will be done by the clinic caregiver to see that the residents are up and about and their conditions are satisfactory. The clinic will be a certain number of hours and the Sister will do visits to the not so good residents first, then to the well residents.

To check that residents are healthy and safe. (caregivers) If they have to see that a resident takes her or his tablets and or eat, then they are there for that purpose.

Some people forget to drink and so many problems can start that way?

Urinary tract infections and dehydration and a common one is confusion.

Research and observation has shown that older people land up in hospital, often with dehydration, which can lead to many other illnesses.

The caregivers will report to the Sister, whom will then go and see "concerned cases"

Post hospitalization care:

Three days intermittent if the person needs continuous care
This will come out of your levy, but three days only. Always get
a letter from your Doctor. You might need extended homecare,
then Sr Warnes will apply for preauthorization from your
medical aid and supply staff under supervision. (This is
independent)

Should you need to extend the service, it will be seen as private and will be for the resident's costs.

A separate contract will be signed and it will be seen as private.

This service is to be paid by the resident and then the resident will claim the reimbursement back from the Medical Aid.

This will be treated under my Private Nursing Practitioners practice.

This will be a separate service and supervised by the Sr. on duty.

By having the company's caregivers, you will have control as they will be monitored.

Costs.

Medical levy monthly. <u>R 500</u> plus VAT per 2 persons' household and R375.00 plus VAT per one person household. (according to our agreement) (refer to sliding scale and economics) these are for independent living only.

Please note, an annual increase according to the then present interest rate (as at Jan 1 of each year) is charged.

I hope this meet with your approval.

This will cover the basic clinic requirements e.g.

- 1. Staff costs/Professional costs
- 2. Bp monitoring, temperature, oxygen.
- 3. Urine tests, IF MORE THAN ONCE, THEN YOU PAY FOR OTHERS.
- 4. Basic general Nursing assessment per annum. Please note the annual assessment is done according to the medical risk of the resident. E.g. It might be requested twice or three times.
- 5. Glucose test/ IF You need this regularly, then you will have to supply your own stock.
- 6 .Nebulization with your own medicine.

- 7. Neurobion (prescription needed according to new government pharmacy rules) or other vitamin injections (supplied by resident) and kept by yourself in your fridge.
- 8. Other intramuscular injections as prescribed by the resident's doctor. (you can get the prescriptions and it will be given to you.) Please note, your surgical items are also requested, otherwise we will charge for the swab, syringe and needles.
- 9 .Dressings, basic from clinic supply. Please note if the dressings are very frequent, then it will be at a cost of R59.20 per dressing.
- 10. Big and complexed dressings, the resident supply/or you will have to pay for the stock. (or your medical aid)

If it's very complicated then we will refer you to a wound care specialist, but for your costs.

10 Prepacking of your medicine.

There is a specific rate included.

Should you need any further information or clarity, please do not hesitate to contact me.

Sr/Mrs. M Warnes. Pr. 8838909

Email:marjoriewarnes@gmail.com