For Office Use Space for patient label



Table A: List services

Please tick (v) which ever service is requested

Dr. Visit	
Physiotherapy	
Nursing	
Attendant	
Аауа	
All medical Equipment	

ADDRESS OF PLACE WHERE THE SERVICE(S) IS BE PROVIDED

Pin Code ______

Any land Mark Near the Location:

Patient's Clinical/ Medical Condition

(Please provide a brief background on the patient's clinical/medical condition at the time of filling this form as reason for why the home service(s) requested).

Signature of the Applicant

Registration request form / suhani critical care at home



REGISTRATION FORM

(Patient/Attendant should fill in this form in legible and BOLD letters)				
Patient Details				
Patient Name				
Father's/Husband's Name				
Age Years, Gender: Contact No.:				
Address:				
Request For Service(s)				
By the Patient:				
I, the above stated patient and self-Applicant suhani critical care at home to kindly provide me the				
Service(s) ticked by me in table A: list of services given in this form.				
OR				
By the patient's Next to kin/Friend:				
I, Mr/Ms/Mx				
S/D/W/o				
Related to the above stated patient as (Specify the relationship				
With the Patient), R/o.				
Contact No.: email:				
(Applicant) request subani critical care at home to kindly provide the service (s) ticked me in table A: list of services given in this form to the above stated patient.				

Registration Request Form suhani critical care at home

Signature of the Applicant



Terms and conditions

Upon successful registration with suhani critical care at home will provide a caregiver / caregivers (as defined below) of the requested service(s) to the patient under the following terms conditions:

1. Definitions: Under this homecare services of suhani critical care at home unless the context otherwise requires, the following expressions shall have the following meanings:

a. Client: Both patient and the Next to kin, who signs this Form will be considered as client to suhani critical care at home

b. Caregiver: The person who is assigned to by suhani critical care at home and who give the requisite service(s) as requested in the registration firm to the patient. A Caregiver will be:

- for Dr. visit service Doctor
- for Physiotherapy physiotherapist
- for nursing service Nurse (critical care)
- for general Patient care General Duty Assistant;
- for baby care Aaya
- for All medical Equipment (ICU Setup)

c. Contract: Upon receipt of a signed Registration Form a Client, suhani critical care at home shell evaluate the viability for providing the requested service(s) to the client. If suhani critical care at home chooses to enril / register a patient under suhani critical care at home services, an individual registration number shall be generated against the patient mentioned in the registration form and confirm the client of registration. Upon such registration a contract for the requested services shall be automatically created between the client and suhani critical care at home applying the terms and conditions of this registration form.

d. Contract Documents: Upon registration of a client under clause (c) above, all documents exchanged between the client and suhani critical care at home shall be considered as contract Documents, including but not limiting to this Registration form duly signed by the client, shift schedules and other documents that is exchanged in consequent to this registration form and its acceptance.

e. Contract Period: Shall be the agreed period for any service(s) requested by client and agreed to be provided by suhani critical care at home separately in consequent to this registration form and its acceptance and its renewal, if any.

f. location: Shall be the place of which address being provided in this Registration form for providing the service(s), or any modification there of per Clause 4.5 below.

g. Patient: Person for whom the home care service(s) are requested to be provided under this home care services of suhani critical care at home.

2. CERVICES PROVIDED: subani critical care at home agrees to provide a Caregiver / Caregivers to the patient for the requested service at requested location to the patient. These services will be provided for the hours and days requested by the client, dependent on staff availability. Changes to services may be initiated by the client or his/her authorized representative through a written communication to the care coordinator. Charges and minimum shift requirements shall be as per "Charges for Services".

Signature of the Applicant

Registration Request form/suhani critical care at home



3. DOTIES NOT PERFORMED:

The caregiver shall not be required to:

a. Neither act as a representative payee nor attempt to manage personal financial affairs of the client. At no time shall a client give a caregiver a cheque, credit card or bankcard (ATM, Debit, etc.) for withdrawals or shopping. Any exceptions must have prior written approval of the head of the suhani critical care at home .

b. provide any other service beyond the requested assigned service of the individual caregiver, as detailed in the individual service Do's and Don'ts, a copy of which is provided to the client at the time of request for registration.

c. Do home maintenance or repair activities such as wiping of bathroom/ washroom, cleaning of utensils which used by the client, cleaning gutters, gardening, auto cleaning or maintenance.

d. climb on ladders or chairs, move heavy furniture, or clean carpets.

e. Sign any legal papers, act as power of Attorney, receive process or appear in court on behalf of the client.

f. Perform any of the personal services described in the foregoing paragraphs for the family of the client served, including care, of minor children.

g. Purchase alcoholic beverages/Drugs etc. for a client or family member.

4. COMMUNICATION WITH CARE COORDINATORS:

Clients are encouraged to contact suhani critical care at home care coordinator at ______ to communicate changes in client needs and to resolve schedule changes, concerns, complaints, or questions on care provided. Care coordinators are responsible for supervising, hiring, terminating and disciplining caregivers.

On-going communication between client and care coordinator is essential to assure the high quality of care each client deserves. Care coordinators assign duties to caregivers based on their understanding of client needs and desires. Clients also have ability to communicate their wishes directly to their caregivers.

To enhance communication/supervise the service provided, a care coordinator may make visits to the client location anytime during the scheduled shift hours.

5. CHANGES TO SCHEDULE:

Any changes or modifications to scheduled hours must be arranged through a suhani critical care at home care coordinator (not the caregiver) a written request at least 24 hours before a scheduled shift.

6. ADHERENCE SCHEDULE:

The client should not expect and make a caregiver remain/confine at the location or anywhere else past the scheduled departure time of the scheduled shift. Repeated disregard of the caregiver' schedule may result in discontinuation of services.

7. CANCELLATIONS:

If the client cancels a scheduled shift for a caregiver, suhani critical care at home must be notified in written as soon as possible, but no less than 24 hours in advance. If the client fails to give 24 hour notice for cancellation, the client will be liable for payment of atleast Signature of the Applicant

Registration Request form/suhani critical care at home



8. TERMINATION OF SERVICES BY CLIENT:

The client may terminate the agreed service(s) anytime during the agreed scheduled service and/or the contract, in writing addressing to the care coordinator at least 24 hours prior to the beginning of any scheduled shift. Termination of contract will automatically lead to termination of all existing services under the contract.

9. DENIAL TO ENROL AND DISCHARGE

Suhani critical care at home has the right to choose not to enroll or Discharge a Client if:

a. The Client presents a threat to him/herself and/or Suhani critical care at home staff

b. the Client requires personal care beyond the capability/assignment of the caregivers as determined by the Care coordinator, outside the scope of or beyond the types of services offered by Suhani critical care at home

c. if the financial/Payment obligations are not followed, unsafe work environment at the location for caregiver, discharge of the caregiver's schedule, etc.

d. Unless discharge is by way of cancellation/termination by Suhani critical care at home due to safety concerns, Suhani critical care at home will upon conclusion of the agreed service scheduled service provide a discharge summary of such service duly concluded as per the contract.

e. No person shall be refused services based on age, race, color, sex, marital status, or national origin.

10. RENEWAL OF REGISTRATION:

a. Before Discharging, if a client wishes to continue, renew the contract on the same /modified/additional services, the client shall be required to execute a Renewal of registration at least 2 days ahead of the agreed contract period. Basis of a signed Renewal of Registration only Suhani critical care at home may continue with the service(s), subject to availability of staff and the rights of Suhani critical care at home

11. CAREGIVER ACCESS TO CLIENT HOME/LOCATION:

a. if the client is unable to open the door for a caregiver, the client must work with the care coordinator to arrange access. The client should never give a house/location key to the caregiver unless authorized in written by a care coordinator on written request for such arrangement.

12. RESPONSIBILITY & LIABILITY OF SUHANI CRITICAL CARE AT HOME :

a. Suhani critical care at home is responsible for all wages and other legalobligations towards the employment/engagement of the caregiver as an employer under the employmentagreement between Suhani critical care at home and the caregiver/employee.

b. Suhani critical care at home or its staff shall not be liable to make good for any pilferage, breakage, theft and damages caused.

Signature of the Applicant

Registration Request Form /Suhani critical care at home



13. RESPONSIBILITY & LIABILITY OF CLIENT TOWARDS CAREGIVER AND PROPERTY:

a. Client shall be responsible for a safe work environment of the caregiver, security and safety of the caregiver and or any other staff of Suhani critical care at home at the location and its premises all throughout the shift hour/visit and beyond in any event of the caregiver/staff staying beyond the shift hours at the location and its premises, on request/insistence/retention of the client and/or any family member, person within the household of the client.

b. Client shall be responsible for security and safety and safety of Suhani critical care at home properties/ equipment that the caregiver carries with him/her to the location for providing the agreed service, personal belongings/property of the caregiver/staff from damage, theft, arson etc. in any event of damage, theft, arson etc. to/of such property/ equipment of Suhani critical care at home property of caregiver/staff due to any action or any failure to act on the part of the client, the client shall be liable to compensate Suhani critical care at home and/or its staff to the extent of the amount infoemed by Suhani critical care at home

C. Client shall be responsible to arrange and supply consumables and medicines as per the requirement of the doctor and for the services to be provided by personnel of Suhani critical care at home on a day to day basis.

d. If the caregiver/staff of suhani critical care at home is prevented from performing the required service(s) by the client and/or any family member, person within the household of the client, then suhani critical care at home shall have the right to withdraw its services by call back the caregiver/staff from the client's premises. In such an event, suhani critical care at home and its staff and its affiliates/holding company would not be responsible for any adverse consequences.

14. DIRECT EMPLOYMENT OF CAREGIVER BY CLIENT:

Clients should not directly employ caregivers employed by and provided by suhani critical care at home . If the client (family) and caregiver choose to make arrangements outside those included in this contract, suhani critical care at home will terminate services to the client and will no longer employ the caregiver by terminating the employment contract with the caregiver. All subsequent liabilities as an employer will be the automatically transferred and be a responsibility of the client.

16. PAYMENTS TO CAREGIVERS:

The client shall not directly pay any caregiver employed by and provided by suhani critical care at home . payment of bonuses, tips, gifts, and granting of loans to a suhani critical care at home employee are prohibited and may result in termination of the employment of the caregiver with suhani critical care at home and termination of the contract with the client. Suhani critical care at home also prohibits any employee from accepting a bequest made by a client during his/her employment with suhani critical care at home ; as such acceptance of a bequest may suggest that such suhani critical care home employee may have exerted undue influence on that client.

Signature of the Applicant

Registration Request form/suhani critical care at home



17. CLIENT RECOGNITION OF CAREGIIVER:

If a client wishes to recognize outstanding effort of a suhani critical care at home employee, suhani critical care at home recommends the client send a written acknowledgment to the care coordinator, who will share it with the caregiver and include it in his/her personnel file. If it is important, to the client to give caregiver a special occasion gift (Diwali/holi/christmas/birthday/etc.), the gift must be given with the prior approval of a suhani critical care at home care coordinator.

18. INDEMNITY:

In taking any action pursuant to this Registration of client, Suhani critical care at home shall be deemed to be acting entirely for the benefit of the patient. In doing so, Suhani critical care at home and its assigned caregiver/personnel/staff/authorized representative(s)/agent shall not be liable to the client and any third party. The client shall indemnify Suhani critical care at home and its assigned caregiver/personnel/staff/authorized representative(s)/or agent acting under the contract and keep Suhani critical care at home harmless from and against any and all claims, actions and demands whatsoever, including costs, expenses and fees payable to any lawyer or attorney or the like in defending such claims, except of any loss caused by the wilful misconduct or gross negligence of the caregiver/personnel/staff/authorized representative(s)/or agent of Suhani critical care at home

19. FORCE MAJEURE:

Neither the Client nor Suhani critical care at home ("Parties") shall be liable to the other party on account of any loss, damage or delay occasioned or caused by non-performance of any obligation under the contract ensued through this Registration Form, due to reasons attributed to act of God or other causes beyond the control of the party("Force Majeure"). The parties shall without delay, on the first clear notice of force majeure inform each other of the force majeure circumstances and discuss remedial measures. If force majeure conditions continue to affect a party beyond a period two consecutive shift hours/secessions, the other party shall have a right to terminate this Agreement. However, this clause shall not be applicable qua payment of outstanding service fee to payable by the client to Suhani critical care at home /MHIL.

Signature of the Applicant

Registration Request Form/Suhani critical care at home



20. GOVERNING LAWAND DISPUTE RESOLUTION:

a. The contract between the client and Suhani critical care at home shall governed by the prevalent laws of India.

b. Any and all disputes arising out of this contract shall be initially tried to be settled mutually between the parties, in any event of failure to settlement, such dispute shall be settled through arbitration by a sole Arbitrator appointed by Suhani critical care at home The Arbitration proceedings shall be as per Arbitration and conciliation Act, 1996 or any statutory amendments or modifications thereof ("**Arbitration Act**). The arbitration proceedings shall be conducted in English. The place of arbitration shall be Delhi. The decision of the arbitrator(s) shall be final and binding on the parties.

c. In respect of matters where a reference to the courts is permitted by the Arbitration Act, the courts in Delhi shall have exclusive jurisdiction.

ACKNOWLEDGEMENT & ACCEPTANCE:

a. I, the **undersigned** acknowledge that I have read the foregoing terms and conditions and Dos and Dos' ts and Limitation of services of the service(s) applied for, being provided to me separately along with this Registration Form.

b. I further acknowledge that all doubts, queries relating to this Registration Form, Terms & Conditions and Process/procedure pertaining to the services requested are discussed and clarified to me to my satisfaction by the officials of Suhani critical care at home

c. I hereby accept that all foregoing Terms & Conditions and other information provided to be per policy of Suhani critical care at home from time to time during the Contract period shall be binding upon me/my Patient.

d. I acknowledge and accept that the contract shall remain in force from the date of enrolment/Registration of the Client till all services under the contract is/are terminated by Client or by Suhani critical care at home as described in "Discharge" section above.

Name of Applicant:	Relationship with Patient:	
Signature of Applicant:	Date:	Time

Registration Request Form/Suhani critical care at home