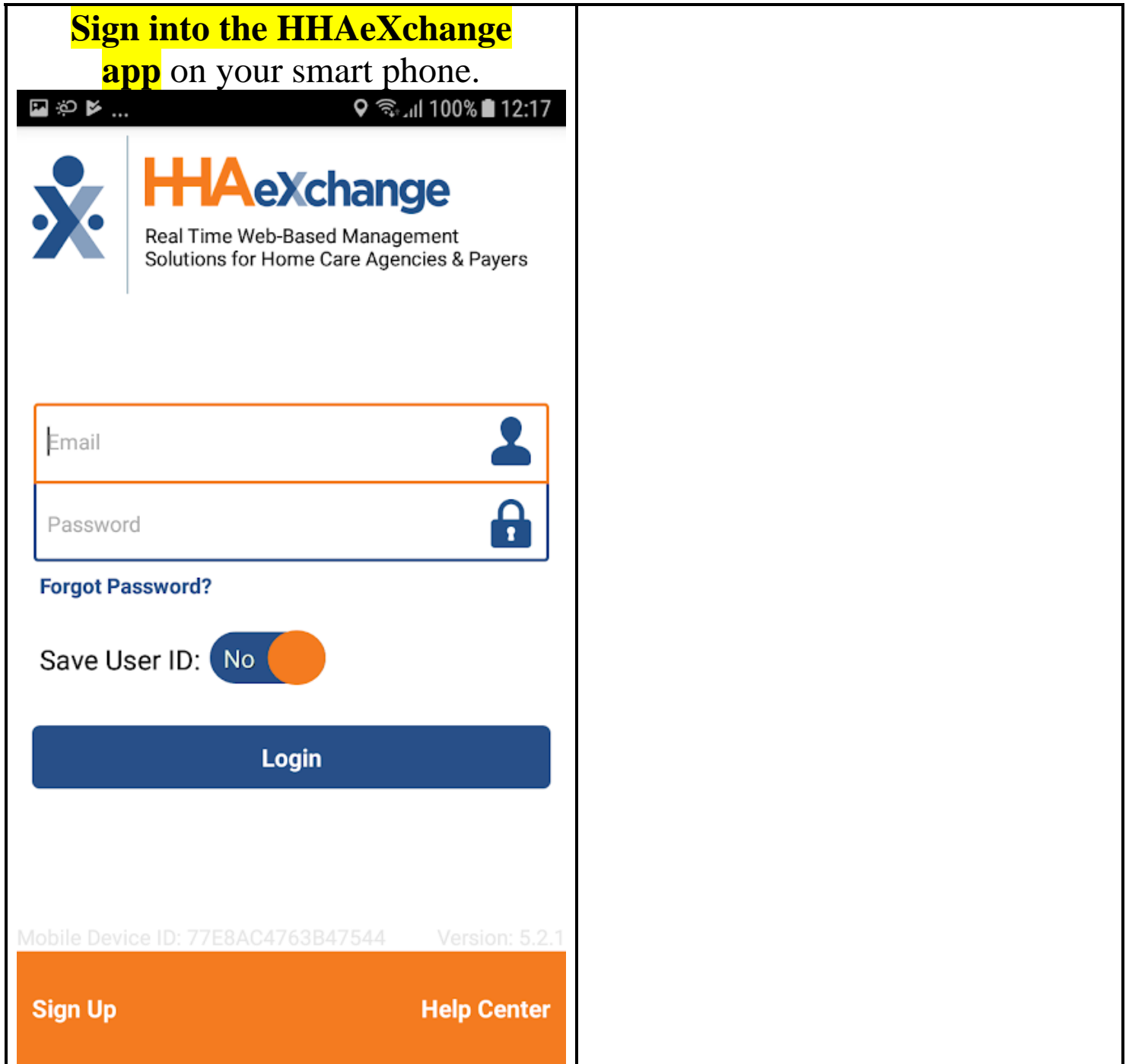


Please see below for the **HHAeXchange** sign in and sign out process on your smart phone

Sign into the HHAeXchange app on your smart phone.

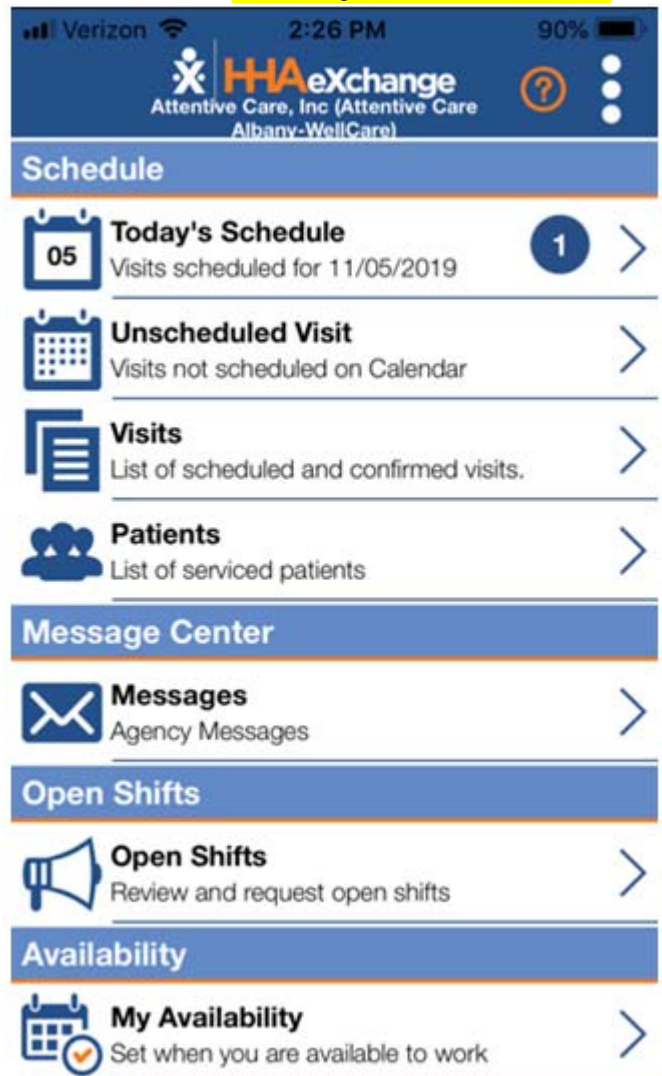


Mobile Device ID: 77E8AC4763B47544 Version: 5.2.1

[Sign Up](#) [Help Center](#)

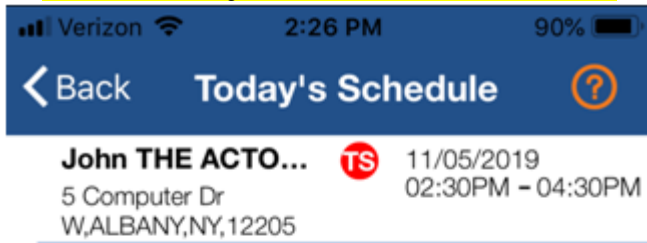
Once you're signed in the screen below will show up

Click on **Today's Schedule**



Once you click on Today's Schedule,
your clients name will appear.

Click on your client's name.



Click **CLOCK IN**

Verizon 2:26 PM 90%

Back Visit Detail John THE ACTOR Candy ? +

Clock In/Out Directions

Timesheet Required!

11/05 at 02:30PM

11/05 at 04:30PM

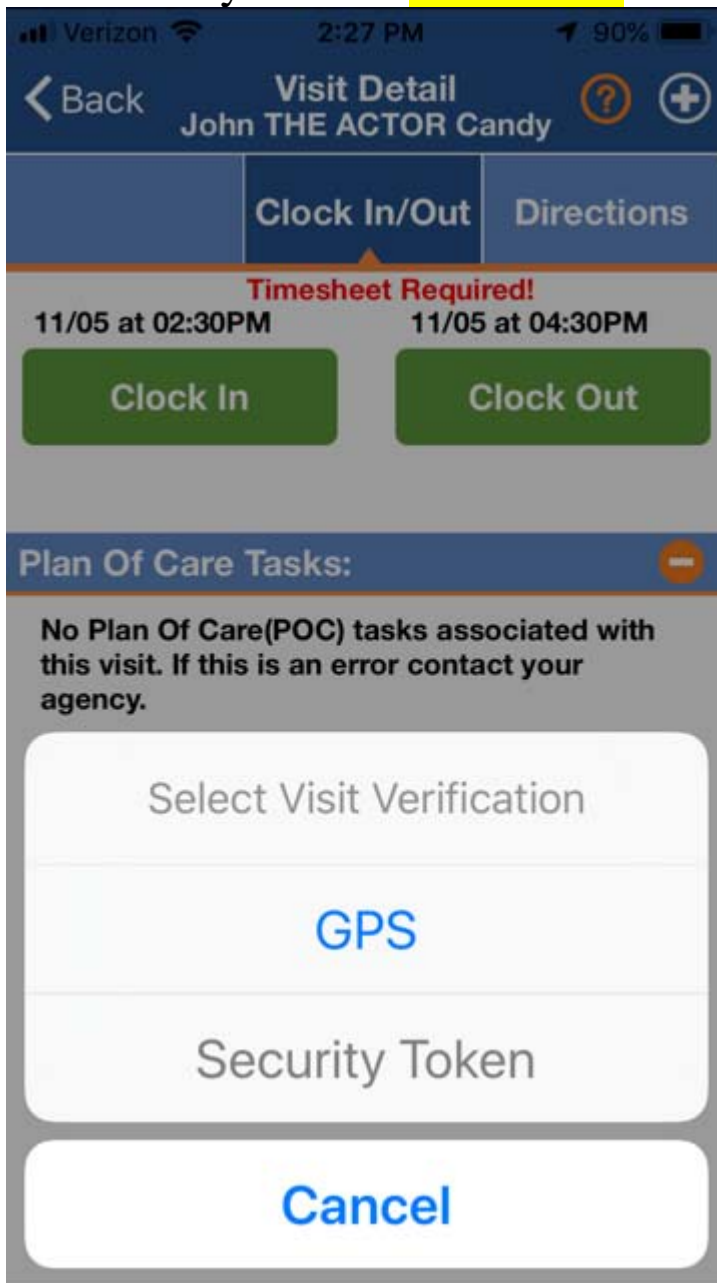
Clock In

Clock Out

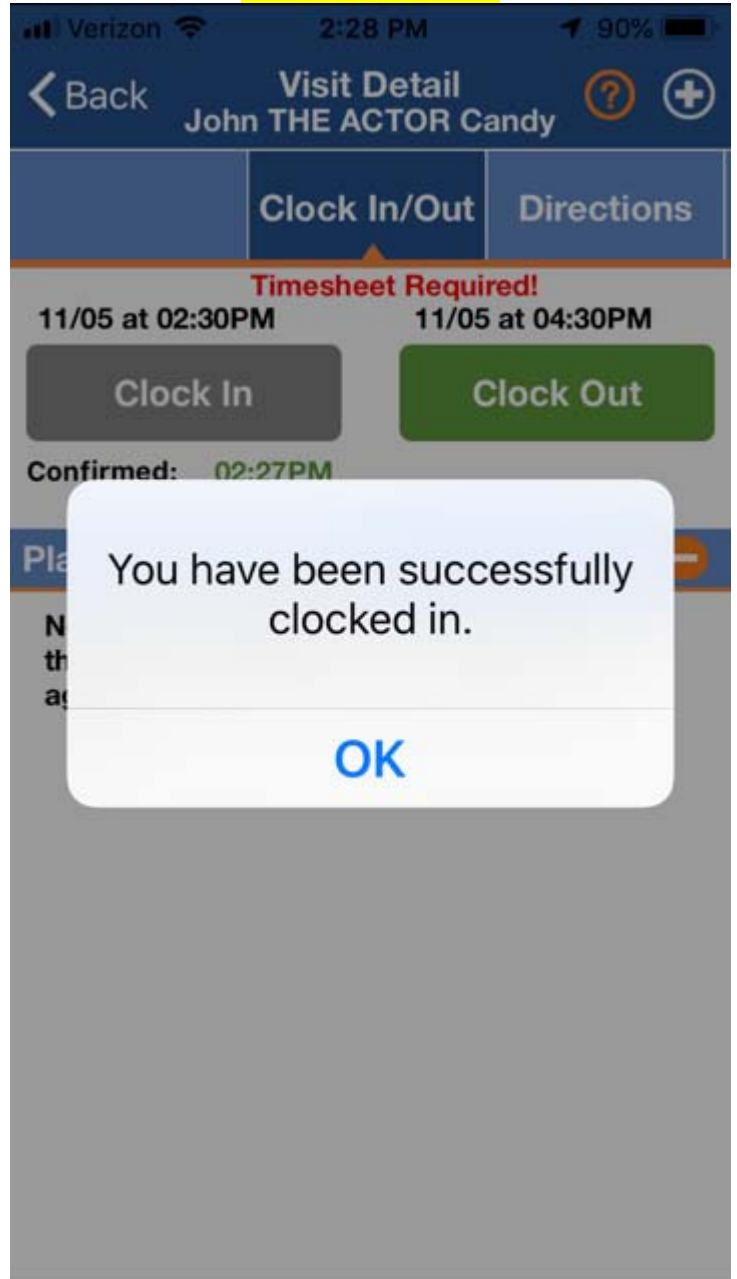
Plan Of Care Tasks: -

No Plan Of Care(POC) tasks associated with this visit. If this is an error contact your agency.

Then you must **Click GPS**

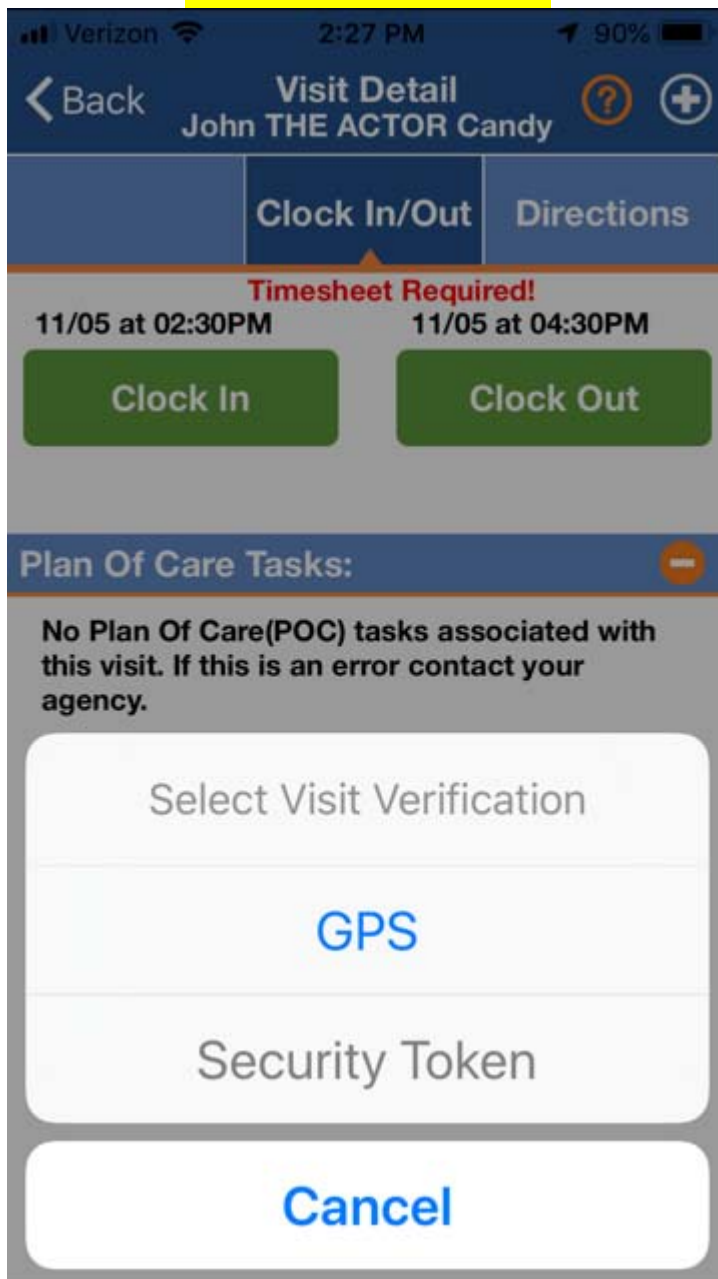


Then you will see;
You are successfully clocked in,
click the **OK**



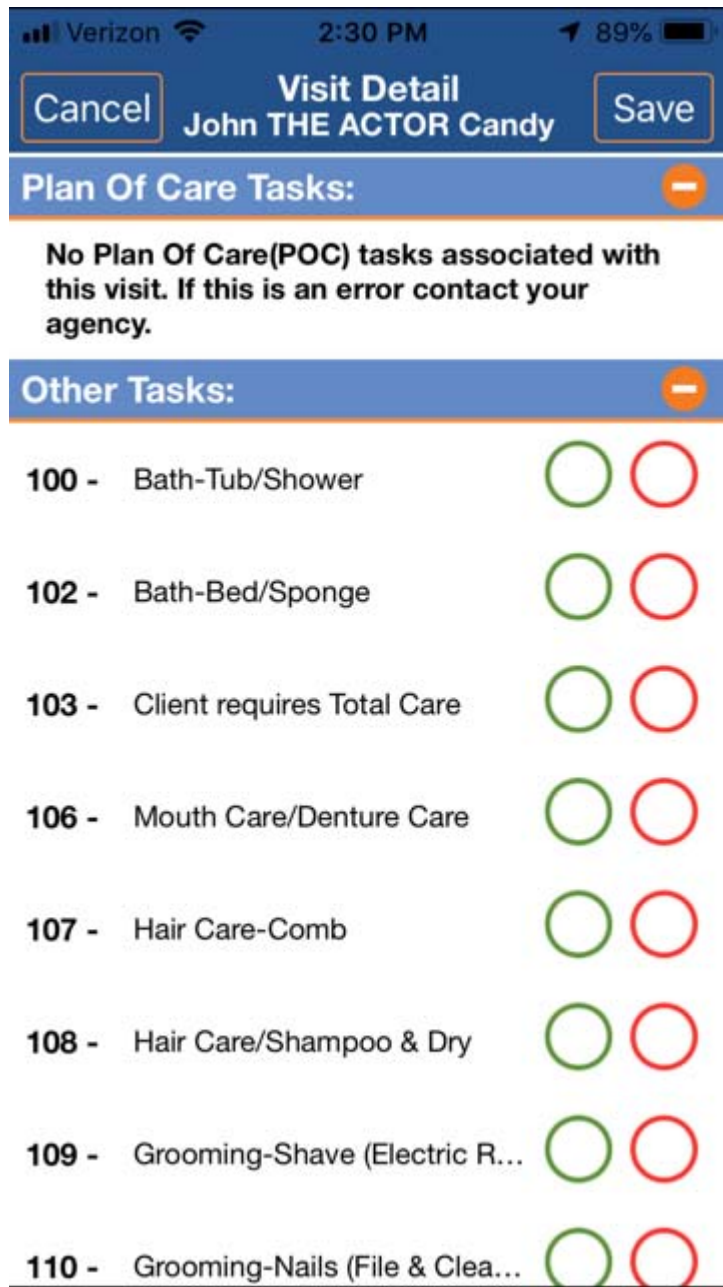
When your scheduled shift is over,
sign back into the HHAX App

**Click CLOCK OUT,
then CLICK GPS**



You will then see a list of your client's **PLAN OF CARE TASKS**

DO NOT click any tasks below the OTHER TASKS BLUE LINE
(call your FSS if you do not see that client's PLAN OF CARE TASKS)



Verizon 2:32 PM 89%

Cancel Visit Detail Save
John THE ACTOR Candy

Plan Of Care Tasks:

No Plan Of Care(POC) tasks associated with this visit. If this is an error contact your agency.

Other Tasks:

100 - Bath-Tub/Shower	<input checked="" type="checkbox"/>	<input type="checkbox"/>
102 - Bath-Bed/Sponge	<input type="checkbox"/>	<input checked="" type="checkbox"/>
103 - Client requires Total Care	<input type="checkbox"/>	<input checked="" type="checkbox"/>
106 - Mouth Care/Denture Care	<input type="checkbox"/>	<input checked="" type="checkbox"/>
107 - Hair Care-Comb	<input checked="" type="checkbox"/>	<input type="checkbox"/>
108 - Hair Care/Shampoo & Dry	<input checked="" type="checkbox"/>	<input type="checkbox"/>
109 - Grooming-Shave (Electric R...	<input type="checkbox"/>	<input checked="" type="checkbox"/>
110 - Grooming-Nails (File & Clea...	<input type="checkbox"/>	<input checked="" type="checkbox"/>

Check the **green circle next to all the tasks you performed for your client** during your shift,

AND

Check the **red circle next to all the tasks you did not perform.**

Within the Plan of Care Tasks you must check off task number #316 "Employee had an injury free work day".

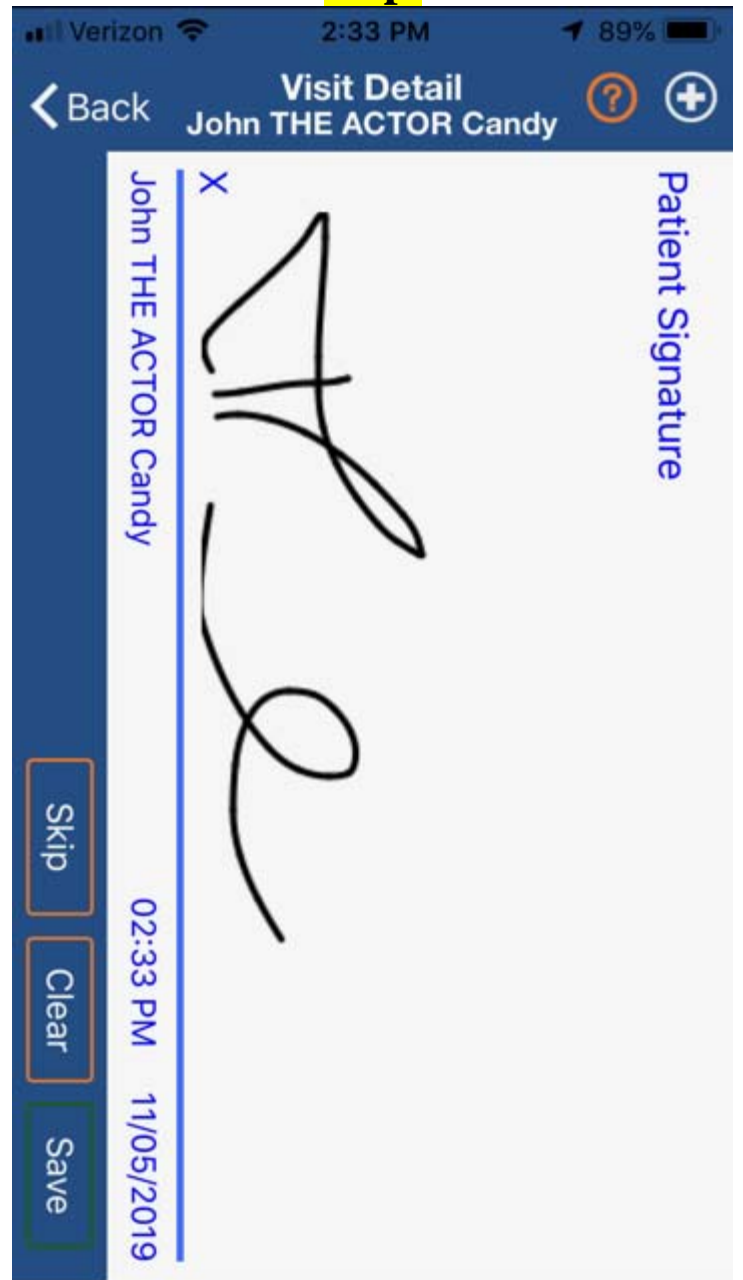
***Consumer Direct Personal Assistants – Should have the Plan of Care Tasks #316 AND #317**

***If you are also doing Live in services, please include tasks #522, #523, #524, #525)**

The client signature box will show after the tasks,

Ask the client to sign.

If the client is unable to sign, click skip.



Then it will show that **you have successfully clocked out.**

(You may have to enter 000 at the end if using a call to complete tasks)

