**MatrixCare Telephony Clock In/Clock Out**

# Clock in

1. Call **#1 855-756-9658**
2. Enter Soneto ID then hit# key
3. Hit 1 for arrival

## Wait for "thank you, goodbye" and for the line to end.

1. Call# **1 855-756-9658**

# Clock out

1. Enter Soneto ID then hit# key
2. Hit 2 for departure
3. Hit 1 for tasks
4. Enter the code number then the# key
5. Hit 1 to enter more tasks
6. Repeat step 5 and 6 until all tasks are marked that were completed
7. Hit 2 to complete call

## Wait for "thank you, goodbye" and the line to end.

\*If you do not hear "thank you, goodbye" and let the line end, the call will not submit properly.

## \*You must call from your client's home phone or cell phone.

**MATRIXCARE TELEPHONY PHONE#**

1 (855) 756 - 9658

**TELEPHONY ID:**

**MATRIXCARE MOBILE URL**

https://app.soneto.net/1ndiana Homecare **USERNAME: PASSWORD:**

**SIGNATURE PIN:**

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**TELEPHONY TASK ID #'S**

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| **HOUSEHOLD SERVICES** | |
| Laundry | 29 |
| Light Housekeeping (HHA) | 30 |
| Dust | 31 |
| Clean Kitchen after use | 32 |
| Clean Bathroom after use | 33 |
| Vacuum/Sweep/Mop | 34 |
| Change Bed Linens | 35 |
| Clean Living Areas | 36 |
| Other (Trash, Windows, Walkways, etc.) | 37 |
| **PRECAUTIONS** | |
| Observed Standard Precautions | 46 |
| Observed Contact Precautions | 47 |
| Observed Droplet Precautions | 48 |
| Observed Airborne Precautions | 49 |
| Diabetic Precaution | 63 |
| Seizure Precaution | 64 |
| Respiratory Precaution | 65 |
| Bleeding Precaution | 66 |
| Falls Precaution | 67 |
| Oxygen Precaution | 68 |
| Other Precaution | 69 |
| Code Status | 70 |
| COVID screening | 71 |
| Patient Specific Task | 93 |
| Skin Precaution | |
| **RESPITE** | |
| RESPITE Reason | 41 |
| RESPITE Location Provided | 42 |
| RESPITE Type | 43 |
| **PAC** | |
| Assistance with Personal Care | 50 |
| Assistance with Meals | 51 |
| Assistance with Shopping | 52 |
| Assistance with Errands | 53 |
| Assistance with Correspondence or Bill Pay | 54 |
| Assistance with Scheduling Appointments | 55 |
| Assistance with Chores | 56 |
| Assistance with Leisure Activities | 57 |
| Assistance with Mobility | 58 |
| Escorting to Community Activities | 59 |
| Supervision and Monitoring | 60 |
|  |  |
| RESPITE Location Provided | 42 |
| RESPITE Type | 43 |
| **PAC** | |
| Assistance with Personal Care | 50 |
| Assistance with Meals | 51 |
| Assistance with Shopping | 52 |
| Assistance with Errands | 53 |
| Assistance with Correspondence or Bill Pay | 54 |
| Assistance with Scheduling Appointments | 55 |
| Assistance with Chores | 56 |
| Assistance with Leisure Activities | 57 |
| Assistance with Mobility | 58 |
| Escorting to Community Activities | 59 |
| Supervision and Monitoring | 60 |
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| **BATHING** | |
| Tub/Shower | 1 |
| Bed Bath | 2 |
| Partial Bath | 3 |
| Shower Assist (ATTC ONLY) | 4 |
| Sink Bath | 45 |
| **HYGIENE & GROOMING** | |
| Assist with Dressing | 5 |
| Hair Care/Shampoo | 6 |
| Skin Care | 7 |
| Foot Care | 8 |
| Check Pressure Areas | 9 |
| Nail Care | 10 |
| Oral Care | 11 |
| Other | 12 |
| Assist with Elimination (Toileting) | 13 |
| **PROCEDURES** | |
| Catheter Care/Ostomy | 14 |
| Monitor Intake/Output | 15 |
| Medication Reminder | 16 |
| Other | 17 |
| **ACTIVITY** | |
| Assist with Ambulation (WC/Walker/Cane) | 18 |
| Mobility Assist (w/transfers) | 19 |
| Mobility Assist (w/transfers) \*HOYER\* | 20 |
| ROM -Active | 21 |
| Positioning | 22 |
| Exercise | 23 |
| Other | 24 |
| **NUTRITION** | |
| Meal Preparation | 25 |
| Assist with Feeding | 26 |
| Limit/Encourage Fluids | 27 |
| Other | 28 |
| **OTHER** | |
| Equipment Care | 38 |
| Transportation Needs (W/ CLIENT) | 39 |
| Shopping (CG ONLY) | 40 |
| Unusual Findings | 44 |