



HEARTHLINE
— HOME CARE —

— ♥ —
Compassionate Care That Lasts.

GUIDE 03 FOR FAMILIES

Questions to Ask Any Agency

Twelve questions that separate a serious home care agency from a staffing broker — including the ones we would rather you asked us. Use them on us, and on everyone else you call.

INSIDE THIS GUIDE

- Why we published questions that could cost us business
- The one question to ask if you ask only one
- Twelve questions, with the answers to listen for
- A three-agency scorecard to fill in as you call
- Reading the tone, not just the answer

WHY WE WROTE THIS

A guide that could cost us business

It is a fair question why an agency would publish the questions that make agencies uncomfortable. The honest answer is that we would rather compete on these terms. Every question below has a specific answer we are willing to give in writing, and several of them are ones a large portion of this industry cannot answer well.

Use this list on us. If we ever fail to answer any of these plainly, that is worth knowing before you trust us with someone you love.

IF YOU ASK ONLY ONE QUESTION

Ask whether caregivers are W-2 employees or 1099 independent contractors. It is a single question, it takes ten seconds, and the answer tells you whether the agency supervises care or merely arranges introductions.

An agency using contractors generally cannot lawfully direct how the work is done — which means nobody is truly accountable for the quality of what happens in your home.

THE LIST

Twelve questions

1. Are your caregivers your employees, or independent contractors?

Why it matters. This is the most revealing question on the list. If caregivers are 1099 contractors, the agency has no legal right to train, supervise or direct them — and if someone is injured in your home, or injures your loved one, liability can land on you as the household.

A good answer sounds like. *“They are W-2 employees. We carry workers’ compensation and general liability, we withhold their taxes, and we supervise their work directly.”*

What should worry you. Vague answers, or reframing the question as a benefit — ‘our caregivers are independent professionals’ usually means 1099.

Hearthline’s answer. Every Hearthline caregiver is a W-2 employee. Never 1099.

2. Who writes the plan of care, and is a Registered Nurse involved?

Why it matters. A plan of care written by a salesperson is a schedule, not a care plan. Nursing oversight is what catches the pressure sore, the weight loss, or the medication problem before it becomes a hospital admission.

A good answer sounds like. *“A Registered Nurse assesses the client in the home, writes the plan of care, and reviews it on a set schedule and after any change in condition.”*

What should worry you. The assessment is done over the phone, or by whoever answered it, with no nurse named.

Hearthline’s answer. Our operating standard at Hearthline: every plan of care is developed and overseen by a Registered Nurse.

3. Exactly what screening does a caregiver go through before entering my home?

Why it matters. You are giving someone keys to a house and access to a vulnerable person. ‘We do background checks’ is not an answer — the question is which ones.

A good answer sounds like. *“Criminal history check, identity and right-to-work verification, license or certification verification, reference checks from prior employers, and a drug screen.”*

What should worry you. Reluctance to be specific, or checks described as ‘handled by the caregiver themselves’.

Hearthline’s answer. Criminal background check, certification verification, references, and a drug screen before any client contact.

4. What insurance do you carry, and will you send me proof?

Why it matters. If a caregiver falls down your stairs, whose insurance pays? If cash goes missing, is the agency bonded? A legitimate agency answers this in one breath and emails documentation without being chased.

A good answer sounds like. *“General liability, professional liability, workers’ compensation, and a dishonesty bond. Certificates provided on request.”*

What should worry you. Any hesitation, or an offer to ‘send it later’. Ask again in writing.

Hearthline’s answer. Hearthline carries general liability and workers’ compensation coverage, and provides certificates on request.

5. Are you registered with the State of New Jersey, and what is your registration number?

Why it matters. New Jersey requires health care service firms placing caregivers to be registered with the Division of Consumer Affairs. It is verifiable, and it is the floor — not a mark of excellence.

A good answer sounds like. *“A specific registration status you can check yourself, offered without defensiveness.”*

What should worry you. Confusing ‘licensed’ with ‘insured’, or claiming registration is unnecessary.

Hearthline’s answer. Hearthline’s New Jersey Health Care Service Firm registration is in progress, and we say so plainly rather than imply otherwise.

6. Will the same caregiver come each visit, and what happens when they are sick?

Why it matters. For someone with dementia, a rotating cast of strangers is actively harmful. And every agency has caregivers who call out — the difference is whether they have a real answer for it or leave you to cope.

A good answer sounds like. *“A named primary caregiver, a named backup who has already met your loved one, and a specific process when someone calls out.”*

What should worry you. ‘We always try our best.’ Ask what happened the last time it occurred.

Hearthline’s answer. A consistent primary caregiver with an introduced backup, and direct agency contact when plans change.

7. If something goes wrong at 2am on a Sunday, who exactly picks up the phone?

Why it matters. Emergencies do not observe office hours. There is a large difference between an answering service that takes a message and a person from the agency who can act.

A good answer sounds like. *“A named on-call arrangement staffed by someone with authority to send help or make decisions.”*

What should worry you. An answering service with no escalation, or a promise of a callback ‘next business day’.

Hearthline’s answer. Direct agency contact rather than an anonymous call center.

8. What training do caregivers receive, and how often is it refreshed?

Why it matters. Certification is a starting point, not a standard. Ask specifically about dementia, safe transfers, and infection control — the three areas where untrained help does real harm.

A good answer sounds like. *“Documented orientation, condition-specific training, competency evaluation, and ongoing annual education.”*

What should worry you. ‘They are all certified’ with no detail about what the agency itself teaches.

Hearthline’s answer. Documented orientation, competency checklists, and condition-specific training including dementia and safe transfer technique.

9. Does a supervisor visit the home, and how often?

Why it matters. Care quality that is never observed is care quality nobody knows. Supervisory visits are how an agency finds out what is really happening, rather than relying on whatever the family volunteers.

A good answer sounds like. *“Scheduled supervisory visits at defined intervals, documented, with findings shared with the family.”*

What should worry you. Supervision that consists solely of the caregiver’s own notes.

Hearthline’s answer. Our operating standard: scheduled RN supervisory visits, documented, with the plan of care updated as needs change.

10. What is the hourly rate, the minimum shift, and every additional charge?

Why it matters. Advertised rates frequently exclude minimum shift lengths, holiday premiums, mileage, assessment fees, or higher weekend rates. You want the number you will actually pay each month.

A good answer sounds like. *“A written rate sheet listing the hourly rate, minimum hours, holiday and overnight differentials, and any one-off fees.”*

What should worry you. A rate quoted verbally with ‘we can work out the details later’.

Hearthline’s answer. Rates and minimums in writing before you commit to anything.

11. How do I cancel or change the arrangement, and what notice is required?

Why it matters. Care needs change fast — a hospital admission, a move, a death. You should not be locked into paying for care nobody is receiving.

A good answer sounds like. *“A short, plain-English notice period, clearly written in the service agreement.”*

What should worry you. Long fixed terms, automatic renewal clauses, or cancellation penalties.

Hearthline’s answer. A plain-language service agreement with a short notice period and no long lock-in.

12. Can I speak with a current client family, and with a caregiver who works for you?

Why it matters. Almost nobody asks the second half of that question, and it is the more informative one. How an agency treats its caregivers predicts precisely how your loved one will be treated.

A good answer sounds like. “Willingness to arrange both, with appropriate permission.”

What should worry you. Only curated written testimonials, or reluctance to let you speak to staff.

Hearthline’s answer. As a new agency we are candid about this: ask us instead about how we pay, train and support our caregivers.

“How an agency treats its caregivers is the single best predictor of how it will treat your mother. Ask about pay, training and turnover — then listen to the tone of the answer.”

COMPARE THEM

Three-agency scorecard

Write the agency names across the top and mark each row as you get answers — a check for a clear yes, a dash if the answer was vague, a cross for no. A perfect score is not the goal: one firm, specific, unhesitating answer to question one tells you more than twelve vague ones.

Question	Agency 1	Agency 2	Agency 3
1. W-2 or 1099?			
2. RN oversight of the care plan			
3. Background screening			
4. Insurance and bonding			
5. New Jersey registration			
6. Consistency of caregiver			
7. Who answers at 2am			
8. Training and refreshers			
9. Supervisory visits			

Question	Agency 1	Agency 2	Agency 3
10. The real cost			
11. Getting out of the arrangement			
12. References — both kinds			

READING THE ANSWERS

Tone tells you as much as content

By the third call you will notice something that no checklist captures. Some agencies answer these questions readily, with specifics, and volunteer information you did not ask for. Others become subtly impatient, redirect to how much they care, or push toward a signature.

Pay attention to that. A provider who finds your diligence tiresome during the sales conversation will not become more patient once they have your money and access to your home.

Equally, be wary of the agency that says yes to absolutely everything. A serious operator will occasionally tell you something you do not want to hear — that your relative needs more hours than you are hoping for, or skilled care they cannot provide, or that a facility may genuinely be safer.

TALK TO A PERSON, NOT A CALL CENTER

Questions About Care at Home

Every inquiry is read personally and held in confidence. There is no obligation, and we will tell you honestly if we are not the right fit for your family.

(201) 373-2992 • info@hearthlinecare.com

hearthlinecare.com • Bergen County, New Jersey

Continue reading. Understanding Home Care is available at hearthlinecare.com/#/resources, along with our other family guides.

This guide is general information for families and is not medical advice or a clinical assessment. Only a nurse or physician who has assessed your loved one can determine the care they need. Hearthline Home Care LLC provides non-medical home care; our New Jersey Health Care Service Firm registration is in progress.