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January 10, 2024

Jason Martino, Director of Planning
Area Agency on Aging of Pasco-Pinellas, Inc.
9549 Koger Boulevard
Suite 100
St. Petersburg, Florida 33702

Dear Jason,

Enclosed is the Annual Programmatic Monitoring report for the Older Americans Act Title IIIE National Family Caregiver Support Program for contract year January 1, 2023 - December 31, 2023.

The purpose of monitoring is to perform a programmatic review of operations and to verify that corrective actions resulting from previous monitoring reviews have been implemented. The monitoring objective is to ensure programs, policies and practices comply with state and federal rules and meet standards of good governance and practices.

The 2023 monitoring produced no findings and no formal recommendations. The cooperation of your staff throughout the monitoring process was appreciated.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ann Marie Winter'.

Ann Marie Winter
Executive Director



Area Agency on Aging
of Pasco - Pinellas, Inc.

2023 Programmatic Monitoring

PROVIDER: AAAPP OAA Title III E National Caregiver Support Program

DATE(S) OF VISIT: Desk Review Completed December 21, 2023

PARTICIPANT(S): Jason Martino, Director of Planning
Jody Ferguson-Hensler, Caregiver Specialist Coordinator
Nicole Day, Caregiver Specialist
Elizabeth Deland, Caregiver Specialist

MONITOR(S): Christine Didion, Director of Program Accountability

REPORT SUMMARY

(This section provides an overview of minor recommendations, significant, findings and positive/noteworthy activities recognized during the monitoring period. Details are outlined in the Contract Compliance and Service Delivery section of the report).

I. Recommendations for Improvement

(Recommendations require a written response from the provider)

- None.

II. Findings/Corrective Action

(Findings result in a formal corrective action plan)

- None.

CONTRACT COMPLIANCE AND SERVICE DELIVERY

Each standard will note at least one of the following:

- *Achieved*
- *Partially Achieved*
- *Not Achieved*
- *Not Applicable*
- *Follow-Up Required*

Standard #1 – Previous Programmatic Monitoring

All issues from the previous programmatic monitoring have been resolved within an established and reasonable timeframe.

Response: Achieved.

Recommendation was made in 2022 monitoring for Caregiver Specialists to attend internal and external trainings to enhance their understanding of the DOEA Handbook requirements and recent Notice of Instructions pertaining to:

- Caregiver in Crisis, following NOI: 082421-1-I-SWCBS
- 701B Comprehensive Assessment online training
- Abuse, Neglect, or Exploitation of the Elderly
- Case Manager training

Caregiver Specialists have attended the 2023 Semi-Annual Case Manager training, Annual Case Manager Training, and Outcome Measures/eCIRTS training. These trainings included information pertinent to assessments, eCIRTS requirements, good practices in case records, abuse, neglect, or exploitation prevention, and recent NOIs covering caregivers in crisis.

Standard #2 – Outreach and Targeting

A targeting plan with specific targeting objectives is in place:

- Provider has implemented the approved plan to target individuals with greatest economic need, older individuals with greatest social needs, older individuals at risk for institutional placement, older minority individuals, low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas (Pasco only).*
- Provider is serving the proposed number and percentage of older individuals with greatest economic need, older minority individuals, older individuals at risk for institutional placement, low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas (Pasco only).*
- Provider currently utilizes an Older Americans Act Prioritization Instrument in accordance with the Provider's Prioritization Policy.*

- D. *A random sample of client files were selected from the Assessed Prioritized Consumer List (APCL) in eCIRTS. Files were reviewed for prioritization policy and procedure compliance.*

Response: Achieved

- A. Per the OAA IIIIE Prioritization Policy, clients are placed on the OAA IIIIE waitlist by ADRC Intake/Screening staff. Prioritization form containing targeting criteria is used for waitlist management. Provider also utilizes a form to track additional OAA IIIIE prioritization requirements. Using these tools, the Caregiver Specialists can prioritize clients for enrollment. This ensures that services are being targeted to clients with greatest economic and social needs, clients with English as a second language, and clients residing in rural areas (Pasco only). Additionally, the tracking tools ensure clients on the waitlist are matching IIIIE requirements of having a caregiver and meeting the definition of frailty. The tracking tools further track additional factors that demonstrate the need for IIIIE Services including eCIRTS APCL date, client's age, caregiver's age, client's health status, client's dementia diagnosis, availability of an informal local support system, client's ability to be left alone, caregiver's employment status, and eCIRTS ranking. The tracking tool is regularly reconciled against the eCIRTS APCL report to ensure that all clients are captured and that terminated clients are removed.
- B. Not applicable.
- C. Per IIIIE prioritization policy, the screening assessment is utilized along with the Waitlist Tracking Tool and Prioritization Form.
- D. Ten (10) APCL client files were reviewed during the desk review. All files contained the completed Prioritization Form that indicates priority criteria used.

Standard #3 – Staff Training

Provider staff has received training pertinent to the performance of required functions:

- A. *Utilizing the appropriate DOEA Assessment Tool, 701A, in accordance with the DOEA Programs and Services Handbook.*
- a. *Review of policies and procedures for DOEA Assessment Tools including the 701S, 701A, and/or 701C to ensure assessments are being completed as outlined in the DOEA Programs and Services Handbook.*
 - b. *Ensure requirements for face-to-face visits are being adhered to.*
- B. *DOEA standards for specific service training as outlined in the most current DOEA Program and Services Handbook is being utilized:*
- a. *DOEA web-based training with receipt of a certificate of completion. The certificate must be submitted to the AAAPP for all 701 assessors and will be verified during monitoring.*
 - b. *DOEA 701S Training Webinar with appropriate documentation of completion is required per the AAAPP.*
- C. *Mandatory reporting of suspected abuse, neglect, self-neglect, and exploitation of the elderly training is conducted annually for all applicable program staff.*

Response: Achieved

- A. In all files reviewed, Caregiver Specialists are documenting appropriate changes in the client's and caregiver's status. All assessments were completed face-to-face with client and caregiver. All assessments reviewed were fully complete and uploaded to eCIRTS in "complete" status. All annual assessments were completed on time and in congruence with DOEA Programs and Services Handbook standards. Caregiver Specialists utilize eCIRTS Mobile Assessment feature to complete assessments in client eCIRTS records to capture as accurate information as possible. See Client File Review Checklist for details regarding full review of assessments.
- B. Assessment training certificates are on file for both Caregiver Specialists. New Caregiver Specialist completed 701B Comprehensive Assessment Training in
- C. Caregiver Specialists are aware of the mandate to report suspected abuse, neglect, or exploitation to the elderly to the Central Abuse Hotline. There were no incidents reported. Information on incidents is documented thoroughly in client case narratives. Caregiver Specialists attended training on reporting suspected abuse, neglect, or exploitation of the elderly in 2023. Additionally, the Caregiver Specialists attended the following trainings in 2023:
 - a. Alzheimer's Disease and Related Disorders training
 - b. Case Management Training in June 2023
 - c. Case Management Training in December 2023
 - d. eCIRTS and Outcome Measures
 - e. Cyber Security
 - f. HIPAA and Confidentiality Practices

Standard #4 – Programmatic Reporting

All required programmatic reports are accurate and submitted in a timely manner:

- A. *Annual Outreach and Public Education Report*
- B. *Quarterly Reports*
- C. *Detailed meeting minutes from the agency Board of Director meetings are submitted regularly.*
- D. *Surplus/Deficit Reports*

Response: Achieved

- A. Caregiver Specialists participate in outreach activities and documentation is kept on file. OAA Program Manager receives reports from all external providers and compiles annual report yearly. Internal providers are no longer included in this report.
- B. Not applicable.
- C. Not applicable.
- D. III E budget is monitored monthly and agency report is submitted to the Department of Elder Affairs.

Standard #5 – Outcome Measures

Outcome measures referenced in the current Standard Contract are achieved (OAA REGISTERED SERVICES ONLY):

- A. *The provider has implemented the strategies detailed in the current Service Provider Application including:*
 - a. *Using available eCIRTS reports to track outcome achievement.*
 - b. *Each exception is addressed on the quarterly outcome measures report detailing the factors that enhance or inhibit ability to achieve outcome measures.*
 - c. *Appropriate actions, including staff training to address outcomes which are not achieved, are included in the quarterly narrative of the outcome measures report.*

Response: Not applicable.

Outcome Measure reports remain unavailable in eCIRTS. Service Provider Application is not applicable to the OAA Title III E Program; however, Caregiver Specialists complete Outcome Measure reports monthly when available in eCIRTS. When reports are available, caregiver specialists review each exception and submit a timely report that thoughtfully addresses each exception. Caregiver Specialists attended AAAPP's Outcome Measure and eCIRTS Training in 2023.

Standard #6 – Case Record Compliance

Using the AAAPP Client File Monitoring Tool, case records sampled showed:

- A. *Compliance with requirements for client eligibility, intake, and service delivery.*
- B. *eCIRTS records of assessment/reassessment, program enrollment, and received services are accurate, entered in eCIRTS in a timely manner and agree with client and project records:*
 - a. *701A attempts are made within three business days after receipt of a client referral and completion of the assessments are no later than 14 days from initial contact.*
 - b. *Reassessments are completed 365 days after the prior assessment through the end of the month.*

Response: Achieved

- A. All client files reviewed contained Screening Assessments completed to determine eligibility prior to placement on the OAA III E waiting list. Caregiver Specialists review client and caregiver eligibility using screening assessments and prioritize clients utilizing a Waiting List Tracking Tool and Prioritization Form. Caregiver Specialists verify eligibility when completing initial 701A assessment. File documentation reviewed revealed no concerns related to service delivery or client eligibility. See attached Client File Review Checklist for details.
- B. Using the Client File Review Checklist, there were no issues, concerns, or discrepancies noted. Caregiver Specialists complete 701A assessments in full and timely. Case documentation clearly notates appropriate follow-up and service provision to caregivers and clients alike. Caregiver Specialists are reminded of eCIRTS requirements of utilizing the default worker in the Programs tab of the client record to accurately reflect the enrollment program, per the Florida Department of Elder Affairs eCIRTS Training Manual, pg. 164. Caregiver Specialists are also reminded of the requirement to enter services authorized in the Services tab of each active client record, per the Florida

Department of Elder Affairs eCIRTS Training Manual, pg. 250. Further eCIRTS training is suggested for the Caregiver Specialists.

Standard #7 – eCIRTS Exception Reports

- A. *eCIRTS Exception Reports are reviewed on a regular basis and exemplify accuracy (OAA REGISTERED SERVICES ONLY). Specific Older Americans Act Reports include:*
- a. *Assessment Due Report*
 - b. *ACTV, APPL, APCL Clients Moved to Another PSA*
 - c. *ACTV Clients Not Serviced in a Time Range*
 - d. *Clients Served Not Enrolled*
 - e. *Consumer Age Verification*
 - f. *Possible Duplicate Clients*
 - g. *ACTV PACE Clients Who Are ACTV, APCL, or APPL In Another Program*
 - h. *eCIRTS DATA Clean Up*
 - i. *ACTV MLTC Clients Who are ACTV, APCL, or APPL In Another Program*
 - j. *Data Inconsistencies Found When Comparing Vital Statistics Death Certificates With eCIRTS*

Response: Achieved

- A. AAAPP Program Managers run eCIRTS exception reports on a weekly or monthly basis, depending on exception report and availability within eCIRTS. AAAPP Program Managers follow-up with providers as exceptions appear. Program Managers note when exceptions do appear, Caregiver Specialists quickly review each exception and submit a timely report that thoughtfully addresses each exception. Data accuracy for OAA IIIIE is noted to be in compliance with DOEA standards.

Standard #8 – Budgetary compliance

- A. *Provider is serving or has a plan to serve the number of proposed units as identified in the service provider application.*
- B. *For the month of August 2022, the provider has a clear audit trail for units of service entered in eCIRTS as indicated by a review of client files, service logs, monthly summaries, and quarterly reports to the AAAPP.*

Response: Achieved

- A. Not applicable.
- B. Monthly review of billing by AAAPP Program Manager is conducted. All monthly reviews reveal Caregiver Specialists receive accurate billing summaries that match units entered into eCIRTS. Program Manager reviewed service authorizations, case notes, and submitted vendor invoice summaries for the month of August 2023 from ten case files reviewed. Services entered as received in August 2023 are corroborated with a service authorization, billed invoice, and/or case narrative. No discrepancies were noted.

Standard #9 – Consumer Satisfaction

Customer satisfaction and effective delivery of service has been verified through:

- A. *Policies and procedures related to consumer satisfaction detailing how satisfaction will be measured annually.*
- B. *Home Visits and/or client interviews (including service observation, if possible) in order to reveal effective deliver of service.*
- C. *Client satisfaction surveys accompanied by a satisfaction survey summary report for the last fiscal year.*
- D. *Provide status on the timeframe for the client satisfaction survey in the current fiscal year.*

Response: Achieved

- A. AAAPP Client Satisfaction/Program Evaluation Process is on file and reviewed.
- B. Caregiver Specialists continue to collect verification of service delivery as authorized and client satisfaction of services by phone and review services received during annual home visits. All ten files reviewed contained documentation that verification of receipt of authorized services and satisfaction is addressed. When necessary, Caregiver Specialists document additional follow-up to address any issues or outstanding needs of the clients and caregivers.
- C. Satisfaction Survey Summary and Result Analysis for surveys completed in November 2022 was submitted. 100% of caregivers who responded reported satisfaction with the services they are receiving and 100% with the services of any of the Caregiver Specialists. 98.5% reported they felt the services helped the person receiving care to stay in the home and 100% reported that the services helped the caregiver maintain or improve the quality of their life.
- D. Samples of Customer Satisfaction surveys sent to OAA IIIIE recipients in October 2023 were reviewed during this monitoring. Caregiver Specialists are currently reviewing and working on the corresponding 2023 analysis which will be available for review during the next monitoring period. Samples reviewed detailed notes of appreciation to all of the Caregiver Specialists.

Standard #10 – Grievances, Complaints, and Incidents

Consumer satisfaction and effective delivery of service has been verified through:

- A. *Provider has approved grievance policies, procedures, and logs, including documentation of the service provider’s response and resolution.*
- B. *Provider has approved complaint policies and procedures. Complaints are recorded using the appropriate AAAPP narrative and log which will include documentation of the service provider’s response and resolution.*
- C. *(Legal Providers Only) Provider has internal grievance policies and procedures that address both denial of service and complaints by clients about manner or quality of legal assistance.*
- D. *Provider has approved incident policies, procedures, and logs, including documentation of the service provider response and resolution.*

Response: Achieved

- A. Current Grievance Policy and Procedure was received. Provider submitted the grievance log along with attestation that no grievances have been received in 2023. Submitted log observed to have appropriate areas to complete responses and resolutions.
- B. Current Complaint Policy and Procedure was received. Provider submitted the complaint log along with verbal attestation that no complaints have been received in 2023. Submitted log observed to have appropriate areas to document complete responses and resolutions in a timely manner.
- C. Not applicable.
- D. Program adheres to the AAAPP Incident Policies and Procedures included in the Agency Safety Plan.

Standard #11 – Voluntary Contributions

Provider has voluntary contribution system in place conforming with the Older Americans Act:

- A. *Approved Voluntary Contributions Policy/Procedure*
- B. *Sample letter and/or sign related to voluntary contributions which clearly convey services are free of charge and all contributions shall be used to increase service availability.*

Response: Achieved

- A. Current Voluntary Contributions Policy and Procedure was received.
- B. All ten files reviewed contained documentation that clients and caregivers received letter clearly conveying services are free of charge and voluntary contributions were used to increase service availability. When a contribution is received, acknowledgement is sent to the client verifying receipt of the donation.

Standard #12 – Regulatory Compliance

OAA Provider is in Regulatory Compliance with:

- A. *OAA services reviewed are being provided in accordance with the most current DOEA Program and Services Handbook and the most current approved Service Provider Application.*
- B. *Provider complies with all regulations pertinent to the service being provided (i.e. fire, health inspections, licensure, etc.)*
- C. *Provider is acting in accordance with the Florida Statue 119.071 (5) requiring any agency that collects social security numbers to provide a written explanation the reason for collection to the individual.*
- D. *Health Insurance Portability and Accountability Act (HIPAA) requirements including policies/procedures.*
- E. *Provider follows the Provider Conflict of Interest Program Procedure (PR 132) issued 12/2017.*
- F. *Provider submits their Comprehensive Emergency Management Plan/Continuity of Operations Plan annually as required.*

Response: Achieved

- A. File documentation reviewed indicates that services are being provided in accordance with the current DOE Program and Services Handbook. No concerns noted.
- B. Not applicable.
- C. All ten files reviewed contained documentation that clients and caregivers are being provided with a written explanation for the collection of Social Security Numbers.
- D. All files reviewed contained documentation that clients and caregivers are being provided with information about HIPAA and AAAPP Privacy Policy. No concerns noted.
- E. Not applicable
- F. Not applicable.

STANDARD #13 – Involvement with the ADRC

Provider is involved with the Aging and Disability Resource Center (ADRC) and abides by the no-wrong-door system:

- A. *Maintains partnership with the ADRC, state, and community agencies to ensure that regardless of which agency people contact for help, they can access information about the options available across all the agencies and in their communities.*
- B. *Services not arranged through agency contracts should be obtained through referrals to other community resources (i.e. ADRC, volunteer agencies, informal networks and/or proprietary agencies that charge fees).*
- C. *If applicable, essential information is captured about the nature of the person’s physical, mental and functional abilities, concerns, limitations or problems, as well as general background information during the 701S intake process to assist in screening for eligibility and applicable program and service referrals. Potential LTCC clients are referred to the ADRC for the appropriate screening measures.*

Response: Achieved

- A. Program maintains these partnerships in the community.
- B. Per Prioritization Policy and documentation noted in the client files reviewed, referrals are made to the ADRC to add clients to the waiting lists for other programs as needs are identified and per client or caregiver request. Documentation of referrals to community resources were noted in the client files reviewed.
- C. Program adheres to the AAAPP ADRC Procedures for intake screening and prioritization. All ten files reviewed showed appropriate referrals to the ADRC or vendors for additional services identified.

STANDARD #14 – Subcontractors

Provider shall monitor, at least once per year, each of its subcontractors that are paid from OAA/LSP funds as required by the Standard Contract and will:

- A. *Submit a copy of the programmatic monitoring record to the AAAPP upon completion to ensure contractual compliance.*
- B. *Submit a copy of all subcontracts to the AAAPP within thirty (30) days of execution of each subcontract agreement.*

Response: Achieved

- A. Vendor billing monitoring is completed on an annual basis by the Caregiver Specialists. Caregiver Specialists conducted desk review of vendor billing in October 2023. Billing Monitoring Summary Sheets were completed, and applicable follow-up is documented. Caregiver Specialists address billing discrepancies found immediately when identified during monthly billing. If trends or ongoing issues are noted, corrective action and technical assistance are provided as needed. Additionally, AAAPP Service Analysts completed administrative reviews of all vendors in December 2023 and January 2024 which included review of licensure, insurance, vendor complaint procedures, and background screenings. No issues were noted, and any outstanding documents were provided by vendors.
- B. Not applicable.

STANDARD #15 – Volunteers

Provider has policies/procedures governing the utilization of volunteers and submits the Department of Elder Affairs Volunteer Activity Report annually as required.

Response: Achieved

Program adheres to the AAAPP policies and procedures for use of volunteers.

Signatures:

Christine Didion

Christine Didion, Director of Program Accountability

Jan 10, 2024

Date

Kerry Marsalek

Kerry Marsalek, Chief Operating Officer

Jan 10, 2024

Date



Area Agency on Aging of Pasco-Pinellas, Inc.
Client File Monitoring Tool for Registered Services
 Specific to 701A

Organization: Area Agency on Aging Of Pasco-Pinellas
 Registered Service: OAA Title III-E National Family Caregiver Support Program

Questions	F.B. 273830	D.B. 1332225	D.C. 1158446	I.G. 1427267	E.K. 1763781	F.M. 1771761	M.N. 1537800	C.S. 1558733	T.K. 259203	W.T. 1190349	Comments
as the most current assessment (701A and/or 701C) completed in a timely manner and entered into eCIRTS correctly?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
If applicable, was the reassessment completed 365 after the prior assessment (through the end of the month)?	Y	Y	Y	Y	N/A	N/A	Y	Y	N/A	Y	
Was client eligibility verified? (see 'Service Eligibility for OAA Programs')	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
OAA priority for service delivery been established and recorded using an approved prioritization tool?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
the worker obtain a signed Release of Information/HIPAA form?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
the client notified of why their SSN is collected?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
did the worker notify the client of their current Complaint Procedure?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Is the client correctly enrolled for this program and service in eCIRTS?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Based on the audit trail month selected for review, do the received services in CIRTS balance with provider's internal recordkeeping?	August Y	August Y	August Y	August Y	August Y	August Y	August Y	August Y	August Y	August Y	
notes within the client's file reflect the current status of the client as indicated in eCIRTS?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
service frequency increased/decreased at any time during the fiscal year, were notes updated accordingly?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
FB 273830	Services tab is not completed.										
DB 1332225	Default Provider is not selected. Services tab is not completed.										
DC 1158446	Default Provider is not selected. Services tab is not completed.										
IG 1427267	Services tab is not completed.										
EK 1763781	Default Provider is not selected. Services tab is not completed.										
FM 1771761	Default Provider is not selected. Services tab is not completed.										
MN 1537800	Default Provider is not selected. Services tab is not completed.										
CS 1558733	Default Provider is not selected. Services tab is not completed.										
TK 259203	Client is active with HCE eff. 11/29/2023. No concerns per DOEA Programs and Services Handbook indicating dual enrollment with OAA is allowable. <i>Dual enrollment is allowable if the situation is such that the client benefits from it and it is still more cost effective to do so rather than have the client institutionalized.</i> Default Provider is not selected. Services tab is not completed.										
WT 1190349	Default Provider is not selected. Services tab is not completed.										

compliant
non-compliant and comment is required
Not Applicable



Area Agency on Aging of Pasco-Pinellas, Inc.
Client File Monitoring Tool for Registered Services
 Specific to 701S

Organization: Area Agency on Aging Of Pasco-Pinellas
 Registered Service: OAA Title IIIIE National Family Caregiver Support Program

Attachment I.

Questions	S.A. 1083631	L.C. 1814196	E.G. 1713391	N.K. 1388406	M.L. 1820001	M.N. 1775077	F.R. 1785698	J.S. 285296	J.T. 1517871	Y.I. 1436161	Notes
Was the most current Intake/701S assessment completed and entered into eCIRTS correctly?	ADRC - annual 701S overdue	ADRC	ADRC	ADRC	ADRC	ADRC	ADRC	ADRC - annual 701S overdue	ADRC	ADRC - annual 701S overdue	Annual assessments overdue are responsibility of ADRC. This is not reflected in IIIIE monitoring standards.
Was client eligibility verified? (see "Service Eligibility for OAA Programs")	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Has OAA priority for service delivery been established using an approved prioritization tool?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Was the client notified of why their SS# is collected?	ADRC	ADRC	ADRC	ADRC	ADRC	ADRC	ADRC	ADRC	ADRC	ADRC	
Is the client correctly enrolled on the waitlist for this program/service in eCIRTS?	Y	Y	Y	Y	Y	Y	Y	Y	Y	Y	
Notes	eCIRTS lists client as MLTC active. Per FLMMIS, client LTCC ended in 2021. No concerns.	N/A	N/A	CCE active	N/A	N/A	N/A	N/A	N/A	CCE active	

Yes = Compliant
 No = Non-compliant and comment is required
 N/A = Not applicable

2023 IIIE Monitoring Report

Final Audit Report

2024-01-10

Created:	2024-01-10 (Eastern Standard Time)
By:	Christine Didion (christine.didion@aaapp.org)
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