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December 20, 2023

Christine Didion, Director of Program Accountability
Area Agency on Aging of Pasco-Pinellas, Inc.
9549 Koger Blvd.
Lake Building, Suite 212
St. Petersburg, FL 33702

Dear Christine,

Enclosed is the Annual Programmatic Monitoring report for the Mental Health and Gerontological Counseling Program.

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 one recommendation. The cooperation of your staff during the desk review and monitoring process was appreciated.

Sincerely,

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

Ann Marie Winter
Executive Director

Enclosure
Cc: Nayomi Kershaw



Area Agency on Aging
of Pasco - Pinellas, Inc.

Area Agency on Aging of Pasco-Pinellas, Inc.
2023 OAA/LSP
COUNSELING SERVICE MONITORING

PROVIDER: Area Agency on Aging of Pasco – Pinellas, Inc.

DATE(S) OF VISIT: December 8, 2023

PARTICIPANT(S): Nayomi Kershaw, Program Assistant
Christine Didion, Director of Program Accountability

MONITOR(S): Michelle Tavares, Program Manager

FUNDING PERIOD: 2022-2023

SITES VISITED: N/A

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)

- Recommendation that a date section is added to the survey forms and analysis to support timeframe in which surveys and analysis are completed.

II. Findings/Corrective Action

(Findings result in a formal corrective action plan)

- There are no findings.

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: 2022 monitoring produced no recommendations nor findings.

Standard #2 – Targeting, Prioritization, and Waitlist

Prioritization is in accordance with Older Americans Act guidelines.

- A. Provider currently utilizes an Older Americans Act Prioritization Instrument in accordance with the Provider's Prioritization Policy.*
- B. A random sample of client files from the Assessed Prioritized Consumer List (APCL) in eCIRTS will be requested for review during the monitoring visit. Please have all waitlist information, files, policies, and procedures available.*

Response: Achieved.

- The provider is utilizing an approved prioritization instrument, as outlined in their prioritization policy.
- Counseling clients are not assessed using the 701S screening assessment and clients are not on the eCIRTS APCL. The provider maintains an internal waitlist. Review of the waitlist and client files support that the provider has an appropriately prioritized clients for counseling services. See attachment I.

Standard #3 – Staff Training

Mandatory reporting of suspected abuse, neglect, self-neglect, and exploitation of the elderly training is conducted annually for all applicable program staff.

Response: Achieved.

Training certificates were submitted for three staff members. Training on mandatory suspected abuse, neglect, self-neglect, and exploitation is completed annually as required.

Standard #5 – Case Record Compliance

Using the AAAPP client file monitoring tool, case records sampled showed compliance with requirements for client eligibility, intake, and service delivery.

Response: Achieved. See attachment II.

Review of five (5) active client files support compliance with requirements for client eligibility, intake, and service delivery.

Standard #6 – Budgetary Compliance

The provider has a clear audit trail for units of service entered in eCIRTS as indicated by a review of client files, service logs, and monthly summaries.

Response: Achieved.

Review of client service logs, provider internal billing logs, and billing submitted for August 2023 support a clear audit trail for services entered in eCIRTS.

Standard #7 – Consumer Satisfaction

Consumer 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. *Client satisfaction surveys accompanied by a satisfaction survey summary report for the last fiscal year.*
- C. *Provide status on the timeframe for the client satisfaction survey in the current fiscal year (will vary depending on when monitoring visit occurs).*

Response: Achieved.

- A. The provider has policies and procedures related to consumer satisfaction which includes annual schedule for completing surveys.
- B. Review of client satisfaction surveys and analysis indicate that clients are overall satisfied with the counseling program. Client comments include, "I truly appreciate the program and I am very thankful for my progress! The counseling has made such a difference in my life!" and "My counselor is very supportive, understanding, and gives good feedback, advice, and resources to help me. She is excellent."
- C. The provider reports completing client satisfaction surveys in fiscal year 2023. Surveys and analysis reviewed were not dated. It is recommended that a date section is added to the survey forms and analysis to support timeframe in which surveys and analysis were completed.

Standard #8 – 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. *Provider has approved incident policies, procedures, and logs, including documentation of the service provider response and resolution.*

Response: Achieved.

- A. The provider has an approved grievance policy and procedure on file. The client grievance log was reviewed. There were no grievances reported.
- B. The provider has an approved complaint policy and procedure on file. The client complaint log was reviewed. One (1) complaint were reported in 2023. The complaint was documented appropriately and included the providers and response and resolution.
- C. The provider has an approved incident policy and procedure on file. The client incident log was reviewed. There were two (2) incidents reported. All incidents were documented appropriately and included the providers and response and resolution.

Standard #9 – Voluntary Contributions

Provider has a 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 provides each recipient with an opportunity to voluntarily and confidentially contribute to the cost of the service; clearly informs each recipient that there is no obligation to contribute, and that the contribution is purely voluntary; and all contributions shall be used to increase service availability.*

Response: Achieved.

- A. The provider has an approved Voluntary Contributions policy and procedure on file.
- B. The provider has a voluntary contribution letter on file which indicates that all contributions are voluntary and shall be used to increase service availability.

Standard #10 – 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 pertinent to the service being provided (I.E, fire, health inspections, licensure, etc.)*

- C. *Provider is acting in accordance with the Florida Statute 119.071 (5) requiring any agency that collects social security numbers to provide a written explanation to the individual the reason for collection. regulations*
- D. *Health Insurance Portability and Accountability Act (HIPAA) requirements including policies/procedures.*
- E. *Provider is in compliance with 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. Counseling services are provided in compliance with the most current DOEA Program and Services Handbook and the most current approved Service Provider Application.
- B. The provider submitted current licenses from the Florida Department of Health for all staff providing counseling services.
- C. The provider complies with F.S. 119.071(5) that provides a written explanation to the individual for collection of social security numbers.
- D. The provider has submitted their HIPAA policy and procedure and maintains regulatory compliance.
- E. The provider is in compliance with the Provider Conflict of Interest Program Procedure (PR 132).
- F. An internal CEMP/COOP is maintained.

Standard #11 – 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).*

Response: Achieved.

- A. The provider maintains a positive partnership with the ADRC and other community agencies to ensure referrals receive the assistance they need. If the provider receives a referral from someone in need of additional services, a referral is made to the ADRC.
- B. The provider completes referrals to community resources, as necessary.

Standard #12 – 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: N/A. Provider does not utilize subcontractors.

Standard #13 – Volunteers

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

Response: N/A. The provider is not currently utilizing volunteers.

Standard #14 – Background Screening

Provider completes Level II Background Screenings, as necessary.

Response: Achieved.

The provider submitted a statement from the Human Resources Administrator confirming that Level II background screenings were completed for three (3) counseling staff members.

Signatures:

Michelle Tavares

Dec 20, 2023

Michelle Tavares, Program Manager

Date

Christine Didion

Dec 20, 2023

Christine Didion, Director of Program Accountability

Date

Kerry Marsalek

Dec 20, 2023

Kerry Kimball Marsalek, Chief Operating Officer

Date



Area Agency on Aging of Pasco-Pinellas, Inc. Client File Monitoring Tool for Unregistered Services with Waitlist

Organization: AAAPP

Unregistered Service with Waitlist: Counseling

Attachment I.

Questions	C.K.	C.L.	M.B.	M.D.	W.S	
Was client eligibility verified? (see "Service Eligibility for OAA Programs")	Y	Y	Y	Y	Y	
Has OAA priority for service delivery been established using an approved prioritization tool?	Y	Y	Y	Y	Y	
Was the client notified of why their SS# is collected, if applicable?	N/A	N/A	N/A	N/A	N/A	
Is the client correctly enrolled on the waitlist for this program/service in eCIRTS?						
Notes	APCL 6/1/23	APCL 11/9/23	APCL 8/10/23	APCL 8/28/23	APCL 10/5/23	

Yes = Compliant

No= Non-compliant and comment is required

N/A = Not applicable



**Area Agency on Aging of Pasco-Pinellas, Inc.
Client File Monitoring Tool for Unregistered Services**

Organization: AAAPP
Unregistered Service: Counseling

Attachment II

Questions	J.M.	P.K.	B.R.	C.M.	B.F.	Comments
Was an intake/registration form completed and, if applicable, updated annually?	Y	Y	Y	Y	Y	
Was client eligibility verified? (see "Service Eligibility for OAA Programs")	Y	Y	Y	Y	Y	
Has OAA priority for service delivery been established using an approved prioritization tool?	Y	Y	Y	Y	Y	
Did the worker obtain a signed Release of Information/HIPAA form?	Y	Y	Y	Y	Y	
Was the client notified of why their SS# is being collected?	Y	Y	Y	Y	Y	
Did the worker notify the client of their current Complaint Procedure?	Y	Y	Y	Y	Y	
Clients file contains a biopsychosocial assessment?	Y	Y	Y	Y	Y	
Clients file contains a treatment plan?	Y	Y	Y	Y	Y	
Based on the audit trail month selected for review, do the units entered in eCIRTS balance with the provider's internal recordkeeping?	N/A	N/A	Y	Y	Y	
Do notes within the client's file reflect the current status of the client?	Y	Y	Y	Y	Y	
If service frequency increased/decreased at any time during the fiscal year, were notes updated accordingly?	N/A	N/A	Y	N/A	N/A	
Notes	Active 10/18/2023	Active 9/20/2023	Active 6/28/2021	Active 10/11/2021	Active 4/23/2020	

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












AAAPP Counseling 2023 Monitoring Report

Final Audit Report

2023-12-20

Created:	2023-12-20 (Eastern Standard Time)
By:	Michelle Tavares (Michelle.Tavares@aaapp.org)
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✔ Agreement completed.

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