



Agenda Item #7 G (3)
02/13/2023

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February 1, 2023

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

Dear Mr. Martino,

Enclosed is the Annual Programmatic Monitoring report for the Older Americans Act Title III-E National Family Caregiver Support program for contract year January 1, 2022 - December 31, 2022.

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 2022 monitoring produced no findings and one recommendation. The cooperation of your staff throughout the monitoring process was appreciated.

Sincerely,

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

Ann Marie Winter (Feb 1, 2023 14:55 EST)

Ann Marie Winter
Executive Director

Enclosures

cc: Kristina Jalazo, Director of Program Accountability
Sara Jones, Program Manager
Jody Ferguson-Hensler, Caregiver Specialist Coordinator
Nicole Day, Caregiver Specialist
Jenny Mendoza, Program Manager





2022 Programmatic Monitoring

PROVIDER: AAAPP OAA Title III-E National Caregiver Support Program

DATE(S) OF VISIT: Desk Review Completed December 20, 2022
Jason Martino, Director of Planning

PARTICIPANT(S): Jody Ferguson-Hensler, Caregiver Specialist Coordinator
Nicole Day, Caregiver Specialist

MONITOR(S): Sara Jones, Program Manager

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)

- Caregiver Specialists will benefit from detailed refresher trainings in 2023. These trainings will ensure staff maintains in compliance with the DOEA Handbook requirements and recent Notice of Instructions on changes to the Caregiver in Crisis designation. Caregiver Specialists are recommended to receive the following trainings in 2023:
 - Caregiver in Crisis training
 - To be provided internally in accordance with the NOI Memorandum Notice#: 082421-1-I-SWCBS from 8/24/2021 and "Caregiver in Crisis/Imminent Risk eCIRTS Procedure" from 10/17/2022
 - 701B Comprehensive Assessment online training
 - Last completed in 2013 and 2014
 - Abuse, Neglect, or Exploitation of the Elderly
 - Case Manager annual training

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.

All standards met in the 2021 programmatic monitoring. There are no outstanding issues.

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.*
- 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

- 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 lack of English proficiency, 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 IIIE 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 IIIE prioritization policy, the screening assessment is utilized along with the Waitlist Tracking Tool and Prioritization Form.
- D. All files reviewed during the desk review contained the completed Prioritization Form that indicates priority criteria used. Based on the Prioritization Form, all files reviewed demonstrated the clients were appropriately released from the waitlist based on OAA IIIE standards and presented with the highest level of need.

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. *Quality assurance activities to include use of the Assessment Instructions (DOEA 701D), direct observation, coaching, and training of screening staff to ensure the accuracy and quality of the screenings being conducted.*
- C. *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.*
- D. *Mandatory reporting of suspected abuse, neglect, self-neglect, and exploitation of the elderly training is conducted annually for all applicable program staff.*

Response: Partially Achieved

- A. Due to COVID-19 and flexibilities permitted by the Florida Department of Elder Affairs (DOEA), Caregiver Specialists continue to complete required 701A's on an annual basis by phone when caregivers request for social distancing. In all files reviewed, Caregiver Specialists are documenting appropriate changes in the client's and caregiver's status regardless of face-to-face or telephone screenings completed. The Assessment Due report is not currently available in eCIRTS, as a supplement the

Caregiver Specialists maintain their own logs for tracking assessments due with annual reassessment requirements. See Client File Review Checklist for details regarding full review of assessments.

- B. Documentation reviewed reflects the DOEA standards for services specified in the Assessment Instructions (DOEA 701D) are not being followed consistently. Caregiver specialists would benefit from completing the web-based training again to alleviate errors and inconsistencies when entering the assessments in the eCIRTS system. Caregiver specialist report frequent review of assessment difficulties and coaching from management staff. New Caregiver Specialists are provided with appropriate training and oversight.
- C. Assessment training certificates are on file for both Caregiver Specialists. New Caregiver Specialist began in December 2022 and will complete required training in early 2023.
- D. Caregiver Specialists are aware of the mandate to report suspected abuse, neglect, or exploitation to the elderly. There were no incidents reported. Information on incidents is documented thoroughly in client case narratives. Caregiver Specialists are due to receive further training on reporting suspected abuse, neglect, or exploitation of the elderly in 2023 as this was not attended during 2022. The Caregiver Specialists attended the following trainings in 2022:
 - a. 3/9/2022: Annual Alzheimer's Disease Training – part I
 - b. 4/13/2022: Annual Alzheimer's Disease Training – part II

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. IIIE 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.

Service Provider Application is not applicable to the OAA Title IIIIE Program; however, Caregiver Specialists complete Outcome Measure reports monthly when available. When reports are available, caregiver specialists review each exception and submit a timely report that thoughtfully addresses each exception. Outcome Measure and eCIRTS training will be provided again by AAAPP Programs and Accountability Staff in 2023 when these reports are made available.

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 IIIIE waiting list. Caregiver Specialists review client and caregiver eligibility using screening assessment 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 three problem areas identified within the ten client files selected for monitoring. The first being minor and related to discrepancies between the written 701A and the turnaround assessment entered into eCIRTS. The second being minor and related to inconsistency between case record documentation and the assessment notes. The third being of moderate concern regarding improper documentation and supervisory approval for the Caregiver in Crisis designation. The Assessment Due report is not currently available in eCIRTS, as a

supplement the Caregiver Specialists maintain their own logs for tracking assessments due with annual reassessment requirements. Once the Assessment Due report is available again, it will be monitored monthly by AAAPP Program Manager to assist Caregiver Specialists in completing reassessments within appropriate timeframes. File review also revealed new clients are contacted and initial 701A assessment is completed within mandated timeframes.

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 Manager runs eCIRTS exception reports on a weekly or monthly basis, depending on exception report, and follows-up with providers as exceptions appear. In 2022 eCIRTS had a limited number of functioning reports and not all data was available. Program Manager noted when exceptions do appear, Caregiver Specialists quickly review each exception and submit a timely report that thoughtfully addresses each exception and provide thoughtful follow-up when needed. Data accuracy for OAA IIIIE is noted to be in compliance with DOE 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 2022 from ten case files reviewed. Services entered as received in August 2022 are corroborated with a service authorization, billed invoice, and 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 delivery 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. Due to COVID-19, Caregiver Specialists offered annual reassessments by home visits or by phone if requested for all of the 2022 fiscal year. Caregiver Specialists continue to collect verification of service delivery as authorized and client satisfaction of services by phone. 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 2021 was submitted. 100% of caregivers who responded reported satisfaction with the services they are receiving and 98.8% with the services of any of the Caregiver Specialists. 100% reported they felt the services helped the person receiving care to stay in the home and 95.2% reported that the services helped the caregiver maintain or improve the quality of their life.
- D. Customer Satisfaction surveys sent to OAA IIIIE recipients in November and December 2022 were still being received by the Program Manager. Caregiver Specialists are currently reviewing and working on analysis which will be available for review during the next monitoring period.

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 verbal attestation that no grievances have been received in 2022. 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 2022. 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 letter clearly conveying services and contributions was provided to clients. 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 DOEA 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 on September 14, 2022. Billing Monitoring Summary Sheets have been completed and no issues were noted. 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 2022 which included review of licensure, insurance, vendor complaint logs, 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. The OAA IIIIE program regularly provides field experience for BSW or MSW interns who shadow the Caregiver Specialists.

Signatures:

Sara Jones
Sara Jones (Feb 1, 2023 14:51 EST)
Sara Jones, Program Manager

02/01/2023

Date

Kristina Jalazo
Kristina Jalazo, Director of Program Accountability

02/01/2023

Date