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May 24, 2022

Mitch Cabin
Personal Response Corporation
Director of Government Services
7700 N. Kendall Dr. Suite 711
Miami, FL 33156

Dear Mr. Cabin,

Enclosed is the 90 Day Review Monitoring report for the Older Americans Act Title III-B/LSP Emergency Alert Response Program.

The purpose of the 90-day review is to assess service delivery standards, identify areas of risk, and to ensure that new service providers have a good understanding of contract responsibilities. Technical assistance and additional training to be provided as needed.

Review of the documents submitted for the 90-day monitoring produced no findings and six recommendations. The cooperation of your staff timely submitting electronic documents during the desk review and monitoring process was appreciated.

Sincerely,

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

AnnMarie Winter (May 24, 2022 15:24 EDT)

Ann Marie Winter
Executive Director

Enclosures
CC: Randy Markowitz, Territory Manager





Area Agency on Aging
of Pasco - Pinellas, Inc.

Area Agency on Aging of Pasco-Pinellas, Inc.
2022 OAA/LSP
EMERGENCY ALERT RESPONSE SERVICE
90 DAY REVIEW

PROVIDER: Personal Response Corporation
DATE(S) OF VISIT: May 12, 2022
PARTICIPANT(S):
MONITOR(S): Michelle Tavares, Program Manager
FUNDING PERIOD: January 1, 2022 – December 31, 2022
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)

- As required by AAAPP and to be completed annually, provide staff training on the mandatory reporting of suspected abuse, neglect, self-neglect, and exploitation of the elderly training.
- Develop a HIPAA policy. Reference contract EA022 18. Health Insurance Portability and Accountability Act
- Provide staff training on HIPAA. Reference contract EA022 18. Health Insurance Portability and Accountability Act
- Inform all clients of their individual rights related to HIPAA. Reference contract EA022 18. Health Insurance Portability and Accountability Act
- Develop a complaint policy that addresses processing and resolution of client dissatisfaction with services. Reference contract EA022 Attachment I Statement of Work II Manner of Service Provision D 3 i. Complaint Procedures
- Develop an incident policy. Reference EA022 19. Incident Reporting and DOEA Programs Services and Handbook Chapter 3 page 84.

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 – Targeting, Prioritization, and Waitlist

Provider currently utilizes an Older Americans Act Prioritization Instrument in accordance with the Provider’s Prioritization Policy.

Response: Achieved.

The provider is utilizing a prioritization form, in accordance with the providers prioritization policy. The form changed from the initial approved form submitted with the provider application. The new prioritization form includes targeting criteria in accordance with Older Americans Act guidelines. The provider is encouraged to review the OAA training provided to ensure that definitions of each targeting category are understood, and clients are being categorized appropriately. The provider is also encouraged to review client information in eCIRTS to gather any necessary data that will help determine the appropriateness of each category.

Standard #2 – Staff Training

- Provider staff has received training pertinent to the mandatory reporting of suspected abuse, neglect, self-neglect, and exploitation of the elderly training is conducted annually for all applicable program staff.*
- Provider staff has received required HIPAA training.*

Response: Follow Up Required

- The provider did not submit documentation supporting mandatory reporting of suspected abuse, neglect, self-neglect, and exploitation of the elderly.
- The provider did not submit documentation supporting staff training on HIPAA.

Standard #3 – 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: Follow Up Required

Six (6) random client files were chosen for review, three from each county. All client files contained the required prioritization tool and client's eligibility was verified. The client files did not contain signed HIPAA documents. ***See Attachment I***

Standard #4 – Budgetary Compliance

Budgetary Compliance:

For month of February 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.

Response: Achieved.

Review of client files, service logs, monthly summaries and reports for February 2022, support that the provider has a clear audit trail. PRC team members are commended for their accuracy in eCIRTS entries.

Standard #5 – 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: Follow Up Required

- A. The provider has an approved grievance policy and procedure on file. The client grievance log was reviewed. There were no grievances reported YTD.
- B. The provider submitted a complaint log only which provides area to document a complaint, the service provider's response, and resolution. No complaints have been recorded YTD. A complaint policy was not submitted.
- C. The provider has not submitted an incident policy nor log.

Standard #6 – 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.*
- 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) regulations requiring any agency that collects social security numbers to provide a written explanation to the individual the reason for collection.*
- D. *Health Insurance Portability and Accountability Act (HIPAA) requirements including policies/procedures.*

Response: Follow Up Required

- A. Emergency Alert Services are provided in compliance with the most current DOEA Program and Services Handbook.
- B. The provider's license was reviewed on myfloridalicense.com, Florida DBPR, and indicates the license is current and active.
- C. The provider reports that they do not collect client social security numbers.
- D. The provider has not submitted their HIPAA policy.

Standard #7 – Background Screening

Provider completes Level II Background Screening, as necessary.

Response: Achieved.

The provider submitted Level II Background screenings for three staff members listed as "installer."

Signatures:

Michelle Tavares

Michelle Tavares, Program Manager

May 24, 2022

Date

Kristina Jalazo

Kristina Jalazo, Director of Program Accountability

May 24, 2022

Date

Area Agency () Client File Monitor

Organization: Pe
Unregistered Service: EA

Questions	M.A.	L.G.	H.H.	A.J.
Was an intake/registration form completed and, if applicable, updated annually?	Y	Y	Y	Y
Was client eligibility verified? (see "Service Eligibility for OAA Programs")	Y	Y	Y	Y
Has OAA priority for service delivery been established using an approved prioritization tool?	Y	Y	Y	Y
Did the worker obtain a signed Release of Information/HIPAA form?	N	N	N	N
Was the client notified of why their SS# is being collected?	N/A	N/A	N/A	N/A
Did the worker notify the client of their current Complaint/Grievance Procedure?	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?	Y	Y	Y	Y
Do notes within the client's file reflect the current status of the client?	Y	Y	Y	Y