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December 20, 2020

Ms. Jemith Rosa, President/CEO  
CARES, Inc.  
12417 Clock Tower Parkway  
Hudson, FL 34667

Dear Ms. Rosa:

Enclosed is the report for your Older Americans Act, Title IID Disease Prevention & Health Promotion Program (#EA-021). This Desk Review and Virtual monitoring visit was conducted on December 08 and 14, 2021, by Jason Martino, Director of Planning.

This report is intended to provide an overview of the program's operations as of the date of the monitoring visit. The cooperation of Gail Holton, Theresa Brock and Terry Toner and Sandra Ragland throughout the virtual visit was greatly appreciated.

All monitoring standards were adequately achieved with the exception to Standard #5 covering budgetary proposals and expenditures. Due to the program's inability to expend 100% of your OAA budgets over the last two years, we are proposing a virtual meeting on Tuesday, December 28<sup>th</sup> @ 2PM or Wednesday, December 29<sup>th</sup> @ 2PM. Please let Jason Martino, Director of Planning know which date is agreeable so he can coordinate a TEAMS Meeting. Following this virtual meeting, CARES will need to develop and submit a corrective action plan by a date determined at this meeting.

Your commitment to serving the Health and Wellness needs of the elderly in Pasco and Pinellas Counties is greatly appreciated. Your staff are commended for their quality and meaningful work throughout the year. Should you have a question or concern about the monitoring report, please do not hesitate to contact our office.

Sincerely,

  
AnnMarie Winter (Dec 20, 2021 12:35 EST)

Ann Marie Winter  
Executive Director

Encl.

CC: Gail Holton, COO, CARES, Inc.

## 2021 OAA IID Disease Prevention & Health Promotion Programmatic Monitoring Standards

<b>Date of Visit(s):</b>	December 08 & 14, 2021
<b>Date of Report:</b>	December 20, 2021
<b>Provider:</b>	CARES, Inc.
<b>Monitor:</b>	Jason Martino, Director of Planning
<b>Contract Review Period:</b>	January 01 through December 31, 2021
<b>Participants:</b>	Gail Holton, Chief Operating Officer, CARES, Inc. Theresa Brock, Health & Wellness Coordinator, CARES, Inc. Saundra Ragland, CARES MOB Coach Terry Toner, CARES MOB Coach

<b>Standard #1</b>	<b>Compliance Measure</b>
A staff member is designated to act as liaison and facilitator for health promotion programs between volunteer organizations and community agencies.	Achieves <input checked="" type="checkbox"/> Partially Achieves <input type="checkbox"/> Not Achieved <input type="checkbox"/> Not Applicable <input type="checkbox"/> Follow-Up Required <input type="checkbox"/>
<p><b>Description:</b></p> <p>The most current organizational chart illustrated in the 2021 OAA Grant Application denotes several key individuals working with the program in both Pinellas and Pasco Counties. The following positions are reflected: "Project Director", "Health &amp; Wellness Coordinator", "Health &amp; Wellness Educators", and a "Health and Wellness Assistant". Generally, the Program's Project Director is the liaison between CARES, Inc. and the AAAPP.</p> <p>To date, in absence of a formal Project Director, the Chief Operating Officer (COO), Gail Holton has been the AAAPP Director of Planning's primary contact for programmatic purposes. Additionally, CARES has hired three "Ambassadors" for the Title IID Program. These Ambassadors are the key linkage between community organizations and potential venues for Evidenced Based Services within Pasco and Pinellas Counties.</p>	

Standard #2	Compliance Measure
<p>All programmatic reports are correct and submitted timely to AAAPP.</p> <ul style="list-style-type: none"> <li>a. DOEA Monthly Report</li> <li>b. AAAPP OAA Quarterly Report</li> <li>c. AAAPP Annual Volunteer Report</li> </ul>	<p>Achieves <input checked="" type="checkbox"/> [X]  Partially Achieves <input type="checkbox"/> [ ]  Not Achieved <input type="checkbox"/> [ ]  Not Applicable <input type="checkbox"/> [ ]  Follow-Up Required <input type="checkbox"/> [ ]</p>
<p><b>Description:</b></p> <ul style="list-style-type: none"> <li>a. The COO, acting as the Project Director submitted DOEA monthly reports throughout CY2021 punctually and reconcile easily to inputted CIRTS data.</li> <li>b. The IIID Provider is required to submit a Quarterly report every 10<sup>th</sup> of January, April, July, and October. As of the date of this monitoring report, the provider has successfully submitted all and quarterly reports covering the 1<sup>st</sup> through 3<sup>rd</sup> quarter, detailing their intent to meet client, targeting, and budgetary proposals, per the approved service provider application.</li> <li>c. The Provider is required to submit a report on an annual basis including the number and type of service(s) where volunteers are utilized. This Volunteer Report is due in the current Calendar Year yet covers CY2020. The provider did submit the CY2020 Volunteer Report punctually.</li> </ul>	

Standard #3	Compliance Measure
<p>Highest Level Evidence-Based Programs meet program requirements:</p> <ul style="list-style-type: none"> <li>a. Marketing is appropriate and contains mandatory elements.</li> <li>b. Required licensure is current and on file.</li> <li>c. Credentials of program facilitators.</li> <li>d. Provider has procedures in place to ensure the fidelity of programs and procedures are followed.</li> <li>e. The Program utilizes appropriate DoEA Sign-In Sheets and accurately accounts for eligible clientele.</li> </ul>	<p>Achieves <input checked="" type="checkbox"/> [X]  Partially Achieves <input type="checkbox"/> [ ]  Not Achieved <input type="checkbox"/> [ ]  Not Applicable <input type="checkbox"/> [ ]  Follow-Up Required <input type="checkbox"/> [ ]</p>
<p><b>Description:</b></p> <p>During FY2021, CARES has conducted (5) Highest Level Evidence-Based Programs within the entire PSA:</p> <ul style="list-style-type: none"> <li>1. Chronic Disease Self-Management Program (CDSMP)</li> <li>2. Diabetes Self-Management (DSMP)</li> <li>3. Chronic Pain Self-Management (CPSMP)</li> <li>4. Matter of Balance (MOB)</li> <li>5. Tai Chi/Tai Ji Quan Moving for Better Balance (TCMB)</li> </ul>	

**Of those, the monitor reviewed the following for compliance with requirements:**

1. Pinellas – Matter of Balance – Dates (10/5/21 – 10/29/21) – Imperial Palms – 9 Starters/4 Completers (44.4%)
2. Pasco/Pinellas (Virtual) – Chronic Disease Self-Management – Dates (03/20/21 – 04/24/21) – 8 Starters/2 Completers (25%)
3. Pasco (Virtual) - Diabetes Self-Management – Dates (09/01/21 – 10/06/21) – 8 Starters/5 Completers (62.5%)

It should be noted that based on the (3) monitored classes, the completion rates for class participants were considerably lower than the annualized completion rate of 62.8%. The provider continues to strive to increase completion rates in light of the COVID19 Pandemic still effecting service delivery in CY2021.

**A. Marketing is appropriate and contains mandatory elements:**

All (3) Evidenced Based (EB) events reviewed were appropriately marketed. Marketing contained the required information: "Event Title", "Date", "Time", "Length of Event", "Location, Date, and Address", "How to Register" & "Instructions on if Further Information is Needed".

**B. Required licenses are on file:**

For the (3) services monitored, the AAAPP is in receipt of current licenses for the Self-Management Programs umbrella of services, as well as the Matter of Balance (MOB) Program.

**C. Credentials of program facilitators:**

Program records listed the trainers for the programs reviewed. Appropriate credentials were on file for these trainers.

**D. Provider has procedures in place to ensure the fidelity of programs:**

To ensure program fidelity, the provider has established and uses the following forms for all EB Events:

1. Checklist for the instructor to complete at the beginning of the program.
2. Checklists are completed by the Health and Wellness Educators at the end of each final class and/or by the Health and Wellness Coordinator sometime during the class date range and conducted on a random basis yet covering each of the (5) offered EB classes.
3. Prior to the provider's monthly report being submitted to the AAAPP for reconciliation, the Project Director further reviews the fidelity of each completed class and for purposes of requesting reimbursement.
4. Additionally, the Project Director and/or Health & Wellness Coordinator completes a final fidelity review before processing the monthly report with a submission to the DOEA Contract Manager.

The records reviewed for the (3) programs verified:

1. All classes met the standards for minimum and maximum number of participants.
2. All classes and records complied with DOEA standards.
3. All required client forms were completed and on file.
4. All clients met eligibility requirements.
5. The correct number of program participants and completers was reported in the Provider's monthly report.
6. The programs were billed correctly in CIRTS.

**E. The Program utilizes DOEA Sign-In Sheets and accurately accounts for eligible clientele:**

In review of the (3) services, it was observed that the provider is utilizing the appropriate and applicable DOEA formatted sign-in sheets.

Standard #4	Compliance Measure
<p>The Program records/inputs data appropriately</p> <ol style="list-style-type: none"> <li>a. Services are accurately recorded in CIRTS.</li> <li>b. Information is entered into the NCOA CHA Community online data system when applicable.</li> </ol>	<p>Achieves <input checked="" type="checkbox"/></p> <p>Partially Achieves <input type="checkbox"/></p> <p>Not Achieved <input type="checkbox"/></p> <p>Not Applicable <input type="checkbox"/></p> <p>Follow-Up Required <input type="checkbox"/></p>
<p><b>Description:</b></p> <ol style="list-style-type: none"> <li>a. CIRTS Data on a monthly basis is inputted accurately and reflects the full completion of an EB class and units.</li> <li>b. Information is entered in to the NCOA CHA Community Online database when EB classes are complete and only for the Self-Management classes. Supporting documentation of the aforementioned is included with the submission of the monthly report and observed during monitoring</li> </ol>	

Standard #5	Compliance Measure
<p>Provider is serving or has a plan to serve the number of proposed units as identified in the service provider application.</p>	<p>Achieves <input type="checkbox"/></p> <p>Partially Achieves <input type="checkbox"/></p> <p>Not Achieved <input checked="" type="checkbox"/></p> <p>Not Applicable <input type="checkbox"/></p> <p>Follow-Up Required <input checked="" type="checkbox"/></p>
<p><b>Description:</b></p> <p>Prior to the overall expenditure summary, the monitor reviewed service units for the month of October 2021, including (5) completed EB classes and 70 Units comprising of the "Telephone Reassurance (TERACV)" service. All 5 class units were appropriate and billed correctly. The monitor</p>	

reviewed supporting documentation for TERA units billed and all units cross walked easily to clients who were currently active and/or previously served under the IIID Program.

Based upon end of the year expenses for CY2020, the IIID provider was not able to expend approximately \$152,000 in funding due to the impacts of COVID19. To date in CY2021, the program is expected to incur another sizeable surplus due to the continuation of COVID19 and the increase to their CY2021 base allocation including the carry forward (Surplus) from the previous fiscal year.

This large anticipated surplus poses concerns for CY2022 and the AAAPP is requesting a corrective action plan (CAP) demonstrating how the CY2022 OAA allocation can be 100% expended and including the potential allocation of Carry Forward and American Rescue Plan (ARP) funding.

Upon CARES' receipt of this report, the Director of Planning will coordinate a virtual meeting with the CARES Chief Operating Officer to discuss the measurable items necessary within the Corrective Action Plan including a due date.

Standard #6	Compliance Measure
<p>The provider establishes collaborations and partnerships with other agencies to assist with Evidence Based Disease Prevention and Health Promotion activities. Documentation is maintained for partnerships listed in the DOEA Report.</p>	<p>Achieves <input checked="" type="checkbox"/> [X]            Partially Achieves <input type="checkbox"/> [ ]            Not Achieved <input type="checkbox"/> [ ]            Not Applicable <input type="checkbox"/> [ ]            Follow-Up Required <input type="checkbox"/> [ ]</p>
<p><b>Description:</b></p> <p>The Monitor reviewed back-up documentation regarding partnerships the Program has created and/or maintained. Not all partnerships have formal agreements or MOUs/MOAs. The review of two distinct partnerships occurred and the correspondence reflecting an agreement is acceptable. All documentation is maintained by CARES for partnerships listed in the monthly DOEA Report. Partnerships reviewed were:</p> <ol style="list-style-type: none"> <li>1. Pinellas County – “Tanglewood”</li> <li>2. Pasco County – “Bethlehem Housing”</li> </ol>	

Standard #7	Compliance Measure
<p>Consumer satisfaction and effective delivery of service has been verified through:</p> <ol style="list-style-type: none"> <li>a. Client Interview</li> <li>b. Review of consumer satisfaction surveys. (Evaluations and/or pre and post surveys)</li> </ol>	<p>Achieves <input checked="" type="checkbox"/> [X]            Partially Achieves <input type="checkbox"/> [ ]            Not Achieved <input type="checkbox"/> [ ]            Not Applicable <input type="checkbox"/> [ ]            Follow-Up Required <input type="checkbox"/> [ ]</p>
<p><b>Description:</b></p>	

- A. The Monitor did not have an opportunity for a one on one participant interview, however, the MOB coaches did discuss aspects of the course delivery to gauge satisfaction from the participants. Participants agreed that the interactions and exercises were what they liked best.
- B. In review of the (3) EB services' documentation, the monitor concentrated on feedback to the program based upon the Post Surveys. All comments reflected satisfaction with the content of classes, instructors, and manner of service delivery. One monitored virtual class had no associated surveys due to client's reluctance to send them back.

Standard #8	Compliance Measure
Verify that all corrective actions and follow-up have been appropriate, adequately and timely implemented.	Achieves [ ] Partially Achieves [ ] Not Achieved [ ] Not Applicable [X] Follow-Up Required [ ]
<b>Description:</b>  They are no corrective actions or follow-up stemming from the monitoring visit occurring in December of 2020.	

Standard #9	Compliance Measure
Service observation indicates appropriateness in the manner it is being conducted. <ul style="list-style-type: none"> <li>a. Provider follows the fidelity of the program.</li> <li>b. Provision of space allotted for class was appropriate.</li> <li>c. Participants were allowed to engage and participate.</li> </ul>	Achieves [X] Partially Achieves [ ] Not Achieved [ ] Not Applicable [ ] Follow-Up Required [ ]
<b>Description:</b>  <ul style="list-style-type: none"> <li>A. The monitor observed a "Matter of Balance" class and completed a fidelity monitoring form. Please see "Fidelity Checklist" accompanying this report.</li> <li>B. The space observed was appropriate.</li> <li>C. The monitor observed promotion of and consistent interaction by each of the participants.</li> </ul>	

Standard #10	Compliance Measure
Participant completion analysis. <ul style="list-style-type: none"> <li>a. Provider has a plan to achieve appropriate participant class completion percentages</li> <li>b. Provider demonstrates effectiveness regarding participant class completion percentages</li> </ul>	Achieves [X] Partially Achieves [ ] Not Achieved [ ] Not Applicable [ ] Follow-Up Required [ ]
<b>Description:</b> <ul style="list-style-type: none"> <li>A. Cares, Inc. does have a plan to achieve appropriate participant class completion percentages</li> <li>B. Based on review of the monthly report and a tabulation of the entire year to date, Cares, Inc. continues to strive to retain participants in each class. While some completion rates per class varied from high to low, the overall as of the date of this report is, 62.8%</li> </ul>	

<b>Completed By:</b>	Jason Martino, Director of Planning, AAAPP 
<b>Date:</b>	December 20, 2021



### Fidelity Checklist for Pasco & Pinellas County OAA Title IID Evidenced Based Classes

<b>Date Fidelity Monitored:</b>	December 14, 2021
<b>Course Start Date:</b>	November 23, 2021
<b>Name of Instructor(s):</b>	Terry Toner & Saundra Ragland
<b>Location of Course:</b>	Stone Hedge Mobile Home Park – Tarpon Springs, FL
<b>Fidelity Monitored by:</b>	Jason Martino, Director of Planning

Section 1. (General)				
		Yes	No	Comments
1.	Is a sign-in sheet being maintained for the course?	X		Observed
2.	Did all participants at the start of the class complete course specific required paperwork?	X		

Section 2. (Facility/Venue/Environment)				
		Yes	No	Comments
1.	Does the space provide accommodate the class in total, comfortably?	X		Held in Library of Mobile Home Park Recreation Center. Adequate space including tables, sturdy chairs and HVAC was comfortable.
2.	Does the space provided have accessible restrooms?	X		
3.	Was the space adequately lighted?	X		Well lighted
4.	Was the space quiet so class instruction could be easily heard?	X		

Section 3. (Class Fidelity)				
		Yes	No	Comments
1.	Did the instructors complete required training and obtain credentials?	X		MOB Coaches had appropriate credentials
2.	Was the appropriate amount of instructors' present?	X		Two Coaches provided instruction

3.	Did the instructors start the class timely?	X		Allowed for my quick introduction as well
4.	Did instructors follow the curriculum per required fidelity?	X		
5.	Did instructors have appropriate class materials for participants, if applicable?	X		Each participant had a class manual. The class went over homework associated with MOB.
6.	Was the class conducted in the required time interval?	X		
7.	Were participants encouraged to participate, interact in meaningfully?	X		Participants were encouraged and engagement was observed.

### Reviewer's Additional Comments

The Monitor observed a "Matter of Balance" class held in Tarpon Springs, FL. Eleven participants were in attendance comprising of 9 females and 2 males all aged 60 and older. The class was interactive and balanced with comradery. Instructors went over course materials, homework and inquired about satisfaction with how the course has been presented thus far. All participants exclaimed that the interactive nature and the exercises were their favorite part.