Agenda Item #7 G (2)
08/16/2021

Area Agency on Aging
of Pasco - Pinellas, Inc.

9549 Koger Blvd, Suite 100, St. Petersburg, FL 33702 • 727-570-9696 • www.agingcarefl.org

July 8, 2021

Tawnya Martino, ADRC Director
Area Agency on Aging of Pasco-Pinellas, Inc.
9549 Koger Boulevard, Suite 100
St. Petersburg, FL 33702

Dear Mrs. Martino,

Enclosed please find the 2021 programmatic monitoring report for the Information and Assistance/Referral & Intake and Screening departments completed by the AAAPP's Program Manager, Michelle Tavares.

This report is intended to provide an overview of the ADRC's operations as of the date of the monitoring visit. It should also be a useful instrument in the evaluation of your programs.

Your program is commended for meeting all standards for contract compliance and service delivery.

Should you have any questions or comments concerning this report, please feel free to contact the Program Manager at (727) 570-9696, extension 271. Thank you for your continued commitment to serve the seniors of Pinellas & Pasco County.

Sincerely,

AnnMarie Winter (Jul 11, 2021 09:09 EDT)

Ann Marie Winter
Executive Director

Department of ELDER AFFAIRS
STATE OF FLORIDA

Area Agency on Aging
of Pasco - Pinellas, Inc.

Area Agency on Aging of Pasco-Pinellas, Inc.

2021 AAAPP ADRC HELPLINE AND INTAKE DEPARTMENT

PROVIDER:	AAAPP ADRC Helpline and Intake Department
DATE(S) OF VISIT:	A desk review was completed
PARTICIPANT(S):	Desk review documentation provided by Tawnya Martino, ADRC Director, AAAPP
MONITOR(S):	Michelle Tavares, OAA 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)*

- There were no recommendations.

II. Findings/Corrective Action

(Findings result in a formal corrective action plan)

- There were no findings, and no corrective action is necessary.

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: There are no unresolved issues from the June 25, 2020, monitoring.

Standard #2 – Outreach and Targeting

The Helpline is the entry point for the ADRC and serves the entire community of older individuals, particularly older individuals with the greatest economic social need, older individuals with the greatest economic need, older individuals with limited English proficiency, older individuals residing in rural areas, older individuals at risk of institutional placement, and adults with a disability. The Helpline and Intake have documentation of:

A. *Outreach to increase awareness of the Helpline, using a variety of methods.*
B. *Special needs groups being identified, and targeted outreach being provided. At least 2 outreach projects targeting low-income older individuals including low-income minority, older individuals with limited English proficiency and older individuals residing in rural areas must be completed annually.*
C. *I&R service provided to targeted individuals.*
D. *Procedures address how APCL clients are released to active status in order of Prioritization.*

Response: Achieved

A. The ADRC's Outreach Activity Reports for 2020 and 2021 show that outreach activities were completed virtually due to the Covid pandemic. Three (3) in person outreach activities were documented in 2021.
B. ADRC's Outreach Activity Reports show 30 outreach events in 2020 and 13 YTD. Outreach impacting all targeted audiences was limited due to Covid.
C. I & R Refer Reports for 5/1/20 to 4/30/21 confirm that I&R provided services to targeted individuals. During this span of time, a total of 71,347 contacts were made, resulting in the following statistics:

I. 3715 individuals, or 5.21% of all contacts, identified their race as a minority (Black, Asian/Pacific Islander, Native American, Other) and 1080 individuals identified their ethnicity as Hispanic during phone contacts with the Helpline.

II. 3,116 individuals, or 4.3% of all contacts, self-reported that their monthly income was at or below $1,585 to designate low-income.

III. 1,791 individuals or 2.5% of all contacts were made with callers who reside in rural areas (based on zip codes).

IV. 285 individuals, or .4% of all contacts were Spanish speaking.

D. The ADRC operates under Instruction 104b, outlining prioritization and the release procedures for the state funded, general revenue programs – Community Care for the Elderly (CCE), Home Care for the Elderly (HCE) and Alzheimer's Disease Initiative (ADI).

Standard #3 – Staff Training

The Helpline has a training plan to ensure that staff receives training pertinent to the performance of required functions. Training is consistent with ABC's or I&R published by AIRS or the Department of Elder Affairs Information and Referral/Assistance training module:

A. Pre-service training
B. Communication/interview skills, Customer service skills, Community Resources
C. Mandatory reporting of suspected abuse, neglect, self-neglect, and exploitation of the elderly

Intake has received required training of:

D. Pre-service training
E. DOEA web-based Assessment Training, with a score of 90% or higher
F. Mandatory reporting of suspected abuse, neglect, self-neglect, and exploitation of the elderly.

Response: Achieved

Helpline:

A. Three (3) new Helpline staff have been hired since June 1, 2020. All pre-service training checklists were reviewed. One employee, S.O., was recently hired and is in the final phase of training during this monitoring. The other two employees have completed all Pre- service training. Training is consistent with AIRS module.

B. Pre-service training documents indicate that communication/interview skills, customer service skills and community resources are all reviewed during pre-service training for all new Helpline staff.

C. Mandatory reporting training was held by Victim Advocate Coordinator, S.P., on May 24, 2021. Another training is scheduled for July 2021 to ensure that staff who were unable to attend the May 24th date are trained.

Intake:

D. There has been two new Intake staff members hired since last monitoring. Pre-service training documentation for both new staff members were reviewed and completed. Training is consistent with AIRS module.

E. Two new Intake staff members have been trained on DOEA 701 B Assessment. Both certificates were reviewed and are dated November 2020.

F. Two Intake staff members were trained on requirements of mandatory reporting. ARTT/APS training certificates are on file.

Standard #4 – Programmatic Reporting

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

A. Quarterly I&A/R reports to the DOEA by the 10th
B. Monthly SHINE reports to the DOEA
C. Monthly units of I&R in CIRTS, supported by REFER reports.
D. Monthly SMMCLTCP reports to the DOEA.
E. Monthly report of language translation service use (Propio) to DOEA by the 9th
F. Quarterly QA report to DOEA of consumer satisfaction service survey for clients receiving 701S screening and data on QA review of staff performing screening calls.

Response: Achieved

A. 2020 Q3/Q4 and 2021 Q1 reports were reviewed and found to be accurate. The ADRC submitted all quarterly reports to DOEA by the 10th as supported by email documentation.

B. A three-month sample of SHINE reports were reviewed (July 2020, October 2020, January 2021) and found accurate. Reports were submitted to DOEA as supported by email documentation.

C. A three- month sample of Monthly I&R Units in CIRTS were reviewed (July 2020, October 2020, January 2021) and are supported by monthly reports submitted to AAAPP Fiscal Dept. Reports were found accurate.

D. A three-month sample of Monthly SMMCLTCP reports were reviewed (July 2020, October 2020, January 2021) and found accurate. Reports were submitted to DOEA as supported by email documentation.

E. A three-month sample of Language Translation Service reports were reviewed (July 2020, October 2020, January 2021). Reports were found accurate and submitted to DOEA by the 9th as supported by email documentation.

F. FY 20-21 Q1, Q2, and Q3 reports of customer satisfaction service survey were submitted to DOEA as supported by email documentation. Documentation provided also supports that a QA review of staff performing screening calls was performed for each quarter.

Standard #5 – Service Provision

The Helpline meets DOEA standards for staffing and service provision:

A. *The Helpline has a minimum of 2.5 FTE non-exempt staff trained to provide I&R services.*
B. *Formal, written job descriptions outlining I&R and Intake functions are dated within the last 2 years.*
C. *Procedures confirm that hours of operation are 8:00am to 5:00pm Monday through Friday, except state and national holidays and that DOEA is notified of closures during regular office hours.*
D. *Voicemail system for the Helpline offers options for urgent calls and an option for callers to leave a voice mail while in queue.*
E. *Helpline procedures address return of afterhours and voice mail messages.*
F. *The Helpline maintains a record of all voice mail messages received, including date received and telephone number.*
G. *Helpline procedures define 'timely' service and require I&R Specialists to ensure inquirers are served in a timely manner.*
H. *Procedures address privacy, confidentiality, and security of personal information and compliance with HIPAA rules.*
I. *Policy for use of Florida Relay for individuals and groups who have special needs including communication methods for people with hearing or speech impairment.*

Response: Achieved

A. The Helpline currently has 6 full-time employees dedicated to I&R services. In addition, the Helpline has 1 staff member who works 30 hours per week.
B. Formal, written job descriptions outlining I&R and Intake were reviewed. Job descriptions outline I&R and Intake functions and are dated within the last two years.
C. ADRC Instruction Procedures 101a and 101b were reviewed. Procedures confirm that hours of operation are 8:00 am. To 5:00 p.m. Procedures provide instructions for office closures, including notification to DOEA.
D. Voicemail system was observed and offers options for urgent callers and option to leave a voice mail while in queue. The message advises callers experiencing police, fire, or medical emergencies to hang up and dial 9-1-1.
E. ADRC Instruction Procedure 102a outlines return of after-hour calls and voice mail messages.
F. Voicemail records were reviewed for sample months July 2020, October 2020, and January 2021. ADRC maintains a record of all voicemail messages received including date received and telephone number.
G. ADRC Instruction Procedure 102a defines timely service and the procedure provides instructions to ensure callers are served in a timely manner.
H. ADRC Instruction Procedure 101a addresses privacy, confidentiality, and security procedures in accordance with HIPAA standards.

I. ADRC Instruction Procedure 101c provides the policy and instructions on the use of Florida Relay and confirms that the AAAPP is a registered business partner of Florida Relay Service.

Standard #6 – Contact Record Compliance

Contact records sampled show compliance with requirements for service delivery:

Helpline:

A. *Three resources are provided when available.*
B. *For-profit resources are provided when available.*
C. *Documentation for units of Referral show that follow-ups are provided within 14 days.*

Intake:

D. *Enrollment screens show that the client was referred to/made APCL for program(s) that are appropriate for the needs identified.*
E. *Discussion of eligibility and appropriate steps to determine eligibility.*

Response: Achieved

Helpline:

A. The Helpline specialist was observed providing caller with three (3) placement assistance resources. Specialist documented in Refer that placement resources were provided.
B. The Helpline specialist was observed providing information on private pay resources. Caller declined private pay referrals. Specialist documented appropriately in Refer.
C. Refer statistical reports for period 5/1/20 to 4/30/21 were reviewed. Of the 71,347 contacts made within the date range, 166 or .23% of the follow up calls were made after 14 business days.

Intake:

D. CIRTS enrollment screen was reviewed after the Intake observation and the client who was observed being screened was entered on all appropriate waiting lists.
E. The Intake Specialist was observed discussing eligibility for state and federal programs with the caller being screened. Discussion of the appropriate steps to determine eligibility for the programs was also observed.

Standard #7 – Responsiveness

Intake meets standards for responsiveness:

A. *APS medium and low risk referrals – enter 701S screening or demographic assessment into CIRTS within 14 calendar days.*
B. *Helpline Referrals – Staff attempt to contact caller within 3 business days to complete a 701S or document unsuccessful attempts to contact within 3 days, as workload demands allow.*
C. *At least 3 telephone attempts are made to contact clients requesting screening. A letter is sent to those who are not reached with information on how to contact staff for screening and the date that the request will be closed.*
D. *Re-screening of clients who are APCL for case managed programs: APCL clients are rescreened on an annual basis, regardless of Priority Score. Annual re-screening is conducted within 395 days of due date as workload demands allow.*
E. *Staff strive to conduct 701S screening within 14 business days and annual re-screening within 395 days of due date as workload demands allow.*
F. *All contacts, including unsuccessful attempts, are documented in the Refer system.*
G. *Clients with additional needs are sent to the Helpline for resources.*

Response: Achieved

A. APS referral report for the monitoring year was reviewed. Intake received a total of 36 medium and low risk referrals. Report indicates that five (5) of the referrals had assessment completed after 14 calendar days. Upon further review of Refer documentation, Intake staff adhered to procedures and made contact attempts to complete assessments for the five referrals and for circumstances such as client hospitalization or unsuccessful contact attempts, assessments were completed after the 14-calendar day requirement.

B. Screenings are now scheduled through TimeTap at the Helpline level during the initial call therefore ensuring scheduling within three (3) business days.

C. Refer documentation reviewed. Documentation supports that three (3) telephone attempts are made to contact clients requesting screening. Documentation also supports that a letter is sent to those who are not reached with information on how to contact staff for screening.

D. ADRC Instruction Procedure 104ac ensures that annual re-screenings are conducted within 395 days of due date as workload demands allow.

E. CIRTS reports were reviewed for the months of July 2020, October 2020, January 2021. A total of 881 clients were screened or rescreened. Of the 881 clients, 445 were marked as late on the CIRTS report. Upon further review of Refer documentation, documentation supports that staff strive to complete screenings and re- screenings within the required time frame. Late screening or re-screenings can be due to reasons such as difficulty contacting client, client hospitalization, etc.

F. Refer documentation was reviewed. Documentation supports those contacts including unsuccessful contact attempts were documented appropriately.

G. The intake staff refer clients to the Helpline for resources when the client is identified as having additional needs.

Standard #8 – Observation of Contacts

Observation of contacts shows that the Helpline staff provides accurate information to inquirers in response to direct requests for such information. Further, observation of contacts shows that Intake staff provides screening, prioritization, and options counseling.

Response: Achieved

Program Manager observed two (2) Helpline staff. Staff was observed adhering to ARDC procedure 102(a) which includes instructions for providing accurate information and connecting the inquirer with resources that can meet the needs of the inquirer.
Program Manager observed one (1) Intake staff. Intake staff was observed adhering to ADRC procedure 104a and included screening a client, reviewing prioritization, and providing options counseling. Please refer to **attachments I, II, and III.**

Standard #9 – Crisis

The Helpline shall be prepared to assess and meet the immediate, short-term needs of inquirers who are experiencing crisis situations and contact the Helpline service for assistance:

A. Procedures address the handling of crisis calls.
B. Staff has the skills to recognize when an inquirer is experiencing a crisis, to determine whether the individual is in immediate danger, and to take steps to ensure that inquirer is safe.
C. Lethality assessment is used.
D. Crisis calls are documented in REFER.
E. Procedures document a protocol for debriefing I&R specialists, as needed, following a crisis call.

Response: Achieved

A. ADRC Instruction Procedure 101c (II.) outlines the instructions for handling of crisis calls.
B. Documentation supports that Helpline staff members receive training on ADRC Instruction 101c which outlines recognizing when an inquirer is experiencing a crisis or is in immediate danger and procedures to follow to ensure the inquirer is safe.
C. A lethality assessment tool, received from 2-1-1 Tampa Bay Cares, is utilized and in Refer for staff to access and complete during crisis calls.
D. Refer statistical report shows crisis calls documented in Refer from May 1, 2020, to April 30, 2021.

E. ADRC Instruction Procedure 101c (II.E.2.) outlines the debriefing process following a crisis call.

Standard #10 – Program Evaluation and Quality Assurance

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

A. *Tracking key performance measures, including Helpline call volume, abandoned call rate, average speed of answer and average talk time.*
B. *Consumer satisfaction surveys are collected through a statewide system. I&R specialists and Intake/screening staff offer every client the opportunity to complete a 5-question phone survey at the end of the call. Data is available through Plum Survey website and is collected for submission to DOEA.*
C. Procedures address the handling of complaints.
D. A process is in place to ensure a random selection of live or recorded calls are reviewed and staff provided feedback.

Response: Achieved

A. The ADRC Client Tracking reports were reviewed for sample months of July 2020, October 2020, and January 2021. Documentation supports those reports were submitted to DOEA monthly and includes the tracking of key performance measures.
B. Consumer Satisfaction surveys are collected through the PLUM survey. Staff were observed offering the clients the opportunity the answer the 5-question survey at the end of the call. Documentation supports that the information and is collected and submitted to DOEA.
C. ADRC Instruction Procedure 101c addresses the handling of complaints.
D. ADRC Instruction Procedure 101d outlines the QA process including call monitoring. A call monitoring tool was provided and reviewed.

Standard #11 – Resource Database Management

The Helpline meets standards included in the DOEA contract for maintaining the resource database:

A. *Inclusion/Exclusion criteria*
B. *Data Elements*
C. *Taxonomy*
D. *Maintenance and updating information.*

Response: Achieved

A. The ADRC Integrated Statewide Information & Referral Database Inclusion/Exclusion Criteria was provided and reviewed.
B. Application for agencies or businesses applying to be in the Refer database, including required data elements, were provided, and reviewed. Information requested from

agencies or businesses applying meet the minimum standards set forth in the statewide inclusion/exclusion criteria.

C. Data spreadsheet and reports were provided and reviewed. Reports provided taxonomy terms currently included in the REFER database and the number of times each term has been used.

D. The database is reviewed by ADRC Helpline Manager. Refer database list provided and show that there are currently 305 organizations available in the I&R database within PSA5. The database is updated regularly to ensure data is as current as possible.

Standard #12 – Disaster Preparedness

The Helpline shall provide I&R services to the community during (when appropriate) and following a disaster or other emergency. Review policies and procedures to confirm that the Helpline and Intake:

A. Are included in the emergency operations and continuity of operations addressed through the AAAPP COOP and disaster plans.
B. Has a plan for relocation in the event a disaster impacts the Helpline's site, including mutual aid agreements such as an MOU if alternative sites are at other agencies.
C. Participates in a statewide mutual assistance MOU to handle I&R functions.
D. Includes local, state, and national disaster related resources in the database.

Response: Achieved

A. ADRC Instruction Procedure 101b provided outlines Disaster Response plan. Helpline and Intake are included in the emergency operations and continuity of operations as addressed through the AAAPPP COOP and disaster plans.

B. ADRC Instruction Procedure 101b outlines relocation plan during crisis, which includes instructions for ADRC staff to relocate to the offices of the DOEA CARES Unit 5.

C. ADRC maintains a statewide Memorandum of Understanding for mutual assistance to handle I & R functions. MOU was provided and reviewed.

D. Documentation was provided from the Refer database for disaster and recovery related resources, containing local and statewide resources such as County Emergency Management information, 2-1-1, Florida Emergency Management, Red Cross, Salvation Army, and information on emergency shelters by PSA.

Standard # 13 – Cooperative Relationships

The ADRC Helpline and Intake maintains cooperative relationships within the I&R system and service providers:

A. Membership in AIRS/FLAIRS
B. MOU with 2-1-1 provider(s).
C. Provides screening to access OAA funded programs.
    i. Procedures address handling OAA Referrals

ii. Review of OAA waitlist shows clients with a location code of "HW" which indicates that the enrollment line was created by Intake.

D. Procedures address how DCF CCDA and HCDA clients are transferred as they turn 60.
   i. Documentation CCDA/HCDA of cases transitioned to CCE or HCE.

Response: Achieved

A. A copy of the current AIRS Membership, expiring on 12/31/21, was provided and reviewed.

B. An MOU between 2-1-1 Tampa Bay Cares was provided and reviewed.

C. The ADRC provides "no wrong door" access to OAA funded programs:
   i. ADRC provided Instruction 104a (IV.B.) which addresses the process for managing of Older American Act referrals.
   ii. A review of 'Priority Ranking for APCL Clients' CIRTS Report for Pinellas Opportunity Council (51021) with the location code 'HW' confirms that AAAPP Intake staff are appropriately enrolling clients on OAA funded program waitlists.

D. ADRC provided Instruction 104d which addresses the handling of Community Care for Disabled Adults (CCDA) and Home Care for Disabled Adults (HCDA) Aging Out referrals. CCDA/HCDA clients are marked as Aging Out referrals in CIRTS and receive priority for services.
   i. Documentation is maintained on the "Aging Out" log by the Intake Department.

Standard #14 – Regulatory Compliance

Procedures document that I&A/R and Intake are in Regulatory Compliance with:

A. Florida Statute 119.071(5) requiring any agency that collects social security numbers to provide a written explanation to the individual the reason for its collection.

B. Health Insurance Portability and Accountability Act (HIPAA) requirements

Response: Achieved

A. If the Helpline is collecting a social security number, they explain why the social security number is being collected in accordance with Florida Statute 119.071(5). A packet is also mailed to the client with written explanation to the reason for collecting number.

B. ADRC Instruction 101a addresses HIPAA requirements. Intake mails HIPAA packets to the client or their designated representative, requesting them to sign an acknowledgement of receipt of and mail back to the AAAPP. Also, at the time of the screening appointment is scheduled, the caller is asked by ADRC staff if they would consent to receiving their HIPAA information electronically and the answer is recorded in TimeTap scheduling platform. Callers then receive a text or email. The HIPAA form will request callers to acknowledge receipt of by typing their name and phone number.

Signatures:

Michelle Tavares
Michelle Tavares (Jul 8, 2021 16:04 EDT)

Michelle Tavares, Program Manager

Jul 8, 2021
Date

Kristina Jalazo

Kristina Jalazo, Director of Program Accountability

Jul 8, 2021
Date

Area Agency on Aging of Pasco - Pinellas, Inc.

Helpline Observation Checklist
2021 Monitoring Tool

I&R Specialist: Ashley Bigby
Date observed: 6/2/2021
Task observed: Information or Referral

STANDARD	NOTES/ACHIEVEMENT
a) Identify themselves and the Helpline according to agency guidelines.	The specialist identified herself, the agency, and the Helpline appropriately at the beginning of the call.
b) Establish rapport with the inquirer and use active listening skills and empathy to discern the presenting problem.	Caller expressed that he needed more help in caring for his father who was receiving hospice services. Specialist was empathetic to situation and actively listened to caller to identify his needs.
c) Respond to each inquirer in a professional, nonjudgmental, culturally appropriate, and timely manner.	Specialist was very professional. She was nonjudgmental. Caller identified himself as being Portuguese. Specialist was culturally appropriate. Call was managed in a timely manner.
d) Use clear, jargon-free language and an appropriate tone of voice and inflection to convey empathy and engagement with the inquirer's situation.	The specialist was engaged with caller. She conveyed empathy to caller's situation. She used appropriate tone. It was noted that the caller stated, "I don't know what Private Pay is". Specialist provided thorough explanation.
e) Confirm whether there are specific preferences or requirements such as language needs, evening or week-end hours, proximity to public transportation or disability access.	Specialist provided caller with different time and day options for scheduling screening.
f) Clarify and confirm the inquirer's need(s) using techniques such as paraphrasing before providing referrals/resources.	Specialist paraphrased or asked for clarification of information received as needed.

g) If additional demographic information (such as SSN) is collected, explain the reason the information is needed.	The specialist explained reason for collecting SSN and other demographic information.
h) Effectively utilize the resource information system to identify resources to meet the inquirer's needs.	The specialist identified needs of caller and matched those needs with available resources.
i) When possible and practical, provide at least 3 referrals to give the inquirer a choice.	The specialist scheduled IA for client. Caller declined private pay options.
j) Encourage inquirers to call back if the information proves incorrect, inappropriate, or insufficient to link them with the needed services.	The specialist provided caller with phone number and extension for the intake specialist that will be completing screening. Caller was also encouraged to call the Helpline back for any further assistance.
k) Accurately record what occurred during the inquiry, the call/contact type, the problems and needs that were addressed.	Refer notes were accurately documented.
l) Specialists offer advocacy, when necessary, to ensure people receive the benefits and services for which they are eligible. This may include 3-way calls or additional calls to help them obtain services.	N/A
m) Follow-ups are scheduled/provided for units of referral. Follow-ups are always provided if the specialist believes the inquirers do not have the necessary capacity to follow through and resolve their problems. Follow-up for units of referral is scheduled/provided within 14 days of the contact.	Specialist scheduled an intake screening for 6/28/21

Area Agency on Aging
of Pasco - Pinellas, Inc.

Helpline Observation Checklist
2021 Monitoring Tool

I&R Specialist: Cynthia Rennick
Date observed: 06/02/2021
Task observed: Information or Referral

STANDARD	NOTES/ACHIEVEMENT
a) Identify themselves and the Helpline according to agency guidelines.	The specialist identified herself and the agency at the beginning of the call.
b) Establish rapport with the inquirer and use active listening skills and empathy to discern the presenting problem.	This was a live call that was taken. Specialist actively listened to the caller. She paraphrased to confirm needs and empathize with caller.
c) Respond to each inquirer in a professional, nonjudgmental, culturally appropriate, and timely manner.	The specialist was professional, nonjudgmental, and culturally appropriate throughout the call.
d) Use clear, jargon-free language and an appropriate tone of voice and inflection to convey empathy and engagement with the inquirer's situation.	The specialist was clear, used appropriate tone of voice and used jargon free language throughout the call.
e) Confirm whether there are specific preferences or requirements such as language needs, evening or week-end hours, proximity to public transportation or disability access.	The specialist confirmed that there were not any specific preferences required to complete call.
f) Clarify and confirm the inquirer's need(s) using techniques such as paraphrasing before providing referrals/resources.	Specialist clarified and confirmed caller's needs. Caller was calling to set up screening for mother-in-law. During the call, the specialist also identified needs of caller's father-in-law who would need ALF or SNF.

g) If additional demographic information (such as SSN) is collected, explain the reason the information is needed.	N/A SSN was not collected during this call.
h) Effectively utilize the resource information system to identify resources to meet the inquirer's needs.	Specialist scheduled screening for caller's mother-in-law. Specialist effectively utilized the resource information system to identify resources to meet needs of caller's father-in-law.
i) When possible and practical, provide at least 3 referrals to give the inquirer a choice.	Specialist provided referral to three (3) placement assistance services. Peggy's Placements, Care Patrol, Compassionate Care
j) Encourage inquirers to call back if the information proves incorrect, inappropriate, or insufficient to link them with the needed services.	Specialist provided caller with number and extension of intake specialist that is scheduled to complete screening for mother-in-law. Specialist as encouraged the caller to call back for any additional support regarding referrals provided.
k) Accurately record what occurred during the inquiry, the call/contact type, the problems and needs that were addressed.	Client Record reviewed. Notes were recorded accurately. Needs of caller that were addressed were documented accurately.
l) Specialists offer advocacy, when necessary, to ensure people receive the benefits and services for which they are eligible. This may include 3-way calls or additional calls to help them obtain services.	N/A
m) Follow-ups are scheduled/provided for units of referral. Follow-ups are always provided if the specialist believes the inquirers do not have the necessary capacity to follow through and resolve their problems. Follow-up for units of referral is scheduled/provided within 14 days of the contact.	Next available screening appointment scheduled for mother-in-law.

Area Agency on Aging of Pasco - Pinellas, Inc.

Intake Observation Checklist
2021 Monitoring Tool

Intake Specialist: Josie Guerra
Date observed: 6/2/2021
Task observed: 701S
Initial____x___ Annual Reassessment _____ Significant Change_____

STANDARD	NOTES/ACHIEVEMENT
Specialists demonstrate professional communication skills, including listening skills, avoiding interrupting, avoiding opinions, etc.	The program manager observed a 701S screening in completion. The specialist explained assessment process clearly and was an active listener,
Specialists screen the caller's needs using a 701S Screening tool, including introduction of each section, asking all questions individually, in order without skipping or grouping, and asking clarifying questions, as needed.	Screener used 701S tool. Each section was introduced. Questions were asked individually and in order. Observed specialist ask clients to clarify responses when needed.
Specialists correctly identify a primary caregiver and complete the caregiver section according to DOEA 701S instructions.	N/A, no caregiver.
Specialists correctly identify client needs and match needs and eligibility to waitlist placement. Additional needs identified are addressed at the end of the call and may be sent to the Helpline.	The specialist identified clients needs and matched needs and eligibility to waitlist placement. No additional needs were identified and did not require call be sent to Helpline.
Specialists are knowledgeable of funded programs and community resources.	The specialist displayed knowledge of state and federally funded programs and community resources. Observed the specialist explaining funded programs and provided explanation of community resources available.
Specialists inform potential clients or referring parties about the APCL list and prioritization of releases.	The specialist informed the client of the APCL list and prioritization of releases.
Specialists explain annual reassessment and encourage clients to call back if their situation changes.	The specialist explained annual reassessment and encouraged the client to call back with any changes.

Calls are documented in Refer appropriately.	Refer notes reviewed. Specialist documented appropriately.
CIRTS. Screening documentation matches screening, notes sections are completed appropriately, and client is added to waitlist for all appropriate programs.	Assessment reviewed in CIRTS. All information received during assessment was entered accurately. Client was added to waitlist for all appropriate programs

2021 ADRC Monitoring Report

Final Audit Report 2021-07-11

Created:	2021-07-08
By:	Michelle Tavares (Michelle.Tavares@aaapp.org)
Status:	Signed
Transaction ID:	CBJCHBCAABAA-EfuEk8BTmiKwMeieUrQcbCNt5lQEe7p

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