

**AAA SERVICE PROVIDER CONTRACT
SCOPE OF WORK AND PROGRAM-SPECIFIC TERMS AND CONDITIONS**

**PROGRAM: III E FAMILY CAREGIVER SUPPORT PROGRAM
SERVICE AREA: SANTA CRUZ COUNTY**

DEFINITIONS SPECIFIC TO FAMILY CAREGIVER SUPPORT PROGRAM

- A. **Eligible Service Populations for Title III E** means an adult family member, or other individual, who is an informal provider of in-home and community care to **an older individual (60+)** or to an individual of any age with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.
- B. **Priority Services for Title III E** means services provided to:
1. Caregivers who are older individuals with greatest social need, and older individuals with greatest economic need (with particular attention to low-income older individuals].
 2. Older relative caregivers with severe disabilities, or individuals with disabilities who have severe disabilities.
 3. Family caregivers who provide care for individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction.
- C. **An Older Relative Caregiver** means a caregiver who is –
1. Is age 55 or older; and
 2. lives with, is the informal provider of in-home and community care to, and is the primary caregiver for, a child or an individual with a disability;
 3. In the case of a caregiver for a child; is defined as a grandparent or step-grandparent of a child, or a relative of a child by blood, marriage, or adoption who is 55 years of age or older, and who:
 - a. is the grandparent, step grandparent, or other relative (other than the parent) by blood, marriage or adoption of the child;
 - b. is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child; and
 - c. has a legal relationship to the child, has legal custody or guardianship, or is raising the child informally.
 4. In the case of a caregiver for an individual with a disability, is the parent, grandparent or other relative by blood, marriage or adoption, of the individual with a disability.
- D. **An Older Individual Receiving Care (Care Receiver)** is defined as one who is 60 years of age or older, or an individual (of any age) with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction. **Family Caregivers cannot receive FCSP-funded respite unless the Care Receiver meets the more restrictive eligibility criteria specified in Title III, Part E, Section 373 (c)(1) (B) of the OAA and the definition of "frail" in OAA Section 102 (22), which requires that the Care Receiver is unable to perform at least two activities of daily living (ADLs) or requires substantial supervision due to a cognitive or other mental impairment.**

E. **Individual with a disability.** Means an individual with a disability, as defined in Section 3 of the Americans with Disabilities Act of 1990 who is not less than 18 and not more than age 59.

F. **ALLOWABLE SERVICES UNDER THIS AGREEMENT**

This list includes all approved Title III E services, not all of these services must be provided, but at least one must be provided from each category.

CAREGIVER ACCESS SERVICES

Caregiver Case Management: is provided to a caregiver, at the direction of the caregiver by an individual who is trained and experienced in the case management skills that are required to deliver services and coordination; and to assess the needs, arrange, coordinate and monitor an optimum package of services to meet the needs of the caregiver. **Unit: One hour**

Caregiver I&A: An FCSP service that provides individuals with current information on opportunities and services available to individuals within their communities; assesses the problems and capacities of the individual; links the individual to services; and ensure that the individual receives services they need. **Unit: one contact**

Outreach: An FCSP service involving interventions (one-on-one contacts with individuals) initiated by an agency or provider for the purpose of identifying caregiver support services. **Unit: one contact**

CAREGIVER INFORMATION SERVICES: *Must include at least one:*

Unit: One Activity with estimated client counts

Caregiver Public/Media: An FCSP public and media activity that conveys information to caregivers about available services, including in-person interactive presentations, booth/exhibits, or radio, TV or website events. This service is not tailored to the needs of the individual. (*formerly Public Information*)

Caregiver Community Information is information services designed to educate groups of current or potential caregivers and those who may provide them with assistance about available FCSP and other caregiver support resources and services.

CAREGIVER SUPPORT SERVICES *Must include at least one:*

Unit: One hour

Caregiver Training: An FCSP service that provides family caregivers with instruction to improve knowledge and performance of specific skills relating to their caregiving roles and responsibilities. Skills may include activities related to health, nutrition and financial management; providing personal care; and communicating with healthcare providers and other family members. Training may include the use of evidence-based programs; be conducted in person or online and be provided in individual or group settings.

Caregiver Support Groups: An FCSP service provided to a group of caregivers that is led by a trained individual; conducted at least monthly within a supportive setting or via a controlled access, moderated online or teleconference approach; for the purpose of sharing experiences, concerns and ideas to ease the stress of caregiving, and to improve decision-making and problem solving skills related to their caregiving responsibilities.

Caregiver Counseling: An FCSP service provided to a caregiver by a person appropriately trained and experienced in the skills required to deliver the level of support needed for stress, depression and loss resulting from caregiving responsibilities. This service may: (A) involve his or her informal support system (B) Be individual direct sessions and/or telephone consultations; and (C) Address caregiving-related financial and long-term placement responsibilities.

CAREGIVER RESPITE CARE

Available Respite categories (must be budgeted by category): In-Home, Out of Home (Day); Out of Home (overnight) or Other. Unit: one hour

Caregiver Respite - In-Home (Personal Care): An FCSP service that includes the provision of care receiver assistance with eating, bathing, toileting, transferring, and or dressed (along with care receiver supervision and related homemaker assistance) by an appropriately skilled provider.

Caregiver Respite - In-Home (Supervision): An FCSP service that includes the provision of care receiver day and/or overnight supervision and friendly visiting by an appropriately skilled provider or volunteer to prevent wandering and health or safety incidents.

Caregiver Respite- Out of Home (Day): An FCSP Service provided in settings other than the caregiver/care receivers home, including adult day care, senior center or other non-residential setting where an overnight stay does not occur.

Caregiver Respite - Out of Home (Overnight): An FCSP respite services provided in residential settings such as nursing homes, assisted living facilities, and adult foster homes in which the care receiver resides in the facility (on a temporary basis) for one or more nights.

Caregiver Respite – Other- Home (Chore): An FCSP respite service that includes an appropriately skilled provider or volunteer assisting a caregiver with heavy housework, yard work, and or sidewalk or other routine home maintenance (but not structural repairs) associated with caregiving responsibilities.

Caregiver Respite – Other- Home (Homemaker): An FCSP service that includes the provision of care receiver assistance with meal preparation, medication management, using the phone and or light housework (along with care receiver supervision) by an appropriately skilled provider or volunteer.

CAREGIVER SUPPLEMENTAL SERVICES Must provide at least one:
****Assessments are a required service***

Caregiver Supplemental – Caregiver Assessment: An FCSP service domain of supplemental services conducted by persons trained and experienced in the skills required to deliver the service that should result in a plan that includes emergency back-up provisions and is periodically updated and will explore options and courses of action for caregivers by identifying: (A) their willingness to provide care; (B) duration and care frequency preferences; (C) Caregiving abilities; (D) Physical health, psychological, social support and training needs; (E) Financial resources relative for caregiving; and (F) Strengths and weaknesses within the immediate caregiving environment and (caregiver's) extended informal support system. Such assessments shall be administered in person or via home visits, the internet, telephone or teleconference.

Unit: 1 hour

Caregiver Supplemental- Legal Consultation: An FCSP service domain of supplemental services (other) involving one-to-one guidance provided by an attorney (or person under the supervision of an attorney) in the use of legal resources and services when assisting a caregiver with caregiver-related issues.

Unit: one contact

Caregiver Supplemental -Consumable Supplies: An FCSP service domain of supplemental services that arranges for an provides assistance to caregivers in the form of commodities, surplus food, transit passes, meals and vouchers, or direct payment to vendors that will help meet identified needs associated with an individual caregivers responsibilities. **Unit:** One occurrence

Caregiver Supplemental – Home Modifications: An FCSP service domain of supplemental services that makes any minor or major physical change to the home (ranging from installation of grab bars or replacement of door handles to construction of an entrance ramp or roll-in shower) to fulfill caregiving responsibilities. **Unit:** One occurrence

Caregiver Supplemental – Assistive Technology: An FCSP service domain of supplemental services that involves the purchase, rental and/or service fee of any equipment or product system (ranging from a lift chair or bathtub transfer bench to an electronic pill dispenser or emergency alert fall prevention device) to facilitate and fulfill caregiving responsibilities. **Unit:** one device is one occurrence

Caregiver Supplemental – Caregiver Registry: An FCSP service domain of supplemental services that recruits, screens and maintains a listing of dependable, qualified self-employed homemaker or respite care workers who may be matched with caregivers willing to use personal resources to pay for assistance with their caregiving responsibilities. Both the caregiver and the self-employed worker will be: (A) Advised about appropriate compensation and workplace expectations; and (B) Provided with follow-up to ensure the match is functioning effectively.

PROVISIONS FOR AUTHORIZING RESPITE

- a. As funding allows, **Respite should be allocated based on level of need.** Caregivers eligible for respite funded by other sources should be referred to those programs.
- b. **“Temporarily”** means a brief period of relief or rest from a caregiver’s responsibilities during a limited time period and could be provided on the following basis:
 - (1) Intermittent – Time off for a few hours once a week for a limited time to give the caregiver a planned or unscheduled break;
 - (2) Occasional – Time off for the caregiver to attend a special event;
 - (3) Emergency – Extended break to address an intervening circumstance, such as caregiver emotional stress or hospitalization and recovery.
- c. Title III E funds cannot be used for the following respite activities:
 - (1) To pay the costs for a family caregiver to attend a camp, spa, resort or restaurant.
 - (2) To temporarily relieve workers from formally paid services (e.g. In-Home Supportive Services or services required to be provided in a licensed facility such as a Residential Care Facility for the Elderly,
 - (3) To supplement the service unit cost of a “participant day” at an adult day care program.
- d. **Priority** should be given to family caregivers who are not receiving services from any other sources, who require respite to attend caregiver support groups or are experiencing high levels of stress and burden as identified at the time of assessment

ASSURANCES SPECIFIC TO FAMILY CAREGIVER SUPPORT PROGRAM

- A. Funds made available under Title III E shall be budgeted and expended in accordance with the federal support service components specified in Title III, Part E, Section 373(b) of the OAA; and distinguished between “caregiver” and “grandparent” support services, as required for National Aging Programs Information Systems (NAPIS). .
- B. Funds made available under Title III E are shall be used in support of a comprehensive and multifaceted system of support services that include the five federal support service components as outlined in the Work Plan provided by the AAA.
- C. Funds made available under this Agreement shall supplement, and not supplant, any federal, State or local funds expended to provide Title III and Title VII services.

- D. Funds made available under Title III E shall supplement and not supplant other services** that may directly or indirectly support informal caregiving, such as Medical waiver programs (or other caregiver services such as those provided through Department of Social Services Kinship Support Service Programs, the California Community Colleges' Foster and Kinship Care Education Programs, the Department of Development Services Regional Centers, Department of Mental Health Caregiver Resource Centers, and other Title III funded provider
- E. Match requirement.** The Contractor is required to provide at least **25 percent** of the non-federal share for the Title III E program costs. Program overmatch from Title IIIB or C can be used to meet the program match requirement for Title III E.

REPORTING AND DATA COLLECTION PROVISIONS SPECIFIC TO THE FAMILY CAREGIVER SUPPORT PROGRAM

- A.** The Contractor shall submit performance reports in accordance with AAA instructions and California Aging Reporting System (CARS) requirements. Data reported must be timely, complete, accurate, and verifiable. Data for registered services must be entered into the SAMS database. Provider is responsible for any licensing fees for SAMS database.
- B.** Data Verification Forms and Data Reporting Forms are to be submitted on forms provided by the AAA in a timely manner on a monthly basis. Reports are due by the 15th of the month.
- C.** For registered services, the Caregiver and the Care Receiver must be linked in the SAMS database, and providers must ensure that services post as "To Caregiver"
- D.** AAA staff will perform data reconciliation for FCSP registered services on a monthly basis. Provider will receive a verification report to let them know if any corrections are needed. Corrections must be submitted within 7 business days.
- E.** Provider staff must ensure they are using current intake forms and selecting the correct assessment forms in SAMS during client data entry.

VOLUNTARY CONTRIBUTIONS

The Contractor shall assure that the participants are offered the opportunity to make voluntary contributions.

Each service provider will:

- Provide each recipient with an opportunity to voluntarily contribute to the cost of the service;
- Clearly inform each recipient that there is no obligation to contribute and that the contribution is purely voluntary;
- Protect the privacy and confidentiality of each recipient with respect to the recipient's contribution or lack of contribution
- Establish appropriate procedures to safeguard and account for all contributions and to supplement (not supplant) funds received under this Act.

Exhibit A – Scope of Service Title III Family Caregiver Support Program

- Use all contributions to expand the services for which the funds were given and to supplement (not supplant) funds received under this Act.
- Donation letters sent to clients for Title III and Title VII services shall stipulate that contributions are voluntary and not required to receive service.
- Donation letters may not resemble a bill or a statement.
- Cost Sharing shall not be implemented for any Title III service.

GRIEVANCE POLICY

Ensure a AAA-approved grievance policy is publicly posted and made available to clients upon request, and a written copy shared with any homebound clients. A copy of the Grievance Policy must be submitted to the AAA at the beginning of each contract year.