



**Signature Sheet**  
for  
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**Policies & Procedures**

**To Be Removed**

**To Be Inserted**

NO.	Section	Pages	NO.	Section	Pages
1.	Client Eligible	8	1.	Client Eligible	8
2.		5	2.		5
3.	Supplemental Services	15	3.	Supplemental Services	15
4.	Legal Requirements	29	4.	Legal Requirements	29
5.			5.		

**Following are the significant changes made to the Policy and Procedures**

Section	Change Clarification

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1-20-16

Date

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1/20/16

Date



**Wyoming  
Department  
of Health**

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# National Family Caregiver Support Program Policies & Procedures Manual

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**NOTE: The term provider, grantee and contractor are used interchangeably throughout this document.**

## ***Introduction to National Family Caregiver Support Program***

The National Family Caregiver Support Program (NFCSP) provides a multifaceted system of support services for Caregivers and for grandparents or older individuals who are relative Caregivers.

Families are the major provider of long-term care, but research has shown that caregiving exacts a heavy emotional, physical, and financial toll. Many Caregivers who work and provide care experience conflicts between these responsibilities.

NFCSP offers a range of services to support Caregivers. Under this program, providers shall provide Information and Assistance. They can offer Counseling/Support Group/Education, Respite and/or Supplemental Services per their approved federal fiscal year grant application:

- **Information** to potential Caregivers about available services;
- **Assistance** to Caregivers in gaining access to supportive services;
- **Individual counseling, organization of support groups, and training** Caregivers to assist them in making decisions and solving problems related to their caregiving roles;
- **Respite care** to enable Caregivers to be temporarily relieved from their caregiving responsibilities; and
- **Supplemental services**, on a limited basis, to complement the care provided by Caregivers.

These services work in conjunction with other state and community based services to provide a coordinated set of supports. Studies have shown that these services can reduce Caregiver depression, anxiety, stress, and enable them to provide care longer, thereby avoiding or delaying the need for costly institutional care for their loved one.

### **Service Prioritization**

Priority will be given to older individuals with greatest social and economic need, with particular attention to low-income older individuals and older individuals providing care and support to persons with severe disabilities and to those with Alzheimer's Disease, Dementia and related disorders (as defined in the Older Americans Act, Section 372(b), (1)&(2):

- Caregivers who are older individuals with greatest social and economic need (with particular attention to low-income older individuals);
- Older individuals providing care to individuals with disabilities, including children with severe disabilities;
- Family Caregivers who provide care for individuals, of any age, with Alzheimer's disease, Dementia and related disorders with neurological and organic brain dysfunction; and
- Grandparents or older individuals, age 55 or older, who are relative Caregivers who provide care for children, 17 and younger, and adults, 18 to 59, with disabilities.

## ***Definitions***

- **ACC.** **Access **Care **Coordinator******
- **AGNES.** **Aging **Needs **Evaluation **Summary********
- **Activities of Daily Living (ADL).** A way to rate how clients can perform these personal activities (bathing, toileting, eating, etc.).
- **Cardio-Pulmonary Resuscitation (CPR)**
- **Caregiver.** Is an adult, 18 and older, family member or other individual who is an “informal” provider of in-home and community care of an older individual. “Informal” means that the care is not provided as part of a public or private formal service program. Grandparents or a relative, age 55 or older, who is caring for a minor child are also Caregivers.
- **Caregiver Information.** (CI) is the demographic form utilized.
- **Caregiver Evaluation.** (CE) is a tool to assess the Caregiver’s emotional, physical and mental status.
- **Caregiver’s Services Evaluation.** (CSE) is a tool to assess what services the Caregiver may need to continue to provide care for the care receiver.
- **Client.** Is the Caregiver in the National Family Caregiver Support Program.
- **Child.** Means an individual who is 17 years of age and younger or who is an individual with a disability (this covers adults 18 – 59 years of age with disability).
- **Disability** refers to conditions attributable to mental or physical impairment, or to a combination of mental and physical impairment which results in substantial functional limitations in one or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity for independent living, economic self-sufficiency, cognitive functioning, and emotional adjustment [see 42 USC 3002 (8)].
- **Federal Fiscal Year.** Is the accounting period of twelve months starting October 1 through September 30.
- **Grandparent.** Is an adult who is at least 55 years old and taking care of a child 17 years old or younger or an adult child between the ages of 18-59 who has a disability.
- **Greatest Economic Need.** Means the need resulting from an income level at or below the poverty line (100%) as defined by the Office of Management and Budget and adjusted by the Secretary of Health and Human Services.

- **Greatest Social Need.** Means the need caused by non-economic factors which include—physical and mental disabilities; language barriers; and cultural, social, or geographic isolation, including that caused by racial or ethnic status, that—restricts an individual’s ability to perform normal daily tasks; or which threatens his or her capacity to live independently.
- **Frail.** Means, with respect to an older individual in a State, that the older individual is determined to be functionally impaired because the individual –
  - Is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing, or supervision; or
  - At the option of the State, is unable to perform at least three such activities without such assistance; or
  - Due to cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual. For the State of Wyoming, we have adopted (A) having a minimum of two (2) ADL limitations or (B) has a cognitive or other mental impairment that requires substantial supervision to prevent harm to self or others.
- **Incident Report.** Is to document the exact details of the occurrence while they are fresh in the minds of those who witnessed the event. The report must be filled out as soon as possible following the incident (but after the situation has been stabilized). This way, the details written in the report are as accurate as possible.
- **Instrumental Activities of Daily Living (IADL).** A way to rate how clients can perform these life activities (meal preparation, shopping, managing money).
- **NFCSP.** Is the National Family Caregiver Support Program
- **PINS.** Policy Information Notices = Senior Services - Aging Division, Community Living Section informs providers of policies through written contact.
- **Personal Care.** Activities include, but are not limited to, bathing, grooming, feeding, ambulating, exercising, oral hygiene, and skin care.
- **Personal Emergency Response System (PERS).** An electronic device worn by the Caregiver and/or Care Receiver.
- **SAMS.** Social Assistance Management System = Grantees of the Aging Division, Community Living Section have to record information into this system.

## **Community Living Section**

The Community Living Section (CLS) is a section within the Wyoming Department of Health's Aging Division. The CLS houses multiple programs, primarily under the direction of the Older Americans Act of 1965, as amended 2006.

### **Provider Organizations**

Once a provider organization is awarded the National Family Caregiver Support Program grant funds, they will begin to serve Wyoming's eligible citizens.

### ***Staffing Requirements***

All contractors shall employ a NFCSP ACC. NFCSP's ACCs shall complete the ACC training and certification program provided by the Aging Division, Community Living Section within six months of their initial hire date and annually thereafter. Project Directors shall notify the NFCSP Manager when an ACC is hired, released, or has not received the ACC training within six months, but meets the criteria listed below. The NFCSP Manager must be notified as soon as possible and the ACC shall make arrangements to receive training, so a Provisional Certification can be issued. NFCSP Access Care Coordinators shall also meet the following qualifications and requirements:

- 21 years of age or older;
- High school diploma or GED;
- Two (2) years of professional work experience providing social model case management;
- Experience in community development and networking;
- Effective written and verbal communication skills;
- Willingness to travel as needed to fulfill job responsibilities;
- The ACC Certification is grantee specific. It does not travel from one grantee to another.

The following shall apply to all Licensed Nurses and CNAs personnel:

- Shall not have been convicted of a felony or a misdemeanor related to abuse, neglect, exploitation, intimidation, or abandonment of adults or children;
- Prior to working independently in a client's home, the following reference checks must be completed and documented in the employees' personnel file:
  - Written documentation of at least two character references from a previous employer, or other knowledgeable and objective sources prior to employment or volunteering (e.g., letters of reference; notations of telephone reference checks including the name of the person(s) contacted, the date(s) of contact, the firm(s) contacted and the results);
  - The grantee must contact the Wyoming State Board of Nursing for those personnel who are licensed and/or certified by the Wyoming State Board of Nursing, to ensure the individual is in good standing with the board.

- The grantee must contact the Wyoming Department of Family Services to ensure the person hired does not appear on the Central Registry.

The following shall apply to all respite, homemaker, and chore/handyperson personnel:

- Shall not have been convicted of a felony or a misdemeanor related to abuse, neglect, exploitation, intimidation, or abandonment of adults or children;
- Prior to working independently in a client's home, the following reference checks must be completed and documented in the employees' personnel file:
  - Written documentation of at least two (2) character references from a previous employer, if any, or other knowledgeable and objective sources prior to employment or volunteering (e.g., letters of reference; notations of telephone reference checks including the name of the person(s) contacted, the date(s) of contact, the firm(s) contacted and the results);
  - The grantee must contact the Wyoming Department of Family Services to ensure the person hired does not appear on the Central Registry.



## ***Client Eligible***

The CLIENT for the National Family Caregiver Support Program is the Caregiver, not the Care Receiver. Eligible clients include:

- The Caregiver must be 18 years of age or older.
- The Caregiver(s) is providing care to older individuals age 60 and older.
- Grandparents or relative Caregivers age 55 and older who care for children who are 17 and younger.
- Grandparent or relative Caregivers providing care for adult children with a disability who are between 18 and 59 years of age. These Caregivers shall be 55 years and older and cannot be the child's biological or adoptive parent(s).
- Assistance and Counseling can be provided to any Caregiver, but Respite and Supplemental Services funded under the NFCSP can be provided if the Care Receiver meets the definition of frail, 2 ADLs or 2 IADLs. Any of the five NFCSP service categories may be provided to grandparents, step-grandparents, and other older relative Caregivers caring for a child.
- Non-citizens are eligible to receive services through the NFCSP. In accordance with Administration on Aging (AoA) guidelines, non-citizens, regardless of their alien status, should not be banned from services authorized by the Older Americans Act (OAA) and administered by the AoA based solely on their alien status.
- The Caregiver does not have to be related to the Care Receiver.
- The Caregiver does not have to live with the Care Receiver.
- Family Caregivers of an individual of any age who has Alzheimer's disease, early onset, dementia or related disorders with neurological and organic brain dysfunction.

There can be more than one Caregiver per Care Receiver; however, there must be a service plan for each Caregiver. Caregivers are unique individuals and their files/charts/documentation must be maintained separately. A Caregiver can care for only three (3) Care Receivers while receiving services from NFCSP.

If a Caregiver is getting paid to take care of the Care Receiver, i.e. Long Term Care Waiver, Private pay, by family, they are not eligible for the program.

## ***Long Distance Caregivers***

Long distance caregivers are Caregivers who live within the State of Wyoming and the Care Receiver lives more than 51 miles from the Caregiver in a different Wyoming community or state.

Information, Assistance, and Counseling/Support Groups/Trainings, may be provided to long distance Caregivers who live in the state of Wyoming. Supplemental Services or Respite services are not available to long distance Caregivers.

**\*\* Note:** If the Primary Long-Distance Caregiver moves in with the Care Receiver and lives with the Care Receiver in the state of Wyoming for at least eight days per month, the Caregiver may receive all five services offered.

## *Location of Services*

The majority of services will be provided in the home where care is provided. Educational opportunities, support groups, and other services may be delivered in the community.

Respite care may be delivered in the home, adult/child day care setting, camps, licensed adult family foster care homes, or institutional/nursing home settings on an occasional or emergency basis. If the respite is provided in the home of the Caregiver, the Caregiver does not need to leave the home/residence while respite is being provided. Caregivers may be served by more than one provider located in different counties.

All services must be provided in the state of Wyoming and all staff members providing care or services in the home must be insured and bonded.

## *Services*

All grantees who are awarded the NFCSP contract from the Aging Division, Community Living Section shall offer Information and Assistance services. The grantee may choose to offer the remaining services per their approved federal fiscal year grant application:

1. *Information* to potential Caregivers, current Caregivers and the public about available services. Information is defined as group activities; including public education, provision of information at health fairs, expos, and newsletters other similar events informing Caregiver's how to improve their health.
  - Outreach is defined as interventions for the purpose of identifying potential Caregivers and encouraging their use of existing services and benefits.
  
2. *Assistance* to Caregivers in gaining access to services. These services provide individuals with links to the opportunities and services that are available and to establish adequate follow-up procedures. "Assistance" is defined as one-on-one contact to provide:
  - Access current information on opportunities and services available; assesses the problems and capacities of the individuals; links the individuals to the opportunities and services available; to the maximum extent practicable, ensures that the individuals receive the services needed, and are aware of the opportunities available to the individuals by establishing adequate follow-up procedures.
  - Care Coordination in circumstances where the older person or their Caregivers are experiencing diminished functioning capacities, personal conditions, or other characteristics which require the provision of services by formal service providers. Activities of Care Coordination include assessing needs, developing National Family Caregiver Support Program Service Plans, authorizing services, arranging services, coordinating the provision of services among providers, follow-up and reassessment as required.

3. ***Counseling/Support Groups/Training*** - Provision of assistance to Caregivers in the areas of health, nutrition, and financial literacy; and in making decisions and solving problems in relation to their caregiving roles. Individual counseling, organization of support groups, and Caregiver training to Caregivers to assist the Caregivers in making decisions and solving problems relating to their caregiving roles.

- Counseling is provided by a Licensed Professional Counselor, a person with a Master in Social Work or Bachelor in Social Work that is accredited through a licensing board, i.e. staff, a contract or volunteer, in either individual or group settings.
- Support groups are scheduled group meetings to provide an opportunity for Caregivers to share life events.
- Training is education provided to the Caregiver to assist with their caregiving duties.

4. ***Respite care*** - Temporary relief for a grandparent/relative Caregiver or for a primary Caregiver who is caring for an older adult with at least two Activities of Daily Living (ADL) impairments, or a child(ren) who is 17 years of age or younger or for an individual with a disability. Relief can be in the form of in-home respite, adult/child day care respite, camps, licensed adult family foster care homes, or institutional respite on an occasional or emergency basis. Examples of Temporary Respite Care include:

- Intermittent – Time off for a few hours a week and a limited time to give the Caregiver a planned or unscheduled break.
- Occasional – Time off for the Caregiver to attend a special event or get a haircut.
- Emergency – Extended break to address an intervening circumstance, such as Caregiver emotional stress or hospitalization and recovery.

Respite care is authorized up to 50 hours per month. If there is a need to exceed 50 hours per month, a written request to exceed this 50 hour respite service cap shall be sent to the Aging Division, Community Living Section's NFCSP Manager for prior approval.

Approval will be determined on a case-by-case basis, dependent upon grantee's budget, and may be limited to a one-time allocation. Respite provided via the NFCSP is not usable while the Caregiver is employed and earning money, either part-time or full-time.

5. ***Supplemental Services*** - Services provided on a limited basis to complement the care provided by Caregivers. Supplemental services provide, but not limited to:

- Loan Closet
- Homemaking provides light housekeeping, basic meal preparation, shopping (cannot pick up medications), and laundry.
- Chore/handyperson provides activities such as snow removal, mowing, etc.
- Meals
- Transportation is provided for the Caregiver to and from community facilities and resources for purposes of acquiring/receiving services, to participate in activities,

or attend events in order to reduce isolation and promote successful independent living.

- Incontinence supplies include diapers, pads, and other protective products.
- Home modification is not to exceed \$400 per client per year
- Durable Medical Equipment is not to exceed \$400 per client per year
- Personal Care
- Personal Emergency Response Systems (must be tested monthly for maintenance)
- Other services pre-approved in writing by the Aging Division, Community Living Section

## ***Service Activities***

### ***Information:***

- ***Outreach/Client Identification.*** Conduct outreach activities to seek and identify eligible Caregivers in the community. Outreach activities shall be coordinated with existing Older Americans Act outreach service contract entities. Receive referrals and make contact within 72 hours and determine eligibility.
- ***Public Education to Families.*** Provide or arrange for the provision of educational opportunities to promote the NFCSP and help individuals identify themselves as Caregivers. Topics may include, but are not be limited to; normal aging, chronic conditions, caregiving skills, Caregiver self-care, home care products, home modifications, adaptive aids, Caregiver advocacy (on behalf of the person for whom care is being provided), and other common issues facing Caregivers. Distribute informational materials, including newspaper ads, brochures, flyers, etc. and discuss the Caregiver program on television and radio.
- ***Health Fairs.*** Participate in community health fair to inform people in the community about the Caregiver program.
- ***Group Education.*** Presentations for Kiwanis, Rotary and other community organizations who assist those who need a help.
- ***Newsletters.*** Distribute newsletters to the public informing them about the Caregiver services.

### ***Assistance:***

- ***Access to Services:***
  - Provide assistance to Caregivers in gaining access to services available through the Wyoming Aging Network and other appropriate service providers.

- *Care Coordination.*
  - Make home visits or arrange visits in a location convenient for the Caregiver and complete individual Caregiver form for all eligible Caregivers using the Caregiver Evaluation and Caregiver Services Evaluation tools. Caregiver evaluations will identify the needs of the individual Caregiver. Caregiver evaluations shall be updated on an annual basis or when there is a change in status occurs. A Service Plan shall be completed for each Caregiver once the Caregiver tells the ACC what services he/she needs to continue their Caregiving services.

### ***Counseling/Support Groups/Trainings:***

- *Individual Caregiver Counseling:*
  - Identify and arrange payments for Licensed Professional Counselor, a person with a Master in Social Work or Bachelor in Social Work that is accredited through a licensing board to complete up to 15 hours of individual or family counseling for eligible Caregivers. If it can be demonstrated that the Caregiver has an extraordinary need for additional counseling beyond the 15 hours per grant year, a written request shall be submitted to the Aging Division, Community Living Section NFCSP Manager. An extension of the minimum 15 hours will be considered on a case-by-case basis. Caregivers who require on-going counseling will be referred as needed. A qualified professional includes a psychologist, licensed social worker, or counselors as defined by Wyoming Statute. Access Care Coordinators (ACC) will locate resources in the community that provide counseling in the following areas:
    - Caregiver stress and coping
    - End of life issues/grief counseling
    - Family relations/dynamics
    - Substance abuse
    - Decision making and problem solving
    - Rates for qualified professionals to provide Caregiver-counseling services shall not exceed usual, reasonable, and customary rates for individual or family therapy.
- *Support Groups.*
  - Facilitate development/maintenance of Caregiver support groups.
  - Assist in the development/maintenance of Caregiver peer groups.
  - Create/maintain working partnerships with other agencies and organizations that provide services to Caregivers. Educational materials may be provided as needed.

- Be a resource for caregiving issues in the community.
- Provide leadership relative to Caregiver issues on behalf of eligible Caregivers.
- *Individualized Caregiver Training.*
  - Identify and arrange payment for qualified professionals to complete individualized Caregiver training to meet the needs of the eligible Caregiver. Access Care Coordinators will locate qualified professionals which may include, but are not be limited to; nurses, occupational therapists, physical therapists, and dietitians. Whenever possible, the training should be held in the home where care is being provided.
  - Training may include, but is not limited to the following areas:
    - Generally accepted practices of personal care task and personal care endorsements
    - Assistive technology
    - Planning for long-term care needs
    - Health and nutrition counseling
    - Behavior management
    - Caring for oneself

***Respite Care:***

- Identify and arrange for payment of a qualified respite provider for the relief of the primary Caregiver. A qualified respite care provider may include an individual, registered nurse, licensed practical nurse, certified nurse assistant, an adult/child day care facility, nursing home, or a long-term care facility.
- Individual service provider rates for respite care services shall not exceed usual, reasonable, and customary rates for this service in the service area, and cannot exceed private pay rates for the same service.
- The Care Receiver shall have two or more Activities of Daily Living (ADL) limitations determined by an AGNES or a cognitive impairment for the Caregiver to be eligible for respite. The Care Receiver shall sign the Information Release Form with the AGNES, for the Respite service since his/her data will be entered into the Social Assistance Management Services (SAMS) database.
- Respite care is authorized up to 50 hours per month. If there is a need to exceed 50 hours per month, a written request to exceed the 50 hour respite service cap shall be sent to the Aging Division, Community Living Section NFCSP Manager for prior approval. Approval will be determined on a case-by-case basis and may be limited to a one-time allocation. If a Care Receiver has more than four (4) Caregivers he/she can only receive 150 hours per month of respite.

## ***Supplemental Services:***

Provide services on a limited basis to complement the care provided by Caregivers. The Care Receiver shall have two or more ADL limitations determined by an AGNES and shall sign the Information Release Form for this NFCSP service since his/her data will be entered into SAMS. Supplemental Services examples include, but are not limited to:

- *Loan Closet*
- *Homemaking* services can include light housekeeping, basic meal preparation, shopping (review you liability insurance, cannot pick up medications), laundry, and other homemaking tasks, either at the Caregiver or Care Receiver's home.
- *Chore/Handyperson* services include but are not limited to chopping wood, mowing the Caregiver or Care Receiver's lawn, etc.
- *Assistive Safety Devices* include adaptive and preventive health aids to assist individuals and/or their Caregivers in their activities of daily living. Assistive Safety Devices for caregiving may involve the purchase, rental, and/or service fee of any equipment or product system (ranging from a lift chair or bathtub transfer bench to a personal emergency response service device) to facilitate and enhance the caregiving role. Assistive Safety Devices may not exceed \$400 per client per year without prior approval was given by the Aging Division, Community Living Section's NFCSP Manager. Nutritional supplements are not covered under Supplemental Services.
- *Incontinent supplies* include pads, diapers, and other protection products.
- *Personal Care* can only be provided by a Certified Nursing Assistance, who is under the guidance of a licensed nurse, bonded and insured.
- *Minor Home Modifications* to the home in order to facilitate and enhance the caregiving role may not exceed \$400 per client per year unless prior approval was given by the Aging Division, Community Living Section's NFCSP Manager. Theses changes may range from installation of grab bars or replacement of door handles to construction of an entrance ramp or roll-in shower. If the Caregiver lives in a rental property, approval must be given by the landowner before any modifications can be done.
- *PERS* must be tested monthly by designated person or activity report and verified by the ACC.
- Other items falling into this category, including but not limited to ancillary services will be considered on a case-by-case basis and shall be submitted in writing for pre-approved in writing from the Aging Division, Community Living Section's NFCSP Program Manager.



## ***Caregiver Service Plan***

The NFCSP Service Plan is a required document, provided by the Aging Division, Community Living Section, for all clients served under the NFCSP. Prior to receiving services under the NFCSP, the grantee shall develop a comprehensive written service plan for the Caregiver using the approved Aging Division, Community Living Section NFCSP Service Plan. This plan shall be kept in the client's file. The NFCSP Service Plan identifies the services that the client will receive, the frequency those services will be provided, and the individual goals the client has identified as being important to them. Services provided to the Care Receiver through the program shall also be comprehensively indicated in the service plan. Services provided to the Caregiver or Care Receiver, not indicated on the service plan, and are not eligible for payment or reimbursement by the Aging Division, Community Living Section. If a Caregiver is taking care of multiple Care Receivers (no more than 3), a Caregiver Service Plan must be completed for each Care Receiver.

- ***Design and Implementation:***
  - Using the results of the Caregiver Evaluation, Caregiver Services Evaluation, and the Aging Needs Evaluation Summary (AGNES), if appropriate, design and implement a NFCSP Service Plans that addresses the needs unique to the Caregiver providing care to the Care Receiver. The effective dates on the NFCSP Service Plan cannot exceed 12 months.
  - The NFCSP Service Plan shall be re-evaluated every 90 days thereafter. If no change is needed, a new start and end date in the appropriate area of the service plan will be indicated. The Caregiver will verify the service plan through initializing the 90 day re-evaluation. The Caregiver must sign the revised plan. If a change in a Caregiver's service plan occurs, the ACC shall develop a new service plan and provide a copy to the Caregiver.
  - ACCs shall monitor the NFCSP Service Plan to assure Caregiver goals and outcomes have been met. Progress Notes shall be written each time the ACC sees the Caregiver. A new NFCSP Service Plan shall be completed when services are modified or the effective date expires. NFCSP Service Plan's quarterly reviews may be completed on site or by making phone contact and acquiring signatures via the mail or a contact during the same month. ACCs may never sign for the Caregiver or Care Receiver on any required documents. Caregivers shall receive a minimum of two contacts during the first three months on the program and three additional contacts per year with the ACC. Contacts constitute a minimum of at least one face-to-face contact and a combination of face-to-face or phone contacts, provided at a minimum of one contact per quarter after the first quarter.

## ***Forms***

- **Forms needed along with the Service Plan:**
  - **Caregiver Information (CI) – done annually or significant change in status**
  - **Caregiver Evaluation (CE) - done every six months or significant change in status**
  - **Caregiver Services Evaluation (CSE) - done annually or significant change in status**
  - **Information Release Form (IRF) - done annually or significant change in status**
  - **Task Sheet – done per provider’s internal process to document services provided**

## ***Limitations***

- A signed Information Release Form is a pre-requisite for services under the NFCSP. The Information Release Form is valid for one year and each provider providing services to a Caregiver must have this form.
- Costs for all services shall not exceed the usual, reasonable, and customary costs for that service. Costs charged to the grant can never exceed the cost charged to a private individual paying for that same service.
- Respite care is authorized for up to 50 hours per month per Caregiver per Care Receiver. If a Care Receiver has more than three Caregivers a total of 150 hours per month for that Care Receiver maybe used. If there is a need to exceed 50 hours per month, a written request to exceed the 50 hour respite service cap shall be sent to the Aging Division, Community Living Section NFCSP Manager for prior approval. Approval will be determined on a case-by-case basis and may be limited to a one-time allocation.
- Institutional Respite on an occasional or emergency basis – NFCSP will pay for \$600 of an occasional or emergency placement per grant year per Caregiver per Care Receiver, based upon grantee’s budget. Prior approval for additional respite hours for the month must be submitted in writing to the NFCSP Manager.
- Respite care cannot be authorized for employment or any paid activities of the Caregiver.
- Biological, adoptive parents and stepparents are not eligible to receive NFCSP services when caring for their own minor biological, adopted, or step-child.
- Primary Caregivers who are being paid by private arrangement to provide care are not eligible to receive NFCSP services.
- Supplemental Services, on a limited basis, are intended to complement the care provided by Caregivers. Costs exceeding \$400.00 per year per client for Assistive Safety Devices and Minor Home Modifications shall be pre-approved in writing by the Aging Division, Community Living Section NFCSP Manager.
- Caregiver can care for only three (3) Care Receivers while receiving services from NFCSP.
- If a NFCSP client discontinues NFCSP services before the end of the twelve-month period, their case shall be closed:
  - If funds are available and the grantee has no waiting list, the client may be readmitted to the program subsequent to the case closing.
  - A Waiting list Policy and Procedure shall be developed by each grantee. A process regarding how client names are added to and deleted from the waiting list shall be included.

- **The Older Americans Act states information and services shall be provided to family Caregivers in a direct and helpful manner. In cases where Caregiver support programs already exist within the community, coordination of these programs and the NFCSP is essential to maximize the funding available to family Caregivers and to avoid duplication of services.**

## ***Reimbursable Services***

- ***Information (Not Reimbursable per client but by Activity-Aggregate count)***
  - Group Education – presentations to Kiwanis, Rotary, organizations, etc
  - Health Fairs
  - Newsletters – sent to the public who are not on the Caregiver program
  - Public Education – television, radio, newspaper ads, etc.
  - Outreach – a person calls in or you talk to a person (one-to-one) regarding the Caregiver program. This subservice is reimbursed per client.

The following outlines allowable services under the NFCSP Service Plan categories. These services are defined as direct services provided or coordinated by the ACC. Services shall be authorized by the ACC, but may be provided by other individuals/agencies/subcontractors. Reimbursement for services provided by other individuals/agencies/subcontractors shall be processed by the contractor no later than 15 days after the end of the monthly service period.

- ***Assistance***
  - Information on services to the Caregiver
  - Care Coordination – the Caregiver starts the paperwork to be on the program
- ***Counseling, Support Groups, Training***
  - Individual Caregiver counseling – 15 hours per Caregiver per grant year
  - Support Groups/Peer Groups
  - Individualized and/or group Caregiver training
  - Caregiver Conferences
- ***Respite Care (Reimbursed per client/service) – 50 hours per Caregiver per Care Receiver per month with a maximum of 150 hours if the Care Receiver has more than 4 Caregivers***
  - In- home respite
  - Adult Day Care
  - Child Day Care – Grandparents Raising Grandchildren
  - Camps – Grandparents Raising Grandchildren
  - Licensed adult family foster care homes
  - Institutional Respite on an occasional or emergency basis – NFCSP will pay for \$600 of an occasional or emergency placement per grant year per Caregiver per Care Receiver, based upon grantee's budget. Prior approval for additional respite hours for the month must be submitted in writing to the NFCSP Manager.
- ***Supplemental Services (Reimbursed per client/service)***
  - Assistive Safety Devices are devices that assist the Caregiver with his/her caregiving role. A maximum of \$400 per client per grant year may be expended.

- Home modifications are minor modifications to allow the Caregiver to continue their caregiving role. A maximum of \$400 per client per grant year may be expended.
  - Chore/handyperson
  - Loan closet
  - Incontinence supplies
  - Personal Care activities include bathing, grooming, feeding, exercising, and oral hygiene, etc.
  - Homemaking
  - Transportation for the Caregiver
  - Meals
  - Personal Emergency Response (PERS)
  - Other services that provide assistance to the Caregiver
- *Prior Approval needed for Services (not limited to):*
    - Private Counseling – if requesting more than 15 visits for a client
    - Respite – if requesting more than 50 hours per month per Caregiver per Care Receiver
    - Supplemental Services:
      - Meals for the Caregiver and/or Care Receiver at \$5.25 per meal
      - Home Modifications costing more than \$400 per client per grant year
      - Unique services that provide assistance to the Caregiver
      - Assistive Safety Devices costing more than \$400 per client per grant year

### ***Fiscal***

ACCs should have access to a copy of the current grant application and knowledge of their budget for the NFCSP. The Aging Division, Community Living Section reimburses NFCSP grantees on a monthly but quarterly basis: January, April, July, and October. The Quarterly Financial Report of Grant Expenditures shall be completed in full and submitted to the Aging Division, Community Living Section by the assigned dates. Expenditures on the report must be actual expenditures for the NFCSP. Only expenditures submitted for the five services discussed on the previous pages shall be reimbursed. **Remember** – to be paid for services provided through the NFCSP a NFCSP Service Plan, Caregiver Evaluation, Caregiver Services Evaluation, Caregiver Information and Information Release Form must be completed.

## ***Waiting Lists***

Utilizing the monthly Report of Waiting Lists form, clients on waiting lists for services under the NFCSP program shall be submitted to the Aging Division, Community Living Section by the 5th working day of each month. If the grantee has no one on the waiting list, a Report of Waiting List shall still be submitted to the Aging Division, Community Living Section. A Waiting List Policy and Procedures shall be developed by each grantee. A process regarding how client's names are added to and deleted from the waiting list shall be included.

## ***Denial and Termination of Services***

- The provider shall consider termination of NFCSP services when continued service to the client presents an immediate threat to the health or safety of the client, the provider of the service, or others. The ACC shall inform the Aging Division, Community Living Section NFCSP Manager when termination of services is being considered or has taken place.
- NFCSP services will be terminated when the Caregiver and/or Care Receiver no longer meet the program eligibility requirements, the Caregiver does not utilize the services within 90 days of eligibility, or NFCSP services are no longer appropriate or cost containment is excessive.
- A client shall be notified in writing, within 14 days via certified letter the reason for the denial or termination of services, the right to submit a request for reconsideration, and the reconsideration process. The termination letter is not required if the closure is due to the death of the Caregiver or the Care Receiver. During the 14 calendar days services will be provided unless an immediate threat to the health or safety of the client, the provider of the service or others.



## ***Voluntary Contributions***

The staff of the NFCSP program shall inform the Caregivers that a voluntary contribution for assistance, counseling/support groups/trainings, respite and supplemental services assists the program. Remember, clients who are unable to pay cannot be denied services or referred to collection agencies, but should be reminded the NFCSP depends upon contributions for services provided to them to keep the program running.

## ***General Requirements***

- All referrals shall be contacted within seventy-two (72) hours.
- Individuals seeking services shall be provided with service options. The individual has the right to make an independent choice of service providers.
- All contacts with NFCSP clients, including telephone calls, shall be documented. The documentation shall include a brief descriptive statement of the interaction; including any service needs identified, alternatives explored, and service delivery options offered.
- Make use of trained volunteers to expand the provision of the five service components.
- Complete an Aging Needs Evaluation Summary (AGNES) on Care Receivers who's Caregiver indicates a need for respite or supplemental services.
- Providers shall ensure appropriate program/financial reporting and budget reconciliation.
- Providers shall attend, as required, training planned or approved by the Aging Division, Community Living Section.
- Providers shall utilize forms required by the Aging Division, Community Living Section.
- Forms utilized by providers shall include all information required by the Aging Division, Community Living Section.
- Adequate records shall be maintained to record and evaluate service provision, to ensure responsible fiscal management, and to provide timely and accurate required reports.
- All equipment and supplies purchased with funding provided for this program shall be the property of the Aging Division, Community Living Section and shall be returned to the Division, at the expense of the provider, in the event that the provider no longer provides services under this program. This includes, but is not limited, grants that are no longer funded, contracts that are terminated, and contracts that expire.
- All files and documents relating to the NFCSP program, including client files, are the property of the Aging Division, Community Living Section and may not be released to any other person or organization without the express written consent of the Aging

Division, Community Living Section unless the files and documents have been subpoenaed.

- Each client and provider case record shall be maintained in an individualized file AND secured in a locked file cabinet, a locked area, and/or a restricted computer program.
- Coordinate service activities with existing community agencies and voluntary organizations to maximize service provision and avoid duplication.
- All services shall be promoted through a variety of social service networks i.e., churches, service organizations, schools, professional conferences, etc.
- A signed Information Release Form for the Caregiver shall be on file before services can be provided to the client and before information can be shared or released. This form must be renewed yearly.
- Providers shall compile, maintain, and report waiting lists of persons requesting Caregiver services for which service is not available to the Aging Division, Community Living Section NFCSP Manager. The waiting lists can be mailed, faxed, or emailed.
- Unexpended program income generated by this program shall be remitted to the Aging Division, Community Living Section within 30 days in the event that the provider no longer provides services under this program.
- Services provided outside of the contract period are not eligible for payment or reimbursement by the Aging Division, Community Living Section.
- Provider shall document costing procedures for all service categories and services provided through the NFCSP program.
- A signed Information Release Form is a prerequisite for services under the program. Satisfactory procedures shall be established to protect confidentiality of records which include a person's name, personal information and to obtain and record the individual's informed consent prior to the release of personal information.
- Incident Reports, per grantee's internal policy, shall be written whenever an incident has occurred. The ACC should inform management regarding incidents. The incident report shall be maintained in a separate folder, not within the client's folder.
- There shall be an Organizational Emergency Preparedness Plan in place for the organization and where services are being provided.
- If the Care Receiver dies or moves into an institutional setting the Caregiver can receive Information, Assistance and Counseling/Support Groups/Training services for 12 months.

## ***Prohibited Activities***

- Duplication of services.
- Billing the Aging Division, Community Living Section for services paid by another funding source.
- Breach of confidentiality.
- Signing NFCSP documents for the Caregiver or the Care Receiver. The only people who can sign the documents are the Caregiver, the Care Receiver, or the Power of Attorney.
- Use of Older Americans Act funds to provide Caregiver services to a Caregiver who does not meet the definition of a grandparent or relative Caregiver and who is providing support to an adult child between the ages of 18 and 59 years regardless of disability or cognitive status.
- Provision of NFCSP respite or supplemental services to individual Caregivers who are receiving services as part of a public program or are being paid by private arrangement to provide care.
- Alternating or back dating documentation relating to the NFCSP.

## ***Administrative Requirements***

- Clients shall be provided the opportunity to contribute to the cost of the service.
- SAMS client data records, assessments, and service delivery shall be entered no later than eight days after the end of the monthly service period.
- The grantee must keep the Caregiver's files after termination for a minimum of six years or per the grantee's internal policy (whichever is greater).
- Each National Family Caregiver Support Program grantee shall develop cost capitations for fiscal control-capitation.
- Requests for an Extension during the period a report or related document is due to the division must be in writing. (Email is considered an acceptable written form.)
- Staff members paid with funds from the Wyoming Department of Health, Aging Division, Community Living Section, are prohibited from accepting any and all individual gratuities, cash, gifts, property, tips, or other incentives from the client or client's family.
- Certified Nurses' Assistances (CNA's) shall be supervised by a licensed nurse as specified by the Wyoming State Board of Nursing rules. On-site supervision shall be

conducted at least every one hundred and eighty (180) days. If a CNA's services are contracted by another agent, supervision of aides will be performed by the contracting agent. After appropriate delegation under the direction of the supervising nurse, the CNA shall demonstrate the abilities to respect client's rights, adhere to legal and ethical concepts, communicate appropriately, ensure optimum client safety, practice appropriate infection control, and correct body mechanics. CNA's may perform services as outlined in the Wyoming State Board of Nursing rules.

- The grantee shall assure that all ACCs, homemakers, Certified Nursing Aides, nurses, and respite providers are insured and bonded.
- Documentation – if wasn't appropriately documented it didn't happen ~ no pay.
- If the NFCSP grantee's contract has been terminated by one of the parties without cause and/or a 30 day written notice was given, there are two possible grant outcomes:
  - Another grantee will take over the responsibilities of the NFCSP. During the transferring of the grant the following will occur:
    - The transferring grantee will inform their clients of the changes in writing fourteen (14) days prior to the contract termination. Included in the letter, but not limited to, will be:
      - The name of the new grantee, contact person and telephone number;
      - Information about potential changes in the provision of services;
      - Assurance that the client will not be arbitrarily dropped from the program due to the transfer;
      - Informing the client that a new evaluation and service plan is required and will occur within ninety (90) days of transfer; and
      - The date of transfer.
    - A checklist of equipment and documentation shall be provided by the transferring grantee to the new grantee and the Aging Division, Community Living Section's NFCSP Manager 30 days prior to the contract terminating;
    - All equipment purchased with NFCSP funds and required documentation shall be given to the new grantee with approval of the Aging Division, Community Living Section;

- The new grantee is allowed ninety (90) days to assess all transferred client.
- The NFCSP will be discontinued because a new grantee could not be contracted to provide the services. A letter will be sent fourteen (14) calendar days prior to the contract termination to the Caregivers informing them:
  - Their NFCSP services will be ending on a specific date because a new provider could not be contracted to provide the services;
  - Refer the Caregivers to the Aging Division, Community Living Section, providing them with the 800 number for potential programs to assist them;
  - A checklist of equipment and documentation shall be provided by the grantee to the Aging Division, Community Living Section's NFCSP Manager 30 days prior to the contract terminating;
  - All equipment, valued over \$500, purchased with NFCSP funds shall be returned to the Aging Division, Community Living Section seven (7) calendar days after the contract has ended;
  - Documentation shall be maintained and be available to the Aging Division, Community Living Section for at least six years.

## ***Legal Requirements***

- Comply with all applicable federal and state laws, rules and regulations, and policies and procedures governing Older Americans Act programs
- The National Family Caregiver Support Program providers shall apply the Aging Division, Community Living Section rules, policies and procedures regarding competency requirements for qualified service providers and termination of qualified service provider status to the NFCSP service providers.
- The National Family Caregiver Support Program providers shall apply the Aging Division, Community Living Section rules, policies and procedures regarding recovery of funds from providers upon establishment of noncompliance.
- **Advanced Health Directives:** If a Caregiver and/or Care Receiver has documentation on his/her wishes regarding performing cardiopulmonary resuscitation (CPR), this documentation can be in the client file. It is the client and/or family's responsibility to make sure there is a document stating the client's wishes posted in the client's home in clear sight of any provider staff or EMS staff. If no document is posted in the home, provider staff should perform CPR. Providers shall have a policy regarding advanced directives, CPR, and comfort one as to provide guidance to their staff.
- An applicant or client may request a review of the determination if: the request for services is not acted upon within a reasonable time; the client does not agree with the determination of ineligibility; or being discharged from services under this program. If you would like to appeal this decision, you must:
  - Write to Organization's Board of Directors within ten (10) days of date of this letter. The letter to the Board of Directors needs to outline your desire for an appeal of the discharge process and the reason(s) for the appeal.
  - The Board of Directors will contact you upon receipt of your letter to begin the appeal process.

## ***Consumer's Right to Self-Determination***

- All individuals have a right to choose how they live, where they will live, as long as they have the capacity to consent (WSS 35-20-102) and are able to understand the consequences of their actions. All adult individuals are presumed legally competent unless they have been deemed incompetent by a court. It is essential, however, to guard against allowing a participant to continue to live in an environment or situation that is clearly unsafe. While it is essential to assist people however possible, National Family Caregiver Support Program personnel are not expected to assist a person in continuing to live in a situation that is unsafe or to make plans that are unrealistic and unsafe. If the environment is unsafe and staff therefore has "reason to believe" that it is due to self neglect that this is also a mandatory reportable allegation.
- Reports to Adult Protective Services (APS) or law enforcement are mandated by state law. Wyoming is a mandatory reporting state (WSS 35-20-111 b) and everyone in their professional and personal capacity should call APS or law enforcement if there is reasonable cause to suspect abuse, neglect, self-neglect, intimidation, abandonment, or financial exploitation.

## ***SAMS' Services and Sub-services for the National Family Caregiver Support Program***

### **Services:**

**Required - Information (Service Category)** provides individuals with current information on services available within their communities, service delivery is grantee initiated. This service is excluded from entering demographic data and no Information Release Form is required because it is recorded by activity. There are four sub-services under Information and posted aggregately in "Consumer Groups" under client aggregate:

- Sub-Service required - Group Education NFCP – Presentations to Kiwanis, Rotary, organizations, etc.;
- Sub-Service required - Health Fairs NFCP
- Sub-Service required – Newsletters NFCP – Newsletters to the public who are not on the NFCSP;
- Sub-Service required - Public Education to Families NFCP – Television, radio and newspaper ads or flyers, etc., informing the community about the NFCSP,

**Detailed Individualized Data (demographic)** is needed for the services discussed below because information is specific to each eligible client. Read "SAMS Reporting" on page 35 for a detailed report of demographic data. An Information Release Form is required for the services and sub-services listed below.

**Outreach NFCP** per the AoA's definition is intervention by an agency or organization for the purpose of identifying potential clients (or their caregivers) and encouraging their use of existing services and benefits. [NOTE: this refers to individual "one-to-one" contacts between a service provider and an elderly client or caregiver; a person already on WYHS or a Title III program and receiving services.] This contact is initiated by the Grantee.

An example of this Outreach is: A grantee went through their client list and noted any individual not currently on the NFCSP but would meet the eligibility requirements listed below for the program, which means the person is already on either Title III: B, C1, C2, D or WyHS and the Information Release Form has already been signed. The provider sent out an INDIVIDUAL letter to each client outlining the program and encouraging them to join the program. This is also true if the provider called each person in their client list who met the requirements for the NFCSP. **NOTE:** This would be posted to each individual participant under their name through a roster or service delivery.

**Required – Assistance (Service Category) to Caregivers** is an access and care coordination service that provides individuals with information on services available within the communities; links individuals to the services and opportunities that are available within the communities; and to the maximum extent practicable, establishes adequate follow-up



procedures. The contact is initiated by the Caregiver. A Release of Information Form doesn't need to be completed for Assistance.

**NOTE:** For this service and two sub-services listed below to qualify to be counted the individual on the phone or talking to face to face must be an eligible Caregiver. If the individual is an eligible Caregiver all you need is their name to enter the data:

- Taking care of a person over age 60;
  - Has a diagnosis of Alzheimer's or related Dementia at any age;
  - Taking care of a grandchild age 17 and younger;
  - Taking care of a person 18 to 59 with a severe disability.
- Sub-Service - Information on Services to the Caregiver NFCP, is talking to an individual on the phone and informing them of services available within the community and NFCSP. Unit Type is Per Contact.
- One to One/Face to Face contact with a Caregiver, the eligible client asks for information about service in the community and the NFCSP. The eligible client initiates the contact. Unit Type is Per Contact.

**Required - Case Management:** Either in the form of access or care coordination in circumstances where the client is experiencing diminished functioning capacities, personal conditions or other characteristics which require the provision of services by formal service providers. Activities of case management include evaluating needs, developing care plans, authorizing and coordinating services among providers, providing follow-up, re-evaluation and travel time, as required. Unit Type is Hourly. There are six sub-services under Case Management:

- Sub-Service - Evaluation Initial Care Giver NFCP, is the time, hours, spent developing the service plan, doing the caregiver evaluation, caregiver services evaluation, caregiver assessment tool and the information release form.
- Sub-Service - Evaluation Initial – Care Receiver NFCP, if the Caregiver wants any care plan required service, respite and supplement services, an AGNES needs to be done on the Care Receiver.
- Sub-Service - Follow-up of Evaluation – Care Giver NFCP, at least 45 days after the initial start date, a phone call or at any time during the service plan one year period the ACC was in contact with the Caregiver.
- Sub-Service - Quarterly evaluation – Caregiver NFCP, every 90 days after the initial start date a phone call or personal visit with the Caregiver shall happen to see if there are any changes needed;
- Sub-Service - Re-evaluation renewal of Caregiver NFCP, annual review which consists of a new service plan, caregiver evaluation, caregiver services evaluation, information release form and caregiver assessment tool.

- **Sub-Service - Re-evaluation renewal of Care Receiver NFCP**, if the Caregiver wants to continue care plan required services, respite and supplemental services, an AGNES needs to be done on the Care Receiver annually.

*Individual Counseling, Support Groups, and Caregiver Training* (Service Category) is for the caregivers to assist them in making decisions and solving problems relating to their care giver roles. **Counseling** is professional counseling provided by a contract or volunteer Licensed Professional Counselor, a person with a Master in Social Work or Bachelor in Social Work that is accredited through a licensing board, in either individual or group settings. **Support Group** is scheduled group meetings, with a facilitator, providing an opportunity for individuals with similar concerns to share life events. **Peer Support Groups** are scheduled group meetings, without a facilitator, providing an opportunity for individuals with similar concerns to share life events. Each Caregiver will receive a unit of service for each session they attend. Unit Type is Hourly. There are five sub-services:

- **Sub-Service - Caregiver Conference NFCP** is for the current caregivers and potential caregivers. This sub-service requires prior approval from the NFCSP Manager;
- **Sub-Service - Counseling Caregivers NFCP** this service has a maximum of 15 sessions;
- **Sub-Service - Peer Support NFCP** is a support session with no facilitator;
- **Sub-Service - Support Group NFCP** is a support session with a facilitator;
- **Sub-Service - Training of Caregivers NFCP** is a session of trainings the Caregiver attended, not limited to, proper personal care, lifting or assistance in, but not limited to, paying bills, making meals, etc.

*Respite* (Service Category) is services which offer temporary, substitute supports or living arrangements for qualified persons (or child in the case of grandparents raising grandchildren) in order to provide a brief relief or rest for family members or other caregivers. The Caregiver can stay in the house during the respite if he/she chooses or can go somewhere. The Grandparent can receive respite too. Respite is provided hourly even for a camp for the grandchildren. Unit Type is Hourly or Per Day. There are four sub-services:

- **Sub-Service -Adult Day Care** is provided on an hourly basis in an Adult Day Care setting.
- **Sub-Service - In-Home NFCP** is providing respite to the Caregiver, on an hourly basis, in the home of the Caregiver or the Care Receiver.
- **Sub-Service - Institutional NFCP** can occur if the Caregiver needs to leave town for a period of days and needs a place for the Care Receiver to stay while out of town. The Caregiver and/or the ACC will make arrangements with the nursing home to accommodate the Care Receiver for that period of time. The Care Receiver may have to meet the nursing home criteria for admittance.
- **Sub-Service - Assisted Living NFCP** can occur if the Caregiver needs to leave town for a period of days and needs a place for the Care Receiver to stay while out of town. The Caregiver and/or the ACC will make arrangements with the assisted living facility to

accommodate the Care Receiver for that period of time. The Care Receiver may have to meet the assisted living facility's criteria for admittance.

*Supplement Services* (Service Category) are services provided on a limited basis to complement the care provided by the Caregiver. They are entered based upon the services provided, see NAPIS booklet for detailed data entry guidance. There are 16 services and sub-services for Supplemental Services. If you do not have access to the services and sub-services listed below please call the Aging Division, Community Living Section and ask for access to the services and/or sub-services.

- **NFCP Supplement Services**
  - Sub-Service - Loan Closet NFCP
  - Sub-Service - Volunteers NFCP
- **NFCP Personal Emergency Response System (PERS)** the equipment that alerts someone if something happens to a Caregiver or Care Receiver. If the Care Receiver needs a PERS please post it to the Caregiver's Service Plan. There are two sub-services.
  - Sub-Service - Installation NFCP the one time installation fee;
  - Sub-Service – Monthly NFCP is the monthly service fee;
- **Assisted Transportation NFCP** pays for the Caregiver, not the Care Receiver, to get from one place to another.
- **NFCP Assistive Devices** are durable medical equipment, no more than \$400 per caregiver per grant year unless prior approval from the NFCSP Program Manager was obtained before the assistive devices were obtained, that assists the Caregiver with taking care of the Care Receiver.
- **NFCP Chore** is the Caregiver who received a service that will make their caregiving role easier by having their lawn mowed, snow shoveled, wood chopped, etc.;
- **NFCP Home Delivered Meals** are meals delivered to the Caregiver or Care Receiver to relieve stress for the Caregiver. The NFCSP will reimburse at \$5.25 per meal.
- **NFCP Homemaking services** are, but not limited to, housekeeping, basic meal preparation, laundry, and shopping, not picking up prescriptions, for the Caregiver. This includes doing the services for the Care Receiver too.
- **NFCP Incontinence Supplies** include diapers, pads and other protection products. The unit is the numbers of products listed above that were purchased to assist the Caregiver.
- **NFCP Minor Home Modifications** are minor modifications, no more than \$400 per caregiver per grant year unless prior approval from the NFCSP Program Manager was obtained before the home modification was started, to the Caregiver or Care Receiver's home to assist the Caregiver in taking care of their loved one.
- **NFCP Personal Care** can only be provided by a CNA, LPN or RN. The services provided under personal care are, but not limited to, bathing, grooming, feeding, ambulating, exercising, oral hygiene and skin care.

## ***SAMS Reporting – Detailed Individualized Data (Demographic Data)***

These individual services must be report by unduplicated count of persons served, by client characteristics and may be needed for both the Caregiver and the care receiver. Demographic data shall include the following, as indicated in the AGNES form and required by NAPIS:

- Name – First and Last
- Address – street address, city, state and zip
- Date of Birth
- Identification number (generated by software)
- Gender
- Race/Ethnicity
- Rural status
- Live alone status
- Poverty status
- Activities of Daily Living (ADL) /Instrumental Activities of Daily Living (IADL) status
- Nutrition Risk Status (meals only)
- Service units received by service

The reporting requirements are the same for NFCSP as in Cluster One, NAPIS booklet, except the reporting of ADL/IADL status. The ADL/IADL reporting is not required by NFCSP.

Read the NAPIS booklet for detailed instructions regarding posting or call the Aging Division, Community Living Section if you have questions.

If a person requests his/her personal data be removed from SAMS the grantee can grant that request but will have to charge the person for all the services he/she has received during that timeframe. The person will have to reimburse the grantee for the services provided then the grantee will have to reimburse the Aging Division, Community Living Section for services that were paid for.

SAMS is not the reporting mechanism to record how many hours it took the ACC to:

- Organize the Caregiver Training,
- File the paperwork,
- Do the quarterly program reports,
- Prepare for the peer or support groups, etc.

SAMS is a record of the services that have been provided to the Caregiver. It is a data driven system.

## ***SAMS Definitions***

Refer to your NAPIS book for definitions. There are revisions to the definitions:

**Grandparent or other older relative Caregiver of a child** – A grandparent, step grandparent or other relative of a child by blood or marriage, who is 55 years of age or older and:

- Lives with the child who is 17 years of age or younger;

**Group Education (Encounter)** – A scheduled presentation to educate groups of people, Kiwanis, Rotary, organizations, etc., about the National Family Caregiver Support Program.

**Newsletters** – are sent to the general public, who are not on the NFCSP, to inform them about the NFCSP.

**Public Education to Families** – Television, radio or newspaper ads, etc. to inform interested family members about the National Family Caregiver Support Program (NFCSP).

## ***Reporting Definitions:***

### ***(1) Information Services***

- A service for Caregivers that provides the public and individuals with information on resources and services available to the individuals within their communities. (Service units for information services are activities directed to large audiences of current or potential Caregivers such as disseminating publications, conducting media campaigns and other similar activities).
- Outreach (1 to 1 contact) – Intervention with individuals initiated by an agency or organization for the purpose of identifying potential Caregivers and encouraging their use of existing services and benefits.

### ***(2) Assistance***

- Assistance (1 contact) – A service that assists Caregivers in obtaining access to the services and resources that are available within their communities. To the maximum extent practicable, it ensures that the individuals receive the services needed by establishing adequate follow-up procedures.
- Care Coordination (1 hour) – Assistance either in the form of access or care coordination in circumstances where the Care Receiver is experiencing diminished functioning capacities, personal conditions or other characteristics which require the provision of services by formal service providers or family Caregivers. Activities of case management include such practices as assessing needs, developing care plans, authorizing and coordinating services among providers, and providing follow-up and reassessment, as required.

**(3) Individual Counseling, organization of Support Groups, and Caregiver training (1 session)**  
– To assist the Caregivers in the areas of health, nutrition, and financial literacy, and in making decisions and solving problems relating to their caregiving roles. This includes –

- Individual Counseling – A person qualified by training or experience and licensure shall be designated to supervise the service. The service shall be supervised by a counselor licensed by the State of Wyoming.
- Support Groups – Programs that offer sessions in which Caregivers discuss their attitudes, feelings, and problems and with input from other members of group, attempt to achieve greater understanding and adjustment and explore solutions to their problems.
- Caregiver Training – Training/education that is designed to assist Caregivers with acquiring knowledge and skills that will help them in providing care.

**(4) Respite Care (hourly or daily)** – Services which offer temporary, substitute supports or living arrangements for Care Receivers in order to provide a brief period of relief or rest for Caregivers. Respite care includes in-home respite; respite in a non-residential program such as adult day care; and institutional respite provided by placing the Care Receiver in an institutional setting such as a nursing home for short period of time as a respite service to the Caregiver.

**(5) Supplemental services (refer to the NAPIS booklet)** – Services provided on a limited basis to complement the care provided by Caregivers. Examples include, but are not limited to, home modification, home-delivered meals, medical equipment and supplies, personal emergency response system (PERS), incontinence supplies, and assistive technology.

## ***Resources***

AARP	1-866-663-3290 or <a href="http://www.aarp.org/state/wy">http://www.aarp.org/state/wy</a>
Adult Protective Services	Call your local DFS Office or Law Enforcement
Aging Division, Community Living Section	1-800-442-2766
Elderly & Tax Refund	1-866-989-8901
Embrace Caregiving	<a href="http://www.Caregiver.CC">http://www.Caregiver.CC</a>
Legal Aid of Wyoming	1-877-432-9955 or <a href="http://www.wyominglegalservices.org/">http://www.wyominglegalservices.org/</a>
LIEAP	1-800-246-4221
National Caregivers Library	<a href="http://caregiverslibrary.org/">http://caregiverslibrary.org/</a>
National Family Caregivers Association	<a href="http://www.thefamilycaregiver.org/">http://www.thefamilycaregiver.org/</a>
Ombudsman	1-877-856-6880 and/or 1-307-777-2885
Senior Companion Program	1-877-856-6880
Wyoming Guardianship Corporation	1-307-635-8422

