

**Wyoming Department of Health  
Aging Division, Community Living Section**

**Older Americans Act  
Title III-E National Family Caregiver Support  
Program Policies and Procedures**



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## I. 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 Older Relative Caregivers. Families are the major provider of long-term care, but research has shown that caregiving enacts a heavy emotional, physical, and financial toll. Many Caregivers and Older Relative 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 via In-Home Respite, Out-of-Home Respite (day), Out-of-Home Respite (overnight) and Other Respite; 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.

## II. 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 disabilities and to those with Alzheimer's Disease, Dementia and related disorders (as defined in the Older Americans Act, Section 372(b), (1)&(2):

- Older Relative Caregivers 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. Parents, biological or adoptive, age 55 or older are eligible if providing care to their adult child(ren) who are 18 to 59 with disabilities.
- Older individuals providing care to individuals with disabilities, including children with disabilities;
- Caregivers who are older individuals with greatest social and economic need (with particular attention to low-income older individuals); and
- Family Caregivers who provide care for individuals, of any age, with Alzheimer's disease, Dementia and related disorders with neurological and organic brain dysfunction.

### **III. 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 2020.

### **IV. 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.

#### **a. 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 in a county.

All services must be provided in the state of Wyoming.

#### **b. Staffing Requirements**

All grantees shall complete a background check on all employees working directly with consumers of the National Family Caregiver Support Program. All staff members providing care or services in the home must be insured and bonded. This includes, but is not limited to: ACCs, homemakers, CNAs, nurses, and respite staff.

Grantees shall employ a NFCSP Access Care Coordinator (ACC). NFCSP's ACCs shall complete the ACC training and certification program provided by the Division within six months of their initial hire date and annually until they have been an ACC for 18 months. Nineteen months and after the ACC is encouraged to attend the annual ACC Training. Project Directors shall notify the NFCSP Manager when an ACC is released. NFCSP ACC shall also meet the following qualifications and requirements:

- Be 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; and
- Shall not have been convicted of a felony or a misdemeanor related to abuse, neglect, exploitation, intimidation, or abandonment of adults or children.

The ACC Certification is grantee specific. It does not travel from one grantee to another.

The following shall apply to all Licensed Nurses and Certified Nursing Assistant (CNA) personnel:

- Prior to working independently in an eligible participant's home, the following reference checks must be completed and documented in the employee's personnel file:
  - o 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);
  - o 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.
  - o The grantee must contact the Wyoming Department of Family Services to ensure the person hired does not appear on the Central Registry.

### **c. Fiscal**

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 NFCSP a NFCSP Caregiver Service Plan, Caregiver Evaluation, and Caregiver Services Evaluation.

#### **1) Limitations**

- o Individual service provider rates for 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.
- o Respite care is authorized for up to 50 hours per month per Caregiver. 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 Division's NFCSP Manager for prior approval. Approval will be determined on a case-by-case basis and may be limited to a one-time allocation.
- o Out-of-Home Respite (overnight), i.e. an assisted living facility and/or nursing home, on an occasional or emergency basis – NFCSP will pay up to \$600 for an occasional or emergency placement per grant year per Caregiver per Care Recipient based upon grantee's budget. Prior approval for additional respite hours for the month must be submitted in writing to the NFCSP Manager.
- o Primary Caregivers who are being paid by private arrangement to provide care are not eligible to receive NFCSP services.
- o Supplemental Services, on a limited basis, are intended to complement the care provided by Caregivers. Costs exceeding \$400.00 per year per eligible participant for Assistive Safety Devices and Minor Home Modifications shall be pre-approved in writing by the Division's NFCSP Manager.
- o If a NFCSP eligible participant 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 eligible participant may be readmitted to the program subsequent to the case closing.

- If there is a waiting list the eligible participant should be added to the grantee's waiting list.
- o 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.
- o If a Care Recipient passes away or moves into an Assisted Living Facility and/or Nursing Home the Caregiver can receive Information, Assistance and Counseling/Support Groups/Training services for 12 months.

#### **d. Waiting Lists**

Utilizing the monthly Report of Waiting Lists form, eligible participants on waiting lists for services under the NFCSP program will be submitted to the Division by the 5th working day of the following month. If the grantee has no one on the waiting list, a Report of Waiting List is still required. A Waiting List Policy and Procedures will be developed by each grantee. A process regarding how eligible participant's names are added and removed from the waiting list will be included.

#### **e. General Requirements**

- o All referrals will be contacted within (3) business days.
- o Individuals seeking services will be provided with service options. The individual has the right to make an independent choice of service providers.
- o All contacts with NFCSP eligible participants, 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.
- o Make use of trained volunteers to expand the provision of the five service components.
- o Providers will ensure appropriate program/financial reporting and budget reconciliation.
- o Providers will attend trainings planned/approved by the Division if ACCs are new hires, 18 months of work experience or less. ACCs who have been an ACC 19 months or longer can attend if they want to.
- o Providers will utilize forms required by the Division.
- o Forms utilized by providers will include all information required by the Division. No adjustments to forms will be made.
- o Adequate records will be maintained to record and evaluate service provision, to ensure responsible fiscal management, and to provide timely and accurate reports.
- o Each eligible participant and provider case record will be maintained in an individualized file AND secured in a locked file cabinet, a locked area, and/or a restricted computer program.

- o Service activities should be coordinated with existing community agencies and voluntary organizations to maximize service provision and avoid duplication.
- o All services shall be promoted through a variety of social service networks (i.e., churches, service organizations, schools, professional conferences, etc.).
- o Unexpended program income generated by this program will be remitted to the Division within 30 days in the event that the provider no longer provides services under this program.
- o Services provided outside of the contract period are not eligible for payment or reimbursement by the Division.
- o Provider shall document costing procedures for all service categories and services provided through the NFCSP program.
- o Incident Reports, per grantee's internal policy, will 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 eligible participant's folder.
- o There shall be an Organizational Emergency Preparedness Plan in place for the organization and where services are being provided.
- o If a Care Recipient dies or moves into an Assisted Living Facility and/or Nursing Home the Caregiver can receive Information, Assistance and Counseling/Support Groups/Training services for 12 months.

## **f. Administrative Requirements**

- o Wyoming is a mandatory reporting state (WSS 35-20-111 b) and everyone in their professional and personal capacity should call Adult Protective Services (APS) or law enforcement if there is reasonable cause to suspect abuse, neglect, self-neglect, intimidation, abandonment, or financial exploitation.
- o 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, NFCSP 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 have "reason to believe" that it is due to self-neglect that this is also a mandatory reportable allegation.
- o Comply with all applicable federal and state laws, rules and regulations, and policies and procedures governing Older Americans Act (OAA) programs
- o The NFCSP providers shall comply with the Division rules, policies and procedures.
- o The NFCSP providers shall have an appeal process in place for eligible participants who do not

agree with the determination of ineligibility.

- o A&D eligible participant data records, assessments, and service delivery shall be entered no later than the fifteenth day after the end of the monthly service period.
- o The grantee shall keep the Caregiver's files after termination for the Division prescribed length of record retention in accordance with the requirements of the OAA, or per the grantee's internal policy (whichever is greater).
- o Each NFCSP grantee shall develop cost capitations for fiscal control-capitation.
- o Requests for an extension during the period, (a report or related document), that is due to the division must be in writing. Email is considered an acceptable written form.
- o Staff members paid with funds from the Division are prohibited from accepting any and all individual gratuities, cash, gifts, property, tips, or other incentives from the eligible participant or eligible participant's family.
- o CNAs 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 eligible participant's rights, adhere to legal and ethical concepts, communicate appropriately, ensure optimum eligible participant safety, practice appropriate infection control, and correct body mechanics. CNAs may perform services as outlined in the Wyoming State Board of Nursing rules.
- o Documentation – Reimbursement cannot be given if there is no appropriate documentation. (If it wasn't documented it didn't happen ~ no pay.)

#### **g. Prohibited Activities**

- o Duplication of services.
- o Billing the Aging Division, Community Living Section for services paid by another funding source.
- o Breach of confidentiality.
- o Signing NFCSP documents for the Caregiver and/or Care Recipient. The only people who can sign the documents are the Caregiver or the Power of Attorney.
- o Use of OAA funds to provide Caregiver services to a Caregiver who does not meet the eligibility criteria.
- o 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.
- o Altering or back dating documentation relating to the NFCSP.



- o No OAA program site shall allow any person or organization to attempt to influence the outcome of any Federal, State, or local election referendum initiative or similar procedure through in-kind or cash contributions, publicity or similar activity on the premises of the program site.

**h. 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:
  - o The transferring grantee will inform their eligible participants 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 eligible participant will not be arbitrarily dropped from the program due to the transfer;
    - Informing the eligible participant that a new evaluation and service plan is required and will occur within ninety (90) days of transfer; and
    - The date of transfer.
  - o A checklist of equipment and documentation shall be provided by the transferring grantee to the new grantee and the Division's NFCSP Manager 30 days prior to the contract terminating;
  - o All equipment purchased with NFCSP funds and required documentation shall be given to the new grantee with approval by the Division;
  - o The new grantee is allowed ninety (90) days to assess all transferred eligible participants.
- 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:
  - o Their NFCSP services will be ending on a specific date because there is no grantee available to provide the services;
  - o Refer the Caregiver to the Division, who can assist them to find potential programs;
  - o A checklist of eligible participant's documentation shall be provide by the grantee to the Division's NFCSP Manger 30 days prior to the contract terminating;
  - o The grantee shall keep the Caregiver's files after termination for the Division prescribed length of record retention in accordance with the requirements of the OAA, or per the grantees internal policy (whichever is greater).

## **V. Eligibility**

The ELIGIBLE PARTICIPANT for the National Family Caregiver Support Program is:

- o The Caregiver must be 18 years of age or older.

- o The Caregiver(s) is providing care to older individuals age 60 and older.
- o Older Relative Caregiver age 55 and older who care for children who are 17 and younger.
- o Older Relative Caregivers providing care for adult children with a disability who are between 18 and 59 years of age shall be 55 years and older and can be the child's biological or adoptive parent(s).
- o Care Coordination and Counseling can be provided to any Caregiver, living in the State of Wyoming, 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.
- o 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 OAA and administered by the AoA based solely on their alien status.
- o The Caregiver does not have to be related to the Care Receiver.
- o The Caregiver does not have to live with the Care Receiver.
- o 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.
- o The Provider's staff and family members may receive Caregiver services. If the family member is related to the ACC, another ACC will be assigned to that family member.

There can be up to three (3) Caregivers 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.

There can be up to three (3) Care Receivers per Caregiver; however, there must be a service plan for each Caregiver. Caregivers are unique individuals and their files/charts/documentation must be maintained separately.

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

## **VI. Voluntary Contributions**

Eligible participants shall be provided the opportunity to contribute to the cost of the service: assistance, counseling/support groups/trainings, respite and supplemental services enhances the program. Eligible participants 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.

## **VII. 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.

## **VIII. Caregiver Service Plan**

The NFCSP Service Plan is a required document, provided by the Division, for all eligible participants 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 Division NFCSP Service Plan. This plan shall be kept in the eligible participant's file. The NFCSP Service Plan identifies the services that the eligible participant will receive and the individual goals the eligible participant has identified as being important to them. Services provided to the Caregiver that are not indicated on the service plan are not eligible for payment or reimbursement by the Division.

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.

### o Design and Implementation:

- Using the results of the Caregiver Evaluation, Caregiver Services Evaluation, and the Caregiver Information Form a NFCSP Service Plan will be designed and implemented that addresses the needs unique to the Caregiver providing care to the Care Recipient. The effective dates on the NFCSP Service Plan cannot exceed 12 months. The initial and renewal NFCSP Service Plan shall be done at the Caregiver's home.
- A NFCSP Service Plan shall be completed for a new Caregiver and when the effective date expires. The Caregiver shall receive a minimum of two contacts during the first three months on the program and quarterly thereafter.
- The NFCSP Service Plan shall be reviewed every quarter, (90 days), after the initial review with the Caregiver. The quarterly visits shall comprise of one (1) at the Caregiver home and the other two (2) visits may be over the phone or at a convenient location for the Caregiver. 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 quarterly, (90 day), review. If a change in a Caregiver's service plan occurs, the ACC shall complete a Change of Status form and provide a copy to the Caregiver.
- ACCs shall monitor the NFCSP Service Plan to assure the Caregiver's goals and outcomes have been met. Progress notes shall be written each time the ACC sees the Caregiver.
- ACCs may never sign for the Caregiver on any required documents.

## **IX. Forms**

### o Forms needed include:

- Caregiver Information (CI) – done annually or if there is a significant change in status.
- Caregiver Evaluation (CE) - done every six months or if there is a significant change in status.
- Caregiver Services Evaluation (CSE) - done annually or if there is a significant change in status.

- Caregiver Service Plan (CSP) – done annually, with quarterly visits, or if there is a significant change of status.
- o Forms needed for providing services, change in services, etc.:
  - Task Sheet – done per provider’s internal process to document services provided.
  - Change of Status Form – done when services are changed on the Service Plan.
  - Competency Form – completed every six (6) months by the ACC, for their homemakers, and/or a nurse for their CNAs and/or homemakers, to determine the competency level of a homemaker and/or CNA.
  - Incident Form – completed if an incident happens while services are being provided.
  - AGNES Aging Needs Evaluation Summary is the division’s evaluation and level of care tool used to determine the ADL/IADLs for the Care Receiver. It is done annually or change of status.
  - Nursing Assessment Form shall be filled out and completed by a licensed nurse. The adult nursing assessment shall be updated annually and/or as needed.
  - Delegation Form shall be completed by a licensed nurse form for a Care Receiver who is receiving personal care services. The intention of this form is to meet the WY Board of Nursing requirement to delegate the unique personal care tasks, for a specific client, to a CNA. This form shall be completed annually and/or with a significant change of status.

## **X. Termination, Denial, and Suspension of Services**

- o Termination and Denial
  - The provider shall consider termination of NFCSP services when continued service to the eligible participant presents an immediate threat to the health or safety of the eligible participant, the provider of the service, or others. The ACC shall inform the Division’s 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.
  - An eligible participant shall be notified, within 14 calendar days, (via a written 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 Care Recipient. During the 14 calendar days services will be provided unless there is an immediate threat to the health or safety of the eligible participant, the provider of the service or others.
- o Suspension of Services
  - The provider may consider suspending service(s) for such reasons, but is not limited to:
    - o If a pest infestation has occurred
    - o Illegal drug use while Caregiver services are being provided

- Hospitalization
- An eligible participant shall be notified within five (5) calendar days, via a written certified letter, the reason for the suspension and under what circumstances the suspension may be lifted. The letter should include a contact from your organization and the contact's number.

## Appendix A: Definitions

- ACC. Access Care Coordinator is a person certified by the Community Living Section to provide Care Coordination services for the National Family Caregiver Support program and the Wyoming Home Services program.
- AGNES. Aging Needs Evaluation Summary is the Division's evaluation and level of care tool.
- Activities of Daily Living (ADL). A way to rate how eligible participants can perform these personal activities (bathing, toileting, eating, etc.).
- 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.
- 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.
- Caregiver Service Plan (CSP) is the tool used to record what services the ORC may need to continue to provide care for the child(ren).
- Eligible Participant. The Caregiver participating in the NFCSP.
- Child(ren). Means an individual who is 17 years of age and younger or who is an adult child(ren) 18 – 59 years of age with disabilities.
- 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 (FFY). The grant period of twelve months starting October 1 through September 30.
- 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 –
  - o Is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing, or supervision; or
  - o At the option of the State, is unable to perform at least three such activities without such assistance.
- 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 eligible participants can perform these life activities (meal preparation, shopping, managing money).
- Older Relative Caregiver. 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. These Caregivers can be parents, biological or adoptive who are 55 years old and older, of an adult Care Recipient between the ages of 18 to 59 who has disabilities.
- Older Relative Caregiver Child Information Form (ORCI) is the demographic form utilized.
- Older Relative Caregiver Evaluation Form (ORCE) is a tool to assess the Caregiver's emotional, physical and mental status.
- Older Relative Caregiver Services Evaluation (ORCSE) is a tool to assess what services the Caregiver may need to continue to provide care for the child(ren).
- Older Relative Caregiver Service Plan (ORCSP) is the tool used to record what services the ORC may need to continue to provide care for the child(ren).
- 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.
- A&D. WellSky Aging & Disability Management System - Grantees of the Division have to record information into this data system.

## **Appendix B: A&D' Services and Sub-services for the National Family Caregiver Support Program**

### **Services:**

All grantees who are awarded the NFCSP contract from the Division shall offer Information and Assistance services. The grantee must choose to offer at least one the remaining services per their approved federal fiscal year grant application.

**Required - Information** (Service Category and Service) provides individuals with current information on services available within their communities, service delivery is grantee initiated. This service is excluded from entering demographic data because it is recorded by activity. If the grantee presented to the Rotary and there were 55 people there it would be entered into A&D as, 1 unit 55 consumers served. There are four sub-services under Information and posted aggregately in "Consumer Groups":

- Sub-Service required - Group Education NFCP – Presentations to Kiwanis, Rotary, organizations, etc. who assist those who need assistance;
- Sub-Service required - Health Fairs NFCP – Participating in community health fair to inform people in the community about the Caregiver Program;
- Sub-Service required – Newsletters NFCP – Newsletters to the public who are not on the NFCSP; Newsletters on the website.
- Sub-Service required - Public Education to Families NFCP – Examples of promoting the NFCSP and helping individuals identify themselves as Caregivers: ads in the local newspaper, discussing the Caregiver program on the local radio and/or television, disseminating brochures, flyers, etc.

*Outreach NFCP* per the AoA's definition is intervention by an agency or organization for the purpose of identifying potential eligible participants (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 eligible participant 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 eligible participant 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. The provider sent out an INDIVIDUAL letter to each eligible participant outlining the program and encouraging them to join the program. This is also true if the provider called each person in their eligible participant list who met the requirements for the NFCSP.

**Required – Assistance** (Service Category and Service) 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.



NOTE: For this service and one sub-services listed below to qualify to be counted the individual on the phone or talking to face to face must be asking about caregiver services or talking about caregiving:

- Taking care of a person over age 60; or
  - Has a diagnosis at any age of Alzheimer's disease, Dementia and related disorders with neurological and organic brain dysfunction; or
  - Older Relative Caregivers taking care of a child age 17 and younger; or
  - Older Relative Caregivers taking care of a person 18 to 59 with a disability or a Parent, biological or adoptive, taking care of their adult child, 18 to 59, with a disability.
- Sub-Service - Information on Services to the Caregiver NFCP, (*not on the program*) is talking to an individual on the phone, in person and informing them of services available within the community and NFCSP. (Unit Type is Per Contact).
- ~~Sub Service - One to One/Face to Face contact with a Caregiver, (*not on the program*) the eligible participant asks for information about service in the community and the NFCSP. The eligible participant initiates the contact. (Unit Type is Per Contact). Ending 09/30/2021~~

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.

**Required - Case Management (Care Coordination (on the program):** Either in the form of access or care coordination in circumstances where the eligible participant 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. Also, if the ACC checks the PERS unit monthly, requirement, that service is entered under Case Management (Care Coordination). (Unit Type is Hourly).

There are six sub-services under Case Management (Care Coordination):

- Sub-Service - Evaluation Initial Caregiver NFCP, is the time, hours, spent developing the Caregiver four mandated forms: 1) service plan, 2) Caregiver evaluation, 3) Caregiver services evaluation, and 4) Caregiver assessment tool. The initial evaluation will at completed at the Caregiver's residence. The Caregiver Evaluation must be done every six months or if a change of status happens.
- Sub-Service - Evaluation Initial – Care Receiver NFCP, if the Caregiver wants respite and/or supplement services, an AGNES needs to be done on the Care Receiver.
- Sub-Service - Follow-up of Evaluation – Caregiver 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 will happen to see if there are any changes needed. One quarterly visit will be at the Caregiver’s residence and the other two will be at a location convenient for the Caregiver or by phone, facetime, etc.;
- Sub-Service - Re-evaluation renewal of Caregiver NFCP, annual review which consists of a new service plan, Caregiver evaluation, Caregiver services evaluation 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 (on the program)* (Service Category) is for the Caregivers to assist them in making decisions and solving problems relating to their care giver roles. The ACC will provide leadership relative to Caregiver issues on behalf of eligible Caregivers, be a resource for caregiving issues in the community, and create/maintain working partnerships with other agencies and organizations that provide services to Caregivers. Educational materials may be provided as needed.

**A. 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.

**B. 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.

**C. Training** is education provided to the Caregiver to assist with their caregiving duties. Each Caregiver will receive a unit of service for each session they attend. (Unit Type is Session).

There are four sub-services:

- Sub-Service - Counseling Caregivers NFCP this service has a maximum of 15 sessions. 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 Division’s NFCSP Manager. An extension of the 15 hours will be considered on a case-by-case basis. Caregivers who require on-going counseling will be referred as needed;
- 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 (on the program)* (Service Category) is services which offer temporary, substitute supports or living arrangements for qualified older adult with at least two Activities of Daily Living (ADL) or Instrumental Activities of Daily Living (IADL) impairments (or child in the case of an Older Relative Caregiver 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. 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 a Caregiver with emotional stress or hospitalization and recovery.

Respite is provided hourly or per day for a camp for the grandchildren. (Unit Type is Hourly or Per Day).

There are four sub-services:

- Sub-Service -Adult Day Care (Out-of-Home Respite (day)) is provided on an hourly basis in an Adult Day Care setting.
- Sub-Service - In-Home NFCP (In-Home Respite) is providing respite to the Caregiver, on an hourly basis, in the home of the Caregiver or the Care Receiver.
- Sub-Service - Institutional NFCP (Out-of-Home Respite (overnight)) 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 (Out-of-Home Respite (overnight)) 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.

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 Division'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 can be provided while the Caregiver is employed and earning money, either part-time or full-time as long as there is funding in the provider's budget.

*Supplement Services (on the program)* (Service Category) are services provided on a limited basis to complement the care provided by the Caregiver. 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 Division and ask for access to the services and/or sub-services. The Division will confirm the services are on the current Caregiver Grant Application. Nutritional supplements are not covered under Supplemental Services.

## NFCP Supplement Services

- Sub-Service - Loan Closet NFCP (unit)
- Sub-Service - Volunteers NFCP (hourly)
- 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 make sure to put it on the Caregiver's Service Plan. PERS units must be checked monthly to confirm they are operating. (This is not an hourly service.) There are two sub-services.
  - Sub-Service - Installation NFCP the one time installation fee (monthly unit);
  - Sub-Service – Monthly NFCP is the monthly service fee (monthly unit);
- Assisted Transportation NFCP pays for the Caregiver, not the Care Receiver, to get from one place to another, (one way trip).
- 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 Recipient, (occurrence).
- NFCP Chore, (hourly), is for the Caregiver to make their caregiving role easier by having their and/or the Care Receiver's lawn mowed, snow shoveled, wood chopped, etc.;
- NFCP Meals are meals for the Caregiver and/or Care Receiver to relieve stress for the Caregiver. The NFCSP will reimburse at \$5.25 per meal. (meal)
- NFCP Homemaking services, (hourly), are, but not limited to, light housekeeping, basic meal preparation, laundry, and shopping, discuss with your Director, and not picking up prescriptions for the Caregiver. This includes doing the services for the Care Receiver too. Also, if the homemaker is asked to check the PERS unit monthly it is documented on the Task Sheet.
- NFCP Incontinence Supplies include diapers, pads and other protection products. When products are purchased they should be counted as a single occurrence for the Caregiver. (occurrence).
- 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. If the Caregiver and/or Care Receiver lives in a rental property, approval must be given by the landowner before any modifications can be done. (Occurrence).
- NFCP Personal Care, (hourly), can only be provided by a CNA, License Practical Nurse (LPN) or Register Nurse (RN). All must be bonded and insured. The services provided under personal care are, but not limited to, bathing, grooming, feeding, ambulating, exercising, oral hygiene and skin care. Also, if the CNA is asked to check the PERS unit monthly it is documented on the Task Sheet.
- 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 and approved by the Division's NFCSP Program Manager.