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| FAMILY CAREGIVER SUPPORT | | | | | | |
| PROGRAM STANDARDS AND WORKPLAN GUIDELINES | | | | | | |
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| Program Goal | | | | | | |
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| **Program Requirements** means Title III program requirements found in the OAA (42 U.S.C. 3001-3058); Code of Federal Regulations (45 CFR 1321); California Code of Regulations (22 CCR 7000 et seq.), and CDA Program Memoranda. | | | | | | |
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| The goal of the FCSP is to assist family caregivers as they support their loved one and maximize his or her independence and dignity while maintaining quality of life for both individuals. | | | | | | |
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| Program Service Description | | | | | | |
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| All five of the following categories must be provided by the Area Agency on Aging (AAA) for both Caring for the Elderly and Care for the Child. Therefore, organizations proposing service for multiple categories may be preferred. | | | | | | |
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| Proposers should request service objectives by category based on program capacity and estimated community need. | | | | | | |
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|  | **Category 1: Support Services – Caring for the Elderly** / **Caring for the Child** | | | | | |
|  | **Unit of Service: One hour** (reported in increments of 15 minutes) (a registered service) | | | | | |
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|  | **Caregiver Assessment** means an *FCSP Support Service* conducted by persons trained and experienced in the skills required to deliver the service that should result in a plan that includes emergency back-up provisions, is periodically updated, and will explore options and courses of action for caregivers by identifying their: | | | | | |
|  | |  | a. | Willingness to provide care; | | |
|  | |  | b. | Duration and care frequency preferences; | | |
|  | |  | c. | Caregiving abilities; | | |
|  | |  | d. | Physical health, psychological, social support, and training needs; | | |
|  | |  | e. | Financial resources relative for caregiving; and | | |
|  | |  | f. | Strengths and weaknesses within the immediate caregiving environment and (caregiver’s) extended informal support system. | | |
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|  | **Caregiver Counseling** means an FCSP *Support Service* provided to a caregiver by a person appropriately trained and experienced in the skills required to deliver the level of support needed for stress, depression, and loss as a result of caregiving responsibilities. This service (A) may involve his or her informal support system; (B) may be individual direct sessions and/or telephone consultations, and (C) may address caregiving-related financial and long-term care placement responsibilities. | | | | | |
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|  | **Caregiver Peer Counseling** means an *FCSP Support Service* provided by experienced volunteers on the condition that appropriate training and qualified supervision protocols are in place. | | | | | |
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|  | **Caregiver Support Group** means an *FCSP Support Service* provided to a group of 3-12 caregivers that is led by a competent facilitator and conducted at least monthly within a supportive setting or via a controlled access, such as a moderated online or teleconference approach. The purpose of the caregiver support group is to share experiences and ideas to ease the stress of caregiving and to improve decision-making and problem-solving related to caregiving responsibilities. | | | | | |
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|  | **Caregiver Training** means an *FCSP Support Service* consisting of workshops or one-on-one individually tailored sessions, conducted either in person or electronically by a skilled and knowledgeable individual to assist caregivers in developing the skills and gaining the knowledge necessary to fulfill their caregiving responsibilities and address the areas of health, nutrition, and financial literacy. | | | | | |
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|  | **Caregiver Case Management** means an *FCSP Support Service* provided by a person who is trained and experienced in the skills that are required to coordinate and monitor the provision of formal caregiver-related services in circumstances where caregivers are experiencing diminished capacities due to mental impairment or temporary severe stress and/or depression. | | | | | |
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|  | **Category 2: Respite Care – Caring for the Elderly** | | | | | |
|  | **Respite Care** shall be provided only to a caregiver of a care receiver having two or more activities of daily living limitations or a cognitive impairment, or to a caregiver who is the grandparent or older adult relative caring for a child. | | | | | |
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|  | **Unit of Service: One hour** (reported in increments of 15 minutes) (a registered service) | | | | | |
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|  | Examples of “temporary” Respite Care: | | | | | |
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|  | |  | Intermittent – Time off a few hours once a week for a limited time to give the caregiver a planned or unscheduled break.  Occasional – Time off for the caregiver to attend a special event.  Emergency – Extended break to address an intervening circumstance, such as caregiver emotional stress or hospitalization and recovery. | | | |
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|  | | **Caregiver Respite In-Home Supervision** means an *FCSP Respite Care* service that includes the provision of care receiver day and/or overnight supervision and friendly visiting by an appropriately skilled provider or volunteer in order to prevent wandering and health or safety incidents. | | | | |
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|  | **Caregiver Respite Homemaker Assistance** means an *FCSP Respite Care* service that includes the provision of care receiver assistance with meal preparation, medication management, using the phone, and/or light housework (along with care receiver supervision) by an appropriately skilled provider or volunteer. | | | | | |
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|  | **Caregiver Respite In-Home Personal Care** means an *FCSP Respite Care* service that includes the provision of care receiver assistance with eating, bathing, toileting, transferring, and/or dressing (along with care receiver supervision and related homemaker assistance) by an appropriately skilled provider. | | | | | |
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|  | **Caregiver Respite Home Chore** means an *FCSP Respite Care* service that includes an appropriately skilled provider or volunteer assisting a caregiver with heavy housework, yard work, and/or sidewalk and other routine home maintenance (but not structural repairs) associated with caregiving responsibilities. | | | | | |
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|  | **Caregiver Respite Out-of-Home Day** means an *FCSP Respite Care* service where the care receiver attends a supervised/protective, congregate setting during some portion of a day, and includes access to social and recreational activities. | | | | | |
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|  | **Caregiver Respite Out-of-Home Overnight** means an *FCSP Respite Care* service where the care receiver is temporarily placed in a supervised/protective, residential setting for one or more nights, and may include access to nursing and personal care. | | | | | |
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|  | **Category 3: Supplemental Services – Caring for the Elderly** | | | | | |
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|  | **Supplemental Services** means caregiver-centered assistance offered on a limited basis to support and strengthen the caregiving efforts. **Supplemental Services** shall be provided only to a caregiver of a care receiver having two or more activities of daily living limitations or a cognitive impairment, or to a caregiver who is the grandparent or older adult relative caring for a child. | | | | | |
|  | **Units of Service for Category 3** are included with each Service Definition. | | | | | |
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|  | **Assistive Devices for Caregiving** means an *FCSP Supplemental Service* that involves the purchase, rental and/or service fee of any equipment or product system (ranging from a lift chair or bathtub transfer bench to an electronic pill dispenser or emergency alert fall prevention device) that will facilitate and enhance the caregiving role. | | | | | |
|  | **Unit of Service: One device is one occurrence** (a registered service) | | | | | |
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|  | **Home Adaptations for Caregiving** means an *FCSP Supplemental Service* that makes any minor or major physical change to the home (ranging from installation of grab bars or replacement of door handles to construction of an entrance ramp or roll-in shower) in order to facilitate and enhance the caregiving responsibilities. | | | | | |
|  | **Unit of Service: One modification is one occurrence** (a registered service) | | | | | |
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|  | **Caregiving Services Registry** means an *FCSP Supplemental Service* that recruits, screens, and maintains a listing of dependable, qualified self-employed homemaker or respite care workers who may be matched with caregivers willing to utilize personal resources to pay for assistance with their caregiving responsibilities. Both the caregiver and self-employed worker will be: a) advised about appropriate compensation and workplace performance expectations; and (b) provided with follow-up to ensure the match is functioning effectively. | | | | | |
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|  | **Category 4: Access Assistance – Caring for the Elderly** | | | |
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|  | **Unit of Service: One contact** (a non-registered service) | | | |
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|  | **Caregiver Outreach** means an *FCSP Access Assistance* service involving interventions (one-on-one contacts with individuals) initiated by an agency or provider for the purpose of identifying caregivers and encouraging their use of existing caregiver support services (e.g., Caregiver InfoVan staff contacts outside of local market). | | | |
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|  | **Caregiver Information and Assistance** means an *FCSP Access Assistance* service that: | | | |
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|  | |  | a. | Provides caregivers with information on services available within the communities, including caregiver information related to assistive technology and caring for older individuals at risk for institutional placement; | |
|  | |  | b. | Links caregivers to the services and opportunities that are available within the communities; and | |
|  | |  | c. | To the maximum extent practicable, establishes adequate follow-up procedures (caregiver may remain anonymous and refuse follow-up contact). | |
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|  | **Caregiver Interpretation/Translation** means an *FCSP Access Assistance* service for the provision of bilingual communication assistance to a caregiver in order to access assistance and receive support for his or her caregiving responsibilities (e.g., staff interpreting dialogue between caregiver and care consultant staff translating an elder’s prescription drug label for his caregiver). | | | | |
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|  | **Caregiver Legal Resources** means an *FCSP Access Assistance* service involving one-to-one guidance provided by an attorney (or person under the supervision of an attorney) in the use of legal resources and services when assisting a caregiver with caregiver-related legal issues. | | | | |
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|  | **Category 5: Information Services – Caring for the Elderly** | | | | |
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|  | **Unit of Service: One activity** (a non-registered service) | | | | |
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|  | **Public Information on Caregiving** means an *FCSP Information Service* designed to provide information about available FCSP and other caregiver support resources and services by disseminating publications, conducting media campaigns, and maintaining electronic information systems (e.g., quarterly newsletter). | | | | |
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|  | **Community Education on Caregiving** means an *FCSP Information Service* designed to educate groups of current or potential caregivers and those who may provide them with assistance about available FCSP and other caregiver support resources and services (e.g., booth at a health fair). | | | | |

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| Eligibility Specifics | | | |
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| 1. | **A** **Family Caregiver** is defined in the Older Americans Act (OAA), Title III, Part E, §§ 371 through 374; OAA 42 USC §§ 3001-3058, Code of Federal Regulations (CFR) (45 CFR XIII, 1321); California Code of Regulations (CCR), Title 22 section 7000, et seq; and Department Program Memoranda. | | |
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| 2. | **Eligible Service Population for Title IIIE** means an adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer’s disease or a related disorder with neurological and organic brain dysfunction. [OAA § 302(3)] | | |
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| 3. | **Priority Services for Title III E** means services provided to family caregivers who care for older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction, and to grandparents or older individuals, who are relative caregivers, who care for children with severe disabilities [OAA §372(b)(1)-(2)]. | | |
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| 4. | **“Family Caregiver”** is used interchangeably with **“informal caregiver”**. “Informal” means that the care is not provided as part of a public or private formal service program. A Family Caregiver provides care without pay. FCSP funds cannot be used to pay the Family Caregiver a stipend or salary for providing care. FCSP funds may be used to pay another family member or friend to provide respite care or supplemental services to the Family Caregiver. | | |
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| 5. | Older parents providing care to their adult child with disabilities can be served in FCSP if the adult child is sixty (60) years of age or older. | | |
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| 6. | The broader term “Caregiver” as defined in Title I, section 102(18)(B) of the OAA is not applicable to Title III of the OAA since it also means an individual who—voluntarily or because of compensation—has responsibility for the care of an older individual and is providing this care on behalf of the Family Caregiver or on behalf of a public or private agency or organization. | | |
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| 7. | **An Older Individual Receiving Care (Care Receiver)** is defined as one who is 60 years of age or older, or an individual (of any age) with Alzheimer’s disease or a related disorder with neurological and organic brain dysfunction [Title III, Part, A Section 302(3); Title I, Section 102(40)]. Family Caregivers cannot receive FCSP-funded respite and supplemental services specified in paragraph 8 of this section unless the Care Receiver meets the more restrictive eligibility criteria specified in Title III, Part E, Section 373 (c) (1) (B) of the OAA and the definition of "frail" in OAA Section 102 (22), which requires that the Care Receiver is unable to perform at least two activities of daily living [i.e., human assistance is needed for eating, toileting, walking, transferring in/out of bed or chair, bathing, dressing] or requires substantial supervision due to a cognitive or other mental impairment. | | |
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| 8. | **A Grandparent or Older Individual Who is a Relative Caregiver** means a grandparent or step-grandparent of a child, or a relative of a child by blood, marriage, or adoption, who is 55 years of age or older, and who: | | |
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|  | a. | Lives with a child; | |
|  | b. | Is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child; and | |
|  | c. | Has legal relationship with child, such as legal custody or guardianship, or is raising the child informally. [OAA §372(a)(2)(A)-(C)] | |
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| 4. | **A Child (who receives care from a Grandparent or Older Individual who is a Relative Caregiver)** means an individual who is not more than 18 years of age or is an individual with a severe disability. [OAA §372(a)(1)] | | |
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| 5. | **Individual with Severe Disability(ies)** means a person with a severe, chronic disability attributable to mental or physical impairment, that is likely to continue indefinitely and results in substantial functional limitation in three or more of the following major life activities: [OAA §102(a)(48)] | | |
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|  | a. | Self-care | |
|  | b. | Receptive and expressive language | |
|  | c. | Learning | |
|  | d. | Mobility | |
|  | e. | Self-direction | |
|  | f. | Capacity for Independent Living | |
|  | g. | Economic self-sufficiency | |
|  | h. | Cognitive functioning | |
|  | i. | Emotional adjustment | |
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| 6. | **Title III E (FCSP)** is defined in Title III, Part E, Section 373(b) as support services that include (1) information to caregivers, potential caregivers, and those who may assist caregivers about available services; (2) assistance to caregivers in gaining access to the services; (3) individual counseling, organization of support groups, and caregiver training (individual or group) 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; (4) respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and (5) supplemental services, on a limited basis, to complement the care provided by caregivers. In accordance with Title III, Part E, Section 373(e) (1), the CDA has established for the five support service categories additional service standards that must be met. These standards are documented in the FCSP Service Matrix, which the CDA publishes periodically, as necessary. | | |
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| Projected Annual Funding Available: | | | |
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| OAA Title IIIE funds for Family Caregiver Support Programs - $273,419 | | | |
| CDA maximum allocation of combined FCSP Supplemental: $82,124  CDA maximum allocation to FCSP Grandparent (Caring for Child) Program: $41,062 | | | |
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| Estimated Objective/Funding Targets | | | |
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| Category I: Supportive Services | | | $144,351 |
| Category II: Respite Care | | | $37,465 |
| Category III: Supplemental Services | | | $4,031 |
| Category IV: Access Services | | | $54.024 |
| Category V: Information Services | | | $33,548 |

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| **Program Service Requirements** | | | | | | | | | |
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| **Program Requirements** means Title III program requirements found in the   * Older Americans Act (OAA) 42, (USC section 3001-3058) <http://www.aoa.gov/AoA_Programs/OAA/index.aspx>; * OAA, Title III, Part E, §§ 371 through 374 * Older Californians Act <https://www.aging.ca.gov/AboutCDA/Older_CA_Act.aspx>; * Code of Federal Regulations (CFR) (45 CFR XIII, 1321); * Title 22, California Code of Regulations (22 CCR 7000 et seq). * California Department of Aging (CDA) Program Memoranda * CDA Title III Program Manual * Occupational Safety and Health Administration (OSHA) requirements; * San Mateo County Health System policies and procedures | | | | | | | | | |
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| 1. | The following apply to the (Category 2) respite care or (Category 3) supplemental service categories above: | | | | | | | | |
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|  | a. | | | “Respite Care” is the provision of temporary, substitute supports or living arrangements for care receivers and may be provided (1) in the home (and include the provision of personal, homemaker, and chore services to the care receiver), (2) by attendance of the care receiver at day care or other non-residential day center or program (including recreational outings for children), and (3) by attendance of the care receiver in a facility for an overnight stay on an occasional or emergency basis (such as a nursing home for older adults or summer camp for grandchildren). | | | | | |
|  |  | | |  | | | | | |
|  | b. | | | “Temporarily” means a brief period of relief or rest from a caregiver’s responsibilities during a limited time period, and could be provided on the following basis | | | | | |
|  | | | | (1) | | | Intermittent—Time off a few hours once a week for a limited time to give the caregiver a planned or unscheduled break; | | |
|  | | | | (2) | | | Occasional—Time off for the caregiver to attend a special event; and | | |
|  | | | | (3) | | | Emergency—Extended break to address an intervening circumstance, such as caregiver emotional stress or hospitalization and recovery. | | |
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|  | c. | | | Title IIIE funds cannot be used to support the following activities: | | | | | |
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|  | | | | (1) | | | To pay the costs for a family caregiver to attend a camp, spa, resort, or restaurant; | | |
|  | | | | (2) | | | To temporarily relieve workers from formally paid services (e.g., In-Home Supportive Services or services required to be provided in a licensed facility such as a Residential Care Facility for the Elderly); | | |
|  | | | | (3) | | | To supplement the service unit cost of “a participant day” at an adult day care program; | | |
|  | | | | (4) | | | Assisting a care receiver, unless there is an identified caregiver need that is met through assistance to the care receiver; | | |
|  | | | | (5) | | | Providing ongoing assistance to a care receiver living alone; | | |
|  | | | | (6) | | | Same level of service provided to all caregivers, rather than assistance based on caregiver level of need and priority; and | | |
|  | | | | (7) | | | One-time, end-of-the-year assistance without an identified individual caregiver need. | | |
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| 2. | In providing FCSP services to a family caregiver, or a grandparent or older individual who is a relative caregiver, priority shall be given for services under OAA, Sections 372(b) and 373(c)(2) to: | | | | | | | | |
|  |  | | |  | | | | | |
|  | a. | | | Family Caregivers of older individuals 60 years of age or older [as defined in OAA, Section 102(a)(40)] with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction; | | | | | |
|  | b. | | | Grandparents or other older relatives 55 years of age or older caring for children with severe disabilities; and | | | | | |
|  | c. | | | Family Caregivers and Grandparents or relative caregivers 60 years of age or older [as defined in OAA, Section 102(40)] with greatest social need, with greatest economic need, and with particular attention to low- income individuals. | | | | | |
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| 3. | Contractor shall make use of trained volunteers to expand the provision of FCSP activities in accordance with OAA §373(d). | | | | | | | | |
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| 4. | Funds made available under Title III E shall be budgeted and expended in accordance with the five federal support service components specified in OAA §373(b); and distinguished between “caregiver” and “grandparent” support services, as required for National Aging Programs Information Systems (NAPIS). | | | | | | | | |
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| 5. | Funds made available under Title III E shall supplement and not supplant other services that may directly or indirectly support unpaid caregiving, such as Medicaid waiver programs (e.g., Multipurpose Senior Services Program, etc.) or other caregiver services such as those provided through Department of Social Services Kinship Support Service Programs, California Community Colleges Foster and Kinship Care Education Programs, Department of Developmental Services Regional Centers, Department of Mental Health Caregiver Resource Centers and other Title III funded providers. | | | | | | | | |
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| 6. | Expansion of Services: Provided services must clearly be for caregivers and must not replace existing services or funding sources. FCSP funds are intended to supplement not supplant existing funding. | | | | | | | | |
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| 7. | Unit Rate: It will be the responsibility of the applicant to assign a dollar value to the units of service it proposes to provide based on the agency’s individual ability and experience. Justification for all line items will be required in the budget narrative. | | | | | | | | |
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| 8. | Coordination and Outreach: Providers are expected to coordinate with other adult day and community-based long-term care providers to ensure consistency and continuity in the continuum of services. These efforts should be a part of the agency's outreach plan. | | | | | | | | |
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| 9. | Contractor assures that voluntary contributions shall be allowed and may be solicited in accordance with the following requirements: [OAA § 315(b)]: | | | | | | | | |
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|  | a. | | Means tests shall not be used by any contractor for any Title III or Title VII Services; | | | | | | |
|  | b. | | Services shall not be denied to any Title III or Title VII client that does not contribute toward the cost of the services received; | | | | | | |
|  | c. | | Methods used to solicit voluntary contributions for Title III and Title VII services shall be non-coercive; | | | | | | |
|  | d. | | Each service provider will: | | | | | | |
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|  |  | | (1) | | Provide each recipient with an opportunity to voluntarily contribute to the cost of the service; | | | | |
|  |  | | (2) | | Clearly inform each recipient that there is no obligation to contribute and that the contribution is purely voluntary; | | | | |
|  |  | | (3) | | Protect the privacy and confidentiality of each recipient with respect to the recipient’s contribution or lack of contribution; | | | | |
|  |  | | (4) | | Establish appropriate procedures to safeguard and account for all contributions; | | | | |
|  |  | | (5) | | Donation letters may not resemble a bill or a statement [OAA § 315(b)]; | | | | |
|  |  | | (6) | | Individual client’s donations shall not be tracked by accounts receivable [OAA § 315(b)(4)(C)]; | | | | |
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| 10. | Any Title III and Title VII service shall not implement a Cost Sharing program unless so notified by the County; | | | | | | | | |
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| 11 | Proof of age, citizenship, or disability shall not be required as a condition of receiving services; | | | | | | | | |
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| 12. | An individual’s receipt of services under the In-Home Supportive Services Program shall not be the sole cause for denial of any services provided by the AAA or its contractors. | | | | | | | | |
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| 13. | Data Reporting. Monthly, quarterly and annual reports of data including units of service, client counts, demographics and other data as required by Aging and Adult Services (AAS) and/or the CDA will be expected to be completed and submitted in a timely manner on required forms. | | | | | | | | |
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| 14. | Program Changes. AAS shall be notified in writing and approve of (at least thirty (30) days in advance of implementation) any plan for change in the service resulting from the relocation of a facility, a route change or termination, reducing the number of service days and hours of operation or change in staff. | | | | | | | | |
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| 15. | Contractor agrees to offer services throughout the twelve-month contract period, unless prior written approval is received from AAS. | | | | | | | | |
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| 16. | Utilize appropriate verbiage in written materials (such as newsletters, menus, newspapers, websites, flyers, publications, etc.) by avoiding the use of language that implies a price or fees for service. | | | | | | | | |
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| 17. | Contractor shall agree to distribute any needs assessment(s) or feedback surveys provided by the County. Surveys are to be returned to the County for data collection and analysis. | | | | | | | | |
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| 18. | Contractor agrees to participate in the monitoring of the use of federal, State, and County funds. Onsite program monitoring will be conducted every two years for all programs except Title IIIC1 and Title IIIC2, which must be conducted every year. Onsite fiscal monitoring must be conducted every two years for all programs including Titles IIIC1 and C2. | | | | | | | | |
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| 19. | Program monitoring may occur more frequently if determined by AAS as beneficial to the integrity of program requirement compliance. Contractor agrees to provide requested programmatic and administrative documentation and the availability of key staff as part of the contract monitoring process. | | | | | | | | |
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| 20. | Ensure that all outreach materials, websites and publicity regarding the program shall attribute partial funding from the Older Americans Act and County of San Mateo. | | | | | | | | |

FAMILY CAREGIVER SUPPORT PROGRAM

**WORKPLAN GUIDELINES**

Please complete a Family Caregiver Support Program Workplan in narrative form following the order and headings shown below. Include a description of which services and how many units you will provide. Indicate Caring for the Elderly or Caring for the Child.

**I. PROGRAM SERVICE DESCRIPTION**

1. Agency Background and Experience:
2. State the mission of your agency or organization and describe all current programs you provide.
3. Describe your clientele and geographic area served.
4. Indicate how long the programs have been operating and how they are funded.
5. Indicate if any of these programs are currently operating under contract with San Mateo County.
6. Service to Targeted Populations and Linguistic Access:
7. Describe your ability to serve individuals within the target populations described in the General Information section.
8. How many full time employees (FTEs) do you plan to assign to this project, if you are selected?
9. Identify languages in which clients will be able to access your services.
10. Indicate staff capacity to meet the needs of the diverse racial/ethnic groups within your community.
11. Proposed Service/Ability to Meet Program Requirements:
12. Summarize your proposed service model providing detail about how it will function and meet the requirements of the program.
13. Identify all service categories you propose to provide. Note that all five of the following categories must be provided by the AAA for both Caring for the Elderly and Care for the Child.
14. List any items that you cannot provide and how you will meet the requirements.
15. Provide information on any other pertinent services, if any, that you will offer that will reduce costs for the County.
16. Facility Site:
17. Describe the location and size of the facility, equipment available and accessibility of the building.
18. Describe the safeguards which will be used to ensure the participants' safety related to exits, outdoor space, storage areas, glass patio doors, stairs or steps, passenger loading zones, kitchen and bathroom safety.
19. Describe emergency evacuation plans.
20. List name and address of each location, capacity at each, days and hours of operation and anticipated daily attendance.
21. Coordination:
22. Identify and detail how you will work with other agencies providing similar services or serving the same population
23. Describe your procedure for documenting referrals to and/or utilization of other community-based services that support participants and their families.
24. Customer Service:
25. How will your services meet the needs of County customers and/or the public?
26. In the event of a routine problem, who is to be contacted within your organization?
27. In the event of the identification of a problem by the County, its clients/patients, and /or other applicable constituents, describe how you will address such problems and the timeframe for addressing them.
28. Outreach:
29. Describe your outreach plan, particularly to clients who may be monolingual isolated, and/or unaware of your services. Include how you plan to work with key agencies/organizations that could refer clients to your program.
30. Client Care Plan:
31. Describe how clients will be assessed and your process for developing a care plan.
32. Describe your procedure for documenting referrals to and/or utilization of other community-based services that support participants and their families.

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**II**. **PROGRAM MANAGEMENT AND PLANNING**

1. Staffing/Volunteers:
2. Provide an organization chart for your agency.
3. Detail your staffing plan and include job descriptions and licenses (if applicable) for key personnel and volunteers.
4. Describe your use of trained volunteers.
5. Indicate the responsible person(s) for managing the day-to-day operations including the completion of the Client Intake forms, daily service delivery aspects of the program and the weekly and monthly program reporting requirements.
6. Describe how you will meet the staffing requirements when there are vacancies, illnesses or other personnel difficulties.
7. If applicable, list the professional qualifications for each individual that would be assigned to provide services requested by this RFP, including date and educational institutions of any applicable degrees, additional applicable training, and any professional certifications and/or licensing. In lieu of listing this information, you may submit a resume or curriculum vitae (CV) for each such individual if the resume/CV includes all the requested information.
8. Data Reporting:
9. Describe how your agency will capture and report required program data.
10. Describe how your agency protects client level data (e.g. encryption, etc.)
11. Describe how your agency will meet the due date for program reports, (10th of the month following the month of service).
12. Training:
13. Describe staff training on-site and at other locations that address issues of concern to program participants (e.g. emergency preparedness and/or food safety and sanitation).
14. Include who will conduct trainings, how often they will occur, proposed topics and frequency of staff training or continuing education opportunities.

D. Contingency Plans:

1) Describe your contingency plans in the event that the full amount you are requesting from AAS is not received.

2) Describe potential sources of funding, short-term and long-term, for the program and any fund raising capabilities.

E. Emergency Preparedness Plans: Describe your Emergency Operations Plan.

F. Program Evaluation/Consumer Satisfaction:

1) Describe your method(s) for evaluating your program’s performance including the distribution of customer feedback surveys which will be provided by County and returned to the County for data collection and analysis.

2) Describe how you will collect information from your clients about their perception of your program and its effectiveness.

3) Describe your Quality Improvement Plan.

1. Cultural Competence:

Describe how your agency/program will ensure cultural competence. This may include culturally relevant program features, staffing objectives that reflect cultural and linguistic diversity and education materials that value the cultural diversity of San Mateo County.

H. Collaborative Service Planning:

1) Describe your involvement in the planning and development of a community-wide system of services.

2) Give an example of a program in which you collaborated with other agencies to enhance the service-delivery system for seniors and people with disabilities.

3) Identify any County committees or coalitions in which you have been involved.

1. Contributions/Project Income**:**
2. Define your agency's project income policies and procedures on setting the suggested client contribution level and guest meal cost; protecting the voluntary, anonymous contributions of your clients; handling the daily income from clients and guests; and contingency plans for securing additional revenue if proposed income level is not achieved.
3. Describe how you would use any income in excess of budgeted amount.
4. State the current average per meal contribution for this program if you are currently a congregate provider.
5. Claims, Licensure, Non-Discrimination, and Health Insurance Portability and Accountability Act (HIPAA) Violations Against Your Organization:

List any current licensure, HIPAA, non-discrimination claims against you/your organization and those having occurred in the past five years, especially any resulting in claims or legal judgments against you.

1. References:

List at least three business references for which you have recently provided similar services. Include contact names, titles, phone numbers and e-mail addresses for all references provided.

**III. FISCAL – Refer to the Fiscal /Budget Standards**

1. Fiscal Staff:
2. Define the fiscal staffing positions that will be responsible for this program. Include job description(s).
3. Describe your record-keeping and fiscal management systems in detail.

B. Budget forms: Complete and submit all budget forms located in the Enclosures section VI of the Request for Proposals.

C. Financial Statement:

1) Attach an audited financial statement completed within the last twelve months.

2) If an audited financial statement is not available, include alternative audit procedures you will use.

1. Cost Analysis and Budget for Primary Services:
2. Provide a detailed explanation for all costs associated with your providing the requested services if you are selected.
3. Provide a completed budget for your proposed program. Instructions and budget form is found in Enclosures Section VI.

# E. Match:

# 1) There is a match requirement of twenty-five percent (25%) of the total program budget.

# 2) Describe how you will meet the required match. Refer to the Fiscal – Budget Standards.

**IV. STATEMENT OF COMPLIANCE WITH COUNTY CONTRACTUAL REQUIREMENTS**

A sample of the County’s standard contract (Including Exhibits A and B) is attached to this RFP. Each proposal must include a statement of the proposer’s commitment and ability to comply with each of the terms of the County’s standard contract, including but not limited to the following:

1. The County non-discrimination policy
2. The County equal employment opportunity requirements
3. County requirements regarding employee benefits
4. The County jury service pay ordinance
5. The hold harmless provision
6. County insurance requirement
7. The County Living Wage Ordinance
8. All other provisions of the standard contract.

In addition, the proposer should include a statement that it will agree to have any disputes regarding the contract venued in San Mateo County or Northern District of California.

The proposal must state any objections to any terms in the County’s contract template and provide an explanation for the inability to comply with the required term(s). If no objections are stated, the County will assume the proposer is prepared to sign the County standard contract template as-is.

**NOTE**: The sample Standard Contract Template enclosed with this RFP is a template and does not constitute the final agreement to be prepared for the selected service provider. Do not insert any information or attempt to complete the enclosed sample contract template. Once a provider is selected, the County will work with the selected provider to draft a provider-specific contract using the template. However, each proposal should address the general terms of the standard contract as requested within this RFP.