Attachment 1: Description of Services

Contractor shall provide the following services:

I. CONTRACTOR SHALL

- **A.** Provide services specifically indicated on the written authorization form for the specified Aging and Adult Services (AAS) program completed by the County.
- **B.** Cease services upon receipt of written cancellation notification form for the specified AAS program completed by County.
- **C.** Abide by the Multipurpose Senior Services Program (MSSP) training manuals and other guidance issued by the Health Plan of San Mateo. Contractor shall comply with any and all changes to State and federal law. (MSSP only)
- Develop a site-level grievance process that provides a structure to accept, acknowledge, respond to and track client complaints. Clients may express these issues either orally or in writing. On-going services will not be interrupted or discontinued during the grievance process.
- E. Comply with all program and fiscal retention, reporting, monitoring and auditing requirements set forth by appropriate federal, State, local agencies, and as required by the County. County shall give reasonable notification to Contractor prior to an on-site visit. County shall conduct at least one annual on-site visit to examine records and documents necessary to determine compliance with relevant federal, State and local statutes, rules and regulations and this agreement and to evaluate the quality, appropriateness and timeliness of services performed.
- F. Maintain an Emergency Contingency Plan including training and testing.
- **G.** All providers must be licensed by either California Department of Social Services or the California Department of Health Services.

II. DEFINITIONS OF SERVICES – ALL PROGRAMS (MSSP SERVICE CODE)

A. SUPPLEMENTAL CHORE (3.1) is for purposes of household support and applies to the performance of household tasks rather than to the care of the client. Chore activities include household cleaning, laundry (including the services of a commercial laundry or dry cleaner), shopping, food preparation, and household maintenance, as long as the client does not live in a Residential Care Facility for the Elderly (RCFE). Client instruction in performing household tasks and meal preparation may also be provided.

B. SUPPLEMENTAL PERSONAL CARE (3.2) provides assistance to maintain bodily hygiene, personal safety, and activities of daily living (ADL). These tasks are limited to non-medical personal services: feeding, bathing, oral hygiene, grooming, dressing, care of and assistance with prosthetic devices, rubbing skin to promote circulation, turning in bed and other types of repositioning, assisting the individual with walking, and moving the individual from place to place (e.g. transferring). Client instruction in self-care and with meal preparation may also be provided. This service may also include such housekeeping chores as bed-making, dusting and vacuuming, which are essential to the health and welfare of the recipient.

OTHER STANDARDS: Supplemental Chore (3.1) and Supplemental Personal Care (3.2)

Tasks authorized under Supplemental Chore (3.1) and Supplemental Personal Care (3.2) are specified in the California Department of Social Services (DSS) Manual, Division 30, Chapter 30-757. All individuals performing these services must:

- Be a US citizen or legal alien;
- Be at least 18 years of age;
- Have a Social Security card;
- Be able to read, write, carry out directions and maintain simple records;
- Have transportation available;
- Be able to communicate changes in the status of the client and/or family; and
- Be physically capable of performing the work required.
- C. SUPPLEMENTAL HEALTH CARE (3.3) addresses the care of health problems by appropriately licensed or certified persons when such care is not otherwise available. These services will be provided by authorized individuals when such care is prescribed or approved by a physician.

OTHER STANDARDS: Supplemental Health Care (3.3)

Registered nurses, occupational, physical and speech therapists must be employed by an agency licensed/certified by the Department of Health Services (DHS) as Medicare Home Health Agency (HHA) providers or licensed by DHS as a HHA unless any one of the following conditions apply:

- No licensed or certified HHA exists within the sites' local catchment area; or
- The licensed or certified HHA cannot meet the need of the MSSP client; or
- The client is not satisfied with the service provider from the licensed/certified HHA.

The site may choose to contract with the following providers:

- 1. Local county Department of Public Health personnel who are professionally licensed;
- 2. Independent health professionals licensed by the California Department of Consumer Affairs in their appropriate profession and who are qualified to provide the care or services contracted for. A client home visit must be made by the site's Nurse Care Manager (NCM) to assess and document the quality of service provided by the independent contractor or a written report submitted to the NCM by the contractor.

Licensure standards for independent contractors are the same as those for professionals working for HHAs. These standards are contained in the California Code of Regulations Title 22, Division 5, Chapter 6, Article 1.

Nutritionists and Registered Dietitians (RD) must have completed a Bachelor's degree in food/nutrition; RDs must have passed the examination offered by the Commission on Dietetic Registration.

Pharmacists must be licensed by the California Department of Consumer Affairs, Board of Pharmacy, as a licensed pharmacist, pharmacy intern, technician or certified exemptee.

Art therapists are designated either Registered (ATR) or Certified (ATR-BC) by the Art Therapy Credentials Board.

Exercise/physical fitness trainers have certification from either the Aerobics and Fitness Association of America or the American Council of Exercise.

Music therapists have obtained one of the following from the Certification Board for Music therapists: Music Therapist – Board Certified (MT-BC), Certified Music Therapist (CMT) or Registered Music therapist (RMT).

Recreation therapists have certification from the American Therapeutic Recreation Association.

Massage therapists are regulated by local cities through the business license/permit process. They should have a diploma or certificate from a State-approved school. There is legislation currently pending (AB 1388) that would create a State licensure category for massage therapists overseen by a Board of massage therapy to be established within the Department of Consumer Affairs.

- D. SUPPLEMENTAL PROTECTIVE SUPERVISION (3.7) ensures provision of 24-hour supervision to persons in their own homes who are very frail or otherwise may suffer a medical emergency, or to prevent immediate placement in an acute care hospital, skilled nursing facility or other 24-hour care facility. Such supervision does not require medical skills and can be performed by an individual trained to identify the onset of a medical crisis and able to summon aid in the event of an emergency. This service may include making a visit to the client's home to assess a medical situation during an emergency (e.g., natural disaster).
- E. SUPPLEMENTAL PROFESSIONAL CARE ASSISTANCE (PCA) (3.9) is provided to those clients who are also receiving services under the Personal Care Services Program (PCSP) (Fund Code 6). PCA is a comprehensive skilled service delivered by a HHA. The HHA works under the supervision of a registered nurse employed by a HHA.

OTHER STANDARDS: Supplemental Protective Supervision (3.7) and Supplemental Professional Care Assistance (3.9)

Tasks authorized under Supplemental Protective Supervision (3.7) and Supplemental Professional Care Assistance (3.9) are specified in the California Department of Social Services (DSS) Manual, Division 30, Chapter 30-757. All individuals performing these services must:

- Be a US citizen or legal alien;
- Be at least 18 years of age;
- Have a Social Security card;
- Be able to read, write, carry out directions and maintain simple records;
- Have transportation available;
- Be able to communicate changes in the status of the client and/or family; and
- Be physically capable of performing the work required.

For the Supplemental Professional Care Assistance (3.9) services, the provider must also be a certified home health aide.

F. CARE MANAGEMENT (4.3) for the vast majority of MSSP clients, care management services are provided solely by site care management staff. However, clients may request that this service be delivered by another qualified provider under contract or provider agreement with the MSSP site.

OTHER STANDARDS: Care Management (4.3)

Nurse Care Manager (NCM) – Must have a California Department of Consumer Affairs Board of Registered Nursing license that is current and in good standing and one year experience.

Social Work Care Manager (SWCM) – Must have a master's degree in social work, psychology, counseling, rehabilitation, gerontology or sociology plus one year working with the elderly or a bachelor's degree in one of the above fields and two years' experience with the elderly.

Care Manager Aide (CMA) – Must have a bachelor's degree in a human services discipline; or two years of direct service experience with the elderly. Knowledge of community service delivery resources for the elderly is an additional important qualification.

Social, Legal and Health Specialists – Vendors of care management services other than site staff shall be licensed/certified in their appropriate professional field (e.g., a lawyer must be licensed to practice law in this state) and be qualified to provide the service contracted for.

G. RESPITE, IN-HOME (5.1) is to relieve the client's informal caretaker and thereby prevent breakdown in the informal support system. Respite services will include the supervision and care of a client while the family or other individuals who normally provide primary care take short-term relief or respite which allows them to continue as caretakers. Respite may also be needed in order to cover emergencies and extended absences of the caretaker.

OTHER STANDARDS: Respite, In-Home (5.1)

Tasks authorized under Respite, In-Home (5.1) are specified in the DSS Manual, Division 30, Chapter 30-757. All individuals performing these services must:

- Be a US citizen or legal alien;
- Be at least 18 years of age;
- Have a Social Security card;
- Be able to read, write, carry out directions and maintain simple records;
- Have transportation available;
- Be able to communicate changes in the status of the client and/or family; and
- Be physically capable of performing the work required.

H. TRANSPORTATION (HOUR) (6.3) provides access to the community (e.g., non-emergency medical transportation to health and social service providers) and special events for clients who do not have means for transportation or whose mobility is limited or who have functional disabilities requiring specialized vehicles and/or an escort.

OTHER STANDARDS: Transportation (hour) (6.3)

Providers of regular transportation services must be either a properly registered private nonprofit or a licensed proprietary agency. Drivers must possess a valid class II or III driver's license issued by the California State Department of Motor Vehicles. The provider must furnish documentation that adequate vehicle insurance will be in effect during the term of the contract.

Providers of ambulance services must have a California Highway Patrol (CHP) vehicle inspection certificate, and drivers must have successfully completed ambulance attendant training. The provider must furnish documentation that adequate vehicle insurance will be in effect during the term of the service contract.

Wheelchair/Paratransit providers must provide evidence of CHP inspection and driver training. The provider must furnish documentation that adequate vehicle insurance will be in effect during the term of the service contract.

III. DEFINITIONS OF SERVICES—NON-MSSP PROGRAMS ONLY

- A. CAREGIVER VISIT provides a home visit of short duration that might require the activities described under CHORE, PERSONAL CARE and TRANSPORTATION. Some examples include: assistance with morning or evening preparation and clean-up, and unescorted transportation to a drop-off appointment with no waiting.
- B. IN-HOME CARE/SLEEP OVER ensures provision of 12-hours night supervision and may include the house hold and personal assistance tasks described under II.A. CHORE and II.B. PERSONAL CARE. The caregiver does not transport the client but might be an escort to the client when transportation is provided by taxi, public transportation, contracted service or Redi Wheels.
- **C. LIVE-IN LEVEL I (BASIC CARE)** Client is ambulatory, continent, requiring companion care for their safety.
- D. LIVE-IN LEVEL II (MEDIUM CARE) Client is incontinent; uses a walker or other equipment to ambulate; requires stand-by assistance when ambulating; and/or requires assistance with personal care, bathing and dressing, meal prep, etc.
- **E. LIVE-IN LEVEL III (HEAVY CARE)** Client requires total care: bed bound; wheelchair bound; incontinent of bowel and bladder; and/or requires assistance with feeding and other ADL/IADLs, etc.