**SAN MATEO COUNTY AGING AND DISABILITY SERVICES**

**Management Information System (MIS) for FCSP (Revised 06.2025)**

Family Caregiver Support Program Caring for Elderly / Caring for Child FY 2025-2026

|  |  |
| --- | --- |
| **Type of Report: Addition Correction** | **Report Period Ending (Mo/Yr):** |
| **Print Name of Agency Reporting:** | **Print Name of Person Completing Report:** |
| **Number of New Caregivers Served:** |
| **Category 1. Support Services** | **Units** | **Clients** |
|  | Caregiver Counseling |  hour |  |  |
|  | Caregiver Support Group |  hour |  | \* n/a |
|  | Caregiver Training |  hour |  |  |
| **Category 2. Respite Care** | **Units** | **Clients** |
|  | Caregiver Respite In-Home Supervision |  hour |  |  |
|  | Caregiver Respite Out-of-Home Day Care |  hour |  |  |
|  | Caregiver Respite Out-of-Home Overnight Care |  hour |  |  |
|  | Caregiving Respite Other |  hour |  |  |
| **Category 3. Supplemental Service**  | **Units** | **Clients** |
|  | Assistive Technology for Caregiving |  device |  |  |
|  | Caregiving Assessment  |  hour |  |  |
|  | Caregiving Consumable Supplies |  assistance |  |  |
|  | Caregiving Legal Consultation  |  hour |  |  |
|  | Caregiving Services Registry |  hour |  |  |
|  | Home Modifications for Caregiving |  modification |  |
| **Category 4. Access Assistance**  | **Units** | **Clients** |
|  | Caregiver Case Management |  hour |  |  |
|  | Caregiving Information and Assistance |  contact |  | \* n/a |
| **Category 5. Information Service**  |  | **Units** | **Clients** |
|  | Information Services |  activity |  | \* n/a |
| \* Clients for categories 4 and 5 are reported quarterly via the Quarterly Unduplicated Client Count Report. |
|  |
| I certify this report is correct and completed to the best of my knowledge. |
| **Signature** | **Date** |