

# NEW YORK STATE POE STANDARDS

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# **I. ORGANIZATIONAL AND PROCEDURAL REQUIREMENTS**

## **A. ADMINISTRATION**

### **Standard 1: Designation of Lead Agency**

**The county must designate a lead agency to administer the Point Of Entry (POE) functions.**

- 1.1.** The lead agency shall have a single identity and voice, regardless of the number of agencies comprising the partnership.
- 1.2.** A formalized relationship defining the lead agency must be developed through a Memorandum of Understanding (MOU), Memorandum of Agreement (MOA) or contract between the Area Agencies on Aging (AAA) and Departments of Social Services (LDSS), and such other entities as deemed necessary and appropriate.
- 1.3.** Not-for-profit or for-profit agencies that provide direct care service are prohibited from administering the POE.
- 1.4.** The lead agency may be two separate entities – such as an AAA and a LDSS – working together and operating under the terms of an MOU, MOA or contract. Whenever the term “lead agency” is used in these Standards, it includes all entities that are operating by agreement as the lead agency.

### **Standard 2: Conflict of Interest**

**The lead agency must ensure that the coordination of authorization and payment for a long term care service is separate from the direct provision of long term care services.**

- 2.1** If the lead agency is a governmental entity that provides direct care services then such lead agency may be included among the various service providers from which the consumer may choose; however, the lead agency is prohibited from exclusively self-referring or directing the consumer’s selection of provider.
- 2.2** The lead agency may choose to subcontract with a not-for-profit or for-profit agency to assist with achieving program expectations. Subcontractors must not exclusively self-refer, or influence the consumer’s selection of a provider. This must be reflected in any subcontracting agreement (s) issued by the lead agency.

### **Standard 3: Creation of a Point of Entry**

**The lead agency must create a POE, which will provide information and support to all individuals inquiring about or requiring publicly and/or privately funded long term care services.**

- 3.1** The local POE's name must include a State prescribed title, should one be identified, to ensure statewide standardization. The placement (end, beginning, embedded) of the State prescribed title in the name of the local POE is at the discretion of the lead agency. The core functions must include:

#### Phase One

- Information and Assistance;
- Screening;
- Public Education;

#### Phase Two

- Service Coordination
- Comprehensive Needs Assessment
- Service Plan Development
- Program Eligibility Evaluation
- Financial Eligibility Assistance
- Service Plan Management

### **Standard 4: Administrative Responsibility of Lead Agency**

**The lead agency is responsible for administration of the POE through the following:**

- 4.1.** Allocating resources sufficient to enable the POE to provide the core functions and maintain the standards set forth by the State.
- 4.2.** Maintaining an infrastructure necessary to support the POE by the provision of staffing, space, equipment and other resources to adequately sustain program operations and functions that meet NYS POE standards.
- 4.3.** Maintaining financial records in accordance with generally accepted accounting practices.
- 4.4.** Developing an annual budget to support POE core functions based on the cost of meeting projected community long term care needs and available resources.

## **Standard 5: Written Policies and Procedures**

**The lead agency must have written polices and procedures that clearly define how the POE operates, to include:**

- 5.1. A written mission statement that supports the core functions of the POE listed in Standard 3.
- 5.2. Establish organizational policies, consistent with existing rules and regulations, that cover at a minimum, the following topics:
  - POE job descriptions and core functions;
  - Populations served;
  - Program operations;
  - Consumer grievance procedures;
  - Legal assistance where appropriate;
  - Process for establishing and maintaining cooperative relationships with long term care providers and
  - Cultural competence.

## **Standard 6: Human Resource Management**

**The lead agency must provide human resource management and make a diligent effort to achieve continuity and consistency in the conduct of its functions related to the POE staffing by:**

- 6.1. Maintaining an organizational structure that delineates POE reporting relationships. If the POE is part of a larger organization, the organizational structure must delineate the POE relationship within the larger organization.
- 6.2. Developing and maintaining a staffing plan that delineates the functions of various staff positions, staff qualifications, training, and number of employees devoted to each function and the percentage of each position's time dedicated to its different responsibilities.
- 6.3. Maintaining qualified staff in sufficient number to implement POE policies, procedures and core functions. The POE must strive to have employees who are reflective of the community they serve.
- 6.4. Maintaining written job descriptions for all staff outlining programmatic and supervisory responsibilities and essential job functions.

## **Standard 7: Direct Service Staff Qualifications**

**The POE must ensure that all direct service staff providing the core POE functions of Information and Assistance, Screening, Public Education, Comprehensive Needs Assessment, Service Referral and Coordination, Financial Eligibility Assessment, Program Eligibility Assistance, and Service Plan Management are proficient in the minimum competencies.**

**7.1.** *Minimum* competencies<sup>1</sup> for direct service staff include:

- Knowledge of the populations served by the POE;
- Communication/interpersonal skills;
  - i. Ability to work with diverse populations;
  - ii. Ability to respond to consumer in a professional, non-judgmental and culturally appropriate manner;
  - iii. Ability to respond to consumers requiring special attention and refer appropriately (i.e. difficult contacts, lonely or angry consumers, suicidal consumers);
- Problem solving skills;
- Knowledge of long term care community resources and service eligibility criteria;
- Interviewing skills;
- Screening skills;
  - i. Ability to complete an evaluation of consumer's long term care needs by asking relevant questions necessary to provide appropriate information that meet those needs;
  - ii. Ability to use active listening skills to identify presenting and underlying problems;
- Ability to use a strength-based approach to support the consumers' Independence and self determination and;
- Documentation skills.

**7.2.** The POE staff must participate in all State mandated trainings, as frequently as necessary to improve, refine or update staff skills. The POE is must provide comprehensive cross agency orientation. The POE is encouraged to provide trainings or other opportunities to meet the minimum competencies for direct service staff, as appropriate.

## **Standard 8: Culturally and Linguistically Appropriate Services**

**The POE must ensure that core functions are provided in a culturally and linguistically appropriate manner. Consumers with special needs will be linked to appropriate services to ensure full access to services, as applicable.**

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<sup>1</sup> Minimal competencies do not supersede existing staffing practices.

## **Standard 9: Populations Served**

The POE must serve, at a minimum, all of the following groups of individuals requiring long term care, regardless of payor source, including people who inquire about or request assistance on behalf of members of these groups:

- Elderly;
- Adults with disabilities;
- Children with disabilities.

## **B. OPERATIONS**

### **Standard 10: Business Practices**

The POE must adhere, at a minimum, to the following business practices:

- 10.1.** POE functions must be available during normal business hours.
- 10.2.** Review and revise, as necessary, program policies and procedures. Any revisions made must include documentation of administrative approval and dates of revision.
- 10.3.** Provide barrier-free access to its services that accommodates people with special needs and access for consumers who speak languages other than English.
- 10.4.** The POE must provide core functions at no cost to the consumer. The POE may provide a toll free number to access services but it is not required.
- 10.5.** Protect the identities of consumers, their requests and the content of provided information in compliance with the following laws and regulations as they now exist or as may be amended from time to time:
  - NYS Social Services Law, §367b(4)
  - NYS Social Services Law, §369(4)
  - NYS Public Health Law, Article 27-F
  - 18 NYCRR Part 357
  - 42 U.S.C. §1396A(A)(7) – Social Security Act
  - The Health Insurance Portability and Accountability Act (HIPAA) and related regulations found at 45 C.F.R. Parts 160 and 164
  - 42 C.F.R. Part 2
  - All other confidentiality laws, regulations and requirements as may now be, or in the future may become, applicable.

## **Standard 11: Resource Listing**

**To support the core functions of information and assistance, the POE must Maintain a comprehensive and current resource listing of long-term care services, programs and providers. The resource listing must include the following elements in a standardized profile:**

- **Program/organization name ( including former names, popular names and acronyms);**
- **Street and mailing address;**
- **Phone number including TDD/TTY, fax website and e-mail address;**
- **Hours of operation;**
- **Services provided;**
- **Eligibility requirements;**
- **Documentation required for service;**
- **Geographic area served;**
- **Proximity to public transportation;**
- **Application process;**
- **Languages in which the service is provided;**
- **Cost of service and Fee structure;**
- **Method of payment accepted;**
- **Date information last verified.**

## **II. PLANNING AND COLLABORATION**

### **A. COOPERATIVE RELATIONSHIPS**

#### **Standard 12: Cooperative Relationships**

**The POE must maintain collaborative partnerships and linkages with the local long term care provider community, county government, and community based organizations in order to ensure a coordinated service delivery system that provides improved and streamlined consumer access to information and community services, maximizes the utilization of existing resources, and avoids duplication of effort.**

**12.1.** The POE, through its collaborative partnerships and linkages must work toward sustaining a coordinated long term care system by:

- Identifying, developing and maintaining relationships with policy makers and funding organizations;
- Formulating and communicating policy recommendations and implementation strategies to appropriate audiences;
- Participating in community planning using consumer statistics and resource data.

### **B. LONG TERM CARE COUNCIL**

### **Standard 13: Long Term Care Council**

**A Long Term Care Council (LTCC) must exist in each county to conduct long term care system planning and development in order to ensure achievement of the goals and objectives of the POE. This council must report their activities and recommendations to the lead agency, who are required to report directly to the county chief elected official, legislative board or their designee.**

- 13.1.** The lead agency will provide leadership, logistical and administrative support to the LTCC.
- 13.2.** The AAA Director and the LDSS Commissioner must be members of the LTCC.
- 13.3.** The LTCC must meet on a regular basis, at a frequency adequate to fulfill its responsibilities.
- 13.4.** The LTCC must have governing policies in place which address recruitment, selection, membership criteria and attendance, meeting frequency and the process for documentation and follow up of meeting outcomes.
- 13.5.** LTCC membership must be representative of the diversity of the consumer populations served, the residential and community based long term care provider community and advocacy groups.
- 13.6.** In its advisory capacity, the LTCC must have the following duties and responsibilities at a minimum:
  - Develop a mission statement that is consistent with the vision of New York State's redesigned long-term care system;
  - Identify and analyze emerging community needs in the long term care service delivery system, based on identified gaps, service accessibility and availability and develop strategies to respond to those needs in a timely and appropriate fashion;
  - Solicit input from long term care stakeholders regarding changes in the community environment (e.g., new resources or closing of providers), legislation, or regulations;
  - Review the long term care service delivery system by identifying entry points to the system and the manner by which populations in need of long term care services navigate or access services throughout the system;
  - Serve in its advisory capacity as a catalyst to advance changes in the long term care system when modifications are required to ensure the availability of appropriate and quality community services.

### **III. POE FUNCTIONS**

#### **A. INFORMATION, SCREENING AND ASSISTANCE**

##### **Standard 14: Information and Assistance**

**The POE must provide information and assistance to consumers regardless of income or payor source regarding long term care options, identifying or researching necessary services and providing additional support directly to the consumer.**

- 14.1.** In the provision of information and assistance, the POE must support the consumers' independence and self determination.
- 14.2.** Unbiased, accurate information and guidance must be provided to the consumer regarding publicly and privately funded long term care services as well as other community supports based on consumer's identified needs.
- 14.3.** The consumer must be provided with information in a fair and equitable manner on all available long term care services/ resources to assist them in making an informed choice.
- 14.4.** Information provided to the consumer includes, but is not limited to, an explanation of available services, program eligibility requirements, provider/service contact information, long term care insurance, and legal assistance, which meet their needs.
- 14.5.** Written information requested by consumers must be mailed or transmitted to consumer within two business days after the request is received.
- 14.6.** The POE staff shall instruct the consumer to call back if the initial information provided proves to be incorrect, inappropriate or insufficient to link him or her with needed services.
- 14.7.** Information regarding long term care services and programs must be provided via a maintained website, mail, telephone, e-mail or in person.
- 14.8.** All personal information collected must be treated in a confidential manner and held under the appropriate privacy standards.
- 14.9.** Information will be provided at a maximum sixth grade level of readability. Consumers with special needs will be linked to appropriate services to ensure full access to available information on long term care services.

- 14.10.** All phone calls must be answered by a POE staff in a timely manner, as determined by county standards of practice. The POE must have a mechanism in place to answer the phone line after hours, i.e. answering machine or voicemail. Messages must be returned by the following business day.
- 14.11.** Should the POE determine the need for an off-site visit to provide information and assistance, then such off-site visits must be made within three working days. The POE must work with existing processes, i.e. discharge planners, to accommodate requests for off-site visits to acute, sub-acute and chronic care settings within one business day. Factors to consider in determining the appropriateness of off site/home visits in both phases should include:
- i. Prioritizing requests from consumers based on the availability of informal supports and the severity of their long term care needs;
  - ii. Prioritizing requests from continuing care venues (e.g. acute, sub-acute and chronic care facilities);
  - iii. Determining if visiting the consumer where he/she resides will provide the POE staff with a substantially more accurate understanding of the consumer's needs and preferences.
  - iv. Determining whether consumers are able to travel to a POE location or other sites where POE staff are out stationed by using formal or informal supports.
- Phase One: The POE must provide off site visits, as appropriate and described above, through existing resources (e.g. Area Agency on Aging) or link to an appropriate community agency specific to the population to be served.
  - Phase Two: The POE must demonstrate capacity to conduct off site visits including visiting a consumer residence, outpatient setting, acute care facility, rehabilitation facility or any other setting that will best accommodate consumer needs in accordance with this standard.
- 14.12.** Consumers requiring additional assistance with accessing long term care services may require the POE to act as a link to appropriate community agencies/resources that can have the skills and resources to provide a more intensive level of assistance (e.g. long term care insurance or private case management.)
- 14.13.** The POE staff must make a diligent effort to assist consumers for whom existing services are inadequate or unavailable in their community, by problem solving to locate alternative resources.

### **Standard 15: Screening**

**POE staff must, without regard to income or payor source, perform a consumer screening that will identify the needs of the consumer; evaluate consumer resources and available supports (e.g. caregiver, informal supports); and indicate the type of services and resources that may best meet the needs of the individual.**

- 15.1. At a minimum, the information contained in Attachment 2 (Screening Elements) must be collected.
- 15.2. The information collected will be reviewed and utilized to assist in the consumer with an appropriate choice of services.

## **B. PUBLIC EDUCATION**

### **Standard 16: Public Education**

**POE must develop an on-going education and awareness campaign about long term care services to educate all residents about the POE in their community and to assist consumers to prepare for their long term care needs.**

- 16.1. The POE must establish and maintain an ongoing program that increases public awareness of the availability of POE core functions, its objectives and its value to the community. This campaign must meet the needs of diverse populations.
- 16.2. Public education must include information regarding the range of long term care services, including resources and payors, available to support those services.
- 16.3. The POE must develop and implement a local plan that incorporates statewide education efforts, when appropriate, and coordinates with local stakeholders.
- 16.4. The POE must provide education to the general community, as well as targeted stakeholders who may serve as conduits to the long term care system (e.g. physicians, hospitals, social workers, adult protective staff, and law enforcement agencies).
- 16.5. The POE must provide educational materials that are culturally and linguistically sensitive, at a maximum sixth grade level of readability, and can be accessed by individuals with special needs.
- 16.6. The POE must coordinate its public education efforts separate from the lead agency. It must ensure that staff within the lead agency is aware of the scope and objectives of the POE.
- 16.7. The POE shall submit to the State for review and approval, any newly developed program, public information materials or other printed or published materials developed or purchased with POE funding.

- 16.8.** The POE must work with community stakeholders to promote POE functions and resources.
- 16.9.** The POE must promote public relations and community education by including but not limited to:
- Participating in local case management groups or other professional organizations;
  - Making presentations as requested or as necessary;
  - Compiling and distributing a directory of services in print and in electronic format;
  - Making all or a portion of its educational and resource materials available on a Web site on the Internet. In each case, the information must include either e-mail access to the POE staff or a telephone number for such access.
- 16.10.** The POE must provide information regarding long term care insurance options through the Long Term Care Insurance Education and Outreach Program and other services available in the county.
- 16.11.** The POE educational campaign must be periodically revised to reflect ongoing community needs.

## **C. EVALUATION**

### **Standard 17: Evaluation**

**The lead agency must ensure that a process exists for evaluating the POE. Evaluation must, at a minimum, include the examination of measurable objectives, outcomes and existing or future state/federal requirements for consumer, program and systems level activities such as:**

- **Review of information on consumer satisfaction and services needed as gained through the evaluation process;**
- **Reviews of planned versus actual implementation and operation of required core functions;**
- **Improved Long Term Care system performance;**
- **Indicators:**
  - Phase One indicators:**
    - i. a comprehensive system of information, assistance and screening;**
    - ii. public education.**

**Phase Two indicators:**

- i. comprehensive needs assessment;**
- ii. service plan management for long term care has resulted from the POE's advocacy, coordination and infrastructure; service utilization and system effectiveness and efficiencies.**

**Standard 18: Continuous Improvement**

The POE, through collaboration with long term care stakeholders and/or the Long Term Care Council, must identify issues in the existing long term care system and its

capacity for ensuring access to a coordinated system of service delivery for consumers. Strategies to streamline processes and reallocate and /or restructure resources must be identified and addressed by the POE and /or the Long Term Care Council.

**D. DATA COLLECTION AND REPORTING**

**Standard 19: Data Collection Process**

A process or system must be in place to collect information, and support the POE core functions of both Phase One and Phase Two, as they are implemented.

**Standard 20: Data Collection Requirements**

Requirements for data collection and reporting must include:

- **Consumer:**
  - i. Number of consumer contacts;**
  - ii. Consumer demographics;**
  - iii. Call/request disposition.**
  
- **Operational:**
  - i. Community planning activities;**
  - ii. POE management;**
  - iii. Activities undertaken to address community long term care needs.**
  
- **Additional information as required by the State.**

**Standard 21: Reporting**

The POE must provide reports, as specified by the State, summarizing programmatic and financial activities for the prior contract year.

**Standard 22: Confidentiality**

**The POE must conform to all applicable confidentiality requirements and include provisions for the storage, retrieval, use and ultimate disposal of records. Unless the POE has a cooperative service delivery agreement in which consumer records are shared, external entities having access to data must see only aggregate data.**

#### **IV. ATTACHMENT 1: Elements of the Screen and Action Taken**

POE staff providing information and assistance must be able to expeditiously and appropriately respond to requests for information and assistance by identifying consumer needs and determining the urgency of the issue through a screening process. At minimum, State specified screening elements must be collected on the following topic areas: contact and demographic information, available formal and informal supports needs and abilities, functional capacity and health status, financial status, and personal goals and preferences, which will be determined by the type of assistance requested.

- The following elements are divided into two parts. Part One will collect information on the type of caller, the consumer's demographics, and the type of assistance requested. If POE staff feels that they need to collect further information, in order to provide proper information and assistance, they may proceed to Part Two, whereby each of the topic areas must be addressed.

- **POE Organization:**
- **Intake Worker's Name:**
- **Date:**

## **Part One**

### **Contact and Demographic Information**

#### **A. Type of Caller:**

- |              |                 |
|--------------|-----------------|
| -self        | -other relative |
| -parent      | -friend         |
| -spouse      | -neighbor       |
| -adult child | -other          |

#### **B. Consumer Demographics:**

1. Name:
2. Legal Address:
3. Current Address (if different):
4. Phone Number:
5. Date of Birth:
6. Gender:
7. Marital Status:
8. Language Requirements:
9. Emergency Contact:

#### **C. What are the consumer's current living arrangements?**

- alone
- with spouse/parents
- with relatives
- with non-relatives (friends/neighbors)
- in a congregate setting

#### **D. New or Repeat Contact:**

#### **E. Type of Assistance Requested:**

Adult Day Care / Adult Home/ Assisted Living/ Caregivers Support/ Care at Home/  
 Educational/ EISEP/ Employment/ Elder Abuse Prevention/ Financial/ Health Insurance/  
 HEAP/ Head Start/ Home Care/ Housing/ Hospice/ Legal/ Long Term Care Insurance/  
 Medical/ Nursing Home/ Nutrition/ Wellness/ Recreation/ Respite/ Senior Center/ Senior  
 Housing/ Supportive Living/ Support Groups/ Telephone Reassurance and Friendly Visiting/  
 Therapies (physical, occupational, speech)/ Transportation/ Visually Impaired/  
 Volunteering/ WRAP  
 Comment (if necessary):

**F. How Did You Learn About the POE?**

1. Family/friend
2. Medical Professional
3. Human Services Professional
4. Web site
5. Advertisement
6. Other

**G. Action Taken: (brief narrative)**

(ie: information provided on...., brochure provided on....)

**Part Two**

**Consumer Needs and Abilities**

**A. Which of the Following Does the Person Need Assistance With? (check all that apply)**

ADLs:

Personal Hygiene/ Dressing/ Mobility/ Transfer/ Toileting/ Eating/ Bathing

IADLs:

Housework or Cleaning/ Shopping/ Laundry/ Transportation/ Prepare and Cook Meals/  
Self Administration of Medications/ Handle Personal Business or Finances/ Use of  
Telephone

**Formal and Informal Support Status**

**A. Does the consumer have family, friends, and/or neighbors who are currently helping with care?**

Primary Informal Support:

-Name:

-Phone:

**B. What Formal Services Does the Person Currently Receive?**

**Functional Capacity and Health Status**

**A. Does the Consumer have a Chronic Illness and/or Disability?**

Such as:

Alcoholism/ Alzheimer's/ Anorexia/ Arthritis/ Cancer/ Colitis/ Colostomy/ Congestive  
Heart Failure/ Dehydration/ Diabetes/ Digestive Problems/ Diverticulitis/ Fractures  
(recent)/ Gall Bladder Disease/ Hearing Impairment/ Heart Disease/ High Blood  
Pressure/ Liver Disease/ Low Blood Pressure/ Muscular Dystrophy/ Osteoporosis/  
Parkinson's/ Renal Disease/ Respiratory Problems/ Seizure Disorders/ Speech Problems/  
Stroke/ Swallowing Difficulties/ Technology Dependent/ Ulcer/ Urinary Tract Infection/  
Visual Impairment/ Other (specify)

**B.** Does the Consumer appear, demonstrate, and/or report any of the following?

Alert/ Cooperative/ Dementia/ Depressed/ Disruptive/ Hallucinations/ Impaired Decision Making/ Lonely/ Memory Impairment/ History of Mental Health Treatment/ Physical Aggression/ Sleeping Problems/ Verbal Disruption/ Worried or Anxious/ Other (specify)

### **Financial Status**

**A.** What is the Consumer's Approximate Monthly Income (eg: Social Security, pension, working income, etc)?

**B.** What are your resources/assets (eg: stocks, bonds, trust funds, CDs, bank accounts, etc)?

**C.** Does the Consumer currently receive?

- Veterans Pensions or Health Care
- Social Security or SSI Payments
- Medicaid
- Medicare
- Long Term Care Insurance
- Railroad Pension
- Don't Know
- Other, such as trust funds, etc.

**D.** What is your race or ethnicity (optional)?

- White
- Black/African American
- Asian
- Native Hawaiian/Other Pacific Islander
- American Indian/Native Alaskan
- Hispanic or Latino

### **Action Taken**

**A. Type of Assistance Provided:**

Adult Day Care / Adult Home/ Assisted Living/ Caregivers Support/ Care at Home/ Educational/ EISEP/ Employment/ Elder Abuse Prevention/ Financial/ Health Insurance/ HEAP/ Head Start/ Home Care/ Housing/ Hospice/ Legal/ Long Term Care Insurance/ Medical/ Nursing Home/ Nutrition/ Wellness/ Recreation/ Respite/ Senior Center/ Senior Housing/ Supportive Living/ Support Groups/ Telephone Reassurance and Friendly Visiting/ Therapies (physical, occupational, speech)/ Transportation/ Visually Impaired/ Volunteering/ WRAP

**B. Problems/Issues to be Referred:**

**C. Referred To:**

