

Family Caregiver Support Program Standards

Older Americans Act

Prepared by:
Department of Human Services
Aging and People with Disabilities
Community Services and Supports Unit

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Family Caregiver Support Program Standards

I. Introduction

The National Family Caregiver Support Program (NFCSP) was established in 2000 as Title IIIE under the Older Americans Act, and was officially launched in February 2001. When the Older Americans Act was reauthorized in 2006, the NFCSP broadened the populations served. The Act was reauthorized in 2016, and enacted March 2020, providing further clarification as to who may receive services.

The NFCSP is a recognition that family caregivers provide the majority of care and support to their care recipient and that they are deserving of services that help them enhance their own lives as well as the person they support.

Services outlined in these Standards are meant to provide support to caregivers who care for a care recipient in their home in hopes of preventing or delaying placement into a long-term care setting. When family caregivers are well supported, receivers of their care can stay in their homes longer and can have a better quality of life.

II. Program Purpose Goals

- a. Services and resources will meet the needs of the caregiver and enhance support given to the care recipient.
- Services provided will help the caregiver become a better advocate and more confident in assisting the care recipient with their physical, cognitive, and behavioral needs.
- c. Services and supports will deter placement in a long-term care setting when feasible and promote continued care within the home and/or in alternative community settings for care recipients for as long as possible or desirable.
- d. Services and resources will help provide support to older relatives who are caregivers for children.

III. Program Authority

Sections 371-374 of the Older Americans Act of 1965, As Amended Through P.L. 116-131, Enacted March 25, 2020 Grants for State and Community Programs on Aging and W.S. 9-2-1204.

IV. Eligibility

- 1. A family caregiver who is 18 years or older caring for:
 - A person age 60 years of age or older; or
 - A person with Alzheimer's disease or other dementia of any age.
- 2. A parent or older relative caregiver age 55 or older who lives with, and is the primary caregiver for, an individual with disabilities age not less than age 18 and not older than age 59.
- An older relative caregiver (other than a parent) age 55 or older who lives with, and is the primary caregiver for, a child age 18 or younger.
 (OAA 372-373)

V. Services Provided under the Family Caregiver Support Program

The following services are allowed under the Older Americans Act Family Caregiver Support Program. The services provided shall be completed through a Caregiver Assessment (Sec. 372 under subsection (a) by the Area Agencies on Aging to determine which of these services are needed and feasible in their area and may offer some or all.

- 1. Information about services available in local communities. See Service and Unit Descriptions, Group 2 Information Services
- 2. Assistance in gaining access to services and resources in local communities. See Service and Unit Descriptions, Group 2 Information and Assistance
- Individual counseling, support groups and/or evidence-based training in the areas of caregiving, health, nutrition and financial literacy that assist the caregiver in making decisions and solving problems related to their caregiving role.
 See Service and Unit Descriptions, Group 1 Caregiver Counseling and Caregiver Training.
 - See Service and Unit Descriptions, Group 2 Caregivers Support Groups
- 4. Respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities. Respite offers temporary substitute supports or living arrangements that afford the caregiver a brief period of relief and rest from caregiving responsibilities. Respite care is prioritized to family caregivers providing care to a frail older adult. Services can be provided in the home, adult day service program or overnight stay in a residential care setting.
 - See Service and Unit Descriptions, Group 1 Respite Care.

 Supplemental services on a limited basis to complement the care provided by caregivers. For example, assistive technology, home modifications, incontinent supplies, legal assistance, transportation. Supplemental services are prioritized to family caregivers providing care to a frail older adult.
 See Service and Unit Descriptions, Group 1, Caregiver Supplemental Services and Caregiver Self-Directed Care.
 (OAA 373 (b))

VI. Priority populations to be served

The Older Americans Act prioritizes services to at-risk older adults including those who are frail and at risk for institutional placement; low-income, socially isolated, or Black, Indigenous, and people of color (BIPOC); older adults with limited English proficiency; those residing in rural areas; and Lesbian, Gay, Bisexual, Transgender, Queer, plus (LGBTQ+) older adults.

The Family Caregiver Support Program also specifically calls for states and Area Agencies on Aging to prioritize services to the following populations:

- 1. Caregivers who are older individuals with greatest social need, and older individuals with greatest economic need. (OAA 373 (c)(2)(A))
- 2. Older relative caregivers of children with severe disabilities or individuals with severe disabilities. (OAA 373 (c)(2)(B))
- 3. Family caregivers who support their relative who has Alzheimer's disease and related disorders with neurological or organic brain dysfunction. (OAA 372 (b))

VII. AAA Implementation of the Family Caregiver Support Program

- 1. Through the development of each AAA Area Plan, identify how the core service elements stated in Section V will be provided.
- 2. Develop policies and procedures on how services will be provided within the AAA. Policies and procedures may include but are not limited to:
 - a. When screenings and assessments are conducted and how they are used to identify the needs of the caregiver and of what services they will benefit from. AAA staff may use the assessment form provided by the DHS/State Unit on Aging or their own form(s).
 - b. How each service will be provided, either self-provided or through contract with a service provider, in partnership with another agency, or with volunteers.

- c. Identification and providing of services for caregivers who meet the "priority" criteria as outlined in Section VI of these Standards.
- d. Wait listing of clients for services in the event a client cannot be accommodated in a particular service at a particular time.
- e. Identification of dollar amount limits that will be provided to each client on services such as respite or supplemental services.
- f. Referral of individuals to other programs and services, i.e. other OAA programs, Medicaid, or local community services etc.
- Develop partnerships with other agencies (public or private) businesses, faithbased organizations and/or health care agencies either to provide services or information that can benefit caregivers.
- 4. Conduct outreach to prioritized populations of family caregivers.
- 5. Provide services in coordination with the local Aging and Disability Resource Connection (ADRC).
- 6. Develop a process for ensuring quality of services and follow-up with clients who have received services.
- 7. Recruit and train volunteers to expand the provision of available services.

VIII. Administration for Community Living and Older Americans Act Performance System Reporting Requirements

- Each AAA shall collect and report Administration for Community Living (ACL) and Older Americans Act System (OAAPS) data as directed by DHS for all caregiver services delivered using software provided by DHS or an alternative collection and reporting method.
- 2. Reporting of service units shall be consistent with the "Service Units and Definitions of Older Americans Act and Oregon Project Independence Programs", Group 1 and Group 2 Caregiver Services, please see Appendix 2 to these Standards.
- 3. Each AAA shall collect demographic information as required by ACL OAAPS and outlined in the Service and Unit Description document (Appendix 2) of these standards.
- 4. Each AAA will ensure that data for the Family Caregiver Support program is updated or completed at least annually and submitted in order for the Community Services and Supports Unit (CSSU) to send the State Program Report (SPR). (See Appendix 1)

IX. Program Income

All recipients of the Title III-E caregiver services are provided the opportunity to voluntarily contribute towards the cost of service. Any voluntary contribution will be referred to as program income and will be used for the sole purpose of expanding caregiver services.

X. Maximum Expenditures

The non-federal match requirement for IIIE is 25%, see OAA Sec. 373(h)(2)(A),

XI. Matching Funds

Federal funds may not pay for more than 75% of total caregiver expenditures. The required match is calculated as shown in the following example:

\$100 Title IIIE funds expended = \$100 divided by .75 = \$133. \$133 - \$100 = \$33; therefore, the required match to spend \$100 of Title IIIE funds is \$33.

Appendix 1 – General Terms and Definitions

Definitions that have references to the OAA, SPR or ACL Reporting Requirements for Title III and VII can be accessed by using the following links.

- Older American's Act (OAA) https://www.acl.gov/about-acl/authorizing-statutes/older-americans-act
- State Program Report (SPR) Title III Data Elements and Definitions (Title E Caregivers Services)

OAAPS Title III-E Data Elements and Definitions.pdf

- 1. Administration for Community Living and Older Americans Act Performance System (ACL OAAPS) State Program Performance Report (SPR)
- 2. The Older Americans Act Performance System (OAAPS) will be the new reporting tool the Administration for Community Living (ACL)/Administration on Aging (AoA) uses to monitor performance and collect information on Older Americans Act (OAA) Title III, VI, and VII programs. States and Area Agencies on Aging (AAA) will be able to submit their annual performance report data on OAA program participants, services, and expenditures either through uploading data files (based on a template to be provided by ACL) or directly inputting data into OAAPS.
- 3. **Aging and Disability Resource Connection** means a point of entry to comprehensive information on the full range of available public and private long-term care services, service providers, and resources within a community and person-centered options counseling to assist individuals in assessing their existing or anticipated long-term care needs, and developing and implementing a plan for long-term care designed to meet their specific needs and circumstances. (condensed from OAA 102 (4) (A-D)
- 4. **Activities of Daily Living (ADL)** means those personal functional activities required by an individual for continued well-being which are essential for health and safety. Activities include eating, dressing, grooming, bathing, personal hygiene, mobility (ambulation and transfer), elimination (toileting, bowel and bladder management), and cognition, and behavior. (OAR 411-015-0006 (1)
- 5. Adult Day Services (ADS) Program means a community-based group program designed to meet the needs of adults with functional impairments through service plans. These structured, comprehensive, non-residential programs provide health, social and related support services in a protective setting during part of a day, but for less than 24 hours per day. (OAR 411-066-0005 (2)

- 6. **Alzheimer's Disease and Other Related Disorders** means a progressive and degenerative neurological disease that is characterized by dementia including the insidious onset of symptoms of short-term memory loss, confusion, behavior changes, and personality changes. It includes dementia caused from any one of the following disorders:
 - a. Multi-Infarct Dementia (MID);
 - b. Normal Pressure Hydrocephalus (NPH);
 - c. Inoperable Tumors of the Brain;
 - d. Parkinson's Disease;
 - e. Creutzfeldt-Jakob Disease;
 - f. Huntington's Disease;
 - g. Multiple Sclerosis;
 - h. Uncommon dementias such as Pick's Disease, Wilson's disease, and Progressive Supranuclear Palsy; or
 - i. All other related disorders recognized by the Alzheimer's Association.
 - j. (Alzheimer's Association What is Dementia?)
- 7. **Area Agency on Aging (AAA)** means the agency designated by the Department as an AAA is charged with the responsibility to provide a comprehensive and coordinated system of services to older adults and individuals with physical disabilities in a planning and service area. For purposes of these standards, the term Area Agency on Aging is inclusive of both Type A and B AAAs as defined in ORS 410.040 to 410.300, 410.410)
- 7. **Area Plan** means the approved plan for providing authorized and coordinated services under the Older American's Act and Oregon Project Independence. (Definition developed by SUA)
- 8. **Assessment** means a collaborative process for identifying the services that will be of benefit to the caregiver. (Definition developed by SUA)
- 9. **Caregiver** means an individual who has the responsibility for the care of an older individual, either voluntarily, by contract, by receipt of payment for care, or as a result of the operation of law and means a family member or other individual who provides (on behalf of such individual or of a public or private agency, organization, or institution) compensated or uncompensated care to an older individual. (OAA (102) (18) (B))
- 10. Child means an individual who is not more than 18 years of age. (OAA 372 (a) (1))
- 11. **Disability** means except when such term is used in the phrase "severe disability", "developmental disability", "physical or mental disability", "physical and mental disabilities", or "physical disabilities" a disability is attributable to

- mental or physical impairment, or a combination of mental and physical impairments, that results in substantial functional limitations in one or more of major life activity. (Condensed from OAA 102 (13))
- 12. **Ethnicity** Consistent with OMB requirements ethnicity categories are Hispanic or Latino or Not Hispanic or Latino. (ACL Reporting Requirements for Title III and VII)
- 13. **Evidence-based training** Evidence-based programs provide interventions that have been tested and have shown to be effective. In terms of caregiving, interventions are aimed at helping the caregiver and the care recipient adopt healthy behaviors, improve health status and reduce the use of hospital services and emergency room visits.
- 14. **Family Caregiver** 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 related disorder with neurological and organic brain dysfunction. (OAA 302 (4))
- 15. **Frail** means, with respect to an older individual in a State, that the older individual is determined to be functionally impaired because the individual
 - A. (i) is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing, or supervision; or (ii) at the option of the State, is unable to perform at least three such activities without such assistance; or
 - B. due to a cognitive or other mental impairment, requires substantial supervision because the individual behaves in a manner that poses a serious health or safety hazard to the individual or to another individual. (OAA 102 (22))
- 16. **Individual with a Disability** means an individual with a disability, as defined in Section 3 of the Americans with Disabilities Act of 1990 (42 U.S.C. 12102), who is not less than age 18 and not more than age 59. (OAA 372 (a) (2))
- 17. **Instrumental Activities of Daily Living or Self-Management Tasks** means a person's ability to do housekeeping, laundry, shopping transportation, medication management and meal preparation as described in <u>OAR 411-015-0007</u>.
- 18. **Greatest economic need** means the need resulting from an income level at or below the poverty line. (OAA 102 (a) (23))

- 19. **Greatest social need** means the need caused by non-economic factors which include:
 - a. Physical and mental disabilities;
 - b. Language barriers; and
 - c. Cultural, social, or geographical isolation, including isolation caused by racial or ethnic status, that;
 - i. Restricts the ability of an individual to perform normal daily tasks; or
 - ii. Threatens the capacity of the individual to live independently. (OAA, 102 (24))
- 20. **National Aging Program Information System (NAPIS)** State Program Reports (SPR) which are generated through NAPIS provides information on what services are provided through Titles III and VII (supportive services, nutrition, caregiver support, elder rights) of the OAA and who receives them and what funding is expended for these programs. (NAPIS/SPR) expires on 12/31/22.
- 21. **Older Relative Caregiver** means a caregiver who is 55 years and older; lives with, is the informal provider of in-home and community care to, and is the primary caregiver for, the child or the individual with a disability.
 - In the case of a caregiver <u>for a child</u>, the older relative is the grandparent, step-grandparent or other relative (other than the parent) by blood, marriage, or adoption, of the child. They are the primary caregiver of the child because the biological or adoptive relationship to the child, such as legal custody or guardianship or is raising the child informally.
 - In the case of the caregiver for <u>an individual with a disability</u> who is age not less than 18 and not older than age 59, the older relative is the parent, grandparent or other relative by blood, marriage, or adoption of the person with a disability.

(OAA 372 (a) (2-3))

- Poverty Persons considered to be in poverty are those whose income is below the official poverty guideline (as defined each year by the Office of Management and Budget) in accordance with subsection 673 (2) of the Community Services Block Grant Act (42 U.S.C. 9902 (2)). The annual HHS Poverty Guidelines provide dollar thresholds representing poverty levels for households of various sizes. (AoA Title III/VII Reporting Requirements Appendix Definitions)
- 23. **Poverty Level** means the income level indicated in the Federal Poverty Income Guidelines developed and annually updated and published in the Federal Register by the United State Department of Health and Human Services. Poverty Levels HealthCare.gov

- 24. **Program Income** Gross income received by the grantee (AAA) or sub-grantee (AAA contractor) such as voluntary contributions or income earned as a result of a grant project during the grant period. (AoA Title III/VII Reporting Requirements Appendix –Definitions)
- 25. **Provider** means an organization or person which provides a service to clients under a formal contractual arrangement with the AAA or Community Services and Supports Unit (Formerly SUA). (AoA Title III/VII Reporting Requirements Appendix Definitions)
- 26. **Race** Consistent with OMB requirements, race categories are *American Indian* or *Alaskan Native*; *Asian*; *Black* or *African American*; *Native Hawaiian* or *Other Pacific Islander*; and *White*. Respondents should ideally be given the opportunity for self-identification and are to be allowed to designate all categories that apply to them. (AoA Title III/VII Reporting Requirements Appendix Definitions)
- 27 **Registered Client** means an individual who received one or more units of Cluster 1, Cluster 2, or Group 1 or Group 2 Caregiver services: Definition developed by DHS/APD/ Community Services and Supports Unit (Formerly the SUA).
- 28. **Rural** Any area that is not defined as urban. Urban areas comprise (1) urbanized areas (a central place and its adjacent densely settled territories with a combined minimum population of 50,000) (2) an incorporated place or census designation with 20,000 or more inhabitants. (AoA Title III/VII Reporting Requirements Appendix –Definitions)
- 29. **Severe Disability** The term "severe disability" means a severe, chronic disability attributable to mental or physical impairment, or a combination of mental and physical impairments, that
 - a. Is likely to continue indefinitely; and
 - b. Results in substantial functional limitation in 3 or more of the major life activities including self-care; receptive and expressive language; learning; mobility; self-direction; capacity for independent living; economic self-sufficiency; cognitive functioning; and emotional adjustment. (OAA Sec. 102 (48))
- 30. **Volunteer** An uncompensated individual who provides services or support on behalf of older individuals. Only staff working under the AAA, not the AAA contractors, shall be included. (AoA Title III/VII Reporting Requirements Appendix Definitions)

31.	Voluntary Contributions means a non-coerced monetary sum provided toward the cost of service. (OAA 315(a) (5) (b) (1))

31.

Appendix 2 - Service and Unit Descriptions

Group 1 Caregiver Services

Requires reporting caregiver's age, gender, rural, race, ethnicity, relationship to service recipient, unduplicated caregiver count, and units of services.

CAREGIVER SELF-DIRECTED CARE (formerly known as Cash & Counseling) (**Group 1**) (**1 client served**)

Services provided or paid for through allowance, vouchers, or cash which is provided to the client so that the client can obtain the supportive services which are needed.

(ACL-OAAPS Title III Data elements and Definitions)

Title III-E Caregiver Services

(Definition developed by 2011 AAA/Community Services and Supports Unit (Formerly the SUA) workgroup)

CAREGIVER COUNSELING

(1 unit = 1 hour)

Service designed to support caregivers and assist them in their decision-making and problem solving. Counselors are service providers that are degreed and/or credentialed a required by state policy, trained to work with older adults and families and specifically to understand and address the complex physical, behavioral, and emotional problems related to their caregiver roles. This includes counseling to individuals or group sessions.

(ACL-OAAPS Title III Data Elements and Definitions)
Title III-E Caregiver Services

CASE MANAGEMENT

(1 unit = 1 hour)

Service provided to a caregiver, at the direction of the caregiver by an individual who is trained or experience in the case management skills that are required to deliver services and coordination; and to assess the needs, and to arrange coordinate, and monitor an optimum package of services to meet the needs of the caregiver.

(ACL-OAAPS Title III Data Elements and Definitions)
Title III-E Caregiver Services

CAREGIVER SUPPLEMENTAL SERVICES

(1 unit = 1 payment)

Services provided on a limited basis to complement the care provided by caregivers. Examples of supplemental services include, but are not limited to, legal assistance,

home modifications, transportation, assistive technologies, emergency response systems and incontinence supplies.

(ACL-OAAPS Title III Data Elements and Definitions)
Title III-E Caregiver Services

Note: Home-delivered meals and transportation to caregivers serving elderly or caregivers serving children are to be reported under this matrix. Refer to Caregiver Standards for expanded list of examples.

No ADL/IADL is required for supplemental services to caregivers serving children. For caregivers serving elderly, service priority should always be given to caregivers providing services to individuals meeting the definition of 'frail'. (See General Terms and Definitions)

CAREGIVER TRAINING

(1 unit = 1 hour)

A service that provides family caregivers with instruction to improve knowledge and performance of specific skills relating to their caregiving roles and responsibilities. Skills may include activities related to health, nutrition, and financial management; providing personal care; and communicating with health care providers and other family members. Training may include use of evidence-based programs; be conducted inperson or on-line and be provide in individual or group settings. For example: Powerful Tools for Caregivers, Savvy Caregiver, Communicating Effectively with Health Care Professionals; conferences, etc. (A session for conferences would be equal to one day's attendance at the conference)

(ACL-OAAPS Title III Data Elements and Definitions)

Title III-E Caregiver Services

(DHS/APD/ Community Services and Supports Unit (Formerly the SUA definition) **Note:** This does not include training to paid providers.

RESPITE CARE

(1 unit = 1 hour see notes)

Services which offer temporary, substitute supports or living arrangements for care recipients in order to provide a brief period of relief or rest for caregivers. Respite Care includes:

- (1) In-home respite (personal care, homemaker, and other in-home respite);
- (2) respite at a senior center or other nonresidential program.
- (3) respite provided by placing the care recipient in an institutional setting such as a nursing home for a short period of time.
- (4) and for grandparents/relatives caring for children day or overnight summer camps. (ACL-OAASP Title III/VII Reporting Requirements Appendix –Definitions)

Note: OAA 373 (a)(B) states priority shall be given to caregivers providing services to individuals who meet the definition of 'frail'.

Group 2 Caregiver Services

Requires reporting service units and estimated unduplicated caregiver count or when applicable, an estimated number of caregivers and service units.

No demographics are required.

CAREGIVER SUPPORT GROUPS

(1 Unit = 1 Hour) one hour of work performed by one person

A service led by an individual who meets state policy requirements to facilitate caregiver discussion of their experiences and concerns and develop a mutual support system. For the purposes of Title III-E funding, caregiver support groups would not include "caregiver education groups," peer-to-peer support groups," or other groups primarily aimed at teaching skills or meeting on an informal basis without a facilitator that possesses training and/or credential as required by state policy. (ACL-OAAPS Title III/VII Reporting Requirements)

INFORMATION AND ASSISTANCE (1 Unit = CONTACTS)

A service that provides the individuals with current information on opportunities and services available to the individuals within their communities; assesses the problems and capacities of the individual; links the individual to services; ensures that the individual receives services they are in need of; and services the entire community of older adults. (ACL-OAASP Title III/VII Reporting Requirements Appendix – Definitions)

Note: Information and Assistance is broken away from the former Access Assistance

INFORMATION SERVICES

(1 Unit = Activities)

A public and media activity that conveys information to caregivers about available services, including in-person interactive presentations, booth/exhibits, or radio, TV, or Web site events. This service is not tailored to the needs of the individual.

Appendix 3 – Family Caregiver Support Program Intake Form

FAMILY CAREGIVER INTAKE FORM

Date: __ Caregiver Name: _____ Female Male DOB: _____ Address: Home: _____ Mailing: _____ City/St./ZIP: City/St./ZIP Phone: Home/Cell: ______ Work: _____ E-mail: _____ Race Check all that apply White Native Hawaiian/Pacific Islander **Ethnicity** American Indian/Alaska Native Asian Client is Hispanic or Latino? Black Unknown Yes Unknown Referred by: <<Relationship Not Reported>> Relationship to Care Recipient Wife Son Caregiver of any age: | Husband Daughter-in-Law Other Fam. Member | Non-Relative Grandparent Other Elderly Relative When Caregiver is Grandparent Status 55+: How many children under age 18 does the caregiver care for? **Emergency Contact** Name: Home Phone: Work Phone: _____ Address: ____ City/St.ZIP:_____ Cell Phone: E-Mail: Friend Child Relationship Grandchild Neighbor Parent Sibling Other Fam. Member Spouse Not Related **Care Recipient Information:** Name: _____DOB: Female Gender: Male Address: City/St./ZIP: Phone: Phone: _____ Ext. _____ Physician: Does the care receiver have a dementia diagnosis? Yes No **Health Status/Diagnosis**

Benefits/Income

What is your average monthly income?					
Poverty Level Guidelines: https://www.healthcare.gov/glossary/federal-poverty-level-FPL/					
Is the care recipient a veteran? Yes No					
Does the care recipient currently receive services or benefits? Yes No					
Does the care giver currently receive services or benefits? Yes No					
If yes, what services/benefits?					
Are services being received by any other agencies such as county, state or other organization? Yes No					
If yes, what agency?					
Living Situations					
Does the caregiver live with the care recipient? YesNo					
If No, then who does the care recipient live with?					
1. Who is the primary caregiver?					
1. Who is the primary caregiver?					
2. Is there a back-up/secondary caregiver? Who?					
 Is there a back-up/secondary caregiver? Who? Are there cultural or ethnic preferences? What does the caregiver need help with the most? 					
 Is there a back-up/secondary caregiver? Who? Are there cultural or ethnic preferences? 					
 Is there a back-up/secondary caregiver? Who? Are there cultural or ethnic preferences? What does the caregiver need help with the most? Quality of relationship? 					
 Is there a back-up/secondary caregiver? Who?					
 Is there a back-up/secondary caregiver? Who?					
 Is there a back-up/secondary caregiver? Who?					
 Is there a back-up/secondary caregiver? Who?					

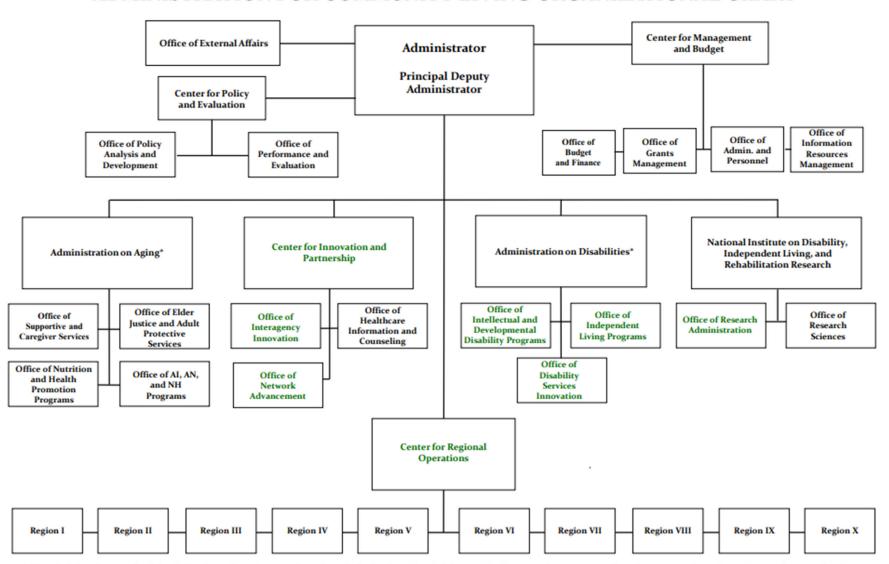
Caregiver Support Services	Caregiver Recipient Information					
Please check all that apply for this	F=Full Assist, S=Substantial Assist, M=Minimal Assist, I=Independent					
caregiver		<u> </u>				
Caregiver Case Management Caregiver Counseling Caregiver Information and Assistance Caregiver Information Services Caregiver Respite Caregiver Supplemental Svcs. Caregiver Training Support Groups for Caregivers Caregiver Self- Directed Care	IADL No IADL Needs F S M I Food Preparation Heavy Housework Housekeeping Managing Finances Medication Mgmt.	ADL No ADL Needs F S M I Bathing Behavior Dressing Eating Eliminating				
Older Relative Case Management Older Relative Counseling Older Relative Information and Assistance Older Relative Information Services Older Relative Respite Older Relative Supplemental Svcs. Older Relative Training Support Groups for Older Relatives Older Relative Self Directed	Shopping Taking Medication Using Telephone Using Transportation					
Action Plan Information and Assistance Respite Legal Consultation Support Groups Counseling Supplemental Services Other (see below) Referred to: Follow-up needed:						

Appendix 4 – Roles & Relationships in the Aging Network

Roles & Relationships in the Aging Network U.S. Department of Health & Human Services Administration for Community Living/ Administration on Aging Oregon DHS State Unit on Aging (SUA) 17 Oregon Area Agencies on Aging (AAA) Aging & Disability Resource Connection (ADRC) Older Americans Act implemented by AAAs III - B III - C III - D III-E Title VII Supportive Services Nutrition Services Disease Prevention Family Caregiver Elder Rights Elder Abuse Caregiver Access Congregate Meals Information & Prevention Adult Day Program Evidence-based health Home Delivered Meals Assisted Transportation Assistance LTC Ombudsman promotion and disease Nutrition Counseling Case Management Individual Legal Assistance prevention programs Nutrition Education Chore Services counseling, Legal Resources addressing issues Crime Prevention/Home Safety support groups, including falls Financial Assistance and caregiver prevention, chronic Guardianship/Conservatorship training disease self-Health & Medical Equipment Respite care management, physical Homemaker Supplemental activity, and Information & Assistance depression caregiver services Interpreting/Translation Legal Assistance LTC Ombudsman Money Management Options Counseling Personal Care Public Outreach/Education Reassurance Recreation Senior Center Assistance Transportation Volunteer Recruitment Volunteer Services

Appendix 5 – Administration for Community Organization Chart

ADMINISTRATION FOR COMMUNITY LIVING ORGANIZATIONAL CHART



^{*} The Administration on Aging is headed by the Assistant Secretary for Aging, who is also the ACL Administrator. The Deputy Assistant Secretary for Aging supports the Assistant Secretary in overseeing the Administration on Aging. The Deputy Assistant Secretary for Aging also serves as the Director of the Office of Long-Term Care Ombudsman Programs consistent with Section 201 of the Older Americans Act.

^{**} The Administration on Disabilities is headed by a Commissioner who also serves as: the Commissioner of the Administration on Developmental Disabilities as described by the Developmental Disabilities Act; and the Director of the Independent Living Administration, reporting directly to the ACL Administrator in carrying out those functions, consistent with Section 701A of the Rehabilitation Act.