

Service Standards Title III-B Information & Assistance

The service provider must adhere to the AgeGuide General Service Requirements in addition to service-specific requirements listed below.

I. **Definitions**

- A. <u>Service Definition (IDOA 603.17 A):</u> A service for adults age 60 and over that:
 - **1.** Provides the individual with current information on opportunities and services available to the individuals within their communities,
 - 2. Assesses the problems and capacities of individuals,
 - 3. Links the individual to the opportunities and services that are available, and
 - **4.** Establishes adequate follow-up procedures based on the individual's needs.
 - **5.** The service may be initiated by an older person, caregiver or service provider.
- **B.** <u>Unit of Service (IDOA 603.17 C):</u> Any individual client contact made for information, referral, or assistance constitutes one unit of service. Each follow-up contact on behalf of that client also constitutes a unit of service.
 - **1.** For example: If an eligible client contacts the service provider requesting information on a benefit program, this contact constitutes one unit of service. If the service provider follows up with the same person to see if the application has been made to this program, this will constitute another unit.
 - **2.** The service units for information and assistance refer to individual, one-on-one contacts between an information and assistance provider and a client and any contact made on behalf of the client.
 - **3.** An activity that involves a contact with several current or potential clients/caregivers (such as group presentations and newsletters) should not be counted as a unit of information and assistance. Group services might be defined as "public education" or a similar designation.
 - **4.** Internet web site hits are to be counted only if information is requested by the client or representative. For example, a client requests by e-mail on a provider's website that they want information on pharmaceutical assistance programs. If the provider provides this information by e-mail, traditional mail or by telephone, this is one contact (one unit of service).

5. If the client or representative simply reviews information on the provider's website and does not request specific information, then this situation cannot be counted as a contact (unit of service).

II. Service Activities

- **A.** Provision of specific information about appropriate community resources which meet the immediate expressed need (IDOA 603.17 B).
- **B.** Provision of assistance to older persons (or their caregiver) to identify their needs and to place them in contact with appropriate community resources or service providers (IDOA 603.17 B).
- **C.** Assessment of the problems and capacities of the individual (IDOA 603.17 B). Explore, when appropriate, to see if there is a more serious underlying or unstated problem (including in those situations where an individual is requesting some specific information without identifying a need) (AgeGuide).
- **D.** Follow-up activities conducted with older persons and/or agency(ies) to determine whether services have been received and the identified need has been met following the formal referral (IDOA 603.17 B).
- **E.** Expansion of information and assistance services on a 24 hour (if needed) emergency basis during times of disaster (e.g., flooding, hot weather, tornadoes, severe weather, man-made emergencies, etc.) to assure older persons are safe and have access to services to meet their needs (IDOA 603.17 B).
- **F.** Provide client advocacy to secure needed services and benefits (IDOA 603.17 E11). This may include conducting three-way calling with or making calls/referrals on behalf of clients, when necessary (AgeGuide).
- **G.** Provide assistance in filling out applications, obtaining authorizations and follow up with clients to make sure that services are accessed (AgeGuide).
- **H.** Use person-centered planning procedures when advising clients, caregivers or their families (AgeGuide).
- **I.** Make referrals that are in the best interest of the client and make efforts to avoid a conflict of interest (AgeGuide).

III. Service Standards

A. Intake

1. Intake procedures (including a standardized intake form and interview process) must be established for training all staff responding to inquiries to collect each client's demographic information and to assess the client's needs (AgeGuide).

B. Telephone Service

- **1.** A person, not voicemail, will answer calls at each I&A answering station. There will be telephone coverage at each answering station during business hours (AgeGuide).
- **2.** If all I&A staff are attending to other callers or must refer to another specialist within the agency to address the caller's request, voicemail may be used (AgeGuide).
- **3.** The provider must have voicemail or utilize an answering service that is available for callers to leave messages outside of regular business hours (AgeGuide).
 - **a.** At a minimum, voicemail systems will state regular business hours for the service, direct callers to dial 911 for emergencies, and include the IDOA Adult Protective Services (APS) Hotline number (AgeGuide).
 - **b.** Callers will receive acknowledgement of their voicemail messages within one business day (AgeGuide).

C. Records and Documentation

- **1.** Provider has implemented policies to ensure the privacy, **Error! Reference source not found.** and security of client information (AgeGuide).
 - **a.** Provider may disclose information by name about an older person only with the informed consent of the older person or his or her authorized representative. Such informed consent must be documented in the older person's case file whether it is written or verbal consent. The documentation must include who (older person or authorized representative) provided the written or verbal consent (IDOA 603.17 E3).
- **2.** A Data Collection System shall be developed to meet client and service needs and as a resource for meeting community needs (IDOA 603.17 E7).
 - **a.** The data collected provides information about client needs, whether gathered through the original contact, during follow-up or via **Error! Reference source not found.**/quality assurance surveys, to identify areas such as:
 - i. Referral patterns including information on aggregate problem/needs
 - ii. Service requests for specific programs and organizations
 - iii. Met and unmet needs
 - iv. Trends in community service provision and/or gaps in service
 - v. Client demographic data and demographic profiles

3. A record keeping system will be in place to maintain count of unduplicated persons and daily units of service provided (AgeGuide).

D. Resource Development

- **1.** Information and Assistance providers must (IDOA 603.17 E 2):
 - **a.** Maintain current information with respect to the services and opportunities available to older persons.
 - **b.** Develop current lists of older persons in need of services and opportunities.
- 2. The provider must maintain accurate, up-to date information on resources available (IDOA 603.17 E6). Providers are encouraged to use the statewide I&A resource database (currently *Illinois Aging Services http://illinoisagingservices.org/*) if no other resource database is available to staff.
- **3.** Staff have access to a variety of resource materials and web tools to assist clients (AgeGuide).

E. Coordination

- **1.** As stated in the AgeGuide "General Service Requirements," providers are required to maintain linkages with other service providers and organizations in their service area. Information and Assistance providers must also:
 - **a.** Coordinate and make referrals to the local Care Coordination Unit and Managed Care Organizations as appropriate (AgeGuide).
 - **b.** Have a working relationship and a written agreement with the local Center for Independent Living (AgeGuide).
 - **c.** Have a working relationship and/or a written agreement with other community service providers to coordinate, and where possible, to co-locate services (AgeGuide).
 - i. Community service providers may include: local offices of the Social Security Administration, the Illinois Department of Public Aid, the local Health Department and Mental Health Department, local Developmental Disability Services provider, the local office administering the Illinois Low Income Home Energy Assistance Program, Community Focal Points and Senior Centers, Home Health Care agencies, hospitals, and other local service providers.

- **d.** Participate in community outreach and public awareness activities in coordination with the Senior Helpline and be full participants in statewide coordination activities (AgeGuide).
- **e.** Follow statewide and regional protocol for coordination between the No Wrong Door system and 211 providers, as this system is developed (AgeGuide).
- **2.** Care Coordination Units that also receive Title III-B Information & Assistance funding must demonstrate cooperative working relationships with Title III-C funded home delivered meal providers and follow the policies and procedures specified in the Home Delivered Meal Client Process Addendum (AgeGuide).

F. Access

- **1.** Provider must maintain the capacity to assist clients seeking services via telephone, walk-in, mail and email. Provider will strive to accommodate persons who are homebound or otherwise isolated through home visits and other community locations when necessary (AgeGuide).
 - **a.** The capacity to serve clients who require a home visit may be served through referral to Case Management (AgeGuide).
- 2. Provide at least full day (minimally 7 hours) Monday Friday availability for staffing and information (AgeGuide).
 - **a.** Provider will ensure that an appropriate number of staff are scheduled to meet the needs of clients during regular business hours (AgeGuide).
 - **b.** In the event phone service is disrupted or the agency is closed for more than 4 hours at an Information and Assistance site, the site will notify the Area Agency on Aging when disrupted/closed and when the service is reinstated (AgeGuide).
- **3.** In areas with a significant number of older persons who do not speak English as their principal language, the provider must arrange for or have the capacity to provide information and assistance services in the language spoken by older persons. (IDOA 603.17 E1).
 - **a.** Have staff, or contractual agreements, to aid persons with Limited-English Proficiency and persons with hearing or speech impairments in obtaining services and demonstrate cultural competency (AgeGuide).
- **4.** Provide settings to attend to each older person's questions/needs without interruption and in a confidential manner (IDOA 603.17 E4).
- **5.** The provider shall seek to maximize the accessibility of other needed services (IDOA 603.17 E8).

- **6.** Facilities shall be provided in sufficient quality and quantity to insure operation of the information and assistance service (IDOA 603.17 E9).
- **7.** The provider shall have a plan in place that addresses its operation in the event of disaster conditions. (IDOA 603.17 E10)
- **8.** Provide community and/or group presentations about available resources and services (IDOA 603.17 E12).
- **9.** Have a disability-accessible environment for meeting customers and the general public (AgeGuide).
- **10.** Maintain an agency website that specifically references the Information and Assistance services available from the provider and which includes a means to contact the provider by phone and e-mail in order to obtain personal assistance (AgeGuide).
- **11.** Provide no-cost phone access from all points within the area served (e.g. toll-free access is provided to people living within the area served). Providers should publicize their information in printed and online listings/directories commonly used by the public (AgeGuide).

G. Staffing

- **1.** The provider must employ specially trained staff to inform older persons of the opportunities and services which are available and to assist older persons to take advantage of the opportunities and services (IDOA 603.17 E2).
 - **a.** Staff must have appropriate qualifications and education (A.A., B.S., B.A., LPN, RN, etc.) or equivalent experience (AgeGuide).
- **2.** Staff shall be competent, ethical, qualified, and sufficient in number to implement the policies of stated programs and service objectives. (IDOA 603.17 E5).
- **3.** Provider must have at least one staff person certified by the Alliance of Information & Referral Systems (AIRS) (AgeGuide).

H. Training

- **1.** Provider will have a standardized training process for current staff, new employees, and volunteers (AgeGuide).
 - **a.** Training should include areas such as:
 - i. Information and Assistance standards and procedures
 - ii. Interviewing and assessing needs

- iii. Information on local, state, and national resources, benefits, and services
- iv. Confidentiality
- v. Mandated Reporting
- vi. Crisis Intervention
- vii. Reaching and serving diverse populations
- viii.Documentation and record keeping
- **2.** Staff shall participate in a variety of training opportunities, including those offered by IDOA, AgeGuide, and other sources (AgeGuide).

I. Quality Assurance

1. Provider will have a process to evaluate I&A service delivery, including client satisfaction and outcomes (AgeGuide).