



**Department for  
the Aging**

# NYC Aging General Program Standards of Operation

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*Based on standards set by New York City Aging and the New York State Office for the Aging.  
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## Introduction

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The following General Standards of Operation apply to all NYC Aging-funded programs, unless otherwise specified. NYC Aging's Program Standards provide service-specific guidelines applicable to programs that provide those services.

## Section 1. Eligibility

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See specific program standards for eligibility requirements for that service.

### Standard 1: Eligibility and Equal Access

#### Compliance 1.1. The program ensures equal access to all eligible persons.

- Within funding availability, the program ensures any eligible adult equal access to participation, services, activities and informational sessions without regard to race, color, creed, national origin, gender identity, age (over 60), non-citizen or citizen status, disability, sexual orientation, marital status, familial status, military status, arrest or conviction record, predisposing genetic characteristics or other categories protected by law against discrimination.
- Service denial to eligible individuals may occur under these circumstances:
  - Reasons stated in service-specific standards.
  - Another provider can more appropriately serve the individual (the individual may be referred to that provider).
  - In accordance with program policies and procedures when the individual's behavior causes physical or mental harm to others.

#### Compliance 1.2. Free-of-Cost Services.

- The program does not charge fees for program participation or for providing services, unless specified otherwise in service-specific standards.

#### Compliance 1.3. Persons with Disabilities.

- The program addresses the needs of persons with disabilities, including those with hearing and visual impairments. Resources may include assistive technology for persons with hearing impairments (TTY), large print documents for persons with visual impairments, and other resources specified in service-specific standards.
- The program complies with the Americans with Disabilities Act (ADA) if older adults are served on site. If not at street level, the center has an exterior ramp and/or elevator from ground level.
- At least one bathroom used by participants is barrier free and easily accessible from all program areas.
- Dining room access is barrier free and at least one table is wheelchair accessible.

## Section 2. Informed Consent and Confidentiality

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Pursuant to federal and state requirements, all providers of services under the Older Americans Act or New York's Elder Law must adhere to procedures protecting the confidentiality of personal information gathered in the conduct of their respective responsibilities. This includes obtaining the informed consent of an individual before his or her personal information is recorded in the client data system and before any disclosure of personal information is made,

including to service providers for referral purposes. (*See specific program standards for additional consent policies related to that service.*) **All NYC Aging funded programs must use the approved consent forms.**

## Standard 2: Consent to Collect and Record Data

**Compliance 2.1. Consent to Collect and Record Data.** The program obtains informed consent of all individuals to capture his/her information before a record is created and any identifying information is entered in the client data system.

- **Existing Clients.** For clients active prior to February 3, 2023, a signed Consent to Collect Data form, when applicable, must be obtained by February 5, 2024.
- **In-person.** When the program meets with a client in-person, the program obtains a signed Consent to Collect Data form at the time of the in-person contact.
- **Telephone/Virtual Consent to Collect Data.** When an initial contact is made over the telephone or virtually, the program obtains verbal consent to collect data before client information is recorded in the client data system. The program documents in the client data system that consent was received and obtains a signed consent during a follow-up face-to-face contact or electronically.

**Compliance 2.2. Verbal Consent to Collect Data.** Verbal Consent to collect data may be acceptable for the services/program below only. See program/service specific standards for more information.

- Information
- Congregate Meal
- Elder Crime/Justice Program
- Geriatric Mental Health Program
- NY Connects Information and Assistance Program
- Health Insurance Information Counseling and Assistance (HIICAP) Program

**Compliance 2.3. Service Units for clients who Refuse to Sign Consent to Collect.** If the client refuses to provide consent to collect data for any of the services listed under compliance 2.2 above), the program records units of services provided under the program's one (1) 'Anonymous, Anonymous' client.

## Standard 3: Consent to Refer and Share Information

**Compliance 3.1. Consent to Share and Refer Information.** The program obtains signed consent from the client before the client is referred to another provider for services and client information is shared.

**Compliance 3.2. Information and Assistance/Referral Only.** If a client refuses to provide consent to share and refer, the program provides the client with information for them to contact the service provider themselves. The program cannot enter identifying information or directly make any referrals on behalf of the client. The program explains this to the client.

## Standard 4: Consent Revocation

**Compliance 4.1. Consent Revocation Information.** Clients wishing to revoke consent are provided with an Informed Consent Revocation Form in-person, by mail, or by email if requested by the client. Consent remains in effect until the client revokes it.

**Compliance 4.2. Revocation of Consent to Refer/Share Information.** If a client revokes consent to share/refer, the client is informed that no additional referrals or follow-up or advocacy can be made on his/her behalf. The program provides information for the client to follow-up on their own.

- If a client revokes consent to share and refer, no further disclosures of the client's information may be made.
- Any revocation form received must be uploaded in the client's file in the client data system.

**Compliance 4.3. Revocation of Consent to Collect Data.** If a client revokes his/her consent to collect data, the program continues to provide services that **do not** require consent. (See program/service specific consent requirements.) For all other services, the client is in effect refusing service. The program explains this to the client and provides information to the client to follow up on their own.

- If a client revokes consent to collect data, no new client data can be collected or entered in the client data system. This is noted in the client's file, and their case is immediately closed.

**Compliance 4.4. Re-activating Consent.** If a client decides to re-activate a consent that they have revoked, the program obtains new signed consent forms from the client.

*Note: Any revocation of consent will apply prospectively only and will have no effect on disclosures already made with the client's consent. When a client revokes consent, any data previously entered in the client data system will not be deleted as that data is maintained as an official service record.*

## Standard 5: Informed Consent for Non-English-Speaking Clients.

**Compliance 5.1. Consent for non-English Speakers.** Consent documents are provided to clients in the language understandable to them.

- If necessary, the program uses an interpreter fluent in the client's spoken language to aid in the consent process. (See Standard 9.1)

## Standard 6: Consent Documentation

**Compliance 6.1.** The program records all consent activity in the appropriate sections in the NYC Aging client data system. Electronic signatures are acceptable.

- Any documentation NOT required by NYC aging that is uploaded into the NYC Aging client data system is stored there at the program's risk. NYC Aging is not responsible for maintaining the integrity of another entity's records.

**Compliance 6.2.** The program utilizes the NYC Aging approved consent forms. The program does not modify the forms in any way, for example, by copying and pasting the forms onto the program's letterhead.

**Compliance 6.3.** The program uploads all signed consent forms into the NYC Aging client data system.

## Standard 7: Consent During Emergency Situations

**Compliance 7.1.** Client data can be shared via a referral on behalf of an older person without consent from the client if the situation is deemed an “actual and immediate danger to the health or welfare of the individual” (9 N.Y.C.R.R.§6663.3(q)). This applies to referrals to Adult Protective Services (APS), police, and other emergency services.

## Standard 8: Protection of Personal Information

**Compliance 8.1. Confidentiality protections.** The program keeps confidential all personal information about persons who apply for or receive services. It shares confidential information only on a need-to-know basis with its funding agency and with program staff for purposes of providing services. It shares confidential information with outside entities only with the informed consent of the individual or pursuant to a court order or when there is deemed to be actual and immediate danger to the health or welfare of the individual.

- The program respects the right of participants/clients and the public to information about how the program protects confidentiality.
  
- Staff members that use NYC Aging's client data system:
  - Have been given a unique user ID and password.
  - Do not allow unauthorized individuals to use the client data system, gain access to passwords, or share IDs.
  - Have their access to the client data system immediately deactivated when they are no longer employed by the program or no longer need access to the database.

**Compliance 8.2. Privacy.** Staff discuss personal matters with participants/clients in privacy.

**Compliance 8.3. Maintenance of Participant/Client Information.**

- Only workers authorized to use program files have access to them.
- Paper files are kept secure.
- All computer equipment is secure and protected from theft, damage, misuse or tampering.

**Compliance 8.4. Requests for identifying information.**

- The program refuses requests from outside organizations or persons for names or other identifying information about service receivers, such as addresses and phone numbers, unless such request is authorized by NYC Aging.

**Compliance 8.5. Public Information Activities.**

- Materials such as reports, press releases, videotapes, etc. produced by the program for public dissemination do not contain personally identifying information on any participant without his/her written consent.

## Section 3. Language Access and Cultural Competency

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### Standard 9: Language and Cultural Competency

**Compliance 9.1. The program is linguistically and culturally competent.**

- The program has a language access plan that includes these provisions:

- The program will provide on-demand language assistance free of charge to persons with limited English proficiency (LEP). At minimum, the program will have a telephonic interpretation service contract or similar community arrangement with a language interpretation services provider to assist LEP individuals.
- The program will inform persons with limited English proficiency of the availability of free language assistance at its location. The notice will be in writing designed to be understood by LEP individuals.
- The program will train staff that have contact with the public in the timely and appropriate use of these and other language services.
- The program includes information on its website in the languages of the communities it serves, in addition to English.
- The program has visible signage about the availability of free interpretation services.
- Vital documents are translated into the non-English language of regularly encountered LEP groups eligible to be served or likely to be affected by the program or activity. Examples of vital documents include applications, consent, and complaint forms; notices of rights, and notices advising LEP persons of the availability of free language assistance.

**Compliance 9.2. The program is culturally competent.**

- All service activities reflect (1) understanding of the needs, characteristics, cultural expectations and preferences of different ethnic groups residing in the community; (2) sensitivity and responsiveness to issues relating to culture, religion, socioeconomic status, gender identity, sexual orientation and immigrant adjustment; (3) sensitivity to cultural barriers impeding service utilization, including but not limited to language barriers; and (4) knowledge of linguistically and culturally competent service providers in the community and City, and ability to refer individuals to these providers when needed.
- All services are provided with respect for cultural differences, preferences and styles of communication, and with skill in assisting individuals in overcoming cultural and linguistic barriers.
- As appropriate to the type of services provided, cultural preferences are respected – e.g., through foods served, holiday celebrations, social activities and program communications.

## **Section 4. Administration**

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### **Standard 10: Hours of Operation**

**The program is open and services are provided during budgeted hours of operation.**

**Compliance 10.1.** The program is open the number of days budgeted (at least 249 days for Older Adult Centers).

**Compliance 10.2.** The program provides services during its contracted business hours of operation .

**Compliance 10.3.** The program's director or her/his appropriate delegate is present at the program during hours of operation (e.g., 8:00a.m to 4:00pm, or 9:00am to 5:00pm).

**Compliance 10.4.** The program responds to telephone calls during business hours in a timely manner.

- Calls are answered in person or by voicemail during hours of operation. After hours and during weather emergencies and unexpected closings, a recorded message informs callers that the program is closed and states the hours of operation.

**Compliance 10.5.** If the program needs to close due to an emergency or as mandated by State or City authorities, such as DOHMH or NYPD, the program notifies NYC Aging immediately and follows approved emergency procedures.

**Compliance 10.6.** The program has at least one dedicated phone line during its hours of operation.

## Standard 11: Respect for Clients

The program respects the rights of participants/clients.

**Compliance 11.1. Respect for clients.**

- The program respects the dignity of older persons, their right to receive reliable, safe, quality services, and their rights to courtesy, consideration and recognition of their needs and preferences.
- Older Adult Center programs post a NYC Aging-issued Participant Bill of Rights in a public place that is clearly visible to participants, their families and program staff.

## Standard 12. Complaints and Grievance Procedures

**Compliance 12.1. Complaints.** The program has a written policy and procedure that covers responses to the following categories of complaints:

- Complaints about service denial (for NYC Aging-funded homecare, see Case Management standards).
- Complaints about satisfaction issues (e.g., program services or staff).
- Complaints about other clients/participants.

**Compliance 12.2. Grievances.** The program informs participants about its grievance procedure.

- A summary of the grievance procedures, including a statement that assistance to file shall be provided to older adults who are unable to or have difficulty doing to, is prominently posted at the service delivery site. The summary is written in each language other than English spoken by more than 30% of participants.
- In-home services clients are informed of the grievance procedures through written and verbal statements provided to them upon assessment and/reassessment for services.
- The grievance procedure is written in each of the languages spoken by more than 30% of participants and at least in 14 pt. font and is provided to clients in any other language requested.
- The grievance procedure is posted in a visible location.
- At a minimum, the written grievance procedure states the name(s) and title(s), where applicable, of an impartial third party with authority to make a binding decision on the grievance. If grievances are handled by a group or committee, the procedure states the composition of the group/committee. It also states the complainant's rights to:
  - Present his/her grievance privately.
  - Have his/her grievance addressed within a timeframe that is stated.



- Appeal to the Board of Directors of the program's sponsor (procedure specifies name/title of person to whom the appeal should be addressed) or file a Request for a Hearing if the grievance is against a case management or homecare agency (see Service Specific Standards).
- Appeal the Board of Directors' decision to NYC Aging.
- Have all information and documentation relating to a grievance treated as a confidential matter unless disclosure is required by a court order or for program monitoring by an authorized agency.

**Compliance 12.3. Denial of Service.** The program gives any applicant or participant who is denied service a reason for the denial.

- For housekeeping, homemaker, home delivered meals, case management, and other services for which written applications are made, the denial shall be confirmed in writing and the applicant informed of the right to file a grievance and of the individual to whom the grievance shall be addressed.
- For congregate meals, transportation, recreation, and other services which are applied for by telephone or verbally in person, the client may be told of the right to file a grievance verbally.

**Compliance 12.4. Documentation of Grievances.** The program maintains complete and dated record of all grievances on file for six years. This includes at minimum: the initial grievance; any investigative reports; any written response submitted; any documents or other records submitted by any party; the Initial Response of the program; and if applicable, the notice to the participant of the right to appeal.

## **Standard 13: Feedback**

**The program offers participants/clients opportunities to comment on satisfaction and suggest service improvements.**

**Compliance 13.1.** The program provides opportunities for regular input from participants/clients on satisfaction and service issues and can demonstrate that feedback is considered.

**Compliance 13.2.** At least annually, the program conducts a survey to evaluate client experience and satisfaction.

**Compliance 13.3.** The program maintains record of participant feedback for at least six years and makes these records available to NYC Aging for inspection upon request.

## **Standard 14: Contributions**

**The program offers participants/clients opportunities to contribute to service cost.**

**Compliance 14.1. Contribution guidelines.**

- The program informs participants/clients of the following, via a posted sign where possible, and in writing when persons are not served on site:
  - Individuals are encouraged to contribute to the cost of the program. Contributions are used to help support the program.
  - Persons with incomes at or above 185% of the poverty line are encouraged to contribute at a level based on the actual cost of the service.
  - Contributions are voluntary and confidential.
  - No person will be denied service because s/he does not contribute.
  - Procedure for making a contribution.

**Compliance 14.2. Service specific contribution guidelines.**

- See Service specific standards for procedures for collecting, safeguarding, and accounting for contributions.

## **Standard 15: Welcoming Environment**

**The program is helpful, welcoming and respectful to inquirers and participants/clients.**

**Compliance 15.1.** Phones are answered in a timely, helpful and courteous manner.

**Compliance 15.2.** The premises of programs that provide services on site are comfortable and cheerful to the extent possible within program resources.

**Compliance 15.3.** Participants and clients are welcomed, provided with accurate program information and, where services are provided on site, helped to feel “at home.”

**Compliance 15.4.** The program’s director and staff are accessible and available to participants/clients.

**Compliance 15.5.** Participants/clients receive information about changes in program policies and operations that affect their wellbeing in a timely manner.

## **Standard 16: Autonomy, Independence, and Civic Engagement**

**The program promotes participant/client autonomy, independence, decision-making and social/civic engagement to the extent possible.**

**Compliance 16.1.** Wherever possible, the program offers service options and choices to participants/clients and respects individual preferences. Also see service-specific standards.

## **Standard 17: Promotional Activities (Public Information and Outreach)**

**Where appropriate to the services it provides, the program conducts activities to promote its services.**

**Compliance 17.1. Promotion of services.**

- At least twice yearly, the program promotes its services to the general public and/or underserved populations in its service area through promotional activities, unless services are over-utilized. Where services are under-utilized, promotional activities occur more often. Promotional activities include:
  - **Public Information:** examples of public information include but are not limited to: obtaining media coverage for the program’s services; stationing a representative at a Resource Fair in the community; distributing flyers or other promotional materials to various places in the community such as local street fairs, retail shops, pharmacies, residences; organizing a mass mailing of information; holding an event that brings currently unserved older adults to its site.
  - **Outreach:** This includes face-to-face or telephone contact between a staff person and an individual. Outreach is when the program finds an isolated older person, not when an older person finds the program. Examples include: (1) Staff visits to a new senior housing building to locate isolated individuals who have never been clients of the program (this contact must be conducted one-on-one and not done as a group presentation). (2) The program has a table at a health event where staff conduct face-to-face identification of isolated individuals by discussing the individual’s needs and available services one-on-one.

**Compliance 17.2.** The program utilizes multi-media methods and materials and traditional outreach and public information efforts to ensure that the community is aware of the program and its services/opportunities.

**Compliance 17.3.** The program has a digital presence (i.e., a website), however minimal, to ensure that older adults can avail themselves of services on which they often depend. Information presented on the website should be accurate, up to date, and include the address and contact information for the provider in question.

**Compliance 17.4.** The program's website be accessible (with a minimum of Web Content Accessibility Guidelines (WCAG AA) compliance) and optimized for use on a mobile device or tablet. (WCAG 2 Level AA Compliance: <https://www1.nyc.gov/site/mopd/about/reportspublications>.)

**Compliance 17.5.** The program's public information and outreach materials include the availability of free language assistance for persons with limited English proficiency.

**Compliance 17.6.** The program can demonstrate that it regularly seeks support for its services and activities from other organizations or institutions in the community.

**Compliance 17.7.** The program implements practices that increase outreach to older adults with Limited English proficiency residing within its service area.

## **Standard 18: Linkages**

**The program works with other community service providers and organizations to foster co-ordination, minimize service duplication and promote access to services.**

**Compliance 18.1. The program maintains effective linkages.**

- As appropriate to the services it provides, the program maintains effective linkages with other NYC Aging - funded programs in the community as well as with resources such as settlement houses and other multi-purpose service organizations, houses of worship, ethnic and social clubs, educational institutions, cultural programs, food stores, food pantries, banks and pharmacies.

## **Standard 19: Effective Administration**

**The program's policies and procedures promote effective administration.**

**Compliance 19.1. City, state, and federal regulations/contract requirements.**

- The program's policies and procedures address applicable city, state and federal regulations as required by contract. These include but are not limited to:
  - Prohibition of the use of funds to advance any sectarian or partisan effort.
  - Prohibition of any sectarian, partisan or religious services, counseling, proselytizing, instruction.
  - Prohibition of partisan political activity at the program site or where clients receive program services. If the program permits any legally qualified candidate for any public office (including the current office holder) to visit the facility or to visit clients for political purposes (e.g., to make a speech, provide a photo or TV opportunity, etc.), other candidates for the same office are allowed to visit for the same purpose, amount of time, number of appearances, time of day, etc. (The program is not obligated to inform other candidates, but only to respond to requests).
  - Attendance by older adult at any event involving the appearance of public officials is voluntary.
  - Contributions for political purposes may not be collected.
  - Prohibition of illegal gambling.

**Compliance 19.2. Personnel Policies.**

- Written personnel policies cover these areas at minimum (note: where there are NYC Aging standards in these areas, policies are consistent with standards):
  - Prohibition of Nepotism and Conflict of Interest
  - Non-discrimination/non-harassment
  - Confidentiality protection
  - Background checks/references
  - Drug-free/Alcohol-free workplace
  - Employment classification (exempt/non-exempt, part-time, full-time, temporary)
  - Leave policies (vacation, sickness, FMLA)
  - Jury Duty
  - Military Service Leave
  - Employee Grievance Procedure
  - Employee Benefits
  - Compensatory Policy for Executive Director
  - Whistleblower Policy
  - Employee Termination
  - Disciplinary Actions and Dismissals: Documentation regarding discipline/dismissal of NYC Aging -funded employees is maintained and made available to NYC Aging upon request.
  - Any employee involved in theft or inflicting bodily harm on another is suspended immediately without pay pending further investigation of the charges.

**Compliance 19.3. Other policies.**

- Record retention and disposal
- Social Media
- Incident/Accident Protocols (on and off-site):
  - See Standard 20.

**Standard 20: Prohibitions on the Usage of Public Funds**

**The program does not use public funds to support, endorse or promote commercial products or services.**

**Compliance 20.1.** The program observes these prohibitions:

- Verbal or written endorsement of products or services is not allowed.
- Acceptance of money or other incentives from vendors aimed at encouraging enrollment of older adults in a service or purchase of a product is not allowed.
- Sales of commercial products or services are not allowed:
  - Mailing or calling lists that contain participant/client names, addresses, telephone numbers, etc. are not given out under any circumstances.
  - Individual vendors may not peddle products or conduct sales. Vendors may give instructional and educational talks on specific topics of concern to older persons – e.g., availability and use of home health equipment, medical equipment, etc. The presentations must be educational, not commercial, and the program must allow other similar vendors the same access if requested.

## Standard 21: Due Recognition

The program gives due recognition to government funding sources.

**Compliance 21.1.** The program gives due recognition to NYC Aging and its state and federal funding sources (as applicable) for aging services in printed program brochures, printed stationery, and other public information materials.

**Compliance 21.2.** Unless inconsistent with applicable laws and lease and license requirements, the program has an identifying sign at its point of entrance, including sponsorship by the Department, program name and days and hours of operation.

## Section 5. Staffing

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### Standard 22: Staffing Levels

The program's staffing corresponds to levels specified in its contract proposal. *(See also service specific standards.)*

**Compliance 22.1.** The program's staffing corresponds to the levels proposed to NYC Aging in its response to NYC Aging's RFP, or as later approved by NYC Aging.

**Compliance 22.2.** Key positions are filled within three months, or the program can document strenuous efforts to fill important vacancies.

**Compliance 22.3.** The program notifies NYC Aging within two (2) weeks when there is a permanent change in staffing.

- A permanent staffing change is defined as a significant change in leadership or staffing pattern, such as the retirement of a director, significant number of staff turnover, or reduction/addition of budgeting lines.

### Standard 23: Staff Understanding of Responsibility

The program ensures that staff understand their job responsibilities, program purpose and mission and NYC Aging requirements as applicable to their functions.

**Compliance 23.1.** There are current job descriptions for each position, including title, minimum qualifications, and duties.

**Compliance 23.2.** The program maintains documentation that new staff have read and understood their job descriptions.

**Compliance 23.3.** Staff function in the position for which they were hired, and in accordance with their job descriptions and program personnel policies.

**Compliance 23.4.** The program provides staff with information needed for job performance in a timely and effective fashion, including but not limited to:

- The program's most recent contract proposal to NYC Aging.
- NYC Aging's program standards and applicable service standards.
- Changes to policies and procedures.
- Operational issues, problems, and concerns as relevant to effective job performance.

## Standard 24. Orientation, Training, and Supervision

The program ensures that staff and volunteers are appropriately oriented, trained and supervised.

**Compliance 24.1.** The program provides and documents its orientation of new staff.

- Orientation covers the following at minimum (see also service specific standards):
  - Program personnel policies.
  - Job functions and tasks.
  - Program policies and procedures.
  - Relevant NYC Aging standards.
  - Participant and client rights (including rights to consideration, privacy, dignity, and respect).
  - Emergency procedures.

**Compliance 24.2.** Appropriate staff attend mandated NYC Aging trainings.

**Compliance 24.3.** A designated staff person supervises volunteers.

## Section 6. Procedures and Methods

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### Standard 25. Data Collection

The program uses NYC Aging client data system to register all participants/clients and to document service provision. Please see NYC Aging's Senior Tracking, Analysis and Reporting System (STARS) Program Administrators' Guide (included in this document and in STARS under Support) and the STARS User Manual (in STARS under Support).

**Compliance 25.1. Registration Data.**

- The program collects the following information at registration: name; address; phone number(s); emergency contact; physician; major chronic condition(s); birth date; proof of age or signed declaration of age; , and for referral and reporting purposes, income and ethnic status. *Note: Services cannot be denied if this information is not provided.*
- The program collects any additional program specific required registration information (e.g., by programs conducting and intake and/or assessment).

**Compliance 25.2.** The program reviews the participant/client's profile in the client data system with the individual on a quarterly basis, and updates as necessary, unless a more frequent review is specified.

**Compliance 25.3.** The program updates participant data in the client data system annually in line with specific requirements put forth by NYC Aging. Program uses the Annual Client Update form to update client information annually.

**Compliance 25.4.** The program records service provision to the participant/client in NYC Aging's client data system.

**Compliance 25.5.** The program inactivates/closes the participant/client's file in NYC Aging's client data base when the individual will no longer be receiving services from the program.

- See service specific standards for exceptions.

**Compliance 25.6. Voter Registration.** The program completes the Voter Registration information in the client's profile in NYC Aging's client data system.

## **Standard 26. Emergency Contact Information**

The program requests emergency contact information from every participant/client.

**Compliance 26.1.** The program has a current record of emergency contacts for participants/clients, including name, address, telephone numbers and locations where contacts can be reached.

## **Standard 27. Emergency Procedures**

The program has comprehensive accident and emergency procedures covering on-site and/or off-site services, as applicable.

### **Compliance 27.1. Fire/Other Evacuation Emergency Procedures.**

- When services are provided on-site, the program has a written evacuation plan that has been developed in consultation with the local Fire Station for situations requiring building evacuation. The plan includes:
  - The location of fire extinguishers;
  - The primary fire exits and alternative exits;
  - The order in which groups should leave the building;
  - Persons responsible for leading groups;
  - Persons responsible for checking premises, including bathrooms; and,
  - The destination of each group once outside.
  
- The written plan and diagram are posted in each room, office, and public bulletin board.
  
- The program holds two evacuation (fire) drills annually and documents the date and time of each drill, who participated in the drill (to ensure that assigned staff manned the assigned exits and led group out as indicated in the written evacuation plan), the time needed to evacuate the building and any problems encountered.
  
- Each staff person and volunteer is trained on evacuation emergency procedures and knows his or her responsibility in the event of an emergency, including whom to notify.
  
- Staff is trained annually on the use of extinguishers, and training is documented.

### **Compliance 27.2. Accident/Medical Emergencies.**

- The program has a written plan that specifies staff responsibilities in dealing with accidents or medical emergencies. The plan includes what to do for the victim, what to do for other participants who witness the emergency, who to notify, and insurance or other forms that must be completed.
  
- The program has the telephone number of all local emergency agencies including the local police precinct.
  
- When services are provided at the program facility, at least one staff person has current certification on CPR and how to use a defibrillator machine.
  
- If 911 has been called, a staff person:
  - stays with the participant until 911 is on the scene; and
  - informs the program director, who gets in touch with the participant's emergency contact.

### **Compliance 27.3. Emergencies on Group Trips.**

- The program has a written plan to deal with emergencies that occur on trips, such as accidents, medical emergencies, or the disappearance of a participant from the group.

- The written plan specifies what to do for the ill or injured individual; what to do for the rest of the group; criteria for ending the trip; who to notify, and what forms to complete.
- A staff person or volunteer of the organization that has organized the trip accompanies each trip as the designated “leader,” knows the exact population count, and has been trained on emergency procedures.
- Before each group trip the designated leader does a headcount and checks that participants carry identification with them, and that they have the telephone number of the center.
- Group trip participants are told that they must notify the group leader if they intend to leave the group for any reason.
- If a participant is “lost” from the group, and her/his whereabouts cannot be ascertained, the incident is immediately reported to the program, to NYC Aging and to the police.

**Compliance 27.4. Program Accident and Incident Recording and Reporting.**

- The program uses NYC Aging’s Incident Report Form.
- The program creates and maintains an accident/incident report on file for all accidents and incidents that involve or affect client safety, services continuity, and program integrity. Examples include: accidents or other participant/client emergencies; incidents of physical violence; facility emergencies such as flooding or fires; burglaries or forced entry; thefts; vandalism, etc.
- Accident and incident report elements comply with NYC Aging instructions.
- Accidents and incidents are reported appropriately and timely to insurance companies and other regulatory bodies.
- Accidents or incidents involving serious injury or death of a participant are reported immediately to NYC Aging and to appropriate authorities.
- The program provides requested information (including phone numbers, data, reports, etc.) to NYC Aging related to an ongoing emergency situation preferably by the Close of Business, but no later than 10:00 a.m. EST the following morning.

**Standard 28. Emergency Preparedness and Response**

**The program has an emergency preparedness and response plan to address local, regional and citywide emergencies.**

**Compliance 28.1.** As required by NYC Aging, the program has a current emergency preparedness and response plan for local, regional, and citywide emergencies.

**Compliance 28.2.** During any year in which the plan requires activation, the program’s response is timely and in accordance with its plan and other NYC Aging and City requirements.

**Compliance 28.3.** The program arranges at least one emergency preparedness seminar annually.

**Compliance 28.4.** In the event of a public health emergency, the program adheres to any additional guidance issued by NYC Aging.



## Section 7. Target Population

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### Standard 29. Target Population

The program serves its target population and service areas.

**Compliance 29.1.** The program serves all communities and community districts within its service area.

**Compliance 29.2.** The program can demonstrate that it reaches out to the diverse linguistic, cultural and socioeconomic older adult groups within its service area and older adults across the age spectrum.

**Compliance 29.3.** The program can demonstrate that it reaches out to unserved and underserved older populations, including those in greatest economic and social need, particularly older persons in these categories: low income; low income minority; Limited English Proficiency (LEP); frail and/or with disabilities.

## Section 8. Physical Environment and Equipment

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### Standard 30. Safety

The program facility is safe.

**Compliance 30.1.** The program operates in a code compliant environment.

- Equipment is code compliant:
  - Inspections of fire alarm systems occur regularly (record is maintained and current), carbon monoxide detectors are maintained as required by code, including LL 10/2014 and, if required, there is a current holder of the required Certificate of Fitness.
  - If required by code, boilers are inspected, and reports filed annually with the Department of Buildings.
  - Central Air Conditioning systems have been filed with the Department of Buildings and have all required OTCR approvals, including energy code compliance.
  - Filters for central air conditioner and window/wall units are replaced or cleaned on a regular basis.
  - Central air conditioning systems are regularly serviced and maintained.
  - Range hood exhaust and ANSUL systems are periodically inspected as per the NYC Fire Code.
- Code Violations. All code violations cited by the NYC Building, Fire, Health or Sanitation Departments are addressed and corrected on a timely basis as required by the Department issuing the citation. Certificates of Correction for each violation are filed in a timely manner.
  - Upon receiving a citation for a violation, the program notifies NYC Aging immediately and forwards a copy of the citation.

**Compliance 30.2. Certificate of Occupancy.**

- The site has a Certificate of Occupancy (C of O) issued by the New York City Building Department (The C of O certifies that the building is suitable for occupancy for the purpose for which it is being used).

*Exception: Buildings erected before 1938, with no change in occupancy or use. However, if the building has been substantially altered, a C of O is required.*

- Program operations do not exceed or contradict the Certificate of Occupancy at any time.

**Compliance 30.3. Place of Assembly Permit.**

- Each room large enough to be occupied by 75 or more persons has a current Place of Assembly Certificate of Operation issued by the NYC Building Department and a current Place of Assembly Permit issued by the Fire Department.

*Exception: Buildings erected before 1938 with no change in occupancy or use.*

- The current Permit, maximum occupancy sign and approved floor plan are publicly posted.

**Compliance 30.4. Exits and Exit Lights.**

- The site has two exits.
- Exit doors:
  - Have working exit lights to identify their location.
  - Are clearly identified as exits.
  - Open in the direction of exit travel. If premises are occupied by 75 or more persons, one exit leads directly outside while the second may lead to a rated corridor.
  - Are unobstructed at all times and may be easily opened when building is in use.
  - Do not require a key from the exiting side.

**Compliance 30.5. Emergency Lighting.** Rooms occupied by 75 or more persons have emergency lighting as specified in building code.

**Compliance 30.6. Fire Preparedness.**

- Programs that are not required to obtain a Place of Assembly Permit each year request an annual fire inspection through the local Firehouse.
- Programs that have elevators maintain inspections as required by the Department of Buildings.
- Programs that have elevators place signs at each landing that show the location of the stairs in a diagram and instruct occupants to use the stairs in case of fire.
- Premises are equipped with smoke detectors as required by code.
- Premises are equipped with fire extinguishers as required by the Fire Department. Specifications of the type, number, placement and maintenance are obtained from the Bureau of Fire Prevention.
- Extinguishers are tagged with the date of the last maintenance inspection.
- Extinguishers are of approved type.
- Extinguishers are inspected annually.
- Decorations, drapes, curtains, scenery used in play production, etc. are certified flame proofed and flame-proof certification is kept up to date.
- Tables and seating in Place of Assembly permitted spaces are situated in accordance with the approved PA plan. Tables in the dining room provide clear aisles to the exits.
- Smoking is not permitted. “No Smoking” signs are posted in appropriately places.

**Compliance 30.7. Emergency first aid.**

- First Aid Kits are visible and accessible to staff.
- Contents are replenished after use or when passed their expiration dates.

**Compliance 30.8. Pest and Rodent Control.**

- There are no roaches or other pests or rodents in any program room, or in the kitchen, dining room, or bathroom.
- Infestation control is scheduled at a time that does not interfere with or disrupt programming.

**Compliance 30.9. Avoidance of safety hazards.**

- Stairs and passageways are well lit.

- Stairs, treads, and landings are built with/made of non-skid material. This is not limited to rubberized treads and could simply be sanded paint or concrete. Some programs are operating in buildings that were built before the 1968 building code, therefore, current stair conditions in those premises are grandfathered in, and should not be considered out of compliance.
- Hallways and areas leading to exits are free of obstructions and debris.
- Electric wires are covered.
- Window glass has no serious breaks or cracks.
- Flooring is safe, no broken, cracked, chipped loose tiles or planks.
- Ceilings are safe, no extensive breaks, cracks, peeling or chipping in tiles, paint or plaster.
- Toxic substances are stored in a locked area not accessible to participants.
- The site is litter free.

## **Standard 31. Cleanliness**

**The program facility is clean and well-maintained.**

### **Compliance 31.1. Program rooms and grounds.**

- All program rooms and grounds are clean and safe.
- All program rooms (including ceilings) and grounds are well-maintained.
- Paint and plaster are maintained in good condition (no serious breaks, peeling or cracks).

### **Compliance 31.2. Bathrooms.**

- Cleanliness is maintained.
- Ventilation is adequate.
- Operable windows are screened.
- Adequate handwashing facilities are provided and maintained in or adjacent to toilet rooms.
- Each handwashing facility is to be provided with hot and cold potable running water.
- Each handwashing facility is to be provided with hand-cleaning soap or detergent with a sanitary storage receptacle. Individual single-service towels, warm air blowers or clean individual sections of continuous cloth are to be provided. Conveniently located waste receptacles are to be provided if disposable towels are used.
- Handwashing facilities, soap or detergent receptacles, handwashing devices and related facilities are kept clean and in good repair. Handwashing signs are posted at all handwashing facilities.
- Toilets, urinals, sinks and any mechanical hand dryers are in working condition.

## **Section 9. Recordkeeping and Monitoring**

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### **Standard 32. Records Maintenance**

**The program maintains all records in good order.**

#### **Compliance 32.1. Records are:**

- Easily accessible;
- Clear;
- Legible;
- Well-organized; and
- Up to date.

## Standard 33. Monitoring

**Records and other documents are available for monitoring.**

**Compliance 33.1.** The program makes records available to NYC Aging and NYSOFA, as requested. These include but are not limited to the following, as applicable:

- Documentation of any service denials and temporary exclusions, including actions taken and reasons.
- Complaint/grievance records
- Contributions Records
- Notices of Code Violations and copies of responses to issuing agencies
- Fire/Theft/Vandalism Documentation
- Accident/Incident Reports
- Fire and Emergency Drill Records
- Employee files containing:
  - Documentation of orientation
  - Signed Job Description
  - Job application and/or resume
  - Other records relating to hiring process, as applicable
  - See service specific standards for other requirements
- Participant/client files containing documents specified in service-specific standards.

## Standard 34: Recordkeeping

**The program maintains records in accordance with NYC Aging requirements.**

**Compliance 34.1.** See service-specific standards for specific documents/records that must be maintained.

**Compliance 34.2. Maintaining records.**

- The program maintains required records for seven years, unless otherwise specified in service-specific standards. If any litigation, claim, audit, negotiation, or other action involving the record has been started before the expiration of the seven-year period, the records are retained until completion of the action and resolution of all issues which arise from it, or for a seven-year period, whichever is longer.

**Compliance 34.3.** When required by NYC Aging, in accordance with required timeframes and content specifications, the program submits requested information, reports and documents.