# **Department for** the Aging **Senior Center** Standards of Operation and Scope of Services

Based on standards set by the New York City Department for the Aging and the New York State Office for the Aging.

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# **General Standards of Operation**

# Introduction

The following General Standards apply to all DFTA-funded programs, unless otherwise specified. DFTA's program standards provide service-specific guidelines applicable to programs that provide those services.

# Eligibility

# Standard 1: Eligibility and Equal Access Equal Access to All Eligible Persons

#### 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 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 servicespecific standards.
- The program complies with the Americans with Disabilities Act if seniors are served on site. If not at street level, the center has an exterior ramp and/or elevators from ground level. At least one bathroom used by participants is barrier free and easily accessible from all program areas.

# Standard 2: Language and Cultural Competency

#### Compliance 2.1. 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. 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.

#### Compliance 2.2. 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.

# Standard 3: Hours of Operation

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

Compliance 3.1. The program is open the number of days budgeted.

Compliance 3.2. The program provides services during its contracted hours of operation.

Compliance 3.3. The program's director or her/his appropriate delegate is present at the program during hours of operation.

#### Compliance 3.4. 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.

# Standard 4: Respect for Clients The program respects the rights of participants/clients.

#### Compliance 4.1. 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.
- Senior Center programs post a DFTA-issued Participant Bill of Rights in a public place that is clearly visible to participants, their families and program staff.

#### Compliance 4.2 Complaints/Grievances.

- The program has a written policy and procedure that covers responses to the following categories of complaint/grievance:
  - Complaints about service denial (for DFTA-funded homecare, see Case Management standards).
  - Complaints about satisfaction issues (e.g. program services or staff);
  - Complaints about other clients/participants.
- The program informs clients/participants about its complaint/grievance procedure.
- The grievance procedure is written in each of the languages spoken by more than 30% of participants and at least in 14 pt. font.
- At a minimum, the written complaint/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 complaint or grievance privately.
  - Have his/her complaint or 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 complaint/grievance is against a case management or homecare agency (see Service Specific Standards).
  - Appeal the Board of Directors' decision to DFTA.
  - Have all information and documentation relating to a complaint or grievance treated as a confidential matter unless disclosure is required by a court order or for program monitoring by an authorized agency.
- Complete and dated written or electronic records of all complaints/grievances and actions taken are maintained.

# Standard 5: Feedback

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

#### Compliance 5.1. The program provides opportunities for feedback.

- The program provides opportunities for regular input from participants/clients on satisfaction and service issues, and can demonstrate that feedback is considered.
- At least annually, the program conducts a survey to evaluate client experience and satisfaction.

# Standard 6: Contributions

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

#### Compliance 6.1. 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 6.2. Service specific contribution guidelines.

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

# Standard 7: Personal Information

The program protects participant/client personal information.

#### **Compliance 7.1. 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 DFTA'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 7.2. Privacy.

Staff discuss personal matters with participants/clients in privacy.

#### Compliance 7.3. Release of Information.

(Please note that NYSOFA is in the process of changing the policies around consent and release of information. DFTA will update all related issues in the Standards when new policies become available.)

- The program obtains the individual's signed Consent Form (DFTA Form or its own Release Form) before sharing information necessary for the client to receive services from another provider or to apply for benefits and entitlements. Note: The Release covers all instances of information exchange and does not need to be renewed.
- If Intake is conducted over the phone, the signed Consent is obtained at the first meeting of the client and a program representative face-to-face.
- If no direct contact between program staff and client is anticipated, the program reads the Consent Form to the client and obtains his/her verbal consent.
- The program notes that the client's consent was obtained in DFTA's client data system.

#### **Compliance 7.4. 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 7.5. 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 DFTA.

#### **Compliance 7.6. 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.

#### Standard 8: Respect for All

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

Compliance 8.1. Phones are answered in a timely, helpful and courteous manner.

Compliance 8.2. The premises of programs that provide services on site are comfortable and cheerful to the extent possible within program resources.

Compliance 8.3. Participants and clients are welcomed, provided with accurate program information and, where services are provided on site, helped to feel "at home."

Compliance 8.4. The program's director and staff are accessible and available to participants/clients.

Compliance 8.5. Participants/clients receive information about changes in program policies and operations that affect their wellbeing in a timely manner.

#### Standard 9: Autonomy, Independence, and Civic Engagement

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

Compliance 9.1. Wherever possible, the program offers service options and choices to participants/clients and respects individual preferences. *Also see service-specific standards.* 

#### Compliance 9.2. Applicable only to senior centers: Advisory Council.

- The center has a functioning participant Advisory Council. Note: Senior centers with a single-purpose Board of Directors are exempt from this requirement if at least 51% of Board members are center participants.
  - The Advisory Council has written by-laws.
  - Advisory Council members are center participants elected through regularly scheduled elections open to the entire membership. Advisory Council Officers (i.e., President, Treasurer etc.) may be elected by the Advisory Council membership rather than the senior center membership.
  - The Council has a publicized meeting schedule.

- The center director or her/his delegate attends meetings.
- There are clear channels of communication from the Advisory Council to center management and the sponsoring organization.

DFTA strongly recommends that prior to an Advisory Council election, the Senior Center holds an orientation for the senior center membership to discuss the election process and roles and responsibilities of Advisory Council members and officers, as a way to encourage participation in the process from seniors who have not previously participated.

DFTA strongly recommends that the Senior Center Sponsor and the Advisory Council jointly develop a written agreement detailing how Advisory Council fundraising accounts will operate (i.e., who has access, who signs the checks, what the money can be used for, how it is tracked, how often the Director provides the Advisory Council with a report on the account, etc.). DFTA does not have oversight over fundraising accounts because it is not public funding, but does recommend developing an agreement in order to avoid conflict.

# Standard 10: **Promotional Activities (Public Information and Outreach)** Where appropriate to the services it provides, the program conducts activities to promote its services.

#### Compliance 10.1. 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 occurs 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 seniors 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 10.2. Public information and outreach materials include the availability of free language assistance for persons with limited English proficiency.

Compliance 10.3. The program can demonstrate that it regularly seeks support for its services and activities from other organizations or institutions in the community.

#### **Standard 11: Linkages**

The program works with other community service providers and organizations to foster coordination, minimize service duplication and promote access to services.

Compliance 11.1. The program maintains effective linkages.

 As appropriate to the services it provides, the program maintains effective linkages with other DFTAfunded 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 12: Effective Administration**

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

#### Compliance 12.1. 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 seniors at any event involving the appearance of public officials is voluntary.
  - Contributions for political purposes may not be collected.
  - Prohibition of illegal gambling.

#### Compliance 12.2. Personnel Policies.

- Written personnel policies cover these areas at minimum (note: where there are DFTA 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 DFTAfunded employees is maintained and made available to DFTA 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 12.3. Other policies.

- Record retention and disposal
- Social Media

Incident/Accident Protocols (on and off-site):
 – See Standard 20.

# Standard 13: Prohibitions on the Usage of Public Funds

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

Compliance 13.1 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 seniors 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 14: Due Recognition**

The program gives due recognition to government funding sources.

Compliance 14.1. The program gives due recognition to DFTA and its state and federal funding sources (as applicable) for aging services in printed program brochures, printed stationery and other public information materials.

Compliance 14.2. 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.

# Staffing

# **Standard 15: Staffing Levels**

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

Compliance 15.1. The program's staffing corresponds to the levels proposed to DFTA in its response to DFTA's RFP, or as later approved by DFTA

Compliance 15.2. Key positions are filled within three months or the program can document strenuous efforts to fill important vacancies.

# Standard 16: Staff Understanding of Responsibility

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

Compliance 16.1. There are current job descriptions for each position, including title, minimum qualifications and duties.

Compliance 16.2. The program maintains documentation that new staff have read and understood their job descriptions.

Compliance 16.3. Staff function in the position for which they were hired, and in accordance with their job descriptions and program personnel policies.

Compliance 16.4. 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 DFTA.
- DFTA's program standards and applicable service standards.
- Changes to policies and procedures.
- Operational issues, problems, and concerns as relevant to effective job performance.

# Standard 17: Orientation, Training, and Supervision

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

#### Compliance 17.1. 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 DFTA standards;
  - Participant and client rights (including rights to consideration, privacy, dignity and respect);
  - Emergency procedures

#### Compliance 17.2. Appropriate staff attend mandated DFTA trainings.

#### Compliance 17.3. A designated staff person supervises volunteers.

# **Procedures and Methods**

#### **Standard 18: Data Collection**

**The program uses DFTA's client data system to register all participants/clients and to document service provision.** *Please see DFTA'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 18.1. 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, diet, and for referral and reporting purposes, income and ethnic status. *Note: Services cannot be denied if this information is not provided.* 

**Compliance 18.2.** The program reviews the participant/client's profile with the individual on an annual basis and updates as necessary, unless a more frequent review is specified for specific services.

**Compliance 18.3.** The program records service provision to the participant/client in DFTA's client data system.

**Compliance 18.4.** The program inactivates/closes the participant/client's file in DFTA's client data base when the individual will no longer be receiving services from the program.

• See Service specific standards for exceptions;

# **Standard 19: Emergency Contact Information**

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

**Compliance 19.1.** 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 20: Emergency Procedures**

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

#### Compliance 20.1. 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 is 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.

#### Compliance 20.2 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;
  - informs the program director, who gets in touch with the participant's emergency contact.

#### Compliance 20.3 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 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 head count 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 DFTA and to the police.

#### Compliance 20.4 Program Accident and Incident Recording and Reporting.

- The program uses DFTA's Incident Report Form.
- There is 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.
- Report elements comply with DFTA 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 DFTA and to appropriate authorities.

# **Standard 21: Emergency Preparedness**

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

Compliance 21.1. As required by DFTA, the program has a current emergency preparedness and response plan for local, regional and citywide emergencies.

Compliance 21.2. During any year in which the plan requires activation, the program's response is timely and in accordance with its plan and other DFTA and City requirements.

Compliance 21.3. The program arranges at least one emergency preparedness seminar annually.

# **Target Population**

# **Standard 22: Target Population**

The program serves its target population and service areas.

Compliance 22.1. The program serves all communities and community districts within its service area.

Compliance 22.2. The program can demonstrate that it reaches out to the diverse linguistic, cultural and socioeconomic older adult groups within its service area and seniors across the age spectrum.

Compliance 22.3. 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; frail and/or with disabilities.

# **Physical Environment and Equipment**

# Standard 23: Safety

#### The program facility is safe.

Compliance 23.1. 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 DFTA immediately and forwards a copy of the citation.

#### Compliance 23.2 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 I938, 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 23.3 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, or available on site for review upon request.

#### Compliance 23.4 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 23.6. Emergency Lighting.** Rooms occupied by 75 or more persons have emergency lighting as specified in building code.

#### Compliance 23.7. 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 23.8. Emergency first aid.

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

#### Compliance 23.9. Pest and Rodent Control.

- There is no roach infestation, or infestation by other pests or rodents, in any program room, or in the kitchen, dining room, or bathroom.
- Insect infestation control is scheduled when seniors are not present.

#### Compliance 23.10. 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 24: Cleanliness**

The program facility is clean and well-maintained.

#### Compliance 24.1. 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 is maintained in good condition (no serious breaks, peeling or cracks).

#### Compliance 24.2 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 running hot and cold or tempered potable 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 employee handwashing facilities.
- Toilets, urinals, sinks and any mechanical hand dryers are in working condition.

# **Recordkeeping and Monitoring**

# Standard 25: Records

The program maintains all records in good order.

- Records are:
  - Easily Accessible;
  - Clear;
  - Legible;
  - Well-organized;
  - Up-to-date.

# **Standard 26: Monitoring**

Records and other documents are available for monitoring.

Compliance 26.1. The program makes records available to DFTA 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 27: Recordkeeping

The program maintains records in accordance with DFTA requirements.

Compliance 27.1. See service-specific standards for specific documents/records that must be maintained.

#### Compliance 27.2. 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 27.3. When required by DFTA, in accordance with required timeframes and content specifications, the program submits requested information, reports and documents.

# **Case Assistance**

# Scope of Services and Standards of Operation

# Introduction

Case Assistance service assists older consumers to obtain appropriate services, benefits/entitlement and other resources to address an identified need(s). The service is delivered on an individual basis, and includes: assisting the senior in defining concerns, needs and capacities; providing direction or guidance relative to identified needs; and assisting with referrals and linkages to appropriate services and opportunities. Where a referral has been initiated, the service includes follow-up to determine whether the service/benefit has been, or is being, provided.

Case assistance addresses a specific issue(s) and usually results in a specific outcome – e.g. application for an entitlement; receipt of a service; linkage to a program; translation of a document. Case assistance is usually a short-term or time-limited service.

# **Services**

# Standard 1: Service Provision

#### The program provides comprehensive case assistance.

**Compliance 1.1 Assisted referral and/or linkages.** The program assists seniors who need referrals to appropriate resources in the community.

- When needed, the referral involves contact with the resource provider to ascertain that the client can be served and to facilitate the linkage – e.g. by making an appointment, arranging for the service, sending client information (with the client's consent), etc.
- Referrals are timely.
- After making an assisted referral to a resource (with client's consent), the program follows up within one month to determine outcome/status. Follow-up is monthly thereafter if outcome is pending.
  - Each follow-up contact is documented in the client's record.
  - Outcome of the referral is documented in the client's record.

Note: In instances where follow-up with the client is more appropriate, the program follows up with the client until an outcome can be documented.

#### Compliance 1.2 Benefits and Entitlements Assistance.

- Seniors with benefits/entitlements needs are assisted as needed through one or more of the following activities:
  - Screening to determine the person's eligibility for benefits and entitlements, using Access NYC, Benefits Check-up and/or other electronic programs where possible.
  - Counseling when the client is reluctant to apply;
  - Assistance filling out forms, completing paperwork and/or collecting documentation;
  - Submission of forms on the client's behalf.
  - Accompanying the client who cannot manage on her/his own to the office that administers the benefit or to other locations in connection with application.
  - Advocacy on behalf of the client if a benefit/entitlement has been denied.
  - Follow-up to ascertain whether the client is receiving/will receive the benefit.
  - Assisting the client in timely recertification for the benefit/entitlement.
- Innovative Senior Centers. In addition to the above, the ISC:
  - Makes a concerted effort to screen all new members for benefits/entitlements eligibility.
  - Offers periodic screening for benefits/entitlements assistance to all members.

**Compliance 1.3 Immigrant Assistance**. The program helps older immigrants adjust to new customs, systems and institutions, acquire benefits and entitlements, and develop support networks.

- The program provides assistance in the language of the immigrant requesting services, using interpretation services where necessary.
- Activities include but are not limited to: advocacy; assisted referral to immigrant assistance organizations and coordination to the extent necessary with other organizations providing assistance; translation of documents; linkages to culture-specific social service agencies; ESL linkages; interventions to address social isolation.

**Compliance 1.4 Supportive contact.** The program provides supportive contact to help individuals address problems of daily living, such as managing mail; making and remembering appointments; organizing daily activities; coping with specific personal or family problems.

- Support is provided only where there is an identified problem/need/issue.
- Assistance involves such activities as reassurance, clarification, advice giving, filling out papers or forms. Note: Referral for mental health counseling should be considered when the client's emotional or personal needs exceed the scope of this type of case assistance.
- Each interaction to provide supportive contact is documented in case notes, with an explanation of the issue(s) addressed.

**Compliance 1.5 Advocacy.** The program helps clients who require personal representation or other types of advocacy to obtain an entitlement or needed service which has been denied (or which is in jeopardy of being denied); to prevent or forestall an action against the client (e.g. eviction; service cut-off); to assist with housing problems; or to initiate a formal appeals process; etc.

# **Standard 2: Time-Limited Interventions**

The program provides the service to clients who have a specific need, problem and/or issue appropriate for short-term or time-limited interventions.

**Compliance 2.1** A determination is made during the initial client interview that the client has a specific need/problem/issue that can be addressed through specific activities of the worker over a period of time. *Note: Older New Yorkers with needs that the program cannot address are referred to a more appropriate provider, wherever possible.* 

# Standard 3: Intake

The program completes an Intake in DFTA's client data system on each case assistance client.

**Compliance 3.1 Intake.** An intake interview is conducted with each client found to be appropriate for case assistance to learn more about /her request and to complete the Intake in DFTA's client is data system.

# Standard 4: Consent

The program obtains the client's consent before releasing or requesting information about the client necessary for service provision.

**Compliance 4.1** The program obtains the client's written consent (if intake is conducted in person) or spoken consent (if intake is over the phone) to share information pertinent to service provision. The Consent covers all instances of information exchange and does not need to be renewed. *The program may use DFTA's standard form or a form of its own.* (Please note that NYSOFA is in the process of changing the policies around consent and

release of information. DFTA will update all related issues in the Standards when new policies become available.)

# Standard 5: Documentation

The program documents in case notes the appropriateness of the service provided to the client's needs/issues/concerns.

**Compliance 5.1** Case notes reflect complete and appropriate actions taken, client issues, and other pertinent matters.

• Entries include the date, name of person with whom there was contact, a brief summary of the reason for the contact, actions to be taken and who will be responsible for taking those actions.

Compliance 5.2 Case notes are written within four business days of the actions taken and/or worker/client contact.

#### **Standard 6: Resource Information**

The program maintains comprehensive and up-to-date resource information.

**Compliance 6.1** The program's information about eligibility and application requirements for benefits and entitlements needed by seniors is current and comprehensive. This may be in the form of paper resource files or electronic programs such as ACCESSNY and Benefits Check-UP.

**Compliance 6.2** The program's information about resources and services available in its service area is current and comprehensive. It includes but is not limited to information about: DFTA-funded programs and other community resources such as mental health programs; social security office; tax preparation assistance; continuing education programs for seniors; low or no-cost health maintenance facilities; local hospitals and clinics; houses of worship; fraternal organizations; sources of immigrant assistance; culture-specific societies; food pantries; sources of free transportation; free holiday meals.

**Compliance 6.3** The program's information on each resource includes the provider organization's name (including common name or acronym, if applicable), address, offices, telephone number, days and hours when open, eligibility requirements, fees and other crucial facts.

# Standard 7: Promotion of Case Assistance Services

The program promotes utilization of case assistance service.

**Compliance 7.1** The program's literature and other public materials include statements in each of the languages spoken by more than 30% of community residents that: (1) the program can assist with information about services, benefits and resources for older persons and with benefits/entitlements application and (2) the program can provide this assistance in the primary language of the senior requesting assistance.

- Program literature includes the service phone number if different from the program's main telephone number.
- See also General Program Standards, Standard 2: Language and Cultural Competency.

**Compliance 7.2** The program publicizes hours when the service is available if these are at specific times of the day. When case assistance is available only during certain hours, notice of available dates and times is visibly posted in the languages spoken by more than 30% of members.

# Level of Service

# Standard 8: Budgeted Units

The program provides its budgeted annual units.

Compliance 8.1 The number of units of service the program provides is within the variance allowed by DFTA.

# **Standard 9: Service Definitions**

The program uses the correct definition in documenting service provision.

**Compliance 9.1** The program reports units for each hour spent on direct client service (assistance to or on behalf of a client). The unit also includes:

- Collateral contacts on behalf of the client;
- Case review with supervisor. Note: Time spent by the supervisor and the worker discussing or reviewing the case together can only be claimed by the worker **or** the supervisor, not both. If both do separate follow-up on the case, each records her/his own time spent separately.
- Documenting client information.

Note: The unit does not include professional development such as training. Case assistance is a one-on-one service requested by the client; units of case assistance do not include the provision of public information. As per NYSOFA's definition, Public Information refers to **group informational activities** designed to inform clients or potential clients of available services and/or interventions initiated by the program for the purpose of identifying potential clients and encouraging their use of available services and benefits.

# Staffing

# **Standard 10: Staffing Levels and Qualifications**

The required level of staff are secured and staff have the required level of education and training to provide the service.

**Compliance 10.1 Innovative Senior Centers**. Unless otherwise authorized by DFTA, the program has a minimum ratio of one FTE social worker to each 100 participants based on average daily attendance. (Social worker may be staff, supervised student, or provided through linkages).

**Compliance 10.2** Each casework staff has a minimum of a BSW degree, or Associate degree or BA/BS degree plus two years MSW-supervised casework experience.

**Compliance 10.3** As appropriate to the tasks they perform, all casework staff (including students) demonstrate the following skills and knowledge:

- Cultural sensitivity/competence in recognizing and addressing the special needs and challenges of diverse
  populations in the program's service area, including different socio-economic, racial and ethnic older
  populations as well as population with different cultural preferences and lifestyles and new immigrant
  populations.
- Knowledge of types of entitlements/benefits for older people and eligibility and application requirements.
- Knowledge of local and citywide resources for older persons.

- Ability to accurately prepare entitlement applications and to assist clients in gathering documentation, completing applications.
- Interviewing skills.
- Ability to make appropriate referrals and follow-up in a timely manner.
- Ability to write clear, professional case notes.
- Ability to work with clients empathically and respectfully.

# **Standard 11: Training and Supervision**

#### Staff receive appropriate training and supervision.

(Also see General Program Standards.)

**Compliance 11.1** Each casework staff has a designated supervisor who reviews the worker's intakes, referrals, application assistance, follow-up, case notes and case closings with the worker on a regular schedule determined by the program.

# **Physical Environment and Privacy**

# Standard 12: Client Confidentiality and Privacy

The service is provided in an appropriate environment.

**Compliance 12.1** Client interviews are conducted in privacy in a location where client confidentiality can be maintained.

# **Target Populations**

# **Standard 13: Serving Older New Yorkers**

Within funding limits, the program provides case assistance to any resident age 60+ who seeks out these services.

**Compliance 13.1.** The program can demonstrate that it serves persons who live throughout its service area.

**Compliance 13.2** The program makes targeted efforts to reach the most vulnerable senior populations in its service area, including low-income and minority seniors, seniors with limited English proficiency and other under-served seniors.

# Recordkeeping

#### **Standard 14: Documentation of Clients and Services**

The program maintains required documentation of client and service information.

**Compliance 14.1** All worker activities related to each case assistance client (type of activity, intake, case notes, time spent, service termination, etc.) are entered into DFTA's client data system in the case assistance module.

 If worker activities cannot be entered into DFTA's client data system the program obtains DFTA approval to maintain paper documentation of client intake, worker hours and activities, case notes, client consent form, client termination (where applicable).

# **Congregate Meals Program**

Scope of Services and Standards of Operation

# Introduction

Congregate Meal Service is the provision of an appropriate meal that meets nutritional requirements to eligible participants in a group setting. There are two sections to these standards. The first section contains the programmatic scope and standards, and the second section contains standards related to nutrition, food preparation and safety, service and delivery.

All state and city requirements for food service and food service establishments apply to the provision of congregate meals, regardless of whether they are included in these standards.

# **Section 1: Programmatic Scope and Standards**

# Standard 1: Eligibility

The program provides congregate meal service to all eligible persons.

#### Compliance 1.1. The following persons are eligible for congregate meal service:

- Members, guests and staff who are 60 years of age or older.
- The spouse of an eligible individual regardless of age.
- Non-elderly physically or cognitively disabled individuals who live in the household with, and accompany, an
  age-eligible participant.
- Handicapped or disabled persons who reside in a primarily senior housing facility where the center is housed.

**Compliance 1.2**. The program serves ineligible persons (e.g. guests and staff under 60, volunteers and contributing food handlers) only if it is apparent that there is sufficient food for all eligible participants.

# Standard 2: Meal Service Participation and Access

The program gives priority to eligible guests and ensures sufficient opportunities for participation.

#### Compliance 2.1. Eligible participants are given priority for meals over all guests and staff under 60.

**Compliance 2.2.** The program holds more than one seating when there is insufficient table room for all participants (eligible persons who are registered with the program) who wish to attend meal service or when the number of persons attending meal service exceeds the number indicated on the Place of Assembly Permit.

**Compliance 2.3.** All participants attending the meal service are offered a complete meal before seconds are given.

Compliance 2.4. At least one table is handicapped-accessible.

**Compliance 2.5**. There are written procedures for the provision of appropriate food containers and utensils for the visually impaired and disabled.

**Compliance 2.6**. Participants are supplied with a list of alternate program sites and/or food pantries in the area when service is unavailable due to a program-related emergency.

# Standard 3: Level of Services and Reported Units

The program provides the number of meals specified in its budget and reports units accordingly.

#### Compliance 3.1. Contracted/Budgeted Meals

• The program provides the number of participant meals specified in the contract budget (DFTA may allow a variance).

#### Compliance 3.2. Reported participant meals meet these requirements:

- Only one meal per day is reported for each registered participant per meal service (e.g. breakfast, lunch, dinner).
- Participant meals do not include meals for staff below 60 years of age.
- Participant meals do not include meals for guests below 60 years of age.
- Participant meal counts do not include meals consumed by contributing food handlers (see the third bullet under Compliance 7.1).
- Participant meal counts do not include meals sold to non-DFTA agencies, or meals for which the program is reimbursed (e.g. social adult day programs).

**Compliance 3.3.** The number of reported units for each type of meal served (anonymous (eligible guests), participants, guests and staff under 60, contributing food handlers) is documented in DFTA's client data system and supported by the following paper documentation:

- Daily Meal Attendance Records correctly totaled in each category of meals served.
- Monthly Summary of Meals and Contributions with amounts (1) accurately transferred from Daily Meal Attendance Records; and (2) correctly totaled with amounts matching the number of meals reported for the month in each category.

# **Programmatic Procedures and Methods**

# Standard 4: Participant Registration

#### Meal participants are registered in DFTA's client data system.

**Compliance 4.1** Eligible persons who regularly participate in meals are registered. Until they are registered, eligible persons who have meals are registered as "anonymous."

- The program has a written policy regarding how long seniors can have "guest" status without registering.
- Unregistered seniors provide at minimum the name and telephone number of an emergency contact.

# Standard 5: On-Site Meal Consumption

Participants eat their meals in the congregate setting.

**Compliance 5.1** Participants eat their meals on-site (or with other participants on trips) unless approved for takehome meals in accordance with program policy.

**Compliance 5.2** Home attendants, home care workers or other persons acting on behalf of the participant are not allowed to regularly pick up meals for participants unless participant has written approval for take-home meals.

# Standard 6: Prohibition of Take-Home Meals

The program has a written policy allowing or prohibiting take-home meals for later use.

**Compliance 6.1** The program's written policy addresses:

- allowance/disallowance of participants' take-home of part of their meal (e.g. bread, desert, milk) for later use;
- provision of whole meals for at-home consumption on weekends or during emergencies; and,
- provision of program-approved temporary meal take-home.

**Compliance 6.2** If the program permits temporary meal take-home, its policy stipulates:

- With the written approval of the staff person overseeing meal service, meals may be sent home (or picked up) on a one-time basis for participants who are ill, have medical appointments or other urgent business during meal service.
- With the approval of the director or meal service supervisor, take-home meals may be sent home (or picked up) for participants under the following circumstances:
  - The participant has an acceptable reason (e.g. illness or other health reason).
  - Approval is given in writing for the specified period.
  - Approval and time frame are documented in the participant's record.
  - Four weeks after the date of approval, the program contacts any participant who has had meals picked up/sent home to determine whether: (1) participant should be referred to a case management program for an in-home assessment or (2) an extension of timeframe is necessary, or (3) meal take home is no longer necessary.
- Note: All actions related to this approval are documented in the client file. Activities may be reported as case assistance activities.

**Compliance 6.2** The program has approval from DFTA if it regularly provides meals for seniors to take home (e.g. weekend meals).

**Compliance 6.3** The program follows all DFTA food safety and Nutrition standards in provision of take-home meals.

**Compliance 6.4** If the program permits temporary meal pick-up it posts a sign stating its policy.

## Standard 7: Documentation of Meal Services

The program uses approved procedures for "signing in" persons who receive meals.

**Compliance 7.1.** The program follows procedures for documenting meal service in DFTA's client data system.

**Compliance 7.2.** The program follows these procedures for paper documentation of meal service:

- A trained staff member or volunteer monitors sign-in.
- Each meal recipient signs on the appropriate section of the Daily Attendance/Income Record.
- Any participant unable to sign signs with an X and the attendance monitor fills in their name and initials the entry.
- If a person other than the attendance monitor signs for a participant (including temporary meal pick-up), the attendance monitor initials the entry.
- Each participant signs in only once regardless of the amount of food that the participant receives.
- The DFTA Daily Attendance/Income Record is completed daily, with two signatures.
- The Daily Attendance/Income Records clearly distinguishes categories of recipients.
- On a daily basis, each category of meal is totaled accurately and accurately transferred to DFTA's client data system (may also be recorded on a Monthly Meals/Income Summary at program discretion).

## **Contributions and Payments**

(See General Program Standards for information on the voluntary nature of contributions and their use.)

## Standard 8: Contributions and Payment for Meals

The program follows DFTA's requirements for requesting contributions toward meal costs or full payment of meal costs. (Also see General Standards, Standard 6.)

#### Compliance 8.1 Contribution requests and written policy.

- The program requests a contribution toward the cost of the meal from eligible persons who receive a meal (registered participants and guests 60 years of age and older).
- The program has a written policy concerning the provision of meals on a contribution or meal cost basis to food handlers under the age of 60.
- At its discretion the program may designate that food handlers have:
  - contribution status (because they are over 60 years of age); or,
  - must pay the full cost of raw food and disposable, or the caterer's charge.
- The program requests the full cost of raw food and disposables or the caterer's charge per meal from:
  - Staff less than 60 years of age unless they are food handlers who have "contribution" status, per program policy.
  - Volunteers less than 60 years of age unless they are food handler who have "contribution" status, per program policy.
  - Guests less than 60 years of age.
  - Home attendants under 60 years of age who accompany participants to meal service.

#### Compliance 8.2 Securing contributions.

• Contributions are safely stored until deposited in the bank.

## **Standard 9: Collection and Documentation**

## The program has appropriate procedures for collecting and documenting contributions and full cost payments.

#### Compliance 9.1 Collection of contributions from participants.

- Participants have privacy regarding their contributions.
  - The program provides a slotted box or other receptacle that ensures privacy for contribution.
  - No coercion is used by contribution monitors.
- Two persons (minimum of one staff) count the total contributions from participants each day and co-sign the Daily Summary section of the Daily Attendance/Income Record.
- Contribution amounts are entered into DFTA's client data system.
- Contribution amounts are transferred on a daily basis to the Monthly Meals/Income Summary.

#### Compliance 9.2 Payments collected from Non-Participants

- The amount of payment received from each non-participant is recorded next to the person's name on the Daily Summary Section of the Daily Attendance/Income Record.
- The amount of contribution received from each food handler (may be \$0), is documented next to her/his name on the Daily Attendance/Income Record.

## Standard 10: Meals Covered by Non-DFTA Programs/Payers

The program collects the full cost of the meal for persons whose meal costs are covered by another government program.

**Compliance 10.1** Programs that receive government funding to provide meals among their other services (e.g. group homes, programs that provide adult day services) reimburse the program for any meals provided to their clients.

- The program has a written agreement concerning the reimbursement of meal costs by a residential care, social adult day program or other community-based service provider, if appropriate.
- The amount of reimbursement is the full cost of the meal to the center, or the amount the other program is reimbursed by, if this is lower than the center's cost.
- Any meals paid for by another funder (a non-DFTA payer), or by a DFTA-funded social adult day services program whose rate includes meals, should not be reported as DFTA-funded participant units.

## Recordkeeping

## Standard 11: Recordkeeping

The program maintains programmatic records for the required number of years.

**Compliance 11.1** The following records are maintained and available for seven years.

- Congregate meals participant registration.
- Participant, staff, guests and volunteer meal service records.
- Contributions collection and deposit records.

## Section 2: Nutrition and Food Safety

## Standard 1: Adherence to Food Standards and Guidelines

Congregate meals adhere to the USDA's Dietary Guidelines for Americans, the New York City Food Standards and DFTA guidelines.

**Compliance 1.1** Each participant is offered a meal that meets 1/3 of the daily Recommended Dietary Allowances (RDAs) for older persons, and that adheres to the USDA's Dietary Guidelines for Americans, the New York City Food Standards and DFTA guidelines.

**Compliance 1.2** Menus are approved by DFTA through DFTA's web-based menu application.

- The program submits 6-week cycle menus by the required deadline.
- Menus are submitted seasonally (winter, spring, summer and fall) or in 6-month cycles (fall/winter and spring/summer).
- Special occasion and emergency menus are submitted for approval.

**Compliance 1.3** The program adheres to the DFTA nutritionist-approved menu and DFTA meal guidelines.

- The program implements changes required by the DFTA nutritionist (e.g. food groups represented, required quantities needed for nutritional value, recipe revision).
- Any substitutions made after the menu has been approved are of equivalent nutritional value to item(s) on the approved menu, and change is documented and dated on the menu.
  - See also requirements for monitoring caterers to ensure match between bulk food and/or plated meals and approved menu for the day (Standard 22).
- Menus reflect variety and quality in terms of color, texture, flavor, aroma and appearance.
- Menus are appropriate to participants' cultural backgrounds and include meals to celebrate different cultural holidays and celebrations.

**Compliance 1.4 Standardized portions.** Food is served in standardized portions as indicated on approved recipes. Note: Participants may request that an item not be put on their plate.

**Compliance 1.5 Drinking water**. Unlimited drinking water is available from a water cooler, a water fountain or in a clean, sanitary dispenser at each table.

Compliance 1.6 Special diets. If special dietary meals are served:

- Recipients have a written order from a physician that states the time period. Prescriptions are on file and updated annually.
- Preparation and/or service are feasible.
- A DFTA nutritionist has approved the special meal.
- Nutritional supplements (canned formulas, powdered mixes, food bars, etc.) may be made available to participants based on documented assessed need as determined by a Registered Dietitian. Such products do not replace conventional meals unless a physical disability warrants their sole use.
- Vitamin and mineral supplements are not purchased with program funds.

## Standard 2: Menus

Approved menus are available to participants.

#### Compliance 2.1 Menu-Posting.

- The day's nutritionist-approved menu is posted in a public and visible place.
- The menu is printed in at least 14 point font.

Compliance 2.2 Nutritional analysis information is made available to participants upon request.

## Standard 3: Participant Feedback on Meals and Meal Services.

The program routinely solicits and considers participants' comments on meals and meals service.

**Compliance 3.1** The program obtains and considers participant input on menu planning and meal service (e.g. menu-planning committee – minutes available; agenda item at membership meetings; surveys).

## Standard 4: Additional Nutritional Service Needs.

Participants who need additional nutritional services are identified and assisted.

**Compliance 4.1** The program administers the Nutrition Screening Questionnaire (NSI) to participants at least once during the year. (*The Questionnaire may be self-administered or the program may use appropriately qualified students –e.g. nursing students or nutrition students supervised by a Registered Dietitian.* 

• The program follows up with those scoring at high Nutrition Risk through referral or other appropriate intervention.

#### **Compliance 4.2 Nutritional risk information**

 During the year the program makes a specific effort to educate participants about the signs of nutritional risk and what to do if present – e.g. bulletin board display, nutrition education presentation, distribution of a flyer or other printed material, etc.

## **Staff, Food Handlers and Volunteers**

## Standard 5: Number of Food Handlers

**The program has an appropriate number of food handlers to meet its level of budgeted congregate meals.** (*Note: "Food handlers" include paid staff, volunteers, and others who work in the kitchen or assist with meal service*)

Compliance 5.1 The program is staffed with the number of food handlers specified in the current budget.

**Compliance 5.2** The number of food handlers is sufficient to meet service needs.

## **Standard 6: Supervision of Food Handlers and Volunteers**

Food handlers and volunteers are appropriately trained and supervised.

#### Compliance 6.1 Food Protection Training Course.

- A food handler who has successfully completed the Food Protection Training program offered by the NYC Department of Health and Mental Hygiene is present at all times when service is provided. This person is the food service supervisor, the program director, or the cook.
- Food handlers who have successful completed the Food Protection Training Program either have their certificates posted in the food preparation area or their cards accessible and available.

**Compliance 6.2** The program provides training for all food service staff and volunteers (or particular titles) at least quarterly. (Training may be provided by the food services supervisor, the program director, or consultants/invited speakers).

**Compliance 6.3** Food handlers receive on-going supervision from the food service supervisor or director.

## **Procedures and Methods**

(Note: Food Handlers include all personnel involved in the preparation, service or delivery of foods.)

## Standard 7: Health, Attire, Sanitary Procedures

Food handlers follow basic sanitary procedures.

#### Compliance 7.1 Health.

- Food handlers are in good health and free from communicable diseases.
- Food handlers who are suffering from sneezing, coughing, diarrhea, open sores, or other communicable or contagious conditions are removed from food service tasks and areas.

#### Compliance 7.2 Attire.

- Food handlers wear clean and washable outer garments (e.g. aprons, smocks) or disposable outer garments.
- Food handlers wear hair restraints. (Note: Hair spray is not an acceptable alternative to hair restraints.)
- Long beards are protected by restraints.
- Food handlers have clean and trimmed fingernails, free of polish and artificial nails (or wear gloves at all times).
- Food handlers wear a minimum of jewelry (only plain wedding bands).
- Food handlers have clean personal habits.

#### Compliance 7.3 Basic sanitary procedures.

- Food handlers wash their hands with soap and warm water before beginning work, after each visit to the toilet, and as required by the sanitary code. Note: The use of hand sanitizer is not a substitute for hand washing with soap and water.
- Handwash signs are posted near wash basins in the kitchen and bathroom. The signs direct food handlers to wash their hands after toilet use.
- Food handlers do not use any tobacco products in designated food storage, service and preparation areas.
- Smoking is not permitted. "No Smoking" signs are posted in the food preparation, storage and service areas.
- Spitting is not permitted. "No Spitting" signs are posted in the food preparation, storage and service areas.
- Food handlers consume food only in designated dining areas where it will not result in contamination of food, equipment, or other items needing protection.
- Food handlers keep personal belongings outside of the food preparation, service and storage areas.

## Food Regulations and Guidelines

## Standard 8: Health, Attire, Sanitary Procedures

Food purchases are nutritionally safe and checked against market order.

#### Compliance 8.1 Purchases.

- Food specifications meet commercial standards for quality, sanitation and safety.
- All food is purchased from sources that comply with federal, state and local regulations related to food and food labeling and handling.
- Food purchasing practices are cost-effective.
- All milk is pasteurized and purchased in half-pint containers for senior consumption.
- All purchased meat, poultry and fish is government-inspected.
- Food delivery invoices/receipts are signed and dated upon delivery by the person receiving the food.
- Purchased food is carefully inspected and checked against the market order to ensure:
  - Delivery matches the order;
  - Price is correct;
  - Quantity and weight are correct;
  - Quality and grade are acceptable;
  - Food is at required temperature;
  - Food is in original packaging, which is free from swelling, bulges, dents, mold, leaks, and odors.
- Rejected foods are removed and arrangement made for immediate return and credit. (Spoiled goods are removed, and stored separately until they are returned.)

#### Compliance 8.2 Donated food.

- The program accepts only appropriate donated foods.
- The program does not serve foods prepared or canned in the home, road-killed game, wild game, or fresh/frozen fish donated by sportsmen.
- The program does not serve donated canned foods when:
  - Dates on packing cases or cans are expired;
    - Case or cans are missing labels;
    - Cans are rusted, moldy, leaky, swollen or severely dented.

## Standard 9: Food Expiration Dates, Storage and Disposal

Food is dated and stored or disposed of in a sanitary manner.

#### Compliance 9.1 Prepared and fresh foods.

- Prepared food that is to be stored in refrigerators, freezers, or in storerooms is placed in food grade containers, covered, labeled and dated.
- Stored foods are protected against cross-contamination (e.g. raw meat, chicken and fish are kept apart from raw fruits and vegetables).
- Cooked food is stored above raw food.

#### Compliance 9.2 Dry food and supplies storage.

- Items are stored in an organized fashion so that they can be rotated on a first-in/first-out basis.
- Food and supplies are stored at least 6-10 inches above the floor and away from walls and ceiling.

- Precautions are taken to protect dry foods from dust, dirt, dampness, rodents, insects, pests and foreign materials.
- Cartons are dated on receipt if contents are maintained in cartons.
- Individual containers are dated with month and year if removed from cartons.
- Cans or other individual items are dated on receipt.
- Canned goods are not stored longer than one year.
- Spoiled foods (dented, leaking, or rusted containers), outdated foods (received more than one year ago) and expired foods (past expiration date on original packaging) are discarded.

#### Compliance 9.3 Food storage temperatures.

- Dry storage areas are maintained at a temperature between 50°F and 70°F and are well-ventilated.
- Refrigerators are maintained at a temperature below 40°F.
- Freezers are maintained at a temperature below 0°F.
- Perishable foods are refrigerated, except during necessary preparation.
- Commercially frozen foods are maintained in freezers.

#### Compliance 9.4 Food disposal.

- Food that needs to be disposed of is promptly discarded.
- Canned food that needs to be disposed of is denatured by the addition of a disinfectant, removed from the can and marked condemned. The label of the can is defaced and marked condemned.
- Food that needs to be discarded (or returned to vendor because it is spoiled) is held separate and apart from foodstuff offered for consumption.

#### **Standard 10: Cleanliness**

Food storage, preparation and service areas are kept clean.

**Compliance 10.1** If food is stored and prepared in areas not used solely for that purpose, the space has been adapted to fit food and safety requirements.

**Compliance 10.2** A cleaning schedule is posted in a food preparation area.

**Compliance 10.3** Food storage, preparation and utensil-washing areas are restricted to those involved in food service.

**Compliance 10.4** All areas are clean and well maintained including: floors, walls, ceilings, windows, doors, skylights, light fixtures, vent covers, fans, mats, duckboards and decorative materials.

**Compliance 10.5** Utensils, tableware, equipment and work surfaces used for food preparation and service are kept clean and sanitized.

- Hot and cold running water are available in food service areas.
- Food contact surfaces are cleaned using cloths that are free of metal.
- Utensils and work surfaces are cleaned with soap and hot water and sanitized whenever they are used and in accordance with the cleaning schedule.
- All multi-use receptacles and other containers used in food preparation, service or transportation of food are cleaned before and after each use, sterilized or sanitized.
- New bottles, receptacles and utensils are thoroughly cleansed and sanitized before use.
- Utensils for handling food and containers for storing food that are chipped, cracked, rusted, corroded, or badly worn are discarded.

- Grease is not poured down sinks but disposed of as garbage.
  - The following cleaning and wiping cloths are kept separately:
    - Clean, dry cloths used for wiping food spills from tableware;
    - Moist cloths used for wiping food spills on kitchenware and food-contact surfaces;
    - Moist cloths for cleaning of non-food-contact surfaces (e.g. counters, walls, dining tables).
- Moist cloths used for cleaning are stored in a sanitizing solution between uses.

## **Standard 11: Inspections**

The program conducts routine self-inspections.

**Compliance 11.1** Self-inspections are conducted monthly and unsanitary conditions are corrected. Program documents actions taken.

## **Standard 12: Food Preparation**

Food preparation follows principles of nutritional health and safety.

#### Compliance 12.1 Conservation of nutrient value, flavor and appearance.

- Food is not overcooked.
- Food is prepared as close as possible to the serving time. To minimize the holding time of hot food, no more than two hours elapse between completion of cooking and the beginning of food service.

#### Compliance 12.2 Appropriate and safe temperatures.

- Perishable or potentially hazardous foods that require cooking are cooked to an appropriate temperature.
- Hot food is held at 140°F or above until it is served as well as during food service.
- When cooked perishable food falls below 140°F, it is reheated quickly to 165°F or higher, then held at a minimum of 140°F.
- Poultry, poultry stuffing, stuffed meats and stuffing containing meat or poultry are cooked to an internal temperature of at least 165°F, with no interruption of the cooking process.
- Pork and food containing pork are cooked to an internal temperature of at least 155°F.
- Ground beef and food containing ground beef are cooked to an internal temperature of at least 158°F.
- All other meats, fish and shell eggs are cooked to an internal temperature of at least 145°F.
- Frozen food is thawed in the refrigerator at 40°F, or under potable running water at 70°F, or as part of the cooking process. (*Note: If item weighs more than 3 lbs., it is not thawed by cooking.*)
- Cold food is held at 40°F or below both until it is served and during service.
- Perishable food that is not served immediately after it is delivered or prepared is refrigerated.

#### Compliance 12.3 Sanitary practices.

- Food that requires no further cooking or is ready to eat is protected from bare hand contact by the use of appropriate utensils (e.g. long-handled tongs) and disposable gloves.
- Food is free from spoilage, filth, mold, odors, and contamination.
- Proteins and foods containing milk and egg products are handled with particular caution.
- Raw fruits and vegetables are washed thoroughly in potable water before they are served.
- Food preparation takes place only when there is hot and cold running water.

## **Standard 13: Using Cook Chill Methods**

#### Proper cook chill methods are used when chilled or frozen meals are being prepared.

**Compliance 13.1 Initial cooling**. Cooked bulk food is allowed to cool at room temperature in shallow pans for approximately 30 minutes to bring internal temperatures down to 120°F.

**Compliance 13.2 Rapid chilling (non-freezer)**. Once the food has been brought down to 120° F, it is rapidly cooled to 70°F within the next 2 hours, and to 40°F within another 4 hours. Note: Total cooling time never exceeds six hours.

#### Compliance 13.3 Rapid chilling (freezer method – recommended).

- Shallow pans containing food cooled down to 120° F are distributed to all available freezers.
- Sufficient space is left for cold air circulation between pans.
- Food in freezers that are set to operate at 0° to -10°F. chills to an internal temperature of 70°F. within one hour.

**Compliance 13.4 Refrigerating/plating chilled meals.** Chilled meals are transferred to the refrigerator and kept at 40°F and/or portioned and packed as cold meals.

## Standard 14: Efficiency of Food Service

Food Service is efficient and organized.

**Compliance 14.1** The following is observable:

- There are no avoidable delays or long waits for food;
- The method of serving food is well organized;
- Food servers are efficient;
- There is appropriate and adequate dinnerware for the number of participants served.

## **Standard 15: Sanitary Food Service**

Food is served in a sanitary fashion.

#### Compliance 15.1 Temperatures.

- Food temperatures are taken with a sanitized probe thermometer at the beginning of each meal and periodically during meal service.
- If the program is catered, meal temperatures are taken with a probe thermometer upon delivery and at meal service.
- Cold food is maintained and served at 40°F or below.
- Hot food is maintained and served at 140°F or above.

#### Compliance 15.2 Sanitary practices.

- Food is served restaurant style (e.g., waiter, cafeteria).
- Sneeze guards or other appropriate means protect food placed out for service (e.g. cafeteria style).
- Participants do not touch food with their bare hands before it is on their plates.
- Food (including cut fruits and fruits with edible skin) and serving utensils are placed on dishes or wrapped (do not touch the table).
- Common drinking cups are not used.
- Straws for drinking are completely enclosed.

• Milk is served in unopened half-pint containers or dispensed from a chilled milk dispenser.

#### Compliance 15.3 Single service utensils.

- Single-service utensils are used when adequate facilities for cleaning and sanitizing utensils are unavailable.
- Single-service utensils and cookware (e.g. aluminum pans) are discarded after use.

## Standard 16: Leftover Food

#### Leftover food is properly managed.

#### Compliance 16.1 Same day use

- Catered sites dispose of leftovers on the same day as first service (by offering seconds at the end of meal service, by increasing portion size or by discarding food).
- Leftovers are unplanned and occur infrequently.
- Meal preparation sites dispose of leftovers in the same way as catered sites or store leftovers (see Compliance 18.2 below).

#### Compliance 16.2 Leftover storage (at meal preparation sites only).

- Meal preparation sites store food for next day (or second day) use as follows:
  - Leftovers are rapidly cooled in shallow containers (not more than 2" deep) to 40°F, using the proper chill-down methods.
  - When internal temperature reaches 40°F, the containers are covered, labeled and dated.
- Leftovers are not frozen.

#### Compliance 16.3 Re-serving leftovers at meal preparation sites.

- Leftovers not consumed on the day of preparation may be offered as an alternate choice up to two days following the date of preparation.
- Appropriate miscellaneous leftovers less than 48 hours old can be added to soup stock.
- Leftover food that requires heating is reheated to an internal temperature of 165°F, or held to a boil for at least 15 seconds.
- Leftover food that requires heating is reheated and served only once.

## Standard 17: Take-Home Meal Packaging

#### The program prepares and packages take-home meals in a sanitary fashion.

**Compliance 17.1** The program packages take-home meals appropriately. Containers are:

- Sealed and leak proof;
- Microwave and oven safe;
- Made of non-porous, disposable, recyclable material;
- Not made of Styrofoam.

## **Compliance 17.2** Take-home meals are accompanied with clear instructions for safe handling, storage and reheating.

• Meals include "prepared on" and "consume by" dates.

• Participants are advised to take the meal straight home and refrigerate it immediately until it is ready to be consumed.

**Compliance 17.3** Meals are maintained at appropriate temperatures at the time of preparation, distribution and until participants leave the premises.

- If a participant plans to remain at the center after meal distribution, the meal is safely store at the proper temperature until the participant is ready to leave the premises.
- Hot meals are plated and held at or above 165°F until distribution and/or until the participant leave the premises.

**Compliance 17.4** Chilled meals are plated and held at or below 40°F until distribution and/or until the participant leaves the premises. If chilling hot food, proper cooling guidelines are followed to rapidly chill meals to 40°F or below.

- Food is placed in shallow pans and may remain at room temperature while cooling to 120°F for no more than 30 minutes.
- Foods which have been cooled to 120°F are placed in the refrigerator to bring the temperature down to 70°F within two hours and to 40°F within another four hours.
- Meals may be frozen after reaching 70°F.

**Compliance 17.5** Time and temperature are appropriately documented and maintained.

**Compliance 17.6** Frozen meals remain frozen until distribution and/or the participant leaves the premises.

- Proper cooling guidelines are followed to rapidly chill meals to 40°F or below prior to freezing.
- Meals that have been frozen for more than 30 days prior to distribution are discarded.

## **Standard 18: Food Emergencies**

Food emergencies are handled appropriately.

#### Compliance 18.1 Choking.

- Choking and First Aid posters are posted in each dining room.
- At least one staff member present during meal service knows how to do the Heimlich Maneuver.

**Compliance 18.2 Procedures for food-borne illness.** The following procedures are followed when several participants complain about an upset stomach, diarrhea, or feeling ill within 3 to 36 hours after consuming a meal at the site.

- Any suspected outbreaks of food-borne illness are reported promptly to the Department of Health and Mental Hygiene, DFTA nutritionist and DFTA Nutrition Director.
- If possible, half cup portions of all meal items are saved on a paper or aluminum plate covered with plastic wrap and frozen for later laboratory tests.
- The program contacts affected persons to determine if they are under medical supervision or require medical assistance. Follow up is provided until the total incident has been resolved.
- The incident is documented in the program's incident file.

## Standard 19: Inventory and Food Use

Sites monitor inventory and food use.

#### Compliance 19.1 Inventory.

- Preparation and catered sites accurately complete an inventory of food and supplies each month on the Monthly Inventory of Food and Supplies, signed and dated by the Director or designee.
- The inventory is conducted on the last working day of the month or the first working day of each new month.

#### Compliance 19.2 Food Use.

- The amount of food used and daily meal attendance are recorded daily on the Daily Food Used Record.
- All daily food use is accurately costed out and calculated at least one week per month.
- Per meal food costs are accurately calculated monthly on The Monthly Food Cost Report.

## Standard 20: Delivery of Catered Food

#### The program monitors delivery of catered food.

Compliance 20.1 On a daily basis, the program monitors:

- Arrival of food at agreed upon time.
- Agreed upon number/quantity of food items.
- Safe and appropriate meal packaging.
- Arrival of food at required temperatures. Food arrives at required temperatures (food is quickly reheated if not at required temperature, caterer is notified and notification is documented).
- Matching of food to approved menu.

**Compliance 20.2** The program documents recurring problems and follow-up actions with the caterer.

## **Standard 21: Catering Agreements and Monitoring**

The program has an appropriate catering agreement and does required site monitoring if a non-DFTA caterer prepares its food.

**Compliance 21.1** The program follows DFTA's procedures for selecting a non-DFTA caterer/commercial caterer.

**Compliance 21.2** If the program is catered by a non-DFTA program/commercial caterer, a Catering Agreement appropriate to the meals arrangement is signed by both parties and approved by DFTA.

**Compliance 21.3** The food service supervisor or director visits the caterer's preparation site at least twice a year to monitor that bulk and/or individual plated meals are prepared in accordance with the terms of the Agreement and basic sanitary requirements.

**Compliance 21.4** The food service supervisor or director visits the caterer/preparation site as often as necessary if there are any substantial or repeated deviations/problems. The problem and its resolution are documented.

## Standard 22: Caterer Compliance with DFTA's Standards

Caterers comply with DFTA standards for food preparation, food transportation, storage and sanitation.

**Compliance 22.1** The caterer complies with sanitary requirements set forth in the contract and DFTA's standards for food preparation, storage, and sanitation, including the following:

- Temperatures are taken with a probe thermometer before portioning and/or packaging each day.
- Hot foods are packaged at a minimum of 175°F.

- Cold foods are packaged at a temperature below 40°F.
- Hot and cold foods are packed separately.
- All foods are packed for transportation in insulated carriers.
- Insulated carriers are in good condition and sanitarily maintained.
- Food is ready for pick-up or delivered on time.
- Food is ready for pick-up or delivered at the correct temperature.

**Compliance 22.2** The caterer reports any Department of Health and Mental Hygiene citation to the program immediately upon receipt.

## **Physical Environment and Equipment**

## Standard 23: Facility Compliance with Federal, State, and City Codes

The congregate meal facility and/or meal preparation site complies with all applicable federal, state and city codes. (Code compliance includes NYC Health Code, Article 81 for food preparation and food establishments.)

#### Compliance 23.1 Facility compliance.

- The NYC Department of Health and Mental Hygiene annually inspects all facilities and food preparation sites.
  - If the Department of Health has not inspected the site within the last year, the program requests an inspection.
- All facilities are in compliance with City and State Sanitary Codes and display operation permits.
- All facilities have written confirmation or a permit that they comply with Fire Department or Building Department regulations.

#### **Compliance 23.2 Response to Health Department citations**

- The program responds to violations of sanitation requirements within the time frame set forth by the Department of Health and Mental Hygiene with corrective action taken.
- The program submits a copy of all citations and violations issued by the Department of Health and Mental Hygiene to DFTA within 24 hours.
- The program takes corrective action.

#### Compliance 23.3 Physical structures.

- Floors are a smooth, non-slip and made of hard material.
- Floors, which are frequently wet or require frequent washing, are made of a hard, non-absorbent, watertight material.
- Walls and ceilings in food preparation areas are made of a hard, light-colored material.
- Walls and ceilings in contact with steam or vapor are made of smooth cement, glazed tile, glazed brick, or other non-absorbent material.
- Windows and doors in food preparation and service areas that open into outer air (with the exception of emergency exits) are equipped with appropriate screens.

#### Compliance 23.4 Plumbing.

- Floors, refrigerators, cooking kettles, and steam tables have proper drains.
- Dishwashers have indirect drains and boosters for sanitizing temperatures.
- Indirect drains are installed where required by sanitary code, including in all food preparation and ware washing sinks.

- Sinks for food preparation and for the sanitizing of utensils, equipment, or the premises, are an adequate size, and have boosters where required by sanitary code.
- Sinks have running hot and cold water.
- Plumbing and plumbing fixtures are properly connected, vented and drained.
- Each water supply outlet or connection is protected from back flow into the water system.
- Grease traps have been installed where needed.

#### Compliance 23.5 Food Storage, preparation, and service areas.

- Food storage areas contain no exposed or unprotected sewer lines.
- Toilet rooms are not used as storage areas for food and cooking supplies.
- There is a designated hand washing area in the food preparation area.
- The designated hand washing area is equipped with a hand wash sign, dispensed single-use towels, and soap or detergent.
- Lighting fixtures in all three areas have protective shields or shatterproof light bulbs.
- Fans in all three areas are shielded.

#### Compliance 23.6 Ventilation and fire protection systems.

- The DFTA Facilities Unit and the Bureau of Fire Prevention are consulted before the purchase of a new ventilation and/or fire protection system (includes optional range hoods, exhaust fans, ductwork, filters).
- All contracts for new systems guarantee that the systems meet applicable code requirements.
- The Fire Department inspects extinguishing systems for cooking equipment upon installation.
- Exhaust systems and filters are inspected, and cleaned, and changed at least once every three months by a qualified employee or an approved cleaning service.
- Only "baffle" filters are used.
- Operating and cleaning instructions for cooking exhaust and the fire extinguisher system are posted under glass at the entrance to the kitchen.
- A sketch on 8-1/2x11 inch paper showing the origin, run, and terminus of the grease duct is posted over the grease duct.
- A sufficient number of A:B:C portable fire extinguishers are strategically placed throughout food service areas.
- Portable fire extinguishers and fire extinguishing systems are inspected, tested and tagged with a current date.
- Fire extinguishing devices are inspected annually by a licensed maintenance service.

#### Compliance 23.7 Pest control.

- Extermination service is provided at least monthly or more frequently if necessary.
- The exterminator is licensed by the State Department of Environmental Conservation.
- The exterminator uses only closed bait stations in food storage, service, and preparation areas and in utensil washing and storage areas.
- The program does not use or store pesticides.
- Exterminator services are used for fly and pest control (e.g. the program does not hang fly paper/strips in food storage, preparation or serving areas).

# Standard 24: Equipment and Utensil Compliance with Federal, State, and City Codes Equipment/utensils comply with all applicable federal, state and city codes.

#### Compliance 24.1 Equipment/Utensils.

- Unless easily movable, equipment is sealed to the floor; <u>or</u> installed on a raised platform of concrete or other smooth masonry; <u>or</u> elevated at least 6 inches on legs.
- Equipment and utensils used for food preparation and service are lead and cadmium-free.
- No Styrofoam plates, cups, bowls or take-out containers are used.
- Equipment and utensils used for food preparation and service are easily cleaned and inspected (e.g. easily disassembled).
- Cutting blocks and boards are smooth, clean, and constructed of non-absorbent material.

#### Compliance 24.2 Equipment maintenance.

- All major equipment receives routine maintenance.
- Dish washing machines are maintained in good repair and operated in accordance with manufacturer's instructions. (Recommended temperature for washing is 140-150°F; 170-180°F for final rinse.)
- Refrigerators and freezers are equipped with internal working thermometers.
- Precautions are taken to prevent machinery, exposed pipes and equipment from entrapping foreign materials (for example, dusting).
- Equipment is appropriately tagged to correspond with inventory lists.

#### Compliance 24.3 Garbage containers.

- Garbage receptacles are sufficient in size and number and lined.
- Garbage receptacles are constructed of an appropriate material.
- Garbage containers hold contents without leakage and have tight-fitting covers.
- Garbage receptacles are rodent proof.
- Filled garbage receptacles weigh less than 100 pounds.
- Garbage receptacles are emptied before garbage and waste materials accumulate and become a nuisance.
- Garbage receptacles and covers are properly cleansed after emptying.
- Garbage receptacles are covered when not in use, and maintained in a sanitary condition in the building or at the rear of the premises until the time of garbage removal.
- All waste is sorted according to recycling requirements (papers bundled, etc.).

## Recordkeeping

#### Standard 25: Recordkeeping

The program maintains documents/records/reports for the required number of years.

**Compliance 25.1** The following are maintained and available for one year after the closing date of the contract year in which they took place:

- Printed copies of approved menus with substitutions documented and included.
- Copies of menus actually served with substitutions documented.
- Participant surveys and other written input.
- Staff training documentation including the names of participants, names of persons providing the training, date and time of training, topic of training, and outline/handouts.
- Food temperature records.
- Self-inspection checklists.
- Bills for quarterly exhaust system cleaning and inspection.
- Extermination service bills or reports specifying the provider's name, address, license number, date and the form of service provided.
- Service documents for other major equipment servicing.

- Department of Health and Mental Hygiene Sanitary Inspection Reports. Note: If the most recent Health Department Inspection Report on file is not dated within the past year, a letter to the Department of Health and Mental Hygiene requesting an inspection is one file.
- Communications with the Department of Health and Mental Hygiene in response to citation.
- DFTA assessment and monitoring correspondence.
- Signed and dated food delivery invoices/receipts
- Dated Monthly Inventories of Food and Supplies
- Dated Monthly Food Cost Reports
- Dated Daily Food Used Records
- Physician diet prescriptions.

# **Education and Recreation**

Scope of Services and Standards of Operation

## Introduction

Education/Recreation consists of scheduled and organized activities designed to foster the well-being of older persons through (1) satisfying use of leisure time; (2) social interaction; (3) development/enjoyment of interests, skills, talents, creative expression; (4) participant leadership. Unit: Each session of a group scheduled activity.

## Scope

## Standard 1: Varied and Diverse Programming

The program offers varied and diverse programming in the areas of arts and culture, technology and nonhealth related education/ recreation.

**Compliance 1.1** The program provides weekly activities in each of these three categories: (1) arts and culture, (2) technology, and (3) non-health related education/recreation. Activities may take the form of organized and scheduled workshops, classes, discussion groups, trips, rehearsals, performances, games, sports, studio sessions and other types of session.

 Programs offer the number of sessions proposed in the program's response to the RFP distributed across the three categories. At least two sessions each year are on elder abuse prevention and awareness.

#### Compliance 1.2 Innovative Senior Centers.

- Innovative Senior Centers offer the number of sessions proposed in the program's response to the RFP distributed across the three categories.
  - At least two sessions each year are on elder abuse prevention and awareness.
- The program can demonstrate that it maintains linkages with community organizations and resources to enhance programming.
- Members have leadership roles in planning activities.

## **Standard 2: Planned Activities**

Activities are planned, structured and organized.

**Compliance 2.1** Each activity has a planned beginning and ending time.

**Compliance 2.2** A current posted calendar or schedule lists each activity, with its name and start time at least one day before the activity is scheduled to occur.

Compliance 2.3 The posted calendar or schedule is current.

Compliance 2.4 Each group activity has a leader (staff, volunteer or consultant) that teaches or leads the activity.

## Standard 3: Program Appeal to Older New Yorkers

#### Activities are designed to appeal to both current and prospective center members.

**Compliance 3.1** The program has an annual (or more frequent) process for gauging interests among older persons in the community (participants and those who do not attend the center).

• The program can demonstrate that it responds to emerging interests and trends through new education/recreation offerings.

**Compliance 3.2** All sessions have an annual average of at least five individuals.

#### **Standard 4: Participation**

Activities are open to any member who wishes to participate.

**Compliance 4.1** Eligible persons may participate in any activity on the program's schedule within the limits of space (e.g. room limitation), or specific proficiency requirements. (See also General Program Standards.)

## **Standard 5: Publicizing Activities**

The program publicizes its education/recreation activities in the community.

**Compliance 5.1** The center's promotional activities in the community (see Senior Center Standards) include information about the types of educational/recreational programs and activities it offers.

**Compliance 5.2** At least one special event or activity session during the year draws older adults from the community who are not members of the center at the time.

## Standard 6: ISC as a Resource

The Innovative Senior Center is a resource for Neighborhood Centers in its service area.

**Compliance 6.1** The Innovative Senior Center maintains linkages with Neighborhood Centers. Examples of ongoing linkages include but are not limited to: invitations to members of neighborhood centers to participate in activities or events organized by the ISC; sharing of resources or facilities with neighborhood centers; hosting of roundtable events for staff of neighborhood centers.

## Level of Service

#### Standard 7: Budgeted Units

The program provides the number of budgeted units yearly.

**Compliance 7.1.** The number of units of service provided by the program is within the variance allowed by DFTA.

#### **Standard 8: Unit Definitions**

The correct unit definition is used in reporting the level of education/recreation service.

**Compliance 8.1.** Units are reported only for scheduled education/recreation sessions that are planned, structured and organized. Informal, continuous and leaderless activities such as cards, dominoes and billiards are not reported as units.

**Compliance 8.2.** Activities reported as education/recreation are not also reported as another service – for example, activities are not reported as both education/recreation and health promotion.

## Staffing

# Standard 9: Staffing Levels and Qualifications Instructors/leaders are appropriately qualified.

**Compliance. 9.1** Appropriate documentation is on file for each consultant or volunteer instructing or leading education/recreation sessions. This includes:

- Resume or application indicating that person is qualified (e.g. appropriate education, training).
- References (unless individual is known to the program (e.g. a member).
- Schedules.
- Contracts or written agreements specifying rates and number of sessions for individuals who are paid consultants.
- Licensure, if applicable

## Documentation

## **Standard 10: Attendance**

Each participant's attendance at an education/recreation activity is documented.

**Compliance 10.1** The program documents each participant's attendance at an education//recreation activity in his/her client data system record. *Note: Sign-in sheets are maintained as back-up.* 

# **Escort (Assisted Transportation)**

Scope of Services and Standards of Operation

## Introduction

Escort Service is a form of assisted transportation provided to an older person who needs personal accompaniment to a destination in the community, including medical or other appointments. It involves personal accompaniment throughout the outing or trip. Persons accompanied by escorts have mobility, vision or cognitive impairments. Unit of Service: Each one-way trip provided to a person with documented need for the service.

## Eligibility

## Standard 1: Eligibility

#### The program serves eligible older persons who need escort services.

**Compliance 1.1** The program provides the service to persons who meet the following eligibility criteria:

- 60 years of age or older.
- Unable to travel independently to and from destinations in the community due to mobility problems, cognitive problems, sight or hearing problems, or other types of disability.
- Unavailability of informal supports to meet their escort needs.
- The program conducts outreach specifically for this service if is not reaching its target population.

## Standard 2: Escort Services

#### The program provides escort assistance.

**Compliance 2.1.** Service activities include the following:

- Helping the older person dress in outerwear such as coat, sweater or hat for the trip.
- Helping the older person lock and unlock his/her residence;
- Accompanying the person while she/he uses public or private transportation or walks to her/his destination.
- Remaining with the older person throughout the duration of the visit and accompanying him/her home.

**Compliance 2.2.** The program provides escort workers with carfare when needed for the escorted trip. The program does not pay workers' travel costs to and from work.

## **Standard 3: Escort Services**

## The program provides escort only to clients with documented need for assisted transportation (escort).

**Compliance 3.1** A worker conducts a face-to-face interview with each individual requesting escort service prior to service provision to screen for eligibility and to obtain intake information. Note: The program may accept referrals from hospitals, case management agencies and other social service agencies as indicating client meets eligibility criteria. *Clients who do not meet eligibility criteria are assisted with referral to other programs if possible, and a "service ticket" is completed in DFTA's client data system.* **Exception:** When the client has an emergency need for an escort, the interview (and Intake) may be completed after the first time service is provided.

**Compliance 3.2** The worker opens a case record on each client found to be appropriate for Escort service and documents the client's need for the service in the client record. *Note: The program may need to first register the client in the system if the client has not been previously registered.* 

## Standard 4: Service Schedules

#### The program develops a service schedule with the client when service is needed regularly.

**Compliance 4.1** When service is needed regularly, the program establishes a schedule with the client. Note: The effective date for the schedule cannot be longer than one year without re-evaluation.

• Schedule (day, time, service destination and whether a return trip will be provided) and time period during which schedule will be in effect are documented in the client's record.

## **Standard 5: Evaluating Client Needs**

The program re-evaluates the client's need for recurring service at the end of the time frame for the service schedule.

**Compliance 5.1** The program re-evaluates the client's need for the service at the conclusion of the time frame indicated on the client's service schedule.

**Compliance 5.2.** Continued need is documented or the service is terminated if need no longer exists.

## Standard 6: Safety and Follow-up

Escorts monitor clients' safety and welfare.

**Compliance 6.1.** Escorts document their clients' reported unmet needs, health problems and other problem situations for review with their supervisor.

**Compliance 6.2.** The supervisor follows up as necessary on all reported problems (for example, with a case management referral; additional services; phone calls to family members).

**Compliance 6.3.** Client emergencies and other urgent situations are reported and handled appropriately.

## Level of Service

### Standard 7: Budgeted Units

The program provides the number of budgeted units annually.

**Compliance 7.1.** The number of units of service provided by the program is within the variance allowed by DFTA.

### **Standard 8: Unit Definitions**

The correct unit definition is used in documenting service provided to the client.

**Compliance 8.1.** Units are counted only for one-way trips that meet the service definition. Escort service is *not* assisting a client to the ladies room in a senior center or the counter to receive their meal at a congregate site. It is *not* the assistance offered by a van driver in operating a wheelchair lift or walking with an older person from the van to his/her front door. The driver is simply being helpful to the older person as part of regular transportation activities.

**Compliance 8.2.** Units reported as escort service are not also reported as another service – e.g. shopping assistance, case assistance, transportation.

## Staffing

# Standard 9: Staffing Levels and Qualifications Staffing is appropriate to and adequate for the service.

**Compliance 9.1.** The number of full and/or part-time personnel (including volunteers) providing this service is sufficient to meet the contracted service level.

Compliance 9.2. Volunteers. Volunteers who provide the service:

- Are consistently available.
- Unless known to the program, have been screened and interviewed to establish reliability and suitability by the staff person with oversight responsibility for the service.
- Unless known to the program, have provided at least two references.
- Have been assigned a supervisor.

**Compliance 9.3.** The service is overseen by a staff person who has at minimum a BSW degree, or a Bachelor's degree and one year experience in social services provision or an AA degree and two years social service experience or four years of direct social service experience.

## Standard 10: Staffing Levels and Qualifications

#### The program trains and supervises visitors.

**Compliance 10.1** All new escorts (staff and volunteers) receive documented orientation on topics pertinent to the service they will be providing. Examples include but are not limited to: roles and responsibilities; relationship-building; limit-setting; services and activities that can be performed by the escort; situations that should be reported to staff; confidentiality; response to urgent situations; record keeping.

**Compliance 10.2** Escorts meet with their supervisor alone or in a group at least monthly.

## Recordkeeping

## **Standard 11: Attendance**

The program maintains required records.

#### **Compliance 11.1. Client records**

- Intake information (need for service) in client data system.
- Client's escort schedule if service is provided regularly, including time period schedule will be in effect.
- Date of Service Start.
- One-way trips provided.
- Date(s) of service re-evaluation and documentation of continued need.
- Date of Service termination if client is no longer receiving the service and reason for termination.
- Case notes on contacts with client, reported incident, need, etc.

#### **Compliance 12.2. Escort Records**

- Name, address, contact information and family and emergency contact(s).
- Record of screening interview and references (particularly for volunteers).
- Record of supervisory contacts.

# **Friendly Visiting**

# Scope of Services and Standards of Operation

## Introduction

Friendly Visiting is a scheduled visiting service provided on a regular basis to older persons in their homes to (1) help reduce isolation, and (2) monitor the older person's safety, well-being and need for additional services. Friendly Visiting is not a one-time service.

Unit of Service: Each contact with a client with documented need for this service.

## Standard 1. Eligibility

The program serves eligible older persons who need Friendly Visiting service.

**Compliance 1.1.** The program provides Friendly Visiting service to persons who meet the following criteria:

- Are 60 years of age or older.
- Have limited ability to leave home due to frailty, disability or other health issues.
- Have few or no informal supports or opportunities for socialization (isolated or at risk for social isolation).

## Standard 2. Adherence to Target Population

The program conducts outreach to the target population.

**Compliance 2.1** If the program is a senior center, it does outreach to non-center members.

- The program can demonstrate referrals from the community for example, from social service agencies, hospitals, case management agencies, neighbors, friends and families.
- The program conducts outreach specifically for this service if is not reaching its target population.

## **Procedures and Methods**

## Standard 3. Screening

The program provides the service only to clients with documented need for in-home assistance.

**Compliance 3.1** A worker screens the request for friendly visiting service to make a preliminary decision about eligibility (need for in-home support due to frailty, disability, or other health issues and risk of social isolation).

Note: The program may accept referrals from hospitals, case management agencies and other social service agencies as indicating preliminary eligibility has been determined. In these cases, the worker schedules an in-home visit to collect Intake information.

**Compliance 3.2** A worker visits the client in the home to confirm eligibility and obtain Intake information. The worker:

- Collects the information needed to open a case record on the client in DFTA's client data system and complete the In-Home Eligibility Intake.
- Collects information about the client's interests, concerns and needs to communicate to the client's visitor(s) and documents discussion in case notes.
- Gives/sends the client a copy of the program's complaint procedures.
- Obtains signed Consent Form.

**Compliance 3.3** If the client needs additional services, the program refers the client to a provider within two weeks and follows up to confirm linkage has been made.

Note: Clients who do not meet in-home eligibility criteria are assisted with referral to the extent possible, and a "service ticket" is completed in DFTA's client data system.

## Standard 4. Visiting Schedule and Service Time Period

# The program develops a visiting schedule with the client and an effective end date for service provision.

**Compliance 4.1** The worker establishes a visiting schedule with the client, but visiting occurs no less frequently than once every two weeks.

- The schedule specifies the effective end date for the time period (number of weeks or months) during which service will be provided. *Note: The time period cannot be longer than one year without re-evaluation.*
- The schedule specifies the assigned visitor(s).
- Schedule and time period for service provision are documented in the client's record.

## Standard 5. Re-evaluation of Service Needs

The program re-evaluates the client's need for the service at the conclusion of the time period specified on the visiting schedule.

**Compliance 5.1** The client's need for the service is re-evaluated at the conclusion of the time period indicated on the visiting schedule.

**Compliance 5.2** Continued need is documented or the service is terminated if need no longer exists.

## Standard 6. Service Delivery

## Visitors provide companionship and engage in conversation and activities with their assigned clients.

**Compliance 6.1** The program makes every effort to ensure visitors and clients are compatible.

**Compliance 6.2** The program provides each visitor with information about the client's needs, circumstances and interests before the first visit.

**Compliance 6.3** The program lets the client (or client's emergency contact) know the name of the visitor before the first scheduled visit.

**Compliance 6.4** The program ensures that visitors converse with their clients and regularly bring items such as crafts, games, books, etc., into the home and/or provide limited services such as letter writing, sewing or escort.

## Standard 7. Monitoring Client Safety

Visitors monitor clients' safety and welfare.

**Compliance 7.1** Visitors document and report their clients' unmet needs, health problems and other problem situations to their supervisor.

**Compliance 7.2** The supervisor follows up as necessary on all reported problems (for example, case management referral; additional services; phone calls to family members; benefits/entitlement assistance).

**Compliance 7.3** Client emergencies and other urgent situations are reported and handled immediately.

## **Staff Appropriateness and Continuity**

## Standard 8. Staffing

### Staffing is appropriate to and adequate for the service.

**Compliance 8.1.** The number of full and/or part-time personnel (including volunteers) providing this service is sufficient to meet contracted service level.

Compliance 8.2. Volunteers. Volunteers who provide the service:

- Are consistently available.
- Unless known to the program, have been screened and interviewed to establish reliability and interest by the staff person with oversight responsibility for the service.
- Unless known to the program, have provided at least two references.
- Have a visiting schedule on file.
- Have been assigned a supervisor.

**Compliance 8.3.** The service is overseen by a staff person who has at minimum a BSW degree, or a Bachelor's degree and one year experience in social services provision, or an AA degree and two years social service experience or four years of direct social service experience.

## Standard 9. Training and Supervision

The program trains and supervises visitors.

**Compliance 9.1.** All new Visitors receive documented orientation on topics pertinent to the service they will be providing. Examples include but are not limited to: roles and responsibilities; relationship-building; limit-setting; services and activities that can be performed by the visitor; situations that should be reported to staff; how to "read" clues to a client's needs; confidentiality; response to urgent situations; record keeping. **Compliance 9.2.** Visitors have contact with their supervisors at least monthly to discuss their assigned clients.

## **Standard 10. Information Sharing**

### The program facilitates information sharing among visitors.

**Compliance 10.1.** There are demonstrable procedures and communication channels for communicating information about the client to her/his visitors.

• Procedures protect the client's confidentiality while maximizing the ability of each visitor to be helpful.

## Service Levels and Reported Units

#### Standard 11. Budgeted Units

The program provides the number of budgeted units annually.

**Compliance 11.1.** The number of units of service provided by the program is within the variance allowed by DFTA.

## Standard 12. Definition of Unit

The correct unit definition is used in documenting service provided to the client.

**Compliance 12.1.** Units are counted only for completed visit contacts with clients whose need for in-home support is documented in DFTA's client data system and who have a visiting schedule. Completed collateral contact with a family member/emergency contact or other concerned individual regarding the client's safety/welfare may also be counted as a unit.

Note: One-time or occasional visits by center members (e.g. sunshine or other goodwill clubs) do not count as Friendly Visiting contacts unless an Intake has already been conducted and the visit(s) is(are) scheduled, or unless the visit results in an Intake and a schedule for visiting.

 Units may be counted for members who are temporarily homebound or hospitalized as long as they result in an Intake and regular schedule.

**Compliance 12.2.** Units reported as friendly visiting are not also reported as another service – e.g. education/recreation, escort service, etc.

## Recordkeeping

#### Standard 13. Recordkeeping The program maintains required records.

Compliance 13.1. Client records include:

- Intake information (eligibility for in-home support) in client data system.
- Client's visiting schedule, including estimated timeframe for service provision
- Date of Service Start.
- Friendly Visiting contacts provided.
- Date(s) of service re-evaluation and documentation of continued need.
- Date of Service termination if client is no longer receiving the service and reason for termination.
- Case notes documenting contacts with program, reports on client needs from visitors, etc.

Compliance 13.2. Visitor records include:

- Name, address, contact information and family and emergency contact(s).
- Record of screening interview and references (particularly for volunteers)
- Record of supervisory contacts

# Health Promotion

# Scope of Services and Standards of Operation

## Introduction

Health Promotion Services are provided in a group setting to promote physical and mental health, aid in the prevention of conditions that negatively impact health and facilitate seniors' ability to manage their own health. They help participants improve or maintain their quality of life and increase their awareness and understanding of healthy lifestyles. Programming can be offered directly by the program (using staff, volunteers or consultants) or through linkages with community partners.

Unit of Service: One Unit = each participant or attendee of a group session, class, or event.

Health Promotion services include but are not limited to:

- Physical fitness. Examples include but are not limited to group exercise classes, walking clubs, virtual bowling, dance and movement classes.
- Health management programs. Examples include but are not limited to: blood pressure monitoring; weight
  management and other support groups; brain exercise/memory enhancement workshops; smoking
  cessation programs; routine screenings which may include (not limited to) hypertension, glaucoma,
  cholesterol, vision, hearing, diabetes, bone density, depression and nutrition screening to detect health and
  mental health problems; flu shots; medications review and management to prevent incorrect medication
  usage; educational workshops and presentations.

**Note:** The following are generally prohibited: Diagnostic tests that involve sedatives; invasive procedures that penetrate or break the skin or enter an internal body cavity; medication prescriptions; eye glass prescriptions (See "Invasive Procedures" in the Reference Section for exceptions to this policy.)

- Nutrition Education.
- Evidence-based Health Promotion Programs. The program is expected to provide the number of qualifying evidence-based programs required by DFTA. (See "Evidence-based Health Promotion Programming" in the Reference Section for more information.)

## **Procedures and Methods**

## Standard 1. Programming

The program provides a robust mix of evidence-based and non-evidence based physical fitness and mental/physical health management sessions to promote participants' health.

#### **Compliance 1.1 Center Programming**

- Each week the center offers the number of weekly sessions proposed in the program's response to the RFP.
  - Sessions include fitness activities and physical/mental health management programs.
  - Sessions include the number of EB-1 activities required by DFTA.
- The center offers the number of annual nutrition education sessions proposed in the program's response to the RFP on topics such as planning nutritious meals, maximizing the use of food dollars, being a wise purchaser, reading food labels, etc.
  - Nutrition education sessions may be offered in a classroom format, or as demonstrations, presentations, showing off films, field trips, etc.

#### Compliance 1.2 Additional requirements for Innovative Centers.

• Programming includes:

- Sessions/activities offered in collaboration with health care, academic, or other institutions in the community/City.
- Opportunities for center members to participate in off-site activities that promote health (e.g. gyms, libraries, recreation facilities);
- Enhancements to its nutrition program through linkages/opportunities for members to participate in communal gardening, food co-ops, farmer's markets, etc.
- Activities targeted to health conditions prevalent among participants, as ascertained by the program through surveys or other types of investigation.
- Sessions/activities that encourage collaboration with or participation by neighborhood senior centers, for example by opening activities to members of neighborhood centers and providing transportation to and from its site; offering joint activities with neighborhood senor centers; providing sessions at the neighborhood centers.

**Compliance 1.3** The center's fitness program is guided by DFTA's "Creating an Effective Senior Center Fitness Program: A Guidebook" and EB-1 programs listed on the NCOA website at <u>www.ncoa.org/resources/highest-tier-evidence-based-health-promotiondisease-prevention-programs</u>.

## Standard 2. Service Agreements

# The program has signed Agreements with organizations that provide health screening services to participants.

**Compliance 2.1 Article 28 or 31 providers.** If the provider of screening services is an Article 28 or Article 31 provider (see Reference Section) with a Certificate naming the program as an "extension site" the signed agreement stipulates:

- That the parties are independent contractors with respect to the services to be performed. Each of the parties will be responsible for its own acts and omissions.
- That neither party to the agreement will assume any liability or obligation of the other.
- That the medical service provider will maintain insurance coverage sufficient to cover all liabilities that may be incurred during the term of the agreement.
- That the medical service provider will hold harmless the City of New York, the Department for the Aging and the DFTA-funded program against all claims, actions or proceedings arising from the performance of the agreement.

**Compliance 2.2 Non-Article 28 or 31 providers (external).** If the provider of screening services is not an Article 28 or Article 31 provider with a Certificate naming the program as an "extension site", the provider and the program have a signed Non-Reimbursable Health Screening/Examination Agreement (DFTA Form). Key provisions of the Agreement include:

- Services are provided free of charge.
- Participants will be informed (either in writing or through lecture) about the nature of the problem(s) the test detects, meaning of results, need to follow-up with their physician if problems are detected, preventive measures where applicable and other pertinent data.
- Participants will be informed individually of their test results when any problem has been detected. Participants may voluntarily elect to reveal to the screening organization their names and addresses to facilitate receiving screening reports in the privacy of their homes. Test results may also be mailed in sealed envelope to each individual in care of the program.
- Participants in need of follow-up will be referred to their own physician or presented with a list of at least three locally qualified providers of the needed services. The list may include the name of the screening organization.

## Standard 3. Health Screenings

#### Health screening participants sign Consent and Disclaimer Forms.

**Compliance 3.1** Each participant in a health screening activity conducted by a health services provider signs a Consent and Disclaimer Form (see Forms) holding harmless the program and the City from all claims or actions resulting from the performance of health screening activities. Participants may sign once for a series of the same screening.

## Standard 4. Participant Confidentiality

#### Participant confidentiality is maintained.

**Compliance 4.1** The program does not disclose participants' Medicare/Medicaid or personal insurance identification numbers and/or social security numbers to any persons or organizations making presentations or providing screening services.

• Participants are advised that if they are asked for insurance information by the provider performing the screening or activity, they may provide the minimum information necessary to allow the provider to be paid (e.g. name, address, date of birth and Medicare number). They should not be asked for telephone numbers or other personal information.

**Compliance 4.2** Providers of screening/examination service comply with all applicable provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

## Standard 5. Service Provision

Service provision is non-commercial, non-coercive and free of charge.

**Compliance 5.1** The program does not sell, allow to be sold, or endorse, either verbally or in writing, any product or health care service/provider.

• Center staff are not permitted to accept any gifts or gratuities from presenters.

**Compliance 5.2** Discretion is exercised in choosing which groups or vendors are permitted to make presentations at the center. Education for the benefit of senior consumers is the reason for scheduling any presentation. Permission is refused to organizations that appear to be seeking to exploit a captive senior audience.

**Compliance 5.3** When presentations on new insurance options and health/safety or other products are scheduled to assist seniors in making informed decisions, the program encourages competitors to present on their services/products as well.

**Compliance 5.4** Participants who wish to participate in a screening service but do not wish to give their Medicare numbers or other identifying information to the screening provider receive the same service as seniors who divulge the requested information.

## **Service Levels**

## Standard 6. Contracted Units

The program provides the number of contracted annual service units.

**Compliance 6.1** The total number of annual units delivered for health promotion service is within the variance allowed by DFTA.

**Compliance 6.2** The program provides its contracted level of nutrition education units and a minimum of six sessions per year.

## Standard 7. Unit Definition

The program uses the correct unit definition in documenting the provision of services.

**Compliance 7.1** The unit of service for health promotion is each participant (unduplicated) or attendee of a group session, class or event.

Examples:

- 14 enrollees of a 12-week evidence-based program attended all 12 sessions = 168 units
- 100 participants receive flu shots at a senior center = 100 units
- A health fair for seniors where 150 receive vision screening = 150 units
- A weekly walking program with 5 participants a week = 260 units (52 weeks x 5)
- One diabetes screening event that screened 72 older adults = 72 units
- Screened medications for 90 participants at a medication review event led by local pharmacists = 90 units
- 25 participants attended a "Know Your Numbers" presentation = 25 units

**Compliance 7.2** The unit of service for nutrition education is each participant (unduplicated) or attendee of a nutrition education session.

## **Staff Appropriateness and Continuity**

## Standard 8. Staff Qualifications

Persons who provide health promotion services have appropriate qualifications.

**Compliance 8.1** Health promotion services (education, fitness activities, support groups, screenings, blood pressure monitoring, medications review, etc.) are provided only by persons in the following categories:

- Staff or paid consultants (resumes indicating suitable qualifications are on file, and, where applicable, licensure or certification, references and contracts).
- DFTA-trained volunteers.
- Student nurses, medical technicians or others in a New York State approved health sciences training program that supervises activities performed by their trainees.
- Employees of health care organizations that designate the program as a site where they provide community service.
- Professional health care consultants who provide free community service to the program (resumes listing qualifications are on file, including licensure where applicable).

- Employees of government agencies in the performance of their public health responsibilities.
- Employees of organizations or institutions with which DFTA has an agreement.

**Compliance 8.2** Persons providing nutrition education are Registered Dietitians, Certified Dietitian Nutritionists, or nutrition students supervised by a Registered Dietitian. Other licensed or credentialed professionals with knowledge of nutrition may be approved by DFTA to provide nutrition education as appropriate to the subject.

Compliance 8.3 The Innovative Senior Center employs a full-time (or FTE) Wellness Coordinator.

• The Wellness Coordinator has an educational background in community health, mental health, public health, nursing, social worked or a related field.

## **Standard 9. Supervision** All providers of health promotion services are appropriately supervised.

**Compliance 9.1** The program's health promotion services are overseen by the program director or a person who has at minimum a BSW degree, or a Bachelor's degree and one year experience in health or social service provision, or an AA degree and two years health or social service experience, or four years of direct health or social service experience.

**Compliance 9.2** Persons providing screening/testing or other health-related procedures are directly supervised by center staff or by staff of the institution they represent.

## **Physical Environment**

## Standard 10. Physical Environment

## Services are provided only in an appropriate setting.

Compliance 10.1 Health screening tests are conducted in spaces that:

- Are sanitary.
- Ensure privacy.
- Can accommodate the scope of the activity e.g. screeners, participants, equipment and a waiting area if necessary.

#### **Compliance 10.2** Defibrillator:

- The Program has a properly functioning Automated External Defibrillator (AED) on site.
- The AED(s) is/are correctly assembled and properly functioning at all times.
- The program has the necessary up to date supplies and equipment on site. This includes:
  - AED pads and batteries that are current (not past expiration date)
  - A Fast Response Kit with refreshed supplies
- The program monitors the AED(s) and maintains a weekly log indicating the date the device was checked.
- The program has trained staff certified to operate an AED on site at all times that seniors are present.
- Signage
  - There is signage near the main entrance to the center that clearly indicates where the AED is stored and maintained.

- Signs are posted near the AED with the names of the staff members certified to operate the AED and their contact information.
- A copy of Site-specific and Maintenance Plan (AED DFTA Manual) is available on site.

#### Documentation

#### **Standard 11. Documentation**

The program maintains required documentation.

#### Compliance 11.1 Health Screening Documentation:

- Signed Agreements with providers of screening services who are not employed by the provider.
- Signed Consent and Disclaimer Forms.
- Record of persons referred to a health care provider as the result of screening test administered by a staff
  person or an outside agency, including confirmation that counseling and referral of participants with abnormal
  or problematic results occurred.

#### Reference

#### **Invasive Procedures**

An invasive procedure is one that penetrates the skin or enters an internal body cavity. The following are exceptions to DFTA's prohibition against invasive procedures:

- Puncture of a finger by an RN, medical technician or other qualified health professional to obtain a sample for blood glucose and other diagnostic tests;
- Administration of flu, pneumonia or Shingles vaccines by the Department of Health or qualified health care providers or registered pharmacists.
- Other procedures when:
  - The provider has prior written approval from DFTA to provide the services.
  - The center is listed as an "extension site" on the certificate of an Article 28 or Article 31 medical provider (See Service Definitions);
  - The provider has received a permit from the New York State Department of Health to run a onetime "health fair";
  - The provider has registered with the NY State Department of Health as a "limited testing site."

Examples of non-invasive procedures include: checking blood pressure; hearing and vision checks; mammograms; mental health screening; glaucoma screening; bone density screening; skin cancer screening; body fat analysis; foot examinations.

#### **Consent and Disclaimer Form**

A Consent and Disclaimer Form holds the program and the City harmless from all claims or actions resulting from the performance of a health screening activity by a non-City agency. Every participant in a health screening activity must sign a Consent and Disclaimer Form specific to each screening or series of screenings (e.g. Keep on Track blood pressure monitoring involves a series of screenings).

#### **Extension Site of an Article 28 and Article 31 Provider**

Medical institutions or clinics licensed by the State of New York to provide services may operate "extension sites" at DFTA-funded programs. The program site must be incorporated into and named in the clinic's Article 28 or Article 31 Certificate, which specifies the "extension sites" where the institution or clinic is licensed to provide services.

Extension program operated as Article 31 sites are monitored and regulated by the New York State Office of Mental Health. Article 28 sites are monitored and regulated by the New York State Department of Health.

#### Non-Reimbursable Health Screening Agreement

The Non-Reimbursable Health Screening Agreement (DFTA form) is required of health screening services providers that do not have an Article 31 or Article 28 Certificate covering the DFTA-funded program where screening services will be performed.

#### Evidence-Based Health Programming (EB Programming)

These programs, approved by the Administration on Community Living, are based on scientifically designed research, where there is extensive data analysis and testing in the field to ensure efficacy and ease of replication in various settings. EB programming translates these tested program models and interventions into practical, effective community programs that can provide proven health benefits to participants. For a list of approved EB programs, click on: www.ncoa.org/resources/highest-tier-evidence-based-health-promotiondisease-prevention-programs.

# Information and Referral

Scope of Services and Standards of Operation

#### Introduction

Information and Referral service is the provision of information to seniors and/or their representatives to enable them to locate and obtain needed services, benefits, entitlements and other resources on their own. Referral to appropriate agencies/organizations is part of the service. This service is provided one-on-one. It is delivered in person, by telephone, e-mail or mail. It does not include assisted referral on behalf of the client or follow-up on a referral, which are Case Assistance activities. Unit of Service: One hour of service. (The minimum reported time of service is one quarter of an hour (15 minutes) which equals 0.25 unit.

#### Standard 1: Service Provision

The program provides accurate, complete and current information about public services, benefit/entitlements and other resources for older persons.

**Compliance 1.1** The program provides information on:

- Eligibility and application requirements for common benefits and entitlements for seniors (e.g. Medicare, Medicaid, SSI, HEAP, SNAP, Reduced Fare).
- Community resources, services and opportunities, including but not limited to DFTA-funded service providers, mental health resources, local hospitals and health clinics, transportation resources, providers of legal services for older adults, local social security office, and sources for tax preparation assistance.
- Services available through houses of worship, fraternal organizations, culture-specific social services providers, etc.

**Compliance 1.2** The program responds to requests for information in a timely manner. If information provider is not available, the inquirer is given a reasonable time frame within which he/she will be contacted with the appropriate information.

#### Standard 2: Current and Comprehensive Resources

The program maintains and utilizes current and comprehensive information resources.

**Compliance 2.1** The program provides complete, current and accurate information.

- The program's information on eligibility and application requirements for benefits and entitlements available to seniors is current and comprehensive. Paper resource files may be used, as well as on-line tools such as ACCESSNYC and Benefits Check-UP.
- The program information about resources and services available in its service area is current and comprehensive. It includes but is not limited to resources for: social security and other government program assistance; elder abuse; transportation needs; caregiver services; mental health needs; immigrant services; low or no-cost health maintenance programs; tax preparation assistance; immigrant assistance; food pantries; visiting and telephone reassurance needs; social adult day care; legal services for older persons; training and employment programs; volunteer opportunities; continuing education programs for seniors.
- The program's information on each resource includes the provider organization's name (including common name or acronym, if applicable), address, offices, telephone number, days and hours of operation, eligibility requirements, fees, etc.

#### Standard 3: Clear Provision of Information

The program provides information in a manner that enables inquirers to obtain the services/resources they need.

**Compliance 3.1** Staff/volunteers who provide information and referral:

- Help the inquirer clarify the type of information s/he needs if the person is unsure.
- Provide available language assistance for inquirers, when needed.
- Provide sufficient information (eligibility requirements, name of provider, hours of operation, telephone number or address) and confirm that the inquirer is able to act on his/her own.

#### **Level of Service**

#### Standard 4: Budgeted Units

The program provides its budgeted annual units.

**Compliance 4.1** The program provides Information and Referral service levels within the variance range allowed by DFTA.

**Compliance 4. 2** The program uses the correct unit definition in documenting service provision. A unit of Information and Referral service is each full hour spent on providing information on resources to individual seniors or their representatives (e.g. services, benefit/entitlements). *Note: Time may be counted in quarter hours. Note also: Units may not be reported for group presentations or for providing information about a senior center's hours of operation or schedule of activities.* 

#### Staffing

#### Standard 5: Staffing Levels and Qualifications

Information providers have the skills to conduct the service.

Compliance 5.1 Persons who provide Information and Referral service demonstrate the following:

- Communication skills e.g. ability to direct the interview and provide clarification when appropriate to help the inquirer communicate his/her information need; ability to determine whether client needs language assistance.
- Knowledge of resources/opportunities available to seniors in their service area.
- Knowledge of entitlement and benefit programs for seniors.
- Ability to use resource files and/or online information and applications (e.g. ACCESS NYC).

#### Standard 6: Supervision

Information providers receive on-going supervision.

**Compliance 6.1** Each information provider receives supervision that includes documented orientation, worker log review, and annual meetings on service standards and available resources.

#### Documentation

#### Standard 7: Documentation of Services Provided

The program correctly documents service provision.

**Compliance 7.1** The program correctly documents the provision of Information and Referral service in DFTA's client data system.

**Compliance 7.2** The program maintains monthly logs specifying the date of service, information about the inquirer (phone, address, etc.), the type of information/referral provided, the type of contact, i.e. in person, phone, e-mail, and time spent providing service to each inquirer.

# **Shopping Assistance** Scope of Services and Standards of Operation

#### Introduction

Shopping Assistance/Chore Service provides help with shopping needs and/or household chores to older persons who can be safely maintained in their homes with fewer than four hours a week of this service, alone or in combination with other services. Shopping Assistance/Chore Service Unit: each contact with a client for the purpose of providing the service.

#### Eligibility

#### Standard 1: Eligibility

The program serves eligible older persons who need shopping assistance and/or chore service.

**Compliance 1.1.** The program provides the service to persons who meet the following criteria:

- 60 years of age or older.
- Limited ability to leave home due to frailty, disability or other health issues.
- Few or no informal supports (isolated or at risk for social isolation)

**Compliance 1.2** If the program is a senior center, it does outreach to non-center members.

- The program can demonstrate referrals from the community for example, from social service agencies, hospitals, case management agencies, neighbors, friends and families.
- The program conducts outreach specifically for this service if is not reaching its target population.

#### Standard 2: Type of Client

The program provides the service only to clients with documented need for in-home assistance.

**Compliance 2.1** A worker conducts an in-person or telephone interview with the client to screen for eligibility and to obtain Intake information.

#### Compliance 2.2 The worker:

- Determines that the client is eligible for in-home support (limited ability to leave home due to frailty, disability or other health issues and unavailability of informal supports to assist with needs). Note: The program may accept referrals from hospitals, case management agencies or other social service agencies as indicating client meets eligibility criteria. Clients who do not meet eligibility criteria are assisted with referral needs to the extent possible.
- Gives or sends the client a copy of the program's complaint procedure and Consent Form and
- Obtains the signed consent form or client's verbal consent if over the phone.

**Compliance 2.3** The worker opens a case record on each client found to be appropriate for shopping assistance or chore service by completing an In-Home Eligibility Intake in DFTA's client data system. *Note: The worker may need to first register the client in the system if the client has not been previously registered.* 

**Compliance 2.4** If the client needs additional services, the program refers the client to a provider within two weeks and follows up to confirm linkage has been made.

#### **Service Provision**

#### Standard 3: Service Provision

### The program provides shopping assistance and/or chore services as proposed in its response to DFTA's RFP.

**Compliance 3.1.** The program provides shopping assistance and/or chore service as proposed in its response to DFTA's RFP or current budget and in accordance with the following activities.

**Compliance 3.2** If providing chore service, the program provides assistance with the following activities, as needed by the client:

- laundry, light cleaning, dusting, dishwashing, vacuuming and other household tasks;
- light yard work;
- running errands.

Compliance 3.3 If providing shopping assistance:

- The program has a written policy on whether shoppers shop for or with clients, or both.
- The program provides shoppers with carfare if needed for the shopping trip. The program does not pay shoppers' travel costs to and from work.

**Compliance 3.4** If providing shopping assistance, the program provides assistance with the following activities, as needed by the client (and as pertinent to whether shopping for or with the client):

- Making or reviewing shopping list (items needed) with the client before going to the store.
- Collecting money, check or food stamps from the client in order to make purchase (in accordance with program's policies).
- Shopping with the client (or for the client) for food, medicines or other necessities (program may limit grocery shopping to one store).
- Paying for purchases with the client's money.
- Returning items bought, change, and receipts to the client.
- Reviewing purchased items with the client.
- Assisting with unpacking and putting items away, if necessary.
- Accompanying the older person on the shopping trip.
- Helping to select items while shopping.
- Carrying packages.
- Helping he older person dress in outerwear such as coat, sweater or hat for the trip.
- Helping the older person lock and unlock his/her residence.

#### Standard 4: Service Schedule

#### The program develops a service schedule with the client with an effective end date.

**Compliance 4.1** The worker establishes a service schedule with the client, and specifies the time period during which the service will be provided (effective end date). Note: The time period cannot be longer than one year without re-evaluation.

• Schedule and time period for service provision are documented in the client's record.

#### Standard 5: Re-evaluating Client Need

## The program re-evaluates the client's need for the service at the effective end date of the service schedule.

**Compliance 5.1.** The client's need for the service is re-evaluated at the conclusion of the time period specified on the service schedule (effective end date)

**Compliance 5.2.** Continued need is documented and a new effective end date established, or the service is terminated if need no longer exists.

#### Standard 6: Safety and Follow-up Workers monitor clients' safety and welfare.

**Compliance 6.1.** Workers document and report their clients' unmet needs, health problems and other problem situations to their supervisor.

**Compliance 6.2.** The supervisor follows up as necessary on all reported problems (for example, referral to a case management agency for additional services; entitlements/benefits assistance; phone calls to family members).

**Compliance 6.3.** Client emergencies and other urgent situations are reported and handled immediately.

#### Level of Service

#### Standard 7: Budgeted Units

The program provides the number of budgeted units annually.

**Compliance 7.1.** The number of units of service provided by the program is within the variance allowed by DFTA.

#### **Standard 8: Unit Definitions**

The correct unit definition is used in documenting service provided to the client.

**Compliance 8.1.** Units are counted only for completed shopping and/or chore contacts with clients whose need for in-home support is documented in DFTA's client data system and who have a service schedule.

• Completed collateral contact with a family member/emergency contact or other concerned individual regarding the client's safety/welfare may also be counted as a unit.

**Note:** A one-time visit by a center member (e.g. members of sunshine or other goodwill clubs) to assist a fellow center member who is temporarily unable to shop or do chores does not count as a unit. Occasional visits do not count unless the client's eligibility for the service (in-home support need due to limited ability to shop or do chores, informal supports are not available to provide the service as needed, and a service schedule is noted in the client's record.

**Compliance 8.2.** Units reported as shopping assistance/chore are not also reported as another service – e.g. housekeeping/chore, escort service, etc.

#### Staffing

## Standard 9: Staffing Levels and Qualifications Staffing is appropriate to and adequate for the service.

**Compliance 9.1.** The number of full and/or part-time personnel (including volunteers) providing this service is sufficient to meet contracted service level.

Compliance 9.2. Volunteers. Volunteers who provide the service:

- Are consistently available.
- Unless known to the program, have been screened and interviewed to establish reliability and interest by the staff person with oversight responsibility for the service.
- Unless known to the program, have provided at least two references.
- Have a visiting schedule on file.
- Have been assigned a supervisor.

**Compliance 9.3.** The service is overseen by a staff person who has at minimum a BSW degree, or a Bachelor's degree and one year experience in social services provision or an AA degree and two years social service experience or four years of direct social service experience.

#### **Standard 10: Supervision**

#### Staffing is appropriate to and adequate for the service.

**Compliance 10.1.** All new workers receive documented orientation on topics pertinent to the service they will be providing. Examples include but are not limited to: program policies; roles and responsibilities; relationship-building; limit-setting; money management; services and activities that can be performed by the worker; situations that should be reported to staff; how to "read" clues to a client's needs; confidentiality; response to urgent situations; record keeping.

Compliance 10.2. Staff have contact with their supervisors at least monthly to discuss their assigned clients.

#### Recordkeeping

#### Standard 11: Client and Staff Records

The program maintains required records.

#### Compliance 11.1. Client record

- Intake information (eligibility for in-home support) in client data system.
- Client's service schedule, including estimated time period in effect.
- Date of Service Start.
- Shopping or Chore contacts provided.
- Date(s) of service re-evaluation and documentation of continued need.
- Date of Service termination if client is no longer receiving the service and reason for termination.

• Case notes documenting contacts with program, reports on client needs from visitors, etc.

#### Compliance 12.2. Staff Records

- Name, address, contact information and family and emergency contact(s).
- Record of screening interview and references (particularly for volunteers)
- Record of supervisory contacts

## Telephone Reassurance Scope of Services and Standards of Operation

#### Introduction

Telephone Reassurance is a scheduled calling service provided on a regular basis to older persons in their homes to (1) help reduce isolation, and (2) monitor the older person's safety, well-being and need for additional services. Telephone Reassurance is not a one-time service.

Unit of Service: Each contact with a client with documented need for this service.

#### Standard 1. Eligibility

#### The program serves eligible older persons who need telephone reassurance.

**Compliance 1.1.** The program provides the service to persons who meet the following criteria:

- 60 years of age or older.
- Limited ability to leave home due to frailty, disability or other health issues. Note: inability may be temporary, e.g. senior center member who meets the criteria.
- Few or no informal supports or opportunities for socialization (isolated or at risk for social isolation)

#### **Standard 2.** Adherence to Target Population and Target Areas The program conducts outreach to the target population.

**Compliance 2.1** If the program is a senior center, it does outreach to non-center members.

- The program can demonstrate referrals from the community for example, from social service agencies, hospitals, case management agencies, neighbors, friends and families.
- The program conducts outreach specifically for this service if is not reaching its target population.

#### **Procedures and Methods**

#### Standard 3. Screening

The program provides the service only to clients with documented need for in-home assistance.

**Compliance 3.1.** A worker conducts a phone or in-person interview with the client to screen for eligibility and to obtain Intake information.

#### Compliance 3.2. The worker:

- Determines that the client is eligible for in-home support in the form of Telephone Reassurance (limited ability to leave home due to frailty, disability or other health issues, and risk of social isolation). Note: The program may accept referrals from hospitals, case management agencies and other social service agencies as indication that the client meets eligibility criteria).
- Collects information about the client's interests, concerns and needs to facilitate the client's interactions with the caller (documented in case notes).
- Gives/sends the client a copy of the program's complaint procedure and Consent form or obtains (and notes) signed form or client's verbal consent.

**Compliance 3.3.** The worker opens a case record on each client who has been found to be appropriate for telephone reassurance by completed an In-Home Eligibility Intake in DFTA's client data system. *Note: The program may need to first register the client in the system if the client has not been previously registered.* 

**Compliance 3.4.** If the client needs additional services, the program refers the client to a provider within two weeks and follows up to confirm linkage has been made.

#### Standard 4. Calling Schedule

The program develops a calling schedule with the client and an effective end date for service provision.

**Compliance 4.1** The worker establishes a calling schedule with the client, but no less frequently than once every two weeks.

- The schedule specifies the end date of the time period (number of weeks or months) during which service will be needed. *Note: The time period cannot be longer than one year without re-evaluation.*
- The schedule specifies the assigned caller(s) and time of day when calls will be made.
- Schedule and time period for service provision are documented in the client's record.

#### Standard 5. Re-evaluation of Service Needs

The program re-evaluates the client's need for the service at the conclusion of the time period specified on the calling schedule.

**Compliance 5.1** The client's need for the service is re-evaluated at the conclusion of the time period specified on the calling schedule.

Compliance 5.2. Continued need is documented or the service is terminated if need no longer exists.

#### Standard 6 Service Delivery

Callers provide reassurance and support to their assigned clients.

**Compliance 6.1.** The program makes every effort to ensure callers and clients are compatible.

**Compliance 6.2.** The program provides each caller with information about the client's needs, circumstances and interests before service start.

**Compliance 6.3.** The program lets the client (or client's emergency contact) know the name of the caller before service starts.

Compliance 6.4. Callers inquire about and follow-up on client concerns and interests.

#### **Standard 7 Monitoring Client Safety** Callers monitor clients' safety and welfare.

**Compliance 7.1.** Callers document their clients' reported needs, health problems or other problem situations for

review with their supervisor(s).

**Compliance 7.2.** The supervisor follows up expeditiously on all reported problems (for example, case management referral; additional services need; phone calls to family members).

Compliance 7.3. Client emergencies and other urgent situations are reported and handled immediately.

#### **Staff Appropriateness and Continuity**

#### Standard 8 Staffing

#### Staffing is appropriate to and adequate for the service.

**Compliance 8.1.** The program is sufficiently staffed (including volunteers) to provide contracted program levels.

Compliance 8.2. Volunteers. Volunteers who provide the service:

- Are consistently available.
- Unless known to the program, have been screened and interviewed to establish reliability and interest by the staff person with oversight responsibility for the service.
- Unless known to the program, have provided two references.
- Have a calling schedule on file.
- Have been assigned a supervisor.

**Compliance 8.3.** The service is overseen by a staff person who has at minimum a BSW degree, or a Bachelor's degree and one year experience in social services provision or an AA degree and two years social service experience or four years of direct social service experience.

#### Standard 9 Training and Supervision

#### The program trains and supervises callers.

**Compliance 9.1.** All new callers receive documented orientation on topics pertinent to the service they will be providing. Examples include but are not limited to: roles and responsibilities; relationship-building; limit-setting; services and activities that can be performed by the caller; response to urgent situations; record keeping.

**Compliance 9.2.** Callers have contact with their supervisors at least monthly to discuss their assigned clients.

#### Standard 10 Information Sharing

The program facilitates information sharing among callers.

**Compliance 10.1.** There are demonstrable procedures and communication channels for communicating information about the client to her/his callers.

• Procedures protect the client's confidentiality while maximizing the ability of each visitor to be helpful.

#### **Service Levels and Reported Units**

#### Standard 11 Budgeted Units

The program provides the number of budgeted units annually.

**Compliance 11.1.** The number of units of service provided by the program is within the variance allowed by DFTA.

#### Standard 12 Definition of Units

#### The program uses the correct unit definition in documenting service provided to the client.

#### **Compliance 12.1**. Units are counted only for:

- Completed telephone contacts with clients whose need for in-home support is documented in DFTA's client data system and who have a calling schedule.
- Exception: Units may also be counted for one-time/occasional contacts with senior center members whose absence has caused concern (e.g. frail usual attendee who needs monitoring; absence of more than one week by someone who attends regularly; member who is recovering from a serious illness). Program enters a "need for service" note in client's record in DFTA's client data system.
- Completed collateral contacts with a family member/emergency contact regarding client's safety/welfare.

**Compliance 12.2.** Units reported as telephone reassurance are not also reported as another service – e.g. education/recreation, case assistance, etc.

#### Recordkeeping

#### Standard 13 Budgeted Units

The program maintains required records.

Compliance 13.1. Client records include:

- Intake information (eligibility for in-home support) in client data system.
- Client's calling schedule, including estimated timeframe for service provision
- Date of Service Start.
- Telephone Reassurance contacts provided.
- Date(s) of service re-evaluation and documentation of continued need.
- Date of Service termination if client is no longer receiving the service and reason for termination.
- Documentation of any contacts between client and supervisor/coordinator

Compliance 13.2. Caller records include:

- Name, address, contact information and family and emergency contact(s).
- Record of screening interview and references (particularly for volunteers).
- Record of supervisory contacts.

# Senior Tracking, Analysis and Reporting (STARS) Program Administrators' Guide

A Guide to STARS Policy (Also located in STARS under Support.) There are two user roles in STARS: **Program User** and **Program Admin**. Program User(s) have access to the basic functionality in STARS. Program Admin(s) have access to the full functionality in STARS (example: granting worker access, assigning roles, changing passwords, removing access).

The New York City Department for the Aging (DFTA) contracts with PeerPlace Networks LLC to provide user licenses for the Senior Tracking, Analysis & Reporting System (STARS). All data collected and housed in STARS belongs to the City of New York through the New York City Department for the Aging. Below are policy items that must be observed when using STARS:

#### 1) Inactivate Terminated Staff

Any user the program has granted access to STARS should have their license inactivated from the system (Please refer to section 1.3 to Inactive user) immediately upon cessation of their employment, internship, or other relationship with the program. Users should ONLY be inactivated. DO NOT DELETE USERNAMES.

#### 2) Sharing Username & Passwords

Usernames and passwords are <u>NOT</u> to be shared under any circumstances. Licenses are assigned to specific persons. The person assigned the license is responsible for all data entered under their username. Passwords are <u>NOT</u> to be assigned to users. Temporary passwords must be reset to a password determined by the user. Passwords are to be unique.

#### 3) Generic Usernames

All STARS user licenses are assigned to a specific person. Generic usernames (e.g. abc1. abc2. nyc, intern.intern.nyc, temp.work.nyc, etc.) are prohibited per contractual terms with PeerPlace. Any generic usernames created in STARS will be inactivated by DFTA with no prior notification.

#### 4) New User Accounts

All STARS users must have a unique email address. A license may not be assigned to a person who does not have an email address. Email addresses cannot be shared.

#### 5) User Roles

All users must be assigned to the user role that is appropriate for their job function.

#### 6) Request for Licenses and Scanners

For additional licenses and/or scanners, please notify your DFTA Program Officer.

#### 7) Delete Client Email

If a user at your program creates a duplicate client, send the client's name and ID to <u>deleteclient@aging.nyc.gov</u> and DFTA will remove the client. Please ensure there are no units assigned to the client. For technical assistance with Program Administration function and STARS, contact the DFTA Help Desk at: (212) 602-4418.

#### 1.1 Creating a New User

1) On the left side of the Portal Page under Admin/Support Tools, Click on the User Mgmt Admin User Tools My Pushpins My Ticklers **Program Tools** Split Funding Volunteers in Receiving Program Volunteer Complaints Admin/Support Tools Allocated Users Search Support Delete Process User Mgmt Admin View 🔘 Queue User Directory User Session History Program Agency Cross Reference PeerPlace Newsletter Upcoming Webinars View Builder Reports Logout Full Name: Status: Username: Type: Sort Ascending: Sort By: Active V User Mgmt Admin View Sort Descending: O Activation Dt 🗸 Go Export to Excel Cancel New User

 Complete the Contact Information screen (Note: If the field contains an asterisk (\*) the information is required for the user to move forward. Enter a VALID email address) and click on Save.

				Search	Queue Logout
	Please verify spelling is correct and r	names are entered in the correct fields.			
User Admin	Last Name *:	Doe	Middle Initial:		
Contact Information	First Name *:	Jane	DOB(mm/dd/yyyy):		
<u>User Information and Status</u> Distribution List	Gender:	Select One 🗸			
	Address Line 1:		Address Line 2:		
	City:		State:	New York	$\checkmark$
	Zip:		Phone (Home) (###-#####):	·	
	Phone (Mobile) (###-###- ####):		Phone (Work) (###-#####):	·	
	Ext:		Email Address *:	JDoe.gmail.com ×	
	Fax (###-########):				
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Save Save & Exit	Cancel				

 Click [Next] at the bottom, or click on the User Information & Status link on the left side of the page.

- 5) Complete the User Information & Status screen:
  - a. Username in all lowercase with '.nyc' at the end (example: jane.doe.nyc).
  - b. Billing/Allocation Entity select your program from the dropdown list.
  - c. Default Program select the program the user will default to when they log on.
  - d. Activation Date auto-defaults to current date.
- 6) Before exiting this screen, <u>COPY</u> the System Generated Password (Note: This is the new user's temporary password. When the new user logs into the system for the first time, there will be prompted to change their password. Program Admin(s) should provide user(s) with the full user name and link to PeerPlace website. For example: jane.doe.nyc and <u>https://nyc.peerplace.com</u>).

				Search	<u>Queue</u>	Logout
		Peerpl	ce Profile			
User Admin	Please enter the username in a v	valid format. Usernames should be in all lowerca	se letters with no spaces.			
Contact Information	User Name *:	jane.doe.nyc				
User Information and Status	Billing/Allocation Entity:	NYC Department for the Aging / Senior C	enter - CCNS McGuiness Nort	hside (2 used of 3 allocated)		$\checkmark$
Distribution List	Default Program *:	Senior Center - CCNS McGuiness Norths	de 🔽			
	Activation Date *:	03/07/2016				
		only. "Active Status" controls whether the user eared if Status is changed to Active.	can login to PeerPlace or not. Exp	iry Date will be set to today's dat	e when S	itatus is
	Active Status:	Active				
	Expiry Date:					
	User Category:	Select One				
	Comments:	(0 characters of 512 allowed)		$\bigcirc$		
		Random System	Generated Password			
	System Generated Password:	z0meCa77w7jb				
		[< <prev]< th=""><th>[Next&gt;&gt;]</th><th></th><th></th><th></th></prev]<>	[Next>>]			

- 7) Click on Save (User Role will appear).
- 8) Click on User Role. Complete the screen in the following order:

						<u>Se</u>	arch Queue	Logout
User Admin	User Name:	jane.doe.nyc		Agency:	Catholic Charities Neig	hborhood Services	Inc	~
Contract Information	Program:	Home Delivered Meals - CCNS NEQ - 43H	~	Role:	Program User 🗸			
Contact Information User Information and Status	Add Role:	Add Role						
User Roles		Agency	\$		Program	¢	Role	\$
Distribution List	Delete	atholic Charities Neighborhood Services Inc		Home Delivered Meal	IS - CCNS NEQ - 43H	F	<sup>p</sup> rogram User	
			[< <prev]< th=""><th>[Next&gt;&gt;]</th><th></th><th></th><th></th><th></th></prev]<>	[Next>>]				
Save Save & Exit	Reset Passwd	Cancel						

- a. Agency select your sponsor from the dropdown.
- b. Program select the program you are granting the user access to.
- c. Role Select **Program User** or **Program Admin** from the dropdown. Each user should have only <u>ONE</u> role (See page 1 for user role definitions).
- d. Click on Add Role.
- e. Click on Save.

\*Repeat steps a. through e. to add additional programs.

- The Distribution List allows users to receive notification of a new referral through email. To set up this function, follow the steps provided below:
- 1) Under *User Roles*, click on the Distribution List and select **New**.
- 2) Complete the fields (Status, Effective Date, and Program Name).
- 3) On Functionality, click on Electronic Referrals.
- 4) Click on Save and Exit (The details of this information will appear in list view).

		Sea	rch Queue	Logout
Distribution List	Status *: Active 🗸			
<ul> <li>A statistic statistic</li> </ul>	User Name: jane.doe.nyc			
Distribution List	Effective Date (mm/dd/yyyy): 04/07/2016			
	Program: CMA - CCNS B	nson Ridge - 2MH 🗸		
	Functionality: Select One	v		

#### Save & Exit Cancel

Note: To remove electronic notification, Select New and change the Status to Inactive.

#### 1.2 <u>Remove Program Access</u>

- 1) On the left side of the Portal Page under *Admin/Support Tools*, click on the **User Mgmt Admin View.**
- Search for the user by entering User Name or Full Name (partial name may be entered) of the person. Click on Go.
- 3) Click the link under **User Name**.
- 4) Click on User Role.
- 5) Click on **Edit**.
- 6) Select the program you want to remove and click the **Delete** button next to the Agency Name.

				Search Queue Logour
User Admin	User Name: jane.doe.nyc	Agency:	Select One	~
Contact Information	Program: Select One 🗸	Role:	Select One 🗸	
User Information and Status	Add Role: Add Role			
User Roles	Agency	\$	Program 🔶	Role \$
Distribution List	Delete Catholic Charities Neighborhood Services Inc	Home Delivered Meals	- CCNS NEQ - 43H	Program User
	Delete			
		[< <prev] [next="">&gt;]</prev]>		
Save Save & Exit	Reset Passwd Cancel			

7) To add the program back, follow the steps in #8 under in 1.1 Creating New User.

#### 1.3 Inactivate User

- 1) On the left side of the Portal Page under Admin/Support Tools, click on User Mgmt Admin View.
- 2) Search for the user by entering *User Name* or *Full Name* (partial name may be entered) of the person. Click on **Go.**
- 3) Click the link under **User Name**.
- 4) Click on User Information & Status.
- 5) Click on Edit.
- 6) Change the user's Active Status to Inactive. The Expiry Date will auto-fill to the current date.

Samely Output Language

7) Click on **Save and Exit.** (Users should ONLY be inactivated. DO NOT DELETE USERNAMES.)

(**Note:** After 21 days of inactivity, a user account will automatically inactivate. To reactivate, please see section 1.4)

1.4 <u>Reactivate User</u>

- 1) On the left side of the Portal Page under Admin/Support Tools, click on User Mgmt Admin View.
- Search for the user by entering User Name or Full Name (partial name may be entered) of the person.
- 3) Under Status (Next to the Full Name Field) select **Inactive** and click on **Go**.
- 4) Click the link under **User Name**.
- 5) Click on User Information & Status.
- 6) Click on Edit.
- 7) Under Active Status, Select Active.
- 8) Click on **Save and Exit**.

		Peerplace Profile			
User Admin	Admin Please enter the username in a valid format. Usernames should be in all lowercase letters with no spaces.				
Contact Information	User Name *:	jane.doe.nyc			
User Information and Status	Billing/Allocation Entity:	NYC Department for the Aging / NYC Department for the Aging (271 used of 500 allocated)			
User Roles Distribution List	Default Program *:	CMA - CCNS Benson Ridge - 2MH			
	Activation Date *:	01/07/2016			
	The Expiry Date is for reference only inActive. It will be cleared if Status is	r. "Active Status" controls whether the user can login to PeerPlace or not. Expiry Date will be set to today's date when Status is changed to Select One - e.			
	Active Status:				
	Expiry Date:				
	User Category:	Select One			
	Comments:				
		(0 characters of 512 allowed)			
		[< <prev] [next="">&gt;]</prev]>			
Save Save & Exit	Reset Passwd Cance				

#### 1.5 Resetting Password

- 1) On the left side of the Portal Page under Admin/Support Tools, click on User Mgmt Admin View.
- Search for the user by entering User Name or Full Name (partial name may be entered) of the person. Click on Go.
- 3) Once in User Admin, at the bottom of the page, Click on **Reset Password**.

		Search Queu
Jser Admin	Please verify spelling is correct and names are entered in the correct fields	
Jser Aumin	Last Name *: Doe	Middle Initial:
Contact Information	First Name *: Jane	DOB(mm/dd/yyyy):
User Information and Status User Roles	Gender: Select One	
Distribution List User History	Address Line 1:	Address Line 2:
<u>Casa Indony</u>	City:	State: New York
	Zip:	Phone (Home) (###-####-####):
	Phone (Mobile) (###-######):	Phone (Work) (###-###-####):
	Ext:	Email Address *: JDoe@gmail.com
	Fax (###-###-####):	
$\sim$		[Next>>]

4) Copy the Password reset that appears on the top highlighted in Red (**Note**: For accuracy, do not write down password reset. Copy using the computer mouse or keyboard)

- 5) Go to Log-in Page and enter the Username and temporary password provided.
- 6) A screen will appear to change password. Fill out the information with New Password
- 7) Click on **Save and Exit**

Change Password			
Author		Modified BY	
Jane Doe		Jane Doe	
Change You	ır Password		
Current Password *:			
	Please remember your password. Contact the PeerP Passwords must be at least 8 characters in length. F and one numerical digit.	lace Helpdesk if you forget it. Passwords must contain at least one lowercase letter, one uppercase letter,	
New Password *:			
Confirm New Password *:			
Email Address: *	JDoe@gmail.com		
Default Program *:	Select One	]	
Save & Exit Cancel			

2.1 Delete Form Process

The purpose of the Delete Form Process is to remove forms that were created in error. (**Note:** For this exercise, the Financial B/E form in Case Management will serve as an example.)

 At the bottom of the form, Press the **Delete Form** button (A prompt will appear asking you to confirm that this form should be deleted. After clicking "OK" the form deletion request is sent to the Program Admin for Approval

					<u>Search</u>	<u>Queue</u>	Logout
Financial/B&E		Date (r	nm/dd/yyyy): 06/24/2	014			
Nutries Chatra		Are yo	u a Veteran?:				
Veteran Status     Living Expenses		Are you a disab	led Veteran?: No	Message from webpage			
Income and Reso		Are you the spouse of	of a Veteran?: No				
Benefits and Entil	tiements		Comments:	Are you sure you want to delete this form?			
				OK Cancel t>>			
Edit	Exit	Inherit to New	Delete Form				

Once the User sends a Deleted Form, Program Admin(s) have the ability to approve or reject the form deletion by going into the **Delete Process** Link, under Admin/Support Tools.

- 2) In Delete Process, click on the Link.
- 3) Select between the options presented below:
  - a. *Inherit to New* will create a copy of the form (Note: this option will only appear if the form has Inherit to New).
  - b. Approve Delete will send form for final deletion.
  - c. *Reject Delete* will keep the form and notify the user who submitted the request.
- 4) To move forward with the form deletion, select Approve Delete.

**Note:** A prompt will appear in red at the top stating the form deletion was approved and will be permanently deleted from STARS. The Program Admin <u>must</u> run the **Delete Process Report**.

<ul> <li>Form deletion Pending. Requested on</li> <li>Form deletion request awaiting review</li> </ul>		
		Search Queue Loqout
Financial/B&E	Date (mm/dd/yyyy): 06/24/2014	
Notenna Chabar	Are you a Veteran?:	
<u>Veteran Status</u> <u>Living Expenses</u>	Are you a disabled Veteran?: No	
Income and Resources	Are you the spouse of a Veteran?: No	
Benefits and Entitlements	Comments:	
	[Next>>]	
Edit Exit	Inherit to New Approve Delete Reject Delete	
2.2 Delete Process Re	port	

- To run this report: 1) Go to Report. 2) Select **New** Report.

Reports						Search	Queue	Logou
ype:		Date Range Start:		Sort Ascending:	۲	Sort By:		
Reports		Date Range End:		Sort Descending:	0	Description	~	
f you are waiting for a Re	port to complete, click the Go butto	on to refresh the page and see the current :	Status of the Report.					
Go Ex	xport to Excel Cancel							
New Report							11 R	esults
Description	Job Type	e Status	Author	Last Run Start	1	ast Run End	(	Dutput

#### 3) From the dropdown, select **Delete Process Report.**

the numan service	Select One	
Submit Report	Active Non-Served Clients Barcode Summary	Search Queue Lo
Report Details	Barcode/Bulk Unit - Event Unit Summary Caregiver Programs - Supplemental Quarterly Report	
Report Type *	CMA - Units Entry by Case Manager CMA - Waitlist & On Hold Client Report	
	Delete Process Report	
Status *	DFTA Event Roster Report Elder Abuse/Crime - Case Closing Aggregate Report	
Start Date *:	Elder Abuse/Crime - Client Aggregate Service Report Elder Abuse/Crime - Referral Details and Service Tickets	
End Date *:	Elder Abuse/Crime - Service Report - Abuser History Elder Abuse/Crime - Units Entry by Worker Report	
Cancel	Email List Emergency Preparedness Excel Report	
	Emergency Preparedness Report Event Mailing List Event Roster Report Foster Grandparents Program - Reporting Stats HDM Client Level Rpt HDDM Route Sheet Health Promotion - Big Apple Stroller Step Tracker Report Health Promotion - Evidence Based Programs Offered Onsite Health Promotion - Listing of Centers Health Promotion - Listing of Centers Health Promotion - Northly Statistics Health Promotion - Program List Report HIICAP Client Contact Upload HIICAP PAM Upload	Ven Netforthuide *

#### 4) Fill out the required fields.

Submit Report		<u>Search</u>	Queue	Logout
Report Details				
Report Type *	Delete Process Report			
Report Title *:	Delete Process			
Status *	Submit to Run 🗸			
Start Date *:	05/02/2016			
End Date *:	05/02/2016			
Program *: Cl	IA - CCNS Benson Ridge - 2MH			
Save & Exit Cancel				

#### 5) Click on **Save and Exit**.

#### Below is an example of the output:

Delete Date Range:	04/07/2016 through 04/07/2016				
Form Name	Client Name	Request Date	Requested By	Approval Date	Approved By

This is a detailed record of the report. When the user goes into the client's record, the form will no longer appear after this step.