**NC DIVISION OF AGING AND ADULT SERVICES**

**ARPA SHOPPING and ERRAND SERVICES**

**MONITORING TOOL**

**(Reference the requirements in Administrative Letter 22-02, Appendix D, pp. 39-41)**

**Part I: Program Verification**

Provider Agency:

Review Date:       State Fiscal Year:       Service code:

Agency Staff Interviewed:

Signature of Reviewer(s):

**Client Eligibility**

1. Each person served is aged 60 or older and is

unable to shop for personal items without help.  Yes  No

Documentation:

**Program Administration**

1. The provider has written policies and procedures

that outline what tasks may be provided under

Shopping & Errand services.  Yes  No

1. Program funds may not be used to purchase

food or other products needed by clients.  Yes  No

1. When shopping/errand aides provide shopping

assistance, it is the client’s decision where to shop.  Yes  No

1. The agency defines the scope of errand services offered,

such as pick-up/drop-off services (e.g., prescriptions),

banking, Post Office, etc., and the geographic area for

running errands.  Yes  No

1. The agency outlines options for the transport of clients

for shopping/errands and addresses requirements

for drivers’ licenses, vehicle inspections, and liability

insurance (e.g., for non-owned vehicles), as

appropriate for the agency’s scope of services.  Yes  No

1. The agency addresses how financial transactions will

be carried out (e.g., online ordering/payment/pick-up,

client shops and pays, or aide makes purchases on

behalf of client, etc.) and outlines documentation

requirements (e.g., receipts, receipt verification form

with client signature/date, etc.).  Yes  No

Documentation:

1. The provider maintains a written agreement with

each client based on the agency’s service options. ☐ Yes ☐ No

Documentation:

1. The provider has a process for meeting requirements

in the consumer contributions policy for clients

receiving Type I services. ☐ Yes ☐ No

Documentation:

**Service Documentation**

1. Shopping & Errand Services are tracked in ARMS as a

unit-based service (one unit = one hour). The hours of

service provided to each client are tracked and reported

in ARMS on a monthly basis. ☐ Yes ☐ No

Documentation:

1. The provider has a system of source documentation

(printed or digital) for Shopping & Errand Services

available for monitoring, including:

1. DAAS-101 Client Registration Forms  Yes  No
2. Written client agreements based on the

provider’s service options  Yes  No

Documentation:

1. Budget documents are on file (e.g., 732, 732 A, 732 A1).

If positions are funded, they are documented on the 732A1

or a similar budget document,  Yes  No

**Please explain any questions with extenuating circumstances:**

**Notes:**

# **Client Record Review and Unit Verification Worksheet for Shopping & Errand Services**

# DATE OF ASSESSMENT: Click or tap to enter a date. Page       of

# SERVICE PROVIDER:       MONTH AND YEAR REVIEWED:

* Attach to this worksheet the report used to select a random sample of clients and units. Identify the persons selected for the sample and the month(s) reviewed. Also attach copies of other worksheets, if appropriate for documentation.
* List on this worksheet the dates of any units (hours of service) that could not be verified by source documentation, if applicable.
* Provide information on disallowed units to the agency during the exit interview, including a copy of this completed worksheet if unverified units are found.

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| CLIENT NAME | Eligible client? | Date of most recent CRF? | DAAS-101 CRF is complete? | CRF updated at least every 12 months? | Written agreement on file for units reviewed? | # units reported | # units allowable and verified | # units to be adjusted in ARMS |
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| --- | --- |
| TOTAL UNITS NOT VERIFIED =      . Total units reported for all clients of this service in the month reviewed = | This represents       % of total units reported for the month reviewed. If 10% or more, expand the sample and select another month to review. |

# Signature of reviewer(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_       Date \_\_\_\_\_\_\_\_\_\_\_\_\_