

**SOCIAL SERVICES BLOCK GRANT
PROGRAM COMPLIANCE MONITORING TOOL
INSTRUCTIONS
(If element is N/A put 0 in Applicable column)**

Note: For questions with an asterisk (*) below, the client is categorically eligible for this service as a recipient of SSI, or an adult with transportation being provided in conjunction with protective services that remain in effect no longer than 12 months.

I. APPLICATION FOR SERVICES

A. Locate the DSS-5027 or agency equivalent form approved by the NCDSS.

2 = DSS-5027 or agency equivalent form is in the record.

1 = Agency form is not equivalent.

0 = No DSS-5027 or agency equivalent form in the record.

[10A NCAC 71R .0401 and .0405]

[Requirements for the Provision of Services Manual, Section II, A]

1. Determine if the name of specific service(s) that the client requested or needs is listed in section B, column 9 of the DSS-5027 or on agency equivalent form along with the date requested in section B, column 11.

2 = All services are listed.

1 = Only some services are listed or date is missing, or services(s) is abbreviated.

0 = No services are listed.

[10A NCAC 71R .0405]

[Requirements for the Provision of Services Manual, Section II, D.]

[SIS User's Manual, Section II.]

2. Determine that the applicant or representative signed and dated the form (section G of the DSS-5027, if the county uses the DSS-5027), or the written request for services, unless exempt or signed with (X). (See Attachment A)

2 = Form is signed and dated.

0 = Form is not signed and dated, and there is no documentation to indicate why not.

N/A = Signature is not required.

Note: If signing the DSS-5027 would create a barrier to receiving the service the client is not required to sign. If this is the reason it is not signed, it must be documented as such in the record. If it is not documented score 0, if it is documented score 2.

Note: A signature is ALWAYS required for Health Support Services, Family Planning Component.

OR

3. If the client signed with an (X), there must be a witness who also signed.

2 = There is an (X), dated, and a witness signature.

0 = There is no (X), no date or witness signature.

N/A = Client can sign his name or service exempt from signature. (See Attachment A)

[10A NCAC 71R .0405]

II. ELIGIBILITY CRITERIA FOR SERVICES

Using Attachment C, determine if the requested service(s) is provided without regard to income or is provided with regard to income. For services provided without regard to income, complete question A. below, and score question B. and C. as N/A. For services provided with regard to income, complete questions A., B., and C. below.

A. 2 = Documentation in record indicates client needs the service (meets the criteria for the target population for the specific service). (See Attachment C)

1 = Documentation does not clearly indicate need for the service.

0 = No documentation regarding need for service.

[10ANCAC 71R .0601

[Requirements for the Provision of Services Manual, Section IV, A]

B. Documentation indicates income unit information obtained (transportation only).

2 = Income information is documented.

1 = Income information is partially documented.

0 = No documentation of income

N/A = Service is provided without regard to income.

[10A NCAC 71R .0501 and .0601]

[Requirements for the Provision of Services Manual, Section IV and XI]

*C. 2 = Basis of client's income maintenance or income eligible status is documented.

0 = Basis of client's income maintenance or income eligible status is not documented.

N/A = Service requested is provided without regard to income.

[10A NCAC 71R .0501 and .0601]

[Requirements for the Provision of Services Manual, Section IV, A and B and Section XI]

NOTE: Poverty guidelines change annually. Refer to

<http://aspe.hhs.gov/poverty/08poverty.shtml> for the latest fiscal year guidelines.

III. DECISION ON ELIGIBILITY FOR SERVICES

A. Determine the date the eligibility decision was made for the service(s) (unless specifically documented otherwise, the date the social worker signed the DSS-5027 is considered the date of the eligibility decision).

2 = Date was within 30 calendar days of date of application or there is documentation as to why decision was more than 30 days (indication that the client is not cooperating and therefore decision is delayed beyond 30 days).

0 = Date was not within 30 calendar days of date of application, and there is no documentation as to why decision was more than 30 days.

N/A = No decision has been made on the application, and there is documentation to indicate Social Worker is waiting on information.

[10A NCAC 71R .0402

[Requirements for the Provision of Services Manual, Section IV, A]

- *B. 2 = Decision is consistent with eligibility criteria (target population) for the service.
(See Attachment C)
0 = Decision is not consistent with eligibility criteria (target population) for the service. (See Attachment C)

N/A = No decision has been made on the application, and there is documentation to indicate Social Worker is waiting on information; or the decision was to deny based on the lack of availability of the service or lack of funding.

[10A NCAC 71R .0602]

[Requirements for the Provision of Services Manual, Section IV, B.]

- *C. 2 = Eligibility period (in section C on the DSS-5027) is documented in the record for income based service (transportation). Ending date is twelve months from the date of the eligibility determination or redetermination.
1 = Eligibility period is unclear or incorrect in record (no ending date or wrong dates).
0 = No eligibility period is documented in the record.

N/A = No decision has been made on the application, and there is documentation to indicate Social Worker is waiting on information, or the eligibility decision was to deny services.

[10A NCAC 71R .0605]

[Requirements for the Provision of Services Manual, Section IV, D.]

- D. 2 = Purchase of service section D is complete and correct on DSS-5027 or the information is complete and correct on other documentation given to the provider.
1 = Purchase of service section D is incomplete and/or incorrect on DSS-5027 or the information is incomplete and/or incorrect on other documentation given to the provider.
0 = Purchase of service section D is not completed on the DSS-5027; there is no other documentation of this information being given to the provider; and there is purchase of service.
N/A = There is no purchase of service involved for this application or eligibility decision has not been made.

Note: In section D on the DSS-5027, the last line does not have to be completed if the DSS is responsible for collecting consumer contribution money. The provider does not need this information.

[10A NCAC 67A .0107]

[10A NCAC 71R .0104]

[SIS Manual, Section III]

- E. 2 = Effective (beginning) date of eligibility is documented in section C on DSS-5027 or on approved agency equivalent form.
1 = Effective date of eligibility is unclear or incorrect in record.
0 = Effective date of eligibility is not documented.
N/A = No decision has been made on the application.

Note: When the service is exempt from the Notice (see Attachment B) and the social worker has signed and dated Section F of the DSS-5027, either this date or an effective date otherwise documented in the record is the effective date of eligibility - score 2.

If date is after service is provided score 0 here.

[10A NCAC 71R .0605]

[Requirements for the Provision of Services Manual, Section IV, D.]

- F. 2 = Social Worker signed and dated (eligibility decision date) DSS-5027.
1 = Social Worker's signature OR date was missing on DSS-5027.
0 = No social worker signature or date on DSS-5027.
N/A = No decision has been made on the application or the client is receiving only APS (202 or 204 under court order) or is a ward of the county department of social services.

[10A NCAC 71R .0605]

[Requirements for the Provision of Services Manual, Section IV, D.]

- G. 2 = Notice of eligibility decision is mailed/given (except when exempt-see Attachment B) within 15 calendar days after the decision or within 30 days of application, whichever comes first.
1 = Notice is given/mailed, but not within specified timeframes (service not exempt from Notice).
0 = No notice given/mailed (service not exempt from Notice).
N/A = Client is exempt from receiving Notice (See Attachment B) or no eligibility decision has been made.

[10A NCAC 71R .0801]

[Requirements for the Provision of Services Manual, Section V, B.]

- H. 2 = Reason for denial is clearly stated in the notice and according to policy. (See Attachment F)
1 = Reason for denial is not clearly stated in the notice or not according to policy. (See Attachment F)
0 = No reason for denial is given.
N/A = Denial was not the basis for the decision, or no decision has been made on the application.

[10A NCAC 71R .0603]

[Requirements for the Provision of Services Manual, Section V, B.]

IV. ADDITIONAL SERVICE(S) REQUESTED OR NEEDED (may be client requested or assessed to be needed, such as APS)

- A. 2 = Additional name of service(s) requested is added to specific services on DSS-5027 or approved agency equivalent form.
1 = Some, but not all of requested services, are added to DSS-5027.
0 = Additional service(s) requested or needed are not added to DSS-5027.
N/A = There are no additional service(s) requested or needed.

[10A NCAC 71R .0405]

[Requirements for the Provision of Services Manual, Section II, D.]

[SIS User's Manual, Section II]

- *B. Determine that the client or representative signed and dated the form (Section G of the DSS-5027, if county uses the DSS-5027), or the written request for additional services, unless exempt or signed with an (X). (See Attachment A)
2 = Form is signed and dated.
0 = Form is not signed and dated and there is no documentation to indicate why not.
N/A = Signed application not required.

Note: If signing the DSS-5027 would create a barrier to receiving the service the client is not required to sign. If this is the reason it is not signed, it must be documented as such in the record. If it is not documented score 0, if it is documented score 2.

Note: A signature is ALWAYS required for Health Support Services, Family Planning Component.

OR

- C. If the client signed with an (X), there must be a witness who also signed.
2 = There is an (X), dated, and a witness signature.
0 = There is no (X), no date or witness signature.
N/A = Client can sign his name or service exempt from signature. (See Attachment A)
[10A NCAC 71R .0405]
[Requirements for the Provision of Services Manual, Section II]
- *D. 2 = Documentation in record indicates client needs the service (meets the criteria for the target population for the specific service). (See Attachment C)
1 = Documentation does not clearly indicate need for the service.
0 = No documentation regarding need for service.
[10ANCAC 71R .0501 and .0601]
[Requirements for the Provision of Services Manual, Section IV, A]
- *E. 2 = Basis of client's income maintenance or income eligible status is documented.
0 = Basis of client's income maintenance or income eligible status is not documented.
N/A = Service requested is provided without regard to income.
[10A NCAC 71R .0501 and .0601]
[Requirements for the Provision of Services Manual, Section IV, A and B and Section XI]
NOTE: Poverty guidelines change annually. Refer to <http://aspe.hhs.gov/poverty/08poverty.shtml> for the latest fiscal year guidelines.
- *F. 2 = Decision is consistent with eligibility criteria (target population) for the service. (See Attachment C)
0 = Decision is not consistent with eligibility criteria (target population) for the service.
N/A = No decision has been made on the application, and there is documentation to indicate Social Worker is waiting on information; or the decision was to deny based on the lack of availability of the service or lack of funding.
[10A NCAC 71R .0602]
[Requirements for the Provision of Services Manual, Section IV, B.]
- *G. 2 = Eligibility period (in section C on the DSS-5027) is documented in the record for income based service (transportation). Ending date is twelve months from the date of the eligibility determination or redetermination.
1 = Eligibility period is unclear or incorrect in record (no ending date or wrong dates).
0 = No eligibility period is documented in the record.
N/A = No decision has been made on the application, and there is documentation to indicate Social Worker is waiting on information, or the eligibility decision was to deny services.

[10ANCAC 71R .0605]

[Requirements for the Provision of Services Manual, Section V, D]

- H. 2 = Purchase of service, section D, is complete and correct on DSS-5027 or the information is complete and correct on other documentation given to the provider.
1 = Purchase of service, section D, is incomplete and/or incorrect on DSS-5027 or the information is incomplete and/or incorrect on other documentation given to the provider.
0 = Purchase of service, section D, is not completed on the DSS-5027; there is no other documentation of this information being given to the provider; and there is purchase of service.
N/A = There is no purchase of service involved for this application or eligibility decision has not been made.

Note: In section D on the DSS-5027, the last line does not have to be completed if the DSS is responsible for collecting consumer contribution money. The provider does not need this information.

[10ANCAC 67A .0107]

[10A NCAC 71R .0104]

[SIS Manual, DSS 5027 Section III]

- I. 2 = Effective (beginning) date of eligibility is documented in section C on DSS-5027 or on approved form.
1 = Effective date of eligibility is unclear or incorrect in record.
0 = Effective date of eligibility is not documented or effective date is after service is provided.
N/A = No decision has been made on the application.

Note: When the service is exempt from the Notice (see Attachment B) and the social worker has signed and dated Section F of the DSS-5027, either this date or an effective date otherwise documented in the record is the effective date of eligibility - score 2.

[10ANCAC 71R .0605]

[Requirements for the Provision of Services Manual, Section IV]

- J. 2 = Social Worker signed and dated (eligibility decision date) DSS-5027.
1 = Social Worker's signature OR date was missing on DSS-5027.
0 = No social worker signature or date on DSS-5027.
N/A = No decision has been made on the application or the client is receiving only APS (202 or 204 under court order) or the client is a ward of the county department of social services.

[10ANCAC 71R .0605]

[Requirements for the Provision of Services Manual, Section IV]

- K. 2 = Notice of eligibility decision is mailed/given (except when exempt-see Attachment B) within 15 calendar days of the date the request is made or received.
1 = Notice is given/mailed, but not within timeframes (service not exempt from Notice).
0 = No notice given/mailed (service not exempt from Notice).
N/A = No additional service(s) requested or needed or service is exempt from Notice.
[10ANCAC 71R .0801]

[Requirements for the Provision of Services Manual, Section V, B]

- L. 2 = Reason for denial is clearly stated in the notice and according to policy.
- 1 = Reason for denial is not clearly stated in the notice or not according to policy.
- 0 = No reason for denial is given.
- N/A = Decision was not denial or no decision has been made on the additional request for service.

[10A NCAC 71R .0603]

[Requirements for the Provision of Services Manual, Section V]

V. PROMPT SERVICE PROVISION

- A. Service provision means delivery of service directly by agency staff or delivery of service by another provider who is authorized by DSS to provide the service.
 - 2 = Documentation indicates that service is provided or arranged for within 15 calendar days of date Notice was mailed/given or 15 calendar days from the date the service was requested when exempt from Notice. If there is documentation as to why services could not be provided timely and/or attempts were made-score 2 points.
 - 1 = Service is provided, but not within 15 days of Notice, no documentation as to why not.
 - 0 = No service provided.
 - N/A = Client placed on waiting list, service denied, or eligibility decision not yet made.

[10A NCAC 71R .0803]

[Requirements for the Provision of Services Manual, Section VI]

- B. 2 = For service(s) added after initial application, service is provided within 30 calendar days of the request.
 - 1 = Service(s) provided, but not within required timeframes.
 - 0 = Service(s) not provided.
 - N/A = No additional service(s) requested or needed, or client unavailable to receive service, or client placed on waiting list, or service denied, or eligibility decision on this service not yet made.

[10A NCAC 71R .0803]

[Requirements for the Provision of Services Manual, Section VI]

- C. 2 = The client is on a waiting list. The agency has a written local waiting list policy approved by the Board of Social Services which designates the list as a waiting list for meeting prompt provision requirements or simply an inquiry list or both, and gives equitable guidelines on priority for specific services, and limits the time the individual is on the list to 90 days or less.
 - 1 = The client is on a waiting list. The agency has a local waiting list policy, but it does not fulfill the above requirements.
 - 0 = The client is on a waiting list. The agency has a waiting list, but does not have a policy for it.
 - N/A = The client is not on a waiting list for the SSBG service(s) being monitored.

[10A NCAC 71R .0803]

[Requirements for the Provision of Services Manual, Section VI]

- D. 2 = Contacts are documented on the day sheet and correspond with a service code listed on the client's DSS-5027, and the appropriate program code is used.
1 = Only some of the contacts are on the day sheet, OR
the service code used is not listed on the client's DSS-5027, OR
the program code used is incorrect.
0 = Contacts are not documented on the day sheet.

[10A NCAC 67A .0107]

[SIS Manual, DSS-4263 Instructions for Worker Daily Report of Services]

- E. 2=All day sheet entries have supporting record documentation.
1=Some day sheet entries have supporting record documentation.
0=None of the day sheet entries has supporting record documentation.

Note: Summary dictation is acceptable when a clear determination can be made from the dictation that allowable activities are the basis of the day sheet entry. Match specific day sheet entries to case record's summary dictation or other supporting case record documentation. If the basis of the day sheet entries is not clear in the case record, regardless of whether there is summary dictation or corresponding entries, lower scores on the tool are indicated.

[10A NCAC 71R .0303]

[OMB Circular A-87]

[Requirements for the Provision of Services Manual, Section X]

[SIS Manual, DSS-4263 Instructions for Worker Daily Report of Services]

VI. ONGOING SERVICE PROVISION AND REDETERMINATIONS

- A. 2 = Documentation indicates ongoing eligibility (i.e., the client meets the target population) is assessed quarterly (within the month it is due based on the effective date for the service). Transportation is exempt from quarterly review.
1 = Documentation indicates ongoing eligibility is assessed less often than quarterly (after the month it is due).
0 = No ongoing eligibility assessment is documented.
N/A = Service is terminated before 3 months, or service was denied, or eligibility decision on application not yet made, or service is exempt (transportation).

Note: Quarterly reviews conducted within the identified sample months for monitoring are applicable. If a quarterly review has occurred, review the documentation and score accordingly. If a quarterly review has not occurred, this question is not applicable.

[10A NCAC 71R. 0606]

[Requirements for the Provision of Services Manual, Section VII]

- *B. 2 = Documentation reflects eligibility is reviewed within 30 days of a reported change in need for services (relates to all services regardless of whether they are provided with or without regard to income) OR for services provided with regard to income (transportation), a change in income.
0 = Documentation reflects eligibility is not reviewed within 30 days of a reported change in need or income.
N/A = No reported change in need or income indicated in record.

[10A NCAC 71R. 0604]

[Requirements for the Provision of Services Manual, Section IV]

- C. 2 = For In Home Aide Services, documentation indicates that a reassessment is completed at least every 12 months in the month it is due.
1 = Documentation indicates that a reassessment is completed less often than every 12 months (the reassessment is completed after the month it is due).
0 = No annual reassessment is completed for In Home Aide Services.
N/A = Service is terminated before 12 months expire, a service is requested other than In-Home Aide Services.
[10A NCAC 71R .0501, .0601, and 10A NCAC 06X .0206]
[Requirements for the Provision of Services Manual, Section IV]

- *D. 2 = Documentation for services provided with regard to income (transportation) indicates eligibility is redetermined every 12 months prior to expiration of eligibility period.
1 = Documentation indicates eligibility is redetermined, but after the expiration of eligibility period (it is completed late).
0 = Documentation does not indicate eligibility is redetermined every 12 months (there is no 12 month redetermination in the record).
N/A = Service does not require redetermination of eligibility every 12 months
[10A NCAC 71R .0604]
[Requirements for the Provision of Services Manual, Section IV]

VII. SERVICES THAT ARE SUBJECT TO CONSUMER CONTRIBUTIONS (See Attachment D)

- A. 2 = Documentation indicates that the client is above poverty guideline and has received a copy of the Recommended Contribution Schedule.
1 = Documentation indicates the Social Worker reviewed the Recommended Contribution Schedule with the client; however there is no documentation that the client received a copy.
0 = Documentation does not indicate that the Recommended Contribution Schedule was used or given to the client.
N/A = Service is not subject to consumer contribution, or client in exempt group for consumer contribution, or client is at or below poverty level.
[10 NCAC 71S .0206]
[Consumer Contributions Manual, Section IV]

B. Provider Assurance Form:

1. 2 = The Provider Assurance Form indicates the contribution is voluntary and with no obligation to contribute.
0 = The Provider Assurance Form does not indicate that the contribution is voluntary and with no obligation to contribute.
N/A Service is not subject to consumer contribution, or client in exempt group for consumer contribution.
[10NCAC 71S .0206]
[Consumer Contributions Manual, Section IV]

2. 2 = Purpose of the consumer contribution is on the form.
0 = Purpose of the consumer contribution is not on the form.
N/A = Service is not subject to consumer contribution, or client in exempt group for consumer contribution.
[10 NCAC 71S .0205]
[Consumer Contributions Manual, Section IV]
3. 2 = Information about client's participation shall be confidential is on the form.
0 = Information about client's participation shall be confidential is not on the form.
NA = Service is not subject to consumer contribution, or client in exempt group for consumer contribution.
[10 NCAC 71S .0205]
[Consumer Contributions Manual, Section IV]
4. 2 = Contact information, including name and telephone number for questions regarding consumer contribution is provided on the form.
0 = Contact information, including name and telephone number for questions regarding consumer contribution is not provided on the form.
N/A = Service is not subject to consumer contribution, or client in exempt group for consumer contribution.
[10 NCAC 71S .0205]
[Consumer Contributions Manual, Section IV]
5. 2 = Total cost of the service is on the consumer contribution form.
0 = Total cost of the service is not on the Form.
N/A = Service is not subject to consumer contribution, or client in exempt group for cost sharing.
[10 NCAC 71S .0205]
[Consumer Contributions Manual, Section IV]
6. 2 = Form has a statement that services will not be reduced or terminated for failure to contribute.
0 = Form does not have a statement that services will not be reduced or terminated due to failure to contribute.
N/A = Service is not subject to consumer contribution, or client in exempt group for cost sharing.
[10 NCAC 71S .0205]
[Consumer Contributions Manual, Section IV]

VIII. REDUCTION OR TERMINATION OF SERVICES

- A. 2 = Documentation indicates Notice is mailed/given to client at least 10 working days prior to effective date of the change.
1 = Documentation indicates that Notice was mailed/given to client, but not within specified timeframes.
0 = No documentation that Notice was mailed given.
N/A = Documentation indicates Notice not required (see Attachment B for reasons for exemption), or there has been no reduction or termination of service--case is ongoing.

[NCGS 108A-79]
[Requirements for the Provision of Services Manual, Section V]

- B. 2 = Reason for the reduction or termination according to policy.
1 = Reason for the reduction or termination according to policy, but is not stated on the Notice.
0 = Reason is not in accordance with policy.
N/A = Documentation indicates Notice was not required (see Attachment B for reasons for exemption), or there has been no reduction or termination of service--case is ongoing.

[10A NCAC 71R .0603]
[Requirements for the Provision of Services Manual, Section IV. C.]

- C. 2 = Reason for the reduction or termination clearly stated for the client on the Notice.
1 = Reason for reduction or termination of service not clearly stated for the client on the Notice.
0 = No reason is given in the Notice as to why the service is being reduced or terminated.
N/A = Documentation indicates Notice was not required (see Attachment B for reasons for exemption), or there has been no reduction or termination of service--case is ongoing.

[10A NCAC 71R .0603]
[Requirements for the Provision of Services Manual, Section IV]

LIST OF ATTACHMENTS

- A. Situations that do not require applicant/representative signature or mark
[10A NCAC 71R .0401]
- B. Exemptions from notification
[10A NCAC 67A .0202]
- C. List of service specific eligibility criteria
[10A NCAC 71R .0900]
- D. Services that require consumer contributions/type cases that are exempt
[10 NCAC 71S .0201]
- E. Basis for Denial or Termination of Services
[10A NCAC 71R .0603]

ATTACHMENT A

SITUATIONS THAT DO NOT REQUIRE APPLICANT/REPRESENTATIVE SIGNATURE AND DATE

1. APS (202 and 204 under court order) *
2. Wards of the county DSS

* In Section IV (Additional Services Requested) B. & C., there are additional considerations. In situations where 204 is provided with the client or guardian consent (i.e., no court order), the client's or guardian's signature is required on the DSS-5027. When the Client Consent for the Provision of Protective Services Form (Appendix H of the APS manual) is signed by the client or guardian authorizing services, a client or guardian signature on the DSS-5027 is not required.

EXCEPTIONS FOR NOTIFICATION

Except as otherwise provided by applicable program specific federal regulations, the county department of social services does not need to provide notification of action to the client when:

1. The agency is terminating services based on factual information confirming the death of the client;
2. The provision of protective services to children or protective services-evaluation to adults is initiated or terminated;
3. The county department of social services has applied for services in behalf of an individual for whom they have custody or guardianship for adults;
4. The county department of social services has applied for services in behalf of an individual who is incompetent incapacitated; or
5. The service is terminated at the end of a period of eligibility and the recipient has not requested that the services be continued.

Attachment C

SERVICE DEFINITIONS AND ADULT TARGET POPULATIONS FOR SSBG SERVICES

SECTION .0900 - SERVICE DEFINITIONS

10A NCAC 71R .0902 COMMUNITY LIVING SERVICES

(a) Primary Service. Community living services are provided to support continuation of the individual's family or community-based situation, or to prepare him for leaving institutional care and facilitate his transition to living in the community. Such services include training in community living skills and work activity training commensurate with the individual's age and developmental level; recreational and other activities which promote normalization outside an institutional setting; and assistance in arranging for and utilizing community services and resources which support this regimen of services. On an optional basis, services may also include remedial and treatment services necessary to ameliorate the handicapping effects of the disability which prevent or constrain personal, social, and work adjustment (e.g., physical therapy, speech therapy), and food and food services to provide a nutritious meal and snacks during the time clients participate in on-site services; and transportation when needed and not otherwise available to access community living services programs.

(b) Components. None.

(c) Resource Items. None.

(d) Target Population:

- (1) individuals who are mentally retarded;
- (2) individuals who are severely physically disabled.

*History Note: Authority G.S. 143B-153;
Eff. July 1, 1979;
Transferred from T10.43D .0234 Eff. July 1, 1983;
Amended Eff. July 1, 1984.*

10A NCAC 71R .0903 DAY CARE SERVICES FOR ADULTS

(a) Primary Service. Day care services for adults is the provision of an organized program of services during the day in a community group setting for the purpose of supporting adults' personal independence, and promoting their social, physical, and emotional well-being. Services must include a variety of program activities designed to meet the individual needs and interests of the participants, and referral to and assistance in using appropriate community resources. Also included are medical examinations required for individual participants for admission to day care and periodically thereafter when not otherwise available without cost, and food and food services to provide a nutritional meal and snacks as appropriate to the program. Services must be provided in a home or center certified to meet state standards for such programs. Services include recruitment, study and development of adult day care programs, evaluation and periodic re-evaluation to determine if the programs meet the needs of the individuals they serve, and consultation and technical assistance to help day care programs expand and improve the quality of care provided. Transportation to and from the service facility is an optional service that may be provided by adult day care programs.

(b) Target Population. Adults who because of age, disability or handicap need the service to enable them to remain in or return to their own homes. Within the target population, eligible clients shall be provided day care services for adults in the following order of priority:

- (1) adults who require complete, full-time daytime supervision in order to live in their own home or prevent impending placement in substitute care (e.g. nursing home, domiciliary home), and adults who need the service as part of a protective services plan;
- (2) adults who need help for themselves with activities of daily living or support for their caregivers in order to maintain themselves in their own homes or both;

- (3) adults who need intervention in the form of enrichment and opportunities for social activities in order to prevent deterioration that would lead to placement in group care;
- (4) individuals who need time-limited support in making the transition from independent living to group care, or individuals who need time-limited support in making the transition from group care to independent living.

History Note: Authority G.S. 143B-153;
 Eff. February 8, 1977;
 Amended Eff. July 1, 1982; October 1, 1979; July 1, 1979; October 1, 1977;
 Transferred from T10.43D .0204 Eff. July 1, 1983;
 Amended Eff. May 1, 1990; July 1, 1984;
 Temporary Amendment Eff. October 1, 2001;
 Amended Eff. August 1, 2002.

10A NCAC 71R .9305 EMPLOYMENT AND TRAINING SUPPORT SERVICES

- (a) Primary Service. Employment and training support services are services provided as part of an individual service plan to enable appropriate individuals to secure paid employment or training leading to employment, including basic education and continuing education. Services include counseling to explore with the individual his current readiness or potential for employment and to assess the feasibility of seeking training or employment in relation to the total needs of the family; providing information about and referral to educational resources, training programs, and possible sources of employment; and counseling and information to encourage and support the individual's employment objectives with respect to such topics as grooming, how to apply to appropriate resources, employer expectations, and constructive resolution of work related problems. Also included is arrangement for or provision of general and specialized diagnostic tests and evaluations to assess the individual's potential for employment and any limitations which affect employment or training. Transportation, when needed to enable individuals to make application and interview for employment and to participate in training leading to employment, may be provided on an optional basis.
- (b) Components. None.
- (c) Resource Items. At provider option, payment for resource items may be provided to facilitate the provision of employment and training support services. Resource items include tuition, supplies, and rental or purchase of books when needed to assist in meeting the usual expenses of obtaining vocational training, basic education, or a high school education or its equivalent in public or private technical institutes or community colleges; lunches, uniforms, and subject to state office approval, tools and other equipment necessary to enable individuals to accept training or employment when such items are not otherwise available.
- (d) Target Population. Individuals who are unable to obtain or retain adequate employment.

History Note: Authority G.S. 143B-153;
 Eff. February 8, 1977;
 Amended Eff. October 1, 1979; July 1, 1979; October 1, 1978; October 1, 1977;
 Transferred from T10.43D .0208 Eff. July 1, 1983;
 Amended Eff. July 1, 1984.

10A NCAC 71R .0906 FOSTER CARE SERVICES FOR ADULTS

- (a) Primary Service. Foster care services for adults means recruitment, study and development of family care homes and group care facilities; evaluation and periodic re-evaluation to determine if the home or facility meets the needs of the individuals it serves; and consultation and technical assistance to help family care homes and group care facilities to expand and improve the quality of care provided.
- (b) Components. None.
- (c) Resource Items. None.
- (d) Target Population. Aging, blind, or disabled individuals (18 years or older) or other adults needing to find licensed substitute homes when unable to stay in own home or moving out of institutional care.

History Note: Authority G.S. 143B-153;
 Eff. February 8, 1977;

*Amended Eff. October 1, 1979; October 1, 1977;
Transferred from T10.43D .0210 Eff. July 1, 1983;
Amended Eff. March 1, 1994; May 1, 1990; July 1, 1984.*

10A NCAC 71R .0908 HEALTH SUPPORT SERVICES

(a) Primary Service. Health support services means helping individuals and families to recognize health needs including those related to alcohol and drug abuse; to cope with incapacities and limited functioning resulting from aging, disability, or handicap and to choose, obtain and use resources and mechanisms of support under Medicaid (including the early and periodic screening, diagnosis and treatment program), Medicare, maternal and child health programs and from other public or private agencies or providers of health services; counseling and planning, as appropriate, with individuals, families, and health providers to help assure continuity of treatment and the carrying out of health recommendations; helping individuals to secure admission to medical institutions and children to secure admission to other health-related facilities as needed; and family planning services as described in Paragraph (b) of this Rule. At county option, transportation, when not otherwise available, may be provided as necessary to access needed medical and health care resources.

(b) Components. Family planning services to enable individuals and families to voluntarily limit the family size or to space the children, and to prevent or reduce the incidence of births out of wedlock. Such services include educational activities, the provision of printed materials, counseling about family planning and genetics, and help in utilizing medical and educational services available in the community and state. Also included are educational services in human sexuality appropriate to an individual's emotional and social adjustment and physical development.

(c) Optional Resource Items.

- (1) Medical Services: For individuals who are recipients of AFDC, SSI, or protective services or whose family income is less than 80 percent of the state's established income maximum for social services eligibility, payment for medical services for nontherapeutic sterilization.
- (2) Resources for the Aging, Disabled or Handicapped. At county option any combination of the following resource items may be provided as needed and appropriate to enable aging, disabled or handicapped individuals to attain or maintain the highest level of functioning possible, to promote their well-being and to prevent or reduce inappropriate institutional care:
 - (A) Assistance with communication to enable individuals to utilize needed health and medical resources and other community services and resources through the provision of interpreters for the deaf and the provision of telephones when not otherwise available for the aging, disabled, or handicapped who are alone and homebound, or who have a health or medical condition which necessitates ready access to or frequent use of a telephone in their home.
 - (B) Mobility assistance for aging, disabled and handicapped persons, through the installation of ramps, rails and other safety measures at the individual's home and the provision of escort service to health facilities and other needed resources for individuals unable to travel or wait alone.
 - (C) Arranging for or providing friendly visitors or companions for part of a day to assist individuals who, because of frailty, physical or mental disability or social isolation, have limited contacts with other people. Such companionship service offers mental and physical stimulation and provides an opportunity for observation as to the need for professional help of any kind.
 - (D) Provision of special health needs and supplies such as ostomy supplies, oxygen, bandages, orthopedic and other appliances needed by aging and disabled individuals in their own homes and not available through Medicaid, Medicare or resources without cost.

(d) Target Population:

- (1) individuals or families experiencing health related problems;
- (2) for the family planning component, individuals (male or female) who are of age to produce children.

*History Note: Authority G.S. 143B-153;
Eff. February 8, 1977;
Amended Eff. March 1, 1983; September 1, 1982; March 1, 1982; October 1, 1979;
Transferred from T10.43D .0212 Eff. July 1, 1983;
Amended Eff. March 1, 1994; July 1, 1984;
Temporary Amendment Eff. October 21, 1996;
Amended Eff. July 1, 1998.*

10A NCAC 71R .0909 HOUSING AND HOME IMPROVEMENT SERVICES

(a) Primary Service. Housing and home improvement services means assistance to individuals and families in obtaining or retaining adequate housing and basic furnishings or appliances, or both. The service has three elements:

- (1) Provision of counseling, advocacy and training to individuals or to groups;
- (2) Provision of labor and materials for renovations and repairs to dwellings to remedy conditions which are a risk to the personal health and safety of individuals or families or to enhance mobility for functionally impaired individuals; and
- (3) Provision of basic furnishings or appliances, or both, to remedy deficiencies which pose a risk to the basic health and safety of individuals and families.

(b) Components. None.

(c) Resource Items. None.

(d) Target Population. Individuals or families needing one or more elements of the service, such as counseling, advocacy, and training; renovations or repairs to dwellings; or basic furnishings or appliances, to obtain or retain adequate housing that enables them to remain in, or return to, their own homes and alleviates risk to their personal health and safety. Persons acting on behalf of an eligible client may be allowed to access the service. Within the target population eligible clients must be served in the following order of priority:

- (1) adults and children for whom the need for protective services has been substantiated and the service is needed as part of a protective services plan as defined in 10A NCAC 71R .0915 and .0916, including all subsequent amendments. Copies of these Rules may be obtained from the Office of Administrative Hearings, 6714 Mail Service Center, Raleigh, NC 27699-6714, (919) 733-2678 at a cost of two dollars and fifty cents (\$2.50) for up to 10 pages plus applicable sales tax;
- (2) adults who are at risk of abuse, neglect or exploitation and children who are at risk of abuse, neglect, or dependency as defined in 10A NCAC 22O .0121, including all subsequent amendments. Copies of this Rule may be obtained from the Office of Administrative Hearings, 6714 Mail Service Center, Raleigh, North Carolina, 27699-6714, (919) 733-2678 at a cost of two dollars and fifty cents (\$2.50) for up to 10 pages plus applicable sales tax;
- (3) adults with extensive ADL or IADL impairment who are at risk of placement in substitute care and children who are at risk of placement in substitute care;
- (4) children who need the service as part of a plan of preventive services designed to strengthen the family and preserve the home for the child, or as part of permanency planning to enable a child to return home from substitute care; and adults with three or more ADL or IADL impairments;
- (5) adults with one or two ADL or IADL impairments.

(e) The terms ADL and IADL as used in this Section are defined in 10A NCAC 06W .0101, including all subsequent amendments. A copy of this Rule may be obtained from the Office of Administrative Hearings, 6714 Mail Service Center, Raleigh, North Carolina, 27699-6714, (919) 733-2678 at a cost of two dollars and fifty cents (\$2.50) for up to 10 pages plus applicable sales tax.

*History Note: Authority G.S. 143B-153;
Eff. February 8, 1977;
Amended Eff. July 1, 1982; October 1, 1980; October 1, 1979; October 1, 1977;
Transferred from T10.43D .0215 Eff. July 1, 1983;
Amended Eff. December 1, 1992; July 1, 1984.*

10A NCAC 71R .0910 INDIVIDUAL AND FAMILY ADJUSTMENT SERVICES

(a) Primary Service. Individual and family adjustment services are designed to offer assistance to individuals and their family members in support of attempts to restructure or solidify the individual's environment. Activities include counseling to enable the individual to recognize, understand, and cope with problems and conflicts in regard specifically to such areas as household management, consumer affairs, family life, alcoholism, drug addiction, mental retardation, emotional disturbance, and school related problems. Such counseling is also designed to help individuals independently utilize community resources, including other social services; take advantage of natural support systems; and achieve an adequate level of functioning within the family. Also included is arranging for other services when needed to support the provision of individual and family adjustment services; diagnostic psychological study and evaluation necessary to determine the appropriate plan of service; activities associated with fulfilling the agency's responsibility to serve as guardian or representative payee for individual clients; and social development through therapeutic groups as a part of a service plan to give individuals opportunities for participation in structured group activities focused on helping them cope with personal problems, develop capacities for more adequate social functioning and relieve social isolation.

(b) Components. Day or residential camp experience for school-age children and therapeutic camp for developmentally disabled or handicapped individuals and their families and for youths whose behavior is delinquent or undisciplined may be provided at county option.

(c) Resource Items. None.

(d) Target Population:

- (1) individuals who need assistance in order to fully and appropriately utilize social services;
- (2) individuals who need assistance in coping with specific problems, such as household management, consumer affairs, family life, alcoholism, drug addiction, mental retardation, emotional disturbance, and school related problems.

*History Note: Authority G.S. 143B-153;
Eff. July 1, 1979;
Transferred from T10.43D .0237 Eff. July 1, 1983;
Amended Eff. July 1, 1984; December 1, 1983.*

10A NCAC 71R .0911 IN-HOME AIDE SERVICES

In-home aide services are provided to enable individuals and families to remain in or return to their own homes and communities. To this end, at least one level of this service must be available in each geographic area.

- (1) Primary Service. In-Home Aide Services are those paraprofessional services which assist individuals and children and their families with essential home management tasks, personal care tasks, or supervision, or all of the tasks in this Paragraph, to enable individuals and children and their families to remain, and function effectively, in their own homes as long as possible.
- (2) Component. In-Home Aide Services may be used for the purpose of providing respite for a primary caregiver or for parents. For this purpose, In-Home Aide Services may be provided to individuals in their own homes or in the home of their primary caregiver and to children and their families in their own homes. Respite Care may consist of any level of home management or personal care tasks.
- (3) Resource Items. None.
- (4) Target Population. Individuals who are unable to carry out tasks essential to the activities of daily living or the instrumental activities of daily living, or both, who have no responsible person available to perform these tasks, and who need the service in order to remain in their own homes. Children and their families who need help remaining in their own homes, or who need help in maintaining, strengthening, and safeguarding their functioning because of economic dependency, physical or emotional illness or handicap or to preserve and strengthen family functioning. Also included are children and functionally impaired individuals whose primary caregivers or parents need relief from everyday caregiving responsibilities in order for the children and impaired individuals to remain at home. Within the target population eligible clients must be served in the following order of priority:

- (a) adults and children for whom the need for protective services has been substantiated and the service is needed as part of a protective services plan;
- (b) adults who are at risk of abuse, neglect or exploitation and children who are at risk of abuse, neglect, or dependency;
- (c) adults with extensive ADL or IADL impairment who are at risk of placement in substitute care and children who are at risk of placement in substitute care;
- (d) children who need the service as part of a plan of preventive services designed to strengthen the family and preserve the home for the child, or as a part of permanency planning to enable a child to return home from substitute care; and adults with three or more ADL or IADL impairments;
- (e) adults with one or two ADL or IADL impairments.

History Note: Authority G.S. 143B-153;
 Eff. July 1, 1979;
 Amended Eff. July 1, 1982; October 1, 1981; October 1, 1980; October 1, 1979;
 Transferred from T10.43D .0238 Eff. July 1, 1983;
 Amended Eff. December 1, 1991; May 1, 1985; July 1, 1984.

10A NCAC 71R .0912 PERSONAL AND FAMILY COUNSELING

- (a) Primary Service. Personal and family counseling means the rendering of counseling services or therapy to individuals, either singly or in groups, for the purpose of resolving emotional conflicts within social relationships. It operates through a process of mobilizing the strengths inherent in the person which are needed to deal with immediate situations and developing the coping ability of the family and its members to use themselves effectively in life roles and tasks. The process involves a professional relationship with a skilled counselor to help the clients assess the situation, to plan steps for dealing with it, and to take appropriate action.
- (b) Components. None.
- (c) Resource Items. None.
- (d) Target Population. Individuals experiencing stress which impedes satisfactory emotional adjustment and is causing serious conflicts in interpersonal relationships.

History Note: Authority G.S. 143B-153;
 Eff. February 8, 1977;
 Amended Eff. October 1, 1979;
 Transferred from T10.43D .0219 Eff. July 1, 1983;
 Amended Eff. May 1, 1990; July 1, 1984.

10A NCAC 71R .0913 PREPARATION AND DELIVERY OF MEALS

- (a) Primary Service. This service means the preparation and delivery of nutritious meals to a blind, aging, or disabled individual in his own home or in a central dining facility as necessary to prevent institutionalization or malnutrition. The cost of raw food necessary to provide the meal service is included.
- (b) Components. None.
- (c) Resource Items. None.
- (d) Target Population. Blind, aging, or disabled individuals needing nutritious meals in their own home or in a central dining facility as necessary to prevent malnutrition or institutionalization. Within the target population, eligible clients shall be provided meal services in the following order of priority:
 - (1) aged or disabled individuals who need the service to avoid impending placement in substitute care (e.g. nursing home, domiciliary home, foster home) and adults who need the service as part of a protective services plan;
 - (2) aged or disabled adults who live alone and need the service to maintain self-sufficiency and prevent deterioration that may lead to placement in substitute care;
 - (3) aged and disabled individuals who can receive some needed care from others but who need the service to enable their caregivers to maintain employment or to otherwise support the caregiver's efforts to keep them in their own homes.

History Note: Authority G.S. 143B-153;

Eff. February 8, 1977;
Amended Eff. July 1, 1982; October 1, 1979;
Transferred from T10.43D .0220 Eff. July 1, 1983;
Amended Eff. July 1, 1984.

10A NCAC 71R .0915 PROTECTIVE SERVICES FOR ADULTS

(a) Primary Service. Protective services for adults are services provided to correct or prevent further abuse, neglect, exploitation or hazardous living conditions of individuals 18 years of age or older or lawfully emancipated minors who are unable to manage their own resources, carry out the activities of daily living or protect their own interests. Services include acceptance and evaluation of reports of the need of individuals for protective services; planning and counseling with such individuals and their relatives or caretakers to identify, remedy or prevent problems which result in abuse, neglect or exploitation; assisting in arranging for appropriate alternate living arrangements in the community or in an institution; and arranging for the provision of medical, legal and other services as needed and appropriate. Also included are assistance in arranging for protective placement, guardianship or commitment when needed as part of the protective services plan, and carrying out the duties of guardian or representative payee when part of a protective services plan; and the provision of medical and psychological diagnostic studies and evaluations where needed to substantiate and assess the circumstances of abuse or neglect. At its option, the county may provide advocacy, including legal services, to assure receipt of rights and entitlements due to adults at risk, and services of lawyers to represent the agency where court action is necessary to protect adults.

(b) Components. None.

(c) Resource Items. None.

(d) Target Population. "Disabled" adults (18 years or older or lawfully emancipated minor) who are unable to manage their own resources, carry out activities of daily living, or protect their own interests.

History Note: Authority G.S. 143B-153;
Eff. February 8, 1977;
Amended Eff. October 1, 1981; October 1, 1979; October 1, 1977;
Transferred from T10.43D .0222 Eff. July 1, 1983;
Amended Eff. May 1, 1990; July 1, 1984; December 1, 1983.

10A NCAC 71R .0918 TRANSPORTATION SERVICES

(a) Primary Service. Transportation services mean providing transportation as part of a service plan to enable individuals for whom transportation is not otherwise available to have access to medical and health resources, shopping facilities, education, recreational and employment and training opportunities, and other community facilities and resources, and to support the delivery of other social services.

(b) Components. None.

(c) Resource Items. None.

(d) Target Population. All individuals in need of the service who meet the general eligibility criteria.

History Note: Authority G.S. 143B-153;
Eff. February 8, 1977;
Amended Eff. July 1, 1979;
Transferred from T10.43D .0230 Eff. July 1, 1983;
Amended Eff. July 1, 1984.

10A NCAC 71R .0919 ADULT PLACEMENT SERVICES

(a) Primary Service. Adult Placement Services are activities necessary to assist aging or disabled individuals and their families or representatives in finding substitute homes or residential health care facilities suitable to their needs when they are unable to remain in their current living situations. Activities include completing an initial screening and assessment while providing counseling to help the individual and his family or representative to determine the need for initial or continued placement; assisting in the process for completing necessary financial applications and medical evaluations; helping to locate and secure placement in a suitable setting and level of care; supporting an individual and his family or representative in the individual's transition from one location to another; and providing counseling and

other services to help the individual adjust to the new setting and maintain the placement. Adult Placement Services also include assisting individuals, when requested, to return to more independent settings in the community, or to relocate in more appropriate settings when new levels of care are needed.

Adult Placement Services must be provided by every county department of social services.

(b) Components. None.

(c) Resource Items. None.

(d) Target Population. An individual is considered to be in the target population if Adult Placement Services are appropriate and desired based on one of the following client needs:

- (1) Adults who are unable to maintain themselves in their own homes independently or with available community or family supports.
- (2) Adults who are living in substitute homes, residential health care facilities or institutions, and who need assistance in relocating due to changes in the level of care needed or other factors indicating that alternative settings may be more appropriate.
- (3) Adults who are living in substitute homes, residential health care facilities or institutions, and who need assistance in returning to more independent living arrangements in the community.
- (4) Adults who are living in substitute homes or residential health care facilities, and who need assistance in adjusting to or maintaining their placements due to individual or family problems or a lack of resources.

This target population includes wards for whom the director or assistant director of the county department of social services is the guardian.

(e) Once an individual is determined to be in the target population, Adult Placement Services are provided in the following order of priority:

- (1) Adults receiving protective services for whom Adult Placement Services is in their protective services plans.
- (2) Adults who are at risk of abuse, neglect, or exploitation because:
 - (A) they need assistance with activities of daily living, instrumental activities of daily living, or health care and they have no caregiver, or the caregiver is not able, willing or responsible to provide the amount or type of assistance needed;
 - or
 - (B) they were previously abused, neglected or exploited and the conditions leading to that situation continue to exist.
- (3) Adults who have problems which place them at risk of losing their current living situations.
- (4) Adults who do not meet any of the first three priority groups but whose quality of life would be improved with Adult Placement Services.

*History Note: Authority G.S. 143B-153;
Eff. March 1, 1994.*

ATTACHMENT D

Services that are subject to consumer contributions
TYPE CASES THAT ARE EXEMPT
[10 NCAC 71S .0201]

**SERVICES SUBJECT TO CONSUMER CONTRIBUTION -
SERVICE CODE**

- Adult Day Care, including transportation 030
- Adult Day Health, including transportation 155
- Housing and Home Improvement 140
- In Home Aide Services 041-046
- Personal and Family Counseling 170
- Preparation and Delivery of Meals 180

**CASES THAT ARE EXEMPT FROM SSBG CONSUMER
CONTRIBUTION**

- APS and any services provided in conjunction with APS for the first 12 months
- When the client is an SSI applicant or recipient

ATTACHMENT E

BASIS FOR DENIAL OR TERMINATION OF SERVICES

10A NCAC 71R .0603

Reasons for denial of an application for services and reasons for the termination of services include the following:

- (1) The individual has failed to cooperate with the agency in determining (or redetermining) eligibility;
- (2) The individual cannot be located to allow for determination (or redetermination) of eligibility;
- (3) The individual has been determined to be not eligible for the services requested on the basis that (s)he does not meet (or because of changing circumstances, no longer meets) the conditions of eligibility for the program funding sources under which the service is provided or the definition of the target population for receipt of the service;
- (4) The service is not available in the county in which the individual has legal residence;
- (5) The service will not be available in sufficient time to ensure its prompt provision, as set forth in Rules .0802 and .0803 of this Subchapter;
- (6) The agency has exhausted its funds for the provision of the service for that program year;
- (7) The individual has notified the agency that (s)he no longer wants or needs the service;
- (8) The agency has determined that the individual is no longer able to avail himself/herself of the service because (s)he has moved to another county or has been admitted to an institution;
- (9) The individual has failed to utilize the service or to cooperate in service delivery;
- (10) The individual is residing in a facility or institution and the funding source prohibits provision of the service to clients in facilities or institutions; and
- (11) The individual fails to meet any other conditions set forth in rules in Chapters 70 and 71 of this Title governing delivery of the service.