



DEPARTMENT OF ECONOMIC SECURITY

Your Partner For A Stronger Arizona

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June 29, 2012

To: Area Agencies on Aging

From: Melanie K. Starns, M.A.G.
DES Assistant Director
Division of Aging and Adult Services

Subject: Policy and Procedures and Technical Assistance

The following ALERTS are attached:

<u>ALERT</u>	<u>FUND SOURCE/TYPE</u>
ALERT SFY-13-10A	Policy and Procedures – Disease Prevention and Health Promotion
ALERT SFY-13-12A	Technical Assistance – Health Education-Disease Prevention and Health Promotion Scope of Work
ALERT SFY-13-12B	Technical Assistance – Division of Aging and Adult Services Special Terms and Conditions

The ALERTS are subject to change as additional information is received by the Division pertaining to the funding sources identified.

ALERTS are available on the Division website using the link:
<https://www.azdes.gov/daas/alerts>

Should you have any questions regarding the attached ALERT, please contact your assigned Contract Specialist.

cc: Lynn Larson, Nina Sutton, Bridget Casey, Cam Kowal, Jerry Lay, Fernando Armador, Cindy Saverino, Jennifer Cain, David Besst, Jutta Ulrich, Tammy Frazee, Lela Wendell, Roberta Blyth, Ben Kauffman, DAAS file

**Policy and Procedures
for SFY-2013**

Policy and Procedure ALERTS are intended to notify Area Agencies on Aging (AAAs) and other contract partners of newly developed or revised Division of Aging and Adult Services (DAAS) Policies and Procedures. Periodically, policy is developed due to changes in federal program policy as well as to respond to requests for clarification of existing policy by contracted providers. **Please ensure that the appropriate Area Agency on Aging personnel is aware of these revisions.**

Background

Congressional appropriations for Federal Fiscal Year 2012 require that Older Americans Act Title IIID funding be used only for programs and activities which have been demonstrated to be evidence-based and effective supporting health lifestyles and promoting healthy behaviors. Chapter 3300 is a newly developed Policy and Procedures and designated for Disease Prevention and Health Promotion Services. There are also revisions to the corresponding Scope of Work for Disease Prevention and Health Promotion, and information on that can be found in Technical Assistance ALERT SFY-13-12B. The drafted policy and procedures can be found in **Attachment A** of this ALERT. A Disease Prevention and Health Promotion Services Quarterly Report draft has been created (**Attachment B**). This report will be required as stated in 3306.2 of the new Chapter 3300. The first quarterly report will be due January 25, 2013.

Implementation

The DRAFT of the DAAS Policy and Procedure Manual, Chapter 3300 will be posted on the DAAS website for review and feedback. Area Agencies on Aging should coordinate with one another to prepare a single response of feedback/comments. **Please submit comments in writing to jecain@azdes.gov no later than July 30, 2012.** Comments received by DAAS will be addressed and a revised draft will be posted. Conference calls or webinars with Area Agencies on Aging will be scheduled in August 2012 to allow for discussion of changes. The final revisions to Chapter 3300 will go into effect on October 1, 2012. The Reports Matrix, Chapter 1000, 1600U is updated to include the Disease Prevention and Health Promotion Services Quarterly Report (**Attachment C**).

Key Dates

June 29, 2012	DRAFT Chapter 3300 available for review
July 30, 2012	Last day for AAAs to submit a single coordinated set of comments to DAAS on the draft
August 15, 2012	Revised DRAFT Chapter 3300 posted on DAAS website
August 16-31, 2012	Conference calls/webinar to discuss changes
October 1, 2012	Effective date for revised DAAS Policy and Procedure Manual, Chapter 3300 - Disease Prevention and Health Promotion Services; final version posted on DAAS website
November 15, 2012	Initial baseline assessment of services/programs using 2 nd page of quarterly report (question #7) due to DAAS
January 25, 2013	First Quarterly Report due

For questions regarding policy and procedures, please contact Jennifer Cain at 602-542-0809 or via email at jecain@azdes.gov.

3300		Disease Prevention and Health Promotion Services	
3300	3301	Overview	
	3301.1	This section provides an outline of the Division of Aging and Adult Services operational policies and procedures for Disease Prevention and Health Promotion Services and reporting requirements. This policy section is subject to change as additional information and/or regulations are received from the U.S. Department of Health and Human Services, Administration on Aging (AoA).	
	3301.2	The Division of Aging and Adult Services, through its contracts with the Area Agencies on Aging (AAAs), shall provide Disease Prevention and Health Promotion Services to older adults and eligible persons with disabilities. These services help reduce the impact of disease, chronic conditions, and minimize health-related risk factors associated with aging. Many programs including evidence-based programs assist older adults to prevent illness and manage chronic physical conditions. Although illness and disability rates increase with age, research has demonstrated that health promotion and disease prevention activities can help promote healthy and independent lives for older individuals. Disease Prevention and Health Promotion Services contribute to healthy aging and the maintenance of optimal physical, mental, and social well-being in older adults. An active healthy lifestyle can help older adults prolong their independence and improve their quality of life.	
	3301.3	Older Americans Act (OAA) Title IIID funding is intended to initiate programs designed to help older adults prevent and/or manage chronic diseases and promote healthier lifestyles. Healthy aging reduces healthcare costs and improves quality of life for older adults. Evidence-based programs are shown to be effective at helping participants adopt healthy behaviors, improve their health status, and reduce their use of hospital services and emergency room visits. Older Americans are disproportionately affected by chronic disease and evidence-based programs can mitigate the negative impact of chronic diseases and related injuries. Furthermore, evidence-based programs empower older adults to take control of their health by maintaining a healthy lifestyle through increased self-efficacy and self-management.	
3300		Disease Prevention and Health Promotion Services	
3300	3302	Authority and Statutory Requirement	
	3302.1	Disease Prevention and Health Promotion Services are authorized and governed by the following statute and regulation for the use of Title IIID funding by the Older Americans Act (OAA) and AoA.	
	3302.2	Older Americans Act, Section 361: http://www.aoa.gov/AoA_programs/OAA/oa_full.asp#_Toc153957705	
3303		Operational Procedures for Disease Prevention and Health Promotion Services Eligibility	
3300	3303.1	The following individuals are eligible to receive disease prevention and health promotion services:	
		A	An individual age sixty or older;
		B	An individual with a disability (funds other than OAA must be used);

3300		Disease Prevention and Health Promotion Services	
		C	Family Caregivers as defined in the Division of Aging and Adult Services Policy and Procedures Manual Section 3600 – Family Caregiver Support Services.
	3303.2		Priority shall be given to older adults:
		A	Living in medically underserved areas of the state; or
		B	Who are of the greatest economic need.
3304		Operational Procedures for the Administration of Disease Prevention and Health Promotion Services	
3300	3304.1	The Arizona Department of Economic Security, Division of Aging and Adult Services Nutrition, Food Service and Wellness Manual is the reference manual for disease prevention and health promotion services (see Exhibit 3200A).	
	3304.2	Congressional appropriations for Federal Fiscal Year 2012 require that Older Americans Act Title IIID funding be used only for programs and activities which have been demonstrated to be evidence-based and effective supporting health lifestyles and promoting healthy behaviors. AoA uses a graduated or tiered set of criteria for defining evidence-based interventions. Examples of Health promotions programs are provided and can fall within a minimal, intermediate, and/or highest level criteria. More information can be found on the AoA website about Title IIID funding and approved AoA evidence-based programs at http://aoa.gov/AoARoot/AoA_Programs/HPW/Title_IIID/index.aspx .	
3300	3304.3.A	Minimal Criteria	
		1	Demonstrated through evaluation to be effective for improving the health and well-being or reducing disease, disability and/or injury among older adults; and
		2	Ready for translation, implementation and/or broad dissemination by community-based organizations using appropriately credentialed practitioners.
		3	Examples: programs related to the prevention and mitigation of the effects of chronic disease (including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease), alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, falls prevention, physical activity and improved nutrition; and most health screenings would also qualify at this level.
	3304.3.B	Intermediate Criteria	
		1	Published in a peer-review journal.
		2	Proven effective with older adult population, using some form of a control condition (e.g. pre-post study, case control design, etc.).
		3	Some basis in translation for implementation by community level organization.
		4	Example: Eat Better Move More
3300	3304.3.C	Highest-level Criteria	
		1	Undergone Experimental or Quasi-Experimental Design.
		2	Level at which full translation has occurred in a community site.
		3	Level at which dissemination products have been developed and are available to the public.
		4	Examples: EnhanceFitness, A Matter of Balance, Healthy Living (Chronic Disease Self- Management Program).

3300		Disease Prevention and Health Promotion Services
3304.4		The AAA, or entity that such agency has contracted with, shall ensure that their intake, outreach, and community education processes include providing information and assistance to a person(s) inquiring about disease prevention and health promotion services and programs.
3304.5		The AAA, or entity that such agency has contracted with, shall ensure the provision of the full range of Disease Prevention and Health Promotion services and programs in the community by coordinating its activities with the activities of other community agencies and voluntary organizations providing supportive services and programs to older individuals. Partnerships extend the reach of Disease Prevention and Health Promotion services and programs, and can include: where applicable, community health centers, mental health centers, state and local government agencies, centers for independent living, public health departments, state and local non-profit organizations, educational and/or health care institutions, community organizations, or other identified entities.
3304.6		Effective 7/1/2014, AAAs must meet the highest-level criteria for Disease Prevention and Health Promotion programs, and allocate the amount of funds necessary to achieve region-wide availability of AoA approved evidence-based programs. Technical assistance from DAAS will be provided in meeting this requirement.
3305		Operational Procedures for Monitoring of Disease Prevention and Health Promotion Services
3305.1		The AAAs will ensure certification and licensure standards are met when providing an evidenced-based program for which licensing or certification requirements exist.
3305.2		For delivery of services identified in 3304.3.A, the AAAs will ensure that educators/presenters providing health promotion activities meet appropriate certification/licensure standards.
3306		Operational Procedures for Reporting Requirements
3306.1		The AAAs shall collect data and maintain records as defined in the Division of Aging and Adult Service Policy and Procedure Manual Section 1600. https://www.azdes.gov/common.aspx?menu=36&menuc=28&id=8252
3306.2		The AAAs will provide quarterly reports to the Division of Aging and Adult Services about health promotion and disease prevention activities using the Division of Aging and Adult Services/AAA Disease Prevention and Health Promotion Quarterly Report document.

EXHIBITS

3200A Nutrition, Food Service, and Wellness Manual

3200B Disease Prevention and Health Promotion Quarterly Report

ARIZONA DEPARTMENT OF ECONOMIC SECURITY

Division of Aging and Adult Services

**DISEASE PREVENTION AND HEALTH PROMOTION SERVICES
QUARTERLY SUMMARY REPORT**

Area Agency on Aging Region: _____ Report Period: _____

Report Prepared By: _____ Date: _____

Agency Director's Signature _____ Date: _____

1. Major activities and accomplishments during this period
2. Problems/Barriers and how it was addressed
3. Dissemination activities (Outreach)
4. Best practices or program Innovations
5. Technical Assistance or support needed from the Division of Aging and Adult Services
6. Vignettes

See reverse for EOE/ADA/LEP disclosures

7. Disease Prevention and Health Promotion Programs

A. **Minimal Criteria** includes activities demonstrated through evaluation to be effective for improving the health and well-being, or reducing disease such as health assessments and screenings (blood pressure, cholesterol, medication screenings, etc.) and administered by a credentialed health professional.

Name	Date	Total Attendees	Services Provided/Comments

B. **Intermediate Criteria** includes published in a peer-review journal, proven effective with older adult population, using some form of a control condition (e.g. pre-post study, case control design, etc.) and some basis in translation for implementation by community level organization.

Program Name	Total Classes	Total Completers	Comments

C. **Highest Criteria** (undergone experimental or quasi-experimental design, level at which full translation has occurred in a community site, and dissemination products have been developed and are available to the public).

Program Name	Total Classes	Total Completers	Comments
Healthy Living (CDSMP)			
A Matter of Balance			
EnhanceFitness			

Instructions for Preparing the Quarterly Report

FORMAT

Quarterly progress reports should give the DAAS Health and Wellness Coordinator sufficient information for a full understanding of Disease Prevention and Health Promotion performance. No page minimum or limitations are prescribed regarding the length of the report. Fully respond to each of the information categories covered by the report.

REPORT CONTENTS – Please follow this format

1. **Major activities and accomplishments during this period**
Summarize Disease Prevention/Health Promotion activities and accomplishments that occurred during the reporting period. Reference should be made to each of the services provided by the AAA's designated health promotion staff and included in the AAA's current Methodology.
2. **Problems/barriers and how it was addressed**
Describe any deviations or departures from the AAA's Disease Prevention and Health Promotion Methodology. Describe the problem, alternatives considered to resolve the problem, and the impact of the problem on achieving program goals and objectives.
3. **Dissemination activities (outreach)**
Describe dissemination activities that occurred in the three-month period. Dissemination materials should be included as an attachment to the report (i.e. copies of flyers, newsletters/newspaper articles, new locally produced brochures, etc.).
4. **Best practices and/or program innovations**
Describe best practices or disease prevention/health promotion innovations that have been successful in the planning and service area.
5. **Technical assistance or support needed from Division of Aging and Adult Services**
Fully describe the type of technical assistance needed. Include rationale or reason for the requested support. Indicate whether on-site technical assistance is needed.
6. **Vignettes**
Include anecdotal information or descriptions of situations where services provided through the Disease Prevention and Health Promotion Services positively affected the lives of the person served.
7. **Disease Prevention and Health Promotion Programs**
 - A. Minimal Criteria: provide the health screening/assessment activities and describe the services offered during the reporting period.
 - B. Intermediate Criteria: Provide the name of the program offered and indicate the total number of classes held and how many attendees came to the class. Provide useful comments regarding the program.
 - C. Highest Criteria: Provide the name of the program offered and indicate the total number of classes held and how many attendees came to the class. Provide useful comments regarding the program.

Equal Opportunity Employer/Program • Under Titles VI and VII of the Civil Rights Act of 1964 (Title VI & VII), and the Americans with Disabilities Act of 1990 (ADA), Section 504 of the Rehabilitation Act of 1973, the Age Discrimination Act of 1975, and Title II of the Genetic Information Nondiscrimination Act (GINA) of 2008; the Department prohibits discrimination in admissions, programs, services, activities, or employment based on race, color, religion, sex, national origin, age, disability, genetics and retaliation. The Department must make a reasonable accommodation to allow a person with a disability to take part in a program, service or activity. For example, this means if necessary, the Department must provide sign language interpreters for people who are deaf, a wheelchair accessible location, or enlarged print materials. It also means that the Department will take any other reasonable action that allows you to take part in and understand a program or activity, including making reasonable changes to an activity. If you believe that you will not be able to understand or take part in a program or activity because of your disability, please let us know of your disability needs in advance if at all possible. To request this document in alternative format or for further information about this policy, call 602-542-4446; TTY/TDD Services: 7-1-1. • Free language assistance for DES services is available upon request.

	Report	Frequency	Due Date	Method of Submission	Comments	DAAS Entity or Person Receiving the Report	DAAS Contact Person	Purpose of the Report
1	Social Service Report for Non-Registered Services (AG-031-N)	Monthly	25th of the month	Electronic	Revised form is effective SFY 2011; electronic submission	Contracts Management	John Kinkel	AoA / NAPIS - State Program Report
2	Social Service Report for Registered Services (AG-031-R)	Monthly	25th of the month	Electronic	Region 7 only; HSK service; revised form is effective SFY 2011			
3	SAMS Service Demographics Report	Monthly	25th of the month	Paper	Region 8 and Tribes only; Cluster 1 Services, HDM, CNG			
4	SHIP/SMP Monthly Report	Monthly	25th of the month	FAX or Electronic	Electronic submission preferred	Contracts Management	Patricia Gonzalez-Emblem	AoA / CMS
5	SHIP/SMP Public and Media Activity Form	Monthly	25th of the month	FAX or Electronic	Electronic submission preferred			
6	SHIP Evaluation Form	As Needed	25th of the month	FAX or Electronic	Optional report; electronic submission preferred			CMS
7	SHIP/SMP Client Contact Form	As Needed	25th of the month	FAX	SMP cases only			AoA
8	SMP Volunteer Hours	As Needed	25th of the month	FAX or Electronic	Electronic submission preferred			
9	SMP Volunteer Add a Volunteer Form	As Needed	25th of the month	FAX				
10	SMP Complex Issue Form	As Needed	25th of the month	FAX				
11	SMP Evaluation Form English / Spanish	As Needed	25th of the month	FAX or Electronic	Electronic submission preferred			
12	Monthly Ombudsman Data Collection Form	Monthly	20th of the month	Electronic	Also referred to as the Monthly Roll-Up Report	Ombudsman	Syble Oliver	AoA / NORS
13	Monthly Ombudsman Program Case Report Form	Monthly	20th of the month	Electronic		Ombudsman	Syble Oliver	AoA / NORS
14	Family Caregiver Support Program Registered Services Report (AAA-1186A)	Monthly	25th of the month	Electronic		Contracts Management	David Besst	AoA / NAPIS - State Program Report
15	Family Caregiver Support Program Non-registered Services Report (AAA-1185A)	Monthly	25th of the month	Electronic				DAAS Program Management
16	Family Caregiver Support Program Quarterly Summary Report	Quarterly	25 days after end of quarter	Paper or Electronic	Narrative report			
17	Legal Services Report	Monthly	25th of the month	Paper or Electronic	Regions One through 6 only; electronic submission preferred	Contracts Management	Cindy Saverino	DAAS Program Management
18	Mature Worker Program Quarterly Report	Quarterly	30 days after end of quarter	Electronic	Effective January 2011	Contracts Management	Cindy Saverino	DAAS Program Management
19	SCSEP Regular and SCSEP2	Quarterly	30 days after end of quarter (Exact dates designated by USDOL)	Data Entry into SPARQ	Regions 1, 2, 3, 5 and Mohave County	Mature Workforce Coordinator	Cindy Saverino	USDOL Program Report
20	Invoice (AG-053)	Monthly	20th of the month	Paper	Region 8 and Tribes receiving SSBG only; Mohave County for SCSEP	Contracts Management	Bridget Casey	DAAS Fiscal Management
21	Action Plan for Strategic Objectives	Submitted with Area Plan	October 1st	Electronic	All Regions	Contracts Management	Tammy Frazee	DAAS Program Management / Area Plan component
22	Action Plan for Strategic Objectives Update	Annually	July 31st	Electronic	All Regions	Contracts Management	Tammy Frazee	DAAS Program Management / Area Plan component
23	Program Development	Annually	August 31st	Paper or Electronic	All regions, except 6; electronic submission preferred	Contracts Management	Cindy Saverino	DAAS Program Management / Audit purpose
24	Disease Prevention and Health Promotion Services	Quarterly	25 days after end of quarter	Electronic	All regions; electronic submission	Jennifer Cain	Jennifer Cain	DAAS Program Management

	Report	Frequency	Due Date	Method of Submission	Comments	DAAS Entity or Person Receiving the Report	DAAS Contact Person	Purpose of the Report
24	Discretionary Grant Reporting (a through k)							
a	Care Partners Reaching Out (CarePRO)	Semi-annually	April 20th, October 20th	Electronic	Regions One through 6 only	David Besst	David Besst	Fulfillment of Grantor Requirement
b	Lifespan Respite Care Program (LRCP)	Semi-annually	April 20th, October 20th	Electronic	Region One only (as of August 2010)			
c	Semi-Annual Reporting Tool (SART)	Semi-annually	April 15th, October 15th	Electronic	Regions One, 2, 4, and 5 only; Region 3	Jutta Ulrich	Jutta Ulrich	
d	State Health Insurance Assistance Program (SHIP)	Monthly	25th of the month	Electronic	All regions	Patricia Gonzalez-Emblem	Patricia Gonzalez-Emblem	
e	Senior Medicare Patrol (SMP)	Monthly	25th of the month	Electronic	All regions			
f	SMP - High Fraud States Without HEAT	Monthly	25th of the month	Electronic	All regions			
g	2009 Medicare Improvement for Patients and Providers (MIPPA)	Monthly	25th of the month	Electronic	Regions One, 2,3,4,5 and 6 only			
h	2010 Medicare Improvement for Patients and Providers (MIPPA)	Monthly	25th of the month	Electronic	Regions One, 2,3,4,5 and 6 only			
i	Enhance Fitness Grant Project	Quarterly	25 days after end of quarter	Electronic	Regions One, 2, 3, and 6 only	Jennifer Cain	Jennifer Cain	
j	ADRC Options Counseling	Quarterly	25 days after end of quarter	Electronic	Regions One, 2	Contracts Management / Jutta Ulrich	Jutta Ulrich	
k	ADRC Care Transitions Program	Quarterly	25 days after end of quarter	Electronic	Regions One, 2,3, and 5 only	Contracts Management / Jutta Ulrich	Jutta Ulrich	

Red text indicates a new or updated item.

**Technical Assistance
for SFY-2013**

Technical Assistance ALERTS are generated periodically to update contractual and/or programmatic requirements and/or clarifications.

The purpose of this ALERT is to notify Area Agencies on Aging (AAAs) of revisions to the Public Health – Disease Prevention and Health Promotion Scope of Work (SOW).

Medication Management Update:

The Administration on Aging (AoA) removed the requirement that a portion of Title III-D funds be used to support medication management. **The twenty-five percent requirement for activities related to medication management, screening, and education to prevent incorrect medication and adverse drug reactions will no longer be in effect starting July 1, 2012.** The service code of MED will no longer be available for use effective July 1, 2013.

Program Update:

Beginning with Federal Fiscal Year 2012, the Administration on Aging (AoA) issued new requirements that Older Americans Act (OAA) Title IIID funding be used only for programs and activities which have been demonstrated through rigorous evaluation to be evidence-based and effective. The AoA uses a graduated or tiered set of criteria (minimal, intermediate or highest) for defining evidence-based interventions and implemented through the OAA. The tiers are further defined in the Division of Aging and Adult Services Policy and Procedures Manual, Chapter 3300 - Disease Prevention and Health Promotion Services. Services or programs that meet any level of evidence, as described by AoA, fulfill the federal evidence-based requirement at this time.

The SOW has been revised and retitled from “Public Health – Disease Prevention and Health Promotion” to “Health Education – Disease Prevention and Health Promotion”. The SOW removes the requirement for tracking medication management and adds language clarifying the requirements for evidence-based services and programs. The drafted SOW for Disease Prevention and Health Promotion Services can be found in **Attachment A** of this ALERT. Changed elements of the SOW have been highlighted. The current service codes associated with this SOW may be consolidated with the new data system.

AAAs should analyze current activities funded through Title IIID as requested in Alert SFY-13-10A. If an activity does not meet the guidelines described above, the AAA needs to develop a plan to shift all funding to activities that are evidence-based at any level (minimal, intermediate, or highest). AAAs are encouraged to proceed with programs that meet AoA’s highest level criteria. The Health and Wellness Coordinator will work with each AAA to develop a plan to move toward the highest level criteria by 2015.

Changes to the language of SOW will be included in the next Contract Amendment. Should you have any questions related to the SOW revision, please contact Jennifer Cain at jecain@azdes.gov or 602-542-0809 or your assigned Contract Specialist.

Scope of Work

Arizona Department of Economic Security (DES) – Area Agencies on Aging

38.0 HEALTH EDUCATION – DISEASE PREVENTION AND HEALTH PROMOTION

38.1 Purpose Statement

38.1.1 The purpose is to provide information and services that help reduce the impact of disease, chronic conditions, and minimize health-related risk factors associated with aging.

38.2 Service Description

38.2.1 Taxonomy Definition - A service that provides individual or group instruction to maintain or improve physical well-being.

38.2.2 Health promotion and disease prevention programs are designed to maintain or improve the emotional and physical well-being of older adults.

38.2.3 Evidence-based health promotion and disease prevention programs that relate to prevention and mitigation of the effects of chronic disease for participants and eligible individuals in the community are provided.

38.2.4 Programs provide planned activities to identify, prevent, or decrease risk factors for specific conditions, diseases, and injuries.

38.2.5 Programs provide a variety of health promotion activities on a weekly basis at senior centers that may include; health risk assessments, blood pressure checks, physical fitness, medication management, health screenings, and disease specific education.

38.2.6 Programs increase participants' control of factors associated with optimal psychosocial and physical health through education.

38.2.7 Programs provide nutrition education to promote health and help to prevent disease by improving the diets of older adults and assisting them achieve or maintain optimal nutritional status.

38.2.8 Programs provide information and access to community resources.

38.2.9 Eligibility Requirements – The Contractor shall provide services to individuals that meet the eligibility requirements described in Chapter 3300 of the DAAS Policy and Procedure Manual, as may be amended.

38.3 Service Requirements – The Contractor shall:

38.3.1 Title IIID section 361 of the Older Americans Act for Disease Prevention and Health Promotion shall only be used for programs and activities which have been demonstrated through rigorous evaluation to be evidence-based and effective.

38.3.2 Where applicable, partner with community health centers, mental health centers, state and local government agencies, centers for independent living, public health departments, state and local non-profit organizations, educational and/or health care institutions, community organizations, or other identified entities to provide one or more of the services listed below:

1. Health risk assessments.
2. Routine health screenings, which may include hypertension, glaucoma, cholesterol, cancer, vision, hearing, diabetes, bone density, and nutrition screening.
3. Nutritional counseling and educational services for individuals and their primary caregivers.
4. Evidence-based health promotion programs, including programs related to the prevention and mitigation of the effects of chronic disease (including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease), alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, depression, falls prevention, physical activity and improved nutrition.
5. Programs regarding physical fitness, group exercise and music, art, and dance-movement therapy, including programs for multigenerational participation that are provided by an institution of higher education, a local educational agency, or a community-based organization.
6. Home injury control services, including screening of high risk home environments and provision of educational programs on injury prevention (including fall and fracture prevention) in the home environment.
7. Screening for the prevention of depression, coordination of community mental health services, provision of educational activities, and referral to psychiatric and psychological services.
8. Educational programs on the availability, benefits, and appropriate use of prevention health services covered under Title XVIII of the Social Security Act (42 USC 1395 et seq.), as may be amended.

9. Information concerning diagnosis, prevention, treatment, and rehabilitation concerning age-related diseases and chronic disabling conditions, including osteoporosis, cardiovascular diseases, diabetes, and Alzheimer's disease and related disorders with neurological and brain dysfunction.
10. Gerontological counseling.
11. Counseling regarding social services and follow-up health services.

38.4 Licensure/Certification Requirements – The Contractor shall:

- 38.4.1 Ensure certification and licensure standards are met when providing an evidenced-based program for which licensing or certification requirements exist.
- 38.4.2 Ensure that educators/presenters providing health promotion activities meet appropriate certification/licensure standards.

38.5 Performance Measure

- 38.5.1 Number of evidence-based program offered annually.
- 38.5.2 Number of participants completing evidence-based programs.
- 38.5.3 Number of screening events held annually.

38.6 Reporting Unit

- 38.6.1 One unit of service equals one activity.

Division of Aging and Adult Services
ALERT

SFY-13-12B

**Technical Assistance
for SFY-2013**

Technical Assistance ALERTS are generated periodically to update contractual and/or programmatic requirements and/or clarifications.

As a result of Arizona Senate Bill 1082 (from the 2011 Fiftieth Legislature), the term “vulnerable adults” was added to many sections of A.R.S. 46-141. A.R.S. 46-141.A now specifies that ADES contractors’ personnel (whether paid or not) who provide direct services to vulnerable adults shall, as a condition of employment, have a valid fingerprint clearance card or shall apply for a fingerprint clearance card within seven working days of employment.

After careful review, ADES Management determined the need to replace ADES Special Term and Condition Fingerprinting section 22.1.1 with a DAAS Special Term and Condition.

The current ADES Special Term and Condition Fingerprinting 22.1.1 states:

“Personnel who are employed by the Contractor, whether paid or not, and who are required or allowed to provide services directly to juveniles or vulnerable adults shall submit a full set of fingerprints to the Department for the purpose of obtaining a state and federal criminal records check pursuant to section 41-1750 and Public Law 92-544 or shall apply for fingerprint clearance card within seven working days of employment.”

The new DAAS Special Term and Condition will replace the above and will be amended into all non-Tribal Area Agencies on Aging contracts, and states:

“Effective immediately, Contractor and subcontractor staff who are required or allowed to provide services directly to juveniles or vulnerable adults shall possess a fingerprint clearance card that meets Level One requirements as described in ARS 41-1758.07, OR, if waiting receipt of their clearance card, shall provide services under direct visual supervision and oversight of an employee who possesses a Level One fingerprint clearance card until they are issued a valid fingerprint clearance card that meets the Level One requirements. Contractor and subcontractor staff include current employees whether paid or not who transfer into a direct service position, volunteers, and new employees whether paid or not.”

Should you have any questions related to this ALERT, please contact your assigned Contract Specialist.