

SERVICE GUIDELINES TITLE III-E CAREGIVER SUPPORT GROUP

December 2024

DEFINITIONS

Caregiver Counseling is the name for the service intended to provide in-home personal counsel to informal caregivers (family, friends, and neighbors) to help individual Caregivers cope with personal problems and/or develop and strengthen capacities for more adequate social and personal adjustments. Caregiver Counseling is defined as a provision of advice, guidance, and instruction to informal Caregivers through direct interaction between a credentialed and experienced/supervised counselor and an individual, family, or group. This interaction is to provide purposeful therapeutic assistance in improving social function or coping with personal problems relating to the care giving situation or inter-relationship between Caregiver and Care Recipient.

Therapeutic assistance is defined as improving social function or coping with personal problems relating to the caregiving situation or inter-relationship between Caregiver and Care Recipient. It is anticipated that therapeutic assistance may include components of training and education to assist Caregivers in making decisions and solving issues relating to their caregiving roles.

Caregiver: The term "family caregiver" means an adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.

revised definition, family caregivers are now eligible for Title III-E services if they are providing informal support to persons under age 60 if these persons under age 60 have Alzheimer's disease or related disorders with neurological and organic brain dysfunctions. If the persons receiving informal support from family caregivers do not have Alzheimer's disease, or related disorders and organic brain dysfunctions, they must be age 60 and over for the family caregiver to be eligible to receive Title III-E services.

Grandparent or Older Individual Who is a Relative Caregiver: The term "Grandparent or Older Individual Who is a Relative Caregiver" means a grandparent or step grandparent, or a relative of a child by blood, marriage or adoption, who is aged 55 or older and: lives with the child, is the primary caregiver of the child because biological or adoptive parents are unable/unwilling to serve as primary caregiver of the child, and

has a legal relationship to the child, such as legal custody or guardianship, or is raising the child informally.

Grandparents or relative caregivers, providing care for adult children with a disability, who are between 19 and 59 years of age, can be served under the NFCSP. These caregivers must be 55 years or older and cannot be the child's parent. Priority shall be given to those providing care for an adult child with severe disabilities.

Older Adult: The term "older individual" means anyone who has attained the age of 60 years, unless the age exception applies.

ELIGIBILITY

To be eligible the caregiver must be at least aged 18 or older and caring for a person aged 60 and older, or to an individual under age 60 with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.

UNIT OF SERVICE

One session per person equals one unit.

This includes sessions/programs provided to individuals or groups. For example, if there are 7 people attending a training and education event then the unit count would be 1, the unduplicated count of people served is 7. If during a subsequent training and education event, 4 people from the first event attend, and 4 new people attend the event then the unit count for the month to date would be 2 and the unduplicated count of people served is 11 (7 people from the 1st event + 4 new people for the 2nd event).

SERVICE ACTIVITIES

Therapeutic Services include, but are not limited to:

- Issues of life/role transitions
- Interpersonal relationships
- Understanding and treating stress, anxiety disorders and/or depression
- Education and acceptance of resources to assist the Caregiver and Care Recipient
- Training in caregiving practices that may alleviate negative conditions pertinent to the Caregiver and the Care Recipient

Approved Modalities include, but are not limited to:

- Individual Therapy provided in the Caregivers' home (preferred) and/or over the phone, after an initial face-to-face appointment.
- Additional Therapies, such as Caregiver Mentors, Peer Counseling, and/or Psycho-educational and skills building groups can be introduced/referred as needed.

The therapeutic nature of the client/counselor relationship is to be emphasized and should be adapted to meet the unique needs of the family caregiving relationship. Therapeutic work may be problem solution focused, including brief crises assistance if applicable.

SERVICE REQUIREMENTS

- Staff Requirements Counselors responsible for the care of caregivers in a
 therapeutic setting must be licensed as an LPC (Licensed Professional Counselor)
 or LSW (Licensed Social Worker) at a minimum. Those serving as clinical therapists
 must have a Master's Degree in a social science field, which may include, but is not
 limited to, Social Work, Gerontology, Psychology, Counseling, Psychiatric Nursing,
 or Rehabilitation Counseling. Additionally, for any positions requiring licensure,
 registration, or certification by the State of Illinois, the individual must hold the
 appropriate state credentials.
 - Staff members that are not performing the role of clinical therapist may have degrees including, but not limited to, Bachelor Degrees in Social Work, Gerontology, Community Service, Nursing Psychology, and/or Human Development.
 - Volunteers must be carefully screened to determine appropriateness for serving the functions to which they are assigned. Volunteers may not perform the functions listed under the degreed personnel categories unless it can be demonstrated that the individual has comparable experience and training. For example, Master-level social work interns serving to assess Caregivers' needs for counseling services, would be acceptable provided sufficient supervision was in place.
 - Grantee are encouraged to carry malpractice insurance for their Master-level personnel. In the absence of agency malpractice insurance for Master-level personnel, individual practitioners must carry their own malpractice insurance. Agencies must carry malpractice insurance for their Bachelor-level personnel and volunteers.
- Grantee must plan and undertake sufficient public information efforts to be recognized in their service area as a counseling center for family/informal Caregivers.
- Grantees must conduct regular public outreach, at least once per month, to inform the
 community about the availability of the service. Acceptable methods for public outreach
 include, but are not limited to, mass or social media announcements, presentations,
 public displays, brochure distribution in community spaces, or other effective strategies
 aimed at reaching a broad audience.
- Grantee must collect and document session information, client demographics, and submit required reports to AgeSmart in a timely manner.
- Grantee shall conduct pre-employment criminal background checks for all employees of AgeSmart-funded programs. The Grantee shall also conduct criminal background checks on volunteers participating in AgeSmart-funded programs with

- access to confidential client information including, but not limited to, addresses, social security numbers, financial information, etc.
- Grantees of III-E funded services shall develop a mechanism to receive ongoing input and discussion about service and training needs from family caregivers who provide informal in-home and community care to older individuals and from grandparents raising grandchildren.
- Grantee will submit quarterly reports for persons and units as well as a quarterly program narrative report, in addition Grantee will submit yearly Demographic report for program
- Grantee will use the AgeSmart logo on facilities, webpages, newsletters and brochures. All logo and branding standards will be made available to Grantees. Along with branding, the following statement must be used by Grantees:

Funding for Grantee_is received from the United States Administration for Community Living, the Illinois Department on Aging and AgeSmart Community Resources. Grantee does not discriminate in admission to programs or activities or treatment of employment in programs or activities in compliance with appropriate State and Federal Statutes. If you feel you have been discriminated against, you have the right to file a complaint with AgeSmart Community Resources by calling 618-222-2561.

TARGET POPULATION

Caregivers residing within PSA 8. Priority will be given to those with the greatest economic and social need and to:

- Family caregivers who provide care for individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction;
- Grandparents or older individuals who are relative caregivers who provide care for children with severe disabilities;
- Caregivers who are older individuals with greatest social need, and older individuals with greatest economic need (with particular attention to low-income individuals); and
- Older individuals providing care to individuals with severe disabilities, including children with severe disabilities.

REIMBURSEMENT

Grantee will be paid one-twelfth of the grant amount monthly. Should reporting be late, reimbursement may be withheld.

Funding for AgeSmart Community Resources is received from the United States Administration for Community Living and the Illinois Department on Aging. AgeSmart does not discriminate in admission to programs or activities or treatment of employment in programs or activities in compliance with appropriate State and Federal Statutes. If you feel you have been discriminated against, you have a right to file a complaint with AgeSmart by calling 618-222-2561.

Fiscal Guidelines for all Title-III Programs

Program Income

Program Income is defined as contributions made by recipients of service and interest on such contributions.

- A. Program income includes, but is not limited to:
 - 1. Contributions of recipients of service and interest on such contributions
 - 2. Income from service fees obtained through the use of a sliding fee scale or suggested fee schedule
 - 3. Proceeds from the sale of personal or real property with an acquisition cost of less than \$5,000
 - 4. Usage or rental fees
 - Sale of assets purchased with grant funds with an acquisition cost of less than \$5.000
 - 6. Royalties on patents and copyrights
- B. The following specific revenues shall **not** be included as program income:
 - 1. Interest income on State funds whether earned on advances or the "float." This does not include interest on contributions made by recipients of service under a project which is considered program income.
 - 2. Rebates, discounts, and recoveries
 - 3. Income earned by individuals or a group of project participants when such income accrues directly to the participants.
 - 4. Revenues raised by a grantee or contractor which is a government under its governing powers, such as taxes, special assessments, etc.
 - Tuition and related fees received by an institution of higher education for a regularly offered course taught by an employee performing under a grant or contract.
 - 6. Proceeds from the sale of personal or real property with an acquisition cost of more than \$5,000.
 - 7. Sale of assets purchased with grant funds where the acquisition cost was more than \$5,000.
 - 8. Contributions made by representatives of service recipients, relatives, non-related individuals or entities, in behalf of service recipients are not program income, but are considered to be local cash.
 - 9. Organized fund-raising activities carried out by Title III grantee agencies.

Allowable Uses of Program Income

A. Additional Costs Alternative

Under this alternative, the income is used for costs which are in addition to the allowable costs of the project or program, but which, nevertheless, further the objectives of the Federal statute under which the grant was made.

Examples of purposes for which the income may be used are:

- 1. Expanding the program.
- 2. Continuing the program after grant ends.
- 3. Supporting other programs that further the broad objectives of the statute.
- 4. Obtaining equipment or other assets needed for the program or for other activities that further the statute's objectives.

Award recipients under an Area Plan must receive prior approval by the Area Agency on Aging for costs borne with program income under this alternative.

B. Additional Requirements

- 1. All program income earned under Title III must stay with the service provider who earns it.
- 2. All program income earned under Title III, Part B, Part C-1, Part C-2 and Part E must be used only for services allowable under the part from which it was earned except as provided in (6) below.
- 3. All program income must be expended prior to requesting federal funds from the Department on Aging and must be expended within the fiscal year in which it was earned.
- 4. All program income received in the form of "cash" must be expended as it is earned to minimize cash draw down.
- Program income earned as a result of services provided with Title III, Part B or Part E assistance may be used for any service which that contractor is authorized to provide with Title III-B or Title III-E funds.
- 6. Program income earned as a result of services provided with Title III C-1 or III C-2 must be used:
 - a. To increase the number of meals served by the project involved;
 - b. To facilitate access to such meals; or
 - c. To provide other supportive services directly related to nutrition services.

C. Special Requirements for Providers Receiving Section 5311 Funds from the U.S. Department of Transportation

All transportation providers receiving support from Section 5311 and Title III-B and/or Title III-E must report rider donations as program income. Program income collected should be reported under Section 5311 and Title III-B and/or Title III-E only to the extent and in direct proportion to each funding source's financial participation. Thus, the same rider donations shall not be reported in the same amount as program income under both funding sources.

Accountability for Program Income

- A. Program income must be deposited into an appropriate bank account or converted to money orders on a regular basis.
- B. Cash participant contributions should be counted by two (2) persons, placed in a safe, secure place until deposited, deposited intact, and deposit receipts compared with count sheets. Such standards require the accurate recording of amounts collected at the project and site levels and subsequent use of these funds.
- C. Grantees must account for program income on an on-going basis and must report such income to the Area Agency on Aging through the established financial reporting system.
- D. Accounting records and reports submitted by a recipient to the Area Agency on Aging should provide a clear audit trail on all program income and its uses. Account records and reports should accurately reflect the receipt of such funds **separately** from the receipt of Federal funds, grantee funds, and the use of such resources.
- E. Although interest income earned on General Revenue and/or local funds by non-profit organizations is not considered program income, project grantees should maintain adequate accounting records on any interest income earned. The Department must approve the Area Agency on Aging's proposed use of General Revenue Funding interest income as an activity which will further the purpose of the project and the Act.
- F. Rebates, discounts, and recoveries on leases should be treated as applicable credits and credited to the Federal grant accounts.

Voluntary Contributions

Each service provider must:

- 1. Provide each older person with an opportunity to voluntarily contribute to the cost of the service;
- 2. Protect the privacy of each older person with respect to his or her contribution;
- 3. Establish appropriate procedures to safeguard and account for all contributions; and
- 4. Use all contributions to expand the services of the provider under this part and supplement (not supplant) funds received under the Older Americans Act.

The service providers that receive funds under this part **shall not means test** for any service for which contributions are accepted or **shall not deny any older person service because the older person will not or cannot contribute** to the cost of service. Contributions made by older persons are considered program income.