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February 03, 2017

Ms. Jemith Rosa, President/CEO
CARES, Inc.
12417 Clock Tower Parkway
Hudson, FL 34667

Dear Ms. Rosa:

Enclosed is the report for your Older Americans Act, Title IIID Disease Prevention & Health Promotion Program (#EA-016). This monitoring visit was conducted on December 6th and 22nd, 2016, by Jason Martino, Director of Planning.

This report is intended to provide an overview of the program's operations as of the date of the monitoring visit. The cooperation of Karen Alvarez and her staff throughout the visit was greatly appreciated.

All monitoring standards were adequately achieved and your staff are commended for their quality and meaningful work throughout the year.

Your commitment to serving the Health and Wellness needs of the elderly in Pasco and Pinellas Counties is greatly appreciated. Should you have a question or concern about the monitoring report, please do not hesitate to contact our office.

Sincerely,

A handwritten signature in black ink that reads "Helen D. King".

Helen King
Acting Executive Director

Encl.

CC: Karen Alvarez, RN, Project Director, CARES, Inc.

**2016 OAA IIID Disease Prevention & Health Promotion
Programmatic Monitoring Standards**

Date of Visit:	December 06 and December 22, 2016
Date of Report:	February 03, 2017
Provider:	Cares, Inc.
Monitor:	Jason Martino, Director of Planning
Contract Review Period:	January 01 through December 31, 2016
Participants:	Karen Alvarez, IIID Project Director, Cares, Inc. Theresa Brock, Health & Wellness Coordinator, Cares, Inc.

Standard #1	Compliance Measure
A staff member is designated to act as liaison and facilitator for health promotion programs between volunteer organizations and community agencies.	Achieves <input checked="" type="checkbox"/> Partially Achieves <input type="checkbox"/> Not Achieved <input type="checkbox"/> Not Applicable <input type="checkbox"/> Follow-Up Required <input type="checkbox"/>
Description: The proposed and current staffing outline illustrated in the 2016 OAA Grant Application denotes several key individuals working with the program in both Pinellas and Pasco Counties. The following positions are reflected: "Project Director", "Health & Wellness Coordinator", "Health & Wellness Educators", and a "Health and Wellness Assistant". Additionally, the Program's Project Director is the liaison between CARES and the AAAPP.	

Standard #2	Compliance Measure
All programmatic reports are correct and submitted timely to AAAPP. a. DOEA Monthly Report b. AAAPP OAA Quarterly Report c. AAAPP Quarterly Volunteer Report	Achieves <input checked="" type="checkbox"/> Partially Achieves <input type="checkbox"/> Not Achieved <input type="checkbox"/> Not Applicable <input type="checkbox"/> Follow-Up Required <input type="checkbox"/>
Description: a. The Project Director submits DOEA monthly reports punctually and reconcile easily to inputted CIRTS data. b. The IIID Provider is required to submit a Quarterly report every 10 th of January, April, July, and October. As of the date of the monitoring appointment, the provider has successfully submitted each and every report detailing their ability to meet client, targeting, and budgetary proposals, per the approved service provider application. c. The Provider was required to submit a report on an annual basis for FY2016 including the number and type of service where volunteers are utilized. The provider is successful in meeting this requirement.	

Standard #3	Compliance Measure
<p>As of January 01, 2015 all OAA Title IIID services are required to be Highest Level Evidence-Based and meet requirements established by the Administration for Community Living (ACL).</p>	<p>Achieves [X] Partially Achieves [] Not Achieved [] Not Applicable [] Follow-Up Required []</p>
<p>Description: The AAAPP's Continuing Application for FY2016 was approved and accepted based on Evidenced Based (EB) services in PSA5 only meeting the Highest Level as required by the DoEA as well as the Federal Administration for Community Living (ACL)/Administration on Aging (AoA). CARES's approved proposal for services contain only Highest Level EB Services for FY2016 and ongoing.</p> <p>The group of EB services that CARES provides throughout PSA5 are listed below:</p> <ol style="list-style-type: none"> 1. Healthy Eating Every Day (HEED) 2. Active Living Every Day (ALED) 3. A Matter of Balance (MOB) 4. Tai Chi/Tai Ji Quan Moving for Better Balance (TCMB) 5. Diabetes Self-Management (DSMP) 6. Chronic Disease Self-Management (CDSMP) 7. Chronic Pain Self-Management (CPSMP) 	

Standard #4	Compliance Measure
<p>Highest Level Evidence-Based Programs meet program requirements:</p> <ol style="list-style-type: none"> a. Marketing is appropriate and contains mandatory elements. b. Required licenses are on file. c. Credentials of program facilitators. d. Provider has procedures in place to ensure the fidelity of programs. e. The Program utilizes DoEA Sign-In Sheets and accurately accounts for eligible clientele. 	<p>Achieves [X] Partially Achieves [] Not Achieved [] Not Applicable [] Follow-Up Required []</p>
<p>Description: During FY2016, CARES has conducted (7) Highest Level Evidence-Based Programs within the entire PSA:</p> <ol style="list-style-type: none"> 1. Chronic Disease Self-Management Program (CDSMP) 2. Diabetes Self-Management (DSMP) 3. Chronic Pain Self-Management (CPSMP) 4. Matter of Balance (MOB) 5. Tai Chi/Tai Ji Quan Moving for Better Balance (TCMB) 6. Diabetes Self-Management Program (DSMP) 7. Healthy Eating Every Day (HEED) 	

Of those, the monitor reviewed the following for compliance with requirements:

1. Pinellas County – Matter of Balance (MOB) – Dates: (09/14/16 – 10/07/16) – 14 Clients/9 Completers
2. Pasco County – Healthy Eating Every Day (HEED) – Dates: (04/19/16 – 07/19/16) – 7 Clients/5 Completers
3. Pinellas County – Chronic Pain Self-Management Program (CPSMP) – Dates: (04/28/16 – 06/02/16) – 10 Clients/4 Completers
4. Pasco County – Tai Chi/Tai Ji Quan – Moving for Better Balance (TCMB) – Dates: (01/19/16 – 04/07/16) – 12 Clients/3 Completers

A. Marketing is appropriate and contains mandatory elements:

All (4) Evidenced Based (EB) events reviewed were appropriately marketed. Marketing contained the required information: “Event Title”, “Date”, “Time”, “Length of Event”, “Location, Date, and Address”, “How to Register” & “Instructions on if Further Information is Needed”.

B. Required licenses are on file:

Current licenses are on file with the AAAPP for the Self-Management Programs umbrella of services, as well as Healthy Eating Every Day (HEED) and Matter of Balance (MOB) Programs. CARES has extended their license with Stanford for the Self-Management programs that was initiated in 2013 and now covers the Chronic Pain Self-Management Program, initiated in 2015 and remaining active in FY2016.

C. Credentials of program facilitators:

Program records listed the trainers for the programs reviewed. Appropriate credentials were on file for these trainers.

D. Provider has procedures in place to ensure the fidelity of programs:

To ensure program fidelity, the provider has established and uses the following forms for all EB Events:

1. Checklist for the instructor to complete at the beginning of the program.
2. Checklists are completed by the Health and Wellness Educators at the end of each final class and/or by the Health and Wellness Coordinator at the end of the class and conducted on a random basis yet covering each of the (7) offered EB classes.

The records reviewed for the (4) programs verified:

1. All classes met the standards for minimum and maximum number of participants.
2. All classes and records complied with DOEA standards.
3. All required client forms were completed and on file.
4. All clients met eligibility requirements.
5. The correct number of program participants and completers was reported in the Provider’s monthly report.
6. The programs were billed correctly in CIRTS.

E. The Program utilizes DOEA Sign-In Sheets and accurately accounts for eligible clientele:

In review of the (4) services, it was observed that the provider is utilizing the appropriate and applicable DOEA formatted sign-in sheets.

Standard #5	Compliance Measure
<p>The Program records/inputs data appropriately</p> <p>a. Services are accurately recorded in CIRTS.</p> <p>b. Information is entered into the NCOA Force online data collection system when applicable.</p>	<p>Achieves [X]</p> <p>Partially Achieves []</p> <p>Not Achieved []</p> <p>Not Applicable []</p> <p>Follow-Up Required []</p>
<p>Description:</p> <p>a. CIRTS Data on a monthly basis is inputted accurately and reflects the full completion of an EB class and units.</p> <p>b. Information is entered in to the NCOA Force Online database when EB classes are complete and only for the Self-Management classes.</p>	


Standard #6	Compliance Measure
<p>Provider is serving or has a plan to serve the number of proposed units as identified in the service provider application.</p>	<p>Achieves [X]</p> <p>Partially Achieves []</p> <p>Not Achieved []</p> <p>Not Applicable []</p> <p>Follow-Up Required []</p>
<p>Description:</p> <p>Based upon the most current approved Supporting Budget Schedule and the 4th and final Quarterly Report, the Provider has expended 100% of their IIID Contract.</p>	

Standard #7	Compliance Measure
<p>The provider establishes collaborations and partnerships with other agencies to assist with Evidence Based Disease Prevention and Health Promotion activities. Documentation is maintained for partnerships listed in the DOEA Report.</p>	<p>Achieves [X]</p> <p>Partially Achieves []</p> <p>Not Achieved []</p> <p>Not Applicable []</p> <p>Follow-Up Required []</p>
<p>Description:</p> <p>The Monitor reviewed back-up documentation regarding partnerships the Program has created and/or maintained. Not all partnerships have formal agreements or MOUs/MOAs, however, the review of four distinct partnerships was reviewed and the correspondence reflecting an agreement is acceptable. All documentation is maintained by CARES for partnerships listed in the monthly DOEA Report.</p> <p>Partnerships reviewed were:</p> <ol style="list-style-type: none"> 1. Holiday Lake Villas 2. Regional Medical Center at Bayonet Point 3. Land O Lakes Community Center 4. Aging Well Center 	

Standard #8	Compliance Measure
<p>Consumer satisfaction and effective delivery of service has been verified through:</p> <p>a. Client Interview</p> <p>b. Review of consumer satisfaction surveys. (Evaluations and/or pre and post surveys)</p>	<p>Achieves [X]</p> <p>Partially Achieves []</p> <p>Not Achieved []</p> <p>Not Applicable []</p> <p>Follow-Up Required [X]</p>
<p>Description:</p> <p>a. The Monitor observed and participated in a "Tai Chi/Tai Ji Quan – Moving for Better Balance" class on December 22nd, 2016 held at the Aging Well Center in Clearwater, Florida. In attendance, were approximately (7) attendees, most of which were female. The Instructor, Debbie Gorzycki, was engaging and adequately demonstrated proficiency with the course's information. It should be noted that this instructor was a recent champion in Tai Chi at the most current World Senior Games. During this last session, and based upon the instructors comments, all participants participated with vigor, humor, and showed an aptitude for the (8) taught movements. After the class was completed, the monitor did not have an opportunity to interview any willing individual participants but did join in the group conversation whereas the satisfaction of the instructor and the class experienced by all was high.</p> <p>b. In review of the (4) EB services' documentation, the monitor concentrated on feedback to the program based upon the Pre and Post Surveys. All comments reflected satisfaction with the content of classes, instructors and manner of service delivery. The monitor did observe several comments regarding the legibility of the Pre and Post Evaluations and including the consumer satisfaction survey. It was and is recommended to the Project Director to provide the aforementioned forms in a legible manner and sensitive to those who may have sight limitations. The legibility of these forms will be reviewed again during the FY2017 Monitoring visit.</p>	

Standard #9	Compliance Measure
<p>Verify that all corrective actions and follow-up have been appropriate, adequately and timely implemented.</p>	<p>Achieves []</p> <p>Partially Achieves []</p> <p>Not Achieved []</p> <p>Not Applicable [X]</p> <p>Follow-Up Required []</p>
<p>Description:</p> <p>They are no corrective actions or follow-up stemming from the monitoring visit occurring in October of 2015.</p>	

Standard #10	Compliance Measure
<p>Service observation indicates appropriateness in the manner it is being conducted.</p> <p>a. Provider follows the fidelity of the program.</p> <p>b. Provision of space allotted for class was appropriate.</p> <p>c. Participants were allowed to engage and participate.</p>	<p>Achieves <input checked="" type="checkbox"/></p> <p>Partially Achieves <input type="checkbox"/></p> <p>Not Achieved <input type="checkbox"/></p> <p>Not Applicable <input type="checkbox"/></p> <p>Follow-Up Required <input type="checkbox"/></p>
<p>Description:</p> <p>a. The Monitor made arrangements to observe a class in progress. The class observed was “Tai Chi/Tai Ji Quan – Movement for Better Balance” and taught by the Instructor, Debbie Gorzycki. During the time period of the class, the Monitor participated with the group, and also observed that the class met full fidelity. Also, given this was the last required day of class, a Post-Fidelity form was completed by the Instructor</p> <p>b. The Tai Chi class was held at Aging Well Center and in a room separate from other rooms where other activities were being conducted. Not only was the space adequate for Tai Chi instruction; it was also appropriate because of easy access to a litany of resources covering a vast amount of aging topics within this community center.</p> <p>c. Not only were class enrollees required to participate, they were encouraged to safely. Each of the enrollees participated in meaningful and sometimes in humorous ways.</p>	

Completed By:	Jason Martino, Director of Planning 
Date:	February 03, 2017