

## CHAPTER 3

# ASSESSMENT STANDARDS & AUTHORIZED SERVICES

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### NEEDS ASSESSMENT STANDARDS & PROCESS

#### **Administrative Standards**

No need for IHSS will be found when a recipient is able to remain safely in his/her own home without authorized IHSS. (30-761)

Services will be authorized only in cases which meet the following conditions:

- The recipient is eligible as specified in Chapter 2, Page 1, except that service may be authorized on an interim basis as presumptive eligibility.
- A needs assessment establishes a need for the services identified in IHSS Program Guide, Chapter 3, Program Services (30-757) consistent with the purposes of the IHSS program, as specified in Section 30-700, except as provided in Section 30-759.8, which states that emergency services may be authorized to aged, blind, or disabled persons prior to the completion of a needs assessment if the recipient meets the eligibility criteria specified in 30-759.3, or in Section 30-755 and the recipient's needs warrant immediate provision of service. The county shall subsequently perform a complete needs assessment within 30 days after the date of application and comply with the standards for application processing. (See Chapter 2, Eligibility and Case Management)
- The Social Worker has conducted a face-to-face contact with the recipient in the recipient's home at least once within the past 12 months (or if applicable the last 18 months), and has determined that the recipient would not be able to remain safely in his/her own home without IHSS. If the face-to-face contact is due but the recipient is absent from the state, but still eligible to receive IHSS pursuant to the residency requirements, the face-to-face residency requirement is suspended until such time as the recipient returns to the state.
- Performance of the service by the recipient would constitute such a threat to health and safety that he/she would be unable to remain safely in his/her own home.

#### **Elder and Dependent Adult Abuse**

IHSS staff members are mandated reporters of child neglect and abuse, as well as elder and dependent adult abuse, physical abuse, neglect by others, financial abuse, and self-neglect. (W&I Code 15630 [b] [1])

If any IHSS employee observes abuse, is told of abuse, or has knowledge that reasonably leads them to suspect abuse of an elder (65 years or older) or a dependent adult (18 – 64 years of age) with either a temporary or permanent disability, the IHSS employee will:

- Call Adult Protective Services Reporting Line within 24 hours at 1-800-510-2020; and
- Follow up within two (2) working days with the SOC 341 report form. See Policy and Procedures Handbook Chapter 3.

***Adult Abuse Involving Penal Code Violation***

Abuse that involves physical violence resulting in injury to an elder or dependent adult will be reported directly to the police department, bypassing Adult Protective Services.

Abuse which involves the commission of a sexual act by a caretaker upon an elder or dependent adult is a violation of the Penal Code and shall be reported directly to the police department, bypassing Adult Protective Services.

For instructions, review the IHSS Policies and Procedures Handbook.

***Types of Elder/Dependent Abuse***

During the course of an assessment for IHSS services, staff may determine that an elder or dependent adult in the home is in danger of abuse or neglect. IHSS staff members have a legal obligation to report all suspected or confirmed instances of abuse or danger to Adult Protective Services.

Abuse may be broadly defined as an individual's having been harmed, threatened with harm, or caused physical or mental injury as a result of:

- Action or inaction by another person
- Their own actions, due to ignorance, illiteracy, incompetence, or poor health.

Specific types of elder/dependent abuse are described below.

***Physical Abuse***

The infliction of physical pain or bodily harm not limited to:

- Sexual abuse
- Constraint
- Isolation
- Abduction
- Abandonment

***Neglect (By Others)***

- Refusal or failure to fulfill caretaking obligations.
- Denial of food, shelter, clothing, medical assistance or personal needs.
- Abandonment or isolation.
- The withholding of necessary medication or assistive devices.
- Neglect can be intentional or unintentional.

***Financial (Material)***

- The illegal or improper exploitation of funds or other resources belonging to an elder or dependant adult (including stealing possessions, money, property, or misuse of money).

***Self-Neglect***

The failure of an elder/dependent adult to adequately take care of him/herself, meet the demands of daily living to eat, pay bills, meet personal hygiene needs, and take medication. The elder/dependent adult may be unable to protect his/her own interests.

***Psychological/Emotional Abuse***

The infliction of mental anguish directed at an elder/dependent adult (threatening, humiliation, intimidating, isolating, infantilizing).

***Helpful Questions to Ask the Client and Yourself*****Conditions in the home:**

- When and what foods did you eat at your last meal? (Nutritional?)
- Are the utilities working? Heating/cooling systems? Stove?
- Problems with insects (ants, roach, mice) in home?
- Do you have any in-home help with housecleaning? Personal care? Any home repairs needed?

**When observing the elder/dependent adult:**

- Is the recipient noticeably unkempt, odorous with urine/feces, unbathed, and inappropriately dressed?
- Do you see bruises, scratches, or cuts?
- Is the recipient dependent, passive, confused, or afraid?
- Does the recipient look like a domestic violence victim?
- Did you ask the elder/dependent if he/she is being abused?

**When observing the adult caregiver:**

- Is the caregiver willing to accept in-home services? Allow medical personnel or other visitors into the home?
- Is the caregiver agitated and/or controlling?
- Who handles the recipient's finances?
- Does the caregiver not allow the recipient to speak for him/herself?

What would you do in this situation if this recipient were a 5 or 12 year-old child?

**Purpose of The Needs Assessment**

The purpose of the needs assessment is to identify the types and hours of services needed and the services which will be paid for by the IHSS program.

***When A Needs Assessment Is Required***

Needs Assessment is performed at:

- Intake
- Recertification
- Change in circumstance (30-761.2.21.211)

***When Services Are Not Needed***

No services will be authorized when the recipient is able to perform them in a safe manner without an unreasonable amount of physical or emotional stress. (30-761.2.25)

**Emergency Services*****Eligibility Criteria, SW Responsibility, Time Limit***

Emergency services may be authorized prior to completion of a needs assessment if the recipient meets all other eligibility criteria, as follows:

1. Status eligibility – SSI/SSP status is verified.
2. Income eligibility:
  - a) Income is verified and SOC (if any) determined.
  - b) The recipient is at least 65 years of age or disability/blindness is verified, or a presumptive determination of disability/blindness is made as outlined in Chapter 2.
  - c) Property, residency requirements are met.

If emergency services are authorized, a complete needs assessment must be completed within 30 days of the date of application.

The IHSS Social Worker determines what constitutes an emergency. (30-759.8) Emergency situations may be identified by physicians, nurses, or other members of a hospital/clinic diagnostic team and be accepted by the IHSS Social Worker or Social Work Supervisor as an emergency.

Emergency referrals made by individuals or agencies will be evaluated by the IHSS Social Worker within 24 hours to determine if an emergency exists. If the Social Worker determines an emergency does exist, he/she will order emergency services through the IHSS Urgent Services Contractor. Please refer to IHSS Policy and Procedures Handbook Chapter 4.

**When to Send the Notice of Action**

A needs assessment will be conducted early enough so that a Notice of Action may be mailed to the client twelve calendar days prior to the last day of the current period of authorization.

***How to Determine Authorization Periods***

Authorization periods for needs assessments will be determined by the following procedures:

- On the initial assessment, enter the last day of the eleventh full calendar month, following the date of initial assessment, as the ending date for the authorization period.
- Subsequent assessment dates will begin on the first of the following month and end on the last day of the twelfth month.
- Subsequent assessments may then be completed during the last two weeks of the eleventh month, and the first two weeks of the twelfth month, with the new authorization beginning the first day of the following month.

***Time Limit***

Services are authorized for a twelve-month period to the day. (30-761.212) (Under certain conditions, a recertification for services may be extended for up to 18 months. Please see Program Guide and Policy and Procedures Handbook Chapter(s) 2 for additional information.)

**Process**

The needs assessment process consists of four steps:

1. Determine the total need for IHSS services. (Total need minus adjustments equals individual's assessed need.)
2. Identify and deduct available alternative resources.
3. Determine services that will be purchased by IHSS.
4. Send a Notice of Action to the recipient that details the following:
  - a. a description of each task for which a need is assessed;
  - b. the number of hours authorized for the completion of the task;
  - c. identification of hours increased or decreased for specific tasks;
  - d. the difference from the previous hours authorized

***Determining Need for Services***

The Social Worker will determine the need for services based on all of the following:

- Observation of the recipient's physical/mental condition, and living/social situation, as determined by a face-to-face contact with the recipient.
- The recipient's statement of need.
- The available medical information.
- Other information social service staff consider necessary and appropriate to assess the recipient's needs. (30-761.26)

***Itemizing Need for Services***

A Needs Assessment Worksheet (12-42 HHSA) and Authorization form (SOC 293) will be completed for each case and filed in the case record. The needs assessment form SOC 293 will itemize the need for services and will include the following: (30.761.27)

- Recipient information including age, sex, living situation, the nature, and extent of the recipient's functional limitations, and whether the recipient is severely impaired.
- The types of services to be provided through the IHSS program, the service delivery mode, and the number of hours per service per week.
- Alternative resources.
- Unmet need for IHSS.
- Beginning date of service authorization.