**Please provide answers to the following questions PRIOR to monitoring visit.**

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| **Q: Who is the Area Agency on Aging staff person responsible for administering the Title III E program? (Supply contact information.)** |
| **A:**  |
| **Q: What innovative model of caregiver support has been developed by the Area Agency on Aging? What funding supports this program?**  |
| **A:** |
| **Q: Is your agency utilizing direct payments to family caregivers for the purchase of services such as respite? If so, please describe this process including the payment procedure.** |
| **A:**  |

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| **Q: Is your agency using Title III E funds to support caregivers of individuals who are providing care to individuals 60 and older with intellectual disabilities and related developmental disabilities as defined in Section 102 of the Developmental Disabilities Assistance and Bill of Rights Act? Please enumerate the number of such clients being served, their disabilities and the problems faced by their caregivers. What services provided by Title III E have aided the caregivers of these clients?** |
| **A:**  |
| **Q: Is the Virginia Caregiver Service Form completed and placed in each Title III E client’s file? (Scanned into electronic file if required.)** |
| **A:** |
| **Q: What formal or informal programs have been utilized by your agency to train staff about the Title III E program as well as caregiver and kinship caregiver issues?** |
| **A:**  |

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| **Q: Please supply a description of one case where Title III E services have enhanced the life of a caregiver and his/her loved one.** |
| **A:** |
| **Q: Does your agency receive a significant number of inquiries for aid from grandparents raising grandchildren? What programs does your agency have to aid grandparents over 55 who are raising their grandchildren?** |
| **A:** |
| **Q: Please list what programs your local Department of Social Services offices have to aid children being raised by their grandparents. What are their policies on placing unattached children with relatives such as grandparents?** |
| **A:** |

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| **Q: How many Limited English Proficient clients received services from your agency in FY 2013? What provisions does your agency have for interpretative and translation services?** |
| **A:**  |

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| Form Completed by |  | Date |
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| Liz Havenner |  |  |
| Monitor |  |  |
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