



“Working Harder To Make Aging Easier”

Service Standards

Title III-D Disease Prevention and Health Promotion

The service provider must adhere to the Northeastern Illinois Area Agency on Aging General Service Requirements in addition to service-specific requirements listed below.

I. Service Definition: (IDOA 603.29C) Disease Prevention and Health Promotion Programs must be:

- A.** Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability and/or injury among older adults; and
- B.** Proven effective with older adult population, using Experimental or Quasi-Experimental Design;* and
- C.** Research results published in a peer-reviewed journal; and
- D.** Fully translated in one or more community site(s); and
- E.** Includes developed dissemination products that are available to the public.
- F.** *There are two ways to determine if a program meets the definition; either one is acceptable,
 - 1.** Document whether the program meets each of the 5 bullets in the definition.
 - 2.** Check to see whether the program is considered to be “evidence-based” by any operating division of the U.S. Department of Health and Human Services (HHS). This includes programs listed on ACL’s Aging and Disability Evidence-Based Programs and Practices, CDC’s Compendium of Effective Interventions, SAMHSA’s National Registry of Evidence-Based Programs and Practices, NIH’s Cancer Control Evidence-Based Portal, etc. A list of HHS Family Agencies may be found at <http://www.hhs.gov/about/foa/index.html>.

II. Participant Eligibility

- A.** Be aged 60 year or older

III. Target Population: (IDOA 603 29A):

- A.** Title III-D funds must be used to provide disease prevention and health promotion services and information at senior centers, at congregate meal sites; through home delivered meal programs, in the client’s home or at other appropriate sites.

IV. Allowable Services:

- A.** Health Promotion Programs – A Matter of Balance (MOB); Chronic Disease Self-Management (CDSMP); Diabetes Self-Management (DSMP); Tomando Control de su Salud, a Spanish Chronic Disease Self-Management Program (Spanish CDSMP); Fit and Strong; and Stress-Busting Program for Family Caregivers of Persons with Dementia.
 - 1.** NEIL AAoA maintains license for the above programs. Grantees may operate these programs under the NEIL AAoA license. Grantees will not have to pay licensing fees for the above programs, with the exception of additional site fees for Fit and Strong. Grant funds may be used for Fit and Strong additional site fees.
 - a. Grant funds may be used for leader training conducted in Illinois, program operating costs, and program materials.
 - b. Grant funds may not be used for licensing (with the exception of additional site fees for Fit and Strong) or Master Training for these programs without prior approval by the Northeastern Illinois Area Agency on Aging.
 - 2.** Definition: Health Promotion Programs (IDOA 603.29D4a) Services to promote better health among older persons by providing evidence-based health promotion programs.
 - a. Service Activities May Include: (IDOA 603.29D4b) Programs relating 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.
 - b. Unit of Service: (IDOA 603.29D4c) The unit of service is a session per participant. If there are 7 people attending a weekly health promotion session, then the unit count would be 7, the unduplicated count of people

served is 7. If during the second week health promotion session, 4 people return from the first meeting and 4 new people join, then the unit count for the month to date would be 15 (7 sessions in 1st week + 8 sessions in 2nd week), and the unduplicated count of people served is 11 (7 people in 1st week + 4 new people in 2nd week.)

B. Mental Health Screening Programs

PEARLS (Program to Encourage Active Rewarding Lives for Seniors) and Healthy IDEAS (Identifying Depression, Empowering Activities for Seniors).

1. Grantees may apply to conduct Mental Health Screening which meet the Evidence-Based criteria and definitions below.

- a. Grant funds may be used for program operating costs and program materials.
- b. Grant funds may not be used for licensing, Master Training and/or leader training fees for these programs without prior approval by the Northeastern Illinois Area Agency on Aging.

2. Definition: Mental Health Screening (IDOA 603.29D7a)

Screening services to educate and improve mental health among older persons.

- a. Service Activities May Include: (IDOA 603.29D7b) Coordination of community mental health services, provision of educational activities, and referral to psychiatric and psychological services.
- c. Unit of Service: (IDOA 603.29D7c) The unit of service is a session per participant. If there are 7 people attending a weekly health promotion session, then the unit count would be 7, the unduplicated count of people served is 7. If during the second week health promotion session, 4 people return from the first meeting and 4 new people join, then the unit count for the month to date would be 15 (7 sessions in 1st week + 8 sessions in 2nd week), and the unduplicated count of people served is 11 (7 people in 1st week + 4 new people in 2nd week.

II. Records and Documentation

- A.** The recipient of Disease Prevention and Health Promotion Services funding shall have a written statement of its mission, consistent with the recipient agency itself. The recipient shall also have a written statement of its goals and objectives based on its

mission and on the needs and interests of older adults in its community or service area. The recipient will have a written action plan that describes how the programs will achieve goals and objectives. These statements shall be used to guide the character and direction of the agency operations and purpose (NEIL).

- B.** The recipient of Disease Prevention and Health Promotion Services funding shall have appropriate and adequate arrangements to evaluate and report on its program(s). Each recipient of Disease Prevention and Health Promotion Services funding must develop service-specific Outcome Measures for every OAA funded service, available for review by the Area Agency on Aging (NEIL).
- C.** The recipient of Disease Prevention and Health Promotion Services funding shall keep complete records required to operate, plan, and review its program. It shall regularly prepare and circulate reports to inform its governing structure, its participants, staff, funders, public officials, and the general public about all aspects of its operation and program (NEIL).
- D.** The recipient of Disease Prevention and Health Promotion Services funding shall use the data collected from the participant surveys to verify that the goals and objectives are being met and to identify unmet participant needs. Verification and identification procedures and results will be documented and available for review by NEIL AAoA (NEIL).
- E.** The recipient of Disease Prevention and Health Promotion Services funding will cooperate and participate in whatever manner deemed necessary by NEIL AAoA for the monitoring of services (NEIL).
- F.** Providers shall assure maintenance and safeguard of information relating to participants as required by federal and state law. All records, case notes and other information on persons served shall be confidential and protected from unauthorized disclosure (NEIL).
- G.** All program records, reports, and related information and documentation, including files of terminated participants, which are generated in support of a contract/grant between the provider and the AAA shall be maintained by the provider for a minimum of three years from the submission of the last expenditure report of the appropriate fiscal year or for a period of time otherwise specified by the AAA (e.g., if any litigation, claim or audit is started prior to the expiration of the three year period, the records shall be retained until all litigation, claims or audit findings involving the affected records, information or documentation has been resolved (NEIL).