



CREATE YOUR OWN CAREGIVER CORPS: A Toolkit from Livingston County Catholic Charities



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Introduction

To Our Nation's Community of Caregivers and Those Who Support Them:

Welcome to the **Caregiver Corps Toolkit!** We invite you to use it to help launch – and to expand – volunteer services for elders, individuals with disabilities, and family caregivers who need a helping hand to stay safe and well at home. Committed volunteers are the heart and soul of sustainable community service to our neighbors, family members, and friends; we are pleased and proud to be able to offer it. The Caregiver Corps Toolkit was created by Livingston County Catholic Charities (LCCC) and Altarum's Program to Improve Eldercare with special funding provided by the Michigan Health Endowment Fund. The goal of this flexible, easily adaptable online instrument is to aid community-based organizations anywhere and everywhere to create their own volunteer-led initiatives. They can adapt these materials for recruiting and running local programs that are designed to provide valuable non-medical services to highly vulnerable people who are living at home. One of our primary goals in creating this toolkit has been to ease stresses and strains experienced by family caregivers, who need much more help in providing basic supports (e.g., delivery of supplies and services to the home, basic assistance inside the home, transportation to appointments in the community, companionship, and critical respite). Even during the challenging era of Covid-19, adaptations (e.g., curbside delivery, internet based communications, etc.) are incredibly important in helping to ease the impact of an inadequately paid caregiving workforce. Further, our hope is that this toolkit will help standardize and promote the development of high-quality, low cost volunteer support services for our community's elders – and those in communities across the nation.

The **Caregiver Corps Toolkit** will provide guidance on how to assist recipients who are seeking to maintain their health (social, mental, and physical) and independence while aging in place with their families. Quite often, these are recipients with limited support systems, who often do not have family or friends in the community; or whose family and friends have significant struggles of their own. The tool also provides a way to deliver highly cost-effective services to recipients living on limited incomes. It also provides a foundation for assessing recipient needs, identifying the support services that will be most beneficial, and guidance on developing organizational policies and procedures that are needed to manage both recipient care and volunteer recruitment and support. In addition, this toolkit includes information about volunteer screening and training. Thoughtful training and support are essential for providing volunteers with the skills and confidence they need to provide quality in-home care.

Here at LCCC we have been running a Volunteer Caregiver Program for over 30 years. We do it not only to provide a valuable service to vulnerable older and disabled adults, but also because we can provide individuals who want to serve others with a satisfying opportunity to make a significant community contribution. Over time, our program has created a record of excellent volunteer services. Together with our volunteers, we have the ability to provide our community's older residents with transportation, friendly visits, and in-home respite. We know they are appreciated, because we hear from our elders! Some have told us they are not sure



how they would be able to maintain living independently in their homes without volunteer services. Today, LCCC is the leading organization in the county that provides one-on-one volunteer support services.

During the period of time that we have been faced with COVID-19, our program services have diversified, and we have almost doubled the number of recipients served. To make this possible, we have adjusted our face-to-face weekly friendly visits and in-person respite, to telephone reassurance. Working largely remotely, we are assisting program participants as they learn to cope with new challenges and uncertainties. In turn, this has incentivized us to become even more flexible, and to modify our service delivery in various ways. Prior to March 2020, the most requested service was transportation to appointments and shopping. Today, our co-workers, volunteers, and community partners are delivering food and supplies directly to the home, door-to-door service style. We have also successfully worked with the Gleaners Community Food Bank of Livingston County to arrange for food box pickups and deliveries when physical store grocery shopping for older adults became high risk. As our state's Stay-At-Home orders have begun to subside, we have adjusted services from food box deliveries to door-to-door grocery deliveries from local stores. We are also continuing to provide transportation for essential medical appointments as needed, with proper protocols in place for safety.

In summary, we hope our **Caregiver Corps Toolkit** will assist any organization anywhere in the country to create and maintain a volunteer services program that provides excellent, reliable support services that volunteers are comfortable performing, and which serve to strengthen other support systems for recipients in the community. We look forward to hearing from other organizations about their experiences as they move into establishing similar volunteer services programs. We invite you to be in touch!

Very best –

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LCCC Document Outline

The following outline corresponds to the actual documents LCCC uses in their volunteer caregiver program. PDF versions can be found in the corresponding appendices. To view any of the PDFs within the appendices simply double-click with your mouse's left button. The PDF will open as a new document.

ABOUT US

1. About Us – Livingston Catholic Charities - Who We Are
 - a. Who We Are
 - b. Senior Services
 - c. Resource Advocacy Program
 - d. Volunteer Caregiver Program
 - e. Be Our Guest Adult Day Service (BOGADS)

DATA

Surveys and Results

1. Surveys
 - a. Volunteer Survey 1
 - b. Volunteer Survey 2
 - c. Volunteer Caregiver Participant (VCP) Caregiver Survey 1
 - d. VCP Caregiver Survey 2
 - e. VCP Care Recipient Survey 1
 - f. VCP Care Recipient Survey 2

STAFF

Internal Policies and Forms for Staff

1. Reference Check
2. Pandemic and Emergency Preparedness Plan
3. Exclusion Record Checks and Critical Incident Report Policies

Staff Screening

1. Confidentiality Agreement
2. Criminal Record and Driving Record Consent
3. Driving Information
4. Auto Insurance Waiver

DHHS Form for Staff

1. CENTRAL REGISTRY CLEARANCE REQUEST: Michigan Department of Health and Human Services (MDHHS)

Training for Staff

1. Personnel Manual
2. Position Description – Example Position Description: VCP Program Coordinator

VOLUNTEERS

Internal Policies and Forms for Volunteers

1. Narrative for Orientation
2. Volunteer Caregiver Coordinator Orientation
3. New Training Checklist
4. Volunteer Policy and Procedure Manual
5. Volunteer Policies and Procedures
6. Description of Service and Procedures
7. Incident/Accident Report
8. Consent for Use of Photo, Video, etc.
9. Confidentiality Agreement
10. Live-Remote Orientation Guide

Volunteer Screening

1. General Volunteer Application
 - a. Volunteer Application
2. Background Checks
 - a. Reference Check
 - b. Criminal Record and Driving History Consent
 - c. Driving Information
 - d. Auto Insurance Waiver

DHHS Form for Volunteers

1. CENTRAL REGISTRY CLEARANCE REQUEST: Michigan Department of Health and Human Services (MDHHS)

Outreach and Marketing

1. Current Outreach and Marketing Strategies
 - a. Recruiting Strategies
 - b. Online
 - i. Website
 1. Homepage
 2. Caregiver Activities – Example: January 2020
 3. Volunteers Needed
 4. Wish List
 5. Donation Form
 6. Video Series
 7. Online Newsletter

8. Pandemic and Emergency Notices
 - ii. Social Media
 1. Facebook
 2. LinkedIn
 - iii. Online Partners – Livingston County United Way
- c. Print Materials
 - i. Pull Tab Bulletin Board Flyer
 - ii. Flyer
 - iii. Card
 - iv. Postcard
 - v. Who We Are Brochure
 - vi. Senior Services Brochure
 - vii. Counseling Brochure
 - viii. Press Release Example
- d. In Person
 - i. VCP Presentation
 - ii. United Way Volunteer Livingston Coalition Meeting
 - iii. United Way Volunteer Livingston Cheers for Volunteers Event
 - iv. Citizens Insurance Resource and Volunteer Fair

Volunteer Training & Orientation

1. Volunteer Agreement
2. Acknowledgement of Volunteer Policy and Procedure Manual
3. Automobile Registration Policy
4. Monthly Record Procedure
5. Volunteer Grievance Policy
6. Volunteer Training Handouts
 - a. Skills
 - i. Boundaries and Listening
 - ii. Communication
 1. Communication and Alzheimer's
 - b. Fact Sheets
 - i. Aging and Pulmonary
 - ii. Body Mechanics
 - iii. Dementia and Alzheimer's Disease
 - iv. The Aging Process
 - c. Advocacy
 - i. Resource Advocacy Program
7. Volunteer Job Descriptions
 - a. Friendly Visitor
 - b. Office/Clerical
 - c. Respite Care
 - d. Transportation
 - e. Phone Call Reassurance

Volunteer Scheduling

1. Volunteer Monthly Record

Volunteer Retention

1. Retention Incentives
2. Salute to the Stars
 - a. Salute to the Stars Event
 - b. Salute to the Stars Event Presentation
3. Semi-Annual Training and Volunteer Appreciation Meeting
4. United Way Volunteer Livingston Cheers for Volunteers Event

Additional Volunteer Forms and TA

1. Friendly Visit or In-Home Respite

CARE RECIPIENTS

Internal Policies and Forms for Care Recipients

1. Transportation Request
2. New Care Recipient Needs Referral
3. Senior Service Plan
4. Senior Services Quarterly Update
5. Wait List Criteria
6. Wait List Form

Forms and Policies for Care Recipients

1. New Care Recipient Interest
2. Recipient Registration
3. Notice of Use and Disclosure of Protected Health Information
4. Caregiver Registration
5. Organization Grievance Policy
6. Transportation Policy
7. Consent for Use of Photo, Video, etc.

COMMUNITY RESOURCES

Community Resource Lists

1. Community Resource List
2. Aging Adult Services
3. Livingston County Community Resource Book
4. Support Groups for Caregivers
5. Livingston County Senior Caregivers Guide
6. Area Agency on Aging 1-B Information Guide
7. County Resources



8. Diocese Resources
9. Mental Health Resources
10. Substance Abuse Resources

SUSTAINABILITY

1. Sustainability Resources



Appendix A: About Us

The following documents were taken from the “About Us” section on the LCCC website.

When creating your organization’s “About Us” format consider including the following: Mission Statement, Vision Statement, Disclaimer, Services, and any Resources.

- *About Us 1: Who We Are*
- *About Us 2: Senior Services*
- *About Us 3: Resource Advocacy Program*
- *About Us 4: Volunteer Caregiver Program*
- *About Us 5: Be Our Guest Adult Day Service (BOGADS)*



Appendix B: Data

The following documents describe possible ways to gather data about your organization's performance.

When creating your organization's data collection procedures and forms be sure to capture all necessary roles (e.g., volunteers, caregivers, care recipients, etc.). It is recommended to keep copies for your organization whenever appropriate.

Volunteer Survey

The volunteer surveys are recommended to be given twice a year at the semi-annual trainings to give each volunteer an opportunity to express their opinions about the program. This survey also provides information about the Volunteer Care Corps program so staff can make improvements and/or changes.

- *Data 1: Volunteer Survey 1*
- *Data 2: Volunteer Survey 2*

Family/Friend Caregiver Survey

This survey is for caregivers (family or friends) of the care recipient to see if there are any gaps in services provided. It can be given yearly or as needed.

- *Data 3: Caregiver Survey 1*
- *Data 4: Caregiver Survey 2*

Care Recipient Survey/ In-Home Services

This survey is for care recipients of in-home services to see if there are any gaps in services provided and to gather satisfaction data. It can be given yearly or as needed.

- *Data 5: Care Recipient Survey 1*
- *Data 6: Care Recipient Survey 2*



Appendix C: Staff

The following documents describe policies and forms for staff.

When creating your organization's staff documents it is recommended to capture internal policies and forms (e.g., reference check, employee agreement, confidentiality agreements, background check, clearances, personnel manual, etc.). It is recommended to keep copies for your organization or in staff files as appropriate whenever information is gathered, or a form is signed.

INTERNAL POLICIES AND FORMS FOR STAFF

The following documents are policies and forms for staff that are used internally for reference.

Employee Reference Check

This is a sample document used for reference checks (3) on potential employees. This form is put in the staff member's file.

- *Internal Policies for Staff 1: Employee Reference Checklist*

Pandemic and Emergency Preparedness Plan

This document contains guidelines for CDC compliant policies and procedures to follow in the event of a pandemic or an emergency.

- *Internal Policies for Staff 2: Pandemic and Emergency Preparedness Plan*

Exclusion Record Checks and Critical Incident Report Policies

This document contains the policies for monthly staff record checks and serves as a guide when completing a critical incident report. Record checks are in compliance with the Michigan Department of Health and Human Services, Centers for Medicare and Medicaid Services, and The Area Agency on Aging 1-B. In the event of a critical incident, an Incident Report must be completed within 24 hours of any unusual occurrence of a serious nature involving staff, volunteers, or participants that may result in potential grievance or liability.

- *Internal Policies for Staff 3: Exclusion Record Checks and Critical Incident Report Policies*

STAFF SCREENING

The following documents are completed during screening of prospective staff.

Confidentiality Agreement

This policy should be reviewed with, and signed by, incoming staff in reference to working with care recipients in the community. This form is given to the staff member and a copy is put in their file.

- *Staff Screening 1: Confidentiality Agreement*

Criminal History and Driving Record Consent Form

This document is to verify staff driving records and criminal history prior to working in the organization. Have prospective staff complete and sign this form. A copy is put in their file.

- *Staff Screening 2: Criminal History/Driving Record Consent Form*



Driving Information

Informational document which includes, but is not limited to, driver's license information, driving record, type of vehicle used, insurance information and liability limits. Have prospective staff complete and sign this form. A copy is put in their file.

- *Staff Screening 3: Driving Information Sheet*

Auto Insurance Waiver

This waiver includes the automobile insurance policy requirements. Have staff complete and sign each section of this form to attest that driving information is valid and in compliance with the organization's requirements. A copy is put in their file.

- *Staff Screening 4: Auto Insurance Waiver*

Health and Human Services Central Registry Clearance Request

This Michigan Department of Health and Human Services (MDHHS) form is required to be filled out by all prospective staff in Michigan. Have prospective staff complete and sign this form. They will take it to MDHHS along with a copy of their Driver's License or State ID. Results will be sent to your organization. Substitute the appropriate form for your state.

- *State Clearance for Staff 1: MDHHS Central Registry Clearance Request*

TRAINING FOR STAFF

The following documents are reviewed during new staff training.

Personnel Manual

This document is used to describe all relevant information and policies for staff. A copy is given to new staff.

- *Training for Staff 1: Personnel Manual*

Position Description

This is a position description document for Volunteer Care Corps Program Coordinator applicants that is to be reviewed and signed.

Create position descriptions for each staff role that include items such as purpose of position, qualification requirements, position requirements, and accountability. The appropriate position description is given to a prospective staff member.

- *Training for Staff 2: Example Position Description: VCP Program Coordinator*



Appendix D: Volunteers

The following documents describe policies and forms for volunteers.

When creating your organization's volunteer documents it is recommended to capture internal policies and forms (e.g., policy and procedure manual, reference check, background check, clearances, personnel manual, etc.) and outreach procedures. It is recommended to keep copies for your organization or in volunteer files as appropriate whenever information is gathered, or a form is signed.

INTERNAL POLICIES AND FORMS FOR VOLUNTEERS

The following documents are policies and forms for volunteers that are used internally for reference.

Narrative for Orientation

The purpose of the volunteer orientation is to go over key information to assist and explain to the volunteer what is expected from them. Along with this, it is an opportunity to highlight what the organization does in the community, and complete miscellaneous "housekeeping" items including, but not limited to, signatures and creating copies of information required (e.g., driver's license, auto insurance, registration, etc.), and taking a photo for a volunteer badge.

When creating your organization's orientation procedure, it is recommended to provide a step by step explanation on how to administer a volunteer orientation including key information to review. For internal use by staff.

- *Internal Policies for Volunteers 1: Narrative for Orientation*

Volunteer Caregiver Coordinator Orientation

List for Volunteer Care Corps Coordinator to assist in planning Volunteer Orientation. For internal use by staff.

- *Internal Policies for Volunteers 2: Volunteer Caregiver Coordinator Orientation*

New Training Checklist

Checklist style form used during the orientation of the Volunteer Care Corps Coordinator position to assist in describing and highlighting specific tasks. For internal use by staff. Staff member completes this checklist during orientation. After orientation, both the staff member and volunteer sign this form. This form is given to the volunteer and a copy is put in their file.

- *Internal Policies for Volunteers 3: New Training Checklist*

Volunteer Policy and Procedure Manual

This manual is provided to all staff and volunteers to read through after orientation. Each section is touched upon during orientation, highlighting the Confidentiality section, and Volunteer/Care recipient Relationship section. A copy is given to new volunteers.

- *Internal Policies for Volunteers 4: Policies & Procedures - Volunteer Policy and Procedure Manual*

Volunteer Policies and Procedures

This manual is an explanation to what the Volunteer Care Corps program does. This program is a volunteer



recruitment and coordination program assisting older and disabled adults through a variety of volunteer provided direct services.

A care recipient service plan is prepared by a staff member documenting services provided and addressing any unmet service and health needs. A copy is given to new volunteers.

- *Internal Policies for Volunteers 5: VCP Policies and Procedures*

Description of Service and Procedures

The Volunteer Caregiver Program (VCP) provides services such as friendly visits/companionship, transportation to and from doctor appointments, grocery shopping and other errands, respite services, and telephone reassurance. VCP is continually recruiting for volunteers through different media such as: media, churches, senior serving organizations, service clubs, and a variety of other avenues. A copy is given to new volunteers.

- *Internal Policies for Volunteers 6: VCP Description of Service and Procedures*

Incident/Accident Report

Organization form supplied at orientation is to be filled out and signed in the event an incident or accident occurs while the volunteer is with a care recipient. All volunteers are expected to report emergencies to their coordinator immediately after overseeing the welfare of the client. Volunteers may not speak to media, relatives, or friends of clients about an emergency. The volunteer coordinator is available to assist in writing the report. It is recommended that all Incident Reports should be reviewed on a quarterly basis by the Quality Assurance Team. Organization staff will provide any follow-up needed related to the incident/accident. Reports should never be filed in the care recipient or volunteer files but saved in an Incident Report file maintained by designated staff such as the Office Manager.

- *Internal Policies for Volunteers 7: VCP Incident Report*

Consent for Use of Photo, Video, etc.

This form is used to gain the consent of the volunteer for the use of photographs, video, or other identifiable information. Both the staff member and volunteer sign this form. A copy is put in their file.

- *Internal Policies for Volunteers 8: Consent for Use of Photo, Video, etc.*

Volunteer Confidentiality Agreement

This policy should be reviewed with, and signed by, incoming volunteers in reference to working with care recipients in the community. This form is given to the staff member and a copy is put in their file.

- *Internal Policies for Volunteers 9: Confidentiality Agreement*

Live-Remote Orientation Guide

This guide is to be used to help plan a live-remote orientation in the event a volunteer cannot attend in-person orientation, or circumstances are such that an in-person orientation is not accessible. All content covered will be the same as an in-person orientation. Possible remote options may include, but are not limited to, the following: telephone call, Zoom, Facebook Video Chat, Duo, Facetime, Google Hangouts, Skype, Teams, etc.

- *Internal Policies for Volunteers 10: Live-Remote Orientation*



VOLUNTEER SCREENING

The following documents are completed during screening of new volunteers.

General Volunteer Application

Internal form to collect personal information, emergency contacts, education, employment, skills, interests, references, and availability along with permission to do a background check. Have volunteer applicants complete and sign this form.

- *Volunteer Screening 1: Volunteer Application*

Volunteer Reference Check

Internal form for checking on references that the prospective volunteer has provided, which is done by phone. Have volunteer applicants provide names and contact information for references. A copy is put in their file.

- *Volunteer Screening 2: VCP Reference Check*

Criminal Record and Driving History Consent Form

This document is to verify volunteer driving records and criminal history prior to volunteering with the organization. Have volunteer applicants complete and sign this form. A copy is put in their file.

- *Volunteer Screening 3: Criminal History/Driving Record Consent Form*

Driving Information

Organization's information form which includes, but not limited to, driver's license information, driving record, type of vehicle used, insurance information and liability limits. Have volunteer applicants complete and sign this form. It is used to help verify state driving information. A copy is put in their file.

- *Volunteer Screening 3: Driving Information*

Auto Insurance Waiver

This waiver includes the automobile insurance policy requirements. Have staff complete and sign each section of this form to attest that driving information is valid and in compliance with the organization's requirements. A copy is put in their file.

- *Volunteer Screening 5: Auto Insurance Waiver*

HEALTH AND HUMAN SERVICES CENTRAL REGISTRY CLEARANCE REQUEST

This Michigan Department of Health and Human Services (MDHHS) form is required to be filled out by all prospective volunteers in Michigan. Have prospective volunteer complete and sign this form. They will take it to MDHHS along with a copy of their driver's license or State ID. Results will be sent to your organization. Substitute the appropriate form for your state.

- *State Clearance for Volunteers 1: MDHHS Central Registry Clearance Request*



OUTREACH AND MARKETING

The following documents are used during outreach and marketing.

When creating your organization's orientation procedure, it is recommended to think about various recruiting strategies which may include, but are not limited to, print materials, online communications, power point presentations, and events.

Recruiting Strategies

An internal list of recruiting strategies.

- *Outreach and Marketing 1: Current Strategies Email*

ONLINE OUTREACH AND MARKETING

The following are examples of online communication during outreach and marketing. These can be used as an example when designing your organization's website or social media accounts, email communications, videos/media, or interactions with community partners.

Homepage

An organization's website homepage should clearly communicate the organization's services. It is recommended to have an easy to follow menu with categories such as: HOME, ABOUT US, EVENTS, GET HEP, GIVE HEP, RESOURCES, and a search field.

- *Outreach and Marketing 2: Online [Homepage](#)*

Online Caregiver Activities

Monthly Caregiver support activities are posted on the organization's website, various social media platforms, in print, and in ads such as radio.

- *Outreach and Marketing 3: Online [Caregiver Activities](#) – Example: January 2020*

Volunteers Needed

Requests for volunteers in various programs are posted on the organization's website, various social media platforms, and in print.

- *Outreach and Marketing 4: [Volunteers Needed](#)*

Wish List

Requests for supplies, equipment, gift cards and the like are posted on the organization's website, various social media platforms, and in print.

- *Outreach and Marketing 5: [Wish List](#)*

Donation Form

Online form used for requesting monetary donations via the organization's website.

- *Outreach and Marketing 6: [Donation Form](#)*



Video Series

Online video series used to showcase care recipients, volunteers, and staff share their experience.

- *Outreach and Marketing 7: [New Tomorrows Video Series](#)*

Online Newsletter

Used for promotion of the organization's needs, activities, and services provided. Some items may include upcoming events, important notices, links to helpful articles or websites, thank you notes from care recipients or community members, or uplifting stories about experiences with the organization.

- *Outreach and Marketing 8: [Online Newsletter](#)*

Pandemic and Emergency Notices

Notices, guides, and helpful tips should be easily accessible online in the event of a pandemic or an emergency. It is recommended to include any updates to hours of operation, emergency phone numbers, helpful protocols and procedures, and tip guides.

- *Outreach and Marketing 9: Pandemic and Emergency Notices – [Corona Virus Updates](#)*

Social Media

Used for promotion of the organization's needs, activities, and services provided across various social media platforms (e.g., Facebook, Twitter, and LinkedIn).

- *Outreach and Marketing 10: [Facebook Page](#)*
- *Outreach and Marketing 11: [LinkedIn Page](#)*

Online Partners - United Way

Online presence to promote community partners such as the United Way.

- *Outreach and Marketing 12: [Livingston County United Way Partners Online](#)*

PRINT OUTREACH AND MARKETING

The following are examples of print media for outreach and marketing. These can be used as an example when designing your organization's own flyers, cards, brochures, and press releases.

Pull Tab Bulletin Board Flyer

Internally printed flyers made for distribution in the community to assist in recruiting volunteers, and to communicate the organization's needs.

- *Outreach and Marketing 13: Print Pull Tab Bulletin Board Flyer*

Flyer

Internally printed flyers used at trade shows and events around the community to promote the organization, its needs, and to recruit volunteers.

- *Outreach and Marketing 14: Print Flyer*



Card

Internally printed cards used at trade shows and events around the community to promote the organization, its needs, and to recruit volunteers.

- *Outreach and Marketing 15: Print Card*

Postcard

Internally printed post cards mailed out to the organization's contacts in the community to promote the organization, its needs, and to recruit volunteers.

- *Outreach and Marketing 16: Print Postcard*

Brochures

Brochures give an overview of services the organization provides in the community being served.

- *Outreach and Marketing 17: Who We Are Brochure*
- *Outreach and Marketing 18: Senior Services Brochure*
- *Outreach and Marketing 19: Counseling Brochure*

Press Release Example

This is an example of a press release provided by the organization.

- *Outreach and Marketing 20: Press Release – Example: MI Caregiver Corps Toolkit Press Release*

IN-PERSON OUTREACH AND MARKETING

The following are examples of in-person outreach and marketing. These can be used as an example when designing presentations or events.

Presentation Example

This is an example of a PowerPoint presentation to provide information on the organization's Volunteer Caregiver Corps. Presentations can be useful in person, but they can also be given live online or recorded for easy access on the organization's website.

- *Outreach and Marketing 21: Presentation Example - Volunteer Caregiver Program*

Event Examples

The following documents are a few examples of events planned by the organization or with community partners.

- *Outreach and Marketing 22: United Way Volunteer Livingston Coalition Meeting*
- *Outreach and Marketing 22: United Way Volunteer Livingston Cheers for Volunteers Event*
- *Outreach and Marketing 23: Citizens Insurance Resource and Volunteer Fair*

VOLUNTEER TRAINING AND ORIENTATION

Volunteer Agreement

This agreement should be reviewed with incoming volunteers in reference to volunteering with seniors in the community.



- *Volunteer Training & Orientation 1: Volunteer Agreement*

Acknowledgement of Volunteer Policy and Procedure Manual

This form is an acknowledgement, given at orientation that the new volunteer has received a copy of the Policy and Procedure Manual, and has been given an opportunity to ask questions. Have volunteer applicants review and sign this form. This form is given to the volunteer and a copy is put in their file.

- *Volunteer Training & Orientation 2: Policies & Procedures - Agreement Acknowledgement*

Automobile Registration Procedure

At volunteer orientation, automobile registration, insurance, and driver's license are copied and collected, then the information is logged in a spreadsheet. At expiration, these items need to be updated.

- *Volunteer Training & Orientation 3: Policies & Procedures - Automobile Registration Procedure*

Monthly Record Procedure

This form is gone over at the volunteer orientation explaining documenting and reporting.

- *Volunteer Training & Orientation 4: Policies & Procedures - VCP Monthly Record Procedure*

Volunteer Grievance Policy

This policy is given to new volunteers during intake.

- *Volunteer Training & Orientation 5: Volunteer Grievance Policy*

VOLUNTEER TRAINING HANDOUTS

The following documents are skills training handouts with general information given out to volunteers at orientation. These should be designed to help your volunteers meet the needs of the care recipients.

Skills – Boundaries and Listening

- *Volunteer Training & Orientation 6: Skills - Boundaries and Listening*

Skills – Communication

- *Volunteer Training & Orientation 7: Skills - Communication and Alzheimer's*

Fact Sheets – Aging and Pulmonary

- *Volunteer Training & Orientation 8: Fact Sheets - Aging and Pulmonary*

Fact Sheets – Body Mechanics

- *Volunteer Training & Orientation 9: Fact Sheets – Body Mechanics*

Fact Sheets – Dementia and Alzheimer's Disease

- *Volunteer Training & Orientation 10 : Fact Sheets – Dementia and Alzheimer's Disease*

Fact Sheets – The Aging Process

- *Volunteer Training & Orientation 11: Fact Sheets – The Aging Process*

Advocacy – Resource Advocacy Program



- *Volunteer Training & Orientation 12: Advocacy - Resource Advocacy Program*

VOLUNTEER JOB DESCRIPTIONS

The following documents are handouts given out to volunteers at orientation that describe volunteer jobs within the organization. They should include general information about each job and be designed to help your volunteers understand the roles they will perform. LCCC allows volunteers to choose more than one job if they would like. All volunteers are requested to attend volunteer trainings twice per year, usually in the spring and fall.

Friendly Visitor

This volunteer provides companionship, supervision, and a friendly visit for mentally or physically disabled and/or frail elderly persons in the absence of a primary caregiver.

- *Volunteer Training & Orientation 13: Job Descriptions - Friendly Visitor*

Office/Clerical

This volunteer performs a variety of tasks depending on the needs of the organization. This position helps extend the resources to better assist and direct the needs of the care recipients. Possible duties could include data entry, filing, making phone calls, or other duties deemed necessary by the organization.

- *Volunteer Training & Orientation 14: Job Descriptions - Office Clerical*

Respite Care

This volunteer provides companionship, supervision, and a friendly visit for mentally or physically disabled and/or frail elderly persons in the absence of a primary caregiver.

- *Volunteer Training & Orientation 15: Job Descriptions – Respite Care*

Transportation

This volunteer provides transportation for mentally or physically disabled and/or frail elderly persons in the absence of a primary caregiver.

- *Volunteer Training & Orientation 16: Job Descriptions - Transportation*

Phone Call Reassurance

This volunteer provides phone call reassurance with a homebound care recipient who is unable to have in home visits.

- *Volunteer Training & Orientation 17: Job Descriptions - Phone Call Reassurance*

VOLUNTEER SCHEDULING

Volunteer Monthly Record

This form is used by the volunteer to keep track of transportation or friendly visits. It is reviewed at orientation. This form is to be completed, signed, and returned to the organization at the end of each month. A check is sent directly to volunteer requesting a reimbursement. A copy is put in their file.

- *Volunteer Training & Orientation 18: Volunteer Scheduling - Volunteer Monthly Record*



VOLUNTEER RETENTION

The following documents are examples on how to honor volunteers to keep them engaged in your organization's Community Care Corps.

Retention Incentives

This document lists a few examples of incentives to volunteers such as birthday cards, holiday cards, mileage reimbursement, events, gift card, and awards.

- *Volunteer Training & Orientation 19: Volunteer Retention - Volunteer Retention Incentives*

Salute to the Stars

This event is provided by the organization to celebrate the volunteers and the work they do in the community. Volunteer awards are distributed in addition to dinner, dancing, and a night of entertainment is provided.

- *Volunteer Training & Orientation 20: Volunteer Retention – Salute to the Stars Event*
- *Volunteer Training & Orientation 21: Volunteer Retention – Salute to the Stars Event Presentation*

Semi-Annual Training and Volunteer Appreciation Meeting

This semi-annual meeting serves as a training session where topics such as homelessness, Gleaners, Hospice, or senior drug prevention may be discussed. Volunteers have a chance to network over breakfast and luncheon. It also serves as an opportunity for “housekeeping” such as updating mileage and current driving information (e.g., driver's license, auto insurance, and/or auto registration).

- *Volunteer Training & Orientation 22: Volunteer Retention – LCCC Event Sample - Semi Annual Training and Volunteer Appreciation Meeting*

Cheers for Volunteers

This is an annual community-wide volunteer thank you event offered to any volunteer in Livingston County to celebrate the work they do in the community.

- *Volunteer Training & Orientation 23: United Way Volunteer Livingston Cheers for Volunteers Event*

ADDITIONAL VOLUNTEER FORMS AND TA

Friendly Visit or In-Home Respite

This form is used monthly by the volunteer to document care recipient information after Friendly Visits or Respite. This form is put in the care recipient's file.

- *Volunteer Training & Orientation 24: Additional Volunteer Forms and TA - Friendly Visit or In-Home Respite*



Appendix E: Care Recipients

The following documents describe policies and forms for recipients.

When creating your organization's documents for care recipients it is recommended to capture internal policies, forms, and outreach procedures (e.g., transportation policies and request forms, needs referrals, senior service plans, etc.). It is recommended to keep master copies for your organization or in care recipient files as appropriate whenever information is gathered, or a form is signed.

INTERNAL POLICIES AND FORMS FOR CARE RECIPIENTS

The following documents are policies and forms for care recipients that are used internally for reference.

Transportation Request

A request form filled out by staff for transports called in by the care recipient. This form is put in the recipient's file.

- *Internal Policies for Care Recipients 1: Transportation Request*

New Care Recipient Needs Referral

This form is filled out by staff when doing the initial intake of the care recipient to assist in determining needs. This form is put in the recipient's file.

- *Internal Policies for Care Recipients 2: New Client Needs Referral*

Senior Service Plan

This form is filled out by staff during care recipient intake to document problem(s), goals, and action steps needed to assist. This form is put in the recipient's file.

- *Internal Policies for Care Recipients 3: Senior Service Plan*

Senior Services Quarterly Update

This form is filled out every quarter by staff to document any changes in the service plan. This form is put in the recipient's file.

- *Internal Policies for Care Recipients 4: Senior Services Quarterly Update*

Wait List Criteria

If a wait list must be developed, this document provides criteria to be followed.

In a circumstance that the organization is unable to fill a service request, it is recommended that the client (either the care recipient or caregiver) should be asked if they would like to be added to the wait list. Collect their contact information including what type of services are being requested (*see wait list form below*) and provide information on community resources. During the period that the client is on the wait list, designated staff should contact them on a monthly basis to determine if there is still the need for services.

- *Internal Policies for Care Recipients 5: Wait List Criteria*



Wait List Form

This form is filled out by staff whenever a care recipient needs to be placed on the wait list for service.

- *Internal Policies for Care Recipients 6: Wait List Form*

FORMS AND POLICIES FOR CARE RECIPIENTS

New Care Recipient Interest

This form is filled out by staff when meeting a care recipient for the first time for a friendly visit, or it can be used at intake to assist in finding an appropriate volunteer. This form is put in the recipient's file.

- *Care Recipient Forms and Policies 1: New Care Recipient Interest Form*

New Client Registration

This form is filled out by staff at intake of a new care recipient and updated yearly. This form is put in the care recipient's file.

- *Care Recipient Forms and Policies 2: New Client Registration*

Notice of Use and Disclosure of Protected Health Information

This form is the privacy policy assuring the care recipient that their private information is kept confidential and locked up. The Clinical Director's name is included in the event the care recipient has any complaints. Provide this form to new care recipient to complete and sign. This form is given to the care recipient and a copy is put in their file.

- *Care Recipient Forms and Policies 3: Notice of Use and Disclosure of PHI*

Caregiver Registration

This form is filled out at initial intake to gather information about the care recipient's caregiver. Have the caregiver (e.g., family member, friend, hired staff, etc.) complete and sign this form. This form is given to the caregiver and a copy is put in the care recipient's file. It is also suggested to keep a master copy with your organization's records.

- *Care Recipient Forms and Policies 4: Caregiver Registration*

Organization Grievance Policy

The following document is the organization's official policies and procedures when receiving and addressing any grievance or complaint. This policy is given to new care recipients during intake.

- *Care Recipient Forms and Policies 5: Grievance Policy*

Transportation Policy

This policy is given to new care recipients (that will be receiving transportation) during intake.

- *Care Recipient Forms and Policies 6: Caregiver Transportation Policy*

Consent for Use of Photo, Video, etc.

This form is used to gain the consent of the client (care recipient or caregiver) for the use of photographs, video,



or other identifiable information. Both the staff member and client sign this form. This form is put in the care recipient's file.

- *Care Recipient Forms and Policies 7: Consent for Use of Photo, Video, etc.*



Appendix F: Community Resources

The following documents describe local community resources available for volunteers, care recipients, and caregivers.

When assembling your organization's community resources it's recommended to include community resource lists, books, and brochures offered in your city, county, state, and/or online.

Please note, the resources listed below are examples of the kind of resources your county may provide that an online search may yield. Some are slightly dated and may not be directly affiliated with LCCC.

Community Resource List

This community partner resource list is given to new volunteers and care recipients.

- *Community Resources 1: Community Resource List*

Aging Adult Services

This aging adult services resource list is given to new volunteers and care recipients.

- *Community Resources 2: Aging Adult Services*

Livingston County Community Resource Book

This book of County-wide community resources is given to new care recipients. This was found as a PDF online published by Livingston County, MI.

- *Community Resources 3: [Livingston County Community Resource Book](#)*

Support Groups for Caregivers

This list of area support groups is available to caregivers who need assistance.

- *Community Resources 4: [Support Groups for Caregivers - Area Agency on Aging 1-B](#)*

Livingston County Senior Caregivers Guide

This community guide is given to caregivers highlighting area resources.

- *Community Resources 5: Livingston County Senior Caregivers Guide*

Area Agency on Aging 1-B Information Guide

This informational guide published by the Area Agency on Aging 1-B is given to new recipients describing services offered in the area they serve.

- *Client Forms 6: [Area Agency on Aging 1-B Information Guide](#)*

County Resources

This list of County resources is published on the organization's website.

- *Client Forms 7: [Livingston County Resources](#)*

Diocese Resources



This list of Diocese resources is published on the organization's website.

- *Client Forms 8: [Diocese Resources](#)*

Mental Health Resources

This list of mental health resources is published on the organization's website.

- *Client Forms 9: [Mental Health Resources](#)*

Substance Abuse Resources

This list of substance abuse assistance resources is published on the organization's website.

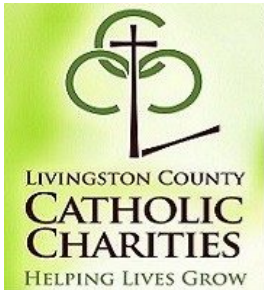
- *Client Forms 10: [Substance Abuse Resources](#)*



Appendix G: Sustainability

This document contains links concerning sustainability in programs for elders, individuals with disabilities, and family caregivers. According to the National Center on Aging, “The goal of sustainability is to integrate and embed evidence-based programs within organizations so that they become a routine and integral component of organizational operations.”

- *Sustainability 1: Sustainability Resources*



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LIVINGSTON COUNTY CATHOLIC CHARITIES

Who We Are?

Livingston County Catholic Charities – opened its doors in 1985 with the help of the Livingston County Catholic parishes. LCCC has been nationally accredited since 1997, and provides professional, confidential services to county residents regardless of religious preference, national origin, gender, age, disability or financial circumstances.

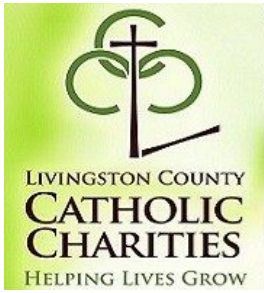
MISSION STATEMENT & VISION STATEMENT

The Mission of Livingston County Catholic Charities is the work of the Catholic Church, to share the love of Christ by performing the corporal and spiritual works of mercy.

Vision Statement: Livingston County Catholic Charities aims to provide quality human services to Livingston County residents regardless of race, gender, religion, age, disability or financial ability.

LCCC receives funding from the Washtenaw Community Health Organization – Substance Abuse Coordinating Agency; Diocese of Lansing; County of Livingston; The Federal Older Americans Act; Michigan Department of Corrections; State and Tobacco funds from the Area Agency on Aging 1-B through the Office of Services to the Aged.

The agency is in compliance with: The Federal Civil Rights Act of 1964; The Elliott Larsen Civil Rights Act (P.A. 453 of 1976);



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LIVINGSTON COUNTY CATHOLIC CHARITIES

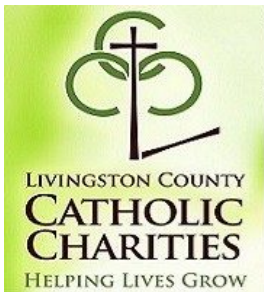


Livingston County Catholic Charities offers the following services to individuals 60+ years of age:

- [Resource Advocacy](#)
- [Volunteer Caregiver](#)
- [Be Our Guest Adult Day Service](#)
- Prevention of Elder Abuse Neglect & Exploitation (P.E.A.N.E.)

Our intention is to assist individuals to remain independent in their own homes for as long as possible. Please view each service for additional information or contact Suzanne Snyder, Director of Senior Services at 517-546-9910.

These programs are administered by Livingston County Catholic Charities. The agency is in compliance with: The Federal Civil Rights Act of 1964; The Elliot Larsen Civil Rights Act (P.A. 453 of 1976); The Michigan Handicappers Civil Rights Act (P.A. 220 of 1976); and Section 504 of The Federal Rehabilitation Act of 1973. Equal Opportunity Employer. Reasonable accommodation will be provided upon notification or request. Generous funding is provided by: Livingston County United Way, Livingston County, Livingston/Washtenaw Substance Abuse Coordinating Agency, Diocese of Lansing, The Federal Older Americans Act State Funds from the Offices of Services to the Aging through the Area Agency on Aging 1-B, and other grants and private donations.



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LIVINGSTON COUNTY CATHOLIC CHARITIES • SENIOR RESOURCE ADVOCACY

LCCC Older Adult Specialists in the Resource Advocacy program assist aging adults and their families by coordinating and/or locating services to meet ever changing needs. Our Resource Advocates are Licensed Social Service Technicians and are Certified Medicare & Medicaid Assistance Program (MMAP) counselors.

These local/state/federal services enhance the ability of aging adults to maintain independence within the comfort of their own home.

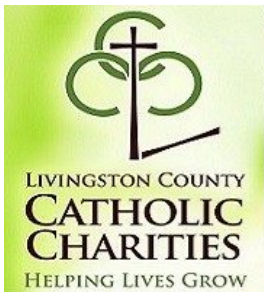
Resources meet social, emotional and/or physical needs...

- Adult Day Care
- Counseling
- Homebound Meals and Food Supplies
- Help Coordinate In-home Services
- Transportation
- Home Care
- Legal Services
- Prescription Assistance
- Medicare Part D Counseling
- Medicaid Application Assistance
- VA Assistance
- Social Security Assistance
- Assistance with filing Homestead Property Tax and Home Heating Tax Credits
- And more...



SENIOR MINISTRY

at Livingston County Catholic Charities
is a lifeline for many



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LIVINGSTON COUNTY CATHOLIC CHARITIES • VOLUNTEER CAREGIVER

You can bring a smile to a homebound seniors face & joy to their day!

The *VOLUNTEER CAREGIVER* program is a volunteer coalition designed to assist individuals 60+ years of age or disabled adults, including those with social and/or economic needs, to remain independent and in their own home.

Everyone has a special gift to offer, and the *Volunteer Caregiver* program provides all of the training and support needed to help volunteers share their talents with others. **You Can Make a Difference** in the life of someone who is struggling to remain independent.

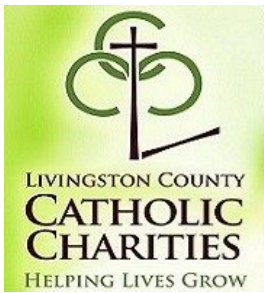
Volunteer testimonials:

"It is my pleasure & privilege to volunteer with LCCC. I appreciate and applaud what you all do at LCCC for the people of Livingston County." volunteer, Jackie R.

"It is an eye-opening experience. Hugely rewarding." volunteer, Jim P.

Caregiver services include:

- Companionship and Friendly Visiting
- Shopping
- Telephone Reassurance
- Letter Writing
- Errands
- Transportation
- Respite Care for your loved one – providing the Caregiver with a short relief from 24 hour care.



[Home](#) [Event Calendar](#) [Services](#) ▼ [About Us](#) ▼ [Get Involved](#) ▼ [Contact Us](#) [Resources](#) ▼

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LIVINGSTON COUNTY CATHOLIC CHARITIES • BE OUR GUEST ADULT DAY SERVICES

"I can't tell you how much it has meant to us to have such a welcoming environment for Mom to spend time at. True dedication, compassion and love are felt as soon as you walk through the door." L.

Be Our Guest Adult Day Service (BOGADS) is a valuable resource for individuals and families dealing with dementia and forms of dementia such as Alzheimer's as well as other chronic health concerns (Parkinson's, Lewy Body Disease, etc.). BOGADS provides a person centered day that consists of therapeutic recreation, social activities, and helps participants find purpose and meaning in their day.

Examples of our enrichment activities are:

- Art Therapy*
- Cooking groups
- Sitter-size – chair exercises
- Bowling, shuffleboard, bean bag toss and more
- Brain Gym
- Gardening
- Music Therapy, sing-a longs, playing instruments*
- Pet Therapy
- Laughter Therapy

*Art therapy, music therapy and other activities provided by funding from the *Robert W. & Maxine C. Parker Foundation*.

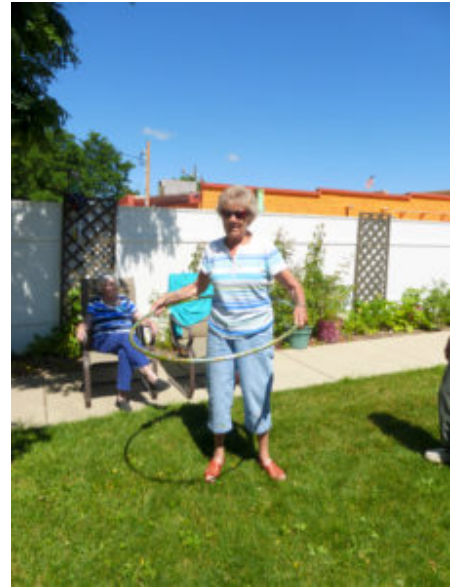


Caregivers receive:

- A break from 24 hour care.
- A partner in caregiving.
- Reassurance that their loved one is in a safe and nurturing environment.
- Care Plans and specialized support services.
- Information and referrals to community resources.
- Flexible and affordable, offering a sliding scale fee.



Noodle Hockey



Outdoor Fun



Veteran Appreciation Day



Therapy Dog Visit



LCCC Volunteer Survey

1. How long have you been an LCCC Volunteer?_____
2. Please mark the areas of service you provide as an LCCC Volunteer.
 Transportation Friendly visitor
 Respite Errands(shopping, picking up medication, etc.)
 Telephone reassurance Office support
 Mailings Be Our Guest Adult Day
3. What is the average number of hours you volunteer each month for LCCC?_____
4. What is the average number of hours you volunteer each month at other organizations? _____

Please circle the rating that best describes your experience as a volunteer at LCCC.

- | | | | |
|--|-----|----|-----|
| 5. The agency staff treats me with respect. | Yes | No | N/A |
| 6. I am satisfied with my interactions with agency staff | Yes | No | N/A |
| 7. I am given the opportunity to do the type of things I enjoy. | Yes | No | N/A |
| 8. My efforts are appreciated by the organization. | Yes | No | N/A |
| 9. I feel the compensation for mileage is fair. | Yes | No | N/A |
| 10. I have received sufficient training to assist me in my role as a volunteer. | Yes | No | N/A |
| 11. Overall my experience volunteering at LCCC has been good. | Yes | No | N/A |
| 12. I would recommend volunteering at LCCC to a friend. | Yes | No | N/A |
| 13. How did you find out about LCCC's Volunteer Caregiver Program and volunteer opportunities? | | | |
| 14. Are there other trainings you would like LCCC to provide? If so, please explain. | | | |

15. Age: _____18-25 years _____26-40 years _____41-59 years _____60+ years

16. Race: _____Caucasian _____African American _____Hispanic _____Asian
_____American Indian _____Other

17. Gender: _____Male _____Female

Name (Optional):_____

Date:_____

The Board, Staff, and those we serve feel truly blessed for your efforts, time and talents as a Livingston County Catholic Charities Volunteer! THANK YOU!!!



Volunteer Survey for Participants of Toolkit

Circle your answer. 5 being the most positive

1. Did you feel the application process was easy?
1 2 3 4 5
2. Did staff follow up in an appropriate time frame?
1 2 3 4 5
3. Did you feel prepared to volunteer after orientation?
1 2 3 4 5
4. Was the orientation long enough?
1 2 3 4 5
5. Was adequate client information given to you, the volunteer?
Yes or No
6. Was scheduling with the office or client convenient?
Yes No N/A
7. Have you enjoyed volunteering with LCCC thus far?
Yes or No
8. How would you rate your volunteering experience?
1 2 3 4 5
9. Would you refer a friend to volunteer with us?
Yes or No



Volunteer Caregiver Participant Caregiver Survey

Date: _____

1.) How did you hear about our services?

2.) Does the volunteer treat your loved one with respect? Yes No

3.) Do you feel the services we provide help your loved one stay living independently in their own home? Yes No

4.) Do you feel that the services we provide give you peace of mind and/or decrease your stress? Yes No

5.) How could we improve the services we provide?

6.) Would you recommend our agency to others? Yes No

7.) Comments:



Caregiver Survey for Participants of Toolkit

Circle your answer, 5 being the most positive

1. Did you have a positive experience with care partner's volunteer?
1 2 3 4 5 N/A
2. Were you satisfied with your care partner's volunteer?
Yes or No
3. Did you feel volunteer was a good fit for your care partner?
1 2 3 4 5
4. Did you feel that your care partner benefited from the volunteer?
1 2 3 4 5
5. Did the volunteer relieve some of your caregiver stress with in-person visits and/or phone reassurance phone calls?
Yes or No
6. Was your anxiety decreased because of the help you received from the volunteer?
Yes or No
7. Do you feel your care partner feels less isolated with in-person visits and/or phone reassurance?
Yes or No

October 2019

**VOLUNTEER CAREGIVER PARTICIPANT
HOME-BASED CUSTOMER SURVEY**

The Staff and Board of Directors of Livingston County Catholic Charities are requesting your anonymous input on the following questions. Your responses to the questions below will assist our ability to continue to plan, develop and deliver services for individuals, families and the local community. THANK YOU.

1. Which type of service do you receive: Transportation Friendly Visit In Home Respite

Please circle the rating that best describes your experience:

Strongly Agree Agree Neutral Disagree Strongly Disagree
1 2 3 4 5

2. The agency staff and/or volunteer treat me with respect. 1 2 3 4 5
3. The staff and/or volunteer understand my needs. 1 2 3 4 5
4. I am satisfied with the services provided. 1 2 3 4 5
5. I would recommend this agency to others. 1 2 3 4 5
6. Overall, my experience with Catholic Charities has been very good. 1 2 3 4 5

7. Please indicate who referred you to this agency:
DHHS _____ Medical Professional _____ AAA 1-B _____ Pastor/Church _____
Senior Center _____ Faith Mag. _____ Newspaper _____ Event/Presentation _____
Senior Housing _____ Friend/Family _____ LCCC Agency _____
Other(please indicate): _____

8. Please indicate any other services that you would like us to provide that we do not currently provide.

9. Are you satisfied with your volunteer?
Yes No

10. Do you feel that the support/services you receive from our agency allow you to live safely in your home?
Yes No

11. Please add any other comments:



Client Survey for Participants of Toolkit

Circle your answer. 5 being the most positive

1. Did you have a positive experience with your volunteer?
1 2 3 4 5
2. Did you enjoy spending time with and/or talking to your volunteer?
Yes or No
3. Did you feel the volunteer had knowledge of services being offered by LCCC?
1 2 3 4 5
4. Did you feel that the volunteer was engaged with you as the client?
1 2 3 4 5
5. Was adequate information given to you about the volunteer?
Yes or No
6. Was scheduling rides with the office convenient?
Yes No N/A
7. How would you rate your experience working with the LCCC volunteer?
1 2 3 4 5
8. Do you feel you are less isolated when you receive a friendly visit and/or phone assurance call?
Yes No N/A
9. Has any anxiety been decreased because of the help you received from a volunteer?
Yes No N/A

**EMPLOYEE REFERENCE CHECKLIST
LIVINGSTON COUNTY CATHOLIC CHARITIES**

PROSPECTIVE EMPLOYEE NAME: _____

POSITION APPLIED FOR: _____

PROGRAM: _____ DATE OF INTERVIEW: _____

I Name of reference: _____

Relationship to applicant: _____ Length of relationship: _____

Comments regarding work habits: _____

Observations in similar situation: _____

Strengths of applicant: _____

Any concerns: _____

Would you consider hiring: _____

II Name of reference: _____

Relationship to applicant: _____ Length of relationship: _____

Comments regarding work habits: _____

Observations in similar situation: _____

Strengths of applicant: _____

Any concerns: _____

Would you consider hiring: _____

Interviewer: _____ Date: _____



PANDEMIC AND EMERGENCY PREPAREDNESS PLAN

General office staff:

Every coworker will follow all available cautions. This will include the cleanliness and sanitizing guidelines from the CDC. We ask each coworker to sanitize their personal or immediate work space regularly. The support staff will assist with the reception area.

We are asking all clients to refrain from in office services if they are potentially symptomatic or have recent risk activity. Notices are posted on the entry doors. When scheduling appointments or confirming appointments, please review the list with the client in advance. No client will be penalized for a canceled appointment if done for personal or community safety. If a client arrives for an appointment presenting symptoms, then the assigned coworker should politely direct the person to return home and reschedule.

Other out of office client contact should be limited to “last resort”, when there is no other option available to the client.

Coworker contact: Coworkers are asked to not come in to work if you have any symptoms or if you have been directly exposed to someone with symptoms. If you have appointments scheduled, we ask that you cancel them and inform the appropriate coworkers as soon as possible of your schedule change.

No coworker will be penalized if they choose to not work due to fears for the health or safety of themselves or their immediate family. Those coworkers with earned time off (vacation, sick leave) may use this time. All coworkers are expected to assure that their immediate Program Manager/Supervisor have the ability to contact them at all times. This can be via email or telephone, but it is the co-workers responsibility to make sure that the contact information is accurate and up to date.

Volunteer Caregiver Program

Volunteer Caregiver Program will limit services to participants depending on priority or may hold services for a period of time depending on health and safety of volunteers and participants.

Volunteers will be contacted to determine level for health and safety reasons if they are able to provided schedule services or upcoming services requests. If they are comfortable and willing to continue providing services, LCCC staff will provide a questionnaire will determine if the volunteer is showing any potential symptoms or if they have potentially been exposed to someone with symptoms. If a volunteers has symptoms or been exposed, will not provide any

services. Gloves, wipes and hand sanitizer will be available for volunteers use or if they purchase any safety items, the agency will reimburse volunteers. Volunteers will receive training prior to providing services.

- Friendly Visitors and In Home Respite Services will not be provided in participant homes, face to face. Volunteers or LCCC staff will continue communication with participants as requested via telephone conversations. Volunteers will report any suspected symptoms of participants they are communicating with. In Home Respite Services will be placed on hold and no telephone conversations will be provided if requested by caregiver.
- Transportation Services will be provided depending on volunteer availability and priority. LCCC staff will contact participant regarding upcoming scheduled service to determine needs and priority.
 - Medical Appointments - Participants will be encouraged to make contact with upcoming medical professionals to confirm appointment or if appointment is rescheduled for a later date. If appointment is of top priority per medical professional, LCCC staff will attempt to provide a volunteer or staff member to transport. If services are necessary, LCCC staff will provide a questionnaire to determine if the participant is showing any potential symptoms or if they have potentially been exposed to someone with symptoms. If a participant has symptoms or been exposed, services will not be provided at this time. Participant will be instructed to contact physician immediately.
 - Grocery Shopping and Food Bank Services – LCCC staff will provide a questionnaire to determine if the participant is showing any potential symptoms or if they have potentially been exposed to someone with symptoms. If a participant has symptoms or been exposed, services will not be provided at this time. Participant will be instructed to contact physician immediately. LCCC staff will assist participant in determining if necessary groceries or supplies are needed. If groceries, supplies, prescriptions, or food bank, LCCC staff will arrange for pickup of items needed and delivered to participant at home. LCCC staff/ volunteer will not enter participant home during delivery. Items will be delivered to door of participants. LCCC staff/volunteer will knock and door to inform participant items are outside door.
- Telephone Reassurance – staff and volunteers will contact all VCG program participants on a weekly basis when unable to provide face to face services. They will spend time conversing with participants and reassuring them through the pandemic/emergency. They will also determine if the participants is showing any health issues or in need of services.

Training for staff and volunteers prior to providing any Senior Services:

Coronavirus disease 2019 (COVID-19) cases, reported illnesses have ranged from mild symptoms to severe illness and death.

Symptoms can include:

Fever

Cough

Shortness of breath

At this time, the CDC believes symptoms of COVID-19 may appear in as few as 2 days or as long as 14 days after exposure. This is based on what has been seen previously as the incubation period of MERS-CoV viruses.

Call your healthcare professional if you develop symptoms, and have been in close contact with a person known to have COVID-19 or if you have recently traveled from an area with widespread or ongoing community spread of COVID-19.

How it Spreads

Coronavirus disease (COVID-19) is thought to spread mainly from person-to-person. This spread can occur between people who are in close contact with one another (within about 6 feet), or through respiratory droplets produced when an infected person coughs or sneezes. These droplets can land in the mouths or noses of people who are nearby or possibly be inhaled into the lungs.

It may also be possible that a person can get COVID-19 by touching a surface or object that has the virus on it and then touching their own mouth, nose, or possibly their eyes, but this is not thought to be the main way the virus spreads.

Prevention

The best way to prevent illness is to avoid being exposed to this virus. You can prevent the spread of illness by practicing everyday healthy habits.

Wash your hands often with soap and water for at least 20 seconds, especially after going to the bathroom; before eating; and after blowing your nose, coughing, or sneezing.

If soap and water are not readily available, use an alcohol-based hand sanitizer with at least 60% alcohol. Always wash hands with soap and water if hands are visibly dirty.

Avoid close contact with people who are sick.

Avoid touching your eyes, nose, and mouth.

Stay home when you are sick.

Cover your cough or sneeze with a tissue, then throw the tissue in the trash.

Clean and disinfect frequently touched objects and surfaces using a regular household cleaning spray or wipe.

Follow CDC's recommendations for using a facemask.

CDC does **not** recommend that people who are well wear a facemask to protect themselves from respiratory diseases, including COVID-19.

Facemasks should be used by people who show symptoms of COVID-19 to help prevent the spread of the disease to others. The use of facemasks is also crucial for health workers and people who are taking care of someone in close settings (at home or in a health care facility).

EXCLUSION RECORD CHECKS

Monthly review are conducted of all program staff to ensure that participants are not under the care of staff who are excluded from any state Medicare or Medicaid program or are the subject of state or federal licensing actions. This policy is in compliance with Michigan Department of Health and Human Services (MDHHS), Centers for Medicare and Medicaid Services (CMS), and The Area Agency on Aging 1-B (AAA 1-B) standards. Monthly checks must be conducted through the following outlets:

1. Office of Inspector General (OIG) Exclusions Database
2. MDHHS List of Sanctioned Providers
3. System for Award Management (SAM) Debarment Search Database.

CRITICAL INCIDENT REPORT

- An Incident Report is completed within 24 hours of any unusual occurrence of a serious nature involving staff, volunteers or a participants that may result in potential grievance or liability.
- Incident Report is reviewed by the Volunteer Caregiver Coordinator, and pass to the Director of Senior Services.
- Volunteer Caregiver Coordinator will contact the participant's emergency contact to review incident and follow up required.
- The Director of Senior Services reviews and pass to the Executive Director.
- All Incident Reports are reviewed on a quarterly basis by the Quality Assurance Team.
- The Office Manager maintains an Incident Report file. The report is never filed in the clients/volunteer file.

LIVINGSTON COUNTY CATHOLIC CHARITIES CONFIDENTIALITY POLICY & PROCEDURE

LCCC abides by all applicable laws of confidentiality protecting client rights (MCL5538-1764; MSA518.365(141)). All employees, volunteers, independent contractors, student interns or community service workers, having access to confidential client information are required to sign a Confidentiality Agreement upon their involvement with the Agency. Clients are made aware of their right to confidentiality of identity and records upon becoming a client of LCCC.

Confidentiality of Alcohol and Drug Abuse Patient Records:

The confidentiality of alcohol and drug abuse patient records maintained by this program is protected by Federal law and regulations. Generally, the program may not say to a person outside the program that a patient attends the program, or disclose any information identifying a patient as an alcohol or drug abuser unless:

- (1) The patient consents in writing;
- (2) The disclosure is allowed by a court order; or
- (3) The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit, or program evaluation.

Violation of the Federal law and regulations by a program is a crime. Suspected violations may be reported to appropriate authorities in accordance with Federal regulations.

Federal law and regulations do not protect any information about a crime committed by a patient either at the program or against any person who works for the program or about any threat to commit such a crime.

Federal laws and regulations do not protect any information about suspected child abuse or neglect from being reported under State law to appropriate State or local authorities.

(See 42 U.S.C. 290dd-3 and 42 U.S.C. 290ee-3 for Federal laws and 42 CFR part 2 for Federal regulations.)

(Approved by the Office of Management and Budget under control number 0930-0099)

Procedures to Protect Confidentiality of Client Records:

Information regarding a particular client may not be released without the written consent of the client. The client must complete and sign a Release of Information form containing the specific information to be released, to whom it may be released, for what purpose, and the time frame during which the release is valid. If no time frame is indicated, then the signed Release of Information is valid for one year from the date of the signature. The client may revoke a written consent at any time, with written notice.

When calling a client and reaching an answering machine: If there is a need to leave a message, the client must give permission for staff to leave the agency name on the message. For Counseling Program clients, this permission is granted or denied by a statement on the Fee Agreement Form that is checked and signed by the client. This permission should also be noted on the face sheet of the client's computer file. If not, it is appropriate to leave the name of the staff to call back, and the agency phone number, but not the name of the agency or the reason for the call. For all other clients, this permission is granted through the use of a separate form. **In order to prevent Caller ID from identifying the agency, staff must dial *67 before placing the call.**

Vulnerable clients: When there is question as to the client's ability to make an informed decision about signing a written release, or whether the information requested may be harmful to the client, the Program Supervisor should be consulted to make a determination. When necessary, arrangements should be made for a guardian to be appointed for any client determined to be unable to make an informed decision as this would also apply to treatment. In that case, the guardian would need to sign the consent for Release of Information.

Functionally illiterate clients: The direct service professional will verbally explain the ramifications of releasing any information and assist the client in completing the form.

Use of photographs, videotapes or other identifiable information of clients: A signed consent must be obtained for each specific occurrence or request. Full disclosure of the intended use of these materials must be made to the client at the time consent is obtained. Clients must be informed that they may refuse consent to taping or photographing, and may also revoke consent at any time prior to the use of the materials or subsequent use of the materials. (See sample Consent Form)

When time is a critical factor and an original signature cannot be obtained prior to the critical need for release of information: The client may give verbal consent by telephone or send a fax written consent provided that this action is followed up as soon as possible with an original signed Release form. In this instance the direct service professional must inform the client that documentation of fax or verbal consent will be entered into the client file, and a statement that the client agreed to complete and sign an original Release of Information form as soon as possible. Direct Service staff members must consult with their Program Supervisor or the Executive Director before releasing information in this manner.

Exceptions: The only exception to the requirement for a signed Release of Information is in the event of a client who is determined to be a danger to self or others, suspected abuse or neglect, court order, medical emergency, or external audit.

- Clients must be informed of the limitations of confidentiality. This is accomplished through the Client Rights and Responsibilities handout that is

provided to every client. When a confidentiality issue occurs, the assigned direct service staff member discusses the issue and limitations with the client.

Any staff member receiving a subpoena or court order must consult with the Program Supervisor or the Executive Director as to the appropriate action. The Executive Director may elect to seek legal consultation prior to responding to a subpoena or court order. In general, the agency must respond to a subpoena that has been issued by a Judge, but this does not automatically apply to those issued by attorneys. Criteria for entry of order: An order under this section may be entered only if the court determines that good cause exists. To make this determination the court must find that:

- (1) Other ways of obtaining the information are not available or would not be effective; and
- (2) The public interest and need for the disclosure outweigh the potential injury to the patient, the physician-patient relationship and the treatment services.

- All professional and paraprofessional staff members (including independent contractors) must abide by the laws of the State of Michigan concerning the reporting of suspected neglect or abuse (see MI FIA – 3200 reporting form and see Child Abuse reporting laws booklet).
- Senior services staff must abide by the State of Michigan laws (MI Public Act 519 of 1982) concerning the reporting of suspected elder neglect or abuse to the Adult Protective Services provided by FIA (see MI elder abuse reporting laws).
- In the case of a client serious threat to harm others, the staff member should consult with their Program Director or the Executive Director to determine whether the threatened party should be notified and law enforcement called. In the case of a client serious threat to commit suicide, the direct service staff should take immediate action to ensure the client's safety by contacting the police. Whenever in doubt, it is best to act on the side of safety and in the best interests of the client.
- External Auditors must complete and sign the Client Case Files Reviewed by an Outside Agency form, which states the purpose for the review and obligation to confidentiality.

Support staff or other employees answering telephones and receiving visitors must abide by client rights to confidentiality. This includes:

- Shielding confidential client information from the view of anyone who has not signed a Confidentiality Agreement with the Agency.
- Making sure that all confidential records are kept in locked files when leaving the office.

- Do not acknowledge to anyone calling or visiting that you know the person they are asking about is a client or is in session. A response to someone asking to speak to or leave a message for a client in session or in the waiting room would be: *“Because of our confidentiality policy, I am not able to tell you whether the person you are asking for is a client here or is present at this time, but I will be glad to take a message and deliver it if the person is here.”* If a child is calling for their parent, you may put the child on hold, interrupt the session and ask the parent to take the call by informing the child that you will check to see if the parent is at the office.
- Anyone calling for any reason about a client is not entitled to information, including the acknowledgment that the person is a client of the Agency, without the written consent of the client. This includes family members, school personnel, doctors, lawyers, or any other professional, regardless of the expressed concern for the client.

If someone calls to offer information or share concern about a client, an appropriate response would be: *“Because of our confidentiality policy, I am not able to tell you whether the person you are calling about is a client here, but I will be glad to take the information and pass it to one of our co-workers that may be able to determine if he/she is a client. If this person is not a client here, I will discard the information.”* Do not engage in a conversation about the caller’s concerns. Simply take a message with the information given.

Use of Email For Client Information:

Email transmissions are provided the same privacy and confidentiality protections that are provided to all other forms of communication (telephone, mail, record storage, social media, fax transmission).

Unique risks are inherent within email transmissions that are not existent or are less existent within other forms of communication. These additional risks include, but are not limited to, the following:

- Email can be sent to both intended and unintended recipients.
- The recipients of email can forward and/or alter messages without the consent of the original sender.
- Email messages can be mis-addressed.
- Email messages can be falsified.
- Deleted email messages can still exist and be reused or resent.
- Confidential email may be subject to the Freedom of Information Act.

For these reasons, the use of email to transmit client information can only occur within the circumstances described below.

Client information may only be transmitted to those sources that are paying for the client service. These sources may be a third party funding source (Blue Cross/Blue Shield, HMO or similar) or may be a governmental entity (WCHO, FIA, AAA 1-B).

- The client information to be transmitted must be limited to the information that is contractually required for client registration or payment.
- The client must be informed in advance of service delivery that electronic transmission will be used for this purpose.
- The client must provide written consent for electronic transmission to occur.
- Email transmission of client information may not be used for any other purpose or to any other source.

All email originating within LCCC must be identified as privileged and confidential.

Use of Fax Machines For Client Information:

Fax transmissions are provided the same privacy and confidentiality protections that are provided to all other forms of communication (telephone, mail, record storage, electronic (email) transmission).

Unique risks are inherent within fax transmissions that are not existent or are less existent within other forms of communication. These additional risks include, but are not limited to, the following:

- Fax can be sent to both intended and unintended recipients.
- Fax transmissions can be misdialed.
- Confidential faxes may be subject to the Freedom of Information Act.

For these reasons, the use of faxing to transmit client information can only occur within the circumstances described below.

Client information may only be transmitted to those sources for whom the client has provided approval in advance.

- The client information to be transmitted must be limited to the information that the client has expressly approved being shared and only to those sources identified within a signed Consent to Release Information.
- The recipient of the faxed information must be notified in advance of the information that is being faxed.
- The faxing of any and all client information must be identified as privileged and confidential.

Use of Cell Phones for Client Information:

LCCC maintains two cell phones specific to client communication after business hours. One cell phone is specific to the Substance Abuse Case Management program and the second is specific to the Child Welfare program. 24-hour availability is mandated by the State of Michigan for each of these services.

When program clients or foster parents are given the contact information for after hours cell phone access, they are also to be provided with information regarding risks.

Cell phone transmissions are provided the same privacy and confidentiality protections that are provided to all other forms of communication (fax, mail, record storage, electronic (email) transmission, social media).

Risks are inherent within cell phone transmissions and may include, but are not limited to, the following:

- *Cell phones can be misdialed to unintended recipients.*
- *Deleted text messages can still exist and be reused or resent.*
- *Confidential texts may be subject to the Freedom of Information Act.*
- *Text messages can be mis-addressed.*
- *Text messages can be falsified.*
- *Personal cell phones may be accessed by individuals who are not LCCC employees.*

For these reasons, the use of agency or personal cell phones to communicate with clients or to transmit client information can only occur within the following circumstances. Client information and/or communication may only be transmitted to those sources for whom the client has provided approval in advance. The client information to be transmitted must be limited to the information that the client has expressly approved being shared and only to those sources identified within a signed Consent to Release Information.

Other Electronic Media:

LCCC employees are expressly prohibited from communicating with or about clients through any other form of electronic media; this includes the agency website, agency or personal Facebook, twitter and any other form.

Individual clients or former clients may provide signed permission for a quote or photo to be shared in a public manner, but this will only occur with the individual's signed, dated and witnessed signature.

Employee Sanctions:

Violations of client confidentiality will result in formal agency discipline (Personnel Policy and Procedure Manual, Section IX – F) and will include any reporting requirements to governmental entities and/or the applicable purchasers of service.

“Livingston County Catholic Charities”

CRIMINAL HISTORY/DRIVING RECORD CONSENT FORM

As a employee/contractor that provides services through Livingston County Catholic Charities, I understand that it is this agency’s policy to secure conviction criminal history and driving record information as part of their screening process using the information provided below.

NAME:

Last	First	Middle
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Maiden name/names previously used? _____

BIRTHDATE: _____ RACE: _____ SEX: _____

DRIVER’S LICENSE NUMBER: _____ STATE: _____

I UNDERSTAND THAT THE ABOVE INFORMATION IS REQUIRED BY THE CENTRAL RECORDS DIVISION OF THE MICHIGAN STATE POLICE, LANSING, MICHIGAN. I AUTHORIZE LIVINGSTON COUNTY CATHOLIC CHARITIES TO UTILIZE THE ABOVE INFORMATION FOR THE SOLE PURPOSE OF OBTAINING A CONVICTION ONLY CRIMINAL HISTORY FILE SEARCH AND DRIVING RECORD FROM THE MICHIGAN SECRETARY OF STATE.

Signature Employee/Contractor

Date



Livingston County Catholic Charities

2020 E. Grand River, Suite 104-Howell, MI 48843 (517) 545-5944 Fax:
(517) 545-7390

VOLUNTEER/EMPLOYEE DRIVER INFORMATION SHEET

I. Driver: _____ Driver's License #: _____

Name: _____ Date of Birth: _____

Address: _____ Soc. Sec. No.: _____

II. Have you ever been convicted of any traffic violations within the last 5 years? Y or N
If yes, please explain: _____

III. Vehicle that will be used: _____

Name of Owner: _____ Year and Make: _____

Address of Owner: _____ Model: _____

_____ License Plate: _____

Registration Expires: _____ Inspection Expires: _____

If more than one vehicle is to be used, requested information must be provided for each vehicle.

IV. Insurance Information: The insurance coverage for a privately owned vehicle is the limit of the insurance policy covering that specific vehicle.

Insurance Company: _____

Policy Number: _____

Expiration Date: _____

Liability Limits of Policy*: _____

*Please attach a copy of liability limits.

* Must provide a copy of driver's license, registration, and proof of insurance.

V. Certification:

I certify that the information given on this form is true and correct to the best of my knowledge. I understand that as a volunteer/employee driver, I hold a valid driver's license and have the required insurance coverage in effect on any vehicle used to transport students, co-employees, service recipients and/or act on behalf of the church or related entities.

(Signature)

(Date)

Recommendation:

Only experienced drivers, i.e. 19 or over, should transport students or service recipients.



EMPLOYEE/VOLUNTEER AUTOMOBILE WAIVER

Automobile insurance Policy requirement:

- Minimum level of \$100,000 per occurrence and \$300,000 total

Employee/Volunteer Signature

Supervisor Signature

Date

Drivers' License Valid and Current:

Employee/Volunteer Signature

Supervisor Signature

Date

I agree to have my automobile kept up to date on maintenance issues, to make certain that my automobile is safe to drive clients when needed.

Employee/Volunteer Signature

Supervisor Signature

Date

It is the responsibility of the employee/volunteer to maintain updated Drivers licenses, insurance certificate coverage and any changes to my insurance policies. It is my responsibility to give to my supervisor for my personnel file.

Employee/Volunteer Signature

Supervisor Signature

Date

CENTRAL REGISTRY CLEARANCE REQUEST

Michigan Department of Health and Human Services

Copy Photo ID Here
or
Attach a Separate Page

SECTION 1 INFORMATION ON PERSON BEING CLEARED

Name, (First, Middle, Last)	Signature Required for Individual Being Cleared	Date
Also Known as Name (AKA)	Social Security Number	Date of Birth
Address	City	State Zip Code
Phone Number	Email	
<input type="checkbox"/> I am completing this for myself. <input type="checkbox"/> I would like to pick up my results in _____ County (For Michigan Residents Only).		

SECTION 2 REQUESTER INFORMATION

Check Appropriate Box <input type="checkbox"/> Employer <input type="checkbox"/> Volunteer Agency <input type="checkbox"/> Adoption/Foster Care Home Screening <input type="checkbox"/> Court/Law-Enforcement/Department of Corrections/Prosecuting Attorney <input type="checkbox"/> Other			
Name of Agency or Organization	Name of Requester		
Address	City	State	Zip Code
Email	Fax	Phone Number	

Employers/Volunteer Agencies will ONLY receive responses of NO central registry if the person being cleared has approved this request with their signature. Employers/volunteer agencies will NOT receive notification if the name submitted has any central registry hits per CPL 722.627. For questions about completing this form, please contact the local Michigan Department of Health and Human Services, see attached contact list.

This clearance does not identify individuals who may have child abuse/neglect history in other states, territories or tribal trust land.

The confidentiality of central registry information is protected by Sections 7 through 7j of the Michigan Child Protection Law (MCL 722.627-722.627j). Anyone who violates this protection is guilty of a misdemeanor and is civilly liable for damages.

The Michigan Department of Health and Human Services (MDHHS) does not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, genetic information, sex, sexual orientation, gender identity or expression, political beliefs or disability.

INSTRUCTIONS FOR FILLING OUT THE DHS-1929

Michigan Department of Health and Human Services

Michigan residents requesting clearance on themselves (You must possess a Michigan identification)

Complete section one and sign the form in the box provided. Include a copy of your Michigan picture identification (driver's license or passport are most acceptable). Please NOTE, the results will only be sent to the address on your picture identification. Submit your DHS-1929 form with identification to MDHHS for processing. See the attached list for MDHHS county office locations and contact numbers.

Michigan agencies, schools, preschool, daycare providers, employers and volunteer agencies

The person being cleared completes section one, signs the form and adds a copy of their picture identification (driver's license or passport are most acceptable). The requester completes section two with name of agency, name of requester, address, phone, email and fax number. Submit the DHS-1929 with identification to MDHHS for processing. See the attached list for MDHHS county office locations and contact numbers.

Individuals outside of Michigan

For out of state Individuals requesting clearance on themselves, complete section one and sign the form. Include a copy of your state picture identification (driver's license or passport are most acceptable). Please NOTE, the results will only be sent to the address on your picture identification. Submit your request to Michigan Department of Health and Human Services fax 517-763-0280.

Agencies, schools, preschool, daycare providers, employers and volunteer agencies outside of Michigan

For out of state agencies, the person being cleared completes section one, signs the form and adds a copy of their state picture identification (driver's license or passport are most acceptable). The requester completes section two with name of agency, name of requester, address, phone, email and fax number. Submit your request to Michigan Department of Health and Human Services fax 517-763-0280.

Out-of-State Adoption and Foster Home Screening

Please access our website at www.michigan.gov/MDHHS and follow the instructions for submitting an outstate request for adoption and foster home screening. For questions contact 517-284-9740.

Michigan Camp Volunteers and Employees (All Types)

Please contact the Department of Licensing and Regulatory Affairs, Bureau of Community Health Systems at 866-685-0006 or www.michigan.gov/lara
Submit completed form BCHS-camp 001 (Rev 1/16) to the address on the form.

Outstate government agencies requesting information, please access our website at www.michigan.gov/DHHS follow the links to child abuse and neglect or call 517-241-9794.

If a person is listed on central registry the results will only be sent to the individual at the address on their photo identification.

County	Address	Phone	Fax
Alcona	2145 E. Huron Rd., East Tawas, MI 48730	989-362-0300	989-362-6629
Alger	413 Maple St., Munising, MI 49862	906-387-4440	906-387-4710
Allegan	3255 122nd., Ste. 300 Allegan, MI 49010	269-673-7700	269-673-7795
Alpena	711 W. Chisholm St., Alpena, MI 49707	989-354-7200	989-354-7242
Antrim	203 E. Cayuga St., PO Box 316, Bellaire, MI 49615	231-533-8664	231-533-8740
Arenac	3709 Deep River Rd., Standish, MI 48658	989-846-5500	989-846-4365
Baraga	108 Main St., PO Box 10, Baraga, MI 49908	906-353-4700	906-353-8415
Barry	430 Barfield Dr., Hastings, MI 49058	269-948-3200	269-948-4101
Bay	1399 W. Center Rd., Essexville, MI 48732	989-895-2100	989-895-2494
Benzie	448 Court Plaza Govt. Ctr., PO Box 114, Beulah, MI 49617	231-882-1330	231-882-9078
Berrien	401 Eighth St., PO Box 1407, Benton Harbor, MI 49023	269-934-2000	269-934-2115
Branch	388 Keith Wilhelm Dr., Coldwater, MI 49036	517-279-4200	517-278-5346
Calhoun	190 E. Michigan Ave., PO Box 490, Battle Creek, MI 49016	269-966-1284	269-966-2837
Cass	325 M-62, Cassopolis, MI 49031	269-445-0200	269-445-0298
Charlevoix	2229 Summit Park Dr., Petoskey, MI 49770	231-348-1600	231-347-6211
Cheboygan	827 S. Huron St., Cheboygan, MI 49721	231-627-8500	231-627-8546
Chippewa	463 East 3 Mile Rd., Sault Ste. Marie, MI 49783	906-635-4100	906-635-4173
Clare	725 Richard Dr., Harrison, MI 48625	989-539-4260	989-539-4200
Clinton	105 W. Tolles Rd., St. Johns, MI 48879	989-224-5500	989-224-3896
Crawford	230 Huron Grayling, MI 49738	989-348-7691	989-348-2838
Delta	305 Ludington St., Escanaba, MI 49829	906-786-5394	906-786-5350
Dickinson	1401 Carpenter Ave. Ste. A, Iron Mountain, MI 49801	906-779-4100	906-774-2775
Eaton	1050 Independence Blvd., Charlotte, MI 48813	517-543-0860	517-543-2125
Emmet	2229 Summit Park Dr., Petoskey, MI 49770	231-348-1600	231-347-6211
Genesee	125 E. Union St., P.O. Box 1628, Flint, MI 48501	810-760-2550	810-760-2745
Gladwin	675 E. Cedar Ave., Gladwin, MI 48624	989-426-3300	989-426-3353
Gogebic	301 E. Lead St., Bessemer, MI 49911	906-663-6200	906-663-6230
Gd Traverse	701 S. Elmwood Ste.19, Traverse City, MI 49684	231-941-3900	231-941-0037
Gratiot	201 Commerce Dr., Ithaca, MI 48847	989-875-5181	989-875-2811
Hillsdale	40 Care Dr., Hillsdale, MI 49242	517-439-2200	517-439-2272
Houghton	47420 State Hwy. M-26 Ste. 62, Houghton, MI 49931	906-482-0500	906-487-7726
Huron	1911 Sand Beach Rd., Bad Axe, MI 48413	989-269-9201	989-269-9875
Ingham	5303 S. Cedar St., Lansing, MI 48911	517-887-9400	517-887-9500
Ionia	920 E. Lincoln, Ionia, MI 48846	616-527-5200	616-527-1849
Iosco	2145 E. Huron Rd., East Tawas, MI 48730	989-362-0300	989-362-6629
Iron	337 Brady Ave., PO Box 250, Caspian, MI 49915	906-265-9958	906-265-6390
Isabella	1919 Parkland Dr., Mt. Pleasant, MI 48858	989-772-8400	989-772-8460
Jackson	301 E. Louis Glick Hwy., Jackson, MI 49201	517-780-7400	517-780-7160
Kalamazoo	322 E. Stockbridge Ave., Kalamazoo, MI 49001	269-337-4900	269-337-5179
Kalkaska	503 North Birch St., Kalkaska, MI 49646	231-258-1200	231-258-4482
Kent	121 Franklin St. SE Ste. 200, Grand Rapids, MI 49507	616-248-1000	616-248-1059

County	Address	Phone	Fax
Keweenaw	3616 Highway US-41, PO Box 351, Mohawk, MI 49950	906-337-3302	906-337-1131
Lake	5653 S. M-37, Baldwin, MI 49304	231-745-8159	231-745-2930
Lapeer	1505 Suncrest Dr., Lapeer, MI 48446	810-667-0800	810-667-0795
Leelanau	701 S. Elmwood Ste. 19, Traverse City, MI 49684	231-941-3900	231-941-0037
Lenawee	1040 S. Winter St. Ste. 3013, Adrian, MI 49221	517-264-6300	517-264-6357
Livingston	2300 E. Grand River Ste. 1, Howell, MI 48843	517-548-0200	517-548-0298
Luce	500 W. McMillan, Newberry, MI 49868	906-293-5144	906-293-3857
Mackinac	199 Ferry Lane, Saint Ignace, MI 49781	906-643-9550	906-643-7467
Macomb	21885 Dunham Rd. Ste. 7, Clinton Township, MI 48036	586-469-7700	586-783-8136
Macomb	27690 Van Dyke Ave., Warren, MI 48093	586-427-0600	586-427-0668
Macomb	41227 Mound Rd. Ste. A, Sterling Heights, MI 48314	586-254-1500	586-254-8029
Macomb	19700 Hall Rd. Ste. A, Clinton Township, MI 48038	586-412-6100	586-412-6141
Manistee	1672 US 31 South, Manistee, MI 49660	231-723-8375	231-398-2106
Marquette	Courthouse Annex, 234 W. Baraga Ave., Marquette, MI 49855	906-228-9691	906-228-3393
Mason	915 Diana St., Ludington, MI 49431	231-845-7391	231-843-1430
Mecosta	800 Water Tower Rd., Big Rapids, MI 49307	231-796-4300	231-796-0799
Menominee	2612 10th St., Menominee, MI 49858	906-863-9965	906-863-7426
Midland	1509 Washington Ste. A, Midland, MI 48641	989-835-7040	989-835-7597
Missaukee	10641 W. Watergate Rd., Cadillac, MI 49601	231-779-4500	231-779-4507
Monroe	903 S. Telegraph Ste. A, Monroe, MI 48161	734-243-7200	734-243-1660
Montcalm	609 N. State, PO Box 278, Stanton, MI 48888	989-831-8400	989-831-8496
Montmorency	13210 M-33, Atlanta, MI 49709	989-785-4218	989-785-2302
Muskegon	2700 Baker St., PO Box 4290, Muskegon Heights, MI 49444	231-733-3700	231-733-3872
Newaygo	1018 Newell, PO Box 640, White Cloud, MI 49349	231-689-5500	231-689-5586
Oakland	51111 Woodward Ave., Pontiac, MI 48342	248-975-5400	248-975-5550
Oceana	4081 W. Polk Rd., Hart, MI 49420	231-873-7251	231-873-3803
Ogemaw	444 E. Houghton Ave., West Branch, MI 48661	989-345-5135	989-345-4688
Ontonagon	408 Cooper St. Ste. B, Ontonagon, MI 49953	906-884-4951	906-884-6323
Osceola	800 Water Tower Rd., Big Rapids, MI 49307	231-796-4300	231-796-0799
Oscoda	200 W. Fifth St., Mio, MI 48647	989-826-4000	989-826-3961
Otsego	931 S. Otsego Ave., Gaylord, MI 49735	989-732-1702	989-732-8715
Ottawa	12185 James St. Ste. 200, Holland, MI 49424	616-394-7200	616-395-5526
Presque Isle	164 N. Fourth St., Rogers City, MI 49779	989-734-2108	989-734-2767
Roscommon	111 Union St., Roscommon, MI 48653	989-275-5107	989-275-5545
Saginaw	411 E. Genesee, PO Box 5070, Saginaw, MI 48605	989-758-1100	989-758-2710
St. Clair	220 Fort St., Port Huron, MI 48060	810-966-2000	810-966-2025
St. Joseph	692 E. Main St., Centreville, MI 49032	269-467-1200	269-467-1229
Sanilac	515 S. Sandusky Rd., Sandusky, MI 48471	810-648-4420	810-648-4432
Schoolcraft	300 Walnut St. Rm. 175A, Manistique, MI 49854	906-341-2114	906-341-2110
Shiawassee	1720 E. Main St. Ste. 1, Owosso, MI 48867	989-725-3200	989-725-3308
Tuscola	1365 Cleaver Rd., Caro, MI 48723	989-673-9100	989-673-9209
Van Buren	57150 CR 681, Hartford, MI 49057	269-621-2800	269-621-2927

County	Address	Phone	Fax
Washtenaw	22 Center St., Ypsilanti, MI 48198	734-481-2000	734-481-8386
Wayne North	13233 Hamilton Ave., Highland Park, MI 48203	313-852-1700	313-852-1891
Wayne South	1801 E. Canfield Detroit, MI 48207	313-578-5500	313-578-5392
Wayne West	27540 Michigan Ave., Inkster, MI 48141	313-931-6400	313-931-6439
All Wayne	Visit www.michigan.gov/mdhhs for all offices		
Wexford	10641 W. Watergate Rd., Cadillac, MI 49601	231-779-4500	231-779-4507
Outstate	PO Box 30037, Ste. 510, Lansing, MI 48909-7537	517-241-9794	517-763-0280

FORWARD

Livingston County Catholic Charities (LCCC) is an at will employer. The provisions in this manual do not establish contractual rights between LCCC and an employee. No amendment or exception to our at will employment policy set forth above can be made at any time, for any reason, except by the Executive Director and the approval of the Board of Directors. The exception must be in writing, directed to you personally, and signed by the Executive Director.

All matters covered throughout these policies that apply to all employees may also apply to volunteers, as noted throughout.

CONTENTS

<u>Subject</u>	<u>Page</u>
Forward	2
I. Functions	5
II. Purpose and Philosophy	5
III. Organizational Structure	5
IV. Sources of Financial Support	5
V. Employee Categories	6
VI. Employment Practices	6
A. Equal Opportunity	6
B. Affirmative Action	7
C. Employee Rights and Responsibilities	7
D. Sexual Harassment Policy	7
E. Employee Safety and Health	8
F. Drug Free Workplace	9
G. Recruitment Procedure	10
H. Employment of Related Persons	10
I. Professional Credentialing	10
J. Secondary Employment/Conflict of Interest	10
K. Employee – Client Relationships	11
L. Employee Health	12
M. Offer of Employment	12
N. Updated Background Checks	12
O. Confidentiality	12
P. New Hire Orientation	13
Q. Orientation Period	13
R. Hours of Work	13
S. Attendance Record	13
T. Reporting Absence	13
U. Notification of Work Cancellation	13
V. Lunch and Rest Periods	14
W. Personnel Records	14
X. Pay Plan	14
Y. Compensation	14
Z. Performance Evaluations	15
AA. Work Schedule	15
BB. Staff Meetings	16
CC. Staff Development	16
DD. Personal Use of Technology	16
EE. Media Relations	18
FF. Dress Code	18
VII. Benefits	18
A. Paid Vacations	18
B. Paid Holidays	19
C. Compensatory Time	19
D. Expense Reimbursement	20

<u>Subject</u>	<u>Page</u>
E. Medical/Dental Insurance	20
F. Flexible Benefit Plan	20
G. Retirement	20
H. Disability	21
I. Life Insurance	21
J. Tax Deferred Annuity Plan	21
K. Liability Insurance	21
L. Worker's Compensation	21
M. Unemployment Insurance	22
N. Social Security/Deductions from Pay Check	22
 VIII. Leave of Absence	 22
A. Sick Leave	22
B. Child Care Leave	23
C. Jury Duty	23
D. Leave for Professional Activities	23
E. Bereavement Leave	23
F. Leave Without Pay	24
G. Sabbatical Leave	24
H. Military Leave	24
I. Family and Medical Leave	24
J. Extension of Leave	25
 IX. Termination of Employment	 25
A. Benefits upon Termination	25
B. Notice of Termination	25
C. Termination By Resignation	25
D. Termination By Layoff	25
E. Termination By Retirement	26
F. Termination By Dismissal	26
1. Dismissal for Unsatisfactory Performance	26
2. Dismissal for Malfeasance	27
3. At Will Employment	27
G. Grievance Procedure	27
H. Termination for Unsatisfactory Job Performance	28
 X. Transportation	 28
 X1. Personnel Policy Revisions	 29

PERSONNEL POLICIES AND PROCEDURES

I. FUNCTIONS:

Livingston County Catholic Charities (LCCC) is a human service agency providing social services to individuals and families. The agency's programs presently include: short term Mental Health Counseling, Substance Abuse Treatment and Case Management, Substance Abuse Prevention, Parish Social Ministry, Adult Day Services, Senior Resource Advocacy, Interfaith Volunteer Caregiver, Foster Family Care and Adoption. The agency also provides Information and Referral services. LCCC is accredited by the Council on Accreditation, is licensed by the State of Michigan as a Child Placing Agency (Foster Care and Adoption) and to provide Substance Abuse Prevention and Outpatient Treatment, is funded by the Livingston County United Way, and is a member of Catholic Charities of Michigan and Catholic Charities USA.

LCCC is active in community networking, partnering, and planning. Whenever possible, the agency participates in diocesan and county programs concerning senior services, mental health, family life, and other human service concerns.

II. PURPOSE AND PHILOSOPHY:

LCCC MISSION STATEMENT: "The Mission of Livingston County Catholic Charities is the work of the Catholic Church, to share the love of Christ by performing the corporal and spiritual works of mercy."

LCCC VISION STATEMENT: "Livingston County Catholic Charities aims to provide quality human services to Livingston County residents regardless of race, gender, religion, age, disability or financial ability."

The agency is a manifestation of the Christian responsibility to meet human and spiritual needs. We are dedicated to the belief that people have spiritual, physical, social, and psychological needs. We attempt to meet those needs through casework, group work, community organization, education, advocacy and collaboration. Employees and volunteers are expected to serve the community with integrity, compassion and respect for the dignity and worth of human beings.

III. ORGANIZATIONAL STRUCTURE:

LCCC is under the auspices of the Roman Catholic Diocese of Lansing and the Diocesan Department of Catholic Charities. It is governed by a Board of Directors that is accountable to the Bishop of Lansing. The organization and functions of the Board are outlined in the Agency By-laws. The Executive Director cooperates with the Board in formulating and implementing policies and services.

IV. SOURCES OF FINANCIAL SUPPORT:

The agency receives financial support from the Diocesan Services Appeal, Livingston County United Way, Loaves & Fish Annual Appeal, other fundraising, program service fees, third-party reimbursement, specific program funding from federal, state and

county sources, foundation grants, and other contributions. The agency has an endowment that is administered by the Community Foundation of Southeast Michigan.

V. EMPLOYEE CATEGORIES:

EXEMPT: Full time employees working 40 hours per week or more whose position is exempt from overtime pay requirements. Exempt employees meet the federal definition, through both professional expertise and salary.

NON-EXEMPT: Full time or part time employees whose positions are paid on an hourly basis and are paid overtime at a rate of 1½ times hourly pay for hours worked in excess of 40 in one payroll week.

FULL TIME: Employees working 20 hours per week or more on a regular basis (generally for 5 months or longer) are considered full time according to the Michigan Catholic Conference definition for benefits eligibility. Employees with this status will be entitled to benefits as determined by insurance and agency policy. For purposes of defining percentage of full time, LCCC operates on a 40 hour work week with an unpaid lunch hour.

PART TIME: Employees working less than 20 hours per week on a regular basis. Employees with this status are included in Social Security benefits, Unemployment Compensation and Worker's Compensation in conformity with federal requirements. Part time employees are covered under the agency's liability insurance.

TEMPORARY: Employees hired either full or part time on a time limited basis for an agreed upon hourly rate of compensation. Temporary employees are provided the same benefits as PART TIME.

INDEPENDENT CONTRACTORS: Individuals or organizations contracted by the agency to provide specified professional functions not provided for by existing employees. Independent contractors are not employees of the agency and do not qualify for benefits.

VI. EMPLOYMENT PRACTICES:

A. EQUAL OPPORTUNITY:

LCCC is an equal employment opportunity employer. Employment decisions are based on merit and business needs, and not on race, color, citizenship status, national origin, ancestry, gender, sexual orientation, gender identity, age, religion, creed, physical or mental disability, marital status, veteran status, political affiliation, genetic information, or any other factor protected by law.

Management is primarily responsible for seeing that LCCC's equal employment opportunity policies are implemented, but all members of the staff share in the responsibility for assuring that by their personal actions, the policies are effective and apply uniformly to everyone.

Any employee involved in discriminatory practices will be subject to discipline, up to and including termination.

LCCC is committed to maintaining full legal compliance, in all programs and services, with the following: Civil Rights Act of 1964; Section 504 of the Federal Rehabilitation Act of 1973; the Americans with Disabilities Act; and, the Michigan Occupational Health and Safety Administration Regulations.

B. AFFIRMATIVE ACTION:

The agency has a commitment to equal opportunity in personnel matters including recruitment, selection, hiring, training, supervision, compensation, promotion, demotion, transfer, layoff and termination.

C. EMPLOYEE RIGHTS AND RESPONSIBILITIES:

LCCC recognizes the right of employees and volunteers as private citizens to engage in social, political and religious activities, provided that the activities do not impede professional performance, and clearly distinguish in public between statements and actions as an individual and as a representative of LCCC. Employees are expected to abide by the principles of the Catholic Charities USA Code of Ethics. Social Work staff members are also expected to adhere to the National Association of Social Workers (NASW) Code of Ethics.

Employees of LCCC are protected by the Federal and Michigan Whistleblower's Protection Acts. Each employee is protected from actual or the threat of discharge or discrimination for the reporting of a violation or suspected violation of federal, state or local laws, rules or regulations.

D. SEXUAL HARASSMENT POLICY:

It is the agency's policy that employees and volunteers are responsible for assuring that the workplace is free from sexual harassment. The agency wishes to avoid any action or conduct that would be construed as sexual harassment including unwelcome sexual advances, requests for sexual acts or favors, or other verbal/physical conduct of an offensive nature.

It is illegal and against the policies of LCCC for any employee, male or female, to sexually harass another employee. While a complete list of prohibited conduct does not exist, the following are examples of offensive behavior which must be avoided:

- Making unwelcomed sexual advances or requests for sexual favors or other verbal or physical conduct of a sexual nature.
- Making submission to, or rejection of such conduct, the basis for employment decisions affecting an employee (promotions, transfers, schedules).
- Telling of lewd or off-color jokes.
- Maintaining sexually explicit materials in any format.
- Creating an intimidating, hostile, or offensive working environment.

- Viewing and/or distributing material of a sexual nature during work hours and/or via LCCC equipment, including email systems, Internet, or other forms of communication.

All reports of harassment will be treated seriously. LCCC will conduct an investigation of any complaint that could require limited disclosure of pertinent information to certain parties, including the alleged harasser. While absolute confidentiality is desired, it cannot be promised or assured throughout the course of the investigation.

Any supervisor, manager, or other employee who has been found, after appropriate investigation, to have sexually harassed another employee will be subject to appropriate disciplinary action, up to and including termination. Furthermore, any manager or supervisor who is aware of harassment potentially occurring will be required to report it to LCCC. Any supervisor who fails to meet this expectation will be subject to disciplinary action, up to and including termination.

LCCC will not tolerate or condone any acts of retaliation against anyone who files harassment complaints or cooperates in an investigation. Retaliating against an employee is grounds for disciplinary action, up to and including termination. If you feel you have been subjected to retaliation through the course of or subsequent to a harassment claim and investigation, please inform your supervisor immediately. Identities of those making claims will only be revealed on a need to know basis, with confidentiality being a main priority.

All employees, regular or on-going contractors and volunteers must review, and adhere to, the Sexual Harassment Policy of the Diocese of Lansing.

E. EMPLOYEE SAFETY AND HEALTH:

Every effort is made to provide safe working conditions for our coworkers and volunteers. The agency observes required safety laws. No one will be required to work in any unsafe manner. Employees and volunteers are requested to point out potential hazards and do everything reasonable to ensure a safe working environment. Every effort is made to provide safe working conditions for our employees and volunteers. The agency observes required safety laws. For those employees and volunteers using their personal automobiles in the performance of their responsibilities, the expectation for safe working conditions will also include the automobile. All employees, contractors and volunteers are expected to follow the Universal Precautions procedures as outlined in the Agency Procedures Manual.

The possession of a firearm or other weapon on agency premises (including automobile, client home or other off-site locations during the scheduled work day) is strictly prohibited.

Accidents: If any injury occurs on the job, no matter how slight, it should be reported as soon as possible to your supervisor, the Office Manager or the Executive Director.

First-Aid: There are standard limited kinds of first-aid supplies available in the first aid box located in the storage areas of each office. All staff will always have access to the first aid supplies. Do not give medications to clients. If a first aid situation exists and

you are not certain how to handle it, ask someone in the office to call for help immediately. Bags containing items to facilitate Universal Precautions are available at all office locations and are available for coworkers engaged in work related off-site activity. These may be requested from the Volunteer Coordinator or the Office Manager.

General Emergencies: Livingston County is on the "911" system for all emergency situations. Employees and volunteers working in the office should familiarize themselves with the office telephone system for efficiency of access in an emergency. Fire safety and break-in procedures will be made available to all new employees at the time of orientation. There are direct push buttons underneath both reception desks in the main office, both up front and in the back reception office, that advise the local Police Department if there is an immediate threat when these buttons are pushed.

F. DRUG FREE WORKPLACE:

LCCC provides a drug-free workplace and maintains compliance with the federal Drug-Free Workplace Act of 1988; www.drugfreeworkplace.org.

It is LCCC's desire to provide a healthy, drug-free and safe work place. To promote this goal, employees are required to report to work in appropriate mental and physical condition to perform their jobs in a satisfactory manner.

While on LCCC's premises or while conducting business-related activities off LCCC premises, no employee may use, possess, distribute, sell, or be under the influence of alcohol or illegal drugs. The legal use of prescribed drugs is permitted on the job only if it does not impair an employee's ability to perform the essential functions of the job effectively and in a safe manner that does not endanger other individuals in the work place. In states that have a Medical Marijuana or other drug-related law that conflicts with Federal Law, the agency will interpret the Federal law as controlling. This means that the agency will not tolerate the use of drugs, such as marijuana, regardless of whether the employee has a Medical Marijuana card or not.

The use of tobacco and/or nicotine products (i.e. E-cigarettes, vaporizers, etc.) on the agency premises is prohibited at all times.

Violations of this policy may lead to disciplinary action up to and including termination of employment. Such violations may also have legal consequences.

As a condition of continued employment, employees will be required to submit to drug and/or alcohol screening when an injury has occurred during the normal course of work or when there is "reasonable suspicion" that a random screen is necessary. "Reasonable suspicion" means that there is knowledge sufficient to induce a prudent and cautious supervisor, under the circumstances, to believe that a prohibited activity has occurred or is occurring. Refusal to submit to testing may result in disciplinary action, up to and including termination.

Employees with questions or concerns about substance dependency or abuse are encouraged to discuss these matters with their supervisor or the Executive Director to receive assistance or referrals to appropriate resources in the community.

Employees with questions on this policy or issues related to drug or alcohol use in the work place should raise their concerns with the Office Manager or Executive Director without fear of reprisal.

G. RECRUITMENT PROCEDURE:

The agency will offer opportunities for new or vacant positions to internal staff prior to seeking applicants externally. Information including specific requirements of the position, salary range, and personnel policies of the agency will be released to potential applicants for a vacant position. Applicants are required to submit a resume and letter of interest prior to the first interview.

H. EMPLOYMENT OF RELATED PERSONS:

Relatives of current employees (defined as spouse, parent/step-parent, sibling, child/step-child, grandparent/grandchild, mother/father in-law, niece/nephew, aunt/uncle, brother/sister in-law) cannot be employed in a position in which supervision would be provided by the defined relative. Defined relatives of current employees are not eligible for membership on the Board of Directors.

I. PROFESSIONAL CREDENTIALING:

Within thirty days of the hire date, professional employees eligible and not currently certified, registered or licensed must apply to the State of Michigan for the appropriate professional credential. As a condition of continued employment, professional employees are required to submit proof of their credential status and renewals as required by the State of Michigan.

Professional employees in positions that require special certification must successfully complete these and provide verification within the required time frames. For Substance Abuse Prevention and Substance Abuse Treatment, the required time frame is 2 years. For Foster Care and Adoption Caseworkers, the Recruitment and Licensing Specialist and the Child Welfare Supervisor, this is 90 days.

J. SECONDARY EMPLOYMENT/CONFLICT OF INTEREST:

An employee may maintain an outside employment responsibility or interest, with the understanding:

1. That these activities must not be in philosophical conflict to the agency's goals and mission;
2. That these activities must not be in conflict with the Catholic Charities Code of Ethics;
3. That the activities not interfere with the employee's scheduled employment with LCCC;
4. That the agency's client base may not be channeled to one's private practice or other employment.
5. If a scheduling conflict occurs, the employee must obtain approved time off or schedule change in consultation with the supervisor;

6. That the secondary employment not be in programmatic competition with any program provided by LCCC;
7. Upon termination of employment with LCCC, whether voluntary or involuntary, the employee will not accept or establish employment that directly competes with LCCC for a period of 12 months.

In the event of interpretation, the Executive Director will provide the determination of the conflict of interest or potential conflict of interest.

K. EMPLOYEE – CLIENT RELATIONSHIPS:

LCCC employees and volunteers provide a variety of services to many members of the community. Trust is an essential quality of the agency/client relationship. To maintain this trust, each client will be treated with the utmost dignity, caring and respect in every person-to-person contact with LCCC including telephone, written documents and community meetings.

The psycho-social needs identified by clients often present the risk of excessive emotional dependency and loss of objective professional service relationships. LCCC employees and volunteers must avoid charges of interfering with or unduly influencing the personal and financial concerns of each client.

Undue influence and inappropriate behaviors affecting client personal and financial situations are to be avoided by:

1. Never accept any personal monetary or non-incident gift from a client.
2. Never attempt to sell items or solicit contributions.
3. Never take direct or indirect control over a client's financial affairs (e.g. writing or cashing checks, handling cash, etc.).
4. Never accept the legal role of personal representative, patient advocate, power of attorney, or any other position of legal responsibility for, or on behalf of, a client.
5. Never attempt to influence or advise a client in legal matters (e.g. give advice on how, or to whom, the client should leave his or her assets upon death; recommend a separation or divorce from clients, spouse, etc.).
6. Do not attempt to influence the beliefs or philosophy of a client, including, but not limited to religion or politics.
7. Always follow HIPAA confidentiality standards.
8. Always provide clients with information regarding "Duty to Warn" and mandates to inform child/adult protective services regarding suspected abuse.

Further, if an employee should learn that he or she (or any other LCCC employee) has at any time been referenced in any capacity in a client's last will and testament, power of attorney, patient advocate designation, deed, account designation, beneficiary designation, or in any other legal or financial document, the employee must notify the Executive Director of this immediately, in writing.

L. EMPLOYEE HEALTH:

In cases of health related exams/inoculations required for continued employment due to the nature of work, the agency will assume the cost if not covered by the employee's insurance. TB tests are required for all new employees and are to be updated every two years of employment. A pre-employment drug test is required for all new employees, the cost of which will be covered by LCCC.

M. OFFER OF EMPLOYMENT:

The Executive Director, setting forth the position description, beginning date of employment, starting salary and benefits, confirms an offer of employment in writing and any special conditions related to the position. Upon acceptance, the employee signs, dates, and returns the original to be filed in the employee personnel file. An *Acknowledgement of Employment* also is completed, signed, and filed into the personnel file at the time of offer and acceptance of employment. This form includes:

- Acknowledgment of receipt of the Personnel Policies and Procedures Manual along with an explanation of its application;
- Assertion of "at will employment";
- Statement of agreement to terms of employment;
- Statement of agreement to abide by confidentiality policies and procedures; and
- Authorization for payroll deductions.

Prior to the formal offer of employment, each candidate provides a completed employment application, verification of education, verification of past employment, certification/licensure and all other position requirements, and supplies 3 references for employment, at least one of which must be a professional reference. Each reference is contacted via telephone and the verbal input from the reference is recorded onto the Reference Verification form. Three reference contacts must be recorded for all new employees. A new employee also is required to complete a DHHS Central Registry form and a Law Enforcement background check release form so that a required criminal background check can be requested.

N. UPDATED BACKGROUND CHECKS:

Updated law enforcement backgrounds checks will be completed for those employees in a position or job function in which this may be required by the funding contract, policy of the funding source, or by law. When required, then these will be completed and documented at the appropriate intervals.

O. CONFIDENTIALITY:

LCCC clients are guaranteed the right to confidentiality, both legally and ethically. The agency has established policies and procedures to ensure no identification of a person as a client of the agency and no release of client information without written consent. Employees and volunteers of LCCC who engage in or have access to the collection, handling or dissemination of client information are required to sign a statement that they have been informed of their responsibility to protect client confidentiality, and the

consequences for violation of this trust. An employee or volunteer who terminates for any reason continues to be prohibited from disclosing client information. New employees and volunteers will be given specific confidentiality policies and procedures according to their position at the time of the new hire orientation. Violations of client confidentiality will result in formal agency discipline (Section IX – F) and will include any reporting requirements to governmental entities and/or the applicable purchasers of service.

P. NEW HIRE ORIENTATION:

A copy of the Personnel Policies and Procedures Manual will be given to each new employee. The supervisor will acquaint a new employee with policies, benefits, functions, procedures, and specific assignments. The employee and immediate supervisor will complete the New Employee Checklist within the first 30 days of employment and this form will be added to the employee's personnel file. Each program service area may have an additional set of requirements for New Hire Orientation. Unless otherwise indicated, these will be completed and documented within the first 30 days of employment.

Q. ORIENTATION PERIOD:

The first three months of employment will be considered an orientation period for a new employee. During this period the employee will be informed of, and have the opportunity to discuss with a supervisor, his/her performance and assignments. New employees will receive a Performance Evaluation after three (3) months.

R. HOURS OF WORK:

The standard work week is 40 hours with an unpaid lunch.

S. ATTENDANCE RECORD:

Each employee will complete a time sheet according to the payroll period and turn it in to his or her supervisor by the due date. Time sheets are signed by the supervisor, submitted to the Office Manager/Bookkeeper and kept in the employee personnel file.

T. REPORTING ABSENCE:

An employee who will be absent due to illness or other unforeseen circumstance will call the office as soon as possible to inform his/her supervisor and arrange for scheduled appointments to be covered by another coworker or canceled if necessary. If the employee is unable to contact the immediate supervisor, then another administrator should be contacted. Excessive absenteeism may be cause for disciplinary action. Absences of three or more days with no call or no show will be considered job abandonment.

U. NOTIFICATION OF WORK CANCELLATION:

In the event it is necessary to close the agency due to weather conditions or natural disaster, or for some other reason, the decision will be made by the Executive Director.

If the Executive Director is not available, an Executive Officer of the Board of Directors will assume the responsibility or this may be delegated to one of the Management level staff members. Staff members, volunteers, and clients will be notified by phone as soon as possible. Each employee providing direct client service is expected to notify his/her clients if possible.

V. LUNCH AND REST PERIODS:

LCCC operates on a 40-hour work week, with unpaid lunch periods. Unpaid lunches are scheduled with the supervisor and may be flexible depending on the employee position. Morning and afternoon breaks for employees working a minimum of 8 hours in that day may be taken up to 15 minutes each. Breaks for taking care of personal matters during work hours, are not mandatory, and may not be combined to make up a paid lunch period or other paid time off.

W. PERSONNEL RECORDS:

A personnel file is maintained for each employee and may be accessed by the employee upon request. An employee is permitted, in the presence of the Executive Director or designee, to review and make additions to information in his/her personnel file. Personnel files are kept confidential and information is released only upon the written request of the employee.

The personnel file contains verification of applicable education and/or degrees, licenses/certifications, all other position requirements, record clearances, pertinent employment history, reference verifications, legal requirements, performance evaluations, policy reviews, payroll and a signed copy of the position description.

X. PAY PLAN:

Payroll is based on 26 pay periods per year. Payday is every other Friday following the end of the pay period. The first day of a pay period is Saturday and ends on Friday, the fourteenth day.

Y. COMPENSATION:

Hiring Range:

1. The rate of pay for each position is set by the Executive Director, within the budgetary limits established by the Board of Directors. In general, the pay plan is based on a hiring range for each job classification according to the following guidelines:
 - a. The midpoint is the average salary paid in a comparable market for the job classification.
 - b. The minimum is set at 20% below the midpoint.
 - c. The maximum is set at 20% above the midpoint.
2. Beginning employees may be hired up to the midpoint of their range. The Executive Director, based on the applicant's number of years of experience, special education, special qualifications, or a limited pool of qualified applicants can approve exceptions to this guideline.

3. Annual market surveys may be used to revise/update compensation plans to assure competitive salaries/hourly rates.

Pay Increases:

- An annual increase may be implemented July 1st of each year for eligible employees. The size of the increase depends on the agency's finances as determined by the Executive Director with consultation from the Finance Committee of the Board.
- An employee eligible for an annual increase must have at least three months employment with the agency and successfully completed the New Hire Orientation Period (defined above in VI. Q.). A satisfactory performance evaluation is a condition for receiving an annual pay increase. An employee on disciplinary probation (defined in VIII. F1.3.) is not eligible for an annual increase until after successful resolution of the probation period.
- Part time employees in counseling positions working less than 20 hours per week may be eligible for market increases to assure comparable rates. They are not eligible for hourly annual pay increases due to hourly pay being compensated according to market contractual rates for contract therapists, and adjusted for being paid for hours scheduled and worked rather than just for client appointments kept.
- A salary adjustment that is not part of the annual increase may occur in the case of promotion, additional responsibilities, or need to remedy a job classification being paid below market rate.

Z. PERFORMANCE EVALUATION:

An evaluation is a mutual, continuous process including regular supervisory meetings and annual written Performance Evaluations. Supervision provides an opportunity, on a regularly scheduled basis, for employees to assess their functioning and enhance opportunities for professional growth. Formal supervision will be determined within the guidelines of the Annual Supervision Plan and all employees will participate in formal supervision at a minimum of once per month.

The Board of Directors, under the guidance of the Executive Committee, will evaluate the Executive Director annually. A copy of the Executive Director's evaluation will be forwarded to the Director of the Office of Catholic Charities of the Diocese of Lansing.

AA. WORK SCHEDULE:

The agency operates between 9:00am and 9:00pm, Monday through Thursday, and between 9:00am and 5:00pm on Friday. The Adult Day Service program is open from 8:00am until 6:00pm, Monday through Friday. The schedule of each employee is determined with the immediate supervisor according to program need and number of hours per week the employee is hired to work. Volunteer schedules are determined with the program supervisor according to program need.

BB. STAFF MEETINGS:

Staff meetings are held at the discretion of the Executive Director and program supervisors. Employees are expected to attend those staff meetings indicated as required for their specific position.

CC. STAFF DEVELOPMENT:

LCCC accepts responsibility to provide a stimulating and progressive environment to assist employees in their professional growth and development. This is accomplished through staff meetings, in-service training sessions, case conferences and provisions for distribution of professional literature. In addition, the agency makes provisions for reasonable and mutually convenient leaves for conferences and allows time for professional and community meetings/committees. Employees are encouraged to attend professional conferences in related disciplines and areas of work of specific importance to program performance. Conference/workshop fees may be paid by the agency to the extent possible, in whole or in part, as determined by the supervisor, Executive Director and the Annual Professional Development Plan.

DD. PERSONAL USE OF TECHNOLOGY:

Use of LCCC telephone, email and internet facilities for outside business purposes, transmission or receipt of sexually explicit images or messages, or any purpose that in any way may bring disrepute to LCCC, or jeopardize the tax exempt status of the agency, is prohibited.

Increasingly, there are many types of technology available for employees to use at work. Due to the widespread accessibility of different forms of technology, LCCC expects employees to make a conscious effort to protect all work-related material when using different technological devices to communicate externally and internally. Unacceptable use of technology can place LCCC and others at risk while appropriate use helps the agency be more effective and efficient. This policy outlines the agency's guidelines for acceptable use of technology, including, but not limited to: internet and email as well as agency and employee-owned hardware and software.

Guidelines for Use:

LCCC has established the following guidelines for employee use of any technology that is used for business purposes. This includes, but is not restricted to: communication networks, including the Internet and email, as well as agency-owned and personal equipment. It is the agency's expectation that all technology be used in an appropriate, ethical, and professional manner.

- All technology provided by LCCC, including computer systems, communication networks, company-related work records, and other information stored electronically, is the property of the company and not the employee. In general, use of the company's technology systems and electronic communications should be job-related and not for personal convenience.
- Employees who use personal electronic equipment, such as, but not limited to: laptops, tablets, and smart phones are required to take appropriate precautions to protect the LCCC data on the device. Precautions include setting passwords for the devices and changing them every 90 days, locking after 5 minutes of non-use, etc...

- Employees may not use the LCCC Internet, email or other electronic communications to transmit, retrieve or store any communications or other content of a defamatory, discriminatory, harassing or pornographic nature. No messages with derogatory or inflammatory remarks about an individual's race, age, disability, religion, national origin, physical attributes, sexual preference, or other characteristic protected by law may be transmitted. Harassment of any kind is prohibited.
- Disparaging, abusive, profane or offensive language; materials that might adversely or negatively reflect on LCCC or be contrary to its legitimate business interests; and any illegal activities are strictly forbidden.
- Employees may not use the system in a way that disrupts its use by others. This includes sending or receiving excessive numbers of large files and "spamming" (sending email to thousands of users).
- To prevent viruses and technological problems, all equipment used for work-related purposes must have valid virus protection.
- Every employee of LCCC is responsible for the content of all text, audio, or image files that he or she places or sends over the Internet and email systems. No email or other electronic communications may be sent that hide the identity of the sender or represent the sender as someone else. LCCC's corporate identity is attached to all outgoing email communications, which should reflect corporate values and appropriate workplace language and conduct.
- Email and other electronic communications transmitted by LCCC equipment, systems and networks are not private or confidential. LCCC reserves the right to examine, monitor, and regulate LCCC email and other electronic communications, directories, files and all other content, including Internet use, transmitted by or stored in its technology systems, whether onsite or offsite.
- Internal and external email, voice mail, and text messages are considered business records and may be subject to discovery in the event of litigation. Employees must be aware of this possibility when communicating electronically within and outside the agency.

LCCC's Right to Monitor and Consequences for Misuse:

All agency-supplied technology, including computer systems, equipment and company-related work records, belongs to LCCC and not to the employee user. Employees have no right to privacy while accessing social media at work or on LCCC-owned equipment. Employees understand the agency has the right to routinely monitor use patterns, and employees should observe appropriate workplace discretion in his/her use and maintenance of such agency property.

Any employee who abuses the LCCC provided access to email, the Internet, or other electronic communications or networks, including social media, may be denied future access, and, if appropriate, be subject to disciplinary action, up to and including termination, within the limitations of any applicable federal, state, or local laws.

This policy is not intended to and should not be interpreted to prohibit employees from discussing the terms or conditions of employment or engaging in other protected concerted activities under the National Labor Relations Act. If you have questions or need further guidance, please contact the Executive Director.

EE. MEDIA RELATIONS:

From time-to-time, it is possible that the print or electronic media may contact the agency for general or specific information. All requests for information should go through the Executive Director and the decision to provide information, if any, will be made by the Executive Director. After reviewing the request, the Executive Director may approve the response for information and may delegate the response to another coworker. If the Executive Director is not available when a request comes in, then the media should be directed to the Department of Communications of the Diocese of Lansing.

FF. DRESS CODE:

During scheduled work hours or while representing the Agency, employees are required to present in a clean, neat and professional appearance, consistent with their working conditions and job requirements of their position. If the employee has any questions related to appropriate dress for their position, they should consult their supervisor. If your personal appearance is deemed inappropriate by the supervisor, you will be asked to leave work and will not be permitted to return to work until you are appropriately dressed and/or groomed. You will not be compensated for any time spent away from work.

VII. BENEFITS:

A. PAID VACATION:

FULL TIME EMPLOYEES: Employees must have successfully completed New Hire Orientation prior to using Paid Vacation. The scheduling of Paid Vacation must always be approved by the Executive Director. Coworkers working 40 hours per week earn 10 days vacation or 80 hours annually for the first 2 years of employment. Employees earn 15 days vacation or 120 hours annually for the 3rd through 5th years of employment. Beginning with the 6th year of employment, this amount increases to 20 days or 160 hours. The full amount annually is allotted at the start of the fiscal year (July 1), and earned at a rate of 3.1 hours per pay period for 10 days vacation, 4.6 hours per pay period for 15 days vacation, and 6.2 hours per pay period for 20 days vacation:

- 0-24 months: 3.1 hours per payroll period
- 25-72 months: 4.6 hours per payroll period
- 73 months: 6.2 hours per payroll period

PARTIAL BENEFIT: Employees working 20 hours per week or more, and less than 40, will receive vacation hours based on a percentage of full time, with hours allotted and earned in the same way as with full time. Appropriate increases will be given after the 2nd and 5th years of employment.

Employees working less than 20 hours per week are not eligible for vacation benefits.

EARNED/USED: Vacation may be used before being earned in the year. In the event that an employee leaves agency employment, any unearned vacation time that has been used will be deducted from the employee's final pay.

During an employee's period of New Hire Orientation, vacation time may be earned but not used.

Vacation is earned on an annual basis and new employees will receive a prorated annual vacation benefit based on the date of hire.

Employees must request the use of vacation time in advance. The approval for the time off is determined by the immediate supervisor and the Executive Director and is balanced with the coverage needs for the program and the organization.

CARRYOVER: Employees with less than one year with the agency may carryover, if unused, all of their earned vacation. After 12 months of employment, the maximum carry over from the previous year is 10 days or 80 hours for those working 40 hours per week and receiving 10 days or more annual vacation. The maximum carry over for employees working less than 40 hours per week is based on a percentage of the above amounts as determined by the employee's benefit.

B. PAID HOLIDAYS:

Holidays observed by the agency are a paid benefit to those working a minimum of 20 hours per week on a regular basis. Holidays are paid at a maximum of 8 hours.

For those employees working 40 hours in less than 5 days per week, when a holiday falls on a day not scheduled for work, the employee may take an alternate day off in the same week as the paid holiday.

Employees working less than 40 hours but more than 19 hours per week are paid for holidays that fall on a regular scheduled work day, based on hours normally worked that day, up to a maximum of 8 hours.

Employees working less than 20 hours per week on a regular basis (less than 1,000 hours annually) are not eligible for this benefit.

The following days are observed by the agency as paid holidays for eligible employees: New Year's Eve Day, New Year's Day, Good Friday, Memorial Day, July 4th, Labor Day, Thanksgiving Day and the Friday following Thanksgiving, Christmas Eve Day and Christmas Day. Should any of these holidays fall on a weekend day, that holiday will be observed on an alternative day as determined by the Executive Director.

In addition, full time employees working 40 hours per week are granted a holiday for his/her birthday or another day of the employee's choice with the approval of the immediate supervisor. This day will not be scheduled at a time that is disruptive to agency business.

C. COMPENSATORY TIME:

Compensation of overtime does not apply to exempt employees. Non-exempt employees are paid their hourly rate up to 40 hours in one week. Overtime at a rate of 1½ times hourly rate is paid for hours in excess of 40 in one week for a non-exempt

employee. Overtime work must have prior supervisory authorization. Overtime applies only to hours worked, and not to holidays or other paid time off that falls during a week that total hours equal more than 40.

D. EXPENSE REIMBURSEMENT:

Employees are reimbursed for mileage and expenses incurred while performing agency related duties. An expense reimbursement form is submitted to the employee's or volunteer's supervisor at the end of the month for the current month expenses. The following expenses are reimbursable:

1. Meals: agency related breakfast, luncheon or dinner meetings.
2. Telephone: business calls made while away from the office.
3. Transportation: mileage rate is reviewed annually and set according to agency fiscal ability. Mileage claimed is calculated from the base office. If leaving from your home, you must deduct the mileage it would normally take to go to work, with the exception it's on a day you don't normally work, then the mileage can be calculated from your home.
4. Direct client expense: out of pocket expense paid for client use, such as meals or bus fare.
5. Other: may include supplies, snacks or other direct business expenses with the approval of the immediate supervisor.

E. MEDICAL/DENTAL INSURANCE:

Medical insurance is provided for full time employees working more than 20 hours per week and more than 1,000 hours annually. Staff may choose from plans offered through the Michigan Catholic Conference Health Plan. Coverage for spouse and/or dependents is at the employee's expense. Premiums for the employee are shared with the agency and the amount is subject to annual review. Coverage begins the first of the month after the date of hire. Each employee will be given information regarding the policy and coverage.

In the case of employee termination, continued coverage, at the expense of the employee, is available as required by law.

Dental Insurance is offered to full time employees. The employee pays the full cost of the premium.

F. FLEXIBLE BENEFIT PLAN:

This plan, through the Michigan Catholic Conference, allows full time employees to reimburse out of pocket costs for dental, vision, and dependent care through pre-tax payroll deduction. This plan is optional and is renewed annually from January 1 to December 31.

G. RETIREMENT:

The agency is a contributing member of the Michigan Catholic Conference Retirement Plan (MCC). Employees working a minimum of 20 hours or more per week and 1,000 hours per year are entitled to this benefit. The full cost of the plan is paid by the

agency. The rate of contribution is based on a percentage of the employee's gross annual earnings and is determined by the MCC. After enrollment, MCC will send the employee a summary of the plan. Employees become vested according to Diocesan policies.

H. DISABILITY:

Employees working 20 hours or more per week on a regular basis are provided short term and long term disability insurance through the Michigan Catholic Conference according to Diocesan policy. The full cost of premiums is paid by the agency.

Eligible employees will be provided with plan coverage information. Short-term disability insurance has a waiting period of 14 days for accident or sickness, and a maximum benefit period of 26 weeks. The income benefit for short-term disability is 66-2/3% of weekly earnings. The long-term disability income benefit is 60% of monthly earnings, which begins after 180 days of continuous disability. There are specific benefit criteria for each plan.

I. LIFE INSURANCE:

Employees working 20 hours or more per week on a regular basis are provided life insurance coverage through the Michigan Catholic Conference in the amount of two times the employee's annual base salary.

J. TAX DEFERRED ANNUITY PLAN:

Tax deferred annuities are available through Mutual of America Life Insurance Company and the Michigan Catholic Conference. Payroll deduction is available for employees participating in this plan.

K. LIABILITY INSURANCE:

The agency participates in the Protected Self Insurance Program of the Diocese of Lansing, which provides liability coverage for employees, board members, and volunteers when acting within the scope of agency duties. Employees and volunteers using their own cars for agency business must provide proof of auto insurance through their own insurance company. This automobile liability must be at a minimum level of \$100,000 per occurrence and \$300,000 total. Proof of liability coverage is required at the time of initial hire and annually thereafter. Proof of the legal ability to drive (i.e. driver's licenses) is also required at the initial hire and annually thereafter. Any claims would be made to an employee's insurance carrier. If the agency is named in a lawsuit when an accident has caused injury to another, the employee's insurance is primary with the agency insurance secondary.

L. WORKER'S COMPENSATION:

The agency participates in the Protected Self Insurance Program of the Diocese of Lansing. This program covers all liability incurred under the Worker's Compensation statutes of the State of Michigan.

M. UNEMPLOYMENT INSURANCE:

This insurance is provided through the Michigan Catholic Conference for all employees. In the event of termination or layoff, the employee may be eligible to collect unemployment benefits as prescribed under the State law.

N. SOCIAL SECURITY/DEDUCTIONS FROM PAYCHECK:

LCCC is required by law to make certain deductions from each paycheck. Among these are your federal, state and any applicable local income taxes and your contribution to FICA (Federal Insurance Contributions Act) as required by law. These deductions will be itemized on your check stub. The amount of the deductions will depend on your earnings and on the information you furnish on your W-4 Employee's Withholding Allowance and state tax forms regarding the number of dependents/exemptions you claim. Any change in name, address, marital status or number of exemptions must be reported to the Office Manager immediately, to ensure proper credit for tax purposes. The W-2 Wage and Tax Statement form you receive for each year indicates precisely how much of your earnings were deducted for these purposes.

Garnishments, alimony, child support, and other court-ordered deductions will be executed in accordance with law upon the receipt of proper notification. Such court ordered deductions will be submitted to the proper agency.

VIII. LEAVES OF ABSENCE:

A. SICK LEAVE:

Full time employees working 40 hours per week will receive 13 days (104 hours) of sick leave each year, the unused balance of which carries over to the following year. Employees may use only the Sick Leave that has been earned.

Sick Leave is earned at a rate of 4 hours per pay period. Employees working less than 40 hours and more than 20 hours per week will receive Sick Leave hours based on a percentage of full time. Employees working less than 20 hours per week on a regular basis are not eligible for this benefit.

Sick Leave may be used for personal illness, injury, doctor or dental appointments and illness of a family member (defined as the employee's nuclear family, family of origin, and in-laws). The use of Sick Leave for a period exceeding 5 consecutive days may require verification from a medical doctor. This letter may be provided prior to beginning the Sick Leave or may be provided prior to the return to active work.

With the advance approval of the immediate supervisor, Sick Leave may be used prior to being earned. In the event an employee leaves agency employment, unearned sick time used will be deducted from the employee's final pay.

Short term disability becomes effective after fourteen consecutive calendar days under eligible terms. Accumulated sick leave may be used as needed depending on the circumstances. While on leave, the employee's position is available for the employee

to return to at the same level and salary, with the exception of reorganization or reduction of work force (refer to Section IX, D, Termination by Layoff).

Accumulated sick days are not to be used at the end of one's employment, unless necessary for medical reasons. No reimbursement will be made for unused sick leave at termination of employment.

B. CHILD CARE LEAVE:

A leave of absence without pay due to childbirth, adoption, pregnancy, miscarriage and/or associated recovery may not exceed 6 consecutive months. An employee requiring this leave will request it at least sixty days prior to the date on which the leave is to begin, when feasible.

During this leave the employee may not accrue sick or vacation days, but will retain seniority and any unused benefits accrued prior to said leave. The employee may choose to use sick and vacation benefits. During this leave the agency will continue to pay employee's benefits as previously established. While on leave, the employee's position is available for the employee to return to at the same level and salary, with exception of reorganization or reduction of work force (refer to Section IX .D. Termination by Layoff).

C. JURY DUTY:

Employees assigned to jury duty will be paid the difference between jury duty pay and normal pay for every full day of jury service that falls on an employee's normal work day.

D. LEAVE FOR PROFESSIONAL ACTIVITIES:

Employees will be encouraged to attend conferences and workshops related to the work of the agency. Payment for transportation, lodging, registration fees, and time off when appropriate will be granted at the discretion of the Executive Director in consideration of fiscal ability at the time of request.

E. BEREAVEMENT LEAVE:

Employees working 40 hours per week are granted up to 5 days with pay (each occurrence) for the death of a member of the immediate family (spouse, child, parent/step-parent, sibling, grandparent/grandchild, mother/father-in-law, brother/sister-in-law, niece/nephew, aunt/uncle). With the approval of the Executive Director, the employee make request additional paid leave time through the use of accrued Vacation or Sick Leave. Additional time may be taken off without pay, with supervisory approval. Employees working less than 40 hours and more than 20 hours per week are granted a percentage of this benefit based on percentage of full time. Employees working under 20 hours per week are not eligible for this benefit.

F. LEAVE WITHOUT PAY:

An employee may request a leave without pay, up to a maximum of 90 days, to be taken at the convenience of the agency with the approval of the Executive Director. An employee will not accrue vacation, sick time, or other accrual type benefits during the leave. Costs for continuation of agency benefits will be borne directly by the employee through payment to the agency after the 30th day of the leave. While on leave, the employee's position is available for the employee to return to at the same level and salary, with the exception of reorganization or reduction of work force (refer to Section IX. D., Termination by Layoff). At the discretion of the Executive Director, the employee may request an extension beyond the original 90 days.

G. SABBATICAL LEAVE:

Arrangements for sabbatical leave for extensive professional development such as study of related professional work are made between the staff member and the Executive Director. In the case of the Executive Director, approval for sabbatical leave is at the discretion of the Board of Directors. An employee becomes eligible for a four month sabbatical leave after having completed seven full years of employment and agrees to continue with the agency for at least two years after leave is taken. The agency's financial situation will determine payment or nonpayment for this leave period. Extension of a sabbatical leave without pay and agency benefits will be granted up to one year at the discretion of the Executive Director or the Board of Directors. While on leave, the employee's position is available for the employee to return to at the same level and salary, with exception of reorganization or reduction of work force (refer to Section IX. D., Termination by Layoff).

H. MILITARY LEAVE:

In accordance with USERRA (Uniformed Services Employment and Reemployment Rights Act of 1994), employees who serve in the U.S. or state military reserves may take the necessary time off without pay to fulfill this obligation and will retain all of their legal rights for continued employment under existing laws. These employees may apply accrued personal leave and unused earned vacation time to the leave if they wish; however, they are not obligated to do so.

You are expected to notify your supervisor as soon as you are aware of the dates you will be on duty so that arrangements can be made for your work group during this absence.

I. FAMILY AND MEDICAL LEAVE:

The Family and Medical Leave Act of 1993 applies to employers with 50 or more employees. This agency will include coverage according to law at the point it has expanded to 50 employees.

J. EXTENSION OF LEAVE:

Each employee may request an additional 5 days of paid leave for any of the purposes identified in items A through I as described above. Approval for the additional time is at the discretion of the Executive Director.

IX. TERMINATION OF EMPLOYMENT:

Termination of employment may take one of the following forms: resignation, layoff, retirement, or dismissal.

A. BENEFITS UPON TERMINATION:

Vacation Pay: If an employee leaves prior to completing the New Hire Orientation period, there is no allowance for vacation pay. An employee who terminates after the New Hire Orientation period will be paid up to 25 days of unused accrued vacation.

Sick Pay: Employees are not paid for unused sick days upon termination.

B. NOTICE OF TERMINATION:

Notice of termination of employment by the employer may, if practical, be given as far in advance as possible. Notice of termination of employment by the employee should be given as far in advance as possible. The notice should specify the date of termination, and employees should give their notice to the immediate supervisor and the Executive Director. Professional staff resigning or retiring from their position should endeavor to give at least one month notice, and support staff at least two weeks. No notice is required where the length of employment was specified at the time of employment.

Regardless of reason for termination, the employee is expected to complete job responsibilities in such a manner that there is the least possible disruption of agency services.

C. TERMINATION BY RESIGNATION:

Resignation is construed as termination of employment at the volition of the employee.

D. TERMINATION BY LAYOFF:

Layoff is construed as removal from a position because of reorganization or reduction of work force. LCCC maintains a Reduction of Work Force Policy. Primary factors to be considered in layoff decisions are length of service, qualifications, quality of performance, agency resources and the service needs of the community and agency. Length of service alone will not insure transfer to another agency service. Individual layoff decisions are made at the discretion of the Executive Director in consultation with program supervisors.

For a one-year period following layoff, the employee will be notified of all job openings, offered an interview and given primary considerations. A laid-off employee will be

offered his/her former position if that position opens within one year of layoff. If rehired within one year, employees will resume previously earned employee benefits.

E. TERMINATION BY RETIREMENT:

Retirement is defined as the termination of employment under terms of the agency's retirement plan or the employee no longer wishes to work and specifies retirement as the reason. There is no mandatory retirement age.

F. TERMINATION BY DISMISSAL:

Termination of employees may be made at will at any time. The decision to dismiss an employee will be made by the Executive Director in consultation as applies with the employee's supervisor. In accordance with Diocesan policy, the decision to dismiss the Executive Director will be made by the Board of Directors in collaboration with the Diocesan Catholic Charities Office and the Bishop of the Lansing Diocese.

1. DISMISSAL FOR UNSATISFACTORY JOB PERFORMANCE:

An employee on regular status is expected to have the necessary competence to render satisfactory job performance. When an employee falls below the minimum job performance standards, the employee may, without affecting the termination at-will policy of the employer referred to throughout this manual, be apprised of the situation by the supervisor in order to have a reasonable opportunity to bring performance up to standard. In the event that the ongoing supervisory process indicates deficiencies in performance serious enough to warrant disciplinary action, the following disciplinary procedures may be followed:

- a. The employee may be given a verbal warning, which may be noted in the employee personnel file. This may consist of informing the employee of the performance problem and the time frame within which the problem is to be corrected.
- b. If a verbal warning does not correct the situation, the employee may be given a written disciplinary action, which is to be signed by both the supervisor and employee, and placed in the personnel file. All written disciplinary actions might include suggestions for improvement, performance standards to be met, and a time frame for correcting the situation.
- c. If the written disciplinary action does not correct the situation, the employee may be placed on probation status for a specified time, within which time the employee must meet the prescribed performance standards. The length of probation will be determined by the Executive Director, but will not exceed three months.
- d. At the end of the probationary period, the supervisor and Executive Director may decide if the employee has met the performance standards. The supervisor may provide a written evaluation for the employee and the personnel file. If the prescribed performance standards have not been met,

dismissal may result. The employee may choose to resign and receive the usual termination benefits.

- e. If the employee disagrees with the decision to dismiss, he/she may initiate the grievance procedures as set forth below. During the grievance process the decision to dismiss will be enforced. If the employee is successful in the grievance procedure and the decision to dismiss is reversed, the employee will be reinstated and will receive all lost wages from the date of termination.

2. DISMISSAL FOR MALFEASANCE:

Dismissal will be immediate if the employee's actions constitute malfeasance. Malfeasance is construed to be an act of serious misconduct on the part of the employee. Such act may be of a criminal, unprofessional or unethical nature and is the basis for immediate dismissal. The notice provision does not apply in this type of dismissal. The following are examples of acts of malfeasance and is not an exhaustive list as other reasons could also result in immediate dismissal:

- Violation of NASW Code of Ethics.
- Violation of Pro-Life Policy.
- Refusal to carry out appropriate orders of proper authority.
- Unauthorized use or release of a client's confidential information.
- Misrepresenting or falsifying agency records.
- Theft of agency, client or employee property.
- Fighting or attempting bodily injury except in self-defense.
- Willful destruction or abuse of agency property.
- Sexual, mental, or physical abuse of clients, employees or visitors.
- Possession of a firearm or other weapon on agency premises (including automobile, client home or other off-site locations during the scheduled work day).
- Violation of sexual harassment policy.

An employee being terminated for malfeasance will be entitled to a hearing between the Executive Director, supervisor, and employee within five business days of dismissal. The employee will receive pay and benefits as accumulated to date of dismissal. If the employee disagrees, he/she may initiate grievance procedures.

3. AT-WILL EMPLOYMENT

Nothing in this Article IX, paragraph F, shall be construed as to impair the rule that employment at LCCC is "at-will" and may be terminated, at any time, with or without cause, by either LCCC or the employee.

G. GRIEVANCE PROCEDURES:

Employees have the right to present a grievance to the agency, which consists of any matter of personal concern or dissatisfaction regarding his/her employment or termination of employment, as follows:

1. Any grievance will be discussed between the employee and immediate supervisor, and brought by the supervisor to the Executive Director. Disposition to the grievance will be rendered by the supervisor in writing within five business days.
2. Failing resolution at Step One, the employee may submit his/her grievance in writing within five business days to the Executive Director. A disposition will be rendered in writing within five business days.
3. Failing resolution at Step Two, the employee may submit a written grievance to the Personnel Committee of the Board of Directors within five business days. The Board Committee will act upon the grievance within ten business days. The Board Committee may on the basis of inadequate information to render a decision, elect to hold a meeting with the employee, Executive Director, supervisor, and others involved. The employee may have up to 2 witnesses present in such instance. The decision rendered will be final and will be given to the employee and the Executive Director in writing stating the basis of the action.

H. TERMINATION FOR UNSATISFACTORY JOB PERFORMANCE:

See IX. F. Employee Discipline Procedure.

X TRANSPORTATION:

1. Purpose

To assure safety for clients, employees, contract workers, interns and volunteers when traveling via automobile on agency business; to establish uniform guidelines for employees and volunteers to follow when transporting clients.

2. Definitions

Moving Violations: violations identified on a Secretary of State Drivers Record Check, which directly involve safety while operating a vehicle, such as speeding, failure to yield, or disobeying stop signs or traffic signals. Violations such as no proof of insurance are not-by themselves-considered moving violations.

3. Policy

Individual may only transport client or others on behalf of the agency if they meet the following criteria:

- The job description designates transporting clients or other as a responsibility
- Possess a valid driver's license
- A copy of current vehicle insurance is on file in employee or volunteers personnel and/or volunteer file if they are utilizing their personal vehicle
- Have no more than three (3) moving violations in the last five (5) years on their driving record.

If an individual receives a 3rd moving violation during the course of their work/service, the individual will receive a letter of warning and will be required to take a driving safety course to maintain employment or their current assignment. If an individual receives a 4th moving violation it will result in a reassignment of

duties if applicable or it may result in discipline up to termination of employment, contract, or assignment at the discretion of the Executive Director. Any alcohol or drug related moving violation, such as a D.U.I or O.U.I.L will result in discipline, up to and including termination.

X1 PERSONNEL POLICY REVISIONS:

The Board of Directors will designate a committee of the Board with the responsibility to review and, when indicated, revise these policies and procedures. Such review will occur at least once every two years.

When such a review occurs, the President of the Board, or the Chairperson of the Personnel Committee, shall appoint two employees (in addition to the Executive Director) to the Review Committee. At least one employee will be non-management. The Review Committee shall be advisory only, and the recommendation of specific provisions to the Board of Directors shall be the sole determination of the majority vote of the Personnel Committee. Any recommended revisions will be approved by the full Board of Directors. All revisions will be provided, in writing, to the employees.

POSITION DESCRIPTION
VOLUNTEER CAREGIVER PROGRAM COORDINATOR

PURPOSE OF POSITION: To assist with coordination, development, promotion and daily operation of the Volunteer Caregiver Program, with volunteers providing services to older and disabled adults throughout Livingston County.

Role Sharing.....

QUALIFICATIONS:

1. High School diploma or equivalent required. Preference for a bachelor's degree in social work, gerontology, or other human service areas.
2. Minimum of one year experience in a human service or community outreach setting.
3. Must have an understanding of the needs of the elderly (familial, social, health) and an awareness of special concerns/problems that may arise as a part of the aging process.
4. A familiarity with the resources and geography of Livingston County is preferred.

POSITION REQUIREMENTS:

General:

1. Attends and participates in staff and programmatic meetings as required.
2. Understands and adheres to agency policies and procedures, including funding sources, licensing and accreditation requirements.
3. Maintains confidentiality of client records and information.
4. Maintains good attendance, is punctual and follows procedure to report schedule changes.
5. Is committed to attaining and maintaining mastery of the level of knowledge and skills required for the position.
6. Demonstrates a willingness to take the initiative in tackling new tasks.
7. Is able to communicate clearly both orally and in writing.
8. Demonstrates cooperative working relationships with co-workers, immediate supervisor, professional peers and the community-at-large.
9. Demonstrates the ability to work for and with others.
10. Maintains a high quality of work: accuracy, attention to detail, timeliness and organization.
11. Provides constructive feedback to peers, maintains collegial relationships with co-workers.
12. Explains the available agency services and community resources to clientele, prospective clientele and the general community.
13. Perform other tasks as directed by the program supervisor, executive director and his/her designee.

POSITION/PROGRAM SPECIFIC:

1. Review with supervisor on a regular basis the available volunteer pool in the community and the demand for volunteer assistance.
2. Work closely and maintain regular contact with referral sources.
3. Participate with other agencies and programs within the community to promote more efficient and effective social service programs.
4. Produce required reports (demographics, statistics, and narrative) on a monthly, quarterly and annual basis.
5. Conspicuously recruit volunteers among local churches, businesses, and the community-at-large.
6. Match volunteers with identified adults needing assistance with respite, light chore, transportation, friendly visiting, etc.
7. Initiate positive relationship with volunteer(s) and care receiver(s).
8. Recommend modifications in the program, when indicated, to meet client and community needs.
9. Communicate and service as a positive representative for the agency and/or program services and community resources to care receiver, family member(s), and general community.
10. Advocate for the needs of older and disabled adults within the social, service and local political network.
11. Make referrals to other programs and service providers as needed.
12. Complete and maintain required client paperwork as indicated by agency procedures, accreditation standards, licensing requirements and/or funding sources.
13. Keeps the program supervisor informed of critical issues affecting clients and program operations.
14. Accepts and utilizes feedback from the program supervisor in a timely manner.
15. Participates as appropriate, on committees, in seminars and workshops in program relevant areas within the agency and/or community.
16. Cooperates with other agencies and programs within the community to promote more efficient and more effective social service programs on the local levels.
17. Implements preparation of flyers, brochures, newsletters, etc. for program publicity and marketing purposes.
18. Provide back-up support for other program and agency staff on an as needed basis.
19. Identifies the training needs of volunteers, proceeds with a plan to address these needs.
20. Participate/provide regular supervision and evaluation for all program volunteers as described within agency policy.
21. Implement initial volunteer orientation and training sessions as well as an annual training plan for program volunteers.
22. Implement presentations to church and civic groups.

23. Assist with annual organization and distribution of food baskets for program recipients.

ACCOUNTABILITY:

Reports to the program supervisor. In his/her absence, will keep the designee fully informed of all critical issues.

Classification: This is a non-exempt, less than full time program assistant position.

VCP Coordinator

Date

Director of Senior Services

Date

Executive Director

Date

Volunteer Orientation Narrative

The purpose of the volunteer orientation is to go over key information to assist and explain to the volunteer what is expected from he/she. Along with this, it is an opportunity to highlight what the agency does in the community, and complete miscellaneous 'housekeeping' items including signatures and copies of information required. There are various topics that the volunteer may find useful within the packet to bring to the forefront what many clients may be dealing with. Lastly, it is an opportunity for the coordinator to get to know the volunteer, which will assist with matchups between volunteer and client to insure a good fit.

The orientation is typically the first time the coordinator is meeting the volunteer. At this time the application, criminal background check, and three references have already been completed. It has been our experience that 'one on one' orientations are the most beneficial for everyone involved because:

1. Scheduling of the orientation is difficult for more than one, and it is beneficial to orient a volunteer as soon as possible to keep them interested.
2. Volunteer more likely to ask questions and share what they are looking to do.
3. Allows coordinator to get to know volunteer.

Orientation checklist

- A.** This checklist includes the name of the volunteer and date, items to go over/complete, and signature and date of the volunteer and the Coordinator.
 1. It helps guide the coordinator during the orientation.
 2. Ensures that all signatures and pertinent information are received.
 3. As items are completed, a check mark is made next to it.
- B. Review of the Agency:**
 1. Describe the various departments in the agency
 2. Counseling, Adoption and Foster Care, Special Ministries, Substance Abuse Counseling and Prevention, and Senior Services. We hand out our brochures.
- C. Volunteer Application:** The volunteer application is reviewed, and a folder is prepared.
- D. Reference check x 3:** If the criminal background check is satisfactory, the coordinator checks the application for the three people named as references and starts the check. This may take some time, as people may not get back to you right away.
***Before the orientation, items D, E, F are completed.
- E. Criminal Background Check:** Coordinator does criminal background check. iChat State of Michigan is the source that we use.
- F. DHHS Child Abuse Registry Clearance Central Registry:**
 - a. This is required for our funding sources since our agency works with children.
 - b. Check is done at the local DHHS offices.
 - c. Volunteer stops in and fills out a form and gives a copy of their driver's license.
 - d. The results are sent to our agency and put into the volunteers file.

G. Volunteer Policy and Procedure Manual and acknowledgement: This manual goes over the specific policies and procedures of our agency including functions, purpose and philosophy, organizational structure, sources of financial support, volunteer categories, volunteer practices, grievance procedures, and code of ethics. The acknowledgement will be signed by volunteer and Volunteer Coordinator. For purposes of an orientation, these are the volunteer practices that we focus on.

1. Confidentiality:

- a. All clients are guaranteed the right to confidentiality, both legally and ethically.
- b. The agency has specific policies and procedures to ensure no identification of a client of the agency, and no release of client information without prior written consent.
- c. A volunteer who terminates for any reason continues to be prohibited from disclosing client information.
- d. Violations of client confidentiality will result in termination of the volunteer assignment and will include any reporting requirements to governmental agencies.

2. Volunteer-Client relationships:

- a. The psycho-social needs identified by clients often present the risk of excessive emotional dependency and loss of objective professional service relationships.
- B. Volunteers must avoid charges of interfering with or unduly influencing the personal and financial concerns of each client.

Undue influence and inappropriate behaviors affecting client personal and financial situations are to be avoided by:

- i. Never accept any personal monetary or non-incident gift from a client.
- ii. Never attempt to sell items to clients or solicit contributions from clients.
- iii. Never take direct or indirect control over a client's financial affairs (e.g. writing or cashing checks, handling cash, etc..).
- iv. Never accept the legal role of personal representative, patient advocate, power of attorney, or any other position of legal responsibility for, or on behalf of a client.
- v. Never attempt to influence or advise a client in legal matters (e.g. give advice on how, or to whom, the client should leave his/her assets upon death; recommend a separation or divorce from client's spouse, etc..).
- vi. Do not attempt to influence the beliefs or philosophy of a client, including, but not limited to religion or politics.
- vii. Always follow confidentiality standards.
- viii. Always provide clients with information regarding "Duty to Warn" and mandates to inform child/adult protective services regarding suspected abuse.

- ix. If volunteer should learn that he/she (or any other volunteer or employee) be referenced in any capacity in a client's last will and testament, power of attorney, patient advocate designation, deed, account designation, beneficiary designation or in any other legal or financial document, the volunteer must notify the Executive Director of this immediately, in writing.

H. Volunteer agreement and acknowledgement: Volunteers will read through the volunteer agreement and acknowledge it by signing. For purposes of the orientation, there are a few items that will be focused on:

1. **Dispensing of medication:** Volunteers DO NOT dispense any type of prescription or over the counter medications to participants.
 - a. Volunteers are not trained in pharmacology.
 - b. Volunteers do not have the knowledge or training to administer medications, injections or IV therapy.
 - c. The agency is unable to provide this service due to liability.

2. Emergency Policies and Procedures:

Non-Life-threatening emergency: The volunteer should always observe the care receiver's physical and mental condition. If any changes are observed, the volunteer shall report these to the Volunteer Coordinator or The Director of Senior Services.

- a. If an individual experiences an injury while services are in progress, the volunteer should:
 - i. Encourage the individual to seek medical attention.
 - ii. Help the person arrange for medical attention such as contacting a doctor or calling 911.
 - iii. Volunteer should call the Volunteer Coordinator as soon as possible regarding the situation and action taken.

Life Threatening Emergency:

- b. **When a care receiver has a life-threatening emergency and the spouse or primary caregiver are present:**
 - i. The spouse or primary caregiver is in charge of what to do.
 - ii. Volunteer, upon request, may lend advice or assistance with supportive care (calls ambulance, gets a blanket or pillow, etc...)
 - iii. Volunteer is NOT to accompany the ambulance to the hospital or go with the caregiver.
 - iv. Volunteer should call the Volunteer Coordinator as soon as possible regarding the situation and action taken.
 - v. After volunteer has notified the Volunteer Coordinator, he/she will need to complete an incident/accident form. These forms are in the volunteer training packet.
- c. **When the care receiver has a life-threatening emergency and there is no spouse or caregiver present:**

- i. Volunteer is to call 911 and report the nature of the emergency.
- ii. Volunteer is to try and make the individual as comfortable as possible
- iii. Volunteer is not to go to individual to the hospital.
- iv. Volunteer should call the Volunteer Coordinator as soon as possible regarding the situation and action taken.
- v. After volunteer has notified the volunteer coordinator, volunteer will need to fill out an incident/accident form. Incident/accident form is in the volunteer training packet.

3. Volunteer Caregiver Program Incident/Accident Report: This form is located in the volunteer packet.

- i. Volunteer to put date on the form (date used is that of the incident/accident).
- ii. Volunteer to put in Client name, location of the incident/accident. Include conditions that may have contributed to incident.
- iii. Volunteer is to describe action (s) taken as the volunteer.
- iv. Volunteer to include any additional comments where indicated.
- v. Volunteer to sign and date form where indicated.
- vi. Volunteer should have the signature and date of client, or witness, where indicated.
- vii. Please make sure the volunteer coordinator is notified as soon as possible and drop the form off at the office. Volunteer coordinator will assist you if you have questions.

I. Volunteer Job descriptions: At the orientation, the volunteer decides what type of volunteering they would like to participate in. They will receive, and sign, a copy of what they would like to do. They can do more than one if they would like. All volunteers are requested to attend volunteer trainings twice per year, usually in the spring and fall. The volunteer categories include:

1. In-Home Respite:

- a. Volunteer to provide companionship, supervision and a friendly visit for mentally or physically disable and/or frail elderly persons in the absence of a primary caregiver.
- b. The volunteer coordinator will attend the first meeting with the volunteer and client to ensure that both people are comfortable.
- c. Respite Care is usually provided for one and a half to four hours per week.
- d. The Coordinator will schedule the time trying to accommodate the needs of the client and available time of the volunteer.
- e. There is to be no smoking by the volunteer in the client's home.

2. Friendly Visitor:

- a. Volunteer to provide companionship, supervision and a friendly visit for mentally or physically disable and/or frail elderly persons in the absence of a primary caregiver.

- b. The volunteer coordinator will attend the first meeting with the volunteer and client to ensure that both people are comfortable.
- c. It is suggested that the volunteer meet with client a minimum of one hour a week.
- d. If circumstances are such that volunteer cannot see a client in person, a phone visit would be appropriate.
- e. Schedules can be made by the volunteer and the client.
- f. There is to be no smoking by the volunteer in the client's home.

3. Transportation:

- a. Volunteer to provide transportation for mentally or physically disabled and/or frail elderly persons in the absence of a primary caregiver.
- b. Transportation is usually provided when the volunteer is available.
- c. The volunteer coordinator will schedule the time, trying to accommodate the need of the client and the availability of the volunteer.
- d. The volunteer will telephone the person after they agree to drive, identify themselves, and confirm time (use *67 to keep your phone number private). Call again the day of the appointment as a reminder.
- e. The volunteer will call for the person at their door and identify themselves, the person should only need minimal assistance from the driver.
- f. The volunteer shall allow enough time so that the client isn't feeling rushed.
- g. The volunteer will identify themselves at the appointments they will be waiting at, letting front desk know they are a volunteer driver.
- h. If an appointment will be 1.5 hours or less, it is recommended that the volunteer wait. If longer than that, they can decide with the client for a specific pick up time.
- i. All clients and volunteers must wear a seatbelt.
- j. In the event the office is closed for reasons such as power outages/inclement weather, all transportations will be cancelled.
- k. The coordinator **DOES NOT** give a client the last name or phone number of the volunteer. If the volunteer chooses to give this information to the client, that would be ok, however, **ALL TRANSPORTATIONS MUST BE ARRANGED BY VOLUNTEER COORDINATOR. Any transportation done on off hours is not part of the volunteer program. There will be no transporting on holidays or when the agency is closed.**
- l. Volunteers are only transporting for clients Monday-Friday between 8:00 am and 4:30 pm.

- 4. **Office/Clerical:** The office volunteer will perform a variety of tasks depending on the needs of the department. This position helps to extend

the resources at the agency to better assist and direct the needs of the clients. Hours will be worked out between volunteer and coordinator. Duties could include:

- a. Making phone calls
- b. Filing
- c. Data entry
- d. Other duties as assigned

****All volunteers will report emergencies to their coordinator immediately after overseeing the welfare of the client. Volunteers are required to fill out an incident report located in their training file. The volunteer coordinator is available to assist in writing the report. Volunteers will not speak to media, relatives or friends of clients about an emergency. ****

J. Aging Network Handout/Informational Guide: A local list of resources, services and programs available for seniors and adults with disabilities in the counties that the Area Agency on Aging 1B serves.

K. Miscellaneous Informational Training Handouts. Examples are:

- a. Aging and Pulmonary Systems
- b. Body Mechanics
- c. Dementia and Alzheimer's Disease
- d. Boundaries and Listening Skills
- e. The Aging Process
- f. Communication and Alzheimer's

L. Community Resource List: This is a current list of the county's resources that a volunteer might find helpful to a client or individual that they encounter.

M. Signed Authorization to Release or Request Information and signature: As a recipient of Livingston County Catholic Charities Volunteer Caregiver Program You are authorizing LCCC, AAA1B, and referring agencies:

a. **To disclose identifying information for the purpose of:**

- i. Reporting demographic data to the National Aging Population Information System (NAPIS).
- ii. Notify emergency contacts in the event of an emergency.
- iii. Providing medical information to emergency caregivers (if needed).
- iv. Contacting referral sources indicated.
- v. Coordinating of treatment/services or in the event of disaster which may include verbal and written communication.
- vi. Notifying emergency operation centers (EOC's).

vii. By signing this release, I understand that my records have a privileged and confidential status. I am waiving that status for the purpose stated within this authorization.

N. Volunteer Monthly Record Procedure: (sheet in volunteer packet)

- a. First, put a check mark in the box that applies: Transportation, Friendly Visitor or Respite Service.
- b. Volunteer to put name as indicated on the form.
- c. Month/Year that is indicated on the form.
- d. Fill out the date, participant name, hours spent with, miles driven, comments/notes, and a participant's signature if available.
- e. If volunteer would like reimbursement for mileage, please indicate by checking yes or no as indicated.
- f. Volunteer will sign the monthly record to ensure services were provided.
- g. Volunteer may submit date, participants name, hours and mileage verbally before the end of each month, but the signed monthly record must be received by the volunteer coordinator no later than the 4th of each month.
- h. Supervisor or Coordinator will review record and provide signature approval.
- i. Volunteer monthly record will be recorded on to the monthly unit report.
- j. Volunteer monthly record will be filed in each individual participant file.

O. Secretary of State Drivers Record Check: If the volunteer will be doing any driving for clients, a Secretary of State Drivers Record Check is required. This can take a few weeks to get back.

P. Copy of Driver's License and Copy of Registration and Automobile Insurance:

1. On initial orientation with volunteer, volunteer will provide agency with current automobile registration, insurance and driver's license.
2. Volunteer name, automobile registration, insurance and driver's license will be logged into volunteer caregiver driving log.
3. Copies of the automobile registration, insurance and driver's license will be placed in volunteer file.
4. Each week, staff/volunteer will review volunteer caregiver driving log to make notes to contact volunteer on what updated information needs to be collected in an appropriate time frame.
5. Volunteers will be contacted by email, text or phone regarding items and expiration dates due, and asked to submit updated items before expiration dates.
6. When the current automobile registration, insurance and driver's license are received, the new information will be logged into volunteer caregiver driving log and will be placed in the volunteer file.

Q. Automobile Waiver: This form needs to be signed and dated and will be put into the volunteer's file

1. The volunteer agrees to keep a minimum \$100,000/\$300,000 in automobile liability insurance.

2. Valid and current driver's license.
3. Agrees to keep automobile up to date on maintenance issues to keep automobile safe for clients.
4. Agrees to forward to the volunteer coordinator any updated insurance certificates/coverages, current automobile registration, copy of renewed driver's license for volunteers file.

R. Photo Taken: A photograph is taken of the volunteer to be used to make an agency badge. Only the first name is used, this keeps the personal identity of the volunteer private. It is suggested that all volunteers wear their agency badge when volunteering

Volunteer Caregiver Coordinator Orientation

1. Funding Sources
2. Description of Services
3. Volunteers Process
 - a. Recruitment
 - b. Screening
 - c. Orientation
 - d. Schedule
 - e. Evaluations
 - f. Training
 - g. Volunteer Files
4. Participants Process
 - a. Intake Assessment
 - b. Service Plans
 - c. Quarterly reports
 - d. Donations
 - e. Annual Intakes
 - f. Surveys
 - g. Participant Files
5. Reporting
 - a. Monthly Excel Spreadsheet
 - b. AAA1B Monthly Budget
 - c. CareAdvantage system
 - i. Client/Caregiver Registration
 - ii. Service inputting
 - d. Quarterly Reports
6. Resource Advocacy (Community Liaison)
 - a. Definition
 - b. Resources
 - c. Reporting



Volunteer Caregiver Program Orientation Checklist

Name: _____

Date: _____

How did you hear about us: _____

- _____ Review Of What Our Agency Does
- _____ Volunteer Application
- _____ Reference Checks x3
- _____ Criminal Background Check
- _____ DHHS Child Abuse Registry Clearance Central Registry
- _____ LCCC Volunteer Policy and Procedure Manual
- _____ LCCC Volunteer Agreement with Incident/Accident Report Training
- _____ Signed LCCC Volunteer Agreement Acknowledgement of Receipt
- _____ Signed Volunteer Job Description
 - _____ In-Home Respite
 - _____ Friendly Visitor
 - _____ Transportation
 - _____ Office/Clerical
 - _____ Telephone Reassurance
- _____ Aging Network Handout and Explanation of Funding Sources
- _____ Aging and Pulmonary System-Training
- _____ Body Mechanics-Training
- _____ Dementia and Alzheimer's Disease-Training
- _____ Boundaries and Listening Skills-Training
- _____ The Aging Process-Training
- _____ Communication and Alzheimer's-Training
- _____ Community Resources-Training
- _____ Signed Consent Form
- _____ Volunteer Monthly Records-Training
- _____ Secretary State Drivers Record Check (done after orientation)
- _____ Copy of Driver's License
- _____ Copy of Automobile Insurance & Registration
- _____ Signed Copy of Automobile Waiver
- _____ Photo Taken

Program Coordinator Signature

Date

Volunteer Signature

Date



LIVINGSTON COUNTY
**CATHOLIC
CHARITIES**
HELPING LIVES GROW

**VOLUNTEER
POLICY AND
PROCEDURE MANUAL**

Approved by the Board of Directors: March 18, 2013
Revised: Summer 2017

FORWARD and SIGNATURE PAGE

This Volunteer Policy and Procedure Manual is not a contract of employment, nor is it a guarantee to serve in the role of volunteer. Nothing contained in this manual or in any other statement of agency policy, including statements made in the course of orientation, training or performance evaluations, should be taken as constituting an expressed or implied promise of employment. Employment is a separate relationship with Livingston County Catholic Charities (LCCC) and, while there are commonalities between the employment and volunteer relationships, these are distinctly separate.

The Board of Directors is committed to maintaining compliance with federal and state laws, contracting, licensing and accreditation requirements. To accomplish this objective, the agency will maintain the necessary flexibility and reserves the right to revise the policies and procedures described in this handbook at any time the Board determines such a change is desirable or necessary. Volunteers will be provided a written copy of all changes.

All matters covered throughout these policies apply to all volunteers, whether providing direct services to clients or non-client related activities.

Volunteer Signature

Date

Program Director/Volunteer Coordinator Signature

Date

TABLE OF CONTENTS

<u>Subject</u>	<u>Page</u>
Forward and Signature Page	2
Table of Contents	3
I. Functions	4
II. Purpose and Philosophy	4
III. Organizational Structure	4
IV. Sources of Financial Support	5
V. Volunteer Categories	5
VI. Employment and Volunteer Practices	5
A. Equal Opportunity	5
B. Volunteer Rights and Responsibilities	6
C. Sexual Harassment Policy	6
D. Safety and Health	7
E. Substance Use & Abuse	7
F. Recruitment Procedure	8
G. Conflict of Interest	8
H. Acceptance as a Volunteer	8
I. Confidentiality	9
J. Volunteer – Client Relationship	9
K. Orientation	10
L. Attendance Record	10
M. Reporting Absence	11
N. Notification of Agency Closure	11
O. Meal and Rest Periods	11
P. Volunteer Personnel Record	11
Q. Evaluation	11
R. Work Schedule	12
S. Volunteer Training and Meetings	12
T. Skill Development	12
U. Liability Insurance	13
V. Termination	13
VII. Grievance Procedures	13
Catholic Charities USA – Code of Ethics	15

VOLUNTEER POLICIES AND PROCEDURES

I. FUNCTIONS

Livingston County Catholic Charities (LCCC) is a human service agency providing social services to individuals and families. The agency's programs presently include: Outpatient Mental Health, Substance Abuse Treatment and Case Management, Substance Abuse Prevention, Child Welfare (Foster Family Care and Adoption), Be Our Guest Adult Day and two complementary senior outreach programs: Resource Advocacy and Volunteer Caregiver Program. The agency also provides Information and Referral services and works directly with the Catholic Parishes of Livingston County through the Parish Ministry services. LCCC is accredited by the Council on Accreditation, is licensed by the State of Michigan as a Child Placing Agency (Foster Care and Adoption) and to provide Substance Abuse Prevention and Outpatient Treatment, is funded by the Livingston County United Way and is a member of Catholic Charities of Michigan.

LCCC is active in community networking, partnering, and planning. Whenever possible, the agency participates in diocesan and county programs concerning mental health, family life, and other human service concerns.

II. PURPOSE AND PHILOSOPHY

LCCC MISSION STATEMENT: "The mission of Livingston County Catholic Charities is the work of the Catholic Church, to share the love of Christ by performing the corporal and spiritual works of mercy."

LCCC VISION STATEMENT: Livingston County Catholic Charities aims to provide quality human services to Livingston County residents regardless of race, color, citizenship status, national origin, ancestry, gender, sexual orientation, gender identity, age, religion, creed, physical or mental disability, marital status, veteran status, political affiliation, genetic information, or any other factor protected by law.

The agency is a manifestation of the Christian responsibility to meet human and spiritual needs. We are dedicated to the belief that people have spiritual, physical, social, and psychological needs. We attempt to meet those needs through casework, group work, community organization, education, advocacy and collaboration. Employees and volunteers are expected to serve the community with integrity, compassion and respect for the dignity and worth of human beings.

III. ORGANIZATIONAL STRUCTURE

LCCC is under the auspices of the Diocese of Lansing and the Diocesan Department of Catholic Charities. It is governed by a Board of Directors, which is accountable to the Bishop of Lansing. The organization and functions of the Board

of Directors are outlined in the Agency By-laws. The Executive Director cooperates with the Board in formulating and implementing policies and services.

IV. SOURCES OF FINANCIAL SUPPORT

The agency receives financial support from the Diocesan Services Appeal, Livingston County United Way, Area Aging on Aging 1-B, Community Mental Health Partnership of Southeast Michigan, local parish support, fundraising, client and third party fees, specific program funding from federal, state and county grants, foundation grants, the Loaves & Fish Annual Appeal and other contributions.

V. VOLUNTEER CATEGORIES

DIRECT SERVICE: Those volunteers who directly interact with the clients served by the agency's programs. In general, direct service volunteers make a commitment to work within a specific agency program for a minimum period of time, frequently for one year.

Each volunteer with direct client service responsibilities will be provided a Position Description. This Position Description will describe the overall scope of activity and responsibility, along with supervision and reporting requirements.

NON-DIRECT SERVICE: Those volunteers providing a service to the agency that does not bring them into direct contact with clients. Volunteers not working directly with clients may volunteer for a one time only project or may be involved with the agency over a much longer period of time.

All volunteers are to send reporting forms to the assigned LCCC coworker on a monthly basis or as otherwise indicated. The reporting form is provided by the Volunteer Coordinator and supports our ability to document all volunteer activity. This allows the designated program staff member(s) to complete reports for our funding sources. In the event this does not happen the assigned staff member will call the volunteer to get this information over the phone and record it on the proper form.

VI. VOLUNTEER PRACTICES

A. EQUAL OPPORTUNITY

The agency believes that all persons are entitled to equal employment opportunities and does not discriminate against its employees, applicants for employment, or volunteers regardless of race, color, citizenship status, national origin, ancestry, gender, sexual orientation, gender identity, age, religion, creed,

physical or mental disability, marital status, veteran status, political affiliation, genetic information, or any other factor protected by law.

B. VOLUNTEER RIGHTS AND RESPONSIBILITIES

LCCC recognizes the right of volunteers as private citizens to engage in social, political and religious activities, provided that the activities do not impede professional performance, and clearly distinguish in public between statements and actions as an individual and as a representative of the agency. Volunteers are expected to abide by the principles of the Diocese of Lansing Code of Ethics for the Catholic Charities organizations (Addendum A) while serving in an agency capacity.

C. HARASSMENT POLICY

It is the policy of LCCC that employees and volunteers are responsible for assuring that the workplace is free from all forms of harassment, including sexual, verbal, physical or bullying. The agency wishes to avoid any action or conduct which would be construed as sexual harassment including unwelcome sexual advances, requests for sexual acts or favors, or other verbal/physical conduct of an offensive nature. Additionally, the agency wishes to avoid other actions or conduct, whether verbal or physical, that could be perceived as threatening, disrespectful or bullying.

Any employee or volunteer who has a complaint of harassment at work by anyone, including supervisors, coworkers, volunteers, clients or visitors must bring the problem to the attention of responsible personnel. If the complaint involves the immediate supervisor, the employee or volunteer may report the incident to any other member of the agency's Administrative Team. All complaints of sexual harassment are to be promptly handled in a confidential and private manner. The privacy of the parties involved will be kept strictly confidential. The agency will retain confidential documentation of all allegations and investigations, and take appropriate corrective action, including disciplinary measures as justified to remedy violations of this policy. All allegations and investigations will be documented onto an Incident Report form.

While all employees and volunteers should be aware that incidents of harassment in the workplace are not to be tolerated, and all incidents should be reported, they should also understand that an accusation of harassment, even if unfounded, can have a detrimental effect on the employee or volunteer being accused.

D. SAFETY AND HEALTH

Every effort is made to provide safe working conditions for our employees and volunteers. The agency observes required safety laws. No one will be required to work in any unsafe manner. Employees and volunteers are requested to point out potential hazards and do everything reasonable to ensure a safe working environment. For those employees and volunteers using their personal automobiles in the performance of their responsibilities, the expectation for safe working conditions will also include the automobile. All employees, contractors and volunteers are expected to follow the Universal Precautions procedures as outlined in the Agency Procedures Manual.

The possession of a firearm or other weapon on agency premises (including automobile, client home or other off-site locations during the scheduled work day) is strictly prohibited.

Accidents: If any accident or injury occurs during the volunteer role, no matter how slight, report it immediately to the Volunteer Coordinator, the Director of Senior Services, another supervisor or the Executive Director. In the event of a medical or legal concern, the first contact should be made to "911" emergency dispatch and the appropriate LCCC personnel should be the second contact.

First-Aid: There are standard limited kinds of first-aid supplies available in the first aid box located in the storage area of each LCCC building. There is a first aid handbook available in the staff rest room. Do not give medications to clients. If a first aid situation exists and you are not certain how to handle it, ask someone in the office to call for help immediately. Bags containing items to facilitate Universal Precautions are available at the agency. These may be requested from the Volunteer Coordinator or the Office Manager.

General Emergencies: Livingston County is on the "911" system for all emergency situations. Employees and volunteers working in the office should familiarize themselves with the office telephone system for efficiency of access in an emergency. Fire safety and break-in procedures will be made available to all new employees at time of orientation.

E. SUBSTANCE USE AND ABUSE

The use of alcohol and/or illegal drugs during working hours by employees and volunteers is prohibited. This prohibition includes medical marijuana, narcotic pain relievers and/or any substance, whether legal or illegal that can impact the employee or volunteer's ability to perform their assigned responsibilities. An employee or volunteer who violates this prohibition will be subject to disciplinary action or termination, depending on the circumstance. A volunteer who is prescribed a medication that may impact their ability to complete their assigned

responsibilities should immediately contact the Volunteer Coordinator or the Director of Senior Services.

The use of tobacco products on the agency/client premises is prohibited at all times.

LCCC supports the assistance of an employee or volunteer who has developed an alcohol or drug abuse or dependency problem. A volunteer using alcohol and/or drugs of any kind to the extent that it interferes with their assigned activities will be requested to discontinue the volunteer experience until this is no longer a concern. Volunteers will be provided with possible resources for assessment and/or treatment.

F. RECRUITMENT PROCEDURE

Volunteers are recruited through word of mouth from family members or other volunteers, through local churches (bulletins, direct pulpit appeal), local media (shoppers guide, cable, radio, and newspapers), the United Way and LCCC websites and through the community at large.

G. CONFLICT OF INTEREST

It is expected that volunteers come to LCCC with a variety of current interests and activities (employment, social, recreational, religious, political). LCCC accepts and encourages these interests, with the understanding:

1. That these activities must not be in philosophical conflict to the agency's goals and mission;
2. That the activities not interfere with the volunteer's scheduled commitment with LCCC;
3. That the agency's client base may not be channeled to one's private business or employment.

LCCC is committed to upholding high ethical standards for Board members, employees and volunteers in all agency operations. For this purpose, the Board has adopted the Diocese of Lansing – Catholic Charities Code of Ethics (Addendum A) to guide agency operations.

H. ACCEPTANCE AS A VOLUNTEER

The acceptance of the individual as a volunteer is confirmed in writing by the Volunteer Coordinator, the Director of Senior Services or the Executive Director. The acceptance letter will describe the volunteer activities, beginning date of the commitment, and any special conditions related to the position. A Volunteer

Agreement also is completed, signed, and filed in the volunteer's file at the time of offer and acceptance. This form includes:

- Acknowledgment of receipt of the Agency Volunteer Policy and Procedure Manual;
- Statement of agreement to terms of volunteer position; and,
- Documentation of Volunteer Caregiver Orientation.

Prior to the formal offer of volunteer, each candidate provides a completed volunteer application and supplies 3 references, only one of which can be related by blood or marriage. Each reference is contacted via telephone and the verbal input from the reference is recorded onto the Reference Verification form. Three reference contacts must be recorded for all new volunteers. Each new volunteer also is required to complete a DHHS Central Registry form, Secretary of State Drivers Record Check and a Law Enforcement background check release form so that a required criminal background check can be requested.

I. CONFIDENTIALITY

LCCC clients are guaranteed the right to confidentiality, both legally and ethically. The agency has established policies and procedures to ensure no identification of a person as a client of the agency and no release of client information without written consent. Employees and volunteers of LCCC who engage in or have access to the collection, handling or dissemination of client information are required to sign a statement that they have been informed of their responsibility to protect client confidentiality, and the consequences for violation of this trust. An employee or volunteer who terminates for any reason continues to be prohibited from disclosing client information. New employees and volunteers will be given specific confidentiality policies and procedures according to their position at the time of the new hire or initial orientation. Violations of client confidentiality will result in the termination of the volunteer assignment and will include any reporting requirements to governmental entities and/or the applicable purchasers of service.

J. VOLUNTEER – CLIENT RELATIONSHIPS:

LCCC employees and volunteers provide a variety of services to many members of the community. Trust is an essential quality of the agency/client relationship. To maintain this trust, each client will be treated with the utmost dignity, caring and respect in every person-to-person contact with LCCC including face-to-face, telephone, other electronic communication, written documents and community meetings.

The psycho-social needs identified by clients often present the risk of excessive emotional dependency and loss of objective professional service relationships.

LCCC employees and volunteers must avoid charges of interfering with or unduly influencing the personal and financial concerns of each client.

Undue influence and inappropriate behaviors affecting client personal and financial situations are to be avoided by:

1. Never accept any personal monetary or non-incident gift from a client.
2. Never attempt to sell items to clients or solicit contributions from clients.
3. Never take direct or indirect control over a client's financial affairs (e.g. writing or cashing checks, handling cash, etc.).
4. Never accept the legal role of personal representative, patient advocate, power of attorney, or any other position of legal responsibility for, or on behalf of, a client.
5. Never attempt to influence or advise a client in legal matters (e.g. give advice on how, or to whom, the client should leave his or her assets upon death; recommend a separation or divorce from clients, spouse, etc.).
6. Do not attempt to influence the beliefs or philosophy of a client, including, but not limited to religion or politics.
7. Always follow LCCC confidentiality standards.
8. Always provide clients with information regarding "Duty to Warn" and mandates to inform child/adult protective services regarding suspected abuse.

Further, if an employee or volunteer should learn that he or she (or any other LCCC employee or volunteer) has at any time been referenced in any capacity in a client's last will and testament, power of attorney, patient advocate designation, deed, account designation, beneficiary designation, or in any other legal or financial document, the employee or volunteer must notify the Executive Director of this immediately, in writing.

K. ORIENTATION

The Volunteer Policy and Procedure Manual will be given to each new volunteer at, or prior to, the initial Orientation/Training session. The Orientation/Training session will occur prior to a Direct Service Volunteer being matched with an agency client. The Volunteer Coordinator will acquaint each new volunteer with policies, organizational structure, functions, procedures, and specific assignments.

L. ATTENDANCE RECORD

Each volunteer will complete a time/activity log and turn it in to his or her supervisor by the due date. In general, time logs are submitted monthly. When no time/activity log is submitted, a program staff member will contact the volunteer and verify and document the hours of service.

M. REPORTING ABSENCE

Volunteers who will be absent due to illness or other unforeseen circumstance will call the office as soon as possible to inform his/her supervisor and arrange for scheduled appointments to be covered by another volunteer, a staff member or canceled if necessary. Excessive absenteeism may be cause for discontinuing the volunteer status.

N. NOTIFICATION OF AGENCY CLOSURE

In the event it is necessary to close the agency due to weather conditions, natural disaster, or for some other reason, the decision will be made by the Executive Director. If the Executive Director is not available, the designated administrative staff member will assume the responsibility. Employees, volunteers, and clients will be notified by telephone as soon as possible.

Volunteers that feel that they should not drive or otherwise conduct their volunteer commitment due to adverse weather conditions should use their own best judgment. If the agency remains open, the volunteer should contact the Volunteer Coordinator or the Director of Senior Services and inform him/her of the decision in time to allow for other arrangements to be made.

O. MEAL AND REST PERIODS

Volunteers may schedule meal or break periods as it may be indicated, but should avoid any disruption to the assigned activity.

P. VOLUNTEER PERSONNEL RECORDS

A volunteer/personnel file is maintained for each volunteer, and may be accessed by the volunteer upon request. A volunteer is permitted, in the presence of the program director, to review and make additions to information in his/her personnel file. Personnel files are kept confidential, and information released only upon written request of the volunteer.

Q. EVALUATION

An evaluation is a mutual, continuous process including regular supervisory meetings and annual written evaluations. The annual evaluation includes a scheduled meeting between the immediate supervisor and the volunteer to

discuss and document the volunteer's growth and experiences. Supervision provides an opportunity on a regular basis for volunteers to assess their functioning and enhance opportunities for professional growth. Evaluation is the basis for continuing the volunteer relationship.

R. WORK SCHEDULE

The agency operates between 9:00a.m. and 9:00p.m., Monday through Thursday, and from 9:00a.m. until 5:00p.m. on Friday. The official hours of operation could change, but all volunteers, employees and clients will be notified of any changes. Volunteers are asked to provide services only during the hours that agency employees are available.

S. VOLUNTEER TRAINING AND MEETINGS

Meetings and training sessions are integral to effective communication and professional development. Mandatory meetings and training sessions for volunteers are held at the discretion of the Volunteer Coordinator, the Director of Senior Services and/or the Executive Director. On occasion, volunteers may be invited to training sessions that are provided to the professional employees. Attendance at these sessions is not mandatory, though participation may be encouraged.

Mandatory training sessions and meetings specific to volunteers will be held at various times throughout the year. When scheduled, volunteers will be notified in advance and full effort will be undertaken to provide the required information at a variety of dates and times.

T. SKILL DEVELOPMENT

The agency accepts the responsibility to provide a stimulating and progressive environment to assist volunteers and employees in their on-going growth and development of skills. This is accomplished through volunteer and staff meetings, in-service training, case conferences and provisions for distribution of professional literature.

All new volunteers are required to participate in an initial orientation. The content of the orientation sessions may vary, depending upon the planned volunteer activity, but at a minimum will include:

- a. Volunteer Policies and Procedures.
- b. Volunteer Position Description.
- c. Confidentiality.
- d. Health and Safety.

- e. Role of Supervision and Evaluation.
- f. The characteristics and needs of the clients to be served.
- g. Report forms.
- h. Ethics.
- i. Community Resources.

U. LIABILITY INSURANCE

The agency participates in the Protected Self Insurance Program of the Diocese of Lansing, which provides liability coverage for employees, board members, and volunteers when acting within the scope of agency duties. Employees and volunteers using their own cars for agency business must provide proof of auto insurance through their own insurance company. This automobile liability must be at a minimum level of \$100,000 per occurrence and \$300,000 total. Proof of liability coverage is required at the time of initial hire and annually thereafter. Proof of the legal ability to drive (i.e. driver's licenses) is also required at the initial approval as a volunteer and annually thereafter. Any claims would be made to the volunteer's insurance carrier. If the agency is named in a lawsuit when an accident has caused injury to another, the volunteer's insurance is primary with the agency insurance secondary.

V. TERMINATION

Volunteers may terminate or discontinue the volunteer relationship with LCCC at any time. Volunteers with scheduled client activity are asked to provide the Volunteer Coordinator or Director of Senior Services with a minimum of one week notice in order that the scheduled client service is not disrupted.

The agency reserves the right to dismiss or terminate any volunteer, at any time during the volunteer status. The decision to dismiss a volunteer will only be made by the Director of Senior Services or by the Executive Director. The volunteer may request an explanation for the dismissal. Dismissal may occur for any reason, including the following:

- a. Unsatisfactory job performance.
- b. Violation of agency policy or procedure.
- c. Lack of need for the volunteer interest or skill.

VII. GRIEVANCE PROCEDURES

Volunteers have the right to present a grievance to the agency, which consists of any matter of personal concern or dissatisfaction regarding his/her volunteer experience, as follows:

1. Any grievance will be discussed between the volunteer and the Volunteer Coordinator, and brought by the Volunteer Coordinator to the Director of Senior Services. Disposition of the grievance will be rendered by the Volunteer Coordinator in writing within five business days.
2. Failing resolution at Step One, the volunteer may submit his/her grievance in writing within five business days to the Director of Senior Services. A disposition will be rendered in writing within five business days.
3. Failing resolution at Step Two, the volunteer may submit his/her grievance in writing within five business days to the Executive Director. The Executive Director will act upon the grievance within ten business days. The Executive Director may elect to hold a meeting with the volunteer, the Director of Senior Services, Volunteer Coordinator, and others involved. The volunteer may have a witness or representative present in such instance. The decision rendered by the Executive Director will be final and will be given to the volunteer in writing stating the basis of the action.

CODE OF ETHICS

As a member organization of Catholic Charities USA, the member agency agrees that:

- 1.) All policies, programs and practices shall support the sanctity and dignity of human life from the moments of its conception until death, the value and integrity of the human person, the sacredness of the union of man and women in marriage, the value of people's social relationships to one another and to community and the central role of the family in human life and in society.
- 2.) It will reach out to help those who are suffering and shall adopt, in the allocation of limited resources, a preference for serving the neediest and the most vulnerable members of the community.
- 3.) It will acknowledge and support the right of all people to set and pursue their own life goals, within the limits of the common good, whereby they can freely enter into participation with others in order to fulfill their common human potential and contribute to the building of a more humane community.
- 4.) It will identify itself of the pluralistic community as a means by which the Church community seeks to fulfill its social mission. It will seek full support and participation of the people of God through representation on policymaking boards of directors and advisory committees, diocesan wide development of parish based social ministry and the involvement of the volunteers in the programs of the agency.
- 5.) It will collaborate with other individuals, groups, and social agencies on issues, policies, and programs which are compatible with a Christian value system, in the interest of achieving the fullest measure of charity and justice.
- 6.) In all its policies, procedures and practices, it will be faithful to biblical values, the social teaching of the Church, and relevant sections of the code of Canon Law.
- 7.) It will function faithfully within the mission and structures of the diocese with proper respect for the role of the diocesan bishop.
- 8.) It will assure conformity with relevant civil law in its governance, and at the same time it will hold itself free to seek peacefully to change oppressive civil laws.
- 9.) It will seek to realize in action the virtues of charity and justice in all relationships with staff, volunteers, the people served and the larger community.
- 10.) It will recognize confidentiality as a living principle within the agency and establish policies and procedures to assure protection of the privacy of the relationship established with its clients and other relevant bodies.
- 11.) It will hold itself fully, consistently, and publicly accountable for its programs and fiscal operations it meets those standards of quality in its performance that have been established for the field of social services, through accreditation and licensing as appropriate.
- 12.) It will support the advocate for those freedoms and structures in society that contribute to pluralism in social welfare and cooperation between public and voluntary sectors.
- 13.) It will subscribe to and advocate for the principle of subsidiarity, with its concerns to leave the highest degree of freedom to the individual that is consonant with the common good, to recognize the family as the primary.

VOLUNTEER CAREGIVER Program Policies and Procedures

The **Volunteer Caregiver Program (VCP)** is a volunteer recruitment and coordination program assisting older and disabled adults through a variety of volunteer-provided direct services. The VCP recruits and coordinates an internal volunteer corps, and also assists area churches in their recruitment and volunteer training efforts. Workshops and support groups are offered through the VCP to provide support to caregivers, training for volunteers, and increased awareness to the community of older adult issues.

The VCP staff members assess client needs and determine whether volunteer services can help with those needs. The VCP serves disabled adults as well as older adults. Those older and disabled adults seeking services and having needs that are outside of the scope of the program are referred to other local organizations for the more in depth services that might be required. The assessment and referral available through the Resource Advocacy Program will often be utilized.

The VCP Volunteers provide services such as:

- Friendly Visiting/companionship
- Transportation – medical appointments, grocery shopping and other errands
- Respite Services
- Telephone Reassurance

In general, the program staff members do not provide direct care service to the program clientele. Their role is to recruit, train, coordinate and supervise the volunteers. In turn, the volunteers provide the direct care services listed above. Additionally, program staff members place a priority of their efforts on volunteer recruitment, along with the coordination of volunteer efforts with area churches. VCP staff members provide ongoing caregiver support groups, educational community forums on older adult issues, regular newsletter mailings, and volunteer training. They also plan and implement volunteer appreciation efforts, in order to increase volunteer retention. The VCP Coordinator works with the United Way and other volunteer related groups to coordinate and maximize efforts.

CLIENT SERVICE PLANS – Volunteer Caregiver Program

An initial service plan is developed for all persons provided services by LCCC. The service plan follows the guidelines of Person-Centered Planning. This service plan is written, and signed by the client, within 30 days of the first contact. The service plan should address the requested services, along with any unmet health needs. The client is informed of available service options, both within the agency and from other service providers. Each option is presented towards assisting goal achievement. The assigned staff person seeks to assist the client towards identifying any unmet needs. Each client is assisted towards identifying available service options that may lead to goal attainment. These options may be available within the agency and/or through the

greater community. The potential benefits, risks and other alternatives to these options are reviewed during the planning process.

Within the Volunteer Caregiver programs, the service plan may be developed towards a focus on short term (less than 90 days) or on-going (longer than 90 days) service delivery. If the initial service plan is not developed for on-going service delivery, then it is to be updated within 90 days of the first contact or closed within 90 days of the first contact. In addition to the identified client needs, the service plan will also seek to identify other supports and any related risks.

All service plans are to be updated quarterly, unless the initial service plan was written and approved for on-going services. Quarterly updates are to be completed on the *Quarterly Update* form. Client cases opened for on-going services are to be reviewed and summarized on a quarterly basis. This update may be contained within the progress notes, but minimally will contain a summary of services provided within the quarter and a rationale/plan for continued service delivery.

VOLUNTEER REGISTRATION

The Volunteer Caregiver program conduct on-going volunteer recruitment through the media, churches, senior-serving organizations, service clubs and a variety of other avenues. When a potential volunteer contacts the agency, then the direct service staff provides program information, and descriptions for volunteer positions. The interested volunteer provides information about their reason for volunteering, their hobbies and skills, and their availability. If their interest in volunteering continues, the program staff conducts a verification of references, Secretary of State Drivers Record Check and a law enforcement background check. The potential volunteer is then provided an orientation and training for the role which includes a copy of the Volunteer Manual, and the Volunteer Position Description(s). A similar process is followed if the individual is interested in volunteering in one of the other senior programs.

The volunteer orientation and preparation process includes assisting the volunteer to identify the type of volunteering that they prefer (respite, transportation, friendly visitation, etc.), the needs and characteristics of the program clients, communication and relationship building, and health and safety.

VOLUNTEER MATCHING PROCEDURE

In addition to the assessment that is provided of each volunteer, each client requesting volunteer services is also assessed. The client's assessment includes the reason for the requested service, their living situation, health, caregiver information (if applicable) and any related additional information. The person requesting services is also provided with the procedures and limitations of the program and the volunteers.

The need(s) of the individual is then matched with the strengths, interests and limitations within the pool of available volunteers. This matching process will include the type of service requested, the frequency of service and any unique requirements or expectations. If the service to be provided is in-home respite, then a written summary is also provided. The matching process may include gender preferences (if any).

Each match is provided follow-up supervision to determine the continued appropriateness of the match, the continued need for the volunteer service, any potential problem areas and to assess for risk of volunteer "burnout". Both the client and the volunteer are provided contact information for the program direct service staff.

PROCEDURE FOR VOLUNTEER SUPERVISION

Each volunteer has a case file which minimally contains a record of contacts, a summary of volunteer activity, the volunteer and client relationship, and any concerns. The program staff provide regular follow-up for all on-going matches through both the client and the volunteer. For all on-going matches, a minimum of quarterly contact is maintained; though contact is initially more frequent. Volunteers are encouraged to participate in training opportunities and are provided an annual evaluation of their volunteer role.

REPORTING OF SUSPECTED ABUSE OR NEGLECT

In the event that senior services staff or volunteers suspect the abuse or neglect (imminent harm) of a program client, then the following steps will be undertaken. Imminent harm is defined as injury, threatened injury or potential injury of a client while in the care of another person. Injury may include physical, medical, emotional or financial injury.

1. Volunteers should immediately contact the program staff person. If the assigned staff person is not available, then they should request to speak with the Director of Senior Services, any agency supervisor or the Executive Director.
2. Program staff should immediately inform the Director of Senior Services or the Executive Director of their suspicion.
3. The Adult Protective Service staff at the State of Michigan-Department of Health & Human Services (DHHS) will be contacted within 24 hours.
4. In the event that Adult Protective Services cannot be reached, then consideration towards contacting local law enforcement will be given. This decision will always be made in consultation with the Director of Senior Services or the Executive Director.
5. The reason for the suspicion will be documented into the client file.

6. The client's emergency contact person (if not the suspected perpetrator) will be contacted.
7. To the fullest extent possible, follow-up with the assigned Adult Protective Services staff will occur.

ASSISTING CLIENTS WITH MONEY MANAGEMENT

In November, 1999, the AAA 1-B issued a Report from the Advisory Council Ad Hoc Committee on Daily Money Management. The study defined "daily money management" as a range of financial services including bill paying assistance, banking assistance, and budgeting/accounting. The findings concluded that there is a significant unmet need for these services by older adults who have physical limitations and do not have trusted family or friends to assist them. The study also found that because there are insufficient resources for this need, some home care and senior service organizations informally provide assistance to clients with bill paying, etc., but do not have formal policies for these activities. Recommendations from the study included AAA 1-B consolidation of available resources into a guide for distribution to provider agencies, and AAA 1-B development of appropriate guidelines for this service. The study findings are available to staff, and are kept in the Resource Advocacy AAA 1-B file.

Due to the lack of appropriate guidelines for providing daily money management assistance, and the liability concerns involved, the policy of LCCC is as follows:

- Staff and volunteers, when appropriate, may assist a client with sorting through bills and developing a system for paying bills. Staff and volunteers may not write checks for clients or accept cash to pay a bill on behalf of the client. When volunteers provide grocery shopping or errand service, receipts and change are provided to the client.
- Staff and volunteers may be asked to help a client sort through personal belongings to decide what should be disposed of. Staff and volunteers, when appropriate, may assist in the sorting through but may not dispose of or take away from the premises any of the belongings without a witness present.
- Staff and volunteers, when appropriate, may assist a client with locating telephone numbers and calling to clarify bills or balances, but may not make these calls without the presence of the client.
- Staff and volunteers, when appropriate and in the presence of the client, may assist a client with calling trusted friends or family to help with financial matters.

When a client is assessed as too confused or disoriented to make decisions about enlisting staff assistance with sorting through bills or making telephone calls, the worker may not provide this type of assistance. The worker in those cases may assist with

arrangements for someone who could be designated as the client's representative payee, or if needed refer for the assignment of a guardian or conservator. Employees of LCCC do not serve in a representative payee role.

Procedure for Automobile Registration, Car Insurance, and Driver's License in the Volunteer Caregiver Program

1. On initial orientation with volunteer for Volunteer Caregiver program, volunteers will provide agency with current automobile registration, and insurance along with Driver's License.
2. Volunteer name, automobile registration, insurance and Driver's License will be logged into Volunteer Caregiver Driving log.
3. Copies of the automobile registration, insurance and Driver's License will be placed in Volunteer file.
4. Each week, staff/volunteer will review Volunteer Caregiver Driving log to review dates for make contact to volunteers with expiration dates within the appropriate time frame.
5. Volunteers will be contacted by email/telephone regarding items and expiration dates and required to submit to agency before actual expiration date.
6. When current automobile registration, insurance and Driver's License are received, new expirations dates will be logged onto Volunteer Caregiver Driving log and will placed in volunteer file.

Volunteer Monthly Record Procedure

Livingston County Catholic Charities (LCCC) Volunteer Caregiver Program will complete a Volunteer Monthly Record for each participant which will include the following:

- Volunteer Name, month/year and service provided to participant.
- Date, participant name, hours and mileage of services provide.
- Participant signature is obtain if available.
- Volunteer signature is required to ensure services were provided.
- Volunteer will document if mileage reimbursement is required.
- Volunteers submit Volunteer Monthly Record form on a monthly basis to Volunteer Coordinator by the last Wednesday of each month.
- Volunteer may submit date, participant name, hours and mileage verbally before end of each month, but must submit completed Volunteer Monthly Record including volunteer signature by end of the month.

- LCCC supervisor/Volunteer Coordinator will review record and provide signature of approval.
 - Volunteer Monthly Record will be recorded on to the monthly unit report.
- Volunteer Monthly Record will be filed in each individual participant file.

Unit Tracking Procedure

Volunteer Caregiver Program will track units to include the following:

- Units Served
 - One hour of service is one unit. Unit can be documented in .25 increments as needed.
 - Volunteers documentation includes Volunteer Unit documentation will be completed by LCCC volunteers for each hour of direct participant services.
 - Unit documentation will be completed by LCCC volunteers on Volunteer Monthly Record form.
 - LCCC volunteers submit Volunteer Monthly Record form on a monthly basis.

- Service Coordination Units:
 - One hour of service is one unit. Unit can be documented in .25 increments as needed.
 - Service coordination units include time to arrange participant services specific to AAA1-B standards.
 - Service coordination units will include volunteer trainings AAA1-B requirements.
 - LCCC staff will record Service Coordination Units on a daily basis.
 - Service coordination units will be recorded by LCCC staff on LCCC Timesheet listed under IVCP – AAA.
 - Service coordination units volunteer training will be recorded on LCCC Volunteer Training Sign In Sheet at time of training.

Volunteer Caregiver Program Client Files

VCP Client files: In addition to the materials listed above, the client case files for those having received an in home assessment for volunteer services contain:

- Care Recipient Registration Form
- Caregiver Registration Form
- Service Plan
- Quarterly Report

VCP Volunteer files contain:

- Volunteer Application
- Criminal History/Driving Record Consent Form
- Police Criminal History
- Secretary of State Driver Record check
- DHS Central Registry form
- 3 Reference Verification forms
- Documentation that the following have been given to the volunteer
 - Volunteer Job Description(s)
 - Copy of Driver's License (if applicable)
 - Copy of Proof of Insurance (if applicable)
 - Automobile Waiver
 - Volunteer Policy and Procedure Manual Forward and Signature Page
 - Volunteer Agreement Acknowledgement
 - Training Certifications
 - Yearly Evaluations (if applicable)
 - Volunteer Monthly Report

VCP Volunteers are interviewed by the VCP Coordinator. In addition to the above handouts as applicable, VCP volunteers receive a Volunteer Policy and Procedure Manual along with the Volunteer Training.

Description of Services

The **Volunteer Caregiver Program (VCP)** is a volunteer recruitment and coordination program assisting older and disabled adults through a variety of volunteer-provided direct services. The VCP recruits and coordinates an internal volunteer corps, and also assists area churches in their recruitment and volunteer training efforts. Workshops and support groups are offered through the VCP to provide support to caregivers, training for volunteers, and increased awareness to the community of older adult issues.

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PROCEDURE FOR VOLUNTEER SUPERVISION

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- Documentation that the following have been given to the volunteer

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- Volunteer Monthly Report

VCP Volunteers are interviewed by the VCP Coordinator. In addition to the above handouts as applicable, VCP volunteers receive a Volunteer Policy and Procedure Manual along with the Volunteer Training.

PARTICIPANT PROCESS

Intake Assessment

- Caregiver Registration
- Participant Registration

The LCCC senior programs will complete all of the required contract/government reporting for each of the 4 programs areas: Resource Advocacy, Volunteer Caregiver, Prevention of Elder Abuse, Neglect and Exploitation and Adult Day Service. This reporting will include, but not be limited to, fiscal, programmatic and NAPIS; and, will include all funding sources.

All NAPIS forms must be filled out on new clients at the point of intake or admission and must be signed by the current caregiver for Volunteer Caregiver and Adult Day Services. If the caregiver resides out-of-state or out of the local area, then a verbal consent maybe documented into the file. All NAPIS forms will be completed annually and updated into the NAPIS reporting system

SERVICE PLANS

An initial service plan is developed for all persons provided services by LCCC. The service plan follows the guidelines of Person-Centered Planning. This service plan is written, and signed by the client, within 30 days of the first contact. The service plan should address the requested services, along with any unmet health needs. The client is informed of available service options, both within the agency and from other service providers. Each option is presented towards assisting goal achievement. The assigned staff person seeks to assist the client towards identifying any unmet needs. Each client is assisted towards identifying available service options that may lead to goal attainment. These options may be available within the agency and/or through the greater community. The potential benefits, risks and other alternatives to these options are reviewed during the planning process.

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All service plans are to be updated quarterly, unless the initial service plan was written and approved for on-going services. Quarterly updates are to be completed on the *Quarterly Update* form. Client cases opened for on-going services are to be reviewed and summarized on a quarterly basis. This update may be contained within the progress notes, but minimally will contain a summary of services provided within the quarter and a rationale/plan for continued service delivery. The Quarterly Review will be reviewed by the Director of Senior Services.

VCP Client files: In addition to the materials listed above, the client case files for those having received an in home assessment for volunteer services contain:

- Care Recipient Registration Form
- Caregiver Registration Form
- Service Plan
- Quarterly Report

Volunteer Caregiver Program
(A program of Livingston County Catholic Charities)

Incident/Accident Report

Date: _____

Client Name: _____

Location of Incident/Accident
(Include Conditions that May have Contributed to Accident)

Describe Action (s) Taken as the Volunteer

Additional Comments

Signature of Volunteer _____ Date: _____

Signature of Client or Witness: _____ Date: _____

(Please make sure Volunteer coordinator was notified, and form dropped off to office.)



LIVINGSTON COUNTY
CATHOLIC
CHARITIES
HELPING LIVES GROW

LIVINGSTON COUNTY CATHOLIC CHARITIES
220 E. Grand River, Suite 104, Howell, Michigan 48843
517-545-5944

**CONSENT FOR USE OF
PHOTOGRAPHS, VIDEOTAPES, OR OTHER IDENTIFIABLE INFORMATION**

Client Name _____ Client # _____

By my signature below, I agree to the use of:

____ Photograph

____ Videotape

____ Other Identifiable Information (specify) _____

for _____ publicity purposes or

_____ other purpose (specify) _____

This is a _____ single or _____ ongoing consent to use the above materials. If this is a single consent, specify the purpose for which the consent is given (i.e. newsletter, promotional display):

I understand that I may revoke this consent at any time in writing, though this action will not affect any use of the above materials prior to revoking consent.

Client confidentiality is protected by law unless written authorization is given.

Client Signature _____ Date _____

LCCC Worker Signature _____ Date _____

LIVINGSTON COUNTY CATHOLIC CHARITIES CONFIDENTIALITY POLICY & PROCEDURE

LCCC abides by all applicable laws of confidentiality protecting client rights (MCL5538-1764; MSA518.365(141)). All employees, volunteers, independent contractors, student interns or community service workers, having access to confidential client information are required to sign a Confidentiality Agreement upon their involvement with the Agency. Clients are made aware of their right to confidentiality of identity and records upon becoming a client of LCCC.

Confidentiality of Alcohol and Drug Abuse Patient Records:

The confidentiality of alcohol and drug abuse patient records maintained by this program is protected by Federal law and regulations. Generally, the program may not say to a person outside the program that a patient attends the program, or disclose any information identifying a patient as an alcohol or drug abuser unless:

- (1) The patient consents in writing;
- (2) The disclosure is allowed by a court order; or
- (3) The disclosure is made to medical personnel in a medical emergency or to qualified personnel for research, audit, or program evaluation.

Violation of the Federal law and regulations by a program is a crime. Suspected violations may be reported to appropriate authorities in accordance with Federal regulations.

Federal law and regulations do not protect any information about a crime committed by a patient either at the program or against any person who works for the program or about any threat to commit such a crime.

Federal laws and regulations do not protect any information about suspected child abuse or neglect from being reported under State law to appropriate State or local authorities.

(See 42 U.S.C. 290dd-3 and 42 U.S.C. 290ee-3 for Federal laws and 42 CFR part 2 for Federal regulations.)

(Approved by the Office of Management and Budget under control number 0930-0099)

Procedures to Protect Confidentiality of Client Records:

Information regarding a particular client may not be released without the written consent of the client. The client must complete and sign a Release of Information form containing the specific information to be released, to whom it may be released, for what purpose, and the time frame during which the release is valid. If no time frame is indicated, then the signed Release of Information is valid for one year from the date of the signature. The client may revoke a written consent at any time, with written notice.

When calling a client and reaching an answering machine: If there is a need to leave a message, the client must give permission for staff to leave the agency name on the message. For Counseling Program clients, this permission is granted or denied by a statement on the Fee Agreement Form that is checked and signed by the client. This permission should also be noted on the face sheet of the client's computer file. If not, it is appropriate to leave the name of the staff to call back, and the agency phone number, but not the name of the agency or the reason for the call. For all other clients, this permission is granted through the use of a separate form. **In order to prevent Caller ID from identifying the agency, staff must dial *67 before placing the call.**

Vulnerable clients: When there is question as to the client's ability to make an informed decision about signing a written release, or whether the information requested may be harmful to the client, the Program Supervisor should be consulted to make a determination. When necessary, arrangements should be made for a guardian to be appointed for any client determined to be unable to make an informed decision as this would also apply to treatment. In that case, the guardian would need to sign the consent for Release of Information.

Functionally illiterate clients: The direct service professional will verbally explain the ramifications of releasing any information and assist the client in completing the form.

Use of photographs, videotapes or other identifiable information of clients: A signed consent must be obtained for each specific occurrence or request. Full disclosure of the intended use of these materials must be made to the client at the time consent is obtained. Clients must be informed that they may refuse consent to taping or photographing, and may also revoke consent at any time prior to the use of the materials or subsequent use of the materials. (See sample Consent Form)

When time is a critical factor and an original signature cannot be obtained prior to the critical need for release of information: The client may give verbal consent by telephone or send a fax written consent provided that this action is followed up as soon as possible with an original signed Release form. In this instance the direct service professional must inform the client that documentation of fax or verbal consent will be entered into the client file, and a statement that the client agreed to complete and sign an original Release of Information form as soon as possible. Direct Service staff members must consult with their Program Supervisor or the Executive Director before releasing information in this manner.

Exceptions: The only exception to the requirement for a signed Release of Information is in the event of a client who is determined to be a danger to self or others, suspected abuse or neglect, court order, medical emergency, or external audit.

- Clients must be informed of the limitations of confidentiality. This is accomplished through the Client Rights and Responsibilities handout that is

provided to every client. When a confidentiality issue occurs, the assigned direct service staff member discusses the issue and limitations with the client.

Any staff member receiving a subpoena or court order must consult with the Program Supervisor or the Executive Director as to the appropriate action. The Executive Director may elect to seek legal consultation prior to responding to a subpoena or court order. In general, the agency must respond to a subpoena that has been issued by a Judge, but this does not automatically apply to those issued by attorneys. Criteria for entry of order: An order under this section may be entered only if the court determines that good cause exists. To make this determination the court must find that:

- (1) Other ways of obtaining the information are not available or would not be effective; and
- (2) The public interest and need for the disclosure outweigh the potential injury to the patient, the physician-patient relationship and the treatment services.

- All professional and paraprofessional staff members (including independent contractors) must abide by the laws of the State of Michigan concerning the reporting of suspected neglect or abuse (see MI FIA – 3200 reporting form and see Child Abuse reporting laws booklet).
- Senior services staff must abide by the State of Michigan laws (MI Public Act 519 of 1982) concerning the reporting of suspected elder neglect or abuse to the Adult Protective Services provided by FIA (see MI elder abuse reporting laws).
- In the case of a client serious threat to harm others, the staff member should consult with their Program Director or the Executive Director to determine whether the threatened party should be notified and law enforcement called. In the case of a client serious threat to commit suicide, the direct service staff should take immediate action to ensure the client's safety by contacting the police. Whenever in doubt, it is best to act on the side of safety and in the best interests of the client.
- External Auditors must complete and sign the Client Case Files Reviewed by an Outside Agency form, which states the purpose for the review and obligation to confidentiality.

Support staff or other employees answering telephones and receiving visitors must abide by client rights to confidentiality. This includes:

- Shielding confidential client information from the view of anyone who has not signed a Confidentiality Agreement with the Agency.
- Making sure that all confidential records are kept in locked files when leaving the office.

- Do not acknowledge to anyone calling or visiting that you know the person they are asking about is a client or is in session. A response to someone asking to speak to or leave a message for a client in session or in the waiting room would be: *“Because of our confidentiality policy, I am not able to tell you whether the person you are asking for is a client here or is present at this time, but I will be glad to take a message and deliver it if the person is here.”* If a child is calling for their parent, you may put the child on hold, interrupt the session and ask the parent to take the call by informing the child that you will check to see if the parent is at the office.
- Anyone calling for any reason about a client is not entitled to information, including the acknowledgment that the person is a client of the Agency, without the written consent of the client. This includes family members, school personnel, doctors, lawyers, or any other professional, regardless of the expressed concern for the client.

If someone calls to offer information or share concern about a client, an appropriate response would be: *“Because of our confidentiality policy, I am not able to tell you whether the person you are calling about is a client here, but I will be glad to take the information and pass it to one of our co-workers that may be able to determine if he/she is a client. If this person is not a client here, I will discard the information.”* Do not engage in a conversation about the caller’s concerns. Simply take a message with the information given.

Use of Email For Client Information:

Email transmissions are provided the same privacy and confidentiality protections that are provided to all other forms of communication (telephone, mail, record storage, social media, fax transmission).

Unique risks are inherent within email transmissions that are not existent or are less existent within other forms of communication. These additional risks include, but are not limited to, the following:

- Email can be sent to both intended and unintended recipients.
- The recipients of email can forward and/or alter messages without the consent of the original sender.
- Email messages can be mis-addressed.
- Email messages can be falsified.
- Deleted email messages can still exist and be reused or resent.
- Confidential email may be subject to the Freedom of Information Act.

For these reasons, the use of email to transmit client information can only occur within the circumstances described below.

Client information may only be transmitted to those sources that are paying for the client service. These sources may be a third party funding source (Blue Cross/Blue Shield, HMO or similar) or may be a governmental entity (WCHO, FIA, AAA 1-B).

- The client information to be transmitted must be limited to the information that is contractually required for client registration or payment.
- The client must be informed in advance of service delivery that electronic transmission will be used for this purpose.
- The client must provide written consent for electronic transmission to occur.
- Email transmission of client information may not be used for any other purpose or to any other source.

All email originating within LCCC must be identified as privileged and confidential.

Use of Fax Machines For Client Information:

Fax transmissions are provided the same privacy and confidentiality protections that are provided to all other forms of communication (telephone, mail, record storage, electronic (email) transmission).

Unique risks are inherent within fax transmissions that are not existent or are less existent within other forms of communication. These additional risks include, but are not limited to, the following:

- Fax can be sent to both intended and unintended recipients.
- Fax transmissions can be misdialed.
- Confidential faxes may be subject to the Freedom of Information Act.

For these reasons, the use of faxing to transmit client information can only occur within the circumstances described below.

Client information may only be transmitted to those sources for whom the client has provided approval in advance.

- The client information to be transmitted must be limited to the information that the client has expressly approved being shared and only to those sources identified within a signed Consent to Release Information.
- The recipient of the faxed information must be notified in advance of the information that is being faxed.
- The faxing of any and all client information must be identified as privileged and confidential.

Use of Cell Phones for Client Information:

LCCC maintains two cell phones specific to client communication after business hours. One cell phone is specific to the Substance Abuse Case Management program and the second is specific to the Child Welfare program. 24-hour availability is mandated by the State of Michigan for each of these services.

When program clients or foster parents are given the contact information for after hours cell phone access, they are also to be provided with information regarding risks.

Cell phone transmissions are provided the same privacy and confidentiality protections that are provided to all other forms of communication (fax, mail, record storage, electronic (email) transmission, social media).

Risks are inherent within cell phone transmissions and may include, but are not limited to, the following:

- *Cell phones can be misdialed to unintended recipients.*
- *Deleted text messages can still exist and be reused or resent.*
- *Confidential texts may be subject to the Freedom of Information Act.*
- *Text messages can be mis-addressed.*
- *Text messages can be falsified.*
- *Personal cell phones may be accessed by individuals who are not LCCC employees.*

For these reasons, the use of agency or personal cell phones to communicate with clients or to transmit client information can only occur within the following circumstances. Client information and/or communication may only be transmitted to those sources for whom the client has provided approval in advance. The client information to be transmitted must be limited to the information that the client has expressly approved being shared and only to those sources identified within a signed Consent to Release Information.

Other Electronic Media:

LCCC employees are expressly prohibited from communicating with or about clients through any other form of electronic media; this includes the agency website, agency or personal Facebook, twitter and any other form.

Individual clients or former clients may provide signed permission for a quote or photo to be shared in a public manner, but this will only occur with the individual's signed, dated and witnessed signature.

Employee Sanctions:

Violations of client confidentiality will result in formal agency discipline (Personnel Policy and Procedure Manual, Section IX – F) and will include any reporting requirements to governmental entities and/or the applicable purchasers of service.

Narrative for Video Orientation for Volunteers

The video orientation would be used when a potential volunteer is unable, or circumstances are such that an in-person orientation is not accessible. All content covered will be the same as an in-person orientation.

Reasons to use a video orientation would be for situations like:

1. Pandemics
2. Transportation issues
3. Illness
4. Location

The following are suggestions of the types of video conferencing applications that are available:

1. ZOOM
2. Facebook Video Chat
3. Duo
4. Facetime
5. Google Hangouts
6. Skype
7. Several others

Before the Orientation:

1. The Volunteer Coordinator will have done the same background checks ahead of time as with the in-person orientation.
2. With regard to the volunteer packet:
 - a. Volunteer can request that it be mailed to him/her.
 - b. Volunteer can stop by the agency office and pick it up.
 - c. Volunteer coordinator can email the entire packet to the volunteer.
3. All items requiring signatures can be mailed back, dropped off to the agency office, or emailed back to volunteer coordinator.
4. Volunteer will be required to send a copy of his/her driver license, auto insurance and registration to the volunteer coordinator before doing any face to face meetings with clients.
5. The volunteer will send a photograph of themselves so that coordinator can make an agency volunteer badge. Photo can be sent by email, or a hard copy sent to be scanned.



2020 E. Grand River, Suite 104
Howell, Michigan 48843

Volunteer Registration

PERSONAL INFORMATION

Date: _____

Last Name: _____ First Name: _____

Address: _____ City: _____ MI Zip: _____

Phone: (Home) _____ (Work) _____ E-mail _____

(Cell) _____ Best Time to Reach You: _____

Are you a Veteran? _____ Race: _____

Birthdate: ____/____/____ Gender: M F Marital Status: S M D W

Religious Affiliation: _____ Congregation: _____

HEALTH INFORMATION

Health Problems: _____

Are you currently taking any medications? If so, what? _____

Do you have any physical restrictions that might interfere with your ability to perform any duties as a respite volunteer? Y or N If yes, please explain: _____

Allergies (cigarette smoke, animals, etc.): _____

CULTURAL/ETHNIC CONCERNS: ___Has no bearing ___Has the following bearing: _____

EMERGENCY CONTACT:

1. Name: _____ Home Phone: _____

Address: _____ Work Phone: _____

City & Zip: _____ Cell Phone: _____

Relationship: _____

2. Name: _____ Home Phone: _____
Address: _____ Work Phone: _____
City & Zip: _____ Cell Phone: _____
Relationship: _____

EDUCATION

Highest Level Completed: _____ Field of Study: _____
Degrees: _____ Special Skills: _____

EMPLOYMENT

Are you currently employed? ___ No ___ Retired ___ Full Time ___ Part Time ___ Student

*If you are not currently employed, or if you are retired, please enter the information from the last position held.

Employer: _____ Position/Occupation: _____

Duties Performed: _____

Dates of Employment: _____

Previous work experience? _____

SKILLS/INTERESTS/HOBBIES:

___ Music ___ Crafts ___ Foreign Language ___ Teaching ___ Nursing ___ Computer

Other _____

VOLUNTEER EXPERIENCE/COMMUNITY AFFILIATION:

Agency/Organization	Position	Dates
_____	_____	_____
_____	_____	_____
_____	_____	_____

Please explain why you would like to become a volunteer: _____

Who referred you to (or how did you hear of) the program: _____

Available Days: _____ Available Times: _____

***Please indicate ALL times you are available (fill in blanks with specific hours):**This does not commit you to all of the hours you list; it will let us know what times are possible.

	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday
Preferred Availability							
Willing to be Available							

How often are you available? _____ days per _____ week/month

How far are you willing to drive? _____

PERSONAL REFERENCES (Do not list relatives):

1. Name: _____ Phone: _____
Address: _____ Relationship: _____
City, State, Zip: _____ Years Known: _____
2. Name: _____ Phone: _____
Address: _____ Relationship: _____
City, State, Zip: _____ Years Known: _____
3. Name: _____ Phone: _____
Address: _____ Relationship: _____
City, State, Zip: _____ Years Known: _____

Volunteer Signature

Date

I authorize the (county and site name) Volunteer Caregivers program to investigate all statements in my registration and/or application including but not limited to, all criminal history, and to contact my references and/or former employers and other sources to gain information and/or records concerning me.

I authorize these police agencies, past employers, my references and other sources to release this information and/or records without liability for damage incurred in giving it, and I waive any written notice of the release of such records that may be required by state or federal law.

I specifically release from any liability, any current or former employer, its agents, representatives, employees, officers or directors for giving such information and/or records to the (County and site name) program.

I also understand and agree to hold (County and site name) harmless and without liability for investigating and receiving records or information from any and all sources pursuant to this authorization.

AUTHORIZATION FOR BACKGROUND CHECK

As a prospective volunteer of (site name) I understand that it is this program's policy to secure conviction criminal history and driving record information as part of their screening process using the information provided below.

NAME: _____

Last

First

Middle

MAIDEN NAME AND/OR NAMES PREVIOUSLY USED _____

GENDER M F BIRTH DATE _____ RACE _____

Have you ever been convicted of a felony? Yes No

If yes, please explain: _____

Have you ever been convicted of a misdemeanor? Yes No

If yes, please explain: _____

I UNDERSTAND THAT THE ABOVE INFORMATION IS REQUIRED BY THE CENTRAL RECORDS DIVISION OF THE MICHIGAN STATE POLICE, LANSING, MICHIGAN.

I, _____ AUTHORIZE LIVINGSTON COUNTY CATHOLIC CHARITIES TO USE THE ABOVE INFORMATION PERTAINING TO ANY CHARGES AND/OR CONVICTIONS I MAY HAVE HAD FOR FEDERAL AND STATE CRIMINAL LAW VIOLATIONS AND DRIVING VIOLATIONS. THIS INFORMATION WILL INCLUDE, BUT NOT BE LIMITED TO, ALLEGATIONS AND CONVICTIONS FOR CRIMES COMMITTED UPON MINORS AND ELDERS AND WILL BE GATHERED FROM ANY LAW-ENFORCEMENT AGENCY OF THIS STATE OR ANY STATE OR FEDERAL GOVERNMENT, TO THE EXTENT PERMITTED BY STATE AND FEDERAL LAW.

Signature of prospective volunteer

Date

(for office use only) Date of check: _____ Checked by: _____

Satisfactory _____ Unsatisfactory (reason) _____

Livingston County Catholic Charities does not discriminate against any individual or group because of race, sex, religion, age, national origin, color, marital status, height, weight, political beliefs, or ex-offense.



Volunteer Caregiver Program **Volunteer Reference Check**

1. In what capacity do you know this applicant?
2. How long have you known applicant?
3. Please comment on this applicant's strengths
4. Please comment on this applicant's characteristics. e.g. reliability, commitment, judgement, honesty, integrity, etc.
5. Please comment on whether this applicant embraces diversity. e.g. cultural, physical, social, age related, cognitive
6. Do you have any reservations about recommending this applicant for volunteer services?
7. Describe the knowledge and skills that (potential volunteer's name) possesses that would make him/her qualified and suitable for the volunteer position described?

Information taken by: _____

Date: _____

“Livingston County Catholic Charities”

CRIMINAL HISTORY/DRIVING RECORD CONSENT FORM

As a, Volunteer, that provides services through Livingston County Catholic Charities, I understand that it is this agency’s policy to secure conviction criminal history and driving record information as part of their screening process using the information provided below.

NAME:

Last	First	Middle
------	-------	--------

Maiden name/names previously used? _____

BIRTHDATE:	RACE:	SEX:
_____	_____	_____

DRIVER’S LICENSE NUMBER:	STATE:
_____	_____

I UNDERSTAND THAT THE ABOVE INFORMATION IS REQUIRED BY THE CENTRAL RECORDS DIVISION OF THE MICHIGAN STATE POLICE, LANSING, MICHIGAN. I AUTHORIZE LIVINGSTON COUNTY CATHOLIC CHARITIES TO UTILIZE THE ABOVE INFORMATION FOR THE SOLE PURPOSE OF OBTAINING A CONVICTION ONLY CRIMINAL HISTORY FILE SEARCH AND DRIVING RECORD FROM THE MICHIGAN SECRETARY OF STATE.

Volunteer Signature

Date



Livingston County Catholic Charities

2020 E. Grand River, Suite 104-Howell, MI 48843 (517) 545-5944 Fax:
(517) 545-7390

VOLUNTEER/EMPLOYEE DRIVER INFORMATION SHEET

I. Driver: _____ Driver's License #: _____

Name: _____ Date of Birth: _____

Address: _____ Soc. Sec. No.: _____

II. Have you ever been convicted of any traffic violations within the last 5 years? Y or N
If yes, please explain: _____

III. Vehicle that will be used: _____

Name of Owner: _____ Year and Make: _____

Address of Owner: _____ Model: _____

_____ License Plate: _____

Registration Expires: _____ Inspection Expires: _____

If more than one vehicle is to be used, requested information must be provided for each vehicle.

IV. Insurance Information: The insurance coverage for a privately owned vehicle is the limit of the insurance policy covering that specific vehicle.

Insurance Company: _____

Policy Number: _____

Expiration Date: _____

Liability Limits of Policy*: _____

*Please attach a copy of liability limits.

* Must provide a copy of driver's license, registration, and proof of insurance.

V. Certification:

I certify that the information given on this form is true and correct to the best of my knowledge. I understand that as a volunteer/employee driver, I hold a valid driver's license and have the required insurance coverage in effect on any vehicle used to transport students, co-employees, service recipients and/or act on behalf of the church or related entities.

(Signature)

(Date)

Recommendation:

Only experienced drivers, i.e. 19 or over, should transport students or service recipients.

4/2013 - VCP/VCP Forms/Volunteer forms/Volunteer Employee Driver Info



EMPLOYEE/VOLUNTEER AUTOMOBILE WAIVER

Automobile insurance Policy requirement:

- Minimum level of \$100,000 per occurrence and \$300,000 total

Employee/Volunteer Signature

Supervisor Signature

Date

Drivers' License Valid and Current:

Employee/Volunteer Signature

Supervisor Signature

Date

I agree to have my automobile kept up to date on maintenance issues, to make certain that my automobile is safe to drive clients when needed.

Employee/Volunteer Signature

Supervisor Signature

Date

It is the responsibility of the employee/volunteer to maintain updated Drivers licenses, insurance certificate coverage and any changes to my insurance policies. It is my responsibility to give to my supervisor for my personnel file.

Employee/Volunteer Signature

Supervisor Signature

Date

CENTRAL REGISTRY CLEARANCE REQUEST

Michigan Department of Health and Human Services

Copy Photo ID Here
or
Attach a Separate Page

SECTION 1 INFORMATION ON PERSON BEING CLEARED

Name, (First, Middle, Last)	Signature Required for Individual Being Cleared	Date
Also Known as Name (AKA)	Social Security Number	Date of Birth
Address	City	State Zip Code
Phone Number	Email	
<input type="checkbox"/> I am completing this for myself. <input type="checkbox"/> I would like to pick up my results in _____ County (For Michigan Residents Only).		

SECTION 2 REQUESTER INFORMATION

Check Appropriate Box <input type="checkbox"/> Employer <input type="checkbox"/> Volunteer Agency <input type="checkbox"/> Adoption/Foster Care Home Screening <input type="checkbox"/> Court/Law-Enforcement/Department of Corrections/Prosecuting Attorney <input type="checkbox"/> Other			
Name of Agency or Organization	Name of Requester		
Address	City	State	Zip Code
Email	Fax	Phone Number	

Employers/Volunteer Agencies will ONLY receive responses of NO central registry if the person being cleared has approved this request with their signature. Employers/volunteer agencies will NOT receive notification if the name submitted has any central registry hits per CPL 722.627. For questions about completing this form, please contact the local Michigan Department of Health and Human Services, see attached contact list.

This clearance does not identify individuals who may have child abuse/neglect history in other states, territories or tribal trust land.

The confidentiality of central registry information is protected by Sections 7 through 7j of the Michigan Child Protection Law (MCL 722.627-722.627j). Anyone who violates this protection is guilty of a misdemeanor and is civilly liable for damages.

The Michigan Department of Health and Human Services (MDHHS) does not discriminate against any individual or group because of race, religion, age, national origin, color, height, weight, marital status, genetic information, sex, sexual orientation, gender identity or expression, political beliefs or disability.

INSTRUCTIONS FOR FILLING OUT THE DHS-1929

Michigan Department of Health and Human Services

Michigan residents requesting clearance on themselves (You must possess a Michigan identification)

Complete section one and sign the form in the box provided. Include a copy of your Michigan picture identification (driver's license or passport are most acceptable). Please NOTE, the results will only be sent to the address on your picture identification. Submit your DHS-1929 form with identification to MDHHS for processing. See the attached list for MDHHS county office locations and contact numbers.

Michigan agencies, schools, preschool, daycare providers, employers and volunteer agencies

The person being cleared completes section one, signs the form and adds a copy of their picture identification (driver's license or passport are most acceptable). The requester completes section two with name of agency, name of requester, address, phone, email and fax number. Submit the DHS-1929 with identification to MDHHS for processing. See the attached list for MDHHS county office locations and contact numbers.

Individuals outside of Michigan

For out of state Individuals requesting clearance on themselves, complete section one and sign the form. Include a copy of your state picture identification (driver's license or passport are most acceptable). Please NOTE, the results will only be sent to the address on your picture identification. Submit your request to Michigan Department of Health and Human Services fax 517-763-0280.

Agencies, schools, preschool, daycare providers, employers and volunteer agencies outside of Michigan

For out of state agencies, the person being cleared completes section one, signs the form and adds a copy of their state picture identification (driver's license or passport are most acceptable). The requester completes section two with name of agency, name of requester, address, phone, email and fax number. Submit your request to Michigan Department of Health and Human Services fax 517-763-0280.

Out-of-State Adoption and Foster Home Screening

Please access our website at www.michigan.gov/MDHHS and follow the instructions for submitting an outstate request for adoption and foster home screening. For questions contact 517-284-9740.

Michigan Camp Volunteers and Employees (All Types)

Please contact the Department of Licensing and Regulatory Affairs, Bureau of Community Health Systems at 866-685-0006 or www.michigan.gov/lara
Submit completed form BCHS-camp 001 (Rev 1/16) to the address on the form.

Outstate government agencies requesting information, please access our website at www.michigan.gov/DHHS follow the links to child abuse and neglect or call 517-241-9794.

If a person is listed on central registry the results will only be sent to the individual at the address on their photo identification.

County	Address	Phone	Fax
Alcona	2145 E. Huron Rd., East Tawas, MI 48730	989-362-0300	989-362-6629
Alger	413 Maple St., Munising, MI 49862	906-387-4440	906-387-4710
Allegan	3255 122nd., Ste. 300 Allegan, MI 49010	269-673-7700	269-673-7795
Alpena	711 W. Chisholm St., Alpena, MI 49707	989-354-7200	989-354-7242
Antrim	203 E. Cayuga St., PO Box 316, Bellaire, MI 49615	231-533-8664	231-533-8740
Arenac	3709 Deep River Rd., Standish, MI 48658	989-846-5500	989-846-4365
Baraga	108 Main St., PO Box 10, Baraga, MI 49908	906-353-4700	906-353-8415
Barry	430 Barfield Dr., Hastings, MI 49058	269-948-3200	269-948-4101
Bay	1399 W. Center Rd., Essexville, MI 48732	989-895-2100	989-895-2494
Benzie	448 Court Plaza Govt. Ctr., PO Box 114, Beulah, MI 49617	231-882-1330	231-882-9078
Berrien	401 Eighth St., PO Box 1407, Benton Harbor, MI 49023	269-934-2000	269-934-2115
Branch	388 Keith Wilhelm Dr., Coldwater, MI 49036	517-279-4200	517-278-5346
Calhoun	190 E. Michigan Ave., PO Box 490, Battle Creek, MI 49016	269-966-1284	269-966-2837
Cass	325 M-62, Cassopolis, MI 49031	269-445-0200	269-445-0298
Charlevoix	2229 Summit Park Dr., Petoskey, MI 49770	231-348-1600	231-347-6211
Cheboygan	827 S. Huron St., Cheboygan, MI 49721	231-627-8500	231-627-8546
Chippewa	463 East 3 Mile Rd., Sault Ste. Marie, MI 49783	906-635-4100	906-635-4173
Clare	725 Richard Dr., Harrison, MI 48625	989-539-4260	989-539-4200
Clinton	105 W. Tolles Rd., St. Johns, MI 48879	989-224-5500	989-224-3896
Crawford	230 Huron Grayling, MI 49738	989-348-7691	989-348-2838
Delta	305 Ludington St., Escanaba, MI 49829	906-786-5394	906-786-5350
Dickinson	1401 Carpenter Ave. Ste. A, Iron Mountain, MI 49801	906-779-4100	906-774-2775
Eaton	1050 Independence Blvd., Charlotte, MI 48813	517-543-0860	517-543-2125
Emmet	2229 Summit Park Dr., Petoskey, MI 49770	231-348-1600	231-347-6211
Genesee	125 E. Union St., P.O. Box 1628, Flint, MI 48501	810-760-2550	810-760-2745
Gladwin	675 E. Cedar Ave., Gladwin, MI 48624	989-426-3300	989-426-3353
Gogebic	301 E. Lead St., Bessemer, MI 49911	906-663-6200	906-663-6230
Gd Traverse	701 S. Elmwood Ste.19, Traverse City, MI 49684	231-941-3900	231-941-0037
Gratiot	201 Commerce Dr., Ithaca, MI 48847	989-875-5181	989-875-2811
Hillsdale	40 Care Dr., Hillsdale, MI 49242	517-439-2200	517-439-2272
Houghton	47420 State Hwy. M-26 Ste. 62, Houghton, MI 49931	906-482-0500	906-487-7726
Huron	1911 Sand Beach Rd., Bad Axe, MI 48413	989-269-9201	989-269-9875
Ingham	5303 S. Cedar St., Lansing, MI 48911	517-887-9400	517-887-9500
Ionia	920 E. Lincoln, Ionia, MI 48846	616-527-5200	616-527-1849
Iosco	2145 E. Huron Rd., East Tawas, MI 48730	989-362-0300	989-362-6629
Iron	337 Brady Ave., PO Box 250, Caspian, MI 49915	906-265-9958	906-265-6390
Isabella	1919 Parkland Dr., Mt. Pleasant, MI 48858	989-772-8400	989-772-8460
Jackson	301 E. Louis Glick Hwy., Jackson, MI 49201	517-780-7400	517-780-7160
Kalamazoo	322 E. Stockbridge Ave., Kalamazoo, MI 49001	269-337-4900	269-337-5179
Kalkaska	503 North Birch St., Kalkaska, MI 49646	231-258-1200	231-258-4482
Kent	121 Franklin St. SE Ste. 200, Grand Rapids, MI 49507	616-248-1000	616-248-1059

County	Address	Phone	Fax
Keweenaw	3616 Highway US-41, PO Box 351, Mohawk, MI 49950	906-337-3302	906-337-1131
Lake	5653 S. M-37, Baldwin, MI 49304	231-745-8159	231-745-2930
Lapeer	1505 Suncrest Dr., Lapeer, MI 48446	810-667-0800	810-667-0795
Leelanau	701 S. Elmwood Ste. 19, Traverse City, MI 49684	231-941-3900	231-941-0037
Lenawee	1040 S. Winter St. Ste. 3013, Adrian, MI 49221	517-264-6300	517-264-6357
Livingston	2300 E. Grand River Ste. 1, Howell, MI 48843	517-548-0200	517-548-0298
Luce	500 W. McMillan, Newberry, MI 49868	906-293-5144	906-293-3857
Mackinac	199 Ferry Lane, Saint Ignace, MI 49781	906-643-9550	906-643-7467
Macomb	21885 Dunham Rd. Ste. 7, Clinton Township, MI 48036	586-469-7700	586-783-8136
Macomb	27690 Van Dyke Ave., Warren, MI 48093	586-427-0600	586-427-0668
Macomb	41227 Mound Rd. Ste. A, Sterling Heights, MI 48314	586-254-1500	586-254-8029
Macomb	19700 Hall Rd. Ste. A, Clinton Township, MI 48038	586-412-6100	586-412-6141
Manistee	1672 US 31 South, Manistee, MI 49660	231-723-8375	231-398-2106
Marquette	Courthouse Annex, 234 W. Baraga Ave., Marquette, MI 49855	906-228-9691	906-228-3393
Mason	915 Diana St., Ludington, MI 49431	231-845-7391	231-843-1430
Mecosta	800 Water Tower Rd., Big Rapids, MI 49307	231-796-4300	231-796-0799
Menominee	2612 10th St., Menominee, MI 49858	906-863-9965	906-863-7426
Midland	1509 Washington Ste. A, Midland, MI 48641	989-835-7040	989-835-7597
Missaukee	10641 W. Watergate Rd., Cadillac, MI 49601	231-779-4500	231-779-4507
Monroe	903 S. Telegraph Ste. A, Monroe, MI 48161	734-243-7200	734-243-1660
Montcalm	609 N. State, PO Box 278, Stanton, MI 48888	989-831-8400	989-831-8496
Montmorency	13210 M-33, Atlanta, MI 49709	989-785-4218	989-785-2302
Muskegon	2700 Baker St., PO Box 4290, Muskegon Heights, MI 49444	231-733-3700	231-733-3872
Newaygo	1018 Newell, PO Box 640, White Cloud, MI 49349	231-689-5500	231-689-5586
Oakland	51111 Woodward Ave., Pontiac, MI 48342	248-975-5400	248-975-5550
Oceana	4081 W. Polk Rd., Hart, MI 49420	231-873-7251	231-873-3803
Ogemaw	444 E. Houghton Ave., West Branch, MI 48661	989-345-5135	989-345-4688
Ontonagon	408 Cooper St. Ste. B, Ontonagon, MI 49953	906-884-4951	906-884-6323
Osceola	800 Water Tower Rd., Big Rapids, MI 49307	231-796-4300	231-796-0799
Oscoda	200 W. Fifth St., Mio, MI 48647	989-826-4000	989-826-3961
Otsego	931 S. Otsego Ave., Gaylord, MI 49735	989-732-1702	989-732-8715
Ottawa	12185 James St. Ste. 200, Holland, MI 49424	616-394-7200	616-395-5526
Presque Isle	164 N. Fourth St., Rogers City, MI 49779	989-734-2108	989-734-2767
Roscommon	111 Union St., Roscommon, MI 48653	989-275-5107	989-275-5545
Saginaw	411 E. Genesee, PO Box 5070, Saginaw, MI 48605	989-758-1100	989-758-2710
St. Clair	220 Fort St., Port Huron, MI 48060	810-966-2000	810-966-2025
St. Joseph	692 E. Main St., Centreville, MI 49032	269-467-1200	269-467-1229
Sanilac	515 S. Sandusky Rd., Sandusky, MI 48471	810-648-4420	810-648-4432
Schoolcraft	300 Walnut St. Rm. 175A, Manistique, MI 49854	906-341-2114	906-341-2110
Shiawassee	1720 E. Main St. Ste. 1, Owosso, MI 48867	989-725-3200	989-725-3308
Tuscola	1365 Cleaver Rd., Caro, MI 48723	989-673-9100	989-673-9209
Van Buren	57150 CR 681, Hartford, MI 49057	269-621-2800	269-621-2927

County	Address	Phone	Fax
Washtenaw	22 Center St., Ypsilanti, MI 48198	734-481-2000	734-481-8386
Wayne North	13233 Hamilton Ave., Highland Park, MI 48203	313-852-1700	313-852-1891
Wayne South	1801 E. Canfield Detroit, MI 48207	313-578-5500	313-578-5392
Wayne West	27540 Michigan Ave., Inkster, MI 48141	313-931-6400	313-931-6439
All Wayne	Visit www.michigan.gov/mdhhs for all offices		
Wexford	10641 W. Watergate Rd., Cadillac, MI 49601	231-779-4500	231-779-4507
Outstate	PO Box 30037, Ste. 510, Lansing, MI 48909-7537	517-241-9794	517-763-0280

Here is some information we can use on LCCC's current outreach/marketing.

I think we can relatively recommend some helpful ways to enlarge the outreach. Feel free to begin thinking about this and making a list, table or whatever seems to be a good way to frame this.

Cheers, Anne

Anne Montgomery

Center for Appropriate Care

Co-Director | Program to Improve Eldercare

2000 M St. N.W., suite 400

ALTARUM | Washington, DC

○ 202.776.5183 | ☎ 202.492.9299

@ALTARUM | altarum.org

From: Suzanne Snyder <suzi@livingstoncatholiccharities.org>

Sent: Monday, October 28, 2019 12:19 PM

To: Sarah Slocum <Sarah.Slocum@altarum.org>; Anne Montgomery <Anne.Montgomery@altarum.org>

Subject: LACK Volunteer information

[EXTERNAL EMAIL] - Beware of Unconfirmed Links

Sarah,

Some of the recruiting techniques used in the past few months.

Website/Facebook

United Way Volunteer Livingston website

Church bulletins

United Way Volunteer Livingston coalition meeting

United Way Volunteer Livingston "Cheers for Volunteers" event

Citizens Insurance resource and volunteer fair

Pull tab bulletin board flyer

Current Volunteer training – incentive type program

I know you were looking for some more information regarding Area Agency on Aging 1B. Can you explain what type of information you are looking for?

Suzi Snyder

Director of Senior Services

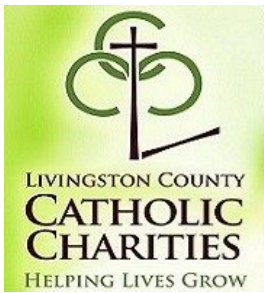
Livingston County Catholic Charities

517-546-9910

suzi@livingstoncatholiccharities.org

<https://www.facebook.com/LivingstonCatholicCharities/>

<https://www.linkedin.com/company/livingston-county-catholic-charities-michigan/>



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Livingston County Catholic Charities presents...

Salute to the Stars & 35th Anniversary Celebration

March 14, 2020

Celebration begins at 6:30 pm, Crystal Gardens, Howell
 Celebratory Mass offered at 5:00 pm with Bishop Earl Boyea,
 St. Joseph Church, Howell

Eat, Drink & Be Giving
 Strolling Dinner Stations | Cash Bar | Raffle
 Honoree Presentation | Entertainment
 Goodwill Offering

Platinum Sponsors
 St. Joseph Mercy Livingston Hospital
 K of C #12295
 Garrison Enterprises LLC

Media Sponsor
 Chestnut Real Estate

Entertainment Sponsor
 Elizabeth & Bruce Hundley



Tickets
 \$60 per person,
 \$440 table of 8
 \$550 table of 10

For more information, to be a sponsor or to purchase tickets, call (517) 545-5944, or go to www.livingstoncatholiccharities.org.

RSVP by 3/6/2020

Local Media Sponsors:


Join us for an exciting evening celebrating 35 years of service in Livingston County. The event will include the dynamic music by **Denise Davis and the Motor City Sensations**. [Click here](#) for more information or to purchase your tickets.

LCCC - Serving Families of All Faiths since 1985!

Livingston County Catholic Charities (LCCC), nationally accredited since 1997, provides professional, confidential services to county residents regardless of religious preference, national origin, gender, age, disability or financial

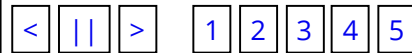
Turning 65 & Confused About Medicare and Other Important Changes – Call us today!

March 18th, 2019 by juliea

Are you turning 65 this year? Are you a caregiver for an aging or disabled family member or friend?

Call Melodie or Penny, LCCC Older Adult Specialists, at 517-545-5944 to learn the ABC's of Medicare, Medigap and Advantage plans,

Posted in [News](#), [Uncategorized](#) | [Comments](#)



Caregiver Support Activities at Be Our Guest

These activities are free and open to all people in the community who are caregiving for a loved one with dementia, Alzheimer's, Parkinson's, Lewy Bodies and other memory related diseases.

View January or February Caregiver Support Activities.

For Current Happenings, Follow us on FACEBOOK, LinkedIn and Instagram.



JANUARY 2020

Caregiver Support Activities at Be Our Guest

These activities are FREE and open to all people in the community who are caregiving for a loved one with dementia, Alzheimer's, Parkinson's, Lewy Bodies and other memory related diseases.



Relaxation Techniques and Gentle Fitness with Laura January 9th, 5:00-6:00 pm

This class is specifically designed with the caregiver in mind. Bring a mat, if you have one, and a towel. Get ready to relax and rejuvenate. This hour-long fitness and relaxation class can be accommodated to all ability levels. Max: 15 people

Chair Massages January 14th, 4:00-6:00 pm

A half-hour, fully-clothed, relaxation and massage experience. Caregiving can be stressful and the benefits of massage have been proven to reduce stress and promote wellness. Only 4 spots are available to accommodate a half-hour experience. More dates for this event will be available in the future.

Understanding and Responding to Dementia-Related Behavior January 29th, 4:00-5:00 pm

This is an educational class, provided by the Alzheimer's Association, to help caregivers decipher behaviors and determine how best to respond. By the end of the session, attendees will be able to:

- Identify common triggers for behaviors associated with dementia.
- Explain the process for assessing and identifying challenging behaviors.
- List strategies to address some common dementia-related behaviors.

Through practical information, resources, and interviews with experts, this program will help caregivers to address the challenges of dementia-related behavior. Max: 25 people

Each activity is provided through the generous funding through the Ralph C. Wilson, Jr. Legacy Funds at the Community Foundation for SE Michigan. Free respite is provided. Please call 517-546-9910 to register your loved one.

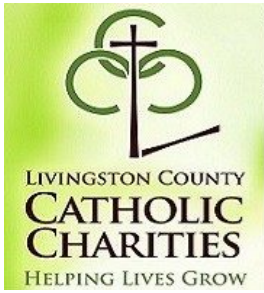
Ralph C. Wilson, Jr.
Legacy Funds
OF THE
Community Foundation
FOR SOUTHEAST MICHIGAN



LIVINGSTON COUNTY
CATHOLIC
CHARITIES
HELPING LIVES GROW

**Held at:
Be Our Guest Adult Day
Livingston County Catholic Charities
2020 Grand River Ave., Suite 103
Howell, MI 48843**

Caregiver Support Groups meet the 1st Tuesday and 3rd Wednesday of each month from 4:30-6:00 pm. Free respite is provided. Call 517-546-9910 to register.



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Volunteers Needed

Do You Enjoy Working with People? Share Your Time & Talents!

Light office help needed.

Livingston County Catholic Charities (LCCC) is looking for volunteers who are interested in light clerical duties and who like working with older adults. Duties include (but are not limited to): scheduling volunteers for friendly home visits and transportation for older adults to appointments; filing; answering phones; computer work – MS Word and Excel. A minimum of two hours a week – flexible on days and times.



Bring Joy to a Home-bound Senior!

Are you looking for a lunch date? Do you enjoy playing cards or discussing current events?

Livingston County Catholic Charities (LCCC) is looking for volunteers who like working with older adults. Opportunities include (but are not limited to): friendly home visits; transport older adults to appointments; errands; and respite care for family members.



An hour or two a week or month can make the world of difference to a homebound senior!

If you know of anyone that would benefit from these services or if you would like to become a volunteer, please contact Katie Holmes of LCCC at (517)545-5944 ext. 121 or katie@livingstoncatholiccharities.org.

Share Your Talents at Be Our Guest Adult Day!

Do you enjoy playing cards, bingo, word games, art projects, baking, gardening, sing-a-longs, and much more? We may be what you are looking for. Join us at our supervised senior center, Be Our Guest Adult Day (BOGADS). BOGADS currently has volunteer opportunities. We offer scheduling flexibility with a commitment up to 2-4 hours a month.

To learn how you can become a volunteer, contact Suzi or Katie at 517-546-9910 or suzi@livingstoncatholiccharities.org. We look forward to spending time with you!

Volunteer for Livingston County Community Alliance

Livingston County Community Alliance (LCCA) is a substance abuse coalition which provides prevention efforts in our community. We are in need of volunteers to help with projects such as Project Sticker Shock, Alcohol Compliance Checks and more or to sit on planning committees. Please contact Megan Palmer at 517-545-5944 or meganp@livingstoncatholiccharities.org.

[Be Our Guest Adult Day Volunteer Form](#)

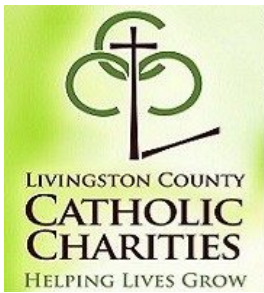
[Volunteer Caregiver Registration Form](#)

[Volunteer Driver Information Form](#)



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 - [Weaver Xtreme Theme](#)



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Have hope. Get help.

 LIVINGSTON COUNTY CATHOLIC CHARITIES

Wish List

- Magazine subscriptions for Be Our Guest Adult Day (BOGADS): **Time, Money, Better Homes & Gardens**
- Craft supplies for BOGADS
- Donations for our annual **Senior Christmas Blessing Project** for homebound & low income seniors (please call Linda or Suzi at LCCC for specific needs)
- #5160 Address Labels
- Printer paper
- Black ink pens
- Birdseed for BOGADS bird feeders
- \$25 gas gift cards for our volunteer drivers

All donated items can be dropped off at LCCC's offices, 2020 E. Grand River #104, Howell, MI 48843.

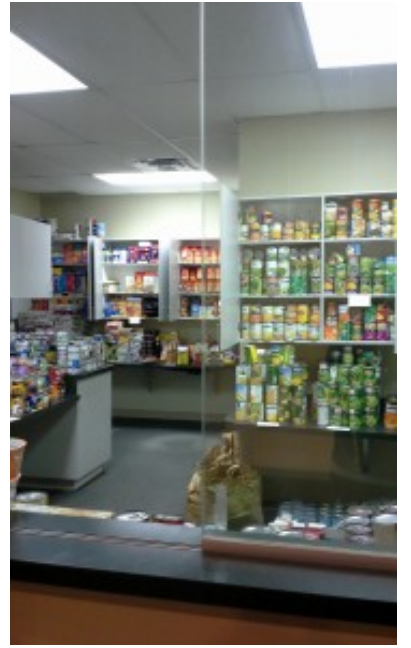


Thank you for your support!



Baking and News Day!

©2020 - Livingston Catholic Charities



*Food Collected for Christmas
Blessing Project!*

® - Weaver Xtreme Theme



LIVINGSTON COUNTY
**CATHOLIC
CHARITIES**
HELPING LIVES GROW

Your donation helps to provide critical services to Livingston County children, women and men who struggle with depression, anxiety, Alzheimer's, substance abuse, neglect and abuse and so much more. Thank you and God Bless!

Program/Event

Choose One ▼

Amount

\$500

\$250

\$125

\$75

\$35

Type of Donation

One Time Donation

Recurring Donation

I would like to dedicate this donation

Campaign

Choose One



Contact Information

*** First Name**

*** Last Name**

Company Name

*** Address**

Address 2

*** City**

*** State/Province**



*** Zip/Postal Code**

Home Phone

Cell Phone

Work Phone

Email

Help Us Cover Costs

Simply leave "Yes!" checked below to ensure that 100% of your intended donation is available for our mission.

- Yes! I want \$0.00 to go to Livingston County Catholic Charities and I will donate \$0.00.**
- No. I will donate \$0.00 and Livingston County Catholic Charities will cover the processing costs.**

Payment Information

Payment Options

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Credit Card Information

Card Holder Name



Card Account Number

Expiration Date

* Security Code ⓘ

Billing Address

Same As Above

* Address

City

State/Province

* Zip/Postal Code

Email

Next →

Privacy Policy

We keep your personal information private and secure. When you make a payment through our site, you provide your name, contact information, payment information, and additional information related to your transaction. We use this information to process your payment and to ensure your payment is correctly credited to your account.

Contact Us: Livingston County Catholic Charities •• 2020 E. Grand River #104, Howell, MI 48843 •• 517-545-5944 ••
julie@livingstoncatholiccharities.org



 (https://www.donorperfect.com/fundraising-software/integrated-online-forms/)

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LCCC New Video: Clients share their experiences.



Rebecca's inspiring story.



Be Our Guest Adult Day and other senior services.



Megan, LCCC Counselor; "Rebuilding Lives Everyday."



Gina's Caregiving Experience



Understanding Child Temper Tantrums
Livingston County Catholic Charities.

LCCC Therapist, Laurie V., helps us understand child temper tantrums

[EXTERNAL EMAIL] - Beware of Unconfirmed Links



Driven by faith - HERE FOR ALL

LCCC E-Newsletter

Vol. 27, March 2020

Livingston County Catholic Charities continues to remain open due to the vital and essential services provided to our clients.

For your protection, we continue to closely monitor the progression of the coronavirus (COVID-19) and continue to follow guidelines provided by the CDC.

For more information from the CDC on precautions, click on the link below.

<https://www.cdc.gov/coronavirus/2019-ncov/downloads/workplace-school-and-home-guidance.pdf>

All agency programs and services will remain open, with the following exceptions:

- **BE OUR GUEST – ADULT DAY SERVICE** will be closed through March 27th. If this closure needs to be extended, then further announcement will occur. All monthly Caregiver Support groups and activities are cancelled through March.
- **SPECIAL MINISTRIES OF LIVINGSTON COUNTY** will discontinue services through April 12th. If this closure needs to be extended, then further announcement will occur.
- **VOLUNTEER CAREGIVER SERVICES** will be modified or delayed on a case-by-case basis.

As developments continue, we will respond accordingly in order to protect the health of our coworkers, volunteers and the people that we serve.

Thank you for your understanding and patience as we all navigate this difficult time. Please check our Facebook page and website for future updates.



Due to the current health situation in America and recommendations by the CDC, Governor of Michigan and other health officials, Liv. Co. Catholic Charities rescheduled our March 14th Salute to the Stars - 35th Anniversary Celebration. We feel that our community's, friend's, supporter's and guest's health is paramount.

The new date is Friday, May 29th, at Crystal Gardens. Stay tuned for more information to come on the event in coming weeks. We apologize for any inconvenience to our guests. And for those who were not able to attend, we hope that with the new date, you can now join us to celebrate!

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in Honor of 35th Anniversary

On Saturday, March 14, Bishop Earl Boyea along with Fr. David Speicher celebrated a small Mass at St. Joseph Catholic Church in Howell in honor of Livingston County Catholic Charities' 35th Anniversary. Bishop Boyea and those in attendance offered special prayers for those in our community who are ill and for the health concerns confronting our society.

MARCH 2020

Caregiver Support Activities at Be Our Guest

These activities are FREE and open to all people in the community who are caregiving for a loved one with dementia, Alzheimer's, Parkinson's, Lewy Bodies, Chemo Brain and other memory related diseases.



Chair Massages or Reflexology
March 5th & 19th, 4:00-6:00 pm
 A half-hour, fully clothed, relaxation and massage experience. Caregiving can be stressful and the best massage have been proven to reduce stress and promote wellness. Caregivers are provided with a choice between an upper body chair massage or reflexology (Foot Massage). Only 4 spots are available per session.

Relaxation Techniques and Gentle Fitness with Laura
March 12, 5:00-6:00 pm
 This class is specifically designed with the caregiver in mind to help them learn techniques to relax and rejuvenate. This hour-long fitness and relaxation class is perfect for caregivers. Max: 15 people

The SAFE Caregiver Program
March 18th, 5:30-7:30 pm
 Provided by Peter A. Lichtenburg, Director of the Center for Aging and Merrill Palmer Skillman Institute WSU East Lansing. Older adults in the U.S. is a victim of financial exploitation. This discussion on the safe ways for caregivers to protect their loved ones from financial scams as well as learn about power of attorney and other legal issues such as the Lichtenburg financial assessment tools. Max: 25

Art Therapy by Lisa at ArtSoul (ArtSoultherapy.com)
 A four hour long therapeutic art experience. You will make a personal tile of positivity to help express yourself as a caregiver. All Materials will be provided. Refreshments and dessert will be provided for all attendees. Max: 15

Each activity is provided through the generous funding through the **Ralph C. Wilson, Jr. Legacy Funds at the Community Foundation for SE Michigan.**

Free respite is provided upon request. Please call 517-546-9910 to register.

Held at: Be Our Guest Adult Day
 Livingston County Catholic Charities
 2020 Grand River Ave., Suite 103
 Howell, MI 48843

Ralph C. Wilson, Jr.
 Legacy Funds
 Community Foundation
 FOR SOUTHWEST MICHIGAN

LIVINGSTON COUNTY
 CATHOLIC CHARITIES
 HELPING LIFE BE BETTER

Caregiver Support Groups meet the 1st Tuesday and 3rd Wednesday of each month from 4:30-6:00 pm.
 (No support group on 3/18) Free respite is provided. Call 517-546-9910 to register.

ALL CAREGIVER ACTIVITIES ARE CANCELLED UNTIL FURTHER NOTICE

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All March Caregiver Activities are cancelled until further notice.

We will send out a schedule of all the great events scheduled for April once we can confirm they will be on.

Want more information for yourself or someone you know? Call Suzi or LeAnn at 517-546-9910.



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all Tournament was a Fantastic Success!

Special Ministries held a dynamite basketball game vs. the Livingston County Sheriff Department at Parker Middle School on February 29 raising \$1,139.00 to support programs and activities for adults with disAbilities. It was a lot of fun and our team won 58 to 24.

Shout out to all of our co-workers in the Special Ministries program for their tremendous efforts and hard work with this event! The Special Ministries dance team and Special Olympic cheerleaders had a great time. There were lots of smiles, high fives and of course baskets made.

An especially amusing moment happened when the entire Sheriff's Department team exited the court on the tail of a box of donuts! Visit our [Facebook page](#) for **MORE** photos and videos!

All proceeds benefit Special Ministries, a program of Livingston County Catholic Charities.

Stories of New Tomorrows...

Your donations change lives!

Catholic Charities has been an great, experance
 for me, because as an addict and an ex
 offender, Catholic charities help me SEE
 The Choices and Paths' I CAN Focus upon
 SO THAT my Future, AND NOW, STAYS
 Clean, Sober and FREE OF ADDICTIONS
 and Bad Choices.
 THANK GOD FOR GIVING ME
 Back my Life AND SANCTI
 D.N

Give the Gift of Hope

On-going Groups & Meetings at LCCC

Caregiver Support Group

1st Tuesday of each month, 4:30–6:00 pm
 at Be Our Guest - Suspended through March

3rd Wednesday of each month, 4:30–6:00 pm
 at Be Our Guest - Suspended through March

Foster Parent Orientation

3rd Monday of each month, 5:00–7:00 pm - Suspended through March

Substance Abuse Engagement Groups

**Currently All Engagement Group Sessions WILL Continue.
 Watch LCCC Facebook page and Website for up-to-date information.**

All are welcome and no preregistration is necessary.
 Mondays 6:00–7:30 pm, Wednesdays and Fridays 10:00 am–11:30 pm

Bequests Help Provide for Our Community's Future!

*Did you know that leaving a **Charitable Bequest** in your will to bestow on Livingston*

County Catholic Charities makes it easy to help one of your favorite charities without dipping into your current income or savings?

Contact Julie Amman or Mark Robinson at 517-545-5944 or your lawyer or financial adviser for more information.

Follow us on Facebook and Instagram for the Foster Care Parenting Tip of the Week or the Caregiver Tip of the Week along with other great information & activities.

Click Here to Donate Locally & Give the Gift of Hope!

Give the Gift of Hope

Livingston County Catholic Charities
2020 E. Grand River #104, Howell, MI 48843
Office Phone 517-545-5944 Be Our Guest Adult Day Phone 517-546-9910
www.livingstoncatholiccharities.org



Livingston County Catholic Charities | 2020 E. Grand River #104, Howell, MI 48843

[Unsubscribe melina.mann@altarum.org](mailto:melina.mann@altarum.org)

[Update Profile](#) | [About Constant Contact](#)

Sent by julie@livingstoncatholiccharities.org in collaboration with



Try email marketing for free today!



LIVINGSTON COUNTY
**CATHOLIC
CHARITIES**
HELPING LIVES GROW

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Temporary hours of operation starting June 1st: **Tuesdays 9a-8p, Wednesdays 9a-8p, Thursdays 9a-8p and Fridays 9a-5p.** All visitors/clients are asked to wear a mask when entering any of LCCC's buildings. If visitors/clients do not have a mask, one will be provided. Click the button below for full listing of updates and protocols.

[May 25, 2020 LCCC Agency Update and Protocols](#)

**WAYS TO
STRENGTHEN
YOURSELF AS AN
INDIVIDUAL**

[Click to learn Self-Care Tips.](#)

If it is not an emergency, please call the office and leave a message 517-545-5944. **Mental Health emergencies, call CMH 24/7 line at 800-615-1245. Substance Abuse assistance, contact our Peer Support program at 517-375-1652.** All other staff contact e-mails can be found on our Contact Us page.

[Medicare and the Corona Virus – What You Need to Know click here.](#)

Click the link for April 19th's Tips & Resources [COVID-19 e-newsletter](#) and follow us on Facebook. Additionally: our *Senior Community Liaisons (formerly Resource Advocates)* are still providing services to all seniors over the phone (in person only if necessary to obtain signatures/proofs for applications for essential services i.e. health care coverage, food support; delivery of essential items). Much can be done over the phone to assist with low income applications, Medicare info and enrollments, connect to resources, info on Long term Care options, census reporting, Home Heating Tax Credits and Property Tax Credits, prescription assistance and more.

Also of note is that our Volunteer Caregiver program is still operational with staff who are picking up and delivering food boxes from Gleaners and other essential needs, prescriptions, transportation to crucial doctor appointments and more for home-bound seniors. Volunteers continue to provide friendly phone visits.

For any senior in need of assistance, please have them call our office at 517-545-5944 and ask for Jamie or Katie.

Fraud Surrounding COVID-19 is Increasing

As the number of people and communities affected by the COVID-19 pandemic grows, so do the scams associated with it. Scammers use public health emergencies as opportunities for new fraud schemes, and because older adults are at greater risk for serious illness from COVID-19, they may target older populations.

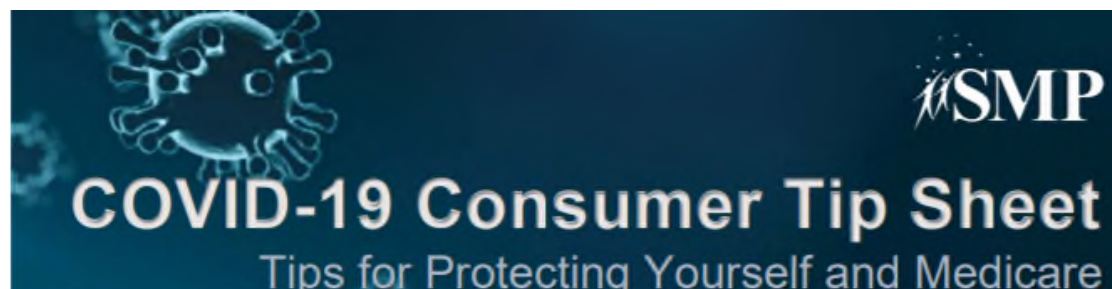
There is currently no FDA-approved vaccine for COVID-19 and although there may be treatments for symptoms, there is no "cure." However, scammers often use fear-based tactics to convince people that a vaccine or cure is now being offered.

It's also important to remember that although the Centers for Disease Control and Prevention (CDC) and other public health officials may contact you if they believe you may have been exposed to the virus, they will not need to ask you for insurance or financial information.

The Senior Medicare Patrol (SMP) recommends that Medicare beneficiaries:

- Contact your own doctor if you are experiencing potential symptoms of COVID-19.
- Do not give out your Medicare number, Social Security number, or personal information in response to unsolicited calls, texts, emails, home visits, or booths at health fairs and other public venues. If your personal information is compromised, it may be used in other fraud schemes as well.
- Be suspicious of anyone going door-to-door to offer free coronavirus or COVID-19 testing, supplies, or treatments.
- Carefully review your Medicare Summary Notice (MSN) or Explanation of Benefits (EOB), looking for errors or claims for products or services that weren't received.
- Follow the instructions of your state or local government for other actions you should be taking in response to COVID-19.
- Contact your local SMP for help. SMPs empower and assist Medicare beneficiaries, their families, and caregivers to prevent, detect, and report health care fraud, errors, and abuse.

The Senior Medicare Patrol (SMP) is ready to provide you with the information you need to PROTECT yourself from Medicare fraud, errors, and abuse; DETECT potential fraud, errors, and abuse; and REPORT your concerns. SMPs help educate and empower Medicare beneficiaries in the fight against health care fraud. Your SMP can help you with your questions, concerns, or complaints about potential fraud and abuse issues. It also provides information and educational presentations. To locate your local Senior Medicare Patrol, call 1-877-808-2468 or visit www.smpresource.org.



Scams related to the coronavirus, also known as COVID-19, are rapidly increasing as the public health emergency develops. Scammers are targeting older adults and those with serious long-term health conditions who appear to have a higher risk for serious illness from COVID-19.

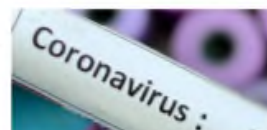
Fraudsters are attempting to bill Medicare for sham tests or treatments related to the coronavirus and are targeting individuals to illegally obtain money or Medicare numbers.

What Can You Do to Stop COVID-19 Fraud?

- Do not give out your Medicare number to anyone other than your doctor or other health care provider.
- Protect your Medicare number and treat your Medicare card like a credit card.
- Never provide your Medicare number to anyone who contacts you through unsolicited calls, texts, or emails.
- Be cautious of anyone who comes to your door offering free coronavirus testing, treatment, or supplies.
- Don't click on links from sources you don't know, which could put your computer or device at risk. Make sure the anti-malware and anti-virus software on your computer are up to date.
- Be cautious when purchasing medical supplies from unverified sources, including online advertisements and email/phone solicitations.
- Ignore online offers for vaccinations. If you see ads touting prevention products or cures for COVID-19, they are most likely a scam.
- Do your homework before making a donation to a charity or crowdfunding site due to a public health emergency. Be particularly wary of any charities requesting donations by cash, by gift card, or wire transfer.
- Be alert to "investment opportunities." The U.S. Securities and Exchange Commission (SEC) is warning people about online promotions, including on social media, claiming that the products or services of publicly traded companies can prevent, detect, or cure COVID-19 and that the stock of these companies will dramatically increase in value as a result.

What Does Medicare Cover in Relation to COVID-19?

- Medicare Part B (Medical Insurance) covers COVID-19 tests when ordered by your doctor or health care provider on or after February 4, 2020.
- Medicare covers all medically necessary hospitalizations, including extra days in the hospital for patients who had to stay longer under COVID-19 quarantine.
- There is no vaccine for COVID-19 at this time; however, if one becomes available, Medicare will cover it.
- Medicare also recently expanded coverage of telehealth services to enable beneficiaries to access a wider range of services from their providers without having to travel to a facility.
 - This includes access to doctors, nurse practitioners, clinical psychologists, and licensed clinical social workers.
 - During this emergency, there are also more options for the ways your providers can talk with you under this provision.



provision.

- For Medicare coverage questions, contact your local State Health Insurance Assistance Program (SHIP) at SHIPTAcenter.org or 1-877-839-2675.

Other COVID-19 Resources

- Administration for Community Living (ACL): ACL.gov/COVID-19
- Senior Medicare Patrol National Resource Center (SMPNRC): www.smpresource.org/Content/Medicare-Fraud-Schemes/COVID-19-Fraud
- Centers for Disease Control and Prevention (CDC): CDC.gov/coronavirus/2019-ncov
- Federal Trade Commission (FTC): FTC.gov/coronavirus
- Medicare: Medicare.gov/medicare-coronavirus

How Your Senior Medicare Patrol (SMP) Can Help

Your local SMP is ready to provide you with the information you need to **PROTECT** yourself from Medicare fraud, errors, and abuse; **DETECT** potential fraud, errors, and abuse; and **REPORT** your concerns. SMPs and their trained volunteers help educate and empower Medicare beneficiaries in the fight against health care fraud. Your SMP can help you with your questions, concerns, or complaints about potential fraud and abuse issues. It also can provide information and educational presentations.

To locate your state Senior Medicare Patrol (SMP):

Visit www.smpresource.org or call 1-877-808-2468.

Supported by a grant (No. 90MPC0001) from the Administration for Community Living (ACL),
U.S. Department of Health and Human Services (DHHS).

Livingston County Community Resources and Agency Service Updates.

- COVID-19 & Medicare Frequently Asked Questions – May 25, 2020.
- COVID-19 & Medicare Consumer Fact Sheet – May 25, 2020.

Upcoming events

Adult Drug Court Group

02 June 2020

Caregiver Support Group

- Dementia Specific

Facebook Feed



Livingston County Catholic Charities

23 hours ago

The Connection Youth Services Virtual Groups..
Join us for Virtual Groups during the month of June! Fc
See More



Photo

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Livingston County Catholic Charities @LivingstonCatholicCharities

- Home
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- Events
- Photos
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- Reviews
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Create a Page



Livingston County Catholic Charities presents...

Salute to the Stars & 35th Anniversary Celebration

March 14, 2020

Celebration begins at 6:30 pm, Crystal Gardens, Howell

Like Follow Create Fundraiser

Learn More

Upcoming Events



- Feb 1** **Community Connect Hosted by The Livingsto...**
Sat 9 AM · Livingston County Community Connect · How...
Other · 187 people
- Feb 29** **Special Ministries vs. Liv. County Sheriff Dept...**
Sat 1:30 PM
Sports
- Mar 14** **Salute to the Stars; 35th Anniversary Celebrat...**
Sat 6:30 PM · Crystal Gardens Banquet Center · Brighton...
Lisa and Patricia like this place

See All

Photos



4.8 out of 5 · Based on the opinion of 6 people
LIVINGSTON COUNTY CATHOLIC CHARITIES

Our Story

We serve the entire community through Mental Health Counseling; Substance Abuse Treatment & Preventi...

See More

Community

See All

Invite your friends to like this Page

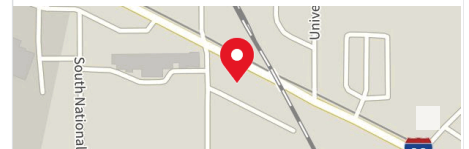
597 people like this

684 people follow this

113 check-ins

About

See All



2020 E Grand River Ave, Ste 104
Howell, Michigan 48843

Get Directions

(517) 545-5944

www.livingstoncatholiccharities.org

Charity Organization · Social Service · Nonprofit Organization

Hours 9:00 AM - 9:00 PM
Open Now

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Facebook is showing information to help you better understand the purpose of a Page. See actions taken by the people who manage and post content.

Page created - April 4, 2011

- Home
- About
- Jobs
- People
- Ads



Similar pages

- Growing Hope** Food Production + Follow
- Herb Nutritionals Co.,Ltd** Biotechnology + Follow
- City of Ann Arbor** Government Admi... + Follow
8 school alumni

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Livingston County Catholic Charities
Non-profit Organization Management · Howell, MI · 71 followers

Serving ALL Livingston County residents!

Following [Visit website](#)

Pages people also viewed

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Herb Nutritionals Co.,L...
366 followers

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8 school alumni work here

Follow

International Plant-Bas...
1,803 followers

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2,614 followers

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All Images Documents Videos Sort by: Top

Livingston County Catholic Charities 70 followers 5d ·

Caregiver Tip of the Week

[#caregivers](#) [#caregiversupport](#) [#caregiving](#) [#dementiacare](#) [#parkinson](#) ...see more

People with dementia often feel confused, anxious, and unsure of themselves. Further, they often get reality confused and may recall things that never really occurred. Avoid trying to convince them they are wrong. Stay focused on the feelings they are demonstrating (which are real) and respond with verbal and physical expressions of

Promoted

An Alternative to Fusion

Find the surgeons near you who've joined the motion preservation movement

[Learn more](#)

Drug Safety Measure

100% online, No co-visits, Progress at pace, Student-Focused

[Learn more](#)

Messaging



Search



- Home
- About
- Jobs
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- Ads

At LCCC we are seeing a higher number of seniors in our Senior Services programs presenting with financial exploitation.

...see more

**Are They or Aren't They?
Is Your Customer
a Victim of
Financial Exploitation?**

IMPORTANT INFORMATION FOR:
Cashiers, financial institutions tellers,
pharmacy technicians, gas station attendants,
managers, and anyone that works with seniors
where there is exchange of money.

Please join Livingston County Catholic Charities senior services staff for an informative and educational program on Financial Exploitation of seniors. You will learn Red Flags to look for noting that a senior or vulnerable adult is potentially being victimized by a predator who is trying to separate them from their money or assets. You will also learn where and how to report that a vulnerable adult or senior you suspect is being victimized and how to approach the adult to intervene.

Special Guest Speaker: Tom Holcomb, Prosecuting Attorney's Association of Michigan

Join Us
February 11, 2020
12:30 to 3:00 pm

at
Livingston County
Catholic Charities
2020 E. Grand River Ave.
Suite 104
Howell, MI 48843

A light lunch will be served

**FREE
REGISTRATION**

R.S.V.P. required by
February 7, 2020
to Beth
at 517-545-5944
or beth@
livingstoncatholiccharities.org

www.livingstoncatholiccharities.org

1

Like Comment Share

Be the first to comment on this



Livingston County Catholic Charities

71 followers

1mo •

Do you enjoy making a difference in the lives of others as a SUBSTANCE ABUSE & MENTAL HEALTH THERAPIST?

Livingston County Catholic Charities seeks to add a full-time therapist to join our staff to provide Outpatient Substance Abuse Counseling and Mental Hea ...see more

1

Like Comment Share

Be the first to comment on this



Livingston County Catholic Charities

71 followers

2w •

Please share...LCCC offers a competitive benefits package.

[#jobs](https://lnkd.in/ewnbdZ9)



SUBSTANCE ABUSE & MENTAL HEALTH THERAPIST

jobs.livingstondaily.com



Messaging

Foll
Foll
Foll



(<https://www.lcunitedway.org>)

Donate Now (<http://www.lcunitedway.org/donate/>)

HOME (https://www.lcunitedway.org/)	WHO WE ARE	WHAT WE DO	GET INVOLVED
EVENTS	WOMEN UNITED (https://www.lcunitedway.org/women-united/)		
DAY OF CARING (https://www.lcunitedway.org/day-of-caring/)			



Partners

Companies

Our valued partner companies do amazing things for the community. In addition to running an annual campaign with their employees benefiting Livingston County United Way, many of them make corporate gifts as well as sponsorships of vital United Way events.

[List of Corporate Campaign Partners \(https://www.lcunitedway.org/wp-content/uploads/2018/03/Corporate-sponsors.pdf\)](https://www.lcunitedway.org/wp-content/uploads/2018/03/Corporate-sponsors.pdf)

Nonprofits

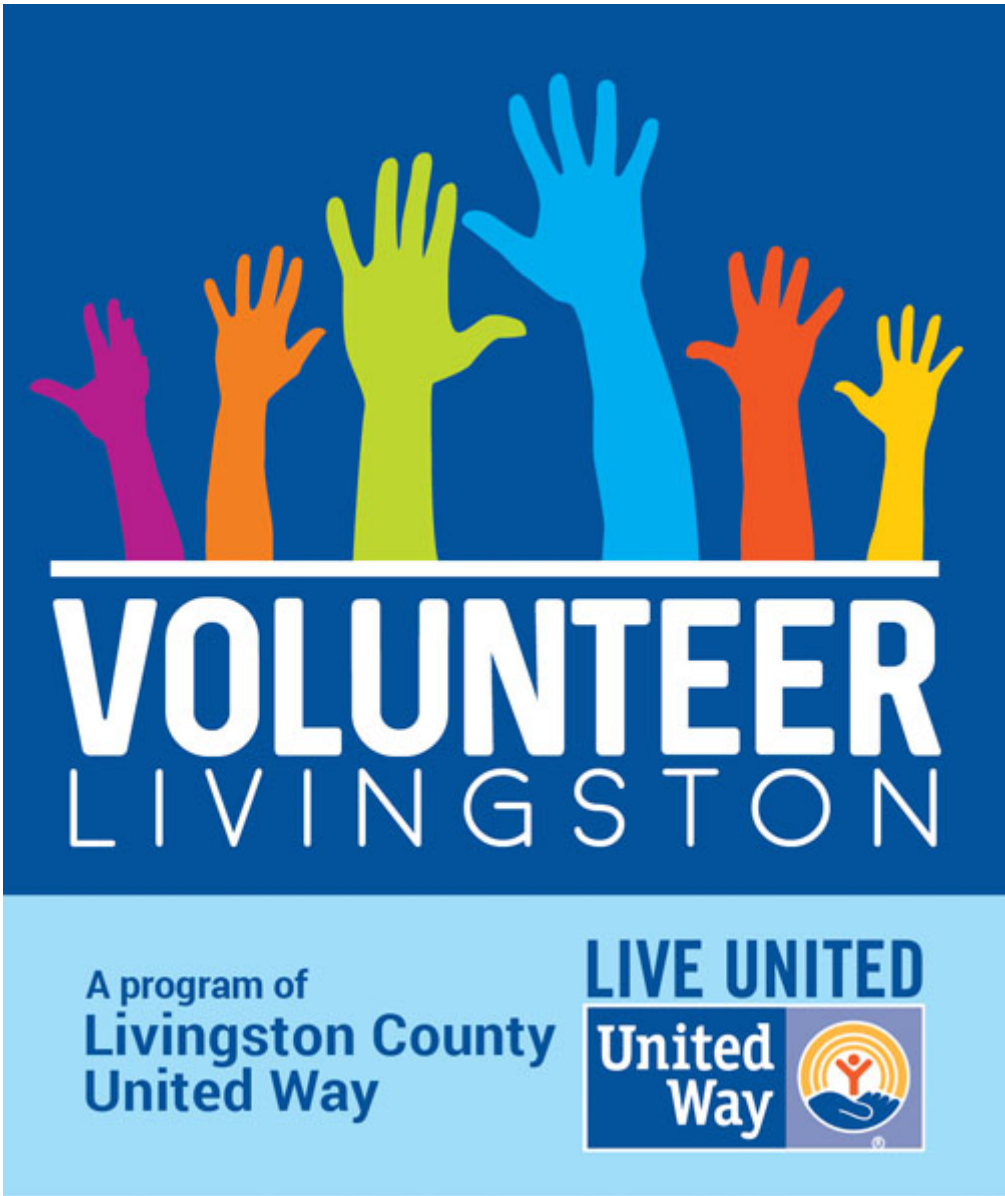
Area nonprofits, both individually and through collective initiatives, are vetted for results and accountability. These are the programs/partners that are receiving LCUW funding in the current fiscal year:

Initiatives and Coalitions

- 2-1-1 United Way Helpline
- Great Start Livingston
- Livingston County Homeless Continuum of Care Committee
- Livingston County Hunger Council
- Livingston Promise
- Livingston Council for Youth
- Day of Caring
- Volunteer Livingston

Partner Agencies

- The Arc of Livingston
- Big Brothers/Big Sisters of Livingston County
- Catholic Social Services Washtenaw County – Livingston Region
- Child Connect for Family Success
- Girl Scouts Heart of Michigan
- Gleaners Community Food Bank
- Hartland Senior Activity Center
- Howell Senior Center
- Howell Teen Center
- Key Development Center
- LACASA
- Legal Services of South Central MI
- Livingston Educational Service Agency (LESA)
- Livingston County Catholic Charities
- Livingston County Senior Nutrition (Meals on Wheels)
- Livingston Family Center
- OLHSA (Oakland Livingston Human Service Agency)
- Pregnancy Helpline
- Special Ministries
- The Salvation Army



(<http://www.volunteerlivingston.org>)

VOLUNTEERS NEEDED



Bring Joy to a Homebound Senior!

*Are you looking for a lunch date?
Do you enjoy playing cards or discussing
current events?*

Livingston County Catholic Charities (LCCC) is looking for volunteers who like working with older adults. Opportunities include, but are not limited to:

- Friendly home visits
- Transportation to appointments
- Errands
- Respite care for family members

An hour or two a week or month can make the world of difference!

If you know of anyone that would benefit from these services or if you would like to become a volunteer, please contact Katie at (517) 545-5944 ext. 121 or katie@livingstoncatholiccharities.org.

VOLUNTEER CAREGIVER PROGRAM



LIVINGSTON COUNTY
CATHOLIC
CHARITIES
HELPING LIVES GROW

Bring Joy to a Homebound Senior!

Friendly home visits, Errands,
Transportation to appointments,
Respite care for family members

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LIVINGSTON COUNTY
**CATHOLIC
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HELPING LIVES GROW

For more information on our senior programs go to:
www.livingstoncatholiccharities.org.

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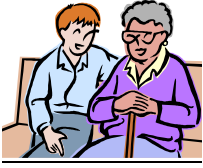
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VOLUNTEER CAREGIVER PROGRAM

Bring Joy to A Home-bound Senior!

15 Volunteers are needed to test a Volunteer Caregiver toolkit between Jan. 1 and June 30, 2020 for a study.

Volunteer activities will include Saturday friendly visits or respite visits with home-bound county senior citizens. These seniors experience isolation, loneliness and depression.

To learn more about this unique opportunity or to sign up to join the study, please contact Jamie or Katie at 517-545-5944 or katie@livingstoncatholiccharities.org.



LIVINGSTON COUNTY
CATHOLIC CHARITIES
HELPING LIVES GROW



VOLUNTEER CAREGIVER PROGRAM

Bring Joy to A Home-bound Senior!

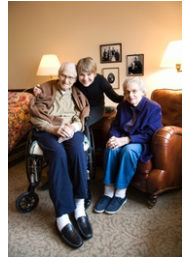
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LIVINGSTON COUNTY
CATHOLIC CHARITIES
HELPING LIVES GROW



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LIVINGSTON COUNTY
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HELPING LIVES GROW



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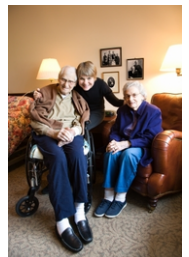
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LIVINGSTON COUNTY
CATHOLIC CHARITIES
HELPING LIVES GROW



LIVINGSTON COUNTY CATHOLIC CHARITIES

Our Vision

“LIVINGSTON COUNTY CATHOLIC CHARITIES AIMS TO PROVIDE QUALITY HUMAN SERVICES TO LIVINGSTON COUNTY RESIDENTS REGARDLESS OF RACE, GENDER, RELIGION, AGE, DISABILITY OR FINANCIAL ABILITY.”

Who We Are

Since 1985, Livingston County Catholic Charities has been dedicated to serving individuals, families, groups and the entire community through caring, compassionate, and strength based programs. Through the years we have served thousands through programs and services that help people to heal, grow and experience a greater quality of life.

Our Mission

“The Mission of Livingston County Catholic Charities is the work of the Catholic Church, to share the love of Christ by performing the corporal and spiritual works of mercy.”



LIVINGSTON COUNTY CATHOLIC CHARITIES HELPING LIVES GROW



They are like a tree planted near streams of water, that yields its fruit in season; Its leaves never wither; whatever they do prospers. —Psalm 1:3



LIVINGSTON COUNTY CATHOLIC CHARITIES HELPING LIVES GROW

2020 E. Grand River, Suite 104
Howell, MI 48843
Office: (517) 545-5944
Fax: (517) 518-8275
LivingstonCatholicCharities.org



LIVINGSTON COUNTY CATHOLIC CHARITIES HELPING LIVES GROW

Generous Funding Provided By:

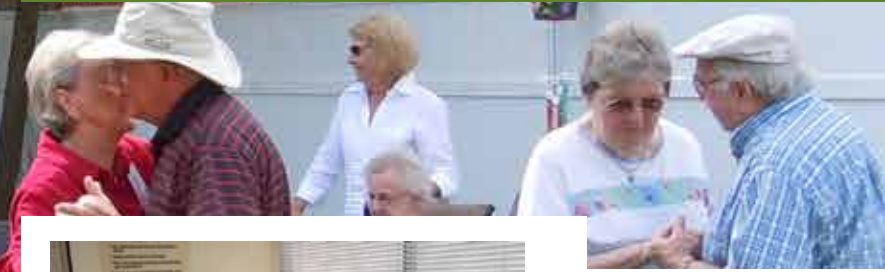
- Community Mental Health Partnership of Southeast Michigan*
- Diocese of Lansing*
- Livingston County United Way*
- County of Livingston*
- Michigan Dept. of Corrections*
- Michigan Dept. of Health and Human Services*
- The Federal Older Americans Act Funds the AASA through Area Agency on Aging 1-B*
- Other generous individuals and organizations*

Providing Care for All People and Helping them Grow, Heal and Prosper in a Greater Quality of Life



Down the middle of the street. On either side of the river grew the tree of life that produces fruit twelve times a year, once each month; the leaves of the trees serve as medicine for the nations.

—Revelation 22:2



You Can Help!

Volunteer

- Volunteer drivers, respite care, errands, phone support, etc. for home bound seniors
- Loaves & Fish or other fundraisers
- Share your talent or story at “Be Our Guest Adult Day”
- Volunteer for Run Against Drugs
- Light office work

Donation Opportunities

- Bequests
- Choose Livingston County Catholic Charities for your Amazon Smile Rewards, VG’s Rewards, Meijer Community Rewards
- “Salute to the Stars” Sponsorship
- Loaves & Fish Appeal
- Endowment Fund through Community Foundation for S.E. Michigan
- Donations accepted on our website: www.LivingstonCatholicCharities.org



Parish Ministry

We CARE Couples Communication, Catholic Council on Aging, Divorce & Beyond.

Volunteer Caregiver Program

Volunteer services designed to assist older or disabled adults to remain independent and in their own homes with grace and dignity.

Senior Resource Advocacy

Providing support and information on resources available in the community to individuals 60 years and older.

Be Our Guest Adult Day

A supportive and caring environment for memory impaired adults who would benefit from a structured day setting. Our goal is to provide meaningful services that enrich the lives of older adults, families and caregivers.



Substance Abuse Prevention

Partnering with the Livingston County Community Alliance and the Livingston Community Prevention Project to raise awareness of alcohol, tobacco, and other drugs through county-wide substance abuse awareness campaigns and prevention activities.

Substance Abuse Treatment

Services include assessment, case management, peer support, individual and group therapy for teens and adults.



Counseling

Accredited family service agency offering mental health counseling for individuals, groups, couples, families, and children.

Child Welfare

Foster Care and Adoption services for children needing temporary or permanent out-of-home placement with caring and committed families.

Brochure is 13.92" x 8.5"

Generous Funding Provided By:

Livingston County United Way
Livingston County

Livingston/Washtenaw Substance Abuse
Coordinating Agency

Diocese of Lansing

The Federal Older Americans Act
Funds the AASA through Area Agency
on Aging 1-B

Private Donations

These programs are administered by
Livingston County Catholic Charities. The
agency is in compliance with: The Federal
Civil Rights Act of 1964. The Elliot Larsen
Civil Rights Act (P.A. 453 of 1976) The
Michigan Handicappers Civil Rights Act
(P.A. 220 of 1976); and Section 504 of The
Federal Rehabilitation Act of 1973.
Equal Opportunity Employer. Reasonable
accommodation will be provided upon
notification or request.



Resource Advocate

Our Resource Advocates assist
Aging Adults and their families by
coordinating and/or locating services
to meet ever changing needs.

These local/state/federal services
enhance the ability of Aging Adults
to maintain independence within the
comfort of their own home.

Resources meet social, emotional
and/or physical needs...

- Adult Day Care
- Counseling
- Homebound Meal and Food Supplies
- Home Care
- Help Coordinate In-home Services
- Legal Service
- Prescriptions
- Transportation
- Medicare Part D Counseling
- Medicaid Application Assistance
- And more...

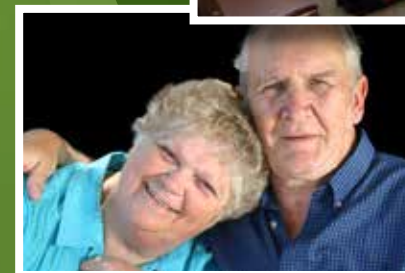


LIVINGSTON COUNTY
**CATHOLIC
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HELPING LIVES GROW

Contact Us

2020 E. Grand River
Suite 104
Howell, MI 48843
Phone: (517) 545-5944
Fax: (517) 545-7390

E-mail: suzi@livingstoncatholiccharities.org
www.livingstoncatholiccharities.org



LIVINGSTON COUNTY
**CATHOLIC
CHARITIES**
HELPING LIVES GROW

Senior Services



Brochure is 13.92" x 8.5"

LIVINGSTON COUNTY CATHOLIC CHARITIES

Our Mission

"The Mission of Livingston County Catholic Charities is the work of the Catholic Church, to share the love of Christ by performing the corporal and spiritual works of mercy."

Vision Statement

Livingston County Catholic Charities aims to provide quality human services to Livingston County residents regardless of age, race, religion, gender, disability and financial ability.



Caregiver Services Include:

- Companionship and Friendly Visiting
- Shopping
- Telephone Reassurance
- Letter Writing
- Errands
- Transportation
- Respite

Through this program you have the rewarding opportunity to reach out and help others.



LIVINGSTON COUNTY
CATHOLIC CHARITIES
HELPING LIVES GROW

*Call us today at
(517) 545-5944
to find out how
you can make a
difference.*

Be Our Guest Adult Day Service

Be Our Guest Adult Day Service (BOGADS) is a valuable resource for individuals and families dealing with dementia and other chronic health care concerns. BOGADS provides a person centered day that consists of therapeutic recreation, social activities and helps participants find purpose and meaning in their day.

Benefits:

- Caregivers get a break to allow more time for themselves.
- Stimulation for your loved one by providing person centered activities.
- Flexible and affordable, offering a sliding scale fee.
- Emotional and social support for caregivers and guests.
- Allows individuals who suffer with dementia to remain in the home longer with supportive services.
- Health and medication monitoring with RN oversight.
- Caring staff that targets guest's needs.
- Transportation services available.

Volunteer Caregiver

The Volunteer Caregiver program is a volunteer coalition designed to assist individuals 60+ years of age or disabled adults, including those with social and/or economic needs, to remain independent and in their own home.

YOU CAN MAKE A DIFFERENCE in the life of someone who is struggling to remain independent. Everyone has a special gift to offer, and the Volunteer Caregiver Program provides all of the training and support needed to help volunteers share their talents with others.

**Do you need assistance to remain independent?
Can you offer help to those in need?**

Name _____ Phone _____

Address _____ State _____ Zip _____

Check:

- I am interested in learning more
- I would like to be a volunteer
- I would like to donate \$ _____ to LCCC's Senior Services
- Please accept this donation in memory of _____

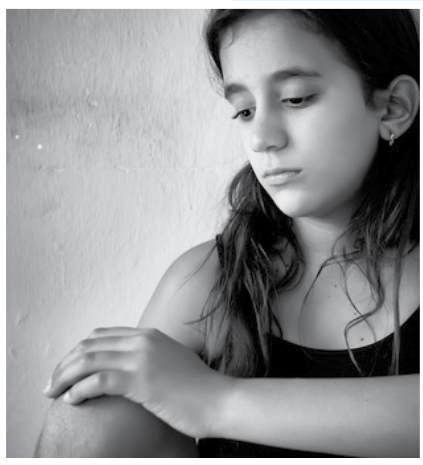
Mail to: Senior Services Program, L.C.C.C., 2020 E. Grand River, #104, Howell, MI 48843
(517) 545-5944

- Play Therapy for children
- Anger Management Therapy Group – This SAMHSA approved anger management group will help individuals deal with issues associated with anger as well as give them practical skills to monitor and reduce anger. This is an open-ended and on-going group. An assessment is required before entering the group. See the event calendar on our website for the schedule.

Counseling Staff:

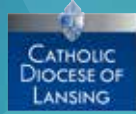
All Mental Health and Substance Abuse Treatment therapists are Master-Level Social Workers, Psychologists, or Counselors and are licensed by the State of Michigan. The Psychiatrist is licensed by the State of Michigan.

For appointments call 517-545-5944 and an Intake Coordinator will assist you with scheduling your appointment. If it is an urgent matter or after hours, contact Livingston County Community Mental Health at 800-615-1245 or go to the nearest emergency room.



Generous Funding Provided By:
 Washtenaw Community Health
 Organization: Substance Abuse
 Coordinating Agency
 Diocese of Lansing
 Livingston County United Way
 County of Livingston
 Michigan Department of Corrections

These programs are administered by Livingston County Catholic Charities. The agency is in compliance with: The Federal Civil Rights Act of 1964. The Elliot Larsen Civil Rights Act (P.A. 453 of 1976) The Michigan Handicappers Civil Rights Act (P.A. 220 of 1976); and Section 504 of The Federal Rehabilitation Act of 1973. Equal Opportunity Employer. Reasonable accommodation will be provided upon notification or request.



LIVINGSTON COUNTY
CATHOLIC CHARITIES
 HELPING LIVES GROW

Contact Us

2020 E. Grand River
 Suite 104
 Howell, MI 48843
 Phone: (517) 545-5944
 Fax: (517) 545-7390

E-mail: james@livingstoncatholiccharities.org
www.livingstoncatholiccharities.org



LIVINGSTON COUNTY
CATHOLIC CHARITIES
 HELPING LIVES GROW

Counseling

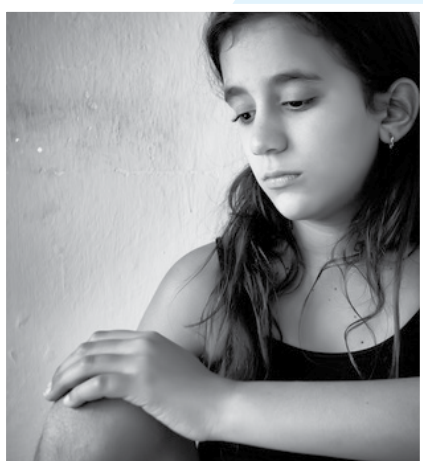


- Play Therapy for children
- Anger Management Therapy Group – This SAMHSA approved anger management group will help individuals deal with issues associated with anger as well as give them practical skills to monitor and reduce anger. This is an open-ended and on-going group. An assessment is required before entering the group. See the event calendar on our website for the schedule.

Counseling Staff:

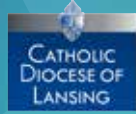
All Mental Health and Substance Abuse Treatment therapists are Master-Level Social Workers, Psychologists, or Counselors and are licensed by the State of Michigan. The Psychiatrist is licensed by the State of Michigan.

For appointments call 517-545-5944 and an Intake Coordinator will assist you with scheduling your appointment. If it is an urgent matter or after hours, contact Livingston County Community Mental Health at 800-615-1245 or go to the nearest emergency room.



Generous Funding Provided By:
 Washtenaw Community Health
 Organization: Substance Abuse
 Coordinating Agency
 Diocese of Lansing
 Livingston County United Way
 County of Livingston
 Michigan Department of Corrections

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LIVINGSTON COUNTY CATHOLIC CHARITIES

Our Mission

“The Mission of Livingston County Catholic Charities is the work of the Catholic Church, to share the love of Christ by performing the corporal and spiritual works of mercy.”

Vision Statement

Livingston County Catholic Charities aims to provide quality human services to Livingston County residents regardless of age, race, religion, gender, disability and financial ability.

LCCC participates with many major insurance companies, managed care programs and specialized grant programs. LCCC also provides a sliding scale fee (based on total household income) for persons who are uninsured and who do not qualify for services through a managed care or grant program.

Substance Abuse Counseling

Addiction is a complex disease that negatively affects every aspect of a person’s life. The primary goal of treatment at Livingston County Catholic Charities is to assist the client towards recovery from chemical dependence and its impact on healthy daily functioning. An individual who engages in treatment is expected to maintain abstinence.

Program Components:

- Case Management
- Peer Support
- Comprehensive Individual Assessment
- Treatment Planning
- Individual and Group Therapy
- Community Support
- Family Therapy

Treatment is designed to deal with issues which hinder a person from moving forward in their life and to enhance their ability to develop healthy daily functioning.

Co-Occurring Disorders: At times, some alcohol and drug abusers also experience a diagnosed mental health disorder. Trained therapists are able to work with individuals experiencing dual diagnosis. A client with a dual diagnosis, when determined necessary, may be referred to the agency psychiatrist for a psychiatric assessment and medication monitoring.



Mental Health Counseling



The Livingston County Catholic Charities Mental Health Program

is designed to help you sort out the problem areas in your life. The goal of counseling is to help you find the energy and strength to solve the issue you are dealing with. The counselors take a hands-on approach arising from years of professional experience.

Services offered:

- Counseling is available for individuals, youth, marital and families.
- Short-term problem focused therapy – don’t want to spend months, even years in therapy? The therapist will empower you with the tools and skills needed to improve the quality of your life in 6-12 sessions.
- Psychiatrist – if needed, a referral to our psychiatrist will be scheduled after the initial assessment is completed. For clients being discharged from the hospital, an appointment will be scheduled after the first therapy session.
- Dialectical Behavior Therapy



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Press Release

June 17, 2019

Livingston County Catholic Charities (LCCC), in collaboration with Altarum's Program to Improve Eldercare (PIE), received a \$100,000 grant from the Michigan Health Endowment Fund to create a ***MI Caregiver Corps toolkit***.

Altarum, in working with LCCC the last two years overseeing evaluations of grantees from the Ralph C. Wilson Jr. Foundation, was impressed with the services LCCC provides to seniors, families and caregivers through LCCC's senior service programs and expressed an interest in collaborating to create a toolkit that can be shared nationwide to aide caregivers. As the population of older adults needing assistance in Michigan, and nationally, accelerates, communities are being challenged to develop innovative methods for engaging and more fully developing local resources and programs. LCCC and Altarum will work together to create and test a comprehensive *MI Caregiver Corps* toolkit to help local organizations recruit, assess, train and sustain volunteer caregivers who will be a critical part of the workforce needed to support the growing needs of the aging population.

Together, we aim to ease the community stress of an inadequate caregiving workforce and the family stress of the need for respite from eldercare by standardizing and promoting the development of high-quality, low or no cost supports. The *MI Caregiver Corps* training will prepare volunteers to provide in-home care to frail elders who need assistance with Instrumental Activities of Daily Living (preparing meals, light housework, transportation, shopping, etc.), but not personal care to assist with Activities of Daily Living (bathing, showering, toileting, dressing, etc.). This aim of the toolkit is to create volunteer programs to provide support services that volunteers will be comfortable performing and that will strengthen the entire care system by supporting the caregivers, ultimately allowing the elder to remain living at home or with family, thus deferring the cost of assisted living.

Altarum Eldercare specialist, Sarah Slocum said, "We are very excited to assist LCCC in development and testing of this important model to aid elders and people with disabilities in Livingston County. The Federal Administration for Community Living released a federal funding opportunity to take these ideas and apply them across the nation. LCCC is a trailblazer in creating the Michigan Caregiver Corps to help families, augment paid care, and improve quality of life for the people they will serve."

In this partnership, Altarum will serve as the primary writer and will utilize LCCC's existing Volunteer Caregiver program to learn from and expand upon, in addition to other researched methods. The two organizations will engage an advisory group that will meet quarterly, made up of national and local experts in volunteer programs, community service provision and caregiving. LCCC will then use the toolkit to recruit, assess and train 15 volunteers that will help to test and provide feedback on the toolkit, allowing Altarum to modify and enhance it. Upon successful completion of the *MI Caregiver Corps* toolkit, it will be licensed as a Creative Commons product on various interested internet sites in print and as a YouTube video and will be freely available to all interested organizations.

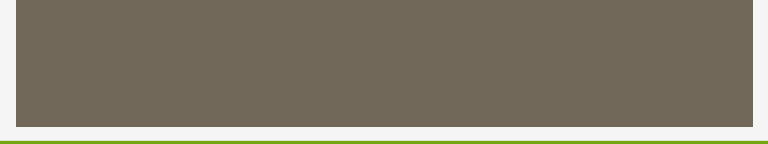
LCCC will begin recruiting volunteers for this important project in January 2020. If you would be interested in participating in this exciting study, please contact Katie or Jamie at 517-545-5944 to join our list for a callback in January.



LIVINGSTON COUNTY
**CATHOLIC
CHARITIES**
HELPING LIVES GROW

Volunteer Caregiver Program

Presented by:
Linda Bauby



*To the world you may be
one person, but to one
person you may be the
world.*

VCP – What do we do?

- Through this program you have the rewarding opportunity to reach out to others
- Friendly Visits
- Respite Visits
- Transportation





BELIEVE
THERE IS
GOOD IN
THE WORLD

Friendly Visitors

- Provide companionship to seniors in their homes
- Play cards, read a book, have lunch together



Respite Visitors

- Similar to friendly visitors
- Provides caregivers a short relief
- Benefits seniors and their families



Transportation

- Appointments
- Shopping
- Errands
- Mileage reimbursement available



Volunteer Trainings

- A training is held every 6 months
- Guests present on topics that help us to better serve our seniors
- Pictured: volunteers using goggles and straws to simulate common vision and breathing problems





Are you looking for a lunch date?

Do you enjoy playing cards or discussing current events?

An hour or two of your time can make a world of difference to a homebound senior.

You Can Make a Difference

“It is my pleasure and privilege to volunteer with LCCC. I appreciate and applaud what you all do at LCCC for the people of Livingston County” – Jackie, a VCP volunteer

You Do Make a Difference

"I would be lost without your help. God bless you all." – VCP client



THANK YOU





Did you know Volunteer Livingston offers more than just volunteer recruitment & referral?

Let us help you grow your volunteer program through the Volunteer Coordinator Coalition!

Volunteer Livingston has been helping connect local residents with rewarding volunteer opportunities since 2002. It is our goal to help mobilize volunteers to meet the needs of area nonprofits and assist with strengthening and supporting agency volunteer programs. Over the years, we have found that it is important for area volunteer coordinators to meet, discuss, strengthen and support one another as we strive to meet the needs of our community.

Our monthly peer group is the Volunteer Coordinator Coalition. This group meets the second Thursday of the month for a brown bag lunch meeting from 9:00 a.m. to 10:30 a.m. at the Livingston County United Way (2980 Dorr Road, Brighton). Each month we offer training and discussion on a variety of issues faced by volunteer management professionals, including volunteer recruitment, retention, appreciation, program development and training.

This year we will have sessions on engaging youth in volunteerism, reaching volunteers of all ages, volunteer management best practices, and finding ways to meaningfully engage groups/corporations! We are honored to be a part of a warm and caring community of volunteer professionals and sincerely hope that you will join us!

Join our Google Group!

In addition to our monthly meetings, we also have a closed Google discussion group for local volunteer managers. Sign up here: <https://groups.google.com/forum/#!forum/vcclc>
(<https://groups.google.com/forum/#!forum/vcclc>)



Join us for hors d'oeuvres & refreshments at an Open House
celebrating volunteerism in Livingston County!

Thursday, September 12

5:30 pm to 7:30 pm

Cash Bar

M.J. Brighton

4141 Bauer Rd, Brighton



Last Day!!!
It's not too late to register!

It's not too late to register for this free event!
Email volunteerlivingston@gmail.com
today to reserve your spot!

An invitation to local non-profits:

CITIZENS INSURANCE HUMAN SERVICE ORGANIZATION FAIR

FOCUSING ON VOLUNTEER OPPORTUNITIES

WHEN: Tuesday, October 1, 2019

WHERE: Citizens Insurance: 808 N. Highlander Way, Howell, MI

TIME: 11:30am – 1:30pm (Set up at 11am)

PURPOSE: Raising awareness of the needs for volunteering at
local human service organizations

COST: None

BRING: Table covering, display, service information and
volunteer job descriptions

ALTERNATIVE: If you cannot attend, please feel free to email
your volunteer postings to tdudansky@lcunitedway.org by
Monday, September 30 for distribution at the event.

RSVP: Contact Tracy at (810) 494-3000 or
tdudansky@lcunitedway.org no later than September 20th to
reserve a table.



LCCC Volunteer Agreement

Universal Precautions - Protection against Bloodborne Pathogens

It is expected that volunteers will generally not come in contact with blood or body fluids. However, this information is provided to educate the volunteer on universal precautions in this unlikely event.

Following these instructions when dealing with blood or any body fluids (urine, feces, spit or vomit) visibly contaminated with blood.

Basic First Aid

- a. Help the individual remain calm
- b. Put on gloves. Locate a bandage or gauze to stop the bleeding.
- c. If the cut is deep or the bleeding will not stop after a reasonable time, call 911.
- d. When the bleeding has stopped, clean the cut with water.
- e. Use the bathroom sink when possible, the kitchen sink may expose food items to blood.
- f. Place bandage over cut.
- g. In you are no longer at risk for contact with blood, remove gloves.
 - i. Removal of gloves
 1. Remove the glove from one hand by pinching it at the base of the hand and pulling it off.
 2. Hold the removed glove in your gloved hand.
 3. With a finger, slip the other glove off from the inside, turning it inside out as you go.
 4. The glove you removed first will be inside the second glove.
 5. Dispose of the gloves in a plastic bag.

Steps for Hand Washing

- a. Use warm water to wet hands.
- b. Use soap that foams; it is the bubbles that remove the germs.
- c. Scrub your hands thoroughly for at least 10 seconds.
- d. Rinse with warm water. Do not turn off faucet with clean hands.
- e. Dry your hands with paper towel.
- f. Use paper towel to turn off the faucet.
- g. Dispose of paper towel in plastic bag.
- h. If you do not have access to a sink, use Hand Sanitizer.

Dispensing Medication

LCCC volunteers do not dispense of any type of prescription or over the counter medications to participants. Volunteers are not trained in pharmacology; they do not have the knowledge or training to administer medications, injections or IV therapy. We are unable to provide this service due to liability.

Emergency Policies and Procedures

Non-Life Threatening Emergency

Volunteer should always observe the care receiver's physical and mental condition. If any changes are observed the volunteer should report this to the Coordinator of the Volunteer Caregiver program, or Director of Senior Services.

If an individual experiences an injury while service is in progress, the volunteer should:

- Encourage the person to seek medical attention
- Help person arrange for medical attention such as a doctor or call 911.
- Volunteer should call the Volunteer Caregiver Coordinator as soon as possible regarding the situation and action taken.

Life Threatening Emergency

When a care receiver has a life threatening emergency and the spouse or primary caregiver is present:

- The spouse or primary caregiver is in charge of what to do.
- Volunteer, upon request, may lend advice or assistance with supportive care (calls ambulance, get a blanket or pillow, etc.)
- Volunteer is not to accompany the ambulance to the hospital or go with the caregiver.
- Volunteer should call the Volunteer Caregiver Coordinator as soon as possible regarding the situation and action taken.
- After you have notified LCCC, you will need to complete an incident/accident form. Incident/accident form is located in your volunteer training packet.

When a care receiver has a life threatening emergency and there is no spouse or caregiver present:

- Volunteer is to call 911 and report the nature of the emergency.
- Volunteer is to try to make the individual as comfortable as possible.
- Volunteer is not to go with individual to the hospital.
- Volunteer should call the Volunteer Caregiver Coordinator as soon as possible regarding the situation and action taken.
- After you have notified LCCC, you will need to complete an incident/accident form. Incident/accident form is located in your volunteer training packet.

Communication and Documentation

Most scheduling is done by phone or email. If you are able to communicate with LCCC staff by email, please remember confidentiality. When emailing do not use participant first and last names unless the email is through an encrypted email address, you can use initials only. Please make sure we have your up to date email contact information.

Volunteer Monthly Records are required to be completed for each service provided to participants. Please make sure to document names, dates, times and mileage onto Volunteer Monthly Record. These records are to be completed including volunteer signature and submitted to LCCC by the last Wednesday of each month. Volunteer Monthly Records can be submitted by mail, fax (#517-545-7390) or drop off at main LCCC location.

We do reimburse mileage for transportation. Please document onto the Volunteer Monthly Record if you wish to receive mileage reimbursement.

If a participant attempts to pay you for services, it is our policy for volunteers not to accept money. Please inform the participant that a donation slip will be mailed to them. We are appreciative of any donations, this helps keep the invaluable program available for other individuals in need of service.

Volunteers that provide transportation services will be asked to keep Driver's License, Car Registration and Car Insurance up to date in volunteer file. You will be notified when these items are expiring by us and request updated copies.

Service Description and Delivery

We pride ourselves in making sure you are the right match. On our first visit, LCCC staff will introduce you to the participants. We do a follow up to your visit to ensure a good match along with a schedule that works for you and the participant.

When arriving at participant home, call for person at their door and identify self. Identify yourself to the office staff at appointments if you will be waiting for participant. If participant requests an additional stop, notify LCCC Volunteer Coordinator to set up transportation. All participants and volunteers must wear seat belts. All services must be arranged by LCCC office. LCCC will provide volunteers with picture name badges to use while in the community.

Do not give your personal telephone number or contact information to participants. When calling a client home, use *67 and 1 – area code and phone number. This will block your number from appearing on caller ID.

Volunteer Descriptions

Office Volunteer

Volunteers provide clerical and filing for LCCC program staff. Office volunteers provide office support as arranged by volunteer and LCCC staff.

Friendly Visitor

Volunteers provide companionship, supervision and friendly visits to isolated homebound individuals. Friendly visits are provided for one to two hours per week.

In Home Respite

Volunteer provides companionship, supervision, and friendly visits for individuals in the absence of the primary caregiver. Respite care is provided for two to four hours per week.

Transportation

Volunteers provide transportation to individuals in the absence of the primary caregiver. Transportation is provided when volunteer is available and to each individual volunteers preferences. It is recommended for volunteer to contact participant the day before scheduled transportation. The day before a scheduled transportation, it is recommended to call client to verify pick up times and if any changes have been made to schedule.

PEANE Volunteer

Volunteers provide educational materials and presentation support services for LCCC Prevention of Elder Abuse, Neglect and Exploitation (PEANE) program staff to the community. PEANE volunteers provide as needed service requests.

Be Our Guest Adult Day

Volunteer provide companionship, and socialization with guests attending program. Volunteers assist with facilitation of group and individual activities by supporting and/or guiding guests to reach care plan goals.



Acknowledgement of Volunteer Policy and Procedure Manual

The Livingston County Catholic Charities (LCCC) Volunteer Policy and Procedure Manual is not a contract of employment. Nothing contained in this manual or in any other statement of agency policy, including statements made in the course of orientation, training or performance evaluations, should be taken as constituting an expressed or implied promise of employment. Employment is a separate relationship with LCCC and, while there are commonalities between the employment volunteer relationships, these are distinctly separate.

The Board of Directors is committed to maintaining compliance with federal and state laws, licensing, and accreditation requirements. To accomplish this objective, the agency will maintain the necessary flexibility and reserve the right to revise the policies and procedures described in the Volunteer Policy and Procedure Manual at any time the Board determines such a change is desirable or necessary. Volunteers will be provided a written copy of all changes.

All matters covered throughout these policies and procedures apply to all volunteers, whether providing direct services to clients or non-client related activities.

My signature verifies that I have a complete copy of the LCCC Volunteer Policy and Procedure Manual, and have been provided the opportunity to ask questions or to seek clarification.

LCCC Volunteer Agreement Acknowledgement

My signature verifies that I have a complete copy of the LCCC Volunteer Agreement, and have been provided the opportunity to ask questions or to seek clarification.

I hereby understand my volunteer role and responsibilities as described in LCCC Volunteer Agreement.

Volunteer Signature

Date

Program Director/Volunteer Coordinator

Date



Procedure for Automobile Registration, Car Insurance, and Driver's License in the Volunteer Caregiver Program

1. On initial orientation with volunteer for Volunteer Caregiver program, volunteers will provide agency with current automobile registration, and insurance along with Driver's License.
2. Volunteer name, automobile registration, insurance and Driver's License will be logged into Volunteer Caregiver Driving log.
3. Copies of the automobile registration, insurance and Driver's License will be placed in Volunteer file.
4. Each week, staff/volunteer will review Volunteer Caregiver Driving log to review dates for make contact to volunteers with expiration dates within the appropriate time frame.
5. Volunteers will be contacted by email/telephone regarding items and expiration dates and required to submit to agency before actual expiration date.
6. When current automobile registration, insurance and Driver's License are received, new expirations dates will be logged onto Volunteer Caregiver Driving log and will placed in volunteer file.



Volunteer Caregiver Program

Volunteer Monthly Record Procedure

Livingston County Catholic Charities (LCCC) Volunteer Caregiver Program will complete a Volunteer Monthly Record for each participant which will include the following:

- Volunteer Name, month/year and service provided to participant.
- Date, participant name, hours and mileage of services provide.
- Participant signature is obtain if available.
- Volunteer signature is required to ensure services were provided.
- Volunteer will document if mileage reimbursement is required.
- Volunteers submit Volunteer Monthly Record form on a monthly basis to Volunteer Coordinator by the last Wednesday of each month.
- Volunteer may submit date, participant name, hours and mileage verbally before end of each month, but must submit completed Volunteer Monthly Record including volunteer signature by end of the month.
- LCCC supervisor/Volunteer Coordinator will review record and provide signature of approval.
- Volunteer Monthly Record will be recorded on to the monthly unit report.
- Volunteer Monthly Record will be filed in each individual participant file.

- e. Role of Supervision and Evaluation.
- f. The characteristics and needs of the clients to be served.
- g. Report forms.
- h. Ethics.
- i. Community Resources.

U. LIABILITY INSURANCE

The agency participates in the Protected Self Insurance Program of the Diocese of Lansing, which provides liability coverage for employees, board members, and volunteers when acting within the scope of agency duties. Employees and volunteers using their own cars for agency business must provide proof of auto insurance through their own insurance company. This automobile liability must be at a minimum level of \$100,000 per occurrence and \$300,000 total. Proof of liability coverage is required at the time of initial hire and annually thereafter. Proof of the legal ability to drive (i.e. driver's licenses) is also required at the initial approval as a volunteer and annually thereafter. Any claims would be made to the volunteer's insurance carrier. If the agency is named in a lawsuit when an accident has caused injury to another, the volunteer's insurance is primary with the agency insurance secondary.

V. TERMINATION

Volunteers may terminate or discontinue the volunteer relationship with LCCC at any time. Volunteers with scheduled client activity are asked to provide the Volunteer Coordinator or Director of Senior Services with a minimum of one week notice in order that the scheduled client service is not disrupted.

The agency reserves the right to dismiss or terminate any volunteer, at any time during the volunteer status. The decision to dismiss a volunteer will only be made by the Director of Senior Services or by the Executive Director. The volunteer may request an explanation for the dismissal. Dismissal may occur for any reason, including the following:

- a. Unsatisfactory job performance.
- b. Violation of agency policy or procedure.
- c. Lack of need for the volunteer interest or skill.

VII. GRIEVANCE PROCEDURES

Volunteers have the right to present a grievance to the agency, which consists of any matter of personal concern or dissatisfaction regarding his/her volunteer experience, as follows:

1. Any grievance will be discussed between the volunteer and the Volunteer Coordinator, and brought by the Volunteer Coordinator to the Director of Senior Services. Disposition of the grievance will be rendered by the Volunteer Coordinator in writing within five business days.
2. Failing resolution at Step One, the volunteer may submit his/her grievance in writing within five business days to the Director of Senior Services. A disposition will be rendered in writing within five business days.
3. Failing resolution at Step Two, the volunteer may submit his/her grievance in writing within five business days to the Executive Director. The Executive Director will act upon the grievance within ten business days. The Executive Director may elect to hold a meeting with the volunteer, the Director of Senior Services, Volunteer Coordinator, and others involved. The volunteer may have a witness or representative present in such instance. The decision rendered by the Executive Director will be final and will be given to the volunteer in writing stating the basis of the action.

What are Personal Boundaries?

Types of Boundaries

Time Boundaries: To have healthy time related boundaries, you must set aside enough time for each area of your life, including work, personal relationships, and hobbies. Time boundaries are violated when another person demands too much of another person's time.

Emotional Boundaries: This refers to a person's feelings. Healthy boundaries include limitations on when and when not to share personal information. These boundaries are violated when one person dismisses, belittles, or criticizes the feeling of another.

Intellectual Boundaries: Referring to appropriate discussion involving religion, politics, and others ideas. When someone dismisses or criticizes another's beliefs or ideas, this could be considered a violation.

Physical Boundaries: This refers to physical touch and personal space. Awareness of what is appropriate and what isn't in various settings (hugging, shaking hands, kissing). Violations to this would be touching someone that doesn't want you to, or personal space invasion such as going through someone's purse without permission.

Material Boundaries: This refers to possessions and/or money. Limits need to be set on who and what you will share. Sample violations would be if someone pressures you to give, or lend them your possessions.

Non Verbal Communication Skills

Non-verbal signals - Notice eye contact, gestures, posture, body movements and tone of voice.

Pay attention to your own tone of voice when speaking. Tone of voice can range from happy, enthusiastic, to angry and sad. People with hearing issues rely on non-verbal cues to help interpret what you are saying.

Make appropriate eye contact. Eye contact can be useful for non-verbal communication, but it also be overwhelming if you are intentionally staring at someone.

Don't hesitate to ask questions about non-verbal signals. A good thing to do is to repeat back your interpretation of what has been said and ask for clarification.

Use words and gestures. Words and gestures work together to make a point. Even if the recipient does not speak, consider using both to reinforce what you are saying.

Effective Listening

- Concentrate on what others are saying and doing
- Be in the moment. Think about not only what you hear, but also physical and emotional clues to help you better understand.
- Send the non-verbal message that you are listening
- Face forward, look into the eyes of the speaker. Don't look around at other objects when someone is speaking. **DON'T STARE!** Staring begins after looking into someone's eyes for 4-5 seconds.
- Avoid early evaluations
- Don't assume that you know what the speaker is trying to say. If this happens, you will be letting your guard down and begin to show signs of boredom, frustration, and anxiety.

Communication and Alzheimer's

Alzheimer's disease and other dementias gradually diminish a person's ability to communicate. Communication with a person with Alzheimer's requires patience, understanding and good listening skills. The strategies below can help both you and the person with dementia understand each other better.

Changes in the ability to communicate are unique to each person with Alzheimer's. In the early stages of dementia, the person's communication may not seem very different or he or she might repeat stories or not be able to find a word. As the disease progresses, a caregiver may recognize other changes such as:

- Using familiar words repeatedly
- Inventing new words to describe familiar objects
- Easily losing his or her train of thought
- Reverting back to a native language
- Having difficulty organizing words logically
- Speaking less often

Helping the person with Alzheimer's communicate

People with Alzheimer's and other dementias have more difficulty expressing thoughts and emotions; they also have more trouble understanding others. Here are some ways to help the person with Alzheimer's communicate:

- Be patient and supportive.
Let the person know you're listening and trying to understand. Show the person that you care about what he or she is saying and be careful not to interrupt.
- Offer comfort and reassurance.
If he or she is having trouble communicating, let the person know that it's okay. Encourage the person to continue to explain his or her thoughts.
- Avoid criticizing or correcting.
Don't tell the person what he or she is saying is incorrect. Instead, listen and try to find the meaning in what is being said. Repeat what was said if it helps to clarify the thought.
- Avoid arguing.
If the person says something you don't agree with, let it be. Arguing usually only makes things worse — often heightening the level of agitation for the person with dementia.
- Offer a guess.
If the person uses the wrong word or cannot find a word, try guessing the right one. If you understand what the person means, you may not need to give the correct word. Be careful not to cause unnecessary frustration.
- Encourage unspoken communication.
If you don't understand what is being said, ask the person to point or gesture.
- Limit distractions.
Find a place that's quiet. The surroundings should support the person's ability to focus on his or her thoughts.
- Focus on feelings, not facts.
Sometimes the emotions being expressed are more important than what is being said. Look for the feelings behind the words. At times, tone of voice and other actions may provide clues.

Best ways for you to communicate

While a person with later-stage Alzheimer's may not always respond, he or she still requires and benefits from continued communication. When communicating with a person with dementia, it's especially important to choose your words carefully.

Identify yourself.

Approach the person from the front and say who you are. Keep good eye contact; if the person is seated or reclined, go down to that level.

Call the person by name. It helps orient the person and gets his or her attention.

Ongoing communication is important, no matter how difficult it may become or how confused the person with Alzheimer's or dementia may appear.

Use short, simple words and sentences.

Lengthy requests or stories can be overwhelming. Ask one question at a time.

Speak slowly and distinctively.

Be aware of speed and clarity. Use a gentle and relaxed tone — a lower pitch is more calming.

Patiently wait for a response.

The person may need extra time to process what you said.

Repeat information or questions as needed.

If the person doesn't respond, wait a moment. Then ask again.

Turn questions into answers.

Provide the solution rather than the question. For example, say "The bathroom is right here," instead of asking, "Do you need to use the bathroom?"

Avoid confusing and vague statements.

If you tell the person to "Hop in!" he or she may interpret your instructions literally. Instead, describe the action directly: "Please come here. Your shower is ready." Instead of using "it" or "that," name the object or place. For example rather than "Here it is" say "Here is your hat."

Turn negatives into positives.

Instead of saying, "Don't go there," say, "Let's go here."

Give visual cues.

To help demonstrate the task, point or touch the item you want the individual to use or begin the task for the person.

Avoid quizzing.

Reminiscing may be healthy, but avoid asking, "Do you remember when ... ?"

Write things down.

Try using written notes as reminders if the person is able to understand them.

Treat the person with dignity and respect.

Avoid talking down to the person or talking as if he or she isn't there.

Convey an easygoing manner.

Be aware of your feelings and attitude — you may be communicating through your tone of voice. Use positive, friendly facial expressions and nonverbal communication.

Aging and Pulmonary System

Chronic Obstructive Pulmonary Disease (COPD): which includes chronic bronchitis and emphysema, is a long-term lung disease that makes it hard to breathe.

Asthma: Most people with asthma experience a tight feeling in the chest, shortness of breath, coughing or wheezing at some point in their life. Asthma is a life-threatening disease, but it can be managed to minimize symptoms so people living with asthma can be active and healthy.

Sleep Apnea: Obstructive sleep apnea (OSA) is a disease that interrupts sleep by stopping and starting your breathing. Those with obstructive sleep apnea have airways that repeatedly collapse when throat muscles relax during sleep, blocking the flow of air. The disease causes snoring and choking or gasping during sleep.

Pulmonary Fibrosis: Pulmonary fibrosis is a disease where there is scarring of the lungs, which makes it difficult to breathe. Pulmonary fibrosis is one form of interstitial lung disease.

Cystic Fibrosis: Cystic fibrosis (CF) is an inherited disease that causes thickened mucus to form in the lungs, pancreas and other organs. In the lungs, this mucus blocks the airways, causing lung damage and making it hard to breathe. CF is a life-threatening condition, but thanks to advances in treatment and care, the average life expectancy has been steadily increasing and quality of life has improved.

Oxygen Canister Safety

Do's

- DO carry your portable tank only in the case supplied with it.
- DO use a cart or holster to carry portable oxygen cylinders.
- DO keep your oxygen delivery system out of the bright sunlight or other heat sources.
- DO secure your tank, cylinder or portable concentrator so it does not roll around in the car. Liquid tanks should never be laid on their sides; portable cylinders may be.
- DO bring extra batteries to power your concentrator in case of emergency.
- DO be aware that high altitudes, whether flying or just driving in the mountains, can increase your need for supplemental oxygen. Discuss how to handle this with your doctor, for example, increasing flow rate slightly for a period of time.

Don'ts

- DON'T put a portable tank inside a backpack or other carry bag.
- DON'T place your tank, cylinder or portable concentrator in a car trunk or other tightly enclosed space.
- DON'T overlook the fact that portable oxygen tanks can only carry a finite amount of oxygen. Depending on your flow rate, that supply may not last more than a few hours. If that is not sufficient for your needs, you may want to consider using a portable concentrator.

BODY MECHANICS

Body mechanics is the process of using the body safely and efficiently. By practicing good body mechanics and learning proper techniques, you can reduce the stress on your body and decrease the risk of injury.

The “ABC’s” of Good Body Mechanics

- Alignment – body is held in proper alignment, prevents strain on the joints and muscles.
- Balance – even distribution of weight. Base of support is your feet and your center of gravity is your torso.
- Coordinated – weight of your body to help with movement.

Lifting and Back Safety

- Plan your lift
- Stand close to the object
- Widen your base of support (feet spread apart)
- Do not twist
- Keep your back straight
- Bend your knees
- Tighten your stomach muscles
- Lift with your legs not your back

Guidelines for protecting yourself from injury

- Allow the weight of your body to assist in pulling or pushing objects
- Do not lift heavy objects from a position higher than your head
- Make habit of good posture
- Create a solid base for support
- Squat, do not lean over

How do you control a falling individual

- 1st rule = SAFETY
- 2nd rule = SAFETY
- 3rd rule = prepare self for a possible fall
- Do not attempt to catch or stop the fall
- Shift the position of your feet when turning, do not twist
- Try to slow the fall by supporting individual's weight on forward leg
- Bend from the knees, not the waist
- Protect individual's head

Walker Safety Tips

- Encourage the person to push off of the chair arms or seat.
- Be sure the walker is stabilized or locked.
- The person should 'walk INTO the walker', then push or lift the walker ahead, then step into it again.
- When a person wants to sit after using a walker, have that person turn as close as possible to the sitting surface and then back up until they feel the surface with the back of one leg. Have them reach for seat and lower slowly to the sitting surface.

Dementia and Alzheimer's disease

Dementia is not a specific disease. It's an overall term that describes a wide range of symptoms associated with a decline in memory or other thinking skills severe enough to reduce a person's ability to perform everyday activities. Alzheimer's disease accounts for 60 to 80 percent of cases. Vascular dementia, which occurs after a stroke, is the second most common dementia type. But there are many other conditions that can cause symptoms of dementia, including some that are reversible, such as thyroid problems and vitamin deficiencies.

Dementia is often incorrectly referred to as "senility" or "senile dementia," which reflects the formerly widespread but incorrect belief that serious mental decline is a normal part of aging.

Memory loss and other symptoms of dementia

While symptoms of dementia can vary greatly, at least two of the following core mental functions must be significantly impaired to be considered dementia:

- Memory
- Communication and language
- Ability to focus and pay attention
- Reasoning and judgment
- Visual perception

People with dementia may have problems with short-term memory, keeping track of a purse or wallet, paying bills, planning and preparing meals, remembering appointments or traveling out of the neighborhood. Many dementias are progressive, meaning symptoms start out slowly and gradually get worse.

Causes

Dementia is caused by damage to brain cells. This damage interferes with the ability of brain cells to communicate with each other. When brain cells cannot communicate normally, thinking, behavior and feelings can be affected.

The brain has many distinct regions, each of which is responsible for different functions (for example, memory, judgment and movement). When cells in a particular region are damaged, that region cannot carry out its functions normally.

Different types of dementia are associated with particular types of brain cell damage in particular regions of the brain. For example, in Alzheimer's disease, high levels of certain proteins inside and outside brain cells make it hard for brain cells to stay healthy and to communicate with each other. The brain region called the hippocampus is the center of learning and memory in the brain, and the brain cells in this region are often the first to be damaged. That's why memory loss is often one of the earliest symptoms of Alzheimer's.

While most changes in the brain that cause dementia are permanent and worsen over time, thinking and memory problems caused by the following conditions may improve when the condition is treated or addressed:

- Depression
- Medication side effects

- Excess use of alcohol
- Thyroid problems
- Vitamin deficiencies

Diagnosis of dementia

There is no one test to determine if someone has dementia. Doctors diagnose Alzheimer's and other types of dementia based on a careful medical history, a physical examination, laboratory tests, and the characteristic changes in thinking, day-to-day function and behavior associated with each type. Doctors can determine that a person has dementia with a high level of certainty. But it's harder to determine the exact type of dementia because the symptoms and brain changes of different dementias can overlap. In some cases, a doctor may diagnose "dementia" and not specify a type. If this occurs it may be necessary to see a specialist such as a neurologist or geropsychologist.

Dementia treatment and care

Treatment of dementia depends on its cause. In the case of most progressive dementias, including Alzheimer's disease, there is no cure and no treatment that slows or stops its progression. But there are drug treatments that may temporarily improve symptoms. The same medications used to treat Alzheimer's are among the drugs sometimes prescribed to help with symptoms of other types of dementias. Non-drug therapies can also alleviate some symptoms of dementia.

Type of Dementia

Alzheimer's disease

Most common type of dementia; accounts for an estimated 60 to 80 percent of cases.

Symptoms: Difficulty remembering recent conversations, names or events is often an early clinical symptom; apathy and depression are also often early symptoms. Later symptoms include impaired communication, poor judgment, disorientation, confusion, behavior changes and difficulty speaking, swallowing and walking.

New criteria and guidelines for diagnosing Alzheimer's were published in 2011 recommending that Alzheimer's disease be considered a disease with three stages, beginning well before the development of symptoms.

Vascular dementia

Previously known as multi-infarct or post-stroke dementia, vascular dementia is less common as a sole cause of dementia than Alzheimer's, accounting for about 10 percent of dementia cases.

Symptoms: Impaired judgment or ability to make decisions, plan or organize is more likely to be the initial symptom, as opposed to the memory loss often associated with the initial symptoms of Alzheimer's. Occurs because of brain injuries such as microscopic bleeding and blood vessel blockage. The location, number and size of the brain injury determine how the individual's thinking and physical functioning are affected.

Dementia with Lewy bodies (DLB)

Symptoms: People with dementia with Lewy bodies often have memory loss and thinking problems common in Alzheimer's, but are more likely than people with Alzheimer's to have initial or early symptoms such as sleep disturbances, well-formed visual hallucinations, and muscle rigidity or other parkinsonian movement features.

Mixed dementia

In mixed dementia abnormalities linked to more than one type of dementia occur simultaneously in the brain. Recent studies suggest that mixed dementia is more common than previously thought.

Parkinson's disease

As Parkinson's disease progresses, it often results in a progressive dementia similar to dementia with Lewy bodies or Alzheimer's.

Symptoms: Problems with movement are a common symptom early in the disease. If dementia develops, symptoms are often similar to dementia with Lewy bodies.

Frontotemporal dementia

The nerve cell damage caused by frontotemporal dementia leads to loss of function in these brain regions, which variably cause deterioration in behavior, personality and/or difficulty with producing or comprehending language.

Symptoms: Typical symptoms include changes in personality and behavior and difficulty with language. Nerve cells in the front and side regions of the brain are especially affected.

The Aging Process

The aging process happens during an individual's lifespan. We are all involved in this process and none can escape it. When one is young, aging is associated with growth, maturation, and discovery. Many human abilities peak before age 30, while other abilities continue to grow through life. The great majority of those over age 65 today are healthy, happy and fully independent. In spite of this, some individuals begin to experience changes that are perceived as signs of deterioration or decline. We must try to forget the stereotypes and look at older individuals as unique individuals, each with a particular set of resources and challenges.

Normal Aging

The changes aging individuals experience are not necessarily harmful. With age, hair thins and turns gray. Skin thins, becomes less elastic, and sags. There is a slowing down of functions, which goes forward throughout adulthood – loss of function of bodily organs. In the gastrointestinal system, for example, production of digestive enzymes diminishes, reducing the body's ability to break down and absorb the nutrition from food. Some of these losses may not be noticeable until later life.

Scientists theorize that aging likely results from a combination of many factors. Genes, lifestyle, and disease can all affect the rate of aging. Studies have indicated that people age at different rates and in different ways. Normal aging brings about the following changes:

- **Eyesight** – loss of peripheral vision and decreased ability to judge depth. Decreased clarity of colors (for example, pastels and blues).
- **Hearing** – loss of hearing acuity, especially sounds at the higher end of the spectrum. Also, decreasing ability to distinguish sounds when there is background noise.
- **Taste** – decreased taste buds and saliva.
- **Touch and Smell** – decreased sensitivity to touch and ability to smell.
- **Arteries** – stiffen with age. Additionally, fatty deposits build up in your blood vessels over time, eventually causing arteriosclerosis (hardening of the arteries).
- **Bladder** – increased frequency in urination.
- **Body Fat** – increases until middle age, stabilizes until later in life, then decreases. Distribution of fat shifts – moving from just beneath the skin to surround deeper organs.
- **Bones** – somewhere around age 35, bones lose minerals faster than they are replaced.
- **Brain** – loses some of the structures that connect nerve cells, and the function of the cells themselves is diminished. “senior moments” increase.
- **Heart** – is a muscle that thickens with age. Maximum pumping rate and the body's ability to extract oxygen from the blood both diminish with age.
- **Kidneys** – shrink and become less efficient.
- **Lungs** – somewhere around age 20, lung tissue begins to lose its elasticity, and rib cage muscles shrink progressively. Maximum breathing capacity diminishes with each decade of life.

- **Metabolism** – medicines and alcohol are not processed as quickly. Prescription medication requires adjustment. Reflexes are also slowed while driving, therefore an individual might want to lengthen the distance between him and the car in front and drive more cautiously.
- **Muscles** – muscle mass decline, especially with lack of exercise.
- **Skin** – nails grow more slowly. Skin is more dry and wrinkled. It also heals more slowly.
- **Sexual Health** – Women go through menopause, vaginal lubrication decreases and sexual tissues atrophy. In men, sperm production decreases and the prostate enlarges. Hormone levels decrease.

The aging process also brings social and emotional change and loss into our lives. Inevitably, as we age, older relatives die, then some of our friends may grow frail and die, then loss of a spouse affects many. Physical losses and social losses that can accompany aging may be very difficult emotionally. Grief and sadness are normal reactions to such situations, and we cannot stamp out these reactions in ourselves or our older relatives. Just as the physical losses of later life can be compensated for, so can the social and emotional losses.

The physical aging process can be influenced in a variety of ways. Excess capacity is built into the human system. The bulk of the changes that take place over the years can be strongly affected by exercise levels and other lifestyle characteristics.

Age Related Illnesses

Arthritis and Osteoporosis:

Osteoporosis causes bones to become weak and brittle that a fall or mild stress such a coughing or bending can cause a fracture. These fractures most commonly occur in the hip, wrist or spine. Osteoporosis affects men and women of all races, but older women past menopause is at highest risk. Medications, healthy diet and weight-bearing exercise can help prevent bone loss or strengthen already weak bones.

Arthritis is the swelling and tenderness of one or more of your joints. The main symptoms of arthritis are joint pain and stiffness, which typically worsen with age. The most common types of arthritis are osteoarthritis and rheumatoid arthritis. Osteoarthritis causes a breakdown of cartilage, the hard, slippery tissue that covers the ends of bones where they form a joint. Rheumatoid arthritis is a disease in which the immune system attacks the joints, which starts with the lining of joints.

Heart disease: a range of conditions that affect your heart. Diseases under this umbrella include, such as coronary artery disease; heart rhythm problems (arrhythmias); and heart defects you're born with (congenital heart defects), among others. Cardiovascular disease generally refers to conditions that involve narrowed or blocked blood vessels that can lead to a heart attack, chest pain (angina) or stroke. Other heart conditions, such as those that affect your heart's muscle, valves or rhythm, also are considered forms of heart disease. Many forms of heart disease can be prevented by living a healthier life style.

Macular Degeneration: Eye disease that gradually destroys the macula, which is the part of the eye that provides sharp central vision. People with macular degeneration typically only have peripheral vision.

Glaucoma: a group of eye conditions that damage the optic nerve, which is vital for good vision. This damage is often caused by an abnormally high pressure in your eye. It is one of the leading causes of blindness for people over the age of 60, but it can occur at any age, but is more common in older folks. Many forms of glaucoma have no warning signs. The effect is gradual, and you may not notice any changes in vision until it is at an advanced stage.

Diabetes: a group of diseases that affect how your body uses glucose. Glucose is vital to your health because it's an important source of energy for the cells that make up your muscles and tissues. It's also the main source of fuel for the brain. No matter what type of diabetes you have, it can lead to excess sugar in your blood, and this can lead to serious health problems. Chronic diabetes conditions include type 1 and type 2 diabetes. Potentially reversible diabetes conditions include prediabetes and gestational diabetes.

LCCC Resource Advocacy Program

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LIVINGSTON COUNTY
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Volunteer Caregiver Program JOB DESCRIPTION—Friendly Visitor

General Information

Volunteers will provide companionship, supervision, and a friendly visit for mentally or physically disabled and/or frail elderly persons in the absence of the primary caregiver.

Availability

Attend orientation and/or training as required by the program. Volunteers are requested to attend volunteer trainings that are offered two times per year.

A Friendly Visitor usually provided for one to two hours per week. The VCP Coordinator will schedule the time trying to accommodate the needs of the client and available time of the volunteer. Volunteers are only to do a home visit during the hours of operation for Livingston County Catholic Charities which is Monday thru Friday 8:00-5:00 pm.

Duties

Go to clients home to provide companionship, supervision, and a friendly conversation. Activities can include and not limited to; playing games, reading, reminiscing, and socialization.

Complete and submit such forms as provided and deemed necessary for the efficient operations of the program. This is the monthly reports that have been requested by volunteer coordinator.

Emergencies

All Volunteers will report emergencies to their coordinator immediately after overseeing the welfare of their client. Volunteers are required to fill out the incident accident report located in your training file. Volunteers will not talk to the media, relatives or friends of clients about an emergency.

Commitment

Volunteers are requested to make at least a one year commitment to the program.

I hereby understand my volunteer role as friendly visitor in accordance to this job description.

Signature of Volunteer

Date

VCP Coordinator

Date



2020 E. Grand River, Suite 104Howell, MI 48843 (517)-545-5944 Fax (517)545-7390

Volunteer Caregiver Program JOB DESCRIPTION-Office/Clerical

General Information

The Office Volunteer will perform a variety of tasks depending on the needs of the department. This position helps to extend the resources at Livingston County Catholic Charities to better assist and direct the needs of the clients.

Availability

Attend orientation and/or training as required by the program. Volunteers are requested to attend volunteer trainings that are offered two times per year. Hours will be worked out between volunteer and coordinator.

Duties

1. Making phone calls
2. Data entry
3. Filing
4. Other duties as assigned

Requirements

1. Must present a professional appearance and a friendly manner.
2. Must be dependable and punctual.
3. Be courteous and personable when dealing with the public.
4. Be self-directed, willing to take initiative, and detail oriented.
5. Respect and keep confidentiality of Livingston Catholic Charities volunteer's, Clients, and donors.
6. Computer skills are desired, but not necessary.

I hereby understand my volunteer role is to provide office/clerical assistance in accordance to this job description.

Signature of Volunteer

Date

VCP Coordinator

Date



Volunteer Caregiver Program JOB DESCRIPTION-RESPITE CARE

General Information

Volunteers will provide companionship, supervision, and a friendly visit for mentally or physically disabled and/or frail elderly persons in the absence of the primary caregiver.

Availability

Attend orientation and/or training as required by the program. Volunteers are requested to attend volunteer trainings that are offered two times per year.

Respite Care is usually provided for one and a half to four hours per week. The VCP Coordinator will schedule the time trying to accommodate the needs of the client and available time of the volunteer.

Duties

Go to clients home to provide companionship, supervision, and a friendly conversation. Volunteers are only to do a home visit during the hours of operation for Livingston County Catholic Charities which is Monday thru Friday 8:00-5:00 pm.

Complete and submit such forms as provided and deemed necessary for the efficient operations of the program. This is the monthly reports that have been requested by volunteer coordinator.

Emergencies

All Volunteers will report emergencies to their coordinator immediately after overseeing the welfare of their client. Volunteers are required to fill out the incident accident report located in your training file. Volunteers will not talk to the media, relatives or friends of clients about an emergency.

Commitment

Volunteers are requested to make at least a one year commitment to the program.

I hereby understand my volunteer role is to provide respite in accordance to this job description.

Signature of Volunteer

Date

VCP Coordinator

Date



Volunteer Caregiver Program JOB DESCRIPTION-TRANSPORTATION

General Information

Volunteers will provide transportation for mentally or physically disabled and/or frail elderly persons in the absence of the primary caregiver.

Availability

Attend orientation and/or training as required by the program. Volunteers are requested to attend volunteer trainings that are offered two times per year.

Transportation is usually provided when volunteer is available. The VCP Coordinator will schedule the time trying to accommodate the needs of the client and available time of the volunteer.

Duties

Go to clients home to provide transportation. Complete and submit such forms as provided and deemed necessary for the efficient operations of the program. This is the monthly reports that have been requested by volunteer coordinator.

Transportation Guidelines

1. Telephone the person after you agree to drive. Identify yourself and confirm the appointment. Volunteer Coordinator will give you the name and address of person and appointment.
2. Please call again the day of the appointment, as a reminder.
3. Call for the person at their door and identify yourself. (The person should only require minimal assistance from the volunteer driver.)
4. Allow enough time so client and volunteer do not feel rushed.
5. Identify yourself to the appointments you will be waiting at, and let them know you are a volunteer driver.
6. If an appointment will be 1.5 hour or less we recommend you wait.
7. If an appointment will be 1.5 hours or more you may make arrangements for a specific pick up time.
8. If a guest requests and additional stop please let them know to notify our volunteer coordinator to set up another transportation request.
9. If you agree to drive a person for their next appointment please notify the office so we can arrange this transportation and put this on our calendar.
10. All clients and volunteers must wear a seatbelt.

11. In the event that our office is closed transportations will be cancelled.
12. The VCP coordinator does not give the person the telephone number or last name of the volunteer. If a volunteer driver wants to give their number to the client that would be up to you. **However, all transportation must be arranged by our office.**
13. **Volunteers are only transporting for clients Monday – Friday from 8:00-4:30. Volunteers do not transport on holidays or when the agency is closed. Any transporting done off hours is not part of the VCP program.**

Emergencies

All Volunteers will report emergencies to their coordinator immediately after overseeing the welfare of their client. Volunteers are required to fill out the incident accident report located in your training file. Volunteers will not talk to the media, relatives or friends of clients about an emergency.

Commitment

Volunteers are requested to make at least a one year commitment to the program.

I hereby understand my volunteer role is to provide transportation in accordance to this job description.

Signature of Volunteer

Date

VCP Coordinator

Date



2020 E. Grand River, Suite 104Howell, MI 48843 (517)-545-5944 Fax (517)545-7390

Volunteer Caregiver Program JOB DESCRIPTION-Phone Call Reassurance

General Information

The Office Phone/Call Reassurance volunteer will perform a variety of tasks depending on the needs of the department. This position helps to extend the resources at Livingston County Catholic Charities to better assist and direct the needs of the clients.

Availability

Attend orientation and/or training as required by the program. Volunteers are requested to attend volunteer trainings that are offered two times per year. Hours will be worked out between volunteer and coordinator.

Duties

1. Making reassuring phone calls to homebound clients.
2. Reporting concerns, if any, to the volunteer coordinator office.

Requirements

1. Must present a friendly manner.
2. Must be dependable and punctual.
3. Be courteous and personable when dealing with the client.
4. Be self-directed, willing to take initiative, and detail oriented.
5. Respect and keep confidentiality of Livingston Catholic Charities volunteer's and clients.

I hereby understand my volunteer role is to provide office/clerical assistance in accordance to this job description.

Signature of Volunteer

Date

VCP Coordinator

Date

Retention Incentive

Birthday Cards to volunteers.

Holiday cards to volunteers.

Mileage reimbursement for volunteers.

Cheers for volunteers, a community thank you event which includes dinner.

Gift card drawing at the semi-annual training for volunteer referrals.

Volunteer of the year award at the "Dancing With the Stars" fund raising event every spring.

Salute to the Stars

<http://www.livingstoncatholiccharities.org/salute-to-the-stars/>



Livingston County Catholic Charities presents...

Salute to the Stars

& 35th Anniversary Celebration

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Due to the current health situation in America and recommendations by the CDC, Governor of Michigan and other health officials, Liv. Co. Catholic Charities has CANCELED our March 14th Salute to the Stars – 35th Anniversary Celebration which was rescheduled to May 29. We feel that our community's, friend's, supporter's and guest's health is paramount. Therefore, the rescheduled event is now canceled. We apologize for any inconvenience to our guests and continue to hold everyone throughout Liv. Co. and the world in our prayers. We are offering refunds to attendees or the option to shift your ticket fees to a tax-deductible donation to support the continued programming LCCC is providing during this health crisis and as we climb out of it.

Thank You to all of our wonderful sponsors who so graciously shifted their event support during COVID-19 to aid in providing critical services to those most in need in Livingston County! Thanks for investing in the life-changing and life-saving services of LCCC!



LIVINGSTON COUNTY
**CATHOLIC
CHARITIES**
HELPING LIVES GROW

Livingston County Catholic Charities presents...

15th Annual

Salute to the Stars

& Celebrity Dance Competition

2019 Honorees

Mary Lou Morris

- Mary Lou grew up in Novi and was a secretary with the Novi Schools. After her husband, Jack, had a heart attack, they left the busy city for a rural community in the Western UP. They purchased a campground store and ran the campground.
- They retired to Houghton and Jack continued to do work for the campground and Mary Lou made quilts, jams and other items for craft sales. Jack developed Alzheimer's and they left the UP to live in Howell six years ago.
- Jack was a guest at Liv. Cty. Catholic Charities' Be Our Guest Adult Day. There he was able to have fun in a safe place and Mary Lou received some respite as a caregiver. After he passed she needed something to keep busy and started volunteering there. She feels like she gets as much out of working with the guests as they do from her being there. She spoils the guests with her baking!
- She and Jack were married for 65 years. They have one son, one daughter, four granddaughters and three great grandchildren.



★ ★ Platinum Sponsors ★ ★



cell: 517-304-0274 / office: 810-534-2041.

Garrison Enterprises LLC	
Ron Garrison	rgarrison@comcast.net
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Sound, Lighting & Projection	
<i>One needs to see and hear ... to be engaged!</i>	



K of C Council #12295
St. Mary Magdalen



LIVINGSTON COUNTY
**CATHOLIC
CHARITIES**
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Suburban Shipping LLC

THANK YOU TO:

Our Dance Teams & Coaches

Competition Judges

DJ – Radiant Receptions

Lights/Presentation – Ron Garrison

MC – Joe Rohatynski

Photographer – Sarah Robinson

The Dance Project Dancers

Sponsors

LCCC Co-workers & Board Members

And all of our Guests

For making this evening shine!



Volunteer Training Spring, 2020



Thursday, March 19, 2020



**HAPPY
BIRTHDAY
TO YOU!!!**

January

Mary Haslitt 01/03
Gary Kinneer 01/12
James Chevalier 01/15
Linda Balsamo 01/19
Steve Fornetti 01/29

February

Jacquie Renaud 02/02
Jan Finn 02/03
Chris Stark 02/07
Amy Lamoreaux 02/09

March

Thomas Beindit 03/11
Melina Mann 03/04
Ron White 03/05
John Bellanti 03/17
Jeannie Pfister 03/27

April

Dorothy James 04/18
Dick Demmings 04/07
Linda Lillemoen 04/07
Robert Jacobs 04/14
Jim Panning 04/16
Michael Duquet 04/18
Greg Rohkohl 04/13

May

Dennis Edoff 05/05
Jim Rabault 05/11
Anna Newman 05/13
Rick Smither 05/17
Linda Heller 05/20

June

Joel Clark 06/02



You are invited to our

Semi Annual Training and Volunteer Appreciation Meeting

Thursday, March 19th
8:30 AM through lunch

We will host this event at:

Livingston County
Catholic Charities
2020 E. Grand River Suite #104 Howell, MI.

Please RSVP to Katie or Jamie
Before March 13th
517-545-5944, ext 121
or
jamie@livingstoncatholiccharities.org



Livingston County Catholic Charities is funded in whole or in part by the Federal Older Americans Act and the Michigan Office of Services to the Aging through the Area Agency on Aging 1-B. Livingston County Catholic Charities complies with the terms and regulations of the Title V of Civil



Spring

Breakfast and Lunch served

Discussion Topics

- Severe Weather Network/Homeless issues
 - Gleaners
 - Hospice
- Senior Drug Prevention

Please remember to turn in your miles and hours by the 4th of each month for reporting purposes.



Also, we need to have a copy of your most current insurance, registration and license.



Join us for hors d'oeuvres & refreshments at an Open House
celebrating volunteerism in Livingston County!

Thursday, September 12

5:30 pm to 7:30 pm

Cash Bar

M.J. Brighton

4141 Bauer Rd, Brighton



Last Day!!!
It's not too late to register!

It's not too late to register for this free event!
Email volunteerlivingston@gmail.com
today to reserve your spot!

VCP Participant Service

Friendly Visit or In Home Respite

Date: _____

Participant Name: _____

Address: _____

Emergency Contact name: _____ Phone number: _____

Type of service: _____

Volunteer Name: _____

Day of service: _____ Time: _____

Specifics:

Date Svc Stop: _____ Date SVC Start Back: _____

Reason Service Stopped: _____

VCP Transportation Request

Name: Date:

City/Zip: Phone:

Apt/Condo/Sub/Cross Streets: _____ Cell Phone:

Confirmed Ride with Client: Y N :

Emergency Contact: Phone:

Appointment: Day _____ Date: _____

Pick Up Time: _____ Appt. Time _____ Est. Appt. Time: _____

#1 Destination (Name of Dr, Store, Etc.) _____ Phone: _____

Address: _____ Suite: _____ Bldg. Name: _____

City: _____ Cross Streets: _____

#2 Destination (Name of Dr. Store, Etc.) _____ Phone: _____

Address: _____ Suite: _____ Bldg. Name: _____

City: _____ Cross Streets: _____

Assist client with: Wheelchair ___ Cane ___ Walker ___ Steady Arm ___ Vision _____ Hearing _____
 Stay with Client ___ Accompanying Companion Y N if Yes Name: _____
 When Shopping: Needs help in store Y N, needs help carrying and unpacking items Y N
 Other notes or insructions: _____

Volunteer Drivers Called	Phone #	Notes	Confirmed

Remind Driver to call Client the day before transport using the *67 before dialing: Y N initials _____

Driver Name: _____ Miles: _____ Hours: _____

Client Name:	Phone number:
Client Needs Referral	Referral Source
Do you have access to at least two meals per day?	
Yes No	
How many times have you had to access a Food Pantry in the past 6 months?	
Circle one: 0 1-3 3-6 6+	
How many days a week do you have non-medical visitors to your home?	
Circle one: 0 1-3 times 3-7 times 7+	
Estimate how many days per month that you spend out of your home.	
Circle one: 0 1-5 5-10 10-15 I leave the home regularly	
How many times in the last year have you not able to pay your heating bill?	
Circle one: 0 1-3 months 3-6 months 6+months	
How many times in the last year have you not able to pay your cooling bill?	
Circle one: 0 1-3 months 3-6 months 6+months	
Are you physically able to care for your lawn?	
Circle one: n/a yes no	
Do you pay someone to care for your lawn?	
Circle one: n/a yes no	
Are you physically able to take care of snow removal?	
Circle one n/a yes no	
Do you pay someone to take care of snow removal?	
Circle one: n/a yes no	
Do you visit a physician and get medication checked yearly?	
Circle one: yes no	
if no, why?	
Do we have permission to share your information to our Senior Resource Advocacy department? Yes No	
Client Signature: _____	Date: _____

SERVICE PLAN for Volunteer Caregiver Program
SENIOR SERVICES

Participant Name: _____

Presenting Problem

Transportation as needed

Friendly Visit

In Home Respite Visit

Goal #1: _____

Objective (Action Step for Goal #1) _____

_____ Time Frame _____

Goal #2: _____

Objective (Action Step for Goal#2) _____

_____ Time Frame _____

Rationale for on-going (longer than 90 Days) _____

Participant Signature: _____ Date: _____

VCG Signature: _____ Date: _____

Senior Services Quarterly Update

Participant Name: _____

Number of contacts since Intake or last Update: _____

Overall amount of improvement (circle one):

NONE

MINIMAL

FAIR

GOOD EXCELLENT

Comment: _____

Emergency Contact Person: Same _____ New _____

If new, Name and Relationship: _____

Status goals and objectives

Service Plan: Same _____ Change _____

Comments: _____

VCG Coordinator Signature: _____ Date: _____

this may not always be possible and could result in a wait for a specific day or time (i.e. evening only, etc.). In addition to the client's flexibility for appointment scheduling, source of payment (i.e. contractual requirements) and perceived immediacy of need are also reviewed in determining any prioritization within the Wait List. Also potentially having an impact on a Wait List, when possible, effort is undertaken to match client need with the strengths of the available therapists.

The Mental Health Counseling Program maintains contractual agreements that will impact the Wait List, if one is necessary. These contracts may include government and/or third party sources and may have specific requirements regarding the time frame for scheduling. In the event that a prospective client is eligible for services through such a contract, then all effort will be undertaken to ensure that the contractual obligations are met. If the intake staff person is unable to meet the scheduling requirements, then the Clinical Director will be notified of this difficulty within 24 hours. In addition, whenever a Wait List is maintained, the Clinical Director reviews it on a minimum of a weekly basis. Special care is provided to assure that no individual client waits an inordinate period of time solely because they are not served through a priority contract.

Substance Abuse Treatment: All clients seeking Substance Abuse Treatment are offered the opportunity to engage in Pretreatment groups and interact with peer supports and the case manager prior to individual sessions with a therapist. This use of Pretreatment services allows SA clients the ability to immediately engage in services. Special care is provided to assure that no individual client waits an inordinate period of time.

Senior Programs: It is the plan of the senior programs, Adult Day Service, Resource Advocacy and Interfaith Volunteer Caregiver (IVC) to avoid asking clients to wait for services; therefore, every effort is undertaken to respond to service requests immediately. In effect, this means that all requests for service should be offered a face-to-face contact with a staff person or IVC volunteer within 5 business days.

In the event that the staff members within any of the senior-serving programs must develop a Wait List, then the following criteria will be followed:

- Referral by the AAA 1-B Care Management office.
- Individuals recently released from the hospital and requiring short-term services.
- Other individuals recently released from the hospital.
- Low-income, as defined by the federal poverty level and self-declaration of income.
- Racial and/or ethnic minority.
- Social need (insufficient community support, cultural or ethnic barriers and/or unsafe conditions).
- Functional need (mental health, physical health, ADL/IADL limitations).

Prior to being added to a Wait List, the person requesting services or for who services are being sought, will be assessed on the above-described criteria, along with the eligibility requirements of the specific program. The Wait List will also contain the following information:

- The name and contact information of the individual.
- The date service is first sought.
- The service being sought.
- The community of residence.
- Any assistance or referral provided while on the Wait List.
- And, the length of stay on the Wait List will be recorded.

In the event that Resource Advocacy staff are unable to respond to a service request within 5 business days, then priority will be given based upon the above-described criteria. The AAA 1-B Care Management Office serving Livingston County will be notified if a Wait List is developed.

In the event that the Adult Day Service program is full or the program staff are unable to respond to a service request within 5 business days, then priority will be given based upon the same criteria described above. For this program, eligibility will further be weighed by the need for dementia-specific programming and by the individual's ADL/IADL limitations. The AAA 1-B Care Management Office serving Livingston County will be notified in the event that a Wait List is developed. To maximize service delivery to as many eligible persons as possible, the Director of Senior Services may ration service delivery through a process of providing some, but not all, of the requested service.

In the event that the staff members of the IVC program are unable to respond to a service request within 5 business days, then priority will be followed in the same as described within the Resource Advocacy program. However, as IVC services are dependent upon volunteers, then the availability of a volunteer with the necessary skill or interest will also be a factor towards prioritization. If a volunteer is available to provide respite services, then requests for respite may be given additional consideration within the Wait List.

REFERRALS – INTRA-AGENCY

Any agency client may be eligible for services in more than one agency program. Participation in more than one agency program may be sequential or may be simultaneous. If the client makes the request for multiple LCCC services, or if a staff member believes that an individual could benefit from more than one program/service, then the following process occurs:

- Eligibility for a specific program or service is determined based upon the eligibility criteria within each specific program.
- The staff member currently providing services explains the general nature of the additional program and any printed material is provided.

WAIT LIST

Date: _____

Service Wanted: _____

Name: _____

Phone: _____

Name of Family member who arranged: _____

Address _____

Where referred to: _____

Does it matter if it is a Man or women _____

Can it be a phone visit? _____

Suggestions for other location for friendly visit

Client Interest Form

Name:

Address:

Where did you grow up?

What are your hobbies?

What are your favorite books?

What are your favorite TV shows?

What are your favorite movies?

Where are you retired from?

How many children do you have?

How many grandchildren do you have?

What is your favorite childhood memory?

What was your first car?

Client Interest Form-Page 2

Name:

Address:

Where you born at home or in a hospital?

Do you have any pets?

Did you take any long trips as a child?

Did you ever have a garden?

Did you ever go to college?

What was your first job?

What is your favorite meal?

How many siblings do you have, and where are you in the order?

Were you or your spouse in the military?

Have you ever taken a train trip?

Care Recipient Registration Form		Date: _____		Date of Birth	Age
First Name			Last Name		Mid Init
Address					
City		State	Zip Code		County
Township		Phone – Work - - - Cell - - - Home - - -		<input type="checkbox"/> Female <input type="checkbox"/> Male	Lives Alone <input type="checkbox"/> Yes <input type="checkbox"/> No
Income Status Is monthly income below the poverty level? (See instruction for income details) <input type="checkbox"/> Yes <input type="checkbox"/> No		Race <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> American Indian/Eskimo/Aleut Is client Hispanic? <input type="checkbox"/> Yes <input type="checkbox"/> No		Multi – Racial Status <input type="checkbox"/> Yes <input type="checkbox"/> No (Mark all that apply) <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> American Indian/Eskimo/Aleut	
Client Intake Date: _____ (Date of client's initial NAPIS service registration, e.g. 10/01/1999)					
Other Needs Indicators: (Check all that apply)					
1 <input type="checkbox"/> Cognitive impairment (confusion, memory loss)					
2 <input type="checkbox"/> Unable to access services due to language/culture/religion/location/minority barriers					
Veteran? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Background Information:					
Address/Telephone-include home, work and cell with area code:					
1. Emergency Contact Person (a) (Name and relationship)					
2. Emergency Contact Person (b)					
3. Power of Attorney/Legal Guardian/Conservator					
4. Cultural/Ethnic Considerations					
5. Diagnosis/Medical Condition/Allergies:					
6. Do you drive Y or N					
7. Do you feel you have support /services needed to live safely in your home? Y or N					
8. Income source					

Mark all activities that require assistance.

Activities of Daily Living: <input type="checkbox"/> None <input type="checkbox"/> All <input type="checkbox"/> N/A (Check all activities for which client requires any assistance)			Instrumental Activities of Daily Living: <input type="checkbox"/> None <input type="checkbox"/> All <input type="checkbox"/> N/A		
<input type="checkbox"/> Eating/Feeding	<input type="checkbox"/> Bed Mobility	<input type="checkbox"/> Transferring	<input type="checkbox"/> Shopping	<input type="checkbox"/> Doing Laundry	<input type="checkbox"/> Reheating Meals
<input type="checkbox"/> Dressing	<input type="checkbox"/> Toileting	<input type="checkbox"/> Bathing	<input type="checkbox"/> Handling Finances	<input type="checkbox"/> Cooking Meals	<input type="checkbox"/> Heavy Cleaning
<input type="checkbox"/> Bladder Function	<input type="checkbox"/> Walker	<input type="checkbox"/> Wheelchair	<input type="checkbox"/> Heating Home	<input type="checkbox"/> Keeping Appointments	<input type="checkbox"/> Using Phone
<input type="checkbox"/> Mobility:	<input type="checkbox"/> Bowel Function	<input type="checkbox"/> Wheeling	<input type="checkbox"/> Taking Medication	<input type="checkbox"/> Using Public Transportation	
<input type="checkbox"/> No Impairments	<input type="checkbox"/> Walking	<input type="checkbox"/> Stair Climbing	<input type="checkbox"/> Light Cleaning	<input type="checkbox"/> Using Private Transportation	
<input type="checkbox"/> Some type of assistance					

Care Recipient Status Information

- Yes No 1. Does the Care Recipient need assistance with two or more activities of daily living (ADLs)? AND/OR
- Yes No 2. Does the Care Recipient have a cognitive impairment?

Client Signature _____ **Date** _____



Livingston County Catholic Charities

2020 E. Grand River, Suite 104, Howell, MI 48843 (517) 545-5944 Fax: (517) 545-7390

NOTICE OF USE AND DISCLOSURE OF PROTECTED HEALTH INFORMATION

THIS NOTICE DESCRIBES HOW MENTAL HEALTH INFORMATION ABOUT YOU MAY BE USED AND DISCLOSED AND HOW YOU CAN GET ACCESS TO THIS INFORMATION. PLEASE REVIEW IT CAREFULLY.

We are committed to protecting the personal and mental health privacy of all persons served by Livingston County Catholic Charities. All of our employees, contractors, and volunteers are required to sign confidentiality agreements and are required to comply with our confidentiality Policies.

We may use or disclose your protected social and mental health information for purposes of treatment, payment or practice operations only with your written consent. For example, we may contact your primary care physician to coordinate your care, submit a claim to an insurer, or look at your file to perform internal quality monitoring. We must obtain your written authorization for any other use or disclosure. You may revoke your consent or authorization any time in writing. This will not apply to information used or disclosed while the consent or authorization was in effect.

We will provide access to your information, without your consent or authorization, when required to do so by law or regulation. Access may be granted to child protection and law enforcement authorities, courts and administrative tribunals, purchasers or service, licensing or accrediting bodies.

With your consent, we may contact you to provide appointment reminders or information about treatment alternatives or other health-related benefits and services.

Your have the right to: access and amend your information, request an accounting of any disclosures, request restrictions on use and disclosure of your information, request a copy of this Notice, or receive confidential communications. If you request restrictions on the use and disclosure of your information, we are not required to grant your request. You may exercise your rights by contacting the individual identified at the conclusion of this Notice.

We are required by law to maintain the privacy of protected information and to provide you with notice of our legal duties and privacy practices with respect to protected information.

We are required to abide by the terms of the most current notice in effect.

We reserve the right to change the terms of our notice and to make the new notice provisions effective for all protected health information that we maintain. We will provide you with a revised notice in person or by mail prior to the date of any changes.

If you believe that your privacy rights have been violated, you may complain to us or to the Secretary of the U.S. Department of Health and Human Services. We will not retaliate against you for filing a complaint.

For more information about this notice, please contact: John Furey, Clinical Director

This notice is effective August 1, 2009

The undersigned acknowledges that he/she has received a copy of this notice of privacy practices.

Client/Guardian Signature

Address/City/State/Zip

Date

Caregiver Registration Form			Date:		Date of Birth	Age
First Name			Last Name			Mid Init
Address						
City		State	Zip Code	County	Township	
Phone – Work - -			<input type="checkbox"/> Female		Lives Alone	
Home - -			<input type="checkbox"/> Male		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Cell - -						
Income Status Is monthly income below the poverty level? (See instructions for income details) <input type="checkbox"/> Yes <input type="checkbox"/> No		Race <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Black <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Pacific Islander <input type="checkbox"/> American Indian/Eskimo/Aleut Is client Hispanic? <input type="checkbox"/> Yes <input type="checkbox"/> No		Multi – Racial Status <input type="checkbox"/> Yes <input type="checkbox"/> No (Mark all that apply) <input type="checkbox"/> White <input type="checkbox"/> Asian <input type="checkbox"/> Native Hawaiian <input type="checkbox"/> Black <input type="checkbox"/> Pacific Islander <input type="checkbox"/> American Indian/Eskimo/Aleut		
Intake Date:						

Caregiver History

- How did caregiver hear about this program (referral source)?
 Newspaper Television Brochure Friend
 Agency Physician Health Care Provider Other
- Caregiver relationship to Care Recipient:
 Spouse Son Daughter Son-in-law Daughter-in-law
 Parent Grandparent Other Relative: _____ Non-Relative: _____
- How long has the Caregiver provided care to the Care Recipient?
 0-6 Months 7-12 Months 13-36 Months 37+ Months
- How long does it take to get to the Care Recipient's home?
 Less than 1 hour 1-3 hours More than 3 hours Caregiver lives with Care Recipient
- Caregiver provides care to Care Recipient:
 Occasionally Less than 1 day/week Daily
 Several times a week Weekly Monthly
- Does the Caregiver provide physical care to Care Recipient? Yes No
If yes, (hands-on care is provided): check the appropriate number of hours and frequency, e.g., 1-3 hours per week
 Less than 1 hour 1-3 hours More than 3 hours
 Per day Per week Per month
- Does the caregiver IADL's? None All N/A
Circle all that apply
Shopping Doing laundry Reheating meals Handling Finances cooking meals
Heavy cleaning Heating home Keeping appointments Using the phone
Taking medication Using public transportation Light cleaning Using private transportation
- Caregiver is employed: Full time Part time Not employed
- Caregiver's health is: Excellent Good Fair Poor
- Are other friends or family members willing and able to help care for the Care Recipient?
 Yes No

10. How many Care Recipients does the Caregiver care for?
a. How many is the Caregiver the primary caregiver for?

11. How many dependents does the Caregiver have?
Age 19-59 Over age 59

Recipient Signature

Date

obtained from the recipient. Fingerprints would in that case be kept as a separate part of the recipient's record and destroyed or returned to the recipient when the fingerprints are no longer essential to treatment or research.

14. Program staff and volunteers will not solicit donations from recipients for any purpose, except those provided services on the basis of the *Voluntary Donation Scale* or the *Voluntary Fee Scale*. Donations/contributions for agency fund development efforts, nor for any other purpose, will not be requested. Program staff will not attempt to sell items or solicit contributions from clients or caregivers.

Program staff and volunteers shall maintain interaction with recipients for the requested purpose (program service delivery) only. Recipients will not be solicited or proselytized for religious, political or philosophical purposes. The provision of services will not be related to any religious, political or philosophical belief(s).

COMPLAINT PROCEDURE

Clients are encouraged to initially discuss the matter with the person involved. Any verbal complaints will be considered informal. If a client is not satisfied with the outcome and still believes his/her client rights have been violated, a formal complaint is encouraged.

FORMAL COMPLAINT PROCEDURE – NON-SUBSTANCE ABUSE CASES

1. A completed formal complaint form is submitted to the identified coworker serving as the Recipient Rights Advisor. This person's name is to be posted in the agency reception area.
2. Within ten (10) working days of complaint receipt, the Recipient Rights Advisor investigates the complaint and may interview anyone necessary to complete the investigation. Acknowledgment of receipt is made to the client.
3. A written report by the Recipient Rights Advisor is made within ten (10) working days from receipt of the complaint. The written report includes:
 - a. Summary of the complaint
 - b. Procedure used to investigate, including the names and position of anyone interviewed.
 - c. Findings
 - d. Conclusions
 - e. Any recommended remedial actions to be implemented by the program with states time limits for implementation
4. Copies of the report are submitted to the complainant and the Executive Director within five (5) days after completion. If the Recipient Rights

- Advisor upholds the previous decision, the client may request in writing a conference with the Executive Director. The conference request will be acknowledged within ten (10) days of the request.
5. If the client is being served by/through a funding source that also has a recipient rights or complaint procedure, then the client will be informed of this option. The client will be provided the appropriate information (name, telephone number, forms) in order to access this option. If the client is self-pay, then the finding of the Executive Director is final.
 6. If the client is not satisfied with the response from the Executive Director, and if they are eligible for the recipient rights process or complaint procedure of the funding source, then this agency will fully cooperate with this process and will accept the results of this process. Such additional steps may be outlined in government contracts (Family Independence Agency, Area Agency on Aging 1-B, etc.) or may be addressed within the protocols of third party contracts (managed care, insurance, etc.).
 7. Copies of all proceedings and correspondence will be maintained. The agency maintains the right to share such correspondence with legal counsel.

The Executive Director, upon receipt of the conference request, will discuss the situation with staff involved in the case. At the conference, the client, witnesses and involved staff members, will have equal opportunity to:

- Present and establish facts and evidence relevant to the grievance.
- Discuss, question, and/or refute material presented.

The Executive Director, after hearing, examining, and evaluating the evidence, will base a decision on facts presented. The decision will be provided to the client.

FORMAL COMPLAINT PROCEDURE – SENIOR SERVICES

If dissatisfied with the internal agency complaint procedure steps described above, clients, and prospective clients, of all AAA 1-B funded programs, may file their complaint with the Area Agency on Aging 1-B. A copy of the AAA 1-B Service Recipients Grievance Procedure will be offered to all older adults or his/her representative who remains dissatisfied at this point. This information will be provided by the LCCC Recipient Rights Advisor or by the Executive Director. Additionally, the client or his/her representative may file a complaint of discrimination with the U.S. Department of Health and Human Services, Office of Civil Rights, or the Michigan Department of Civil Rights.



Volunteer Caregiver Transportation Policy

- Transportation services can be provided Monday through Friday 8:30am to 4:00pm.
- No weekend transportation services available.
- Volunteers are unable to provide transportation to any medical procedures.
- Participant must request transportation services minimum of 5 business days prior to date transportation is needed.
- Emergency contact information is required to provide transportation services.
- Participants must be able to get in and out of automobiles independently.
- Maximum of 4 scheduled transportations per month per participant.
- Maximum of 2 scheduled transportations per month can be out of Livingston County.
- Participant must contact LCCC main office at #517-545-5944 to arrange, cancel and make adjustments to scheduled transportation service.
- Participants should not arrange transportation scheduling or adjustments with volunteers directly.
- Volunteers prefer not to transport wheelchairs; most community locations have wheelchairs accessible.

Participant Signature: _____

Date: _____



LIVINGSTON COUNTY
CATHOLIC
CHARITIES
HELPING LIVES GROW

LIVINGSTON COUNTY CATHOLIC CHARITIES

220 E. Grand River, Suite 104, Howell, Michigan 48843

517-545-5944

**CONSENT FOR USE OF
PHOTOGRAPHS, VIDEOTAPES, OR OTHER IDENTIFIABLE INFORMATION**

Client Name _____ Client # _____

By my signature below, I agree to the use of:

____ Photograph

____ Videotape

____ Other Identifiable Information (specify) _____

for _____ publicity purposes or

_____ other purpose (specify) _____

This is a _____ single or _____ ongoing consent to use the above materials. If this is a single consent, specify the purpose for which the consent is given (i.e. newsletter, promotional display):

I understand that I may revoke this consent at any time in writing, though this action will not affect any use of the above materials prior to revoking consent.

Client confidentiality is protected by law unless written authorization is given.

Client Signature _____ Date _____

LCCC Worker Signature _____ Date _____

Community Resource List

1

8/2019

ANYTHING HELP

Dial: 211

AUTOMOTIVE CARE

Brighton High School Auto Tech Program - 810-229-4000

People's Church Auto Garage – 734-878-3407

Pinckney High School Auto Tech Program - 810-225-5731

BASIC NEEDS

Clothing

Love INC. – 517-552-3620

The Salvation Army – 517-546-4750

Shalom Lutheran Church – 734-878-6859

Dental

Grand River Dental – 810-225-8338

Kellogg Dental - (517) 546-3330

Livingston Dental Center – 877-313-6232

VINA Community Dental Center - 810-844-0240

My Community Dental Center (MCDC) – 877-313-6232

Vision

(Testing) Health Department - (517) 546-9850

Lions Club – 810-220-9104

Vision Source Optometry – 517-545-2020

Food

Family Impact Center — 517.223.4428

Department of Health and Human Services — 517.548.0200

Gleaners Food Bank (Howell) — 313-923-3535

Pantry Network List – 313-923-3535

Gleaners Food Bank Administration — 866.453.2637

Livingston Senior Nutrition Program — 810.632.2155

Love INC. — 517.552-3620

Meals on Wheels — 810.632.2155

OLHSA — 517.546.8500

Shared Harvest — 517-548-3710

The Salvation Army — 517.546.4750

WIC — 517.546.5459

Shelter

OLHSA — 517.546.8500

St. Vincent De Paul - 810-231-9199 ext. 235/517-404-1984/810-220-9741

The Connection Youth Services – 1-866-440-SAFE (7233)

The Salvation Army — 517.546.4750

Love INC – 517-552-3620

LACASA – 517-548-1350

Utility shut off help

Department of Health and Human Services — 517.548.0200

OLHSA — 517.546.8500

St. Vincent De Paul - 810-231-9199 ext. 235/517-404-1984/810-220-9741

The Salvation Army — 517.546.4750

Love INC – 517-552-3620

CHILD DEVELOPMENT/CARE

Children's Special Health Care Services — 517.552.6823

Early On – 1-800-EARLY ON

Early Childhood/Special Ed Preschool Prgm. – 517-540-6846

Child Care Network - 810-991-1186

Child Connect for Family Success — 517.548.9112

Department of Health and Human Services — 517.548.0200

LESA Head Start/GSRP — 517.548.2100

Healthy Families Livingston – 517-548-1350

COUNSELING/MENTAL HEALTH SERVICES

Advocacy and Protection

Michigan Protection and Advocacy Services — 517-822-7074

Counseling Agencies

Advanced Behavioral Medicine — 517-548-1537

Complete Counseling Center — 517-546-4445

Diversified Counseling – 517-292-6966

Evolve Behavioral Health – 810-599-9591

Karen Bergbower and Associates – 810-225-9550

Key Development Center – 810-220-8192

Livingston Community Mental Health — 517-546-4126

Livingston County Catholic Charities — 517-545-5944

Livingston Family Center – 810-231-9591

Perspectives Therapy Services – 810-494-7180

Thriving Minds Behavioral Health – 810-225-3417

Unwritten Endings, LLC – 810-444-2484

Women's Resource Center (LACASA) — 866-522-2725

DISABILITIES – ADVOCACY & PROTECTION

The Arc of Livingston — 517-546-1228

Work Skills Corporation — 810-227-4868

St. Joseph Mercy SOAR Program – 517-545-6462

Livingston Center for Independent Living – 517-586-0233

Special Ministries – 517-797-7652

Livingston Community Mental Health — 517-546-4126

Livingston Educational Service Agency — 517-546-5550

Excel Employment -517-518-8637

Hymes Coaching – 734-904-0530

SIGNificant – 810-522-6684

Dyslexia Resource Center — 517-548-0047

COMMUNITY EDUCATION

Brighton Community Education — 810-229-1419

Hartland Community Education — 810-626-2150

Howell Community Education — 517-548-6281

Pinckney Community Education — 734-225-3950

Community Resource List

8/2019

2

EDUCATION – PUBLIC & CHARTER SCHOOLS

Brighton Area Schools — 810-229-4000
Charyl Stockwell Academy — 810-632-2200
Flex Tech High School — 810-844-3366
Fowlerville Community Schools — 517-223-6001
Hartland Consolidated Schools — 810-626-2100
Howell Public Schools — 517-548-6200
Kensington Woods High School — 517-545-0828
Light of the World Academy - 734-878-3301
Pinckney Community Schools — 810-225-3900

EMPLOYMENT – JOB SERVICES/TRAINING

Action Associates — 810-534-6166
Michigan Works! Southeast — 517-546-7450
Michigan Rehabilitation Services — 734-677-1125
Manpower- 517-548-7050
Training and Rehabilitation Services –
Work Skills Corporation — 810-227-4868
Excel Employment -517-518-8637

FURNITURE

Habitat for Humanity Restore – 810-220-9986
Love Inc. – 517-552-3620
Our Place to Yours – 810-225-8633
The Salvation Army – 517-546-4750
Seagulls Nest, LLC – 810-231-1990

HEALTH CENTERS

Advanced Behavioral & Medicine — 517-548-1537
Brighton Hospital — 810-227-1211
Center for Counseling Services — 810-229-6547
Chelsea Community Hospital — 734-593-6000
Livingston Counseling and Assessment Services — 517-546-7070
Saint Joseph Mercy Behavior Services — 810-227-0404
Saint Joseph Mercy Hospital — 517-545-6000
The Salvation Army/ARC – 517-546-4750

HEALTH SUPPORTIVE SERVICES

Alzheimer Association — 800-272-3900
American Heart Assoc of MI — 800-242-8721
Livingston Community Hospice — 517-540-9000
Livingston County Health Department — 517-546-9850
March of Dimes — 248-359-1550
Mental Health Assoc of MI — 248-473-3143
Pregnancy Help Clinic — 810-494-5433
Whitmore Lake Health Clinic — 734-449-2033
Help Lines– 24 Hour Crisis Lines –
LACASA — 866-522-2725

Livingston Community Mental Health — 517-546-4126
Home Care Services –
Action Home Health Care – 810-227-4868
At Home Dental Services — 810-231-9855
Department Of Health and Human Services - 517-548-2000
Go Docs Go – 855-463-6271
Meals on Wheels — 810-632-2155
Michigan Visiting Nurses – 800-842-5504
Saint Joseph Mercy Health, Home Care and Hospice — 855-559-7178
Visiting Physicians – 888-742-0298

HOUSING SUPPORT

FIRST: OLHSA – 517-546-8500
SECOND: The Salvation Army – 517-546-4750
Department Of Health and Human Services - 517-548-2000
Love INC. – 517-552-3620
St. Vincent De Paul - 810-231-9199 ext. 235/517-404-1984/810-220-9741
www.Michiganhousinglocator.com

INSURANCE

Insurance Information Hotline — 800-777-8005

LEGAL SERVICES

Legal Service of South Central Michigan – 517-394-3121
Lawyer Referral — 800.968.0738
Senior Legal Hotline — 800.347.5297

LIVINGSTON LIBRARIES

Brighton District Library – 810-229-6571
Fowlerville District Library – 517-223-9089
Hartland Cromaine Library – 810-632-5200
Howell Carnegie District Library – 517-546-0720
Pinckney Community Public Library – 734-878-3888

SENIOR SUPPORTS

Senior Centers
Brighton 810-299-3817
Fowlerville 517-223-3929
Gregory 734-498-2502
Hamburg 810-222-1140
Putnam (Pinckney) 734-878-1810
Hartland 810-626-2135
Howell 517-545-0219
Resources
Livingston County Catholic Charities — 517-545-5944

Community Resource List

8/2019

SUBSTANCE USE DISORDERS

Advanced Counseling Services – 810-220-2787
Breaking the Chain Counseling Center – 810-494-7160
Brighton Center for Recovery – 810-227-1211
The Brighton Center – 810-229-9220
Livingston Community Mental Health – 517-546-4126
Complete Counseling Center Inc. – 517-546-4445
Diversified Counseling – 517-292-6966
Karen Bergbower and Associates – 810-225-9550
Key Development Center – 810-220-8192
LACASA Center – 517-548-1350
Livingston County Catholic Charities – 517-545-5944
The Livingston Family Center – 810-231-9591
St. Joseph Mercy Behavioral Services – 810-844-7300

SUPPORT GROUPS

Substance Use Disorders

Al-Anon – 517-540-9533
Alcoholics Anonymous of Liv. County – 517-540-9533
Livingston County Catholic Charities – 517-545-5944
Key Development Center – 810-220-8192
Celebrate Recovery at the Naz – 810-227-6600
Celebrate Recovery in Pinckney – 847-924-0570
Narcotics Anonymous – 800-230-4085
Stepping Stones Engagement Center – 517-376-6262

Youth

The Connection Youth Services – 1-866-440-SAFE (7233)

Other

Livingston County Catholic Charities – 517-545-5944
Love INC. – 517-552-3620
Mitchell's Hope Helping Hands – 517-775-5600

TRANSPORTATION

Livingston County Catholic Charities (Seniors Only) – 517.545.5944
Hartland Senior Center (Seniors and Disabled Only) – 810-626-2135
Brighton Senior Center (Seniors and Disabled Only) – 810-299-3817
Livingston Essential Transportation Services (LETS) – 517.546.6600
People's Express – 877-214-6073
Love Inc. – 517-552-3620
Blue Car Cab - (810) 360-5212

UNEMPLOYMENT BENEFITS

Unemployment Insurance Agency

- Online Filing michigan.gov/uia
- Telephone Filing – 866.500.0017

VETERANS SERVICES

Disabled American Veterans – 517.546.2534
Livingston County Catholic Charities – 517.545.5944
Livingston County Veterans Services – 517.546.6338
OLHSA - 517.546.8500

YOUTH SERVICES/ORGANIZATIONS

Mentor Livingston (formerly BBBS) – 517-546-1140
Boy Scouts of America- 734-971-7100
Camp Fire Boys/Girls – 248-342-8382
Girl Scouts-Huron Valley Council – 734-971-8800
The Salvation Army – 517-546-4750



AGING ADULT SERVICES RESOURCE DIRECTORY

Livingston County Catholic Charities

2020 E. Grand River, Suite 104, Howell, MI 48843

www.livingstoncatholiccharities.org

1-517-545-5944

ADULT DAY SERVICE

Be Our Guest Adult Day Service 517-546-9910

ADULT FOSTER CARE

An Affair to Remember 810-623-2251
Bellavista House 517-546-9320
Briarwood Home 517-552-9518
Burkhart Road Home 517-548-4495
Claras House II 734-426-3733
Devine Senior Living 810-355-1536
Devonshire Manor 810-220-4516
Gold Club Road Home 517-545-9921
Green Acres 810-459-6232
Mountain View Home 810-227-5949
Norlynn House 810-227-3887
Norton Home 517-546-7140
Oak Grove Home 517-546-3915
Oak Lane Manor 810-227-7784
Odyssey Home 810-225-8632
Orchard View Home 810-229-6460
Pine Oaks 810-229-2733
Posey's 810-623-2453
Silver Lake Home 586-486-6645
Sunset Pines 810-407-0603
Valley View Home 810-225-3188

CARE MANAGEMENT

Area Agency on Aging 800-852-7795
Community Mental Health 517-546-4126

CHORE & MAINTENANCE

Department of Human Services 517-548-0287
Oakland Livingston Human Services 517-546-8500
Dial 0 for client information specialist

COUNSELING/MENTAL HEALTH &

SUBSTANCE ABUSE

Community Mental Health 517-546-4126
Livingston County Catholic Charities 517-545-5944

ELDER ABUSE

Adult Protective Services (24 Hrs.) 855-444-3911
State of Michigan Elder Abuse 800-882-6006
LACASA (24 Hrs.) 866-522-2725

EMPLOYMENT FOR OLDER ADULTS

Foster Grandparent Program 517-887-6116
AARP Senior Aid Program 810-766-1470
Michigan Works 800-285-9675

HOME UTILITY ASSISTANCE

Department of Human Service 517-548-0287
Oakland Livingston Human Services 517-546-8500
Salvation Army 517-546-4750
Love INC 9:30-4:00 517-552-3620

HOME HEALTH CARE

Arcadia Health Care 866-552-9109
Accredited Home Care 586-427-6640
Action Home Health Care 810-227-4868
Bright Star 810-225-4000
Comfort Keepers 810-229-0200
Great Lakes Caring 517-552-8300

National Staffing and Home Care 734-449-9050
Right at Home in Home Care 810-225-4724
St. Joseph Mercy Liv. Home Care 517-540-9000
Metro Home Health Care 517-545-7740

HOSPICE

Arbor Hospice 888-992-2273
Compassionate Care Hospice 888-983-9050
Great Lakes Caring & Hospice 517-552-8300
Hospice of Michigan 888-247-5701
St. Joseph Mercy Liv. Hospice 517-540-9000

HOSPITALS

St. Joseph Mercy Hospital/Howell 517-545-6000
St. Joseph Mercy Hospital/Ypsilanti 800-231-2211
University of Michigan Hospital 800-211-8181

HOUSING www.michiganhousinglocator.com

Oakhaven Manor 517-548-9870
Oak Tree Village 810-229-3303
Quail Creek 517-548-3733
Vista Springs 517-540-1926

Senior Housing

Country Glen Apartments 517-546-5592
Glenwood Apartments 517-223-7215
Greenwich Apartments 517-548-0031
Livingston Greene 517-223-0144
Mill Pond Manor Apartments 810-227-3780
Rolling Meadows Apartments 517-223-3883
Sunny Knoll Apartments 517-546-3811
White Hills Apartments 517-546-5592

Assisted Living

Emeritus Apartments 810-229-9190
Vista Springs 517-540-1926
Independence Village / Brighton Valley 888-228-2674
Sanctuary at Woodland 810-844-7477
Village Manor Retirement 810-632-6200

INFORMATION & REFERRAL

Area Agency on Aging 800-852-7795
Information Line 211 or 866-561-2500
Livingston County Catholic Charities 517-545-5944
Livingston County United Way 810-494-3000
Livingston County Health Department 517-546-9850
Michigan Services to the Aging 517-373-8230
Local Information and Referral 411
Special Ministries 810-229-6661

LEGAL SERVICES

Dispute Resolution Services 517-546-6007
South Central MI Legal Service 517-394-3121
Livingston County Legal Aid 866-485-9393

Elder Law Attorneys

Nancy Nawrocki 810-229-0220
Renee Szobonya 810-494-7106
Jim Schuster 248-356-3500
Steven Lebowski 248-684-9200

FOOD

Gleaners Shared Harvest Food Bank 517-548-3710
Family Impact Center & Food Pantry 517-223-4428
Salvation Army 517-546-4750
Senior Food Program (OLHSA) 517-546-8500
Senior Nutrition Program 810-632-2155

MEDICAL SERVICES

Faith Medical Clinic	734-474-4627
Visiting Physicians	888-742-0298
Go Docs Go	855-463-6271
Michigan Visiting Nurses	800-842-5504

DENTAL

VINA Community Dental Center	810-844-0240
Howell Dental Center	517-546-3330
At Home Dental Care	810-231-9855

GERIATRIC HEALTH ASSESSMENT

Dr. Wm. Bush	517-548-1246
Geriatric Health Services (SJM)	734-712-5189
Tuner Geriatric Clinic (U of M)	734-647-3777

MEDICAL ALERT SYSTEMS

Guardian Medical Alert	877-435-7225
Phillips "Lifeline"	800-566-6218

PRESCRIPTION ASSISTANCE

Area Agency on Aging	800-852-7795
Hartland Senior Center	810-626-2135
Livingston County Catholic Charities	800-489-6107
Oakland Livingston Human Services	517-546-8500

MEDICAID HELP & INFORMATION

CSS-Council on Aging	800-803-7174
Department of Human Services	517-548-0287
MMAP Liv. Co. Catholic Charities	800-489-6107

MEDICARE HELP & INFORMATION

CSS-COUNCIL ON AGING	800-803-7174
Medicare/Medicaid Asst. Program	800-803-7174
Medicare Fraud/Abuse	800-803-7174
Michigan Peer Review	800-365-5899

NATIONAL TELEMARKETING

National Do Not Call Line	888-382-1222
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NURSING HOMES / ALZHEIMER'S CARE

Ashley Court of Brighton	810-225-7400
Cartel Inns of Brighton	810-220-5222
Medilodge of Howell	517-548-1900
WellBridge of Brighton	517-947-4400
White Pines	517-546-4210

NURSING HOME INFORMATION

Citizens for Better Care	800-833-9548
Housing Bureau for Seniors	734-998-9339
Michigan Department of Public Health	
Licensing Information	517-334-8408
Complaints	800-882-6006

RESOURCE ADVOCACY

Livingston County Catholic Charities	800-489-6107
Hartland Senior Center	810-626-2135

RESPIRE CARE

Area Agency on Aging	800-852-7795
Ashley Court of Brighton	810-225-7400
LCCC Interfaith Volunteer Caregivers	517-545-5944
Vista Spring	517-540-1926
Winterwood Estates	800-427-6298
White Pines	517-546-4210
Sunset Pines	810-407-0603

SENIOR CENTERS/GROUP SITE MEALS

Brighton	810-299-3817
Fowlerville	517-223-3929
Gregory	734-498-2502
Hamburg	810-222-1140
Putnam (Pinckney)	734-878-1810
Hartland	810-626-2135
Howell	517-545-0219

SENIOR SUBSTANCE ABUSE INFORMATION

Livingston. Co. Catholic Charities	517-545-5944
Brighton Center for Recovery	810-227-1211
Chelsea Hospital Older Adult Recovery Center	734-475-4029

SUPPORT GROUPS

Alzheimer's	
Livingston County Catholic Charities	517-545-5944
Caregivers Support Group	517-546-9910
Alcoholics Anonymous	517-540-9533
Narcotics Anonymous	810-299-6525
American Cancer Society	800-227-2345
American Diabetes Assoc.	800-232-3472
American Heart Assoc.	800-968-1793
Grief Support	517-546-2800
Livingston Stroke	517-545-6333
Parkinson Support Group	810-714-5411
Visually Impaired & Blind of Liv. Co.	810-231-1277

TRANSPORTATION

LCCC Volunteer Caregiver	517-545-5944
Brighton Cab Company	810-227-6500
Brighton Senior Center option #4	810-299-3817
Hartland Senior Center	810-632-6286
Michigan Transportation	877-777-7900
LETS Bus Service	517-546-6600

VETERANS

AMVETS Dept. of MI Post 2273	989-288-3655
VA Medical Center	734-845-5281
Veterans Services or Trust Fund	517-546-6338

VISION IMPAIRMENT

Kellogg Eye Center U of M	734-763-8122
Washtenaw County Library for the Blind	734-327-4224
The Visually Impaired and Blind	810-231-1277
Eye Travel	248-376-6046

VOLUNTEER OPPORTUNITIES

Livingston Catholic Charities:	517-545-5944
• Be Our Guest Adult Day	
• Transportation	
• Friendly Visitors	

SOCIAL SECURITY

877-619-2847

MEDICARE

800-633-4227

Web Sites

www.livingstoncatholiccharities.org

www.aaa1b.com

www.alz.org

www.click_on_aging.com

Livingston County Catholic Charities is funded in whole or in part by the Federal Older Americans Act and the Michigan Office of Services to the Aging through the Area Agency on Aging 1-B. Livingston County Catholic Charities complies with the terms and regulations of the Title V of Civil Rights Act of 1964 as amended and Section 504 of the Social Rehabilitation Act of 1973 and is an Equal Opportunity Employer program. Reasonable accommodation will be provided upon notification or request.

U/Winword/Senior Programs/Resource Advocacy/RA Directory/2014 Resource Directory 7/1/15



Community Resource Book

Livingston County

12/5/2017

Brighton Family Physicians

AB

Table of Contents

Table of Contents.....	1
Personal Health/Medical Assistance.....	4
Hospitals, Clinics & Urgent Cares.....	5
SJM Livingston.....	5
SJM Brighton.....	5
McAuley Support Program.....	5
St. Luke Hometown Healthcare.....	5
Advance Urgent Care.....	5
Health Care Plans.....	5
Livingston County Health Department -.....	5
Medicaid.....	5
Livingston County Health Plan B.....	5
Livingston County Department of Human Services.....	6
Prescription Drug Assistance.....	8
Large Retailers.....	8
Prescription Drug Patient Assistance.....	8
Livingston County Health Department.....	8
Dental Care.....	8
VINA Community Dental Center.....	8
MCDC (My Community Dental Center).....	9
Breast Feeding.....	9
Breast Feeding Patient Handouts.....	9
Children’s Special Health Care Services.....	9
Chronic Disease Prevention and Management.....	9

MyPlate	9
CDC Healthy Weight.....	9
Diabetes Prevention and Management	9
Diabetes Patient Handout.....	10
Prescription for Health.....	10
Communicable Disease Control	10
Communicable Disease Patient Handouts.....	10
Nurses Welcome Newborns	10
Nurse Welcome Newborn Patient Handouts	10
Financial Assistance	10
Money Management International	11
Right At Home	11
Helpful Information/Tips	11
Avoiding Scams	11
Utility Assistance	11
DTE Case Management.....	12
Consumers Energy Case Management	12
Helpful Hints	12
Unemployment Assistance	12
Unemployment Insurance Agency.....	12
Michigan Works! Agencies.....	13
Social Security Benefits.....	13
Planning your Job Search	13
Helpful Hints	14
Housing Assistance	14

Steps to Receiving Assistance with Housing Expenses.....	14
Step 1	14
Step 2	14
Step 3	15
Transportation Assistance.....	15
Steps to Receiving Assistance with Transportation.....	15
Step 1 –	15
Step 2 –	15
Step 3 –	16
Mental Health.....	16
Self Help Meetings.....	16
Adult Children of Alcoholics:.....	16
Bereavement Support Groups	17
Cancer Support Groups.....	18
Deaf & Hard of Hearing Support.....	18
Emotions Anonymous.....	18
Families Anonymous- SE Michigan Intergroup.....	18
Gamblers Anonymous.....	19
Herpes Support Group	19
Infertility Support Group (Resolve of Michigan).....	19
Kleptomaniacs & Shoplifters Anonymous (CASA):.....	19
Learning Disabilities Association of Michigan.....	20
Mental Illness Support Groups	20
Narcotics Anonymous.....	20
Obsessive/Compulsive Disorder Support Groups.....	20

Parents of Children with Any Disability:	20
Recovery, International (formerly, Recovery, Inc.) :	21
S-Anon.....	21
Take Off Pounds Sensibly (TOPS)	22
Widow(ers) Support Group.....	22
Resources in Livingston County	22
Community Mental Health Service	22
Programs for the Aging.....	23
Tri-County Office on Aging	23
Caregiver Support.	23
Case Coordination.....	23
Crisis Services for the Elderly	23
Meals on Wheels.....	23
Nursing Facility Transition Care	23
Options Counseling	24
Project Choice	24
The Senior Dine Card	24
Food Assistance	24
Food Programs and Pantries.....	24
Meal Programs.....	26

Personal Health/Medical Assistance

If you've lost your health insurance and you need medical care, consult your doctor or hospital for available payment plans.

Hospitals, Clinics & Urgent Cares

SJM Livingston - 620 Byron Road, Howell, MI 48843 - 517.545.6000-www.stjoeslivingston.org

SJM Brighton- 7575 Grand River, Brighton, MI 48114 - 810.844.7575 - www.stjoeshealth.org

McAuley Support Program

Offers financial assistance for medically necessary in-patient services to qualified uninsured and underinsured residents. Call 734.712.2009 for more information.

St. Luke Hometown Healthcare - 9912 E. Grand River Ave. Suite 1000, Brighton, MI 48116
810.623.8182

Offers basic health care and psychiatric services at reasonable prices, for those without insurance. Call for an appointment. Walk in hours also available, contact for more information.

Advance Urgent Care - 1021 Karl Greimel Drive Suite 102, Brighton, MI 48116

Open daily 9 a.m. to 9 p.m. including all major holidays.

Health Care Plans

Livingston County Health Department - 2300 E. Grand River, Howell, MI 48843

517.546.9850 - www.livgov.com/health

Also provides wide range of medical testing, screening for disease including TB testing, HIV testing, flu clinics, hearing & vision screenings.

MI Child Registration

A state health plan for uninsured children, ages 18 years & younger of working families at or below 200% of federal poverty level. Use online calculator to determine eligibility or call 888.988.6300.

Woman Infants & Children (WIC)

Serves low income pregnant and breastfeeding women, and their children up to the age of five. The program also screens clients for health issues and can make referrals to health services.

Medicaid

Medicaid is a government health care program available to persons that are aged, blind or disabled. Its also available to families or eligible parents/caretakers relatives for a dependent child.

Livingston County Health Plan B - 2300 E. Grand River, Howell MI 48843- 517.546.9850-
www.livgov.com/health/Pages/healthplanb.aspx

This is a county funded health plan which assists with out-patient health care costs. Enrollment and physician participation is limited. One must be a resident of Livingston county to be eligible.

Eligibility is based on annual household income equal to or less than 150 % of the federal poverty level and limited assets.

Livingston County Department of Human Services - 2300 E. Grand River, Howell, MI 48843 - 517.548.0200

Health care coverage is available to individuals and families who meet certain eligibility requirements. In Michigan, there are many health care programs available to children adults and families. The Michigan Department of Health and Human Services (MDHHS) determines eligibility for most of the health care programs. Contact for the local branch (available above). Find more information about this on their website: www.michigan.gov/mdhhs/0,5885,7-339-71547_4860-35199--,00.html

U-19 – a Medicaid health care program for low income children under the age of 19. This program can provide a package of health care benefits including vision, dental, and mental health service. Contact your local MDHHS office to apply (info above).

MiChild - A health care program for children who are under the age of 19 administered by the MDHHS. It is for the low income uninsured children of Michigan’s working families. MiChild has a higher income limit than U-19 Medicaid. There is only a test of income. There is a \$10 monthly premium per family (covers all children in one family). Beneficiaries receive a package of health care benefits including, dental, vision and mental health services. Contact your local MDHHS office to apply (info above).

[View brochure on MiChild](#)

Children’s Special Health Care Services (CSHCS) - A program within the MDHHS that provides certain approved medical coverage to some children and adults with special health care needs. Children must qualify with certain medical conditions and must be under the age of 21. Anyone over the age of 21 may qualify for services if they have cystic fibrosis or certain blood coagulating disorders. For more information on CSHCS go to: www.michigan.gov/mdhhs/0,5885,7-339-71547_35698---,00.html

Under 21 – Medicaid is available to eligible persons under the age of 21. There is an income test and an asset test for this program. If the person has an income that’s over the income limit the person will be assigned a deductible. Persons may incur medical expenses that equal or exceed the deductible and still qualify for this program. Beneficiaries receive a package of health care benefits including, dental, vision and mental health services. Contact your local MDHHS office to apply (info above).

Supplemental Security Income (SSI) for Children – This is a cash benefit for disabled children whose families have low income. The Social Security Administration (SSA) determines eligibility. Beneficiaries are automatically eligible for Medicaid and most are enrolled in a Medicaid health plan. Medicaid may continue even if SSI stops.

Pregnant Women – Medicaid is available to eligible woman while they’re pregnant including the month her pregnancy ends and during the two months following the end of her pregnancy regardless of the reason (for example: live birth or miscarriage). There

is an income limit for this program. Contact your local MDHHS office to apply (info above).

Group 2 Pregnant Women – A woman who has income that exceeds the income limit for Pregnant Women (above), may be eligible for Medicaid under the Group 2 Pregnant Women. If the income is over the income limit the pregnant woman will be assigned a deductible. Persons may incur medical expenses that equal or exceeds the deductible and still qualify for this program. Contact your local MDHHS office to apply (info above).

Maternity Outpatient Medical Services (MOMS) – Provides health coverage for pregnant or recently pregnant women who are eligible for Emergency Services Only (ESO) Medicaid. MOMS provides coverage for outpatient prenatal services and pregnancy-related postpartum services for two months after the pregnancy ends. Medicaid ESO covers labor and delivery services. Contact your local MDHHS office to apply (info above).

Healthy Michigan Plan – Provides comprehensive health care coverage for a category of eligibility authorized under that Patient Protection and Affordable Care Act and Michigan Public Act 107 of 2013. It provides health care coverage for individuals who are 19 to 64 years of age; have an income of 133% of the federal poverty level. They cannot be enrolled/qualify for Medicaid or be pregnant at the time of application. To apply or for more information go to: www.michigan.gov/healthymiplan/

Caretaker Relatives - Medicaid is available to eligible parents and people who act like parents, caring for a dependent child (these people are called care taker relatives). There is a income test and an asset test for this program. Beneficiaries receive a package of health care benefits including vision, dental and mental health services. Contact your local MDHHS office to apply (info above).

Supplemental Security Income (SSI) for Adults – This is a cash benefit for low income adults who are aged, disabled or blind. The Social Security Administration determines eligibility. Contact the Social Security Administration to apply for this program. <https://www.ssa.gov/> or call 800.772.1213

Aged, Blind Disabled (AD Care) - Medicaid is available to persons who are aged, blind or disabled. There is an income and asset test. If the income is over the limit, persons may incur medical expenses that equal or exceed the deductible and still qualify for this program. Contact your local MDHHS office to apply (info above).

Disabled Adult Children (DAC) – A person who has a disability or blindness that began before the age of 22 may be eligible to receive Medicaid benefits in adult years. They must also be receiving DAC benefits from Social Security. Contact your local MDHHS office to apply (info above).

MIChoice – The MIChoice waiver provides home and community based health care services for the aged and disabled. The programs goal is to allow persons to remain at home to receive health services. The cost of home care services must be less than the cost of care in a nursing home. Contact your local MDHHS office to apply (info above).

Medicare Savings Program (MSP) – This savings a program pays for certain Medicare costs. There is an asset test. The MDHHS may help with the following (depending on income): Medicare premiums, Medicare coinsurance, and Medicare deductible. Contact your local MDHHS office to apply (info above).

Low Income Families (LIF) – Medicaid is available to families under the Low Income Family (LIF) Program. Families that receive cash assistance are automatically eligible for this program. Other families must apply at the MDHHS office- contact your local MDHHS office to apply (info above).

Special N Support – Special N Support is available to families that received Low Income Families Medicaid or cash assistance but are no longer eligible due to income from spousal support payments. Special N Support is available for four months. Contact your local MDHHS office to apply (info above).

Transitional Medical Assistance (TMA) – TMA is available to families that have received LIF or cash assistance. TMA is available for up to 12 months and the family does not need to fill out a new application. Contact your local MDHHS office to apply (info above).

Prescription Drug Assistance

Large Retailers

Many large retail stores with pharmacies such as Kroger, Meijer and Walmart offer prescription medication assistance for \$4.00 for generic prescription drugs or free antibiotics. Go to the local pharmacy (or call) to see which medications are included in the program and verify information with the physician to make sure that the medication is appropriate for your treatment plan.

Prescription Drug Patient Assistance

If the diagnosis requires non-generic medications not on the discounted formularies, visit www.needymeds.org to investigate patient assistance programs for specific medication. To compare the prices of medications at different pharmacies go to: www.goodrx.com. They also have listings of discounts for certain medications.

Livingston County Health Department - 2300 E. Grand River, Howell, MI 48843
517.546.985

The health department is also able to help patients with prescriptions with a prescription discount card. Contact the health department for more information.

Dental Care

VINA Community Dental Center - 400 E. Grand River Ave, Brighton, MI 48116 -
810.844.0240

This dental clinic is staffed by volunteer professionals and provides services to Livingston County residents. Must be 19 years of age or older, must lack dental insurance, with household incomes at or less than 200% of the federal poverty level. There is a nominal fee per office visit.

MCDC (My Community Dental Center) 1335 Byron Rd, Howell, MI 48843 - 877.313.6232 or 517.552.0321

This is owned by the Livingston County Health Department and operated by My Community Dental Centers, will provide quality oral health care to all patients in need of a new dental home. The center will focus specifically on patients who are under insured or without insurance; those on Medicaid, Healthy Michigan Plan, or Healthy Kids; and those who have difficulty accessing dental services.

Breast Feeding - 517.546.5459

The Livingston County Health Department offers classes for mothers and support persons. The public is welcome. Call to register.

Breast Feeding Patient Handouts

[Breast Feeding Rights](#)

[Breast Feeding Class](#)

Children's Special Health Care Services - 517.522.6823

A state of Michigan program that provides early identification and advocacy for children with eligible medical conditions. This program can also help assist with medical costs.

Children's Special Health Patient Handouts

[Family Rights](#)

[Family Center](#)

Chronic Disease Prevention and Management

Physical activity and nutrition are essential components of a healthy lifestyle. In combination they can help prevent a range of chronic diseases including heart disease, stroke and cancer.

MyPlate - This website can help plan your diet. This shows you the right foods and the amount of food that's right for your body. Access this [here](#).

CDC Healthy Weight - This website has tips and tricks for healthy eating. It offers healthy recipes, preventing weight gain and more. Access this [here](#).

Diabetes Prevention and Management

The Livingston County Health Department has created a guide that includes resources and information about preventing diabetes and ways to manage diabetes if you have been diagnosed.

Diabetes Patient Handout

[Diabetes Guide](#)

Prescription for Health - 517.546.9850

Prescription for Health is a fruit and vegetable program that aims to increase fruit and vegetable consumptions and supports a healthier lifestyle. Participants must have food insecurity and be at risk of chronic disease. This program is supported by local farmers, farmers markets as well as Shared Harvest Pantry (Gleaners). By referral only.

Communicable Disease Control - 517.552.6882

A public health nurse is available to answer questions about communicable diseases during business hours (number above). To report a serious communicable disease call 517.546.9850, staff available 24 hours a day.

Communicable Disease Patient Handouts

[STI Report](#)

[Animal Bites](#)

Nurses Welcome Newborns

Families of infants in Livingston County have an opportunity to receive home care visits with a public health nurse at no charge. The nurses are able to provide support with breast feeding, infant weight checks, answer questions on crib safety, growth and development home safety.

Nurse Welcome Newborn Patient Handouts

[Information on Crib Safety](#)

[Safe Sleep Information](#)

[Nurses Welcome Newborns Flyer](#)

Financial Assistance

Questions to ask yourself when assessing your current financial situation: *Have I listed and totaled my monthly bills and expenses? Do I know how much I need?*

What can I do to reduce my monthly payments and expenses?

- Contact mortgage lenders and other creditors to discuss payment reductions, refinancing, partial payments and skip-pay options to reduce your monthly debt.
- Review discretionary household spending, such as entertainment, recreation, media and gifts. Make a plan to reduce the unnecessary costs and stick to it.

Money Management International

866.889.9347 - www.moneymanagement.org

Offers free online or by phone assistance. Can offer counseling in housing, debt management and can educate on bankruptcy. Certified by the US Department of Housing and Urban Development (HUD).

Right At Home

www.rightathomeanswers.org

This is an online resource that offers comprehensive information on housing issues, including foreclosure information and many links to additional housing related information. Brought to you by the Michigan Credit Union League (funding from a National Credit Union Foundation Innovation Grant) with Michigan State University Extension, Michigan Association of United Ways and CU Solutions Group.

Helpful Information/Tips

- Start communicating with landlords, creditors, etc. as soon as you anticipate a cash flow problem.
- Keep a record of all phone and in-person conversations with lenders, creditors and counselors; get any promises in writing.
- Read everything until you understand it – before signing anything.
- A HUD-approved financial counselor can often help budget and re-negotiate debt much more effectively than you can on your own. Don't be afraid to contact them, they can educate you on your rights.

Avoiding Scams

- Do not pay up front for information or any form of assistance. Large up-front fees are sure signs of fraud. A reputable counselor may charge a reasonable fee, but NOT before services are rendered.
- Be wary of service providers who promise a sure thing or guarantee to keep you in your home or eliminate your debt.
- Avoid solicited offers. Many scams will even include government sounding names or website addresses or agency logos to falsely portray an affiliation with legitimate government programs.

Call 2-1-1 for other services and additional assistance.

Utility Assistance

Questions to ask yourself when thinking about utility expenses (electricity, water, gas, propane, trash, sewer, septic etc.):

Is there anything I can do to reduce or manage my costs?

- Think weatherization like insulation, window coverings and weather stripping. For more information on assistance if your house is in need of weatherization call Oakland Livingston Human Services Agency (OLHSA) 517.546.8500.
- There are many ways to reduce the amount of energy you use. Little things can make a big difference: turning lights off, closing off unused rooms, reducing your use of air conditioners, washing clothes with cold water instead of hot water and changing the furnace filters.
- Look into payment plans and/or winter protection programs with your utility company to set regular monthly payments.

Many utility companies have case management lines that you can contact to talk about payment plans before your account gets behind. Your provider may allow you to slowly eliminate a past balance without losing your current services. Call to find out (info below).

DTE Case Management

800.477.4747 - www.newlook.dteenergy.com/wps/wcm/connect/dte-web/home/billing-and-payments/common/energy-assistance/general-assistance

Consumers Energy Case Management

800.477.5050- www.consumersenergy.com/residential/programs-and-services/payment-assistance

Helpful Hints

- The name on the bill must match the name of the person requesting assistance.
- You may still legally responsible for bills in your married spouses name-even if you are separated and living at different addresses.
- To apply for assistance when you are responsible for the utility bill, but the account is listed in the landlords' name – present your lease agreement which stipulates this arrangement.

Unemployment Assistance

Unemployment or the loss of one's job affects individuals both emotionally and financially. Typically, the reduction of income is the first noticeable change in the household. As the period of unemployment lengthens, the emotional impact and the resulting stress become greater burdens.

Many of your concerns during periods of unemployment will focus upon financial needs. During this time of reduced income, you should make use of all financial assistance and counseling (personal and professional) resources. Below are programs that can assist you.

Unemployment Insurance Agency

866.500.0017- www.michigan.gov/uia

The Unemployment Insurance Agency administers the state of Michigan's unemployment insurance program, an employer-funded program, which pays weekly unemployment benefits to eligible workers.

All unemployed workers should apply for unemployment insurance as soon as they become unemployed to see if they are eligible.

Michigan Works! Agencies – One Stop Service Centers

1240 Packard Drive, Howell, MI 48843 - 517.546.7450 - www.michiganworks.org

Michigan Works! Livingston Jobs Center provides employers and job seekers in Livingston County with “one stop” employment and training information. Those services include:

- Registration for Michigan’s Talent Bank
- Access to centralized database for current job openings
- Career assessment services
- Career Resource Room containing labor market information and career planning information
- Assistance with resumes, interviewing skills and other job search skills

In addition, specialized services are available for those who meet certain eligibility guidelines. Those services include:

- Tuition assistance to learn new job skills
- Referral to available job openings
- Specialized job search workshops
- Assessment and career counseling
- On-the-job training and customized training
- Job development and placement services
- Support services while in training

Social Security Benefits

5210 Perry Robinson, Lansing MI, 48911- 517.393.3876 or 800.772.1213 - www.ssa.gov/potentialentitlement

Social Security benefits include monthly payments made to certain formerly employed persons or their beneficiaries. Generally, those eligible are retired persons 62 years or older, disabled workers, and spouses and children of disabled or deceased workers. . Visit their website for more information.

Planning your Job Search

The best way to cope with unemployment is to find another job as soon as possible. Planning and implementing an effective job search takes sustained effort. Your local Michigan Works! offers adult education classes. For information on Michigan Works! Click [here](#).

- Be sure to let family, friends and colleagues know you are seeking employment –but be specific about your job target. The more clearly you can define your goals, the easier it will be for the others to identify possible job leads for you.
- Many people find job openings through personal contacts and friends, so don’t limit your job search scope by keeping quiet.

- Take initiative. Follow up on all job leads. Call back after the interview and again later to see if someone else was hired for the job. Perhaps you will learn something which will help you in future job searches.

Helpful Hints

- Individuals can get more information about filing for unemployment with the local Michigan Works! Service Center, however the application for the unemployment must be made with the UIA (Unemployment Insurance Agency).
- If you apply for unemployment online or by phone you will still need an initial in-person visit at your local [Michigan Works! Service Center](#).

Housing Assistance

Questions to ask yourself when thinking about housing expenses (house payments, rent, taxes, association fees, etc.):

Is there anything you can do to reduce or manage the cost?

- Talk to your landlord or mortgage company about options.
- Consider ways to reduce costs within your current residence like getting a roommate or sharing housing expenses with family members.
- Negotiate with your home owners association to reduce association fees or substitute payment for labor.
- Keep track of your monthly expenses and identify nonessential services that could be canceled to free additional housing dollars.

Steps to Receiving Assistance with Housing Expenses - There are many different types of housing circumstances some individuals rent, some own, some people live with friends, others share their home with extended family. As a result of the various housing scenarios, there is no single way to approach to addressing every housing concern. This portion of the resource book is intended to assist individuals who do NOT own their home. For homeowners, please refer to [Financial Assistance](#).

Step 1 - Many landlords and apartment management companies are able to work with tenants who are proactive and upfront about their inability to pay rent on time. Negotiating a later due date or paying a partial amount can help bridge gaps when resources are limited. You may want to consider if your current housing still fits your needs and ability to pay.

Step 2 - The first step to seeking help with housing costs (rent, security short-term emergency housing) is to contact Oakland Livingston Human Services Agency (OLHSA). The application process for many housing assistance programs may be lengthy and require a significant amount of personal information. All services offered through OLHSA are confidential. Your personal information will be protected.

Step 3 - Other community agencies may be called upon to help satisfy the full amount needed. This coordination among community agencies often requires additional paperwork, which can seem duplicative and cumbersome. Please be patient. Community agencies that may offer assistance with rent and related expenses are listed below.

Oakland Livingston Human Services Agency (OLHSA) - 2300 East Grand Rive Suite 107, Howell, MI 4843 - 517.546.8500

The Salvation Army - 503 Lake Street, Howell, 48840 - 517.546.4750

Transportation Assistance

Questions to ask yourself about transportation expenses (maintenance, gas, insurance): Is there anything you can do to reduce or manage cost?

- Locate professional carpools and park-and-ride opportunities in your area.
- Share rides with friends and family members and coordinate outings to frequently visited places like the grocery store or school.
- Visit radio stations and websites like [GasBuddy](#) that report the best gas prices in your area.
- Talk to your insurance provider to see if they can help you reduce costs.

If you're worried about falling behind on your car payment, talk to your lender before you miss your first payment. Schedule an appointment to review your options and talk about your alternatives. You may be able to negotiate with you lender to reduce your payment, skip a payment, or change your payment due date. If you have already missed a payment, initiate the conversation with your lender.

Michigan drivers are required to carry a minimum of no fault automobile insurance, but it may make sense to reduce your coverage or raise your deductible to lower your insurance costs, at least for the short term.

Steps to Receiving Assistance with Transportation

Step 1 – Consider existing natural supports that exist within your network of family, friends, church, service clubs or other associations. Perhaps some of your transportation needs can be met by coordinating within your community networks and planning ahead. Some churches and non-profit agencies provide volunteer driver programs available to their members on a limited basis.

Step 2 – If your transportation needs cannot be met within your personal and community networks, there are very limited community transportation resources. The following resources can help if you have regularly scheduled engagements; are staying within the county, or in some cases slightly into adjacent counties; and can plan ahead to schedule pick-up and drop-off.

Livingston Essential Transportation Service (L.E.T.S.) - 3950 W Grand River Avenue, Howell, MI 48855 - 517.546.6600 - www.livgov.com/lets

Call to schedule a ride, at least one day in advance. Cost will be determined then. In 2018 L.E.T.S will be expanding services to outlying northern and southern townships. They will also be expanding their hours.

Peoples Express (Washtenaw County & adjacent areas) - 877.214.6073 - www.peoplesexpressmi.com

Call to schedule a ride, at least three days in advance. Cost will be determined then.

If these community transportation resources cannot meet your needs, go to Step 3.

Step 3 – Many local nonprofit agencies (listed below) may offer help in the form of gas card vouchers, bus tokens, or car repair programs on an extremely limited basis, especially if you meet the eligibility requirements of one or more of their programs and have an open case with one of the agencies.

Brighton Senior Center – 850 Spencer Rd, Brighton, MI 48116 – 517.404.9353

Call Monday-Friday at least one day in advance for medical transportation. You MUST be age 50 or older or physically challenged. Wheelchair lift access. Cost varies based on distance.

Hartland Senior Center – 9525 Highland Rd, Hartland, MI 48353

Call Monday- Friday. Medical, shopping and social transportation provided. You MUST be age 50 or older, disabled and a resident of Hartland School district, Tyrone, or Deerfield Townships. Wheelchair lift access, door to door service. Cost varies based on distance.

Michigan Transportation Services (MTS) -517.552.1194 –

<http://www.michigantransportation.com/schedule/>

Offers nonemergency transportation in five locations: Ann Arbor , Brighton, Lansing, Madison Heights Lansing and Novi. Family members and aides are able to travel with as well. Door to door service. Cost varies based on distance.

Mental Health

Self Help Meetings

Adult Children of Alcoholics: A list of meetings anywhere in the U.S. Visit www.allone.com/12/aca/

AIDS Partnership- Michigan: Self-help groups for people who have HIV+/AIDS, families, friends and the bereaved. For more information about services and support groups in Michigan call (800) 872-AIDS or visit www.aidspartnership.org.

Alanon: Visit www.afgmichigan.addr.com for meeting times and locations.

Alcoholics Anonymous: For meeting days, times & locations, visit www.aalivcomi.org/

Alcoholics for Christ: For meeting times and locations in Michigan, visit www.alcoholicsforchrist.com.

Alliance for the Mentally Ill: Self-help groups for people with a mental illness often with separate meeting for family & friends at the same time. For meeting times and locations in Michigan, visit www.nami.org.

Alzheimer's Caregiver Support Groups: For meeting days, times & locations in Michigan visit www.alz.org.

Anonymous One Self-Help U.S. Database: Substance abuse treatment centers, sober clubs, sober clubs and more. Visit www.anonymousone.com/main.htm

Anxiety Disorder Support Groups- Michigan: For meeting schedules and locations in Michigan, visit www.aim-hq.org/

Attention Deficit Disorder of Children & Adults (CHADD): Visit www.chaddmi.com for support group meeting times and locations.

Autism Society of Michigan: Contact 800.223.6722 or visit www.autism-mi.org for state resources.

Bereavement Support Groups: Self-help groups for people going through the bereavement/grieving process. Hospices typically have groups; visit the Michigan Hospice & Palliative Care Organization at www.mihospice.org to find a hospice near you.

Bereavement Support Groups (Compassionate Friends) : The mission of Compassionate Friends is to assist families toward the positive resolution of grief following the death of a child of any age. For meeting time/locations, call toll-free 877.969.0010; for more information about Compassionate Friends, visit www.compassionatefriends.org.

Beyond Affairs Network (BAN) : Support group for dealing with a partner's affair. BAN is a non-profit, volunteer, grass-roots organization which provides men and women who are dealing with a partner's affair to come together for strength, insight and mutual support. Visit BAN's website at www.dearpeggy.com or contact westmichiganBAN@excite.com for information on Michigan support group meetings.

Cancer Support Groups: Call American Cancer Society, 734.971.4300 or visit www.cancer.org for support group meeting times and locations.

Chronic Fatigue & Immune Dysfunction Syndrome Association of America: Visit the website at www.cfids.org

Chronic Pain Association: Self-help for people with chronic pain to cope with their situation (pain that lasts six months or longer). Contact the American Chronic Pain Association at 800.533.3231 or visit www.theacpa.org for more information.

Cocaine Anonymous: A fellowship of men and women who share their experience, strength and hope with each other to overcome their common problem. Visit www.camichigan.org to access contact numbers and meeting times in Ann Arbor, Flint, Grand Rapids, Jackson & Lansing.

Codependents Anonymous: Visit www.codependents.org for a meeting close to you or more information about CoDA.

Compulsive Eaters Anonymous: For times and locations of meetings in Michigan, visit www.ceahow.org.

Deaf & Hard of Hearing Support: WASHHH is a chapter of the National Self Help for Hard of Hearing People (SHHH). For more information visit www.mi-shhh.org.

Debtors Anonymous: Visit www.debtorsanonymous.org for more information about DA.

Depressed Anonymous: Visit www.depressedanon.com for meeting times in the U.S.

Depression & Bipolar Support Alliance: Peer-led support groups. Visit www.dbsalliance.org for more information and meeting locations & times.

Divorce Support Groups: Self-help meetings for separated or divorced persons in Michigan. Visit www.divorcesource.com/groups/michigan.shtml.

Emotions Anonymous: Self-help groups sharing experiences, hopes and strengths with each other using 12-Step program to gain better emotional health. Visit www.emotionsanonymous.org for information or <http://allone.com/12/ea/> for EA meeting times and locations.

Families Anonymous- SE Michigan Intergroup: Self-help & 12 Step groups for families coping with a drug/alcohol and behavioral problems in the family. For meetings in Michigan, call (800) 736-9805 or visit www.familiesanonymous.org.

Fathers & Children, National Congress of: Self-help group for the rights of children of divorce to have equal access/parenting from both parents. Call the national office at

800.SEE.DADS or visit www.ncfnh.org/ for a meeting time/location.

Food Addicts in Recovery Anonymous: Are you having trouble controlling the way you eat? Are you underweight? Overweight? Obsessed with food, weight, or dieting? Our program of recovery is based on the Twelve Steps and Twelve Traditions of Alcoholics Anonymous. We make use of AA principles to gain freedom from addictive eating. There are no dues, fees, or weigh-ins at FA meetings. Membership is open to anyone who wants help with food. Visit www.foodaddicts.org/ for a meeting time/location near you.

Gamblers Anonymous: [Click here](#) for the meeting times and locations for the 40 Gamblers Anonymous groups in Michigan. For more information about GA, visit www.gamblersanonymous.org.

Gam-Anon: Self-help meetings for the spouse, family or close friends of compulsive gamblers. For meeting times and locations, visit www.gam-anon.org

Gay, Lesbian, Bisexual & Transgender National Help Center: A non-profit, tax-exempt organization that is dedicated to meeting the needs of the gay, lesbian, bisexual and transgender community and those questioning their sexual orientation and gender identity. Visit www.glnh.org for more information.

Gays & Lesbians, Friends, Parents & Family Support Group (PFLAG) : For meeting times and locations, visit www.pflag.org.

Grief Support Groups: Hospices almost always have support groups for families and individuals. For a list of Hospices in Michigan, visit www.mihospice.org

Grief Support Group (Compassionate Friends): Self-help group for parents whose child has died. For more information, visit www.compassionatefriends.org.

Herpes Support Group: For information about the National Herpes Resource Center, visit www.ashastd.org/hrc/index.html

HIV/AIDS Partnership Michigan: Call AIDS Partnership, 800.872.AIDS or visit www.aidspartnership.org for up-to-date support meeting times and locations.

Infertility Support Group (Resolve of Michigan) : Peer-led groups providing people with opportunities to meet others who are experiencing infertility, form friendships, build a support system, and gather information and knowledge. These are non-professional led, informal discussion groups. For information, visit <http://greatlakes.resolve.org/>.

Kleptomaniacs & Shoplifters Anonymous (CASA): Self-help group founded in 1992 for persons with theft behaviors.

Tuesdays 7:00-8:00PM, Brighton Hospital Chapel, 12851 E. Grand River, Brighton
For more information, contact Terrence Shulman, 248.358.8508,

terrenceshulman@theshulmancenter.com or visit www.kleptomaniacsanonymous.org

Learning Disabilities Association of Michigan: Education & information group for parents & professionals & support groups for parents. For more information, contact 888.597.7809 or visit www.ldaofmichigan.org/.

Mental Illness Support Groups: Visit www.nami.org for more information.

Miscarriage & Newborn Loss Support Group: Monthly support meetings, parent to parent program. For more information, contact 734.973.1014 or visit www.lamaze.org/.

Mothers Against Drunk Driving: Visit www.madd.org for national and local information.

Narcotics Anonymous: For meeting days, times & locations in Livingston County, visit www.michigan-na.org/livingston/liv_meetings.htm

Nar-Anon Family Groups: Self-help groups for families and friends of people with substance abuse problems. Visit www.nar-anon.org/naranongroups.htm for Michigan meeting locations or general information.

National Association for the Physically Handicapped (NAPH): A support group for people with physical disabilities focusing on improving the social, economic & physical welfare of all the physically handicapped. For more information, visit www.naph.net

Nicotine Anonymous: Visit <http://nicotine-anonymous.org> for up-to-date listings of meetings in the state.

Obsessive/Compulsive Disorder Support Groups: Visit www.ocfoundation.org for information about statewide and nationwide programs.

Overcomers Anonymous: Support groups that use the Bible and the 12 Steps of Alcoholics Anonymous to minister to individuals who are affected by alcohol, mind altering drugs, sexual addiction, gambling, food and other compulsive behaviors or dependencies. Family members are welcome to meetings. Contact 800.310.3001 for meeting times in Michigan or visit www.overcomersoutreach.org for more information.

Overeaters Anonymous: Visit the OA website at www.aa.org/ to find a meeting near you.

Parents of Children with Any Disability: Contact Family Support Network of Michigan, 800.359.3722 or visit www.projectfindmichigan.org.

Postpartum Depression Support Groups: For meeting locations and times in Michigan, visit www.postpartum.net.

Recovery, International (formerly, Recovery, Inc.) : This self-help program offers its members a free method to regain and maintain their mental health. Our members include people diagnosed with mood disorders including depression, dysthymia and bipolar (manic-depressive) disorders; psychotic disorders including schizophrenia; anxiety and obsessive-compulsive disorders; and personality disorders. The program is designed to work in conjunction with professional mental health services. Recovery, International is operated entirely by non-professionals. Visit www.lowselfhelpsystems.org for meeting times and locations.

S-Anon: Self help groups for people who are being affected by another person's sexual addiction. Visit www.sanon.org for more information.

Schizophrenics Anonymous: For more information, visit www.schizophrenia.com.

Secular Organization for Sobriety: Self help group for people who have a drinking or drug problem; not a spiritual group. Visit www.cfiwest.org/sos/asp/find.asp for up-to-date meeting locations and times for Michigan.

Sex Addicts Anonymous: Call SAA national office at 800.477.8191 or visit www.sexaa.org for the time and locations of current meetings in Michigan..

Sexaholics Anonymous: Visit www.sa.org for general information and for how to find meetings in Michigan.

Smart Recovery: An alternative to AA & NA meetings. Visit www.smartrecovery.org for general information and for how to find meetings in Michigan.

Smokefree.gov: A website created by the Tobacco Control Research Branch of the National Cancer Institute offers an online step-by-step cessation guide, local and state telephone quit lines, NCI's national telephone quitline, NCI's instant messaging service and publications, which may be downloaded, printed, or ordered. Visit: smokefree.gov

Smoking Cessation: State of Michigan Tobacco Quitline- Free nicotine patches, gum and lozenges are offered by the Michigan Department of Community Health for tobacco users who enroll in free cessation services through the Michigan Tobacco Quitline. The tobacco quitline can be reached 24 hours a day, seven days a week, at 800.784.8669. The quit program also provides personal coaches to help develop individualized quit plans. The coaches provide ongoing support with up to five telephone sessions around the caller's quit date. Spanish-speaking coaches are available. The program is available to all callers 18 and older, regardless of income or insurance status. Website: www.michigan.gov/tobacco

Stop Smoking (Freshstart): American Cancer Society. Call 800.ACS.2345 for information on services or visit www.cancer.org for more information.

Sudden Infant Death Syndrome Alliance: Tomorrow's Child/Michigan Sudden Infant Death Syndrome (SIDS) is a non-profit organization dedicated to preserving the lives of

newborns and healing families, one day at a time. and is a resource for grief support, risk reduction, and community education, leading the effort to provide information and assistance to families and the medical community. Call 800.331.7437 or visit www.tomorrowschildmi.org for more information.

Survivors of Suicide Support Groups: Visit www.survivorsofsuicide.com for more information.

Take Off Pounds Sensibly (TOPS) : Helps overweight persons attain and maintain their goal weights. Promotes a sensible approach to weight control. Discussion & programs to provide support & motivation. Visit www.tops.org for meeting locations & times in Michigan.

Tourette Syndrome Association: Self-help group for families with Tourette syndrome and associated disabilities such as attention deficit disorder or obsessive compulsive disorder. Contact the Michigan Chapter at 248.641.8725 for more information about local resources. Visit www.tsa-usa.org/ for information about the national organization.

Widow(ers) Support Group: Hospices typically have support groups for widows(ers); visit the Michigan Hospice & Palliative Care Organization at www.mihospice.org/ to find a hospice near you.

Women for Sobriety: a non-profit organization dedicated to helping women overcome alcoholism and other addictions through face-to-face and online chat groups. Visit www.womenforsobriety.org for more information.

Workaholics Anonymous: The website of W.A., www.workaholics-anonymous.org, includes information on program literature, W.A. meetings, the W.A. Book of Recovery, conferences and newsletters, and how to contact the organization.

Resources in Livingston County

Community Mental Health Service – 517.546.4126

They provide emergency services, assessment, health and medication services, client services management, individual and group therapy, assertive community treatment, older adult services, respite, substance abuse services, community supported living, wraparound and psychosocial rehabilitation. They have a few different locations that offer different services, see below:

Miller Building – 622 East Grand River, Howell, MI 48843

- Individual and Group Therapy
- Child and Adolescent Services
- Wraparound
- Respite
- Administration and Finance

East Complex Building – 2280 East Grand River, Howell, MI 48843

- Intake and Assessment
- Health and Medication Services
- Client Services Management
- Community Independence Program
- Community Supported Living
- Individual and Group Therapy
- Substance Abuse Therapy
- Older Adult Services
- Respite
- Assertive Community Treatments

Genesis Home – 501 West Grand River Ave, Fowlerville, MI 43336

- Work-ordered Day
- Transitional Employment

Stepping Stones – 2020 East Grand River, Suite 102, Howell, MI 48843

- Engagement Center

Programs for the Aging

Tri-County Office on Aging -517.887.1440

Caregiver Support – This is for caregivers and their families in order to plan for the future regarding concerns such as housing, finances, and long term care options, adult day services and respite.

Case Coordination – Is available for people who can benefit from limited support. A specialist conducts an assessment and can arrange in-home services for eligible persons who need some assistance with some personal care, homemaking, chores,

Crisis Services for the Elderly – This provides assistance for non-medical emergencies. This can include utility shut of notices and prescriptions drug issues. Must be an adult 60 years old or older.

Meals on Wheels - There are several meal options. Each of these options offer meals that provide 1/3 of the daily nutritional needs of older adults.

Nursing Facility Transition Care - This service provides options to nursing facility residents by offering an alternative to institutional care. This program assists those who are

eligible to transition from a nursing facility to the comfort of their home or a licensed setting of their choice.

Options Counseling - Options Counseling offers older adults and their caregivers assistance in planning to meet needs, providing information regarding community resources and creating a plan of action. Options Counseling take place through both phone and in-person communication. This has no income requirement and is available to individuals as well as their support system.

Project Choice - This offers an alternative to nursing home care. A nurse and a social worker team assist eligible individuals with their families and friends to design a plan of care. Coordinating and providing key services, while respecting each individual's right to choose their own options. Offers clients the opportunity to remain at home or live in a setting of their choice.

The Senior Dine Card - A program that partners with local restaurants to provide meals to qualifying seniors. Clients receive a voucher that is accepted only at participating restaurants.

Food Assistance

Food Programs and Pantries

Agency	Address	Phone	Serving Hours	Programs Requirments/Information
<u>Bountiful Harvest</u>	803 West Main St, Brighton	810.360.0271	Friday 4pm-6pm Saturday 8am - 12pm	<i>Client Chocie Pantry:</i> Serves all of Livingston County
<u>Pregnancy Helpline</u>	7743 West Grand River, Brighton	810.494.5433	Call for an appointment.	<i>Baby food and formula:</i> <i>Serves all of Livingston County</i>
<u>Family Impact Center</u>	735 North Grand River, Brighthon	517.223.4428	Tuesday 10am-3pm Thursday 10am-3pm and 6pm-8pm Friday 10am to 2pm Call for an appointment.	<i>Client Chocie Pantry:</i> Serves all of Livingston County must have photo ID, proof of income, vists by appointments only up to 6 times a year.
<u>Saint Paul Lutheran Church</u>	7701 East M-36, Hamburg	810.231.1033	Open on the 1st and 3rd Wednesday from 1pm-4pm No appointment needed.	

<u>Hidden\ Springs Church</u>	5860 North Latson Rd, Howell	517.546.3577	Tuesday 9am-3pm Thursday <i>(emergency only)</i> 9am-2:30pm Call for an appointment.	<i>Client Choice Pantry:</i> Serves all of Livingston County. Must have photo ID and provide name and date of birth of family members.
<u>Oakland Livingston Human Service Agency</u>	2300 East Grand River Suite 107, Howell	517.546.8500	Monday and Friday 9am-3pm Tuesday, Wednesday and Thursday 5pm-7pm Saturday 9am-12pm	<i>Government Commodities Food Programs:</i> Programs for Seniors and Families.
<u>Shared Harvest/ Gleaners</u>	5924 Sterling Drive, Howell	517.548.3710	Monday and Friday 9am-3pm Tuesday, Wednesday and Thursday 5pm-7pm Saturday 9am-12pm Call for an appointment.	<i>Client Choice Pantry:</i> Serves all of Livingston County. Up to 6 visits a year. Qualifying Seniors can receive up to 12 visits a year. Call for more information.
<u>SonRise an Assembly of God Church</u>	1130 West Highland Road, Howell	517.546.2669	Monday 6:30pm-8:30pm Tuesday 9:30am-11:30am Call for an appointment.	<i>Client Choice Pantry:</i> Serves all of Livingston County. Up to 6 visits a year. 30 pounds per visits for a single person. 20 pounds per person for a family (80 pounds max).
<u>Saint Joseph Pantry</u>	440 East Washington, Howell	517.546.0090 ext. 109	Saturdays 9am-12pm Call for an appointment.	<i>Client Choice Pantry:</i> Serves all of Livingston County. Family size determines pounds of food per week.
<u>The Salvation Army</u>	503 Lake Street, Howell	517.546.4750	Monday - Friday 8:30am-4:30pm (closed from 12-1 each day) Call for an appointment.	<i>Box Program:</i> Serves all of Livingston County. Need ID for everyone in household. Can visit once every 30 days. Must be a 200% of the poverty level.
<u>Saint Mary's Catholic Church</u>	10601 Dexter Pinckney, Pinckney	737.878.3161	Call for an appointment.	
<u>Doras Cupboard</u>	5050 M-36, Stockbridge	517.851.7425	Tuesdays from 12pm-2pm	

Meal Programs

<u>Agency</u>	<u>Address</u>	<u>Phone</u>	<u>Serving Hours</u>	<u>Programs Requirments/Information</u>
<u>Bountiful Harvest</u>	803 West Main Street, Brighton	810.360.0271	Breakfast on Saturday 8am-11am	
<u>Fishes and Loaves</u>	Rotating between churches	810.494.4013	Sunday 5:30pm-6:15pm	<i>Community Dinner Kitchen: Open to all of Livingston County</i>
<u>Gods Kitchen Saint Joseph Catholic Church</u>	440 East Washington, Howell	517.546.0900 ext 109	Wednesdays 6pm	<i>Community Dinner Kitchen: Serves everyone of Livingston County. Ask for first name, age and zip code</i>
<u>Livingston County Senior Nutrition Program/Meals on Wheels</u>	9525 East Highland Road, Highland	810.326.2155	Weekdays	<i>Homebound Seniors: Must be 60 years old or older Senior Center weekday meals: call for more information</i>
<u>Plain Field United Methodist Church</u>	17845 M-36, Gregory	517.851.7651	Second Saturday of every month	
<u>Saint Mary Magdalen Catholic Church</u>	2201 Old US 23 Highway, Brighton	810.229.8624	Mondays 6pm	
<u>Saint Agnes Catholic Church</u>	855 East Grand River, Fowlerville	517.223.8684	Thursdays 6pm	
<u>Genesis Community (located in the Shephard of Lakes Church)</u>	2101 South Hacker Road, Brighton	810-227.5099	Saturdays 5pm	



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Livingston County



Independence Village of Brighton

7700 Nemco Way

Brighton, MI 48116

(810) 229-9910

seniorvillages.com

Support group for family and caregivers of people with Alzheimer's disease or dementia meets the second Tuesday of each month from 6:30-7:30 p.m. Group is facilitated by Catholic Social Services of Livingston County and the Alzheimer's Association Michigan Great Lakes Chapter. Call to confirm date and time.

Livingston County Catholic Charities (Howell)

2020 East Grand River, Suite 104

Howell, MI 48843

(517) 546-9910

LivingstonCatholicCharities.org

Livingston County

Senior Citizen Caregivers Guide



Questions? Answers! Concerns? Options!
Need help? Read on!

A publication from your Livingston County Consortium on Aging, a collaborative group of public and private agencies and individuals providing services and advocating for senior citizens in Livingston County. Visit our website: LivingstonCOA.org

Sixth printing: Summer 2014

So who is a Caregiver?

Anyone assisting another person with “Activities of Daily Living” (ADL) or “Instrumental Activities of Daily Living” (IADL):

- ADL's are defined as self-care activities, things we normally do... such as feeding ourselves, bathing, dressing, grooming, work, homemaking and leisure.
- IADL's are not necessary for fundamental functioning, but they allow an individual to live independently in a community. These include housework, meal preparation, taking medications, managing money, shopping for groceries, telephone use and using technology.

Caregivers are young and old, caring for children, parents, grandparents, siblings and friends. They need and seek information from medical professionals, media, friends and social service agencies.

Many Caregivers are dutiful family, friends or neighbors. They are usually unaware of available support services such as transportation, nutritional care, financial counseling, home safety, respite and home care.

Livingston County Consortium on Aging

The Livingston County Consortium on Aging is a 501(c)3 collaborative group of public agencies, private vendors and individuals interested in addressing the needs of the county's aging citizens. Membership is open to all who have an interest in furthering our mission.

The Consortium has been meeting for over 25 years, sponsors two annual events: a Caregiver Fair in the Spring and Senior Power Day in the Summer, and publishes two guides: this Caregiver Guide, and a companion county Senior Housing Guide.

Proceeds from the two annual events are granted back to community nonprofits to further their missions in supporting seniors. In 2014, the Consortium surpassed \$50,000 in grants awarded to 24 agencies over the past four years.

Visit the Consortium website for further information. www.livingstoncoa.org

Email address: LCCOA48843@gmail.com

Mailing address: Livingston County Consortium on Aging
UPS Box 142
4337 Grand River
Howell, MI 48843

Livingston County Senior Caregivers Guide



You Are Not Alone

There are currently 44 million non-paid caregivers in the United States; 33 million of them are assisting a person age 65+. And while some topics in this booklet may be unsettling, they are real for many seniors and not meant to offend. This guide's goal is to help you think like a senior; anticipating needs, wants, and concerns. Aging is a natural, healthy and exciting progression in this journey we call a lifetime.

What this Guide Is... and Is Not

Definition of Caregiver: While an inclusive and legally accepted definition of Caregiver encompasses both paid and unpaid, and those caring for a disabled child or adult under age 65, this guide is generally intended for those voluntarily assisting people age 65+. And while this guides topics are universal, an additional goal is to direct you to Livingston County, Southeastern Michigan, state, federal and Internet resources.

Developing and Building the Relationship

Remember, it is the senior's life, and their right, to live it as they wish. Your role is not to decide “what is best for them”, but rather help them decide what is best for themselves and then help make it happen.

Terms you May Hear

ADL: Activities for Daily Living - This term refers to personal assistance for an activity deemed necessary to get through the day. Legally, these include eating, dressing, bathing, walking, stair-climbing, bed mobility, toileting, bladder and bowel function, wheeling, transferring and general mobility. A senior's level of ADL proficiency will establish whether the service provided is deemed un-skilled (light household duties, bathing, general hygiene, etc.....) or skilled (nursing duties, medications,.....) Many service-providing agencies will use ADL's to determine a level of care, and fees if applicable. This term is also used to determine if someone qualifies to receive Medicare or Medicaid benefits.

IADL: Instrumental Activities of Daily Living – This term refers to the type of activities that allow an individual to live independently in a community. Activities may include housework, meal preparations, taking medications, managing money, shopping, telephone use, care of pets, etc. Many service-providing agencies will use ADL's and IADL's to determine a level of care, and fees if applicable. These terms are also used to establish and determine Medicare or Medicaid benefits.

How to Use this Guide

First of all, this guide cannot be comprehensive. The topics herein are many, and the answers can be complex. This booklet will offer a general discussion of each topic. There is also a wealth of information available via the Internet, see Appendix A; and/or for a listing of area agencies and businesses which can assist you, see Appendix B.

Information and Assistance

There are numerous agencies and resources to approach for assistance. Many seniors will have a network of friends, neighbors, their senior center, social or church circles, who may have insights or be able to assist you.

Area Agency on Aging 1-B (AAA 1-B) (see Appendix B)

A regional non-profit organization dedicated to assisting seniors and the disabled access local services, including housing, transportation and mobility options counseling, nutrition, in-home assistance, caregiver relief and government-funded long term care programs. AAA1-B provides both referral and direct services.

Livingston County Catholic Charities (see Appendix B)

LCCC offers support service and programs (regardless of race, religion, gender, disability or financial status). Senior services include: Volunteer Caregiving Program, to help seniors stay in their home, and may be able to provide transportation for medical needs, shopping or errands; Senior Resource Advocacy, which assigns a specific counselor to assist seniors and their family's access needed services; and Be Our Guest Adult Day Service, providing on-site care for memory impaired adults. LCCC also offers educational programs and coordinates support groups.

Livingston County United Way (see Appendix B)

A county agency which can assist with many senior issues, particularly for the home-bound senior.

Love, Inc. (see Appendix B)

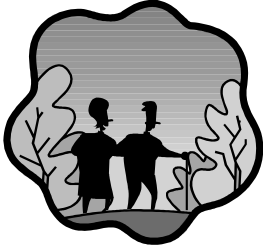
Love, Inc. is a collaborative of county churches marshaling resources to both access and provide services.

Oakland Livingston Human Services Agency (OLHSA) (see Appendix B)

A county agency, OLSHA can provide income-based assistance with most human needs services, including: housing, home repair, heating assistance, weatherization, lawn care and snow removal, supplemental food programs, health care, transportation and informational/educational programs.

2-1-1

Dialing “211” will access an information and referral specialist for county human service agencies. 211 is a collaborative effort of Livingston County United Way.



Their World

Their first, and your first, concern is personal physical safety. By example, a fall can lead to loss of driving privileges, loss of independence, and perhaps even loss of their home. 85% of seniors, given their choice, would prefer to live and die in their own home, and maintain that independence as long as possible. And a majority of senior hospital admissions are fall-related. Don't be surprised, or offended, if they don't want to get out and about as often. Don't want to go out after dark. Don't want to join in on family outings. These are natural progressions of an adult's desire to maintain that independence and dignity for as long as possible. Ambulation, endurance, hearing, eyesight may be in decline, so it is normal to attempt to reduce one's chance of a fall. Wherever they live, your first concerns are personal safety and fall prevention. Read the sections below regarding housing choices and home modifications. Given choices most seniors will stay in their own home as long as possible. A second choice would be to live with or amongst people of their own age, with as much freedom of choice as possible. They share generational experiences, have common physiological needs and wants. Don't be surprised, or offended if they resist "moving in with the family." That said, for others a multi-generational living situation can be an exhilarating and positive experience for all. And don't be surprised if the "retirement community" is rejected. While fine, and desirable for those who are just naturally sociable, and a "joiner", there are also those who enjoy and prefer solitude, and "wish everybody would just mind their own business." If this guide is being read by a younger family member, only you and your family know the dynamics of relationships and situations that can make their house a home.

Hearing

High octave hearing may diminish, explaining difficulty in hearing television with its ranges, or understanding young children. There are many hearing aid options, but be aware of their limitations. They only amplify what the senior could already hear, not expand octave reception. They are also non-discriminatory, that is they amplify every sound equally. The senior will hear every sound in the room, based on volume. That makes it harder to carry on conversation in a crowded room. And with some aids, the assist declines as the batteries wear out, much as a flashlight will diminish its light output as the batteries weaken. In many cases, it's a slow process, and the senior may not even notice or forget to change batteries. Also to consider: one hearing aid or two, ease of battery replacement and insertion, appearance and vanity issues, possible loss or misplacement, cost, insurance. Telephones: Land line phones are available with large numbers and sound amplifiers. Limited-use cell phones may be available for free (contact your sheriff's department), and phones with limiting and oversized features are available from companies, such as the Samsung Jitterbug.

Eyesight

For a typical 80 year old a 100 watt light bulb has the same light value as a 20 watt bulb for a 40 year old. Adjusting to light intensities is more difficult. Night driving, even ambulating from room to room. It is also common for distance eyesight to “improve” with age. Reading can also be relaxing and rewarding for many. As the eye muscles continue to relax, it is important to schedule more frequent eye examinations. These can also catch the development of cataracts, macular degeneration, and even diabetic or nutritional issues. But: there are many wonderful resources available out there if things become more severe or dangerous. Communal support groups, books on tape, “sideband” regional-talk radio stations, possible home modifications, transportation options. In many cases eyesight diminishes slowly. Investigating the options with the senior beforehand can ease the transition, the anxieties, and not diminish but expand their horizons.

Nutrition

(See Appendix B)

Smaller portions, snacking, blander and familiar foods. Many seniors have dentures, so for example apples or a salad can be a challenge. Lack of appetite, or a loss in interest in food can intensify. This is normal. Not to be morbid, but for the extremely elderly, this is a natural way for the body to begin the process of shutting down, and preparing for death. It’s perhaps better to emphasize the social aspects of meals than the content. There are congregate senior meal sites around the county and home-delivered meals are also an option. If finances are an issue, there are numerous food programs and pantries. Contact Oakland Livingston Human Services Agency or Livingston County United Way for a listing.

Social

Most seniors will gravitate to social settings with people of their own generation. Studies have shown that when a senior leaves their home their most-frequent destinations are: visiting with family and friends, the community or senior center, the library, their church and grocery shopping. There are five factors at work here: they know how to get there and home, they know the facility and can feel physically safe, they can socialize, they can control their expenditures, and it’s preferably during daylight hours. Don't be patronizing, but a suggestion: Don't just expect them to adapt to your world, adapt to theirs. The more you immerse yourself in their world, the better you'll understand, relate and work together. Note: The county's six senior centers are great socializing destinations, and Livingston County Catholic Charities also offers an adult day care service for dementia and Alzheimer's impaired adults. (see Appendix B.)

Mobility

Mobility can mean safely navigating about the home or out in the community. In either case, fall prevention is the primary concern. (It is the number one reason for seniors' hospital and nursing home admissions.) Our parents would tell us the pride we all exhibited when we stood and took our first steps. As we age, balance again becomes an issue. Uneven ground, steps, loose or wet surfaces, lighting are a challenge. Using an aide, a cane, a walker, or a wheel chair can help. For the senior, it will be a matter of pride, and maintaining self-sufficiency. Most senior centers and hospitals provide or can direct you to fall-prevention classes, and search the internet for home modification checklists.

Driving

(see Appendix A)

For many of us, the most significant indicator of our independence is that car. The freedom to go where we want and when we want. It also factors in where we live, where we go, what we do, and who we socialize with. The given joke around the retirement homes is that the most popular guys are the ones with cars, and can still drive...safely. One of the hardest conversations you'll ever have is when its time for them to give up the keys. And note the difference; you're not taking them away, they're giving them up. At tip: the conversation need not be "Dad/Mom, we're afraid you'll get hurt." Rather, its "Dad/Mom, you could hurt someone else." And another tip: statistics say the conversation goes easier if daughters talk to fathers and sons talk to mothers. Note: The AARP website offers self-evaluation, checklists, and refresher classes. Some senior centers also offer on-site classes, sponsored by the Southeast Michigan Council of Governments (SEMCOG). Visit their website. Why not take a class together? Note: Michigan's Secretary of State also offers residents a non-driving state ID. This is a good alternative for border crossing, check cashing or other identification needs. And, consider this: the average senior "out-lives" their ability to drive by 7 years. This factor is also a consideration in living arrangements.

Transportation

(see Appendix B)

Family members, fellow seniors, neighbors, buses, taxis all are options for vehicle transit. Livingston County Catholic Charities may also be able to assist with drivers. Livingston Essential Transportation Services (LETS) also provides curb-to-curb in-county bus or van services on a call-in basis, Monday through Saturdays. Most LETS buses and vans are equipped for wheelchairs. Other agencies can provide off-hour, out-of-county or specialized services. Also, consider the neighborhood. Can they walk or ride a bike? Are there safe sidewalks, adequate lighting, a walking buddy, safe biking conditions? Perhaps a three wheeled bike or a power scooter.

Pets

Most of us have had pets in our lives. And we may have heard of the great benefit of pets for seniors: companionship, physical exercise, the routine of feeding, and a responsibility that can give them a sense of purpose. On the other hand, before you rush out a get then a cat or dog, consider a few things. 1) Its their life. Do they a want all of the above, or perhaps a freedom to travel? 2) Have they had pets in the past, and show interest? 3) Is there a move in their future, will pets be allowed, and if not are you ready to take on this responsibility? 4) Dogs and cats dart around, are unpredictable, could get underfoot or jump up, and cause a fall. 5) Most of us think of pets in terms of cats or dogs. Perhaps consider a rabbit, a bird, a fish or even, believe it or not, a rat. They're very sociable.

Finally, if you jointly decide on a pet, travel together to the store or shelter. It's their choice and their pet.

Also to consider: do other family members have pets, particularly larger dogs? Your senior may not want to visit for fear of a fall.



Medical Issues

Chronic

Physical decline is a normal process: loss of dexterity, loss of agility. It is natural for eyesight and hearing to diminish. A senior, by nature, will adapt to these conditions. On the other hand, chronic can mean constant physical pain. Arthritis, osteoporosis, diabetes, obesity; all require monitoring, perhaps adjusting lifestyles, and in many cases medications to ease the debilitating nature.

Medications

Medications may be a short term solution to an immediate problem, perhaps a headache or a minor muscle strain. These might typically fit the definition of an over-the-counter medication. Or they may be to treat an ongoing situation as described above in the Chronic section. These might fit the doctor-monitored, prescription drug category. It is important for you to know what medications they may be taking. For example, they may cause drowsiness, behavior change, or ambulation issues. A statistic: the typical 65 year old takes 6 medications daily. Drug interactions, prescriptions from multiple doctors, missed or inaccurate dosages, all can have unintended or unanticipated effects. Make a list of medications and dosages, post them on the refrigerator door (911 responders will check there), have the senior carry it, you carry one. And discuss the medications with their doctor.

Dementia and Alzheimer's

(see Appendices A & B)

Often merged in discussion, there are medical distinctions. A general descriptor would define them both as involving a decline in intellectual functioning over time. They may both also be linked to genetics. They diverge in diagnosis and treatment. Dementia is often seen as part of the normal aging process, with onset occurring typically after age 70, and in some cases never. While there is no “cure”, the effects of dementia can be reduced with regular exercise, a healthy diet, mental stimulation, establishing and maintaining a life routine, minimizing stress and eliminating tobacco and alcohol use. You may also try use of the “3 R's method” of Repeat, Reassure and Re-direct. Alzheimer's, by contrast, is a disease of the brain. It can onset as early as age 45, and can lead to total debilitation, and eventually death. Symptoms can progressively include severe agitation, hallucinations, sleep disorders, and psychotic or dangerous physical behavior. Caregiver tools may include the (above) dementia techniques, but certainly require a doctor's intervention. While there are no proven curative medications for dementia or Alzheimer's, there are management techniques and drugs that can reduce stress and the more dangerous symptoms.

Hospital Discharge

Shortly after a hospital or rehabilitative nursing home admission, or when conditions stabilize, ask for a meeting with its discharge planner. She/he can help you understand your considerations and options: living arrangements, possible future procedures, recognition of symptoms, Medicare or other insurance coverage, training and techniques such as bed-to-chair transfers, personal care, medications, community support agencies, etc. While this planning is of a short term nature, it can also be an opportunity for frank family discussion about longer term options.

Insomnia

Sleep patterns can vary as we age. There can be many causes. A general recommendation is to reduce the overall time spent in bed, get up at the same time each day, don't go to bed until you are sleepy, and don't stay in bed if you are not sleeping. Medications and alcohol consumption can also disrupt normal sleep.

Veterans Services

(see Appendices A & B)

Not to go into great detail, but find out if they are a veteran. If so, there are many services available they may not have even thought of at a younger age. From medical, to home care assistance, to residential facilities, to burial. Every community has contacts and assistance to research options.

Medicare

(see Appendix A)

Medicare is a citizen's federal health insurance program for age 65+, and or under age 65+ with certain disabilities. The enrollment period begins 3 months prior to the 65th, the month of, and 3 months following the 65th birthday. The card will be red, white and blue and will be needed to verify payments and receive covered services. Most seniors automatically have what is known as Parts A and B. Optional, and for additional cost, are Parts C & D. (See below.) Premiums for Parts A & B are typically deducted from their Social Security check, Parts C & D are optional. (if your charge is age 62-65, they may be receiving Social Security, but do not automatically receive Medicare. They may be able to buy into the program, but that's beyond this discussion.) Note: Help navigating is available from the (Michigan) Medicare & Medicaid Assistance Program (MMAP), at 1800 803-7174, or the Internet at Medicare.gov.

Medicare Part A

In short, Part A covers hospital stays, skilled nursing homes and hospice. These programs have many requirements, limitations and co-payments.

Medicare Part B

In short, Part B covers doctor services, outpatient care, some home health services, medical supplies, and some preventative services. These programs also have requirements, limitations and co-payments.

Medicare Part C

This is optional supplemental health insurance sold by private vendors to cover some, most, or all Part A/B co-payments. All Part C policies must meet minimum federal standards. They compete in price, additional or customized services, and acting as your intermediary in billing and payments. These policies are commonly referred to as Medigap or Medicare Advantage policies.

Long Term Care Insurance

(see Appendix B)

Broadly defined, long term care insurance pays for the care for those unable to care for themselves. It may be in various settings, including in-the-home, adult foster care, or a nursing home, and can be for an extended period of time. Consider that in 2012, the average cost of nursing home care was more than \$80,000 a year. LTCI insurance is sold by private insurance agencies, with many variables to consider. Each family should consider its care options and finances.

Medicaid

(see Appendix B)

Medicaid is an income based government guaranteed access to medical services. For seniors, services are mostly similar to those covered by Medicare, the difference being a sliding fee, or in some cases no-cost. There are means tests for income and assets, which adjust annually based on inflation. Contact your local Department of Human Services or AAA 1-B for assistance. Be aware that some doctors do not accept Medicare or Medicaid patients. Consider supplemental insurance or long term care insurance if the person's finances are sufficient.

Medicare Part D

Optional prescription drug coverage for non-hospital drugs; with a note: While enrollment is optional, there is an escalating financial penalty for not signing up for a program at age 65. Part D is offered by private vendors, and they are required by the federal government to meet minimum criteria. A term of interest: the ‘formulary’. Each vendor will have a list of covered drugs, typically in 3 tiers, with ascending co-payments required. Your concern will be to assure the applicable medications are covered, and in which tier they fall.

Note: Statistically, the average senior takes 6 prescribed drugs. Little research has been done on interaction between various drugs, but recent data shows an increasing propensity for falls with increased usage. Have a list of the senior's medications and discuss it with their doctor/s. It could be redundant, no longer needed, or even compounding problems. In addition, many seniors will forget to take, take the wrong amount, or misplace their medications. Be watchful for change of moods, behaviors, communications, eating habits and gait.

Affordable Care Act

The Affordable Care Act has many provisions of benefit to seniors. It begins with a free “Welcome to Medicare” physical exam provided by any physician accepting Medicare patients, which is to be followed by free annual “Wellness Visits”. You may research the full law and benefits with an Internet search to www.healthcare.gov.

Talking to their Doctor

Establish a relationship with their doctor. Discuss their overall health, chronic conditions and treatment plans, medications and their side effects. And if appropriate, end of life wishes. Many states and nursing homes suggest or require medical powers of attorney. Let your doctor know one exists, some may wish a copy. There are also publications for end-of-life planning: a popular one is called Five Wishes. Local senior-serving agencies may have one for you, or you may search online for “Five Wishes”.



Finances

(see Appendices A & B)

Another difficult transition. You're invading their privacy and control. Basically, we all have expenses we hope to cover with our income or our savings. Over time, you should have been getting a reasonable grasp of their assets, liquid and not so liquid. So, we'll limit this to two concerns. Do they have enough to cover normal expenses, and are they competent? It is normal for a senior to spend less; they need less. But are they skipping meals, medications, or social outings? Are there late payment notices or bills piling up? One can be a sign of frugality, after all most of us don't know how long we will live, and don't want to be a physical or financial burden for loved ones. The other can be forgetfulness or disinterest in daily routine. This should be of greater concern as it can be a declining health issue.

In addition, be very aware of the possibility of scamming and/or, sorry to say, family member financial abuse. Be sure you come to understandings and transparency regarding financial decisions, transactions, and actions. Be cautious of "co-signing". This could lead to your financial liability for their unintended or unexpected expenses. Banks can put account cautions on unusual spending, or limit cash withdrawals.

Social Security & Supplemental Security Income

(see Appendix A)

There are a plethora of agencies and contacts for detailed information regarding Social Security and Supplement Security Income. So simply said, most seniors, and some disabled, qualify for a federal monthly check, as a result of years of employment and or/spousal benefit, or a disability. This check may be an automatic bank deposit or come in the mail. Assuming they are now receiving Social Security, to consider: 1) Are they a surviving spouse? 2) Are they employed? 3) Is a remarriage a possibility? All of these are reportable and can impact the benefit amount. Also remember, at death it is your responsibility to contact Social Security to discontinue the payments.

Pensions/Benefits

Some retirees receive financial pensions, or often health benefits from past employers. No detail here, but gather account numbers and have an understanding of any spousal or survivor benefits.

Long Term Care Insurance

(see Appendix B)

Encompasses a wide range of assistance, services, or devices provided over an extended period of time and designed to meet medical, personal and social needs in a variety of settings or locations to enable a person to live as independently as possible. Includes three levels of care: skilled care, intermittent care, and custodial care. Sold by private vendors, LTCI may dictate fixed dollar amounts, inflationary escalation, specific covered services, and/or a fixed period of benefits. Each family should consider its care options and finances and consult with a licensed, certified long term care insurance agent if appropriate.

Reverse Mortgages

(see Appendix A)

A standard home mortgage is pretty straightforward. You borrow money from a lender, then pay principle and interest. Over time you build equity (an increasing percentage of ownership), until eventually, and hopefully, you own the home outright. A reverse mortgage, simply put reverses the process. The lender agrees to put money into the owners account in return for an (over time) increasing percentage of ownership. In general, the owner must be at least 62 and it must be a primary residence. Procedurally, the home is appraised and a dollar amount established based on an actuarial table. The money can be received in a lump sum, or over time, or on-demand. The more the home is worth, the older you are, and the lower the interest rate, the more you can borrow. And as long as the senior resides in the home, they cannot be evicted, even if they exceed the loan balance. At death, the heirs can pay off the balance accrued, or accept a negotiated balance. All reverse mortgage candidates must receive prior counseling from a HUD approved reverse mortgage counselor. There are numerous reverse mortgage counselors and lenders in Livingston County. An Internet search for HUD reverse mortgages will outline guidelines, criteria, and includes a search engine for qualified lenders. Loan calculators are also available via the Internet.

Wills

In short, a will (or a trust) helps put assets in an orderly fashion, and gives a clear message to its intentions and desires. Many people die without a will. A will may be self-composed, dated and signed, and becomes a viable document. Note “viable” is different than legal. There is no filing of a will with any government agency. Sign it, date it, make copies, keep one safe, give one to your attorney, your pastor, a trusted friend and/or family members. At death, the will is presented to the probate court and becomes a public document. There are procedures for legally publishing the death and, for example, asking for any outstanding creditors to come forward.

Advantages to having a will: It can be a clear directive as to the wishes. It may designate specific assets to specific recipients.

Disadvantages of having a will: It becomes a public document. The probate system can be lengthy and costly.

Disadvantages of not having a will: The estate will still go to probate. As a rule, all assets must be liquidated (irregardless of sentimental values), and then distributed with an established lineage formula.

Estate Planning

(see Appendices A & B)

Estate planning is an orderly process of dispersing an individual's assets accumulated over a lifetime, primarily those with monetary value. Proper planning can be particularly critical if, for example, there is a business ownership, there are multiple marriages or properties in multiple states. Planning will typically incorporate the establishment of a trust, and should be considered only with the assistance of a qualified attorney.

Trusts

In short, there are revocable (still living) and irrevocable (at death) trusts. If your senior's estate is sizable, or perhaps holds properties in multiple states, a trust may conserve assets, reduce estate taxes, avoid probate, and can be customized.

Simply, a revocable trust is a "what-if" document. The originator, if still competent, may dissolve or amend it at any time simply by directive

An irrevocable trust may anticipate incapacity or, for example, delay asset distributions or have other unique stipulations other than a standard probate formula. Once signed, it can be very difficult to amend, even by the originator.

.A trust should be drawn with the assistance of a qualified attorney. At death, the attorney will then assist with any filings and hearings. Copies of the trust remain with the attorney, the owner, and select trusted individuals. No legal filing is required.

Guardianship

Guardianship is a probate court process for taking on decision-making responsibility for your charge. Some duties may include: domicile, care and comfort including food, clothing and shelter, obtaining needed services, authorizing or refusing medical treatment, taking care of personal possessions. And, if a conservator is not appointed (by probate), receiving monies and using it for his/her needs. Note: Guardianship typically requires regular reporting back to probate of your actions.

Conservatorship

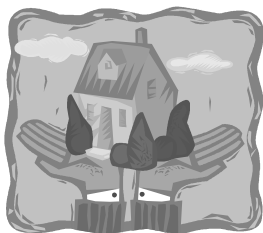
Conservatorship is a probate court process specifically for financial management and decisions. The conservator may be an individual or an institution. Note: Conservatorship typically requires regular reporting back to probate of your actions.

Power of Attorney for Financials

Not requiring probate, this document can be used for what may be a short term incapacitation and revoked at any time. Readily available online, this document designates the individual responsible for managing finances. It is typically signed by the senior, the designee and witnesses. As with any binding document, if the finances complicated or family harmony suspect, an attorney's assistance could be reassuring. Also, be aware accepting guardianship or power of attorney could make the designee responsible for expenses beyond the estates assets. (See the section below outlining an additional Power of Attorney for Medicals.)

Household Management/Administrative Assistance (see Appendix B)

There are agencies which can assist with household duties that are not health related, such as managing mail, paying bills, home maintenance and cleaning, grass mowing, shopping and stocking groceries, etc. They will work closely with the caregiver to cover tasks the senior can no longer handle, never has or is neglecting.



Home Safety

Housing Options

This booklet will primarily discuss accommodating a senior who wishes to stay in their own home. For those desiring a relocation, the Consortium on Aging has a sister publication, the Livingston County Senior Housing Guide. It has a primer and county inventory. You may access the guide by visiting our website, at www.livingstoncoa.org, or contact a human service providing agency for assistance.

Home Modifications

(see Appendix B)

Most seniors wish to remain in their own home as long as possible. This can be for financial, emotional and physical reasons. In addition to memories, they have a neighborhood and friends to maintain the connections. And, as they physically age they make accommodations to decline; they are familiar with the home's layout. That said there are Internet-accessible checklists for simple actions: removing loose throw rugs, increasing bulb wattages. In addition, there are private companies with expertise in modifying the home for safety. They can assist with ramps, door widening, lowering cabinets, installing grab bars, etc. See Appendix B for a listing of area certified aging-in-place builders (CAPS).

Assistive Devices

(see Appendix B)

There are many devices that can help with a senior's daily living needs. Grab sticks, walkers, wheelchairs, canes, commodes, safety-grip walking shoes and slippers. There are also numerous new electronic technologies for in-home monitoring: fall sensors, medication reminders, remote video, etc. Some may qualify for a Medicare subsidy.

Loan Closets

(see Appendix B)

Loan closets can assist with short term needs at little to no charge. Walkers, commodes, wheelchairs, etc. Oakland Livingston Humans Services Agency, as well as some senior centers and churches maintain closets. Most will also accept donations. Call 211 for current information and referral.

Home Care & Service Providers

(see Appendix B)

Typical services range from housecleaning, meal preparation and assistance, medications, bathing, etc. A distinction to note: primarily these services are "in-home" only, but could include such things as grocery shopping or transportation for doctor's appointments. Discuss these options in an interviewing process. Services may be contracted for by-the-hour, or based on services provided. Note: Some provider agencies are Medicare/Medicaid or Veterans Administration certified, or may be experienced with long term care insurance programs, and can help you with billing and payments. Some agencies are private pay only. Be sure to ask in your vetting process.

Home Safety & Medical Alert systems

(see Appendix B)

Home safety devices range from wireless tv monitors to motion sensors which can alert for unusual behavior or inactivity.

Medical alert systems are intended for a stay-at-home senior in jeopardy of a fall or other incapacity. The personal alert system consists of a necklace or wristband which, with a push, will send a distress alert to the monitoring company. These companies may also have medication-taking reminder alarms or dispensaries.



End-of-Life

(see Appendices A & B)

Advanced Directives - (“Power of Attorney for Health Care”)

A legal document assigning responsibility for a senior’s health care decisions to another individual, should the senior become incapacitated. They outline acceptable/unacceptable life-sustaining measures, religious beliefs, end-of-life wishes, and even organ donation wishes. Be aware: most hospitals and nursing homes will ask for a health care designee. Better to have the conversation and document beforehand as part of an overall planning discussion. The primary care physician should also be aware, and may ask for a copy. This document requires the senior's signature and two witnesses.

Advanced Directives - (“Living Wills”)

Some overlap with Power of Attorney for Health Care, the primary difference being the Power of Attorney determines who makes decisions, the Living Will outlines what the decisions should be. A Living Will is also useful if the Power designee is unavailable for any reason. Note: Michigan currently does not legally recognize Living Wills as legal documents.

Hospice & End-of-Life nursing care

(see Appendix B)

Hospice, by definition, is intended to assist the patient, and family, during a life-threatening period. Hospice services can include assistance in planning, outlining options, doctor consultations, in-home or facility care and, if desired, grief counseling. Hospice workers may not, but can request a doctor's or nurse's administration of pain relievers or other medications. Hospice services are typically covered by Medicare.

Funeral Planning

If a passing is likely, initiate a discussion with a funeral home. Pre-planning or pre-paying can reduce stress for all involved and bring order to an unsettling experience. They will assist you in the process, whether you ultimately use their services or not. They will discuss your options: cemeteries, burial, cremation, ceremonies, veteran's benefits, transporting a body, approximate (then specific) costs. Note: embalming is required by state law if the remains are not cremated or buried within 48 hours of death. Note: cremations require permission of the County Medical Examiner, and written permission from next of kin.

Autopsies

At the discretion of the County Medical Examiner when a death occurs from any cause without a physician present or under any suspicious circumstances. No family member may prohibit an autopsy and no permission is required. Next of kin may grant or deny an autopsy to a hospital where the death occurred.



The Caregiver

Team Effort

You are not alone in your efforts. As many as 1/3 of the general population are caregiving for an elder; with approximately 1,490,000 in Michigan. Dedicated websites, publications, local agencies and support groups can assist you. A good team should include yourself and other family members, the primary care physician, medical specialists, nurses, dieticians, social workers, home care agencies, hospice, their senior center, pastor, friends and neighbors and of course, the senior. Don't be afraid to ask for help.

Self-Care

Stress, a feeling of isolation and exhaustion are the typical signs of overworking yourself. If you are not healthy in body and spirit, you cannot help others. Do your best to eat well, get rest and maintain a social life. Consider respite. It's ok, really!

Respite

(see Appendix B)

Respite is for you! It can be as little as time for an uninterrupted nap, to a much-needed vacation. It can mean a family member, a trusted neighbor, or an agency providing volunteers or paid staff. It can be in-home, day, overnight or longer. Some foster care homes also provide out-of-home day, overnight, or longer stay respite services. Note: AAA1-B offers a respite bed in Livingston and each of its 6-county SE Michigan service area.

Support Groups

(see Appendix B)

If you've read this far, you now know you are not alone. Support groups exist for chronic disease and cognitive issues. Hospitals, churches and service agencies are contacts for an inventory.

Long Distance Caregiving

(see Appendix A)

Approximately seven million Americans are caring for a relative more than one hour away. So again, you are not alone. Start the process with a visit, if possible. Evaluate their living arrangement. Alone? In their own home? Is the home free of clutter, or loose rugs that could cause a fall? Kitchen and general hygiene issues? Mail stream current? Chronic health or cognitive issues? Contact and visit with the local social services agency, and perhaps their banker. Compile a list of medications and phone numbers. Discuss finances and other day-to-day needs. This may be an appropriate time to discuss powers of attorney and/or a living will.

This Document

This Livingston County Caregivers Resource Guide is a publication of the Livingston County Consortium on Aging. The Consortium also publishes the Livingston County Senior Housing Guide.

Hard copies of these guides are available at Livingston County Planning Dept., Livingston Catholic Charities, and Livingston County United Way.

Visit the Consortium website for further information at www.livingstoncoa.org

Pamela Bolam, Chairperson, Livingston County Consortium on Aging

Appendix A Internet Websites

www.nfcacares.org	Nat'l Family Caregivers Association
www.caregiving.org	Nat'l Alliance for Caregiving
www.mayoclinic.org	(health) Diagnosis and treatment options
www.alz.org	(nonprofit) Alzheimer's Association
www.aarp.org	American Association of Retired Persons
www.aaaseniors.com	(national) senior drivers/advice, checklists, self-test
www.benefitscheckup.org	(national) basic needs programs and assistance
www.nia.nih.gov	(federal) caregiver resource/questionnaires
www.aoa.gov	(federal) Administration on Aging
www.medicare.gov	(federal) Medicare
www.healthcare.gov	(federal) Affordable Care Act provisions
www.ssa.gov	(federal) Social Security
www.va.gov	(federal) Veterans Administration
www.alzheimers.nia.nih.gov	(federal) Information and publications
www.hudreversemortgage.org	(federal) Dept Housing and Urban Development
www.seniorbrigade.com	(state) programs and information
www.michiganlegalaid.org	(state) legal forms
www.mmmap.org	(state) Medicare/Medicaid Assistance Program
www.clickonaging.com	(Southeast Michigan) information
www.aaa1B.com	(regional) Area Agency on Aging 1-B
www.olhsa.org	(county) human services provider
www.livingstoncatholiccharities.org	(county) human services provider/counseling
www.lcsnp.org	(county) home delivered meals

Appendix B Community Agencies & Support Services

Below are some agencies and businesses known by Consortium on Aging members to have an interest and experience in working with and for seniors. It is not exhaustive. Nor is a listing an endorsement.

Alzheimer's Association Great Lakes Chapter	1 734 369-2716
Area Agency on Aging 1-B	1 800 852-7795
Family Impact Center	1 517 223-4428
Gleaners Food Bank	1 866 GLEANER, ext 335
Livingston County Catholic Charities	1 517 545-5944
Livingston County Essential Transportation	1 517 546-6600
Livingston County Senior Nutrition Program	1 810 632-2155
Livingston County United Way	1 810 494-3000
Love, Inc	1 517 586-4007
Oakland Livingston Human Service Agency	1 517 546-8500
Veterans Affairs (county office)	1 517 546-6338

Appendix B Private Vendors and Provider Agencies

Assisted Living/Retirement Communities

Please access [Livingston County Senior Housing Guide](#) for descriptions of alternative housing options, checklists and inventory. Available at www.livingstoncoa.org or from a county human service agency.

Estate Planning/ Senior Issue Specialists

Estate Planning and Elder Law Services	1 888 PLAN-050
Family & Aging Law Center	1 248 278-1511
The Health Law Center, PLC	1 517 552-8850
Matecun, Thomas & Olson, PLC	1 517 548-7400

Nawrocki Center for Elder Law, Special Needs & Disability Planning	1 866 737-5007
Alvin Rightler, Legal Services for Seniors	1 810 225-1893
Laura L. Quinn, Attorney, Elder Law & Estate Planning	1 586 242-2772

Financial Planning/Insurance

Kristine Aretha, LUTCF, Aretha and Associates	1 517 548-1538
Executive Financial Planning	1 810 229-6446 Ext 18
Family Insurance Resource	1 517 292-9452
M3 Investment Service	1 248 543-3400
Kokopelli Financial	1 810 360-0068
Patrick Financial Group	1 810 225-9876
Senior Benefits Group	1 800 724-2660
Strive Financial/Met Life	1 517 548-7059

Food and Nutrition Services

Community Supplemental Food Program	1 517 545-8500
Food Pantries (Liv.County United Way maintains a current list)	1 810 494-3000
Gleaners Shared Harvest Pantry	1 517 548-3710
Livingston County Senior Nutrition Program – Meals on Wheels (LCSNP also serves lunch at most county senior centers)	1 810 632-2155
St George Food Pantry	1 810 333-1349

Geriatric Assessment Services

Area Agency on Aging 1-B	1 800 852-7795
St. Joseph Mercy Senior Health Services	1 734 712-5189
Turner Geriatric Clinic (University of Michigan)	1 734 764-6831

Health Care (home visits or income-based clinics)

At Home Dental Service	1 810 231-9855
Faith Medical Clinic	1 734 474-4627
Go Docs Go	1 734 222-8200
Michigan Visiting Nurses	1 800 842-5504
VINA Dental Clinic	1 810 844-0240
Visiting Physicians	1 734 975-5000

Home Care & Service Providers

Accredited Home Care	1 888 813-6244
Action Home Health Care	1 810 227-4868
Aim Home Health Care	1 810 225-9600
BrightStar Home Care	1 810 225-4000
CarolCan!	1 517 285-4016
ChelseaCare Home Health	1 734 593-5780
Choice Senior Home Care	1 517 304-3069
Classic Home Care	1 810 229-2271
ComForcare Home Care	1 248 623-6500
Comfort Care Home Care	1 810 225-2003
Comfort Keepers	1 810 229-0200
Compassionate Home Health Care	1 810 225-8710
Compassionate Senior Care	1 517 545-5500
Country Home Health Care	1 248 887-7292
Faithful Assisted Living (and in-home care)	1 248 252-0083
First Choice Home Health Care	1 810 750-6511

Graceful Living Home	1 248 648-0203
Great Lakes Home Health	
- Brighton	1 810 225-3374
- Howell	1 517 545-0161
Griswold Home Care	1 810 360-0068
Health Care Innovations	1 810 227-7544
Heartland Home Health Care	1 877 290-1170
Home Helpers	1 810 844-2113
Home Instead Senior Care	1 810 844-2180
Homestead Health Care	1 517 540-0226
Housekeeping Associates	1 734 741-8822
In Home Rehab Therapy Services	1 888 779-1337
Innovations Home Care Nursing Services	1 248 623-6500
Independent Home Care	1 810 750-2713
Metro Personal Care	1 517 545-7740
National Staffing & Home Care	1 734 449-9050
New Life Home Health Care	1 517 586-4013
Nurturing Home Care	1 734 525-4830
OK Custom Cleaners	1 810 459-5227
Right at Home	1 810 225-4724
Simplify Your Move	1 888 887-7562
Synergy Home Care	1 734 433-9007
United Home Health Services	1 810 772-0518
Visiting Angels of Southeastern Michigan	1 810 844-0210
Watson Health Care	1 810 991-1179

Home Delivered Meals

Livingston County Senior Nutrition Program 1 810 632-2155

Home Modifications

Contact the Livingston County Planning Department for a current list of Certified Aging-In-Place Specialists (CAPS) remodelers and builders. 1 517 546-7555

Below is a listing of some area CAPS as of spring 2014:

Agewise Home (remodeling)	1 810 602-1018
Atlas Home Improvement	1 810 552-7642
Belanger Construction	1 810 227-6118
Caremor, Inc.	1 810 225-2956
Deline Construction	1 517 545-7342
Elder Living Construction	1 888 248-3510
Paulson's Construction	1 517 545-8651
TK Design and Architecture	1 517 548-7274
Tri-Square Construction	1 810 229-8444

Hospice

Arbor Hospice	1 800 997-9266
Compassionate Care Hospice	1 888 983-9050
Diversified Hospice Care	1 248 633-8488
Heartland Hospice	1 877 290-1170
Hospice of Michigan	1 888 247-5701
In-House Hospice Solutions	1 517 540-9720
Metro Personal Care	1 517 545-7740
St Joseph Mercy Hospice and Home Care Livingston	1 517 540-9000

Seasons Hospice and Palliative Care 1 800 370-8592

Hospitals (with Senior Health Services)

VA Ann Arbor Healthcare System (veterans) 1 734 769-7100

Chelsea Community Hospital 1 734 475-1311

St. Joseph Mercy Hospital (Ann Arbor) 1 734 712-5189

St Joseph Mercy Hospital (Howell) 1 517 545-6023

East Ann Arbor Health and Geriatric Center (U of M) 1 734 647-5715

Household Management/Administrative Assistance

Creative Eldercare Consultants 1 800 355-8932

Nurse Concierge (Medical Needs Coordination) 1 810 923-1456

Next Step Options 1 586 242-2772

Seniors Helping Seniors 1 810 229-6400

Medical Durables Loan Closets

Some county senior centers have loan closets, and/or may accept apparatus donations.

Oakland Livingston Humans Services Agency 1 517 546-8500

St George Food Pantry (loan closet also) 1 810 333-1349

Legal Issues

Dispute Resolution Center 1 734 794-2125

Law & Dispute Resolution Office of Donna Craig 1 517 552-8850

Michigan Legal Aid

www.michiganlegalhelp.org

Health, Medicare and Long Term Care Insurance

Many full service insurance agencies offer long term care insurance. Listed below are Consortium on Aging members who can assist.

Executive Financial Planning	1 810 229-6446 Ext 18
Family Insurance Resource	1 517 292-9452
Kristine Aretha, LUTCF, Aretha and Associates	1 517 548-1538
Strive Financial/Met Life	1 517 548-7059

Medical Equipment

Advanced Medical Solutions	
- Brighton	1 810 225-7701
- Fowlerville	1 517 223-8243
- Howell	1 517 548-1443
First Choice Home Health Care	1 810 750-6511
Genesys Medical Equipment	1 810 750-5450
J & B Medical Supply	1 800 737-0045, ext. 444
Mitchell Home Medical	1 810 229-9200
Oxygen Plus	1 734 429-7444

Medical Alert/Wireless Home Safety systems

Comfort Care Home Alert	1 810 225-2003
Guardian Medical Monitoring	1 888 349-2400
Intelli Home Systems	1 734 395-3534
St. Joseph Mercy Lifeline	1 800 242-1306

Real Estate (Senior Specialization)

Barnwell Professionals	1 810 534-2060
Prudential Heritage Real Estate	1 517 404-3622

Respite Services

Livingston and surrounding counties – in licensed-care homes – AAA1B 1 800 242-1306

Dementia/Alzheimer's	- Be Our Guest Adult Day Services	1 517 546-9910
In-Home	- BrightStar Home Care	1 810 225-4000
Overnight or extended stay	- Patty Lewis Care Home	1 517 545-1275
Volunteer caregiver's program	-Livingston County Catholic Charities	1 517 545-5944

Note: Only a few are listed here. Numerous adult foster care homes also offer respite. You may access a listing of state-licensed AFC homes via the Internet at www.michigan.gov/dhs Under "Online Lookups" choose "Adult Foster Care/Homes for the Aged Facilities."

Senior Centers

Brighton	1 810 299-3817
Fowlerville	1 517 223-3929
Hamburg Township	1 810 222-1140
Hartland	1 810 626-2135
Howell	1 517 545-0219
Putnam Township	1 810 878-1810
Unadilla Township	1 734 498-2502

Skilled Nursing and Rehabilitation Facilities

(Access our Senior Housing Guide for further discussion regarding this topic.)

Caretel Inns of Brighton	1 810 220-5222
Medilodge of Howell	1 517 552-5679
South Lyon Care and Rehabilitation	1 248 437-2048
WellBridge of Brighton	1 517 947-4400
White Pine Rehab & Care Center of Howell	1 517 546-4210
Whitehall Healthcare Center (Ann Arbor)	1 248 437-2048

Support Groups

Alcoholics Anonymous		1 810 227-1211
Alzheimer's/Dementia	-Livingston County Catholic Charities	1 517 545-5944
Alzheimer's Support	-Independence Village of Brighton Valley - St Pat's Catholic Church	1 517 546-9910 1 734 369-2716
Breather's Club (respiratory)	- Howell St. Joseph Mercy Hospital	1 517 545-6020
Caregiver's Support	-Livingston County Catholic Charities	1 517 546-9910
(CPAP) Obstructive Sleep Apnea	- Brighton Pulmonary	1 810 220-5400
Grief Support	- St Joseph Mercy Hospital Livingston	1 517 540-9125
Stroke Club	- St Joseph Mercy Hospital Livingston	1 517 545-6710
Visually Impaired and Blind of Livingston County (VIABL)		1 810 231-1277
Veterans	-National Staffing and Home Care	1 734 449-9050

Transportation

Blue Car Taxi	1 810 360-5212
Brighton Cab Company	1 810 227-6500
Brighton Senior Center	1 810 229-3817
Hartland Senior Center	1 810 626-2135
Livingston Essential Transportation (LETS)	1 517 546-6600
Livingston County United Way	1 517 546-3000
Mobility Management	1 866 797-4337
People's Express	1 877 214-6073

Appendix C: A checklist:

A simple review of the Activities of Daily Living for persons in the home

	<u>Independent</u>	<	>	<u>Totally dependent</u>
Housekeeping	0	1	2	3
Recognizes as friends or strangers	0	1	2	3
Driving	0	1	2	3
Social Interaction	0	1	2	3
Grocery Shopping	0	1	2	3
Eating	0	1	2	3
Recognizes surroundings	0	1	2	3
Follows instructions	0	1	2	3
Wandering	0	1	2	3
Personal Hygiene	0	1	2	3
Dressing	0	1	2	3
Balance/Gait	0	1	2	3
Transferring	0	1	2	3
Toileting	0	1	2	3
Taking medications	0	1	2	3
Getting emergency help	0	1	2	3
Preparing meals	0	1	2	3
Communications	0	1	2	3
Bathing	0	1	2	3
Keeping appointments	0	1	2	3
Managing finances	0	1	2	3

Total score _____

Total 30 or under – A person with this score can typically function independently.

Total 31-50 - A person with this score could benefit from in-home care or assisted living.

Total 51 or higher – A person with this score should consider assisted living or a nursing home.



Informational Guide



Advocacy • Action • Answers on Aging

*A Trusted Resource
Connecting Seniors and Adults
with Disabilities to Services*



ver. Jan 2014



Resources and Services

Below is a list of community services, resources and programs available for seniors and adults with disabilities in the counties the Area Agency on Aging 1-B serves.

More information on these services including eligibility and cost can be obtained by calling the Area Agency on Aging 1-B at **(800) 852-7795**.

- Adult Day Services*
- Adult Foster Care Homes*
- Affordable Housing*
- Assisted Living*
- Care Management*
- Chore Service*
- Congregate Meals*
- Counseling*
- Elder Abuse Prevention and Awareness*
- Environmental Modifications*
- Evidence Based Disease Prevention*
- Grandparents Raising Grandchildren*
- Hearing Impaired and Deaf Services*
- Home Delivered Meals (Meals on Wheels)*
- Home Injury Control*
- Homemaking*
- Legal Services*
- Long Term Care Ombudsman*
- Medical Equipment*
- MI Choice Medicaid Waiver*
- Nursing Homes*
- Out-of-Home Respite*
- Personal Care*
- Personal Emergency Response Systems*
- Private Duty Nursing*
- Resource Advocacy/Outreach*
- Respite Care*
- Senior Centers*
- Support Groups*
- Transportation*
- Vision Impaired Services*
- Volunteer Caregivers*
- Veterans Community Living Program*

The Area Agency on Aging 1-B helps seniors and adults with disabilities find the resources they need to remain living independently.



Community Living Program

The Area Agency on Aging 1-B has created a new program to offer seniors, who wish to remain independent and living in the community, by assisting them to utilize their own resources and locate other community resources and supports that best fit their individual needs.

A consultant is available to talk with the senior and their family to discuss resources including personal care, adult day services, available insurance benefits, and other services to help the senior remain living in their home. The consultant does not make the decisions on behalf of the senior and the senior will be able to involve who they wish in the planning process.

⇒ To qualify, an individual must be age 60 or older, requiring assistance with daily care needs, and reside in the six-county region that AAA 1-B serves.



Nursing Facility Transition Program



Nursing Facility Transition Services is a program that provides nursing home facility residents with the opportunity to explore other options for living in the community. There are many options a senior can explore: move back into their home, move in with family members, move into an apartment, an assisted living facility or an adult foster care facility.

Program counselors will work one-on-one to address barriers to moving home and find a living situation outside a nursing facility that is safe and will work for them. Barriers include: needing ongoing care services, past home was not barrier free and accessible, needing durable medical equipment at home, past home needs special attention.

⇒ To qualify, an individual must be residing in a nursing home and either currently on Medicaid or Medicaid eligible.



Contact Information

AAA 1-B Central Office (Oakland County) 29100 Northwestern Hwy. Suite 400 Southfield, MI 48034	Livingston/Washtenaw County Access Location 3941 Research Park Drive Suite B Ann Arbor, MI 48108
Macomb County Access Location 39090 Garfield Suite 102 Clinton Twp., MI 48038	Monroe County Access Location 14930 LaPlaisance Suite 130 Monroe, MI 48161

**For information on local services available in your community
please contact our Resource Center:**

(800) 852-7795

TTY: (800) 649-3777 (Michigan Relay)

<http://www.aaa1b.com/ContactUs>



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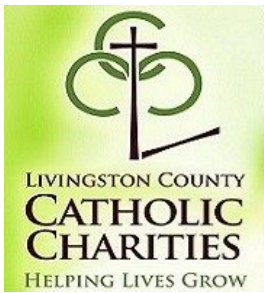
County Resources



- [Livingston County United Way](#)
- [United Way's 2-1-1 Information and Referral Search](#)
- [Livingston County Human Services Collaborative Body](#)
(The Livingston County Human Services Collaborative Board coordinates health and human services in Livingston County). [2019 Resource List.](#)
- [Volunteer Livingston](#)
- [Salvation Army](#)
- [LACASA](#)
- [Oakland Livingston Human Services Agency \(OLHSA\)](#)
- [Southeast Michigan Community Alliance \(SEMCA\)](#)
- [Livingston County Veterans Affairs Dept.](#)
- [Ann Arbor VA Hospital](#)
- [Great Start Collaborative – Strengthening Families](#)
- [Love INC](#)
- [Livingston County Healthy Habits for Youth](#)
- [Livingston County Food Programs](#)
- [My Community Dental Center](#)
- [VINA Dental](#)

Mark Your Calendar for Free Hot Meals Weekly!

- **5:30pm Sunday:**The Fish & Loaves community meal is provided by rotating churches in the Brighton Area.Call 810-494-4013 for information or each week's location.
- **6:00pm Monday:** Magdalen's Kitchen at St. Mary Magdalen Parish, 2201 Old US 23, Brighton.For more information call 810-229-8624.



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Have hope. Get help.



LIVINGSTON COUNTY CATHOLIC CHARITIES

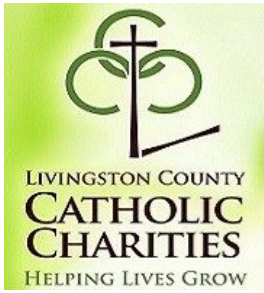
- [Diocese of Lansing](#)
- [Faith Magazine](#)
- [Local Mass Times](#)

Our Parishes

- [St. Joseph in Howell](#)
- [St. John the Baptist](#)
- [St. Augustine](#)
- [St. Agnes](#)
- [Holy Spirit](#)
- [St. Patrick](#)
- [St. Mary Magdalen](#)
- [St. Mary Pinckney](#)

For additional information on the HHS mandate please see the Diocese of Lansing's web site (listed above) and :

- [Michigan Catholic Conference](#)



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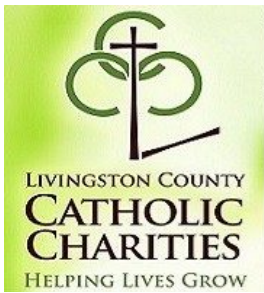


LIVINGSTON COUNTY CATHOLIC CHARITIES

- Livingston County [Community Mental Health](#) 24 Hour Hotline – 1-800-615-1245.
- Substance Abuse and Mental Health Services Administration ([SAMSA](#))
- National Alliance of Mental Health ([NAMI](#))

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- [Weaver Xtreme Theme](#)



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Have hope. Get help.



LIVINGSTON COUNTY CATHOLIC CHARITIES

- [District 8 AA website](#)
- [Substance Abuse & Mental Health Services Administration](#)
- [Livingston County Narcotics Anonymous](#)
- [Neversaynevermi.com](#)
- [Livingston County Community Alliance](#)
- [National Institute on Drug Abuse](#)
- [DrugFree.org](#)
- [Second Chance Support Network](#)
- [Stepping Stones Engagement Center, 2020 E. Grand River, Suite 102, Howell, Michigan 48843](#)
Drop-in facility. (517) 376- 6262
Hours of Operation: Mon-Fri: 5 pm-9 am and Weekends 24 hours
Daytime assistance: (517) 546-4126
- [Families Against Narcotics Support Group](#) for individuals recovering, family and friends. A new chapter begins in Washtenaw 11/12/18 at 242 Church in Ann Arbor.

Area Substance Abuse Support Groups:

St. Agnes: AA meets 7:00pm

St. Joseph: Narcotics Anonymous – Thursdays at 7:00pm
AA & Alanon – Saturdays at 7:00pm

St. Patrick: AA M-F at 12:00pm; Fridays at 7:30pm; Sunday at 7:30pm
Alanon – Friday at 12:00pm; Sunday at 7:30pm
Narcotics Anonymous – Monday at 7:30pm
NAR-ANON – Monday at 7:30pm

Catholic Charities

<https://www.catholiccharitiesusa.org/wp-content/uploads/2018/12/Mission-Driven-Sustainability-How-to-Make-Strategic-Decisions-in-Programs-webinar-120718.pdf>

National Council on Aging

<https://www.ncoa.org/center-for-healthy-aging/basics-of-evidence-based-programs/offering-evidence-based-programs/sustainability/>

Resources to help with sustainability

- Issue Brief: Key Factors and Strategies Contributing to Program Sustainability
<https://www.ncoa.org/resources/evidence-based-health-promotion-programs-for-older-adults-issue-brief/>
- Creating a Business Plan for Evidence-Based Health Promotion Programs
<https://www.ncoa.org/uncategorized/ebhp-business-plan/>
- Chronic Disease Self-Management Cost Calculator
<https://www.ncoa.org/resources/chronic-disease-self-management-program-cost-calculator/>

Best practice examples

- Massachusetts Healthy Living Center of Excellence Sustainability Plan
<https://www.ncoa.org/resources/massachusetts-healthy-living-center-of-excellence-sustainability-plan/>
- Oregon's living well business plan
<https://www.ncoa.org/resources/webinar-how-will-you-sustain-evidence-based-healthy-aging-programs-tools-you-can-use/>
- Massachusetts Toolkit: Formulating a Strategic Business Plan
<https://www.ncoa.org/resources/formulating-strategic-business-plans-for-healthy-aging-programs/>
- Missouri Sustainability Toolkit
<https://www.ncoa.org/resources/missouri-cdsmp-sustainability-toolkit/>