

## Glossary & Acronyms

A work in progress—contact [Gigi Meinig](#) with questions and/or recommendations.

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| AAA                   | Area Agency on Aging, as designated under section 305(a)(2)(A) of the Older Americans Act (sometimes referred to as “Triple A”)  |
| Abuse/Neglect         | Elder abuse generally includes physical, sexual, and emotional abuse, neglect, financial exploitation, and stalking.   |
| ADRC                  | <p>Aging &amp; Disability Resource Center, an entity established by a state as part of the state system of long-term care, to provide a coordinated system for providing:</p> <ul style="list-style-type: none"> <li>• Comprehensive information on the full range of available public and private long-term care programs, options, service providers, and resources within a community, including information on the availability of integrated long-term care;</li> <li>• Personal counseling/consultation to assist individuals in assessing their existing or anticipated long-term care needs, and developing and implementing a plan for long-term care designed to meet their specific needs and circumstances; and</li> <li>• Consumer access to the range of publicly-supported long-term care programs for which consumers may be eligible, by serving as a convenient point of entry for such programs.</li> </ul> |
| ADRC Specialist       | ADRC employee or volunteer trained to provide ADRC I&R/A services. See I&R Specialist  |
| ADSA                  | Aging & Disability Services Administration—part of the State of Washington’s Department of Social and Health Services (DSHS) serving adults with chronic illnesses or conditions and people of all ages with developmental disabilities. All long-term care and Division of Developmental Disabilities (DDD) services are voluntary.   |
| Advocacy (Individual) | To help a person receive, retain or establish eligibility for services, by clarifying communications between inquirers and service providers. Client advocacy is provided when persons cannot advocate for themselves and have no one in their support system able and willing to advocate on their behalf.  |
| Advocacy (System)     | <p>System Advocacy may be undertaken to effect changes in public policy relating to the needs of a target population. Actions may be taken by the ADRC or I&amp;A to seek changes in state and/or community conditions, structures or institutions when modifications in the service delivery system are required to ensure the adequate availability of essential community services. Such advocacy may include the collection, analysis, and dissemination of data on human service needs.</p> <p>System advocacy does not include legislative advocacy (lobbying) and must follow agency policies and procedures.</p>   |
| Agency                | An organization that delivers services. An agency can be incorporated, a division of government, or an unincorporated group that offers, for example, a food pantry or support group. The agency is the main location of the resource where the administrative functions occur, where the organization’s director is generally housed and where it is licensed for business. An agency may or may not deliver direct services from this location. For example, a city Department of Human Services may offer hundreds of services but is often recognized by the names of its component programs: Social   |

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|   | Services, Health Department, etc. It is acceptable to use those components as agencies as long as their relationship to the larger Department of Human Services is acknowledged in the description or by the way the database is structured. See also Agency Description and Agency Name under Data Elements.   |
| Aging I&R/A Provider                          | Aging Information and Referral/Assistance serving persons 60 years of age and older. See I&R Service  |
| AIRS  | Alliance of Information and Referral System: The professional association for information and referral providers. <a href="http://www.airs.org">www.airs.org</a>  |
| AIRS/211 LA County Taxonomy of Human Services | The classification system maintained by 211 LA County and endorsed by AIRS as a common language for the field of information and referral. The Taxonomy is used to index and facilitate retrieval of resource information, increase the reliability of planning data, make evaluation processes consistent and reliable, and facilitate national comparisons of data. It can be accessed at <a href="http://www.211taxonomy.org">www.211taxonomy.org</a> See also Classification System.  |
| Anonymous                                     | Having an unknown or withheld name, authorship, or agency   |
| AoA   | Administration on Aging   |
| ASIS  | AAA Statewide Information System  |
| ASP   | Application Service Provider - the vendor providing and hosting ASIS  |
| Assessment                                    | The processes of helping an inquirer identify, analyze, and prioritize his or her needs. The process consists of active listening and effective questioning to determine the needs of the inquirer, clarifying the need, identifying appropriate resources and delivery mode(s), providing contact information about organizations capable of meeting those needs, and providing enough information about each organization to help inquirers make an informed choice. In situations where services are unavailable, the I&A/ADRC specialist engages in problem solving to help the inquirer identify alternative strategies. |
| Assistance                                    | The disposition or outcome of an inquiry in which the I&A/ADRC specialist helps an inquirer obtain a needed service or accomplish a necessary task. This component is also utilized when the caller requires assistance understanding the specific nature of their problem and needs. Assistance is provided only when an inquirer is unable to obtain the service or perform the task on their own and lacks a support system that is able and willing to act on their behalf.   |
| At risk for institutional placement (OAA)     | With respect to an older individual, that such individual is unable to perform at least 2 activities of daily living without substantial assistance (including verbal reminding, physical cuing, or supervision) and is determined by the State involved to be in need of placement in a long-term care facility.   |
| Behavioral health                             | The relationship between human behavior (individually or socially) and the well-being of the body, mind, and spirit   |
| Beneficiary                                   | The recipient of funds or other benefits (e.g. Medicare Beneficiary)  |
| Best Practices                                | Strategies, activities and approaches that have been shown to be effective through research and evaluation  |
| Call  | A connection over a telephone network between the calling party and the called party. Included are incoming calls (calls that are received by – or offered to – the telephone system) and outgoing calls (calls made by the I&A/ADRC).  |

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| Caller                             | See Inquirer   |
| CARE                               | Comprehensive Assessment and Reporting Evaluation System   |
| Care Management                    | See Case Management  |
| Care Receiver                      | An individual with a physical, intellectual, or psychiatric disability receiving care from one or more individuals, healthcare providers, or agencies. (care recipient)  |
| Care Worker                        | Paid individual who supports one or more individuals with disabilities. The caregiver may be paid directly or through an agency; and either privately or through a publicly funded program (e.g. COPES, MPC, FCSP, VA).  |
| Caregiver                          | Unpaid relative, domestic partner or friend who supports one or more individuals with disabilities; an individual who provides assistance to another person, who because of physical disability, chronic illness or cognitive impairment is unable to perform certain activities on his/her own; Usually refers to informal, unpaid assistance for the physical and emotional needs of another person.<br>A generic term referring to a person, <b>either paid or voluntary</b> , who helps an older person with the activities of daily living, health care, financial matters, guidance, companionship and social interaction. (Department of Health and Human Services) |
| Caregiver Support                  | Programs that support unpaid caregivers such as family members or friends. Support can include information, education, access to services and in-home assessments.   |
| Children w/Special Needs           | Special needs is a term used in clinical diagnostic and functional development to describe individuals who require assistance for disabilities (medical, behavioral, or developmental).  |
| Children with Incarcerated Parents | A child with one or both parents in federal or state prison, more at risk of poor school performance, drug use and mental health problems, and exposure to parental substance abuse, extreme poverty, and domestic violence  |
| Children with Military Parents     | A child with one or more parents who serve in a branch of the armed forces   |
| Classification System              | A structure for categorizing available human service information in the I&R/A resource database in a systematic, unambiguous way. A standard classification system provides a common language for human services, simplifies retrieval of service information, increases reliability of planning data, makes evaluation processes consistent, and facilitates national comparisons of data. See also AIRS/211 LA County Taxonomy of Human Services. Also known as Service Classification System, Taxonomy.   |
| Client                             | Someone who pays for goods or services; a person who is receiving the benefits, services, etc., of a social welfare agency, a government bureau, etc.; the primary consumer of services.   |
| CMS                                | Centers for Medicare and Medicaid Services<br><a href="http://www.cms.hhs.gov">http://www.cms.hhs.gov</a>  |
| Cognitive impairment               | Intellectual functioning level and adaptive skills significantly below the average for someone of the same chronological age   |
| Collateral Contact                 | A collateral contact is a source of information that is knowledgeable about the client's situation and serves to support or corroborate information provided by a client;  |
| Comprehensive I&R                  | An I&R program (e.g. 2-1-1) that maintains information about the full  |

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| Service                    | range of human services and which function as a primary source of linkages for persons of all ages with human services providers in their community, including with specialized I&R services, like Senior I&As , ADRCs, Child Resource & Referral, etc. Also referred to as Generic I&R.  |
| Configuration              | To set up or arrange something in such a way that it is ready for operation for a particular purpose (eg. – system value tables within IT system or application for drop down values, user security, etc.)  |
| Consumer Protection        | Laws and organizations designed to ensure the rights of consumers as well as fair trade and the free flow of truthful information   |
| Counseling Child           |   |
| Counseling Relative        |   |
| CPS                        | Cognitive Performance Scale   |
| Customization              | Modify something to suit personal specifications or preferences; in IT, often not included in scope and can result in additional costs.   |
| Data Conversion            | The one time process of converting data from a source into ASIS.  |
| Data Elements              | Distinguishable, defined units of information that are contained somewhere within an information system.  |
| Data Extract               | File to capture specific data elements <u>from</u> ASIS (can be recurring or one time)  |
| Data Feed                  | File to send specific data elements <u>to</u> ASIS (can be recurring or one time)   |
| Dementia Programs          |   |
| DEM (Data Entry Mandatory) | Element/field must be completed if it displays per system configuration. This column is for staff and not for vendors.  |
| DEO (Data Entry Optional)  | Element/field will NOT always be completed; element can also be removed from screen display through configuration. This column is for staff and not for vendors.  |
| Diagnosis Dementia         |   |
| Disability                 | Means (except when such term is used in the phrase “severe disability”, “developmental disability- “physical or mental disability”, “physical and mental disabilities”, or “physical disabilities”) a disability attributable to mental or physical impairment, or a combination of mental and physical impairments, that results in substantial functional limitations in 1 or more of the following areas of major life activity:<br>(A) self-care,<br>(B) receptive and expressive language,<br>(C) learning,<br>(D) mobility,<br>(E) self-direction,<br>(F) capacity for independent living,<br>(G) economic self-sufficiency,<br>(H) cognitive functioning, and<br>(I) emotional adjustment. |
| Disaster Preparedness      |   |
| DSHS                       | Washington State Department of Social and Health Services   |
| Education                  |   |
| Emergency Contact          | An individual who has been named by a client as the person to contact should some emergency befall the client   |

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| Employment          |  |
| End of Life         |  |
| FCSP                | Family Caregiver Support Program   |
| Financial Security  |  |
| Follow-up           | Process of contacting inquirers to determine whether their needs were met and if not, why not. Additional assistance to the inquirer in locating or using needed services may be a part of follow-up.  |
| Food                |  |
| Gatekeeper          | A gatekeeper is an individual or an employee of a local business or community organization who comes into contact with older adults on a regular basis. Through the Gatekeeper program, these non-traditional referral sources are trained to identify and refer older adults who appear to have problems that may place them at-risk of hospitalization and/or premature out of home placement. Gatekeepers include utility employees, bank personnel, apartment and mobile home managers, postal carriers, police, fire department, paramedics, etc  |
| Gatekeeper Program  | A proactive community training program to locate, identify and refer at-risk, home dwelling older adults. The Gatekeeper Program was developed in 1978 by Ray Raschko, MSW, at Spokane Mental Health's Elder Services. Since its inception, the Gatekeeper model has been applied nationally and internationally to train employees to identify and refer isolated, at-risk older adults residing in their own homes. These are elders who have little or no support system to act in their behalf as they experience serious difficulties that compromise their ability to live independently. See: <a href="http://www.smhca.org/gatekeeper.aspx">http://www.smhca.org/gatekeeper.aspx</a>   |
| GPRA                | Government Performance and Results Act   |
| Health              |  |
| Healthcare coverage |  |
| Healthcare Provider | An organization or person who delivers proper health care in a systematic way professionally to any individual in need of health care services; also called health professional  |
| Home Maintenance    |  |
| Housing             |  |
| I&A Provider        | See Senior I&A Provider  |
| I&A Specialist      | Employee or Volunteer of a Senior I&A program trained to deliver I&A services. See I&R Specialist  |
| I&R Service         | Information and Referral: An organization (or program within a larger organization) whose primary function is to link people in need of human services with appropriate service providers who can meet their needs. I&R services may be comprehensive covering the whole range of human services or may specialize in resources for a particular population, e.g., people who are homeless, people with disabilities, older adults, people with AIDS. The Taxonomy definition for "Information and Referral" is as follows: "Programs whose primary purpose is to maintain information about human service resources in the community and to link people who need assistance with appropriate service providers and/or to supply descriptive information about the agencies or organizations which offer services. The |

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|                              | information and referral process involves establishing contact with the individual, assessing the individual's long and short-term needs, identifying resources to meet those needs, providing a referral to identified resources, and, where appropriate, following up to ensure that the individual's needs have been met.” Also known as Senior Information and Assistance or Aging Information and Referral/Assistance Provider(in the aging network) and Resource and Referral Agency (in the child care arena). See also Comprehensive I&R Service, Specialized I&R Service.   |
| Inclusion/Exclusion Criteria | The guidelines an I&R service utilizes to determine the scope and content of its resource database. Inclusion criteria specify the types of organizations that are priorities for inclusion and, if exhaustive, list the only types of organizations the resource database will contain. Exclusion criteria specify the types of organizations whose inclusion is prohibited. Also known as Data Collection Policies.  |
| Independent Living           |  |
| Individual                   | Person about whom information is being collected   |
| Information Provision        | The process of providing descriptive information about a service provider to the inquirer. Information can range from a limited response (such as an organization's name, telephone number, and address) to detailed data about community service systems (such as explaining how intake works for a particular agency), agency policies, and procedures for application.  |
| Inquirer                     | Individual and/or organization seeking information about or linkage with community service providers through the I&R/A. Also known as Callers, Consumers or Clients.   |
| Inquirer Advocacy            | Intervention by the I&R service on behalf of individuals to ensure that they receive the benefits and services for which they are eligible. The Inquirer advocacy efforts seek to meet individual needs without attempting to change social institutions and, for purposes of these standards, does not include system advocacy or legislative advocacy (lobbying). Forms of inquirer advocacy include: <ul style="list-style-type: none"> <li>✓ Making the initial contact with a service provider to verify eligibility or service availability, notify them of the inquirer’s forthcoming contact or schedule an appointment;</li> <li>✓ Initiating a warm transfer, i.e., using 3-way calling technology to contact an agency and introduce the inquirer and his or her situation before ending their participation in the call;</li> <li>✓ With the organization’s permission, listening in on a call or sitting in on an interview while the inquirer attempts to explain the situation, providing assistance only when necessary;</li> <li>✓ Representing the inquirer when s/he is unable to state his or her own case when, for example, the individual faces barriers to successfully accessing services (e.g., language, age, physical or developmental disabilities, communication impairments, emotional situations, mental health issues or poverty);</li> <li>✓ Negotiating on behalf of the inquirer when a request for service has been denied in situations where it appears there are facts unknown to the agency or that the agency has acted in violation of its own policies or the law; and</li> <li>✓ Escalating the intervention by speaking with a senior manager regarding the inquirer’s situation.</li> </ul> |

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|                             | See also Advocacy, System Advocacy. Also known as Client Advocacy, Individual Advocacy.  |
| Inquirer Data Collection    | The systematic process of recording and organizing essential information about inquirers, their needs, the referral(s) made on their behalf, and follow-up results, when available.                      |
| Insurance                   |  |
| Legal Services              |  |
| Linkages                    | A connection or relation between things (eg. – linkages between systems, linkages between individuals)   |
| Long Term Care Options      |  |
| Low-income                  | Below average income; below 50% of the State Median Income (SMI); see MB H10-006 <i>Senior Citizens Services Act (SCSA) Fee Schedule and State Median Income (SMI) Chart for 2010</i> posted on 1/25/10. |
| Memory Loss                 |  |
| Met Needs                   | Services are available and referral(s) are provided or assistance without referrals is made available to an inquirer in response to requested information or statement of a problem/need.                |
| MIPPA                       | Medicare Improvements for Patients and Providers Act of 200_   |
| NAPIS                       | National Aging Program Information System  |
| NASUA                       | National Administration of State Units on Aging  |
| NFCSP                       | National Family Caregiver Support Program  |
| No Cognitive issues         |  |
| Nutrition                   |  |
| OAA                         | Older Americans Act  |
| Off-line                    | Working on a laptop that is not connected to the ADSA network  |
| OMB                         | Office of Management and Budget (Federal, State?)  |
| On-line                     | Connected to Internet  |
| Parents deployed            |  |
| PART                        | Program Assessment Rating Tool used by OMB   |
| Program Participant         | Somebody who takes part in something   |
| Poor Unsafe decision making |  |
| Prevention                  |  |
| Promotion/Disease           |  |
| PSA                         | Planning and Service Area: a number that is assigned to indicate the geographical area served by an Area Agency on Aging   |
| Recreational Activities     |  |
| Referral                    |  |
| Region (DSHS)               | A number assigned to a geographical subset of the state served by DSHS   |
| RU                          | Reporting Unit: a number that is assigned to indicate the office or agency reporting to the Washington State Department of Social & Health Services  |
| Senior I&A Provider         | Senior Information and Assistance serving persons 60 years and over. See I&R Service   |
| Service Gaps                |  |
| Service Recipient           | An individual who receives one or more services  |

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| SFCSP                      | State Family Caregiver Support Program   |
| SHIBA                      | Statewide Health Insurance Benefits Advisors, a program administered by the Washington State Office of the Insurance Commissioner  |
| Specialized I&R Service    |  |
| SUA                        | State Unit on Aging  |
| Substance abuse            |  |
| System Advocacy            | Actions taken by the I&R service to seek changes in community conditions, structures or institutions when modifications in the service delivery system as a whole are required to ensure the adequate availability of essential community services, to contribute to human growth and development and to prevent unwitting support of conditions which are injurious to individuals and families who are residents. The objective of system advocacy is to make changes that are required to benefit the community rather than focusing on the needs of a particular individual, family or group of residents. System advocacy mechanisms include letter writing campaigns; visits to political representatives; testimony at public hearings; holding press conferences; writing articles or letters to local newspapers; offering interviews to local radio and television stations; offering services as a knowledgeable public speaker; mobilizing concerned members of the public; and working through coalitions or associations to advance a cause. See also Advocacy, Inquirer Advocacy. |
| Taxonomy                   | See classification system  |
| TCare                      | Tailored Caregiver Assessment and Referral   |
| Transportation             |  |
| Unduplicated Count         | Count of individuals served during a specific reporting period. An individual is only counted once; no matter how many units of service are provided.  |
| Units of Service           | The ways in which a program's productivity is measured, e.g., the number of counseling sessions conducted, the number of advocacy materials distributed, the number of meals served, the number of participants assisted, the number of beds filled.   |
| Unmet Needs                | Individual instances where no referrals are available to meet an inquirer's assessed needs. Individual unmet needs may lead to identification of service gaps at the service delivery system level. See also Service Gaps.   |
| Unsafe Difficult Behaviors |  |
| Volunteer                  | One who enters into service voluntarily; to do charitable or helpful work without pay  |
| Volunteerism               |  |
| Waiting List               | In situations where an organization's program is currently full, the list of individuals who will be admitted next when space becomes available.   |