

ADS / GetCare Data Cross-Walk Specifications for Community Living Connections (CLC) and Family Caregiver Support (FCSP) Combined

Updated October 2021

Field	Data Type, Codes and Maximum Length	ADS Description/Example	GetCare Description/Example
Client ID	text – 15 characters	Unique identification number assigned by agency	GetCare ID assigned by GetCare System
Last Name	text - 20 characters	Smith	Smith
First Name	text - 15 characters	Jonathan	Jonathan
Middle Name	text - 15 characters	William	William
Street Address	text - 255 characters	511 15th Avenue S	511 15th Avenue S
City	text - 35 characters	Federal Way	Federal Way
Zip Code	text - 5 characters	98104	98104
Date of birth	Date – mm/dd/yyyy	Example: 1/30/1928	Example: 1/30/1928
Race	Integer	What is the client's race?	*Race (Check all that apply)
	0	Unknown	Unknown
	1	American Indian or Alaska Native	American Indian/Alaska Native
	2	Asian, Asian American	Asian
	3	Black, African, African-American	Black/African American
	4	Hawaiian Native or Pacific Islander	Native Hawaiian/Other Pacific Islander
	6	White	White
	7	Other	If have Other identified check Ethnicity, if not Leave Blank
	8	Multi-Racial	Check all that apply
			Declined to State
Ethnicity	Text	What is the client's ethnicity?	*Ethnicity (Choose the corresponding ethnicity from list if known)
	u	Unknown	Leave Blank
	y	Hispanic or Latino	Hispanic or Latino (Is required if known and is the only way to capture in GetCare)
	n	Not Hispanic or Latino	Not Hispanic or Latino
*Note: Race and Ethnicity categories are being updated in GetCare to improve recording options for Latino/Hispanic identity. The above represents current options and will be updated as options change.			
Income	Integer	See Income Guidelines for corresponding \$ amounts	At or below 100% Federal Poverty Level
	0	Unknown	Declined to State Income
	1	Very Low (< 30% Median)	Yes
	2	Low (< 50% Median)	No
	3	Moderate (< 80% Median)	No
	4	Above Moderate (> 80% Median)	No
Live Alone	Text	Does the client live alone?	Household Composition (Lives Alone)
	u	Unknown	Declined to State
	y	Yes	Lives Alone
	n	No	Other
	n	No	Institutionalized
	n	No	With Domestic Partner
	n	No	With Non-Relative(s)
	n	No	With Other Relative(s)
	n	No	With Parent(s)
	n	No	With Spouse
Gender	Text	What is the client's gender?	Sex/Gender
	u	Unknown	Unknown
	f	Female	Female
	m	Male	Male
	o	Other (e.g. transgender)	Other
			Declined to Disclose
Limited English	Text	Does the client have limited proficiency in English?	English Fluency
	u	Unknown	Declined to state
	y	Yes	Needs Translation
	n	No	Fluent
			Limited

Disability Status	Text	Does the client have a disability?	Disability Type
	u	Unknown	Declined to State
	y	Yes	Physical Disability
	n	No	No Disability
	y	Yes	Intellectual/Developmental disability (ID/DD)
	y	Yes	Mental illness
	y	Yes	Traumatic brain injury
	y	Yes	Dementia
	y	Yes	Memory Loss
	y	Yes	Other, specify
Homeless	Text	Is the client homeless or living in temporary	Homeless?
	u	Unknown	Unknown
	y	Yes	Yes
	n	No	No
Veteran	Text	Is the client a veteran?	Veteran
	u	Unknown	Declined to State
	y	Yes	Veteran
	n	No	No
Urban/Rural	Text	Urban/Rural	Urban/Rural (Auto-populates based on Zip code)
			Rural
			Urban
			Declined to state
Sexual Orientation	Integer	What is the sexual orientation of the client?	Sexual Orientation
	0	Unknown	Declined to state
	1	Bisexual	Bisexual
	2	Gay	Lesbian/Gay
	3	Heterosexual	Heterosexual
	4	Lesbian	Lesbian/Gay
	5	Questioning	Questioning
	6	Other	Leave Blank

ADS / GetCare Data Cross-Walk Specifications Required for Family Caregiver Support Only

Updated October 2021

Field	Data Type, Codes and Maximum Length	ADS Description/Example	GetCare Description/Example (Located in the Contacts Ribbon under Caregiver Relationship)
Relationship	Integer	What is the relationship of the caregiver to the care recipient?	Relationship
	0	Unknown	Declined to State
	5	Grandparent	Grandparent
	6	Other Relative	Other Relative
	7	Other Non-Relative	Non-Relative
	11	Spouse	Spouse
	12	Adult Child/Child-in-Law	Adult Child/In-Law
	13	Partner/Domestic Partner	Domestic Partner
	6	Other Relative	Adult Grandchild
	7	Other Non-Relative	Ex-Spouse
	6	Other Relative	Grandchild
	7	Other Non-Relative	Other Elderly Non-Relative
	6	Other Relative	Other Elderly Relative
	6	Other Relative	Parent/Parent In-Law
			Relationship Missing
	6	Other Relative	Relative Child
	6	Other Relative	Sibling/Sibling In-Law
Kinship	Text	Is this a grandparent or older adult caring for a child(ren) under age 18?	No longer collecting
	u	Unknown	
	y	Yes	
	n	No	

A Care Reciever needs a record in GetCare to link to a client.
Link the Caregiver and Care Reciver in the Contacts Ribbon in the Caregivers client file.

ADS / GetCare Data Cross-Walk Specifications for ADLs & IADLs
(Required for Care Coordination services only)

Updated October 2021

Field	Data Type, Codes and Maximum Length	ADS Data File Description/Example	GetCare Description/Example
ADLs	Text	Does the client need help with the following Activities of Daily Living (ADLs)?	Activities of Daily Living (ADL)
Eating	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Toileting	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Walking	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Transferring	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Dressing	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Bathing	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Med Mgmt	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
IADLs	Text	Does the client need help with the following Instrumental Activities of Daily Living (IADLs)?	Instrumental Activities of Daily Living (IADL)
Cooking	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Shopping	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Chores	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Driving	n	No	1. Independent
			2. Minimum Assistance

	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Heavy Housework	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Phoning	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State
Money Mgmt	n	No	1. Independent
			2. Minimum Assistance
	y	Yes	3. Moderate Assistance
			4. Maximum Assistance
			5. Declined to State

ADS / GetCare Service Enrollment and Unit Information for Community Living Connections							
Updated October 2021							
ADS Previous Way of Recording Service				GetCare Service Recording effective 10/1/2021			
ADS Service Type	Code	Unit Type	Definition	GetCare Scope of Work	GetCare Program (Funding)	GetCare Service Detail	Assessment Required
Care Coordination	c4	Hour	Care coordination unit is 1 hour, this is what used to be called discretionary case management or care coordination.	Case Management	OAA TIIIB/SCSA/LOC	1 Hour	Functional assessment (ADLs/IADLs)
Client Flexible Fund	c20	Item	Client flexible fund units	Client Specific Funds	OAA TIIIB/SCSA/LOC	1 Unit	none
Medicaid Transformation Demonstration Referral	i5	Activity	Retired - No longer in use effective 10/1/2021				
Dementia Capable Person-Centered Options Counseling	i6	Hour	Retired - No longer in use effective 10/1/2021				
Person-Centered Options Counseling	i7	Hour	Options counseling service. Record by hours.	Options Counseling	OAA TIIIB/SCSA/LOC	1 Hour	None
Community I&A – Assistance	i8	Assist	Assistance accessing a service or resource by a community provider. Record at client level. Identifying information for the client may not be available in which case the units may be summed up and entered as Non-Registered (Aggregate) units.	Information & Assistance	OAA TIIIB/SCSA/TXIXMAC/LOC	1 - Community Assistance Contact	None
Community I&A – Information Contact	i9	Contact	Information giving by a community provider. Record at client level. Identifying information for the client may not be available in which case the units may be summed up and entered as Non-Registered (Aggregate) units.	Information & Assistance	OAA TIIIB/SCSA/TXIXMAC/LOC	1 - Community Information Contact	None
Central I&A – Assistance	p8	Assist	Assistance accessing a service or resource by the Community Living Connections main line (Crisis Connections). Record as Non-Registered (Aggregate).	Information & Assistance	OAA TIIIB/SCSA/TXIXMAC/LOC	1 - Central Assistance Contact	None
Central I&A – Information Contact	p9	Contact	Information giving by the Community Living Connections main line (Crisis Connections). Record as Non-Registered (Aggregate).	Information & Assistance	OAA TIIIB/SCSA/TXIXMAC/LOC	1 - Central Information Contact	None
CV-19 Response Care Transitions	i19		Retired - No longer in use effective 10/1/2021				

Previously collected in monthly report only, not in data file		Outreach. Record as Non-Registered (aggregate) by month.	Outreach	OAA TIII/SCSA/LOC	1 Contact	None
New!		Record as Non-Registered (aggregate) by month. Entry completed by ADS as of 10/1/2021. Include in Monthly Status Report.	Vaccine Access	COVID-19 Response	1 Vaccine Assist	None
Service Month	Date – mm/dd/yyyy	Use first day of month for reporting period, e.g., 1/1/2016		Service Month	Date – mm/dd/yyyy	Use first day of month for reporting period, e.g., 1/1/2016

ADS / GetCare Service Type Definitions, Enrollment and Unit Information for Family Caregiver Program							
Updated October 2021							
ADS Previous Way of Recording Service				GetCare Service Recording effective 10/1/2021			
ADS Service Type	Code	Unit Type	Definition	GetCare Scope of Work	GetCare Program (Funding)	GetCare Service Detail	Assessment Required
FCSP - Counseling	f1	Session	Counseling addresses emotional support to the caregiver provided by licensed mental health professionals through formal therapy sessions. Recording changes from Session to Hour effective 10/1/2021.	Counseling	OAA TIII/SFCSP/LOC	1 Hour	TCARE
FCSP - Support Groups	f2	Session	Support Groups rely on group process to assist family caregivers in developing new competencies, coping strategies related to their caregiver experience, and expanding / sustaining networks of support. Recording changes from Session to Hour effective 10/1/2021.	Support Group	OAA TIII/SFCSP/LOC	1 Hour	None
FCSP - Training	f3	Session	Caregiver trainings provide instruction on a wide range of topics of importance to family caregivers. The most common training modules focus on teaching caregivers to take better care of themselves and tips and skills for improving care of their loved ones. Examples include "Powerful Tools for Caregiving," "A Matter of Balance," and "Living Well with Chronic Conditions." Recording changes from Session to Hour effective 10/1/2021.	Training/Consultation	OAA TIII/SFCSP/LOC	Caregiver Training - 1 Hour	None
FCSP - Supplemental Services			Housework and Errands: This service set should only be used by Respite authorizer agencies.	Supplemental Services	OAA TIII/SFCSP/LOC	Housework and Errands - 1 Unit	TCARE
	f5	Item: each purchase received by caregiver	Purchase and receipt of a one-time or short-term purchase of goods and services that help a caregiver in their role.	Supplemental Services	OAA TIII/SFCSP/LOC	Consumable Supplies - 1 Unit	TCARE
Respite - FCSP (Hours)				Respite	OAA TIII/SFCSP/LOC	In Home - 1 Hour	TCARE
				Respite	OAA TIII/SFCSP/LOC	Adult Day Care - 1 Hour	TCARE
				Respite	OAA TIII/SFCSP/LOC	Adult Day Health - 1 Hour	TCARE
				Respite	OAA TIII/SFCSP/LOC	Out of Home - 1 Hour Overnight	TCARE
				Respite	OAA TIII/SFCSP/LOC	Other Respite - 1 Hour	TCARE
				Adult Day Health	OAA TIII/SFCSP/LOC	Memory Care and Wellness - 1 Hour	TCARE

FCSP - Consultation (non-TCARE)	f6	Session	Consultation services are primarily educational in nature and help the caregiver and/or family to develop caregiving strategies to help them navigate services and make decisions about care options. Consultation may also include brief emotional support provided by staff who are not licensed mental health professionals. Do not include TCARE consultation/care planning here. Recording changes from Session to Hour effective 10/1/2021.	Training/Consultation	OAA TIIIIE/SFCSP/LOC	Caregiver Consultation - 1 Hour	None
FCSP - TCARE Care Plan	f7	Activity	Completing the TCARE care plan with agreement date. Do not include minor Care Plan updates done between assessments. This category is only meant to count Care Plans done immediately after an assessment or reassessment.	FCSP / TCARE	FCSP	Step 3	TCARE
FCSP - Access/ Assistance	f8	Assist	Retired - No longer in use effective 10/1/2021.				
FCSP - Access/ Information Contact	f9	Contact	These are typically information calls, but could be any situation which information is provided to a client, and the client does not require assistance or follow-up. Identifying information for the client may not be available in which case the units may be summed up and associated with an unknown or anonymous client.	Access Assistance	OAA TIIIIE/SFCSP/LOC	1 Contact	None
FCSP - TCARE Intake/ Demographics	f10	Activity	Gathering and entering demographic information into GetCare for a TCARE intake.	FCSP / TCARE	FCSP	Step 1	TCARE
FCSP - TCARE Screen	f11	Activity	Entering TCARE screening or rescreening information into the GetCare system. Screen or rescreen must be marked as complete.	FCSP / TCARE	FCSP	Step 2	TCARE
FCSP - Emergency Respite	f16	Unit	Emergency respite support for caregivers in an emergency situation who are not currently receiving caregiver support through the FCSP network. This code should only be used by Crisis Connections to record clients receiving emergency respite.	Supplemental Services	OAA TIIIIE/SFCSP/LOC	Emergency - 1 Unit	TCARE Step I only
VSHSL Caregiver Respite	f17		Caregiver Respite	Caregiver Respite	VSHSL	1 Unit	None
VSHSL Caregiver Community Building	f18		Caregiver Community Building	Caregiver Community Building	VSHSL	1 Unit	None
CV-19 Response Counseling	f19	Session	Covid response counseling. Recording changes from session to hour effective 10/1/2021.	Counseling	Covid-19 Response	1 Hour	None
New!!				Vaccine Access	COVID-19 Response	1 Vaccine Assist	None
Outreach Data. Previously recorded in monthly report only, not in data file.				Information Services	OAA TIIIIE/SFCSP/LOC	Dissemination Of Publications - 1 Activity	None
				Information Services	OAA TIIIIE/SFCSP/LOC	Group Presentation - 1 Activity	None
				Information Services	OAA TIIIIE/SFCSP/LOC	Publicity/Media Campaign - 1 Activity	None

GetCare Data Specifications for Community Living Connections (CLC) & Family Caregiver Support (FCSP) Combined	
Field	GetCare Description/Example
Client ID	GetCare ID assigned by GetCare System
Last Name	Smith
First Name	Jonathan
Middle Name	William
Street Address	511 15th Avenue S
City	Federal Way
Zip Code	98104
Date of birth	Example: 1/30/1928
Race	*Race (Check all that apply)
	Unknown
	American Indian/Alaska Native
	Asian
	Black/African American
	Native Hawaiian/Other Pacific Islander
	White
	If have Other identified check Ethnicity, if not Leave Blank
	Declined to State
Ethnicity	*Ethnicity (Choose the corresponding ethnicity from list if known)
	Leave Blank
	Hispanic or Latino (Is required if known and is the only way to capture in GetCare)
	Not Hispanic or Latino
<p>*Note: Race and Ethnicity categories are being updated in GetCare to improve recording options for Latino/Hispanic identity. The above represents current options and will be updated as options change.</p>	
Income	At or below 100% Federal Poverty Level
	Declined to state income
	Yes
	No
Live Alone	Household Composition (Lives Alone)
	Declined to state
	Lives Alone
	Other
	Institutionalized
	With Domestic Partner
	With Non-Relative(s)
	With Other Relative(s)
	With Parent(s)
	With Spouse
Gender	Sex/Gender
	Unknown
	Female
	Male
	Other
	Declined to Disclose
Limited English	English Fluency
	Declined to state
	Needs Translation
	Fluent
	Limited
Disability Status	Disability Type

	Declined to state
	Physical Disability
	No Disability
	Intellectual/Developmental disability (ID/DD)
	Mental illness
	Traumatic brain injury
	Dementia
	Memory Loss
	Other, specify
Homeless	Homeless?
	Unknown
	Yes
	No
Veteran	Veteran
	Declined to state
	Veteran
	No
	Child
	Spouse
Urban/Rural	Urban/Rural (Auto-populates based on Zip code)
	Rural
	Urban
	Declined to state
Sexual Orientation	Sexual Orientation
	Declined to state
	Bisexual
	Lesbian/Gay
	Heterosexual
	Questioning

GetCare Data Specifications Required for Family Caregiver Support Only	
Field	GetCare Description/Example (Located in the Contacts Ribbon under Caregiver Relationship)
Relationship	Relationship
	Grandparent
	Other Relative
	Non-Relative
	Spouse
	Adult Child/In-Law
	Domestic Partner
	Adult Grandchild
	Declined to State
	Ex-Spouse
	Grandchild
	Other Elderly Non-Relative
	Other Elderly Relative
	Parent/Parent In-Law
	Relationship Missing
	Relative Child
	Sibling/Sibling In-Law
<p>A Care Reciever needs a record in GetCare to link to a client. Link the Caregiver and Care Reciver in the Contacts Ribbon in the Caregivers client file.</p>	

**GetCare Data Specifications for ADLs & IADLs
(Required for Care Coordination services only)**

ADLs	Activities of Daily Living (ADL)
Eating	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Toileting	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Walking	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Transferring	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Dressing	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Bathing	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Med Mgmt	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
IADLs	Instrumental Activities of Daily Living (IADL)
Cooking	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Shopping	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Chores	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Driving	1. Independent
	2. Minimum Assistance

	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Heavy Housework	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Phoning	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State
Money Mgmt	1. Independent
	2. Minimum Assistance
	3. Moderate Assistance
	4. Maximum Assistance
	5. Declined to State

GetCare Service Enrollment and Unit Information for Community Living Connections					
Scope of Work	Program (Funding)	Service Detail	Assessment Required	Data Recording Required	Definition
Case Management	OAA TIIIB/SCSA/LOC	1 Hour	Functional assessment (ADLs/IADLs)	Client Level	Previously called discretionary case management or care coordination. Record hours of service provided. Do not include travel/case note time. May record in increments of 15 minutes (.25 hours).
Client Specific Funds	OAA TIIIB/SCSA/LOC	1 Unit	none	Client Level	Also called Client Flexible Funds
Options Counseling	OAA TIIIB/SCSA/LOC	1 Hour	None	Client Level	Options counseling service. Record hours of service provided. Do not include travel/case note time. May record in increments of 15 minutes (.25 hours).
Information & Assistance	OAA TIIIB/SCSA/TXIXMAC/LOC	1 - Community Assistance Contact	None	Client Level	Assistance accessing a service or resource by a community provider. Identifying information for the client may not be available in which case the units may be summed up and entered as Non-Registered (Aggregate) units.
Information & Assistance	OAA TIIIB/SCSA/TXIXMAC/LOC	1 - Community Information Contact	None	Client Level	Information giving by a community provider. Identifying information for the client may not be available in which case the units may be summed up and entered as Non-Registered (Aggregate) units.
Information & Assistance	OAA TIIIB/SCSA/TXIXMAC/LOC	1 - Central Assistance Contact	None	Non-Registered (Aggregate)	Assistance accessing a service or resource by the Community Living Connections main line (Crisis Connections).
Information & Assistance	OAA TIIIB/SCSA/TXIXMAC/LOC	1 - Central Information Contact	None	Non-Registered (Aggregate)	Information giving by the Community Living Connections main line (Crisis Connections).

Outreach	OAA TIIIB/SCSA/LOC	1 Contact	None	Non-Registered (Aggregate)	Outreach. Record as Non-Registered (aggregate) by month.
Vaccine Access	COVID-19 Response	1 Vaccine Assist	None	Non-Registered (Aggregate)	Record as Non-Registered (aggregate) by month. Providers should include in Monthly Report. GetCare entry completed by ADS as of 10/1/2021.
Service Month	Date – mm/dd/yyyy	Use first day of month for reporting period, e.g., 1/1/2016			

GetCare FCSP Service Type Definitions, Enrollment and Unit Information

Scope of Work	Program (Funding)	Service Detail	Assessment Required	Data Recording Required	Definition
Counseling	OAA TIIIE/SFCSP/LOC	1 Hour	TCARE	Client Level	Counseling addresses emotional support to the caregiver provided by licensed mental health professionals through formal therapy sessions. Record units of service provided. Do not include travel/case note time. May record in increments of 15 minutes (.25 hours).
Support Group	OAA TIIIE/SFCSP/LOC	1 Hour	None	Client Level	Support Groups rely on group process to assist family caregivers in developing new competencies, coping strategies related to their caregiver experience, and expanding / sustaining networks of support. Record hours of service provided. Do not include travel/case note time. May record in increments of 15 minutes (.25 hours).
Training/Consultation	OAA TIIIE/SFCSP/LOC	Caregiver Training - 1 Hour	None	Client Level	Caregiver trainings provide instruction on a wide range of topics of importance to family caregivers. The most common training modules focus on teaching caregivers to take better care of themselves and tips and skills for improving care of their loved ones. Examples include "Powerful Tools for Caregiving," "A Matter of Balance," and "Living Well with Chronic Conditions." Record hours of service provided. Do not include travel/case note time. May record in increments of 15 minutes (.25 hours).
Supplemental Services	OAA TIIIE/SFCSP/LOC	Housework and Errands - 1 Unit	TCARE	Client Level	Housework and Errands. This service set should only be used by Respite authorizer agencies. 1 Unit = 1 Hour
Supplemental Services	OAA TIIIE/SFCSP/LOC	Consumable Supplies - 1 Unit	TCARE	Client Level	Purchase and receipt of a one-time or short-term purchase of goods and services that help a caregiver in their role.

Supplemental Services	OAA TIIIIE/SFCSP/LOC	Emergency - 1 Unit	TCARE (Step 1 only)	Client Level	Emergency respite support for caregivers in an emergency situation who are not currently receiving caregiver support through the FCSP network. This code should only be used by Crisis Connections only to record clients receiving emergency respite.
Respite	OAA TIIIIE/SFCSP/LOC	In Home - 1 Hour	TCARE	Client Level	This service set should only be used by Respite authorizer agencies. 1 authorized hour of service = 1 Hour.
Respite	OAA TIIIIE/SFCSP/LOC	Adult Day Care - 1 Hour	TCARE	Client Level	This service set should only be used by Respite authorizer agencies. 1 authorized day of service = 4 Hours.
Respite	OAA TIIIIE/SFCSP/LOC	Adult Day Health - 1 Hour	TCARE	Client Level	This service set should only be used by Respite authorizer agencies. 1 authorized day of service = 4 Hours.
Respite	OAA TIIIIE/SFCSP/LOC	Out of Home - 1 Hour Overnight	TCARE	Client Level	This service set should only be used by Respite authorizer agencies. 1 authorized Overnight of service = 24 Hours.
Respite	OAA TIIIIE/SFCSP/LOC	Other Respite - 1 Hour	TCARE	Client Level	This service set should only be used by Respite authorizer agencies. 1 hour of service = 1 Hour.
Adult Day Health	OAA TIIIIE/SFCSP/LOC	Memory Care and Wellness - 1 Hour	TCARE	Client Level	This service set should only be used by Respite authorizer agencies. 1 authorized day of service = 5 Hours.
Training/Consultation	OAA TIIIIE/SFCSP/LOC	Caregiver Consultation - 1 Hour	None	Client Level	Consultation services are primarily educational in nature and help the caregiver and/or family to develop caregiving strategies to help them navigate services and make decisions about care options. Consultation may also include brief emotional support provided by staff who are not licensed mental health professionals. Do not include TCARE consultation/care planning here. Record hours of service provided. Do not include travel/case note time. May record in increments of 15 minutes (.25 hours).
FCSP / TCARE	FCSP	Step 3	TCARE	Client Level	Completing the TCARE care plan with agreement date. Do not include minor Care Plan updates done between assessments. This category is only meant to count Care Plans done immediately after an assessment or reassessment.

Access Assistance	OAA TIIIIE/SFCSP/LOC	1 Contact	None	Client Level	This service assists caregivers in locating, obtaining, and navigating services and resources available within their communities. Staff may follow-up with caregivers or advocate on their behalf to ensure individuals receive the services. Identifying information for the client may not be available in which case the units may be summed up and entered as Non-Registered (Aggregate) units.
FCSP / TCARE	FCSP	Step 1	TCARE	Client Level	Gathering and entering demographic information into GetCare for a TCARE intake.
FCSP / TCARE	FCSP	Step 2	TCARE	Client Level	Entering TCARE screening or rescreening information into the GetCare system. Screen or rescreen must be marked as complete.
Caregiver Respite	VSHSL	1 Unit	None	Client Level	VSHSL Caregiver Respite
Caregiver Community Building	VSHSL	1 Unit	None	Client Level	VSHSL Caregiver Community Building
Counseling	Covid-19 Response	1 Hour	None	Client Level	Covid response counseling. Recording changes from session to hour effective 10/1/2021.
Vaccine Access	COVID-19 Response	1 Vaccine Assist	None	Non-Registered (Aggregate)	
Information Services	OAA TIIIIE/SFCSP/LOC	Dissemination Of Publications - 1 Activity	None	Non-Registered (Aggregate)	Outreach activities
Information Services	OAA TIIIIE/SFCSP/LOC	Group Presentation - 1 Activity	None	Non-Registered (Aggregate)	Outreach activities
Information Services	OAA TIIIIE/SFCSP/LOC	Publicity/Media Campaign - 1 Activity	None	Non-Registered (Aggregate)	Outreach activities