December 5, 2017

ALL COUNTY INFORMATION NOTICE (ACIN) NO. I-82-17

TO: ALL COUNTY WELFARE DIRECTORS
ALL IHSS PROGRAM MANAGERS

SUBJECT: IN-HOME SUPPORTIVE SERVICES (IHSS) ASSESSMENT
CLARIFICATIONS AND NEW OR UPDATED TOOLS

REFERENCES: ACIN I-20-15 (April 17, 2017); All County Letter (ACL) 14-60 (August 29, 2014); ACL 13-66 (September 30, 2013); ACL 12-36 (July 24, 2012); ACL 06-34E2 (May 4, 2007); ACL 06-34E1 (December 21, 2006); ACL 06-34E (September 5, 2006); ACL 06-34 (August 31, 2006); ACIN I-28-06 (April 11, 2006); ACL 80-30 (May 15, 1980); Manual of Policies and Procedures (MPP) §§30-700 – 30-765; MPP §22-000; Welfare and Institutions Codes (WIC) §12301.2

The purpose of this letter is to provide counties with clarification regarding the In-Home Supportive Services (IHSS) assessment process, transmit new and/or updated assessment tools, and ensure appropriate case documentation.

BACKGROUND

As part of the California Department of Social Services’ (CDSS) ongoing quality assurance and improvement efforts, it is necessary to clarify CDSS’ expectations of the county social worker’s role and responsibilities in assessing and authorizing IHSS program services. In accordance with the September 2006 enactment of Welfare and Institutions Code (WIC) §12301.2, or the Quality Assurance (QA) Initiative, and repeal of the Manual of Policies and Procedures (MPP) §30-758, or Time-Per-Task (TPT) and Frequency Guidelines, CDSS needs to reiterate the importance of correctly applying the Hourly Task Guidelines (HTGs) to assign time within service categories. TPT was the breakdown of need for service tasks which required the calculation of time or duration, and frequency, in each IHSS program service category.

Effective immediately, county social workers shall no longer use TPT in completing intake assessments and annual reassessments, when authorizing
services for the following 12 IHSS program services that have corresponding HTGs: (1) Preparation of Meals; (2) Meal Clean-up; (3) Feeding; (4) Bowel and Bladder Care; (5) Routine Bed Baths; (6) Dressing; (7) Menstrual Care; (8) Ambulation; (9) Transfer; (10) Bathing, Grooming, and Oral Hygiene; (11) Rubbing Skin and Repositioning; and (12) Care and Assistance with Prosthetic Devices. The application of TPT in these 12 services is not allowed under existing program regulations [MPP §30-757.11 through MPP §30-757.14(k)]. However, social workers may still need to factor in the necessary frequency of need to determine the appropriate time, under certain circumstances for these 12 HTG services. Such circumstances include but are not limited to: HTG exceptions, assignment of Functional Index (FI) rank 2, the application of Alternative Resources, Refused Services, or Voluntary Services to the total time authorized, or the consideration of Age Appropriate Guidelines when assessing minors.

Note that a key provision of the QA Initiative was to develop HTGs with exception criteria to provide a standard guide and tool for social workers to accurately and consistently assess service authorizations on a statewide basis and authorize services and time more equitably throughout the State. The HTGs established a normal range of time for certain tasks and a guide for granting time inside and outside of the HTGs as appropriate to meet the unique needs of IHSS applicants/recipient. The HTGs further included factors to consider in authorizing services and examples of common reasons for exceptions to the time ranges. Such factors and reasons were not intended to limit considerations in authorizing services and were established to assist social workers in completing the assessment of need.

Correctly applying the FI rankings and HTGs is a critical component of the individualized assessment process. It is imperative that counties continue to conduct individualized needs assessments that ensure the health and safety of individuals to remain safely in their own homes and to avoid institutionalization. Counties will continue to assess needs based in part on an individual’s functional level of impairment as specified in MPP §30-756 prior to authorizing services based on the HTGs.

The remaining 13 non-HTG services within the program may 1) have time guidelines without specific ranges for each FI ranking (e.g., Domestic Services at 6:00 hours/month), and may require time to be authorized beyond these guidelines, based on the applicant’s/recipient’s special needs or circumstances; 2) require calculations based on actual time needed (e.g., Accompaniment to Medical Appointments); and/or 3) require one-time limited services (e.g., Heavy Cleaning).

**APPLICANT/RECIPIENT EDUCATIONAL FACT SHEETS**

Social workers shall ensure that applicants/recipient understand the program rules and the assessment process when they initially apply for IHSS and at each annual reassessment thereafter, including the authorization of time in accordance with the HTGs. To assist with the applicant/recipient educational process, CDSS developed
new optional recipient educational fact sheets (see Attachment A) which social workers may use to help inform applicants/recipients about the IHSS assessment and authorization process during home visits. These fact sheets include information regarding the following:

1. FI Rankings and HTGs;
2. IHSS Program Services;
3. IHSS Recipient Right to File a State Hearing; and
4. IHSS Protective Supervision Services for Minor Children.

While social workers are not required to distribute copies of Attachment A to each applicant/recipient at the home visit, they must document in the case narrative that the program assessment and authorization process was discussed with each applicant/recipient during the home visit. Applicants/recipients should understand the assessment and authorization process, as it applies to their case, which will allow them to understand the contents of the Notice-of-Action (NOA) issued following the home visit.

The English version of these fact sheets are now available on CDSS’ website at: [http://www.cdss.ca.gov/inforesources/IHSS/Fact-Sheets](http://www.cdss.ca.gov/inforesources/IHSS/Fact-Sheets). Also, as required by Government Code §7295.2, these fact sheets will also be available at this website in the State threshold languages for the IHSS population: Spanish, Armenian, and Chinese.

**ROLE OF THE COUNTY SOCIAL WORKER**

**Assessment and Authorization**
County social workers should conduct all intake assessments and annual reassessments in accordance with the clarifications outlined herein, including the use of the revised Annotated Assessment Criteria (AAC) (see Attachment B), in conjunction with the IHSS Needs Assessment Form (SOC 293), to complete the assessment using the following steps:

1. Determine the FI ranking and provide appropriate documentation for that rank, including information about the applicant’s/recipient’s functional abilities and limitations, and then authorize time per the program’s regulatory time guidelines.
2. Explore any special needs and/or circumstances that assist in determining the time needed inside or outside the associated time range.
3. Consider the totality of the evidence, including but not limited to, the following: the applicant’s/recipient’s statement(s), the social worker’s observations, IHSS Program Health Care Certification Form (SOC 873), Request for Order and Consent – Paramedical Services Form (SOC 321), Assessment of Need for Protective Supervision for IHSS Program Form (SOC 821), Regional Center services/reports, school reports, other social service/community/medical collateral contacts, use of Durable Medical Equipment, etc.

In alignment with current practice, social workers **must conduct a thorough needs assessment during all intake assessments and annual reassessments.** With annual
reassessments, once the social worker confirms the above-three steps have been completed, and determines there has not been any significant changes in the recipient’s need for assistance in services and/or circumstances, the social worker may authorize the same hours as the prior year’s assessment. If all three steps have been completed, and the recipient’s needs and/or circumstances warrant an adjustment to the total hours authorized, the social worker should increase or decrease the hours accordingly. If any adjustment is made in the service authorizations, social workers should thoroughly document the reasons in the case file.

As discussed below, social workers may authorize time within or outside the HTG ranges, based on the applicant’s/recipient’s special needs and/or circumstances. When adjustments are needed above or below the middle of the range, the time authorized should be determined based on the applicant's/recipient’s individual needs. In this situation, calculations should not be necessary as the focus is on the applicant's/recipient’s unique needs or circumstances. Social workers may find it useful to review the frequency of need for a specific task to determine the appropriate time to authorize within or outside the range. As best practice, social workers should use their clinical and professional judgment, as well as their interviewing skills and the revised AAC, to determine whether the time is needed is within the HTGs or if an exception is required.

**Exceptions**
Pursuant to MPP §30-757.1(a)(3), exceptions to the HTGs are only allowed when necessary to enable a recipient to remain safely in his/her home. Exceptions only apply to time and do not allow the addition of any tasks not already identified under the service. Exceptions apply when the applicant’s/recipient’s total (not prorated) need for a service is determined to require some time, but not the time specified within the HTG range. Due to the unique nature of FL Rank 2 (verbal reminding or encouragement without hands-on help), in which there is no authorized time in most cases, social workers are not required to document an exception when time is not authorized. The reasons for each exception shall be documented in the case file.

The regulations which set for the HTGs for each service category identify examples of common circumstances where an exception to the HTG may be necessary. However, these examples are not exhaustive lists, and each applicant/recipient’s specific circumstances must be assessed to determine whether an exception to the HTGs is necessary for him/her to remain safely in his/her home. Calculations may accompany exceptions, as needed, to justify the time authorized outside the HTGs. In such instances, calculations may factor in the time needed, as well as the frequency required. However, at their discretion, social workers may include only qualitative justification if calculations are not needed to justify the exception.

**Domestic and Related Services**
Social workers shall continue to assess the applicant’s/recipient’s household composition and living arrangement when assessing and authorizing time for all
Domestic and Related Services, in accordance with MPP §§30-763.3 – 30-763.322 and MPP §30-763.4.

Among the 12 HTG services, only Meal Preparation and Meal Clean-up may result in a prorated need. Social workers shall continue to assess the applicant's/recipient's individual need and consider when this need is met in common with other housemates who reside in the home (MPP §30-763.321 - .322). The other remaining ten HTG services fall under personal care, and therefore, proration does not apply to these services. See example three in the Examples section below.

**Alternative Resources**
Alternative Resources are IHSS-compensable supportive services, which may be available from other agencies or programs to meet the needs of the recipient, as assessed (MPP §30-763.61). Examples of Alternative Resources include, but are not limited to, adult or child day care centers, schools, community resource centers, Senior Centers, or respite centers [MPP §30-757.171(a)(2)]. Social workers shall continue to determine if Alternative Resources apply and subtract these hours from the applicant's/recipient's individual assessed need, as required by MPP §30-763.612.

**Age Appropriate Guidelines**
Additionally, the Age Appropriate Guidelines and extraordinary need should continue to be considered in determining the appropriate FI rank and time needed to perform each service in minor-applicant/recipient cases. See example one in the Examples section below.

**Revised Annotated Assessment Criteria (Attachment B)**
In consultation with counties, CDSS revised the AAC to provide social workers with a more streamlined tool to assist in the completion of assessments. CDSS consolidated the questions to allow for increased applicability to the interview process and updated the observations prompts for each service category. Additionally, CDSS provided sample case documentation in each specific FI rank within all service categories to assist counties in capturing the appropriate justification for FI rankings and time authorized, as well as to ensure consistency in overall case documentation. This revised AAC is in alignment with current regulations and supersedes the previous version released in All-County Letter (ACL) No. 06-34.

**Case Documentation in the Case Management, Information, and Payrolling System**

*General Case Documentation*
The basis of need for all services must be documented in Case Management, Information, and Payrolling System (CMIPS). This documentation must include the reason for assigning a specific FI rank for each service needed, and the justification for the rank should include a description of the applicant's/recipient's functional abilities/limitations. Additionally, the documentation must also include any applicable
special needs and/or unique circumstances that further impair or facilitate the applicant's/recipient's ability to perform certain tasks within each service category. The social worker should ensure there is adequate justification to explain the assigned FI rankings and authorized time.

**Hourly Task Guideline Exception Documentation**

Documentation must also include the basis for an HTG exception when one is necessary to meet the applicant's/recipient's needs. Information entered in the “Comments” field on the CMIPS Service Type Details Screen is limited to only HTG exception language (see below example). Effective December 15, 2017, the character limit for this field will expand to 1,000 characters. All other assessment and authorization documentation should be included in the CMIPS Assessment Narrative.

**SERVICE EVIDENCE**

**Service Type Details**

**TRANSFER: EXCEPTION LANGUAGE FOR FI RANK 3**

![Service Type Details Screen](image)

**Entering Time into Service Type Details Screen**

Social workers only need to enter the total weekly time assessed in each service category with a corresponding HTG on the CMIPS Service Type Details Screen. However, tasks can be added on a weekly or daily basis, or a combination of the two approaches.

For example, in the service categories of Preparation of Meals and Meal Clean-up, social workers may authorize hours in a variety of ways. Some social workers may use total weekly hours or daily hours, while others may break down each meal with time. Conversely, some social workers may use dinner to assign the weekly hours, and then indicate in the Assessment Narrative that time authorized is to prepare all meals during a day or within the week. Using a weekly time can effectively account for all meal preparation during the week; however, to help determine time, social workers can use the individual tasks in breakfast, lunch, and dinner.
**Functional Index Rank 1 and Case Management, Information, and Payrolling System Documentation**

If an applicant/recipient does not have a need for assistance in a service category, the social worker shall document this information in CMIPS by describing the applicant’s/recipient’s statements and/or the observations made by the social worker, and indicate an FI rank of 1. Social workers may input additional case notes outside of the Assessment Narrative in the case file, as needed. Additional details will be forthcoming regarding any changes to CMIPS.

**Additional Assessment Clarifications/Tools**

To assist social workers with these assessment clarifications, CDSS developed an *IHSS Social Worker Assessment Field Handbook* (see Attachment C) containing the following new and/or updated tools to help facilitate uniform assessments:

1. Steps to Completing the IHSS Needs Assessment;
2. HTGs Table;
3. IHSS Assessment Narrative Tool; and
4. FI Ranking/HTGs Quick Reference Tool.

**Steps to Completing the In-Home Supportive Services Needs Assessment**

This new tool was adapted from a tool used by Sacramento County and is intended to assist social workers in recognizing the appropriate steps needed to complete an IHSS needs assessment. The tool is intended to assist the social worker in preparing for the home visit, completing a thorough assessment, assigning FI rankings, determining authorized service hours using the HTGs, properly capturing case documentation, and ensuring the necessary program forms are filled out and placed in the case file.

**Hourly Task Guidelines Table**

This new tool was adapted from a tool used by San Joaquin County. It provides a one-page reference table of the HTGs and contains a middle range to assist social workers in determining where in the HTG range they are authorizing time. Although the social worker should not authorize time based on TPT, the social worker may still need to explore frequency and duration of tasks to determine where in the HTG range the applicants/recipient needs fall.

To guide in determining where within the range an applicant’s/recipient’s needs fall and to properly assign time, consider the following ranges as indicated on the tool:

1. Low – less time needed than typical based on the applicant’s/recipient’s functional abilities/limitations within the range of that rank in a service category.
2. Middle – typical time needed (i.e., average level of need for assistance) based on the applicant’s/recipient’s functional abilities/limitations within the range of that rank in a service category.
3. High – more time needed than typical based on the applicant’s/recipient’s functional abilities/limitations within the range of that rank in a service category.
Furthermore, current regulations define the HTGs in decimal format, e.g., 1.50 hours. To align service assessments/authorizations with CMIPS data entry, CDSS re-formatted the time allocations in the assessment tools to hours:minutes. This change in format does not contradict current program regulations and is intended to reduce confusion regarding the entry of time into CMIPS [MPP §§30-757.11 – 30.757.14(k)].

**In-Home Supportive Services Assessment Narrative Tool**

This new tool was adapted from a tool used by Los Angeles County and provides a uniform case narrative template for social workers to record case documentation, following the completion of an intake assessment and/or annual reassessment. The tool contains the following sections: 1) Case Demographics and Social Worker Details; 2) General Information; 3) Medical Information; 4) Blindness/Visual Impairment; 5) Social Worker Observations (Observed and Reported); 6) Services Assessment (including Domestic Services, Related Services, Personal Care, Other Services); 7) Protective Supervision; 8) Alternative Resources; 9) Critical Incidents; 10) Additional Information; and 11) State Forms Reviewed/Discussed/Provided to Recipient. While the tool is not required, it does assist social workers in ensuring comprehensive case documentation practices.

The fillable version of this tool is available on CDSS’ website at: [http://www.cdss.ca.gov/inforresources/IHSS/Training-Academy](http://www.cdss.ca.gov/inforresources/IHSS/Training-Academy). Social workers may use the information from this tool for documentation purposes.

**Functional Index Ranking/Hourly Task Guidelines Quick Reference Tool**

CDSS updated this tool to reflect the same tasks and time consideration factors in MPP §30-757 and further expanded the sample exception language to include additional justification language. Such language was adapted from San Bernardino County. This optional assessment tool can be utilized in applying the regulations and replaces the version that was issued with ACL No. 06-34.

**Examples**

The below examples illustrate the clarified assessment process and are intended to provide guidance in assessing a specific service category, assigning the FI ranking, and authorizing time within or outside the HTG ranges. These examples provide sample authorization of hours based on a hypothetical recipient's individual level of need for the appropriate rank. They are not definitive standards.

**Example 1: 12-year-old male recipient**

- Requires a lot of help with toileting needs due to poor motor skills and muscle contractures, and often wears diapers.
- Can urinate by himself on occasion when not wearing diapers.

<table>
<thead>
<tr>
<th>Service Task</th>
<th>Bowel &amp; Bladder Care</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Functional Index Ranking</strong></td>
<td>4</td>
</tr>
<tr>
<td><strong>Special Needs/Circumstances</strong></td>
<td>None</td>
</tr>
</tbody>
</table>
### HTG Range

<table>
<thead>
<tr>
<th>Low</th>
<th>2:55</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mid</td>
<td>4:23</td>
</tr>
<tr>
<td>High</td>
<td>5:50</td>
</tr>
</tbody>
</table>

### Age Appropriate Guidelines
Considered – 12-year-old child should be able to perform toileting needs independently.

### Time Authorized
4:23 hours/week typical need, authorized at the middle of the range.

### Sample Case Documentation
Due to poor motor skills and muscle contractures, recipient requires a lot of help with toileting needs and often wears diapers. On occasion when not wearing diapers, recipient urinate by himself. No special needs/circumstances apply.

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**Example 2: 45-year-old female recipient**
- Requires complete assistance with selecting and putting clothes on/off, as well as socks and shoes due to global paralysis.

<table>
<thead>
<tr>
<th>Service Task</th>
<th>Dressing</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional Index Ranking</td>
<td>5</td>
</tr>
<tr>
<td>Special Needs/Circumstances</td>
<td>Frequently soils clothing from bowel and bladder accidents due to incontinence and requires frequent daily clothing changes.</td>
</tr>
</tbody>
</table>
| HTG Range      | Low – 1:54  
                 | Mid – 2:42  
                 | High – 3:30 |
| Time Authorized | 3:30 hours/week high need, authorized at the high end of the range, plus additional clothing changes, 2x/daily at 10 minutes each change = 10 min x 2 x 7 days/week = 2:20 hours/week = 5:50 hours/week TOTAL, authorized at above the range. |
| Exception High HTG | Time authorized at above-HTG due to recipient’s special needs. |
| Sample Case Documentation | Due to global paralysis, recipient is unable to select and put on/take off clothes, including socks and shoes. She is also incontinent and requires additional clothing changes to remove soiled clothing. Due to special needs resulting in additional clothing changes, additional time granted above the HTG. |

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**Example 3: 57-year-old male recipient**
- Requires a lot of help with meals, especially lunch and dinner, due to poor vision and balance. Can make toast for breakfast.
<table>
<thead>
<tr>
<th>Service Task</th>
<th>Preparation of Meals</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional Index Ranking</td>
<td>4</td>
</tr>
<tr>
<td>Special Needs/Circumstances</td>
<td>None</td>
</tr>
<tr>
<td>HTG Range</td>
<td>Low – 5:15</td>
</tr>
<tr>
<td></td>
<td>Mid – 6:08</td>
</tr>
<tr>
<td></td>
<td>High – 7:00</td>
</tr>
<tr>
<td>Proration</td>
<td>Resides with daughter/CP who shares meals divided by 2.</td>
</tr>
<tr>
<td>Time Authorized</td>
<td>6:08 hours/week typical need, authorized at the middle of the range and prorated by 2 = 3:04 hours/week.</td>
</tr>
<tr>
<td>Sample Case Documentation</td>
<td>Recipient is unable to cook his meals due to poor vision and balance, but states that he enjoys a light breakfast and can make toast each morning. Recipient also states that he lives with his daughter who cooks and shares all their other meals (lunch and dinner). Recipient’s needs are met in common with daughter so the total time authorized is prorated by 2.</td>
</tr>
</tbody>
</table>

**Example 4: 68-year-old female recipient**

- Requires help each day with getting in/out of the tub and turning faucet on/off due to weakness in hands and unsteady gait/fall risk.
- Once seated in shower chair, cannot wash lower extremities due to hip pain.
- Needs occasional help some days with oral hygiene due to general fatigue.
- Can perform her own oral hygiene on certain days and overall grooming.

<table>
<thead>
<tr>
<th>Service Task</th>
<th>Bathing, Oral Hygiene, and Grooming</th>
</tr>
</thead>
<tbody>
<tr>
<td>Functional Index Ranking</td>
<td>4</td>
</tr>
<tr>
<td>Special Needs/Circumstances</td>
<td>Needs occasional help some days with oral hygiene due to general fatigue.</td>
</tr>
<tr>
<td>HTG Range</td>
<td>Low – 2:21</td>
</tr>
<tr>
<td></td>
<td>Middle – 3:13</td>
</tr>
<tr>
<td></td>
<td>High – 4:05</td>
</tr>
<tr>
<td>Time Authorized</td>
<td>3:25 hours/week typical need, with increased adjustment for special needs, authorized between the middle and high ranges.</td>
</tr>
</tbody>
</table>
Sample Case Documentation
Due to weakness in hands and unsteady gait/fall risk, recipient needs help each day with getting in/out of the tub and turning faucet on/off. Once she is seated in her shower chair, she can bathe herself but needs assistance washing her lower extremities due to hip pain. Although she can perform her own oral hygiene and overall grooming, she needs help on some days with oral hygiene due to general fatigue.

State Hearings
In addition to ensuring that applicants/recipient understand how FI rankings and HTGs are utilized in the assessment process, social workers should inform applicants/recipient of their right to file a state hearing during the home visit as required by MPP §22-070. Pursuant to MPP §22-004.211, county agencies shall assist the claimant in filing a request for a state hearing, as needed. Following the issuance of the NOA and as indicated on the back of the notice, applicants/recipient have the right to ask for a case conference with the county to discuss the action prior to requesting a hearing within the allowable ninety-day timeframe to file for a state hearing.

Counties may conduct these case conferences in-person, by telephone, or through other means at the county’s discretion. In addition, social workers should review all program services as described on the back of the NOA with applicants/recipient at the assessment so they understand what services are available and how the FI rankings and HTGs have been applied to their case. Social workers must work with applicants/recipient to resolve case disputes at the lowest level possible.

NEXT STEPS
Immediately following the date of issuance of this letter, State QA Monitoring will review cases with a greater focus on the documentation of FI rankings, including information about the recipient’s functional abilities and limitations, and the appropriate application of the guidelines to the 12 HTG services. An increased emphasis will also be placed on the proper use of HTG exception language and overall case documentation. Commencing fiscal year 2018-19, and thereafter, State QA Monitoring will review cases and determine findings in accordance with these requirements for all cases assessed July 1, 2018, and later. State QA Monitoring staff will also provide additional technical assistance and guidance, as needed, during county visits in the coming year.

Additionally, the IHSS Training Academy (IHSSTA) updated its core training curriculum in the IHSS 101 and Comprehensive Assessment Concepts modules to reinforce the requirements outlined in this letter. CDSS has delivered six Training-for-Trainers (T4T) sessions statewide commencing October 2017 and will continue to deliver an additional four sessions through December 2017. The T4T training schedule was released on
September 27, 2017 and is available at the following CDSS’ IHSSTA website: [http://www.cdss.ca.gov/inforesources/IHSS/Training-Academy](http://www.cdss.ca.gov/inforesources/IHSS/Training-Academy).

These T4T trainings are intended for county managers, supervisors, and trainers, to equip counties with the necessary toolkits to train their program staff on the clarified assessment process. The training curriculum is now available under the *Assessment Clarifications* module on the IHSSTA website. An e-Learning training option will also be made available to supplement the T4T trainings and will be accessible by all program staff in February 2018 on the IHSSTA website.

If you have any questions or comments regarding the contents of this letter, please contact the CDSS, Adult Programs Policy and Quality Assurance Branch, Training and Quality Assurance Bureau, Training and Development Unit at (916) 651-3494, or via email at: [IHSS-Training@dss.ca.gov](mailto:IHSS-Training@dss.ca.gov).

Sincerely,

*Original Document Signed By:*

DEBBI THOMSON  
Deputy Director  
Adult Programs Division

Attachments

c: CWDA