

<b>Service Name</b>	Community Liaison
<b>Service Number</b>	A-4
<b>Service Category</b>	Access
<b>Service Definition</b>	Assistance to individuals in finding and working with appropriate county based human service providers that can meet their needs which may include; information-giving (e.g., listing the providers of a particular service category so an individual may make their own contact directly); group presentations; referral (making contact with a particular provider on behalf of an individual); advocacy intervention (negotiating with a service provider on behalf of a client); and follow-up contacts with clients to ensure services have been provided and have met the respective service need.
<b>Unit of Service</b>	Provision of one hour of component information and referral (I&A) functions (Note: newsletters and media spots are encouraged but are not to be counted as information-giving units of service).

#### Minimum Standards

1. Each program shall have a resource file, which is current that includes a listing of human service agencies, services available, pertinent information as to resources and ability to accept new clients and eligibility requirements. The program shall be able to provide adequate information about community resources and agencies to all participants, so they may make their own contact directly.
2. Each program located in areas where non-English or limited English-speaking older persons are concentrated shall have bilingual personnel available or have the capacity to acquire interpretation services. In addition, each program must have the capacity to serve hearing impaired persons and visually impaired persons in a manner appropriate to their needs, such as through the Michigan Relay center.
3. All providers are required to offer services in the home and by phone. Where walk-in service is available, there shall be adequate space to ensure comfort and confidentiality to clientele during intake and interviewing. If AAA 1-B sends a referral, an in-home/person wellness check is required to be fulfilled.
4. Each program shall maintain records (for three (3) years or until audit has been closed) of the nature of calls received/persons served, the agencies and/or organizations to which referrals are made and the service for which referrals made, the results of follow-up contacts, and any client files maintained. Such information regarding service transactions shall be reported to the AAA upon request for monitoring and/or planning purposes.

5. A follow-up contact shall be made on all referrals, whether services are negotiated or not, within ten working days to determine whether services were received, the identified need met, and client satisfaction. Follow-up contacts are not required for information-giving only contacts.
6. Each program must determine the quality of services provided, through a sampling of no less than 10% of clients, at least annually.
7. Each program shall demonstrate effective linkages with agencies providing long-term care support services within the program area (i.e., case coordination and support, care management, and MI CHOICE waiver programs).
8. Funded providers, responsible for the entire designated county, must have the capacity to:
  - Provide training to staff
  - Develop/maintain database
  - Manage all aspects of program
9. At least one (1) Community Liaison from each contracted organization shall be certified as a Medicare/Medicaid Assistance Program (MMAP) Counselor.
  - Certified MMAP Counselors must meet reporting requirements developed by the state office.
  - Certified MMAP Counselors must participate in relevant MMAP training to maintain certification as required by the state office.
10. Each program is encouraged to seek Community Resource Specialist (CRS) certificates from the Alliance for Information and Referral Systems (AIRS) for individual I&A employees and volunteers.