

Time and Task Reporting for Dementia Care Specialists

The guidance contained within this document is only meant to be utilized by dementia care specialists (DCSs) and Tribal DCSs. All other ADRC and Tribal staff who complete 100% time and task reporting should refer to the Time and Task Reporting section of the ADRC Operations Manual ([P-03062-10](#)).

DCSs should utilize categories 1–5 and category 6 when working directly with or on behalf of a customer. Time spent providing or attending marketing, outreach, or training and/or working with groups or committees to increase the community’s knowledge about the **ADRC’s or Tribal agency’s programs and services** that are available to assist community members, including those impacted by dementia, should be captured in category 1. When participating in these activities to increase community awareness **specifically about dementia**, time should be captured in the “other programs” category, which has been renamed for use by the DCSs. Paid time off should be recorded in category 8b, and compensatory time should be recorded in the “Comp Taken” column.

Category 1—Medical Services Administration

DCSs should use this category when providing general information about Medicaid or Medicaid-related programs (MRP) and services, including when information about Medicaid or Medicaid-related programs is provided during an outreach event. DCSs should also select this category when making a referral on behalf of a customer and/or caregiver to other agency staff for assistance with eligibility for Medicaid and MRPs (including referrals to ADRC specialists, Tribal ADRSs, and benefit specialists). Keep in mind that this topic needs to be the greater portion of a 15-minute unit (at least 7.5 minutes in duration).

Examples of Medicaid and MRPs include any program listed in [Medicaid in Wisconsin: A to Z \(P-02383\)](#), such as:

- Medicaid for the Elderly, Blind, or Disabled (EBD).
- Family Care.
- Family Care Partnership.
- Institutional Medicaid.
- Include, Respect, I Self-Direct (IRIS).
- Medicare Part D (with dual eligibility).

Applies to:

DCS

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- Program of All-Inclusive Care for the Elderly (PACE).
- Supplemental Security Income (SSI) (if discussed as part of Medicaid eligibility).
- SSI-related Medicaid (Medicaid with a deductible).

Discussion about these programs may be for the purpose of:

- **Education:** Providing information to a customer or the public (for example, during community outreach) about Medicaid or an MRP. Referring a customer to other agency staff for assistance with Medicaid or MRP eligibility.
- **Outreach and marketing:** Distributing or presenting Medicaid outreach materials, such as brochures, handouts, newsletters, or other documentation. Marketing activities specific to the ADRC and Tribal nation.

Category 2—Medicaid Services Coordination

DCSs should select this category when having a discussion with a customer and/or caregiver about individual services such as home care, assisted living facilities, or housekeeping outside the context of Medicaid or an MRP. Select 2A when assisting a customer who is a Medicaid recipient and select 2B when assisting a customer who is not a Medicaid recipient or whose eligibility status is unknown (including customers who may be considering private-pay services). Staff should also select 2B if you are unsure about a customer's Medicaid status and when, during a group conversation or presentation, there is at least one individual who may not be enrolled in Medicaid. Any service that can be covered by Medicaid or an MRP, regardless of current eligibility status, can be recorded in this category.

Examples of Medicaid-related services that qualify to be recorded in this category include, but are not limited to:

- Adult day care.
- Assisted living facilities (CBRFs, RCACs, AFHs).
- Durable medical equipment.
- Home-delivered meal (HDM) program.
- Hospice care.
- Mental health and substance use services.
- Personal care worker (PCW) services.
- Personal emergency response system (PERS).
- Physician, dentist, or other primary care provider.
- Services covered by ForwardHealth card.
- Skilled nursing facilities (nursing homes, ICF-I/DD, and state centers).
- Supportive home care (SHC).

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- Therapies (for example, occupational, physical, speech and language).
- Transportation.
- Other services that may be covered by Medicaid or through an MRP.

This category may also include:

- **Care consultations or meetings with family care partners and/or professional care providers:** Participating in care meetings to create and advance a customer's need for services.
- **Disease control and prevention:** Conducting prevention programs or sharing educational information with customers aimed at disease control or prevention, such as Living Healthy with Chronic Disease and Stepping On. When providing a prevention program to a group and all customers are Medicaid recipients, then time should be recorded in 2A. However, if one or more customers in the group do not receive Medicaid, or Medicaid status is unknown, then time is recorded in 2B. (Dementia-specific programs ([P-02009 18-03](#)) are Category 9.)
- **Follow-up:** Performing follow-up activities to ensure a customer is connected with the services they need.
- **Memory screens and other early diagnostic activities:** Screening of customers to identify dementia or other memory impairment and referring appropriately. This also includes any conversations leading to a referral to appropriate diagnostic providers for the early diagnosis and treatment of a serious health problem. An example of this would be using an assessment tool to identify symptoms of depression, which is not only a risk factor for dementia but also shares similar symptoms. These activities may lead to a service referral.
- **Provider search:** Assisting a customer to find service providers to meet their needs.
- **Paperwork, data entry, and reporting:** Completing paperwork, data entry, and reporting related to activities listed in this section.
- **Resource directory:** When the DCS is researching and entering service information into the resource directory or providing this information to the local resource directory lead. Time recorded in 2A when services can be covered by Medicaid and 2B when not covered by Medicaid.
- **Short-term service coordination:** Assisting and coordinating Medicaid-related services for customers who do not receive care management from another source.
- **Translation:** Arranging translation services to provide information about Medicaid-related services.
- **Transportation:** Providing information about transportation services.
- **Travel:** Traveling to provide information about Medicaid-related services.

Category 3—Functional Screen

This category is not applicable to DCS role and no time should be captured in this category.

Category 4—Data Gathering

This category is used during the data gathering process that is part of a Medicaid application. DCSs are not generally involved in this process; therefore, this category is not applicable to the DCS role.

Category 5—Non-Allowable Medicaid Services Activities

This category should be selected when DCSs **have discussions about** services or programs that are unrelated to Medicaid or an MRP. This includes discussions about DCS programs and services, such as memory cafes, support groups, or other caregiver programs. Time spent **facilitating** the group activity should be recorded in Category 9—DCS Agency, Community and Caregiver Group Activity.

Examples of these topics include:

- **Adult protective services (APS) or elder abuse (EA):** Referring a customer for APS or EA services.
- **Advocacy:** Providing referrals to advocacy organizations or advocacy unrelated to Medicaid.
- **Caregiver program:** Providing information on caregiving programs, such as Alzheimer's Family and Caregiver Support Program (AFCSP) or National Family Caregiver Support Program (NFCSP), or providing assistance to complete and submit an initial application for AFCSP or NFCSP.
- **Food:** Providing information about food and nutrition resources including FoodShare program, food pantries, farmers market vouchers, and emergency food.
- **General information:** Providing service information about non-Medicaid services (for example, housing options, evictions, rental assistance, energy assistance, pet care, and telephone subsidies like Safelink and Lifeline programs.)
- **Guardianship:** Providing information about guardianship.
- **Health insurance marketplace:** Providing information, assistance, or referral.
- **Legal questions:** Responding to non-Medicaid-related legal inquiries (for example, estate planning, supported decision-making, and protective placements).
- **Loan closets:** Sharing information about, gathering equipment, completing paperwork for usage of items in the loan closet.
- **Medical directives:** Providing information about health care or financial powers of attorney or living wills.

- **Medicare:** Providing information about Medicare.
- **Retired and Senior Volunteer Program (RSVP):** Providing information or referral to the RSVP or similar programs.
- **Senior centers:** Providing information about senior centers and non-Medicaid programs they sponsor.
- **Veteran benefits:** Providing information or assistance with Department of Veterans Affairs (VA) benefits.

Category 6—Case Identifier

A customer's first and last initials or "anonymous" must be entered whenever recording time that involved interactions with or on behalf of a specific customer or organization. For DCSs, customer initials or "anonymous" will always be entered into category 6 when time is captured in categories 1, 2, 3, 4, or 5. For marketing and outreach activities that inform the general public about the resources and services that are available from the local ADRC, use the case identifier "MO."

Category 8A—General Administration

This category is not applicable to DCSs.

Category 8B—Paid Time Off (PTO)

This category should be used to report time when an employee is not working but is receiving compensation through their employer. The exception to this is if the time is compensatory, or "comp," time. Then it should be recorded in the column to the right of category 8B.

- Holidays or paid time off
- Sick days
- Personal or discretionary days
- Vacation time

DCS Agency, Community, and Caregiver Group Activity

This column was specifically identified to be used by a DCS or Tribal DCS to record many of the activities specific to the DCS role. This includes many of the activities where a DCS is not working with or on behalf of a specific customer.

- **Agency collaboration:** Working with other agencies to improve dementia awareness.

Applies to:

DCS

Tribal DCS

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- **Committees, meetings, or planning groups:** Participating in committees, meetings, or planning groups aimed at improving access to services (for example, Dementia-Friendly Communities, health equity, and dementia or caregiver coalitions).
- **County- or employer-specific information:** Learning about procedures for employment, employer-specific insurance or benefit fairs, annual trainings such as discrimination and harassment prevention, workplace violence and threats, or confidentiality training.
- **Dementia resource materials:** Updating or writing materials for ADRC staff or the community.
- **Dementia-friendly business and/or community trainings:** Also often referred to as “purple angel” training.
- **Evidence-based and evidence-informed programs:** Use this section for planning, scheduling and providing evidence-based and evidence-informed programs that are specific to the DCS program such as Powerful Tools for Caregivers and Savvy Caregiver (refer to [P-02009 18-03 Evidence-Based Health Promotion Programs and Evidence-Informed Health Promotion Activities for Dementia Care Specialists](#) for the full list). If a DCS facilitates an evidence based or evidence informed program **not** on the DCS list (like Stepping on, Living Well with Chronic Conditions, etc.), that should be captured in Cat 2A/2B depending on the composition of the group.
- **General administrative duties:** Activities such as creating agendas or minutes, copying general resource materials, or gathering and providing data to boards.
- **Health care data:** Identifying and analyzing community gaps and/or unmet needs.
- **Memory screen fidelity checks:** Reviewing memory screens of ADRC staff for accuracy (shadowing memory screeners is captured in 2A and/or 2B).
- **Memory cafés:** Activities related to the development, planning and coordination of memory cafés.
- **Other dementia awareness outreach and marketing:** Developing, distributing, or presenting information about dementia in connection with any activity not previously described in another category, i.e. community film screenings, plays, or other event.
- **Paid breaks:** Time during the workday when a break is considered paid work time.
- **Programming:** Planning, scheduling, and implementing programs that help create dementia awareness and support (for example, book clubs, virtual dementia tours, dementia friendly communities, and caregiver support groups).
- **Quality improvement:** Participating in projects to improve ADRC processes. Regardless of the type of QI project, DCSs should capture time in this category.
- **Staff meetings:** Participating in employer- and/or county-specific meetings or participating in ADRC staff meetings (unless time is specific to another category, such as a customer-specific review).
- **Support groups:** Organizing or facilitating family, caregiver, or individual support groups.

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- **Training provided by DCS:** Planning, creating materials, scheduling, and providing training to ADRC or Tribal staff or to community members.
- **Training:** Attending trainings to help ADRC staff do their jobs better (for example, time and task reporting and motivational interviewing).
- **Travel:** Travel time to provide any of these activities.

Other Program Columns

Additional “Other” columns can be used to record time spent doing activities that are not a usual part of your role. This includes work with non-ADRC tasks as well. Columns should be labeled by the local ADRC and Tribal nation. It is okay to keep the same function (for example, dementia care specialist and Tribal DCS, split DCS/ADRC specialist, other duties) when reporting work in other program columns.

DCS split positions:

- DCS/caregiver coordinator
- DCS/prevention programs

Do not record unpaid time (for example, unpaid lunches, unpaid breaks, unpaid leave, or furlough days).