

Visitor Screen

| Questions | Indicators of Risk (Score) | Disputed Issue (*) | Evaluation Suggested (*) |
|---|----------------------------|--------------------|--------------------------|
| SECTION I. DEMOGRAPHIC INFORMATION FOR POTENTIALLY INCAPACITATED PERSON (PIP) | | | |
| Facts | | | |
| 1. What is the PIP's name: _____ | | | |
| 2. Does the PIP have a disability that would require accommodations when conducting this assessment? a. Yes i. If yes, what are those accommodations? b. No | | | |
| 3. Age: _____ | | | |
| 4. Race/Ethnicity: a. American Indian b. Asian/Pacific c. Black d. Caucasian e. Hispanic f. Unknown | | | |
| 5. Marital Status: a. Married b. Single c. Widow(er) d. Separated e. Divorced f. Unknown | | | |
| 6. Sex: a. Male b. Female c. Transgender | | | |
| 7. Education: Highest completed grade: _____ | | | |
| 8. Language: a. Primary Language: _____ b. Primary form of communication: _____ c. Ability to read: (Tell me a little about what you read? What are you reading currently?) i. Cannot read ii. Can read common signs iii. Can read simple stories iv. Can read adult newspaper stories d. Ability to write: (Do you like to write? Do you keep a journal, write emails, letters, or social media?) i. Cannot write ii. Can print or write own name iii. Can write simple sentences iv. Can write paragraphs | | | |

SECTION II. MENTAL STATUS

In the area of mental status, the visitor/GAL must summarize any problems or any assistance needed. Give a brief explanation if your interview elicits yes/no responses from the person interviewed. Use follow up questions to gather detail. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- Orientation of PIP's ability to identify, date, and location of interview
- Is there a dispute about PIP's capacity; is this at issue for the guardianship/conservatorship in all or some areas?
 - Are there evaluations that have been completed or are needed to clarify this?

Provide a summary of the PIP's mental status below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION III. CONSISTENCY OF CHOICES WITH VALUES, PATTERNS, AND PREFERENCES

In the area of consistency with values, patterns, and preferences, the visitor/GAL must summarize any problems or any assistance needed. Give a brief explanation if your interview elicits yes/no responses from the person interviewed. Use follow up questions to gather detail. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- Whether the PIP wants a guardian/conservator
- Where the PIP wants to live and why
- What makes life meaningful or good for the PIP
- What factors concern the PIP most about making decisions
- What religious or cultural beliefs need to be considered and how can they be addressed
- What does the PIP need and want

Provide a summary of the PIP's consistency with values, patterns, and preferences below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION IV. SELECTING HIS OR HER PLACE OF ABODE

In the area of selecting his/her place of abode, the visitor/GAL must summarize any problems or any assistance needed. Give a brief explanation if your interview elicits yes/no responses from the person interviewed. Use follow up questions to gather detail. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- To what extent does the PIP want assistance with choosing where he/she lives or securing a place to live
- Does the PIP like his/her current living situation
- Is the PIP interviewed in his/her home; describe the residence: what type (assisted living, group home, personal residence, etc.), address, whether owned/rented
- What is the stability of the PIP's living situation (frequent moves)
- Hazards within the PIP's home that could cause illness or injury (dirty dishes, fecal matter, accumulated garbage, narrow pathways, etc.)
- Indications of abuse/neglect to the PIP (self or from others)
- Any past/current homelessness or risk of homelessness
- Any plans to move

Provide a summary of the PIP's selection of abode below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION V. ARRANGING FOR HIS OR HER MEDICAL CARE

In the area of arranging for his/her medical care, the visitor/GAL must summarize any problems or any assistance needed. Give a brief explanation if your interview elicits yes/no responses from the person interviewed. Use follow up questions to gather detail. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- Whether PIP refuses medical services/treatment
 - Understands consequences for not doing so
 - Communicates need for medical care/treatment
 - In apparent need for medical services/treatment
- PIP takes medications, knows when and how to take them, and what they are for
 - Acquires and stores medications properly
 - Understands consequences of not being compliant with medication use, storage, etc.
 - Listing of medications, dosages, & schedule
 - Periodic medication reviews (how regularly)
- History of self-harm, violent behavior, or threats toward others
- Has a primary care physician and visits him/her on a regular basis
 - Ability to get to/from appointments (own or public transportation)
 - If own transportation, operates vehicle in a safe and legal manner
 - Availability of a physician's report (comprehensive or minimal/general)
 - Ability to perform Activities of Daily Living (ADL): bathing, toileting, dressing, eating, grooming, bathing
 - Physical/sensory impairments (visual, hearing, mobility, communication, etc.)
- Existence of major medical and/or psychiatric diagnoses
 - What are the diagnoses and how is treatment being sought; how does it impact diagnoses
 - Who are primary care physician, psychiatrist, therapist, social worker, etc.
- Does PIP have a current, valid ID (type, expiration date)
- Is PIP current with medical payments

Provide a summary of the PIP's arranging for medical care below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION VI. PROTECTING HIS OR HER PERSONAL EFFECTS

In the area of protecting his/her personal effects, the visitor/GAL must summarize any problems or any assistance needed Give a brief explanation if your interview elicits yes/no responses from the person interviewed. Use follow up questions to gather detail. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- To what extent PIP would like assistance with managing/maintaining personal property
- Who, if anyone, depends upon the PIP financially for living arrangements/benefits
 - What financial, living, and/or benefits arrangements
- Indications of abuse
 - Financial, emotional, physical, sexual
- Indications of isolation (self or someone else) from friends or family
 - Change in social activity
 - Community visibility (social, recreational, educational, occupational)

Provide a summary of the PIP's ability to protect personal effects below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION VII. GIVING NECESSARY CONSENTS, APPROVALS, OR RELEASES

In the area of giving necessary consents, approvals, or releases, the visitor/GAL must summarize any problems or any assistance needed. Give a brief explanation if your interview elicits yes/no responses from the person interviewed. Use follow up questions to gather detail. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- To what extent PIP would like someone else to make decisions for him/her
- PIP appears able to provide informed consent in some aspects of his/her life
- Willingness to speak to visitor/GAL

Provide a summary of the PIP's ability to give necessary consents, approvals, or releases below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION VIII. APPROPRIATE HABILITATING SERVICES AND ARRANGING FOR TRAINING, EDUCATION

In the area of appropriate habilitating services and arranging for training and education, the visitor/GAL must summarize any problems or any assistance needed. Give a brief explanation if your interview elicits yes/no responses from the person interviewed. Use follow up questions to gather detail. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- To what extent would PIP like someone to make decisions about his/her care, comfort & needs
- To what extent would PIP like someone to make arrangements for needed training/education
- Danger awareness and appropriate action
 - Preventing injury/death
 - Seeking shelter
 - Traveling in his/her community
 - Strangers
 - Threats/abuse
 - Communicating hunger
 - Identifying food/non-food items
 - Malnutrition and illness
 - Appropriate clothing for weather & comfort
 - Seeking treatment for injury
 - Using public transportation
 - How to contact others if lost/stranded
 - Use and abuse of prescriptions
 - Drug and alcohol use and abuse
- Relationships among people important to the PIP (awareness & reaction to conflict as well)
- If living with family members, whether respite services are utilized & how often
- Services & supports in place for PIP to maximize potential and mitigate effects of his/her condition
- Ability to bathe, dress, feed self, use the toilet by himself/herself, groom
 - ADL evaluation performed & when

Provide a summary of the PIP's ability to acquire appropriate habilitating services and arrange for training and education below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION IX. APPLYING FOR PRIVATE OR GOVERNMENTAL BENEFITS

In the area of applying for private or governmental benefits to which he or she may be entitled, summarize any problems regarding skills, opportunity to perform skills, or decision-making ability, as well as additional assistance needed. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- Refuses private/governmental benefits
- Denial of private/governmental benefits
- Eligible for:
 - Social Security
 - Medicare
 - Medicaid
 - SSI
 - SNAP
- Needs assistance applying for benefits (above or additional)

Provide a summary of the PIP's ability to apply for private or governmental benefits education below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION X. INSTITUTING PROCEEDINGS

In the area of instituting proceedings to compel any person liable for the support of the PIP to support him or her if no conservator has been appointed for the PIP, summarize any problems regarding skills, opportunity to perform skills, or decision-making ability, as well as additional assistance needed. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- Ability to request services of a lawyer, communicate preferences and/or wishes regarding legal instructions, documents, and services
- Whether the proposed ward/protected person objects to guardianship and/or conservatorship
- Anyone else who may be appropriate and willing to serve as guardian/conservator with support
 - Will anyone else be cross-petitioning for guardianship/conservatorship
- APS or police involvement with family members or a ward/protected person's residence

Provide a summary of the PIP's ability to initiate proceedings below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION XI. ENTERING INTO CONTRACTUAL AGREEMENTS

In the area of entering into contractual agreements, summarize any problems regarding skills, opportunity to perform skills, or decision-making ability, as well as additional assistance needed. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- To what extent PIP would like someone to help with contract responsibility for PIP
- Ability of PIP to identify & resist financial exploitation
- Whether PIP understands concept of a will
 - Whether there were any changes to the will within the past 6 months
- Whether PIP understands concept of selling real or personal property
- PIP's understanding of the purpose of insurance
 - PIP's ability to use sound judgement as to the type and amount of insurance needed for the circumstances
 - PIP's ability to insure property

Provide a summary of the PIP's ability to enter into contractual agreements below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION XII. RECEIVING MONEY AND TANGIBLE PROPERTY

In the area of receiving money and tangible property deliverable to the PIP, summarize any problems regarding skills, opportunity to perform skills, or decision-making ability, as well as additional assistance needed. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- To what extent PIP would like someone to help with paying debts
- To what extent PIP would like someone to help manage PIP's estate (money, assets, benefits, etc.)
- PIP's knowledge about money (value, proper change)
- PIP's knowledge about benefits (what are they and when are they received)
 - Ability to manage benefits
- PIP's ability to safely protect income
 - Knowledge of income & when received
- PIP's ability to identify real & personal property & estimate its value
- PIP's assets:
 - Annuities
 - Bonds
 - Checking account
 - Insurance (types, amounts)
 - Savings account
 - Stocks
 - Trust fund
 - Social Security benefits
 - Other
- Need for financial management assistance
- Employment (current, past); unemployment (reasons, replacement income, etc.)

Provide a summary of the PIP's ability to receive money and tangible property below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION XIII. APPLYING SUCH MONEY AND PROPERTY TO HIS OR HER EXPENSES

In the area of applying such money and property to his/her expenses for room and board, summarize any problems regarding skills, opportunity to perform skills, or decision-making ability, as well as additional assistance needed. Include any recommendations from the visitor/GAL as to the impact of a guardianship/conservatorship.

Gather information about the following indicators:

- To what extent PIP wants help with paying for support and maintenance
- PIP's ability to protect and independently spend small amounts of money (\$5/week, \$50/week)
- PIP's ability to budget money
 - Exercise judgement about budgeting
 - Understand concept of a debt
 - Ability to receive & pay bills
 - Understanding of the concept of a gift of money & how much he/she can afford to give

Provide a summary of the PIP's ability to apply money and property to his/her expenses below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION XIV. RECOMMENDATIONS AS TO OTHER APPROPRIATE CANDIDATES

Gather information about the following indicators:

- Existence of power of attorney or durable power of attorney
 - When created, who is named & relationship to PIP, areas of decision-making, when/if changed, person's willingness to serve as guardian/conservator with support
- Existence of health care power of attorney
 - When created, who is named & relationship to PIP, areas of decision-making, when/if changed, person's willingness to serve as guardian/conservator with support
- Existence of advance directives
 - What are they, when created, where located, are others aware of its existence, when/if changed
- Existence of a will
 - When created, when/if changed, anyone named within will who would be willing to serve as guardian/conservator with support
- Whether there is a relative with whom PIP has lived for more than 6 months prior to filing petition
 - Who, where do they live, how long have they lived with PIP, what's the relationship, would the relative be willing to serve as guardian/conservator with support
- Whether there are relationships between the PIP and others that could be fostered to lessen the need for guardianship/conservatorship
 - What individuals/relationships could be strengthened, what are supports needed to be in place for the person to consider a guardianship/conservatorship role
- Whether a caregiver or someone paying benefits to the PIP might have a suggestion for someone to serve as the PIP's guardian/conservator
 - Who is suggested, where do they live, what's relationship with PIP, length of relationship, willingness to assume role of guardian/conservator with support
- Whether proposed guardian/conservator has a history of:
 - Violent crimes, exploitation, abuse, neglect, sex abuse, felony convictions; recent or repetitive criminal behavior; history of DUI's or misdemeanors; current and/or history of alcohol or drug abuse
- Whether PIP has a spouse
 - Who, length of relationship, status of relationship, whether spouse would be willing to be guardian/conservator with support
- Whether PIP has adult children
 - How many, who, where they live, status of relationship, whether any would be willing to be guardian/conservator with support
- Whether PIP has any minor children
 - How many, who, where they live, status of relationship, how close to age of majority and, if close, willingness to be guardian/conservator with support
- Whether PIP is currently a guardian/conservator, power of attorney, or health care power of attorney for another person
- Any recommendations or observations regarding appropriate candidates for guardian/conservator for the PIP

Provide a summary of recommendations as to other appropriate candidates below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION XV. ANTICIPATED DURATION OF GUARDIANSHIP/CONSERVATORSHIP

Gather information about the following indicators:

- Whether PIP is in an institutional setting and is visited frequently
- Any problems with the PIP (any aspect of his/her life of concern)
- PIP's need for a skilled nursing facility
- Alternatives to guardianship/conservatorship that have been pursued for PIP
- Any changes to the PIP's condition in the past year
- Whether a limited guardianship might be appropriate
- Whether the PIP has previously had a guardian/conservator
 - If there's a current guardian/conservator, the cooperativeness of that person with the court visitor/GAL
 - Whether that person would recommend any changes as to the scope of the guardianship/conservatorship
 - Any additional comments/questions the current guardian/conservator raises

Provide a summary of anticipated duration of guardianship below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

SECTION XVI. LEGAL RIGHTS

Gather information about the following indicators:

- Whether PIP has and/or wants an attorney
- Whether PIP is planning to attend the hearing
- Whether PIP will need accommodations to attend the hearing (interpreter, accessibility, hearing aid, etc.)
- Whether PIP was provided notice of legal rights (ensure each of the following):
 - Notice (was it provided & how, understanding of); contents:
 - Right to request an attorney
 - Right to present evidence
 - Right to request limited guardianship
 - Notification about how to contact the temporary guardian if a temporary guardian is appointed
 - Right to compel attendance of witnesses
 - Right to cross-examine witnesses, including a court-appointed physician
 - Right to appeal any final order
 - Right to request a hearing closed to the public
 - Whether PIP wishes to exercise any of his/her rights as listed above (which ones)

Provide a summary of legal rights information below. If there are disputed issues, describe what they are and the informants taking differing positions.

Facts:

Analysis:

Additional information (if applicable):

Evaluation needed (explain):

Disputed issue (explain):

Section XVII. Visitor/GAL Information

Name of Investigator:
Title & Credentials of Visitor/GAL:
Employer of Investigator:
Address:
Phone:
Email:
Signature:
To the best of my knowledge, I swear to affirm the truth and correctness of this evaluation screening.
Signed: _____ Date: _____

Informant #1 Information:

Name:
Date/Time
Address:
Phone:
Email:
Employer:
Relationship to potential incapacitated person (PIP): Self __ Friend __ Relative __ (type) _____
Staff/Professional _____ (role)
Type of contact: Mail __ Phone __ Visit __ Other (explain) _____
Length of relationship: _____
Frequency of contact: Daily ____ Weekly (# of times/week) _____
Monthly (# of times/month) _____ Yearly (# of times/year) _____
Location/address of visit (May write "same" if same address as above):
Was anyone else present during the interview?
a. Yes
 i. Who was present and why?
 ii. What contributions did this/these person(s) make to the interview?
b. No

Informant #2 Information:

Name:
Date/Time
Address:
Phone:
Email:
Employer:
Relationship to potential incapacitated person (PIP): Self __ Friend __ Relative __ (type) _____
Staff/Professional _____ (role)
Type of contact: Mail __ Phone __ Visit __ Other (explain) _____
Length of relationship: _____
Frequency of contact: Daily ____ Weekly (# of times/week) _____
Monthly (# of times/month) _____ Yearly (# of times/year) _____
Location/address of visit (May write "same" if same address as above):
Was anyone else present during the interview?
a. Yes
 iii. Who was present and why?
 iv. What contributions did this/these person(s) make to the interview?
b. No

Informant #3 Information:

Name:
Date/Time
Address:
Phone:
Email:
Employer:
Relationship to potential incapacitated person (PIP): Self __ Friend __ Relative __ (type) _____
Staff/Professional _____ (role)
Type of contact: Mail __ Phone __ Visit __ Other (explain) _____
Length of relationship: _____
Frequency of contact: Daily ____ Weekly (# of times/week) _____
Monthly (# of times/month) _____ Yearly (# of times/year) _____
Location/address of visit (May write "same" if same address as above):
Was anyone else present during the interview?
a. Yes
 v. Who was present and why?
 vi. What contributions did this/these person(s) make to the interview?
b. No

Informant #4 Information:

Name:
Date/Time
Address:
Phone:
Email:
Employer:
Relationship to potential incapacitated person (PIP): Self __ Friend __ Relative __ (type) _____
Staff/Professional _____ (role)
Type of contact: Mail __ Phone __ Visit __ Other (explain) _____
Length of relationship: _____
Frequency of contact: Daily ____ Weekly (# of times/week) _____
Monthly (# of times/month) _____ Yearly (# of times/year) _____
Location/address of visit (May write "same" if same address as above):
Was anyone else present during the interview?
a. Yes
 vii. Who was present and why?
 viii. What contributions did this/these person(s) make to the interview?
b. No

Informant #5 Information:

Name:

Date/Time

Address:

Phone:

Email:

Employer:

Relationship to potential incapacitated person (PIP): Self __ Friend __ Relative __ (type) _____

Staff/Professional _____ (role)

Type of contact: Mail __ Phone __ Visit __ Other (explain) _____

Length of relationship: _____

Frequency of contact: Daily ____ Weekly (# of times/week) _____

Monthly (# of times/month) _____ Yearly (# of times/year) _____

Location/address of visit (May write "same" if same address as above):

Was anyone else present during the interview?

a. Yes

ix. Who was present and why?

x. What contributions did this/these person(s) make to the interview?

b. No

SECTION XVIII. CONFLICT OF INTEREST

1. Any qualified person may be appointed visitor of a proposed ward, except that it shall be unlawful for any owner, part owner, manager, administrator, or employee, or any spouse of an owner, part owner, manager, administrator, or employee of a nursing home, room and board home, convalescent home, group care home, or institution providing residential care to any person with a physical disability, with an intellectual disability, with an infirmity, or who is aged to be appointed visitor of any such person residing, being under care, receiving treatment, or being housed in any such home or institution within the State of Nebraska. LB 30-2624F

2. I disclose that I have real or potential conflicts in this matter. These conflicts or potential are described below:

SECTION XIX. SIGNATURE SECTION

A. Informant Signature

To the best of my knowledge, I swear to affirm the truth and correctness of this evaluation screening.

Signed: _____ Date: _____