

# How to Complete a Guardian of the Person Report



## 1. Open the report form

In the Upcoming & Overdue Reports section of your Dashboard, click on the Create Report icon for the correct Person report and incapacitated person (IP).

Case File No.	County	Caption	
OC-1107-2021	Centre	Guardianship of Witt, Donald,	2 (in 10 days) +
OC-1107-2021	Centre	Guardianship of Witt, Donald,	2 (in 10 days) +

## 3. Part I, #3:

### Report Period

Click on the **Report Type** dropdown and select the appropriate option.

**Tip** Only select 'Final Report' if your guardianship of the IP is coming to an end.

COURT OF COMMON PLEAS OF  
CENTRE COUNTY, PENNSYLVANIA  
ORPHANS' COURT DIVISION

Report of Guardian of the Person

Estate of Witt, Donald, an Incapacitated Person  
Date of Birth: 10/10/1941  
Case File No. OC-1107-2021  
DATE COURT APPOINTED YOU AS GUARDIAN: 10/5/2021

PART I. INTRODUCTION

1. Guardian Name(s)  
Guardian Name(s): Cameron Boggs

2. Is this a limited Guardianship?  
\* Limited Guardianship: No

3. Report Period  
\* Report Type: Report  
\* Report Period Start Date: 10/05/2021  
\* Report Period End Date: 10/04/2022

## 2. Part I, #1 & #2: Name of Guardian & Limited Guardianship

On the GTS – Report of Guardian of the Person screen, confirm that the information appearing under each of these questions is accurate.

**Tip** If any of the information that defaults is incorrect, contact the court where the case is filed before you proceed with the report.

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## 4. Part II, #1: IP's DOB

Verify or update the IP's date of birth.

**PART II. PERSONAL INFORMATION ABOUT THE INCAPACITATED PERSON**

**1. Incapacitated Person's date of birth**

Incapacitated Person's DOB: 10/10/1941

**2. Incapacitated Person's Current Residence**

\* Address Line 1: 341 Lincoln Ave.

Address Line 2:

\* City: Sandy Ridge

\* State: Pennsylvania

\* Zip Code: 16677

Facility Name (if any):

## 5. Part II, #2: IP's Residence

Verify or update the IP's current address.

## 6. Part II, #3: Type of Residence

Click the **Type of Residence/Facility** dropdown and identify the option that best describes the IP's current residence.

- If you choose 'Incapacitated Person's home', you must click on a second dropdown and select the type of home assistance the IP is receiving.

- If you choose 'Relative's home', you must enter the relative's name and relationship (i.e. Child, Sibling, etc.).

- If you choose, 'Group Home', 'Personal Care Boarding Home', 'Assisted Living Facility', or 'Nursing Home Facility', you must click on a second dropdown and specify if the IP is in a memory support facility.

- If you choose, 'Other', you must describe the residence or facility.

### Your Home

**3. Residence of the Incapacitated Person**

Type of Residence/Facility: Your home

### IP's Home

**3. Residence of the Incapacitated Person**

Type of Residence/Facility: Incapacitated Person's home

In-home Assistance Type: Part-time home health care aide

### Relative's Home

**3. Residence of the Incapacitated Person**

Type of Residence/Facility: Relative's home

\* Relative's Name: Cameron Boggs

\* Relationship: Grandson

### Personal Case Boarding, Assisted Living, Nursing Home

**3. Residence of the Incapacitated Person**

Type of Residence/Facility: Personal Care Boarding Home

\* Is this a Memory Support Facility?: Yes

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## 7. Part II, #4:

*Length of time at residence*

If known, enter the date in which the IP began living at the residence or facility identified in Step 5.

4. The Incapacitated Person has been in the residence noted in question 3 since

Residence Start: 2022

5. Has the Incapacitated Person moved during the Report Period?

Incapacitated Person Relocated: Yes

\* Relocation Date: 05/06/2022

\* Relocation Reason: IP can no longer live alone at their own I

\* Previous residence/address: 115 Maple Ave. Gettysburg, PA 17325

## 8. Part II, #5: Did the IP move?

Click on the dropdown and select 'Yes' or 'No' to specify if the IP moved during the reporting period.

If you selected 'No', continue to Step 9.

If you selected 'Yes', enter the date of the move, the reason(s) for the move, and the IP's previous address.

## 9. Part III, #1, Medical Professionals?

If the IP was seen by a medical professional during the reporting period, continue to Step 10.

If the IP was not seen by any medical professionals during the reporting period, or this information is unavailable, proceed to Step 14.

PART III. MEDICAL INFORMATION

1. List the medical professionals who have seen the Incapacitated Person during the Report Period

Medical Professional Type	Description	Name	
Ear Doctor		Dr. Arianna Bloom	
Medical Doctor		Dr. Ronald Lefkowitz	

## 10. Part III, #1 (cont.): Click the Add Medical Professionals icon

## 11. Part III, #1 (cont.): Medical Professional Type

Click on the **Medical Professional Type** dropdown and select the option that best describes the type of professional that the IP visited.

## 13. Part III, #1 (cont.): Add other medical professionals

Repeat Steps 10-12 for any other medical professionals the IP visited.

## 12. Part III, #1 (cont.): Name

Click in the **Name** field and enter the name of the doctor or medical professional.

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## 14. Part III, #2:

### *Medical/ psychiatric problems*

List the major medical or psychiatric problems of the IP.

**Tip** These should only include problems diagnosed by a licensed professional.

**Tip** If applicable, this information populates automatically from the previous year's report and can be updated as needed.

## 16. Part III, #4:

### *Hospitalization*

Click on the dropdown and select 'Yes' or 'No' to specify if the IP was hospitalized during the reporting period.

If you selected 'No', continue to Step 17.

If you selected 'Yes', use the **Date(s) of hospitalization** field to identify each instance. Continue to Step 17.

The screenshot shows a portion of the report form with several fields and annotations:

- 2. The major medical or psychiatric problems of the Incapacitated Person are as follows**  
Major medical or psychiatric problems: Dementia, Hiatal Hernia, Dermatitis, Scd
- 3. Describe any social, medical, psychological and support services the Incapacitated Person is receiving**  
Support services received: Socializes with staff and peers at day pri
- 4. Has the Incapacitated Person been hospitalized during the Report Period**  
\* Incapacitated Person Hospitalized: Yes (dropdown)  
Date(s) of hospitalization: 09/09/2022 - 09/15/2022
- 5. Has the Incapacitated Person received a mental health assessment during the Report Period?**  
\* Incapacitated Person Mental Health Assessment: Yes (dropdown)  
\* Date(s) of MH Assessment: 12/14/2021

Annotations with arrows point from the text instructions to the corresponding fields in the form:

- An arrow from the "14. Part III, #2" section points to the "Major medical or psychiatric problems" field.
- An arrow from the "16. Part III, #4" section points to the "Incapacitated Person Hospitalized" dropdown.
- An arrow from the "15. Part III, #3" section points to the "Support services received" field.
- An arrow from the "17. Part III, #5" section points to the "Incapacitated Person Mental Health Assessment" dropdown.

## 15. Part III, #3:

### *Services for the IP*

Click in the field and enter any support services that the IP is receiving.

## 17. Part III, #5:

### *Mental health assessment*

Click on the dropdown and select 'Yes' or 'No' to specify if the IP received a mental health assessment during the reporting period.

If you selected 'No', continue to Step 18.

If you selected 'Yes', use the **Date(s) of MH Assessment** field to identify when it occurred. Continue to Step 18.

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## 18. Part IV, #1: *Guardian's opinion*

Click on the dropdown and select an option based on your opinion of how the guardianship should proceed.

**Tip** 'Continued' signifies your recommendation that the guardianship should continue under the existing court order.

**Tip** 'Continued with modifications' is your recommendation that the guardianship should continue, but the IP has either gained or lost capacity in one or more areas and the court should modify the existing court order.

The screenshot shows the 'PART IV. GUARDIAN'S OPINION' form. A line from the instruction for step 18 points to the 'Guardian Opinion' dropdown menu, which is set to 'Continued'. Another line from the instruction for step 19 points to the 'Guardian Opinion Detail' text field, which contains the text 'IP's dementia contributes to significant n'. A third line from the instruction for step 20 points to the 'Petition to modify/terminate filed' dropdown menu, which is set to 'No'.

PART IV. GUARDIAN'S OPINION

1. Should the guardianship be

\* Guardian Opinion: Continued

2. Provide the reasons for your opinion. List specific recommended modifications

Guardian Opinion Detail: IP's dementia contributes to significant n

3. Have you filed a petition for modification or termination?

\* Petition to modify/terminate filed: No

## 19. Part IV, #2: *Explanation*

Use the field to list the reasons that support the recommendation you identified in Step 18.

## 20. Part IV, #3: *Petition for modification or termination?*

Click on the dropdown and select 'Yes' or 'No' to specify if you have filed a petition with the court to modify or terminate the guardianship.

## 22. Part V, #2: *Average length of visit*

Click on the dropdown and select the option that best describes your average length of visit to the IP.

The screenshot shows the 'PART V. INFORMATION ABOUT THE GUARDIAN' form. A line from the instruction for step 21 points to the 'Visitation Frequency' dropdown menu, which is set to 'I live with the Incapacitated Person'. Another line from the instruction for step 22 points to the 'Visitation Duration' dropdown menu, which is set to 'Not Applicable'.

PART V. INFORMATION ABOUT THE GUARDIAN

1. On average, how often did you visit the Incapacitated Person during the Report Period?

\* Visitation Frequency: I live with the Incapacitated Person

2. What is the average length of a visit?

\* Visitation Duration: Not Applicable

## 21. Part V, #1: *Visitation*

Click on the dropdown and select the option that best describes how often you visited the IP during the reporting period.

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## 23. Part V, #3: *Guardianship log*

Click on the dropdown and select 'Yes' or 'No' to specify if you've kept a guardianship log.

**Tip** If you selected 'Yes', you can upload a copy of your log in Step 61. The document must be saved as a PDF. If you are unable to submit the log online, you can submit it through the regular mail.

**Tip** A log may include things like the services performed for the IP, the date of service, and amount of time spent.

3. Have you maintained a log of your activities as a guardian?

\* Guardian Activity Log: Yes

Please attach a copy using the (Upload Document) button found at the bottom of the page

4. Guardianship Training/Certification

\* Guardianship Training: Yes

Participated In	Guardian Name	Training/Certification Start Date	Training/Certification End Date
No results found			

## 24. Part V, #4: *Training/ Certification*

Click on the dropdown and select 'Yes' or 'No' to specify if you have participated in guardianship training or received/renewed a certification during the reporting period.

If you selected 'No', proceed to Step 33.

If you selected 'Yes', continue to Step 25.

## 25. Part V, #4 (cont.): Click the Add Training/ Certificates icon

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## 26. Part V, #4

(cont.): Select an activity

Click on the **Participated In** dropdown and select 'Training' or 'Certification.'

## 28. Part V, #4

(cont.): Training/certification date

Use the **Training/Certification Start** and **End Date** fields to enter the dates that the training or certification took place.

If you selected 'Training', continue to Step 29. If you selected 'Certification', proceed to Step 31.

**Tip** If you only want to specify a single date, enter the same date in both fields.

## 30. Part V, #4

(cont.): Description

Click in the **Description** field and provide a brief summary of the training that was completed. Proceed to Step 32.

## 27. Part V, #4

(cont.): Name of guardian

Click on the **Guardian Name** dropdown and select the guardian that received the training or certification.

Participated In	Guardian Name	Training/Certification Start Date	Training/Certification End Date
Training	Cameron B	08/12/2022	08/12/2022

Date	Certification Type	Provider	Description	Action
		AOPC	Participated in online training	Trash icon

## 29. Part V, #4

(cont.): Provider

Click in the **Provider** field and enter the name of the individual, organization, or institution that offered the training.



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## 31. Part V, #4 (cont.): *Certification type*

Click on the **Certification Type** dropdown and select the agency that issued the certification.

4. Guardianship Training/Certification

\* Guardianship Training: Yes

Id	Date	Certification Type	Provider	Description	
22		National Certified Guardian (NCG) / Center for Gu...			

## 32. Part V, #4 (cont.): *Add other trainings/ certifications*

Repeat Steps 25-31, as needed, to add any other trainings or certifications.

## 33. Part V, #5: *Criminal activity?*

Click on the dropdown and select 'Yes' or 'No' to specify if the guardian has been charged or convicted of a crime during the reporting period.

If you selected 'No', proceed to Step 38.

If you selected 'Yes', continue to Step 34.

5. During this Report Period, was any guardian charged with or convicted of a crime?

\* Guardian Criminal Charges: Yes

Guardian Name	Criminal Charge Description	
Cameron Boggs	On 3/31/2022, Cameron was charged with driving	

## 34. Part V, #5: Click the **Add Guardian Criminal Charges** icon

## 35. Part V, #5 (cont.): *Name of guardian*

Click on the **Guardian Name** dropdown and select the guardian that has been charged or convicted.

## 37. Part V, #5 (cont.): *Add other charges*

Repeat Steps 34-36, as needed, for any co-guardians that were charged or convicted of a crime during the reporting period.

## 36. Part V, #5 (cont.): *Description*

Click in the **Criminal Charge Description** field and state the nature of the crime for which the guardian has been charged or convicted.



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## 38. Part V, #6: PFA or PSVI?

Click on the dropdown and select 'Yes' or 'No' to specify if an order for Protection from Abuse (PFA) or Protection from Sexual Violence or Intimidation (PFSVI) was entered against a guardian.

If you selected 'No', proceed to Step 43.

If you selected 'Yes', continue to Step 39.

## 40. Part V, #6 (cont.): Name of guardian

Click on the **Guardian Name** dropdown and select the guardian that had the order entered against them.

## 42. Part V, #6 (cont.): Add other orders

Repeat Steps 39-41, as needed, to add this information for any co-guardians that have had a PFA or PFSVI order entered against them.

## 39. Part V, #6: Click the Add Guardian Criminal Charges icon

## 41. Part V, #6 (cont.): Description

Click in the **PFA/ PFSVI Description** field and summarize the nature of the order that was entered against the guardian.

6. During this Report Period, was a Protection from Abuse Order or Protection from Sexual Violence or Intimidation Order entered against a guardian?

\* Guardian PFA/PFSVI Ordered: Yes

Guardian Name	PFA/PFSVI Description	
Cameron Boggs	The order was entered on 3/3/2022 based on p...	



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## 43. Part V, #7: Guardian Service

Click on the dropdown and select 'Yes' or 'No' to specify if any guardian can no longer serve as a guardian.

If 'No', proceed to Step 57.

If 'Yes', continue to Step 44.

## 45. Part V, #7 (cont.): Name of guardian

Click on the **Guardian Name** dropdown and select the guardian that can no longer continue to serve.

## 47. Part V, #7 (cont.): Add other reasons

Repeat Steps 44-46, as needed, to add this information for any co-guardians that can no longer serve as a guardian.

## 44. Part V, #7: Click the Add Guardian Cannot Continue icon

## 46. Part V, #7 (cont.): Description

Click in the **Description** field and briefly summarize why the guardian can no longer serve.

A screenshot of a web form titled "7. Is there any reason any guardian cannot continue to serve as guardian?". Below the title is a dropdown menu labeled "Guardian Cannot Continue:" with "Yes" selected. To the right of the dropdown is a blue circular icon with a white plus sign. Below these elements is a table with two columns: "Guardian Name" and "Description". The "Guardian Name" column contains a dropdown menu with "Cameron Boggs" selected. The "Description" column contains the text "Continued service is no longer in best interest o". To the right of the table is a trash can icon.

Guardian Name	Description
Cameron Boggs	Continued service is no longer in best interest o

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## 48. Part V, #8:

### *Guardian Compensation*

Click on the dropdown and select 'Yes' or 'No' to specify if you received compensation for your efforts as a guardian.

If 'Yes', continue to Step 49.

If 'No', proceed to Step 57.

49. Part V, #8: Click the Add Compensation icon

## 50. Part V, #8:

### *(cont.): Amount*

Click in the **Amount** field and enter the total amount, in U.S. dollars, received in payment for guardianship services during the reporting year.

## 52. Part V, #8:

### *(cont.): Free frequency*

Click on the **Fee Frequency** dropdown and select the option that best describes the time interval in which the guardian routinely charged their fee.

**Tip:** The **Amount** field is sum of all compensation from the reporting year.

**Tip:** The **If Hourly, # of Hours** field is only used if the **Fee Frequency** is 'Hourly.' If so, enter the total hours worked during the reporting year.

8. Did the Guardian receive compensation during the Report Period?

\* Guardian Compensation: Yes

Complete the table below

Amount	Guardian Name	Fee Frequency	If Hourly, # of Hours	
500	Joseph K Zimmerman	Annual		

51. Part V, #8: *(cont.): Guardian name*

Verify that the correct name appears in the **Guardian Name** field or click on the dropdown and select the correct option.

53. Part V, #8: *(cont.): Add other compensation*

Repeat Steps 49-52 for any other guardians that received compensation during the reporting period.

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## 54. Part V, #9: Compensation approved?

If you answered 'Yes' to Question #1 above, click on the dropdown and select 'Yes' or 'No' to specify if the court authorized the compensation to the guardians.

If you answer 'Yes', continue to Step 55.

If you answer 'No', proceed to Step 56.

A screenshot of a web form titled "9. Was the compensation approved by the court?". It contains two fields: "Guardian Compensation Approved:" with a dropdown menu showing "Yes", and "Guardian Compensation Order Date:" with a date input field showing "07/20/2022" and a calendar icon. A line from the text "If you answer 'Yes', continue to Step 55." points to the dropdown menu. Another line from the text "Click in the Guardian Compensation Order Date field" points to the date input field.

## 55. Part V, #9 (cont.): Court order date

Click in the **Guardian Compensation Order Date** field and enter the date of the order that authorized the compensation. Proceed to Step 57.

## 56. Part V, #9 (cont.): Explanation

Click in the **Guardian Compensation Explanation** field and enter a summary that explains why court approval was not obtained to compensate the guardian.

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## 57. Co-guardians?

If there is more than one guardian named on this report under Part I, Question #1, continue to Step 58.

Otherwise, proceed to Step 59.

Do you have the consent of all co-guardians representing the incapacitated person to submit this report to the court. I hereby swear/affirm that the information provided is true and correct.

\* Co-guardian consent: ☐ Yes ☐ No

## 58. Co-guardians consent

Select the **Yes** or **No** radio button to state whether the report is being submitted with the consent of all guardians.

**Tip** If you select **Yes**, you must enter at least one phone number and e-mail for each co-guardian.

**Tip** If you select **No**, co-guardians retain the option to file a separate report for the reporting year through the Case Actions tab of the GTS Case screen.

## 59. Signature and Affirmation

Verify/update your address information. You must enter an e-mail address and a home, business, or a cell phone number.

**Tip** In the **Signature of Guardian** field, your name is preceded by a /s/. This symbol, when followed by your name, is an established way to indicate that you have signed an electronic document.

Date	Signature of Guardian ?	Name of Guardian	Location	Address Line 1 ?	Address Line 2	Address Line 3	City	State	Zip Code	Territory	Postal Code	Country	Home Phone ?	Office Phone
11/29/2022	/s/ Cameron Boggs	Cameron Boggs	Unit	341 Lincoln Ave.			Sar	F	16677			Unit		

Please include any comments you would like to make for this report:

## 60. (Optional) Signature and Affirmation (cont.): Comments

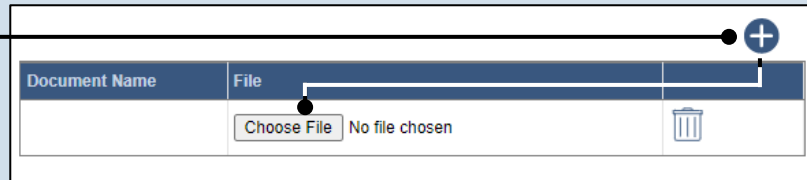
If you have any additional information that you want to provide to the court about the guardianship, enter them in the comments field provided.

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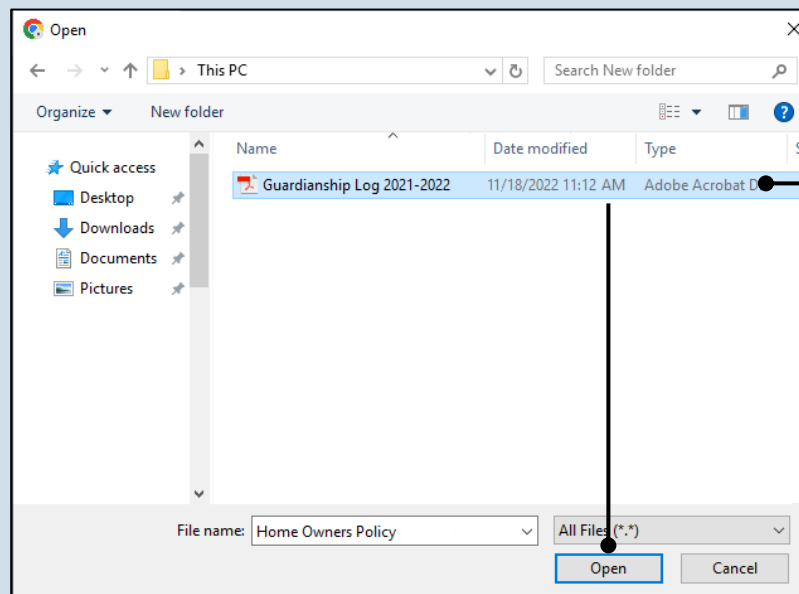


## 61. (Optional) Signature and Affirmation (cont.): *Documents*

If you have supplemental documents that you want to submit to the court, particularly if you were prompted in Step 23, click the Upload Document icon, and then the CHOOSE FILE button. Continue to Step 62.



If you have no documents to upload, proceed to Step 63.



## 62. Signature and Affirmation (cont.): *Documents*

In the popup screen that appears, locate the PDF version of the document you have saved on your computer or a movable storage device. Select the file and click OPEN.

**Tip** GTS only accepts documents in a PDF format. Documents created in Microsoft Word or Excel can be saved as a PDF using built-in tools. Other PDF making tools are available on the internet.

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## 63. Signature and Affirmation (cont.):

### Checkboxes

Read and select the checkboxes that indicate the information you provided is true and that you will serve a Notice of Filing to the other interested parties on the case.

**Tip** A copy of the notice of filing form can be obtained at <http://www.pacourts.us/forms/for-the-public/orphans-court-forms>. This form cannot be served to the eligible recipients through the GTS. This must be completed through other delivery methods (ex. mail, fax, personal delivery, e-mail).

A screenshot of a web form titled "Guardian of the Person Report". It contains two checked checkboxes: "I, the guardian of the Person, verify that the foregoing information is correct to the best of my knowledge" and "I, the guardian of the Person, further acknowledge that the Notice of Filing must be served to the other interested parties on the case". Below these is a section labeled "Next Action:" with three radio button options: "Save", "Save and Close", and "Submit". At the bottom are three buttons: "Ok", "Cancel", and "View Draft". A blue box highlights the "Next Action:" section, and a line points from the "Submit" radio button to the text "Option 1: If you want to submit this filing now..." on the right.

## 64. File now or later?

Choose one of the following and click OK:

Option 1: If you want to submit this filing now, select the **Submit** radio button and, if payment is required, consult the *How to Submit a Filing with a Fee and make a Payment* reference guide. This button is only available to those with the authority to submit reports in GTS.

Option 2: If you do not want to submit your filing now, select the **Save and Close** radio button. When you are ready to file, you can access this report through your Dashboard and then follow Option 1.

Option 3: If you want to submit your filing simultaneously with another report, select the **Ready for Submission** radio button. Follow the *How to Submit Multiple Reports simultaneously* reference guide.

Option 4: If you do not have authority to submit a report in GTS and it must be reviewed by someone else prior to submission, select the **Ready for Review** radio button (not pictured).