REFERENCE GUIDE FOR DEVELOPMENT OF THE 2005-2009 AREA PLAN

FY 2008-2009 Update

*Changes highlighted (Indigo)

3/17/08

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INTRODUCTION

Foreword

The California Department of Aging (CDA) and the statewide network of 33 Area Agencies on Aging (AAA) share the critical responsibility of addressing present and future aging and long-term care issues within California's growing, diverse, interdependent community. Each must support the other in a broad range of activities directed at overcoming and eliminating barriers to the development of coordinated and accessible home and community-based systems of care.

The Area Plan is intended to accurately reflect future activities of the AAAs by involving and serving older individuals, their families, and caregivers. It provides the format and structure to identify needs and address concerns in a manner consistent with the Older Americans Act (OAA) and the Older Californians Act (OCA) to enable communities and AAAs to plan for the future.

The Role of Area Agencies on Aging

As general background for the reader, the AAAs were created by the OAA with a mandate to serve as visible and effective leaders and advocates and to provide local leadership in accomplishing federal program goals. These goals are specified broadly in the OAA as: 1) to serve and maintain maximum independence and dignity in a home environment for older individuals capable of self care with appropriate supportive services, including support to family members and other persons providing voluntary care to older individuals needing long-term care services; 2) to remove individual and social barriers to economic and personal independence for older individuals; and 3) to provide the opportunity for older individuals to receive managed in-home and community-based long-term care services. The 1996 revision of the OCA reiterates federal requirements to facilitate the development of home and community-based systems of care and adds increased responsibility for AAAs to oversee a number of State-funded programs and subsequent expansion monies, which previously were managed at the State level.

Area Agencies are charged with addressing and planning for a broad spectrum of matters related to involvement of older individuals' needs in our rapidly changing society. These individuals live in a variety of settings within local communities, including long-term care facilities. They include the poor, low-income minority individuals, those who are frail, isolated, neglected, and exploited; those with limited English-speaking ability, and those dealing with the problems of dementia or cognitive impairment, as well as those with caregiver responsibilities. These groups also include a dramatic increase of individuals who will become seniors during the 2005-2009 planning cycle and beyond. Wherever AAAs are placed organizationally, they are charged with working proactively in the collaborative development of home and community-based systems of care, which are responsive to the needs of diverse populations, including adults with disabilities.

The 2005-2009 Area Plan and Annual Updates

The goals put forth in the Reference Guide for the Development of the 2005-09 Area Plan include meaningful planning activities to help eliminate fragmentation in California's system of services, taking advantage of new opportunities for service delivery, and insuring that maximum benefits are obtained through efficient delivery of services to those most in need. A planning process diagram describing the planning process is included in the Reference Guide*. (See Appendix IX Resource Tools Exhibit B)*

This Reference Guide continues to emphasize CDA's goal of providing AAAs with technical assistance and support. Subsections list the "Purpose", "Required Content", and as applicable, "Questions". The Questions section will assist AAAs in meeting the Required Content section. The establishment of goal areas and related objectives should be driven by existing mandates and analysis of each AAA's unique needs, as identified in the needs assessment for the individual Planning and Service Area (PSA). An Area Plan should read logically and easily, with each section leading into and supporting the next. The Area Plan should be viewed as a document that not only fulfills the mandates set forth in law, but also informs the public and policy-makers, locally and statewide, how the AAA plans to address local needs and accomplish stated goals and objectives.

Critical to the four-year planning cycle, the yearly Area Plan Update process enables the AAA to re-examine its direction and progress as a result of changing circumstances and to add, change, or delete elements and objectives, as appropriate. The Area Plan is a four-year living document that is formatted for the insertion of annual updates. Notations at the beginning of each section and this symbol 🗗 will alert the AAA to those sections that require updates throughout the four-year planning cycle. AAAs are required, as specified, to submit annual Updates. **Formal instructions for submission of the Area Plan Updates, Amendments, and Year-End Reports are located on the Directions for Submission of the Area Plan, Area Plan Updates, Year -End Reports and Amendments page.**

As in the previous plan, evaluation will lead to the Year-End Report, which provides the opportunity to review and assess efforts during the previous year, to identify accomplishments and factors influencing them, and to share this information with CDA and be accountable to the public.

Instructions for Completion of the Area Plan

Instructions for completion of the body of the four-year Area Plan are divided into two primary parts:

- Part One: Area Plan Background - The Reference Guide does not include a prescribed format for this portion of the Plan. Therefore, the Required Content may be submitted in narrative form.

- Part Two: Area Plan Goals and Objectives - The Reference Guide provides a specific format for submission of goals, objectives, and maintenance of the goals and objectives for the Four-Year Area Plan. Part Two also provides instructions for completing and maintaining the Service Unit Plan Objectives for the four-year period.

Icons appear throughout the guidance to direct the reader's attention to specific requirements:

- indicates that a prescribed template has been formatted for electronic completion.
- are positioned to alert the reader to sections that contain "Required Content" directions that must be followed.
- identifies sections of the Area Plan that must be updated annually.

Applicable Laws and Regulations

- The Older Californians Act can be found in the Welfare and Institutions (WIC) Code, Division 1.8, Section 9000 et seq.

- CDA regulations are found in the California Code of Regulations (CCR), Title 22, Section 7000 et seq.

- The Older Americans Act can be found in the United State (US) Code, Title 45, Chapter 35, Sections 3002 et seq.

- Federal regulations for Title III can be found in the Code of Federal Regulations (CFR), Title 45, Part 1321, Section 1321 et seq.

- Federal regulations for Title V can be found in the CFR, Title 20, Part 641, and Title 20, Part 89. The regulations are located within Part IV, Department of Labor

Transmittal Letter

Updates: A new Area Plan Transmittal Letter, with the original signatures of all appropriate individuals, is required with each annual Update. The **year of submittal** must be checked at the top of the document.

Year-End Report: A Year End Report Transmittal Letter with original signatures of all appropriate individuals is required with each Year-End Report. The year of submittal must be checked at the top of the document.

A Transmittal Letter is required for the Four-Year Area Plan. Required Transmittal Letter language is on page iv. The language of the Transmittal Letter has been changed to reflect AAA accountability relative to the Assurances in Part V. The completed 2005-2009 Area Plan Transmittal Letter needs to include your PSA number and official name of the appropriate governing body (Board of Directors, Governing

Board, etc.) with signatures typed on the document. **Original signatures are required on the Transmittal Letter.** The AAA may copy and paste the Transmittal Letter onto Agency Letterhead. Transmittal Letters are required to be updated and submitted on an annual basis.

Area Plan Checklist

Updates: A new Area Plan Checklist must be completed and remitted with each Area Plan Update.

The Area Plan Checklist is intended to provide AAAs with a tool to review the Area Plan for completeness prior to submission. AAAs must complete the checklist, starting on page 12, for the Four-Year Area Plan and all Area Plan Updates.

TRANSMITTAL LETTER

AAA Name: ____ **PSA Number**:____

Check appropriate box for:

☐2005-09 Area Plan ☐FY 06-07 ☐FY 07-08 ☐FY 08-09

This Area Plan is hereby submitted to the California Department of Aging for approval. The Governing Board and the Advisory Council have each had the opportunity to participate in the planning process and to review and comment on the Area Plan. The Governing Board, Advisory Council, and Area Agency Director actively support the planning and development of community-based systems of care and will assure compliance with the assurances set forth in this 2005-2009 Area Plan. The undersigned recognize the responsibility within each community to establish systems in order to address the care needs of older individuals and their families and caregivers in this planning and service area.

1. (Type Name) _____

Signed) [2]______________________________ ___________
Chair, Governing Board Date

2. (Type Name) _____

(Signed)______________________________ ___________
Chair, Advisory Council Date

3. (Type Name) _____

(Signed)______________________________ ___________
Director, Area Agency on Aging Date

[2] For the e-mailed version of the Area Plan, type in name and signatures. Original signatures are required on posted Area Plan.

THE AREA PLAN CHECKLIST

Includes Title III (B, C, D, E), V, VII, Community-Based Service Programs (CBSP), and the HICAP.

Instructions: Check the boxes ☐ for completed items, as applicable. For completion of the Four-Year Plan, check the boxes in column C. For any unchecked box, provide an explanation on the last page of this checklist. For Annual Updates, check the boxes in the applicable year. **Section number six, Narrative Description of Relevant Changes, applies only to the Area Plan Update.**

1. Necessary Copies and Format **REQUIRED**

A	B	C	D	E	F
General Requirements for the Four-Year Plan	**Annual Update Requirements**	**2005-09 Four-Year Plan**	**2006-07 Annual Update**	**2007-08 Annual Update**	**2008-09 Annual Update**
All information is provided on single-sided sheets.	**Yes**	☐	☐	☐	☐
One copy of the required documents has been E-mailed to the Department.	**Yes**	☐	☐	☐	☐
An original and two copies of the Area Plan, Area Plan Checklist, and all required documents are attached.	**Yes**	☐	☐	☐	☐

2. Transmittal Letter **REQUIRED**

A	B	C	D	E	F
General Requirements for the Four-Year Plan	**Annual Update Requirements**	**2005-09 Four-Year Plan**	**2006-07 Annual Update**	**2007-08 Annual Update**	**2008-09 Annual Update**
The Transmittal Letter signed by the AAA Director, Chair of the Advisory Council, and Chair of the Governing Board, has original signatures and is attached. *	**Yes**	☐	☐	☐	☐
The signed Transmittal Letter will be submitted by: ____ (enter date)	**Yes**	☐	☐	☐	☐

*Note: Approval of the Area Plan will be delayed pending receipt of a fully executed Transmittal Letter.

3. Strategic Plan: REQUIRED if a Strategic Plan is submitted as the Area Plan

A	B	C	D	E	F
General Requirements for the Four-Year Plan	**Annual Update Requirements**	**2005-09 Four-Year Plan**	**2006-07 Annual Update**	**2007-08 Annual Update**	**2008-09 Annual Update**
A Strategic Plan was submitted as the Area Plan. (A Strategic Plan Cross Reference Index is available by contacting CDA).	**Yes,** If applicable	☐	☐	☐	☐

4. Description of the Planning and Service Area (PSA) REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	**Annual Update Requirements**	**2005-09 Four-Year Plan**	**2006-07 Annual Update**	**2007-08 Annual Update**	**2008-09 Annual Update**
A brief description of the physical characteristics of the PSA is included.	**Yes,** If changed	☐	☐	☐	☐
A description of the demographic characteristics of the PSA is included.	**Yes,** If changed	☐	☐	☐	☐
A description of the unique resources and constraints existing within the PSA is included.	**Yes,** If changed	☐	☐	☐	☐
A broad description of the existing service system within the PSA is included.	**Yes,** If changed	☐	☐	☐	☐

5. Description of the Area Agency on Aging REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	**Annual Update Requirements**	**2005-09 Four-Year Plan**	**2006-07 Annual Update**	**2007-08 Annual Update**	**2008-09 Annual Update**
A description of the type and characteristics of the AAA.	**Yes,** If changed	☐	☐	☐	☐
A Mission Statement.	**Yes,** If changed	☐	☐	☐	☐
A current Organization	Yes, **If changed**	☐	☐	☐	☐

A description of how the AAA provides visible leadership in the development of community-based systems of care.	**Yes,** If changed	☐	☐	☐	☐
The Agency type; such as Public, Private Non-Profit, or Joint Powers.	**Yes,** If changed	☐	☐	☐	☐
The AAA's funding sources.	**Yes,** If changed	☐	☐	☐	☐

6. Narrative Description of Relevant Changes – <u>REQUIRED FOR UPDATE ONLY</u>
This section must include all changes related to all programs of services funded by grants from CDA

A	B	C	D	E	F
Update Requirement	**Annual Update Requirements**	**2005-09 Four Year Plan**	**2006-07 Annual Update**	**2007-08 Annual Update**	**2008-09 Annual Update**
Introduction with Narrative Description of Significant Changes, including estimated number of low-income, minority seniors	**Yes**		☐	☐	☐
New, continued, revised, completed, or deleted goals and objectives are identified.	**Yes**		☐	☐	☐
Discussion of major changes and effects to the PSA and/or AAA.	**Yes**		☐	☐	☐
Changes that may have reduced or increased quality or quantity of service.	**Yes**		☐	☐	☐

7. The Planning Process **REQUIRED**

A	B	C	D	E	F
General Requirements for the Four-Year Plan	**Annual Update Requirements**	**2005-09 Four-Year Plan**	**2006-07 Annual Update**	**2007-08 Annual Update**	**2008-09 Annual Update**
Discussion of steps involved in the planning process and how they fit in with the overall planning cycle.	**Yes,** If changed	☐	☐	☐	☐

Discussion of the needs assessment process.	**Yes,** If changed	☐	☐	☐	☐
Discussion of targeting.	**Yes,** If changed	☐	☐	☐	☐
Identification of priorities.	**Yes,** If changed	☐	☐	☐	☐

8. Goals and Objectives, including Targeting, Needs Assessment, and Service Unit Plan REQUIRED

A	B	C	D	E	F
General Requirements for the Four-Year Plan	**Annual Update Requirements**	**2005-09 Four-Year Plan**	**2006-07 Annual Update**	**2007-08 Annual Update**	**2008-09 Annual Update**
A goal and/or objective is identified for each program or service.	**Yes**	☐	☐	☐	☐
Goals and Objectives are included for each program or service funded by the AAA from the following sources: Check all that apply ☐Title III B ☐Title III B/VII(a)(b)☐Title III C1 ☐Title III C2 ☐Title III D ☐Title III E ☐Title V ☐ HICAP ☐CBSPs	**Yes**	☐	☐	☐	☐
Goals and objectives identified serve to create, expand, or enhance AAA direct or contracted services.	**Yes**	☐	☐	☐	☐
Title III B Program Development (PD) and Coordination (C) activities are distinctly identified.	**Yes**	☐	☐	☐	☐
Objectives clearly indicate the nature of the action, the party responsible for the action, the outcome of the action, how the action will be measured, and projected start and end dates of each objective.	**Yes**	☐	☐	☐	☐
The Units of Service on the SUP are tied to a specific goal.	**Yes**	☐	☐	☐	☐

General Requirements for the Four-Year Plan	Annual Update Requirements	2005-09 Four-	2006-07 Annual Update	2007-08 Annual Update	2008-09 Annual Update

		Year Plan			
Targeting criteria have been met and are included:⇨ Specific objectives: for providing services to low-income minority individuals; ⇨Specific objectives for providing services to older individuals with disabilities, with particular attention to individuals with severe disabilities; ⇨Specific objectives for providing services to older individuals with limited English-Speaking ability; and ⇨Specific objectives for providing services to caregivers	**Yes**, if changed	☐	☐	☐	☐
A description of **Needs Assessment Activities** is included.	**Yes,** If needs assessment activities are planned or have been completed	☐	☐	☐	☐
Service Unit Plans are complete and reconcilable with appropriate budgets.	**Yes**	☐	☐	☐	☐

9. Older Americans Act Assurances

Older Americans Act Assurances	**No**	☐			

10. Appendices **REQUIRED, IF CHANGES HAVE OCCURED**

IA. Notice of Intent to Provide Direct Services (if applicable)	**Yes**, if changed	☐	☐	☐	☐
IB. Request for Approval to Provide Direct Services (if applicable)	**Yes**, if changed	☐	☐	☐	☐
II. Public Hearings	**Yes**	☐	☐	☐	☐
III. Governing Board	**Yes**, if changed	☐	☐	☐	☐
IV. Advisory Council	**Yes**, if changed	☐	☐	☐	☐
V. Priority Services	**Yes**, if changed	☐	☐	☐	☐

VI. Community Focal Points List	**Yes**, if changed	☐	☐	☐	☐
VII. Multipurpose Senior Center Acquisition and Construction Compliance Review	**Yes**, if changed	☐	☐	☐	☐
VIII. Title III E Family Caregiver Support Program	**Yes**, If changed	☐	☐	☐	☐
IX. Resource Tools Sample Organization Charts, Planning Process and Funding Sources/Program Descriptions, Title IIID Fact Sheet, Ombudsman Fact Sheet	**No**				
X. Legal Services	**Yes,** if changed	☐	☐	☐	☐
XI Disaster Preparation Planning	**Yes,** if changed	☐	☐	☐	☐
XII Baby Boomer Information	**Yes,** if changed	☐	☐	☐	☐
XIII Year-End Report	**Yes,** Due by November 1st	☐	☐	☐	☐

For any unchecked boxes, identify the section number and provide an explanation:____

Directions for Submission of the Area Plan, Area Plan Updates, Year-End Report and Amendments

Area Plans and Area Plan Updates are due May 1st of every year.
Year-End Reports are due by November 1st of every year per Program Memo (PM) #07-14 (P).

Please see Part III for additional information about the contents of the Area Plan, Area Plan Updates, Year-End report and Amendments.

I. Area Plan (original submitted the first year of the 4-year cycle):

Send the original and two copies with the Transmittal Letter with original signatures via postal mail to:

California Department of Aging
Attention: Area Plan Review Unit/Denny Wight
1300 National Drive, Suite 200
Sacramento, CA 95834

II. Area Plan Updates

Submit **changes** to the original Area Plan **only.** **Do not** send the entire Area Plan. If you are unable to submit just the changes please call John Marklund (916-928-3330) or Denny Wight (916-928-3329) to discuss other options.

Send the original and two copies with the Transmittal Letter with original signatures via postal mail to:

California Department of Aging
Attention: Area Plan Review Unit/Denny Wight
1300 National Drive, Suite 200
Sacramento, CA 95834

III. Year-End Report

Submit one original and a copy of the Year-End Report and the signed original Transmittal Letter to John Marklund at:

California Department of Aging
Attention: John Marklund, Area Plan Team
1300 National Drive Suite 200
Sacramento, CA 95834

IV. Amendments

Send the original and two copies and the Transmittal Letter with original signatures via postal mail to:

California Department of Aging
Attention: Area Plan Review Team/Denny Wight
1300 National Drive, Suite 200
Sacramento, CA 95834

PART ONE: AREA PLAN BACKGROUND

SECTION A: SETTING THE STAGE

1. DESCRIPTION OF THE PLANNING AND SERVICE AREA

Updates: Any changes in the Required Content of this section must be included in the annual Updates.

a. Purpose:

The purpose of this section is to provide the public with a clear, readable introduction to the (PSA) and its service network. The intent of this section is to provide an accurate and interesting description of the characteristics of the PSA and the setting in which planning for a community-based system of care is undertaken. This is an opportunity to provide the public with a view of the PSA, as well as to provide a basis for good planning.

b. Required Content:

As required in the California Code of Regulations (CCR) Article 3, Section 7302 (a) (1), this section must include the following:

- A brief description of the physical characteristics of the PSA.
- A description of the demographic characteristics of the PSA, including a description of the number and proportion of the potential client population who are in greatest social and economic need and are low-income minority individuals. *(See Part One Section B Targeting)*
- A description of the unique resources and constraints existing within the PSA.
- A broad description of the existing service system within the PSA to set the stage for subsequent discussions of goals. AAAs are encouraged to document challenges and successes in local system/program development. This section includes the following:
    - Characteristics of the service system for the entire PSA;
    - Elements of the service system of the PSA, including any local coordination efforts, local/regional development of and/or AAA participation in task forces and boards, and community participation; and
    - Ways that agencies work together to provide services in the PSA.

Questions:

The AAA's narrative responses to this section must specifically address the following questions to meet the "Required Content" listed above:

- What are the physical characteristics of the PSA?
- What are the geographic boundaries of the PSA?
- What are the PSA's geographical characteristics?
- Is this a single or multi-county PSA?
- What is the impact of these characteristics on planning considerations?
- What are the demographic characteristics of the PSA?
- What are the number and proportion of older individuals, family caregivers, and individuals with functional impairments?
- What is the racial/ethnic composition of these groups within the PSA?
- What is the economic status of these groups within the PSA?
- What number and proportion of the potential client population is in greatest economic need, greatest social need, or both?
- What number and proportion of the potential client population are low-income, minority individuals?
- What number and proportion of the potential client population resides in rural areas?
- What number and proportion of the potential client population has limited English-speaking abilities?
- What number and proportion of the potential client population has severe disabilities?
- What are the PSA's resources and constraints? Discussion points <u>may</u> include:
    - o Geography and its influence on access;
    - o The absence or presence of employment opportunities;
    - o The absence or presence of sources of grant/tax revenue;

- o The impact of state and/or county budget changes;
- o The impact of local disasters; and
- o What significant accomplishments have influenced the service delivery system in your PSA? Are these accomplishments consistent with your mission statement?

d. <u>Optional Questions Related to the Family Caregiver Support Program:</u>

- What number and proportion of children live in a household headed by a grandparent?
- What estimated number of older individuals are relative caregivers for children?
- What estimated number of these children is developmentally disabled?
- What estimated number of older individuals with a developmental disability lives with a family caregiver?
- What estimated number of older individuals could leave a long-term care facility if services were available for their family caregiver?

2. DESCRIPTION OF THE AREA AGENCY ON AGING

<u>Updates</u>: Any changes in the Required Content of this section must be included in the annual Updates.

a. <u>Purpose:</u>

The purpose of this section is to impart to the public an understanding of the responsibilities of the AAA to provide leadership in addressing issues that relate to older Californians and their caregivers, to develop community-based systems of care to support the independence and protect the quality of life of older persons and persons with functional impairments, and to promote citizen involvement in the planning and delivery of services.

b. <u>Required Content:</u>

As required in the CCR Article 3, Section 7302, this section must include the following:

- A description of the characteristics of the AAA.
- A Mission Statement.

- A <u>current</u> Organization Chart that includes a narrative description of any imminent/recent changes in the structure and/or placement of the AAA, if applicable. For each position, chart must include position titles and a percentage of time associated with specific AAA duties. *(See Appendix IX Exhibit A Sample Organization Charts)* An annual update is required for changes in AAA structure or staff time.

- A description of how the AAA provides a visible presence and leadership in the development of community-based systems of care. This is the essence of the AAA and its meaning to the community, i.e., how does the AAA make a difference in the lives of persons served as well as the community?

- The AAA type, such as Public, Private Non-Profit, or Joint Powers.

- The AAA's funding sources.

c. <u>Questions:</u>

The AAA's narrative responses to this section must specifically address the following questions to meet the "Required Content" listed above:

- What are the characteristics of the AAA?
  - o What are the strengths and weaknesses of the AAA structure?
  - o What AAA committees or boards are in place?
  - o What is the policy setting process?

- What is the AAA's leadership role?
  - o What specific activities and outcomes have taken place that exemplify this leadership role?
  - o What, if any, leadership challenges are anticipated during this planning cycle?
  - o What is the function of the Governing Board and the Advisory Council in supporting the leadership role of the AAA in the community?

The Code of Federal Regulations [45 CFR] 1321.53(b) lists the following as characteristics of "a comprehensive and coordinated community-based system". Discuss the presence or absence of these factors in the present system when discussing how the AAA provides leadership in developing systems of care:

1. There is a visible point of contact where anyone can go or call for help or information.

2. A range of program and service options are available.

3. Service options are accessible to all older individuals and others served by AAA programs, regardless of income or level of dependency.

4. The system is supported by a commitment of public, private, voluntary, and personal resources.

5. There is collaborative decision-making among all concerned organizations and older individuals and other individuals using disabled and older adult services.

6. Special help or resources are available for the most vulnerable – those in danger of losing their independence.

7. Effective agency-to-agency referral and follow-up is provided.

8. There is sufficient flexibility in the service delivery system to provide appropriate individualized assistance.

9. The system is tailored to the nature of the community.

10. The system is directed by leaders with the stature and ability to:

    - Convene all interested individuals;
    - Assess needs;
    - Design solutions;
    - Track successes;
    - Stimulate change; and
    - Plan present and future community responses.

3. MISSION STATEMENT

<u>Updates</u>: Any changes in the AAA's Mission Statement must be included in the annual Updates.

a. <u>Purpose:</u>

To make clear the reasons for the AAA's existence and its purpose in the community.

b. <u>Required Content:</u>

Core Mission Statement (next page)

As required in the CCR Article 3, Section 7302, the Mission Statement, at a **minimum,** shall include the following statement:

To provide leadership in addressing issues that relate to older Californians; to develop community-based systems of care that provide services which support independence within California's interdependent society, and which protect the quality of life of older persons and persons with functional impairments; and to promote citizen involvement in the planning and delivery of services.

In addition to the above statement, the AAA is encouraged to include its own mission statement in the Area Plan.

4. ORGANIZATION CHARTS

The current Organization Chart is required in the Area Plan and all Updates.

a. Purpose:

To provide information on the AAA organizational structure and the placement of staff within the organization.

b. Required Content:

All current organization charts must be included in this section. The CCR Article 3, Section 7302 requires a description of the AAA that shall include a current organization chart that:

- Describes the relationship of the AAA and its placement within a larger organizational structure, such as a division of a county agency, if applicable. If there are imminent changes planned in the structure and/or placement of the AAA, these must be noted on the chart.
- Lists the agency type, such as: Public, Private Non-Profit, or Joint Powers.
- Chart must include the names and titles of all AAA staff; the percentage of time spent in AAA activities for each position shown that are consistent with the information provided in the Area Plan Budget, Schedule of Paid and In-Kind Personnel Costs[CCR, Section 7318(h)] and **the funding source(s) used to fund each position**.

c. Location of Sample Organization Charts:

***See Appendix IX Resource Tool Exhibit A*:**

- A.1 City/County Chart: Sample Chart A1 is for use by AAAs within county or other governmental structures.

- A.2 AAA Chart: Sample Chart A2 is for use by Private, Non-Profit, and Joint Powers AAAs.

SECTION B: ESTABLISHING PRIORITIES

1. THE PLANNING PROCESS

Updates: Any change in the Required Content of this section must be included in the annual Updates.

a. Purpose:

The purpose of this section is to provide an overview of how an AAA conducts its planning process, including the opportunities available for public involvement in that process.

In addition to providing information about the overall planning process undertaken by the AAA, this section of the Area Plan provides the opportunity to describe how the process meets the requirements for public input. Submission of Appendix II Public Hearings, is also required by the CCR Article 3, Section 7302(a).

b. Required Content:

This section must include discussion of the steps involved in the planning process and describe how these steps were followed. Particular attention must be paid to the mechanisms used to assure the involvement of the public, including providing the public with information about the planning process, and how they can become involved.

c. Questions:

The AAA's narrative responses to this section must specifically address the following questions to meet the "Required Content" listed above:

- In general, what needs assessment processes were employed, what were the findings and how were they addressed in the plan?
- How does the planning process reflect the AAA's efforts to include programs and services funded by a variety of sources, including those that are available for AAA use?
- What are the major areas to be addressed through the planning process?
- Who is responsible for what aspects of the process? Include a description of standing committees, ad hoc planning groups, project teams, and their purpose and composition.

- What is the involvement of the Governing Board and the Advisory Council in the planning process?
- How does the planning process provide for:

  - Soliciting input from individuals within the PSA, including data gathered by Information and Assistance Programs?

  - Soliciting collaborative input from other service agencies, health providers, and employee assistance programs to obtain “buy-in” and joint sponsorship?

  - Making other public entities (e.g., boards of supervisors, city councils, service groups, organizations, churches, etc.) aware of senior service needs in the PSA?

  - Initiating outreach and public information efforts to inform the community about what the AAA is and does, how it relates to and serves the community, and the significance of the Area Plan?

  - Expanding the involvement of individuals and groups from the community (in addition to public hearings)? This may include individuals in care facilities, homeless older adults, older refugees or immigrants who require special assistance in understanding or accessing services, and caregivers who would benefit from available services.

  - Evaluating and adjusting services based on use and need?

- Note for consideration. Is the AAA following the progress of the 2-1-1 Central Information System and the impact it will have on providing information and assistance services? If a local 2-1-1 task force has been convened, has the AAA designated an individual to represent the needs of older adults and their caregivers?

Overview
Needs Assessment, Targeting, and Identification of Priorities sections

Needs assessment, targeting, and the identification of priorities are essential and interrelated functions, which are difficult to address in isolation. For clarity, the following pages discuss these functions as distinct elements of the planning process in order to outline core content areas for inclusion in the Area Plan.

2. NEEDS ASSESSMENT

Updates: Any new needs assessment activities planned for a subsequent year must be included in the annual Updates.

a. Purpose:

To clearly describe 1) the processes and methods used and 2) the results obtained by the AAA in gathering information for identifying needs and resources and for establishing priorities, goals, and objectives.

To provide an understanding of how AAAs are planning to meet the challenges of the increasingly growing and diverse aging population identified as "Baby Boomers". [3] See Appendix XII.

It is expected that the needs identified by the assessment will lead directly to the establishment of priorities, goals, and objectives. Identification of needs should be comprehensive, extending beyond those areas in which funds can be expended. Needs which are currently being satisfied with funds other than those provided through CDA must be considered as well.

The assessment methods must be drawn from those mentioned in **PM 00-12 Needs Assessment Guidelines,**[4] and at a minimum, should lead to the collection of the information described in the core questionnaire. As a reminder, a description of targeted populations and their locations within the PSA is a REQUIRED element *(See Targeting Part One Section B).*

b. Required Content:

CCR Article 2, Section 7300 (a): Prior to the development of an Area Plan, each AAA shall conduct a needs assessment of the PSA in order to identify the following: [5]

- The target populations as defined in the OAA, OCA, and the CCR.
  - A description of past, present, and future efforts in the planning and service area that have been undertaken or are proposed to meet the challenges of the surge in the aging population, i.e., the "Baby Boomer" cohort. **See Appendix XII**

[3] Planning for an Aging California Population: Preparing for the "Aging Baby Boomers," California Strategic Plan on Aging Advisory Committee, California State Assembly, May, 2004.
[4] PM 00-12 is available on the CDA website.
[5] The Needs Assessment is to include the service issues and needs expressed and or identified by the "Boomer" population and their caregivers.

- The types and extent of existing and potential needs of older individuals in the PSA. *(This includes information related to older adults with disabilities, older adults with severe disabilities, older adults with limited English-speaking abilities, older adults in rural areas, and the caregivers of those individuals).*

- The services or resources existing within the PSA that are available for addressing the needs and constraints.

- A review of demographic data on older adults with greatest economic and social need with particular attention paid to low-income minorities, as well as caregivers of each target group.

c. <u>Questions</u>:

The AAA's narrative responses to this section must specifically address the following questions to meet the "Required Content" listed above:

1. Needs Assessment Activities:

    - o Why were the method(s) used selected?
    - o What are the characteristics of the individuals responding?
    - o What steps were taken to assure broad-based representation?
    - o How were the specific needs of targeted groups identified?
    - o What method(s) are used to identify minimum percentages of Title III B funds to be expended for Priority Services - Access, In-Home Services, and Legal Assistance? *(CCR Article 3, Section 7312(a)(1-3). (Also must complete Appendix V)*
    - o Did the methods vary from previous needs assessment(s)?
    - o Were convergent methods used for this needs assessment?

2. Findings from the Needs Assessment:

    - o Were there major gaps in services uncovered ?
    - o Do the identified needs reflect the current services provided?
    - o Did the needs assessment identify any duplicated or underutilized services?

- What are the existing barriers to accessing current services, particularly for targeted groups?

- Did the needs assessment reveal any significant new findings?

- If convergent methods were used, did they yield similar or different results? How were the differences explained and/or resolved?

- What types of resources were identified? Are there any new resources not previously considered?

Preparing for the Increased Senior Population in 2006 and Beyond

The AAA is required to address the questions below. This section is intended to help generate ideas and discussions as the community addresses how it might need to change services and systems. Governing Boards, Advisory Councils, community leaders, and citizens are the logical leaders of these discussions. **Ideas generated as a result of the dialogue are to be included in Year-End Reports.**

1. How can we best integrate service systems for the elderly and adults with disabilities while, at the same time, acknowledging and responding to differences between these population groups? (Examples might include use of telemedicine, Internet technology, computer access for communication purposes, etc.)

2. Who are the key stakeholders whose commitment and partnership are essential? (Examples might include health care providers, education and training institutions, major employers, etc.)

3. How can we assure we help empower individuals to remain as independent and engaged as possible for as long as possible? (Examples might include consumer surveys, customer friendly access to services, education, information sharing, etc.)

4. How can the arrangement of services be delivered to the consumer in a seamless, coordinated manner, regardless of program administration and jurisdiction? (Examples might include suggestions from consumers, stakeholders, program providers, program administrators, etc.)

5. What administrative hurdles and barriers to change need to be overcome at both the state and county/local level? (Examples might include an inability to “think outside the box”, poor communication, lack of awareness, etc.)

6. How do we provide a leadership and advocacy role in the development of service system standards that are uniform and not dependent upon income? In other words, how do we avoid having separate (and unequal) systems of care for low, moderate, and upper-income persons? (Examples might include using existing association organization meetings to review standards, consumer review, etc.)

7. How do we assure quality standards are maintained or developed across services regardless of the funding source and/or the service provider? (Examples may include consumer determination of quality, focused monitoring of service provision including consumers, testing new service delivery methods before finalizing standards, etc.)

3. TARGETING

Updates: Any change in the Required Content of this section must be included in the annual Updates.

a. Purpose:

To describe the targeting policies of the AAA to meet the needs of the populations the agency is entrusted to serve, as they relate to those established in the OAA, OCA, and regulations.

b. Required Content:

- A review of the targeting priorities established in the OAA, Sections 307 and 373(c)(1).
- A brief description of target populations within the PSA, their characteristics, locations, needs, and methods that were used to identify them (see below).
- A listing of the AAA's targeting priorities as they relate to those in the CCR Article 3, Section 7310.
- A description of how the needs of target populations within the PSA will be addressed.
- A description of barriers to accessing existing services encountered by targeted groups.

Description of Target Populations:

Identified target populations *(see OAA Section 102 for definitions)* include individuals with the characteristics listed below, who are living in the community or in long-term care facilities:

1. Older individuals with greatest economic need, with particular attention to low-income minority individuals. The term "greatest economic need" means the need resulting from an income level at or below the federal poverty line.
2. Older individuals with greatest social need, with particular attention to low-income minority individuals. The term "greatest social need" means the need caused by non-economic factors, which include:

a. Physical and mental disabilities;
b. Language barriers; and
c. Cultural, social or geographical isolation[6], including isolation caused by racial or ethnic status that: (1) restricts the ability of an individual to perform normal daily tasks or (2) threatens the capacity of the individual to live independently.

3. Older Native Americans.

4. Isolated, abused, neglected, and/or exploited older individuals.

5. Frail older individuals.

6. Older individuals residing in rural areas.

7. Older individuals who are of limited English-speaking ability.

8. Older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction and their caregivers.

9. Older individuals with disabilities, with particular attention paid to individuals with severe disabilities.

10. Unemployed low-income individuals who are 55 years of age or older (Title V).

11. Caregivers as defined in Title III E, which includes older caregivers providing care and support to persons with developmental disabilities [OAA Section 373(c)(1) and (2)].

c. <u>Questions</u>:

The AAA's narrative responses to this section must specifically address the following questions to meet the "Required Content" listed above:

- What are the targeting priorities established in the OAA, OCA, and regulations?

- What means were used to identify the targeted populations in the PSA and what are their identified needs?

[6] Rural: Per State Program Reports, PM 97-02, rural is defined as follows, "Rural status will be individually determined for each registered client, using the client's zip code matched to Census boundaries. The Census boundaries will then be matched to the Census definition of rural areas. Rural area, as defined by the Census, means any area that is not defined as urban. Urban is comprised of: Urbanized areas (a central place and adjacent densely settled territory with a combined minimum population of 50,000); and an incorporated place or a census designated place with 20,000 or more inhabitants. Census information by zip code can be found on the CDA website at www.aging.ca.gov then click AAA Partners.

- Who are the AAA's target populations? What are their characteristics and where are they located?

- Are members of targeted populations represented on the Advisory Council?

- Are the services being offered to target groups proportionate to the 60-plus populations at large?

- Did the needs assessment identify any barriers preventing or hindering services to targeted populations? Barriers could be any one or more of the following:

  - Geography
  - Language
  - Location
  - Culture
  - Attitude
  - Building Accessibility
  - Information
  - Limited Resources
  - Housing Adaptability

- What are the targeting priorities of the AAA and how do they relate to those established in the OAA and the CCR?

- What methods will be used to address the needs of target populations?

- What methods will be used to assure that preference is given to older individuals with greatest social and economic need with particular attention paid to low-income, minority individuals?

d. <u>Optional Questions Related to the Targeting Section:</u>

Has the AAA identified special populations to assure their representation and participation in the needs assessment and targeting process? Some suggested outreach efforts include, but are not limited to:

- Individuals in long-term care facilities, e.g., skilled nursing facilities (SNF) and residential care for the elderly facilities (RCFE).

- Retirees, widows, and other individuals 60 and over who live alone and have experienced major lifestyle changes or who may be experiencing mental health challenges, which have resulted in difficulty maintaining social contacts.

- Individuals who reside in neighborhoods that may be drug infested and crime ridden. These individuals may be economically or physically unable to relocate and are at a greater risk of isolation and victimization.

- Communities without a safety net for older individuals. Safety net is defined as neighbors, family, friends, agency presence, etc. For example, in the 1995 Chicago Heat Wave a number of older adults were found dead behind locked doors and sealed windows, out of contact with family and friends, neighbors, and unassisted by public agencies or community groups[7]. How do we access like older individuals and determine what services they need to thrive?

- Associations that represent particular minority populations, including seniors in the gay and lesbian community, and individuals with language barriers.

- Organizations or agencies that coordinate services for immigrant and refugee groups.

- Homeless individuals and community groups that advocate for the homeless.

- Younger members of the "Baby Boomer" cohort (born between 1946 and 1964) who should be educated about healthy aging and encouraged to participate in the planning process to bring their unique perspective. **See Appendix XII.**

- Caregivers of older individuals and those providing care in a grandparent capacity.

4. IDENTIFICATION OF PRIORITIES

Updates: Any change in the Required Content section must be included in the annual Updates.

a. Purpose:

To establish priorities for the planning cycle and describe the factors which influence their establishment.

The established priorities should clearly derive from the needs assessment, adequate proportion requirements, targeting, and any other concerns outlined by the AAA. The manner in which an AAA will plan for increased or decreased resources should be clear from the discussion of priorities. Goals and objectives discussed in Part Two Section A of the Area Plan should clearly relate to the priorities established in this subsection.

b. Required Content:

- A description of the AAA process for determining an "adequate proportion" of Title III B funds to be expended for Priority Services, which are identified as: Access, In-Home Services, and Legal Assistance, and described in the CCR Article 3, Section 7312 (a)(1-3). (*Considerations must be documented in Appendix V*)

[7] "Heat-Related Deaths during the July 1995 Heat Wave in Chicago", The New England Journal of Medicine. July 11, 1996.

- A description of how the AAA will meet the targeting mandates as described in the CCR Article 3, Section 7310. And, where does this population fall in the overall setting of priorities?

- An identification of priorities for the planning cycle, particularly as they relate to the needs assessment and the other considerations listed above or in the CCR Article 3, Section 7310(a) and (b).

- A description of other factors which influence prioritization.

c. <u>Questions</u>:

The AAA's narrative responses to this section must specifically address the following questions to meet the "Required Content" listed above.

- How did the considerations for determining the minimum percentage of Title III B funds to be designated for Priority Services influence the priorities established by the AAA?

- In what manner do the targeting priorities described in the OAA and the CCR influence priorities established by the AAA?

- Do the priorities listed clearly reflect the results of the needs assessment conducted by the AAA?

- What other considerations influenced the priorities established by the AAA? Examples include:

    - Amount of available funds

    - Other possible sources of funding or other resources

    - Administrative changes

    - Anticipated increase or decrease in other services or funding

    - Local administrative or political considerations

    - Anticipated increase or decrease in other services or funding

    - Anticipated increase or decrease in eligible populations

- How does the AAA use its knowledge of all programs and services in the PSA to leverage and maximize resource utilization?

- In addition to the above, what types of advocacy activities and collaborations will the Governing Board, the AAA, and the Advisory Council develop to address priorities that cannot be adequately funded with existing federal and State budget allocations? This is the opportunity for the AAA to highlight innovative collaborations and accomplishments that maximize local resources and improve the service system.

PART TWO: AREA PLAN GOALS AND OBJECTIVES

INTRODUCTION

Information from the analysis of the needs assessment findings, targeting, and identification of priorities is used to develop the goals and objectives of the Area Plan. Goals are broad concepts and a reflection of the AAA mission. Objectives are specific, and intended to meet specific conditions and help develop action plans.

The Area Plan consists of two types of objectives: System Building and Administration Objectives and Service Unit Plan Objectives.

1. **System Building and Administration Objectives:** Objectives that outline the desired conditions that the AAA intends to achieve through administration, service delivery activities, coordination activities, program development activities, and advocacy activities as required in Title 22, Article 3, Section 7302(a)(5). Area Agencies may not be able to fund all program development and coordination activities out of their administrative budgets to achieve Area Plan goals. The Federal government does allow use of Title III B funds for these purposes, under certain conditions. These additional conditions require public input e.g., hearing process, clear identification in the plan, area plan budget, and tracking of activities related to these objectives.

   - Title III B funded Program Development (PD) Objectives: Objectives that address only Program Development activities. These objectives require the use of funds allocated for services. AAAs must clearly explain to their communities (public hearing process) that these objectives are using funds that would otherwise be used on services in their communities.

   - Title III B funded Coordination (C) Objectives: Objectives that address only Coordination activities. These objectives require the use of funds allocated for services. AAAs must clearly explain to their communities (public hearing process) that these objectives are using funds that would otherwise be used on services in their communities.

2. Service Unit Plan Objectives: The units of service are considered objectives. The service units reported in the Service Unit Plan (SUP) Objectives format clearly delineate the programs and services provided by the AAA with OAA and OCA funds. SUP objectives must tie to a goal. The SUP objectives need not be restated as System Building and Administration Objectives**.**

Exceptions:

Because of the nature of **Disease Prevention/ Health Promotion and Medication Management activities,** the AAAs are also requested to continue providing **written objectives for all services provided with Title III D funds.** The objective should clearly explain the activity that is being performed to fulfill the service unit requirement.

Title III/VII Ombudsman and Elder Abuse programs also require **written objectives for all services provided with Title III Ombudsman and Title VII Elder Abuse funds.**

In addition to the data required for the Ombudsman Outcome Measures (previously identified as the Service Unit Plan), AAAs requested to provide one or more written Ombudsman and Elder Abuse Prevention specific objectives for all services provided with Title IIIB and Title VII funds. The request for written objectives is to improve the Program and to ensure the planning and delivery of significant activities. Ombudsman objectives should clearly explain activities that include, but are not limited to, a focus on enhancing/increasing systemic advocacy, outreach/marketing of the LTC Ombudsman Program, coordinating efforts of the AAA to assist the LTC Ombudsman Program, and /or increasing the number of volunteers.

SECTION A: GENERAL INSTRUCTIONS

1. Goals and Objectives Criteria

a. Purpose:

The purpose of this section is to provide general instructions for the development of goals and objectives, which are intended to clearly outline the desired condition(s) the AAA intends to achieve and the major steps to achieve these conditions.

Priorities for developing goals and objectives shall be based on: needs assessment findings, taking into consideration funding constraints, targeting mandates, and the adequate proportion/minimum percentage requirements for funding of Priority Services, as defined in *Part Two Section B* below.

b. Required Content:

1. Format

Each goal shall be presented in the format of "Goal, Rationale, and Objectives."

- Goals and objectives must be clearly identified by title and/or number.

- At a minimum, the Area Plan will include four-year goals and one-year objectives. AAAs may also write objectives for two, three or four-years.[8] New objectives for years two, three, and four also may be submitted in the Area Plan Update process.

- Objectives under each goal should follow in chronological order by projected starting date.

2. Goals

Goals are statements of ideal conditions that the AAA wishes to achieve through its planning efforts.

Key Elements:

- Goals describe a future vision;
- Goals tend to be broad, fairly general, and long-term; and
- Goals are not normally quantitative.

Considerations for Developing Goals Should:

- Address client or consumer needs as identified in the needs assessment;

- Pertain to a specific service or to a program-related state or condition;

- Propose the ideal or improved condition for delivery of service within a specified program area (transportation, nutrition, case management, etc.); and

- Be written to accommodate more than one funding source or service to meet a specific need.

3. Rationale

   The rationale is the fundamental reason for the goal, as derived from the needs assessment results in combination with the AAA's mission and priorities.

4. Objectives

   Objectives are measurable statements of action to meet the goals. Objectives are **required** to include the following:[9]

[8] Does not apply to PD or C objectives. PD or C Objectives are time-limited.
[9] Staff must also note if an objective is PD or C.

- ☑ The nature of the action
- ☑ The party responsible for the action
- ☑ How the action will be accomplished
- ☑ The anticipated outcome of that action
- ☑ How the outcome of the action will be measured
- ☑ The projected dates for starting and completing the action

4a. **Examples of Objectives**

Unacceptable Objective
Objective: Fund a Health Day event to promote healthy living and fitness by June 2006.

What requirements are met?
This Objective does identify the “nature of the action”-Health Day.
What is missing?

- Does it tell you the party responsible for organizing the Senior Health Day?
- Does it tell you how this event will be accomplished?
- Does it tell you what outcome the AAA is expecting from this event?
- Does it tell you how the AAA will measure this outcome?
- Does it tell you the projected dates for starting and completing the action?

Acceptable Objective [10]

The Fresno/Madera Area Agency on Aging (FMAAA) Care Management staff will continue to conduct presentations at home health agencies, hospitals, in-home care providers, skilled nursing facilities, adult day health care centers, and other local institutions to increase the number of referrals for the MSSP Care Management service. To assure a minimum of 30 referrals monthly, a minimum of 24 presentations will be provided to home and community based service providers and the general public during FY 2005-2006.

Does this Objective meet all of the requirements?

1. <u>The nature of the action:</u> conduct presentations at home health agencies, hospitals, in-home care providers, skilled nursing facilities, adult day health care centers, and other local institutions.

2. <u>The party responsible for the action</u>: FMAAA Care Management staff.

3. <u>How the action will be accomplished:</u> a minimum of 24 presentations will be provided to home and community based service providers and the general public.

[10] Thank you to PSA 14 for the example.

4. The anticipated outcome of that action: increase the number of referrals for the MSSP Care Management service.

5. How the outcome of the action will be measured: a minimum of 30 referrals monthly.

6. The projected dates for starting and completing the action: Ongoing project will continue through FY 2005-20

SECTION B: GOAL AND OBJECTIVE GUIDELINES

1. SYSTEM BUILDING AND ADMINISTRATIVE GOAL AND OBJECTIVE GUIDELINES

Updates: The Goals and Objectives Format (provided at the end of the Coordination Objectives instruction section) must be updated annually, while retaining all objectives for the Four-Year Area Plan.

a. Purpose:

The purpose of the goals and objectives developed by the AAA is to reflect the AAA's anticipated efforts to improve services through the four-year planning period. The objectives also provide documentation through which the AAA and the Advisory Council may monitor progress and outcomes of the Area Plan.

Objectives outline the desired conditions the AAA intends to achieve through administration, service delivery activities, coordination activities, program development activities, and advocacy activities as required in the CCR Article 3, Section 7302(a)(5).

b. Required Content:

- All AAA goals must be reported in this section in the Goals and Objectives Format.
- All System Building and Administrative objectives must be included in this section in the Goals and Objectives Format.
- The prescribed Goals and Objectives Format is located at the end of the Coordination Objectives section.
- The Goals and Objectives Format is intended to maintain a permanent, progressive record of objectives under each goal.
- The format may be recreated and modified to incorporate the needs of the AAA as long as all of the CDA required elements are included.
- When an objective is completed or deleted, indicate the status in the format provided and continue with a consecutive numbering system.
- The format must be used to maintain and submit goals and objectives for the annual Area Plan Updates and Year-End Reports.

Goals and objectives must be developed to meet the Targeting and Priority Services requirements below:

1. Targeting

   As required in the CCR Article 3, Section 7310, and within existing funding constraints, objectives are required to address the needs of targeted populations. *(See Targeting Part One Section B)*

2. Priority Services ("Adequate Proportion" of Title III B funding)

   To comply with the CCR Article 3, Section 7312, there must be objectives to address the adequate proportion/minimum percentage requirements for Title III B Priority Services. Adequate proportion refers to the minimum amount of Title III B "Other Supportive Services" program funds determined by the AAA to be sufficient for provision of services in each category defined as a "Priority Service." These services include activities related to Access, In-Home Services, and Legal Assistance *(Appendix V must be completed).*

- At the beginning of the four-year planning cycle, the AAA must establish minimum percentages (one per cent or more) that were determined during the planning process, discussed at the public hearings, and published in the Area Plan.

- The minimum percentages submitted to CDA will be published in the State's four-year plan, and the State Plan will be sent to the federal Administration on Aging for review and approval.

- An AAA may make revisions to the minimum percentages at any time if necessary to adjust to the resources available. If the level is to be reduced, the AAA must follow the process specified in the CCR Article 3, Section 7312(f) and submit a revised Appendix V.

- If an AAA determines that the need for a priority service is fully met without the need to expend Title III B funds, the AAA must carry out the waiver process specified in the CCR Article 3, Section 7312(f) and document the process in Appendix V.

c. Questions:

The AAA's narrative responses to this section must specifically address the following questions to meet the "Required Content" listed above:

- Were the goals and objectives developed from priorities identified by the AAA based upon the needs assessment and taking into consideration funding constraints, targeting mandates, and adequate proportion/minimum percentage requirements for Title III B Priority Services, as required by the CCR Article 3, Section 7300 (c)?

- Do the objectives reflect activities that create, expand, enhance, or otherwise improve services that the AAA provides with OAA and OCA funds, either directly or through contracts with other organizations?

d. <u>Resource for Development of Goals and Objectives.</u> This section includes considerations for development of goals and objectives, with specific suggestions for including activities related to the Family Caregiver Support Program, the Long-Term Care Ombudsman Program, the Legal Services Program, the Title VII-B Elder Abuse Prevention program, and the Community Based Service Programs (CBSP).

1. <u>System Building and Administrative Objectives Considerations</u> - Considerations for development of System Building and Administrative objectives are as follows:

- A separate goal may be developed for each program or service, or objectives related to specific programs may be included under broader goals, such as those that propose to improve the quality of life or the service system. All objectives must tie to a goal.

- Objectives to enhance existing services, such as increased outreach, program expansion, and quality improvement, can be developed in partnership with other agencies.

- Explore creative sources of volunteer assistance through local businesses. For example, develop agreements with local management to give employees an extra hour at lunchtime to deliver meals to frail older individuals.

- How can the AAA plan and advocate for improvements in community based systems that will make more efficient use of existing resources?

- What impact can the AAA and the Advisory Council have on improving community resources, such as housing, transportation, crime prevention, health care services/facilities and other local resources that will result in improved living conditions throughout the PSA?

- How can the AAA identify, locate, and include in the planning process or otherwise serve those individuals who live in care facilities, live alone, live in low-income housing, those served by independent living centers, the homeless, and other special populations.

- Are there businesses or corporations in the PSA that the AAA could call upon for community collaborative efforts, such as fund raising; in-kind donations, including office space, equipment or staff assistance, a venue through which

AAA staff may provide an overview of services for employees who are caring for older family members, are anticipating retirement and who may be caring for grandchildren?

- Are there businesses that may be interested in developing a contract with the AAA to provide services through referrals from the Employee Assistance Program, etc.?

2. Elderly Nutrition Program

- Objectives that enhance the Title III C congregate meal program while reflecting the needs of the "Baby Boomer" population.

- Objectives that address the increasing demand for Title III C home-delivered meals, e.g., innovative sources of funding.

- Objectives to address the decline in meals served in the Title III CI and CII programs.

3. Family Caregiver Support Program (FCSP)
   Specialized considerations for development of the FCSP objectives are as follows:

- Coordinate FCSP activities funded by the AAA with other community agencies and voluntary organizations that provide similar types of services.

- Assure that FCSP activities funded by the AAA do not supplant or duplicate family caregiver services supported by other public funds, including:

  - Medi-Cal funding for the Multipurpose Senior Services Program;

  - Funding for Linkages-related services;

  - Title III B in-home services targeted to families of older individuals with cognitive impairments; and

  - California Department of Mental Health funding for Caregiver Resource Centers.

- Establish standards for demonstrating the effectiveness of FCSP services, such as:

  - A decrease in the number of caregivers who report difficulty in getting services;

- An increase in family caregivers reporting that AAA-funded FCSP services have definitely helped them to provide care for a longer period;
- An increase in the number of nursing-home eligible older individuals successfully being cared for at home by family members;
- An increase in the client-to-funding ratio, e.g., through the use of assistive technology and volunteers with no decline in services; and
- A reduction in the lag time for meeting caregiver needs.

4. Long-Term Care Ombudsman Program - Specialized considerations for development of the Long-Term Care Ombudsman Program objectives are as follows:

   - Recommendations/suggestions for enhancing and/or increasing systemic advocacy that would benefit residents of long-term care facilities.
   - Outreach, marketing of the Long-Term Care Ombudsman Program, and measurement of resident satisfaction with services.
   - Coordinating efforts of the AAA to assist the Long-Term Care Ombudsman Program in achieving objectives, including the provision of technical assistance to Program staff.
   - Activities related to increasing the number of volunteer Long-Term Care Ombudsmen.

5. Legal Assistance Program - Specialized considerations for development of the Legal Assistance Program objectives are provided as follows:

   - Establish standards for contracting with the legal services provider best able to deliver legal assistance.
   - Recommendations/suggestions for developing or enhancing existing legal services.
   - Establish standards for demonstrating the efficiency and effectiveness of the legal services provider such as:
     - Increase in elder rights advocacy
     - Increase in legal services to older individuals in greatest economic and social need
     - Increase in number of new cases.

6. Elder Abuse Prevention
   Specialized considerations for the development of Elder Abuse Prevention objectives are provided as follows:

   - Recommendations/suggestions for developing/enhancing programs for the prevention and treatment of elder abuse, neglect, and exploitation.

   - Providing for public education and outreach to identify and prevent elder abuse, neglect, and exploitation.

   - Ensuring the coordination of services provided by AAAs with services provided by Adult Protective Services.

   - Conducting training for individuals, professionals, and paraprofessionals in relevant fields on the identification, prevention, and treatment of elder abuse, neglect, and exploitation, with particular focus on prevention and enhancement of self-determination and autonomy.

   - Providing technical assistance to programs that provide or have the potential to provide services to victims of elder abuse, neglect, and exploitation and for family members of the victims.

7. CBSP Specialized considerations for development of objectives for each CBSP are provided below:

   - Alzheimer’s Day Care Resource Center (ADCRC) Program

     - Recommendations/suggestions for enhancing and/or increasing dementia-specific program services;

     - Outreach, marketing of the ADCRC program, and measurement of caregiver satisfaction; and

     - Coordinated efforts of the AAA to assist ADCRCs to achieve their objectives, including the provision of technical assistance and training to site staff.

   - Brown Bag Program

     - Activities related to increasing the number of distribution sites and variety of food products distributed; and

     - Activities associated with the operation of the program.

   - Linkages Program

     - Provision of staff training for new and existing staff;

- Strategies for outreach to underserved populations;
- Changes in service area description; and
- Activities associated with the operation of the program.

- Respite Purchase of Service (RPOS)
  - Activities associated with the operation of the program.

- Senior Companion Program
  - Number of Volunteer Service Years (VSYs) provided for a specific activity, community, etc.

- Health Insurance Counseling and Advocacy Program (HICAP)
  - Strategies for outreach to underserved populations; and
  - Activities associated with the operation of the program.

2. TITLE III B FUNDED PROGRAM DEVELOPMENT (PD) OBJECTIVES GUIDELINES

<u>Updates</u>: **The status of PD objectives must be updated annually, while retaining the history of the objectives.** (See the Goals and Objectives Format provided at the end of the Coordination Objectives instruction section)

a. <u>Purpose</u>:

The purpose of this section is to clearly define the reason and requirements for using Title III B funds for PD activities.

<u>Program Development</u>: PD defines those activities that either establish a new service or expand or integrate existing services.

When the AAA does not have sufficient administrative funds to meet all program development needs, Title III B "Other Supportive Services" program funds may be used to develop or expand a program. Title III B funds designated for this purpose may then be used for administrative-type activities to enhance any program in the service system. The PD objectives may include a variety of action steps to accomplish an activity. Once the new program or service or site has been developed or enhanced, the PD funding will cease and ongoing activities must be funded through the appropriate program budget.

b. <u>Required Content</u>:

<u>Title III B funded PD activities must include all of the following elements</u>:

- **Specificity**: Activities must be directed toward a specific service goal or objective in the Area Plan.
- **Consistent with Budgeting Cycles**: Activities must occur during a specifically defined period.
- **Documented Time Records:** Time spent on each PD activity must be documented by the use of employee time records for each staff assigned responsibilities for these activities.

<u>The Code of Federal Regulations (CFR) sets the following minimum requirements for expenditure of Title III B program funds for PD activities:</u>

- The AAA shall not expend funds for PD activities until it has first spent the Total Title III-Allocation for Administration costs. [45 CFR Part 1321.17(f)(14)(i)]

- The AAA shall annually submit to the general public for review and comment the details of proposals to pay for PD activities. [45 CFR Part 1321.17(f)(14)(ii)]

- The AAA shall provide assurances that any such expenditure will have a direct and positive impact on the enhancement of services for older persons in the PSA. [45 CFR Part 1321.17(f)(14)(iii)]

-

<u>If the AAA uses Title III B program funds for PD activities, specific criteria must be met:</u>

- PD objectives must be written to define the activity and anticipated outcome.

- Objectives must be identified as PD on the Goals and Objectives Format provided in the Guidelines.

- The public and service providers must be given an opportunity to comment on the proposed expenditures. *(The PD&C comments section of Appendix II, Public Hearings, must be completed)*

- All objectives in the FIRST year of the four-year Area Plan must be designated as NEW, including objectives that were not completed during the previous Area Plan cycle.

- While PD activities must be specific, time limited, and documented, they may be repeated in subsequent years if the outcome of each event is specific and directly related to improving services to seniors in the PSA. If a PD objective is not completed in the initial fiscal year and activities are to be continued in the following year, the objective must be revised and restated to include the remaining or additional tasks.

- Multiple year PD objectives may be written in order to accomplish a specific program development activity during the four-year planning cycle as long as the objectives for each year are unique and reflect incremental progress for completion of specific activities within each year, and the budget

- for each applicable year reflects PD allocations for pertinent activities. (See the four-year PD objective(s) example in the section below)

<u>Examples of Program Development Activities/Objectives</u>:

☑ Increase the number of participants in the C-1 program by establishing a culturally competent congregate nutrition site for Cambodian older adults where a concentration of Cambodian older persons resides. *To be accomplished by June 30, 2006.*

☑ Develop a nutrition site to serve the isolated Russian community in West County *by June 30, 2009*:

- Year One: Conduct surveys of older residents and local service providers to determine the types of existing resources, and the need and feasibility of whether to develop a new nutrition site or combine with an existing service. *To be completed by June 30, 2006*.

- Year Two: Research locations, potential service facilities, food costs, and transportation resources in the targeted communities. Issue a Letter of Intent to determine interest of vendors/contract agencies. *To be completed by April 1, 2007.*

- Year Three: Develop and issue an RFP for a meal site that can provide both congregate and home-delivered ethnic meals. Determine whether a qualified contractor is available or if the AAA will need to develop a direct-service nutrition program. *To be completed by June 30, 2008.*

- Year Four: Award the contract and/or open the new site by *January 1, 2009*.

3. TITLE III B FUNDED COORDINATION (C) OBJECTIVES GUIDELINES

<u>**Updates**</u>**: The status of (C) objectives must be updated annually, while retaining the history of the objectives.** (See the Goals and Objectives format at the end of this section.)

a. <u>Purpose</u>:

The purpose of this section is to clearly define the reason and requirements for using Title III B funds for (C) activities.

<u>Definition:</u> Definition from Area Plan Contract
Coordination means activities that involve the active participation of the Area Agency on Aging (AAA) staff to include liaison with non-OAA funded agencies and organizations for the purpose of avoiding duplication, improving services, resolving problems related to service delivery, and addressing the service needs of the eligible service population.
When the AAA does not have sufficient administrative funds to meet all coordination needs, Title III B "Other Supportive Services" program funds may be used for (C) activities with other community organizations to improve the senior service system. Title III B funds designated for this purpose may then be used for administrative-type activities to enhance any program in the service system. The (C) objectives may include a variety of action steps to accomplish an activity. Once a Coordination function has been completed, the ongoing activities must be funded by the appropriate program budget.

b. Required Content:

Title III B Funded Coordination (C) activities shall include all of the following elements:

- **Specificity:** Activities must be directed toward a specific service goal or objective in the Area Plan.
- **Consistent with Budgeting Cycles**: Activities must occur during a specifically defined period.
- **Documented Time Records:** Time spent on each (C) activity must be documented by the use of employee time records for each staff assigned responsibilities for these activities.

The Code of Federal Regulations (CFR) sets the following minimum requirements for expenditure of Title III B program funds for Coordination activities:

- The AAA shall not expend funds for (C) activities until it has first spent the total Title III-Allocation for administration costs. [45 CFR, Part 1321.17(f)(14)(i)]
- The AAA shall annually submit to the general public for review and comment the details of proposals to pay for (C) activities. [45 CFR, Part 1321,17(f)(14)(ii)]
- The AAA shall provide assurances that any such expenditure will have a direct and positive impact on the enhancement of services for older persons in the PSA. [45 CFR Part 1321.17(f)(14)(iii)]

If the AAA uses Title III B program funds for (C) activities, specific criteria must be met:

- (C) objectives must be written to define the activity and anticipated outcome.
- Objectives must be identified as (C) on the Goals and Objectives Format provided in Part Two, Section B of the guidance.
- The public and service providers must be given an opportunity to comment on the proposed expenditures. (*The PD&C comments section of Appendix II Public Hearings must be completed)*
- The act of convening or attending a meeting does NOT satisfy the criteria for an objective. An objective must include the intended results or accomplishments of a meeting or a series of meetings.

- While (C) activities must be specific, time limited, and documented, they may be repeated in subsequent years if the outcome of each event is specific and directly related to improving services to seniors in the PSA. If a (C) objective is not completed and activities are to be continued in the following year, the objective must be revised and restated with the remaining or additional tasks.

- <u>All objectives in the FIRST year of a four-year plan must be considered NEW, including objectives that were not completed during the previous area plan cycle.</u>

Examples of Coordination Activities/Objectives[11]:

- ☑ AAA will partner with Community Solutions of Doctors Medical Center Foundation to promote seminars addressing grief, loss, depression, and loneliness. The seminars will be held in Modesto in September 2005 and will be measured by the attendance and commitment to future seminars. 7/1/05-9/30/05

- ☑ The AAA will coordinate with the Behavioral Health and Recovery Services (BHRS) department to conduct depression screenings at the 14 nutrition sites in the county during October, Depression Screening Month. Measurement will be by attendance at the screening sessions and by participation in follow-up sessions by the BHRS.

[11] Thank you to PSA 30 for the examples.

4. GOALS AND OBJECTIVES FORMAT

System-Building and Administrative Goals and Objectives
Including Program Development (PD) and Coordination (C) Objectives

Refer to Part Two: Introduction and Section A and Section B for complete directions

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- All goals and objectives for the **FIRST** year of the four-year Area Plan must be recorded as **NEW,** including objectives that were not completed during the last Area Plan cycle.

- If Title III B funds are used for **Program Development** <u>or</u> **Coordination** objectives, either **PD** <u>or</u> **C** must be indicated in the appropriate column. (*The PD&C section of Appendix II must be completed)*

  - **<u>Updates:</u>** The format below must be maintained for all four years of the Area Plan cycle, and the amended version must be submitted with each Area Plan Update.

▪

Goal Number _____ & Goal			
Rationale			
List Objective Number(s) ____ & Objective(s) [Must follow requirements specified in CCR Article 3, Section 7300 (c)]	**Projected Start & End Dates**	**Title III B Funded PD or C[12]**	**Status [13]**

[12] Indicate if Program Development (PD) **or** Coordination (C) – **cannot be both**. If a PD or C objective is not completed and is continued the following year, the objective must be revised and restated with the remaining or additional tasks.

[13] Status: Indicate if objective is **New, Continued, Revised, Completed**, or **Deleted.**

5. SERVICE UNIT PLAN (SUP) OBJECTIVES GUIDELINES

Updates: The SUP Objectives must be updated annually to include all of the requirements for the current year and must retain historical data through the four-year period.

a. Purpose:

The purpose of this section is to clearly delineate the programs and services provided by the AAA with OAA and OCA funding.

b. Required Content:

- The SUP Objectives for 2005 – 2009 are set up as “living documents” to capture service units by category for the four-year planning cycle. The SUP will retain a record of service units by fiscal year for the life of the document.

- Proposed service units by service category must be entered for all SUP objectives at the beginning of each new fiscal year for a minimum of one-year or for multiple years. Data for all prior years of the four-year planning cycle must be retained.

- All SUP Objectives (the units of service are considered objectives) must tie to a goal. The SUP Objectives need not be restated as System Building and Administration Objectives.
  Exceptions:
  The following programs require written objectives:
    a) Title III D
    b) Title III B Ombudsman and Title VII Elder Abuse

Title III D: Insert the number of units of service in the Disease Prevention/Health Promotion and Medication Management tables in the Title III D Service Unit Plan Objectives. Because of the nature of Disease Prevention/Health Promotion and Medication Management activities, the AAAs are also requested to provide written objectives for all services provided with Title III D funds. The objective should clearly explain the activity that is being performed to fulfill the service unit requirement. Include a brief written statement describing the Title III D activities in the Year-End Report.

Title III/VII Ombudsman and Elder Abuse:

In addition to the data required for the Ombudsman Outcome Measures (previously identified as the Service Unit Plan), AAAs are requested to provide one or more written Ombudsman and Elder Abuse Prevention specific objectives for all services provided with Title IIIB and Title VII funds. The request for written objectives is to improve the Program and to ensure the planning and delivery of significant activities. Ombudsman objectives should clearly explain activities that include, but are not limited to, a focus on enhancing/increasing systemic advocacy, outreach/marketing of the LTC Ombudsman Program, coordinating efforts of the AAA to assist the LTC Ombudsman Program, and/or increasing the number of volunteers.

- Where applicable, indicate the units of service to be provided with **all** funding sources, such as federal funds, State funds, NSIP, local funds, program income, etc. All programs identified with units of service must be listed in the budget.
- SUP objectives must be consistent with programs listed in the budget.
- Each SUP must be submitted in the prescribed format, as one complete section. If funding is not allocated for a particular service, check the "not applicable" box for that category and submit the entire SUP document.

  <u>Service Unit Plan (SUP) objectives are required for each of the following funding sources:</u>

  - Title III/VII Service Unit Plan;
  - Title III E Service Unit Plan;
  - CBSP Service Unit Plan;
  - Title V Service Unit Plan (if the AAA is a funding recipient); and
  - HICAP Service Unit Plan (each AAA must work with the managing AAA to complete this section).

c. Completing Title III/VII [14] and III E Service Unit Plan Objectives

- **<u>Fiscal Year</u>:** No entry required.
- **<u>Column 1</u>:** Proposed Units of Service. Proposed service units are required at the beginning of each fiscal year. The AAA has the option of projecting units for subsequent years as well.
- **<u>Column 2</u>:** List the goal number(s) to which the service units are tied.
- **<u>Column 3</u>**: List **all** additional goals and objectives that are related to this service category.

[14] Additional instructions for completion of the Ombudsman section of the Title III/VII SUP Objectives are in Section d.

d. <u>Completing Title III/VII Ombudsman Outcome Measures</u>

- **<u>Fiscal Year</u>:** No entry required

- **<u>Complete all tables</u>**

  - Baseline numbers can be obtained from each local Ombudsman Program's Fiscal Year 2003-04 National Ombudsman Reporting System (NORS) data. Outcome measures are listed as they appear in the Administration on Aging (AoA) Report. The appropriate sections of the AoA Report are referenced for each measure.

  - Targets are established by the local Ombudsman Coordinator, in consultation with the Area Agency on Aging, and are approved by the State Long-Term Care Ombudsman. In determining realistic targets, refer to your local program's last three years of NORS data. For example, a .5% to 2% increase in complaint resolution may be reasonable depending on the program and the program's average percent complaint resolution for the last three years. Targets should be reasonable and attainable.

e. <u>Completing Title V/SCSEP Service Unit Plan Objectives</u>

- **<u>Complete all tables</u>**

f. <u>Completing CBSP Service Unit Plan Objectives</u>

- **<u>Fiscal Year</u>:** No entry required

- **<u>Column 1</u>**: List the goal number(s) to which the service units are tied.

- **<u>Complete all tables</u>**

g. <u>Completing the HICAP Service Unit Plan Objectives</u>

AAAs that are regionally managing HICAP services for two or more PSAs (their own and others) through a Memorandum of Understanding (MOU) shall only report service units for their PSA. The managing AAAs must work cooperatively with the other AAAs in their HICAP jurisdiction to help them set each of the PSA service levels for HICAP.

<u>Each AAA must report HICAP service units to be performed within its PSA, whether it manages its own services or services are managed by another AAA through a MOU.</u>

It is the responsibility of all parties operating under a HICAP MOU to identify and agree, on an ongoing basis, the appropriate level of service funding and appropriate level of HICAP services to be performed within their PSAs in proportion to each

PSA's funding. A breakout of the prorated funding for each of the 33 PSAs for HICAP services will be available on CDA's website under "AAA-Partners."

- **Fiscal Year:** No entry required

- **Column 1:** Proposed Units of Service. Proposed service units are required at the beginning of each fiscal year. The AAA has the option of projecting units for subsequent years, as well.
- **Column 2:** List the goal number(s) to which the service units are tied.

- **Column 3**: List **all** additional goals and objectives that are related to this service category.

- **Complete all tables**

TITLE III/VII SERVICE UNIT PLAN OBJECTIVES
PSA #_____
2005 – 2009 Four Year Planning Period
CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) uses the National Aging Program Information System (NAPIS) Categories and units of service, as defined in PM 97-02 and may also be accessed via the following AoA link: http://www.aoa.gov/prof/agingnet/NAPIS/napis.asp. For services not defined in NAPIS, refer to Division 4000 of the Management Information Systems (MIS) Manual. Report units of service to be provided with **ALL funding sources**.

Related funding is reported in the annual Area Plan Budget (CDA 122) for Titles III B, III C-1, III C-2, III D, VII (a) and VII (b). This SUP does **not** include Title III E services.

For discretionary services that will not be provided, check the Not Applicable box☐.

TITLE III/VII

1. Personal Care (In-Home)

Units of Service = (1-Hour)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

2. Homemaker

Units of Service = (1-Hour)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			

2007-2008			
2008-2009			

3. Chore — **Units of Service = (1-Hour)**
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

4. Home-Delivered Meal — **Units of Service = (1-Meal)**
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

5. Adult Day Care/Adult Day Health — **Units of Service = (1-Hour)**
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

6. **Case Management** Units of Service = (1-Hour)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

7. **Congregate Meal** Units of Service = (1-Meal)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

8. **Nutrition Education** Units of Service = (1 session per participant)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

9. **Nutrition Counseling** Units of Service = (1 session per participant)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			

2006-2007			
2007-2008			
2008-2009			

10. Assisted Transportation **Units of Service = (One 1-way trip)**
Not Applicable: ☐(check)

■	**1**	**2**	**3**
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

11. Transportation **Units of Service = (One 1-way trip)**
Not Applicable: ☐(check)

■	**1**	**2**	**3**
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

12. Legal Assistance **Units of Service = (1-Hour)**
Not Applicable: ☐(check)

■	**1**	**2**	**3**
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

13. Information and Assistance

Units of Service = (1-Contact)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

14. Outreach

Units of Service = (1-Contact)
Not Applicable: ☐(check)

Note: The service units for information and assistance and for outreach are individual, one-on-one contacts between a service provider and an elderly client or caregiver. An activity that involves contact with multiple current or potential clients or caregivers (e.g., publications, publicity campaigns, and other mass media activities) should not be counted as a unit of service. Such services might be termed public information and reported on the public information category. They may also be reported in "Section II.E. – Utilization and Expenditures Profiles, Other Services Profile (Optional)."

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

15. NAPIS Service Category 15 – "Other" Title III Services

- In this section, identify all **Title III B** services (discretionary) to be funded that were not reported in NAPIS categories 1–14 above. (Identify the specific activity under the Service Category on the "Units of Service" line when applicable)
- Specify what activity constitutes a unit of service (1 hour, 1 session, 1 contact, etc.).
  (Reference Division 4000 of the MIS Operations Manual, January 1994)
- Each **Title III B** "Other" service must be an approved NAPIS Program 15 service listed on the "Schedule of Supportive Services (III B)" page of the Area Plan Budget (CDA 122). [**Title III B Example**: Service Category: Community Services/Senior Center Support. Units of Service: 1 hour – Activity Scheduling]

Title III B, "Other Supportive Services" [15]

Service Category:_____
Units of Service and Activity Ē (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III B, "Other Supportive Services"
Service Category:_____
Units of Service and Activity Ē (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III B, "Other Supportive Services"
Service Category:_____
Units of Service and Activity (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III B, "Other Supportive Services"
Service Category:_____
Units of Service and Activity (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers

[15] Other Support Services: Visiting (In-Home) now includes Telephoning (See Area Plan Budget).

2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III B, "Other Supportive Services"
Service Category:_____
Units of Service and Activity (_____)

■	**1**	**2**	**3**
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Description of Service:

____
____
____

Title III D, Disease Prevention/Health Promotion

- In this section, identify **Title III D** services (required); identify the specific activity under the Service Category on the "Units of Service" line when applicable.
- Specify what activity constitutes a unit of service (1 hour, 1 session, 1 contact, etc.).
  (Reference Division 4000 of the MIS Operations Manual, January 1994)
- **Title III D**: Insert the number of units of service in the Disease Prevention/Health Promotion and Medication Management tables in the Title III D Service Unit Plan Objectives. **Please refer to the Title III D Fact Sheet in Appendix IX and include an objective explaining the service units used.**

Insert the number of units of service in the Disease Prevention/Health Promotion and Medication Management tables in the Title III/VII Service Unit Plan Objectives. Because of the nature of Disease Prevention/ Health Promotion and Medication Management activities, the AAAs are also requested to continue providing written objectives for all services provided with Title III D funds. The objective should clearly explain the activity that is being performed to fulfill the service unit requirement. Include a brief written statement describing the III D activities provided in the Year-End Report.

Title III D, Disease Prevention/Health Promotion

Service Activity:_____
Units of Service (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers (Required for Title III D)
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III D, Disease Prevention/Health Promotion
Service Activity:_____
Units of Service (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers (Required for Title III D)
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III D, Disease Prevention/Health Promotion
Service Activity:_____
Units of Service (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers (Required for Title III D)
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III D, Disease Prevention/Health Promotion
Service Activity:_____
Units of Service (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers (Required for Title III D)

2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III D, <u>Disease Prevention/Health Promotion</u>
Service Activity:_____
Units of Service (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers (Required for Title III D)
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III D, <u>Medication Management</u> [16]
Service Activity:_____
Units of Service (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers (Required for Title III D)
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III D, <u>Medication Management</u>
Service Activity:_____
Units of Service (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers (Required for Title III D)
2005-2006			
2006-2007			
2007-2008			
2008-2009			

[16] Refer to Program Memo 01-03 and the Title III D Fact sheet in Resource Tools in the Appendices

Title III D, <u>Medication Management</u>
Service Activity:_____
Units of Service (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers (Required for Title III D)
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Title III D, <u>Medication Management</u>
Service Activity:_____
Units of Service (_____)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers (Required for Title III D)
2005-2006			
2006-2007			
2007-2008			
2008-2009			

LONG-TERM CARE OMBUDSMAN
(Title III B and Title VII a)

AREA PLAN OUTCOMES FOR THE LONG-TERM CARE OMBUDSMAN PROGRAM

<u>Mission</u>: As mandated by the Older Americans Act, the mission of the Long-Term Care Ombudsman Program is to seek resolution of problems and advocate for the rights of residents of long-term care facilities with the goal of enhancing the quality of life and care of residents. Baseline numbers are provided from each local Ombudsman Program's Fiscal Year (FY) 2003-2004 National Ombudsman Reporting System data. Targets are established by the local Ombudsman in consultation with the Area Agency on Aging and are approved by the State Long-Term Care Ombudsman.

For baseline data, please use your program's data which was submitted for the FY 2003-2004 State Annual Report to AoA. The source for this data is your local program's OmbudsManager reports.

1. ***The problems and concerns of long-term care residents are solved through complaint resolution and other services of the Ombudsman Program. [OAA Section 712(a)(3)(5)]***

<u>Measures and Targets:</u>

A. Complaint Resolution Rate (AoA Report, Part I-E, Actions and Complaints)

1. FY 2003-2004 Baseline: ___ complaints resolved plus ___ complaints partially resolved complaints divided by total complaints ___ equals Baseline ___%
2. FY 2007-2008 Target: ___% resolution rate
3. FY 2008-2009 Target: ___% resolution rate
Associated Program Goals and Objective Numbers:

B. Work with Resident Councils (AoA Report, Part III-R, #8)

1. FY 2003-2004 Baseline: ___ number of meetings attended
2. FY 2007-2008 Target: ___ number and ___% increase
3. FY 2008-2009 Target: ___ number and ___% increase
Associated Program Goals and Objective Numbers:

C. Work with Family Councils (AoA Report, Part III-F, #9)

1. FY 2003-2004 Baseline: ___ number of meetings attended
2. FY 2007-2008 Target: ___ number and ___% increase
3. FY 2008-2009 Target: ___ number and ___% increase
Associated Program Goals and Objective Numbers:

D. Consultations to Facilities (AoA Report, Part III-F, #4)

1. FY 2003-2004 Baseline: ___ number of consultations
2. FY 2007-2008 Target: ___ number and ___% increase
3. FY 2008-2009 Target: ___ number and ___% increase
Associated Program Goals and Objective Numbers:

E. Information and Consultations to Individuals (AoA Report, Part III-F, #5)

1. FY 2003-2004 Baseline: ___ number of consultations
2. FY 2007-2008 Target: ___ number and ___% increase
3. FY 2008-2009 Target: ___ number and ___% increase
Associated Program Goals and Objective Numbers:

F. Community Education (AoA Report, Part III-F, #10)

1. FY 2003-2004 Baseline: ___ number of sessions
2. FY 2007-2008 Target: ___ number of sessions and ___% increase
3. FY 2008-2009 Target: ___ number of sessions and ___% increase
Associated Program Goals and Objective Numbers:

G. Systems Advocacy

1. FY 2007-2008 Target: Please provide at least one example of a significant systemic advocacy effort in each local Ombudsman Program.

(Examples: working with law enforcement to improve response and investigation of abuse complaints, collaborations with other agencies to improve quality of care to residents, disaster preparedness planning, presentations to legislators and local officials regarding quality of care issues etc)

Measures and Targets:

2. ***Residents have regular access to an Ombudsman. [OAA Section 712(a)(3)(D), (5)(B)(ii)]***

A. Regular Nursing Facility Resident Visitation (AoA Report, Part III-F, #6)
The target should be 100% of facilities visited. Refer to the NORS definition of regular visitation, which is at least one visit on a quarterly basis.

1. FY 2003-2004 Baseline: ___% (____ number of regular visitations divided by the number of _____ nursing facilities)
2 FY 2007-2008 Target: ___% increase in the number of regular resident visitations
3. FY 2008-2009 Target: ___% increase in the number of regular resident visitations
Associated Program Goals and Objective Numbers:

B. Regular Residential Care Facility for the Elderly Resident Visitation
(AoA Report, Part III-F, #6 – board and care facilities) The target should be 100% of facilities visited. Refer to the NORS definition of regular visitation, which is at least one visit on a quarterly basis.

1. FY 2003-2004 Baseline: ___% (_____ number of regular visitations divided by the number of _____ licensed residential care facilities for the elderly)
2. FY 2007-2008 Target: ___% increase in number of regular resident visitations
(_____ number of regular visitations divided by the number of _______ residential care facilities for the elderly)
3. FY 2008-2009 Target: ___% increase in number of regular resident visitations
(_____ number of regular visitations divided by the number of _______ residential care facilities for the elderly)
Associated Program Goals and Objective Numbers:

C. Number of Full-Time Equivalent (FTE) Paid Staff Ombudsmen
(One FTE generally equates to 40 hours per week or 1,760 hours per year)

1. FY 2003-2004 Baseline: ____ FTEs
2. FY 2007-2008 Target: ____ and ___% increase

3. FY 2008-2009 Target: ____ and ___% increase
Associated Program Goals and Objective Numbers:

D. Number of Certified Volunteer Ombudsmen

1. FY 2003-2004 Baseline: _____
2.FY 2006-2007 Current Number:_____ after decertification FY 2007-2008 Target: ___ number and ___% increase FY 2008-2009 Target: ___ number and ___% increase
Associated Program Goals and Objective Numbers:

Measures and Targets:

3. Ombudsmen report their complaint processing and other activities accurately and consistently. [OAA Section 712(c)]

A. ***Each Ombudsman Program provides regular training on the National Ombudsman Reporting System (NORS).***

1. FY 2003-2004 Baseline: _____ number of NORS Part I, II or III training sessions completed.
2. FY 2007-2008 Target: _____ number of NORS Part I, II and III training sessions planned.
3. FY 2008-2009 Target: _____ number of NORS Part I, II and III training sessions planned.
Associated Program Goals and Objective Numbers:

Total # of Training Sessions for Caregivers as Referenced under Title IIIE: 2008-2009 ____

ELDER ABUSE PREVENTION SERVICES (TITLE VII b)

Actual Units of Service for the tables below will be reported in NAPIS Service Category 15.
The services provided with the units of service will be reported in the Year End Report.
Activities that support the coordination of elder abuse prevention, investigation, and/or prosecution.

Units of Service = (1 Hour)

■	1		3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Other Title VII b activities from Division 4000.

Service Category:_____ **Units of Service** Ē **(_____)**

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Service Category:_____ **Units of Service (_____)**

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

Other Program Accomplishments

Fiscal Year	Total # of Public Education Sessions
2005-06	
2006-07	
2007-08	

Fiscal Year	Total # of Training Sessions for Professionals
2005-06	
2006-07	
2007-08	

2008-09	

2008-09	

Fiscal Year	Total # of Educational Materials Developed (Products)
2005-06	
2006-07	
2007-08	
2008-09	

Fiscal Year	Total # of Educational Materials Distributed (Documents)
2005-06	
2006-07	
2007-08	
2008-09	

TITLE III E SERVICE UNIT PLAN OBJECTIVES
PSA #____
2005 – 2009 Four Year Planning Period
CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) utilizes the service categories defined in PM 03-10. Related Title III E funding is reported in the Area Plan Budget (CDA 122). This SUP is for the reporting of Title III E services **only**.

Report units of service to be provided with **ALL funding sources**.

For services that will not be provided, check the Not Applicable box ☐

TITLE III E

1. Outreach

Units of Service = (1-Contact)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

2. Community Education

Units of Service = (1-Hour)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

3. Information and Assistance

Units of Service = (1-Contact)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

4. Comprehensive Assessment

Units of Service = (1-Hour)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

5. Case Management

Units of Service = (1-Hour)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

6. Transportation

Units of Service = (One 1-way trip)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

7. Assisted Transportation

Units of Service = (One 1-way trip)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

8. Counseling

Units of Service = (1-Hour)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			

2007-2008			
2008-2009			

9. Caregiver Support Group

Units of Service = (1-Hour Meeting)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

10. Caregiver [17] Training

Units of Service = (1-Contact)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

11. Respite Care Services

Units of Service = (1-Hour)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

12. Minor Home Modifications

Units of Service = (1-Occurrence)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

[17] Caregiver: As defined in the Title III E Program: Unpaid, informal assistance provided by supportive family members or friends.

13. Placement

Units of Service = (1-Placement)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

14. Homemaker

Units of Service = (1-Hour)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

15. Chore

Units of Service = (1-Hour)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

16. Home Security & Safety

Units of Service = (1-Occurrence)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

17. Assistive Devices

Units of Service = (1-Single Occurrence)
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			

2008-2009			

18. Visiting **Units of Service = (1-Hour)**
Not Applicable: ☐(check)

■	**1**	**2**	**3**
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

19. Congregate Meals **Units of Service = (1-Meal)**
Not Applicable: ☐(check)

■	**1**	**2**	**3**
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

20. Home Delivered Meals **Units of Service = (1-Meal)**
Not Applicable: ☐(check)

■	**1**	**2**	**3**
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

21. Legal Assistance **Units of Service = (1-Hour)**
Not Applicable: ☐(check)

■	**1**	**2**	**3**
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

22. Peer Counseling **Units of Service = (1-Hour)**
Not Applicable: ☐(check)

■	**1**	**2**	**3**
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers

2005-2006			
2006-2007			
2007-2008			
2008-2009			

23. Translation/Interpretation **Units of Service = (1-Hour)**
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

24. Income Support/Material Aid **Units of Service = (1-Occurrence)**
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

25. Money Management **Units of Service = (1-Hour)**
Not Applicable:☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

26. Registry **Units of Service = (1-Match)**
Not Applicable: ☐(check)

■	1	2	3
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

<u>Other – Specify:</u>

Service Category:_____ **Units of Service: _____ entry required**
Requires PRIOR CDA Approval **Not Applicable: ☐(check)**

■	**1**	**2**	**3**
Fiscal Year	**Proposed** Units of Service	Goal Numbers	Associated Program Goal and Objective Numbers
2005-2006			
2006-2007			
2007-2008			
2008-2009			

TITLE V/SCSEP SERVICE UNIT PLAN OBJECTIVES

PSA #_____[18]

2005 – 2009 Four Year Planning Period

CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) utilizes the new Data Collection System developed by the U.S. Department of Labor (DOL), which captures the new performance measures per the Older Americans Act of 1965 as amended in 2000, and the Federal Register 20 CFR Part 641. The related funding is reported in the annual Title V/SCSEP Budget.

Note: Before the beginning of each federal Program Year, DOL negotiates with the California Department of Aging to set the baseline levels of performance for California. Once determined, those baseline levels will be transmitted to the AAA.

Title V/SCSEP

■		■	■
Fiscal Year (FY)	CDA Authorized Slots	National Grantee Authorized Slots (If applicable)	Associated Program Goal and Objective Numbers
2005-06			
2006-07			
2007-08			
2008-09			

[18] If not providing Title V, enter PSA number followed by "Not Providing".

<u>COMMUNITY BASED SERVICES PROGRAMS</u>
<u>SERVICE UNIT PLAN (CBSP) OBJECTIVES</u>:
PSA #____
2005 – 2009 Four Year Planning Period
CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) follows the instructions for layouts provided in PM 98-26 (P) and updated in PM 00-13 (P). The related funding is reported in the annual Area Plan Budget (CDA 122). Report units of service to be provided with **<u>ALL</u> funding sources.**

For services that will not be provided, check the Not Applicable box ☐

CBSP

<u>Alzheimer's Day Care Resource Center (ADCRC</u>) Not Applicable: ☐(check)

■	■
Fiscal Year	Goal Numbers
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■	■
Fiscal Year	Caregiver Group Support Sessions
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■	■
Fiscal Year	In-Service Training Sessions
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■	■
Fiscal Year	Public/Community Education Training Sessions
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■	■
Fiscal Year	Professional/Intern Educational Training Sessions
2005-2006	
2006-2007	
2007-2008	
2008-2009	

Brown Bag

Not Applicable: ☐(check)

■ Fiscal Year	■ Goal Numbers
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■ Fiscal Year	■ Estimated # of Unduplicated Persons to be Served
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■ Fiscal Year	■ Estimated Pounds of Food to be Distributed
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■ Fiscal Year	■ Estimated # of Volunteers Hours
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■ Fiscal Year	■ Estimated # of Volunteer Hours
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■ Fiscal Year	■ Estimated # of Distribution Sites
2005-2006	
2006-2007	
2007-2008	
2008-2009	

(CBSP) Respite Purchase of Services – RPOS

Not Applicable: ☐(check)

■ Fiscal Year	■ Goal Numbers
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■ Fiscal Year	■ Estimated Total Number of Respite Hours Purchased (Includes In-home, Day Care and Institutional hours)
2005-2006	
2006-2007	
2007-2008	
2008-2009	

CBSP) Respite Purchase of Services – RPOS

■	■
Fiscal Year	Estimated Number of In-Home Hours to be purchased
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■	■
Fiscal Year	Estimated Number of Day Care Hours to be Purchased
2005-2006	
2006-2007	
2007-2008	
2008-2009	

(CBSP) Respite Purchase of Services – RPOS

■	■
Fiscal Year	Estimated Number of Institutional Hours to be Purchased
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■	■
Fiscal Year	Estimated Number of Unduplicated Clients Served
2005-2006	
2006-2007	
2007-2008	
2008-2009	

Linkages

Not Applicable: ☐(check)

■	■
Fiscal Year	Goal Number
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■	■
Fiscal Year	Number of Unduplicated Clients Served (Include Targeted Case Management and Handicapped Parking Revenue)
2005-2006	
2006-2007	
2007-2008	
2008-2009	

Fiscal Year	Active Monthly Caseload (Include Targeted Case Management and handicapped parking revenue)
2005-2006	
2006-2007	
2007-2008	
2008-2009	

Senior Companion **Not Applicable: ☐(check)**

■ Fiscal Year	■ Goal Numbers
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■ Fiscal Year	■ Volunteer Service Years (VSYs)
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■ Fiscal Year	■ Volunteer Hours
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■ Fiscal Year	■ Senior Volunteers
2005-2006	
2006-2007	
2007-2008	
2008-2009	

■ Fiscal Year	■ Seniors Served
2005-2006	
2006-2007	
2007-2008	
2008-2009	

HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP)
SERVICE UNIT PLAN
PSA # ___

2005- 2009 Four Year Planning Period
CCR Article 3, Section 7300 (d)

The Service Unit Plan (SUP) uses definitions that can be found at www.aging.ca.gov. After connecting with the Home Page, select "AAA Partners," then "Reporting Instructions," then select "**HICAP – Current Forms and Instructions as of June 2006**." HICAP reporting instructions and specifications, forms, and definitions critical to answering this SUP form are all centralized there. Or go directly to HICAP Reporting Instructions at: http://www.aging.ca.gov/aaa_business/reporting_instructions/reporting_instructions-Current_Forms_July_2006.html.

IMPORTANT NOTE FOR MULTIPLE PSA HICAPs: If you are a part of a multiple PSA HICAP where two or more AAAs enter into agreement with one "Managing AAA," then each AAA must enter its equitable share of the estimated performance numbers in the respective SUPs. Please do this in cooperation with the Managing AAA. The Managing AAA has the responsibility of providing the HICAP services in all the covered PSAs in a way that is agreed upon and equitable among the parties.

IMPORTANT NOTE FOR HICAPs with HICAP PAID LEGAL SERVICES: If your Master Contract contains a provision for HICAP funds to be used for the provision of HICAP Legal Services, you must complete Section 2.

If you have related goals in the Area Plan to Service Unit Plan, please list in 3rd column.

HICAP Services

Section 1. Three Primary HICAP Units of Service

State Fiscal Year (SFY)	Total Estimated Persons Counseled per SFY (Unit of Service)	Goal Numbers
2005-2006		
2006-2007		
2007-2008		
2008-2009		
State Fiscal Year (SFY)	**Total Estimated Number of Attendees reached in Community Education per SFY (Unit of Service)**	**Goal Numbers**
2005-2006		
2006-2007		
2007-2008		

2008-2009		

State Fiscal Year (SFY)	Total Estimated Number of Community Education Events Planned per SFY (Unit of Service)	Goal Numbers
2005-2006		
2006-2007		
2007-2008		
2008-2009		

Section 2. Three HICAP Legal Services Units of Service (if applicable)[19]

State Fiscal Year (SFY)	Total Estimated Number of Clients Represented per SFY (Unit of Service)	Goal Numbers
2005-2006		
2006-2007		
2007-2008		
2008-2009		
State Fiscal Year (SFY)	**Total Estimated Number of Legal Representation Hours per SFY (Unit of Service)**	**Goal Numbers**
2005-2006		
2006-2007		
2007-2008		
008-2009		
State Fiscal Year (SFY)	**Total Estimated Number of Program Consultation Hours per SFY (Unit of Service)**	**Goal Numbers**
2005-2006		
2006-2007		
2007-2008		
2008-2009		

19 Requires a contract for using HICAP funds to pay for HICAP Legal Services.

Section 3. Two HICAP Counselor Measures

Fiscal Year (FY)	Average Number of Registered Counselors for the SFY[20]
2005-2006	
2006-2007	
2007-2008	
2008-2009	

Fiscal Year (FY)	Average Number of Active Counselors for the SFY[21]
2005-2006	
2006-2007	
2007-2008	
008-2009	
2005-2006	

[20]The number of registered Counselors will vary throughout the year. This includes Paid Counselors, In-kind Paid Counselors, and Volunteer Counselors. For "average," how many Counselors you intend to keep on registered rolls at any given time.

[21]The number of active Counselors will vary throughout the year. This includes Paid Counselors, In-kind Paid Counselors, and Volunteer Counselors. The average number of active Counselors cannot be greater than the total average registered Counselors. At any given time, how many of the registered Counselors do you anticipate will actually be counseling? For example, you may anticipate that 85% of your Counselors would be working in the field at any given time. Use the number of Counselors this represents for the average active Counselors, a subset of all registered Counselors.

PART THREE: AREA PLAN MAINTENANCE 🗗

Introduction

Maintenance of the Area Plan includes not only following through in the planning process, but also includes annual Updates and Year-End Reports. The Area Plan Guidance provides Update instructions and reminders marked with “🗗” throughout the document.

The Reference Guide for the Four-Year Area Plan is formatted to allow for insertion of annual changes to be submitted as Area Plan Updates for 2006-2007, 2007-2008 and 2008-2009. The Reference Guide also allows for evaluation of activities at the end of each year which will lead to the development of the annual Year-End Report. This section provides directives for submission of required annual Updates and Year-end Reports, as well as Amendments to the Area Plan any time a major change occurs that affects the AAA goals and/or objectives.

AAA Reporting Responsibilities

Report Due Dates. Area Plans, Budgets, Area Plan Updates, and Year-End Reports are due to CDA on the dates listed on the tables provided on the following pages. The due dates are firm and there are no provisions for granting individual extensions. If the AAA will be unable to meet the deadline, staff must notify CDA **immediately** of the anticipated submission date and the reason for the delay.

It is the responsibility of AAA staff to schedule items for the Governing Board and Advisory Council meeting agendas to assure that documents will be reviewed and approved in accordance with meeting CDA timelines. (*See submittal tables in Part Three Section A*)

Late Reports. If an Area Plan, Update, or Year-End Report will be delayed while waiting for the Transmittal Letter to be signed, the AAA may send a preliminary copy to CDA. The copy must be clearly marked DRAFT, with a cover letter explaining the reason for the delay and the anticipated date for submission of the approved Area Plan and the signed Transmittal Letter. If any changes are made to the draft document prior to final approval, those changes must be explained when the approved copy is sent to CDA.
The Area Plan, Update, or Year-End Report will not be approved until all documents have been received.

SECTION A: REQUIREMENTS

1. RESOURCE TABLE FOR WHEN AREA PLAN DOCUMENTS ARE DUE

Area Plan, Updates, and Budgets

Period Covered	Date Due to CDA
Four Year Area Plan for 2005-2009 and Budgets for 2005 – 2006	Not later than May 1, 2005
Update and Budgets for 2006-2007	Not later than May 1, 2006
Update and Budgets for 2007-2008	Not later than May 1, 2007
Update and Budgets for 2008-2009	Not later than May 1, 2008

- ***The annual Budget will be submitted separately to the CDA Fiscal Team, and the pages will not be numbered for insertion in the Area Plan document.***

Year-End Reports[22]

Period Covered	Date Due to CDA
Fiscal Year 2005 – 2006	Not later than August 31, 2006
Fiscal Year 2006 – 2007	Not later than November 1, 2007
Fiscal Year 2007 – 2008	Not later than November 1, 2008
Fiscal Year 2008 – 2009	Not later than November 1, 2009

- ***Copies of the Year-End Reports are to be filed at the AAA with the original Area Plan documents as annual attachments.***

Amendments to the Area Plan

In addition to the required annual Updates, an AAA shall submit an Area Plan Amendment to CDA any time a major change occurs that affects its goals and/or objectives. (CCR Article 3, Section 7304)

[22] A completed Year-End Report Transmittal Letter is to be submitted with all Year-End Reports.

2. RESOURCE TABLE FOR <u>WHAT</u> AREA PLAN DOCUMENTS ARE REQUIRED

Area Plan Component	**Submit with the Original Area Plan**	**Submit Annually with Area Plan Update**	**Submit with Area Plan Amendment (For Major Changes)**	**Submit Annually with Year-End Report**
Transmittal Letter	X	X	X	X
Area Plan Checklist	X	X		
Narrative Description of Changes		X	X	X
<u>Part One: Area Plan Background</u> **Section A: Setting the Stage**				
Description of the Planning and Service Area	X	X*	X*	
Description of the Area Agency on Aging	X	X*	X*	
Mission Statement	X	X*	X*	
Organization Chart	X	**X**	X*	
Section B: Establishing Priorities				
The Planning Process	X			
Needs Assessment Activities	X	X*	X*	
Targeting	X		X*	
Identification of Priorities	X		X*	
<u>Part Two: Area Plan Goals and Objectives</u> **Section A: General Instructions** **Section B: Goals and Objectives Guidelines**				
System-Building and Administrative Goals & Objectives**	X	X	X	X
Title III B Funded Program Development (PD) Objectives	X^	X^	X^	X^
Title III B Funded Coordination (C) Objectives	X^	X^	X^	X^
Service Unit Plan Objectives	X	X	X*	
<u>Part Three: Area Plan Maintenance</u> **Section A: Updates and Amendments** Annual Area Plan Update Process How to Amend the Area Plan				
Section B: Year-End Reporting				X
<u>Part Four: Appendices</u>				
Appendix IA and IB **(1B-see Appendix for additional information)**	X	X*	X*	
Appendix II	X	X	X	
Appendices III, IV, V, VI, VII, VIII	X	X*	X*	
Appendix IX				
Appendix X	X	X*		
Appendix XI	X	X	X*	
Appendix XII	X	X	X*	
<u>Part Five: Assurances</u>	X			
Area Plan Budgets	X	X		

* If applicable (only if changes occur). **Objectives may be updated at any time and need not conform to a twelve month time frame.
^If the AAA funds PD and/or C with Title III B.

SECTION B: UPDATES AND AMENDMENTS

1. ANNUAL AREA PLAN UPDATE PROCESS

a. **Purpose:**

The purpose of the Area Plan Updates is to provide a process for the AAAs to document changes in the Area Plan. The annual Update provides CDA with up-to-date information for state and federal reporting. The updated copy of the Area Plan maintained by the AAA assures that the current version is readily accessible to staff and the public.

b. **Required Content:**

The CCR Article 3, Section 7304, requires annual submission of an Area Plan Update no later than May 1, preceding the fiscal year in which the Update is to take effect. The following components are required in the Update:

1. A Transmittal Letter with all required signatures.

o The Area Plan Checklist - the Area Plan Checklist is available on the website to complete electronically. The Checklist must be submitted in hard copy with the Area Plan.

o A Narrative Description of Significant Changes to the Area Plan and factors that necessitated those changes. (A new organization chart is required for changes in AAA structure or staff time.)

a. The narrative is intended to permit the reader to easily identify changes for each year of the 2005-2009 Area Plan. Include any significant problems and/or accomplishments experienced by the AAA related to specific categories in the Service Unit Plans.

b. This description may be a simple listing of key changes to the Area Plan in bullet format under the heading of "Changes" for each year:
- Changes – 2006-2007
- Changes – 2007-2008
- Changes – 2008-2009
- The narrative section must include an estimate of the number of low-income minority older individuals in the PSA.

o Revised Goals and/or Objectives

a. Revisions to goals and/or objectives (*See Part Two, Goals, and Objectives*) must document proposed changes and identify new, continued, revised, completed, and deleted objectives annually.

b. The AAA may submit an entirely new set of goals and objectives that include the prior **and** new objectives, or individual replacement pages reflecting changes may be submitted to insert in the existing section, as long as the history is retained.

c. If additional pages are submitted to insert in the four-year plan, number the pages to reflect the appropriate placement. For example, if two new pages are to be inserted between pages 12 and 13, number the new pages 12-1 and 12-2. <u>Submit only the updated pages</u>.

- o A description of <u>needs assessment activities</u> planned for the coming fiscal year, if any.

- o Revised <u>Service Unit Plan (SUP) Objectives</u> for Title III/VII, Title III E, Title V, CBSP, and HICAP.

- **Proposed** service units by service category must be entered for <u>all</u> SUP objectives at the beginning of each new fiscal year for a minimum of one-year or for multiple years. Data for all prior years of the four-year planning cycle must be retained.

- o <u>Appendix II</u>, along with any other <u>Appendices for which there are changes</u> for the coming year.

- The Appendix templates provided with the Four-Year Area Plan Reference Guide must be used for the four-year planning period with modifications as required for each new fiscal year.

- o A signed copy of the <u>Area Plan Budget</u>, as well as the Title V and HICAP Budgets if the AAA receives funding for those programs (Transmit Budgets directly to the CDA Fiscal Team and do not include in the Update package).

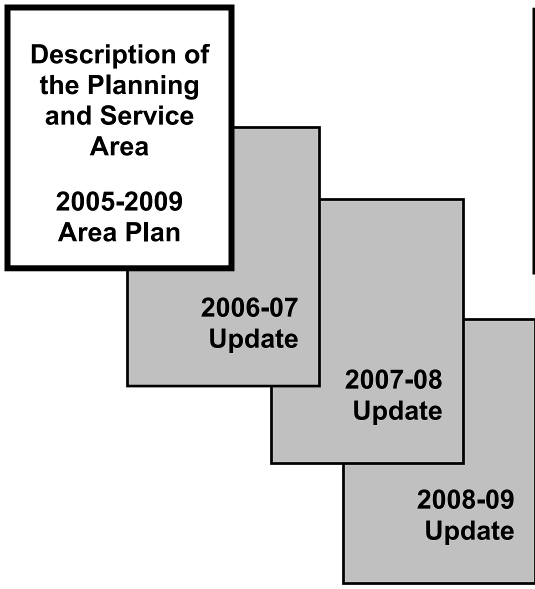
c. <u>Resource: Diagrams of the Update Process</u>

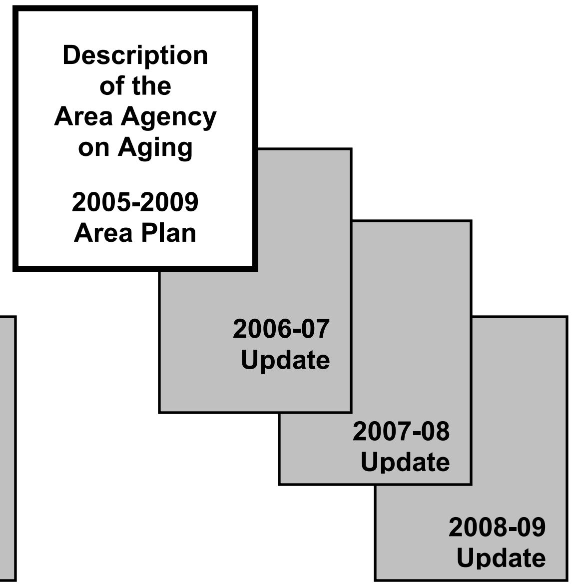
The diagrams in this section provide a visual overview of the documents that are required for the four-year Area Plan and annual Updates.

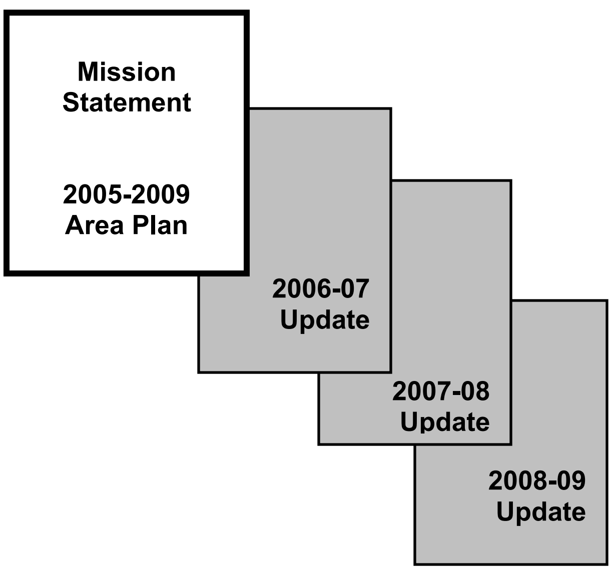
The annual Updates consist of changes and additions to the four-year Area Plan. Do <u>not</u> submit an entirely new Area Plan. Number the pages for insertion in the original four-year Area Plan.

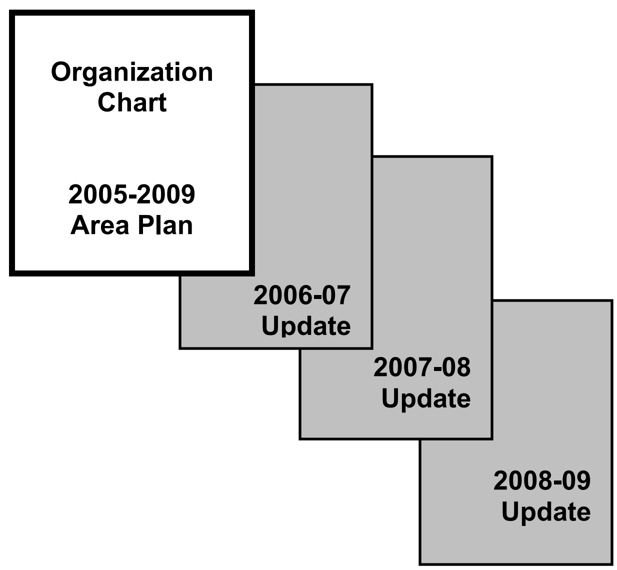
Part One: Area Plan Background

Section A



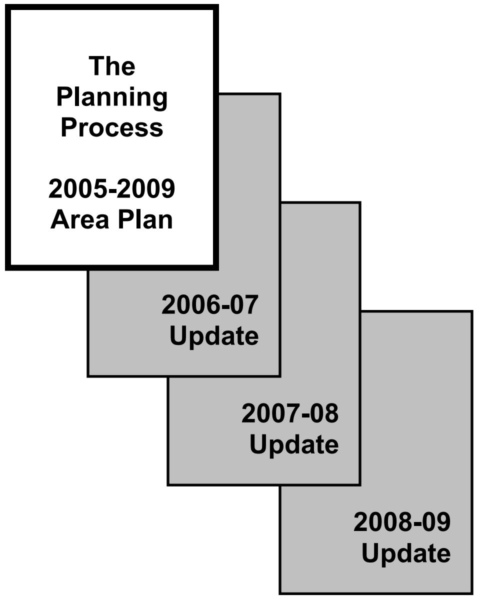


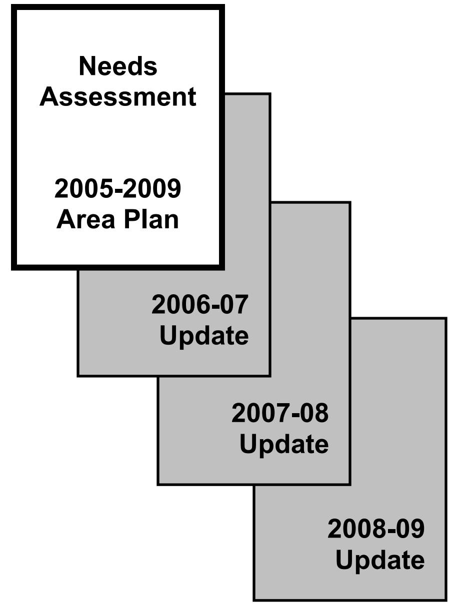


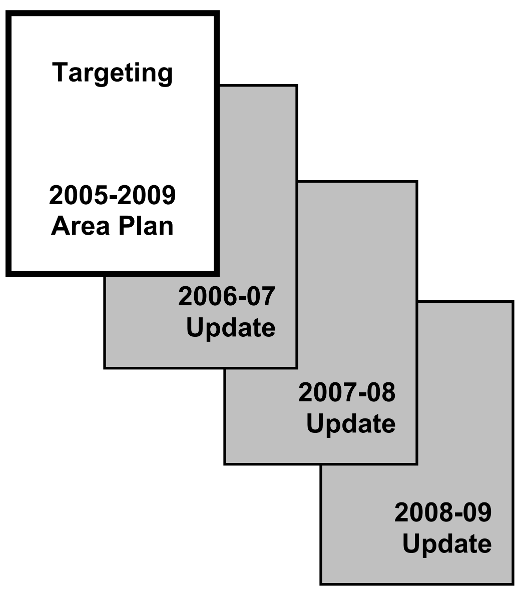


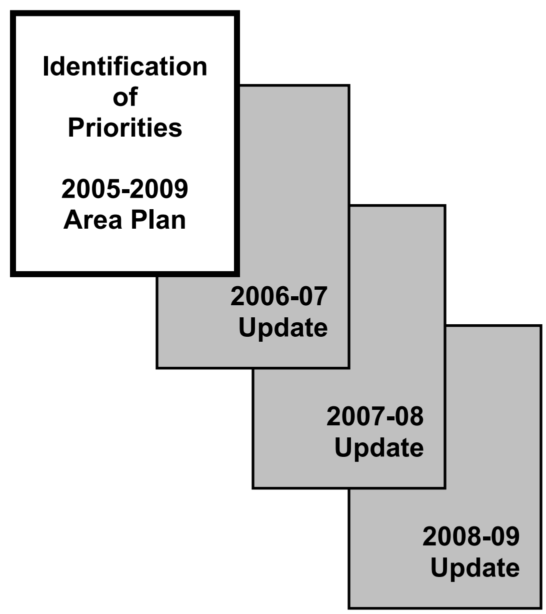
Part One, Continued

Section B

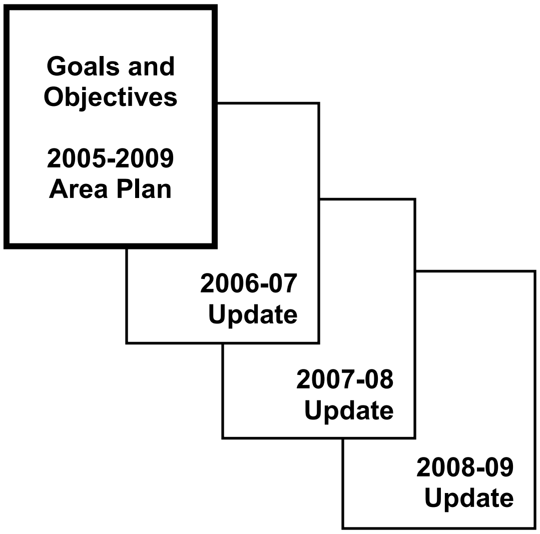


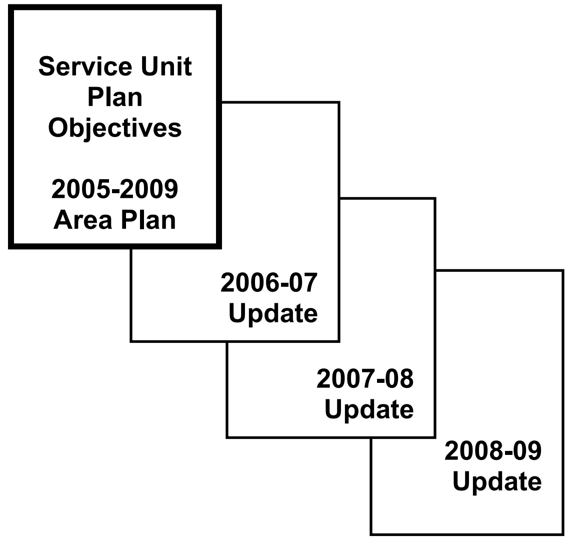




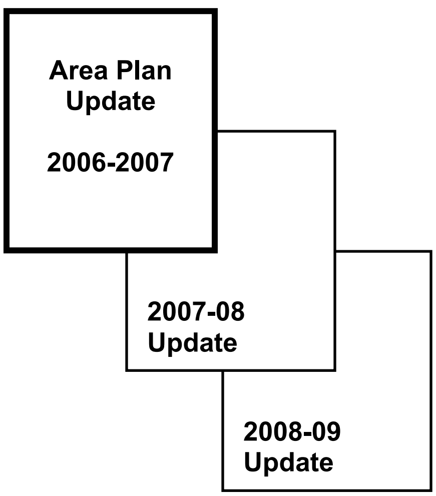


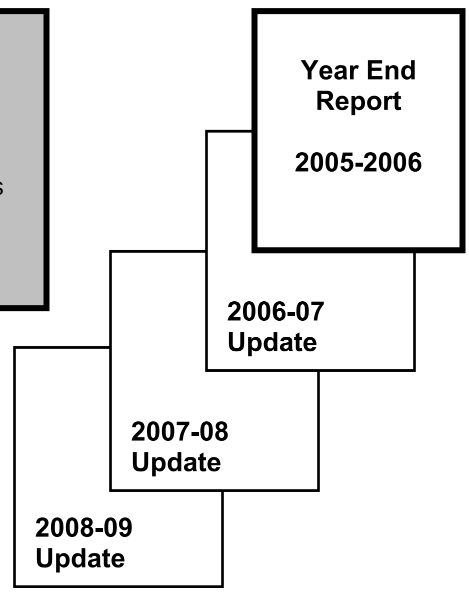
Part Two: Area Plan Goals and Objectives



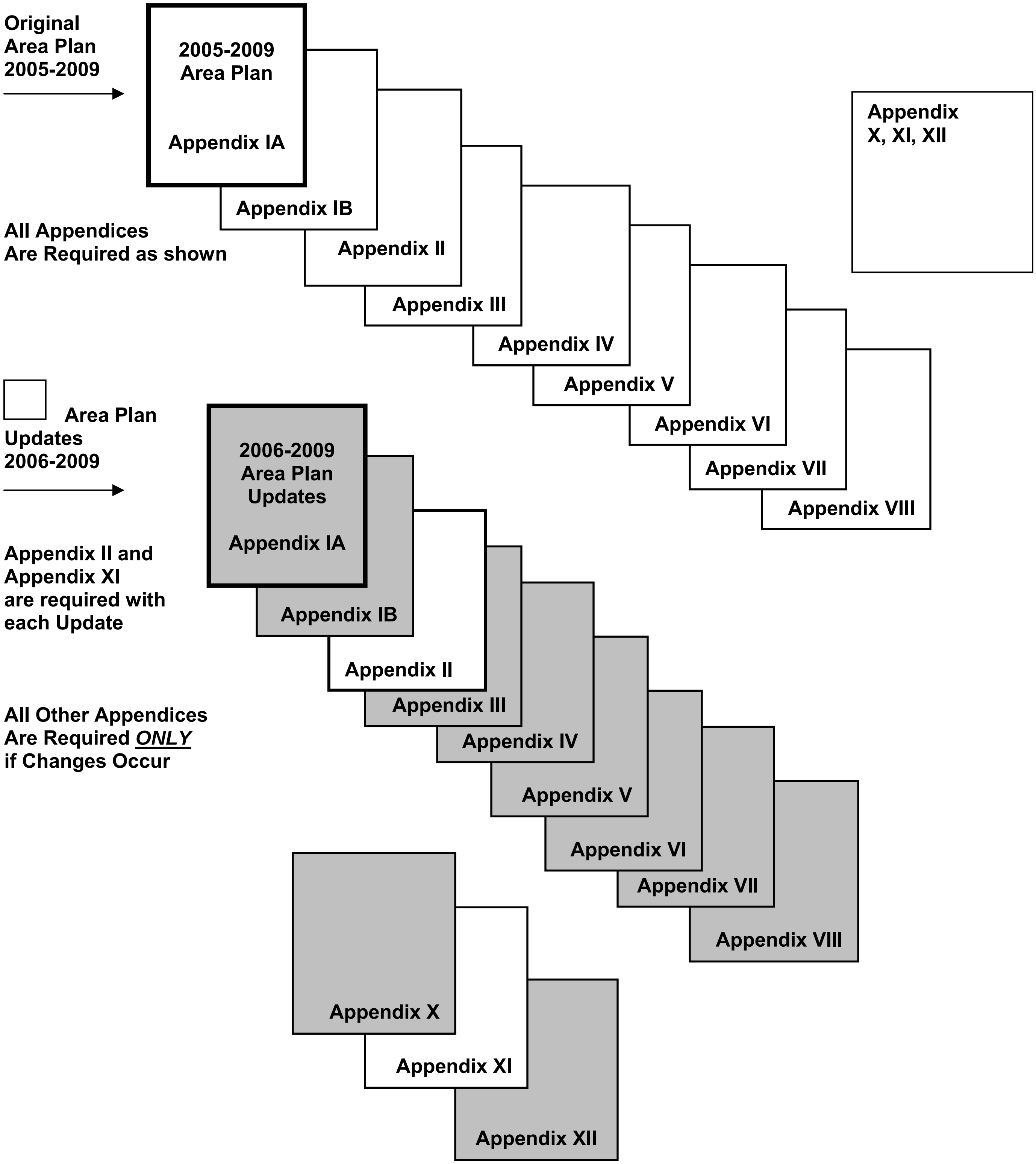


Part Three: Area Plan Maintenance





Part Four: Appendices



2. HOW TO AMEND THE AREA PLAN

a. Purpose:

The purpose of this section is to provide direction on when and how to submit Amendments to the Area Plan.

Area Plan Amendments are defined in CCR Article 3, Section 7306. In addition to the required annual Updates specified in CCR Article 3, Section 7304, an AAA must submit an Area Plan Amendment to CDA any time a major change occurs that affects its goals and/or objectives. Amendments are not required on a routine basis.

b. Required Content:

1. Major changes that would generate an Amendment shall include, but not be limited to:

   - Unforeseen changes in the PSA due to natural disasters and/or changes in the local demographics. *(Amend Part One Section A)*
   - Changes in the AAA, such as a change in the administrative structure and/or placement of the AAA within a larger organization. (*Amend Part One Section A)*
   - Changes in the spectrum of local available resources. (*Amend Part One Section B*)
   - Changes in the priority needs of older individuals residing in the PSA. (*Amend Part One Section B*)
   - Any Program Development or Coordination objectives that have not previously been included in the Area Plan. *(Amend Part Two Section B)*

2. Area Plan Amendments shall follow the same public hearing guidelines as required for the Four-Year Area Plan and Updates. *(Must amend Appendix II)*

3. The following documents must be submitted with an Area Plan Amendment:

   - A signed Transmittal Letter

- A Narrative Description of Significant Changes that includes an explanation of the change(s) being submitted and the reasons for each change.

- A statement of the revised goals and objectives resulting from the change(s), along with the applicable revised goal and/or objective template(s).

- Changes to the applicable Service Unit Plan Objectives.

- Corresponding Budget(s) must be submitted with the next scheduled Budget Revision

- Appendix II and all Appendices that reflect the applicable changes.

4. Amend any other section or Appendix in the Area Plan that is affected by the change(s).
(*See Area Plan Timetables and Submittal Requirements in Part Three Section A*)

3. YEAR-END REPORTING

a. Purpose:

The purpose of the Year-End Report is to provide a retrospective account of progress made toward specified goals during the preceding fiscal year, including the targeting objectives cited in Part Two. The Year-End Report provides a performance report for the community and CDA, which CDA uses when reporting to federal and State officials on AAA activities, achievements, and significant barriers to local goals. It reaffirms the important role of the AAA in the local PSA as the advocate, planner, and administrator of programs for seniors and their caregivers, and adults with disabilities.

A Year-End Report should be used to inform the public about: (1) the AAA's key activities during the preceding year; (2) significant achievements during the preceding year; and (3) the difficulties the AAA has encountered in executing its charge. It is similar, in this respect, to a corporate annual report. Significant findings from Year-End Reports must be considered as the next Update is prepared.

b. Required Content:

AAAs are required to submit the Year-End Report by November 1st yearly in the form as outlined in PM #07-14 (P). Refer to the Appendices section for instructions.

The Older Americans Act Section 306(a)(4)(A)(i) and (ii) establishes the requirement that the AAA will set specific objectives in the Area Plan for providing services to low income minority individuals and older individuals residing in rural areas and must specify how contractors will meet the service requirements as specified. Further, Section 306(a)(4)(A)(iii) requires that the AAA provide information for the fiscal year preceding the fiscal year for which the plan is prepared, to the extent of which the AAA met the objectives described in (i).

The Year-End Report, which provides a mechanism through which the AAAs can report the status of annual objective accomplishments, coincides with the Financial Closeout process for the preceding fiscal year. The accomplishments also must be included in the Area Plan Update for the following year.

For Title III D include a brief written statement describing the III D and Medication Management activities.

The Year-End Report will include, at a minimum:

1. A Transmittal Letter signed by the AAA Director, Chair of the Advisory Council, and Chair of the Governing Board. This Transmittal Letter must be downloaded from WORD form and completed in WORD and remitted with the Year-End Report.
2. An introduction explaining the purpose of the report, including a Narrative Description of Significant Accomplishments.
3. A summary of ideas generated as a result of discussion focused on service system changes based on the surge in the growth in the aging population in the PSA. (*Reference Part One Needs Assessment Preparing for the Increased Senior Population in 2006 and Beyond.)*
4. The status of goals and objectives

    - Include a discussion of the objectives set for the preceding year which were completed, remain incomplete, were deleted, and/or where changes were necessary. This section would also address circumstances that affected progress toward achieving specific goals, resulting in revised objectives. The results of achieving the objectives must be clearly identified and discussed.

    - Include a brief written statement summarizing the Title III D and Medication Management activities provided in your PSA. Address the status of the Title III D objectives in your Area Plan.

- Status of objectives may be submitted in a narrative form or objective-by-objective.

- AAAs that expended Title III B funds for Program Development (PD) or Coordination (C) activities during the period covered by the Year-End Report must include an explanation of the status of each of the PD or C objectives. The explanation must clearly indicate what objectives were achieved, and as appropriate, explain why any PD or C objectives were deleted or extended into the next fiscal year. (*See Part Two Section B for further reporting requirements related to PD or C objectives*)

- The information regarding progress toward accomplishment of PD or C objectives will be used by CDA when reviewing and approving PD or C objectives in the forthcoming Area Plan.

5. <u>A summary of activities</u>, including how the AAA will use the prior year findings to improve the service system.

6. <u>The final year of the four-year planning cycle (2008-2009)</u>: The **final Year-End Report** for the four-year period must include a discussion of the impact of activities undertaken during the entire planning cycle and how the AAA will use any findings in the planning process to enhance or improve the local service system.

<u>For submittal information see Appendix XIII.</u>

YEAR-END REPORT TRANSMITTAL LETTER

AAA NAME:_____ **PSA #:_____**

Check appropriate box for:

☐FY 2004-05 ☐FY 2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-2009

This Year-End Report provides a retrospective account of progress made toward specified goals during the above checked fiscal year. It provides a performance report for the community and CDA. It reaffirms the important role of AAAs as the advocate, planner, and administrator of programs that strive to address the care needs of older and disabled adults and their families and caregivers in their local Planning and Service Area.

We the undersigned recognize the responsibility within each community to establish systems in order to address the care needs of older individuals and their families and caregivers in this Planning and Service Area. By signing below, we confirm that we have had the opportunity to participate in the planning process and to review and comment on this Year-End Report.

1. (Type Name):_____

(Signed)____________________________________ _____
Chair, Governing Board Date

2. (Type Name):_____

(Signed)____________________________________ _____
Chair, Area Agency on Aging Advisory Council Date

3. (Type Name):_____

(Signed)____________________________________ _____
Director, Area Agency on Aging Date

PART FOUR: APPENDICES

Updates: All Appendices are required in the first year of the Four-Year Area Plan. An Updated Appendix II is required annually, and other Appendices must be updated when changes occur. All of the Appendix templates provided in this section are intended to be modified as needed for use throughout the four-year planning period.

a. Purpose:

The purpose of the Appendices is to supplement or clarify existing information provided by the AAA.

Some Appendices reflect requirements of the OAA, CFR, and the CCR. Others provide informational materials to assist the AAAs in developing their Area Plans and subsequent Updates.

b. Required Content:

Appendices I – VIII and Appendix X-XII

Appendix IX includes resource information only.

APPENDIX IA - PSA #____

NOTICE OF INTENT TO PROVIDE DIRECT SERVICES

CCR Article 3, Section 7320 (a) (b)

If an AAA plans to directly provide any of the following services, it is required to provide a description of the methods that will be used to assure that target populations throughout the PSA will be served. If not providing any of the direct services below, check this box☐.

Check applicable direct services	Check each applicable Fiscal Year(s)
Title III B	
☐Information and Assistance	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09
Title III B	
☐Case Management	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09
Title III B	
☐Outreach	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09
Title III B	
☐Program Development	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09
☐Coordination	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09
Title III D	
☐Disease Prevention and Health Promotion	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09
Title III E	
☐Outreach to Caregivers	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09
Title III E	
☐Information and Assistance to Caregivers	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09
Title III E	
☐Comprehensive Assessment of Caregivers	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09
Title III E	
☐Case Management for Caregivers	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09
Title VII b	
☐Prevention of Elder Abuse, Neglect and Exploitation	☐FY 2005-06 ☐FY 06-07 ☐FY 07-08 ☐FY 08-09

Describe the methods that will be used to assure that target populations will be served throughout the PSA. ____

<u>APPENDIX IB</u> - PSA #____

REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES
Older Americans Act, Section 307(a)(8)
CCR Article 3, Section 7320(c), W& I Code Section 9533(f)

If an AAA plans to provide direct services **other** than those specified in Appendix IA, **a separate Appendix IB must be completed for <u>EACH</u> type of service provided.** The submission for CDA approval may be for multiple funding sources for a specific service. If not requesting approval to provide any direct services in Appendix IB, check this box ☐.

Identify Service Category: _____

Check applicable funding source:[23]

☐III B ☐III C-1 ☐III C-2 ☐III E ☐VII a

☐ CBSP (Identify the specific CBSP program or service on the "Service Category" line above)
☐ HICAP

<u>Basis of Request for Waiver:</u>

☐ Necessary to Assure an Adequate Supply of Service, <u>OR</u>

☐ More economical if provided by the AAA than comparable services purchased from a service provider.

<u>Check each applicable Fiscal Year(s)</u>
If the AAA intends to provide this service for four years, check all boxes. If all boxes are not checked and the AAA intends to provide this service in subsequent years then this Appendix must be submitted yearly.

☐FY 2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

[23] Appendix IB does not apply to Title V (SCSEP).

Justification: In the space below and/or through additional documentation, **<u>AAAs must provide a cost-benefit analysis that substantiates any requests for direct delivery of the above stated service.</u>**[24]

[24]For a HICAP direct services waiver, the managing AAA of HICAP services must also document that all affected AAAs are in agreement.

APPENDIX II – PSA

Check each applicable planning cycle:

☐FY 2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

PUBLIC HEARINGS

Conducted for the 2005-2009 Planning Period

CCR Article 3, Section 7302(a)(10) and Section 7308

Date	Location	Number Attending	Area Plan presented with Translator:[25] Yes/No	Hearing Held at Long-Term Care Facility:[26] Yes/No

All of the items below must be discussed at each planning cycle's Public Hearings

1. Discuss outreach efforts used in seeking input into the Area Plan from institutionalized, homebound, and/or disabled older individuals.

2. Proposed expenditures for Program Development (PD) and Coordination (C) must be discussed at a public hearing. Did the AAA discuss PD and C activities at a public hearing?

☐ Yes ☐ Not Applicable (check only if PD and C funding is not being used)
☐ No

If No, Explain:

3. Summarize the comments received concerning proposed expenditures for PD and C, if applicable.

4. Were all interested parties in the PSA notified of the public hearing and provided the opportunity to testify regarding setting of minimum percentages of Title III B program funds to meet the adequate proportion funding for Priority Services? *(See Appendix V)*

---

[25] A translator is not required unless the AAA determines that a significant number of attendees require translation services.

[26] AAAs are encouraged to include individuals in LTC facilities in the planning process, but hearings are not required to be held in facilities.

☐Yes
☐No

If No, Explain:

5. Summarize the comments received concerning minimum percentages of Title III B funds to meet the adequate proportion funding for priority services. (*See Appendix V)*

6. Summarize other major issues discussed or raised at the public hearings.

7. List major changes in the Area Plan resulting from input by attendees at the hearings.

APPENDIX III – PSA #____

Check each applicable planning cycle:
☐FY 2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

GOVERNING BOARD
CCR Article 3, Section 7302(a)(11)

Number of Members on the Board: ____

Names/Titles of Officers: **Term in Office Expires:**

Names/Titles of All Members: **Term on Board Expires:**

APPENDIX IV – PSA #____

Check each applicable planning cycle:

☐2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

ADVISORY COUNCIL

45 Code of Federal Regulations (CFR), Section 1321.57
CCR Article 3, Section 7302 (a) (12)

Total Council Membership (including vacancies) _____
Number of Council Members 60+ _____

	% of PSA's 60+Population	% on Advisory Council
• **Race/Ethnic Composition**		
White	_____	_____
Hispanic	_____	_____
Black	_____	_____
Asian/Pacific Islander	_____	_____
Native American/Alaskan Native	_____	_____
Other	_____	_____

Attach a copy of the current advisory council membership roster that includes:

- Names/Titles of officers and date term expires
- Names/Titles of other Advisory Council members and date term expires

Indicate which member(s) represent each of the "Other Representation" categories listed below.

	Yes	No
Low Income Representative	☐	☐
Disabled Representative	☐	☐
Supportive Services Provider Representative	☐	☐
Health Care Provider Representative	☐	☐
Family Caregiver	☐	☐
Local Elected Officials	☐	☐
• Individuals with Leadership Experience in • the Private and Voluntary Sectors	☐	☐

Explain any "No" answer. ____

Briefly describe the process designated by the local governing board to appoint Advisory Council members. ____

APPENDIX V – PSA #____

Check each applicable planning cycle:

☐2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

PRIORITY SERVICES:
Funding for Access, In-Home Services, and Legal Assistance

The CCR, Article 3, Section 7312, requires that the AAA allocate an "adequate proportion" of federal funds to provide Access, In-Home Services, and Legal Assistance in the PSA. The annual minimum allocation is determined by the AAA through the planning process. The minimum percentages of applicable Title III B funds[27] listed below have been identified for annual expenditure throughout the four-year planning period. These percentages are based on needs assessment findings, resources available within the PSA, and discussions at public hearings on the Area Plan.

Category of Service & Percentage of Title III B Funds
Expended in/or To Be Expended in FY 2005-06 through FY 2008-09

Access:

Case Management, Assisted Transportation, Transportation,

Information and Assistance, and Outreach

05-06 % 06-07 % 07-08 % 08-09 %

In-Home Services:

Personal Care, Homemaker and Home Health Aides, Chore, In-Home Respite, Daycare as respite services for families, Telephone Reassurance, Visiting, and Minor Home Modification

05-06 ____% 06-07 ____% 07-08 ____% 08-09 ____%

Legal Assistance Required Activities[28]:

Legal Advice, Representation, Assistance to the Ombudsman Program and

[27] Minimum percentages of applicable funds are calculated on the annual Title III B baseline allocation, minus Title III B administration and minus Ombudsman. At least one percent of the final Title III B calculation must be allocated for each "Priority Service" category or a waiver must be requested for the Priority Service category(s) that the AAA does not intend to fund.

[28] Legal Assistance must include all of the following activities: Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar.

Involvement in the Private Bar

05-06 _____% 06-07 _____% 07-08_____% 08-09 _____%

1. Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA._____

2. Appendix V must be updated if the minimum percentages change from the initial year of the four-year plan.

3. Provide documentation that prior notification of the Area Plan public hearing(s) was provided to all interested parties in the PSA and that the notification indicated that a change was proposed, the proposed change would be discussed at the hearing, and all interested parties would be given an opportunity to testify regarding the change. _____

4. Submit a record (e.g., a transcript of that portion of the public hearing(s) in which adequate proportion is discussed) documenting that the proposed change in funding for this category of service was discussed at Area Plan public hearings. _____

APPENDIX VI – PSA #____

Check each applicable planning cycle:

☐FY 2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

COMMUNITY FOCAL POINTS LIST

CCR Article 3, Section 7302(a)(14)

Provide an updated list of designated community focal points and their addresses. This information must match the National Aging Program Information System (NAPIS) SPR 106.

APPENDIX VII – PSA #____

Check each applicable planning cycle:
☐FY 2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

MULTIPURPOSE SENIOR CENTER (MPSC)
ACQUISITION[29] AND[30]CONSTRUCTION COMPLIANCE REVIEW
CCR Title 22, Article 3, Section 7302(a) (15)
(This has a 20-year tracking requirement.)

☐ No, Title III B funds have not been used for MPSC Acquisition or Construction.

☐ Yes, Title III B funds have been used for MPSC Acquisition or Construction.
If yes, complete the chart below.

Title III Grantee and/or Senior Center	Type Acq/Const	III B Funds Awarded	% of Total Cost	Recapture Period MM/DD/YY Begin	Ends	Compliance Verification (State Use Only)
Name: Address:						
Name: Address:						
Name: Address:						
Name: Address:						

[29] Acquisition is defined as obtaining ownership of an existing facility (in fee simple or by lease for 10 years or more) for use as an MPSC.

[30] Construction is defined as building a new facility, including the costs of land acquisition, architectural and engineering fees, or making modifications to, or in connection with an existing facility, which more than doubles the square footage of that original facility and all physical improvements.

<u>APPENDIX VIII</u> – PSA #____

Check each applicable planning cycle:
☐FY 2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

FAMILY CAREGIVER SUPPORT PROGRAM
Notice of Intent for Non-Expenditure of Funds
Older Americans Act Section 373 (b)

Based on review of current family caregiver support needs and services, does the AAA **intend** to fund the following federal support service(s)?

Check ☐YES or ☐NO for each of the services identified below.

Support Service

Service Information ☐YES ☐NO
(Information to caregivers about available services)

Access ☐YES ☐NO
(Assistance to caregivers in gaining access to services)

Caregiver Support Services ☐YES ☐NO

Respite ☐YES ☐NO
(Respite care to enable caregivers to be temporarily relieved from their care giving responsibilities)

Supplemental Services ☐YES ☐NO
(Supplemental services, on a limited basis, to complement the care provided by the caregivers)

Justification: For any of the five support services the AAA does not intend to fund, explain why each service will not be funded and how each service is being addressed in the PSA:

Appendix IX Resource Tools

Sample Organization Chart-County

Sample Organization Chart-AAA

Planning Process Diagram

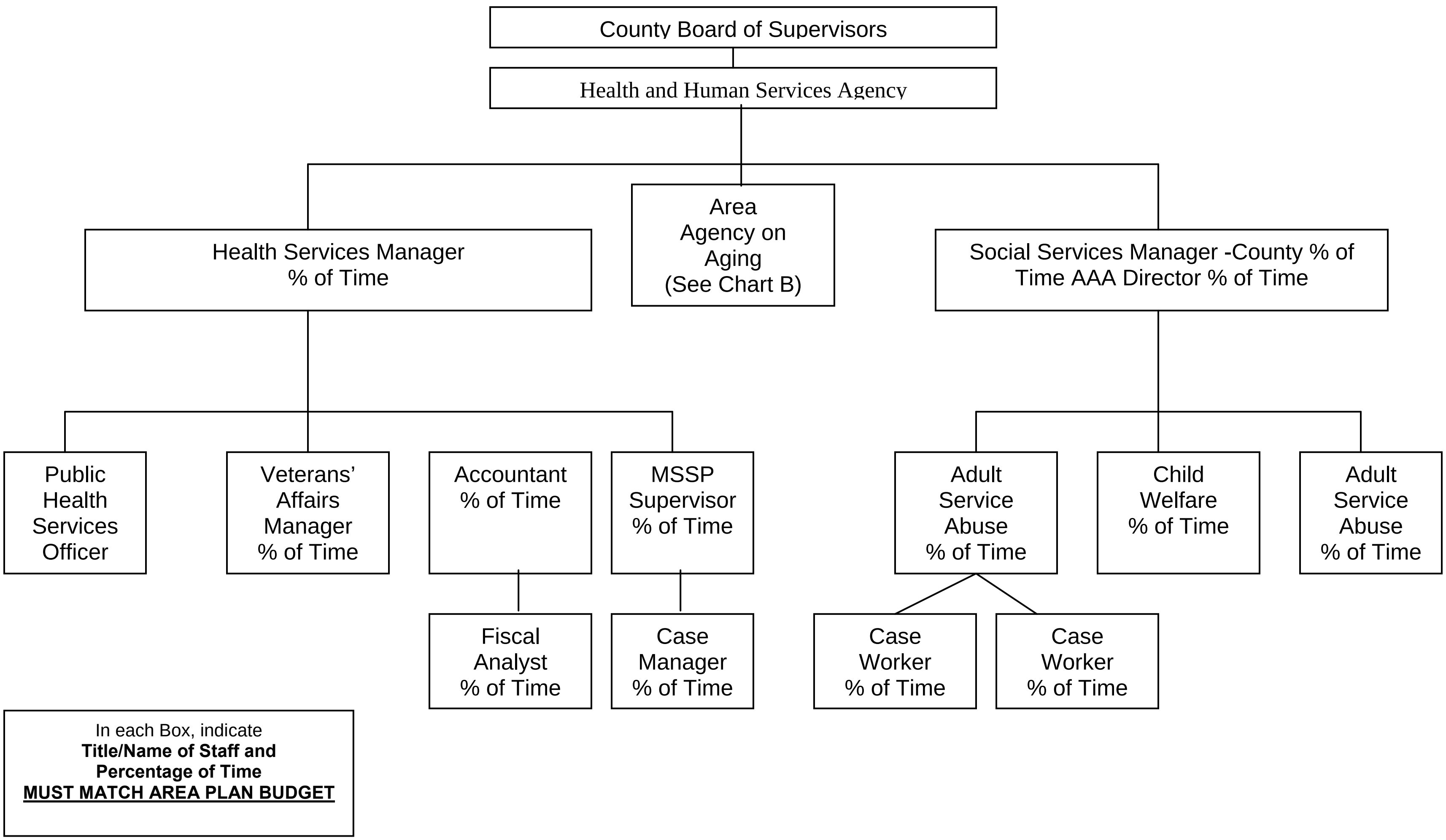
Program Descriptions and Funding Sources

Fact Sheet - Title III D: Disease Prevention / Health Promotion, Including Medication Management

Fact Sheet - Senior Companion

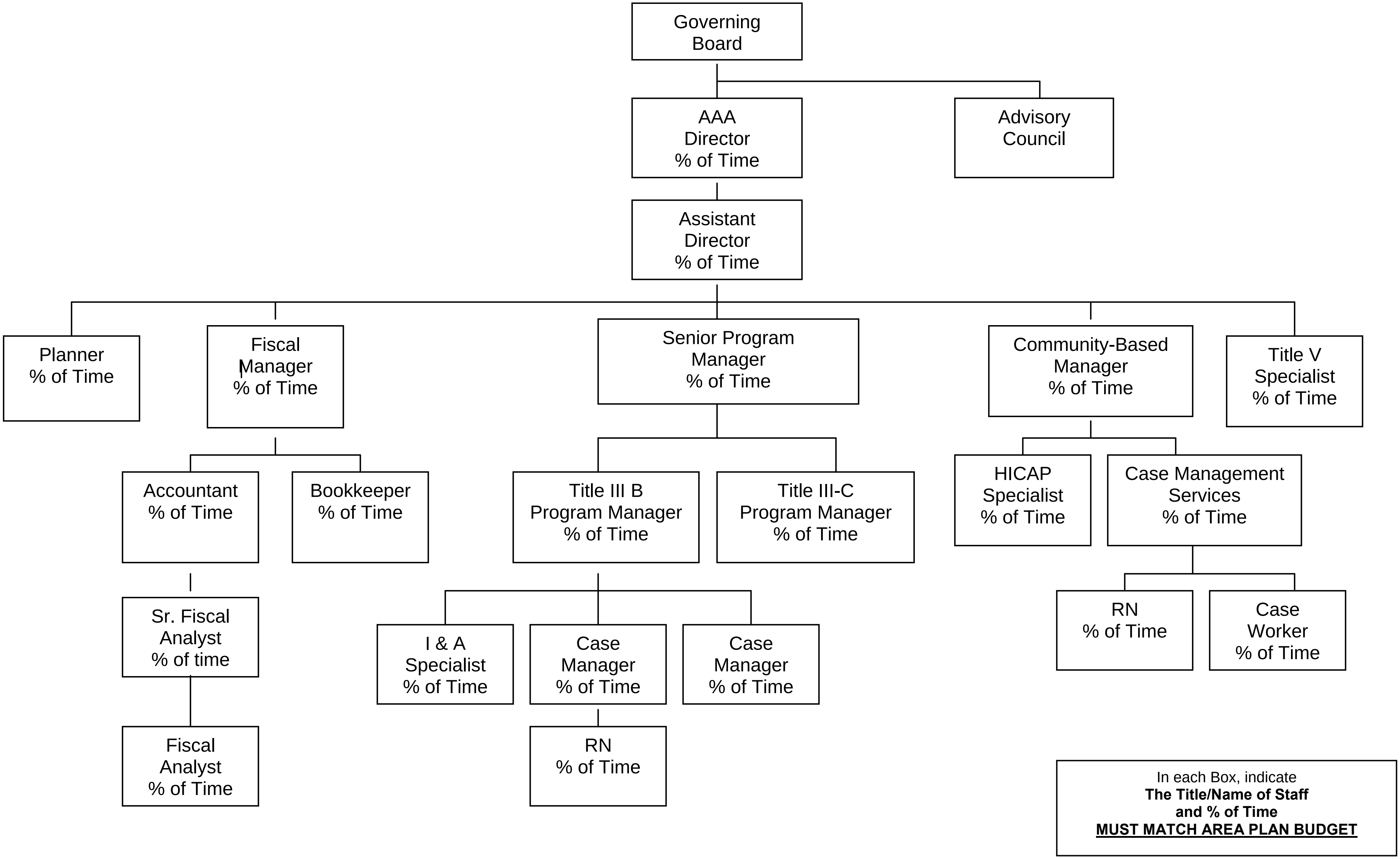
Sample Organization Chart

COUNTY



Sample Organization Chart

AAA



Planning Process Diagram

Planning Phases	Pre-Planning		Planning					Post-Planning	
Planning Stages	Community Diagnosis	Process Design	I. Data Collection & Analysis	II. Issue Identification	III. Goal & Objective Formulation	IV. Strategy Formulation	V. Plan Review & Approval	Implementation	Monitoring & Assessment
Planning Tasks	• Determine purpose and readiness • Explore Preliminary issues and concerns • Profile existing plans and implementation tools for their effectiveness • Build capacity to conduct planning participation • Identify planning participants and stakeholders	• Design the planning process • Identify opportunities for public participation and education • Establish roles, responsibilities, and membership of groups involved in planning • Establish budget and identify funding sources • Identify or review mission	• Identify data and information needs • Gather technical and citizen based data • Analyze and interpret data to derive patterns and trends • Provide information to citizens and other decision-makers • Access census data and analyze • Perform gap analysis	• Identify key community issues, challenges, opportunities and desires • Verify and support issues using local data and analysis • Prioritize issues	• Develop goals and measurable objectives related to planning issues • Develop indicators to monitor progress towards stated goals and objectives • Follow Area Plan Guidance to format objectives • Develop Service Unit Plan (SUP)	• Develop planning alternative to meet goals and objectives • Identify places suitable for achieving goals and objectives • Identify possible strategies or techniques to implement planning alternatives • Select preferred alternatives and strategies • Estimate expected outcome, effects, and impacts of each alternative • In depth analysis of alternatives making the first cut	• Present plan for community and officials to review • Make changes to resolve plan inconsistencies and reflect public concerns • Advisory Council or AAA staff recommends final draft of plan for adoption • Governing body holds public hearing and formally adopts plan • Plan submitted to CDA	• Develop or amend required implementation tools • Apply implementation strategy • Implementation tools include monitoring, procurement and reporting tools	• Monitor progress towards achieving plan goals, objectives and SUPs • Review and update plan and associated implementation tools as needed • Follow AP Guidance for plan updates and amendments
Planning Tools	**Selected Examples (Not an exhaustive list)**								
Awareness Tools:	Advertise project with mass media		Use mass media to advertise upcoming data open house	Mail data issue analysis to stimulate interest	Send meeting notices in advance of meetings	Use community displays to showcase planning alternatives	Send out notice of public hearings		
Education Tools:	Plan Advisory Council Training	Send out newsletter to update citizens on plan process	Conduct data training for Advisory Council	Interpreting data education for interested officials/public	Conduct "how to" set measurable objectives education for Advisory Council & AAA staff	Send out newsletters describing how alternatives were created	Use Website and educational forum to discuss plan		
Input Tools:	Fact Sheets		Gather citizen input from data open house	Use mail survey to identify local issues and opinions		Gather public input from Web forum and open houses	Hold public hearing to solicit public comment		Conduct survey to identify plan success or failure

Interaction Tools:			Use local residents to verify data accuracy	Conduct focus groups to prioritize relevant issues		Use community workshops to explore alternative strategies			Conduct an annual progress review of the plan with the Advisory Council
Partnership Tools:	Develop advisory group to help design plan process			Brainstorm with Advisory Council members to identify issues	Advisory Council members set goals and objectives using member input	Brainstorming alternatives using Delphi techniques with Advisory Council to learn diverse views	Advisory Council & AAA staff recommends plan to Board for adoption	Use Advisory Council to identify suitable implementation tools	Employ Advisory Council to monitor progress of implementation

* With Special thanks to the Center for Land Use Education. *The Land Use Tracker*, Volume 3, Issue 3, Winter 2004

Program Descriptions and Funding Sources

Older Americans Act and Older Californians Act Programs

Funding Source	Eligibility	Program or Service
Older Americans Act Funding		
Title III B Supportive Services	60 years old	Information & assistance/referrals, in-home assistance, legal assistance, transportation, & other types of supportive services to decrease isolation & help individuals remain in their homes.
Title III B & Title VII (a) Long Term Care (LTC) Ombudsman	Residents of LTC Facilities	Investigation & resolution of complaints made by or on behalf of residents; abuse investigations & reporting; witnessing advance directives; providing community education; & maintaining a regular presence in facilities.
Title VII (b) Elder Abuse Prevention	60 year old victims	Activities to develop, strengthen, & carry out programs for prevention & treatment of elder abuse, neglect, & exploitation.
Title III C- 1 Congregate Nutrition	60 years old & spouses	Nutritious meals & nutrition education provided for socialization and health promotion in a congregate setting.
Title III C-2 Home-Delivered Meals	60 years old, homebound & spouses	Nutritious meals & nutrition education for individuals who are homebound due to illness, incapacitation, and disability or otherwise isolated.
Title III D Disease Prevention/ Health Promotion	60 years old	Exercise & health-related programs to improve health & alleviate disease. Includes medication management education & assistance.
Title III E Family Caregiver Support Program	Caregivers as defined	Services to assist caregivers of frail individuals 60 or over, & assistance to seniors 60 & older in a “grandparent” capacity, who provide primary care for a child 18 or younger.
Title V Senior Community Services Employment Program (SCSEP)	55 years & older; low income	Part-time employment to assist & promote placement of hard-to-serve older individuals into private, unsubsidized employment opportunities.
Older Californians Act Funding – Community-Based Services Programs (CBSP)		
Alzheimer’s Day Care Resource Centers (ADCRC)	Dementia victims & caregivers 18 years & older	Day care for persons with moderate to severe impairment, support groups, counseling, and consultation for clients & their caregivers.
Brown Bag	60 years & older; low income (SSI/SSP)	Surplus & donated edible fruits, vegetables, & other food products are distributed to supplement the nutritional needs of participants.
Linkages	Functionally impaired; 18 years & older	Case management services to assess & monitor client needs and link clients with services that foster & maintain independence.
Respite Purchase of Services (RPOS)	Same as Linkages	Purchase of respite services for caregivers of frail elderly & functionally impaired adults. (Do not have to be Linkages clients.)
Senior Companion	60 years & older; low income	Volunteer opportunities for seniors to assist clients that are homebound or in institutional settings with chores, light housekeeping, paying bills, shopping, & transportation to medical & other appointments. (Volunteers receive a tax-exempt stipend, a meal, & insurance coverage.)
Older Americans Act and Older Californians Act and State General Funds		
Health Insurance Counseling & Advocacy Program (HICAP)	60 years old	Counseling & informal advocacy services for Medicare beneficiaries, legal assistance on Medicare issues, and community education for the public on related issues.

Fact Sheet – Title III D
Disease Prevention / Health Promotion, Including Medication Management
Instructions for Completion of the Service Unit Plan Objectives

Contact Person: Barbara Estrada , bestrada@aging.ca.gov , (916) 928-3330

Requirements: Title III D services are required. The allowable service categories reported as Title III D Service Unit Plan Objectives are listed below.

Disease Prevention and Health Promotion services and information are provided at multipurpose senior centers, at congregate meal sites, through home delivered meals programs, or at other appropriate sites.

UNITS OF SERVICE:

(07) Counseling Advocacy	(32) Comprehensive Assessment
(09) Community Education	(36) Home Security
(13) Health Screening	(38) Equipment
(16) Information	(46) Family Support
(21) Physical Fitness II	(52) Nutrition Education
(19) Outreach	(53) Nutrition Counseling
(29) Therapy	(54) Nutrition Screening

(MIS Unit No.) Definition

(07) Counseling: To provide advice, guidance, and casework support for clients, their families/caregivers in order to enable the clients to make more effective use of services from caregivers/programs. **UNIT: one hour**

(09) Community Education/Advocacy: To educate groups of older persons, their families, friends, and community organization/facility staff on rights, benefits, and entitlements for older persons either residing at home or living in an institutional setting. **UNIT: one hour**

(13) Health Screening: To provide a brief examination to determine need for more in-depth medical evaluation ~ referral when appropriate. **UNIT: one hour**

(16) Information**:** To give information about resources, programs, and services. (Does not attempt to facilitate appointments or other arrangements between the client and service provider.) **UNIT: one client served**

(19) Outreach: To provide information and encouragement about existing services and benefits to individuals. Primary outreach activity will be on a one-to-one basis, except when specifically targeted group presentations are deemed more appropriate for a

particular outreach need. In such cases, the service provider shall assure that all participants will be counted in this unit.
UNIT: one client served

(21) Physical Fitness: To conduct activities, under qualified supervision, to sustain and improve the health and well being of a client, such as exercise sessions. **UNIT: one hour**

(29) Therapy: To provide treatment of a specific physical or mental problem or condition by a health professional or an allied health professional as permitted by law. Includes rehabilitative care such as physical, speech/hearing, and occupational therapies. (Does not include services covered by Medicare, Medi-Cal, or other health insurance.) **UNIT: one hour**

(32) Comprehensive Assessment: To collect information about a client with multiple needs (social, environmental, physical, or mental) and determine the necessary supportive or other appropriate services to meet those needs. (Does not include services covered by Medicare, Medi-Cal, or other health insurance.) **UNIT: one hour**

(36) Home Security: To provide clients services for the security and safety screening of their home environment, and by the provision of safety features such as: medical alert; grab bars; locks and deadbolts; and, smoke and burglar alarms. **UNIT: one client served**

(38) Equipment: To purchase one piece of equipment with a value of $500 or more for a facility/center. **UNIT: one piece of equipment**

(46) Family Support: To provide counseling, support groups, and other support to families and caregivers of individuals with Alzheimer's disease or a disease of a related type.
UNIT: one session

(52) Nutrition Education: To provide regularly scheduled programs on nutrition, diet, and health promotion issues. Programs and materials are to be approved by a qualified dietitian/nutritionist. Methods of education may include demonstrations, audio-visual presentations, or small group discussions for congregate program participants. Handout materials may be used as the sole education component for home-delivered meal program participants. **UNIT: one presentation**

(53) Nutrition Counseling: To provide individual dietary evaluation counseling which relates to normal or therapeutic nutritional needs which is performed by a dietitian/nutritionist. Nutrition counseling may be made either in person or by telephone.
UNIT: one client counseled

(54) Nutrition Screening: To collect information about a client's nutrition-related needs and problems; to evaluate the nutrition-related problems and needs of a client; and/or provide health care-related interventions to the client under the guidelines of the nutrition screening initiative. **UNIT: one client served**

<u>Medication Management</u>:

AAA's are reminded that Medication Management became a required service with a separate funding allocation under Title III D in 2001 (see PM 01-03). Medication Management provides medication screening and education to an individual and/or the caregiver to prevent incorrect medication and adverse drug reactions.

Funding for Medication Management should be noted on page 9 of the CDA Area Plan Budget, Schedule of Nutrition (III C-1&III C-2) & Disease Prevention (III D) programs.

<u>Activities that may be reported under Medication Management</u>:

Primary activities will be on a one-to-one basis, except where specifically targeted group presentations are deemed more appropriate. In such cases the presentation is counted as one unit.

Example:

- ✓ Contracting a pharmacist to speak at a congregate meal site about adverse drug reactions and issues of incorrect medication and perform a brown bag clinic. (Participants bring in all their medications to the site, so the pharmacist is able to review them for medication interactions)

This is a group presentation with a one-on-one component. Count each one-on-one participant and place that number in the service unit plan. Be sure to provide the goal and objective numbers associated with the service units. The objective should clearly explain the activity is being performed to fulfill the service unit requirement.

Example:

- ✓ Contracting a RD to present a food and medication interaction presentation at a senior center.

This is a group presentation. Count as one unit.

Fact Sheet – Senior Companion

Instructions for Completion of the Service Unit Plan Objectives

Contact Person(s):
Cecilia Perez-Dunn, cdunn@aging.ca.gov; (916) 928-2292
Mary Pynn, mpynn@aging.ca.gov; (916) 928-2294
Carol Gordon, cvgordon@aging.ca.gov; (916) 928-2291

Requirements:

The Senior Companion Program (SCP) Service Unit Plan Objectives shall conform to the federal and state SCP service population and service category requirements defined in the SCP program regulations:

45 Code of Federal Regulations (CFR) Part 1207 and 2551

Volunteer Service Years (VSY) is a budget term, defined by the Corporation for National and Community Service (CNCS), which equals 1,044 hours.

Cost per VSY (unit of service) should be calculated by dividing **$4,675** into the total amount of funding and when calculating VSY round down to the closest whole number.

For example: $26,000 divided by $4,675 = 5.56 VSYs (projects should round down to 5)

Volunteer Hours: Each VSY is equivalent to 1,044 hours, therefore, if the project funds 5 VSY the estimate of volunteer hours would equal 5,220 hours for the fiscal year.

Seniors Served: SCPs authorizing legislation requires that volunteers provide person-to-person services to the frail and isolated elderly. Therefore, the average ratio of volunteer to clients is 1 to 5.

For example: 5 VSY x 5 = 25 clients served

Senior Volunteers

In this example, the project has 5 VSY. In many cases it takes more than one volunteer to fill a VSY, therefore, the number of volunteers does not have to be 5, but should be near 5.

REMINDERS AND CLARIFICATIONS REGARDING SCP

Purpose

To engage persons 60 and older, particularly those with limited incomes, in volunteer service to meet critical community needs and to provide a high quality experience that will enrich the lives of both the volunteers and seniors served. Program funds are used to support Senior Companions in providing supportive, individualized services to help adults with special needs maintain their dignity and independence. Enabling legislation: The ***Domestic Volunteer Service Act of 1973 (Public Law 93-113) and Program Regulations 45 CFR Part 1207 and 2551.***

Sponsor is a public agency or private non-profit organization (AAA or subcontractor) which is authorized by the CNCS to operate a local Senior Companion Program.

APPENDIX X – PSA #____

Check each applicable planning cycle:
☐FY 2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

Legal Assistance[31]

This section must be completed and submitted with the Four-Year Area Plan.
Any changes to this Appendix must be documented on this form and remitted with Area Plan Updates.

---

1. Specific to Legal Services, what is your AAA's Mission Statement or Purpose Statement? Statement must include Title III B requirements.

2. Based on your local needs assessment, what percentage of Title IIIB funding is allocated to Legal Services?

3. Specific to Legal Services, what is the targeted senior population and mechanism for reaching targeted groups in your PSA? Discussion:

4. How many legal assistance providers are in your PSA? Complete table below.

Fiscal Year	# Legal Services Providers
2005-2006	
2006-2007	
2007-2008	
2008-2009	

5. What methods of outreach are providers using? Discuss:

6. What geographic regions are covered by each provider? Complete table below.

Fiscal Year	Name of Provider	Geographic Region covered
2005-2006	a. b. c.	a. b. c.
2006-2007	a. b. c.	a. b. c.

[31] For Information related to Legal Services, contact Chrisorom Okwuosa at 916 419-7500 or COkwuosa@aging.ca.gov

2007-2008	a. b. c.	a. b. c.
2008-2009	a. b. c.	a. b. c.

7. How do older adults access Legal Services in your PSA? Discuss:

8. What are the major legal issues in your PSA? Include new trends of legal problems in your area: Discuss:

9. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. Discuss:

10. What other organizations or groups does your legal service provider coordinate services with? Discuss:

APPENDIX XI-PSA#
Check each applicable planning cycle:

☐FY 2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

Disaster Preparation Planning
Conducted for the 2005-2009 Planning Period
OAA Title III, Sec. 310, CCR Article 2, Section 7529(a) (4) and Section 7547

Effective 2007-08 this information is required to be submitted in the format below and updated annually.

Please provide narrative answers to the following questions. The text boxes following the questions have been formatted to type your answers.

1. Describe the AAA's disaster plan. The plan shall ensure the provision of critical services that will meet the emergency needs of consumers the AAA is charged to serve during medical or natural disaster, such as earthquakes or floods.

2. Describe how AAA would coordinate its disaster response with the local Office of Emergency Services.

3. Identify the local Office of Emergency Services contact person your AAA would coordinate with in the event of a disaster.

name: telephone number: e-mail address: address:

4. Identify your:

AAA Disaster Response Coordinator name: telephone number: e-mail address: address: **AAA Back-up Disaster Response Coordinator** name: telephone number: e-mail address: address:

5. Has your Information and Assistance staff been provided written emergency procedures on how to provide services during and after a disaster?

☐Yes
☐No

If No, Explain:

6. Describe your emergency and disaster training curriculum and the frequency this training is provided to AAA staff that work directly with older individuals.

APPENDIX XII – PSA

Check each applicable planning cycle:

☐FY 2005-06 ☐FY 2006-07 ☐FY 2007-08 ☐FY 2008-09

Baby Boomer Information

To provide an understanding of how AAAs are planning to meet the challenges of the increasingly growing and diverse aging population identified as "Baby Boomers", AAAs are required to answer the following questions:

1. How can we best integrate service systems for the elderly and adults with disabilities while, at the same time, acknowledging and responding to differences between these population groups? (Examples might include use of telemedicine, Internet technology, computer access for communication purposes, etc.)

2. Who are the key stakeholders whose commitment and partnership are essential? (Examples might include health care providers, education and training institutions, major employers, etc.)

3. How can we assure we help empower individuals to remain as independent and engaged as possible for as long as possible? (Examples might include consumer surveys, customer friendly access to services, education, information sharing, etc.)

4. How can the arrangement of services be delivered to the consumer in a seamless, coordinated manner, regardless of program administration and

jurisdiction? (Examples might include suggestions from consumers, stakeholders, program providers, program administrators, etc.)

5. What administrative hurdles and barriers to change need to be overcome at both the state and county/local level? (Examples might include an inability to "think outside the box", poor communication, lack of awareness, etc.)

6. How do we provide a leadership and advocacy role in the development of service system standards that are uniform and not dependent upon income? In other words, how do we avoid having separate (and unequal) systems of care for low, moderate, and upper-income persons? (Examples might include using existing association organization meetings to review standards, consumer review, etc.)

7. How do we assure quality standards are maintained or developed across services regardless of the funding source and/or the service provider? (Examples may include consumer determination of quality, focused monitoring of service provision including consumers, testing new service delivery methods before finalizing standards, etc.)

PART FIVE - ASSURANCES – PSA#____
Submit with Four-Year Plan Only

Assurances Required by the Older Americans Act of 1965, As amended in 2000

A. The Area Agency agrees that it shall:

Requirement: OAA 306(a)(2)
Assurance: Provide assurances that an adequate proportion, as required under Section 307(a)(2), of the amount allotted for Part B to the Planning and Service Area will be expended for the delivery of each of the following categories of services:

(A) services associated with access to services (transportation, outreach, information and assistance, and case management services);
(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
(C) legal assistance;

and assurances that the AREA AGENCY ON AGING will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

Requirement: OAA 306(a)(4)(A)(i)
Assurance: Provide assurances that will set specific objectives for providing services to older individuals with greatest economic need and older individuals with greatest social need, include specific objectives for providing services to low-income minority individuals and older individuals residing in rural areas, and include proposed methods of carrying out the preference in the area plan.

Requirement: OAA 306(a)(4)(ii)
Assurance: Provide assurances that in each agreement made with a provider of any service under this title, a requirement that such provider:

(A) specify how the provider intends to satisfy the service needs of low-income minority individuals and older individuals residing in rural areas in the area served by the provider;
(B) to the maximum extent feasible, provide services to low-income minority individuals and older individuals residing in rural areas in accordance with their need for such services; and

(C) meet specific objectives established by the AREA AGENCY ON AGING, for providing services to low-income minority individuals and older individuals residing in rural areas within the planning and service area.

Requirement: OAA 306(a)(4)(A)(iii)
Assurance: With respect to the fiscal year preceding the fiscal year for which such plan is prepared:

(A) identify the number of low-income minority older individuals in the planning and service area;
(B) describe the methods used to satisfy the service needs of such minority older individuals; and
(C) provide information on the extent to which the AREA AGENCY ON AGING met the objectives described in clause (a)(4)(A)(i).

Requirement: OAA 306(a)(4)(B)
Assurance: Provide assurances that outreach efforts will identify individuals eligible for assistance under this Act, with special emphasis on:

(A) older individuals residing in rural areas;
(B) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
(C) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
(D) older individuals with severe disabilities;
(E) older individuals with limited English-speaking ability; and
(F) older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals);

and inform the older individuals referred to in (A) through (F), and the caretakers of such individuals, of the availability of such assistance.

Requirement: OAA 306(a)(4)(C)
Assurance: Provide assurance that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas.

Requirement: OAA 306(a)(5)
Assurance: Provide assurances that it will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, with agencies that develop or provide services for individuals with disabilities.

Requirement: OAA 306(a)(9)
Assurance: Provide assurances that in carrying out the State Long-Term Care Ombudsman Program under Section 307(a)(9), it will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title.

Requirement: OAA 306(a)(11)
Assurance: Provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including:

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and, if so, an assurance that the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;
(B) an assurance that the area agency on aging will, to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under Title VI; and
(C) an assurance that the area agency on aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

Requirement: OAA 306(a)(13)(A)
Assurance: Provide assurances that it will maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships.

Requirement: OAA 306(a)(13)(B)
Assurance: Provide assurances that it will disclose to the Assistant Secretary and the State agency:
(A) the identity of each non-governmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
(B) the nature of such contract or such relationship.

Requirement: OAA 306(a)(13)(C)
Assurance: Provide assurances that it will demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contracts or such commercial relationships.

Requirement: OAA 306(a) (13) (D)
Assurance: Provide assurances that it will demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contracts or such relationships.

Requirement: OAA 306(a) (13) (E)
Assurance: Provide assurances that it will, on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals.

Requirement: OAA 306(a) (14)

Assurance: Provide assurances that funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the AREA AGENCY ON AGING to carry out a contract or commercial relationship that is not carried out to implement this title.

Requirement: OAA 306(a) (15)
Assurance: Provide assurances that preference in receiving services under this title will not be given by the AREA AGENCY ON AGING to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title.

Code of Federal Regulations Requirements:

[a] The Older Americans Act intends that the area agency on aging shall be the leader relative to all aging issues on behalf of all older individuals in the planning and service area. This means that the area agency shall proactively carry out, under the leadership and direction of the State agency, a wide range of functions related to advocacy, planning, coordination, interagency linkages, information sharing, brokering, monitoring and evaluation, designed to lead to the development or enhancement of comprehensive and coordinated community based systems in, or serving, each community in the Planning and Service Area. These systems shall be designed to assist older individuals in leading independent, meaningful, and dignified lives in their own homes and communities as long as possible.

[b] A comprehensive and coordinated community-based system described in paragraph (a) of this section shall: {1} Have a visible focal point of contact where anyone can go or call for help, information or referral on any aging issue; {2} Provide a range of options; {3} Assure that these options are readily accessible to all older individuals: The independent, semi-dependent and totally dependent, no matter what their income; {4} Include a commitment of public, private, voluntary, and personal resources committed to supporting the system; {5} Involve collaborative decision-making among public, private, voluntary, religious, and fraternal organizations and older people in the community; {6} Offer special help or targeted resources for the most vulnerable older individuals, those in danger of losing their independence; {7} Provide effective referral from agency to agency to assure that information or assistance is received, no matter how or where contact is made in the community; {8} Evidence sufficient flexibility to respond with appropriate individualized assistance, especially for the vulnerable older person; {9} Have a unique character which is tailored to the specific nature of the community; {10} Be directed by leaders in the community who have the respect, capacity, and authority necessary to convene all interested individuals, assess needs, design solutions, track overall success, stimulate change, and plan community responses for the present and for the future. CFR [1321.53(a)(b)]
Use the resources made available to the area agency on aging under the OAA to finance those activities necessary to achieve elements of a community-based system set forth in paragraph (b) of section 1321.53. [1321.53(c)]

Work with elected community officials in the planning and service area to designate one or more focal points on aging in each community, as appropriate. [1321.53(c)]

Assure access from designated focal points to services financed under the Older Americans Act. [1321.53(c)]
Work with, or work to assure that community leadership works with, other applicable agencies and institutions in the community to achieve maximum collocation at, coordination with, or access to other services and opportunities for the elderly from the designated community focal points. CFR [1321.53(c)]

Consult with and support the State's Long Term Care Ombudsman Program. [1321.61(b)(4)]
[Not deem any] requirement in Section 1321.61 to supersede a prohibition contained in the Federal appropriation on the use of Federal funds to lobby the Congress; or the lobbying provision applicable to private nonprofit agencies and organizations contained in OMB Circular A-122. [1321.61(d)]

Assure that individuals age 60 and over who are frail, homebound by reason of illness or incapacitating disability, or otherwise isolated, shall be given priority in the delivery of services under this part. [1321.69(a)]

B. The California Department of Aging (CDA) assures through the area agencies on aging:

Requirement: OAA 305(c)(5)
Assurance: That in the case of a state specified in subsection (b)(5), the State agency and area agency on aging shall provide assurance, determined adequate by the State agency, that the area agency will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

Requirement: OAA 307(a)(7)(B)
Assurance:
(A) no individual (appointed or otherwise) involved in the designation of the State agency or an area agency on aging, or in the designation of the head of any subdivision of the State agency or of an area agency on aging, is subject to a conflict of interest prohibited under this Act;
(B) no officer, employee, or other representative of the State agency or an area agency on aging is subject to a conflict of interest prohibited under this Act; and
(C) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

Requirement: OAA 307(a)(11)(A)
Assurance: That AREA AGENCY ON AGING will:
(A) enter into contracts with providers of legal assistance, which can demonstrate the experience or capacity to deliver legal assistance;

(B) include in any such contract provisions to assure that any recipient of funds under division (A) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and
(C) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

Requirement: OAA 307(a)(11)(B)
Assurance: That no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the area agency on aging makes a finding, after
assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

Requirement: OAA 307(a)(11)(D)
Assurance: To the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals.

Requirement: OAA 307(a)(11)(E)
Assurance: That AREA AGENCY ON AGING will give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

Requirement: OAA 307(a)(12)
Assurance: Whenever the State desires to provide for a fiscal year for services for the prevention of abuse of older individuals, that any area agency on aging carrying out such services will conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for:
(A) public education to identify and prevent abuse of older individuals;
(B) receipt of reports of abuse of older individuals;
(C) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and
(D) referral of complaints to law enforcement or public protective service agencies where appropriate.

Requirement: OAA 307(a)(14)
Assurance: That if a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the area agency on aging for each such planning and service area:
(A) To utilize in the delivery of outreach services under Section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability.
(B) To designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include:

(i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and
(ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effective linguistic and cultural differences.

Requirement: OAA 306(a)(15)
Assurance: Provide assurances that preference in receiving services under this title will not be given by the area agency on aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title

Requirement: OAA 307(a)(18)
Assurance: That AREA AGENCY ON AGING will conduct efforts to facilitate the coordination of community-based, long-term care services, pursuant to Section 306(a)(7), for older individuals who:
(A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;
(B) are patients in hospitals and are at risk of prolonged institutionalization; or
(C) are patients in long-term care facilities, but who can return to their homes if community-based services are provided to them.

Requirement: OAA 307(a)(26)
Assurance: That funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the State agency, or an area agency on aging, to carry out a contract or commercial relationship that is not carried out to implement this title.

PART SIX: DEFINITIONS

- **Rural:** Rural: Per State Program Reports, PM 97-02, rural is defined as follows, “Rural status will be individually determined for each registered client, using the client’s zip code matched to Census boundaries. The Census boundaries will then be matched to the Census definition of rural areas. Rural area, as defined by the Census, means any area that is not defined as urban. Urban is comprised of: Urbanized areas (a central place and adjacent densely settled territory with a combined minimum population of 50,000); and an incorporated place or a census designated place with 20,000 or more inhabitants.

- **Caregiver:** As used in the *Title IIIE Program*: Unpaid, informal assistance provided by supportive family members or friends.

- **Disability:** The term ``disability'' means (except when such term is used in the phrase ``severe disability'', ``developmental disabilities'', `physical or mental disability'', ``physical and mental disabilities'', or ``physical disabilities'') a disability attributable to mental or physical impairment, or a combination of mental and physical impairments, that results in substantial functional limitations in 1 or more of the following areas of major life activity: (A) self-care, (B) receptive and expressive language, (C) learning, (D) mobility, (E) self-direction, (F) capacity for independent living, (G) economic self-sufficiency, (H) cognitive functioning, and (I) emotional adjustment.   *Older Americans Act*

- **Severe Disability:** The term ``severe disability'' means a severe, chronic disability attributable to mental or physical impairment, or a combination of mental and physical impairments, that— (A)is likely to continue indefinitely; and (B) results in substantial functional limitation in 3 or more of the major life activities specified in subparagraphs (A) through (G) of paragraph (8). *Older Americans Act*