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## PROGRAM MEMO

**To:** Area Agencies on Aging

**No:** 20-13 (CORRECTED)

**DATE RE-ISSUED:** July 16, 2020

**SUBJECT:** The Coronavirus Aid, Relief, and Economic Security (CARES) Act Funding, Planning, Information, and Updates on Continued Federal Spending Flexibilities

**EXPIRES:** September 30, 2021

**PROGRAMS AFFECTED:** Older Americans Act Title IIIB, Title III-C1, Title III-C2, Title III-E, Title VII

**SUPERSEDES:** N/A

### PURPOSE

This Program Memo (PM) provides guidance on local planning and expenditure of Coronavirus Aid, Relief, and Economic Security (CARES) Act funding to address the needs of older adults during the Coronavirus (COVID-19) crisis. The PM also provides information on funding flexibilities and fiscal and reporting requirements associated with the CARES Act funding.

### CARES ACT PLANNING QUESTIONNAIRE

The CDA is collecting the AAAs' plans for the use of the CARES Act funding via a short on-line questionnaire. Specifically, the questionnaire addresses: how AAAs plan to spend the CARES funding in the local area, how the AAA CARES plans respond to the needs of older adults in the area during the COVID-19 pandemic, how the CARES funding will meet the needs of diverse and underserved communities, and how CARES funding will build upon or be different from the activities provided under the Families First Coronavirus Response Act (FFCRA) and Older Americans Act (OAA) funding.

The purpose of collecting this CARES planning information is for CDA and AAAs to: 1) know and to share with stakeholders and the public how the CARES funding is being used to address the needs of older adults during the COVID-19 crisis; (2) advance equity and address systemic racism by demonstrating how the needs of California's diverse and underserved communities are being addressed with the CARES funding; (3) identify potential opportunities for collaboration among AAAs and share innovative strategies identified in the plans with the entire AAA network; (4) and identify opportunities for CDA to provide support and technical assistance to AAAs as CARES Act activities are funded.

The CDA has developed a planning questionnaire to capture this information called the "AAA CARES Act Planning Questionnaire" - accessible via the following link: <https://forms.gle/f8chTXqgbHKchU5z9>. Please complete the questionnaire by close of business Friday, July 17<sup>th</sup>.

- Please note that this CARES Act planning questionnaire is separate from the Local Area Plans (LAPs), that are due Wednesday, July 15<sup>th</sup>. However, AAAs may draw upon the needs assessment used to develop the LAPs to inform the responses provided in the CARES Act planning questionnaire.

- Note also that the CARES planning questionnaire also briefly addresses the AAA's use of the federal funds, provided under the FFCRA. This questionnaire does not replace the Quarterly Expenditure data reporting required by the Administration on Community Living and due to CDA (for March 2020-June 2020) on July 15<sup>th</sup>. The questionnaire and the quarterly report will both help CDA identify any additional technical assistance or guidance that AAAs may need to quickly, strategically, and effectively address issues or concerns with the expenditure of FFCRA and CARES funds.

CDA is also providing an additional "Equity Tool" developed by the Master Plan for Aging Equity Workgroup which is called "Ensuring Equity in Program Planning and Delivery". The tool will assist AAAs in determining whether equity is adequately addressed in their CARES Act plans; see Attachment 1.

### **FUNDING INFORMATION AND REQUIREMENTS**

In response to the COVID-19 pandemic, Congress approved the CARES Act which allocated \$955 million, nationally, to support older adults and people with disabilities in the community during the COVID-19 public health emergency.

California's CARES Act allocation amount is \$83.5 million; CDA will not require AAAs to submit "Budgets" for this funding. The CARES Act allocations are based on the Federal Fiscal Year (FFY) 2019 emergency grant awards and, as outlined in the federal Notice of Award, these funds must be fully expended by September 30, 2021.

The CARES Act program funding described above does not have a match requirement. AAAs may use up to 10% of these funds to cover Administrative costs; although, any CARES Administration expenditures have a 25% local match requirement. AAAs do not have to expend Administration dollars on administrative activities; all CARES Act funding can be expended on COVID-19 response activities.

CDA waives our requirement of the board resolution for the acceptance of CARES Act emergency funds. Please note, this waiver only applies to CDA's requirement and AAAs will still need to follow their individual/local requirements for accepting these funds which may require a board resolution.

Per [PM-20-05](#), CDA continues to require pre-approval of AAA Administrative and AAA Direct Services equipment expenditures/purchases over \$5,000 and all computing equipment, regardless of cost. Please work with your assigned CDA Program Analyst (via email) for pre-approval of equipment purchases. To ensure appropriate tracking and use of funds, AAAs have delegated approval authority for subcontract equipment purchases and should require pre-approval of those equipment purchases over \$5,000 and of all computing equipment, regardless of cost. In doing so, AAAs will be able to more effectively meet Closeout requirements which include maintaining appropriate written pre-approval records and inventory for all subcontractor equipment purchases.

Please note that the department may review expenditures, via monitoring or audits, and recover funds for any unallowed costs.

### **BUDGET DISPLAYS**

The Budget Displays for the CARES Act allocations will reflect funding being available from April 1, 2020, through September 30, 2021. This allows for the backdating of allowable CARES Act expenditures up to April 1, 2020. The funding in the Budget Displays will be reflected in the following service categories: Title III B Supportive Services, Title III C2 Home-Delivered Meals, Title III E Family Caregivers, and Title VII Ombudsman Program.

Please contact your assigned fiscal analyst for your AAAs Budget Display. This document is no longer available on the AAA page of CDAs website.

## **STAFFORD ACT REMINDER FOR CARES ACT AND OTHER FUNDING**

As a reminder, under the continued provisions of the Stafford Act, AAAs have discretion to spend the existing Title III funding, as well as CARES Act funds, on COVID-19 response activities and services outside of the originally specified categories for any necessary disaster relief for older individuals.

California has been granted the Major Disaster Declaration (#DR-4482) under the Stafford Act. This allows AAAs maximum flexibility with all Title III and CARES Act funding. Section 310(c) permits states to use any portion of the funds made available under any, and all, sections of the Act for disaster relief for older individuals. In this regard, flexibility is provided for states – without the need for a separate application, transfer request, or request for a waiver to use existing allocations already made to them under Title III-B, C-1, C-2, D, and E for disaster relief. AAAs have discretion to spend any Title III funding on disaster relief and will not be required to submit transfers to do so.

This means that a state may use existing and CARES Act Title III-B, C-1, C-2, D, and/or E funds for any disaster relief activities for older individuals or family caregivers served under the Older Americans Act (OAA), which may include, but are not limited to:

- providing home-delivered or drive through and take-home meals/groceries;
- providing well-being checks via phone, in-person, or virtual means; and
- providing chore, grocery/pharmacy/supply delivery, or other daily living services.

As an example, as part of their COVID-19 disaster relief activities, a state may use:

- funding originally allocated under Title III-C-1 to provide take-home meals and
- funding originally allocated under Title III-D to conduct daily phone well-being checks.

## **ALLOCATION METHODOLOGY AND PAYMENT**

CARES Act funding has been allocated based on the FFY 2019 Interstate Funding Formula factors. This funding is separate from the Area Plan funding and has no impact on previous Area Plan allocations.

The [CARES Act AAA-by-AAA Allocation](#) document shows the amount, by service category, that each AAA will receive via direct allocation. As noted in the allocation document 90% of CARES Act funding will be distributed directly to AAAs; 5% is reserved as pooled Local Assistance funding for shared priority investments for shared services, resources, projects, and initiatives; and 5% is allocated for state operations and initiatives.

These funds are being directly allocated to AAAs and do not require a new contract or a contract amendment.

CDA will process a one-time direct-allocation payment for an AAA's CARES Act allocation by July 31, 2020, pending CDA review of the CARES planning questionnaire and Families First reporting by the AAA. Any CDA questions about AAA CARE planning and Family First reporting will be addressed promptly and collaboratively with the AAA.

## **TRACKING, EXPENDITURE REPORTS AND CLOSEOUT**

As mentioned above, CARES Act funding is separate from all other Area Plan funding and must be tracked separately.

Service data and expenses for CARES Act funding should not be tracked in/for the NAPIS/SPR systems. The Administration of Community Living, which provides federal oversight of this funding, has requested that AAAs and providers track the data and expenditures separately, “at a minimum and where possible, States should be recording the number of clients to whom service is provided, the name or category of services provided, the number of units of service provided, and the expenditures related to providing such services.”

The department is currently developing an on-line data collection tool specific to CARES Act service and expenditure data. Additionally, CDA will continue to collect information on meals, information and assistance provided via the [Local COVID Response Data Portal](#).

Effective October 31, 2020, AAAs must submit monthly CARES expenditure and service data reports to CDA. Expenditure reporting must include:

- Fund source (e.g., CARES Act, Families First Act, etc.);
- Original service category (i.e., Title III B Supportive Services, Title III C2 Home-Delivered Meals, Title III E Family Caregivers, or Title VII Ombudsman Program) that the funding was allocated to via the initial [CARES Act AAA-by-AAA Allocation](#) document;
- Service or activities that were funded regardless of whether those services/activities match the service category; and
- It is the responsibility of the AAA to track and monitor the actual number of persons served and the activities/services provided

Until the new CARES and Families First Act Data Portal is launched to report service data and expenditures, AAAs must use the “CARES Expenditure Report” which will be forthcoming. This document will be located under the [Fiscal Forms and Documents](#) page on CDA’s website. For guidance on how to report expenditures, refer to the forthcoming “CARES Expenditure Report Instructions” which will be located under the [Fiscal Forms and Documents](#) page on CDA’s website.

A closeout will be due on **October 31, 2021**, for the CARES Act funds. This closeout will be separate from the Families First Act and Area Plan Closeout. Remaining fund balances will not be eligible for carryover. If AAAs elect to expend up to 10% of their CARES Act funds on Administration activities, they must provide the local match information in the CARES Act Closeout documents.

**REPORTING DEADLINES**

AAAs must abide by the expenditure and service reporting dates and guidance listed above. Effective October 31, 2020, CARES Act Monthly Expenditure Reports are due at the end of each following month. Expenditure time periods and Closeout deadlines will be footnoted on the Budget Display.

**INQUIRIES**

For fiscal and data inquiries, email: [FiscalTeam@aging.ca.gov](mailto:FiscalTeam@aging.ca.gov)

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# ENSURING EQUITY IN PROGRAM PLANNING & DELIVERY



Equity is a goal that can be reached through a pathway of equality. Aging and Disability Services' principles shall include, but not be limited to, the following:

- Equity must be embedded in decision-making during the formation stages of any programs and/or services.
- The strengths and assets of each community must be highlighted and used to help us to move in culturally appropriate and inclusive ways.
- Systemic racism can only be eliminated through systemic solutions. These pandemics only heightened and unveiled existing disparities; they did not create them.
- Programs, services, and activities must be very specific and explicit about the communities they are attempting to address. “Communities of color” or generic “diversity” language weakens and takes power away from the recommendation and the groups we aim to serve. To be explicit in terminology provides power to the group that has been systemically underrepresented or misrepresented.
- Programs and/or services should not unintentionally further exacerbate inequities experienced by some communities.
- There is intersectionality between race, class, gender, and sexual orientation. Therefore, recommendations should be guided by the principle that Californian is home to all residents throughout their lifespan, with particular emphasis in creating systems that are supportive and inclusive of people of all races, classes, genders, and sexual orientations.
- Systemic racism, ageism, able-ism, and sexism can only be eliminated through systemic solutions. Programs and/or services should strive to transform the systems that impact the lives of those most affected by systemic and institutionalized discrimination and who, therefore, have experienced the most profound and adverse impacts during COVID-19.

***“The route to achieving equity will not be accomplished through treating everyone equally. It will be achieved by treating everyone justly according to their circumstances.”***

— Paula Dressel, *Race Matters Institute*

**We offer the following guiding questions in planning and implementation of aging and disability programs and/or services.**

## **QUESTIONS**

1. What needs, gaps, and/or organizational barriers are you addressing to further diversity, equity, and inclusion through your programs and/or services?
2. Who determined the basic needs, gaps, and/or organizational barriers to equity when designing the programs and/or services? How were they determined? (i.e. primary research, secondary research, key informant interviews, subject matter expertise)
3. Do the resulting programs and/or services take into account the cultures and languages of impacted communities? For example, in determining those needs, was key information (access to services, forms, teaching materials, social media, phone lines) collected directly from the communities and made available in-language and in-culture?
4. How do the data/research inform or support program and/or services planning and implementation? Did you refer to research conducted in a way that was/is inclusive and reflective of the demographic and cultural makeup of California?
5. How do the resulting programs and/or services build on the strengths and assets of the impacted communities?
6. Do the programs and/or services take into account impacts on, and the rights of, people with disabilities? Please refer to the [Olmstead Act](#) for guidance.