THE BOARD OF SUPERVISORS OF THE COUL	NTY OF STANISLAUS NRY
DEPT: Aging & Veterans Services	BOARD AGENDA # *B-1
Urgent 🗂 Routine 🔳 📈	AGENDA DATE April 29, 2014
CEO Concurs with Recommendation YES (Information Attached)	4/5 Vote Required YES NO
SUBJECT [.]	

Approval of Area Agency on Aging Fiscal Year 2014-2015 Planning and Service Area (PSA) Plan Update

STAFF RECOMMENDATIONS:

- 1. Approve the Area Agency on Aging's Fiscal Year 2014-2015 Planning and Service Area (PSA) Plan Update.
- 2. Authorize the Chairman of the Board of Supervisors and the Director of the Area Agency on Aging to sign the Transmittal Letters to the California Department of Aging.
- 3. Return original signed Transmittal Letters to the Area Agency on Aging.

FISCAL IMPACT:

The projected PSA Plan Budget for Fiscal Year 2014-2015 is \$2,634,272. The budget is made up of \$1,672,104 from the California Department of Aging, \$179,597 from the County's matching share of Area Agency on Aging administration to fulfill federal Older Americans Act and state mandates, and \$782,571 from contracting providers for the minimum required match for each program, which includes cash / in-kind contributions. This funding will be included in the Area Agency on Aging 2014-2015 Final Budget.

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BOARD ACTION AS FOLLOWS:	
	No . 2014-176

	Supervisor Chiesa	, Seconded by Supervisor <u>Monteith</u>
and approved	by the following vote	B,
Ayes: Supervis	sors: O'Brien, Chiesa	Withrow Monteith and Chairman De Martini
Noes: Supervis	sors:	None
Excused or Ab	sent: Supervisors:	None
Abstaining: Su	pervisor:	
1) <u>X</u> Ap	proved as recomme	nded
2) Der	nied	
3) Apj	proved as amended	
4) Oth	ner:	

MOTION:

time Formare

ATTEST:

CHRISTINE FERRARO TALLMAN, Clerk

File No.

Approval of Area Agency on Aging Fiscal Year 2014-2015 Planning and Service Area (PSA) Plan Update Page 2

DISCUSSION:

The Area Agency on Aging (AAA) is designated by the California Department of Aging and the local Board of Supervisors to be the lead agency in the County for advocacy, planning, and program development on behalf of older persons in the County. The mission of the Area Agency on Aging is:

"To maintain, enhance, and improve the quality of life for seniors in Stanislaus County by developing systems of home and community-based services which promote independence and self-sufficiency."

As the lead agency in the County for advocacy, planning and program development for seniors, the Stanislaus County Area Agency on Aging has been designated the Planning and Service Area (PSA) 30 by the California Department of Aging. As PSA 30, the Area Agency on Aging receives funding from the Administration on Aging, the Federal agency given the duty of overseeing the Older Americans Act programs. A requirement of the Older Americans Act is to submit an Area Plan every four years, with updates annually, to the California Department of Aging for approval and distribution of the funds. The current four year Area Plan cycle began July 1, 2012 and is in effect through June 30, 2016. The Stanislaus County Board of Supervisors approved the four year plan, April 17, 2012. It was submitted to the California Department of Aging, April 30, 2012 and received final approval October 26, 2012.

The Area Plan includes all the requirements established by both federal law and guidance from the State. It includes goals and objectives, outlining the anticipated number of senior citizens to be served, specific to each program. The Area Plan also includes objectives of how the Area Agency on Aging staff and volunteers will collaborate with County and community agencies to provide for the needs of senior citizens, disabled persons and caregivers that go beyond the available federal funding. Older Americans Act programs include: Assisted Transportation, Home Delivered, and Congregate Meals, Senior Employment, Long-Term Care Ombudsman and Elder Abuse Prevention, Family Caregiver Support, Homemaker, Senior Law, and Disease Prevention/Health Promotion programs.

The 2014-2015 Planning and Service Area Plan Update provides an update of goals and objectives for the Area Agency on Aging's Four-Year planning document (the 2012-2016 planning and Service Area Plan). The updated version of the Plan also integrates any new objectives in the Area Plan Budget for Fiscal Year 2014-2015 that begins on July 1, 2014.

The Area Agency on Aging (AAA) will continue working on the following two goals:

1. Provide Information and Assistance to Senior Citizens, Caregivers, and Disabled Persons. The AAA staff will strive to provide comprehensive information about senior and caregiver services to the public. Approval of Area Agency on Aging Fiscal Year 2014-2015 Planning and Service Area (PSA) Plan Update Page 3

2. Promote Health & Well-Being for Senior Citizens, Disabled Persons, and Caregivers. The AAA staff and volunteers will continue to address concerns about falling, loneliness and depression expressed in the Older Adult Survey. Staff will seek ways that can help people be healthier and stay as independent as possible.

This Area Plan Update integrates seven new Objectives into the Four-Year 2012-2016 Area Plan. These new Objectives fall under Goals # 1 and # 2.

<u>Goal # 1</u>:

- 1. Objective 1.14: The Health Insurance Counseling and Advocacy Program (HICAP) staff and volunteers at the Area Agency on Aging will partner with staff members in the city of Turlock and the Modesto Social Security office to establish satellite HICAP offices.
- 2. Objective 1.15: The Area Agency on Aging Prevention and Early Intervention (PEI) staff will develop an outreach letter and packet to deliver to Primary Care physicians promoting the PEI services (Counseling and Friendly Visitor Programs) and offering staff presentations.
- 3. Objective 1.16: The Area Agency on Aging staff will recruit and train volunteers to provide respite for Family Caregiver Support Program recipients.

<u>Goal # 2</u>:

- 1. Objective 2.12: The HICAP staff will partner with the older adult Prevention and Early Intervention counseling programs to identify and train a lead HICAP counselor who will specialize in assisting Medicare recipients in accessing mental health benefits and services provided through their Medicare Advantage plans.
- 2. Objective 2.13: The Area Agency on Aging staff will coordinate with members of the Senior Coalition of Stanislaus County to understand and access available services, assisting seniors to age with dignity, choice and independence.
- 3. Objective 2.14: The Area Agency on Aging staff will participate in the Supplemental Nutrition Assistance Program-Education (SNAP-Ed) work plan process with the other local SNAP-Ed partners and the County Nutrition Action Partnership (CNAP) to create and integrated plan that incorporates all of the partners' goals and strategies, and identifies which entities will carry out each activity and at which location.
- 4. Objective 2.15: The Area Agency on Aging staff will coordinate with the Consolidated Transportation Services Agency to recruit volunteers for a transportation program assisting veterans to access health services in Livermore and Palo Alto.

A copy of the updated Plan is available from the Clerk of the Board of Supervisors.

Approval of Area Agency on Aging Fiscal Year 2014-2015 Planning and Service Area (PSA) Plan Update Page 4

POLICY ISSUES:

By approving the Fiscal Year 2014-2015 Update of the Four-Year 2012-2016 Area Plan, Stanislaus County will be able to continue to provide Older Americans Act and Older Californians Act aging services to residents of Stanislaus County, consistent with the Board of Supervisor's priority of ensuring A Healthy Community.

STAFFING IMPACT:

There are no staffing impacts associated with this request, as existing Area Agency on Aging staff will provide services related to the Area Plan.

CONTACT PERSON:

Margie Palomino, Director. Telephone: (209) 525-4601

TRANSMITTAL LETTER Area Plan Update, 2014-2015

AAA Name: Stanislaus County Area Agency on Aging

PSA <u>30</u>

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 ensure compliance with the assurances set forth in this 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 family caregivers in this planning and service area.

1. Jim DeMartini, Chair Stanislaus County Board of Supervisors

2. Patricia Fantazia, President Patric fanto, President Stanislaus County Commission on Aging

3. Margie Palomino, Director

Stanislaus County Aging and Veterans Services

4/29/14

Date

Date

Area Plan Update, 2014-2015 Planning & Service Area 30 Stanislaus County Area Agency on Aging



Margie Palomino, Director

May 2014

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2014-2015 AREA PLAN UPDATE (APU) CHECKLIST (Revised January 2014)

AP Guidance Section	APU Components (To be attached to the APU)	Che Inclu	and the second
	> Update A) through F) ANNUALLY:		
n/a	A) APU-(submit electronically only)		
n/a	 B) Transmittal Letter–(requires hard copy with original ink signatures or official signature stamp- no photocopies) 	Þ]
2, 3, or 4	C) Estimate of the number of lower income minority older individuals in the PSA for the coming year]
7	D) Public Hearings that will be conducted	×]
n/a	E) Annual Budget	×]
10	F) Service Unit Plan (SUP) Objectives and Long Term Care Ombudsman Program Measures and Targets	×]
	Update the following only if there has been a CHANGE or the section was not included in the 2012/16 Area Plan:	Mark Change Change (<u>C or N/</u> C	d .
5	Minimum Percentage/Adequate Proportion		\boxtimes
5	Needs Assessment ¹		
9	AP Narrative Objectives:		
9	System-Building and Administration		
9	Title III B-Funded Programs		
9	Title III B-Transportation		
9	Title III B-Funded Program Development/Coordination (PD or C)		
9	 Title III B/VIIA-Long-Term Care Ombudsman/Elder Abuse Prevention Program 	⊠	
9	Title III C-1		\boxtimes
9	Title III C-2		
9	Title III D		\boxtimes
20	Title III E-Family Caregiver Support Program		
9	Title V-SCSEP Program		
9	HICAP Program		
14	Notice of Intent-to Provide Direct Services		\boxtimes
15	Request for Approval-to Provide Direct Services		

16	Governing Board	\boxtimes	
17	Advisory Council		
18	Legal Assistance		

Area Plan Update, Fiscal Year, 2014-2015

Planning & Service Area 30, Stanislaus County

Narrative Introduction:

Stanislaus County includes a thriving group of diverse communities that help support the aging population. According to data from the California Department of Aging website, the estimated population of seniors over the age of 60 living in the County is over 87,200. Of those seniors, approximately 28,776 identify themselves as being part of a minority group. According to that same data source, approximately 19.4% of the senior population is eligible for Medi-Cal. If that same ratio can be used for the minority population, approximately 5,583 persons have "lower" income in the minority populations. However, using the Elder Economic Security Standard Index (Elder Index) researched and developed by the Insight Center for Community Economic Development, almost 50% of the total elder population in Stanislaus County has insufficient income to meet their needs. The Elder Index considers the costs of food, lodging, transportation, insurance, and other basic expenses to determine the income level needed by various seniors. The numbers in the Elder Index are specific to each county throughout the state.

Though it has decreased in recent years, the unemployment rate as of December 2013 for the County was 12.1%. This rate remains above the state and national averages, 7.9% for California and 7.4% for the nation, as of December. These statistics point to greater needs for all families in Stanislaus County, and especially make the employment prospects for senior citizens more difficult than in other parts of the state and country. Consequently, the Senior Community Service Employment Program (SCSEP), funded through the AAA, is completely enrolled with a waiting list of prospective participants that need such a training program to compete for the region's scarce job prospects.

The staff of the Area Agency on Aging collaborated with the staff of a caregiver organization to sponsor two training sessions to assist professional and informal caregivers of

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Lesbian, Gay, Bisexual, and Transgender (LGBT) persons to understand the unique needs of these persons. These sessions built on each other, were free to the public and were conducted by staff from Open House, San Francisco. In addition, a support group for LGBT seniors is currently in transition from one location to another.

With grant funding from the SCAN Foundation, the Healthy Aging Association and AAA staffs continue to meet with members of the Senior Coalition of Stanislaus County. The Coalition includes representatives from the Managed Care Health Plans that serve seniors who are eligible for both Medi-Cal and Medicare; staff from Adult Protective Services; staff from the Disability Resource Agency for Independent Living; representatives from care facilities; and staff from caregiver organizations. The mission of the Coalition is "To enhance the physical, mental and social well-being, while reducing fall risk for seniors and persons with disabilities in Stanislaus County, in a collaborative community effort through education, coordinated services and best practices for independence." As part of the Coalition, a *Caregiver Information, & Resource Booklet* was published and continues to be distributed at various outreach events. The Booklet is available and updated on the AAA website, <u>www.agingservices.info</u>. The Coalition is part of <u>The SCAN Foundation's Community of Constituents Initiative</u>, building a statewide movement to transform the system of care so that all Californians can age with dignity, choice and independence.

The Healthy Aging Association program, Young at Heart Strength Training, is in the application process to receive the designation of being "evidence-based". The program uses "exer-tubes" (tubes that provide resistance), and exercises designed for senior citizens to increase strength and balance while decreasing the possibility of debilitating falls. For years anecdotal statements from participants have indicated the benefits of this program. One of the Healthy Aging Association staff members, Samantha Strauch, has conducted surveys and pre-and posttests to ascertain the effect the exercises have on the participants. Her results show that with a

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quarter of participants responding to the survey, 93% stated their strength improved, 82% showed improved balance, and 84% increased their flexibility. In addition, respondents stated that they were better able to walk, bend, negotiate stairs, and transfer from a chair or bed. Various health conditions such as arthritis, blood pressure, nutritional habits and mental health showed improvement. Later this spring, Ms. Strauch will be presenting the abstract to her thesis, "Comparing Fall Risk of Older Adults In a Community-Based Fitness Program to Non-Participants", at the 2014 Annual Meeting of the World Congress on Exercise in Medicine.

During the last year the AAA staff has worked closely with the Veterans Services staff and the staff of the Consolidated Transportation Services Agency (CTSA) to assist veterans who need to go to the Bay Area for medical treatment. Wheelchair accessible vans have been donated and the Veterans Administration continues to train the volunteers that drive veterans from the Veterans Clinic in Modesto to Livermore and Palo Alto. A new coordination objective will focus on the ways that the AAA, CTSA, and Veterans Services staffs will work together to recruit new volunteers and promote the opportunity for veterans to receive the health care services available outside the County.

A number of the AAA programs are expanding through the use of volunteers. For several years the AAA has been the recipient of funds from the Behavioral Health and Recovery Services (BHRS) Department to help seniors prevent isolation and depression. Two of the programs, the Peer Counseling and Friendly Visitor programs have successfully matched volunteers to seniors in their homes. The HICAP, Healthy Aging Association, and Long Term Care Ombudsman programs continually seek volunteers to keep their programs strong and effective. The AAA staff is seeking volunteers to provide additional respite to informal caregivers. This new program will include a mandatory training program that includes trainers with extensive experience in the field of aging, health, and mental health services.

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For several years the staff and volunteers from the HICAP program have served seniors in two of our outlying communities, Patterson and Oakdale, one day per month each. The average number of appointments for consultations has been 3-6 per month at each site. Efforts have begun to coordinate with the staff in the city of Turlock and at the Modesto Social Security office to establish similar "HICAP Information Days" at these locations.

The Stanislaus Senior Foundation, a not-for-profit foundation established to assist seniors to maintain their independence as long as possible, continues to effectively augment the services available through the AAA and associated programs. Members of the Foundation are volunteers. During the fiscal year 2013-14, 35 seniors had overdue utility bills and prescription drug co-pay amounts handled for them. The Foundation is funded through donations at a holiday event and grants from various organizations.

SECTION 7. PUBLIC HEARINGS

At least one public hearing must be held each year of the four-year planning cycle.

CCR Title 22, Article 3, Section 7302(a)(10) and Section 7308, OAA 2006 306(a)

Fiscal Year	Date	Location	Number of Attendees	Presented in languages other than English? ¹ Yes or No	Was hearing held at a Long-Term Care Facility? ² Yes or No
	2/1/12	Modesto	9	No	No
	2/3/12	Grayson	12	Yes	No
	2/6/12	Riverbank	24	No	No
	2/7/12	Turlock	15	No	Yes
	2/9/12	Modesto	17	No	Yes
0040 40	2/10/12	Turlock	15	No	No
2012-13	2/17/12	Newman	40	Yes	No
	2/21/12	Empire	4	Yes	No
	2/23/12	Riverbank	12	No	No
	2/27/12	Patterson	30	No	No
	3/8/12	Modesto	8	No	No
	4/9/12	Modesto	15	No	No
2013-14	4/8/13	Modesto	23	No	No
2014-15	4/14/14	Modesto	19	No	No
2015-16					

The following must be discussed at each Public Hearing conducted during the planning cycle:

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

No specific outreach efforts were made to solicit input from these individuals. The Director

² A translator is not required unless the AAA determines a significant number of attendees require translation services. 3 AAAs are encouraged to include individuals in LTC facilities in the planning process, but hearings are not required to be held in LTC facilities.

for the Long Term Care Ombudsman Program regularly attends information meetings throughout the County. She keeps her staff and volunteers who serve institutionalized persons informed about the opportunities to contribute to any plans that affect persons in various care homes. The draft of the Area Plan was distributed to Commission on Aging members and the staff of the AAA providers, with notice of the Public Hearing included with the draft. In-put was solicited and received via that means and the meeting was attended by members of the public not usually part of the Commission on Aging. Some of the information in the introduction, concerning transportation issues was corrected.

2. Were proposed expenditures for Program Development (PD) and Coordination (C) discussed?

X Yes. Go to question #3

Not applicable, PD and C funds are not used. Go to question #4

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

The only comment received was for Objective 1.13. This "PD" objective is listed as "Completed". The Commission on Aging member with the question is concerned that the AAA staff will not continue to solicit volunteers from the Hispanic community. She was assured that efforts will continue to be made to involve volunteers from all ethnic groups, included the Hispanic community. There were no comments regarding the new "PD" and "C" objectives.

4. Attendees were 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

X Yes. Go to question #5

No, Explain:

5. Summarize the comments received concerning minimum percentages of Title III B funds to meet the adequate proportion funding for priority services.

There were no comments or questions.

6. List any other issues discussed or raised at the public hearing.

A question was raised about the source of the estimate of low income seniors who are part of a minority group. It was explained that the information on the CDA website was the source used due to the fact that it estimates the number of seniors who are 60 years old or older.

7. Note any changes to the Area Plan which were a result of input by attendees. No changes.

Goal # 1			
Goal: Provide Information and Assistance to Senior Citizens, Caregivers, and Disabled Persons			
Rationale:			
Based upon the results of the Older Adult Survey where over 52% of respondents indicated as an issue, Getting Information about Services/Benefits, and anecdotal information, the AAA staff will strive to provide more comprehensive information about senior and caregiver services to the public.			
Objectives:	Start & End Dates	PD or C	Update Status
Objective 1.1: The AAA staff will update the DVD previously produced to reflect the most current services.	7/1/12- 6/30/13	PD	Delete-Unable to complete
<u>Outcome</u> : Information about senior and caregiver services will be available to an audience beyond the usual AAA client base.			
<u>Measurement</u> : The completed DVD, commitment by the media to feature the content and resulting contact from the audience.			De gan S
Objective 1.2: The AAA staff and the Fall Prevention Coalition will update and distribute copies of the Fall Prevention Guide.	7/1/12- 6/30/16	С	Ongoing
<u>Outcome</u> : Fall prevention information will be distributed by service providers and at outreach events throughout the county.			
<u>Measurement:</u> The number of guides produced and distributed.			
Objective 1.3: The AAA staff will coordinate with the Stanislaus Elder Abuse Prevention Alliance (SEAPA) to conduct workshops throughout the county to increase awareness of the signs and symptoms of elder abuse, how to prevent abuse, and give the resources to better serve the victims of abuse.	7/1/12- 12/31/12	С	Five workshops and 3 outreach events
<u>Outcome</u> : Approximately 1,000 attendees of workshops will receive educational material concerning elder abuse.			Completed
<u>Measurement</u> : The number of workshops conducted and the pre- and post-tests taken by participants.			

Objective 1.4: The AAA will partner with the Modesto Irrigation District (MID) to purchase and install assistive thermostats for qualified seniors and disabled citizens.	7/1/12- 12/31/13	с	Contract in place through 12/31/13
<u>Outcome</u> : Visually impaired seniors and disabled persons will be able to control the temperature in their homes, increasing their independence and potentially saving money.			Completed
<u>Measurement:</u> A maximum of 10 persons will receive the thermostats.			One unit installed
Objective 1.5: The AAA staff will work with the members of the Fall Prevention Coalition to sponsor the Healthy Aging and Fall Prevention Summit, October 12, 2012. Free health screenings and information about fall prevention and a variety of health topics will be presented to the public.	7/1/12- 10/12/12	С	Complete and ongoing-next Summit-10/17/14
<u>Outcome:</u> Seniors and caregivers will attend the Summit.			
Measurement: The number of attendees and health evaluations completed.			2013-1,150 attendees, 1,320 screenings done
Objective 1.6: The Health Insurance Counseling and Advocacy (HICAP) staff and volunteers at the AAA will partner with staff members in the cities of Oakdale and Patterson to establish HICAP services in the Senior Centers.	7/1/12- 6/30/16	С	Ongoing
<u>Outcome</u> : Senior citizens and caregivers in Oakdale and Patterson will have improved access to information about Medicare benefits.			
<u>Measurement</u> : The number of seniors that access the services.			3-6 seniors per month at each site
Objective 1.7: The AAA staff will coordinate with the staff of the Consolidated Transportation Services Agency (CTSA) to promote their Mobility Training and Bridges programs.	7/1/12- 6/30/16	С	Ongoing
<u>Outcome</u> : Senior citizens will successfully access various forms of transportation.			
<u>Measurement:</u> The number of outreach events and resulting registrations for services.			For FY 2013-14, through March 31, 36 events and 54 seniors assisted

Objective 1.8: The AAA staff and members of the Commission on Aging will work to advocate for continuing assistive transportation services by serving on the Social Services Transportation Advisory Committee of StanCOG and the CTSA Mobility Advisory Committee.	7/1/12- 6/30/16	С	Ongoing
<u>Outcome</u> : The AAA and Commission on Aging will secure greater funding for door through door transportation for seniors and disabled persons who cannot use other means of assisted transportation.			
<u>Measurement:</u> The amount of funds available to establish and continue specialized transportation services.			
Objective 1.9: The AAA staff and Commission on Aging members will partner with the Stanislaus Senior Foundation's staff to assist seniors whose needs exceed available assistance.	7/1/12- 6/30/16	С	Ongoing
<u><i>Outcome:</i></u> Low income seniors will receive assistance to remain independent as long as possible.			
<u>Measurement</u> : The number of seniors that are referred by AAA staff to the Stanislaus Senior Foundation			Between July 1, 2013 and March 31, 2014, 35 seniors received assistance.
Objective 1.10 The AAA staff will promote programs and encourage participation by diverse populations within the County, including seniors of various ethnic backgrounds and LGBT seniors and caregivers.	7/1/12- 6/30/16	С	Ongoing
<u>Outcome</u> : Information about available senior services will be conveyed via participation in outreach opportunities.			
<u>Measurement:</u> The number of events attended by AAA staff.			24 Events through April 2014
Objective 1.11 The AAA staff will establish and maintain a calendar on the www.agingservices.info website with information about events involving senior citizens.	7/1/12- 6/30/16		Ongoing
<u>Outcome:</u> Information about events will be readily accessible through the website. <u>Measurement:</u> The number of events recorded on the website.			

			·····
Objective 1.15 The AAA/PEI staff will develop an			
outreach letter & packet to deliver to Primary Care			
physicians (Family Practice groups) promoting PEI			
services (Counseling and Friendly Visitor Program)			
	7/1/14-		
and offering staff presentations.	6/30/15	PD	New
Outcome: Increased awareness by local physicians	0/50/15		
and their support staff regarding availability of these			
free PEI program offerings for their clients.		j	}
Measurement: The number of doctor offices that			
receive the packet of information about the PEI			
programs & number of presentations to doctor			
staff/groups.			
Objective 1.16 The AAA staff will recruit and train	7/1/14-	PD	New
volunteers to provide respite for Family Caregiver	6/30/15		
Support Program recipients.			
Outcome: Caregivers in the FCSP will have a greater			
number of opportunities to obtain respite from their			
caregiving responsibilities.			
Measurement: The number of specially trained			
volunteers and number of hours available to			
caregivers.			
	+	_	
Goal: #2			
Promote Health & Well-Being for Senior Citizens,			
Disabled Persons, and Caregivers			
Rationale:			
The responses on the Older Adult Survey that			
received the fourth, fifth, and sixth highest ratings			
included concerns about accidents or falls, loneliness			
and feeling sad frequently. Addressing these			
concerns and seeking ways that can help people be			
healthier can help senior citizens stay as independent			
as possible.			
		_L	l

Objectives:	Start & End Dates	PD or C	Update Status
Objective 2.1 The AAA staff will request a resolution from the Board of Supervisors to declare May to be Older Americans Month, bringing attention to the accomplishments and needs of senior citizens in Stanislaus County. The AAA staff and Commission on Aging will coordinate to honor one outstanding senior from each supervisor's district at a Board of Supervisor's Meeting to highlight the contributions they have made to their communities.	1/1/13- 5/31/16	с	Ongoing-this is an annual event.
<u>Outcome</u> : Sponsoring the special event will emphasize the on-going contributions of the senior population. <u>Measurement</u> : Participation by the public to nominate candidates to be honored and the completion of the special session of the Board of Supervisors.			Event-5/20/14.
Objective 2.2 As the recipient of Title IIID funding, the Healthy Aging Association will conduct strength training, Tai Chi and aerobic classes throughout the County to assist seniors in achieving and maintaining optimal health and preventing injuries. <u>Outcome:</u> Seniors will participate in classes that will increase their strength, improve their balance, help with recovery from disease or injury, and prevent falls.	7/1/12- 6/30/16		Ongoing
<u>Measurement</u> : The number of classes available, number of participants, and completed evaluation forms done at 6 month intervals.			
Objective 2.3 Catholic Charities, the agency contracted to provide the Long Term Care Ombudsman Program, will conduct training sessions with facility staff and other direct senior services personnel to assist them effectively care for residents and know resources available to prevent elder abuse.	7/1/12- 12/31/14		
<u>Outcome:</u> Facility staff and social service agency personnel understand the implications of potential elder abuse and how to locate assistive resources for them. <u>Measurement:</u> At least 225 attendees will be trained.			8 Seminars, 185 attendees through 4/1/14

Objective 2.4 The AAA staff will coordinate with the Behavioral Health and Recovery Services (BHRS) to promote utilization of the Prevention and Early Intervention (PEI) programs to adults 60 or older throughout Stanislaus County.	7/1/12- 6/30/16	с	Ongoing
<u>Outcome</u> : AAA staff will participate in the Older Adult Advisory group at least quarterly.			
<u>Measurement</u> : AAA staff will offer a minimum of 6 presentations about the PEI programs to local community groups, and medical or social services providers and participate in a minimum of 12 outreach events.			Through March 2014, 18 presentations done
Objective 2.5 The AAA staff will expand the PEI programs by developing a "navigation" role of the PEARLS counselors. <i>Outcome</i> : The AAA staff will continue to recruit and	7/1/12- 6/30/13	PD	Completed
train volunteers for the Peer Counseling and Friendly Visitor programs. Coordination between programs will be improved.			
<u>Measurement</u> : Staff Services and 2 Social Worker positions will be added. 12 new Friendly Visitors and 10 new Peer Counselors will be recruited and trained.			
Objective 2.6 The AAA staff will partner with the Healthy Aging Association and the Second Harvest Food Bank to expand the Green Bag program.	7/1/12- 6/30/13	PD	Continue through 6/30/14
Outcome: Low income seniors will have access to fresh fruits and vegetables.			
<u>Measurement</u> : The number of seniors receiving produce and the number of new sites for distribution throughout the county.			March 2014- Grant funding available to expand distribution.
Objective 2.7 The AAA staff will plan Enrollment Fairs to assist seniors to access the congregate meals program and various social services. Agencies that will assist will include the Community Services Agency, AARP and other senior service providers.	7/1/12- 6/30/13	PD	Completed
<u>Outcome:</u> Low income seniors will enroll in appropriate programs and increase their participation at congregate meals sites.			
<u>Measurement:</u> The number of Info and Enrollment Fairs, the number of attendees and the census from congregate meals sites.			

Objective 2.8 The new SNAP Ed Nutrition Program will be available for participants of the Health Promotion exercise programs and residents of senior housing complexes. The staff of the Healthy Aging Association, the AAA and the Community Services Agency will work together on this program.	7/1/12- 6/30/13	PD	Completed
<u>Outcome:</u> Low income seniors will learn nutrition facts that will assist them to make healthy choices and enhance their lives.			
<u>Measurement:</u> The number of classes held, attendees, and evaluations completed.			6 Bi-monthly classes held; 200 seniors per month.
Objective 2.9 The AAA staff will partner with Adult Protective Services to expand the PEI programs to include short-term "brief intervention" for seniors whose needs exceed the PEARLS and Peer Counseling programs.	7/1/13- 6/30/14	PD	Completed
<u>Outcome</u> : High risk seniors will be assessed and assisted by connecting them to appropriate resources and helping them "navigate" through the referral process.			
<u>Measurement:</u> Number of seniors assisted with brief intervention.			Through March 2014-17 seniors received special counseling, with referral to other continuing programs.
Objective 2.10 The AAA staff, staff from the Consolidated Transportation Services Agency, and members of the Veterans Advisory Commission will develop a volunteer driver program to assist homebound veterans attend appointments in the San Francisco Bay area.	7/1/13-6/30/14	PD	Completed
<u>Outcome:</u> Veterans will be assisted in getting the medical care needed by having transportation available.			
<u>Measurement:</u> The number of volunteers available and the number of veterans who are able to keep			Vans have been donated and volunteers are being trained.

Objective 2.11 The AAA staff will expand the services available through the MSSP and PEI Programs by providing internship opportunities to CSUS students in the Nursing and Social Work Masters programs. The interns will work with the AAA staff to increase the capacity of the programs and provide support to the programs' social workers.	7/1/13- 6/30/14	PD	Completed
<u>Outcome</u> : Seniors will receive case management, medical and counseling services in their homes. <u>Measurement</u> : The number of seniors assessed by the public health nursing student and masters in social work interns.			MSW-12 seniors,
			PHN-50 seniors
Objective 2.12 The Health Insurance Counseling and Advocacy Program (HICAP) will partner with the older adult Prevention and Early Intervention (PEI) counseling programs to identify and train a lead HICAP counselor who will specialize in assisting Medicare recipients in accessing mental health benefits and services provided through their Medicare Advantage plans.	7/1/14- 6/30/15	PD	New
Outcome: Medicare beneficiaries entitled to outpatient			
mental health benefits (Counseling and /or evaluation)			
will be referred to the appropriate MA plan		ļ	
program/service through appropriate referral process.			
<u>Measurement</u> : The number of referrals to HICAP for individualized assistance.			
Objective 2.13 The AAA staff will coordinate with members of the Senior Coalition of Stanislaus County to understand and access available services, assisting seniors to age with dignity, choice and independence.	7/1/14- 6/30/15	С	New
Outcome: Members of the Coalition will coordinate to		† <u> </u>	
provide accurate information and services for seniors			
and caregivers in Stanislaus County.			
Measurement: The variety of service providers in the			
Coalition and the number of events/services available			
to seniors and caregivers.			
Objective 2.14 The AAA staff will participate in the Supplemental Nutrition Assistance Program-Education	7/1/14- 6/30/15	с	New

(SNAP-Ed) work plan process with the other local SNAP-Ed partners (Public Health, Healthy Aging Association, & UC cooperative) and the County Nutrition Action Partnership (CNAP) to create an integrated plan that incorporates all of the partners' goals and strategies, and identifies which entities will carry out each activity and at which location.			
<u>Outcome</u> : AAA staff will participate in the SNAP-Ed work plan meetings and planning process.			
<u>Measurement</u> : Number of SNAP-Ed meetings, conference calls, or webinars attended. Objective 2.15 The AAA staff will coordinate with the Consolidated Transportation Services Agency to recruit volunteers for a transportation program assisting veterans to access health services in Livermore and Palo Alto. <u>Outcome</u> : Veterans will receive the treatments available in the Bay Area.	7/1/14- 6/30/15	С	New
<u>Measurement:</u> Number of volunteers recruited and the number of veterans receiving services in the Bay Area.			

SECTION 10 - SERVICE UNIT PLAN (SUP) OBJECTIVES

TITLE III/VII SERVICE UNIT PLAN OBJECTIVES CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) uses the National Aging Program Information System (NAPIS) Categories and units of service. They are defined in the <u>NAPIS State Program Report</u>.

For services not defined in NAPIS, refer to the Service Categories and Data Dictionary.

Report the units of service to be provided with <u>ALL funding sources</u>. 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).

1. Personal Care (In-Home)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2012-2013			
2013-2014		<u> </u>	
2014-2015			
2015-2016			

2. Homemaker

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2012-2013	5,400	1	
2013-2014	5,400	1	
2014-2015	5,400	1	
2015-2016			

3. Chore

Unit of Service = 1 hour

Fiscal Year	Goal Numbers	Objective Numbers (if applicable)

Proposed		
Units of Service		

4. Home-Delivered Meal

Unit of Service = 1 meal

Fiscal Year	Proposed	Goal Numbers	Objective Numbers (if applicable)
	Units of Service		
2012-2013	120,000	1	
2013-2014	136,176	1	
2014-2015	140,000	1	
2015-2016			

5. Adult Day Care/Adult Day Health

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2012-2013			
2013-2014			
2014-2015			
2015-2016			

6. Case Management

Unit of Service = 1 hour

Fiscal Year	Proposed	Goal Numbers	Objective Numbers (if applicable)	
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	Units of Service		
2012-2013			
2013-2014			
2014-2015			
2015-2016			

7. Assisted Transportation

Unit of Service = 1 one-way trip

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2012-2013	4,500	1	
2013-2014	4,500	1	
2014-2015	4,500	1	
2015-2016			

8. Congregate Meals

Unit of Service = 1 meal

<u> </u>			
Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2012-2013	75,000	1, 2	2.8
2013-2014	48,000	1	
2014-2015	48,000	1	
2015-2016			

9. Nutrition Counseling

Unit of Service = 1 session per participant

Fiscal Year	Proposed	Goal Numbers	Objective Numbers (if applicable)
	Units of Service		

2012-2013	
2013-2014	
2014-2015	
2015-2016	
40 7	

10. Transportation

Unit of Service = 1 one-way trip

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2012-2013			
2013-2014			
2014-2015			
2015-2016			

11. Legal Assistance

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2012-2013	1,600	1	
2013-2014	1,600	1	
2014-2015	1,600	1	
2015-2016			

12. Nutrition Education

Unit of Service = 1 session per participant

Fiscal Year	Proposed	Goal Numbers	Objective Numbers (if applicable)
	Units of Service		

2012-2013	5,000	1	
2013-2014	4,000	1	
2014-2015	4,000	1	
2015-2016			

13. Information and Assistance

Unit of Service = 1 contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2012-2013	2,000	1	
2013-2014	2,000	1	1.5, 1.10
2014-2015	2,000	1	1.5, 1.10
2015-2016			

14. Outreach

Unit of Service = 1 contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2012-2013	3,500	1	1.2, 1.5, 1.7, 1.10
2013-2014	1,000	1	1.2, 1.5, 1.7, 1.10
2014-2015	500	1	1.2, 1.5, 1.7, 1.10
2015-2016			

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

Title III B, Other Supportive Services

For all Title IIIB "Other" Supportive Services, use the appropriate Service Category name and

Unit of Service (Unit Measure) listed in the CDA Service Categories and Data Dictionary. All "Other" services must be listed separately. Duplicate the table below as needed.

Service Category Cash/Material Aid

Unit of Service 1 instance

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2012-2013	15	1	
2013-2014	10	1	
2014-2015	5	1	
2015-2016			

16. Title III D Health Promotion

Unit of Service = 1 contact

Service Activities: ____Physical Fitness_____

• Title III D/Health Promotion: Enter program goal and objective numbers in the Title III D Service Plan Objective Table below.

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2012-2013	1,200	1, 2	2.2
2013-2014	1,200	1,2	2.2
2014-2015	1,200	1,2	2.2
2015-2016			

<u>TITLE III B and Title VII A:</u> LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES 2012–2016 Four-Year Planning Cycle

Outcome 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)]

Measures and Targets:

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

The average California complaint resolution rate for FY 2009-2010 was 73%.

1. FY 2010-2011 Baseline Resolution Rate: 60%

Number of complaints resolved <u>371</u> + Number of partially resolved complaints <u>46</u> divided by the Total Number of Complaints Received <u>704</u> = Baseline Resolution Rate <u>60</u>%

2. FY 2012-2013 Target: Resolution Rate <u>65</u>%

3. FY 2011-2012 AoA Resolution Rate 65% FY 2013-2014 Target: Resolution Rate 65%

4. FY 2012-2013 AoA Resolution Rate 53% FY 2014-2015 Target: Resolution Rate 67%

5. FY 2013-2014 AoA Resolution Rate ___% FY 2015-2016 Target: Resolution Rate ___%

Program Goals and Objective Numbers: 2.3

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

FY 2010-2011 Baseline: number of meetings attended 10

- 2. FY 2012-2013 Target: <u>16</u>
- 3. FY 2011-2012 AoA Data: 33 FY 2013-2014 Target: 16

4. FY 2012-2013 AoA Data: 27 FY 2014-2015 Target: 35

5. FY 2013-2014 AoA Data: ____ FY 2015-2016 Target: ____

Program Goals and Objective Numbers: 2.3

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

1.	FY 2010-2011 Baseline: number of meetings attended 7	
2.	FY 2012-2013 Target: number <u>10</u>	
3.	FY 2011-2012 AoA Data: 1 FY 2013-2014 Target: 6	
4.	FY 2012-2013 AoA Data: 1 FY 2014-2015 Target: 4	
5.	FY 2013-2014 AoA Data: FY 2015-2016 Target:	
Program Goals and Objective Numbers: 2.3		

D. Consultation to Facilities (AoA Report, Part III-D, #4) Count of instances of ombudsman representatives' interactions with facility staff for the purpose of providing general information and assistance unrelated to a complaint. Consultation may be accomplished by telephone, letter, email, fax, or in person.

1.	FY 2010-2011 Baseline: number of consultations 86	
2.	FY 2012-2013 Target: <u>100</u>	
3.	FY 2011-2012 AoA Data: 100 FY 2013-2014 Target: 100	
4.	FY 2012-2013 AoA Data: 44 FY 2014-2015 Target: 85	
5.	FY 2013-2014 AoA Data: FY 2015-2016 Target:	
Pr	Program Goals and Objective Numbers: 2.3	

E. Information and Consultation to Individuals (AoA Report, Part III-D, #5) Count of instances of ombudsman representatives' interactions with residents, family members, friends, and others in the community for the purpose of providing general information and assistance unrelated to a complaint. Consultation may be accomplished by telephone, letter, email, fax, or in person.

1. FY 2010-2011 Baseline: number of consultations 1085

2. FY 2012-2013 Target: 1000

3.	FY 2011-2012 AoA Data: 3500 FY 2013-2014 Target: 2500
4.	FY 2012-2013 AoA Data: 740 FY 2014-2015 Target: 900
5.	FY 2013-2014 AoA Data: FY 2015-2016 Target:
Pro	ogram Goals and Objective Numbers: 2.3

F. Community Education (AoA Report, Part III-D, #10) LTC Ombudsman Program participation in public events planned to provide information or instruction to community members about the LTC Ombudsman Program or LTC issues. The number of sessions refers to the number of events, not the number of participants.

1.	FY 2010-2011 Baseline: number of sessions <u>8</u>	
2.	FY 2012-2013 Target: 5	
3.	FY 2011-2012 AoA Data: 35 FY 2013-2014 Target: 8	
4.	FY 2012-2013 AoA Data: 24 FY 2014-2015 Target: 8	
5.	FY 2013-2014 AoA Data: FY 2015-2016 Target:	
Program Goals and Objective Numbers: 2.3		

G. Systems Advocacy

 FY 2012-2013 Activity: In the box below, in narrative format, please provide at least one new priority systemic advocacy effort the local LTC Ombudsman Program will engage in during the fiscal year. Enter information in the box below.

Systemic Advocacy Effort(s)

The staff and volunteers of Catholic Charities will actively support the legislative efforts currently under consideration in Sacramento to strengthen the rights of long term care residents and the parameters of Ombudsman personnel. Several bills currently moving through legislative committees will solidify the rights of residents in assisted living facilities. It is anticipated that as these 20 bills identified and or sponsored by the state ombudsman office and or CLTCOA (California Long Term Care Ombudsman Association) work their way through the legislative process, we will engage in letter writing and face to face advocacy with our legislators and their staff. It is anticipated that ombudsmen will participate in the legislative hearings. Already this month, one ombudsman has met personally with an assembly member during their district

"coffee klatch" in order to advocate for residents in long term care. Additional meetings are planned.

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

Measures and Targets:

A. Facility Coverage (other than in response to a complaint), (AoA Report, Part III-D, #6)

Percentage of nursing facilities within the PSA that were visited by an ombudsman representative at least once each quarter **not** in response to a complaint. The percentage is determined by dividing the number of nursing facilities in the PSA that were visited at least once each quarter not in response to a complaint by the total number of nursing facilities in the PSA. NOTE: This is not the total number of visits per year. In determining the number of facilities visited for this measure, no nursing facility can be counted more than once.

1. FY 2010-2011 Baseline: 57%

Number of Nursing Facilities visited at least once a quarter not in response to a complaint 8

divided by the number of Nursing Facilities 19.

- 2. FY 2012-2013 Target: 75%
- 3. FY 2011-2012 AoA Data: 74 % FY 2013-2014 Target: 80%
- 4. FY 2012-2013 AoA Data: 70% FY 2014-2015 Target: 75%
- 5. FY 2013-2014 AoA Data: ____ % FY 2015-2016 Target: ____%

Program Goals and Objective Numbers: 2.3

B. Facility Coverage (other than in response to a complaint) (AoA Report, Part III-D, #6)

Percentage of RCFEs within the PSA that were visited by an ombudsman representative at least once each quarter during the fiscal year **not** in response to a complaint. The percentage is determined by dividing the number of RCFEs in the PSA that were visited at least once each quarter not in response to a complaint by the total number of RCFEs in the PSA. NOTE: This is not the total number of visits per year. In determining the number of facilities visited for this measure, no RCFE can be counted more than once.

1. FY 2010-2011 Baseline: 21%

Number of RCFEs visited at least once a quarter not in response to a complaint <u>16</u>

divided by the number of RCFEs 79

2. FY 2012-2013 Target: <u>35</u>%

3. FY 2011-2012 AoA Data: 15 % FY 2013-2014 Target: 50 %

4. FY 2012-2013 AoA Data: 20% FY 2014-2015 Target: 50 %

5. FY 2013-2014 AoA Data: ____% FY 2015-2016 Target: ____%

Program Goals and Objective Numbers: 2.3

C. Number of Full-Time Equivalent (FTE) Staff (AoA Report Part III. B.2. - Staff and Volunteers)

(One FTE generally equates to 40 hours per week or 1,760 hours per year) This number may only include staff time legitimately charged to the LTC Ombudsman Program. For example, the FTE for a staff member who works in the Ombudsman Program 20 hours a week should be 0.5. Time spent working for or in other programs may not be included in this number.

Verify number of staff FTEs with Ombudsman Program Coordinator.

1. FY 2010-2011 Baseline: FTEs <u>1.09</u>		
2. FY 2012-2013 Target: <u>2.2</u> FTEs		
3. FY 2011-2012 AoA Data: 2.0 FTEs FY 2013-2014 Target: 2.15 FTEs		
4. FY 2012-2013 AoA Data: 2.0 FTEs FY 2014-2015 Target: 1.65 FTEs		
5. FY 2013-2014 AoA Data: FTEs FY 2015-2016 Target: FTEs		
Program Goals and Objective Numbers: 2.3		

D. Number of Certified LTC Ombudsman Volunteers (AoA Report Part III. B.2. – Staff and Volunteers)

Verify numbers of volunteers with Ombudsman Program Coordinator.

- 1. FY 2010-2011 Baseline: Number of certified LTC Ombudsman volunteers as of June 30, 2010 39
- FY 2012-2013 Projected Number of certified LTC Ombudsman volunteers as of June 30, 2013 <u>35</u>
- 3, FY 2011-2012 AoA Data: 28 certified volunteers

FY 2013-2014 Projected Number of certified LTC Ombudsman volunteers

as of June 30, 2014 36

4. FY 2012-2013 AoA Data: 27 certified volunteers

FY 2014-2015 Projected Number of certified LTC Ombudsman volunteers

as of June 30, 2015 - 36

5. FY 2013-2014 AoA Data: ____ certified volunteers

FY 2015-2016 Projected Number of certified LTC Ombudsman volunteers

as of June 30, 2016 ____

Program Goals and Objective Numbers:

PSA #30

TITLE VII B ELDER ABUSE PREVENTION

SERVICE UNIT PLAN OBJECTIVES

TITLE VIIB ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

Fiscal Year	Total # of Public Education Sessions
2012-13	5
2013-14	5
2014-15	5

Fiscal Year	Total # of Training Sessions for Professionals
2012-13	5
2013-14	5
2014-15	5

2015-16	5

2015-16	5

Fiscal Year	Total # of Training Sessions for Caregivers served by Title III E
2012-13	5
2013-14	3
2014-15	5
2015-16	5

Fiscal Year	Total # of Hours Spent Developing a Coordinated System
2012-13	100
2013-14	100
2014-15	100
2015-16	100

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2012-2013	200	a. Bank teller training materials to assist them in identifying fraud and abuse and how to report suspected financial abuse
		b. Packet of information to distribute to agency in-home assistants on how to identify abuse and how to report it
		c. Updated informational brochures for distribution at senior centers and other community venues
2013-2014	200	See above.
2014-2015	200	See above.
2015-2016	200	See above

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	 -	

Fiscal Year	Total Number of Individuals Served
2012-2013	500
2013-2014	500
2014-2015	500
2015-2016	500

PSA #<u>30</u>

TITLE III E SERVICE UNIT PLAN OBJECTIVES

CCR Article 3, Section 7300(d)

2012–2016 Four-Year Planning Period

This Service Unit Plan (SUP) utilizes the five broad federally-mandated service categories defined in PM 11-11. Refer to the CDA Service Categories and Data Dictionary Revisions Effective July I, 2011 for eligible activities and service unit measures. Specify proposed audience size or units of service for <u>ALL</u> budgeted funds.

Direct and/or Contracted III EServices

CATEGORIES	1	2	3
Family Caregiver Services Caring for Elderly	<i>Proposed</i> Units of Service	Required Goal #(s)	<i>Optional</i> Objective #(s)
Information Services	# of activities and Total est. audience for above		
2012-2013	# of activities: 40	1	

	Total est. audience for above: 150,000		
2013-2014	# of activities: 20 Total est. audience for above: 75,000	1	
2014-2015	# of activities: 50 Total est. audience for above: 30,000	1	
2015-2016	# of activities: Total est. audience for above:		
Access Assistance	Total contacts		
2012-2013	400	1	
2013-2014	350	1	
2014-2015	400	1	<u> </u>
2015-2016			<u></u>
Support Services	Total hours		······································
2012-2013	200	1	
2013-2014	200	1	
2014-2015	200	1	
2015-2016			
Respite Care	Total hours		
2012-2013	4,000	1	
2013-2014	3,500	1	· · · · · · · · · · · · · · · · · · ·
2014-2015	2,500	1	1.16
2015-2016	<u></u>		<u> </u>
Supplemental Services	Total occurrences		
2012-2013	50	1	
2013-2014	50	1	

2014-2015	50	1
2015-2016		

SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP)

List all SCSEP monitor sites (contract or direct) where the AAA

provides services within the PSA (Please add boxes as needed)

Location/Name (AAA office, One Stop, Agency, etc):

AAA-Program under Request for Proposal process

Street Address: 121 Downey Ave, Suite 102, Modesto, CA 95354

Name and title of all SCSEP staff members (paid and participant):

Ignatio Chavez, Employment Services Coordinator

Gretchen Van Schaick, Participant Coordinator

Number of paid staff __1___ Number of participant staff __1__

How many participants are served at this site?

15

HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP)

SERVICE UNIT PLAN

CCR Article 3, Section 7300(d)

Section 1. Primary HICAP Units of Service

Fiscal Year (FY)	1.1 Estimated Number of Unduplicated Clients Counseled	Goal Numbers
2012-2013	603	1
2013-2014	600	1
2014-2015	660	1
2015-2016		

Note: Clients Counseled equals the number of Intakes closed and finalized by the Program Manager.

Fiscal Year (FY)	1.2 Estimated Number of Public and Media Events	Goal Numbers
2012-2013	53	1
2013-2014	35	1
2014-2015	40	1
2015-2016		

Note: Public and Media events include education/outreach presentations, booths/exhibits at health/senior fairs, and enrollment events, excluding public service announcements and printed outreach.

Section 2: Federal Performance Benchmark Measures

Fiscal Year (FY)	2.1 Estimated Number of Contacts for all Clients Counseled	Goal Numbers
2012-2013	2,411	1
2013-2014	2,593	
2014-2015	3,738	1
2015-2016		

Note: This includes all counseling contacts via telephone, in-person at home, in-person at site, and electronic contacts (e-mail, fax, etc.) for duplicated client counts.

Fiscal Year (FY)	2.2 Estimated Number of Persons Reached at Public and Media Events	Goal Numbers
2012-2013	3,255	
2013-2014	3,500	
2014-2015	3,977	
2015-2016		

1

Note: This includes the estimated number of attendees (e.g., people actually attending the event, not just receiving a flyer) reached through presentations either in person or via webinars, TV shows or radio shows, and those reached through booths/exhibits at health/senior fairs, and those enrolled at enrollment events, excluding public service announcements (PSAs) and printed outreach materials.

Fiscal Year (FY)	2.3 Estimated Number of contacts with Medicare Status Due to a Disability Contacts	Goal Numbers
2012-2013	495	1
2013-2014	529	1
2014-2015	611	
2015-2016		

Note: This includes all counseling contacts via telephone, in-person at home, inperson at site, and electronic contacts (e-mail, fax, etc.), duplicated client counts with Medicare beneficiaries due to disability, and not yet age 65.

Fiscal Year (FY)	2.4 Estimated Number of contacts with Low Income Beneficiaries	Goal Numbers
2012-2013	1,475	1
2013-2014	1,499	1
2014-2015	2,369	1
2015-2016		

Note: This is the number of unduplicated low-income Medicare beneficiary contacts and/or contacts that discussed low-income subsidy (LIS). Low income means 150 percent of the Federal Poverty Level (FPL).

Fiscal Year (FY)	2.5 Estimated Number of Enrollment Assistance Contacts	Goal Numbers
2012-2013	1,945	1
2013-2014	2,091	1
2014-2015	2,748	1
2015-2016		

Note: This is the number of unduplicated enrollment contacts during which one or more qualifying enrollment topics were discussed. This includes <u>all</u> enrollment assistance, not just Part D.

Fiscal Year (FY)	2.6 Estimated Part D and Enrollment Assistance Contacts	Goal Numbers
2012-2013	1,337	1
2013-2014	1,438	1
2014-2015	1,668	1
2015-2016		

Note: This is a subset of all enrollment assistance in 2.5. It includes the number of Part D enrollment contacts during which one or more qualifying Part D enrollment topics were discussed.

Fiscal Year (FY)	2.7 Estimated Number of Counselor FTEs in PSA	Goal Numbers
2012-2013	21	
2013-2014	Counseling Hours-1,525	
2014-2015	Counseling Hours-3,091	
2015-2016		

Note: This is the total number of counseling hours divided by 2000 (considered annual fulltime hours), then multiplied by the total number of Medicare beneficiaries per 10K in PSA.

Section 3: HICAP Legal Services Units of Service (if applicable)³

State Fiscal Year	3.1 Estimated Number of Clients Represented Per SFY	Goal Numbers
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³ Requires a contract for using HICAP funds to pay for HICAP Legal Services.

(SFY)	(Unit of Service)	
2012-2013	0	
2013-2014	0	
2014-2015	0	
2015-2016	0	
State Fiscal Year	3.2 Estimated Number of Legal Representation Hours Per SFY	Goal Numbers
(SFY)	(Unit of Service)	
2012-2013	0	
2013-2014	0	
2014-2015	0	
2015-2016	0	
State Fiscal Year (SFY)	3.3 Estimated Number of Program Consultation Hours per SFY (Unit of Service)	Goal Numbers
2012-2013	0	
2013-2014	0	
2014-2015	0	
2015-2016	0	

2012-2016 Four-Year Planning Cycle

Funding for Access, In-Home Services, and Legal Assistance

The CCR, Article 3, Section 7312, requires the AAA to 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 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 and the Percentage of Title III B Funds expended in/or to be expended in FY 2012-13 through FY 2015-16

<u>Access:</u> Transportation, Assisted Transportation, Case Management, Information and Assistance, Outreach, Comprehensive Assessment, Health, Mental Health, and Public Information

12-13 -33.04% 13-14 33.04% 14-15 33	3.04% 15-16	S %
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In-Home Services:

Personal Care, Homemaker, Chore, Adult Day / Health Care, Alzheimer's, Residential Repairs/Modifications, Respite Care, Telephone Reassurance, and Visiting

12-13 <u>-20.47</u>% 13-14 <u>20.47</u>% 14-15 <u>20.47</u>% 15-16 ____%

Legal Assistance Required Activities:

Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar

12-13 <u>-22.02</u>% 13-14 <u>22.02</u>% 14-15 <u>22.02</u>% 15-16 ____%

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

GOVERNING BOARD MEMBERSHIP

2012-2016 Four-Year Area Plan Cycle

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

Total Number of Board Members: 5

Name and Title of Officers:

Office Term Expires:

Jim DeMartini, Chair	12/31/2016
Terry Withrow, Vice-Chair	12/31/2014
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Newso and Titles of All Members.	Decad Term Evaluation

Names and Titles of All Members:

Board Term Expires:

Dick Monteith	12/31/2014
Vito Chiesa	12/31/2016
William O'Brien	12/31/2016

SECTION 17 - ADVISORY COUNCIL

ADVISORY COUNCIL MEMBERSHIP

2012-2016 Four-Year Planning Cycle

45 CFR, Section 1321.57				
CCR Article 3, Section 7302(a)(12)				
Total Council Membership (include vacanci	ies) <u>21</u>			
Number of Council Members over age 60 <u>16</u>				
Race/Ethnic Composition	% of PSA's 60+Population	% on <u>Advisory Council</u>		
White	<u>67%</u>	<u>85%</u>		
Hispanic	<u>21%</u>	5%		
Black	<u>2%</u>	5%		
Asian/Pacific Islander	<u>7%</u>	<u>5%</u>		
Native American/Alaskan Native	<u>1%</u>	<u>0</u>		
Other	<u>2%</u>	<u>0</u>		

Name and Title of Officers:

Office Term Expires:

6/30/2016
6/30/2016
6/30/2014
6/30/2015
6/30/2015
6/30/2016
6/30/2016
6/30/2014
6/30/2015

Kathleen Faria	6/30/2014
Jenny Kenoyer	6/30/2015
Amelia Henson	6/30/2015
Billie Taylor	6/30/2015
Adriana Breugem	6/30/2016
Huey Lee	6/30/2016
Delaine Olson	6/30/2016
Larry Johnson	6/30/2016
Joyce Buehner	6/30/2016
Kathy Sniffen	6/30/2014

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

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

Explain any "No" answer(s): _____

Briefly describe the local governing board's process to appoint Advisory Council members:

Each supervisor appoints two members from his or her district. The supervisor may identify a potential candidate or a candidate may be recommended as a person interested in serving on the Commission on Aging. That person is interviewed by the supervisor or the representative of the supervisor and is subsequently chosen to represent the senior citizens, disabled persons, and caregivers of that district. The AAA staff and Commission on Aging leadership is notified of the appointment and the person is admitted as a voting member of the Commission.

2012-2016 Four-Year Area Planning Cycle

This section must be completed and submitted with the Four-Year Area Plan.

Any changes to this Section must be documented on this form and remitted with Area Plan Updates Specific to Legal Services, what is your AAA's Mission Statement or Purpose Statement? Statement must include Title III B requirements:

The AAA in Stanislaus County contracts for the Senior Law Project with the Senior Advocacy Network, a local non-profit legal firm. The sole purpose for this firm is to address the legal needs of senior citizens, especially those that are culturally and financially challenged.

- 1. Based on your local needs assessment, what percentage of Title III B funding is allocated to Legal Services? 22.02%
- 2. Specific to legal services, has there been a change in your local needs in the past four years? If so, please identify the change (include whether the change affected the level of funding and the difference in funding levels in the past four years).

In general the needs and the funding levels have remained the same.

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

The targeted senior population is the low and moderate income seniors who may not have the means to afford legal counsel. In addition the bi-lingual staff and volunteers provide the opportunity for mono-lingual Spanish speaking seniors and disabled persons to access the services. Information about these services is available through the AAA Information and Assistance program, the AAA website, and other AAA service providers.

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

Fiscal Year	# of Legal Assistance
	Services Providers
2012-2013	1
2013-2014	1
2014-2015	1
2015-2016	

5. Does your PSA have a hotline for legal services?

The Senior Advocacy Network hotline number is 209-613-7398. In addition, their brochure and the AAA brochure list the California Senior Legal Hot Line-1-800-222-1753.

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

The attorneys make presentations to Residential independent and assisted living facilities, social clubs, the local notary consortium, church groups and other organizations that request a speaker.

Fiscal Year	Name of Provider	Geographic Region covered
· · · · · · · · · · · · · · · · · · ·	a. Senior Advocacy Network	a. Stanislaus County
2012-2013	b.	b.
	с.	с.
<u></u>	a. Senior Advocacy Network	a. Stanislaus County
2013-2014	b.	b.
	С.	с.
	a. Senior Advocacy Network	a. Stanislaus County
2014-2015	b.	b.
	с.	с.
	а.	а.
2015-2016	b.	b.
	с.	С.

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

8. Discuss how older adults access Legal Services in your PSA:

Seniors and concerned citizens are referred through the AAA Information and Assistance program or through other agencies. Seniors are also referred to our program through the Superior Court, Law Library, other attorneys and lawyer referral service.

 Identify the major types of legal issues that are handled by the TIII-B legal provider(s) in your PSA. Discuss (please include new trends of legal problems in your area):

The Senior Advocacy Network receives cases that involve potential elder abuse, working closely with the county Adult Protective Services and Long Term Care Ombudsman office. They deal with consumer issues; public benefits such as Social Security and SSI issues; housing issues; and conservator/guardianship issues.

10. In the past four years, has there been a change in the types of legal issues handled by the TIII-B legal provider(s) in your PSA? Discuss:

The issues have stayed the same.

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

A major barrier to accessing legal assistance is that the communities of Newman, Patterson, Grayson, Oakdale and Riverbank are significant distances from the office for the Senior Law Project, located in Modesto. The Senior Advocacy Network had a volunteer to do monthly outreach in these communities, but that volunteer is no longer available. The staff at the Senior Advocacy Network is attempting to raise funds to support this type of outreach.

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

The Senior Advocacy Network coordinates services with the District Attorney's Office, Family Partnership Center (Stanislaus County Behavioral Health and Recovery Services Agency) Stanislaus Senior Foundation, Valley Mountain Regional Center for disabled adults, Project Sentinel, HICAP, Veterans Services Office, the Ombudsman Office and Catholic Charities. They assist Adult Protective Services staff with obtaining restraining orders. They have also coordinated with agencies that offer free home repair services for seniors.