# THE BOARD OF SUPERVISORS OF THE COUNTY OF STANISLAUS ACTION AGENDA SUMMARY

ACTION AGENDA SUMMA	un o
DEPT: Aging and Veterans Services	BOARD AGENDA #*B-3
Urgent Routine	AGENDA DATE April 28, 2015
CEO Concurs with Recommendation YES NO (Information Attached)	4/5 Vote Required YES ☐ NO ■
SUBJECT:	
Approval of Area Agency on Aging Fiscal Year 2015-2016 Pla	nning and Service Area (PSA) Plan Update
STAFF RECOMMENDATIONS:	
<ol> <li>Approve the Area Agency on Aging's Fiscal Year 2015 (PSA) Plan Update.</li> </ol>	-2016 Planning and Service Area
Authorize the Chairman of the Board of Supervisors are to sign the Transmittal Letters to the California Department	
3. Return original signed Transmittal Letters to the Area	Agency on Aging.
FISCAL IMPACT:	
The projected PSA Plan Budget for Fiscal Year 2015-20 up of \$1,749,172 from the California Department of Agil share of Area Agency on Aging administration to fulfill formandates, and \$723,042 from contracting providers for program, which includes cash / in-kind contributions. The Agency on Aging 2015-2016 Final Budget.	ng, \$172,730 from the County's matching ederal Older Americans Act and state the minimum required match for each
BOARD ACTION AS FOLLOWS:	<b>No</b> . 2015-179
On motion of Supervisor De Martini , Second and approved by the following vote, Ayes: Supervisors: O'Brien, Chiesa, Monteith, De Martini, and Chairr Noes: Supervisors: None Excused or Absent: Supervisors: None Abstaining: Supervisor: None	nan Withrow
1) X Approved as recommended	
2) Denied	
3) Approved as amended	
4) Other:	
MOTION:	

Christine Tensors
CHRISTINE FERRARO TALLMAN, Clerk

File No.

Approval of Area Agency on Aging Fiscal Year 2015-2016 Planning and Service Area (PSA) Plan Update

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#### 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 for Community Living (ACL), 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, persons with disabilities, and caregivers that go beyond the available federal funding. Older Americans Act programs include: Home Delivered, and Congregate Meals, Senior Employment, Long-Term Care Ombudsman and Elder Abuse Prevention, Family Caregiver Support, Homemaker, Senior Law, Disease Prevention / Health Promotion, and Case Management programs.

The 2015-2016 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 2015-2016 that begins on July 1, 2015.

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

1. Provide Information and Assistance to Senior Citizens, Caregivers, and Persons with Disabilities. The AAA staff will strive to provide comprehensive information about senior and caregiver services to the public.

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2. Promote Health & Well-Being for Senior Citizens, Persons with Disabilities, 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 five new Objectives into the Four-Year 2012-2016 Area Plan. These new Objectives fall under Goals # 1 and # 2.

#### Goal # 1:

- 1. Objective 1.17: The AAA Health Insurance Counseling and Advocacy Program (HICAP) staff will collaborate with the staffs of the Healthy Aging Association and Catholic Charities to conduct outreach events to low income seniors. The targeted population will include current participants in the Green Bag program, to increase awareness of other services such as the Limited Income Subsidy and Cal Fresh programs.
- 2. Objective 1.18: The AAA staff will collaborate with the staff of the Senior Meals Program to distribute enhanced menus to home-delivered meals clients. The menus will be enlarged and will include information about services such as PEI (Prevention and Early Intervention) counseling programs, transportation services, and financial assistance programs.

#### Goal # 2:

- 1. Objective 2.16: The AAA staff and members of the Commission on Aging will create a project to recruit volunteers to mentor Kindergarten 3<sup>rd</sup> grade students at Franklin Elementary School.
- 2. Objective 2.17: The AAA staff proposes to create a social worker position to provide a short case management program for seniors who do not qualify for the Multipurpose Senior Services Program (MSSP). This position is proposed to give seniors who need assistance securing various services to maintain their independence. This new position is needed to ensure that seniors understand and access services. The social worker will have the time to do assessments, meet individually with the seniors, evaluate on-going needs, and assist seniors to fulfill their own goals. Additionally, the social worker will work directly with other AAA staff and contract agencies to ensure continuity while assisting the seniors.
- 3. Objective 2.18: The AAA staff will create a Transitional Care Program to assist seniors recently discharged from a hospital or rehabilitation facility.

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

#### **POLICY ISSUES:**

By approving the Fiscal Year 2015-2016 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:

The proposed budget for FY 2015-2016 will contain a request to approve a new social worker position for the case management program (Goal #2, Objective #2.17). This position is proposed to give seniors who need assistance securing various services to maintain their independence. This new position is needed to ensure that seniors understand and access services. The social worker will have the time to do assessments, meet individually with the seniors, evaluate ongoing needs, and assist seniors to fulfill their own goals. Additionally, the social worker will work directly with other AAA staff and contract agencies to ensure continuity while assisting the seniors. This position will be proposed to be at the Social Worker II level. Should the new position not receive approval by the Board of Supervisors, staff will fill the position through "extra help". Funding for this position is possible through the Older Americans Act, Title III-B.

:

#### **CONTACT PERSON:**

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

#### TRANSMITTAL LETTER

#### Area Plan Update, 2015-2016

AAA Name: Stanislaus County Area Agency on Aging

PSA 30

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.	4-28-15
Stanislaus County Board of Supervisors	Date
Terrance Withrow, Chairman	
2. <u>Patricia Fantazia, President</u>	
Vatrue Lantezio	
Stanislaus County Commission on Aging	Date
3. Margie Palomino, Director	
MA according to	4-20-2010

Date

Stanislaus County Aging and Veterans Services

# **Stanislaus County Area Agency on Aging**

# **Planning and Service Area 30**

Area Plan Update

July 1, 2015-June 30, 2016



Margie Palomino, Director

May 2015

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# FY 2015-2016 AREA PLAN UPDATE (APU) CHECKLIST (Revised October 2014)

AP Guidance Section	APU Components (To be attached to the APU)	Chec	
	Update/Submit A) through F) ANNUALLY:		
n/a	A) Transmittal Letter–(requires <u>hard copy</u> with original ink signatures or official signature stamp- <u>no</u> photocopies)	×	3
n/a	B) APU-(submit entire APU electronically only)	×	3
2, 3, or 4	C) Estimate of the number of lower income minority older individuals in the PSA for the coming year		3
7	D) Public Hearings that will be conducted		]
n/a	E) Annual Budget		3
10	F) Service Unit Plan (SUP) Objectives and Long Term Care Ombudsman Program Measures and Targets	×	3
	Update/Submit 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		
5	Needs Assessment <sup>1</sup>		
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	<ul> <li>Title III B/VIIA-Long-Term Care Ombudsman/Elder Abuse Prevention Program</li> </ul>		
9	Title III C-1		
9	Title III C-2		
9	Title III D		$\boxtimes$
20	Title III E-Family Caregiver Support Program		
9	Title V-SCSEP Program		$\boxtimes$
9	HICAP Program		
14	Notice of Intent-to Provide Direct Services	$\boxtimes$	
15	Request for Approval-to Provide Direct Services	$\boxtimes$	
16	Governing Board	$\boxtimes$	
17	Advisory Council	$\boxtimes$	
18	Legal Assistance		
21	Organizational Chart(s)		

<sup>1</sup> Prior to the development of the 2016/2020 Area Plan, at least one Needs Assessment must be conducted.

#### Area Plan Update, Fiscal Year 2015-2016

#### Planning & Service Area 30, Stanislaus County

#### **Narrative Introduction:**

Stanislaus County continues to be a place that older adults want to live. Many return from other areas of the state or country due to weather and economic conditions, as well as family considerations. According to the California Department of Aging (CDA) website, the population of persons over the age of 60 grew by 7.5% in 2014 to approximately 93,823 persons. Persons that identify as being part of a minority community increased by 12.9% to approximately 29,891 persons, an increase of 1.5% of the total 60+ population, now 31.8%. Approximately 18.7% of the total elder population qualifies for Medi-Cal. Using that measure as evidence of lower income and applying the same standard for the minority population, 5,590 minority seniors could be considered to have low income. The number of seniors that qualify for Medi-Cal increased by 3.8%. Of the total senior population, 5% do not speak English, 9% are "geo-isolated", and 30% are over the age of 75.

The Farmers Market Coupon Program remains a popular program with area seniors. Income levels that are in line with the estimated basic amount needed to sustain themselves in Stanislaus County, according to the Elder Economic Security Standard Index, are used to determine eligibility for the coupons. The Area Agency on Aging (AAA) staff distributes coupons at certified farmers markets in Patterson, Riverbank, Oakdale, and 3 places in Modesto (downtown, in the airport district, and at the Vintage Faire Mall). The market in the airport district was new in 2014 and located in a lower income area of Modesto. All of the coupons were distributed and the redemption rate for the County was approximately 89% in 2014.

Another program that addresses food insecurity needs of seniors whose incomes are at or below \$20,147 annually is a partnership between the Healthy Aging Association and the Second Harvest Food Bank. The Healthy Aging Association is the Title IIID recipient for Health Promotion and calls their program, Green Bag. Fresh fruits and vegetables are distributed to seniors in Modesto, Grayson and Oakdale, following a short informational meeting that encourages seniors to utilize the produce, changing their eating habits for better health. The income ceiling is comparable to the Elder Index estimated needs of a single senior in a one-bedroom apartment, \$20,736<sup>1</sup>. Like the Farmers Market Coupon program, the Green Bag Program is gratefully received by seniors in Stanislaus County.

The AAA received funding to establish SNAP-Ed programs throughout the County. The sub-contractor is the Healthy Aging Association and a program known as "Eat Better, Move Better" began in September, 2014. This free program promotes physical activity and nutrition education to encourage healthier eating, especially including a higher percentage of fresh fruits and vegetables. For 5 sessions between September and January, 122 seniors participated throughout the County, including the communities of Grayson, Oakdale, Turlock, Hughson, and Patterson. Later this year presentations are scheduled for Ceres, Riverbank, Waterford, Newman and Modesto.

The Healthy Aging Association, in partnership with the AAA, received a grant from the SCAN Foundation to form the Senior Coalition of Stanislaus County. The Coalition includes staff from local health plans, the Disability Resource Agency for Independent Living (DRAIL), the Alzheimer's Association, Adult Protective Services, In Home Supportive Services, local long term care facilities, the Long Term Care Ombudsman Program, and local hospitals. The

<sup>&</sup>lt;sup>1</sup> http://www.insightcced.org/communities/besa/cal-eesi/eesiDetail.html?ref=51

Coalition meets to determine the best ways to coordinate care for all seniors, but particularly those seniors that are "dual eligible"-as part of both Medicare and Medi-Cal. As the Coordinated Care Initiative (CCI) demonstration projects move forward, the hope is that the members of the Coalition will be prepared for the challenges of the CCI for seniors of Stanislaus County. The Coalition members are focusing on the most effective ways to provide support for seniors as they age-in-place, and how to best communicate with health care professionals to maintain effective continuity of care. Additionally, the members of the Coalition have been seeking ways to enhance the lives of informal caregivers. The booklet designed by members of the Coalition, "Caregiver Information, Services and Resources in Stanislaus County", continues to be distributed by agencies and at outreach events attended by AAA staff. It is also available through the AAA web site, www.agingservices.info/caregiving.

A number of programs that utilize volunteers have grown and changed during 2014. The partnership that the AAA has had with the Behavioral Health and Recovery Services department continued to include Peer Counselors and Friendly Visitors in the Project Hope set of programs. These programs are part of the Prevention and Early Intervention programs funded by the Mental Health Services Act. Seniors are screened by a licensed clinical social worker for the most appropriate way to handle expressed needs and to assist the senior cope with those needs.

Peer counselors are specially trained volunteers over 55 who are paired with a senior to help that senior deal with the many challenges that can come with age-losses, health issues, isolation, and depression. Peer counselors receive on-going training and support, attending meetings twice per month to review their current assignments and receive in-put from other counselors and the coordinating social worker.

Friendly visitors are available to meet with homebound seniors a few times per month and provide companionship to the senior. Visitors may be as young as 16, must complete a basic application, receive orientation by AAA staff, allow a fingerprint background check, and are required to attend two meetings per year. Visitors and peer counselors are encouraged to relay needs and questions to AAA staff so the on-going needs of their clients may be met.

In addition to the volunteer programs, Project Hope's brief counseling program is designed to meet the emotional needs of seniors to prevent, or intervene early in mental illness including depression and anxiety. Project Hope removes the barriers of transportation as our services are provided in a client's home unless they prefer to meet in the office setting. In addition, as our services are free-of-charge, clients are able to access the services without concern for co-pay or other fees.

Often the losses associated with aging such as physical changes and limitations, death of friends or families and isolation leads to decreased physical and social activity as well as persistent negative thoughts of inadequacy. In addition, serious illness and concerns about the future easily lead to anxiety and/or depression. Through brief counseling modalities, we have been able to show a significant improvement in the mood of seniors increasing their emotional wellbeing, as well as physical and social activity, decreasing suffering. In fact, 82 % of brief counseling participants had statistically significant improvement in their depression scores, of those that completed counseling services. In addition, when asked to evaluate how much they benefited from participating in counseling, on a scale of 1-10 (10 being highest), the average score was 9.1.

The Stanislaus Senior Foundation, a non-profit foundation formed to assist low income seniors with services that exceed the outlines of the Older Americans Act, continues to involve

AAA staff and Commission on Aging members. Over the last year 35 seniors have qualified to have emergency needs like unmanageable utility bills or equipment needs met through an emergency fund. Foundation grants have been used to purchase IPODs with music for seniors in skilled nursing facilities; supported a local faith-based organization as they installed ramps and grab bars; and ukuleles for local senior music groups.

Catholic Charities, the provider of the Long Term Care Ombudsman and Elder Abuse

Prevention programs, received a grant from the Office of Violence Against Women of the Justice

Department to conduct training seminars about elder abuse prevention. The training sessions

were designed to be given to law enforcement personnel, care home staff members, home health
agency staff members, and other direct service employees. Nine seminars were given over the
last several years, with over 210 local service providers receiving the training. Partners with the
Catholic Charities staff included staff from Adult Protective Services, the District Attorney's

office, and law enforcement personnel directly involved with crimes involving elder abuse.

A new Case Management program will be started in the new fiscal year. This program is needed due to several factors: the loss of funding for broad case management through the former Linkages Program; limited availability of the Multipurpose Senior Services Program (MSSP); increased number of persons over 75 (2% increase) and persons over 60 who live alone (5% increase); anecdotal evidence of seniors seeking coordination of services who don't qualify for other assistance. This program will be made possible due to the local transportation services agencies that have been awarded sufficient grant funding for specialized transportation, making it possible to move funds from III B Assisted Transportation to III B Case Management. Case Management will be available through the AAA office and will be coordinated with the Information and Assistance Program, the PEI programs, and MSSP.

Another new program that will work with other AAA programs will be a Transitional Care Program. This will be contracted to a local Care Management Agency to work directly with discharge planners and social workers at area hospitals and care facilities to offer in-home services to seniors newly home from hospitals and rehabilitation facilities. The care managers will assist seniors and caregivers to access various services such as home-delivered meals, transportation, HICAP, and the Young at Heart exercise program to prevent falls and increase strength. The ultimate goal is to reduce the number of return visits to the hospital and support the senior's efforts to remain healthy and independent.

Staff from a local elementary school will be collaborating with AAA staff and Commission on Aging members to implement an intergenerational mentoring program. Older adult volunteers will be assisting Kindergarten to 3<sup>rd</sup> grade age students with projects, while giving seniors a way to pass on their wisdom and understanding to a new generation.

The HICAP office staff at the AAA will be coordinating with the staffs of the Healthy Aging Association's Green Bag Program to sponsor events to raise awareness about the Limited Income Subsidy (LIS), Cal Fresh and other programs for low income seniors. These events will focus on outreach to seniors for whom the cost of various parts of Medicare is a hardship, but who do not qualify for Medi-Cal.

A new means to engage recipients of the Home Delivered Meals Program will be the distribution of an enhanced menu copy. The perception is that home-bound seniors do not have the opportunity to learn of various services and programs through other channels. On the back of the large print menus will be information about the Prevention and Early Intervention (PEI) programs, financial assistance programs, transportation services, and other services, as well as some fun activities.

In response to the increasing number of scams that appear daily, the attorney and staff of the Senior Advocacy Network, Senior Law Project has established a new hot line to report scams that target senior citizens. The number is 209-996-SCAM (7226).

## **SECTION 7. PUBLIC HEARINGS**

**PSA** 30

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? <sup>2</sup> Yes or No	Was hearing held  at a Long-Term  Care Facility? 3  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	4/13/15	Modesto	20	No	No

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

<sup>&</sup>lt;sup>2</sup> 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.

#### cycle:

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

Information about the Public Hearing was listed in the local newspaper, *The Modesto Bee* and displayed at the main door for the Department of Aging and Veterans Services. In addition, notification and copies of the Area Plan Update were distributed to all the service providers and participants in other public meetings. Included in that distribution was the provider of the Long Term Care Ombudsman Program.

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

Beyond the explanations of the new PD and C objectives, attendees agreed that additional case management and the proposed Transitional Care Program are programs that could have a significant impact on the lives of seniors and caregivers. There was some concern that the Transitional Care Program would conflict with the job the of the discharge planners at local hospitals and care facilities. It was explained that the intent of the program is to assist discharge planners and seniors when they are released from care facilities, and would include follow-up visits after the senior goes home.

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.

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

A brief explanation was given regarding the Senior Coalition of Stanislaus County.

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

# Section 9-Area Plan Narrative Goals and Objectives

Start & End Dates	PD or C	Update Status
7/1/12- 6/30/13	PD	Delete-Unable to complete
7/1/12- 6/30/16	С	Ongoing
7/1/12- 12/31/12	С	Five workshops and 3 outreach events
		Completed
	7/1/12-6/30/16	End or C  7/1/12-6/30/13 PD  7/1/12-6/30/16 C

Measurement: 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-10/16/15
Outcome: Seniors and caregivers will attend the Summit.			
<u>Measurement:</u> The number of attendees and health evaluations completed.			2014-1,000 attendees, 1,300 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
Outcome: 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.			2-3 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 2014-15, through February 27, 41 events and 87 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
Outcome: 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>Outcome:</u> Low income seniors will receive assistance to remain independent as long as possible.			
Measurement: The number of seniors that are referred by AAA staff to the Stanislaus Senior Foundation			Between July 1, 2014 and Feb 28, 2015, 55 seniors were assisted in their homes, IPODs, ukuleles and chairs were purchased.
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
Outcome: Information about available senior services will be conveyed via participation in outreach opportunities.			
<u>Measurement:</u> The number of events attended by AAA staff.			15 events through 2/28/15.

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.  Outcome: Information about events will be readily accessible through the website.  Measurement: The number of events recorded on the website.	7/1/12- 6/30/16		Ongoing  Average 25 events per month.
Objective 1.12 The AAA staff will expand the Prevention and Early Intervention Programs (PEI): PEARLS, Peer to Peer Counseling, Friendly Visitor and Senior Center Without Walls, by promoting the programs through a Public Service Announcement that will be broadcast on English and Spanish radio stations. The Public Service Announcement will serve to increase awareness of the PEI programs in the general population, resulting in more seniors being enrolled in these programs.	7/1/13- 6/30/15	PD	Completed.
Outcome: Increase the publicity & awareness about the availability of the PEI programs.		:	
Measurement: Number of radio PSA broadcasts			Broadcasts were made in Nov & Dec 2014.
Objective 1.13- The AAA staff will recruit new bilingual volunteers for the PEI, HICAP and Family Caregiver Support Programs by making presentations at the various Hispanic clubs and organizations in the County. The result will be that more monolingual Hispanic seniors will be served through these programs.	7/1/13- 6/30/14	PD	Completed and ongoing; AAA staff will continue to seek additional volunteers from the Hispanic community.
Outcome: Having bilingual volunteers will enable us to better serve the Spanish speaking communities			
Measurement: The number of recruitment meetings with Hispanic organizations and the number of bilingual volunteers.			Presentation to RAIZ, 1/26/15; still seeking volunteers

Objective 1.14- The Health Insurance Counseling and Advocacy Program (HICAP) staff and volunteers at the AAA will partner with staff members in the city of Turlock and the Modesto Social Security office to establish HICAP information and counseling days.	7/1/14- 6/30/15	С	Completed and ongoing
Outcome: Senior citizens and caregivers in Turlock and at the Modesto Social Security office will have improved access to information about Medicare benefits.	:		
<u>Measurement:</u> The number of seniors that access the services.			July 2014-Feb 2015-19 seniors were assisted in Turlock. The Modesto Social Security staff withdrew the offer to allow HICAP counseling.
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) and offering staff presentations.	7/1/14- 6/30/15	PD	New
<u>Outcome</u> : Increased awareness by local physicians and their support staff regarding availability of these free PEI program offerings for their clients.			Completed
<u>Measurement</u> : The number of doctor offices that receive the packet of information about the PEI programs & number of presentations to doctor staff/groups.			Through Feb 2015, 6 doctor offices, 2 hospitals received information.
Objective 1.16 The AAA staff will recruit and train volunteers to provide respite for Family Caregiver Support Program recipients.	7/1/14- 6/30/15	PD	Completed and ongoing
<u>Outcome:</u> Caregivers in the FCSP will have a greater number of opportunities to obtain respite from their caregiving responsibilities.			

Measurement: The number of specially trained			3 training classes held; 5
volunteers and number of hours available to caregivers.			volunteers; 5 families received respite
Objective 1.17 The AAA HICAP staff will collaborate with the staffs of the Healthy Aging Association and Catholic Charities to conduct outreach events to low income seniors. The targeted population will include current participants in the Green Bag program, to increase awareness of other services such as the Limited Income Subsidy and Cal Fresh programs.	7/1/15- 6/30/16	С	New
<u>Outcome:</u> Low income seniors will enroll in benefits that will assist them remain independent and financially capable.			
<u>Measurement:</u> Number of events and the number of seniors enrolled in additional benefits.			
Objective 1.18 The AAA staff will collaborate with the staff of the Senior Meals Program to distribute enhanced menus to home-delivered meals clients. The menus will be enlarged and will include information about services such as PEI counseling programs, transportation services and financial assistance programs.	7/1/15- 6/30/16	С	New
<u>Outcome:</u> Home-bound seniors will be informed about services.			
<u>Measurement:</u> Number of monthly menus created and distributed.			
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.			

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.
Outcome: Sponsoring the special event will emphasize			
the on-going contributions of the senior population.  Measurement: Participation by the public to nominate candidates to be honored and the completion of the special session of the Board of Supervisors.			Event-5/19/15.
Objective 2.2 As the recipient of Title IIID funding, the Healthy Aging Association will conduct the Young at Heart strength training classes throughout the County. The Young at Heart program has been designated as a "practice-tested intervention" by the United States Department of Agriculture (USDA). The Young at Heart program combines elements of each of the Administration for Community Living levels to be evidence-based. Regular evaluations by participants attest to how it contributes to their well-being; it has been proven effective to prevent falls; its use has been the subject of an academic study (Comparing Fall Risk of Older Adults in a Community-Based Fitness Program to Non-Participants-California State University, Fresno, 2014); and the products have been fully translated in multiple community sites, available to the public for over 10 years.	7/1/12- 6/30/16		Ongoing
<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.			
Measurement: The number of classes available, number of participants, and completed evaluation forms done at 6 month intervals.			Through 12/31/14, 26 class locations, over 1,000 participants

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		
Outcome: Facility staff and social service agency personnel understand the implications of potential elder abuse and how to locate assistive resources for them.			Since 7/1/14, one session with 32 attendees.
Measurement: At least 225 attendees will be trained.	1	+	
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.			
Measurement: 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 February 2015, 17 presentations done
Objective 2.5 The AAA staff will expand the PEI programs by developing a "navigation" role of the PEARLS counselors.	7/1/12- 6/30/13	PD	Completed
<u>Outcome</u> : The AAA staff will continue to recruit and 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-Completed
Outcome: Low income seniors will have access to fresh fruits and vegetables.	0,00,10		Completed
<u>Measurement:</u> The number of seniors receiving produce and the number of new sites for distribution throughout the county.			New sites- Oakdale-52 seniors, Grayson- 25 seniors

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.  Outcome: Low income seniors will enroll in appropriate programs and increase their participation at congregate meals sites.	7/1/12- 6/30/13	PD	Completed
<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.  Outcome: Veterans will be assisted in getting the medical care needed by having transportation available.	7/1/13- 6/30/14	PD	Completed
<u>Measurement:</u> The number of volunteers available and the number of veterans who are able to keep appointments.			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
Outcome: Seniors will receive case management, medical and counseling services in their homes.			
Measurement: 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	Ongoing-continue through 6/30/16
Outcome: Medicare beneficiaries entitled to outpatient mental health benefits (Counseling and /or evaluation) will be referred to the appropriate MA plan program/service through appropriate referral process.			

<u>Measurement:</u> The number of referrals to HICAP for individualized assistance.			2 seniors were assisted to access their MA plan's mental health services
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	Ongoing
<u>Outcome:</u> Members of the Coalition will coordinate to provide accurate information and services for seniors and caregivers in Stanislaus County.			
<u>Measurement:</u> The variety of service providers in the Coalition and the number of events/services available to seniors and caregivers.			Through 2/27/15, 35 organizations represented.
Objective 2.14 The AAA staff will participate in the Supplemental Nutrition Assistance Program-Education (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.  Outcome: AAA staff will participate in the SNAP-Ed work plan meetings and planning process.	7/1/14- 6/30/15	С	Completed and ongoing
<u>Measurement</u> : Number of SNAP-Ed meetings, conference calls, or webinars attended.			Through February 2015, 8 work plan group meetings with CDA and 6 with the Healthy Aging Assoc.
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.	7/1/14- 6/30/15	С	Ongoing

Outcome: Veterans will receive the treatments available in the Bay Area.			
<u>Measurement:</u> Number of volunteers recruited and the number of veterans receiving services in the Bay Area.			Through 12/31/14, 135 rides provided.
Objective 2.16 The AAA staff and members of the			
Commission on Aging will create a project to recruit volunteers to mentor Kindergarten-3 <sup>rd</sup> grade students			
at Franklin Elementary School.	7/1/15- 6/30/16	PD	New
<u>Outcome:</u> Volunteers will be recruited and assigned to students.			
<u>Measurement:</u> The number of volunteers recruited and matched with students.			
Objective 2.17 The AAA staff will hire a social worker to create a short case management program for seniors that do not qualify for the MSSP program.	7/1/15- 6/30/16	PD	New
Outcome: Seniors' needs will be assessed and will have services arranged for them to remain independent.			
<u>Measurement:</u> The number of seniors that receive short term case management.			
Objective 2.18 The AAA staff will create a Transitional Care Program to assist seniors recently discharged from a hospital or re-habilitation facility.	7/1/15- 6/30/16	PD	New
<u>Outcome:</u> Seniors will receive assistance from a care coordination team that will consist of a social worker and a nurse to reduce the possibility of repeated admission to care facilities.			
Measurement: The number of seniors receiving support services.			

# 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 NAPIS State Program Report.

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			
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	5,400	1	

# 3. Chore

# 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			

# 4. Home-Delivered Meal

# Unit of Service = 1 meal

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

# 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 contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2012-2013			
2013-2014			
2014-2015			
2015-2016	20	2	

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	0		

8. Congregate Meals

Unit of Service = 1 meal

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	48,000	1	

# 9. Nutrition Counseling

# Unit of Service = 1 session per participant

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2012-2013	1.2 (No. 1972)	10.34	
2013-2014			
2014-2015			
2015-2016			

# 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	1,600	1	

# 12. Nutrition Education

# Unit of Service = 1 session per participant

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2012-2013	5,000	1	
2013-2014	4,000	1	
2014-2015	4,000	1	
2015-2016	4,000	1	

# 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	3,000	1	1.5, 1.10

#### 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	500	1	1.2, 1.5, 1.7, 1.10

# 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	10	1	
2015-2016	10	1	

#### 16. Title III D Health Promotion

l	Init	of	Se	rvice	= 1	cor	ıtac:	t

<b>Service Activities:</b>	Physical F	-itness		

• **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	1,200	1,2	2.2

PSA <u>30</u>

# TITLE III B and Title VII A: 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  $\underline{371}$  + Number of partially resolved complaints  $\underline{46}$  divided by the Total Number of Complaints Received  $\underline{704}$  = Baseline Resolution Rate  $\underline{60}$ %

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 49% FY 2015-2016 Target: Resolution Rate 67%

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: 20 FY 2015-2016 Target: 23

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: 5 FY 2015-2016 Target: 5

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 <u>86</u>	
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	<del></del>
5.	. FY 2013-2014 AoA Data: 215 FY 2015-2016 Target: 225	
Pı	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.

- FY 2010-2011 Baseline: number of consultations <u>1085</u>
   FY 2012-2013 Target: <u>1000</u>
   FY 2011-2012 AoA Data: 3500 FY 2013-2014 Target: 2500
   FY 2012-2013 AoA Data: 740 FY 2014-2015 Target: 900
   FY 2013-2014 AoA Data: 1,021 FY 2015-2016 Target: 1,021
   Program 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.
- 2. FY 2012-2013 Target: <u>5</u>
- 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: 28 FY 2015-2016 Target: 20

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)

Long Term Care Ombudsman will participate in education and advocacy efforts that call attention and seek to improve conditions for residents in long term care. We are convinced that infrequent visits by the licensing agency put some residents at risk. We anticipate being actively engaged in promoting AB 74 (Calderon) that would, over a period of three years, phase in a more frequent schedule of unannounced surveys by the Dept. of Social Services, Community Care Licensing, of the facilities they regulate.

# 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: <u>57</u>%

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: 95 % FY 2015-2016 Target: 95%

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.

Number of RCFEs visited at least once a quarter not in response to a complaint 16 divided by the number of RCFEs 79

2. FY 2012-2013 Target: 35%

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: 40 % FY 2015-2016 Target: 50%

Program Goals and Objective Numbers: 2.3

1. FY 2010-2011 Baseline: 21%

# **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.

- FY 2010-2011 Baseline: FTEs <u>1.09</u>
   FY 2012-2013 Target: <u>2.2</u> FTEs
   FY 2011-2012 AoA Data: 2.0 FTEs FY 2013-2014 Target: 2.15 FTEs
   FY 2012-2013 AoA Data: 2.0 FTEs FY 2014-2015 Target: 1.65 FTEs
   FY 2013-2014 AoA Data: 1.85 FTEs FY 2015-2016 Target: 1.85 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.

- FY 2010-2011 Baseline: Number of certified LTC Ombudsman volunteers as of June 30, 2010 39
- 2. FY 2012-2013 Projected Number of certified LTC Ombudsman volunteers as of June 30, 2013 35

FY 2011-2012 AoA Data: 28 certified volunteers
 FY 2013-2014 Projected Number of certified LTC Ombudsman volunteers
 as of June 30, 2014 36

FY 2012-2013 AoA Data: 27 certified volunteers
 FY 2014-2015 Projected Number of certified LTC Ombudsman volunteers
 as of June 30, 2015 -36

 FY 2013-2014 AoA Data: 24 certified volunteers
 FY 2015-2016 Projected Number of certified LTC Ombudsman volunteers as of June 30, 2016-35

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
2015-16	5

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

	Total # of Copies of	
Fiscal Year	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>b.</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

Total Number of Individuals Served
500
500
500
500

PSA #30

# 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	Proposed Units of Service	Required Goal #(s)	Optional Objective #(s)
Information Services	# of activities and  Total est. audience for above		
2012-2013	# of activities: 40  Total est. audience for above: 150,000	1	

	# of activities: 20		
2013-2014	Total est. audience for above: 75,000	1	
	# of activities: 50		
2014-2015	Total est. audience for above: 30,000	1	
	# of activities: 50		
2015-2016	Total est. audience for above: 30,000	1	
Access Assistance	Total contacts		
2012-2013	400	1	
2013-2014	350	1	
2014-2015	400	1	
2015-2016	450	1	
Support Services	Total hours		
2012-2013	200	1	
2013-2014	200	1	
2014-2015	200	1	
2015-2016	250	1	
Respite Care	Total hours		
2012-2013	4,000	1	
2013-2014	3,500	1	
2014-2015	2,500	1	1.16
2015-2016	2,500	1	
Supplemental Services	Total occurrences		
2012-2013	50	1	

2013-2014	50	1
2014-2015	50	1
2015-2016	50	1

# 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):
SER-Jobs for Progress, EDD office, 629 12 <sup>th</sup> St, Modesto, CA 95354
Street Address: 121 Downey Ave, Suite 102, Modesto, CA 95354
Name and title of all SCSEP staff members (paid and participant):
Frances Trujillo, Employment Services Coordinator
Gretchen Van Schaick, Coordinator
Number of paid staff1 Number of participant staff1
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	713	1

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

Manager.

1.2 Estimated Number of Public and Media Events	Goal Numbers	
53	1	
35	1	
40	1	
38	1	
	Public and Media Events  53  35  40	

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	3,774	1

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	3,784	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	617	1

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	2,279	1

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	3,044	1

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	1,883	1

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	Counseling Hours-1,928	

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) 4

State Fiscal Year	3.1 Estimated Number of	
	Clients Represented Per SFY (Unit of Service)	Goal Numbers
(SFY)	(Onit of Gervice)	
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	
	3.3 Estimated Number of	
State Fiscal Year (SFY)	Program Consultation Hours per SFY	Goal Numbers
rear (SFT)	(Unit of Service)	
2012-2013	0	
2013-2014	0	
2014-2015	0	
2015-2016	0	

<sup>4</sup> Requires a contract for using HICAP funds to pay for HICAP Legal Services.

#### 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

#### Access:

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 <u>33.04</u>%

15-16 33.04%

#### **In-Home Services:**

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

12-13 -20.47%

13-14 20.47%

14-15 20.47%

15-16 20.47%

#### **Legal Assistance Required Activities:**

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

12-13 -22.02%

13-14 2<u>2.02</u>% 14-15 <u>22.02</u>%

15-16 22.02%

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

CCR Article 3, Section 7320	(a)(b) and 42	2 USC Section	3027(a)(8)(C)	
If an AAA plans to directly provide any of description of the methods that will be use PSA will be served.	_		•	
☐ Check if not providing any of the below	v listed direct	services.		
Check applicable direct services	eck applicable direct services Check each applicable Fiscal Year			<u>ar</u>
Title III B	12-13	13-14	14-15	15-16
Information and Assistance				
X Case Management				Х
Outreach				
Program Development				
Coordination				
☐ Long-Term Care Ombudsman				
Title III D	12-13	13-14	14-15	15-16
☐ Health Promotion				
Medication Management				
Title III E	12-13	13-14	14-15	15-16
Information Services				
Access Assistance				
Support Services				
Respite Services				
Supplemental Services				
Title VII A	12-13	13-14	14-15	15-16
☐ Long-Term Care Ombudsman				
Title VIIB	12-13	13-14	14-15	15-16
Prevention of Elder Abuse, Neglect and Exploitation				

#### **Description of Methods:**

The proposed Case Management Program will be available to all seniors in Stanislaus County. Through the Information and Assistance Program seniors seeking assistance with various needs will be identified and screened by AAA staff for inclusion in the program. Particular emphasis will be on lower income seniors who do not qualify for the Multipurpose Senior Services Program (MSSP), but need assistance accessing various services and coordinating involvement with different agencies.

If appropriate, and with the senior's consent, a social worker will meet with the senior to assist him or her to design a specific "care plan", access available services, and determine the extent of the need for involvement by AAA staff. Following the proscribed plan, the AAA staff will determine on-going needs and the direction for continuing assistance and coordination.

The program will be promoted through outreach events throughout the County, advertisement at collaborative meetings such as the Services to Older Adults Advisory Council (STOAAC), the Stanislaus County Commission on Aging, and the Senior Coalition of Stanislaus County. Brochures describing the program will be available in English and Spanish and will be distributed at area hospitals, doctor offices, senior centers, and through the established AAA programs such as the senior meals programs.

# SECTION 15 - REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES PSA 30

Older Americans Act, Section 307(a)(8) CCR Article 3, Section 7320(c), W&I Code Section 9533(f)
Complete and submit for CDA approval a separate Section 15 for each direct service not specified in Section 14. The request for approval may include multiple funding sources for a specific service.
Check box if not requesting approval to provide any direct services.
Identify Service Category: Case Management
Check applicable funding source:5
X III B
□ III C-1
□ III C-2
□ III E
□ VII A
☐ HICAP
Request for Approval Justification:
X Necessary to Assure an Adequate Supply of Service OR
More cost effective if provided by the AAA than if purchased from a comparable service provider.
Check all fiscal year(s) the AAA intends to provide service during this Area Plan cycle.
☐ 2012-13 ☐ 2013-14 ☐ 2014-15 X -2015-16
Justification: Provide a cost-benefit analysis below that substantiates this request for direct

delivery of the above stated  $service^6$ :

 <sup>&</sup>lt;sup>1</sup>3 Section 15 does not apply to Title V (SCSEP).
 <sup>1</sup>4 For a HICAP direct services waiver, the managing AAA of HICAP services must document that all affected AAAs are in agreement.

Case Management will be available through the AAA office. Starting this program will be cost effective for the AAA due to low overhead costs. Space is available to add another staff member without incurring costs such as a work station already equipped with a telephone, computer, and file space. The services will be an extension of programs already in place and referrals between programs can occur easily. The social worker will coordinate with the Information & Assistance Program, the PEI, and MSSP programs. In addition, the social worker will be trained to assist with the Information & Assistance and Family Caregiver Support programs. These programs are direct services located at the AAA and give the greatest opportunity for providing the Case Management program that will enhance and not duplicate services.

# **SECTION 16 - GOVERNING BOARD**

PSA <u>30</u>

# **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:	
Terry Withrow, Chair	12/31/2018	
Dick Monteith, Vice-Chair	12/31/2018	
Names and Titles of All Members:	Board Term Expires:	
Jim DeMartini	12/31/2016	
Vito Chiesa	12/31/2016	
William O'Brien	12/31/2016	

# **SECTION 17 - ADVISORY COUNCIL**

PSA 30

#### **ADVISORY COUNCIL MEMBERSHIP**

# 2012-2016 Four-Year Planning Cycle

45 CFR, Section 132	1	.57
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# CCR Article 3, Section 7302(a)(12)

Total Council Membership (include vacancies) 21

Number of Council Members over age 60 <u>18</u>

Race/Ethnic Composition	% of PSA's 60+Population	% on <u>Advisory Council</u>
White	<u>67%</u>	90%
Hispanic	<u>21%</u>	5%
Black	<u>2%</u>	0
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:

Pat Fantazia, President	6/30/2016
Jeri Johnson, 1 <sup>st</sup> Vice President	6/30/2016
Lillian Castigliano, 2 <sup>nd</sup> Vice President	6/30/2016
Eileene King	6/30/2017
Joanne Lyions	6/30/2015
Ken Hanigan	6/30/2015
Joyce Gandelman	6/30/2016
Mickey Peabody	6/30/2016
Stacie Morales	6/30/2016

Maggie Mejia	6/30/2015
Name and Title of other members:	Office Term Expires:
Kathleen Faria	6/30/2015
Jenny Kenoyer	6/30/2015
Martha Martin	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	6/30/2017

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

	Yes	No
Low Income Representative	X	
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	X	
Explain any "No" answer(s):		
Briefly describe the local governing board's proce members:	ess to ap	point Advisory Council

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 <u>must</u> 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	1

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.

Effective April 1, 2015, the Senior Advocacy Network will add a "24 Hour Scam Line". The number is 209-996-SCAM (7226).

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. APS has included the Senior Law Project in their Mandatory Reporter Training which provides outreach to other professionals in the community.

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

Fiscal Year	Name of Provider	Geographic Region covered
	a. Senior Advocacy Network	a. Stanislaus County
2012-2013	b.	b.
	C.	C.
	a. Senior Advocacy Network	a. Stanislaus County
2013-2014	b.	b.
	c.	c.
	a. Senior Advocacy Network	a. Stanislaus County
2014-2015	b.	b.
	C.	C.
	a. Senior Advocacy Network	a. Stanislaus County
2015-2016	b.	b.
	C.	c.

#### 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.

9. 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 for restraining orders. 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:

We need funding to hold monthly legal clinics in the more rural/remote areas of our county. The Senior Advocacy Network participates in and conducts various fundraising activities.

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, the Alzheimer's/Dementia Support Center and numerous retirement/assisted living facilities. They assist Adult Protective Services staff with obtaining restraining orders. They have also coordinated with agencies that offer free home repair services for seniors.