

**Monterey County
Area Agency on Aging
2020-2024 Area Plan
*“Assistance, Advocacy and
Answers on Aging”***



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Note: This is considered a four-year plan that will have annual updates for the next three fiscal years. As a result, this document will have some blank sections to be completed in subsequent updates.

This version includes all edits through April 10, 2020 and has been approved by the Area Agency on Aging Advisory Council.

Area Plan Checklist

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Section	2020-2024 4-Year Area Plan Required Components	4-Year Plan
	Transmittal Letter — <i>must have original, ink signatures or official signature stamps — no photocopies</i>	<input checked="" type="checkbox"/>
		<input checked="" type="checkbox"/>
1	Mission Statement	<input checked="" type="checkbox"/>
2	Description of the Planning and Service Area (PSA)	<input checked="" type="checkbox"/>
3	Description of the Area Agency on Aging (AAA)	<input checked="" type="checkbox"/>
4	Planning Process / Establishing Priorities	<input checked="" type="checkbox"/>
5	Needs Assessment	<input checked="" type="checkbox"/>
6	Targeting	<input checked="" type="checkbox"/>
7	Public Hearings	<input checked="" type="checkbox"/>
8	Identification of Priorities	<input checked="" type="checkbox"/>
9	Area Plan Narrative Goals and Objectives:	<input checked="" type="checkbox"/>
9	Title IIIB Funded Program Development (PD) Objectives	<input checked="" type="checkbox"/>
9	Title IIIB Funded Coordination (C) Objectives	<input checked="" type="checkbox"/>
9	System-Building and Administrative Goals & Objectives	<input checked="" type="checkbox"/>
10	Service Unit Plan (SUP) Objectives and Long-Term Care Ombudsman Outcomes	<input checked="" type="checkbox"/>
11	Focal Points	<input checked="" type="checkbox"/>
12	Disaster Preparedness	<input checked="" type="checkbox"/>
13	Priority Services	<input checked="" type="checkbox"/>
14	Notice of Intent to Provide Direct Services	<input checked="" type="checkbox"/>
15	Request for Approval to Provide Direct Services	<input checked="" type="checkbox"/>
16	Governing Board	<input checked="" type="checkbox"/>
17	Advisory Council	<input checked="" type="checkbox"/>
18	Legal Assistance	<input checked="" type="checkbox"/>
19	Multipurpose Senior Center Acquisition or Construction Compliance Review	<input checked="" type="checkbox"/>
20	Title III E Family Caregiver Support Program	<input checked="" type="checkbox"/>
21	Organization Chart	<input checked="" type="checkbox"/>
22	Assurances	<input checked="" type="checkbox"/>

Transmittal Letter

2020-2024 Four Year Area Plan

AAA Name: Monterey County Area Agency on Aging

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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 undersigned¹ 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. Chris Lopez

Signature: Governing Board Chair¹

Date

2. Richard Kuehn

Signature: Advisory Council Chair

Date

3. Allison Yant

Signature: Area Agency on Aging
Interim Director

Date

¹ Original signatures or official signature stamps are required.

Section 1 – Mission Statement

PSA 32

The AAA has adopted the guiding mission as established by the California Code of Regulations (CCR Article 3, Section 7302). The mission statement is:

“To provide leadership in addressing issues that relate to older Monterey County residents; to develop community-based systems of care that provide services which support independence, and which protect the quality of life of older persons and persons with functional impairments; and to promote citizen involvement in the planning and delivery of services.”

The AAA adopts the following values important to older adults:

- **Quality of Life**
“I want to be treated with dignity and respect.”
- **Quality of Care**
“I want service providers to be knowledgeable, experienced and well trained.”
- **Access and Affordability**
“I want to be able to easily find services and be able to afford them.”
- **Choice and Person-Centered Services**
“I want to be in charge and have options presented to me.”
- **Lowest Level of Care**
“I want to stay in my own home.”

In addition, the Monterey County Area Agency on Aging currently strives to:

- Be ready to provide information, services, and advocacy to best support older adults in our communities through the unforeseen Nationwide COVID-19 pandemic.
- Be involved with addressing housing and homelessness prevention issues as they escalate for older adults in our communities.
- Host an annual Elder Justice Summit and other community education events on emerging topics that impact the lives of older adults.
- Facilitate candidate forums; work with elected officials (federal, state, and local); and visit legislators in Sacramento to engage in dialog on policies that touch the lives of seniors.
- Participate in the Blue Zones Project sponsored by Salinas Valley Memorial Hospital (<https://info.bluezonesproject.com/montereycounty>).
- Incorporate concepts of AARP’s Livable Communities model into the work done by the AAA at the local level (<https://aarp.org/livable-communities>).

Section 2 – Description of the Planning and Service Area (PSA)

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Planning and Service Area (PSA) 32 for Monterey County was established as an Area Agency on Aging (AAA) in 1980 by the State of California and the Monterey County Board of Supervisors. As a result, federal and state funding has supported a variety of programs that have served older residents for over forty years.

Monterey County is located on the central coast of California and ranks sixteenth in geographic size compared to all other Californian counties (total of 3,324 square miles²). Considered a mid-size county, the landscape is mostly rural with small towns, however the Cities of Monterey and Salinas are more urban.

Monterey County’s population of 435,594³ ranks twentieth largest in the State and continues to grow each year. Significant increases in the older population follow the same trends seen throughout the state and country.

2018 Older Population in Monterey County by Age Group						
AGE	Total Population by Age Group	% of Total Population All ages	Male	% of Total Population All ages	Female	% of Total Population All ages
60-64	22,598	5.22%	11,471	2.65%	11,127	2.57%
65-69	19,169	4.42%	9,363	2.16%	9,806	2.26%
70-79	21,193	4.89%	10,103	2.33%	11,090	2.56%
80 & up	15,153	3.50%	5,763	1.33%	9,390	2.17%
Total 60+	78,113	18.03%	36,700	8.47%	41,413	9.56%
Total 65+	55,515	12.81%	25,229	5.82%	30,286	6.99%

The chart above⁴ shows the most recent information on the current population of older adults in Monterey County. The 60+ population grew by 8,185 since the AAA Area Plan four years ago equaling a 11.7% increase.

² Wikipedia resource https://en.wikipedia.org/wiki/Monterey_County,_California .

³ The United States 2018 PEPPER Population Estimates for the Monterey County Report.

⁴ U.S. Census, 2018, total population all ages, Monterey County Report.

Section 3 – Description of the Area Agency on Aging

PSA 32

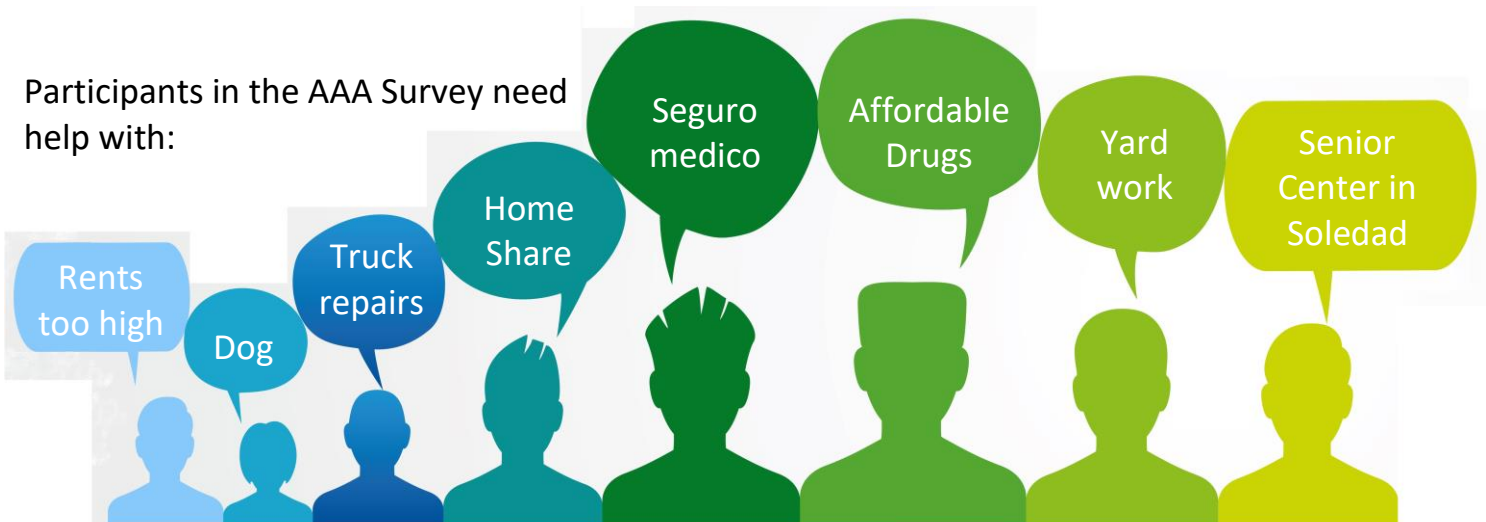
The Monterey County Department of Social Services (DSS) administers the Area Agency on Aging (AAA) and works closely with local non-profits and partners to plan and provide services. Most services are federally funded through the Older Americans Act, and coordinated through the California Department of Aging. State funds, County support, and other grant sources are leveraged when available.

Although DSS provides daily administrative support to the AAA staff, only one direct service is fully operated by the Department. The Information, Referral, and Assistance Program is supported by several funding sources where experienced social workers manage the work required by the AAA along with the needs of the Adult Protective Services Program and the In-Home Supportive Services Program. This viable approach has worked well for several years compared to managing an outside contract.

The AAA follows tight regulations in contracting all other Older Americans Act programs after following a bidding process every four years. AAA staff has been pleased to work with experienced agencies including local non-profits, and government partners. Fortunately, there is still some flexibility in those contracts at any time due to ever-changing funding levels and local needs.

The AAA also serves as a conduit for local advocacy efforts by providing information, meeting space, and links to a mixture of creative resources. Naturally, volunteer members of the AAA Advisory Council have opportunities for community involvement and to learn leadership, but members are also invaluable in hosting community education events.

Participants in the AAA Survey need help with:



Section 4 – Planning Process/Establishing Priorities

PSA 32

Our best planning efforts did not foresee the COVID-19 pandemic that is a current crisis across our nation. The immediate impacts on our vulnerable adults have been devastating and the long-term consequences may prove to be worse. It is important to recognize the economic shockwave that is just beginning, and the AAA, along with service providers, need flexibility to sustain essential services. Although emergency funds have been promised, it is important that continued resources be available to serve our increasing older population and especially those that are frail, isolated, and at-risk.

The more typical planning process is an open-ended, on-going cycle with the intent to continuously improve services: 1) Plan, 2) Do, 3) Evaluate. The next step is to use the lessons learned and make changes in the plan to deliver services in better ways. The AAA is constantly balancing needs, funding levels, resources, and new opportunities. Fortunately, there is a state-wide network of AAA agencies doing similar work and sharing best practices. This approach helps to overcome barriers before they materialize at the local level.

The California Department of Aging has aligned a four-year cycle for all AAAs within the state with identical timelines for each. This “Area Plan” for Monterey County begins a new cycle through June of 2024 and establishes goals and objectives over the course of the next four years. An annual update report will be done during the next three years to report on progress, emerging issues, and steps taken to address barriers.

Seniors participating in the AAA survey told us they are concerned about:



A beginning step to understand the daily priorities of older adults is to simply ask them. As a result, AAAs in every corner of our country conduct a “needs assessment” and invite seniors, those with disabilities, caregivers, and providers to participate. That responsibility is carried out in a variety of ways depending on the requirements of each State. Timing may also be different on how often a needs assessment is done, although community feedback is a very critical component.

In Monterey County, surveys have been the main approach used to gain public input, but the AAA has also held focus groups, public testimony, and obtained direct input from service providers. The most recent survey began in the summer of 2019 and was distributed in hardcopy and electronic formats. It was promoted at senior centers, service providers, at community events, on Facebook and on the AAA website. Over 1,400 surveys were completed, and the significant results are included in this document. One important aspect of the survey tool used during the last three cycles is that the core questions have remained the same. The one-time results are always interesting and useful, however comparison of the results over time provides a unique view of trends and changes (see more details in Section 5).

Also, part of the 2019 Monterey County Needs Assessment Survey were additional questions from the AARP Livable Communities Survey. As the analysis of that feedback unfolds in the next few months, it will be important for the AAA and the Advisory Council to consider the “quality of life” aspects of our communities. That perspective may compel everyone to advocate beyond the basic needs of survival.

In addition, the unprecedented COVID-19 outbreak may cause the AAA to conduct an additional survey sooner than required. A shorter and more focused survey may be a good way to check the pulse of our senior population. It is likely that priorities may shift considerably and waiting another four years as scheduled may not be reasonable.

Section 5 – Needs Assessment

PSA 32

Customized Survey

The AAA conducts a county-wide survey every four years to better understand the needs of older adults. It is important that Monterey County residents of all ages participate because the perspective of caretakers, service providers and all those that plan to age in our communities is vital. The survey results are excellent indicators that can help everyone plan and shape services in ways that reflect accurate needs.

The survey tool used during 2019 duplicated the same questions asked in 2015 and 2011. Comparing the results obtained over the years provides an excellent opportunity to evaluate trends and compare escalating needs. Paper and on-line versions of the survey were widely distributed and were available in English and Spanish.

Analysis of the 1,126 completed surveys showed a geographic balance of feedback from residents living throughout the county and reflected diversity similar to the general population.

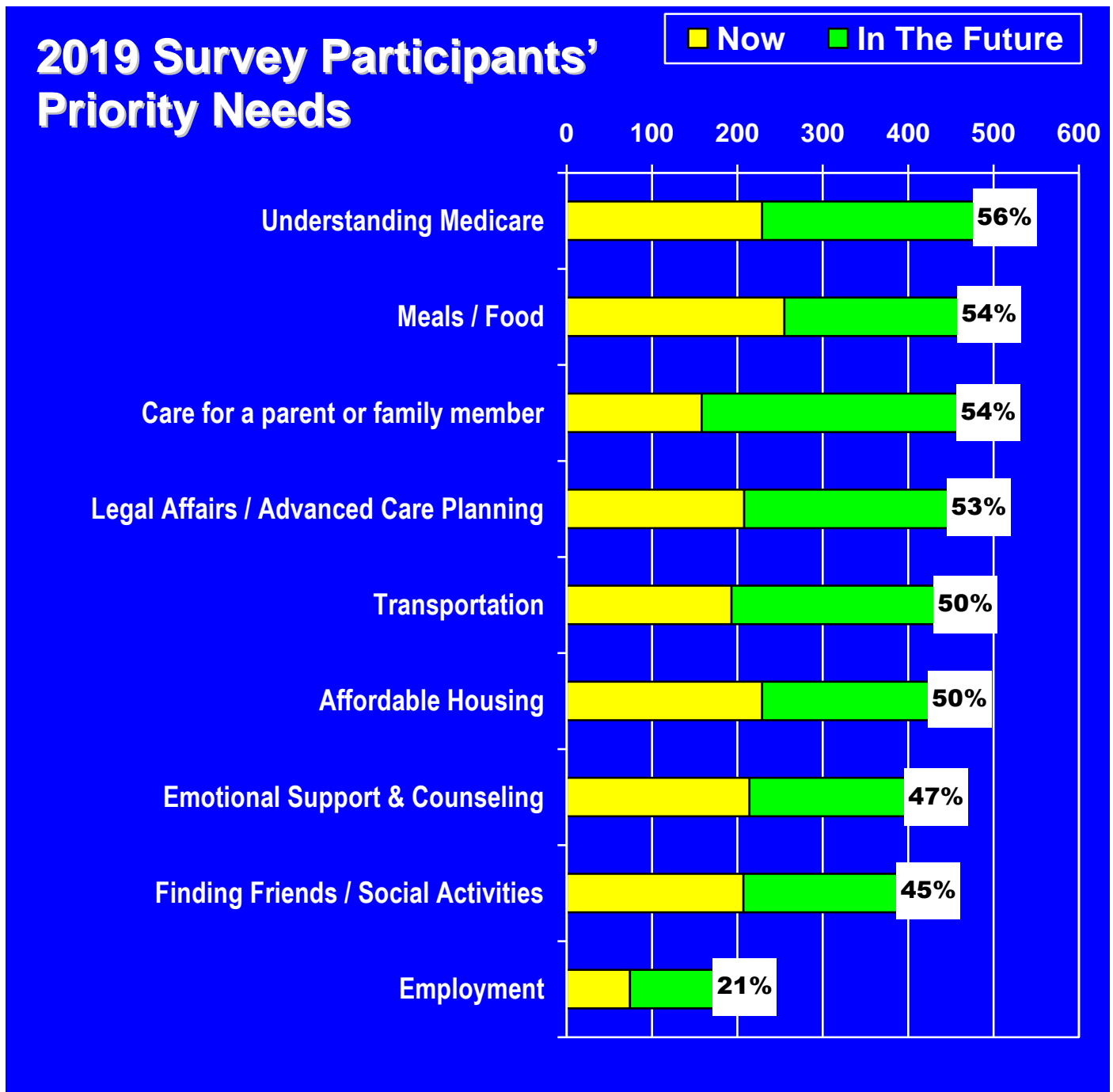
Demographics of Survey Participants	
Age 30% 59 or under 12% 60 – 64 48% 65 – 84 10% 85 and over	Income Levels <i>(annual amounts)</i> 15% \$12,060 or below ⁵ 11% \$12,061 - \$16,240 ⁶ 13% \$16,241 - \$25,530 ⁷ 61% Over \$25,530
Race 68% White 8% Mixed 3% Asian 2% Pacific Islander 3% Black 3% Alaskan/Native American	Languages Spoken 93% English 23% Spanish 4% Other Language <i>Overlap due to those that speak more than one language.</i>
Latino 64% Non-Latino 36% Latino	Lesbian, Gay, Bisexual, Transgender, Questioning 4.03%

⁵ Maximum household income for one person living at the Federal Poverty Level.

⁶ Range of income for two people in the same household living at the Federal Poverty Level.

⁷ This range of income is above the FPL and a person would not qualify for many low-income services. However, it is below the true cost of living for a single renter in good health according to the Elder Economic Security Standard Index (considered a more comprehensive measure of the cost of living for older adults in Monterey County).

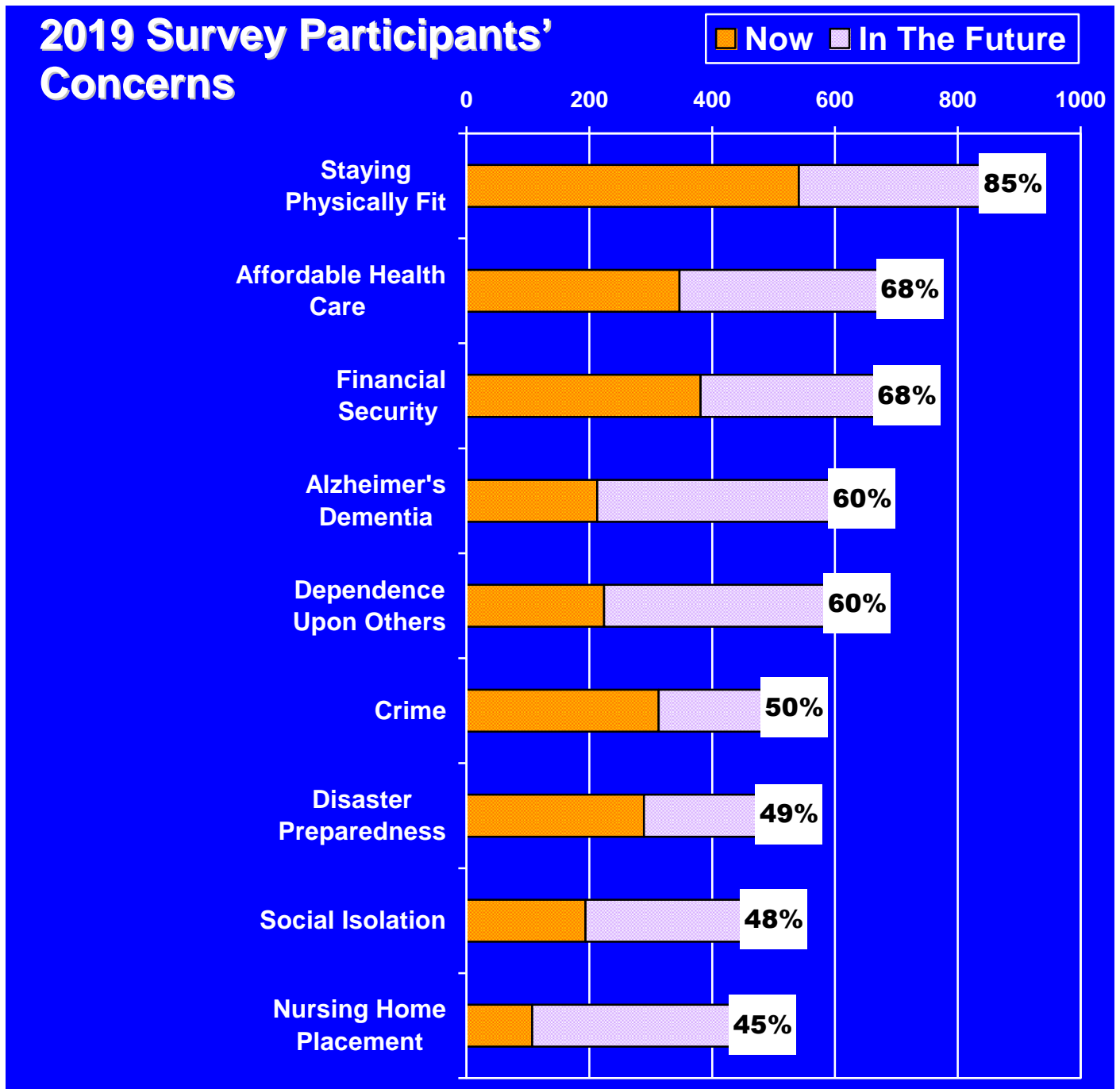
Compile, Compare, and Review of Survey Results
Analysis on Priority Needs



Significant survey results have been focused into 9 areas of need. Shifts between the priority categories reflect some changes over time:

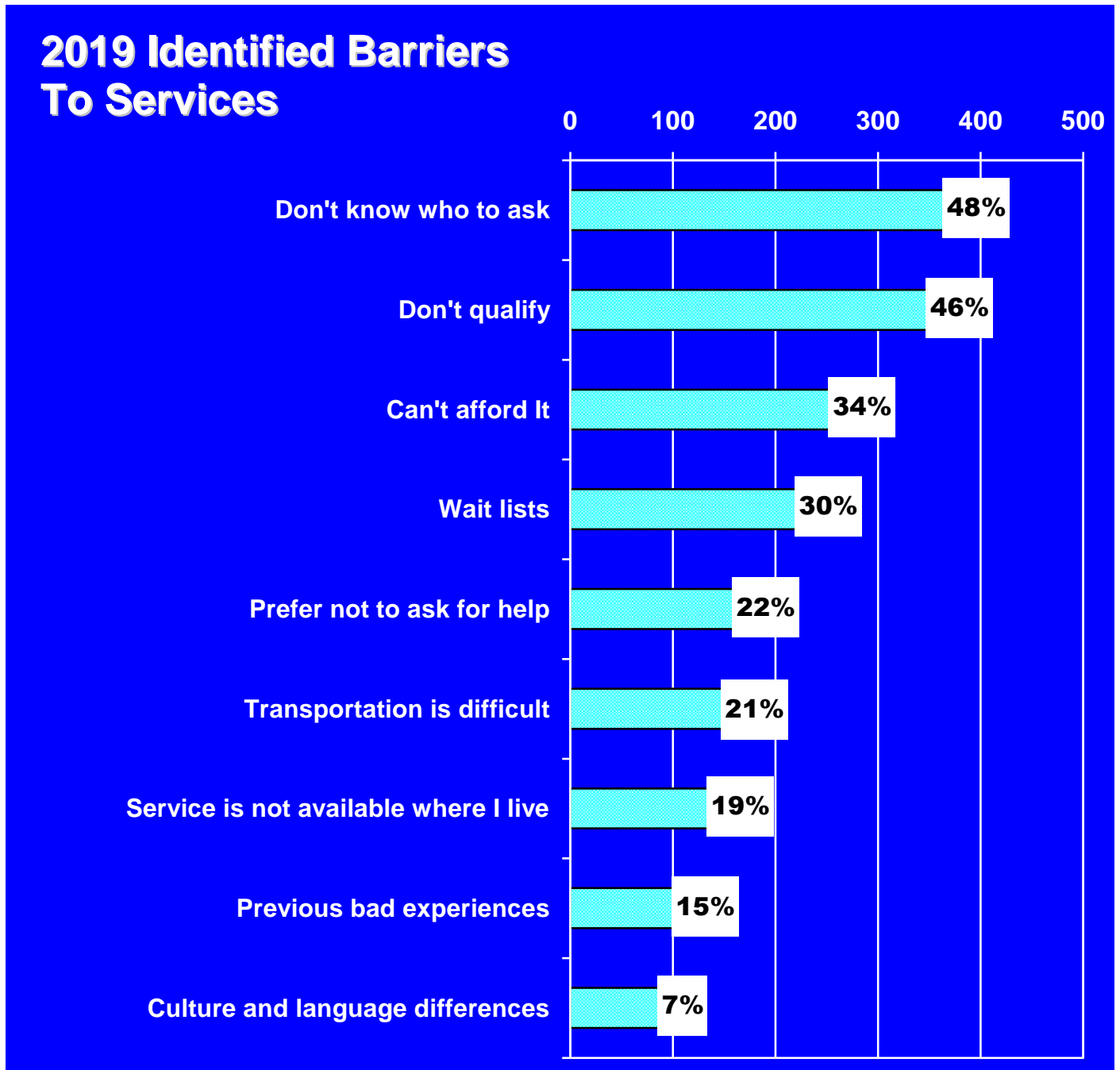
- Meals/food: #1 in 2012, #7 in 2016, #2 in 2019.
- Care for a parent or family member: #6 in 2012, #2 in 2016, #3 in 2019.
- Understanding Medicare: #3 in 2012, #1 in 2016, remains #1 in 2019.

Analysis on Participants' Overall Concerns



Staying physically fit has been the top concern expressed in the surveys conducted in 2012, 2016, and 2019. It is also very interesting that the order of the concerns in 2019 is identical to the survey results in 2016.

Analysis on Barriers to Services



Barriers that prevent easy access to services continue to be reported and the 2019 survey results above are almost identical to the 2016 survey outcomes. The AAA does a significant outreach effort in a wide variety of ways each year and still local seniors complain that they “don’t know who to ask” for information. Service providers, community partners, and government agencies all help to promote the Senior Helpline toll free number and widely distribute the Senior Resource Guide to help reach isolated seniors. Ultimately more work is needed to overcome these barriers to service and it will require much more investment.

Section 6 – Targeting (Greatest Social & Economic Need)

PSA 32

The Federal Older American’s Act (OAA) that provides funding at the local level requires that efforts be made to reach senior populations in “greatest social and economic need”⁸ including:

1. Low-income minorities
2. Native Americans
3. Residents in rural areas
4. Limited English-speakers
5. At risk for institutional placement
6. Frail seniors with physical or mental impairments that affect functioning
7. Seniors with Alzheimer’s disease or related dementias
8. Lesbian, Gay, Bisexual and Transgender (LGBT) seniors

OAA outlines 38 program descriptions for potential services that can be offered through AAAs across the country. Another 44 programs for Family Caregiver Support can also be supported. Unfortunately, the budget is separated into specific program type and local administrators must use those funds for that purpose alone. For example: Nutrition funding can only be used for programs that provide group dining and home delivered meals.

Although there is room for some interpretation and implementation at the local level, proposed services must be reviewed and approved by the California Department of Aging. In addition, there is not enough funding to support all 82 possible programs in a meaningful way. As a result, Monterey County AAA works to understand the priority needs of older adults living in local communities and typically supports 30 various programs through a network of service providers that reach into most areas of this urban and rural county.

⁸ The Older American’s Act defines:

1. “Greatest economic need” resulting from an income level at or below the poverty line.
2. “Greatest social need” caused by non-economic factors, which include:
 - a. physical and mental disabilities.
 - b. language barriers; and
 - c. cultural, social, or geographical isolation, including isolation caused by racial or ethnic status, that:
 - i. Restricts the ability of an individual to perform normal daily tasks; or
 - ii. Threatens the capacity of the individual to live independently.

Section 7 – Public Hearings

PSA 32

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)

Conducted for the 2020-2024 Planning Period

Fiscal Year	Date	Location	Number of Attendees	Presented in languages other than English? ⁹ Yes or No	Was hearing held at a Long Term Care Facility? ¹⁰ Yes or No
2023-2024	April 9, 2020	Monterey County AAA Advisory Council Meeting, Salinas	19	Spanish available	No

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.
 - a. Public Hearing Notice, flyers developed, distributed, and posted on Facebook.
 - b. Emails to existing list-serves including service providers.
 - c. Press releases to local newspapers: Salinas Californian including El Sol, Monterey Herald, Pine Cone, South County papers (4 editions).
 - d. KSBW (local television channel) Community Calendar.
 - e. Flyers and communications widely distributed through the Aging & Disability Services Network (email, meetings, front lobbies).

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

- Yes. Go to question #3
- Not applicable, issue was not discussed. PD and C funds are not used. Go to question #4

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

Not applicable.

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

- Yes. Go to question #5
- No, Explain:

⁹ A translator is not required unless the AAA determines a significant number of attendees require translation services.

¹⁰ AAAs are encouraged to include individuals in LTC facilities in the planning process, but hearings are not required to be held in LTC facilities.

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

After a brief presentation, everyone was given an opportunity to ask questions.

One AAA member asked about the 0% currently allocated for in-home services. AAA staff explained the history and the reason behind that: Several years ago, the In-Home Supportive Services (IHSS) Program expanded tremendously and began services to the same older population. It was felt that anything the AAA could do would be duplicative and, as a result, asked permission of the State to allow the AAA to stop services. It was noted that the funding would be used to support other AAA work. CDA agreed.

After significant discussion including IHSS services and qualifying for the program, it was decided to refer the issue to the AAA Policy, Evaluation, and Allocation Committee for review within the next year.

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

AAA Staff gave everyone the opportunity to ask questions and make comments.

A suggestion had been made earlier and AAA staff outlined the idea of including the topic of COVID 19 in the Area Plan.

Another AAA member brought up an idea to write a letter to the Board of Supervisors in support of senior citizens. After some discussion and clarification, it was decided to discuss the idea further at the next AAA Executive Committee meeting.

7. Note any changes to the Area Plan which were a result of input by attendees.

There was substantial discussion on adding information on COVID 19 to the Area Plan. Everyone agreed it was a good idea. AAA staff encouraged everyone to compose a few words and email them. Staff offered to combine the ideas into a cohesive narrative and resend out for additional review.

As a result, an additional bullet was added to page 4 and **Section 4 – Planning Process/Establishing Priorities on pages 7 and 8 were rewritten.**

Section 8 – Identification of Priorities

PSA 32

The most important priorities for older adults in Monterey County (see page 9) have remained relatively the same over the course of the past eight years (three surveys completed: 2012, 2016, 2019 AAA Needs Assessments). Survey findings reflect the needs in our communities and everyone in the service provider network must follow up to do much more (includes the AAA). Although the creation and maintenance of direct service programs are the most logical way to address a need, that is not the only successful strategy.

Nine priority needs for older adults were identified for Monterey County during review of the 2019 AAA Needs Assessment Survey results. Understanding Medicare continues to be the top need expressed by survey participants. This health insurance transition is daunting for most as they reach age 65 and there are multiple changes in coverage each year. Nationwide, there are services available through AAAs to assist in signing up for benefits and making choices. Locally the Health Insurance Counseling and Advocacy Program (HICAP) is subcontracted to a local non-profit agency and is dependent on trained volunteers. Minimal paid staff supervise volunteers that assist new and returning seniors to enroll in Medicare. The AAA will continue to support this Program.

Alternative modes of transportation are typically needed as a person ages and gives up the keys to their personal vehicle. Transportation is considered by survey participants as a top priority need, but funding limits what AAA can do directly. Over the past two years the AAA has worked with community partners to distribute bus passes to seniors, but has done significantly more non-directly. The strategy is to assure that aging advocates are part of the committees for transportation agencies. In that role, volunteer committee members become the voice of older adults and remind policy makers to include appropriate services whenever possible.

Affordable housing has consistently been a priority need of older adults in recent years and continues to be according to the results of the 2019 AAA Needs Assessment Survey. The demand for housing in our high-cost area surpasses the developed resources each year and the AAA has participated in several efforts to address the widening gap. Although the AAA does not provide funding to build and expand the actual housing market for low-income seniors, Monterey County is fortunate that several agencies specialize in providing direct services. Instead, the AAA has participated on several committees to discuss and plan efforts to address the growing crisis of homelessness. Several ideas have surfaced, and the AAA is hoping to provide some funding for a pilot Home Match program. This Program will connect seniors living in homes with vacant bedrooms to those individuals needing housing.

Nutrition services, including the Senior Lunch Program (congregate meals) and Home Delivered Meals, have continued as the direct intervention to provide healthy, prepared food to older adults in Monterey County. It is no surprise that the need for these services remain at or near the top of the priorities list of each survey cycle. Of course, these Programs are very important for food security, but the purpose of the congregate program is to create positive social opportunities. Four subcontractors provide fundamental kitchen services at nine lunch sites and to all homebound seniors living throughout the County. More than half of the total AAA funding provides support for senior meal programs.

Section 9 – Area Plan Narrative Goals and Objectives

PSA 32

Goal 1: System Planning

Rationale: Coordinate existing services and continuously improve access for all eligible older adults.

Objective 1.1	Projected Start and End Dates	Title III B Funded PD or C ¹¹	Update Status ¹²
<p>California Department of Aging has committed to provide funding for a “Aging & Disability Resource Connection (ADRC)” partnership with the Central Coast Center for Independent Living (officially designated as an emerging ADRC). The components of these services have been reviewed along with the best practices from pilot programs across the state. Some features have been implemented by the existing Information, Referral, and Assistance Program (IRA) already. When the funding is available, the AAA is ready to establish a full and robust ADRC Program.</p>	<p>07/01/20 – 06/30/24</p>	<p>No</p>	
<p>Objective 1.2 Continue existing partnerships with local non-profits, other government agencies, and hospitals to deliver services.</p>	<p>07/01/20 – 06/30/24</p>	<p>No</p>	
<p>Objective 1.3 Pursue new partnerships with likely and nontraditional organizations. Work together to host community events, promote existing services, and explore new opportunities.</p>	<p>07/01/20 – 06/30/24</p>	<p>No</p>	

¹¹ Indicate if Program Development (PD) or Coordination (C) – **cannot be both**. If a PD objective is not completed and is continued the following year, the objective must be revised and restated with the remaining or additional tasks.

¹² Use for Area Plan Updates only: Indicate if objective is **New, Continued, Revised, Completed, or Deleted**.

Objective 1.4 AAA Staff, AAA Advisory Council members, and others representing the AAA will continue to participate in a variety of community meetings and events. These opportunities help the AAA to connect to others in the community and strengthen the network of providers serving older adults and those with disabilities.	Projected Start and End Dates	Title III B Funded PD or C	Update Status
Objective 1.5 Continue to apply for new funding opportunities to expand services for older adults.	07/01/20 – 06/30/24	No	
Objective 1.6 Coordinate with existing services and support a new home matching program. Services to be focused on older adults that are homeless or at risk of being homeless. Program services will outreach to low and very low-income seniors and provide affordable housing options.	07/01/20 – 06/30/24	No	

Goal 2: Advocacy

Rationale: Communicate with others to gain support on issues that impact the lives of older adults.

Objective Number 2.1 Seize opportunities to partner with outside agencies to provide outreach, public information, community education and advocacy. Depending on the details, the AAA could provide a direct service or assign an existing contractor additional work.	Projected Start and End Dates	Title III B Funded PD or C	Update Status
	07/01/20 – 06/30/24	No	

Goal 3: California Department of Aging Required Program Goals¹³

Rationale: Assure that awarded funding is used towards approved programs and meets all expectations.

Goal The AAA will support services that promote healthy aging and meet all mandated requirements.			
Rationale The 2019 AAA Needs Assessment duplicated the top result from the 2016 Needs Assessment. The number one concern is to stay physically fit.			
Objective 3.1 Funding for Health Promotion classes will continue to be used for exercise activities that are considered at the highest level of evidence-based curriculum (proven to work). In addition, other sources of funding will be leveraged whenever possible to increase services to discourage sedentary lifestyles.	Projected Start and End Dates 07/01/20 – 06/30/24	Title III B Funded PD or C No	Update Status
Objective 3.2 The AAA receives funding for Ombudsman Services and will continue to subcontract with a local non-profit that will recruit and train volunteers. They will respond to concerns or reports of neglect or maltreatment within licensed facilities. The Ombudsman Program will also perform community education presentations as reflected in contractor’s scope of work. Staff will provide oversight of contractor’s outreach efforts and the provision of services so that customer feedback can be considered at all levels. Expected outcomes will strengthen capacity of the Ombudsman to respond to issues of suspected abuse within licensed facilities.	07/01/20 – 06/30/24	No	

¹³ Program goals and objectives as specified and required by the California Department of Aging.

Objective 3.3	Projected Start and End Dates	Title III B Funded PD or C	Update Status
<p>Legal services are mandated as a program that must be offered by the AAA and will continued to be provided by a local non-profit. The subcontractor will offer legal assistance and community education as specified in contractor’s scope of work outlined in the formal written agreement. Outcomes will strengthen the awareness of seniors so they can avoid victimization and increase the capacity of protective service professionals to intervene in the prevention of elder abuse.</p>	<p>07/01/20 – 06/30/24</p>	<p>No</p>	
<p>Objective 3.4 HICAP Programs will continue to be provided by a local non-profit and overseen by the AAA. These services are funded by separate allocated funding.</p>	<p>07/01/20 – 06/30/24</p>	<p>No</p>	

Section 10 – Service Unit Plan (SUP) Objectives

PSA 32

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 and the National Ombudsman Reporting System \(NORS\) Instructions](#).

Report the units of service to be provided with **ALL funding sources**. Related funding is reported in the annual Area Plan Budget (CDA 122) for Titles III B, III C-1, III C-2, III D, VII (a) and VIIA.

Home-Delivered Meals

Unit of Service = 1 meal

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	93,000	3	
2021-2022			
2022-2023			
2023-2024			

Congregate Meals

Unit of Service = 1 meal

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	35,000	3	
2021-2022			
2022-2023			
2023-2024			

Transportation (Access)

Unit of Service = 1 one-way trip

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	250	N/A	
2021-2022			
2022-2023			
2023-2024			

Legal Assistance**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	5,800	3	
2021-2022			
2022-2023			
2023-2024			

Nutrition Education**Unit of Service = 1 session per participant**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	4,400	3	
2021-2022			
2022-2023			
2023-2024			

Information and Assistance (Access)**Unit of Service = 1 contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	28,000	3	
2021-2022			
2022-2023			
2023-2024			

Outreach (Access)**Unit of Service = 1 contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	6,800	3	
2021-2022			
2022-2023			
2023-2024			

2. NAPIS Service Category – “Other” Title III Services

- Each **Title III B** “Other” service must be an approved NAPIS Program 15 service listed on the “Schedule of Supportive Services (III B)” page of the Area Plan Budget (CDA 122) and the CDA Service Categories and Data Dictionary.
- Identify **Title III B** services to be funded that were not reported in NAPIS categories 1-14 and 16. (Identify the specific activity under the Other Supportive Service Category on the “Units of Service” line when applicable.)

Title III B, Other Priority and Non-Priority Supportive Services

For all Title III B “Other” Supportive Services, use the appropriate Service Category name and Unit of Service (Unit Measure) listed in the CDA Service Categories and Data Dictionary.

- **Other Priority Supportive Services include:** Alzheimer’s Day Care, Comprehensive Assessment, Health, Mental Health, Public Information, Residential Repairs/Modifications, Respite Care, Telephone Reassurance, and Visiting
- **Other Non-Priority Supportive Services include:** Cash/Material Aid, Community Education, Disaster Preparedness Materials, Emergency Preparedness, Employment, Housing, Interpretation/Translation, Mobility Management, Peer Counseling, Personal Affairs Assistance, Personal/Home Security, Registry, Senior Center Activities, and Senior Center Staffing

All “Other” services must be listed separately. Duplicate the table below as needed.

Service Category: Community Education

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	1	N/A	
2021-2022			
2022-2023			
2023-2024			

Service Category: Public Information

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	100	N/A	
2021-2022			
2022-2023			
2023-2024			

Service Category: Housing

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	50		
2021-2022			
2022-2023			
2023-2024			

3. Title IIID Disease Prevention and Health Promotion

Instructions for Title IIID Disease Prevention and Health Promotion: Enter the proposed units of service and the Program Goal and Objective number(s) that provides a narrative description of the program and explains how the service activity meets the criteria for evidence-based programs described in PM 15-10.

Unit of Service = 1 contact

Service Activities: Tai Chi for Arthritis Program, Tai Chi for Better Balance, Bingocize, Walk with Ease, Matter of Balance (all programs are evidence based with highest level criteria and approved by the CDA/ AAA.).

- **Title IIID/ Disease Prevention and Health Promotion:** Enter required 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 (Required)
2020-2021	2,000	3	3.1
2021-2022			
2022-2023			
2023-2024			

TITLE IIIB and Title VIIA:
LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES

2020-2024 Four-Year Planning Cycle

As mandated by the Older Americans Act, the mission of the LTC Ombudsman Program is to seek resolution of problems and advocate for the rights of residents of LTC facilities with the goal of ensuring their dignity, quality of life, and quality of care.

Each year during the four-year cycle, analysts from the Office of the State Long-Term Care Ombudsman (OSLTCO) will forward baseline numbers to the AAA from the prior fiscal year National Ombudsman Reporting System (NORS) data as entered into the Statewide Ombudsman Program database by the local LTC Ombudsman Program and reported by the OSTLCO in the State Annual Report to the Administration on Aging (AoA).

The AAA will establish targets each year in consultation with the local LTC Ombudsman Program Coordinator. Use the yearly baseline data as the benchmark for determining yearly targets. Refer to your local LTC Ombudsman Program’s last three years of AoA data for historical trends. Targets should be reasonable and attainable based on current program resources.

Complete all Measures and Targets for Outcomes 1-3;

Outcome 1. The problems and concerns of long-term care residents are solved through complaint resolution and other services of the Ombudsman Program. Older Americans Act Reauthorization Act of 2016, Section 712(a)(3), (5)]

Measures and Targets: Please note that data is based on Federal Fiscal Year (Oct. thru Sept.).

A. Complaint Resolution Rate (NORS Element CD-08) (Complaint Disposition). The average California complaint resolution rate for FY 2017-2018 was 73%.

<p>1. FY 2018-2019 Baseline Resolution Rate: Number of complaints resolved <u>184</u> + number of partially resolved complaints <u>103</u> divided by the total number of complaints received <u>352</u> = Baseline Resolution Rate <u>82%</u> FY 2020-2021 Target Resolution Rate 90%</p>
<p>2. FY 2019-2020 Baseline Resolution Rate: Number of complaints partially or fully resolved _____ divided by the total number of complaints received _____ = Baseline Resolution Rate _____ % FY 2021-2022 Target Resolution Rate _____ %</p>
<p>3. FY 2020 - 2021 Baseline Resolution Rate: Number of complaints partially or fully resolved _____ divided by the total number of complaints received _____ = Baseline Resolution Rate _____ % FY 2022-2023 Target Resolution Rate _____ %</p>

<p>4. FY 2021-2022 Baseline Resolution Rate: Number of complaints partially or fully resolved _____ divided by the total number of complaints received _____ = Baseline Resolution Rate _____ % FY 2023-2024 Target Resolution Rate _____</p>
<p>Program Goals and Objective Numbers: 90%</p>

B. Work with Resident Councils (NORS Elements S-64 and S-65)

<p>1. FY 2018-2019 Baseline: Number of Resident Council meetings attended 28 FY 2020-2021 Target: 20</p>
<p>2. FY 2019-2020 Baseline: Number of Resident Council meetings attended _____ FY 2021-2022 Target: _____</p>
<p>3. FY 2020-2021 Baseline: Number of Resident Council meetings attended _____ FY 2022-2023 Target: _____</p>
<p>4. FY 2021-2022 Baseline: Number of Resident Council meetings attended _____ FY 2023-2024 Target: _____</p>
<p>Program Goals and Objective Numbers: 20</p>

C. Work with Family Councils (NORS Elements S-66 and S-67)

<p>1. FY 2018-2019 Baseline: Number of Family Council meetings attended 2 FY 2020-2021 Target: <u>N/A</u></p>
<p>2. FY 2019-2020 Baseline: Number of Family Council meetings attended _____ FY 2021-2022 Target: _____</p>
<p>3. FY 2020-2021 Baseline: Number of Family Council meetings attended _____ FY 2022-2023 Target: _____</p>
<p>4. FY 2021-2022 Baseline: Number of Family Council meetings attended _____ FY 2023-2024 Target: _____</p>
<p>Program Goals and Objective Numbers: <u>N/A</u></p>

D. Information and Assistance to Facility Staff (NORS Elements S-53 and S-54) Count of instances of Ombudsman representatives' interactions with facility staff for the purpose of providing general information and assistance unrelated to a complaint. Information and Assistance may be accomplished by telephone, letter, email, fax, or in-person.

<p>1. FY 2018-2019 Baseline: Number of Instances 329 FY 2020-2021 Target: 50</p>
<p>2. FY 2019-2020 Baseline: Number of Instances _____ FY 2021-2022 Target: _____</p>
<p>3. FY 2020-2021 Baseline: Number of Instances _____ FY 2022-2023 Target: _____</p>
<p>4. FY 2021-2022 Baseline: Number of Instances _____ FY 2023-2024 Target: _____</p>
<p>Program Goals and Objective Numbers: 50</p>

E. Information and Assistance to Individuals (NORS Element S-55) 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. Information and Assistance may be accomplished by: telephone, letter, email, fax, or in person.

1. FY 2018-2019 Baseline: Number of Instances 777 FY 2020-2021 Target: 300
2. FY 2019-2020 Baseline: Number of Instances _____ FY 2021-2022 Target: _____
3. FY 2020-2021 Baseline: Number of Instances _____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Instances _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: 300

F. Community Education (NORS Element S-68) 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. This cannot include sessions that are counted as Public Education Sessions under the Elder Abuse Prevention Program.

1. FY 2018-2019 Baseline: Number of Sessions 18 FY 2020-2021 Target: 10
2. FY 2019-2020 Baseline: Number of Sessions _____ FY 2021-2022 Target: _____
3. FY 2020-2021 Baseline: Number of Sessions _____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Sessions _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: 10

G. Systems Advocacy (NORS Elements S-07, S-07.1)

One or more new systems advocacy efforts must be provided for each fiscal year Area Plan Update. In the relevant box below for the current Area Plan year, in narrative format, please provide at least one new priority systems advocacy effort the local LTC Ombudsman Program will engage in during the fiscal year. The systems advocacy effort may be a multi-year initiative, but for each year, describe the results of the efforts made during the previous year and what specific new steps the local LTC Ombudsman program will be taking during the upcoming year. Progress and goals must be separately entered each year of the four-year cycle in the appropriate box below.

Systems Advocacy can include efforts to improve conditions in one LTC facility or can be county-wide, state-wide, or even national in scope. (Examples: Work with LTC facilities to improve pain relief or increase access to oral health care, work with law enforcement entities to improve

response and investigation of abuse complaints, collaboration with other agencies to improve LTC residents' quality of care and quality of life, participation in disaster preparedness planning, participation in legislative advocacy efforts related to LTC issues, etc.) Be specific about the actions planned by the local LTC Ombudsman Program. Enter information in the relevant box below.

FY 2020-2021

FY 2020-2021 Systems Advocacy Effort(s): (Provide one or more new systems advocacy efforts)

The Community Emergency Response Volunteers of the Monterey Peninsula (CERV) has awarded nine community-based organizations scattered around Monterey County a total of more than \$190,000 to help prepare the county's most vulnerable populations for future disasters and emergencies. The Monterey County Long-term Care Ombudsman Program is committed to fostering a culture of community engagement and resilience, especially when it comes to emergency preparedness for seniors and individuals living with developmental disabilities. We aim to reduce feelings of helplessness, fear and anxiety for seniors and individuals living with developmental disabilities during an emergency."

The Alliance on Aging Ombudsman Program will develop and provide Emergency Preparedness Workshops to seniors living in assisted living facilities and adults living with developmental disabilities who attend adult day programs in Monterey County. The Emergency Preparedness Workshops will teach basic fire, fall and earthquake safety strategies. The workshops will feature several interactive components empowering participants to develop a personalized emergency plan. Participants who complete the four-hour long workshop will receive emergency preparedness materials and resources to share with family and friends.

In 2019, Assembly Bill 72 appropriated \$50 million to fund the California For All Emergency Preparedness Campaign to bolster statewide disaster resilience. The California For All Emergency Preparedness Campaign empowers statewide community-based organizations (CBOs) partners like CERV to provide emergency preparedness education and resources to Monterey County's most vulnerable communities, which can be described by social vulnerability factors including social isolation, poverty, language barriers, and other access and functional needs challenges, including the elderly, people with disabilities, and those in disadvantaged communities. In announcing the grants, CERV project director Harvey Pressman pointed out that "we face a paradoxical situation in which the people most likely to sustain the most negative consequences of emergencies and disasters have the least access to preparation resources." The CERV grants, he added, are just "one more step in CERV's continuing efforts to right this balance."

CERV's initiative is a part of Governor Newsom's state-wide "LISTOS California" initiative in disaster readiness for the state's most vulnerable populations. Monterey County, through CERV, is one of the 14 counties in the state to receive this support.

The agencies who have received 2020 funding from service so far include:

- Central Coast Center for Independent Living
- Meals on Wheels of the Monterey Peninsula, Inc.
- Alliance on Aging
- Mujeres en Acción
- Coastal Kids Home Care
- Rancho Cielo, Inc.
- The Deaf and Hard of Hearing Center
- Special Kids Connect
- ITN Monterey County

FY 2021-2022

Outcome of FY 2020-2021 Efforts:

FY 2021-2022 Systems Advocacy Effort(s): (Provide one or more new systems advocacy efforts)

FY 2022-2023

Outcome of FY 2021-2022 Efforts:

FY 2022-2023 Systems Advocacy Effort(s): (Provide one or more new systems advocacy efforts)

FY 2023-2024

Outcome of 2022-2023 Efforts:

FY 2023-2024 Systems Advocacy Effort(s): (Provide one or more new systems advocacy efforts)

Outcome 2. Residents have regular access to an Ombudsman. [(Older Americans Act Reauthorization Act of 2016), Section 712(a)(3)(D), (5)(B)(ii)]

Measures and Targets:

A. Routine Access: Nursing Facilities (NORS Element S-58) 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 a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no nursing facility can be counted more than once.

<p>1. FY 2018-2019 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 17 divided by the total number of Nursing Facilities 17 = Baseline 100 % FY 2020-2021 Target: 100 %</p>
<p>2. FY 2019-2020 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint ____ divided by the total number of Nursing Facilities = Baseline ____ % FY 2021-2022 Target: %</p>
<p>3. FY 2020-2021 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint ____ divided by the total number of Nursing Facilities = Baseline ____ % FY 2022-2023 Target: %</p>
<p>4. FY 2021-2022 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint ____ divided by the total number of Nursing Facilities = Baseline ____ % FY 2023-2024 Target: %</p>
<p>Program Goals and Objective Numbers 100%</p>

B. Routine access: Residential Care Communities (NORS Element S-61) 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 a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no RCFE can be counted more than once.

<p>1. FY 2018-2019 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint 48 divided by the total number of RCFEs 48 = Baseline 100% FY 2020-2021 Target: 100 %</p>
<p>2. FY 2019-2020 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint ____ divided by the total number of RCFEs ____ = Baseline ____ % FY 2021-2022 Target: %</p>
<p>3. FY 2020-2021 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint ____ divided by the total number of RCFEs ____ = Baseline ____ % FY 2022-2023 Target: %</p>

4. FY 2021-2022 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint _____ divided by the total number of RCFEs _____ = Baseline _____ % FY 2023-2024 Target: _____ %
Program Goals and Objective Numbers: 100%

C. Number of Full-Time Equivalent (FTE) Staff (NORS Element S-23) This number may only include staff time legitimately charged to the LTC Ombudsman Program. Time spent working for or in other programs may not be included in this number. For example, in a local LTC Ombudsman Program that considers full-time employment to be 40 hour per week, the FTE for a staff member who works in the Ombudsman Program 20 hours a week should be 0.5, even if the staff member works an additional 20 hours in another program.

1. FY 2018-2019 Baseline: 3.28 FTEs FY 2020-2021 Target: 3.28 FTEs
2. FY 2019-2020 Baseline: _____ FTEs FY 2021-2022 Target: _____ FTEs
3. FY 2020-2021 Baseline: _____ FTEs FY 2022-2023 Target: _____ FTEs
4. FY 2021-2022 Baseline: _____ FTEs FY 2023-2024 Target: _____ FTEs
Program Goals and Objective Numbers: 3.28

D. Number of Certified LTC Ombudsman Volunteers (NORS Element S-24)

1. FY 2018-2019 Baseline: Number of certified LTC Ombudsman volunteers 23 FY 2020-2021 Projected Number of certified LTC Ombudsman volunteers 25
2. FY 2019-2020 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2021-2022 Projected Number of certified LTC Ombudsman volunteers _____
3. FY 2020-2021 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2022-2023 Projected Number of certified LTC Ombudsman volunteers _____
4. FY 2021-2022 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2023-2024 Projected Number of certified LTC Ombudsman volunteers _____
Program Goals and Objective Numbers: 25

Outcome 3. Ombudsman representatives accurately and consistently report data about their complaints and other program activities in a timely manner. [Older Americans Act Reauthorization Act of 2016, Section 712(c)]

Measures and Targets:

In the box below, in narrative format, describe one or more specific efforts your program will undertake in the upcoming year to increase the accuracy, consistency, and timeliness of your National Ombudsman Reporting System (NORS) data reporting.

Some examples could include:

- Hiring additional staff to enter data
- Updating computer equipment to make data entry easier
- Initiating a case review process to ensure case entry is completed in a timely manner

Alliance on Aging Staff Ombudsman enter case information into ODIN2020 as the complaint comes in. Data is also tracked on our Cumulative case datasheet and reconciled against what is recorded in ODIN 2020 at the beginning of each month. Staff and volunteers submit a monthly activity log to the Program Manager who reviews the Ombudsman Monthly Activities. Ombudsman Program Manager also hosts an annual Activity log refresher course during one of our monthly in-service meetings. A volunteer Ombudsman assists and enters staff and volunteer activity log information into ODIN2020 monthly. Ombudsman Program Manager validates and reviews the data that volunteers, and staff Ombudsman enter into the database each month. Ombudsman Program Manager uses the data in ODIN2020 to complete monthly Geo and In-kind reports. Data from ODIN 202 is also used to complete quarterly AAA, City of Salinas and City of Monterey reports.

TITLE VII A ELDER ABUSE PREVENTION
SERVICE UNIT PLAN OBJECTIVES

Units of Service: AAA must complete at least one category from the Units of Service below.

Units of Service categories include public education sessions, training sessions for professionals, training sessions for caregivers served by a Title III E Family Caregiver Support Program, educational materials distributed, and hours of activity spent developing a coordinated system which addresses elder abuse prevention, investigation, and prosecution.

When developing targets for each fiscal year, refer to data reported on the Elder Abuse Prevention Quarterly Activity Reports. Set realistic goals based upon the prior year's numbers and the resources available. Activities reported for the Title VII Elder Abuse Prevention Program must be distinct from activities reported for the LTC Ombudsman Program. No activity can be reported for both programs.

AAAs must provide one or more of the service categories below.

NOTE: The number of sessions refers to the number of presentations and not the number of attendees.

- **Public Education Sessions** – Please indicate the total number of projected education sessions for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Training Sessions for Professionals** – Please indicate the total number of projected training sessions for professionals (service providers, nurses, social workers) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Training Sessions for Caregivers Served by Title III E** – Please indicate the total number of projected training sessions for unpaid family caregivers who are receiving services under Title III E of the Older American's Act (OAA) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation. OAA 302(3) 'Family caregiver' means an adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.
- **Hours Spent Developing a Coordinated System to Respond to Elder Abuse** – Please indicate the number of hours to be spent developing a coordinated system to respond to elder abuse. This category includes time spent coordinating services provided by the AAA or its contracted service provider with services provided by Adult Protective Services, local law enforcement agencies, legal services providers, and other agencies involved in the protection of elder and dependent adults from abuse, neglect, and exploitation.
- **Educational Materials Distributed** – Please indicate the type and number of educational materials to be distributed to the general public, professionals, and caregivers (this may include materials that have been developed by others) to help in the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Number of Individuals Served** – Please indicate the total number of individuals expected to be reached by any of the above activities of this program.

TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

The agency receiving Title VIIA Elder Abuse Prevention funding is: Legal Services for Seniors

Fiscal Year	Total # of Public Education Sessions
2020-2021	25
2021-2022	
2022-2023	
2023-2024	

Fiscal Year	Total # of Training Sessions for Professionals
2020-2021	15
2021-2022	
2022-2023	
2023-2024	

Fiscal Year	Total # of Training Sessions for Caregivers served by Title III E
2020-2021	0
2021-2022	
2022-2023	
2023-2024	

Fiscal Year	Total # of Hours Spent Developing a Coordinated System
2020-2021	0
2021-2022	
2022-2023	
2023-2024	

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2020-2021	0	
2021-2022		
2022-2023		
2023-2024		

Fiscal Year	Total Number of Individuals Served
2020-2021	2,500
2021-2022	
2022-2023	
2023-2024	

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

2020-2024 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 1, 2011 for eligible activities and service unit measures. Specify proposed audience size or units of service for ALL budgeted funds.

Direct and/or Contracted III E Services

CATEGORIES	1	2	3
Family Caregiver Services Caring for Elderly	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Information Services	# of activities and Total est. audience for above		
2020-2021	# of activities: 250 Total est. audience for above: 10,000	3	
2021-2022			
2022-2023			
2023-2024			
Access Assistance	Total contacts		
2020-2021	2,500	3	
2021-2022			
2022-2023			
2023-2024			
Support Services	Total hours		
2020-2021	2,750	3	
2021-2022			
2022-2023			
2023-2024			

Respite Care	Total hours		
2020-2021	1,300	3	
2021-2022			
2022-2023			
2023-2024			
Supplemental Services	Total occurrences		
2020-2021	0		
2021-2022			
2022-2023			
2023-2024			

Direct and/or Contracted III E Services

Grandparent Services Caring for Children	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Information Services	# of activities and Total est. audience for above		
2020-2021	# of activities: 0 Total est. audience for above: 0		
2021-2022	# of activities: 0 Total est. audience for above: 0		
2022-2023	# of activities: 0 Total est. audience for above: 0		
2023-2024	# of activities: 0 Total est. audience for above: 0		
Access Assistance	Total contacts		
2020-2021	0		
2021-2022	0		
2022-2023	0		
2023-2024	0		
Support Services	Total hours		
2020-2021	0		
2021-2022	0		
2022-2023	0		
2023-2024	0		
Respite Care	Total hours		
2020-2021	0		
2021-2022	0		
2022-2023	0		
2023-2024	0		
Supplemental Services	Total occurrences		
2020-2021	0		
2021-2022	0		
2022-2023	0		
2023-2024	0		

**HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP)
SERVICE UNIT PLAN
CCR Article 3, Section 7300(d)**

MULTIPLE PSA HICAPs: If you are a part of a multiple-PSA HICAP where two or more AAAs enter into an agreement with one “Managing AAA,” to deliver HICAP services on their behalf to eligible persons in their AAA, then each AAA is responsible for providing HICAP services in the covered PSAs in a way that is agreed upon and equitable among the participating parties. [\(Does not apply to Monterey County.\)](#)

HICAP PAID LEGAL SERVICES: Complete this section if your Master Contract contains a provision for using HICAP funds to provide HICAP Legal Services. [\(Does not apply to Monterey County.\)](#)

STATE & FEDERAL PERFORMANCE TARGETS: The Administration for Community Living (ACL) establishes targets for the State Health Insurance Assistance Program (SHIP)/HICAP performance measures (PMs). ACL introduced revisions to the SHIP PMs in late 2016 in conjunction with the original funding announcement (ref HHS-2017-ACL-CIP-SAPG-0184) for implementation with the release of the Notice of Award (Grant No. 90SAPG0052-01-01 issued July 2017).

The new five federal PMs generally reflect the former seven PMs (PM 2.1 through PM 2.7), except for PM 2.7, (Total Counseling Hours), which was removed because it is already being captured under the *SHIP Annual Resource Report*. As a part of these changes, ACL eliminated the performance-based funding scoring methodology and replaced it with a Likert scale comparison model for setting National Performance Measure Targets that define the proportional penetration rates needed for improvements.

Using ACL’s approach, CDA HICAP provides State and Federal Performance Measures with goal-oriented targets for each AAA’s Planning and Service Area (PSA). One change to all PMs is the shift to county-level data. In general, the State and Federal Performance Measures include the following:

- PM 1.1 Clients Counseled ~ Number of finalized Intakes for clients/ beneficiaries that received HICAP services
- PM 1.2 Public and Media Events (PAM) ~ Number of completed PAM forms categorized as “interactive” events
- PM 2.1 Client Contacts ~ Percentage of one-on-one interactions with any Medicare beneficiaries
- PM 2.2 PAM Outreach Contacts ~ Percentage of persons reached through events categorized as “interactive”
- PM 2.3 Medicare Beneficiaries Under 65 ~ Percentage of one-on-one interactions with Medicare beneficiaries under the age of 65
- PM 2.4 Hard-to-Reach Contacts ~ Percentage of one-on-one interactions with “hard-to-reach” Medicare beneficiaries designated as:
 - PM 2.4a Low-income (LIS)
 - PM 2.4b Rural
 - PM 2.4c English Second Language (ESL)
- PM 2.5 Enrollment Contacts ~ Percentage of contacts with one or more qualifying enrollment topics discussed

AAA’s should demonstrate progress toward meeting or improving on the Performance requirements established by CDA and ACL as is displayed annually on the *HICAP State and Federal Performance Measures* tool located online at: <https://www.aging.ca.gov/ProgramsProviders/AAA/Planning/>

For current and future planning, CDA requires each AAA ensure that HICAP service units and related federal *Annual Resource Report* data are documented and verified complete/ finalized in CDA’s Statewide HICAP Automated Reporting Program (SHARP) system per the existing contractual reporting requirements. HICAP Service Units do not need to be input in the Area Plan (with the exception of HICAP Paid Legal Services, where applicable).

HICAP Legal Services Units of Service (if applicable)¹⁴

Fiscal Year (FY)	3.1 Estimated Number of Clients Represented Per FY (Unit of Service)	Goal Numbers
2020-2021	0	N/A
2021-2022		
2022-2023		
2023-2024		

Fiscal Year (FY)	3.2 Estimated Number of Legal Representation Hours Per FY (Unit of Service)	Goal Numbers
2020-2021	0	N/A
2021-2022		
2022-2023		
2023-2024		

Fiscal Year (FY)	3.3 Estimated Number of Program Consultation Hours Per FY (Unit of Service)	Goal Numbers
2020-2021	0	N/A
2021-2022		
2022-2023		
2023-2024		

¹⁴ Requires a contract for using HICAP funds to pay for HICAP Legal Services.

Section 11 – Focal Points

PSA 32

COMMUNITY FOCAL POINTS LIST

CCR Title 22, Article 3, Section 7302(a)(14), 45 CFR Section 1321.53(c), OAA 2006 306(a)

In the form below, provide the current list of designated community focal points and their addresses. This information must match the total number of focal points reported in the National Aging Program Information System (NAPIS) State Program Report (SPR), i.e., California Aging Reporting System, NAPISCare, Section III.D.

Designated Community Focal Point	Address
<i>North Monterey County</i>	
Castroville Community Center	11261 Crane Street, Castroville
Prunedale Senior Center	8300 Prunedale Road North, Salinas
<i>South Monterey County</i>	
Leo Meyer Senior Apts. Community Center	415 Queen Street, King City
Los Ositos Senior Apts. Community Center	1083 Elm Avenue, Greenfield
<i>East Monterey County</i>	
Firehouse Community Center	1330 East Alisal Street, Salinas
Sherwood Village Senior Apts. Community Center	920 North Main Street, Salinas
<i>West Monterey County</i>	
Monterey Senior Center	280 Dickman Avenue, Monterey
Oldemeyer Community Center	986 Hilby Avenue, Seaside
Sally Judd Griffin Active Living Center	700 Jewell Avenue, Pacific Grove
Junsay Oaks Senior Apts. Community Center	3098 De Forest Rd., Marina

Section 12 – Disaster Preparedness

PSA 32

Disaster Preparation Planning Conducted for the 2020-2024 Planning Cycle OAA Title III, Sec. 306(a)(17); 310, CCR Title 22, Sections 7529 (a)(4) and 7547, W&I Code Division 8.5, Sections 9625 and 9716, CDA Standard Agreement, Exhibit E, Article 1, 22-25, Program Memo 10-29(P)

- Describe how the AAA coordinates its disaster preparedness plans and activities with local emergency response agencies, relief organizations, state and local governments, and other organizations responsible for emergency preparedness and response as required in OAA, Title III, Section 310:**

The Monterey County Department of Social Services (DSS) administers the AAA and is a vital member of the Monterey County Office of Emergency Services (OES) Response Team. Before a disaster, the AAA assists contracted service providers in the development of agency specific emergency disaster plans when needed. In addition, the AAA verifies that plans are kept current and updated as needed during monitoring visits. The role of the AAA during an emergency or disaster is to work with all service providers (internal and external) in supporting efforts to resume/continue the provision of services for seniors and adults with disabilities. The AAA is also a resource for DSS/OES to connect to other existing services not part of the County network (contracted service providers and other community partners).

- Identify each of the local Office of Emergency Services (OES) contact person(s) within the PSA that the AAA will coordinate with in the event of a disaster (add additional information as needed for each OES within the PSA):**

Name	Title	Telephone	email
Gerry Malais	Emergency Services Mgr.	Office: (831) 796-1901	MalaisG@co.monterey.ca.us

- Identify the Disaster Response Coordinator within the AAA:**

Name	Title	Telephone	email
Kathleen Murray-Phillips	AAA Planner	Office: (831) 796-3530	murrayphillipsk@co.monterey.ca.us

4. List critical services the AAA will continue to provide after a disaster and describe how these services will be delivered:

Critical Services	How Delivered?
All services continue if possible.	Follows established Disaster Plans as long as they are able and have the capacity ¹⁵ .

5. List any agencies with which the AAA has formal emergency preparation or response agreements.

All contracted service providers are required to file Disaster Plans with the AAA and have a staff member designated as their Disaster Preparedness Coordinator. As a part of those plans, all designated staff are listed with emergency contact information.

The AAA offers trainings and technical assistance as needed to all contracted service providers on topics regarding disaster preparedness. Each agency’s disaster preparedness plans are reviewed during scheduled monitoring visits done by AAA staff on a routine basis. Although none of the current contracted service providers are considered first responders, agency disaster plans are designed to ensure that direct services can continue or resume as quickly as possible following a disaster.

6. Describe how the AAA will:

- **Identify vulnerable populations.**

Depending on the nature of the emergency, the AAA is uniquely positioned to compliment coordination of services for all seniors and adults with disabilities. Open communication with the Ombudsman, Adult Protective Services, and In-Home Supportive Services Programs will help to establish those most vulnerable and provide safety net services when needed through the Office of Emergency Services (OES).

Additionally, during a disaster, the AAA will work with contract agencies to identify vulnerable residents in the affected area and provide the information to OES. This is especially important for homebound residents such as those receiving home delivered meals and some congregate meal participants where services are provided at community centers within apartment complexes.

- **Follow-up with these vulnerable populations after a disaster event.**

Once regular services have resumed for seniors and adults with disabilities, information and assistance services can be expanded on a temporary basis to provide follow up and referrals for affected seniors.

¹⁵ Depending on the type and breadth of a disaster, emergency services supported through a network of local, county and state agencies and partners are provided in accordance with mandates and established protocols.

Section 13 – Priority Services

PSA 32

2020-2024 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 funds¹⁶ 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 2020-2021 through FY 2023-2024

Access:

Transportation, Assisted Transportation, Case Management, Information and Assistance, Outreach, Comprehensive Assessment, Health, Mental Health, and Public Information

2020-2021 **30%** 2021-2022 **30%** 2022-2023 **30%** 2023-2024 **30%**

In-Home Services:

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

2020-2021 **0%** 2021-2022 **0%** 2022-2023 **0%** 2023-2024 **0%**

Legal Assistance Required Activities:¹⁷

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

2020-2021 **25%** 2021-2022 **25%** 2022-2023 **25%** 2023-2024 **25%**

Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA.³²

The percentages remain the same as the 2016-2020 Area Plan and have been confirmed by the AAA, AAA Advisory Council, and through a public hearing.

¹⁶ Minimum percentages of applicable funds are calculated on the annual Title III B baseline allocation, minus Title III B administration and minus Ombudsman. At least one percent of the final Title III B calculation must be allocated for each “Priority Service” category or a waiver must be requested for the Priority Service category(s) that the AAA does not intend to fund.

¹⁷ Legal Assistance must include all of the following activities: Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar.

Section 14 – Notice of Intent to Provide Direct Services¹⁸ PSA 32

CCR Article 3, Section 7320 (a)(b) and 42 USC Section 3027(a)(8)(C)

If an AAA plans to directly provide any of the following services, it is required to provide a description of the methods that will be used to assure that target populations throughout the PSA will be served.

Check if not providing any of the below listed direct services.

Check applicable direct services

Check each applicable Fiscal Year

	20-21	21-22	22-23	23-24
Title III B				
<input checked="" type="checkbox"/> Information and Assistance	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Case Management	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Outreach	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
<input type="checkbox"/> Program Development	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Coordination	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Long Term Care Ombudsman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title III D	20-21	21-22	22-23	23-24
<input checked="" type="checkbox"/> Disease Prevention and Health Promo.	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
Title III E ¹⁹	20-21	21-22	22-23	23-24
<input type="checkbox"/> Information Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Access Assistance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Support Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Respite Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Supplemental Services	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title VII A	20-21	21-22	22-23	23-24
<input type="checkbox"/> Long Term Care Ombudsman	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Title VIIB	20-21	21-22	22-23	23-24
<input type="checkbox"/> Prevention of Elder Abuse, Neglect and Exploitation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Describe the methods to be used to ensure target populations will be served throughout PSA 32.

The AAA’s toll-free number for the Senior Helpline serves the entire County and is intensely promoted in all publications, yellow pages, web page, emails, promotional giveaways, and community events. That number is answered by staff of the Information, Referral, & Assistance Program that is operated by the Monterey County Department of Social Services (the same administrators as the AAA).

In some instances, the AAA is better positioned to provide outreach and health prevention classes (especially when there are time constraints and opportunities to partner). All activities are always designed to reach the target population and provide another approach to reach the most isolated and needy seniors in Monterey County communities.

¹⁸ No changes from 2021-2022 Area Plan Update.

¹⁹ Refer to PM 11-11 for definitions of Title III E categories.

Section 15 – Request of Approval to Provide Direct Services

PSA 32

Older American’s 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: **Community Education**

Check applicable funding source:²⁰

- III B
- III C-1
- III C-2
- Nutrition Education
- III E
- VII A
- HICAP

Request for Approval Justification:

- 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.

- 2020-2021 2021-2022 2022-2023 2023-20

Provide: documentation below that substantiates this request for direct delivery of the above stated service.²¹ :

PSA 32 is best suited to partner with other organizations as opportunities become available with little to no notice. This type of flexibility is lost when sub-contracting for services that must be detailed in annual written agreements that are cumbersome to change and

²⁰ Section 15 does not apply to Title V (SCSEP).

²¹ For a HICAP direct services waiver, the managing AAA of HICAP services must document that all affected AAAs are in agreement.

impossible to change quickly.

Section 15a – Request of Approval to Provide Direct Services

PSA 32

Older American’s 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: **Transportation (Access)**

Check applicable funding source.

- III B
- III C-1
- III C-2
- Nutrition Education
- III E
- VII A
- HICAP

Request for Approval Justification:

- 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.

- 2020-2021 2021-2022 2022-2023 2023-20

Provide: documentation below that substantiates this request for direct delivery of the above stated service:

PSA 32 has experience in providing and distributing bus passes for seniors. This has been an excellent way to work with community partners to reach the more vulnerable and needy older adults in our communities. Transportation for our target population is always one of the top priority needs affirmed in the AAA’s 2019 Needs Assessment.

Section 15b – Request of Approval to Provide Direct Services

PSA 32

Older American's 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: **Public Information**

Check applicable funding source:

- III B
- III C-1
- III C-2
- Nutrition Education
- III E
- VII A
- HICAP

Request for Approval Justification:

- 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.

- 2020-2021
- 2021-2022
- 2022-2023
- 2023-20

Provide: documentation below that substantiates this request for direct delivery of the above stated service:

PSA 32 conducts a variety of public hearings, meetings, trainings, events, and more. Unfortunately, public participation is not automatic, and the AAA has piloted methods to improve communications with the general public. There has been some success with paid advertising, Facebook, mailings, and partnering with other agencies. A variety of efforts will continue to promote public engagement opportunities.

Section 16 – Governing Board

PSA 32

GOVERNING BOARD MEMBERSHIP

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

Total Number of Board Members: 5

Monterey County Board of Supervisors

Name and Title of Officers and Members:

Office Term Expires:

Name and Title of Officers and Members:	Office Term Expires:
Luis Alejo, District 1 Supervisor	2021
John Phillips, District 2 Supervisor	2023
Chris Lopez – Chair, District 3 Supervisor	2023
Jane Parker, District 4 Supervisor	2021
Mary Adams, District 5 Supervisor	2021

Explain any expiring terms – have they been replaced, renewed, or other?

All positions noted above are elected positions with four (4) year terms.

Section 17 – Advisory Council

PSA 32

ADVISORY COUNCIL MEMBERSHIP

OAA 2006 306 (a)(6)(D) 45 CFR, Section 1321.57
CCR Article 3, Section 7302(a)(12)

Total Council Membership (include vacancies) 15 positions

Number of Council Members over age 60 12

Race/Ethnic Composition	<u>% of PSA 65+Population²²</u>	<u>% on Advisory Council</u>
White	<u>80%</u>	<u>60%</u>
Hispanic/Latino	<u>0% (see note below)</u>	<u>20%</u>
Black	<u>2.5%</u>	<u>6.5%</u>
Asian/Pacific Islander	<u>9.5%</u>	<u>6.5%</u>
Native American/Alaskan Native	<u>1%</u>	<u>0%</u>
Other Alone and Two or More Races	<u>7%</u>	<u>6.5%</u>

NOTE: Hispanic is not a race category used in the U.S. Census or American Community Survey Race Categories. Instead, there is a separate tracking of Hispanic (Latino) and Non-Hispanic (Non-Latino) populations. In Monterey County, estimates for Seniors 65+: 27% Hispanic (Latino) and 73% Non-Hispanic (Non-Latino)

Name and Title of Officers: **Office Term Expires:**

Richard Kuehn, CHAIR, 5 th District Appointment; Executive Committee, Triple-A Council of California Committee	01-01-2022
Aimee Cuda, VICE-CHAIR, At Large Appointment; Planning, Evaluation & Allocation Committee Chair; Executive Committee	01-01-2023

Name and Title of other members: **Office Term Expires:**

Emile Mangompit, 1 st District Appointment; Planning, Evaluation & Allocation Committee	01-01-2023
Tom Shields, 2 nd District Appointment; Legislation & Advocacy Committee; Planning, Evaluation & Allocation Committee; Executive Committee	01-01-2023
Jose Vasquez, Vice Chair, 3 rd District Appointment; Executive Committee	01-01-2022
Howard Scherr, 4 th District Appointment	01-01-2023
Jessica McKillip, At Large Appointment; Legislation & Advocacy Committee Chair; Executive Committee	01-01-2022
Doris Beckman, At Large Appointment; Legislation & Advocacy Committee	01-01-2021
Linda Cortez, At Large Appointment; Planning, Evaluation & Allocation Committee	01-01-2021

²² U.S. Census, American Community Survey 2012-2016, 5 Year Tables B17001 through B17001I.

Margaret Polanco, At Large Appointment; Evaluation & Allocation Committee	01-01-2021
Luana Conley, At Large Appointment; Planning, Evaluation & Allocation Committee	01-01-2021
John Greathouse, At Large Appointment; Planning, Evaluation & Allocation Committee	01-01-2022
William Little, At Large Appointment; Legislation & Advocacy Committee	01-01-2022
Bobbie Blakeney, At Large Appointment; Legislation & Advocacy Committee	01-01-2023
Chris Alexander-Ahuja, At Large Appointment	01-01-2023

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

	Yes	No
Low Income Representative	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Disabled Representative	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Supportive Services Provider Representative	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Health Care Provider Representative	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Family Caregiver Representative	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Local Elected Officials	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Individuals with Leadership Experience in Private and Voluntary Sectors	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Explain any "No" answer(s):

Currently, there are no members that are also serving in an elected official capacity for a local jurisdiction.

Explain any expiring terms – have they been replaced, renewed, or other?

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

Each member of the Board of Supervisors (there are five members) appoints one resident from their District to the AAA Advisory Council. The Council recommends ten (10) Community-at-Large Representatives to the Board of Supervisors for appointment. Each member serves a three-year term or completes a term for someone that has left the Council.

Section 18 – Legal Assistance

PSA 32

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.²³

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

To provide leadership in addressing issues that relate to older Monterey County residents; to develop community-based systems of care that provide services which support independence, and which protect the quality of life of older persons and persons with functional impairments; and to promote citizen involvement in the planning and delivery of services.

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

No less than 25% of Title III B funds.

3. 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).

Each year there is an increase in the number of requests for legal services. The most common request for assistance involves issues around rental housing and mortgages. A high priority concern is the increasing prevalence in the financial abuse of seniors and requests to remedy such cases. There have been no significant increases in available funding in the past few years and rising costs have resulted in service cutbacks.

4. Specific to Legal Services, does the AAA’s contract/agreement with the Legal Service Provider(s) (LSPs) specify that the LSPs are expected to use the California Statewide Guidelines in the provision of OAA legal services?

Yes, and the agreement specifically states that services shall be provided in accordance with all required regulations.

5. Does the AAA collaborate with the Legal Service Providers(s) to jointly establish specific priorities issues for legal services? If so, what are the top four (4) priority legal issues in your PSA?

No specific legal priorities set between AAA and LSP.

²³ For Information related to Legal Services, contact Chisorom Okwuosa at (916) 419-7500 or COkwuosa@aging.ca.gov

6. Specific to Legal Services, does the AAA collaborate with the Legal Services Providers(s) to jointly identify the target population? If so, what is the targeted senior population in your PSA AND what mechanism is used for reaching the target population?

The targeted senior population for legal services is not jointly identified but is the same as for all services offered through the AAA in accordance with the Older Americans Act. The contract agreement specifically states priority be given to those in greatest social and economic need, with particular attention to serving low-income minority individuals, older individuals with limited English proficiency and older individuals residing in rural areas. Provisions also include those with:

- Physical and mental disabilities.
- Isolation caused by cultural, racial or ethnic status.
- Social or geographic isolation.
- Older Native Americans.
- Isolated, abused, neglected and or exploited older individuals.
- Frail older individuals.
- Older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction and their caregivers.
- Older individuals with disabilities.
- Caregivers as defined in Title III E.
- Lesbian, Gay, Bisexual, and Transgender Seniors.

The contractor uses a variety of approaches to reach all eligible participants across the County. They have two offices (Seaside and Salinas). For seniors with mobility and travel issues, weekly client-confidential outreach appointments are held in the rural parts of the County (King City, Greenfield, Soledad, Gonzales); Salinas outreach (apart from office location); the Monterey Peninsula (Carmel Valley, Carmel, Monterey and Pacific Grove). Many of these sites are located at County Libraries locations. In addition:

- Outreach is provided at events in several locations each year.
- Website and Facebook presence.
- Paid advertising in both English and Spanish media.
- Translated brochures and flyers.
- Partnerships with other organizations that provide:
 - LSS printed materials in lobbies, bulletin boards, and more.
 - Direct referrals to needy clients.
- Presentations at civic groups, professional associations, and others.

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

As stated in 6. above, the targeted senior population is the same for all services and the AAA has a separate contract for the provision of Outreach services at a wide variety of community events. Also, the AAA’s Information, Referral and Assistance Program (IRA) provides referrals to AAA funded programs on a daily basis to qualified callers.

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

Fiscal Year	# of Legal Assistance Services Providers²⁴
2020-2021	1
2021-2022	
2022-2023	
2023-2024	

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

Not specifically a hotline, but the Information, Referral & Assistance Program does have a toll-free number and helps to refer calls for legal services.

Monterey County also has a 2-1-1 service to help residents by providing referrals to health, community, and social services. This bilingual (English and Spanish) telephone referral service operates 24 hours a day, 365 days a year, and has a second option for internet users with an extensive website.

Both services commonly refer such calls from seniors to the AAA contracted service provider, Legal Services for Seniors.

10. What methods of outreach are Legal Services providers using? Discuss:

Also mentioned in 6. above.

LSP uses a variety of approaches including flyers, press releases, website, Facebook, tables at community events, and connections to many community groups.

Outreach Sites

²⁴ Only one legal assistance service provider is currently under contract with the AAA and that is expected to continue. There are other free legal assistance providers in Monterey County that are not under contract and include: California Rural Legal Assistance, Monterey County Superior Court Self Help Center, Monterey County Bar Association, and the Conflict Mediation & Resolution Center of Monterey County.

Services are provided at outreach sites because of partnerships with local senior centers, libraries, and other community-based organizations. Partner agencies provide information to their customers in a variety of ways including in-person, postings, newsletters, bulletin boards. Days and hours of services at these outreach sites are consistent and offered weekly or biweekly. This physical presence provides coverage of services throughout the county including rural locations:

- **South County:**
 - King City
 - Greenfield
 - Soledad
 - Gonzales
- **West County:**
 - Monterey
 - Pacific Grove
 - Carmel
 - Carmel Valley
- **North County:**
 - Castroville
 - Prunedale

Office Locations

Outreach and legal services are provided at two permanent office locations in Salinas and Seaside.

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

Fiscal Year	Name of Provider	Geographic Region covered
2020-2021	Legal Services for Seniors	All
2021-2022		
2022-2023		
2023-2024		

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

They may call, visit one of the offices, and/or make an appointment to meet a representative at one of the community meeting places (library, senior center). They are screened and intake forms are completed. Each case is reviewed for possible action and next steps. Very few cases are referred out for other follow up.

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

Common cases include: probate guardianships (custody of minor grandchildren, etc.); Limited Conservatorships over adult disabled children, landlord/tenant issues; collections, bill payments; denial of benefits under medical, life and other insurance; representation of clients when dealing with large government agencies (Social Security); private pension problems; Wills, Advance Health Care Directives, Springing Financial Powers of Attorney; and consumer debt collections problems.

Although not a new issue, the financial exploitation of seniors has come to light in Monterey County and more assistance is available to prevent and stop that type of abuse.

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

No changes over this reporting period.

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

Reduced funding for this service over the past ten years compounded by rising costs has resulted in fewer attorney hours available. Intensified screening by volunteer college interns has helped to streamline services, but fewer seniors and resulting cases can be managed.

Monterey County is challenged by a large, difficult geographic area to provide services. Much of the county is very rural in nature with public transportation not always adequate to help clients travel to receive services. Although technology has helped to modernize access, affordable transportation is needed by the clients served.

Many of the residents are non-English speaking and there is not always someone available to translate. Spanish language is easier to accommodate, but certain dialects and other languages pose challenges. Access to language lines help to solve the problem in an office setting, but they can be an expensive service and do not work well at community events.

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

- LSP works with all other AAA Service Providers and other agencies when needed. The LSP is a regular member of the Service Provider Network and attends meetings. In addition, LSP representative will participate on Committees from time to time.

Section 19 – Multipurpose Senior Center Acquisition or Construction Compliance Review²⁵

PSA 32

CCR Title 22, Article 3, Section 7302(a)(15)
20-year tracking requirement

No. Title III B funds not used for Acquisition or Construction.

Yes. Title III B funds used for Acquisition or Construction. **Complete the chart below.**

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

²⁵ Acquisition is defined as obtaining ownership of an existing facility (in fee simple or by lease for 10 years or more) for use as a Multipurpose Senior Center.

Section 20 – Title III E Family Caregiver Support Program

PSA 32

Notice of Intent for Non-Provision of FCSP Multifaceted Systems of Support Services Older American’s Act Section 373(a) and (b)

2020 – 2024 Four-Year Planning Cycle

Based on PSA review of current support needs and services for **family caregivers** and **grandparents** (or other older relative of a child), indicate what services the AAA **intends** to provide using Title III E and/or matching FCSP funds for both family caregivers and grandparents/older relative caregivers.

Check YES or NO for each of the services²⁶ identified below and indicate if the service will be provided directly or contracted. Check only the current year and leave the previous year information intact.

If the AAA will **not** provide a service, a justification for each service is required in the space below.

Family Caregiver Services

Category	2020 - 2021	2021 - 2022	2022 - 2023	2023 - 2024
Family Caregiver Information Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Family Caregiver Access Assistance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Family Caregiver Support Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Family Caregiver Respite Care	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input checked="" type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Family Caregiver Supplemental Services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract

Grandparent Services

Category	2020 - 2021	2021 - 2022	2022 - 2023	2023 - 2024
Grandparent Information Services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Grandparent Access Assistance	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Grandparent Support Services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Grandparent Respite Care	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract
Grandparent Supplemental Services	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Direct <input type="checkbox"/> Contract

²⁶ Refer to PM 11-11 for definitions for the above Title III E categories.

Justification: For each service category checked “no”, explain how it is being addressed within the PSA. The justification must include the following:

- Provider name and address of agency
- Description of the service
- Where the service be provided (entire PSA, certain counties, etc.)
- Information that influenced the decision not to provide the service (research, feedback from needs assessment, survey of senior population in PSA, etc.)
- How the AAA ensures the service continues to be provided in the PSA without the use of Title III E funds

Family Caregiver Services for the Elderly: Supplemental Services is not being funded with III E funds because of lack of providers. During the last outreach effort to attract providers (Request for Proposal formal process), the AAA received only one bid under this funding category. A pilot project was funded for two years to provide caregivers with assistive devices; however, the services were rarely accessed. After extensive outreach resulting in very few clients, it was decided not to continue the service.

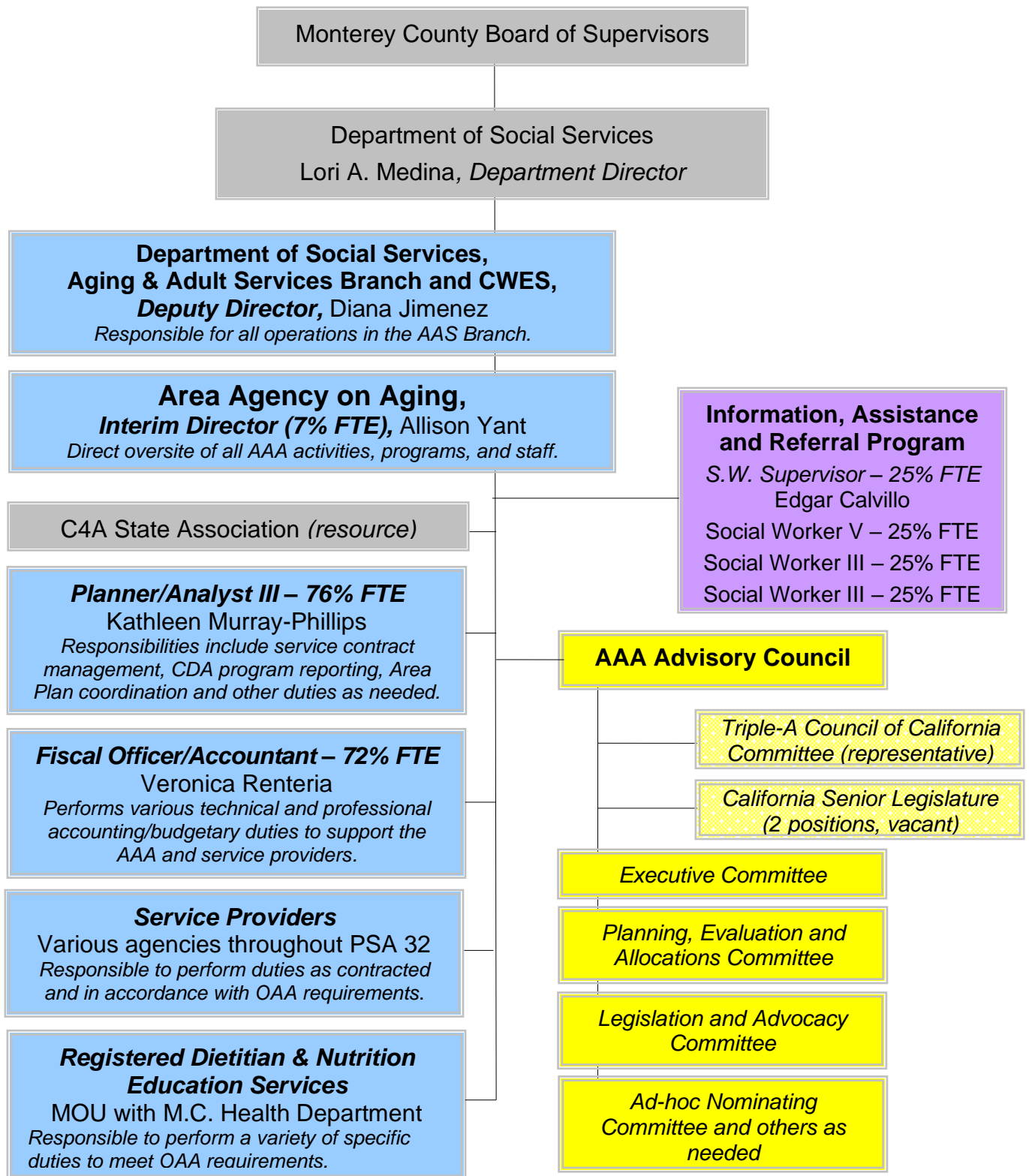
The next Request for Proposal is scheduled for July 1, 2021 and efforts will be made again to find new service providers. It is projected that no new contractors will step forward to provide supplemental services for caregivers.

Grandparent Services Caring for Children: The following grandparent services will not be funded; Support Services, Respite Care, Supplemental Services, and Information Services. These services will continue to be provided by Seneca Residential and Day Treatment Center for Children, 124 River Road, Salinas, California. Seneca is a statewide nonprofit organization and supports grandparents raising grandchildren in a variety of ways. Services include case management; counseling and intervention therapy; crisis stabilization; and wraparound support. Seneca will provide services throughout the PSA and there is no need for the AAA to provide funding.

Section 21 – Organizational Chart

PSA 32

Monterey County AAA (PSA 32) Organizational Chart



Section 22 – Assurances

PSA 32

Pursuant to the Older Americans Act Reauthorization Act of 2016, (OAA), the Area Agency on Aging assures that it will:

A. Assurances

1. OAA 306(a)(2)

Provide an adequate proportion, as required under Older Americans Act Reauthorization Act of 2016 Section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services—

- (A) services associated with access to services (transportation, health services (including mental health services) outreach, information and assistance, (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible) and case management services);
- (B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer’s disease and related disorders with neurological and organic brain dysfunction; and
- (C) legal assistance; and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded;

2. OAA 306(a)(4)(A)(i)(I-II)

(I) provide assurances that the area agency on aging will -

(aa) set specific objectives, consistent with State policy, for providing services to older individuals with greatest economic need, older individuals with greatest social need, and older individuals at risk for institutional placement;

(bb) include specific objectives for providing services to low-income minority older individuals, older individuals with limited English proficiency, and older individuals residing in rural areas; and;

(II) include proposed methods to achieve the objectives described in (aa) and (bb) of subclause (I);

3. OAA 306(a)(4)(A)(ii)

Include in each agreement made with a provider of any service under this title, a requirement that such provider will—

(I) specify how the provider intends to satisfy the service needs of low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in the area served by the provider;

(II) to the maximum extent feasible, provide services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas in accordance with their need for such services; and

(III) meet specific objectives established by the area agency on aging, for providing services to low-income minority individuals, older individuals with limited English proficiency, and older individuals residing in rural areas within the planning and service area;

4. OAA 306(a)(4)(A)(iii)

With respect to the fiscal year preceding the fiscal year for which such plan is prepared—

- (I) identify the number of low-income minority older individuals in the planning and service area;
- (II) describe the methods used to satisfy the service needs of such minority older individuals;
- and
- (III) provide information on the extent to which the area agency on aging met the objectives described in assurance number 2.

5. OAA 306(a)(4)(B)

Use outreach efforts that —

- (i) identify individuals eligible for assistance under this Act, with special emphasis on—
 - (I) older individuals residing in rural areas;
 - (II) older individuals with greatest economic need (with particular attention to low- income minority individuals and older individuals residing in rural areas);
 - (III) older individuals with greatest social need (with particular attention to low- income minority individuals and older individuals residing in rural areas);
 - (IV) older individuals with severe disabilities;
 - (V) older individuals with limited English proficiency;
 - (VI) older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
 - (VII) older individuals at risk for institutional placement; and
- (ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance;

6. OAA 306(a)(4)(C)

Contain an assurance that the Area Agency on Aging will ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas;

7. OAA 306(a)(5)

Provide assurances that the Area Agency on Aging will coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement with agencies that develop or provide services for individuals with disabilities;

8. OAA 306(a)(9)

Provide assurances that the Area Agency on Aging will carry out the State Long-Term Care Ombudsman program under 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title;

9. OAA 306(a)(11)

Provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as “older Native Americans”), including—
(A) information concerning whether there is a significant population of older Native

Americans in the planning and service area and if so, the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

- (B) An assurance that the Area Agency on Aging will to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and
- (C) An assurance that the Area Agency on Aging will make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

10. OAA 306(a)(13)(A-E)

- (A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;
- (B) disclose to the Assistant Secretary and the State agency—
 - (i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
 - (ii) the nature of such contract or such relationship;
- (C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contract or such relationship;
- (D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contract or such relationship; and
- (E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals;

11. 306(a)(14)

Provide assurances that preference in receiving services under this Title shall not be given to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title;

12. 306(a)(15)

Provide assurances that funds received under this title will be used—

- (A) to provide benefits and services to older individuals, giving priority to older individuals identified in Older Americans Act Reauthorization Act of 2016, Section 306(a)(4)(A)(i); and
- (B) in compliance with the assurances specified in Older Americans Act Reauthorization act of 2016, Section 306(a)(13) and the limitations specified in Older Americans Act Reauthorization Act of 2016, Section 212;

13: OAA 305(c)(5)

In the case of a State specified in subsection (b)(5), the State agency; and shall provide assurance, determined adequate by the State agency, that the area agency on aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

14. OAA 307(a)(7)(B)

- (i) no individual (appointed or otherwise) involved in the designation of the State agency or an area

agency on aging, or in the designation of the head of any subdivision of the State agency or of an area agency on aging, is subject to a conflict of interest prohibited under this Act;

(ii) no officer, employee, or other representative of the State agency or an area agency on aging is subject to a conflict of interest prohibited under this Act; and

(iii) mechanisms are in place to identify and remove conflicts of interest prohibited under this Act.

15. OAA 307(a)(11)(A)

(i) enter into contracts with providers of legal assistance, which can demonstrate the experience or capacity to deliver legal assistance;

(ii) include in any such contract provisions to assure that any recipient of funds under division (i) will be subject to specific restrictions and regulations promulgated under the Legal Services Corporation Act (other than restrictions and regulations governing eligibility for legal assistance under such Act and governing membership of local governing boards) as determined appropriate by the Assistant Secretary; and

(iii) attempt to involve the private bar in legal assistance activities authorized under this title, including groups within the private bar furnishing services to older individuals on a pro bono and reduced fee basis.

16. OAA 307(a)(11)(B)

That no legal assistance will be furnished unless the grantee administers a program designed to provide legal assistance to older individuals with social or economic need and has agreed, if the grantee is not a Legal Services Corporation project grantee, to coordinate its services with existing Legal Services Corporation projects in the planning and service area in order to concentrate the use of funds provided under this title on individuals with the greatest such need; and the area agency on aging makes a finding, after assessment, pursuant to standards for service promulgated by the Assistant Secretary, that any grantee selected is the entity best able to provide the particular services.

17. OAA 307(a)(11)(D)

To the extent practicable, that legal assistance furnished under the plan will be in addition to any legal assistance for older individuals being furnished with funds from sources other than this Act and that reasonable efforts will be made to maintain existing levels of legal assistance for older individuals; and

18. OAA 307(a)(11)(E)

Give priority to legal assistance related to income, health care, long-term care, nutrition, housing, utilities, protective services, defense of guardianship, abuse, neglect, and age discrimination.

19. OAA 307(a)(12)(A)

In carrying out such services conduct a program consistent with relevant State law and coordinated with existing State adult protective service activities for -

(i) public education to identify and prevent abuse of older individuals;

(ii) receipt of reports of abuse of older individuals;

(iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and

(iv) referral of complaints to law enforcement or public protective service agencies where appropriate.

20. OAA 307(a)(15)

If a substantial number of the older individuals residing in any planning and service area in the State are of limited English-speaking ability, then the State will require the area agency on aging for each such planning and service area -

(A) To utilize in the delivery of outreach services under Section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability.

(B) To designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include:

- (i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and
- (ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effective linguistic and cultural differences.

21. OAA 307(a)(18)

Conduct efforts to facilitate the coordination of community-based, long-term care services, pursuant to Section 306(a)(7), for older individuals who -

(A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;

(B) are patients in hospitals and are at risk of prolonged institutionalization; or

(C) are patients in long-term care facilities, but who can return to their homes if community-based services are provided to them.

22. OAA 307(a)(26)

That funds received under this title will not be used to pay any part of a cost (including an administrative cost) incurred by the State agency, or an area agency on aging, to carry out a contract or commercial relationship that is not carried out to implement this title.

23. OAA 307(a)(27)

Provide, to the extent feasible, for the furnishing of services under this Act, consistent with self-directed care.

B. Code of Federal Regulations (CFR), Title 45 Requirements:

24. CFR [1321.53(a)(b)]

(a) The Older Americans Act intends that the area agency on aging shall be the leader relative to all aging issues on behalf of all older persons in the planning and service area. This means that the area agency shall proactively carry out, under the leadership and direction of the State agency, a wide range of functions related to advocacy, planning, coordination, interagency linkages, information sharing, brokering, monitoring and evaluation, designed to lead to the development or enhancement of comprehensive and coordinated community based systems in, or serving, each community in the Planning and Service Area. These systems shall be designed to assist older persons in leading independent, meaningful and dignified lives in their own homes and communities as long as possible.

(b) A comprehensive and coordinated community-based system described in paragraph (a) of this section shall:

- (1) Have a visible focal point of contact where anyone can go or call for help, information or referral on any aging issue;
- (2) Provide a range of options;
- (3) Assure that these options are readily accessible to all older persons: The independent, semi-dependent and totally dependent, no matter what their income;
- (4) Include a commitment of public, private, voluntary and personal resources committed to supporting the system;
- (5) Involve collaborative decision-making among public, private, voluntary, religious and fraternal organizations and older people in the community;
- (6) Offer special help or targeted resources for the most vulnerable older persons, those in danger of losing their independence;
- (7) Provide effective referral from agency to agency to assure that information or assistance is received, no matter how or where contact is made in the community;
- (8) Evidence sufficient flexibility to respond with appropriate individualized assistance, especially for the vulnerable older person;
- (9) Have a unique character which is tailored to the specific nature of the community;
- (10) Be directed by leaders in the community who have the respect, capacity and authority necessary to convene all interested individuals, assess needs, design solutions, track overall success, stimulate change and plan community responses for the present and for the future.

25. CFR [1321.53(c)]

The resources made available to the area agency on aging under the Older Americans Act are to be used to finance those activities necessary to achieve elements of a community based system set forth in paragraph (b) of this section.

26. CFR [1321.53(c)]

Work with elected community officials in the planning and service area to designate one or more focal points on aging in each community, as appropriate.

27. CFR [1321.53(c)]

Assure access from designated focal points to services financed under the Older Americans Act.

CFR [1321.53(c)]

Work with, or work to assure that community leadership works with, other applicable agencies and institutions in the community to achieve maximum collocation at, coordination with or access to other services and opportunities for the elderly from the designated community focal points.

28. CFR [1321.61(b)(4)]

Consult with and support the State's long-term care ombudsman program.

29. CFR [1321.61(d)]

No requirement in this section shall be deemed to supersede a prohibition contained in the Federal appropriation on the use of Federal funds to lobby the Congress; or the lobbying provision applicable to private nonprofit agencies and organizations contained in OMB Circular A-122.

30. CFR [1321.69(a)]

Persons age 60 and older who are frail, homebound by reason of illness or incapacitating disability, or otherwise isolated, shall be given priority in the delivery of services under this part.

