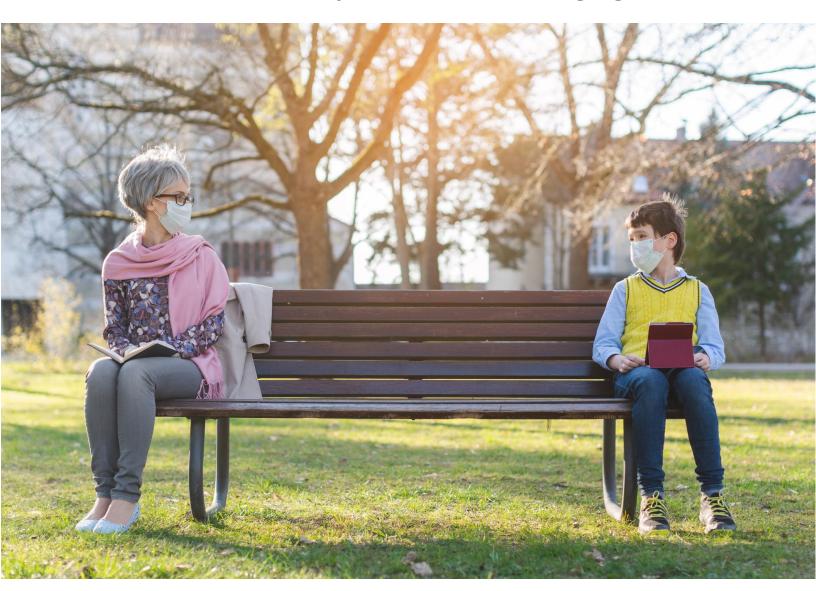
Monterey County Area Agency on Aging 2021-2022 Area Plan Update



"Assistance, Advocacy and Answers on Aging"



Closing the distance on services for older adults, information on population growth, and planning for priority needs.

Table of Contents

PSA 32

	Page
Area Plan Update Checklist	2
Transmittal Letter	3
Section 2. Estimate of the number of lower income minority olde	er
individuals in the PSA for the coming year	4
Section 7. Public Hearings	6
Section 10. Service Unit Plan (SUP) Objectives	8
Section 10. LTC Ombudsman Program Outcomes	12
Section 10. Title VIIA Elder Abuse Prevention Objectives	22
Section 10. III E Service Unit Plan	24
Section 10. HICAP Service Unit Plan	27
Section 16 Governing Board	29
Section 17. Advisory Council	
Section 18. Legal Assistance	32

Note: This is an update to the 2020-2024 Area Plan that is posted on the AAA website. Take the link below to review:

www.co.monterey.ca.us/government/departments-i-z/social-services/area-agency-on-aging/area-plan#aaa

This draft version of the 2021-2022 Area Plan Update does not include all sections and only provides changes and/or new information to be added to the 2020-2024 Area Plan. This version has been prepared by AAA staff through May 21, 2021 and includes input and approval by the Monterey County Area Agency on Aging Advisory Council.

Area Plan Update Checklist

FY 2021-2022 for PSA 32

Section	2020-2024 4-Year Area Plan Required Components	4-Year Plan
	Transmittal Letter — must have original, ink signatures or official signature stamps — no photocopies	\boxtimes
		\boxtimes
2	Estimate of the number of lower income minority older individuals in the PSA for the coming year	
7	Public Hearings	
10	Service Unit Plan (SUP) Objectives and Long-Term Care Ombudsman Outcomes	
16	Governing Board	
17	Advisory Council	
18	Legal Assistance	

Transmittal Letter

2021-2022 Area Plan Update

AAA Name: Monterey County Area Agency on Aging PSA 32

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.Wendy Root Askew	
Signature: Governing Board Chair ¹	 Date
2. Richard Kuehn	
Signature: Advisory Council Chair	Date
3. Diana Jimenez	
Signature: AAA Director	Date

¹ Original signatures or official signature stamps are required.

Section 2 – Estimate of the Number of Lower Income Minority Older Individuals in the PSA

PSA 32

The most recent estimate of total population of older adults in Monterey County:

2019 Older Population in Monterey County by Age Group ²							
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	23,406	5.40%	11,768	2.72%	11,638	2.69%	
65-69	19,767	4.56%	9,568	2.21%	10,199	2.35%	
70-79	26,194	6.05%	12,507	2.89%	13,687	3.16%	
80 & up	14,706	3.39%	5,590	1.29%	9,116	2.10%	
Total 60+	84,073	19.41%	39,433	9.10%	44,640	10.30%	
Total 65+	60,667	14.00%	27,665	6.39%	33,002	7.62%	

The 60+ population grew by 5,960 (more than 7%) since 2018 estimates. In addition, there continues to be declines in some other age categories creating a shift of the average age of residents. Currently, 19.41% of all Monterey County residents are 60+ compared to 14.9% reported in 2010^3 .

Information on Lower Income Minorities for Older Adults 65+ Living in Monterey County⁴

	White	Black	Native American /Alaskan	Asian	Pacific Islander	SOME OTHER RACE ALONE	TWO OR MORE RACES
65+ Total Estimate	41,138	1,298	334	4,928	364	9,355	1,294
% of Total Senior Population	70%	2.2%	.6%	8.4%	.6%	15.9%	2.2%
% of Total Living in Poverty	6.2%	8.1%	19.2%	8.8%	14.6%	19.3%	8.9%

² According to U.S. Census and American Community Survey reporting for 2019, table S0101.

4

³ According to U.S. Census and American Community Survey reporting for 2010, table S0101.

⁴ American Community Survey reporting for 2019, tables B17001 through B17001G.

Significant changes from prior year (2018) estimates⁵:

- Highest one-year increase in the senior population in 10 years.
- Population growth in all racial groups except Native Americans.
- Large growth in population group for "Two or More Races" (38% increase).
- More than double the number of seniors reported in population group for "Some Other Race Alone" (117% increase).
- All racial categories for older adults combined show an increase in poverty to 5,119 in 2019 compared to 4,770 in 2016.
- However, minority seniors in poverty decreased to 1,421 in 2019 compared to 2,577 in 2016.

Projections for 2021

New 2020 U.S. Census information will be available for next year's Area Plan Update and it is expected that population will continue to increase.

⁵ According to AAA Area Plans and Area Plan Updates previously released.

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 2021-2022 Planning Period

				_	
Fiscal Year	Date	Location	Number of Attendees	Presented in languages other than English? ⁶ Yes or No	Was hearing held at a Long Term Care Facility? ⁷ Yes or No
2020-2021	April 29, 2021	Monterey County AAA Advisory Council Meeting, On line meeting via ZOOM	14	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:

⁶ A translator is not required unless the AAA determines a significant number of attendees require translation services.

⁷ 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, however no comments or questions were discussed regarding the setting of the adequate proportion.

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

AAA Staff gave everyone the opportunity to ask questions and make comments. One Council member had attended the webinar hosted by California Department of Aging (CDA) earlier in the day outlining the State's AAA Area Plan. A question was asked about how the State rolls our local AAA Area Plan into the statewide version. AAA staff shared that all the numbers for projected services are included in the State's version before submitting to the Federal Administration for Community Living. Although the local narrative is not specifically included, CDA staff does include statewide service needs and trends.

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

Minor changes were made to the Area Plan Update as a result of input received by members of the Advisory Council submitted via email before the actual meeting (grammar, punctuation, phrasing).

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 <u>not</u> defined in NAPIS, refer to the <u>Service Categories and Data Dictionary and the National Ombudsman Reporting System (NORS) Instructions.</u>

Report the units of service to be provided with <u>ALL funding sources</u>. Related funding is reported in the annual Area Plan Budget (CDA 122) for Titles III B, III C-1, III C-2, III D, VII (a) and 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	110,000	3	
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	40,000	3	
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	1	1.2
2021-2022	50	1	1.2
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	5,060	3	
2022-2023			
2023-2024			

Nutrition Education

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	_		
Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	4,400	3	
2021-2022	6,000	3	
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	28,000	3	
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	7,800	3	
2022-2023			
2023-2024			

2. NAPIS Service Category - "Other" Title III Services

- Each <u>Title III B</u> "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 <u>Title III B</u> services to be funded that were <u>not</u> 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 IIIB "Other" Supportive Services, use the appropriate Service Category name and Unit of Service (Unit Measure) listed in the CDA Service Categories and Data Dictionary.

- 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	1	1.3
2021-2022	1	1	1.3
2022-2023			
2023-2024			

Service Category: Public Information

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	100	1	1.3
2021-2022	10	1	1.3
2022-2023			
2023-2024			

Service Category: Housing

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	50	1	1.3
2021-2022	50	1	1.3
2022-2023			
2023-2024			

Service Category: Cash / Material Aid

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	0		
2021-2022	50	1	1.2
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	2,800	3	3.1
2022-2023			
2023-2024			

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

2021-2022 Area Plan Update

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%.

1. FY 2018-2019 Baseline Resolution Rate:
Number of complaints resolved 184 + number of partially resolved complaints 103
divided by the total number of complaints received 352 = Baseline Resolution Rate 82%
FY 2020-2021 Target Resolution Rate 90%
2. FY 2019-2020 Baseline Resolution Rate:
Number of complaints partially or fully resolved 278 divided by the total number
of complaints received 312 = Baseline Resolution Rate 89%
FY 2021-2022 Target Resolution Rate <u>90%</u>
3. FY 2020 - 2021 Baseline Resolution Rate:
Number of complaints partially or fully resolveddivided by_the total number
of complaints received = Baseline Resolution Rate%
FY 2022-2023 Target Resolution Rate%

4. FY 2021-2022 Baseline Resolution Rate: Number of complaints partially or fully resolveddivided by the total number
of complaints received Baseline Resolution Rate%
FY 2023-2024 Target Resolution Rate
Program Goals and Objective Numbers: 3.2 on page 20 of the 2020-2024 Area Plan
B. Work with Resident Councils (NORS Elements S-64 and S-65)
1. FY 2018-2019 Baseline: Number of Resident Council meetings attended 28
FY 2020-2021 Target: 20
2. FY 2019-2020 Baseline: Number of Resident Council meetings attended 13 FY 2021-2022 Target: 20
FY 2020-2021 Baseline: Number of Resident Council meetings attended
FY 2022-2023 Target:
4. FY 2021-2022 Baseline: Number of Resident Council meetings attended
FY 2023-2024 Target:
Program Goals and Objective Numbers: 3.2 on page 20 of the 2020-2024 Area Plan
C. Work with Family Councils (NORS Elements S-66 and S-67)
FY 2018-2019 Baseline: Number of Family Council meetings attended 2
FY 2020-2021 Target: 0
2. FY 2019-2020 Baseline: Number of Family Council meetings attended 0
FY 2021-2022 Target: 0
FY 2020-2021 Baseline: Number of Family Council meetings attended FY 2022-2023 Target: Output Description: The second of
4. FY 2021-2022 Baseline: Number of Family Council meetings attended
FY 2023-2024 Target:
Program Goals and Objective Numbers: 3.2 on page 20 of the 2020-2024 Area Plan
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.
1. FY 2018-2019 Baseline: Number of Instances 329
FY 2020-2021 Target: 402
2. FY 2019-2020 Baseline: Number of Instances 727 FY 2021-2022 Target: 402
3. FY 2020-2021 Baseline: Number of Instances
FY 2022-2023 Target:
FY 2022-2023 Target: 4. FY 2021-2022 Baseline: Number of Instances
FY 2023-2024 Target:
Program Goals and Objective Numbers: 3.2 on page 20 of the 2020-2024 Area Plan

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: 700
2.	FY 2019-2020 Baseline: Number of Instances 1,107
	FY 2021-2022 Target: 700
3.	FY 2020-2021 Baseline: Number of Instances
	FY 2022-2023 Target:
4.	FY 2021-2022 Baseline: Number of Instances
	FY 2023-2024 Target:
Pro	ogram Goals and Objective Numbers: 3.2 on page 20 of the 2020-2024 Area Plan

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.

<u>_</u>	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 19			
	FY 2021-2022 Target: 10			
3.	FY 2020-2021 Baseline: Number of Sessions			
	FY 2022-2023 Target:			
4.	FY 2021-2022 Baseline: Number of Sessions			
	FY 2023-2024 Target:			
Pro	Program Goals and Objective Numbers: 3.2 on page 20 of the 2020-2024 Area Plan			

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 countywide, 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:

As of December 31, 2020, Alliance on Aging Ombudsman Program provided 376.5 hours of Emergency Preparedness training to a total of 269 participants. 14 Emergency Preparedness Workshops offered to the community. 13 workshops were offered via Zoom and 1 workshop was offered in person at Van Buren Senior Apartments in Monterey.

The Alliance on Aging Ombudsman Program Manager developed two 1.5-hour Emergency Preparedness Zoom Workshops. "Learn the Basics: 3 Easy Steps to Prepare for an Emergency" focused on personal emergency preparedness. Participants learned how to stay informed during an emergency. Participants received emergency communication plan templates and emergency kit supply list. Participants who completed the workshop received hard copies of the handouts, PowerPoint, mask, and a backup battery that could be used to charge your devices via USB. 154 participants participated in the "Learn the Basics: 3 Easy Steps to Prepare for an Emergency" workshops, totaling 204 hours of training completed. A total of 11, Learn the Basics: 3 Easy Steps to Prepare for an Emergency Workshops were offered.

The "Fire Safety PG&E Power Shutoff Preparedness" workshop focused on home fire safety tips, developing a wildfire action plan, and preparing for potential power outages. The Alliance on Aging Ombudsman Program partnered with the Seaside Fire Department. Firefighter Ben Flores spoke about personal safety during a fire, fire alarm maintenance and he was available for Q &A. Participants who completed the workshop received hard copies of the handouts, PowerPoint, mask, headlamp and reusable glowstick. 115 participants participated in the" Fire Safety PG&E Power Shutoff Preparedness Workshops" totaling 172.5 hours of training. A total of 3, "Fire Safety PG&E Power Shutoff Preparedness" workshops were offered via Zoom.

These Emergency Preparedness Workshops were offered to:

- 1. Alliance on Aging clients, staff, and volunteers
- 2. Carmel Valley Manor Skilled Nursing Facility staff
- 3. Del Monte Assisted Living Facility staff, residents, and family members.
- 4. Van Buren Senior Housing residents
- 5. IHSS providers

- 6. Central Coast Senior Services staff and clients
- 7. Del Mar Caregiver Resource Center clients and staff.
- 8. The public.

The Alliance on Aging Ombudsman Program started a mask collection and distribution campaign in partnership with sewing donations from friends and family. We have received mask donations from CERV of the Monterey Peninsula, Listos, Blue Zones Project, National Charity League, Masks Makers of Monterey County, Superhero Mask Project, Monterey County Library, Seaside Masks Makers, Monterey County Health Department, Carmel Medical Supply.... and many more.

The Alliance on Aging distributed 3,351 masks from April 2020-December 2020

- 1. 457 masks distributed in April
- 2. 840 masks distributed in May
- 3. 206 masks distributed in June
- 4. 764 masks distributed in July
- 5. 423 masks distributed in August
- 6. 395 masks distributed in September
- 7. 158 masks distributed in October
- 8. 24 masks distributed in November
- 9. 84 masks distributed in December

Monterey County RCFE (Assisted Living) PPE Distribution Event: The Alliance on Aging Ombudsman Program and Monterey County Health Department organized a PPE distribution event for Assisted Living (RCFE) facilities in Monterey County on July 30, 2020. We collected over 15,000 masks, gloves, and hand sanitizer thanks to donations from the Office of Emergency Services, Alliance on Aging, Salinas Valley Memorial Healthcare System, Salinas MST, and Hospice of the Central Coast. The PPE was boxed up and distributed to 28 facilitates during our drive thru event. Staff Ombudsman delivered the remaining PPE to facilities who were unable to attend. RCFE staff expressed gratitude for our support and PPE donations.

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

The Alliance on Aging Ombudsman Program will host Zoom training sessions for Skilled Nursing Facility Social Service Coordinators. Social Service Coordinators are responsible for discharge planning and facilitating residents' quarterly care conferences. Social Service Coordinators who attend the Ombudsman Program Zoom trainings will have the opportunity to learn about individualized care best practices, discharge, transfer and eviction residents' rights, Epple Act Interdisciplinary Team (IDT) implementation, and Ombudsman role as witness for Advanced Health Care Directives in Skilled Nursing Facilities.

Ombudsman will develop trainings that teach Social Service Coordinators who to develop safe and dignified discharge planning strategies. Ombudsman will outreach to the homeless shelters in Monterey County. Ombudsman will provide program cards and information about safe discharge planning to homeless shelter staff. Ombudsmen aim to empower homeless shelter staff to reach out to the California Department of Public Health and the Ombudsman Program when concerns arise regarding a resident's discharge from a skilled nursing facility to a homeless shelter.

Ombudsman will also provide training on Advanced Health Care Directives and Epple Act Interdisciplinary Team (IDT) meetings. Ombudsman will provide Advanced Health Care Directive resources to Social Service Coordinators so that information can be shared with residents and community members. Ombudsman must witness AHCD for skilled nursing facility residents. HSC section 1418.8 authorizes an Interdisciplinary Team (IDT) at a SNF or ICF to make treatment decisions for residents when a physician determines the resident is unable to provide informed consent for a proposed treatment intervention because they cannot articulate a decision or cannot understand the risks or benefits of a proposed intervention and where the resident has no health care decision maker to consent to the proposed intervention. SNFs and ICFs should update, develop, adopt, and implement policies and procedures (P&Ps) to ensure compliance with requirements for residents under HSC section 1418.8.

Social Service Coordinators who attend the Ombudsman Zoom trainings will have the opportunity to share best practices and learn from their colleagues.

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.

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: Unknown due to COVID Pandemic
2. FY 2019-2020 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 0 divided by the total number of Nursing Facilities 17 = Baseline 0% (due to COVID-19 Pandemic) FY 2021-2022 Target: 100%
3. FY 2020-2021 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaintdivided by the total number of Nursing Facilities = Baseline% FY 2022-2023 Target: %
4. FY 2021-2022 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaintdivided by the total number of Nursing Facilities = Baseline% FY 2023-2024 Target: %
Program Goals and Objective Numbers 3.2 on page 20 of the 2020-2024 Area Plan
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 <i>visits</i> but a count of <i>facilities</i> . In determining the number of facilities visited for this measure, no RCFE can be counted more than once. 1. FY 2018-2019 Baseline: Number of RCFEs visited at least once a quarter not in
response to a complaint 49 divided by the total number of RCFEs 49 = Baseline 98% FY 2020-2021 Target: Unknown due to COVID-19 Pandemic
2. FY 2019-2020 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint 0 divided by the total number of RCFEs 49 = Baseline 0% Due to COVID-19 Pandemic FY 2021-2022 Target: 100%
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: **Table 1.5** **Table 2.5** **Table
4. FY 2021-2022 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaintdivided by the total number of RCFEs= Baseline% FY 2023-2024 Target: %
Program Goals and Objective Numbers: 3.2 on page 20 of the 2020-2024 Area Plan

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: 3.2 FTEs FY 2020-2021 Target: 3.2 FTEs			
2.	FY 2019-2020 Baseline: 3.28 FTEs FY 2021-2022 Target: 3.28 FTEs			
3.	FY 2020-2021 Baseline:FTEs FY 2022-2023 Target:FTEs			
4.	FY 2021-2022 Baseline:FTEs FY 2023-2024 Target:FTEs			
Pro	Program Goals and Objective Numbers: 3.2 on page 20 of the 2020-2024 Area Plan			

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

<u> </u>	Number of Certifica E10 Chibadaman Volunteers (NONO Element of E4)		
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 19 FY 2021-2022 Projected Number of certified LTC Ombudsman volunteers 19		
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: 3.2 on page 20 of the 2020-2024 Area Plan			

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 inservice 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. Date from ODIN 202 is also used to complete quarterly AAA, City of Salinas and City of Monterey reports.

Two new Ombudsman have been hired to join the Alliance on Aging team. When the new hires are certified, all staff Ombudsman will complete the National Consumer Voice "National Ombudsman Reporting System (NORS) Training." The course consists of four parts via on-line training. Ombudsman must take them in order. There is a quiz at the end of each part. By the end of this training course Ombudsman will:

- Understand the importance, purpose, and data elements of the National Ombudsman Reporting System (NORS)
- Know how to report case, complaint, and activity data using the Administration for Community Living (ACL) NORS Tables 1-3
- Be familiar with other resource materials related to NORS

The National Consumer Voice "National Ombudsman Reporting System (NORS) Training" course will help Ombudsman understand and comply with the National Ombudsman Reporting System (NORS). The Administration for Community Living (ACL) created NORS to satisfy the Ombudsman program reporting requirements in the Older Americans Act (OAA) and to enhance consistency in data collection and reporting.

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	50
2022-2023	
2023-2024	

Fiscal Year	Total # of Training Sessions for Professionals
2020-2021	15
2021-2022	24
2022-2023	
2023-2024	

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

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

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

Fiscal Year	Total Number of Individuals Served
2020-2021	2,500
2021-2022	1,800
2022-2023	
2023-2024	

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

2021-2022 Area Plan Update

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

Direct and/or Contracted III E Services

CATEGORIES	1	2	3
	ı		3
Family Caregiver Services Caring for Elderly	Proposed Units of Service	Required Goal #(s)	Optional Objective #(s)
Information Services	# of activities and Total est. audience for above		
2020-2021	# of activities: 250 Total est. audience for above: 10,000	3	
2021-2022	# of activities: 350 Total est. audience for above: 35,000	3	
2022-2023			
2023-2024			
Access Assistance	Total contacts		
2020-2021	2,500	3	
2021-2022	1,500	3	
2022-2023			
2023-2024			
Support Services	Total hours		
2020-2021	2,750	3	
2021-2022	2,200	3	
2022-2023			
2023-2024			

Respite Care	Total hours		
2020-2021	1,300	3	
2021-2022	1,800	3	
2022-2023			
2023-2024			
Supplemental Services	Total occurrences		
2020-2021	0		
2021-2022	0		
2022-2023			
2023-2024			

Direct and/or Contracted III E Services

Grandparent Services Caring for Children	Proposed Units of Service	Required Goal #(s)	Optional 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)
 - o 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)8

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

⁸ Requires a contract for using HICAP funds to pay for HICAP Legal Services.

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:

Luis Alejo, District 1 Supervisor	2025
John Phillips, District 2 Supervisor	2023
Chris Lopez – Chair, District 3 Supervisor	2023
Wendy Root Askew, District 4 Supervisor	2025
Mary Adams, District 5 Supervisor	2025

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 _6_

	% of PSA 65+Population ⁹	% on Advisory Council
Race/Ethnic Composition		
White	<u>80%</u>	<u>60%</u>
Hispanic/Latino	0% (see note below)	<u>20%</u>
Black	<u>2.5%</u>	<u>10%</u>
Asian/Pacific Islander	<u>9.5%</u>	<u>10%</u>
Native American/Alaskan Native	<u>1%</u>	<u>0%</u>
Other Alone and Two or More Races	<u>7%</u>	<u>0%</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
2 nd District Appointment	vacant
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	
Linda Cortez, At Large Appointment; Planning, Evaluation & Allocation Committee	01-01-2021

30

⁹ U.S. Census, American Community Survey 2012-2016, 5 Year Tables B17001 through B17001I.

John Greathouse, At Large Appointment; Planning, Evaluation & Allocation Committee	01-01-2022
Bobbie Blakeney, At Large Appointment; Legislation & Advocacy Committee, Executive Committee	01-01-2023
Kathybelle Barlow, At Large Appointment; Legislation & Advocacy Committee	01-01-2023
At Large Appointment	vacant

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

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

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 <u>must</u> be completed and submitted with the Four-Year Area Plan.

Any changes to this Section must be documented on this form and remitted with Area Plan Updates.¹⁰

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.

 $^{^{10}}$ 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:
 - o LSS printed materials in lobbies, bulletin boards, and more.
 - o 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 Providers. ¹¹
2020-2021	1
2021-2022	1
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

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	Legal Services for Seniors	All
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 IIIB 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 IIIB 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.