



# *Area 12 Agency on Aging Area Plan Update FY 2023-2024*



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**2020-2024 4-YEAR AREA PLAN REQUIRED COMPONENTS CHECKLIST**

**To ensure all required components are included, "X" mark the far-right column boxes.**  
**Enclose a copy of the checklist with your Area Plan: [submit this form with the Area Plan due 5-1-20 only](#)**

Section	Four-Year Area Plan Components	4-Year Plan
	Transmittal Letter – <i>must have original, ink signatures or official signature stamps- no photocopies</i>	<input 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 type="checkbox"/>
9	Title IIIB Funded Coordination (C) Objectives	<input 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 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"/>

# AREA PLAN UPDATE (APU) CHECKLIST

PSA 12

Check one: ☐ FY21-22 ☐ FY 22-23 ☒ FY 23-24

Use for APUs only

AP Guidance Section	APU Components (To be attached to the APU)	Check if Included
	➤ <i>Update/Submit A) through I) ANNUALLY:</i>	
n/a	<b>A) Transmittal Letter-</b> (requires <u>hard copy</u> with original ink signatures or official signature stamp- <b>no photocopies</b> )	<input type="checkbox"/>
n/a	<b>B) APU-</b> (submit entire APU electronically only)	<input type="checkbox"/>
2, 3, or 4	<b>C) Estimate-</b> of the number of lower income minority older individuals in the PSA for the coming year	<input checked="" type="checkbox"/>
7	<b>D) Public Hearings-</b> that will be conducted	<input checked="" type="checkbox"/>
n/a	<b>E) Annual Budget</b>	<input type="checkbox"/>
10	<b>F) Service Unit Plan (SUP) Objectives and LTC Ombudsman Program Outcomes</b>	<input checked="" type="checkbox"/>
18	<b>G) Legal Assistance</b>	<input checked="" type="checkbox"/>
	➤ <i>Update/Submit the following only if there has been a CHANGE or the section was not included in the 2020-2024</i>	Mark Changed/Not Changed (C or N/C) C N/C
5	Minimum Percentage/Adequate Proportion	<input type="checkbox"/> <input checked="" type="checkbox"/>
5	Needs Assessment	<input type="checkbox"/> <input checked="" type="checkbox"/>
9	AP Narrative Objectives:	<input checked="" type="checkbox"/> <input type="checkbox"/>
9	• System-Building and Administration	<input checked="" type="checkbox"/> <input type="checkbox"/>
9	• Title IIIB-Funded Programs	<input checked="" type="checkbox"/> <input type="checkbox"/>
9	• Title IIIB-Transportation	<input checked="" type="checkbox"/> <input type="checkbox"/>
9	• Title IIIB-Funded Program Development/Coordination (PD or C)	<input type="checkbox"/> <input checked="" type="checkbox"/>
9	• Title IIIC-1	<input checked="" type="checkbox"/> <input type="checkbox"/>
9	• Title IIIC-2	<input checked="" type="checkbox"/> <input type="checkbox"/>
9	• Title IIID	<input checked="" type="checkbox"/> <input type="checkbox"/>
20	• Title IIIE-Family Caregiver Support Program	<input checked="" type="checkbox"/> <input type="checkbox"/>
9	• HICAP Program	<input checked="" type="checkbox"/> <input type="checkbox"/>
12	Disaster Preparedness	<input checked="" type="checkbox"/> <input type="checkbox"/>
14	Notice of Intent-to Provide Direct Services	<input type="checkbox"/> <input checked="" type="checkbox"/>
15	Request for Approval-to Provide Direct Services	<input type="checkbox"/> <input checked="" type="checkbox"/>
16	Governing Board	<input checked="" type="checkbox"/> <input type="checkbox"/>
17	Advisory Council	<input checked="" type="checkbox"/> <input type="checkbox"/>
21	Organizational Chart(s)	<input checked="" type="checkbox"/> <input type="checkbox"/>

**TRANSMITTAL LETTER**  
**2020-2024 Four Year Area Plan/ Annual Update**  
**Check one:** ☐ **FY 20-24** ☐ **FY 21-22** ☐ **FY 22-23** ☒ **FY 23-24**

**AAA Name:** Area 12 Agency on Aging

**PSA** 12

This Area Plan is hereby submitted to the California Department of Aging for approval. The Governing Board and the Advisory Council have each had the opportunity to participate in the planning process and to review and comment on the Area Plan. The Governing Board, Advisory Council, and Area Agency Director actively support the planning and development of community-based systems of care and will ensure compliance with the assurances set forth in this Area Plan. The undersigned recognize the responsibility within each community to establish systems in order to address the care needs of older individuals and their family caregivers in this planning and service area.

1. \_\_\_\_\_  
(Rosemarie Smallcombe)

\_\_\_\_\_  
Signature: Governing Board Chair <sup>1</sup>

\_\_\_\_\_  
Date

2. \_\_\_\_\_  
(Lynne Standard-Nightengale)

\_\_\_\_\_  
Signature: Advisory Council Chair

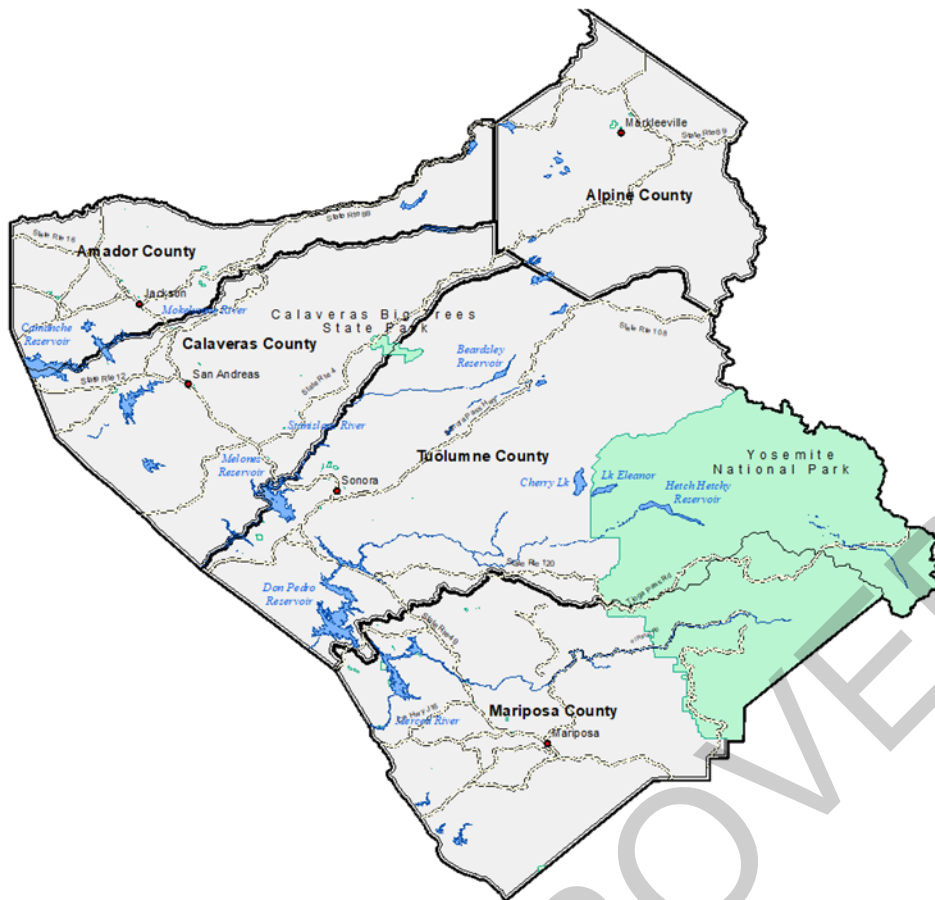
\_\_\_\_\_  
Date

3. \_\_\_\_\_  
(Kristin Millhoff)

\_\_\_\_\_  
Signature: Area 12 Agency Executive Director

\_\_\_\_\_  
Date

<sup>1</sup> Original signatures or official signature stamps are required.



**Planning & Service  
Area PSA 12**

Alpine County  
Amador County  
Calaveras County  
Mariposa County  
Tuolumne County

APPROVED



## **SECTION 1. MISSION STATEMENT**

The responsibility of Area 12 Agency on Aging is to provide leadership in addressing issues that relate to older Californians; to develop community-based systems of care that provide services which support independence within California's interdependent society, 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.

APPROVED

## **SECTION 2. DESCRIPTION OF THE PLANNING AND SERVICE AREA (PSA 12)**

The Area 12 Agency on Aging's (A12AA) Area Plan for 2020-2024, required by the California Department of Aging, offers an opportunity to articulate strategies that will be carried out to address the growing needs and challenges faced by the Agency in the upcoming years.

Our Agency is increasingly resourceful as we maintain quality services. The mounting challenges associated with a greater demand for these services encourages Agency and its providers seek unique and innovative approaches to address the demand.

- Greater collaboration between existing partnerships and providers, as well as new joint ventures with other agencies where partnerships appear likely, offer the best opportunities for maximizing and maintaining services.
- Planning for the needs of an increasing population of older adults, persons with disabilities and caregivers, is an ongoing process.
- Partnering with the Disability Resource Agency for Independent Living (DRAIL) paves the way for our Agency to implement the 'No Wrong Door' approach to providing services. The Agency and DRAIL are a designated ADRC.
- Presented in this Area Plan are the Goals and Objectives and Service Unit Plans that will guide the staff, Advisory Council members, Providers and Joint Powers Authority Board in serving the needs of older adults, persons with disabilities and caregivers throughout the designated service area of Alpine, Amador, Calaveras, Mariposa and Tuolumne Counties.

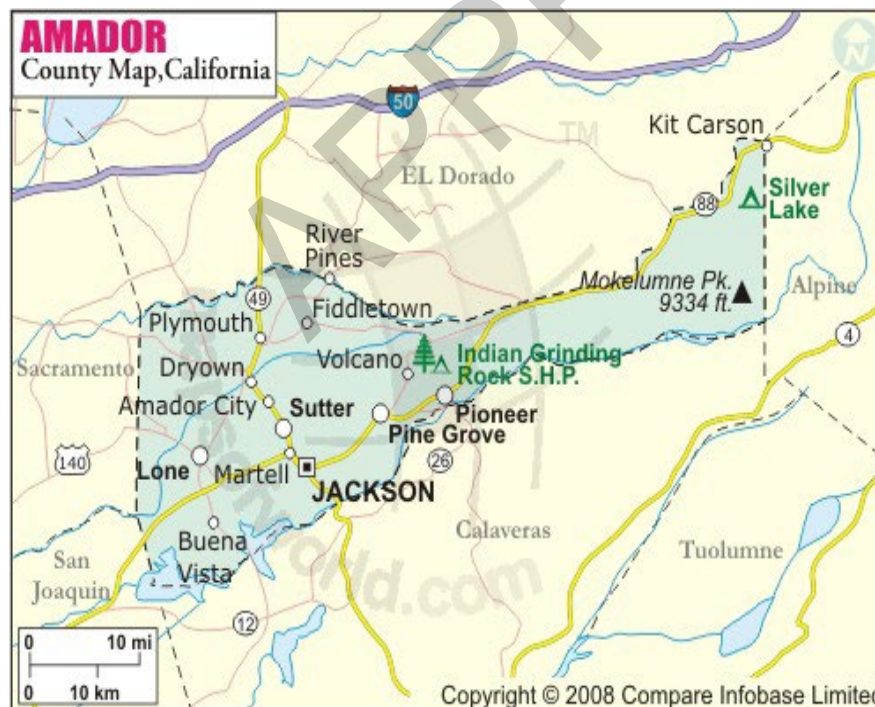
### **Physical Characteristics**

- PSA 12 covers a large geographic area of over 6,000 square miles in the Sierra Nevada region of the state, stretching from Alpine County to the north down to Mariposa County at the southern tip.
- It encompasses portions of Yosemite National Park, Calaveras Big Trees and Columbia State Historic Park.
- The counties are home to diverse geographical features, including many lakes, rivers, mountains, forests and smaller farms.
- The rich gold mining history is seen in the town settings and historical state parks.
- The highest point of elevation is Mount Lyell, 13,120 feet and is located in Yosemite National Park.

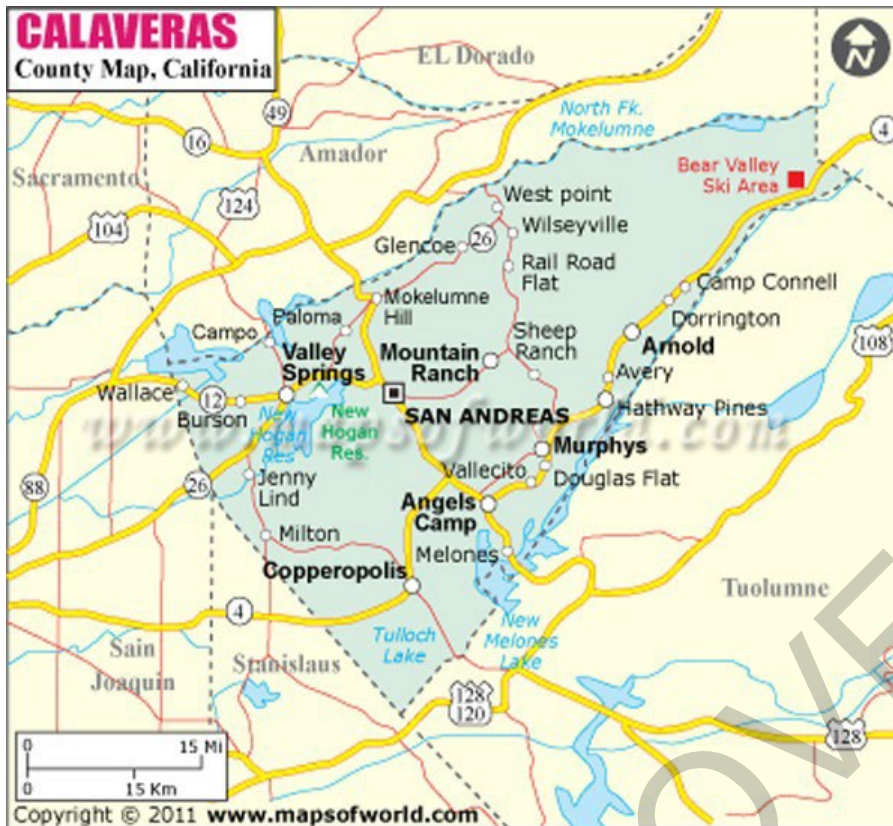




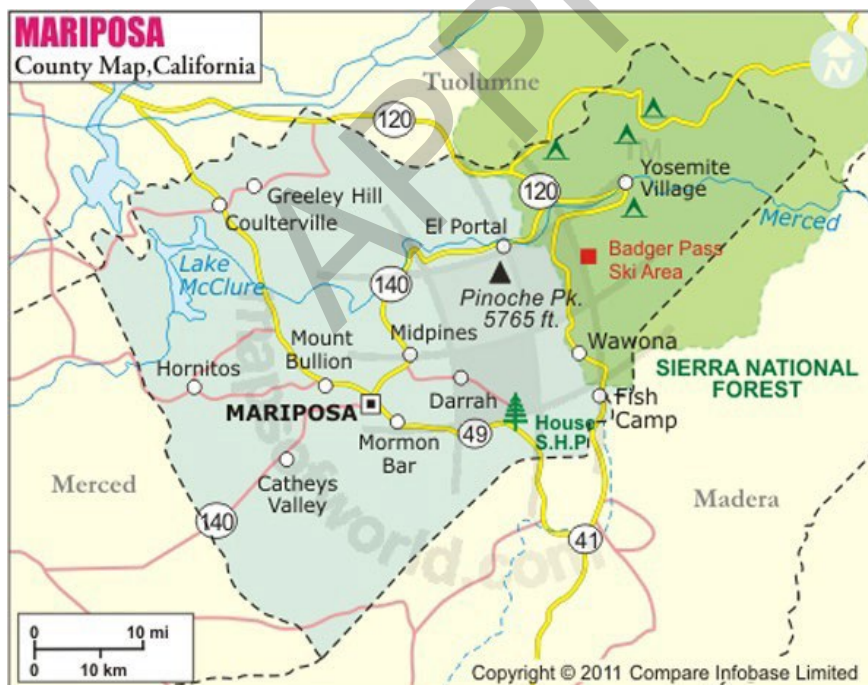
**ALPINE COUNTY** - According to the 2014-2018 American Community Survey, Alpine County's Population is 69.9% White. Native American, Native Alaska population is 23.9%. Hispanic or Latino is 11.4. Other races is <2%.



**AMADOR COUNTY** - According to the 2014-2019 American Community Survey, Amador County's population consists of 87% White and 8% Hispanic or Latino. Other races is 5%.



**CALAVERAS COUNTY** - Calaveras County has 77% White and 12% Hispanic or Latino. Asian, two or more races, other races are 11%.



**MARIPOSA COUNTY** - Mariposa County has 89.3% White, while Hispanics comprise 12.1%. Native American or Alaska Native, African American, Asian, other Pacific Islander comprise 6.6%.



## TUOLUMNE COUNTY

### CLOSEST ROUTE TO THE SIERRA



From The San Francisco Bay Area  
take I-580 to I-205 to State 120



**TUOLUMNE COUNTY** – According to the US Census 2020, Tuolumne County has 90% White and 13% Hispanic or Latino. Native American & Alaska Native 2%, African America 2.4%, Asian & Pacific Islander <2%.

## Population Trends

As indicated in the chart below, five counties have one third age 60+ older adults. According to the American Community Survey Population Estimates, PSA 12 is home to over 100,000 people. Older adults, age 60+ represent, on average, over 37% of the total population in the five counties.

<b>Older Adults age 60+</b> <b>Alpine, Amador, Calaveras, Mariposa &amp; Tuolumne Counties</b>			
<b>County</b>	<b>Total Population*</b>	<b>Population Age 60+**</b>	<b>% of County Age 60+</b>
Alpine	1,235	455	37%
Amador	40,095	14,482	36%
Calaveras	46,221	18,284	40%
Mariposa	17,147	7,220	42%
Tuolumne	55,810	19,453	35%
<b>Total</b>	<b>160,508</b>	<b>59,894</b>	<b>37%</b>

\*American Community Survey 2021 Population Estimates

\*\*CA DOF 2023 Population Estimates

The following chart gives an estimate of the number of age 60+ in the PSA that are low income age 75+ or geographic isolated. The poverty guidelines published by the US Department of Health & Human Services are used to determine eligibility for government programs.

<b>Low Income Adults (PSA 12)*</b>				
<b>County</b>	<b>Total Population Age 60+</b>	<b>Age 60+ Low-income</b>	<b>Age 75+</b>	<b>Geo-isolated 60+</b>
Alpine	455	60	116	276
Amador	14,482	1,450	4,677	7,670
Calaveras	18,284	1,615	5,696	11,030
Mariposa	7,220	715	2,163	5,411
Tuolumne	19,453	2,135	6,168	7,537

\*2023 CA DOF Population Demographic Projections

The formula for the federal poverty threshold does not take into account costs of housing, clothing, medical care, transportation, utilities, or insurance and does not recognize regional differences in these costs. The California Elder Economic Security Standard Index (Elder Index) is a recognized measure of the basic cost of living for individuals age 65+. It is calculated by the UCLA Center for Health Policy Research. Components include housing, food, transportation, health care, and miscellaneous costs such as clothing, telephone, home repairs, and furnishings. The chart below demonstrates the gap between the Elder Index and Federal Poverty Level for counties in PSA 12. The Consumer Price Index (CPI) Elder Index is a county specific measure and includes a senior's basic costs (food, housing, medical care, and transportation).

<b>Elder Index* - Single age 65+</b>				
<b>County</b>	<b>Total Annual expenses</b>	<b>Median Social Security***</b>	<b>\$ Amount Income Gap</b>	<b>Federal Poverty Guide**</b>
Alpine w/mortgage	\$36,372	\$21,924	\$14,448	\$14,580
Alpine w/out mortgage	\$22,908	\$21,924	\$984	\$14,580
Alpine renter	\$26,592	\$21,924	\$4,668	\$14,580
Amador w/mortgage	\$35,892	\$21,924	\$13,968	\$14,580
Amador w/out mortgage	\$22,824	\$21,924	\$900	\$14,580
Amador renter	\$27,888	\$21,924	\$5,964	\$14,580
Calaveras w/mortgage	\$33,936	\$21,924	\$12,012	\$14,580
Calaveras w/out mortg	\$22,908	\$21,924	\$984	\$14,580
Calaveras renter	\$27,240	\$21,924	\$7,356	\$14,580
Mariposa w/mortgage	\$34,236	\$21,924	\$12,312	\$14,580
Mariposa w/out mortg	\$21,612	\$21,924	\$0	\$14,580
Mariposa renter	\$26,832	\$21,924	\$4,908	\$14,580
Tuolumne w/mortgage	\$35,112	\$21,924	\$13,188	\$14,580
Tuolumne w/out mortg	\$22,970	\$21,924	\$1,046	\$14,580
Tuolumne renter	\$27,456	\$21,924	\$5,532	\$14,580

\*2019-2022 CPI Elder Economic Security Standard Index – UCLA \*\*2023 Federal Poverty Guidelines

\*\*\*SSA, Social Security Administration 2023

<b>Elder Index* – Two-Person Household – age 65+</b>				
<b>County</b>	<b>Total Annual expenses</b>	<b>Median Social Security***</b>	<b>\$ Amount Income Gap</b>	<b>Federal Poverty Guide**</b>
Alpine w/mortgage	\$48,816	\$33,664	\$15,152	\$19,720
Alpine w/out mortgage	\$36,336	\$33,664	\$2,672	\$19,720
Alpine renter	\$40,044	\$33,664	\$6,380	\$19,720
Amador w/mortgage	\$48,336	\$33,664	\$14,672	\$19,720
Amador w/out mortgage	\$36,264	\$33,664	\$2,600	\$19,720
Amador renter	\$41,340	\$33,664	\$7,676	\$19,720
Calaveras w/mortgage	\$49,368	\$33,664	\$15,704	\$19,720
Calaveras w/out mortg	\$36,336	\$33,664	\$2,672	\$19,720
Calaveras renter	\$40,692	\$33,664	\$7,028	\$19,720
Mariposa w/mortgage	\$46,680	\$33,664	\$13,016	\$19,720
Mariposa w/out mortg	\$35,076	\$33,664	\$1,412	\$19,720
Mariposa renter	\$40,296	\$33,664	\$6,632	\$19,720
Tuolumne w/mortgage	\$47,556	\$33,664	\$13,892	\$19,720
Tuolumne w/out mortg	\$36,348	\$33,664	\$2,684	\$19,720
Tuolumne renter	\$40,908	\$33,664	\$7,244	\$19,720

\*2019-2022 CPI Elder Economic Security Standard Index - UCLA \*\*2023 Federal Poverty Guidelines

\*\*\*SSA, Social Security Administration 2023

## Challenges and Successes

Since the foothill communities are a desirable place to live for retirees this has implications for service demand and delivery in the areas of healthcare, in home services and housing.

- The need for home repair programs increases with the number of older adults in our communities. The IIIB Residential Repairs/Modifications program continues to provide minor home repairs. Repairs become necessary to facilitate the ability of older individuals to safely remain in their homes. Habitat for Humanity organizations in several counties have home repair programs.
- The Agency actively participates in community meetings and discussions regarding transportation options. Along with each county's transit and paratransit programs, three counties have started volunteer driver programs. The programs are active in providing rides for individuals who are not able to access public transit or paratransit programs. Other effective transportation programs are through Providers contracting with ModivCare to provide non-emergency medical transportation for Medi-Cal recipients. Due to the rural nature of the area, there continues to be challenges in providing 'out of county' medical transportation.
- A unique challenge in the rural counties is the distance travelled to provide quality services to geographic isolated older adults and caregivers.
- It was especially challenging in the winter with the extra snowfall, road flooding, and power outages to deliver needed services such as meals, food, batteries, and daily living essentials to the rural communities.
- Community resources have been stretched to the limit especially in rural areas affected by hazards such as winter storms, wildfire, tree mortality, and power outages.
- Other areas of concern for the older adult population is the cost of living that continues to rise. An area of great concern is the unyielding insurance companies that are consistently unwilling to negotiate a reasonable price for homeowner's insurance. County officials hear regularly from area homeowners about skyrocketing fire-hazard insurance rates. Many residents report they were recently dropped from their homeowners' insurance plans, and their rates have tripled or quadrupled, with companies citing fire ratings and perceived wildfire risks as reasons.
- Our Agency is acutely aware of the digital divide issue in our rural communities as we assist consumers with online registration for many services.
- The Agency is consistently exploring ways to distribute information using Facebook, the A12AA website, Advisory Council members, Commission on Aging members, community organizations, veteran's groups, newspaper, magazine, website advertisement, online resources, virtual events, in person fairs and events.
- Outreach efforts continue virtually and in person with senior centers, support groups, social service organizations, service organizations, public health, and hospitals.
- The Agency continues to distribute information to key locations to spread the information about services.
- The Agency in partnership with DRAIL was designated as an ADRC. ADRC set up

kiosks at various community centers to increase access to the online resource directory.

- The nutrition infrastructure grant provided assistance for A12AA Providers. Several large items were purchased to update and streamline the kitchens and meal prep. Many vehicles were purchased which made it possible to deliver home delivered meals to remote areas severely affected by the extra snowfall this winter in the region.
- The transition from drive through congregate meals to in person dining congregate meals proceeded smoothly.

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### **SECTION 3. DESCRIPTION OF THE AREA 12 AGENCY ON AGING (A12AA)**

#### **Leadership Role**

- A12AA offers opportunities to engage older adults in purposeful volunteer activities. Members of the Advisory Council's Transportation & Housing, Legislative, Nutrition and Public Information committees have written objectives which consider the data from the Community Needs Survey and County needs.
- The Transportation committee members are active in their respective communities attending the Social Services Transportation Advisory Council (SSTAC) and county transit meetings. They advocate for maintaining and increasing mobility options for the older adult population, persons with disabilities and veterans.
- The Legislative committee raises public awareness by distributing proposed state and/or federal bills related to senior issues to various groups and individuals. They conduct numerous presentations at community meetings regarding the proposed state bills. They also advocate on the state level.
- The Public Information committee partners with the multiple organizations and attends several meetings in their respective counties to raise awareness about A12AA services and senior needs. Because of the sprawling geography of our rural area and the isolated nature of rural living, the committee is regularly identifying key groups to educate regarding senior issues. Another objective of the committee is to identify 'key locations' in each pocket community as a central place to distribute information.
- The Nutrition committee works with the participants, sending surveys and communicating the results to the providers.
- As the Agency serves the Lesbian, Gay, Bisexual and Transgender (LGBT) community, the ADRC and Information & Assistance staff directs them appropriately to the services requested.
- The Family Caregiver Support Program (FCSP) provides education to hospital discharge planners, home health agencies and clinic staff members for the purpose of awareness, understanding and utilization of caregiver programs and services. The caregiver support groups, conducted virtually and in person, cover topics such as dementia, older relatives raising children and age related topics to support their roles as caregivers.
- Our Disaster Coordinator attends OES and Public Health disaster trainings and meetings on a regular basis in Amador, Calaveras, and Tuolumne Counties. A12AA has two staff members with Incident Command System (ICS) and Standardized Emergency Management System (SEMS) certification. A12AA staff plays a supportive role in the community agency response system.
- The Health Insurance Counseling and Advocacy program (HICAP) continues to provide service with regards to Medicare recipients. Outreach, conducted virtually and in person, continues through community education to service groups, hospitals, doctor offices and other community organizations.
- The Agency offers exercise programs in the different counties we serve. The yoga,



strength training, Pilates, T'ai Chi and Geri-Fit exercise programs aid in fall prevention, improving balance and increasing core strength. Some classes have continued virtually while others have resumed in person. The participants check their progress regarding their balance, their movements, hand-eye coordination and physical improvement. These programs have seen positive results in improvement in the participant's strength and mobility.

- The ADRC program regularly meets with organizations for input with the ADRC Advisory Committee. The Advisory Board is made up of individuals from several counties through organizations that serve the participants.
- CDA launched the CHAT program and our Agency was able to send out the iPads to 27 individuals in four counties.
- The Family Caregiver Support Program is partnered with UC Davis for a workshop focusing on Dementia and caregiving.

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#### **SECTION 4. PLANNING PROCESS / ESTABLISHING PRIORITIES**

- The planning process for the next year is a joint effort with the contracted Providers and the Agency. Extensive planning with the administrative staff is done within the Agency. Specific activities include breakout sessions with the Advisory Council, A12 Staff and Providers. The contracted Provider's service units are reviewed and discussed looking at the funding available, current units, trends and county needs.
- Through the Public Hearing process the Agency gathers public comments and records the most important needs for seniors. Before the public hearings, response sheets and a short survey are distributed to home delivered meal, congregate and transportation clients to ensure homebound consumers are heard. The response sheet and survey are also posted on the A12AA website and the A12AA Facebook page.
- The information the Agency receives from the sources listed below, serve as the foundation for evaluating and adjusting services. Organizations, activities and documents include:

JPA Governing Board meeting  
Community Needs Survey - Data Analysis  
Demographic Reports  
Contracted Providers  
Advisory Council  
Public Hearings (public)  
Staff meetings  
Senior Centers  
Community organizations

- Planning activities continue throughout the next few years. The Area Plan will be reviewed, evaluated and updated as necessary. When reevaluating the outcomes of the goals and objectives in the Area Plan, special consideration is given to the quality of services provided, client satisfaction, staff assessments, cost effectiveness, and sustainability.

## **MASTER PLAN FOR AGING IMPLEMENTATION**

Initiatives #1 – 6 are related to housing and bolstering housing production. Several funding streams for the homeless and at risk population have been approved through the Legislature. Home Safe, HHAP, HDAP and HHIP all work together in the housing related assistance field. The VASH voucher system supports veterans to obtain housing stability. Each of the counties received funding from these and other sources. The Agency's ADRC / I & A, and MSSP staff are aware of the housing resources and make referrals to the housing assistance programs.

Initiative #15 is geared toward minimizing the impacts of power outages for electricity-dependent Californians through mitigation, enhanced communication, and an increase in supportive resources with the CA PUC, Investor-Owned Utilities, and community based organizations. A12 partners with DRAIL to distribute batteries for electrically powered devices.

Initiative #17 encourages targeted outreach to older adults, persons with disabilities, and family caregivers to mitigate the severe impacts of extreme heat, wildfires, power outages, flooding, freezing temperatures, and other emergency situations brought about by climate change. A12 alerts staff, community partners, clients, and the public regarding the emergency situations using Facebook, email, flyers, and phone calls.

Initiative #24 supports expanding access to the Medi-Cal Assisted Living Waiver, the Home and Community-based Alternatives Waiver, through the Multipurpose Senior Services Program – MSSP. A12 has expanded the number of individuals receiving MSSP to assist approximately 100 individuals to stay safely in their homes, with this critical care managed program.

Initiative #44 promotes Blue Zones for dementia-friendly communities especially in cities and counties with higher proportions of racial groups with disparate rates of dementia. In Tuolumne County, Blue Zones partnered with Adventist Health to implement the Blue Zones lifestyle. A12 partnered with Blue Zones for several events and is partnering with Blue Zones for a county Community Needs Survey.

Initiative #59 evaluated the distribution of personal technology devices: A12AA distributed 27 iPads to clients in four counties. CDA CHAT Program - Connections, Health, Aging & Technology. The individual received an iPad, a 2 yr. paid for internet connection through AT&T, and a phone help line for instructions for use of the iPad. In addition, CDA offered iPads to the County HHS programs.

Initiative #71 promotes sustainability of the local network of Aging & Disability Resource Connections (ADRCs) and recommends revisions to the model that support geographic

expansion, local capacity building, training and technical assistance and enhanced focus on language access and cultural competence. In 2021, A12 and DRAIL partnered to become a designated ADRC.

Initiative #72 supports the 'No Wrong Door' approach for public information, assistance on aging, disability and dementia. A12 & DRAIL partnered to develop the ADRC of the Mother Lode. A12 Sonora office and ADRC Mother Lode share an office space staffed by both A12 and DRAIL. The ADRC online resource directory is operational and has been accessed by numerous consumers. ADRC placed kiosks in strategic locations: A12 Sonora office, ADRC/DRAIL office, Amador County and Tuolumne County Senior Centers.

The ADRC of the Mother Lode is an integrated way to connect older individuals and persons with disabilities to the desired services. The ADRC of the Mother Lode received its designation and have joined the statewide network of local ADRCs with shared training, tools and technology, continually improving cultural competency. They've assisted more individuals with enhanced information and assistance and connecting consumers with services to meet their needs. The program staff receive options counseling training and mirror the 'No Wrong Door' approach to assist participants.

Initiative #79-80 gives direction to the Family Caregiver Support Program (FCSP) to partner with the Caregiver Resource Center and provider of services to ensure diverse family caregivers have access to training resources. The Agency FCSP refers to the two Caregiver Resource Centers. A12AA Family Caregiver Support Program (FCSP) partnered with UC Davis California Alzheimer's Disease Center and the UCFS, Fresno, California Alzheimer's Disease Center to conduct a four hour workshop on dementia and caregiving. On a monthly basis, FCSP provides information to caregivers on various topics related to caregiving.

Initiative #92-93 are designed to expand the number of home delivered and congregate meals provided to older adults. A12's Providers increased the number of home delivered and congregate meals with additional funding. The Providers were given the various options for program flexibilities, including congregate 'to go' option for their congregate meal program.

Initiative #95 encourages the distribution of Senior Farmer's Market Nutrition Program. CDA sent A12AA approximately 400 farmer's market coupons for 2023. The Agency distributes them to the Providers and other local organizations.

## **SECTION 5. NEEDS ASSESSMENT**

- The Agency is aware of the population growth of older adults in California. The 2019 Community Needs Data Analysis compiled the results from the survey that engaged this age group. Supporting older adults in our communities as they age requires a broad range of services. The needs assessment is a formal process that determines the gaps between current outputs or outcomes and the required or desired outputs or outcomes. The survey provided the Agency with an up-to-date look and understanding of our aging population. It confirms the services provided are relevant and used by the older adult population.
- The distribution process included connecting with organizations, individuals and providers in the five counties.
- The Advisory Council participated in distributing the surveys in their communities by supplying libraries, homeowner's associations, service clubs, social groups, mobile home parks and other key locations with the surveys.
- Senior apartment complexes, social services, senior centers, churches, veteran services and public health organizations were given a supply of the surveys.
- The Agency placed ads in the newspaper in five counties and placed information on the website to advertise the survey. It was placed on the A12AA Facebook page and a fill-in survey was available on the A12AA website.
- The surveys were completed by older adults age 50+, adult caregivers 18+ caring for those age 60+ and older relatives age 55+ caring for child.
- The Survey housed both quantitative and qualitative variables and covered demographic information, health and wellness, activities, needs and concerns, services used by consumers, staying healthy and a section for caregivers.

## **SECTION 6. TARGETING**

The Agency and the JPA Governing Board are aware of the need to target and serve specific populations. The Agency uses the Older Americans Act (OAA) designations of special populations, particularly low income, minority, highest social and economic needs and disabled populations, and geographically isolated individuals, as a guideline for service and advocacy. The OAA retained the targeting provisions for low-income minorities and added focus on older individuals residing in rural areas. The Family Caregiver Support Program provides a means of addressing the growing needs of caregivers.

The original means used to identify the targeted populations in the PSA was the 2010 Census. Below are special populations identified in the OAA with some of the methods used by A12AA to reach these groups in our area.

- Low-income minority older individuals: as identified in the section describing the PSA 12, minority populations comprise close to 20% of the total senior population in five counties with 4% Hispanic, 2.7% American Indian/Alaskan Native. The other ethnic groups each represents less than 1%.
- Older individuals with income at or below poverty level: Low income is defined as at or below 100% of the federal poverty guidelines. This population comes in at 10%.
- Targeting seniors with greatest social economic needs: A12AA continues to target seniors with the greatest social, including older adults with hiv, and economic need with emphasis on low-income, geographic isolated individuals by partnering with organizations that serve these individuals.
- Disabled adults: A12AA partnered with Disability Resources Agency for Independent Living (DRAIL) to form an Aging & Disability Resource Connection (ADRC). We received our designation from CDA. This enables A12AA to reach persons with disabilities through the 'No Wrong Door' approach. Each Information & Assistance staff member has received 'options counseling' and enhanced I & A training.
- Another target group are the geographic isolated individuals. This comes in close to over 53% of the older adult population in the five county region.
- Frail, older individuals and their caregivers.
- Adults age 75+ are served as well.

The Agency has consistently reached out to low-income individuals that reside in geographic isolated areas. Through review of demographic information, the Agency's priorities are consistent with those of the Older Americans Act.

**SECTION 7. PUBLIC HEARINGS****PSA 12**

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, Older Americans Act Reauthorization Act of 2016, Section 314(c)(1).

Fiscal Year	Date	Location	Number of Attendees	Presented in Languages other Than English? Yes or No	Was Hearing Held at a Long-term Care facility? Yes or No
2020-2021	2-27-20	Calaveras County: Calaveras Sr. Ctr. 956 Mtn. Ranch. Rd. San Andreas, CA	0	No	No
	3-3-20	Tuolumne County: A12AA Office 19074 Standard Rd. Sonora, CA	0	No	No
2021-2022	3-9-21	Virtual Zoom mtg.	2	No	No
2022-2023	4-19-22	Virtual Zoom mtg.	2	No	No
2023-2024	2-27-23	Tuolumne Emer. Oper. Ctr., 18440 Striker Ct., Sonora, CA	3	No	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.

Outreach efforts included advertising the Public Hearing in each county's local newspaper, distributing flyers and response sheets to all home delivered (some are homebound), congregate meal and transportation clients and community groups. Advertisement and response sheet placed on A12AA website. Advisory Council members sent flyer to FB friends and email friends. Response sheets with comment were reviewed and documented by A12AA.

2. Were proposed expenditures for Program Development (PD) or Coordination (C) discussed? N/A

☐ Yes. Go to question #3

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

3. Summarize the comments received concerning proposed expenditures for PD and/or C.  
N/A

4. Attendees were provided the opportunity to testify regarding setting minimum percentages of Title III B program funds to meet the adequate proportion of funding for Priority Services.

☒ Yes. Go to question #5

☐ No, Explain:

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

There were 3 attendees at the in person public hearing. We received over 70 responses via the response sheet we sent the HDM, congregate and transportation clients. Also placed the public hearing and response sheet online on A12AA website. Comments received were varied but focused on services individuals would like to use as they continue to live in their communities.

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

There were several comments on the response sheets received from the individuals. These needs were mentioned: in-home help, transportation services for medical appointments, meals on wheels, congregate meals, and evacuation routes during disaster. There was a short survey regarding accessing help.

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

Updated informational changes were made to the Area Plan as a result of input by the attendees. The top topics mentioned were the topics and issues the Agency identified as needs in the communities.



A12AA identified service priorities prior to the release of requests for proposal (RFP). Several methods were utilized to assess these priorities including the use of the 2019 Data Analysis and informal surveys in the various communities. The community needs survey is a formal process that reveals the gaps between current outputs or outcomes and the required or desired outputs or outcomes. It can also prioritize the gaps and give data to support the most important gaps to be addressed. In addition, data compiled by the Information and Assistance Program (I & A), input from the A12 Advisory Council as well as specific information involving service providers, recipients, and the general public collectively serve as the foundation for evaluating and adjusting services that establish the service priorities for PSA 12. They include:

Priority 1: Chore services, Congregate Meals, Elder Abuse Prevention, Family Caregiver Support, Health, Health Promotion, Medicare counseling - Health Insurance Counseling and Advocacy Program (HICAP), Home Delivered Meals, Homemaker, Information and Assistance, Legal Assistance, Nutrition Education, Ombudsman, Residential Repair, Transportation services, and connecting persons with disabilities to available services.

Priority 2: These programs are considered important, and while they are not recommended for funding for 2020-2024, these areas would be eligible to apply for one-time-only or additional funds should they become available: Out-of-County Medical Transportation.

The funding percentage of adequate proportion reflects the current level of service. The A12AA proposes to serve Amador, Calaveras, Mariposa and Tuolumne counties with nutrition programs, and all areas with chore, homemaker, legal services, outreach, personal care and transportation. Information and Assistance and Legal Services are provided to each county within the PSA.

Ongoing efforts are made to serve older adults approved nutritious meals, by dining in (congregate meals) or home delivered meals. As Providers experience issues or challenges, the Agency supports them by adjusting the meal units, transferring units, and technical assistance.

The challenge to use funds efficiently and effectively, maintaining quality and sustainability, brings the Agency, the contracted Providers, the Governing Board and the Advisory Council to a cooperative level of planning and decision making.

The following attached material includes updated information regarding the Goals and Objectives and the Service Unit Plans relating to services offered to seniors, caregivers, and disabled adults in the Planning and Service Area.

## **SECTION 9 - AREA PLAN NARRATIVE GOALS AND OBJECTIVES**      **PSA 12**

### Goal # 1

**Goal #1: The Agency will employ various methods to distribute information and education regarding supportive services for older adults, persons with disabilities and caregivers.**

**Rationale:** Information on how to access services, promoting independence, encouraging wellness and a self-supporting lifestyle, while maintaining safety, is vital for older adults who desire to age in place.

In an effort to reach those who would benefit from the services the Agency provides, we continue to be actively engaged in raising awareness and promoting the programs and services available to older adults, persons with disabilities and caregivers.

List Objective Number and Objectives	Projected Start & End Dates		Update Status
<b>Refer to CCR Article 3, Section 7300 (c)</b>			
<b>Objective #1:</b> The A12AA Information & Assistance, MSSP, & FCSP staff will work with hospitals, clinics, discharge planners, home health agencies, doctor's offices and other organizations in Amador, Calaveras, Mariposa, & Tuolumne Counties to improve awareness of available programs, services, and caregiver resources. Information shared at IDT and MDT meetings. <b>Outcome:</b> Organizations and individuals will receive current information and receive current information of available services. <b>Measurement:</b> The number of organizations and number of staff receiving information.	7-1-20-6-30-24	IIIB	New
<b>FY20-21</b> – Projected 15 organizations and 400 staff. Due to COVID-19 pandemic projections were affected. Confirmed 8 organizations and 200 staff received information on resources.	7-1-20-6-30-21		Continued
<b>FY21-22</b> – Projected 15 organizations, 400 individuals educated on resources. Actual 21 organizations, 1,015 received information on resources.	7-1-21-6-30-22		Continued
<b>FY22-23</b> – Projected 15 organizations, 400 individuals educated on resources. Actual 6 organizations / 80 individuals.	7-1-22-6-30-23		Continued
<b>FY23-24</b> – Projected 15 organizations, 400 individuals educated on resources.	7-1-23-6-30-24		Continued

<p><b>Objective #2:</b> A12AA staff will cultivate media contacts regarding A12AA's mission, programs and services it provides, as well as creating opportunities for Agency staff to present information.</p> <p><b>Outcome:</b> The public will receive current information regarding A12AA services and programs.</p> <p><b>Measurement:</b> The number of Public Information activities completed and the circulation number.</p> <p><b>FY20-21</b> – Projected 20 activities with 400,000 circulation. 73 activities with 1,860,600 enrollments.</p> <p><b>FY21-22</b> – As restrictions lift, projected 20 activities with 400,000. Actual 97 activities with 475,370.</p> <p><b>FY22-23</b> – Projected 20 activities with 400,000. Actual 45 activities / 7808 consumers.</p> <p><b>FY23-24</b> – Projected 20 activities with 400,000 circulation.</p>	7-1-20-6-30-24	IIIB	New
	7-1-20-6-30-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23		Continued
	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<p><b>Objective #3:</b> The A12AA Advisory Council Legislative Committee and the CA Senior Legislators will complete individual presentations to Advisory Council, Commissions on Aging, service organizations and senior groups in their respective counties, to distribute information and updates on senior issues and proposed and/or enacted legislation affecting seniors.</p> <p><b>Outcome:</b> Broadened awareness and advocacy on legislation regarding senior issues.</p> <p><b>Measurement:</b> The number of presentations.</p> <p><b>FY20-21</b> – Projected 8 presentations. 14 presentations made.</p> <p><b>FY21-22</b> – Projected 8 presentations. Actual 9 presentations and sharing of information.</p> <p><b>FY22-23</b> – Projected 8 presentations. 4 presentations.</p> <p><b>FY23-24</b> – Projected 8 presentations.</p>	7-1-20-6-30-24	IIIB	New
	7-1-20-6-30-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23		Continued
	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<p><b>Objective #4:</b> The Advisory Council Transportation committee will research and develop a transportation chart of available transportation for each county. The committee will work with mobility managers in each county. The chart will be distributed to individuals, organizations, FB pages and website.</p> <p><b>Outcome:</b> Consumers will be aware of available transportation options.</p> <p><b>Measurement:</b> The number of transportation charts distributed.</p>	7-1-20-6-30-24	IIIB	New

<b>FY20-21</b> - Projected 400 distribution. Due to pandemic restrictions, 100 charts distributed. <b>FY21-22</b> – Projected 400 distributed. Actual 100 charts distributed. Updated transportation charts. <b>FY22-23</b> – Projected 200 distributed. 100 distributed. <b>FY23-24</b> – Projected 100 distributed.	7-1-20-6-30-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23		Continued
	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<b>Objective #5:</b> The Advisory Council Public Information Committee will develop a template and process to advertise regular Advisory Council meetings for newspapers, publications, websites or Facebook. <b>Outcome:</b> Advisory Council meetings will be advertised to the general public and vacancies on the Advisory Council Board will appear in media. <b>Measurement:</b> The number of advertisements. <b>FY20-21</b> – Projected 4 advertisements. 5 notices placed on websites, FB pages or newspapers. <b>FY21-22</b> – Projected 10 notices. 6 notices placed on FB pages or in newspapers. <b>FY22-23</b> – Projected 6 notices. Actual 4 notices. <b>FY23-24</b> – Projected 6 notices.	7-1-20-6-30-24	IIIB	New
	7-1-20-6-30-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23		Continued
	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<b>Objective #6:</b> The Advisory Council Public Information Committee will draft articles on senior issues for newspapers, publications, websites or Facebook. <b>Outcome:</b> The public will be informed concerning older adult issues. <b>Measurement:</b> Number of articles published. <b>FY20-21</b> – Projected 4 articles published. Actual 0 articles published. <b>FY21-22</b> – As restrictions lift, projected 4 articles published. Actual 0 articles published. <b>FY22-23</b> – Projected 4 articles published. Actual 0 article published. <b>FY23-24</b> – Projected 4 articles published.	7-1-20-6-30-24	IIIB	New
	7-1-20-6-30-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23		Continued
	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<b>Objective #7:</b> Outreach by A12AA staff will distribute current Agency information to individuals and organizations that provide supportive services to age 60+ adults, caregivers and persons with disabilities. <b>Outcome:</b> Broadened awareness on supportive services offered in each community for older adults, caregivers and persons with disabilities. <b>Measurement:</b> Number of outreach materials	7-1-20-6-30-21	IIIB	New

distributed. <b>FY20-21</b> – Projected 5,000 contacts. Due to COVID-19 pandemic, objective was affected. 24 contacts made with 120,000 distribution (radio ad). <b>FY21-22</b> – As restrictions lift, projected 1,000 outreach materials distributed. Actual 750 materials distributed. <b>FY22-23</b> – Projected 1,000 contacts. Actual 12 activities / 823 contacts. <b>FY23-24</b> – Projected 1,000 contacts.	7-1-20-6-30-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23		Continued
	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<b>Objective #8:</b> Advisory Council Legislative Committee and the CA Senior Legislators will coordinate, at a minimum, one educational meeting a year for Advisory Council members, A12AA staff or Providers, to distribute information and updates on senior issues and proposed an/or enacted legislation affecting seniors. <b>Measurement:</b> Number of presentations. <b>Outcome:</b> Awareness of legislation affecting seniors. <b>FY20-21</b> – Projected 1 meeting. Actual 1 meeting. <b>FY21-22</b> - Projected 1 meeting. Actual 1 meeting. <b>FY22-23</b> – Projected 1 meeting. Actual 1 meeting. <b>FY23-24</b> - Projected 1 meeting.		IIIB	New
	7-1-20-6-30-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23		Continued
	<b>7-1-23-6-30-24</b>		<b>Continued</b>

**Goal #2: The Agency will strengthen existing partnerships with community groups and endeavor to establish partnerships with compatible community organizations to continue to provide community based services.**

**Rationale:** The age 60+ population in our PSA is continuing to increase. It is imperative to partner with compatible organizations to develop a coordinated, integrated system of care to provide essential services for older adults, persons with disabilities and caregivers.

List Objective Number and Objectives	Projected Start & End dates		Update Status
<b>Refer to CCR Article 3, Section 7300 (c)</b>			
<b>Objective #1:</b> Select Advisory Council Committee members will attend the Social Services Transportation Advisory Council (SSTAC) meetings and other transportation related meetings in each county to promote improved services for the older adult population particularly for geographically isolated individuals. <b>Outcome:</b> Gathering of transportation information and advocating on behalf of the older adult population. <b>Measurement:</b> The number of meetings attended. <b>FY20-21</b> – Attend projected 8 meetings. Adv. Cl. members and staff attended 10 meetings. <b>FY21-22</b> – Projected 8 meetings. Actual 12 meetings. <b>FY22-23</b> – Projected attend 8 meetings. Actual attended 9 meetings. <b>FY23-24</b> – Projected attend 8 meetings.	7-1-20-6-30-21  7-1-20-6-30-21  7-1-21-6-30-22 7-1-22-6-30-23  7-1-23-6-30-24	IIB	New  Continued  Continued Continued  Continued
<b>Objective #2:</b> The Advisory Council Housing Committee and A12AA staff will present integrating senior housing options to county planning departments, planning commissions, housing advisory committees and developers and community organizations to encourage consideration of senior housing options in each county General Plan - Housing Plan. <b>Outcome:</b> County planning departments, planning commissions, developers and community organizations will receive information to support the need for accessible and affordable housing options for senior community members to age in place. <b>Measurement:</b> Number of presentations made and number of meetings attended. <b>FY20-21</b> – Projected 8 presentations and 8 meetings. 12 meetings attended, 1 presentation made. <b>FY21-22</b> – Projected 8 meetings attended; 4 projected presentations. Actual 11 meetings attended; Housing	7-1-20-6-30-21  7-1-20-6-30-21  7-1-21-6-30-22	IIIB	New  Continued  Continued

Resources programs for each county sent to Advisory Council members. <b>FY22-23</b> – Projected 8 meetings attended; 4 presentations. Actual 8 meetings attended. <b>FY23-24</b> – Projected 8 meetings attended.	7-1-22-6-30-23 <b>7-1-23-6-30-24</b>		Continued <b>Continued</b>
<b>Objective #3:</b> A12AA staff will collaborate with professionals in Amador, Calaveras, Mariposa and Tuolumne counties to conduct presentations on topics related to older adults and aging. <b>Outcome:</b> Participants will gain knowledge and information regarding aging. <b>Measurement:</b> The number of attendees and information distributed. <b>FY20-21</b> – Projected 4 events with 40 attendees. Due to COVID-19 pandemic, numbers were affected. 1 zoom mtg. 4 local organizations handed out flyers; 66 attendees. <b>FY21-22</b> – As restrictions lift, projected 2 events with 40 attendees. Actual 5 events; 100 attendees. <b>FY22-23</b> – Projected 4 events with 40 attendees. Actual 6 events / 80 attendees. <b>FY23-24</b> – Projected 4 events with 40 attendees.	7-1-20-6-30-24  7-1-20-6-30-21 7-1-21-6-30-22 7-1-22-6-30-23 <b>7-1-23-6-30-24</b>	IIIB	New  Continued  Continued <b>Continued</b>
<b>Objective #4:</b> The Advisory Council, A12AA staff and County Commissions on Aging (COA) from various counties will develop strategies to connect older adults with emergency (disaster) prep information. <b>Outcome:</b> The aging population will receive information: 1) making personal emergency plans; 2) signing up for county emergency alert systems. <b>Measurement:</b> The number of related open houses or meetings and number of information packets distributed. <b>FY 20-21</b> – Projected 4 open houses or meetings and 200 information packets distributed. Due to COVID-19 pandemic, not able to conduct open houses. Shared information regarding pandemic with online sources and participants. Staff assisted with COVID-19 vaccine sign ups. Adv. Cl. members volunteered at clinics. <b>FY21-22</b> – As restrictions lift, projected 2 open houses or meetings and 100 information packets distributed. Actual 0 open houses; 6 emer prep flyers to 80 caregivers. <b>FY22-23</b> – Projected 6 distributions to 100 participants Actual 6 emer prep flyers to 80 caregivers. <b>FY23-24</b> – Projected 6 distributions to 100 participants.	7-1-20-6-30-21  7-1-20-6-30-21  7-1-21-6-30-22  7-1-22-6-30-23 <b>7-1-23-6-30-24</b>	IIIB	New  Continued  Continued  Continued <b>Continued</b>

**Goal #3: The Agency will develop and coordinate a comprehensive Community Education Program regarding information on each facet of Medicare and Medicare Savings programs for eligible seniors, persons with disabilities and caregivers, to ensure they have access to current information when making necessary Medicare related decisions.**

**Rationale:** The A12AA HICAP staff and volunteer counselors will ensure Medicare options and supplemental insurance information are accessible and understandable for Medicare recipients. These options include information on the Medicare Part D drug coverage, Low Income Subsidy (LIS), Medicare Savings Program, Medicare Advantage programs and Supplemental insurance. These program are complex which requires community education and a significant amount of one-on-one counseling to enable Medicare recipients to make pertinent and accurate choices.

List Objective Number and Objectives	Projected Start & End dates		Update Status
<b>Refer to CCR Article 3, Section 7300 (c)</b>			
<b>Objective #1:</b> A12AA HICAP staff will maintain and expand rural counseling sites. One new site will be established in Calaveras & Tuolumne Counties. <b>Outcome:</b> Increased accessibility to HICAP services in rural counties. <b>Measurement:</b> Number of additional sites opened.	7-1-20-6-30-24	HICAP	New
<b>FY20-21</b> – Projected 1 additional site. Due to COVID-19 pandemic, not able to open additional site.	7-1-20-6-30-21		
<b>FY21-22</b> – As restrictions lift, projected opening of 1 additional site. Actual-opened additional site and added 1 counselor	7-1-21-6-30-22		Continued
<b>FY22-23</b> – Maintain counseling sites and open in-person appointments as restrictions lift. Maintained counseling sites and returned to in-person and phone appointments.	7-1-22-6-30-23		Continued
<b>FY23-24</b> – Maintain counseling sites and open 1 additional counseling site in Tuolumne County.	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<b>Objective #2:</b> A12AA HICAP staff will use technology to broaden education opportunities. <b>Outcome:</b> The aging population will receive information through virtual and digital means. <b>Measurement:</b> The number of hits on website and Facebook related to Medicare issues.	7-1-20-6-30-24	HICAP	New
<b>FY20-21</b> - Projected 600 hits from website. As of 2-22, 484 hits on HICAP on A12 webpage; 716 contacts through FB.	7-1-20-6-30-21		
<b>FY21-22</b> - Projected 700 hits from website and Facebook. Actual – 665 hits on website; 725 contacts on FB.	7-1-21-6-30-22		Continued



<p><b>FY22-23</b> – Projected 800 hits from website and Facebook. Actual 2,259 hits on website; 21,277 views on Facebook; used grant to boost posts. Conducted phone and Zoom appts. for remote clients, using email to send counseling materials.</p> <p><b>FY23-24</b> – Projected 5,000 hits from website and Facebook. Utilize CHA-SMP partnership to offer New HICAP Counselor Training.</p>	<p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>		<p>Continued</p> <p><b>Continued</b></p>
<p><b>Objective #3:</b> A12AA HICAP staff will 1) expand both Community Education and Outreach by partnering with organizations that target low-income, minority and rural residents by attending local food banks to target low-income dual eligible clients.</p> <p>2) During Part D enrollment, HICAP will have volunteer available to answer questions for walk-in clients.</p> <p>3) HICAP staff will conduct a marketing campaign to ensure doctor's office within the PSA have knowledge of HICAP services and receive HICAP brochures.</p> <p>4) HICAP staff will partner with Advisory Council members to distribute pertinent Medicare information in their communities.</p> <p><b>Outcome:</b> Medicare beneficiaries and low-income dual eligible beneficiaries will receive education about HICAP services and how the program can assist them.</p> <p><b>Measurement:</b> Number of Community Education and Outreach events attended. Number of Medicare, pre-Medicare and dual eligible beneficiaries reached.</p> <p><b>FY20-21</b> – Projected 120 Community Education &amp; Outreach events; Projected 6,000 reached. Completed 15 outreaches, 4 community educations; 43 contacts; 160,000 contacts reached through advertising.</p> <p><b>FY21-22</b> – Completed 5 Community Education &amp; 42 Outreach events; 1494 contacts; 744,104 contacts reached through advertising.</p> <p><b>FY22-23</b> – Projected 10 Community Education &amp; Outreach events; projected 1000 contacts.</p> <p>1) Completed 15 Community Education &amp; 163 Outreach events; 1517 contacts; 635,686 contacts reached through advertising.</p> <p>2) Designated HICAP volunteers and staff to assist walk in clients and New to Medicare beneficiaries during Open Enrollment.</p> <p>3) Outreach Specialist conducted marketing campaign distributing HICAP materials to doctor's offices, senior</p>	<p>7-1-20-6-30-24</p> <p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p>	<p>HICAP</p>	<p>New</p> <p>Continued</p> <p>Continued</p> <p>Continued</p>

<p>centers, pharmacies, local groups, post office, libraries, and other community locations.</p> <p>4) Conducted face-to-face and virtual interactive presentation with local groups and community partners that will distribute HICAP materials to their communities.</p> <p><b>FY23-24</b> – Projected 15 Community Education &amp; 100 Outreach events; projected 1500 Community Education contacts &amp; 700,000 outreach contacts.</p>	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<p><b>Objective #4:</b> A12AA HICAP staff will conduct Do-it-Yourself (DIY) classes regarding Part D Plans. Staff will educate clients on a step by step process to evaluate and change their own Part D plans during 10-15 to 12-7.</p> <p><b>Outcome:</b> Participants will be able to navigate the Medicare website to change their own Part D plan.</p> <p><b>Measurement:</b> The number of classes and attendees.</p> <p><b>FY20-21</b> – Projected 4 classes with 40 attendees. Due to COVID-19 pandemic, 0 classes were conducted.</p> <p><b>FY21-22</b> – HICAP staff developed a step-by-step guide to assist individuals with navigating the Medicare website: 150 guides sent to Medicare recipients.</p> <p><b>FY22-23</b> – HICAP staff projects 4 classes with 40 attendees for Medicare instruction. 0 classes were conducted. 785 Medicare plan finder step-by-step guides distributed. HICAP staff provided step-by-step education and guidance to computer savvy clients during phone appts.</p> <p><b>FY23-24</b> – A12AA HICAP staff project to provide 800 Medicare Plan Finder step-by-step guides during open enrollment. A12AA HICAP will continue to provide one-on-one counseling and step-by-step guidance to computer savvy clients.</p>	<p>7-1-20-6-30-24</p> <p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>	HICAP	<p>New</p> <p>Continued</p> <p>Continued</p> <p>Continued</p> <p><b>Continued</b></p>
<p><b>Objective #5:</b> A12AA HICAP staff will develop and implement a recruitment campaign to train new HICAP volunteers. HICAP partnered with CHA-SMP to offer new HICAP Counselor Training Course.</p> <p><b>Outcome:</b> Increase HICAP volunteer participation in service area.</p> <p><b>Measurement:</b> The number of registered HICAP volunteers.</p> <p><b>FY22-23</b> – Implemented new Volunteer Recruitment Campaign via local newspapers, radio stations, Facebook and Senior Center newsletters.</p>	<p>7-1-22-6-30-24</p> <p>7-1-22-6-30-23</p>		<p>New</p> <p>Continued</p>

<b>FY23-24</b> – Projected to train 2 new HICAP volunteer counselors in service area. All volunteers will be certified in HICAP and SMP.	<b>7-1-23-6-30-24</b>		<b>Continued</b>
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APPROVED

**Goal #4: The Agency will continue to provide leadership in developing and coordinating services with emphasis on education on topics related to older adults; enhancement and integration of home and community based services; provide education on services to encourage older adults to continue to live in their residences as long as safely possible.**

**Rationale:** The mission of A12AA is to support maximum independence for older adults, persons with disabilities to have them stay in their homes as long as safely possible.

A12AA will coordinate services with the Ombudsman program to protect the dignity of individuals in facilities.

<b>List Objective Number and Objectives</b>	<b>Projected Start &amp; End dates</b>		<b>Update Status</b>
<b>Refer to CCR Article 3, Section 7300 (c)</b>			
<b>Objective #1:</b> Ombudsman staff and volunteers will conduct facility presentations for mandated reporter training. <b>Outcome:</b> An expanded awareness and reporting of mandated reporting responsibilities. <b>Measurement:</b> Number of mandated reporter trainings.	7-1-20-6-30-24	IIIB	New
<b>FY20-21</b> – Projected 3 trainings. Due to COVID-19 pandemic, 0 were conducted.	7-1-20-6-30-21		Continued
<b>FY21-22</b> – As restrictions lift, projected 3 trainings. 4 trainings conducted.	7-1-21-6-30-22		Continued
<b>FY22-23</b> – Projected 10 trainings. 8 trainings conducted.	7-1-22-6-30-23		Continued
<b>FY23-24</b> – Projected 10 trainings.	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<b>Objective #2:</b> A12AA will establish relationships with Legal partners in several counties in order to provide older adults with legal assistance. <b>Outcome:</b> Legal assistance for older adults will be available. <b>Measurement:</b> Number of Legal service units.	7-1-20-6-30-24	IIIB	New
<b>FY20-21</b> - Projected 200 units. Actual 167 service units.	7-1-20-6-30-21		Continued
<b>FY21-22</b> - Projected 200 service units. 3 <sup>rd</sup> quarter 187 units.	7-1-21-6-30-22		Continued
<b>FY22-23</b> – Projected 200 units. Actual 179 consumers / 205 service units. 2 <sup>nd</sup> qtr.	7-1-22-6-30-23		Continued
<b>FY23-24</b> – Projected 200 units.	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<b>Objective #3:</b> The Elder Abuse Prevention Program coordinator will collaborate with professionals from	7-1-20-6-30-24	VII	New

<p>APS, DA, law enforcement and other agencies to the purpose of conducting Elder Abuse Prevention trainings.</p> <p><b>Outcome:</b> Broadened awareness and a clearer understanding of elder abuse prevention.</p> <p><b>Measurement:</b> Number of trainings conducted.</p> <p><b>FY20-21</b> – Projected 3 trainings. Actual 12 trainings conducted.</p> <p><b>FY21-22</b> – Projected 3 trainings. 8 trainings conducted.</p> <p><b>FY22-23</b> – Projected 16 trainings. 7 trainings conducted.</p> <p><b>FY23-24</b> – Projected 8 trainings.</p>	<p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>		<p>Continued</p> <p>Continued</p> <p>Continued</p> <p><b>Continued</b></p>
<p><b>Objective #4:</b> The Elder Abuse Prevention Program Coordinator will collaborate with A12AA's Family Caregiver Programs (Title III E) to educate caregivers on how to report elder abuse.</p> <p><b>Outcome:</b> The III E Family caregivers will be educated regarding the signs of elder abuse and how to report it.</p> <p><b>Measurement:</b> The number of products sent.</p> <p><b>FY20-21</b> – Projected 60 flyers. FCSP clients received 60 signs of elder abuse flyers.</p> <p><b>FY21-22</b> – Projected 60 flyers distributed. 60 flyers distributed to Title III E FCSP participants.</p> <p><b>FY22-23</b> – Projected 60 flyers distributed. Presentation at FCSP Title III E Caregiver Workshop - 60 flyers distributed (May);</p> <p><b>FY23-24</b> – Projected 60 flyers distributed to Title III E participants.</p>	<p>7-1-20-6-30-24</p> <p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>	<p>VII</p>	<p>New</p> <p>Continued</p> <p>Continued</p> <p>Continued</p> <p><b>Continued</b></p>
<p><b>Objective #5:</b> Ombudsman staff will conduct volunteer trainings to recruit volunteers.</p> <p><b>Outcome:</b> Stronger program advocacy and increased system advocacy by volunteers for residents in facilities.</p> <p><b>Measurement:</b> The number of trainings.</p> <p><b>FY20-21</b> – The program will conduct trainings as needed to increase the number of volunteers for the Ombudsman program. Due to COVID-19 pandemic, 0 trainings were conducted.</p> <p><b>FY21-22</b> – Projected 1 training. 2 trainings conducted.</p>	<p>7-1-20-6-30-24</p> <p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p>	<p>IIIB</p>	<p>New</p> <p>Continued</p> <p>Continued</p>

<b>FY22-23-</b> Projected 1 training. 1 training conducted partnering with Stanislaus County Ombudsman. 1 volunteer added. <b>FY23-24 –</b> Projected 1 training.	7-1-22-6-30-23  <b>7-1-23-6-30-24</b>		Continued  <b>Continued</b>
<b>Objective #6:</b> MSSP Care Managers will provide education and assistance to clients regarding emergency preparedness. <b>Outcome:</b> Eligible clients will receive updated emergency prep packets and yearly review of emergency plans. <b>Measurement:</b> The number of emergency packets distributed and the number of emergency plans reviewed. <b>FY20-21 –</b> Care managers will distribute 20 emergency plans and review 80 emergency plans. Care managers distributed 20 emergency packets and supplies; also reviewed 80 emergency plans. <b>FY21-22 –</b> Care managers will distribute 20 emergency packets and supplies; review 80 emergency plans. 80 emergency plans reviewed; 21 emergency packets and supplies were distributed. <b>FY22-23 –</b> Care managers distribute 20 emergency plans and review 80 emergency plans. Care managers reviewed 100 emergency plans at annual reassessment. Also discussed during monthly phone call to client. <b>FY23-24 –</b> Care managers will review emergency plans with approximately 100 clients. New enrollees will receive emergency plan packets.	7-1-20-6-30-24  7-1-20-6-30-21  7-1-21-6-30-22  7-1-22-6-30-23  <b>7-1-23-6-30-24</b>	MSSP       	New   Continued  Continued  Continued  <b>Continued</b>
<b>Objective #7:</b> A12AA staff will work with local licensed, bonded agencies and contracted Providers to provide chore, homemaker, or personal care services to age 60+ clients. <b>Outcome:</b> Clients age 60+ will receive chore or homemaker services to support client's quality of life and independence to remain in their homes. <b>Measurement:</b> Number of unduplicated clients served and number of units. <b>FY20-21 –</b> Projected 75 clients and 255 units. Actual 121 clients served with 679 units. Several additional clients and units used but not recorded in WellSky per CDA instructions <b>FY21-22 –</b> Projected 75 clients and 250 units. 3 <sup>rd</sup> quarter - Actual 75 clients and 360 units.	7-1-20-6-30-24  7-1-20-6-30-21  7-1-21-6-30-22	IIIB   	New   Continued  Continued

<b>FY22-23</b> – Projected 75 clients and 250 units. Actual 55 clients and 277 units.	7-1-22-6-30-23		Updated
<b>FY23-24</b> – Projected 75 clients and 250 units.	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<b>Objective #8:</b> A12AA staff will work with contracted Providers to assist clients age 60+ with transportation (one way trips) to and from their home to appropriate medical appointments, local errands, or pharmacy. <b>Outcome:</b> Clients age 70+ will receive transportation to appropriate medical appointments and errands allowing them to continue to live independently. <b>Measurement:</b> The number of unduplicated clients served. Number of one-way trips provided. <b>FY20-21</b> – Projected 400 clients and 6,680 units. Due to pandemic restrictions this this category was impacted. Actual 400 clients with 7,369 units. <b>FY21-22</b> – Projected 400 clients and 6,360 units. 3 <sup>rd</sup> quarter 414 clients and 6,564 units. <b>FY22-23</b> – Projected 400 clients and 6,360 units. Actual 454 clients and 7,364 units. <b>FY23-24</b> – Projected 400 clients and 6,360 units.	7-1-20-6-30-24	IIIB	New
	7-1-20-6-30-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23		Continued
	<b>7-1-23-6-30-24</b>		<b>Continued</b>

**GOAL #5: The Agency will coordinate with and promote current programs to address important unmet needs identified by older adults, caregivers and persons with disabilities to live independently in the community.**

**Rationale:** The Agency recognizes that changes in the characteristics of the population may require adjustments or development of different ways services are provided to older adults, caregivers and persons with disabilities.

List objective Numbers and Objectives	Projected Start & End Dates		Update Status
<b>Refer to CCR Article 3, Section 7300 (c)</b>			
<b>Objective #1:</b> A12AA will offer a physical fitness group activity teaching yoga, strength training, or pilates conducted by a certified fitness professional designed to improve physical health and improve balance, core strength or mobility through a series of designed exercises, poses and stretches. <b>Outcome:</b> Improved balance to aid in fall prevention, core strength and mobility for participants. <b>Measurement:</b> Number of unduplicated clients and number of hours. <b>FY20-21</b> – Projected 100 clients and 1,500 units. 119 clients and 1,208 units. <b>FY21-22</b> – Projected 75 clients and 1,000 units. 3 <sup>rd</sup> quarter - 131 clients and 1,635 units. <b>FY22-23</b> – Projected 75 clients and 1,000 units. Actual 136 clients and 1,561 units. <b>FY23-24</b> – Projected 75 clients and 1,000 units.	7-1-20–6-30-24     7-1-20-6-30-21 7-1-21-6-30-22 7-1-22-6-30-23 <b>7-1-23-6-30-24</b>	IIIB     Continued Continued Continued <b>Continued</b>	New     Continued Continued Continued <b>Continued</b>
<b>Objective #2:</b> A12AA will provide eligible clients with minor home repairs by contracting with local licensed, bonded contractors to provide residential repairs/modifications of homes that are necessary to facilitate the ability of older adults to remain at home; includes minor repairs in order to meet safety, health issues and code standards; to repair problems which threaten their health, safety and independence. <b>Outcome:</b> Improved home repair services for residents and identification of local vendors. <b>Measurement:</b> The number of residential repair/modifications completed. <b>FY20-21</b> – Projected 80 modifications completed. 72 modifications completed. <b>FY21-22</b> – Projected 80 modifications. 3 <sup>rd</sup> quarter - 50 modifications completed. <b>FY22-23</b> – Projected 80 modifications. 2 <sup>nd</sup> qtr. – 34 clients, 37 modifications.	7-1-20 – 6-30-24     7-1-20-6-30-21 7-1-21-6-30-22 7-1-22-6-30-23	IIIB     Continued Continued Continued	New     Continued Continued Continued



<b>FY23-24</b> – Projected 80 modifications.	<b>7-1-23-6-30-24</b>		<b>Continued</b>
<p><b>Objective #3:</b> A12AA will offer an evidence based physical fitness program to improve physical health, build core strength, and improve balance by coordinating a series of sessions instructed by a certified fitness professional. The trainers engage the participants in T'ai Chi, Arthritis Foundation T'ai Chi Program developed by Dr. Paul Lam or Walk w/Ease through the Arthritis Foundation and Geri-Fit strength training.</p> <p><b>Outcome:</b> Clients will build core strength, increase flexibility and improve balance which improves overall physical fitness and aid in fall prevention.</p> <p><b>Measurement:</b> Number of clients in attendance and number of hours attended.</p> <p><b>FY20-21</b> – Projected 90 clients and 1,800 units. Due to COVID-19 pandemic, numbers were impacted, 30 clients and 180 units.</p> <p><b>FY21-22</b> – Projected 50 clients and 1,500 units. 3<sup>rd</sup> quarter – 21 participants and 203 units.</p> <p><b>FY22-23</b> – Projected 50 clients and 1,500 units. 2<sup>nd</sup> qtr. - 33 clients / 232 units.</p> <p><b>FY23-24</b> – Projected 50 clients and 1,500 units.</p>	<p>7-1-20 – 6-30-24</p> <p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>	<p>IIID</p>	<p>New</p> <p>Continued</p> <p>Continued</p> <p>Continued</p> <p><b>Continued</b></p>

<b>GOAL #6: The Agency will strengthen current services under the Family Caregiver Support program (FCSP) for caregivers in order to ensure older adults, persons with disabilities, their families or informal caregivers and older relatives caring for a child, receive information for self-determination, dignity and responsible choice.</b>			
<b>Rationale:</b> The need for information and outreach, particularly in this rural, geographic isolated area where caregivers have limited or no knowledge of the available services is critically important. In order to improve the quality and quantity of informal care, it is imperative for caregivers to be aware of available support services and programs.			
<b>List Objective Number(s) ____ and Objective (s)</b> <b>[Refer to CCR Article 3, Section 7300 (c)]</b>	<b>Projected Start and End Dates</b>		<b>Update Status</b>
<b>Objective #1:</b> A12AA Family Caregiver Support Program (FCSP) will collaborate with grandparents in Amador, Calaveras, Mariposa and Tuolumne to conduct outreaches and increase awareness of FCSP Access, Information Services and Support services. <b>Outcome:</b> Grandparents will learn about FCSP services available for them. <b>Measurement:</b> The number of grandparents contacted. <b>FY20-21</b> – Projected 110 grandparents will be contacted. COVID-19 restrictions affected this objective. 20 grandparents were contacted. <b>FY21-22</b> – Projected 100 grandparents contacted. Estimated 500 contacted. <b>FY22-23</b> – Projected 100 older relative contacted. <b>FY23-24</b> – Projected 100 older relative contacted.	7-1-20-6-30-24	IIIE	New
	7-1-20-6-30-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23 <b>7-1-23-6-30-24</b>		Continued <b>Continued</b>
<b>Objective #2:</b> A12AA FCSP staff will provide education to the hospital discharge planners, home health agencies and clinic staff members for the purposes of awareness, understanding and utilization of A12AA FCSP program and services. <b>Outcome:</b> An improved understanding and increased awareness of the Family Caregiver Support Program. <b>Measurement:</b> The number of agency contacts. <b>FY20-21</b> – Projected 11 organization contacts. COVID-19 restrictions affected this objective. 8 organization contacts made. <b>FY21-22</b> – Projected 11 organization contacts. 60 toolkits delivered to SNF, RCFE, and Catholic Charities. <b>FY22-23</b> – Projected 11 organization contacts. <b>FY23-24</b> – Projected 11 organization contacts.	7-1-20-6-30-24	IIIE	New
	7-1-20-6-20-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23 <b>7-1-23-6-30-24</b>		Continued <b>Continued</b>
<b>Objective #3:</b> FCSP staff will collaborate with UC Davis educators to conduct a caregiver workshop on Dementia and Caregiving for caregivers. <b>Outcome:</b> Caregivers will receive education regarding forms of dementia and tools to assist them with living with dementia. Caregivers will be better informed of the various services in	7-1-20-6-30-24	IIIE	New

<p>their communities to encourage them in their role as caregiver.</p> <p><b>Measurement:</b> The number of caregivers who attend event.</p> <p><b>FY20-21</b> – Projected attendance 40 caregivers. Due to pandemic restrictions, projections not reached.</p> <p><b>FY21-22</b> – Projected attendance 40 caregivers.</p> <p><b>FY22-23</b> – Projected attendance 40 caregivers. Event scheduled for May 2023; 40 caregivers.</p> <p><b>FY23-24</b> – Projected attendance 40 caregivers.</p>	<p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>		<p>Postponed</p> <p>Postponed</p> <p>Reinstated</p> <p><b>Continued</b></p>
<p><b>Objective #4:</b> FCSP staff will attend Health Fairs, Senior Expos, Senior Health Days, older adult related events and advertise in publications in Amador, Calaveras, Mariposa and Tuolumne Counties to distribute information regarding the FCSP program.</p> <p><b>Outcome:</b> The public will be made aware of FCSP services available for caregivers.</p> <p><b>Measurement:</b> The number of events attended and contacts made.</p> <p><b>FY20-21</b> – Projected 15 community education events with estimated 3,000 contacts made. Due to COVID-19 restrictions, objective was restructured to track 29 advertisements with 145,000 contacts.</p> <p><b>FY21-22</b> – As restrictions lift, projected 10 community education events with estimated 3,000 contacts made. 10 advertisements with 36,000 contacts.</p> <p><b>FY22-23</b> – Projected 10 community education events with estimated 3,000 contacts made. Actual 8 events / 982 contacts made – 2<sup>nd</sup> qtr.</p> <p><b>FY23-24</b> – Projected 10 community education events with estimated 3,000 contacts made.</p>	<p>7-1-20-6-30-24</p> <p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>	<p>IIIE</p>	<p>New</p> <p>Updated</p> <p>Continued</p> <p>Continued</p> <p><b>Continued</b></p>
<p><b>Objective #5:</b> FCSP staff will work with caregivers in each county to provide them with updated and pertinent information on topics related to caregiving.</p> <p><b>Outcome:</b> Caregivers will become aware of resources available to assist them in dealing with the identified issues.</p> <p><b>Measurement:</b> The number of FCSP contacts made.</p> <p><b>FY20-21</b> – Projected 3,000 contacts. COVID-19 restrictions affected objective. 581 contacts were made.</p> <p><b>FY21-22</b> – Projected 3,000 contacts. 879 contacts made.</p> <p><b>FY22-23</b> – Projected 3,000 contacts. 840 contacts made.</p> <p><b>FY23-24</b> – Projected 3,000 contacts.</p>	<p>7-1-20-6-30-24</p> <p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>	<p>IIIE</p>	<p>New</p> <p>Continued</p> <p>Continued</p> <p>Continued</p> <p><b>Continued</b></p>
<p><b>Objective #6:</b> FCSP staff will work with clients to provide them with Support Services: caregiver assessment, counseling, peer counseling, support group, training, care management; Respite Care: in-home supervision, homemaker assistance, in-home personal care, home chore, out-of-home daycare; Supplemental Services: assistive devices, home adaptations, cash/material aid.</p> <p><b>Outcome:</b> Caregivers will have access to FCSP services to care for their loved one in their home as long as safely possible.</p>	<p>7-1-20-6-30-24</p>	<p>IIIE</p>	<p>New</p>

<b>Measurement:</b> The number of service units used by caregivers.			
<b>FY20-21</b> – Projected 1,310 service units. Tracked 2,076 service units.	7-1-20-6-30-21		Continued
<b>FY21-22</b> – Projected 1,310 service units. 3 <sup>rd</sup> quarter, 137 caregivers received 2,668 service units.	7-1-21-6-30-22		Continued
<b>FY22-23</b> – Projected 1,310 service units. Actual 1,106 units.	7-1-22-6-30-23		Continued
<b>FY23-24</b> – Projected 1,310 service units.	<b>7-1-23-6-30-24</b>		<b>Continued</b>

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**Goal #7: Older adults, persons with disabilities and caregivers in PSA 12 will have access to nutrition services to maintain or improve the physical, psychological and/or social well-being of eligible individuals by providing appropriate nutrition services.**

**Rationale:** Access to Nutrition services are a basic need for frail, vulnerable, disabled and older individuals that can be addressed through providing congregate dining, restaurant dining or home delivered meals that are nutritionally approved with the recommended 1/3 daily nutritional intake. Nutrition training will be provided to the nutrition providers on a regular basis. Nutrition education will be provided to the recipients of congregate dining or home delivered meal services.

List Objective Number(s) _____ and Objective [Refer to CCR Article 3, Section 7300 (c)]	Projected Start and End Dates		Update Status
<b>Objective #1:</b> Advisory Council Nutrition Committee, once a quarter, will assist A12 Registered Dietitian with the 'Dietitian Is In' series. <b>Outcome:</b> Committee members and congregate diners receive pertinent nutrition education. <b>Measurement:</b> The number of 'Dietitian Is In' series attended.	7-1-20-6-30-24	IIIC	New
<b>FY20-21</b> – Projected 8 series attend. Due to pandemic 0 Series were attended.	7-1-20-6-30-21		Continued
<b>FY21-22</b> – As restrictions lift, projected attend 6 series. Restrictions not lifted. 0 series attended.	7-1-21-6-30-22		Continued
<b>FY22-23</b> – Projected 6 series. 0 series attended.	7-1-22-6-30-23		Continued
<b>FY23-24</b> – Projected 6 series.	7-1-23-6-30-24		Continued
<b>Objective #2:</b> A12AA staff will host two nutrition provider meetings for the purpose of promoting and maintaining coordination and referrals to programs to ensure proper referrals are made on behalf of participants. <b>Outcome:</b> Nutrition participants will be informed of services that would be beneficial in maintaining their independence and ability to age in place. <b>Measurement:</b> The number of meetings held.	7-1-20-6-30-24	IIIC	New
<b>FY20-21</b> – A12AA staff will host 2 nutrition provider meetings. 4 nutrition provider meetings held.	7-1-20-6-30-21		Continued
<b>FY21-22</b> – Projected 2 nutrition provider meetings. 2 provider meetings held.	7-1-21-6-30-22		Continued
<b>FY22-23</b> – Projected 4 nutrition provider meetings. 2 provider meetings held.	7-1-22-6-30-23		Continued
<b>FY23-24</b> – Projected 2 nutrition provider meetings.	7-1-23-6-30-24		Continued
<b>Objective #3:</b> A12AA staff will coordinate with nutrition providers to provide accurate and culturally sensitive nutrition information and education to participants to promote better health as it relates to nutrition. <b>Outcome:</b> Nutrition participants will receive information that	7-1-20-6-30-24	IIIC	New

<p>will assist in maintaining their nutritional health.</p> <p><b>Measurement:</b> The number of participants who receive nutritional information.</p> <p><b>FY20-21</b> – Projected number of participants is 1,200. 1,191 participants received nutritional information.</p> <p><b>FY21-22</b> – Projected number of participants – 1,200 participants. 3<sup>rd</sup> quarter – 750 participants received nutritional information.</p> <p><b>FY22-23</b> – Projected number of participants – 750. Actual 820 participants.</p> <p><b>FY23-24</b> – Projected number of participants – 800.</p>	<p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>		<p>Continued</p> <p>Continued</p> <p>Continued</p> <p><b>Continued</b></p>
<p><b>Objective #4:</b> A12AA staff will ensure that low-income older adults age 60+ have access to fresh fruit, vegetables and herbs from Certified Farmer's Markets by providing Farmer's Market coupon booklets when available.</p> <p><b>Outcome:</b> Nutrition participants will have access to fresh fruit, vegetables and herbs from Certified Farmer's Markets.</p> <p><b>Measurement:</b> The number of coupon booklets distributed.</p> <p><b>FY20-21</b> – In June, 2020, 500 booklets will be distributed. A12AA partners with organizations from each county. CDA discontinued the Farmer's Market coupon distribution, 0 booklets distributed.</p> <p><b>FY21-22</b> - CDA sent Area 12 80 for distribution. 80 farmer's market coupons were distributed.</p> <p><b>FY22-23</b> – CDA sent Area 12 400 Farmer's Market coupons. A12 will distribute them through providers and organizations to distribute them. 346 distributed.</p> <p><b>FY23-24</b> – CDA may send Area 12 400 Farmer's Market coupons. A12 will distribute through providers and community organizations.</p>	<p>7-1-20-6-30-24</p> <p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>	IIIC	<p>New</p> <p>Updated</p> <p>Continued</p> <p>Continued</p> <p><b>Continued</b></p>
<p><b>Objective #5:</b> Advisory Council Nutrition Committee will appoint a committee member to interview participants at the nutrition sites on a quarterly basis.</p> <p><b>Outcome:</b> Nutrition information from participants will be communicated to the Providers to improve nutrition services.</p> <p><b>Measurement:</b> The number of interviews and visits conducted quarterly.</p> <p><b>FY20-21</b> – Conduct a minimum of 2 interviews at 4 congregate sites. Due to pandemic, 0 interviews and visits were conducted. Survey sent to 700 to hdm / cong participants.</p> <p><b>FY21-22</b> – Restructured objective from 2 interviews to survey of participants at 4 congregate sites. 750 surveys to participants sent out. 25 completed surveys returned.</p> <p><b>FY22-23</b> - Projected 700 surveys sent out to participants. 0 survey sent.</p> <p><b>FY23-24</b> – Projected 800 surveys sent out to participants.</p>	<p>7-1-20-6-30-24</p> <p>7-1-20-6-30-21</p> <p>7-1-21-6-30-22</p> <p>7-1-22-6-30-23</p> <p><b>7-1-23-6-30-24</b></p>	IIIC	<p>New</p> <p>Continued</p> <p>Updated</p> <p><b>Continued</b></p>
<p><b>Objective #6:</b> A12AA will contract with Providers to provide</p>	7-1-20-6-30-24	IIIC	New

<p>congregate dining or home delivered meals that are nutritionally approved.</p> <p><b>Outcome:</b> Eligible participants have access to nutritional meals.</p> <p><b>Measurement:</b> The number of meals served.</p> <p><b>FY20-21 –</b> The total number of meals projected: congregate 36,304 and home delivered 108,559. Due to COVID-19 pandemic, increases were realized. 57,908 congregate meals; 159,403 home delivered meals.</p> <p><b>FY21-22 -</b> The total number of meals projected: congregate 36,294 and home delivered 92,317.</p> <p><b>FY22-23 –</b> The total number of meals projected: congregate 36,000 and home delivered 92,000. 2<sup>nd</sup> qtr. – 24,666 cong / 75,731 hdm.</p> <p><b>FY23-24 –</b> The total number of meals projected: congregate 36,000 and home delivered 92,000.</p>	7-1-20-6-30-21		Continued
	7-1-21-6-30-22		Continued
	7-1-22-6-30-23		Continued
	<b>7-1-23-6-30-24</b>		<b>Continued</b>

APPROVED

**SECTION 10 - SERVICE UNIT PLAN (SUP) OBJECTIVES****PSA 12****TITLE III/VIIA SERVICE UNIT PLAN OBJECTIVES  
CCR Article 3, Section 7300(d)**

The Service Unit Plan (SUP) uses the National Aging Program Information System (OAAPS) Categories and units of service. They are defined in the [OAAPS State Program Report \(SPR\)](#)

For services not defined in OAAPS, refer to the [Service Categories and Data Dictionary and the National Ombudsman Reporting System \(NORS\) Instructions](#).

1. 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 IIIB, IIIC-1, IIIC-2, IIID, and VIIA. Only report services provided; others may be deleted.

**Personal Care (In-Home) Title IIIB funding****Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	5	4	7
2021-2022	5	4	7
2022-2023	5	4	7
2023-2024	0	4	7

**Homemaker (In-Home) Title IIIB funding****Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	100	4	7
2021-2022	100	4	7
2022-2023	100	4	7
2023-2024	100	4	7

**Chore (In-Home) Title IIIB funding****Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	150	4	7
2021-2022	100	4	7
2022-2023	100	4	7
2023-2024	100	4	7



**Home-Delivered Meal Title IIIC2 funding****Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	108,559	7	6
<b>2021-2022</b>	92,317	7	6
<b>2022-2023</b>	91,649	7	6
<b>2023-2024</b>	91,555	7	6

**Congregate Meals Title IIIC1 funding****Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	36,304	7	6
<b>2021-2022</b>	36,294	7	6
<b>2022-2023</b>	38,886	7	6
<b>2023-2024</b>	34,973	7	6

**Transportation (Access) Title IIIB funding****Unit of Service = 1 one-way trip**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	6,680	4	8
<b>2021-2022</b>	6,360	4	8
<b>2022-2023</b>	6,360	4	8
<b>2023-2024</b>	6,363	4	8

**Legal Assistance Title IIIB funding****Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	200	4	2
<b>2021-2022</b>	200	4	2
<b>2022-2023</b>	200	4	2
<b>2023-2024</b>	200	4	2

**Nutrition Education Titles IIIC1 & IIIC2****Unit of Service = 1 session per participant**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	5,000	7	1, 3
<b>2021-2022</b>	5,000	7	1, 3
<b>2022-2023</b>	5,000	7	1, 3
<b>2023-2024</b>	5,000	7	1, 3

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	4,000	1	1
<b>2021-2022</b>	3,000	1	1
<b>2022-2023</b>	3,000	1	1
<b>2023-2024</b>	3,000	1	1

**Outreach (Access) Title IIIB funding****Unit of Service = 1 contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
<b>2020-2021</b>	1,890	1	7
<b>2021-2022</b>	1,000	1	7
<b>2022-2023</b>	1,000	1	7
<b>2023-2024</b>	1,000	1	7

**2. OAAPS Service Category – “Other” Title III Services**

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

**Title IIIB, 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.

**Other Supportive Service Category – IIIB Health**

**Unit of Service 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
<b>2020-2021</b>	1,500	5	1
<b>2021-2022</b>	1,000	5	1
<b>2022-2023</b>	1,000	5	1
<b>2023-2024</b>	1,000	5	1

**Other Supportive Service Category – Title IIIB Public Information**

**Unit of Service 1 activity**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
<b>2020-2021</b>	20	1	2
<b>2021-2022</b>	20	1	2
<b>2022-2023</b>	20	1	2
<b>2023-2024</b>	20	1	2

**Other Supportive Service Category – Residential Repair/Modification Title IIIB**

**Unit of Service 1 modification**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
<b>2020-2021</b>	80	5	2
<b>2021-2022</b>	80	5	2
<b>2022-2023</b>	80	5	2
<b>2023-2024</b>	80	5	2

**Other Non-Priority Supportive Service Category – Disaster Prep Title IIIB Unit of service 1 product**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
<b>2020-2021</b>	200	2	5
<b>2021-2022</b>	100	2	5
<b>2022-2023</b>	100	2	5
<b>2023-2024</b>	100	2	5

**3. Title IIID/ Disease Prevention and Health Promotion**

**Instructions for Title IIID Disease Prevention and Health Promotion:** Enter the name of the proposed program to be implemented, proposed units of service and the Program Goal and Objective number(s) that provide a narrative description of the program, and explain how the service activity meets the criteria for evidence-based programs described in PM 15-10 if not ACL approved.

**Unit of Service = 1 contact**

**Service Activities:** T'ai Chi / GeriFit

- **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)
<b>2020-2021</b>	1,800	5	3
<b>2021-2022</b>	1,500	5	3
<b>2022-2023</b>	1,500	5	3
<b>2023-2024</b>	1,000	5	1

**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 Reauthorization Act of 2016, 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:**

**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 133 + number of partially resolved complaints 27  
 divided by the total number of complaints received 203 = Baseline Resolution Rate  
70 % FY 2020-2021 Target Resolution Rate 70 %

2. FY 2019-2020 Baseline Resolution Rate:  
 Number of complaints partially or fully resolved 72 divided by the total number  
 of complaints received 75 = Baseline Resolution Rate 96 %  
 FY 2021-2022 Target Resolution Rate 96 %

3. FY 2020 - 2021 Baseline Resolution Rate:  
 Number of complaints partially or fully resolved 40 divided by the total number of  
 complaints received 48 = Baseline Resolution Rate 83 %  
 FY 2022-2023 Target Resolution Rate 88 %

4. FY 2021-2022 Baseline Resolution Rate:  
 Number of complaints partially or fully resolved 19 divided by the total number of  
 complaints receive 28 = Baseline Resolution Rate 68 %  
 FY 2023-2024 Target Resolution Rate 88%

Program Goals and Objective Numbers: Goal 4;Objectives 1, 2, 5

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

1. FY 2018-2019 Baseline: Number of Resident Council meetings: 25  
 FY 2020-2021 Target: 10
2. FY 2019-2020 Baseline: Number of Resident Council meetings attended 7 FY  
 2021-2022 Target: 10
3. FY 2020-2021 Baseline: Number of Resident Council meetings attended 11  
 FY 2022-2023 Target: 12
4. FY 2021-2022 Baseline: Number of Resident Council meetings attended 52  
 FY 2023-2024 Target: 25

Program Goals and Objective Numbers: Goal 4;Objectives 1, 2, 5

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

1. FY 2018-2019 Baseline: Number of Family Council meetings attended 3  
 FY 2020-2021 Target: 3
2. FY 2019-2020 Baseline: Number of Family Council meetings attended 1  
 FY 2021-2022 Target: 5
3. FY 2020-2021 Baseline: Number of Family Council meetings attended 0  
 FY 2022-2023 Target: 1
4. FY 2021-2022 Baseline: Number of Family Council meetings attended 0  
 FY 2023-2024 Target: 1

Program Goals and Objective Numbers: Goal 4;Objectives 1, 2, 5

**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 - 155  
 FY 2020-2021 Target: 100
2. FY 2019-2020 Baseline: Number of Instances 282 FY  
 2021-2022 Target: 285
3. FY 2020-2021 Baseline: Number of Instances 318 FY  
 2022-2023 Target: 350
4. FY 2021-2022 Baseline: Number of Instances 58  
 FY 2023-2024 Target: 60

Program Goals and Objective Numbers: Goal 4;Objectives 1, 2, 5

**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 <u>450</u> FY 2020-2021 Target: <u>250</u>
2. FY 2019-2020 Baseline: Number of Instances <u>373</u> FY 2021-2022 Target: <u>40</u>
3. FY 2020-2021 Baseline: Number of Instances <u>562</u> FY 2022-2023 Target: <u>575</u>
4. FY 2021-2022 Baseline: Number of Instances <u>243</u> FY 2023-2024 Target: <u>250</u>
Program Goals and Objective Numbers: <u>Goal 4; Objectives 1, 2, 5</u>

**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 <u>14</u> FY 2020-2021 Target: <u>8</u>
2. FY 2019-2020 Baseline: Number of Sessions <u>1</u> FY 2021-2022 Target: <u>8</u>
3. FY 2020-2021 Baseline: Number of Sessions <u>0</u> FY 2022-2023 Target: <u>4</u>
4. FY 2021-2022 Baseline: Number of Sessions <u>0</u> FY 2023-2024 Target: <u>5</u>
Program Goals and Objective Numbers: <u>Goal 4; Objectives 1, 2, 5</u>

**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 or 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.

<b>FY 2020-2021</b>
<p><b>FY 2020-2021 Systems Advocacy Effort(s):</b> (Provide one or more new systems advocacy efforts) Systemic Advocacy Efforts for fiscal year 2020-2021</p> <p>The systemic advocacy goal for the Mother Lode LTC Ombudsman Program in FY 2020-2021 is participation in disaster preparedness planning in the four counties that have long-term care facilities Amador, Calaveras, Mariposa and Tuolumne. Working with facilities to ensure the safety of residents during an emergency situation. <b>Outcome:</b> Program Coordinator reviewed long term care and residential care facilities' disaster plans and confirmed the plans were current. And had them send hard copies to the program office for reference.</p>
<b>FY 2021-2022</b>
<p><b>Outcome of FY 2020-2021 Efforts:</b></p> <p><b>FY 2021-2022 Systems Advocacy Effort(s):</b> (Provide one or more new systems advocacy efforts) The systemic advocacy goal for the Mother Lode LTC Ombudsman Program in FY2021-2022 is the Ethic of Care – Prioritize providing residents the kind of assistance they prefer which will best preserve their quality of life. <b>Outcome:</b> The staff and volunteers approached resident's assessments with a more personal view and reviewed their individual and specific needs.</p>
<b>FY 2022-2023</b>
<p><b>Outcome of FY 2021-2022 Efforts:</b></p> <p><b>FY 2022-2023 Systems Advocacy Effort(s):</b> (Provide one or more new systems advocacy efforts) The systemic advocacy goal for the Mother Lode LTC Ombudsman Program in FY2022-2023 is the Ethic of Care – Prioritize providing residents the kind of assistance they prefer which will best preserve their quality of life.</p>
<b>FY 2023-2024</b>
<p><b>Outcome of 2022-2023 Efforts:</b></p> <p><b>FY 2023-2024 Systems Advocacy Effort(s):</b> (Provide one or more new systems advocacy efforts) The systemic advocacy goal for the Mother Lode LTC Ombudsman Program in FY 2023-2024 is to work with the facilities to review the updated Emergency Preparedness procedures to ensure the safety of residents during an emergency situation. <b>Outcome:</b> Program Coordinator will review and discuss disaster plans and confirm the plans used worked.</p>



**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.

- |   |
|---|
| 1. FY 2018-2019 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint <u>3</u> divided by the total number of Nursing Facilities <u>6</u> = Baseline <u>50</u> % FY 2020-2021 Target: 50% |
| 2. FY 2019-2020 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint <u>5</u> divided by the total number of Nursing Facilities = Baseline <u>83</u> % 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 complaint <u>1</u> divided by the total number of Nursing Facilities 6 = Baseline <u>17</u> % FY 2022-2023 Target: 100 %      |
| 4. FY 2021-2022 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint <u>1</u> divided by the total number of Nursing Facilities 6 = Baseline <u>17</u> % FY 2023-2024 Target: 80 %       |
| Program Goals and Objective Numbers: <u>Goal 4; Objectives 1, 2, 5</u>  |

**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.

- |  |
|--|
| 1. FY 2018-2019 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>4</u> divided by the total number of RCFEs <u>12</u> = Baseline <u>33</u> % FY 2020-2021 Target: <u>50</u> % |
|--|

2. FY 2019-2020 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>10</u> divided by the total number of RCFEs <u>12</u> = Baseline <u>83</u> % FY 2021-2022 Target: <u>100</u> %
3. FY 2020-2021 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>0</u> divided by the total number of RCFEs <u>12</u> = Baseline <u>0</u> % FY 2022-2023 Target: <u>100</u> %
4. FY 2021-2022 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>3</u> divided by the total number of RCFEs <u>12</u> = Baseline <u>25</u> % FY 2023-2024 Target: <u>80</u> %
Program Goals and Objective Numbers: <u>Goal 4; Objectives 1, 2, 5</u>

**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: <u>2</u> FTEs FY 2020-2021 Target: <u>2.5</u> FTEs
2. FY 2019-2020 Baseline: <u>2</u> FTEs FY 2021-2022 Target: <u>2.5</u> FTEs
3. FY 2020-2021 Baseline: <u>1.73</u> FTEs FY 2022-2023 Target: <u>2.0</u> FTEs
4. FY 2021-2022 Baseline: <u>2.0</u> FTEs FY 2023-2024 Target: <u>2.0</u> FTEs
Program Goals and Objective Numbers: <u>Goal 4; Objectives 1, 2, 5</u>

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

1. FY 2018-2019 Baseline: Number of certified LTC Ombudsman volunteers <u>4</u> FY 2020-2021 Projected Number of certified LTC Ombudsman volunteers <u>4</u>
2. FY 2019-2020 Baseline: Number of certified LTC Ombudsman volunteers <u>4</u> FY 2021-2022 Projected Number of certified LTC Ombudsman volunteers <u>6</u>
3. FY 2020-2021 Baseline: Number of certified LTC Ombudsman volunteers <u>4</u> FY 2022-2023 Projected Number of certified LTC Ombudsman volunteers <u>6</u>
4. FY 2021-2022 Baseline: Number of certified LTC Ombudsman volunteers <u>3</u> FY 2023-2024 Projected Number of certified LTC Ombudsman volunteers <u>4</u>

**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.

Catholic Charities Ombudsman Program of the Mother Lode reviews the case entries monthly to increase accuracy. They developed a training process for volunteers to document and track their individual cases and case progress and enter them in the NORS database. They provided laptops for volunteers for ease of access.

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**TITLE VIIA ELDER ABUSE PREVENTION**  
**SERVICE UNIT PLAN OBJECTIVES**

The program conducting the Title VIIA Elder Abuse Prevention work is: Catholic Charities Diocese of Stockton

X	Ombudsman Program
<input type="checkbox"/>	Legal Services Provider
<input type="checkbox"/>	Adult Protective Services
<input type="checkbox"/>	Other (explain/list)

**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** –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** –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** –Indicate the total number of projected training sessions for unpaid family caregivers who are receiving services under Title III E of the Older Americans Act (OAA) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation. Older Americans Act Reauthorization Act of 2016, Section 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** –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** –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** –Indicate the total number of individuals expected to be reached by any of the above activities of this program.

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**TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES**

The agency receiving Title VIIA Elder Abuse Prevention funding is: Catholic Charities

<b>Fiscal Year</b>	<b>Total # of Public Education Sessions</b>
<b>2020-2021</b>	4
<b>2021-2022</b>	4
<b>2022-2023</b>	4
<b>2023-2024</b>	4

<b>Fiscal Year</b>	<b>Total # of Training Sessions for Professionals</b>
<b>2020-2021</b>	3
<b>2021-2022</b>	3
<b>2022-2023</b>	4
<b>2023-2024</b>	4

<b>Fiscal Year</b>	<b>Total # of Training Sessions for Caregivers served by Title III E</b>
<b>2020-2021</b>	1
<b>2021-2022</b>	2
<b>2022-2023</b>	1
<b>2023-2024</b>	1

<b>Fiscal Year</b>	<b>Total # of Hours Spent Developing a Coordinated System</b>
<b>2020-2021</b>	40
<b>2021-2022</b>	40
<b>2022-2023</b>	40
<b>2023-2024</b>	40

<b>Fiscal Year</b>	<b>Total # of Copies of Educational Materials to be Distributed</b>	<b>Description of Educational Materials</b>
<b>2020-2021</b>	350	Elder Abuse Prevention materials, physical, mental and verbal abuse materials, Program brochures - VetFam, Ombudsman.
<b>2021-2022</b>	400	Elder Abuse Prevention materials – including physical, mental and verbal abuse materials; Program brochures – VetFam, Ombudsman.
<b>2022-2023</b>	450	Elder Abuse Prevention materials – physical mental and verbal abuse materials; Program brochures – VetFam, Ombudsman, Prevention & Early Intervention Wellness Program.
<b>2023-2024</b>	450	Elder Abuse Prevention materials – physical mental and verbal abuse materials; Program brochures – VetFam, Ombudsman, Prevention & Early Intervention Wellness Program.

<b>Fiscal Year</b>	<b>Total Number of Individuals Served</b>
<b>2020-2021</b>	200
<b>2021-2022</b>	225
<b>2022-2023</b>	300
<b>2023-2024</b>	300

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**TITLE IIIE SERVICE UNIT PLAN OBJECTIVES****CCR Article 3, Section 7300(d)****2020-2024 Four-Year Planning Period**

This Service Unit Plan (SUP) uses the five broad federally mandated service categories. Refer to the CDA Service Categories and Data Dictionary Revisions Effective July 2018 for eligible activities and service unit measures. Specify proposed audience size or units of service for ALL budgeted funds.

**Direct and/or Contracted IIIE Services**

<b>CATEGORIES</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Family Caregiver Services Caring for Elderly</b>	<b><i>Proposed</i> Units of Service</b>	<b><i>Required</i> Goal #(s)</b>	<b><i>Optional</i> Objective #(s)</b>
<b>Information Services</b>	<b># of activities and Total est. audience for above</b>		
<b>2020-2021</b>	# of activities: 15 Total est. audience for above: 100,000	6	
<b>2021-2022</b>	# of activities: 10 Total est. audience for above: 50,000	6	
<b>2022-2023</b>	# of activities: 10 Total est. audience for above: 50,000	6	
<b>2023-2024</b>	# of activities: Total est. audience for above:	6	
<b>Access Assistance</b>	<b>Total contacts</b>		
<b>2020-2021</b>	700	6	
<b>2021-2022</b>	200	6	
<b>2022-2023</b>	200	6	
<b>2023-2024</b>	200	6	



<b>Access Assistance</b>		<b>Total contacts</b>	
<b>Support Services</b>	<b>Total hours</b>		
<b>2020-2021</b>	500	6	
<b>2021-2022</b>	200	6	
<b>2022-2023</b>	200	6	
<b>2023-2024</b>	200	6	
<b>Respite Care</b>	<b>Total hours</b>		
<b>2020-2021</b>	800	6	
<b>2021-2022</b>	800	6	
<b>2022-2023</b>	800	6	
<b>2023-2024</b>	800	6	
<b>Supplemental Services</b>	<b>Total occurrences</b>		
<b>2020-2021</b>	10	6	
<b>2021-2022</b>	10	6	
<b>2022-2023</b>	10	6	
<b>2023-2024</b>	10	6	

#### Direct and/or Contracted IIIE Services

<b>Older Relative Services caring for child</b>	<b><i>Proposed</i> Units of Service</b>	<b><i>Required</i> Goal #(s)</b>	<b><i>Optional</i> Objective #(s)</b>
<b>Information Services</b>	<b># of activities and Total est. audience for above</b>		
<b>2020-2021</b>	# of activities: 10 Total est. audience for above: 100,000	6	
<b>2021-2022</b>	# of activities: 10 Total est. audience for above: 100,000	6	
<b>2022-2023</b>	# of activities: 10 Total est. audience for above: 100,000	6	
<b>2023-2024</b>	# of activities: 10 Total est. audience for above: 100,000	6	

<b>Older Relative Services</b>	<b><i>Proposed</i> Units of Service</b>	<b><i>Required</i> Goal #(s)</b>	<b><i>Optional</i> Objective #(s)</b>
<b>Access Assistance</b>	<b>Total contacts</b>		
<b>2020-2021</b>	100	6	
<b>2021-2022</b>	100	6	
<b>2022-2023</b>	100	6	
<b>2023-2024</b>	100	6	
<b>Support Services</b>	<b>Total hours</b>		
<b>2020-2021</b>	50	6	
<b>2021-2022</b>	50	6	
<b>2022-2023</b>	50	6	
<b>2023-2024</b>	50	6	
<b>Respite Care</b>	<b>Total hours</b>		
<b>2020-2021</b>	NA		
<b>2021-2022</b>	NA		
<b>2022-2023</b>	NA		
<b>2023-2024</b>	NA		
<b>Supplemental Services</b>	<b>Total occurrences</b>		
<b>2020-2021</b>	NA		
<b>2021-2022</b>	NA		
<b>2022-2023</b>	NA		
<b>2023-2024</b>	NA		

**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.

**HICAP PAID LEGAL SERVICES:** Complete this section if your Master Contract contains a provision for using HICAP funds to provide HICAP Legal Services.

**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/Providers\\_and\\_Partners/Area\\_Agencies\\_on\\_Aging/Planning/](https://www.aging.ca.gov/Providers_and_Partners/Area_Agencies_on_Aging/Planning/)  
 (Reference CDA PM 17-11 for further discussion, including current HICAP Performance Measures and Definitions).

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)

N/A

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

<sup>2</sup> Requires a contract for using HICAP funds to pay for HICAP Legal Services.

**COMMUNITY FOCAL POINTS LIST**

CCR Title 22, Article 3, Section 7302(a)(14), 45 CFR Section 1321.53(c), (Older Americans Act Reauthorization Act of 2016, Section 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 Older Americans Act Performance System (OAAPS) State Program Report (SPR), i.e., California Aging Reporting System, OAAPSCare, Section III.D.

<b>Designated Community Focal Point</b>	<b>Address</b>
Amador County Senior Center	229 New York Ranch Rd., Jackson, CA 95642
Calaveras Senior Center	768 Mountain Ranch Rd., San Andreas, CA 95249
Murphys Senior Center	65 Mitchler Ave., Murphys, CA 95247
Mariposa Senior Center	5246 Spriggs Lane, Mariposa, CA 95338
Tuolumne County Senior Center	540 Greenley Rd., Sonora, CA 95370

## **SECTION 12 - DISASTER PREPAREDNESS**

## **PSA 12**

**Disaster Preparation Planning** Conducted for the 2020-2024 Planning Cycle Older Americans Act Reauthorization Act of 2016, Section 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)

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1. 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: A12AA coordinates its disaster preparedness plans and activities with local emergency response agencies by attending local OES meetings in various counties, special populations meetings, tabletop discussion with other government organizations involved in disaster preparedness and participating in drills. A12AA reviews provider's disaster preparedness plans during the monitoring process. A12AA participates in tabletop and incident exercises in the various communities.
2. 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):

County	Name	Phone	Email
Alpine County	Rick Stephens	530-694-2231	rstephens@alpinecounty.ca.gov
Amador County	Sgt. Jeff Bellotti	209-223-6384	<a href="mailto:jbellotti@amadorgov.org">jbellotti@amadorgov.org</a> amadorsheriff@amadorgov.org
Calaveras County	John Osbourn	209-754-2940	<a href="mailto:josbourn@co.calaveras.ca.us">josbourn@co.calaveras.ca.us</a>
Mariposa County	Kevin Packard	209-742-1306	kpackard@mariposacounty.org
Tuolumne County	Dore Bietz	209-533-6396	<a href="mailto:dbietz@co.tuolumne.ca.us">dbietz@co.tuolumne.ca.us</a>

3. Identify the Disaster Response Coordinator within the AAA:

Name	Title	Telephone	email
Doreen Schmidt	Planner	209-532-6272	dschmidt@area12.org

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?
a. Provide up-to-date information and distribute information to individuals impacted by the	a. Regular contact with providers by phone, email or in person with current disaster information to

disaster to providers, agencies and organizations involved in disaster or emergency response efforts.	distribute to their clients; updates available on Facebook page or link to County OES or County Public Health Facebook page.
b. A12AA works with staff to secure their physical safety and well-being; include staff's concern or families and homes; staff will be trained and prepared to operate under emergency/disaster response conditions.	b. A12AA contacts staff to ensure safety; A12AA staff will contact vulnerable clients and/or emergency contacts to ensure client safety; if necessary, emergency client information will be made available to appropriate government agencies in event of disaster or emergency within the parameters of HIPAA and protected information regulations.
c. If A12AA facilities are impacted by disaster or emergency, the public, the providers, other community organizations will be notified. If relocation to offsite facility is necessary then the same sources will be notified of the change.	c. A12AA has MOU with an offsite facility to operate and set up services from their facility.

5. List any agencies with which the AAA has formal emergency preparation or response agreements. Amador, Calaveras & Tuolumne Counties Healthcare Coalitions, Sierra Senior Providers, Inc. – to use their facility in case of emergency and continue delivering services.
6. Describe how the AAA will:
  - Identify vulnerable populations. Care managers with MSSP contacts impacted vulnerable clients and/or emergency contacts to ensure client needs are being addressed; FCSP staff contacts impacted clients to ensure needs are being addressed. Care managers contact emergency service organizations (with client's permission) that operate in impacted areas to ensure client safety. Information & Assistance gives out current information as they receive inquiries. Facebook is updated frequently as the information comes in to our Agency.
  - Follow-up with these vulnerable populations after a disaster or emergency event. Care managers and family caregiver staff follow up with their clients after an event to determine if needs are being met; post disaster – care managers assess what type of planning or coordination could occur to ensure safety of client. A12AA staff connects with groups that assist with post-event relief and assist in any way possible.
  - A12AA staff is in contact with the County OES Coordinators and County Public Health OES officials in each county.
  - A12AA staff coordinates with programs that identify special populations in each county: Mariposa County-Everbridge, HomeSafe; Calaveras County-Code Red, Everbridge; Tuolumne County-Everbridge; Amador County-Code Red. A12 is in contact with Social Services in each county regarding clients.

**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 funds<sup>3</sup> 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 IIIB Funds expended in/or to be expended in FY 2020-21 through FY 2023-2024.

**Access:**

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

2020-21 65 %      21-22 65 %      22-23 65 %      23-24 65 %

**In-Home Services:**

Personal Care, Homemaker, Chore, Adult Day / Health Care, Alzheimer’s, Residential Repair

2020-21 7.5 %      21-22 7.5 %      22-23 7.5 %      23-24 7.5 %

**Legal Assistance Required Activities:<sup>4</sup>**

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

2020-21 2 %      21-22 2 %      22-23 2 %      23-24 2 %

Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA. The allocations above are substantiated by looking at the performance data from the past years in PSA 12. The units of service justify providing the Access, In-Home and Legal Assistance services. The funding is used assisting the maximum number of clients. The 2019 Community Needs survey data drives the decision to incorporate these as priority services. The priority services were discussed at the Public Hearings and comments were recorded. These particular services were an identified need in the 2019 Community Needs Survey.

<sup>3</sup> Minimum percentages of applicable funds are calculated on the annual Title IIIB baseline allocation, minus Title IIIB administration and minus Ombudsman. At least one percent of the final Title IIIB 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.

<sup>4</sup> Legal Assistance must include all the following activities: Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar.



**SECTION 16 - GOVERNING BOARD**

**PSA 12**

**GOVERNING BOARD MEMBERSHIP  
2020-2024 Four-Year Area Plan Cycle**

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

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**Total Number of Board Members:**      **4 members**

**Name and Title of Officers:**

**Office Term Expires:**

Director Frank Axe, Amador County	1/1/2024
Director Martin Huberty, Calaveras County	1/1/2024
Director Rosemarie Smallcombe, Chair, Mariposa County	1/1/2024
Director David Goldemberg Tuolumne County	1/1/2024

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**SECTION 17 - ADVISORY COUNCIL****PSA 12****ADVISORY COUNCIL MEMBERSHIP  
2020-2024 Four-Year Planning Cycle**


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Older Americans Act Reauthorization Act of 2016 Section 306(a)(6)(D)  
45 CFR, Section 1321.57  
CCR Article 3, Section 7302(a)(12)

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Total Council Membership (include vacancies) 32Number of Council Members over age 60 16

<b>Race/Ethnic Composition</b>	% of PSA's 60+Population	% on Advisory Council
White	<u>90.2</u>	<u>89</u>
Hispanic	<u>12.8</u>	<u>5</u>
Black	<u>&lt;1</u>	<u>0</u>
Asian/Pacific Islander	<u>&lt;1</u>	<u>5</u>
Native American/Alaskan Native	<u>&lt;1</u>	<u>0</u>
Other	<u>&lt;1</u>	<u>0</u>

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

Lynne Standard-Nightengale, Chair	1/1/2024
Denise Simpson, Vice Chair	1/1/2024
Toni Wagner, Secretary	1/1/2024

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

Thomas Denney, Amador County	1/2027
Chris Kalton, Amador County Provider	11/2023
Barbara Long, Amador County	3/2026
Colly Pearson, Amador County	5/2025
Rich Corvello, Calaveras County	12/2025
Andrew Schleder, Calaveras County	12/2026
Chriss Kleiman-Moore, Mariposa County	8/2026
Dale Silverman, Mariposa County	1/2024
Don Fox, Mariposa County	4/2026
Lydia Arre, Mariposa County Provider	1/2025
Carol Southern, Tuolumne County	9/2024

Dick Southern, Tuolumne County	2/2026
Britne Gose, Tuolumne County	11/2023
Barbara Farkas, Tuolumne County	2/2026
Emily Fife, Tuolumne County Provider	12/2024

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

Low income	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Disabled Representative	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Supportive Serv. Provider Representative	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Health Care Provider Representative	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Family Caregiver Representative	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Local Elected Officials	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No
Individuals w/Leadership Experience-Private & Voluntary Sectors	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Explain any **"No"** answer(s): Efforts are continuously made to invite the public to become members of the Advisory Council Board. The Membership & Recruitment committee meets with potential members.

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

- One Advisory Council member is appointed by each County Board of Supervisors for every 6,000 people residing in the respective counties provided no county shall have less than one member. Supervisors choose the person they determine will best represent the interest of the older adults, persons with disabilities and caregivers within their district.
- Fifty percent or more of the members selected shall be a member of the Commission on Aging from the appointing county and one member appointed by each Board of Supervisors representing the service provider(s) of the county. Such appointments shall be made after considering any recommendations put forth by service providers from within each respective county.

**2020-2024 Four-Year Area Planning Cycle**

This section must be completed and submitted annually. The Older Americans Act Reauthorization Act of 2016 designates legal assistance as a priority service under Title III B [42 USC §3026(a)(2)] <sup>12</sup>

CDA developed *California Statewide Guidelines for Legal Assistance* (Guidelines), which are to be used as best practices by CDA, AAAs and LSPs in the contracting and monitoring processes for legal services, and located at: [https://aging.ca.gov/Providers\\_and\\_Partners/Legal\\_Services/#pp-gg](https://aging.ca.gov/Providers_and_Partners/Legal_Services/#pp-gg)

1. Based on your local needs assessment, what percentage of Title IIIB funding is allocated to Legal Services? Discuss: 2% of the Title IIIB funding is allocated to Legal Services.
2. Specific to Legal Services, has there been a change in your local needs in the past four years? If so, identify the changes (include whether the change affected the level of funding and the difference in funding levels in the past four years). Yes/No, Discuss: A12 Legal Program funding has increased using the OARR funds. Our Legal service provider saw an increase in landlord / tenant issues and assistance with eviction notices.
3. Specific to Legal Services, does the AAA's contract / agreement with the Legal Services Provider(s) (LSPs) specify that the LSPs are expected to use the California Statewide Guidelines in the provision of OAA legal services? Yes/No, Discuss: Yes, A12AA and the legal service provider are given a copy of the CA statewide Guidelines and instructed to refer to it.
4. Does the AAA collaborate with the Legal Services Provider(s) to jointly establish specific priorities issues for legal services? If so, what are the top four (4) priority legal issues in your PSA? The top four legal issues are wills/trust, advanced healthcare directive, landlord-tenant disputes and contractor issues: not showing up, charging more than they bid, shoddy workmanship.
5. Specific to Legal Services, does the AAA collaborate with the Legal Services Provider(s) to jointly identify the target population? Discuss: The Agency has an agreement with the LSP to serve age 60+ in the counties the Agency serves. The LSP services are at a location that serves age 60+, those with limited income, individuals with poverty status, and the homeless. A12 runs quarterly reports tracking poverty status, ethnicity, lives alone status, frail and disabled to confirm the LSP is serving these populations.
6. Specific to Legal Services, what is the targeted senior population in your PSA **AND** what mechanism is used for reaching the target population? **Yes/No, Discuss:** The Agency conducts outreaches to key community organizations, low-income, minorities and geographic isolated individuals. Legal brochures are kept at key locations where seniors gather. Other outreaches include in person and virtual organizational meetings, FB posts and community events. The targeted population is age 60+ individuals.
7. How many legal assistance service providers are in your PSA? **Complete table below.**

Fiscal Year	# of Legal Assistance Services Providers
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<b>2020-2021</b>	1
<b>2021-2022</b>	1
<b>2022-2023</b>	1
<b>2023-2024</b>	1

<sup>3</sup> For Information related to Legal Services, contact Chisorom Okwuosa at 916 419-7500 or [chisorom.okwuosa@aging.ca.gov](mailto:chisorom.okwuosa@aging.ca.gov)

8. What methods of outreach are Legal Services Providers using? Discuss: A12AA and Legal services conducts outreach by reaching out to organizations, mailing legal brochures to key organizations and individuals, FB posts, website information, training ADRC/I & A staff to refer to program, staff presentations (virtual and in person) to organizations that serve older adults and collaborating with various organizations. Interfaith Legal Services also conducts outreach at Community meetings they attend. They have the legal services program information in their brochures and on their website. When they have the opportunity speak to various organizations, they inform the groups about the program.

9. What geographic regions are covered by each provider? **Complete table below:**

<b>Fiscal Year</b>	<b>Name of Provider</b>	<b>Geographic Region covered</b>
<b>2020-2021</b>	Area 12 Agency on Aging 19074 Standard Rd., Ste. A Sonora, CA 95370 MOU w/Interfaith Legal Services 18500 Striker Ct. Sonora, CA 95370	Alpine, Amador, Calaveras, Mariposa & Tuolumne counties
<b>2021-2022</b>	Area 12 Agency on Aging 19074 Standard Rd., Ste. A Sonora, CA 95370 MOU w/Interfaith Legal Services 18500 Striker Ct. Sonora, CA 95370	Alpine, Amador, Calaveras, Mariposa & Tuolumne counties
<b>2022-2023</b>	Area 12 Agency on Aging 19074 Standard Rd., Ste. A Sonora, CA 95370 MOU w/Interfaith Legal Services 18500 Striker Ct. Sonora, CA 95370	Alpine, Amador, Calaveras, Mariposa & Tuolumne counties
<b>2023-2024</b>	Area 12 Agency on Aging 19074 Standard Rd., Ste. A Sonora, CA 95370 MOU with Interfaith Legal Services 18500 Striker Ct. Sonora, CA 95370	Alpine, Amador, Calaveras, Mariposa & Tuolumne counties

10. Discuss how older adults access Legal Services in your PSA. Discuss: Currently, age 60+ adults access legal services by phone, drive up, walk-in appts, or correspondence by usps. The volunteers give instructions to the client on how to proceed. Clients can receive assistance by phone, by driving into the parking lot and staying in their car, by in person appts., by usps exchange. The program has 4 volunteer lawyers, 1 paralegal and several volunteers that assist the clients.
11. 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): **Discuss:** The major legal issues are wills, power of attorney, advanced healthcare directives, landlord/tenant issues, evictions, real property issues, and issues with contractors. The LSP added another pro-bono attorney familiar with housing issues - landlord / tenant issues and eviction notices.
12. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. Discuss: Barriers to accessing legal services is the distance consumers must travel to receive the service. In order to meet the needs of the legal consumers, the legal provider has incorporated a variety of ways to assist clients - phone appts., drive up appts., usps – correspondence, and walk-in appts. The program has made various accommodations to reach the consumers with legal assistance.
13. What other organizations or groups does your legal service provider coordinate services with? **Discuss:** Other community organizations include, but are not limited to, Interfaith Social Services, Mother Lode LTC Ombudsman Program, Tuolumne County District Attorney's Office & Victim Witness, Sierra Senior Providers, Mariposa County Legal Aid, Central California Legal Services, Amador County District Attorney's Office, Legal Services of Northern CA. The Legal program or A12AA works with many organizations in each county they serve – APS, IHSS, Public Health & Human Services, and Sheriff Dept.

**SECTION 19 - MULTIPURPOSE SENIOR CENTER ACQUISITION OR CONSTRUCTION COMPLIANCE REVIEW** <sup>13</sup>

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

- ☐ No. Title IIIB funds not used for Acquisition or Construction.
- ☐ Yes. Title IIIB funds used for Acquisition or Construction.

Title III Grantee and/or Senior Center (complete the chart below):

Title III Grantee and/or Senior Center	Type Acq/Const	IIIB Funds Awarded	% Total Cost	Recapture Period		Compliance Verification State Use Only
				Begin	End	
Name: Address:						
Name: Address:						
Name: Address:						
Name: Address:						

**SECTION 20. FAMILY CAREGIVER SUPPORT PROGRAM**

**Notice of Intent for Non-Provision of FCSP Multifaceted Systems of Support Services**  
 Older Americans Act Reauthorization Act of 2016,  
 Section 373(a) and (b)

**2020-2024 Four-Year Planning Cycle**

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

Check YES or NO for each of the services\* identified below and indicate if the service will be provided directly or contracted. **If the AAA will not provide a service, a justification for each service is required in the space below.**

**Family Caregiver Services****Family Caregiver Services**

<b>Category</b>	<b>2020-2021</b>	<b>2021-2022</b>	<b>2022-2023</b>	<b>2023-2024</b>
Family Caregiver Information Serv.	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont
Family Caregiver Access Assist.	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont
Family Caregiver Support Serv.	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont
Family Caregiver Respite	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont
Family Caregiver Supple. Serv.	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont



### Older Relative Services

Category	2020-2021	2021-2022	2022-2023	2023-2024
Older Relative Information Services	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont
Older Relative Access Assistance	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont
Older Relative Support Serv	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont	<b>X Yes</b> No <b>X Direct</b> Cont
Older Relative Respite	Yes <b>X No</b> Direct Contract	Yes <b>X No</b> Direct Contract	Yes <b>X No</b> Direct Contract	Yes <b>X No</b> Direct Contract
Older Relative Supplemental Services	Yes <b>X No</b> Direct Contract	Yes <b>X No</b> Direct Contract	Yes <b>X No</b> Direct Contract	Yes <b>X No</b> Direct Contract

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

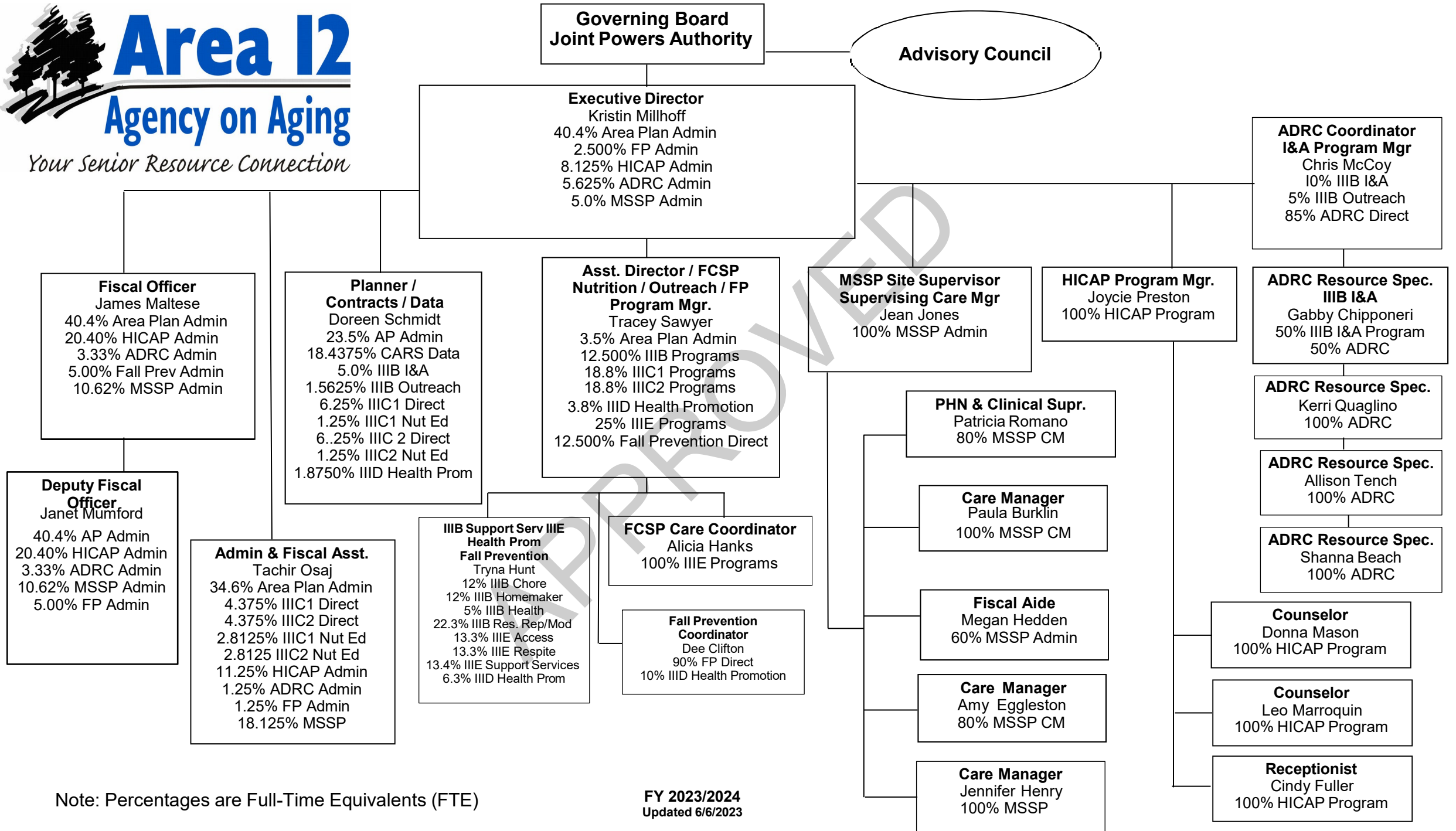
**Justification:** For each service category checked “no”, explain how it is being addressed within the PSA. The justification must include the following:

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

Justification for not providing specified services in Tuolumne and Mariposa County: Respite and Supplemental services for grandparents raising grandchildren were not identified needs in the Community Needs Survey. The respite services are available through ICES, First Five, HeadStart, Resource Connection or Social Services. ICES, 20993 Niagara River Dr., Sonoma, CA 95370, 209-533-0377. [www.icesagency.org](http://www.icesagency.org) - All parents in the community can access quality child care and parenting education. Services include child care resource and referral, child care subsidies, recruitment and training of child care professionals, parent education and support.

Calaveras and Amador Counties: Resource Connection, [www.trcac.org](http://www.trcac.org), Calaveras County: 209-754-1075, 206 George Reed Dr., San Andreas, CA 95249; Amador County, 430 Sutter Hill Rd., Sutter Creek, CA 95685, 209-223-1624 or email [rrinfo@trcac.org](mailto:rrinfo@trcac.org). They provide a Grandparent support and respite program designed to provide temporary relief for grandparents. They also provide information on child care options or respite.

Alpine County – Choices for Children, [www.choices4children-alpine.org](http://www.choices4children-alpine.org), 1-530-694-2230, Alpine Social Services, 75-A Diamond Valley, Markleeville, CA 96120.



Note: Percentages are Full-Time Equivalents (FTE)

FY 2023/2024  
Updated 6/6/2023