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Area Plan, 2009-2012
Planning and Service Area #30
Stanislaus County

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AREA PLAN CHECKLIST

Section	Three-Year Area Plan Components	3-Year Plan	Annual Update
	All Area Plan documents are on single-sided paper	X	<input type="checkbox"/>
	Original Area Plan and two copies are enclosed	X	<input checked="" type="checkbox"/>
	Transmittal Letter with Original signatures	X	<input type="checkbox"/>
1	Older Americans Act Assurances	X	N/A
2	Description of the Planning and Service Area (PSA)*	X	<input type="checkbox"/>
3	Description of the Area Agency on Aging (AAA)*	X	<input type="checkbox"/>
4	Mission Statement	X	N/A
5	Organization Chart	X	<input type="checkbox"/>
6	Planning Process*	X	<input type="checkbox"/>
7	Needs Assessment*	X	<input type="checkbox"/>
8	Targeting	X	<input type="checkbox"/>
9	Public Hearings	X	<input type="checkbox"/>
10	Identification of Priorities*	X	<input type="checkbox"/>
11	Goals and Objectives:		
	Title III B Funded Program Development (PD) Objectives**	X	<input type="checkbox"/>
	Title III B Funded Coordination (C) Objectives	X	<input type="checkbox"/>
	System-Building and Administrative Goals & Objectives**	X	<input type="checkbox"/>
	Title IIIB/VIIA Long-Term Care Ombudsman Objectives**	X	<input type="checkbox"/>
	Title VII B Elder Abuse Prevention Objectives**	X	<input type="checkbox"/>
12	Service Unit Plan (SUP) Objectives**	X	<input type="checkbox"/>
13	Focal Points*	X	<input type="checkbox"/>
14	Priority Services*	X	<input type="checkbox"/>
15	Notice of Intent to Provide	X	<input type="checkbox"/>
16	Request for Approval to Provide Direct Services	X	<input type="checkbox"/>
17	Governing Board*	X	<input type="checkbox"/>
18	Advisory Council*	X	<input type="checkbox"/>
19	Legal Assistance*	X	<input type="checkbox"/>
20	Multipurpose Senior Center (MPSC) Acquisition or Construction Compliance Review	<input type="checkbox"/>	<input type="checkbox"/>
21	Title III E Family Caregiver Support Program	X	<input type="checkbox"/>

*** Required during first year of the Area Plan Cycle. However, updates only need to be included if changes occur in subsequent years of the cycle..**

**** Objectives may be updated at any time and need not conform to a twelve month time frame**

^ If the AAA funds PD and/or C with Title III B.

Stanislaus County Area Agency on Aging
Planning and Service Area 30
Area Plan, 2009-2012

SECTION 1. OLDER AMERICANS ACT ASSURANCES

Pursuant to the Older Americans Act Amendments of 2006 (OAA), the Area Agency on Aging assures that it will:

A. Assurances:

1. OAA 306(a)(2)

Provide an adequate proportion, as required under OAA 2006 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following categories of services—

(A) services associated with access to services (transportation, health services (including mental health services) outreach, information and assistance, (which may include information and assistance to consumers on availability of services under part B and how to receive benefits under and participate in publicly supported programs for which the consumer may be eligible) and case management services);

(B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and

(C) legal assistance; and assurances that the area agency on aging will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded;

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

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

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

(II) include proposed methods to achieve the objectives described in (aa) and (bb) above.

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

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

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

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

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

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

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

(I) identify the number of low-income minority older individuals in the planning and service area;

(II) describe the methods used to satisfy the service needs of such minority older individuals; and

(III) provide information on the extent to which the area agency on aging met the objectives described in assurance number 2.

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

Use outreach efforts that —

(i) identify individuals eligible for assistance under this Act, with special emphasis on—

(I) older individuals residing in rural areas;

(II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);

(IV) older individuals with severe disabilities;

(V) older individuals with limited English proficiency;

(VI) older individuals with Alzheimer’s disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and

(VII) older individuals at risk for institutional placement; and

(ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance;

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

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

7. OAA 306(a)(5)

Coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement with agencies that develop or provide services for individuals with disabilities;

8. OAA 306(a)(9)

Carry out the State Long-Term Care Ombudsman program under OAA 2006 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title;

9. OAA 306(a)(11)

Provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as “older Native Americans”), including—

(A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;

(B) to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and

(C) make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.

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

(A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;

(B) disclose to the Assistant Secretary and the State agency—

(i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and

(ii) the nature of such contract or such relationship;

(C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contract or such relationship;

(D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contract or such relationship; and

(E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals;

11. 306(a)(14)

Not give preference in receiving services to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title;

12. 306(a)(15)

Funds received under this title will be used—

(A) to provide benefits and services to older individuals, giving priority to older individuals identified in OAA 2006 306(a)(4)(A)(i); and

(B) in compliance with the assurances specified in OAA 2006 306(a)(13) and the limitations specified in OAA 2006 212;

B. Additional Assurances:

Requirement: OAA 305(c)(5)

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

Requirement: OAA 307(a)(7)(B)

(i) no individual (appointed or otherwise) involved in the designation of the State agency or an area agency on aging, or in the designation of the head of any subdivision of the State agency or of an area agency on aging, is subject to a conflict of interest prohibited under this Act;

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

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

Requirement: OAA 307(a)(11)(A)

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

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

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

Requirement: OAA 307(a)(11)(B)

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

Requirement: OAA 307(a)(11)(D)

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

Requirement: OAA 307(a)(11)(E)

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

Requirement: OAA 307(a)(12)(A)

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

- (i) public education to identify and prevent abuse of older individuals;
- (ii) receipt of reports of abuse of older individuals;
- (iii) active participation of older individuals participating in programs under this Act through outreach, conferences, and referral of such individuals to other social service agencies or sources of assistance where appropriate and consented to by the parties to be referred; and
- (iv) referral of complaints to law enforcement or public protective service agencies where appropriate.

Requirement: OAA 307(a)(15)

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

- (A) To utilize in the delivery of outreach services under Section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability.
- (B) To designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include:
 - (i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and
 - (ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effective linguistic and cultural differences.

Requirement: OAA 307(a)(18)

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

- (A) reside at home and are at risk of institutionalization because of limitations on their ability to function independently;
- (B) are patients in hospitals and are at risk of prolonged institutionalization; or
- (C) are patients in long-term care facilities, but who can return to their homes if community-based services are provided to them.

Requirement: OAA 307(a)(26)

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

Requirement: OAA 307(a)(27)

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

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

CFR [1321.53(a)(b)]

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

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

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

CFR [1321.53(c)]

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

CFR [1321.53(c)]

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

CFR [1321.53(c)]

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

CFR [1321.53(c)]

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

CFR [1321.61(b)(4)]

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

CFR [1321.61(d)]

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

CFR [1321.69(a)]

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

Section 2 – Description of the Planning and Service Area

The Planning and Service Area (PSA) designated as PSA 30 is exclusively Stanislaus County. The Area Agency on Aging (AAA) is a division of the Department of Aging and Veterans Services, and is responsible to the Board of Supervisors for its governance on the local level. The Stanislaus County Board of Supervisors is made up of 5 persons, each representing a different area of the county. The county is located in the center of the San Joaquin portion of the Central Valley, midway between San Francisco and Yosemite National Park. The Central Valley is known for the many fruits, vegetables, nuts, dairy cattle and poultry grown and raised to feed the country and many parts of the world. In Stanislaus County the crops include almonds, walnuts, milk products, fruit trees, cattle and tomatoes. In addition to growing these products, much of the preparation for sale of these products is done within the county. Many county residents work in various aspects of the agriculture business. Other major employers include government and education. The Modesto Junior College and the California State University at Stanislaus are the institutions of higher learning in Stanislaus County, with branches of other institutions located here as well.

The largest city in Stanislaus County is Modesto with approximately 209,936 residents. Other smaller cities include Turlock (70,158), Ceres (42,813), Riverbank (21,757), Oakdale (19,337) and Patterson (21,229). Modesto, Ceres and Turlock are located along State Route 99. Interstate 5 runs through the west part of the county, closest to Patterson. Between 2004 and 2008, the cities of Patterson, Newman, Riverbank, and Hughson saw the greatest population growth, with Patterson leading with 49% growth. Beyond these cities are towns that act as centers of rural life. Approximately three quarters of the county is rural and mostly dedicated to agricultural uses.

One of the current challenges is that services for senior citizens and disabled persons are clustered in the main urban areas of Modesto, Ceres and Turlock. These include services outside of the purview of the AAA, such as doctor and hospital services. For example, there are 5 full service hospitals in the county. Three of those hospitals are in Modesto, one in Turlock and one in the east side city of Oakdale. Currently there is not a hospital to serve the residents of the west side, including Patterson, one of the fastest growing communities in the county. Since the hospitals and many doctor offices are mostly in the center of the county, transportation to appointments has become a major issue, especially for people who should not or cannot drive a personal vehicle.

Estimated Population Breakdown for Stanislaus County-2008:

County residents – 525,903 – increase of 6.3% since 2004

Hispanic residents – 205,102 – 39% of population

Asian residents – 16,040 – 5% of population

African American – 9,624 – 3% of population

Two or more races – 6,416 – 2% of population

American Indian, Alaska Native, Native Hawaiian – 3,208 – less than 1%

Statistics Regarding Senior Citizens in Stanislaus County:

All persons over 60 – 78,605 – 15% of County population – 2009 estimate

Over 55, Non-Hispanic Caucasian – 69,586 – 13% of County population

Over 55, Hispanic – 18,459 – 9% of Hispanic population, 3.5% of County population

Grandparents Living With Minors – 12,586

Grandparents With Sole Responsibility for Raising Grandchildren – 1,196

To determine eligibility for federally and state funded programs the benchmark is the Federal Poverty Line, currently \$10,830 annually for a single person. The approximate number of persons over 55 in Stanislaus County who earned less than the Federal poverty limit in 2007 was 7,695, plus or minus 3,455. The mean number represents 1.53% of the senior population and 11.35% of the total population. For persons of Hispanic origin, approximately 20% (38,382) are below the poverty level. Of those persons, approximately 2,950 are over the age of 55, 1.51% of the total Hispanic population and 7.7% of the Hispanic persons who are considered to be poor. In 2007 it was estimated that 8.9% of the population over 65 in Stanislaus County earned less than the Federal Poverty Level. That represented a 3.4% increase since 2004, the only group that showed an increase for living below the Poverty Level. In addition, the number of persons considered to be poor was greater in Stanislaus County than in the state of California.¹

Another measure of income security that highlights the cost of living in particular areas is the California Family Self-Sufficiency Standard. This measure considers the costs of major areas such as housing, food, transportation, medical costs and various taxes, to determine the average income needed to maintain a basic standard of living. The Standard takes into account the particular area of the state. For Stanislaus County, a single adult, on average, would need approximately \$21,900 annually, or \$1,825 per month to meet his or her basic needs. A couple would need approximately \$32,000 annually or \$2,670 per month. Seniors or disabled persons living on Social Security alone are forced to make choices that can put their health and well being at risk. Approximately 30,000 Stanislaus County residents 55 and older receive less than \$20,700 annually, 30% of the seniors and 5.8% of the general public. Many of the “safety net” programs exclude people receiving higher incomes than the Federal Poverty Limit.

According to data summarized in the Stanislaus County Community Health Assessment, conducted during the spring and summer of 2008:

“(T)he average Social Security payment of \$12,077 was not enough for a senior to live on, yet one out of three seniors in California relied exclusively on Social Security to cover their basic expenses. According to the California Elder Economic Security Standard, the SSI program put one at an income level that was far below what it cost to cover one’s basic living expenses.....(O)nly seniors in Stanislaus County who had their home mortgage paid off had enough income to meet their expenses. Those who were renting or who were still paying a mortgage on their home did not have enough retirement income to meet their living expenses.”²

In connection with concerns about sufficient income to meet needs are the concerns about general health and a person’s ability to care for his or her basic needs. There are at least 5,775 seniors and disabled persons who are currently using services that are designed to keep them in independent homes and apartments. This number is about 7.6% of the senior population and is the approximate number that represents people in danger of institutionalization. This figure likely underestimates the number of seniors or disabled persons that are dependent upon other people due to the fact that many seniors will not or have not attempted to contact agencies for various services or programs. In addition, many families will assume care of a loved one without accessing outside services, another factor in accurately estimating the number of dependent elders in the larger community. According to the UCLA Center for Health Policy Research, “Senior citizens in California’s central valley region have the worst health in the state and may provide a snapshot of the challenges California faces over the next two decades – a time in which the elderly population

¹ U.S. Census Bureau, American Community Survey, Poverty in Past 12 Months, 2008.

² Stanislaus County Community Health Assessment 2008.

is projected to double.”³ The November 2008 report contains statistics that indicate Stanislaus County seniors have the second highest rate of diabetes in the state, 31.3% (22,244). Seniors in the San Joaquin Valley have high blood pressure at a rate of 63.9% and 23% of the senior population is obese. About 23.9% of “low-income older adults in the San Joaquin Valley are food insecure, meaning that they have trouble during the month in obtaining sufficient nutritionally adequate food.”⁴

The economic downturn for California and the country has affected services for senior citizens in Stanislaus County. State funding for various services has been cut and federal funding has remained relatively constant for many years. The Area Agency on Aging has dedicated more time to assisting the agencies that contract with the AAA to seek other ways to continue meeting the needs of the senior citizens and disabled persons within the County.

The foreclosure crisis has hit seniors and disabled persons mainly through those persons who rent apartments or homes. Landlords have lost their properties and tenants have needed to find affordable housing, sometimes very quickly. Another housing issue that has been a major concern for seniors in Stanislaus County is that a number of mobile home park owners have raised the space rent in their parks to unreasonable and unattainable rates. Many seniors have been forced to find alternate housing due to their inability to pay the higher rates and the large expense to attempt to move their mobile homes. Many seniors have been forced to walk away from homes they thought were wise investments and the affordable means for them to live independently for many years.

The current unemployment rate for Stanislaus County is 16.9%, nearly twice the state rate. As is the case throughout the state and the country, the rising unemployment rate has affected the job market for seniors, especially those who are currently enrolled in the Senior Community Services Employment Program (SCSEP). It is difficult for very qualified persons to find employment in the current economy. It is more difficult for seniors who are learning new skills to find work outside this stipend program. The result is that seniors currently in the SCSEP program will need to remain in the program longer to be prepared to transition to unsubsidized employment after the economy begins to recover. In addition, other low-income seniors that need the kind of training SCSEP can give will not be able to be part of the program due to the current participants remaining in the program.

Section 3 - Description of the Area Agency on Aging (AAA)

The Stanislaus County Area Agency on Aging (AAA) is the primary conduit for information about services for senior citizens in this area. The Director and staff actively advocate for the needs of seniors through various governmental and private agencies. They participate with other county, city, and private organizations to inform the public of the services offered through the AAA and the opportunities for seniors to be as active as they choose to be. The staff has taken part in countywide committees to assess health and transportation needs of senior citizens and disabled persons, in relation to the rest of the population. The AAA staff and Commission on Aging members have assisted in raising the awareness of the needs of senior citizens as active members of society.

The Commission on Aging, the advisory Board for the AAA, is composed of seniors, service provider representatives, members of citizen groups, family caregivers and retired

³ “Center News”; Gwen Driscoll; *UCLA Center for Health Policy Research – News – November 20, 2008.*

⁴ *Ibid.*

government workers. All are aware of the challenges facing the senior citizens in Stanislaus County. All the Commission members serve with the commitment to enhance the lives of County residents, especially seniors and disabled persons.

One of the new ventures for the Commission on Aging, with the endorsement of the AAA staff, is the launch of the Stanislaus Senior Foundation. The Foundation is a non-profit group that is in the process of raising funds to augment the services currently funded by the Older Americans and Older Californians Acts and promote new avenues to help seniors maintain their independence. The volunteers at the Foundation will be working to promote partnerships with governmental and private agencies and to discover creative ways to further support seniors as they strive to remain independent. Many of the volunteers associated with the Foundation are seniors or caregivers and they are dedicated to helping find ways to assist other seniors in Stanislaus County.

The majority of the services funded through the AAA are contracted to county or non-profit agencies: meals programs, legal services, ombudsman, elder abuse prevention, assisted transportation, homemaker, adult day care, surplus food distribution, health promotion, and employment training programs. These partners have proven to be invaluable in the mission to assist seniors remain independent and engaged in the life of the community. In addition, the AAA provides the Health Insurance Counseling and Advocacy Program (HICAP), Family Caregiver Support Program, Linkages, and Information and Assistance Program as direct services. In each of these direct services the staff of the AAA has fostered relationships among vendors and agencies to accomplish the goals of providing the best services to seniors and disabled persons.

The AAA is active in sponsoring a group called Services to Older Adults Advisory Council (STOAAAC), a monthly meeting of agencies and companies that provide services or information for senior citizens. One AAA staff member maintains minutes for this group and arranges for a speaker for each meeting. Each agency or company representative is given the opportunity to talk about their program or upcoming events. This meeting is a chance to network with other professionals who work in the field of aging services.

In the last few years the AAA staff has established a relationship with a faith-based group called Advancing Vibrant Communities (AVC). The staff at AVC maintains a volunteer database of people willing to assist community members with services such as furniture donation, yard work, minor home repairs, rides to doctor appointments, and friendly visiting. Volunteers are supervised by retired craftsmen and experienced professionals willing to donate their time. The dedicated staff and volunteers at AVC are part of a network of persons assisting seniors and disabled persons to be comfortable and safe in the community.

The Disability Resource Agency for Independent Living (DRAIL) exists as a resource for people who need assistance and direction in finding the best options to remain in the community. One of their staff members is part of the Commission on Aging, keeping the advisory commission up to date on the needs and activities of those who face particular challenges. The AAA refers seniors and other clients to DRAIL for assistance in finding devices and programs that can prevent them from the possibility of living in an institution.

One of the county departments that the AAA staff works closely with is the Behavioral Health and Recovery Services (BHRS) Department. Over the last year when the focus and funding for mental health services has been shifted to Prevention and Early Intervention (PEI) initiatives,

the staff of the BHRS and AAA have been planning ways that seniors can be assisted to deal with depression, isolation, loneliness and substance abuse. Several of the narrative objectives highlight this collaboration. We look forward to developing programs that will meet the needs of seniors without compromising their sense of dignity.

As mentioned earlier, the seniors in the Central Valley have high rates of obesity and diabetes, when compared to the State of California and the rest of the country. Many of these seniors find it necessary to use the services of local kidney centers to deal with some of the complications of diabetes. The staff of the AAA maintains communication with these centers, referring potential clients to them and receiving referrals when their staff identifies a senior citizen in need of the services offered through the AAA. The seniors accessing dialysis treatment are among those who need greater assistance with transportation.

The Senior Fall Prevention Coalition of Stanislaus County continues to meet and be advocates for programs that will highlight the means for seniors to safely live independently in their homes. The Coalition includes AAA staff; representatives from the Healthy Aging Association; In Home Supportive Services; Stanislaus County Health Services Agency; the homemaker & assisted transportation provider; Adult Protective Services; AARP; BHRS; fire departments; physical therapists; California State University, Stanislaus Physical Education & Health Department; and the senior meals program provider. They have conducted a survey and needs assessment in the various communities throughout the county and were a significant part of the annual Healthy Aging Summit in October 2008. A resource guide was produced and is distributed to clients via each of the coalition partners. This guide will be reprinted as necessary and will be part of the information distributed through the Information and Assistance Program and the events that the staff attends with the Info Van. Plans for the coming year include launching a series of classes called "A Matter Of Balance", for which there is a new Program Development Objective. The Coalition continues to meet to address this very important area, and a special area will be reserved for fall prevention issues at the Healthy Aging Summit in October 2009.

Emergency Preparedness

The AAA staff has been active with the local Office of Emergency Services (OES) and the County Board of Supervisors, participating in the planning process to assist all County residents in the event of an emergency. During and after a disaster the staff of the AAA will be part of a countywide effort to respond to emergency needs for all citizens. The staff of the department will be contacted by the staff of the OES and directed as to how they may assist the efforts that will be coordinated by the OES.

If it is safe for staff members to be in the AAA office and their personal concerns are accommodated, the AAA staff will assist the OES in providing information to seniors and caregivers regarding shelters, evacuation routes, personal assistance, and availability of food and water. If the AAA office is not safe to use, the AAA staff will arrange to handle calls through a home computer system.

Through the activities of the Info Van and the I&A office, the AAA will provide information to seniors, disabled persons and caregivers about the recommended items and means to prepare for an emergency. That information will include lists of items needed to have ready should a senior citizen need to be evacuated to a shelter. Other information would include items needed to have on hand if it is determined that the best action is to remain at home for an extended period of

time. Information about radio and telephone stations that will supply current information about the emergency and recommendations for safely enduring the emergency are available through the I&A program.

For the most essential services, the AAA contracts with the Howard Training Center to provide the congregate meals and the home-delivered meals. The AAA staff will work to assist Howard Training Center to procure agreements for the alternate means to cook and serve meals to a wide variety of sites and in homes, if those homes and sites are safe places for seniors to be.

Following an emergency the I&A staff will be the principle point of contact for information about how a senior can be assisted to return to normal. The I&A staff will gather information from the OES, the agencies designated to provide temporary assistance, and information about how to get assistance to make necessary repairs to homes. The AAA staff will assist seniors with the completion of forms to apply for federal and state assistance, such as with the Federal Emergency Management Agency.

The AAA staff, coordinating with the OES and other county agencies, is helping to develop a Continuity of Operations Plan (COOP). This plan outlines the steps the AAA staff will take to assure that services will be available as soon as possible after an emergency. The plan outlines the resources and processes needed by all staff members to accomplish the essential functions of each agency of the county.

Section 4 - The Mission Statement

The reasons for the Stanislaus County Area Agency on Aging to exist and the purpose in the community are:

- ◆ To provide leadership in addressing issues that relate to older persons in Stanislaus County.
- ◆ To develop community-based systems of care that provide services which support independence within Stanislaus County's interdependent society, and which protect and enhance the quality of life of older persons and persons with functional impairments.
- ◆ To promote citizen involvement in the planning and delivery of services to older persons and persons with functional impairments.

Section 5 – Organization Chart – See attached page 74.

Section 6 - The Planning Process – Establishing Priorities

Planning for services to seniors and disabled persons in Stanislaus County is an ongoing process. Through the current programs and the involvement of the members of the Commission on Aging, the staff attempts to find numerous and various ways to meet the needs of our diverse population. The current resources from the Older Americans and Older Californians Acts allow the staff to interact with non-profit agencies and other county departments to comply with the guidelines of those sources. The staff of the AAA solicits information from the providers regarding expressed needs of their current clients. The staff attempts to emphasize at every opportunity the availability of information from the AAA Information and Assistance Program.

The AAA staff is active in the monthly group, Services to Older Adults Advisory Council (STO AAC), a group of representatives from across the spectrum of agencies that assist seniors. Anyone can attend these meetings and express concerns about a particular issue as well as publicize the ways that their particular agency is seeking to assist seniors or disabled persons. Frequently

both general and specific issues are addressed at these meetings. The AAA staff and Commission on Aging members receive ideas and recommendations regarding services that are new, improved or need improving.

As part of the AAA's involvement with elder abuse prevention strategies, the AAA staff attend meetings of the Stanislaus Elder Abuse Prevention Alliance (SEAPA). The participants at these meetings plan events to highlight elder abuse and ways to prevent it as well as deal with issues involving members of the senior communities. Meetings are held in various communities of the county-Modesto, Turlock, Oakdale, Riverbank, and Newman. The meetings involve community members such as ministers, law enforcement personnel, bank employees, and other members of the local government. Each community plans their own events and has grown to engage seniors and families in understanding the laws and consequences of elder abuse. Participation by AAA staff in these forums allows them to interact directly with elders and families and aids in continuing to plan for more ways that the needs can be met. These forums and events are held in both rural and urban areas of the county.

The AAA staff, through monitoring of the programs, and technical assistance opportunities emphasizes the intent of the laws to be "seed money" to help the programs grow. Toward that end the AAA staff has offered the assistance of a grant writer to help the program personnel access applicable grant opportunities. In addition the AAA staff are frequently participants in fund raising activities for the non-profit programs including dinners, walk-a-thons, cooking tournaments, and benefit shopping experiences. This involvement with the programs helps the AAA staff understand the expressed needs in the community and therefore incorporate those needs in planning efforts.

The AAA staff is actively involved with committees formed by other county agencies such as the Health Services Agency. Examples of these committees include the Death Review Committee to address the issue of fall prevention; West Nile Virus Committee; Mobilizing for Action through Planning and Partnership (MAPP); and the Stanislaus Council of Governments (StanCOG). Involvement with these committees helps the staff promote the mission of the AAA to other groups in the county government while networking with people who represent different services throughout the communities. These committees include people outside of the county government structure and provide the AAA staff with information about needs beyond those expressed in the population currently accessing the AAA services. Understanding those needs helps the AAA staff work towards expanding the current scope of work being done.

For the current services being funded through the AAA, each provider is encouraged to distribute and collect feedback from their participants about the service. The satisfaction surveys give the provider the impetus to make changes to improve the service according to the expressed needs. For planning purposes, the AAA staff maintains communication with providers to understand the different needs and if there need to be changes made to the Area Plan and the contracts with the providers.

The AAA maintains the Information and Assistance Program as a direct service. Through this program the AAA staff has the opportunity to respond to seniors, disabled persons and family members of persons with specific needs. Those opportunities allow the staff to better understand how the Area Plan and associated programs should be modified or expanded.

Section 7 - Needs Assessment:

A Needs Assessment Survey was done in November 2004 followed by a system-wide Customer Satisfaction Survey, done in December 2005. Based upon the results of these two surveys and feedback from various other sources, the AAA staff elected to retain the broad goals set for the 2005-2009 Area Plan and adjust the narrative objectives to meet current expressed needs. The broad goals are to Promote Health and Well-Being, Provide Information and Assistance, and Promote and Maintain Independence.

In late summer and fall 2008 the AAA staff and Commission on Aging members participated in administering two surveys of needs within the county, collaborating with the county Health Services Agency and the Stanislaus Council of Governments (StanCOG). The first survey through the Health Services Agency included participation by a variety of agencies and companies throughout the county, seeking a broad picture of the health of all county residents. The final report, the Stanislaus County Community Health Assessment, is an analysis of the data collected from the face-to-face surveys as well as information from other sources, such as data from existing programs. A special section has been dedicated to the needs of senior citizens. Results from the surveys have assisted the AAA by confirming what the staffs of our provider groups have reflected in the people currently being served. Residents of Stanislaus County are challenged by the rising cost of living and are accessing more services provided by the AAA. The need to find ways to expand those services has become greater as the national recession has deepened. The data from this survey and other studies have shown that the senior citizens of Stanislaus County have higher incidences of chronic diseases such as hypertension and diabetes. The AAA staff will be seeking ways to convey the means to obtain and maintain healthier lifestyles to better control these diseases and avoid other challenges, such as debilitating falls.

The survey associated with StanCOG involved an evaluation of needs for assisted transportation, focusing on seniors and persons with disabilities. As a result of anecdotal evidence from a variety of sources, a group from several agencies worked with StanCOG personnel to conduct focus groups and face-to-face surveys to determine if there are “unmet transit needs”. The results proved there are a significant number of seniors and disabled persons who would benefit from affordable and accessible “through the door” transportation. The AAA currently contracts with Catholic Charities to provide assisted transportation throughout the county, but the need is greater than can currently be met with the limited funding and physical resources. The need is greatest for seniors who live outside of Modesto and Ceres and do not or should not drive their personal vehicle to medical or other appointments in these areas. Those appointments occur most often in Modesto and it is difficult for people who live in westside or eastside communities to obtain appropriate transportation that will meet their physical needs. The results of the survey prove that the county transit system staff needs to work to find the ways to meet the needs of a significant portion of the population. One of the new objectives listed below will involve the AAA staff and Commission on Aging members continuing their involvement in designing a new program to answer this significant need.

To comply with new California laws regarding the Lesbian, Gay, Bisexual and Transgender (LGBT) members of our area, the AAA staff has made contact with the local PRIDE Center. Informal discussions about particular needs of LGBT seniors reflect the desire for greater respect and recognition of their status, without prejudice. A staff member from BHRS has agreed to conduct a support/discussion group for LGBT seniors and caregivers (likely to include members of

the Baby Boomer generation) in an effort to learn more about their needs within greater Stanislaus County. Participation in this group will help us gauge the direction that services to this group should take in coming years. Plans are in place to market this new group through the local PFLAG group, at senior centers, meal sites, churches, restaurants, and on the PRIDE web site and through their newsletter.

The AAA staff conducted 11 public hearings to discuss the proposed Area Plan. The hearings have given the AAA staff and members of the Commission on Aging the opportunity to interact with current program participants and learn first hand about their concerns. The hearings were held in 9 different communities, including rural and culturally challenged areas of the county. Groups include participants in exercise classes, congregate meals programs, and an event organized by the Stanislaus Elder Abuse Prevention Alliance (SEAPA) in one of the rural areas. In addition one hearing was held at a STOAAC meeting involving agencies that assist seniors. A summary of the results of these hearings is in Section 9 of this Plan.

The needs of the Baby Boom Generation in Stanislaus County have not been solicited separate from previously mentioned surveys. The Stanislaus County Community Health Assessment surveys included adults in this cohort. At community outreach events the AAA staff attempt to engage people of all ages. The Title IID provider, Healthy Aging Association, conducts exercise classes that are available to anyone over the age of 50, the heart of the Baby Boom Generation. In addition, the Family Caregiver Support Program includes a number from this generation caring for their aging relatives. The AAA staff accepts invitations to give informational presentations to civic groups and agency personnel as outreach events. Questions about services and concerns are addressed by the staff, giving them an opportunity to learn of various needs. The majority of the attendees of these presentations are in the Baby Boom Generation.

Section 8 - Targeting:

The staff of the AAA is committed to providing information about services and meeting many of the needs of all seniors in Stanislaus County. We are currently serving only approximately 6,000 (or 8%) of the population over the age of 60. We know that many seniors will never want or need our services, but we want them to know that the services are available. We are attempting to use the media, social contacts, community events, and our current participants to spread the word about the services and references available through the AAA.

In Stanislaus County the largest ethnic group is Hispanic, with over 39% of residents identifying with this group. For those county residents over 55, approximately 9% are Hispanic. These folks live in all the various communities in the county, with more persons located in rural areas on the east and west side communities of Oakdale, Riverbank, Patterson, Westley, Grayson and Newman. Brochures for all our providers are printed in English and Spanish. The current AAA programs all employ persons who are bilingual in English and Spanish. Several of the narrative objectives are specifically directed towards assisting seniors in the Hispanic communities.

Another ethnic group whose numbers are increasing in the county is the Assyrian community, particularly in Turlock. Presentations by AAA staff have been made to various members of this group and the staff has included a translator who is on-call to assist when needed. Though attempts have been made to convey information about services to the various Asian communities, the AAA staff has been unsuccessful in assessing and meeting the needs of the seniors in these communities. The prevailing attitude and expectation for these communities is that

the extended family will care for their elders. In addition, partly due to elders' experiences in their country of origin, many are afraid of contact with or inclusion in programs funded by the government. These deep-seated attitudes have made it difficult for the AAA staff to assist the seniors in these communities.

To meet the needs of folks in rural areas as well as those with cultural challenges, the service providers work throughout the county. Congregate meals and exercise classes are available in Newman to the south, Patterson to the west, Waterford to the east, and Oakdale to the northeast, as well as Modesto, Ceres and Turlock along the Rt. 99 corridor. In the rural, mostly Hispanic community of Grayson, a Young at Heart class is taught in Spanish and is followed by lunch from the Senior Meals Program. HICAP bilingual staff members have visited Grayson and Patterson to bring information about their services. Catholic Charities, the contracted provider for the Homemaker, Assisted Transportation, Elder Abuse and Long Term Care Ombudsman programs serves seniors throughout the county. SEAPA Senior Information Days are held in Turlock, Modesto, Newman, Riverbank and Oakdale, involving members of the extended local communities. The Senior Community Services Employment Program (SCSEP) has participants from all areas of the county. Miller's Place Adult Day Care and Resource Center and the Family Caregiver Support Program assist caregivers in and from all areas of the county. There are Brown Bag sites throughout the county and Linkages clients are found in every community.

The Info Van is used to visit various places in the county, both urban and rural, with information about the AAA services and referrals to other agencies. The AAA staff takes the van to senior events and to community festivals during the spring, summer and fall. Information is available in Spanish and English in the van, with brochures from a wide variety of agencies beyond the providers of AAA services. In addition, the AAA staff will partner with the Family Resource Centers located in rural and lower income areas of the county to provide information about senior services.

Over the last year there have been major changes to the Long Term Care Ombudsman Program in Stanislaus County. There was a change in leadership and participation by certified volunteers and the local program lost more than 30% of the expected funding due to state budget cuts. Both of these situations made it necessary to make changes in the administration of the Ombudsman Program. To meet the challenges the provider has recruited new volunteers, training and certifying them to handle the calls and concerns expressed to the program. The staff and funding challenges have made it necessary to estimate a decrease in some services listed on the following Service Unit Plan (SUP), relative to the baseline year of 2006-2007. The decrease in services would include ombudsman attendance at resident council and family council meetings, estimated consultations to individuals, and community education. The estimated target numbers represent the potential service numbers, given the current number of certified ombudsmen, as well as new trainees. The goal in coming years will be to increase service levels in all categories. The AAA staff understands the necessity of keeping a presence in all the facilities to ensure the comfort and safety of the residents. Assisting the provider agency to assure the continuation of the oversight of care homes is a top priority of the new Area Plan.

As cited in Section 2, Description of the PSA, Stanislaus County has a number of small cities and towns, and significant rural areas that are a distance from Modesto, where most of the services are available. This is particularly true about medical services, including 3 of the 5 hospitals, with only one of those hospitals located outside the Route 99 corridor in a small city,

Oakdale. Public transportation from areas outside of Modesto is minimal and can be difficult to navigate for seniors needing assistance. One of the narrative objectives listed below will be to work with the StanCOG to bring assisted transportation services to seniors in more areas of the county. The AAA will be looking for creative ways that some of the non-profit agencies can find funding for transportation.

Another area of concern and targeting for the AAA is the population of seniors that have income and assets that exceed the Federal Poverty Limit, but whose financial means are not sufficient to meet their basic needs or pay privately for extra services, such as housekeeping help. Many of these seniors live alone with little or no family support to assist them with maintaining their homes or for transporting them to events, appointments or basic shopping opportunities. Seniors without the means to pay for services or the support system to help them are in danger of becoming isolated and are at risk for developing depression. The AAA staff has been working with the staff of the County Behavioral Health and Recovery Services (BHRS) to develop programs such as a Senior Peer Counseling Program and the PEARLS – (Program to Encourage Active, Rewarding Lives for Seniors). These programs are attempts to reach out to seniors that need someone to talk to and share experiences where the seniors are most comfortable, in their homes. Remaining engaged in the outside world can prevent depression and improve the quality of life for these seniors. The AAA staff will be assisting in the development of these programs, if they are approved as part of the BHRS Prevention and Early Intervention proposal currently being reviewed by the State Mental Health Department.

The Homemaker, Assisted Transportation and Meals Programs have all been successful in reaching seniors that need assistance in one or more areas to remain relatively independent in their homes and communities. The AAA staff will continue to be active in assisting the staff of the providers of these programs to find other sources of funding beyond the money available through the Older Americans and Older Californians Acts. Expanding these programs will make it possible for the low and moderate income seniors to remain in their homes as long as possible. Toward that end the AAA staff has offered the time of a grant writer to assist providers in applying for other sources of funding.

In addition, the AAA staff has supported the creation of the Stanislaus Senior Foundation to solicit donations that will directly benefit established and new programs within the county. An open house was recently held to highlight the growing needs of senior citizens and the programs that are available to them. The open house included a film that was centered on the problem of elder abuse, ways to avoid abuse and all those who are affected by abuse. The Foundation is also, through its fundraising efforts, bringing awareness of the impact the economic crisis is having on government funding and how the decreasing support can affect the lives of senior citizens. One prime example is the decrease in state funding for the elder abuse and ombudsman programs.

A new area of targeting is the Lesbian, Gay, Bisexual and Transgender (LGBT) population in Stanislaus County. While there has not been any formal needs assessment done with this population, informal discussions have been held with the staffs from the BHRS Department and the local PRIDE Center. Much of the focus in Stanislaus County has been on disease prevention within the LGBT community and on the needs of younger LGBT persons with the challenges they face when realizing their sexual identity. It is believed that many of the single persons caring for aging parents in Stanislaus County may be part of the LGBT community. Those caregivers are likely to be in the Baby Boom generation or to be in the younger cohort of the aging community. As cited

in the Needs Assessment portion of this report, the AAA staff is in the process of establishing a support/discussion group for seniors and others. It is hoped that this group will become the starting point for the AAA staff and others to understand the role they may have in assisting persons of the LGBT community.

**Section 9 - Public Hearings:
PSA #30**

**PUBLIC HEARINGS
Conducted for the 2009-2012 Planning Period
CCR Title 22, Article 3, Section 7302(a)(10) and Section 7308; OAA 2006 306(a)**

<u>Fiscal Year</u>	<u>Date</u>	<u>Location</u>	<u>Number of Attendees</u>	<u>Presented in languages other than English?⁵ Yes or No</u>	<u>Was hearing held at a Long-Term Care Facility?⁶ Yes or No</u>
<u>2009-10</u>	<u>2/09</u>	<u>Modesto Sr. Ctr.</u>	<u>55</u>	<u>No</u>	<u>No</u>
	<u>2/09</u>	<u>Patterson Sr. Ctr.</u>	<u>40</u>	<u>No</u>	<u>No</u>
	<u>3/09</u>	<u>Maddux Ctr, Mod.</u>	<u>19</u>	<u>No</u>	<u>No</u>
	<u>3/09</u>	<u>Turlock Meal Site</u>	<u>20</u>	<u>No</u>	<u>No</u>
	<u>3/09</u>	<u>Hughson Meal</u>	<u>20</u>	<u>No</u>	<u>No</u>
	<u>3/09</u>	<u>Ceres Meal Site</u>	<u>10</u>	<u>No</u>	<u>No</u>
	<u>3/09</u>	<u>Newman Exercise</u>	<u>15</u>	<u>No</u>	<u>No</u>
	<u>3/09</u>	<u>Newman Meal</u>	<u>16</u>	<u>No</u>	<u>No</u>
	<u>3/09</u>	<u>Newman 50+ Club</u>	<u>45</u>	<u>No</u>	<u>No</u>
	<u>3/09</u>	<u>Oakdale Exercise</u>	<u>40</u>	<u>No</u>	<u>No</u>
	<u>3/09</u>	<u>Grayson Meal</u>	<u>10</u>	<u>Yes</u>	<u>No</u>
	<u>4/09</u>	<u>STOAC</u>	<u>32</u>	<u>No</u>	<u>No</u>
	<u>4/09</u>	<u>Riverbank Event</u>	<u>100</u>	<u>Yes</u>	<u>No</u>
	<u>2010-11</u>	_____	_____	_____	_____
<u>2011-12</u>	_____	_____	_____	_____	_____

Below items must be discussed at each planning cycle's Public Hearings

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

One of the Commission on Aging members works for the Disability Resource Agency for Independent Living (DRAIL) and has been included with other Commission members in preparing and presenting the Area Plan to the community. The surveys that were used to determine priorities and programs were done with the inclusion of homebound and disabled older adults. In addition, the Hearings listed above included some participants who are disabled. Several narrative objectives were modified due to the input gathered at the meetings.

2. Proposed expenditures for Program Development (PD) and Coordination (C) must be discussed at a public hearing. Did the AAA discuss PD and C activities at a public hearing?

Yes Not Applicable if PD and C funds are not used

No, Explain: _____

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

_____ The comments and questions from seniors in the rural areas of the county included expanding services to these areas, and finding the means to make it easier to attend appointments or events in Modesto. Of particular interest in all areas of the county were the Farmers Market Coupons. In the localities where there is not a Certified Farmers Market, there was great interest in creating an opportunity for seniors to get and spend the coupons in those towns, bringing certified farmers to a specific location. Another request was for increasing the number and availability of some of the exercise classes. In all areas of the county, seniors are very concerned about being able to get transportation to and from doctor appointments, particularly outside of Modesto.

4. Were all interested parties in the PSA notified of the public hearing and provided the opportunity to testify regarding setting of minimum percentages of Title III B program funds to meet the adequate proportion funding for Priority Services?

X Yes

No, Explain: _____

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

No specific comments were made.

6. Summarize other major issues discussed or raised at the public hearings.

See answer to Question 3.

7. List major changes in the Area Plan resulting from input by attendees at the hearings.

Objective 2.10, coordinating with utility companies to work with seniors to assist them in making their utility costs more affordable, was added after one of the hearings.

Section 10 - Identification of Priorities:

As has been stated earlier in this report, the AAA staff is concerned for the welfare of all the seniors in Stanislaus County. We are particularly concerned about seniors who are economically, culturally or geographically challenged. This includes people who are struggling to meet everyday needs, though they may not qualify for government funded programs. Our outreach efforts and service priorities include communities in each of the outlying areas of the county, as well as the largest cities in the center of the county. All of the provider agencies and the AAA staff include employees who are bilingual in English and Spanish. Efforts are being made to provide services to seniors that are part of other minority groups, such as the Assyrian community.

The Priority Services required by law are well represented in all parts of the Area Plan. The Assisted Transportation Program is contracted to a local non-profit agency. Information and Assistance and Outreach are done through the AAA office, as well as through each of the programs currently under contract. Homemaker, In-Home Respite and Daycare Respite are provided through contracts and collaboration with the AAA. Minor Home Modification needs are referred to municipal and non-profit groups in various communities. The Senior Law Project is under contract with a non-profit agency and they maintain a memorandum of understanding with the agency currently under contract for the Long Term Care Ombudsman Program.

Through the surveys done in previous years and using data gathered from other sources it was determined that the AAA staff would continue to work towards three main goals. Those goals are to Promote Health and Well-Being among seniors and caregivers; increase the amount of Information and Assistance available to the general public; and to Promote and Maintain Independence in the senior and disabled populations. The Service Unit Plan supports these goals and the Narrative Objectives propose the details as to how the AAA staff, the provider agencies, and coordinating organizations will work together towards expanding and enhancing them.

A report from the Health Policy Research Center at UCLA using data from 2001-2005 indicates that “The San Joaquin Valley ...has particularly high rates of sedentary lifestyle, obesity and falls. 15.3% of elderly in the San Joaquin Valley reported a fall in the past 12 months – more than three points higher than all other regions.”⁷ The work that the AAA staff is doing with the Healthy Aging Association and the Fall Prevention Coalition is an attempt to decrease these figures and allow the growing population of senior citizens to increase and maintain a good quality of life. The objectives listed include continuing the exercise classes done with Title IIID funding, Health Promotion/Disease Prevention. These classes assist seniors by increasing their strength, assisting them to maintain healthy weight and improve their balance. Along with the classes, a Fall Prevention Coalition that includes staff from a variety of agencies and groups will continue to promote all the means to prevent falls and thereby maintain a good quality of life for the population. Resource guides outlining ways to improve lifestyles to prevent falls will be printed and distributed throughout the county via outreach events. A plan for the future is to provide and conduct a set of classes called “A Matter of Balance” to help seniors identify the causes of their fear of falling and how that fear can be managed, with the outcome that a debilitating and possibly life-threatening fall is prevented. In addition, the AAA staff serves on the Health Services Agency Death Review Team in an attempt to address situations that have resulted in death due to falls.

⁷ **“Center News”**; Gwen Driscoll; *UCLA Center for Health Policy Research – News – November 20, 2008.*

Knowing the importance of proper nutrition and with the recognition that healthy choices are sometimes difficult due to financial reasons, the AAA staff will continue to seek ways to bring Farmers Market Coupons to the communities that don't currently have markets. The coupons will continue to be available at the established certified markets in Modesto, Riverbank and Oakdale. With the provision of these coupons the AAA seeks to assist seniors purchase some of our wonderful local produce and assist local farmers in the process.

The mental health needs of seniors throughout the County has become a priority due to anecdotal evidence and the responses to survey questions in the Stanislaus County Community Health Assessment, done in 2008. The assessment data showed that 24% of seniors surveyed "reported having felt so sad or hopeless almost every day for two weeks or more in a row that they stopped doing some usual activities. Of those who needed mental health treatment in the last 12 months, 31% were unable to receive treatment."⁸ The reasons given for not getting treatment for mental illness included issues such as lack of insurance coverage and personal feelings about asking for help. Many people do not associate feeling sad with specific mental illness such as depression. The AAA staff is working with the staff of the Behavioral Health and Recovery Services (BHRS) Department to implement programs that will address depression symptoms that could lead to isolation and self neglect. Funding will come from the portion of the Mental Health Services Act dealing with Prevention and Early Intervention. Programs will include a Senior Peer Counseling Program, access to a program called "Senior Center Without Walls", and the new PEARLS (Program to Encourage Active, Rewarding Lives for Seniors). These programs will be accomplished in the home of a senior, reducing the stigma often associated with mental illness. For seniors who are not able to participate in outside activities, these programs will give them the means to prevent depression or deal with other mental illnesses. Another concern of the AAA staff and other agencies is the potential problems associated with substance abuse, either through the use of alcohol or drugs. Programs will be designed to help agencies identify seniors who are participating in these dangerous means of coping with issues and assist the agency personnel in guiding the seniors towards healthier habits.

The AAA staff and the contracted service providers have as an ongoing issue the need to convey information about services for senior citizens to the general public and seniors in particular. Toward that end the AAA staff will continue to participate in community events throughout the county, particularly those that are directed towards the needs of senior citizens. The Stanislaus Elder Abuse Prevention Alliance (SEAPA) will be holding information meetings/events in all areas of the county. These meetings include local law enforcement members, clergy persons, and various agencies. The AAA staff participates in the planning of these events and providing resources for seniors, disabled persons and caregivers that will help avoid abuse in various forms. Additionally, the AAA staff participates in local festivals involving families in an attempt to reach more of the general public with information. The festivals and events are held in various communities, including those that are aimed at reaching minority groups such as the Hispanic community. The DVD that was produced in 2007 highlighting the programs provided through the AAA will continue to be broadcast on the local public access channel maintained by the county.

As in other areas of the country, the agencies that assist seniors in Stanislaus County have seen increases in requests for information or assistance, and conversely, funding that has been effectively stagnant. The AAA is committed to assisting these agencies obtain additional grant

⁸ Stanislaus County Community Health Assessment 2008, pg. 140.

funding to sustain and expand services where needed. The Commission on Aging has established the Stanislaus Senior Foundation that will specifically seek donations to be used to assist the provider agencies as the senior population and the costs of doing business increase. The AAA staff will also assist agencies in developing new volunteers to serve the needs of the seniors and disabled persons. This includes promoting the HICAP, Ombudsman and Senior Meals Programs as ways that citizens can volunteer their time and energy.

Another coordination effort between the AAA staff and the BHRS is a new support/discussion group to be held at the local PRIDE Center. This group will be for seniors and caregivers that identify themselves as lesbian, gay, bisexual or transgender. The aim of this group is to give these seniors a forum to discuss their challenges and to give the AAA staff a better understanding of how to meet the needs of this group.

As has been stated in other areas of this plan, the largest minority group in Stanislaus County is the Hispanic population. The AAA staff is actively involved with the Latino Community Roundtable, the Hispanic Leadership Council, and El Concilio. These groups explore and meet the needs within the Hispanic population. The involvement by the AAA staff is an attempt to keep the needs of seniors in the forefront of the leaders of these groups-to insure that seniors are considered to be as much a part of the family as all other age groups. In addition the management of the local Gallo Center for the Arts has included entertainment that appeals to the Hispanic population in particular. The AAA has been given the opportunity to coordinate with the Gallo Center to provide free tickets to these events to Hispanic seniors.

Section 11 - Narrative Goals and Objectives

Goal #1-Promote Health and Well-Being

We intend to promote better health and well-being for the senior citizens of Stanislaus County through attention to life transitions, physical and emotional needs.

Rationale:

- ❖ The needs assessment survey showed that physical activities such as doing heavy housework (72%), shopping (46.3%), and walking (44.8%), were the activities that most of the respondents identified as most difficult.
- ❖ Results of the needs assessment survey showed that those respondents who exercised regularly had less difficulty in accomplishing activities of daily living.
- ❖ Other results showed that 41.1% of respondents said depression was a problem and 38.5% identified loneliness as a significant issue.

Objectives:

- 1.1 The AAA staff will partner with the Behavioral Health and Recovery Services (BHRS) Department and other community organizations to implement three programs that address the mental health needs of seniors and disabled persons. These will be part of the Mental Health Services Act Prevention and Early Intervention (PEI) initiative. Proposed programs include a Senior Peer Counseling program and PEARLS (Program to Encourage Active, Rewarding Lives for Seniors). These programs are intended to reduce the incidence of depression in physically impaired and socially isolated older adults in their own homes. *Outcome:* The creation and implementation of at least one program during the year. *Measurement:* Successful creation of at least one program and the number of participants enrolled. **To be accomplished 7/1/09-6/30/10. New Program Development Objective.**
- 1.2 The AAA staff will coordinate with BHRS to conduct depression screenings at the nutrition sites throughout the County during October, Depression Screening Month. In addition, BHRS staff will conduct depression screenings at the annual Healthy Aging Summit, October 9, 2009. *Outcome:* Seniors will have the opportunity to address symptoms, causes and results of depression. *Measurement:* Attendance at the screening sessions and by participation in follow-up sessions by the BHRS. **To be accomplished by 10/31/09. New Coordination Objective.**
- 1.3 The AAA staff will work with local governments to promote the availability and distribution of free USDA Farmers Market Coupons to qualified low-income senior citizens throughout the County. Particular attention will be given to establishing new markets and opportunities for seniors in the west side communities of Westley, Grayson, Patterson, and Newman. The coupons will continue to be available at established markets in Modesto, Riverbank and Oakdale and from certified farmers at their individual farm stands. *Outcome:* Markets will be available for seniors to attend and take advantage of the Farmers Market Coupons in under-served areas of the County. *Measurement:* Number of new areas served, coupons distributed and the redemption of the coupons. **To be accomplished by 6/30/10. New Program Development Objective.**
- 1.4 During May 2010, Older Americans Month, the AAA staff and Commission on Aging members will highlight the accomplishments of senior citizens in the County. A Proclamation will be sought from the Board of Supervisors to recognize May as Older

Americans Month and an outstanding senior from each District will be nominated and honored at a meeting of the Board of Supervisors in May. *Outcome:* The Proclamation will be granted and senior citizens will be recognized at a Board of Supervisors meeting. *Measurement:* Dates secured for the events and specific seniors are honored. ***To be accomplished by 5/31/10. New Coordination Objective.***

- 1.5 In October 2009, the AAA staff will coordinate with the Healthy Aging Association staff to sponsor the Healthy Aging Summit. The Summit will include free health screenings, flu shots and information about healthy living for seniors and caregivers. *Outcome:* The Summit will be held October 9, 2009. *Measurement:* Number of attendees at the Summit and number of screenings done. ***To be accomplished by 10/9/09. New Coordination Objective.***
- 1.6 The AAA staff will coordinate with AARP to conduct a Medication Management Seminar at the Healthy Aging Summit. *Outcome:* Seniors and caregivers will gain understanding about the use and potential abuse of various medications. *Measurement:* Number of participants for whom medications are reviewed. ***To be accomplished 10/9/09. New Coordination Objective.***
- 1.7 As the recipient of Title III D funding, the Healthy Aging Association staff will conduct strength training, Tai Chi and aerobic classes throughout the County to assist seniors in achieving and maintaining optimal health and preventing injuries. *Outcome:* Seniors will have the opportunity to exercise in an atmosphere designed to meet their specific needs. *Measurement:* Number of classes available, number of participants, and the satisfaction of those participants. ***To be accomplished 7/1/09-6/30/10. New Objective.***
- 1.8 The Healthy Aging Association and AAA staff will offer the program, “A Matter of Balance: Managing Concerns About Falls”. The Healthy Aging Association and AAA staff members will train Balance Coaches to teach participants how to overcome their fear of falling and practical steps to increase their health to avoid falls. *Outcome:* A minimum of 96 seniors will increase their understanding about methods to prevent debilitating falls. *Measurement:* Number of participants and the evaluation of their progress at the end of the set of classes. ***To be accomplished 7/1/09-12/31/09. New Program Development Objective.***
- 1.9 The AAA staff will work with the provider of the Home Delivered Meals and the Congregate Meals to improve the quality and delivery of meals. Additional funding will be sought to expand the programs. *Outcome:* The AAA staff and dietician will develop specific standards for the meals and require the provider to meet those standards. *Measurement:* The creation of the standards and a bi-annual review of the menu cycle. ***To be accomplished 7/1/09-6/30/10. New Program Development Objective.***
- 1.10 The AAA staff will work with the provider of the meals programs to design a program utilizing volunteers. Volunteers would be an integral part of a sustainable expansion of congregate sites, particularly into rural areas. *Outcome:* Volunteer positions will be created and implemented. 10,000-15,000 more meals will be provided during the year. *Measurement:* Implementation of a volunteer program and the additional number of meals served. ***To be accomplished 7/1/09-6/30/10. New Program Development Objective.***

- 1.11** The AAA staff will coordinate with the staff of the Gallo Center for the Arts to arrange for seniors to participate in special cultural events, especially Hispanic seniors, at little or no cost to them. Preference will be given to seniors who are geographically and financially challenged, with staff facilitating arrangements for the event. *Outcome:* Seniors will have the opportunity to have access to cultural events in Modesto and enhance their quality of life. *Measurement:* The number of events and number of seniors that attend. ***To be accomplished 7/1/09-6/30/10. New Coordination Objective.***
- 1.12** The AAA staff will work with BHRS staff to establish and conduct a support group for seniors, caregivers and disabled persons in the Lesbian, Gay, Bisexual and Transgender (LGBT) community. *Outcome:* LGBT seniors will have a forum to share experiences and challenges. *Measurement:* The group established and by the number of participants. ***To be accomplished 7/1/09-6/30/10. New Program Development Objective.***
- 1.13** The AAA staff will work with the Long Term Care Ombudsman staff to train and certify new Ombudsman volunteers. *Outcome:* By the end of fiscal year 2008-2009 the Stanislaus County Ombudsman Program will have 30 trained, certified and active volunteers. *Measurement:* The number of training classes conducted and the number of volunteers in the Ombudsman Program. ***To be accomplished 7/1/09-6/30/10. New Objective.***

Goal #2-Information and Assistance

We intend to make available to seniors and caregivers information regarding services and agencies that will assist them to achieve or maintain a beneficial lifestyle.

Rationale:

- ❖ Having enough money to meet expenses was one of the top issues that was identified as a concern for 39.3% of the respondents of the needs assessment survey.
- ❖ Of the respondents to the survey, 35.7% said that getting information about services was a major issue and 30.8% identified obtaining services and benefits as a concern.
- ❖ As the population continues to age it will become more vital that the AAA be the conduit for information about senior services in the county.

Objectives:

- 2.1** The AAA Information and Assistance staff will provide guidance in completing applications for property tax postponement, Dial-a-Ride and discounts on utilities. This guidance will be available in both English and Spanish. *Outcome:* Seniors needing assistance to complete appropriate applications will be aided by the AAA staff. *Measurement:* Measurement will be by the number of applications completed for applicable discounts. ***To be accomplished 7/1/09-6/30/10. New Objective.***
- 2.2** The AAA staff will request that the DVD that explains the various programs of the AAA to be broadcast on the County public access cable channel and on the Information TVs that play in the Community Services Agency waiting areas during Older Americans Month, May 2010. *Outcome:* Information about AAA services will be available via television. *Measurement:* The number of times the DVD is played and calls to the I&A line. ***To be accomplished 5/1/10-5/31/10. New Objective.***

- 2.3 The AAA staff and members of the Fall Prevention Coalition will make presentations to various groups to explain the importance and means to prevent debilitating falls. *Outcome:* Information will be conveyed to members of the public about fall prevention. *Measurement:* Number of presentations and attendance at the presentations. **To be accomplished 7/1/09-6/30/10. New Coordination Objective.**
- 2.4 The AAA staff and members of the Fall Prevention Coalition will update and distribute copies of a Resource Guide to assist consumers in taking steps to prevent falls. *Outcome:* Through the AAA I&A office, the Info Van, and the offices of Coalition members the Guides will be distributed. *Measurement:* The number of Guides produced and distributed. **To be accomplished 7/1/09-6/30/10. New Coordination Objective.**
- 2.5 The AAA staff will participate with El Concilio, the West Side Community Alliance, and the Hispanic Leadership Council to take information about services available through **the AAA** to the Hispanic community, particularly in the rural areas of the County. **Bilingual** staff will be used to accurately convey this information on an individual basis to seniors and caregivers. *Outcome:* Members of the Hispanic population will understand the role of the AAA in their lives and the possibilities for assistance through the AAA. *Measurement:* **The number of contacts made at various events.** **To be accomplished 7/1/09-6/30/10. New Coordination Objective.**
- 2.6 The Commission on Aging Public Relations Committee, with assistance from AAA staff, will present information to City Councils and Municipal Advisory Councils in unincorporated areas of the County regarding services available through the AAA. *Outcome:* Members of governing bodies and the general public will hear about the AAA, and be able to make appropriate referrals to the AAA and their partner agencies. *Measurement:* Number of presentations made. **To be accomplished 7/1/09-6/30/10. New Coordination Objective.**
- 2.7 The AAA staff through the Info Van will attend meetings and community functions, distributing information about services for senior citizens and caregivers in the rural areas of the County, particularly during May 2010, Older Americans Month. The staff will distribute information individually as seniors and caregivers visit the van. *Outcome:* People in the rural areas of the County will be aware of the services available through the AAA. *Measurement:* The number of meetings and events attended by the staff and the number of people who receive information. **To be accomplished 7/1/09-6/30/10. New Objective.**
- 2.8 The AAA staff will coordinate with the Stanislaus Elder Abuse Prevention Alliance (SEAPA) to attend and sponsor seminars and information days that warn seniors and caregivers about potential elder abuse. Seniors and caregivers will be given information on how to avoid abuse and what to do if abuse is suspected. The staff will distribute information individually as seniors and caregivers visit the Info Van or information table. *Outcome:* Seniors will receive information about elder abuse, how to prevent it and AAA services. *Measurement:* The number of events and the number of attendees at the events. **To be accomplished 7/1/09-6/30/10. New Coordination Objective.**
- 2.9 The AAA staff will work with the United Way of Stanislaus and the Mother Lode to promote the use of the 211 Information and Referral Service at senior and community

events. The AAA staff will also advise the United Way staff regarding services for senior citizens in Stanislaus County. *Outcome:* The community will become informed about the 211 Service. *Measurement:* The number of events and the amount of literature distributed. ***To be accomplished 7/1/09-6/30/10. New Coordination Objective.***

- 2.10** The AAA staff will coordinate with the staff of the Modesto Irrigation District (MID) and other utility companies to promote various energy efficiency efforts to help seniors manage their utility bills. *Outcome:* Seniors throughout the county will receive information and assistance reducing the cost of their utilities. *Measurement:* The number of projects sponsored by MID and other utilities and coordinated with the AAA. ***To be accomplished 7/1/09-6/30/10. New Coordination Objective.***

Goal #3-Promote and Maintain Independence

We intend to assist seniors and caregivers in promoting and maintaining the optimum conditions to remain independent in the community.

Rationale:

- ❖ Approximately 30% of needs assessment respondents identified transportation as an issue.
- ❖ The number of family caregivers that require assistance to maintain the best conditions to continue providing care at home has increased.
- ❖ Approximately 72% of needs assessment respondents identified heavy housework and approximately 45% identified light housework as issues to maintain their independence.

Objectives:

- 3.1** The Stanislaus Senior Foundation, AAA staff, and the Commission on Aging will partner to seek funding to expand services through each of the Older Americans Act and Older Californians Act programs. *Outcome:* The programs will have additional resources to provide expanded services to seniors in rural areas, and the growing population in the urban areas of the County. *Measurement:* The additional services provided and the greater numbers of seniors served. ***To be accomplished 7/1/09-6/30/10. New Program Development Objective.***
- 3.2** The AAA staff will coordinate with the Stanislaus Council of Governments (StanCOG) to promote the expansion and coordination of specialized paratransit services to seniors and disabled persons in the rural west and east sides of the County. *Outcome:* Specialized paratransit services will be effectively coordinated between cities to better assist seniors and disabled persons as they navigate throughout the County. *Measurement:* Number of new routes available and greater opportunities for seniors as gauged by the number of seniors served. ***To be accomplished 7/1/09-6/30/10. New Coordination Objective.***

SECTION 12. SERVICE UNIT PLAN (SUP) OBJECTIVES GUIDELINES
PSA # 30

TITLE III/VII SERVICE UNIT PLAN OBJECTIVES
2009–2012 Three-Year Planning Period
CCR Article 3, Section 7300(d)

1. Personal Care (In-Home)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	_____	_____	_____
2010-2011	_____	_____	_____
2011-2012	_____	_____	_____

2. Homemaker

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2009-2010	5,400	2, 3	_____
2010-2011	_____	_____	_____
2011-2012	_____	_____	_____

3. Chore

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	_____	_____	_____
2010-2011	_____	_____	_____
2011-2012	_____	_____	_____

4. Adult Day Care/Adult Day Health

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	_____	_____	_____
2010-2011	_____	_____	_____
2011-2012	_____	_____	_____

5. Case Management**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	_____	_____	_____
2010-2011	_____	_____	_____
2011-2012	_____	_____	_____

6. Congregate Meal**Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	70,000	1, 2, 3	1.9, 1.10
2010-2011	_____	_____	_____
2011-2012	_____	_____	_____

7. Home-Delivered Meal**Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	115,000	1, 2, 3	1.9, 1.10
2010-2011			
2011-2012			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	5,000	2	
2010-2011			
2011-2012			

9. Nutrition Counseling**Unit of Service = 1 session per participant**

	Proposed		

Fiscal Year	Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010			
2010-2011			
2011-2012			

10. Assisted Transportation

Unit of Service = 1 one-way trip

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2009-2010	4,500	2, 3	3.2
2010-2011			
2011-2012			

11. Transportation

Unit of Service = 1 one-way trip

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010			
2010-2011			
2011-2012			

12. Legal Assistance

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	1,600	2	
2010-2011			
2011-2012			

13. Information and Assistance

Unit of Service = 1 contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2009-2010	3,500	2	
2010-2011			
2011-2012			

14. Outreach

Unit of Service = 1 contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2009-2010	5,000	2	2.5, 2.7
2010-2011			
2011-2012			

NAPIS Service Category 15 – “Other” Title III Services

Title III D, Disease Prevention/Health Promotion

Service Activity Physical Fitness

Units of Service 1 hour

Fiscal Year	Proposed Units of Service	Program Goal Number	Objective Numbers (required)
2009-2010	2,000	1, 2	1.7, 1.8, 2.3, 2.4
2010-2011			
2011-2012			

Title III D, Medication Management

Service Activity: Seminar

Units of Service: 1 contact

Fiscal Year	Proposed Units of Service	Program Goal Number	Objective Numbers (required)
2009-2010	100	1	1.6
2010-2011			
2011-2012			

Title III D

Service Activity: Community Education

Units of Service: 1 hour

Fiscal Year	<u>Proposed</u> Units of Service	Program Goal Number	Objective Numbers (required)
2009-2010	100	2	2.3, 2.4
2010-2011			
2011-2012			

Title III B, Other Supportive Services

Service Category Public Information

Units of Service and Activity: 1 event or presentation

Fiscal Year	<u>Proposed</u> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	12	2	2.3, 2.4
2010-2011			
2011-2012			

TITLE IIIB and Title VIIA:

LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES

PSA 30

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

Outcome 1. The problems and concerns of long-term care residents are solved through complaint resolution and other services of the Ombudsman Program. [OAA Section 712(a)(3)(5)]

Measures and Targets:

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

The average California complaint resolution rate for FY 2006-2007 was 73%.

1. <u>FY 2006-2007 Baseline Resolution Rate: 90%</u> <u>Number of complaints resolved: 1304 + Number of partially resolved complaints: 142 divided by the Total Number of Complaints Received: 1614 = Baseline Resolution Rate: 90%</u>
2. <u>FY 2009-2010 Target: Resolution Rate: 74%</u>
3. <u>FY 2010-2011 Target: Resolution Rate _____%</u>
4. <u>FY 2011-2012 Target: Resolution Rate _____%</u>
<u>Program Goals and Objective Numbers: 1.13</u>

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

1. FY 2006-2007 Baseline: 15 number of meetings attended
2. FY 2009-2010 Target: number 10 and % increase or % decrease 33%
3. FY 2010-2011 Target: number and % increase or % decrease
4. FY 2011-2012 Target: number and % increase or % decrease
Program Goals and Objective Numbers: 1.13

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

1. FY 2006-2007 Baseline: number of meetings attended: 87
2. FY 2009-2010 Target: number 50 and % increase or % decrease 42%
3. FY 2010-2011 Target: number and % increase or % decrease
4. FY 2011-2012 Target: number and % increase or % decrease
Program Goals and Objective Numbers: 1.13, 2.8

D. Consultation to Facilities (AoA Report, Part III-D, #4)

1. FY 2006-2007 Baseline: number of consultations: 4
2. FY 2009-2010 Target: number: 15 and % increase 275% or % decrease
3. FY 2010-2011 Target: number and % increase or % decrease
4. FY 2011-2012 Target: number and % increase or % decrease
Program Goals and Objective Numbers: 1.13

E. Information and Consultation to Individuals (AoA Report, Part III-D, #5)

1. FY 2006-2007 Baseline: number of consultations: 928
2. FY 2009-2010 Target: number 800 and % increase or % decrease 14%
3. FY 2010-2011 Target: number and % increase or % decrease
4. FY 2011-2012 Target: number and % increase or % decrease
Program Goals and Objective Numbers: 1.13, 2.8

F. Community Education (AoA Report, Part III-D, #10)

1. FY 2006-2007 Baseline: number of sessions: 54
2. FY 2009-2010 Target: number: 25 of sessions and % increase or % decrease 54%
3. FY 2010-2011 Target: number of sessions and % increase or % decrease
4. FY 2011-2012 Target: number of sessions and % increase or % decrease
Program Goals and Objective Numbers: 1.13, 2.8

G. Systems Advocacy

1. FY 2009-2010 Activity: In narrative form, please provide at least one systemic advocacy effort that the local LTC Ombudsman Program will engage in during the fiscal year.

<u>Systemic Advocacy Effort(s)</u> Part of the Program's Systemic Advocacy will be to work with doctors to see how overuse of anti-psychotic (chemical restraints) can be reduced.

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

Measures and Targets:

A. Facility Coverage (other than in response to a complaint).

(AoA Report, Part III-D, #6)

Number of Nursing Facilities visited (unduplicated) at least once a quarter not in response to a complaint (based on current resources available to the program).

1. FY 2006-2007 Baseline: 90%
<u>Number of Nursing Facilities visited at least once a quarter not in response to a complaint: 18</u> <u>divided by the number of Nursing Facilities: 20.</u>
2. FY 2009-2010 Target: % increase: 5% or % decrease
3. FY 2010-2011 Target: % increase or % decrease
4. FY 2011-2012 Target: % increase or % decrease
Program Goals and Objective Numbers: 1.13

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

Number Board and Care Facilities (RCFEs) visited (unduplicated) at least once a quarter not in response to a complaint (based on current resources available to the program).

1. <u>FY 2006-2007 Baseline: 79%</u> <u>Number of RCFEs visited at least once a quarter not in response to a complaint: 55</u> <u>divided by the number of RCFEs: 70.</u>
2. <u>FY 2009-2010 Target: % increase _____ or % decrease:15%</u>
3. <u>FY 2010-2011 Target: % increase _____ or % decrease _____</u>
4. <u>FY 2011-2012 Target: %increase _____ or % decrease _____</u>
<u>Program Goals and Objective Numbers: 1.13</u>

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

1. <u>FY 2006-2007 Baseline: FTEs: 2</u>
2. <u>FY 2009-2010 Target: number of FTEs 2 and % increase_0_ or % decrease _0__</u>
3. <u>FY 2010-2011 Target: number of FTEs _____ and % increase____ or % decrease _____</u>
4. <u>FY 2011-2012 Target: number of FTEs _____ and % increase____ or % decrease _____</u>
<u>Program Goals and Objective Numbers:</u>

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

1. <u>FY 2006-2007 Baseline: Number of certified LTC Ombudsman volunteers as of June 30, 2007: 16 _____</u>
2. <u>FY 2009-2010 Projected Number of certified LTC Ombudsman volunteers as of June 30, 2010: 30 and % increase:47% _____ or % decrease _____</u>
3. <u>FY 2010-2011 Projected Number of certified LTC Ombudsman volunteers as of June 30, 2011 _____ and % increase _____ or % decrease _____</u>
4. <u>FY 2011-2012 Projected Number of certified LTC Ombudsman volunteers as of June 30, 2012 _____ and % increase _____ or % decrease _____</u>
<u>Program Goals and Objective Numbers: 1.13</u>

Outcome 3. Ombudsman representatives report their complaint processing and other activities accurately and consistently. [OAA Section 712(c)]

Measures and Targets:

A. Each Ombudsman Program provides regular training on the National Ombudsman Reporting System (NORS).

1. FY 2006-2007 Baseline number of NORS Part I, II, III or IV training sessions completed: N/A
2. FY 2009-2010 Target: number of NORS Part I, II, III or IV training sessions planned: 7
3. FY 2010-2011 Target: number of NORS Part I, II, III or IV training sessions planned
4. FY 2011-2012 Target: number of NORS Part I, II, III or IV training sessions planned
Program Goals and Objective Numbers: 1.13

TITLE VIIB ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

PSA #30

<u>Fiscal Year</u>	<u>Total # of Public Education Sessions</u>
2009-10	8
2010-11	
2011-12	

<u>Fiscal Year</u>	<u>Total # of Training Sessions for Professionals</u>
2009-10	4
2010-11	
2011-12	

<u>Fiscal Year</u>	<u>Total # of Training Sessions for Caregivers served by Title III E</u>
2009-10	0
2010-11	
2011-12	

<u>Fiscal Year</u>	<u>Total # of Hours Spent Developing a Coordinated System</u>
2009-10	1500
2010-11	
2011-12	

<u>Fiscal Year</u>	<u>Total # of Educational Products to be Developed</u>	<u>Description of Educational Products</u>
2009-2010	4	a. Bank teller training materials to assist them in identifying fraud and abuse and how to report suspected financial abuse
		b. Packet of information to distribute to agency in-home assistants on how to identify abuse and how to report it
		c. Updated informational brochures for distribution at

		senior centers and other community venues
		d. Updated power point presentation to be used in connection with training sessions.
2010-2011		
2011-2012		

<u>Fiscal Year</u>	<u>Total # of Copies of Educational Materials or Products to be Distributed</u>	<u>Description of Educational Materials or Products</u>
2009-2010	1000	a. A DVD produced by the Stanislaus County information services office: "Secrets in America"- copies to be distributed to various groups
		b. Products listed above to be distributed and used at events, training sessions, and at agencies throughout the county.
2010-2011		
2011-2012		

PSA #30

TITLE III E SERVICE UNIT PLAN OBJECTIVES

This Service Unit Plan (SUP) utilizes the five broad federal service categories defined in PM 08-03. Refer to the FCSP Service Matrix in this PM for eligible activities and service unit examples covered within each category. Specify proposed audience size or units of service for ALL budgeted funds.

For Direct Services

<u>CATEGORIES</u>	<u>1</u>	<u>2</u>	<u>3</u>
<u>Direct III E Family Caregiver Services</u>	<u>Proposed</u> <u>Units of Service</u>	<u>Required</u> <u>Goal #(s)</u>	<u>Optional</u> <u>Objective #(s)</u>
Information Services	# of activities and Total est. audience for above		
2009-2010	# of activities: 25 Total est. audience for above: 100,000	2	2.2, 2.4, 2.6, 2.7, 2.8
2010-2011	# of activities: Total est. audience for above:		
2011-2012	# of activities: Total est. audience for above:	—	—
Access Assistance	Total contacts		
2009-2010	250	2	
2010-2011			
2011-2012			
Support Services	Total hours		
2009-2010	325	1, 2	1.12
2010-2011			
2011-2012			
Respite Care	Total hours		
2009-2010	3000	2	
2010-2011			
2011-2012			
Supplemental Services	Total occurrences		
2009-2010	50	2	
2010-2011			
2011-2012			

Direct III E Grandparent Services	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Information Services	<u># of activities and</u> <u>Total est. audience for above</u>		
2009-2010	# of activities: Total est. audience for above:		

2010-2011	# of activities: Total est. audience for above:		
2011-2012	# of activities: Total est. audience for above:		
Access Assistance	Total contacts		
2009-2010			
2010-2011			
2011-2012			
Support Services	Total hours		
2009-2010			
2010-2011			
2011-2012			
Respite Care	Total hours		
2009-2010			
2010-2011			
2011-2012			
Supplemental Services	Total occurrences		
2009-2010			
2010-2011			
2011-2012			

For Contracted Services

Contracted III E Family Caregiver Services	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Information Services	<u># of activities and total est. audience for above:</u>		
2009-2010	# of activities: Total est. audience for above:		
2010-2011	# of activities: Total est. audience for above:		
2011-2012	# of activities: Total est. audience for above:		
Access Assistance	Total contacts		
2009-2010			
2010-2011			
2011-2012			
Support Services	Total hours		
2009-2010			
2010-2011			
2011-2012			
Respite Care	Total hours		

2009-2010			
2010-2011			
2011-2012			
Supplemental Services	Total occurrences		
2009-2010			
2010-2011			
2011-2012			

Contracted III E Grandparent Services	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Information Services	# of activities and Total est. audience for above		
2009-2010	# of activities: Total est. audience for above:		
2010-2011	# of activities: Total est. audience for above:		
2011-2012	# of activities: Total est. audience for above:		
Access Assistance	Total contacts		
2009-2010			
2010-2011			
2011-2012			
Support Services	Total hours		
2009-2010			
2010-2011			
2011-2012			
Respite Care	Total hours		
2009-2010			
2010-2011			
2011-2012			
Supplemental Services	Total occurrences		
2009-2010			
2010-2011			
2011-2012			

TITLE V/SCSEP SERVICE UNIT PLAN OBJECTIVES
CCR Article 3, Section 7300(d)
PSA# 30

The Service Unit Plan (SUP) utilizes the new Data Collection System developed by the U.S. Department of Labor (DOL), which captures the new performance measures per the Older Americans Act of 1965 as amended in 2000, and the Federal Register 20 CFR Part 641. The related funding is reported in the annual Title V/SCSEP Budget.

Fiscal Year (FY)	CDA Authorized Slots	National Grantee Authorized Slots (If applicable)	Objective Numbers (If applicable)
2009-2010	14		2
2010-2011			
2011-2012			

COMMUNITY BASED SERVICES PROGRAMS
SERVICE UNIT PLAN (CBSP) OBJECTIVES
PSA# 30
CCR Article 3, Section 7300(d)

The Service Unit Plan (SUP) follows the instructions for layouts provided in PM 98-26 (P) and updated in PM 00-13 (P). The related funding is reported in the annual Area Plan Budget (CDA 122). Report units of service to be provided with ALL funding sources.

For services that will not be provided, check the Not Applicable box

Alzheimer's Day Care Resource Center

1. Goals and Objectives:

Fiscal Year	Goal Numbers	Objective Numbers (If applicable)
2009-2010	2	
2010-2011		
2011-2012		

2. In-Service Training Sessions for Staff (A minimum of 6 sessions required per year)

Fiscal Year	In-Service Training Sessions
2009-2010	18
2010-2011	
2011-2012	

3. Professional/Intern Educational Training Sessions (A minimum of 4 sessions required per year)

Fiscal Year	Professional/Intern Educational Training Sessions
2009-2010	32
2010-2011	
2011-2012	

4. Caregiver Support Group Sessions (A minimum of 12 sessions required per year)

Fiscal Year	Caregiver Group Support Sessions
2009-2010	40
2010-2011	
2011-2012	

5. Public/Community Education Training Sessions (A minimum of 1 session required per year)

Fiscal Year	Public/Community Education Training Sessions
2009-2010	10
2010-2011	
2011-2012	

6. List of ADCRC sites in your PSA:

Name of Center	Street Address (Street, City, Zip Code)
1. Miller's Place Adult Day Care & Resource Center	730 McHenry Ave Modesto, CA 95350
2.	
3.	
4.	
5.	
6.	
7.	

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Brown Bag

Fiscal Year	Goal Numbers
2009-2010	2
2010-2011	
2011-2012	

Fiscal Year	Estimated # of Unduplicated Persons to be Served
2009-2010	2000
2010-2011	
2011-2012	

Fiscal Year	Estimated Pounds of Food to be Distributed
2009-2010	400,000
2010-2011	
2011-2012	

Fiscal Year	Estimated # of Volunteers
2009-2010	160
2010-2011	
2011-2012	

Fiscal Year	Estimated # of Volunteer Hours
2009-2010	4,500
2010-2011	
2011-2012	

Fiscal Year	Estimated # of Distribution Sites
2009-2010	32
2010-2011	
2011-2012	

Linkages

1. Goals and Objectives:

Fiscal Year	Goal Numbers	Objective Numbers (Optional)
2009-2010	2	
2010-2011		
2011-2012		

2. Unduplicated Clients Served

Fiscal Year	Number of Unduplicated Clients Served (Include Targeted Case Management and Handicapped Parking Revenue)
2009-2010	100
2010-2011	
2011-2012	

3. Active Monthly Caseload

Fiscal Year	Active Monthly Caseload (Include Targeted Case Management and handicapped parking revenue)
2009-2010	90
2010-2011	
2011-2012	

Senior Companion –Not Funded

Fiscal Year	Goal Numbers
2009-2010	
2010-2011	
2011-2012	

Fiscal Year	Volunteer Service Years (VSYs)
2009-2010	
2010-2011	
2011-2012	

Fiscal Year	Volunteer Hours
2009-2010	
2010-2011	
2011-2012	

Fiscal Year	Senior Volunteers
2009-2010	
2010-2011	
2011-2012	

Fiscal Year	Seniors Served
2009-2010	
2010-2011	
2011-2012	

Respite Purchase of Service

2009-2010		Goal #	Objective # (if applicable):
Adult Day Care (ADC)	hours:		
Adult Day Health Care (ADHC)	hours:		
Respite In-Home	hours: 950	2	
Respite-Out of Home			
Skilled Nursing Facility	hours:		
Residential Care Facility	hours:		
Other:	hours:		
Alzheimer’s Day Care Resource Center (ADCRC)	days: 45	2	
POS Transportation	1-way trips:		
Other:	#occurrences:		

2010-2011		Goal #	Objective # (if applicable):
Adult Day Care (ADC)	hours:		
Adult Day Health Care (ADHC)	hours:		
Respite In-Home	hours:		
Respite-Out of Home			
Skilled Nursing	hours:		
Residential Care Facility	hours:		
Other:	hours:		
Alzheimer’s Day Care Resource Center (ADCRC)	days:		
POS: Transportation	1-way trips:		
Other:	#occurrences:		

<u>2011-2012</u>		<u>Goal #</u>	<u>Objective # (if applicable):</u>
Adult Day Care (ADC)	hours:		
Adult Day Health Care (ADHC)	hours:		
Respite In-Home	hours:		
Respite-Out of Home			
Skilled Nursing	hours:		
Residential Care Facility	hours:		
Other:	hours:		
Alzheimer's Day Care Resource Center (ADCRC)	days:		
POS: Transportation	1-way trips:		
Other:	#occurrences:		

HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM (HICAP)
SERVICE UNIT PLAN
CCR Article 3, Section 7300(d)
PSA# 30

Section 1. Three Primary HICAP Units of Service

<u>State Fiscal Year (SFY)</u>	<u>Total Estimated Persons Counseled Per SFY (Unit of Service)</u>	<u>Goal Numbers</u>
2009-2010	1,000	2
2010-2011		
2011-2012		
<u>State Fiscal Year (SFY)</u>	<u>Total Estimated Number of Attendees Reached in Community Education Per SFY (Unit of Service)</u>	<u>Goal Numbers</u>
2009-2010	1,500	2
2010-2011		
2011-2012		
<u>State Fiscal Year (SFY)</u>	<u>Total Estimated Number of Community Education Events Planned per SFY (Unit of Service)</u>	<u>Goal Numbers</u>
2009-2010	50	2
2010-2011		
2011-2012		

Section 2. Three HICAP Legal Services Units of Service (if applicable)⁹

⁹ Requires a contract for using HICAP funds to pay for HICAP Legal Services

<u>State Fiscal Year (SFY)</u>	<u>Total Estimated Number of Clients Represented Per SFY (Unit of Service)</u>	<u>Goal Numbers</u>
2009-2010		
2010-2011		
2011-2012		
<u>State Fiscal Year (SFY)</u>	<u>Total Estimated Number of Legal Representation Hours Per SFY (Unit of Service)</u>	<u>Goal Numbers</u>
2009-2010		
2010-2011		
2011-2012		
<u>State Fiscal Year (SFY)</u>	<u>Total Estimated Number of Program Consultation Hours per SFY (Unit of Service)</u>	<u>Goal Numbers</u>
2009-2010		
2010-2011		
2011-2012		

Section 3. Two HICAP Counselor Measures

<u>State Fiscal Year (SFY)</u>	<u>Planned Average Number of Registered Counselors for the SFY</u>
2009-2010	10
2010-2011	
2011-2012	

<u>State Fiscal Year (SFY)</u>	<u>Planned Average Number of Active Counselors for the SFY</u>
2009-2010	10
2010-2011	
2011-2012	

Section 4. Eight Federal Performance Benchmark Measures

<u>Fiscal Year (FY)</u>	<u>4.1 - Beneficiaries Reached Per 10k Beneficiaries in PSA</u>
2009-2010	2,000
2010-2011	
2011-2012	

Note: This includes counseling contacts and community education contacts.

<u>Fiscal Year (FY)</u>	<u>4.2 - One-on-One Counseling Per 10k Beneficiaries in PSA</u>
2009-2010	350
2010-2011	
2011-2012	

<u>Fiscal Year (FY)</u>	<u>4.3 - Beneficiaries with Disabilities Contacts Reached Per 10k Beneficiaries with Disabilities in PSA</u>
2009-2010	100
2010-2011	
2011-2012	

Note: These are Medicare beneficiaries due to disability and not yet age 65.

<u>Fiscal Year (FY)</u>	<u>4.4 - Low Income Contacts Per 10k Low Income Beneficiaries in PSA</u>
2009-2010	160
2010-2011	
2011-2012	

Note: Use 150% Federal Poverty Line (FPL) as Low Income.

<u>Fiscal Year (FY)</u>	<u>4.5 – All Enrollment and Assistance Contacts Per 10k Beneficiaries in PSA</u>
2009-2010	90
2010-2011	
2011-2012	

Note: This includes all enrollment assistance, not just Part D.

<u>Fiscal Year (FY)</u>	<u>4.6 - Part D Enrollment and Assistance Contacts Per 10k Beneficiaries in PSA</u>
2009-2010	25
2010-2011	
2011-2012	

Note: This is a subset of all enrollment assistance in 4.5.

<u>Fiscal Year (FY)</u>	<u>4.7 - Total Counselor FTEs Per 10k Beneficiaries in PSA</u>
2009-2010	3.63
2010-2011	
2011-2012	
<u>Fiscal Year (FY)</u>	<u>4.8 - Percent of Active Counselors That Participate in Annual Update Trainings</u>
2009-2010	100%
2010-2011	
2011-2012	

SECTION 13. FOCAL POINTS
PSA# 30

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

Provide an updated list of designated community focal points and their addresses. This information must match the National Aging Program Information System (NAPIS) SPR 106.

Modesto Senior Center, 211 Bodem St, Modesto, CA 95350

Gladys Lemmons Senior Center, 450 East A St, Oakdale, CA 95361

Patterson Senior Center, 700 F St, Patterson, CA 95363

Mancini Hall, Tuolomne Blvd, Modesto, CA 95354

The Turlock Corps of The Salvation Army, 893 Lander Ave, Turlock, CA 95380

SECTION 14. PRIORITY SERVICES

PSA #30

2009-2012 Three-Year Planning Cycle

PRIORITY SERVICES:

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

**Category of Service & Percentage of Title III B Funds
Expended in/or To Be Expended in FY 2009-10 through FY 2011-12**

Access:

Case Management, Assisted Transportation, Transportation,
Information and Assistance, and Outreach

09-10- 33.04% 10-11 % 11-12 %

In-Home Services:

Personal Care, Homemaker and Home Health Aides, Chore, In-Home Respite, Daycare as
respite services for families, Telephone Reassurance, Visiting, and Minor Home
Modification

09-10-20.4% 10-11 % 11-12 %

Legal Assistance Required Activities¹⁰:

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

09-10- 22.02% 10-11 % 11-12 %

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

The staff of the AAA participated, with other county and non-governmental agencies, in several surveys and focus groups during the last year, as indicated earlier in this Plan. The results of those surveys, the results of the 2004 Needs Assessment Survey, and evidence from service providers provided the information needed to determine the allocations listed above. The need for access to various programs and information has grown along with the population. Information and assistance and outreach programs are essential to acquaint the public with services available through the AAA. Providing access to better assisted-transportation services for the whole county is a major concern as evidenced by a new Program Development Objective listed above. As the current population ages in place, in-home assistance is still a major concern to maintain healthy independent living situations for the seniors and disabled persons of the county. The economic crisis has presented a greater need for the Senior Law Project to continue in Stanislaus County. Seniors and disabled persons are sharing in the burdens caused by the economic crisis and the Stanislaus County Area Agency on Aging staff and contracted agencies will continue to provide programs in each of the above areas to

¹⁰ **Legal Assistance must include all of the following activities: Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar.**

help them weather the crisis, remaining as independent as possible.

2. This form must be updated if the minimum percentages change from the initial year of the four-year plan.

3. Provide documentation that prior notification of the Area Plan public hearing(s) was provided to all interested parties in the PSA and that the notification indicated that a change was proposed, the proposed change would be discussed at the hearing, and all interested parties would be given an opportunity to testify regarding the change.

There were no proposed changes to the adequate proportions listed above. The needs have remained constant since the last Area Plan was written in 2005. All 11 public hearings were advertised in the Modesto Bee and the hearings specific to the various cities and areas throughout the county were advertised in the local papers. The discussions at the Public Hearings concerned each of the Priority Service areas. There was time given for questions and discussion at each of the Public Hearings.

4. Submit a record (e.g., a transcript of that portion of the public hearing(s) in which adequate proportion is discussed) documenting that the proposed change in funding for this category of service was discussed at Area Plan public hearings. See question #3.

SECTION 15. NOTICE OF INTENT TO PROVIDE DIRECT SERVICES

PSA 30

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

If an AAA plans to directly provide any of the following services, it is required to provide a description of the methods that will be used to assure that target populations throughout the PSA will be served. If not providing any of the direct services below, check this box .

Check applicable direct services

Check each applicable Fiscal Year(s)

Title III B

Information and Assistance

FY 2009-10 FY 10-11 FY 11-12

Title III B

Case Management

FY 2009-10 FY 10-11 FY 11-12

Title III B

Outreach

FY 2009-10 FY 10-11 FY 11-12

Title III B

Program Development

FY 2009-10 FY 10-11 FY 11-12

Coordination

FY 2009-10 FY 10-11 FY 11-12

Title III B

Long-Term Care Ombudsman

FY 2009-10 FY 10-11 FY 11-12

Title III D

Disease Prevention
and Health Promotion

FY 2009-10 FY 10-11 FY 11-12

Title III E - Information Services

FY 2009-10 FY 10-11 FY 11-12

Title III E - Access Assistance

FY 2009-10 FY 10-11 FY 11-12

Title III E - Support Services

FY 2009-10 FY 10-11 FY 11-12

Title VIII a

Long-Term Care Ombudsman

FY 2009-10 FY 10-11 FY 11-12

Title VIIB

Prevention of Elder Abuse, Neglect and
Exploitation

FY 2009-10 FY 10-11 FY 11-12

Describe the methods that will be used to assure that target populations will be served throughout the PSA.

The AAA maintains an active role in Stanislaus County as the point at which members of the public can call for information about senior services. The AAA publishes, in English and

Spanish, a one-page pamphlet listing names and phone numbers of organizations and agencies that assist seniors throughout the PSA. In addition to the placement of our Information and Assistance flyers in various places throughout the county, the AAA makes use of a specialized Info-Van to visit in the communities throughout the county. The Info-Van is equipped with information about each of the AAA programs, both contracted services and those that the AAA provides. These pamphlets are updated regularly and are distributed throughout the county in places that seniors and caregivers will be most likely to see them. Information is also available regarding pertinent topics such as West Nile Virus and flu shots as well as events that will affect seniors. Other service providers display their information with the AAA funded programs in an effort to give seniors, caregivers and disabled persons the best opportunities to access services within Stanislaus County. Participation at community events and at various gathering sites throughout the county will continue with this new Area Plan. Staff members that are multi-lingual provide information to the culturally and geographically isolated populations throughout the county.

For the Family Caregiver Support Program, referrals are made from agencies that serve seniors throughout the county. A bilingual staff member is available to assist in providing the most appropriate solutions to the challenges of caregiving and coping with various life transitions. AAA staff members, in seeking to help seniors remain safe and independent in their homes, visit seniors in all areas of the county and either refer them to or obtain services from a variety of providers. Special effort is made to match the senior, caregiver or disabled person with the services that will be most sensitive to their cultural, physical and emotional needs. In addition, outreach will be done through presentations to groups at community events, training classes, information fairs and through contracted providers. The Commission on Aging Speakers Bureau will assist the AAA staff in providing information to the larger community. A DVD, produced by AAA staff members, that highlights the programs funded through the AAA has been and will continue to be broadcast on the county's public access channel. This outreach resource has given members of the public who are not ordinarily in contact with the AAA the opportunity to see and more fully understand the services available through the AAA.

In the Program Development and Coordination areas, specific objectives have been designed to address the needs of seniors, caregivers and disabled persons in culturally and geographically isolated areas. Issues such as appropriate and affordable transportation services, dealing with depression and loss, and obtaining in-home services will be addressed through collaboration with government and non-profit agencies. To address the ever-increasing cost of health care testing, the AAA will again jointly sponsor free health screenings at Healthy Aging Summit in October 2009. These services are aimed at seniors and caregivers that might avoid tests or services due to the cost or because some of their abilities are limited. Using money for Program Development and Coordination aids seniors that need some help in maintaining their independent lives in the community where they have chosen to live.

SECTION 16. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES
PSA #30

Older Americans Act, Section 307(a)(8)
CCR Article 3, Section 7320(c), W&I Code Section 9533(f)

If an AAA plans to provide direct services other than those specified in Section 15, a separate Section 16 must be completed for EACH type of service provided. The submission for CDA approval may be for multiple funding sources for a specific service. If not requesting approval to provide any direct services in Section 16, check this box .

Identify Service Category: Linkages

Check applicable funding source:

III B III C-1 III C-2 III E VII a

CBSP (Identify the specific CBSP program or service on the "Service Category" line above)
HICAP

Basis of Request for Waiver:

Necessary to Assure an Adequate Supply of Service, OR

More economical if provided by the AAA than comparable services purchased from a service provider.

Check each applicable Fiscal Year(s)

If the AAA intends to provide this service for three years, check all boxes.

If all boxes are not checked and the AAA intends to provide this service in subsequent years then this Section must be submitted yearly.

X FY 2009-10 **X FY 2010-11** **X FY 2011-12**

Justification: In the space below and/or through additional documentation, AAAs must provide a cost-benefit analysis that substantiates any requests for direct delivery of the above stated service.

By requesting to provide the Linkages Program in-house, the staff of PSA 30 will be continuing a program that has been based at the AAA since July 2004. The staff of the AAA has been able to provide more services to clients by using less funding for administrative needs, such as overhead and certain staff positions.

The current program director is a full time Planner at the AAA. It is projected that she will be spending 40% of her time with the Linkages Program. She supervises two full-time social workers and an aging services specialist whose time is split between the Linkages, Family Caregiver, and Information & Assistance programs. By dividing responsibilities in this way the AAA is able to spend 88% of the funds for direct services to clients. The AAA director is utilizing space for these staff members, which was already available, making it unnecessary to use funding for lease requirements.

The Linkages Program director is seeking funds through the Targeted Case Management

program to be used to further meet the needs of Linkages clients. It is anticipated that approximately \$20,000 will be available to assist clients in maintaining their independence and assist future clients as they wait to be part of the full case management program. While potential clients are on the waiting list attention is paid to their immediate needs either through referrals or direct service. When a person becomes a Linkages client their needs can be handled more efficiently because of the attention to them while on the waiting list.

In addition, by providing the Linkages Program at the AAA the staff can more effectively dovetail the needs of their clients with the services provided by the Family Caregiver Support Program and the Veterans Services division, the other half of the Department of Aging and Veterans Services. Over the last year the Linkages staff has improved coordination between the Stanislaus County Multipurpose Senior Services Program (MSSP), the In-Home Supportive Services Program (IHSS), and the Adult Protective Services (APS) program. Providing the Linkages Program as a direct service of the AAA results in spending the greatest amount of money on the needs of the clients.

SECTION 16. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES
PSA #30

Older Americans Act, Section 307(a)(8)
CCR Article 3, Section 7320(c), W&I Code Section 9533(f)

If an AAA plans to provide direct services other than those specified in Section 15, a separate Section 16 must be completed for EACH type of service provided. The submission for CDA approval may be for multiple funding sources for a specific service. If not requesting approval to provide any direct services in Section 16, check this box .

Identify Service Category: Respite Purchase of Service

Check applicable funding source:

III B III C-1 III C-2 III E VII a

X CBSP (Identify the specific CBSP program or service on the “Service Category” line above)
HICAP

Basis of Request for Waiver:

X Necessary to Assure an Adequate Supply of Service, OR

More economical if provided by the AAA than comparable services purchased from a service provider.

Check each applicable Fiscal Year(s)

If the AAA intends to provide this service for three years, check all boxes.

If all boxes are not checked and the AAA intends to provide this service in subsequent years then this Section must be submitted yearly.

X FY 2009-10 **X FY 2010-11** **X FY 2011-12**

Justification: In the space below and/or through additional documentation, AAAs must provide a cost-benefit analysis that substantiates any requests for direct delivery of the above stated service.

The Respite Purchase of Services (RPOS) program has been part of the direct services that the AAA has provided since July 2004. The AAA staff has had the opportunity to provide more services to clients by using less funding for administrative needs, such as overhead and certain staff positions than if this service were contracted to another agency. Staff members whose duties are divided between the Linkages, Family Caregiver and Information and Assistance programs are able to assess and enroll potential clients for RPOS services and thus keep administrative costs down.

The RPOS program has dovetailed with the Linkages and Family Caregiver programs to provide much-needed respite for family and other non-paid caregivers of senior citizens and disabled persons. In conjunction with the Linkages and Family Caregiver administrative staff, the AAA fiscal staff has been able to allocate all of the RPOS funding for direct services to clients. The funds are used primarily for Linkages clients who have informal caregivers, giving them

respite from their caregiving responsibilities. A portion of the funding is reserved for caregivers who do not qualify for the Family Caregiver program and whose care receivers are not Linkages clients.

Providing the RPOS program as part of the Linkages program gives the AAA staff the opportunity to divert funds to other clients to receive applicable services such as through the Veterans Services division of our department or the Family Caregiver program. In-home assistance can be spread to more clients and thus assist seniors and disabled persons remain in their homes for as long as possible.

The AAA staff has maintained coordination between the Stanislaus County Multipurpose Senior Services Program (MSSP), the In-Home Supportive Services Program (IHSS), and the Adult Protective Services (APS) program. Providing the RPOS program in conjunction with the Linkages and Family Caregiver programs (both direct services of the AAA) results in spending the greatest amount of money on the needs of the clients.

SECTION 16. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES
PSA #30

Older Americans Act, Section 307(a)(8)
CCR Article 3, Section 7320(c), W&I Code Section 9533(f)

If an AAA plans to provide direct services other than those specified in Section 15, a separate Section 16 must be completed for EACH type of service provided. The submission for CDA approval may be for multiple funding sources for a specific service. If not requesting approval to provide any direct services in Section 16, check this box .

Identify Service Category: _____

Check applicable funding source:

III B III C-1 III C-2 III E VII a

CBSP (Identify the specific CBSP program or service on the "Service Category" line above)

X HICAP

Basis of Request for Waiver:

Necessary to Assure an Adequate Supply of Service, OR

X More economical if provided by the AAA than comparable services purchased from a service provider.

Check each applicable Fiscal Year(s)

If the AAA intends to provide this service for three years, check all boxes.

If all boxes are not checked and the AAA intends to provide this service in subsequent years then this Section must be submitted yearly.

X FY 2009-10

X FY 2010-11

X FY 2011-12

Justification: In the space below and/or through additional documentation, AAAs must provide a cost-benefit analysis that substantiates any requests for direct delivery of the above stated service.

The AAA is requesting approval to provide the HICAP program as a direct service to give the greatest degree of service to Medicare recipients in the most economical way. During the last 3 years since HICAP has been part of the direct services of the AAA, the program staff has been able to access county resources such as the fiscal and administrative staff already funded in the AAA office. The staff positions, currently 2 ½ FTE, are fully funded by HICAP and any equipment or supply needs are met by either the HICAP budget or the AAA funds. This is in contrast to previous contractors who made use of equipment purchased with HICAP funds for other purposes unrelated to the needs of senior citizens. In addition, 4 members of the staff of the Aging and Veterans Department have passed the HICAP training program with one of those staff completing the certification process to be able to counsel seniors. This opportunity has enhanced the other AAA programs, giving all of the staff a better understanding of the HICAP program while making a AAA staff member available to assist the HICAP staff at the busiest times of the year.

The area that could be addressed better by the HICAP staff is seeking out new customers, Medicare recipients who are not yet aware of the services available through this program. The staff participates in community events such as the Healthy Aging Summit, co-sponsored by the AAA; the Stanislaus Elder Abuse Prevention Alliance(SEAPA) events; and a variety of community events in all areas of the county. The HICAP staff also has a greater opportunity to attend events specifically designed for County employees and their families, giving them the chance to distribute information to a wider audience. As a direct service of the AAA the HICAP staff will accompany the I&A staff with the InfoVan when visits are made to health clinics, pharmacies, and other community forums. As county employees, the HICAP staff will have the opportunity to access the services of the county to increase publicity about the program.

As noted in other areas of this Plan, the AAA is partnering with the Behavioral Health and Recovery Services (BHRS) department to address potential mental health issues such as depression, isolation and substance abuse. Since these mental health issues can prevent seniors and disabled persons from accessing services, the programs will focus on assisting seniors where they live. The HICAP staff will be working with the staff at Family Resource Centers and BHRS staff throughout the rural and low-income areas of the county to contact folks who are not aware of the benefits available through Medicare and the HICAP program. As a direct service of the AAA the HICAP staff will be able to seamlessly participate with BHRS staff in meeting the needs of the seniors in these outlying areas and who need extra assistance in accessing their Medicare and Medi-Cal benefits.

To bring it to the AAA as a direct service will allow the HICAP staff to dedicate all their energy, time and knowledge to more efficiently serve the needs of Medicare recipients in Stanislaus County.

SECTION 16. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES
PSA #30

Older Americans Act, Section 307(a)(8)
CCR Article 3, Section 7320(c), W&I Code Section 9533(f)

If an AAA plans to provide direct services other than those specified in Section 15, a separate Section 16 must be completed for EACH type of service provided. The submission for CDA approval may be for multiple funding sources for a specific service. If not requesting approval to provide any direct services in Section 16, check this box .

Identify Service Category: Family Caregiver Support Program Respite

Check applicable funding source:

III B III C-1 III C-2 III E VII a

CBSP (Identify the specific CBSP program or service on the "Service Category" line above)

Basis of Request for Waiver:

Necessary to Assure an Adequate Supply of Service, OR

More economical if provided by the AAA than comparable services purchased from a service provider.

Check each applicable Fiscal Year(s)

If the AAA intends to provide this service for three years, check all boxes.

If all boxes are not checked and the AAA intends to provide this service in subsequent years then this Section must be submitted yearly.

FY 2009-10

FY 2010-11

FY 2011-12

Justification: In the space below and/or through additional documentation, AAAs must provide a cost-benefit analysis that substantiates any requests for direct delivery of the above stated service.

By requesting to provide the Family Caregiver Support Program Respite Services in-house, the staff of PSA 30 will be continuing a program that has been based at the AAA since July 2003. The staff of the AAA has been able to provide more services to clients by using less funding for administrative needs, such as overhead and certain staff positions.

The current program coordinator is a full time Planner at the AAA. It is projected that she will be spending 70% of her time with the Family Caregiver Support Program. She supervises one full time aging services specialist whose time is split between the Linkages, Family Caregiver, and Information & Assistance (I&A) programs. By dividing responsibilities in this way the AAA is able to spend 88% of the funds for direct services to clients. The AAA director is utilizing space for these staff members, which was already available, making it unnecessary to use funding for lease requirements.

Following the assessment, the caregiver is given choices of agencies and the adult day care center in Stanislaus County. The AAA staff mediates between the caregiver and the agencies with

whom the AAA has vendor agreements to provide respite for the specific needs identified by the caregiver. The agreements include certified home health agencies and Miller's Place Adult Day Care and Resource Center. The aging services specialist is responsible for the majority of the assessments, coordinates available assistance for the caregiver, and maintains the database of required information. Since her time is divided between the Family Caregiver, Linkages and I&A programs, the AAA is able to use more of the funding for the specific services needed by the caregiver and his or her loved one, and less for administration and other business expenses. The respite portion of the Family Caregiver Support Program has become and will continue to be a coordinated effort between other services provided through the AAA and services provided by other County and non-profit agencies.

In addition, by providing the Family Caregiver Support Program at the AAA the staff can more effectively dovetail the needs of their clients with the services provided by the Linkages Program and the Veterans Services division, the other half of the Department of Aging and Veterans Services. Providing the Family Caregiver Support Program as a direct service of the AAA results in spending the greatest amount of money on the needs of the clients.

SECTION 16. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES
PSA #30

Older Americans Act, Section 307(a)(8)
CCR Article 3, Section 7320(c), W&I Code Section 9533(f)

If an AAA plans to provide direct services other than those specified in Section 15, a separate Section 16 must be completed for EACH type of service provided. The submission for CDA approval may be for multiple funding sources for a specific service. If not requesting approval to provide any direct services in Section 16, check this box .

Identify Service Category: Supplemental Services

Check applicable funding source:

III B III C-1 III C-2 III E VII a

CBSP (Identify the specific CBSP program or service on the "Service Category" line above)

Basis of Request for Waiver:

Necessary to Assure an Adequate Supply of Service, OR

More economical if provided by the AAA than comparable services purchased from a service provider.

Check each applicable Fiscal Year(s)

If the AAA intends to provide this service for three years, check all boxes.

If all boxes are not checked and the AAA intends to provide this service in subsequent years then this Section must be submitted yearly.

X FY 2009-10 **X FY 2010-11** **X FY 2011-12**

Justification: In the space below and/or through additional documentation, AAAs must provide a cost-benefit analysis that substantiates any requests for direct delivery of the above stated service.

By requesting to provide the Family Caregiver Support Program Respite Services in-house, the staff of PSA 30 will be continuing a program that has been based at the AAA since July 2003. The staff of the AAA has been able to provide more services to clients by using less funding for administrative needs, such as overhead and certain staff positions.

The service category that the Stanislaus County AAA staff has committed to provide to local caregivers is the area for Assistive Devices for Caregiving. Assessing the needs of the caregiver includes various areas that make the responsibility easier. Home visits include assessing the living areas to ensure the safety of both the caregiver and care receiver. The staff of the AAA has determined that the assessment for and provision of assistive devices is most efficiently included along with respite services and other I&A needs.

As stated previously, the AAA staff dedicated to the Family Caregiver Support Program also has responsibilities for other programs. Sharing staff and work space makes it economical to be able to use as much of the funding as possible to purchase items and provide associated services

to caregivers and care receivers in Stanislaus County. In addition, by providing the Family Caregiver Support Program at the AAA the staff can more effectively dovetail the needs of their clients with the services provided by the Linkages Program and the Veterans Services division, the other half of the Department of Aging and Veterans Services. Providing the Family Caregiver Support Program as a direct service of the AAA results in spending the greatest amount of money on the needs of the clients.

SECTION 16. REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICES
PSA #30

Older Americans Act, Section 307(a)(8)
CCR Article 3, Section 7320(c), W&I Code Section 9533(f)

If an AAA plans to provide direct services other than those specified in Section 15, a separate Section 16 must be completed for EACH type of service provided. The submission for CDA approval may be for multiple funding sources for a specific service. If not requesting approval to provide any direct services in Section 16, check this box .

Identify Service Category: Public Information

Check applicable funding source:

III B III C-1 III C-2 III E VII a

CBSP (Identify the specific CBSP program or service on the "Service Category" line above)

Basis of Request for Waiver:

Necessary to Assure an Adequate Supply of Service, OR

More economical if provided by the AAA than comparable services purchased from a service provider.

Check each applicable Fiscal Year(s)

If the AAA intends to provide this service for three years, check all boxes.

If all boxes are not checked, and the AAA intends to provide this service in subsequent years then this Section must be submitted yearly.

X FY 2009-10

X FY 2010-11

X FY 2011-12

Justification: In the space below and/or through additional documentation, AAAs must provide a cost-benefit analysis that substantiates any requests for direct delivery of the above stated service.

Including the Public Information category as a direct service of the AAA is a natural outgrowth of the Information & Assistance and Outreach programs. The staff of the AAA is best suited to conveying general and complete information about all of the programs due to their responsibility to oversee each of the programs and the knowledge they possess about all senior services available in the community.

The AAA staff plans to assist in the publication of the information brochure for the Healthy Aging Summit, held in early October annually. Approximately 1500 seniors and caregivers take advantage of free health screenings and collect information from a wide variety of groups concerned with the health of senior citizens. The AAA staff, with the assistance of Commission on Aging members, is available to present information about programs to various groups such as Kiwanis and Soroptomist clubs, church and civic groups throughout the county. These groups include seniors and caregivers who often hear about AAA services for the first time at these presentations.

SECTION 17. GOVERNING BOARD

PSA #30

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

Number of Members on the Board: 5

Names/Titles of Officers:

Term in Office Expires:

<u>Jim DeMartini, Chair</u>	<u>12/31/2012</u>
<u>Jeff Grover, Vice-Chair</u>	<u>12/31/2010</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>

Names/Titles of All Members:

Term on Board Expires:

<u>Vito Chiesa</u>	<u>12/31/2012</u>
<u>Dick Montieth</u>	<u>12/31/2010</u>
<u>William O'Brien</u>	<u>12/31/2012</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>
<u>_____</u>	<u>_____</u>

SECTION 18. ADVISORY COUNCIL

PSA #30

ADVISORY COUNCIL MEMBERSHIP

45 CFR, Section 1321.57

CCR Article 3, Section 7302(a)(12)

Total Council Membership (include vacancies)	21
Number of Council Members over age 60	13

Race/Ethnic Composition	<u>% of PSA's 60+Population</u>	<u>% on Advisory Council</u>
White	70	88
Hispanic	20	6
Black	1.5	6
Asian/Pacific Islander	5.5	0
Native American/Alaskan Native	1	0
Other	1.8	0

Attach a copy of the current advisory council membership roster that includes:

- Names/Titles of officers and date term expires
 Mickey Peabody, President Term expires 7/17/2010
 Kim Mallock, 1st Vice President 7/17/2010
 Arby Hoobyar, 2nd Vice President 7/17/2010

- Names/Titles of other Advisory Council members and date term expires
 Daniel Downey Term expires 6/30/2011
 Eileene King 6/30/2011
 Janeen Studley 6/30/2009
 Billie Taylor 6/30/2009
 Jill Klajic 6/30/2010
 Ken Hanigan 6/30/2009
 Marjorie Brooks 6/30/2010
 Joanne Lyons 6/30/2010
 Joyce M. Gandelman 6/30/2011
 Jeri Johnson 6/30/2010
 Kris Rowe 6/30/2011
 Bertha Burrell-Greene 6/30/2009
 Richard Gibson 6/30/2011

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

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

Explain any "No" answer

Attempts have been made to have a local elected official become a member of the Commission on Aging. A member of the Board of Supervisors has attended Commission meetings, but is not a voting member.

Briefly describe the process designated by the local governing board to appoint Advisory Council members.

Each member of the Stanislaus County Board of Supervisors is responsible to appoint two members to the Commission on Aging. When a position becomes vacant the Supervisor is notified, along with any persons that have expressed interest in that position. The Supervisor considers the applicants and chooses the person that he or she determines will best represent the interests of the senior citizens and disabled persons within his or her district. The appointed person is interviewed by the Executive Committee of the Commission on Aging and approved by the entire Commission.

SECTION 19. LEGAL ASSISTANCE

PSA #30

This section must be completed and submitted with the Three-Year Area Plan. Any changes to this Section must be documented on this form and remitted with Area Plan Updates.¹¹

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

The AAA in Stanislaus County contracts for the Senior Law Project with the California Rural Legal Assistance (CRLA) agency. The staff of CRLA exists to insure justice, dignity, health, security, maximum autonomy and independence to senior citizens by protecting and enforcing the legal rights of individuals and by promoting social change through broad elder rights advocacy. The purpose of the Senior Law Project is to deliver quality, cost-effective services designed to address the unmet legal needs of the senior citizens of Stanislaus County.

2. Based on your local needs assessment, what percentage of Title III B funding is allocated to Legal Services? 22.02%

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

The senior population that is targeted and served by CRLA is the disadvantaged seniors. The staff seeks to assist seniors who are culturally, geographically and financially challenged. They also seek to assist seniors that live in the rural areas of the county by attending outreach events outside of the Rt. 99 corridor that includes Modesto, Ceres and Turlock. The staff at CRLA is bilingual in Spanish and English, and effectively works with members of the Hispanic communities throughout the county. An interview with the assigned attorney is included in the DVD that advertises the AAA funded services. This DVD is broadcast on the public access channel and has been seen in various areas of the county. The CRLA has memorandum of understanding with the county Adult Protective Services division of Adult Services and with Catholic Charities, the lead agency for the Stanislaus Elder Abuse Prevention Alliance (SEAPA) and the Long Term Care Ombudsman Program.

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

<u>Fiscal Year</u>	<u># Legal Services Providers</u>
<u>2009-2010</u>	<u>1</u>
<u>2010-2011</u>	<u>_____</u>
<u>2011-2012</u>	<u>_____</u>

5. What methods of outreach are providers using? Discuss: The staff of CRLA presents information to the public at events sponsored by the coalition of citizens and agencies known as SEAPA. The AAA Information and Assistance office has copies of the CRLA brochures available to the public, in both Spanish and English.

¹¹ For information related to Legal Services, contact Chisorom Okwuosa at 916 419-7500 or COkwoosa@aging.ca.gov

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

<u>Fiscal Year</u>	<u>Name of Provider</u>	<u>Geographic Region covered</u>
<u>2009-2010</u>	<u>a. California Rural Legal Assistance</u> <u>b. _____</u> <u>c. _____</u>	<u>a. Stanislaus County</u> <u>b. _____</u> <u>c. _____</u>
<u>2010-2011</u>	<u>a. _____</u> <u>b. _____</u> <u>c. _____</u>	<u>a. _____</u> <u>b. _____</u> <u>c. _____</u>
<u>2011-2012</u>	<u>a. _____</u> <u>b. _____</u> <u>c. _____</u>	<u>a. _____</u> <u>b. _____</u> <u>c. _____</u>

7. Discuss how older adults access Legal Services in your PSA: Seniors call the CRLA directly or are referred through a variety of other agencies. The AAA I&A program frequently sends seniors to CRLA for assistance. Referrals are also made through the local court system and from agencies that deal with seniors or caregivers due to potential elder abuse. CRLA advertises their services through brochures that are available in various offices and agencies.

8. Discuss the major legal issues in your PSA. Include new trends of legal problems in your area: The major legal issues include housing and benefit challenges. Housing issues involve assisting seniors who rent from landlords whose properties go into foreclosure and situations where family members attempt to take over home ownership from seniors. There has also been a trend where seniors are involved with mobile home complex owners unfairly raising space fees in violation of rental agreements. Benefit challenges involve social security, SSI, and MediCal issues.

9. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. Discuss: The major barriers in Stanislaus County include geography and adequate transportation to and from the largest cities. Many seniors live in the rural areas of the county and either do not feel comfortable driving in the urban areas or do not have the means to get to the CRLA office. CRLA has accommodated seniors in those areas by making home visits and also dealing with their needs by telephone.

10. What other organizations or groups does your legal service provider coordinate services with? Discuss: CRLA has memorandums of understanding with Adult Protective Services to assist seniors who live independently in the community. They also have a relationship with Catholic Charities, the agency that has the contract for the Long Term Care Ombudsman program and the SEAPA program. CRLA is also active with the local Bar Association and makes referrals to local attorneys according to the needs of clients.

SECTION 20. MULTIPURPOSE SENIOR CENTER (MPSC) ACQUISITION OR CONSTRUCTION COMPLIANCE REVIEW ¹²

Not Funded by this AAA

PSA # _____

2009-2012 Three-Year Area Planning Cycle

CCR Title 22, Article 3, Section 7302(a)(15)

20-year tracking requirement

X No, Title III B funds have not been used for MPSC Acquisition or Construction.

Yes, Title III B funds have been used for MPSC Acquisition or Construction.

If yes, complete the chart below.

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

¹⁸ Acquisition is defined as obtaining ownership of an existing facility (in fee simple or by lease for 10 years or more) for use as an MPSC.

SECTION 21. FAMILY CAREGIVER SUPPORT PROGRAM
PSA #30

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

2009–2012 Three-Year Planning Cycle

Based on PSA review of current support needs and services for **family caregivers** and **grandparents** (or other older relative of a child), does the AAA **intend** to use Title III E and/or matching FCSP funds to provide each of the following federal Title III E services for both family caregivers and grandparents?

Check YES or NO for each of the services identified below.

FAMILY CAREGIVER SUPPORT PROGRAM for FY 2009-12

<u>Family Caregiver Information Services</u>	X YES	<input type="checkbox"/> NO
<u>Family Caregiver Access Assistance</u>	X YES	<input type="checkbox"/> NO
<u>Family Caregiver Support Services</u>	X YES	<input type="checkbox"/> NO
<u>Family Caregiver Respite Care</u>	X YES	<input type="checkbox"/> NO
<u>Family Caregiver Supplemental Services</u>	X YES	<input type="checkbox"/> NO

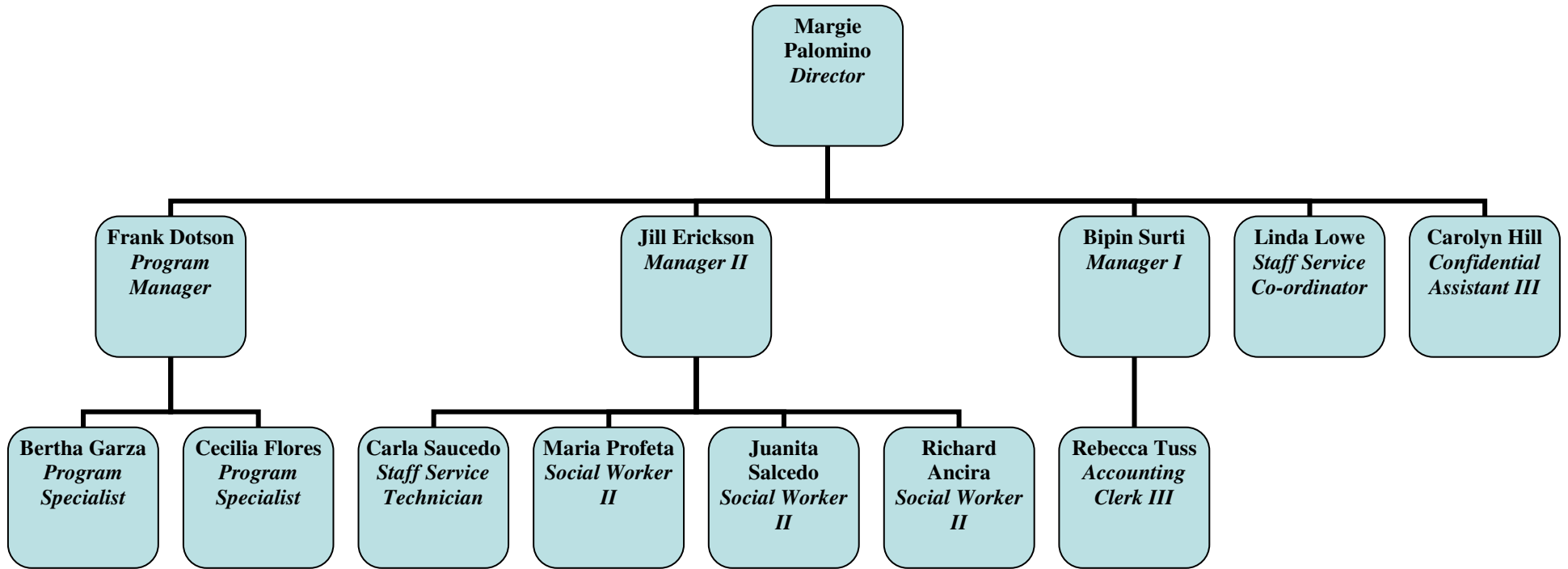
and

<u>Grandparent Information Services</u>	<input type="checkbox"/> YES	X NO
<u>Grandparent Access Assistance</u>	<input type="checkbox"/> YES	X NO
<u>Grandparent Support Services</u>	<input type="checkbox"/> YES	X NO
<u>Grandparent Respite Care</u>	<input type="checkbox"/> YES	X NO
<u>Grandparent Supplemental Services</u>	<input type="checkbox"/> YES	X NO

NOTE: Refer to PM 08-03 for definitions for the above Title III E categories.

Justification: For each above service category that is checked “no”, explain how it is being addressed within the PSA: For the Grandparent portion of the Family Caregiver Support Program the Stanislaus County AAA staff makes referrals to services available through the Community Services Agency of the county. Stanislaus County has an active support group for grandparents who have the responsibility of raising their minor grandchildren. The AAA Information and Assistance program makes referrals to the wide variety of services available in the County for all senior citizens, disabled persons and caregivers.

**Stanislaus County Area Agency on Aging
Budget unit 1051**



Margie Palomino-Director-Administration-70%, Title IIIB-20%, HICAP-5%, Veterans Services-5%

Bipin Surti-Fiscal Officer-Administration-70%, Title IIIE-10%, Direct CBSP-10%, HICAP-5%, Veterans Services-5%

Frank Dotson-HICAP Manager-100%

Jill Erickson-Manager Planner II-Title IIIB-30%, Direct CBSP-70%

Linda Lowe-Staff Services Coordinator-Title IIIB-30%, Title IIIE-70%

Carolyn Hill-Confidential Assistant III-Administration-70%, Title IIIB-10%, Title IIIE-10%, Direct CBSP-10%

Carla Saucedo-Staff Services Technician-Title IIIB-70%, HICAP-30%

Juanita Salcedo-Social Worker II -Title IIIB-50%, Title IIIE-50%

Richard Ancira-Social Worker II-Direct CBSP-100%

Maria Profeta-Social Worker II-Direct CBSP-100%

Rebecca Tuss-Accounting Clerk –Admin-25%, Title IIIB-25%, Title IIIE-25%, HICAP-25%

Bertha Garza-Program Specialist-HICAP-100%

Cecilia Flores-Program Specialist-HICAP-100%