

Connecting the Community

Fresno-Madera Area Agency on Aging

Fiscal Year 2021-2022 Update to 2020-2024 Four-Year Area Plan



PSA 14

Fresno-Madera Area Agency on Aging

2021-2022 Annual Update Revised 9/23/2021

AREA PLAN UPDATE (APU) CHECKLIST PSA 14

Check <u>one</u>: ⊠ FY21-22 □ FY 22-23 □ FY 23-24

Use for APUs only

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

TRANSMITTAL LETTER

2020-2024 Four Year Area Plan/ Annual Update Check one: C FY 20-24 K FY 21-22 FY 22-23 FY 23-24

AAA Name: Fresno-Madera Area Agency on Aging

PSA 14

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

1. John Sears

Signatu Governing Board Chair

2 **Ren Ramshaw**

Signature: Advisory Council Chair

3. Jean Robinson

Signature: Executive Director Fresno-Madera Area Agency on Aging

Section 2 Description of the Planning and Service Area

Planning and Service Area 14, which consists of Fresno and Madera counties, continues to experience population growth. Fresno County has the tenth largest population of California's 58 counties, with 1,026,358 residents, while Madera County ranked 32nd with an estimated population of 158,794. Fresno County added 7,921 residents in the July 1, 2019 to June 30, 2020 period and Madera County added 1,108 residents in the same period; of these new residents, 86% were due to natural causes (births exceeding deaths) and 14% were attributed to individuals migrating from another state or country. (State of California, Department of Finance, E-2. California County Population Estimates and Components of Change by Year — July 1, 2010–2020, December 2020)

Projected increases in the age 60 and over population from 2019 to 2023 are 9.7% (18,008 individuals) for Fresno County and 12.0% (3,808 individuals) for Madera County, as shown below.

							%
Fresno County	2019	2020	2021	2022	2023	Increase	Increase
Age 60-65	61,323	62,672	62,443	62,806	63,258	1,935	3.2%
Age 66-70	41,754	42,911	43,774	44,864	45,691	3,937	9.4%
Age 71-80	52,573	55,203	57,258	59,805	62,438	9,865	18.8%
Age 81-90	23,756	24,237	24,489	24,969	25,672	1,916	8.1%
Age 91-99	6,025	6,324	6,236	6,328	6,305	280	4.6%
100+	201	254	212	250	276	75	37.3%
Total Age 60+	185,632	191,601	194,412	199,022	203,364	18,008	9.7%
							%
Madera County	2019	2020	2021	2022	2023	Increase	Increase
Age 60-65	9,650	9,733	9,991	10,077	10,138	488	5.1%
Age 66-70	7,239	7,313	7,357	7,495	7,694	455	6.3%
Age 71-80	9,431	9,843	10,380	10,769	11,206	1,775	18.8%
Age 81-90	4,470	4,691	4,915	5,059	5,140	670	15.0%
Age 91-99	866	992	1,087	1,155	1,278	412	47.6%
100+	17	15	8	17	25	8	47.1%
Total Age 60+	31,673	32,587	33,738	34,572	35,481	3,808	12.0%
	Source: California Department of Finance, Table P2A, Total Population for California and Counties, July 1, 2010 to July 1, 2060 in 1-year Increments, Released December 2020						

The California Department of Aging's Population Demographic Projections for 2021, released on February 11, 2021, and displayed below, differ slightly from the California Department of Finance's projections on the previous page; however, the proportions of older adults between counties remain consistent.

2021 Demographic Projections						
Population Group	Fresno	County	Madera	Madera County		tal
Population Age 60+	182,237		32,477		214,714	
% of Age 60+ Total		85%		15%		
Low Income	29,510	16.2%	4,980	15.3%	34,490	16.1%
Minority	92,244	50.6%	12,381	38.1%	104,625	48.7%
Non-Minority	89,993	49.4%	20,096	61.9%	110,089	51.3%
Lives Alone	34,205	18.8%	5,050	15.5%	39,255	18.3%
Geographically Isolated	18,289	10.0%	11,935	36.7%	30,224	14.1%
Non-English Speaking	13,530	7.4%	2,370	7.3%	15,900	7.4%
Medi-Cal Eligible	49,692	27.3%	6,269	19.3%	55,959	26.1%
Age 65+ SSI/SSP	17,786	9.8%	1,847	5.7%	19,633	9.1%
Age 75+	55,355	30.4%	10,480	32.3%	65,835	30.1%
Source: 2021 California	a Departme	ent of Aging	, Demograp	hic Projec	tions	

A comparison of 2021 to 2017 demographic projections indicates a 6.2% increase (12,595 individuals) of residents age 60 or older in the two-county area. Additional comparisons for this age group show the following increases:

- 18.1% increase (5,295 individuals) in those who have income at or below the federal poverty level;
- 16.7% increase (2,275 individuals) in non-English speakers;
- 13.1% increase (12,082 individuals) in the minority population;
- 12.3% increase (6,134 individuals) in Medi-Cal eligibility;
- 11.9% increase (4,185 individuals) in those living alone;
- 10.1% increase in the population age 75 and older (6,521 individuals); and
- 8.1% increase (1,472 individuals) among those age 65 and older who receive SSI or SSP.

According to a report released by WalletHub on February 17, 2021 (*Most & Least Ethnically Diverse Cities in the U.S.*), the city of Fresno ranks 20th in overall diversity among the nation's 63 largest cities, with a weighted diversity score of 60.43 (Los Angeles' score was 65.18, while Bakersfield's score was 57.85). Components of overall diversity included an evaluation of ethnicity and race data, languages spoken, and places of birth.

The U.S. Census Bureau's five-year estimates for years 2015-2019 indicate 53.8% of Fresno County's population is of Hispanic or Latino origin; of individuals age 60 and over, the percentage drops to 33.3%. In Madera County, an estimated 33.3% of the population is of Hispanic or Latino origin; however, for residents age 60 and over, this estimate is 29.3%. Other than "White," percentages of older adults classified as "Some Other Race" were higher than any other race category in both counties. Fresno County has a significantly higher percentage of older adults classified as "Asian" (9.6%) than Madera County (2.7%).

Age, Race, and Ethnicity Estimates						
Age	Fresno (County	Madera	County		
All Ages	999,101		155,433			
Age 60 and over and percentage of county population	175,750	17.6%	29,813	19.2%		
Race – Age 60 and Over (with percentage of county population age 60 and over)						
White	127,067	72.3%	23,731	79.6%		
Black or African American	7,908	4.5%	1,043	3.5%		
American Indian & Alaska Native	1,933	1.2%	447	1.5%		
Asian	16,872	9.6%	805	2.7%		
Native Hawaiian & Other Pacific Islander	527	0.3%	29	0.1%		
Some Other Race	17,399	9.9%	2,922	9.8%		
Two or More Races	4,042	2.3%	865	2.9%		
Ethnicity – Age 60 and Over (with percent	age of count	y populatio	on age 60 ar	nd over)		
Hispanic or Latino Origin (of any race)	58,526	33.3%	8,735	29.3%		
White alone, Not Hispanic or Latino	89,281	50.8%	18,305	61.4%		
Source: U.S. Census Bureau, 2019 ACS (Table S0102, Population 60 Years and C		•				

The Elder Economic Security Standard[™] Index incorporates costs of housing, food, health care, transportation, and other necessities to determine the amount of income an older adult needs to meet basic expenses in each of California's counties. The Index provides an alternative to the federal poverty level, which does not consider the varying costs of living at state and local levels.

	Fresno	Madera			
Housing	County \$784	County \$787			
Food	\$272	\$272			
Health Care (Good Health)	\$379	\$364			
Transportation	\$222	\$262			
Miscellaneous	\$269	\$273			
Total Monthly Expenses	\$1,926	\$1,958			
Total 2020 Annual Expenses	\$23,112	\$23,496			
Total 2017 Annual Expenses	\$20,244	\$19,500			
Percent Increase from 2017	14.2%	20.5%			

The 2020 federal poverty level for a single person is \$12,760 per year; however, an older adult renter in Fresno County needs an income 81% higher (\$10,352) per year to maintain a basic standard of living, and older adults in Madera County need an additional 84% (\$10,736) per year.

The Consumer Price Index for the West Region increased 1.6% in February 2021 as compared to February 2020. During the same period, food prices increased 0.4%, shelter costs increased 0.2%, medical care costs increased 0.1%, and energy costs increased 1.8%. (U.S. Department of Labor, Bureau of Labor Statistics, Western Information Office)

SECTION 7. PUBLIC HEARINGS

At least one public hearing must be held each year of the four-year planning cycle. CCR Title 22, Article 3, Section 7302(a)(10) and Section 7308, OAA 2006 306(a)

Fiscal Year	Date	Location	Number of Attendees	Presented in languages other than English? ¹ Yes or No	Was hearing held at a Long- Term Care Facility? ² Yes or No
2018- 2019	4/10/18	Fresno-Madera Area Agency on Aging 3837 N. Clark St., Fresno, CA 93726	9	No	No
2019- 2020	4/9/19	Fresno-Madera Area Agency on Aging 3837 N. Clark St. Fresno, CA 93726	14	Yes (American Sign Language)	No
2020- 2021	6/30/20	Via Zoom due to COVID-19 State of Emergency Fresno-Madera Area Agency on Aging 2520 W. Shaw Lane Suite 101A Fresno, CA 93711	13	Yes (American Sign Language)	No
2021- 2022	4/13/21	Via Zoom due to COVID-19 State of Emergency Fresno-Madera Area Agency on Aging 2520 W. Shaw Lane Suite 101A Fresno, CA 93711	13	Yes (American Sign Language)	No

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

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

Section 5, Needs Assessment, of this 2020-2024 Four Year Area Plan described activities conducted by the Agency on Aging to obtain input for the area plan.

Due to the ongoing COVID-19 State of Emergency, notice of the April 13, 2021 Area Plan Update virtual public hearing was posted on the Agency's Web site. An

¹ A translator is not required unless the AAA determines a significant number of attendees require translation services.

² AAAs are encouraged to include individuals in LTC facilities in the planning process, but hearings are not required to be held in LTC facilities.

agenda for the April 13, 2021, Advisory Council meeting, which encompassed the public hearing, was emailed to service providers and community partners, and the draft Area Plan was posted to the Agency on Aging's Web site, fmaaa.org.

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

Yes. Go to question #3

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

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

 \boxtimes Not applicable, PD and/or C funds are not used.

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

 \boxtimes Yes. Go to question #5

No, Explain:

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

2021-2022 Area Plan Update – April 13, 2021

No comments were received concerning minimum percentages of Title IIIB funds to meet adequate proportion of funding for priority services.

<u>2020-2024 Four-Year Area Plan – June 30, 2020</u>

Home Repair and Maintenance or Foreclosure: (Make a priority): It is my understanding within an agreement for a Reverse Mortgage that financial institutions require the home be maintained, this would be another reason to have these services a priority especially if it means it is a reason a bank could foreclose on these type of arrangements.

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

2021-2022 Area Plan Update – April 13, 2021

- I was surprised by the difference in Madera County vs. Fresno County that it's more expensive for our seniors to live (in Madera County), a big surprise compared to Fresno County.
- I think I was surprised at some of the growth areas or the increase in the cost of living here. But we hear it from our community members every day so I guess it shouldn't be that surprising.

 I was surprised at the distribution of older adult population between Fresno and Madera counties. That was a number that stood out. Just the amount of older adults living at or below the Federal Poverty Level is also a pretty significant number. I think for (the older adults my employer serves) it's also pretty high. It's good to see these numbers align with the residents we serve.

2020-2024 Four-Year Area Plan – June 30, 2020

- Look into churches that offer home repairs, and the Elks and Kiwanis.
- Partner with In-Home Supportive services and do follow-up with paid caregivers as well as unpaid family caregivers; support, training and respite are important for both groups.
- It's good to see the high percentage of cell phone use by older adults. Cell phones have features that are useful for and increase the safety of individuals who are blind.
- It's interesting to see the high percentage of Internet use by seniors.
- It's sad that such a low number have a grab and go bag for an emergency. Maybe the bags could be offered in exchange for completing a survey.
- We will see some changes on how health care is delivered due to COVID-19. I hope we are paying attention; a lot of providers are changing how they provide services.
- Interpretation/Translation: The two instances represented seems extremely low. Could this be in need of more publicity? How many languages are spoken in Fresno and Madera counties? Do we have access for each language?
- Independent Seniors: I have found that those seniors who have isolated themselves and/or say they are fiercely independent are especially at risk for predatory behaviors directed at them. Even though 75% of predators/abuse are people they know; some sort of "wellness check" may be in order, such as renewing your driver's license.
- An annual giveaway requiring a survey, like idea of "Go Bags" for emergencies.
- Vetting of recommended resources offered: how a resource is vetted to be included here is something that is unclear (I would outline your vetting process). I have found brochures in office vestibules of some of the Resources listed in the Area Plan and no one could really tell me how the service provider was selected.
- Terms in need of definition: To use this Plan as a tool certain terms seem to be in need of definition – perhaps a glossary of terms could be added. "Legal Services or Legal Assistance" for example are broad terms, and in my experience & research not all charges qualify as "legal fees" – and not all lawyers or paralegals are licensed for the specialties needed and therefore could be a way to scam an

elderly person and/or their "caregivers" (another term in need of definition here). Another example, Home Care versus Home Health services – Long Term Care Insurance and I would think Medicaid & Medical are very narrow in their definitions – so anything referred to as such should follow the guidelines for the coding of the "services". "Case management" is also a term in need of definition.

- Note any changes to the Area Plan which were a result of input by attendees.
 <u>2021-2022 Area Plan Update April 13, 2021</u>
 - No changes were made to the Area Plan as a result of input by attendees.

<u>2020-2024 Four-Year Area Plan – June 30, 2020</u>

- No changes were made to the Area Plan as a result of input by attendees.
- The Area Plan includes an overview of significant community-based programs for older adults outside of the Agency on Aging network (Section 2, pages 44-55). In this section, home repair programs administered by Habitat for Humanity, Self-Help Enterprises, and Fresno EOC's Energy Services Program are described, as well as those offered through tribal rancherias for tribal members. Allocation of Title III B Older Americans Act funding for costly residential repairs would require substantial decreases in funding of priority Title III B Supportive Services currently offered by the Agency on Aging for which there is very high demand (i.e. Case Management, Legal Assistance); subsequently, the Agency refers inquiries for home repairs to organizations that have the expertise and capability to offer this service. The Agency on Aging's Advisory Council has researched services available for older adults from faith-based organizations for four years, and their valuable findings are used by the Agency's information and assistance staff, as well as case management and nutrition staff, in providing appropriate referrals. The Agency will ask its Advisory Council to expand its research to service clubs, such as the suggested Elks Lodge.
- The Agency on Aging's service provider for the Family Caregiver Support Program, Valley Caregiver Resource Center, conducts a comprehensive public communications program via interviews, press releases and advertising via television, radio and newspapers in the English, Spanish, and Hmong languages. The program, until year 2019, was collocated adjacent to Fresno County's In-Home Supportive Services (IHSS) office for nearly two decades, and program staff continue to network with IHSS staff. Although the program, by federal mandate, is targeted for informal (i.e. unpaid) providers of in-home care for older adults or individuals with Alzheimer's disease or a related disorder, paid caregivers are only denied Family Caregiver Support Program services if the requested service duplicates a service they are paid to provide.

- Based upon the results of its need assessment survey, the Agency on Aging created a new objective (Area Plan Section 9, Goal 3, Objective D) to address the need to increase the capability of older adults to effectively respond to an emergency. The California Department of Aging's Area Plan contract with the Agency on Aging specifically prohibits purchase of giveaway items.
- The impact of COVID-19 on the provision of Older Americans Act services for older adults is addressed in Section 2, pages 18-21 and 42-43 of the Area Plan. The Agency on Aging, along with the entire network of care for older adults, is monitoring and navigating daily changes in State and local directives and guidelines to determine changes in service provision.
- During the public hearing, Agency on Aging staff advised most interpretation and translation needs are met by Agency staff and a language line service. The two planned instances of Older Americans Act Title III B Interpretation/Translation service are reserved for infrequent instances where existing resources cannot meet the need. Languages spoken in Fresno and Madera counties are described in Section 2, pages 10-11 of the Area Plan.
- Regarding independent and isolated older adults at risk for predatory behavior, the Agency on Aging subcontracts with Valley Caregiver Resource Center for provision of the Elder Abuse Prevention, Education and Training Program to increase elder abuse awareness and reporting (Area Plan Section 9, Goal 4, Objective A), as well as the Long-Term Care Ombudsman Program to provide residents of long-term care facilities with routine access to trained Ombudsmen who inform residents of their rights and seek resolution to identified issues (Area Plan Section 9, Goal 4, Objective B). Valley Caregiver Resource Center is also providing telephone wellness checks, through a subcontract with the Agency on Aging, for older adults who are socially and/or geographically isolated (Area Plan Section 9, Goal 2, Objective D). The Agency also contracts with Central California Legal Services to provide older adults with legal assistance to protect them from physical and financial abuse, unfair business and debt collection practices, and other issues affecting their rights (Area Plan Section 9, Goal 3, Objective C).
- References in the Area Plan to services provided by organizations do not constitute a recommendation by the Agency on Aging; rather, they are pr esented as an overview to determine gaps in services for older adults relevant to planning Older Americans Act services and to avoid duplication of services already provided in the community. The Agency follows federal and State requirements for issuing Requests for Proposals for provision of Older Americans Act services and awarding subcontracts.

• The Area Plan is constructed using the California Department of Aging's required template, which does not include a glossary of terms. Descriptions of Older Americans Act services provided by the Agency on Aging and its service providers are provided in Area Plan Section 3, pages 2-4. There is no coding involved with Older Americans Act service definitions.

Section 9 Goals and Objectives

Goal 1:	Reduce hunger and increase food security of older adults who are experiencing barriers to good nutrition.
Rationale:	Good nutrition is essential to the health of older adults, and has been determined through this Area Plan's needs assessment process to be the highest priority need of older adults in Fresno and Madera counties. Agencies on Aging are well-positioned to help meet this need through the home-delivered meals and congregate nutrition programs.

	*Objective	Projected Start Date	Projected End Date	Update Status
Α.	Ensure good nutrition for older adults who are homebound, unable to shop for groceries, and unable to prepare a meal through provision of home-delivered meals for a minimum of 650 older adults each fiscal year.	7/1/2020	6/30/2024	In Progress: 7/1/20 to 3/31/21: 865 participants
В.	Transition Congregate Nutrition program from COVID-19 mode of meal provision (delivery to homes of Congregate Nutrition program participants) to provision at senior and community centers as the State provides nutrition program guidance and as centers hosting the program are adequately staffed and demonstrate capability to comply with State and local COVID-19 operating requirements.	7/1/2020	6/30/2022	Not in Progress because COVID-19 State of Emergency is still in place. Target date: Jan. 1, 2022.

C.	Farmers' Market Nutrition Program beginning in fiscal year 2021-2022 (fiscal year 2020-2021 program cancelled due to COVID-19). The Agency on Aging will distribute \$25,000 worth of farmers' market vouchers to older adults who have low income to increase their nutrition through access to fresh fruit and vegetables.	7/1/2021	6/30/2024	Cancelled for 2020-2021 season. Resume in 2022. To reduce COVID-19 transmission risk, the California Department of Food and Agriculture is not partnering with AAAs in 2021 on this program.
*No	funds will be diverted to Program Developmen	t or Coordina	ation during th	is funding cycle.

Core Programs and Services			
Home-Delivered Meals Program	Nutrition Education		
Congregate Nutrition Program	Senior Farmers Market Program		

Section 9 Goals and Objectives

Goal 2:Maintain the ability of older adults to live independently for as long as
possible.Rationale:It is less expensive for an older adult to remain in the home with
community-based support than to provide care in a skilled nursing
facility. Providing the family caregiver with the tools and support they
need to continue in their caregiving role is essential to keeping older
adults in their homes. Case management and supportive services for
older adults who need coordination of care to continue to live
independently is also key to independence. Developing marketable job
skills for older adults who are able to work but have low employment
prospects helps to increase self-sufficiency.

	*Objective	Projected Start Date	Projected End Date	Update Status
Α.	Case Management: Provide Linkages case management and supportive services, such as chore, homemaker, and personal care, for 100 older adults each fiscal year who are at risk for placement but do not qualify for other case management programs.	7/1/2020	6/30/2024	In Progress: 58 older adults received III B Case Management services 7/1/20 – 2/28/21
В.	Provide counseling for a minimum of 250 family caregivers and support groups for a minimum of 40 family caregivers each fiscal year to help them maintain their caregiver role and defer placement of their family member.	7/1/2020	6/30/2024	In Progress: 588 family caregivers received IIIE Caregiver Counseling, and 112 caregivers attended virtual Caregiver Support groups 7/1/20 – 2/28/21.

C.	Health Promotion: Improve self-care behaviors, management of emotions, self-efficacy, and use of community resources by older adults who are family caregivers through provision of five six-week sessions of the evidence- based Powerful Tools for Caregivers program each fiscal year.	7/1/2020	6/30/2024	In Progress: 14 virtual sessions of the Powerful Tools for Caregivers program were conducted 7/1/20- 2/28/21.
D.	Telephone Reassurance: Decrease social isolation by providing a minimum of 2,150 telephone wellness checks for older adults who are socially and/or geographically isolated due to COVID- 19 restrictions.	7/1/2020	06/30/2022	In Progress: 1,772 telephone wellness checks were conducted 7/1/20- 2/28/21

*No funds will be diverted to Program Development or Coordination during this funding cycle.

Core Programs and Services

Case Management – Linkages Program

Family Caregiver Support Program (Title III E)

1.Access AssistanceCaregiver Information and Assistance Caregiver Outreach Caregiver Interpretation/Translation Caregiver Legal Resources2.Information ServicesCommunity Education on Caregiving Public Information on Caregiving3.Respite CareCaregiver Respite In-Home Supervision Caregiver Counseling Caregiver Support Group Caregiver Training5.Supplemental ServicesAssistive Devices for Caregiving Caregiving Emergency Cash/Material Aid Caregiving Services Registry		, o ii o (,
 Respite Care Respite Care Support Services Support Services Supplemental Services Public Information on Caregiving Caregiver Respite In-Home Supervision Caregiver Assessment Caregiver Counseling Caregiver Support Group Caregiver Training Supplemental Services Assistive Devices for Caregiving Caregiving Emergency Cash/Material Aid 	1.	Access Assistance	Caregiver Outreach Caregiver Interpretation/Translation
 4. Support Services 4. Support Services Caregiver Assessment Caregiver Counseling Caregiver Support Group Caregiver Training 5. Supplemental Services Assistive Devices for Caregiving Caregiving Emergency Cash/Material Aid 	2.	Information Services	, , , , , , , , , , , , , , , , , , , ,
5. Supplemental Services Assistive Devices for Caregiving Caregiving Emergency Cash/Material Aid			Caregiver Assessment Caregiver Counseling
Caregiving Emergency Cash/Material Aid			5 5
	5.	Supplemental Services	Caregiving Emergency Cash/Material Aid

Health Promotion: Powerful Tools for Caregivers

Adult Day Care

Additional Supportive Services (Title III B)			
Personal/Home Security	Personal Care		
Chore	Cash/Material Aid		
Homemaker	Interpretation/Translation		
Telephone Reassurance			

- Goal 3:Address basic needs and rights of older adults who are the most frail
and vulnerable to promote aging with dignity and ensure a safe living
environment.Rationale:Adult Protective Services in Fresno and Madera counties received 4,718
reports of alleged elder abuse and handled 525 confirmed cases of
elder abuse perpetrated by others in 2020. The Long-Term Care
Ombudsman Program handled 675 complaints for residents of long
 - term care facilities in fiscal year 2019-2020. Increased awareness of elder abuse identification and reporting, and the rights of individuals in skilled nursing facilities and residential care facilities for the elderly, is needed to help reduce abuse and ensure rights are protected. Education on emergency preparedness is essential to ensure safety of older adults during earthquakes, floods, and increasing incidents of wildfires and power outages.

	*Objective	Projected Start Date	Projected End Date	Update Status
A. Elder Abuse Prevention, Education and Training: Valley Caregiver Resource Center will provide 18 educational sessions on elder abuse for professionals, caregivers, and the public each fiscal year to increase elder abuse awareness and reporting.		7/1/2020	6/30/2024	In Progress
В.	Long-Term Care Ombudsman Program: Valley Caregiver Resource Center will visit Skilled Nursing Facilities in Fresno and Madera counties quarterly, as COVID-19 visiting restrictions permit, to provide residents with routine access to trained Ombudsmen, who will inform residents of their rights and seek resolution to identified issues.	7/1/2020	6/30/2024	In Progress
C.	Legal Assistance: Central California Legal Services will provide 700 hours of legal assistance each fiscal year to protect older adults from physical and financial abuse, unlawful evictions, unfair business and debt collection practices, and other issues affecting their rights.	7/1/2020	6/30/2024	In Progress

		1		
D.	Disaster Preparedness: The Agency on Aging will increase the capability of older adults to effectively respond to an emergency through annual provision of FEMA preparedness checklists and brochures to its case management and home-delivered meals clients. The Agency will also observe National Preparedness Month each September through posting of FEMA public service announcements on its Web site and ongoing updates to the Agency's "Be Safe" Web page, including links to resources in multiple languages. When COVID-19 precautions for older adults are lifted, the Agency on Aging's Advisory Council will plan and provide five peer-to-peer presentations on disaster preparedness for older adults each fiscal year.	7/1/2020	6/30/2024	In Progress

*No funds will be diverted to Program Development or Coordination during this funding cycle.

Core Programs and Services

Long-Term Care Ombudsman Program

Elder Abuse Prevention, Education, and Training

Legal Assistance

Disaster Preparedness

(No funding requested; objectives to be accomplished in the course of conducting customer contacts through Case Management and Home-Delivered Meals programs, through administrative activities, and in the course of conducting Advisory Council activities.)

Goal 4:Empower older adults to make informed decisions and sound choices to
increase independence and ensure quality of life through connection to
resources.Rationale:Ensuring older adults are aware of their options and have the tools they
need to navigate through unfamiliar programs and services is essential
to ensure their needs are effectively met. Counseling on Medicare
plans and available subsidies for beneficiaries with low income
continues to be a high-demand service. Information and Assistance is
necessary to direct inquiries to the right service in the spectrum of
providers. Transportation is needed to physically access essential
services, including groceries and medical appointments.

	*Objective	Projected Start Date	Projected End Date	Update Status
Α.	Health Insurance Counseling and Advocacy Program: Valley Caregiver Resource Center will attain the California Department of Aging's annual minimum benchmark for hours of counseling for Medicare beneficiaries (fiscal year 2020-2021 benchmark is 2,014 hours).	7/1/2020	6/30/2024	In Progress
В.	The City of Madera will ensure older residents have access to grocery stores, medical facilities, pharmacies, nutrition sites, and social activities through provision of 30,000 public transit passes for fixed route and dial- a-ride services each fiscal year.	7/1/2020	6/30/2024	The AAA's Transportation contract with the City of Madera was cancelled for FY 20-21 to reduce the risk of COVID-19 transmission to older adults during the pandemic.
C.	The Agency on Aging will help older adults and family caregivers navigate the network of care by reviewing and updating its Web site content a minimum of once a month to ensure information on its programs and services is current and to post information on events and workshops offered by community partners.	7/1/2020	6/30/2024	In Progress

*No funds will be diverted to Program Development or Coordination during this funding cycle.

Core Programs and Services

Information and Assistance

Transportation

Health Insurance Counseling & Advocacy Program

Additional Supportive Services

Interpretation/Translation

Section 10 Service Unit Plan (SUP) Objectives

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

The Service Unit Plan (SUP) uses the National Aging Program Information System (NAPIS) Categories and units of service. They are defined in the <u>NAPIS State Program Report (SPR)</u>

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

 Report the units of service to be provided with <u>ALL funding sources</u>. Related funding is reported in the annual Area Plan Budget (CDA 122) for Titles IIIB, IIIC-1, IIIC-2, IIID, and VIIA. Only report services provided; others may be deleted.

Personal Care (In-Home)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	300	2	А
2021-2022	0	2	A
2022-2023			-
2023-2024			-

Homemaker (In-Home)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)	
2020-2021	420	2	А	
2021-2022	0	2	А	
2022-2023			-	
2023-2024			-	

Chore (In-Home)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	420	2	А
2021-2022	0	2	А
2022-2023			-
2023-2024			-

Home-Delivered Meals

Unit of Service = 1 meal

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	243,736	1	А
2021-2022	500,000	1	А
2022-2023			
2023-2024			

Adult Day/ Health Care (In-Home)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	410	2	-
2021-2022	13,312	2	-
2022-2023			-
2023-2024			-

Case Management (Access)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	1,500	2	А
2021-2022	1,500	2	А
2022-2023			-
2023-2024			-

Congregate Meals

Unit of Service = 1 meal

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	344,647	1	В
2021-2022	180,000	1	В
2022-2023	0	-	-
2023-2024	0	-	-

Transportation (Access)

Unit of Service = 1 one-way trip

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	30,000	4	В
2021-2022	10	4	В
2022-2023			-
2023-2024			-

Legal Assistance

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	700	3	С
2021-2022	950	3	С
2022-2023		-	-
2023-2024		-	-

Nutrition Education

Unit of Service = 1 session per participant

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	5,411	1	-
2021-2022	6,400	1	-
2022-2023			-
2023-2024			-

Information and Assistance (Access)

Unit of Service = 1 contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	2,695	4	-
2021-2022	2,400	4	-
2022-2023			-
2023-2024			-

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

- □ Each <u>Title IIIB</u> "Other" service must be an approved NAPIS Program service listed above on the "Schedule of Supportive Services (III B)" page of the Area Plan Budget (CDA 122) and the CDA Service Categories and Data Dictionary.
- Identify <u>Title IIIB</u> services to be funded that were <u>not</u> reported in NAPIS categories. (Identify the specific activity under the Other Supportive Service Category on the "Units of Service" line when applicable.)

Title IIIB, Other Priority and Non-Priority Supportive Services

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

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

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

Other Support	ve Service Category:	Cash/Material Aid	Unit of Service = 1 Assistance
Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	5	2	-
2021-2022	5	2	-
2022-2023			
2023-2024			

Other Supportive Service Category: Cash/Material Aid Unit of Service = 1 Assistance

Other Supportiv	Other Supportive Service Category: Interpretation/Translation		Unit of Service = 1 Contact
Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	2	4	-
2021-2022	2	4	-
2022-2023			-
2023-2024			-

Other Supportiv	Other Supportive Service Category: Personal/Home Security		Unit of Service = 1 Product
Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	20	2	-
2021-2022	20	2	-
2022-2023			
2023-2024			

Other Supportiv	Other Supportive Service Category: Telephone Reassurance		Unit of Service = 1 Contact
Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	2,150	2	D
2021-2022	0		
2022-2023			-
2023-2024			-

Other Supportive Service Category: Residential Repairs/Modifications Unit of Service = 1 Modification

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	-	-	-
2021-2022	30	2	А
2022-2023			-
2023-2024			-

3. Title IIID Disease Prevention and Health Promotion

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

Service Activities:

• Title III D/Disease Prevention and Health Promotion: Enter required program goal and objective numbers in the Title III D Service Plan Objective Table below:

Powerful Tools for Caregiving

Unit of Service = 1 Contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (required)
2020-2021	495	2	С
2021-2022	495	2	С
2022-2023			
2023-2024			

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

2020–2024 Four-Year Planning Cycle

As mandated by the Older Americans Act Reauthorization Act of 2016, the mission of the LTC Ombudsman Program is to seek resolution of problems and advocate for the rights of residents of LTC facilities with the goal of ensuring their dignity, quality of life, and quality of care.

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

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

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

Measures and Targets:

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

 FY 2018-2019 Baseline Resolution Rate: Number of complaints resolved (377) + number of partially resolved complaints (235) divided by the total number of complaints received (799) = Baseline Resolution Rate (76.6%) FY 2020-2021 Target Resolution Rate: 75%

2. FY 2019-2020 Baseline Resolution Rate: Number of complaints partially or fully resolved (166) + number of partially resolved complaints (129) <u>di</u>vided by the total number of complaints received (376) = Baseline Resolution Rate (78%)
FY 2021-2022 Target Resolution Rate 75%

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

4. FY 2021-2022 Baseline Resolution Rate:
Number of complaints partially or fully resolved ______ divided by the total number of complaints received ______ = Baseline Resolution Rate _____%
FY 2023-2024 Target Resolution Rate ______%

Program Goals and Objective Numbers:

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

- FY 2018-2019 Baseline: Number of Resident Council meetings attended = 51 FY 2020-2021 Target: 20
- 2. FY 2019-2020 Baseline: Number of Resident Council meetings attended = 24 FY 2021-2022 Target: 15
- 3. FY 2020-2021 Baseline: Number of Resident Council meetings attended ______ FY 2022-2023 Target: _____
- FY 2021-2022 Baseline: Number of Resident Council meetings attended ______ FY 2023-2024 Target: ______

Program Goals and Objective Numbers: _____

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

1.	FY 2018-2019 Baseline: Number of Family Council meetings attended = 8 FY 2020-2021 Target: 0
2.	FY 2019-2020 Baseline: Number of Family Council meetings attended = 0 FY 2021-2022 Target: 0
3.	FY 2020-2021 Baseline: Number of Family Council meetings attended FY 2022-2023 Target:
4.	FY 2021-2022 Baseline: Number of Family Council meetings attended FY 2023-2024 Target:
Prog	ram Goals and Objective Numbers:

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

Count of instances of ombudsman representatives' interactions with facility staff for the purpose of providing general information and assistance unrelated to a complaint. Consultation may be accomplished by telephone, letter, email, fax, or in person.

1.	FY 2018-2019 Baseline: Number of Instances = 1,937 FY 2020-2021 Target: 1,500
2.	FY 2019-2020 Baseline: Number of Instances = 3,647 FY 2021-2022 Target: 1,500
3.	FY 2020-2021 Baseline: Number of Instances = FY 2022-2023 Target:
4.	FY 2021-2022 Baseline: Number of Instances = FY 2023-2024 Target:
Prog	ram Goals and Objective Numbers:

E. Information and Consultation to Individuals (AoA Report, Part III.D.5) Count of instances of ombudsman representatives' interactions with residents, family members, friends, and others in the community for the purpose of providing general information and assistance unrelated to a complaint. Consultation may be accomplished by: telephone, letter, email, fax, or in person.

1.	FY 2018-2019 Baseline: Number of Instances = 6,071 FY 2020-2021 Target: 3,000	
2.	FY 2019-2020 Baseline: Number of Instances = 3,462 FY 2021-2022 Target: 3,000	
3.	FY 2020-2021 Baseline: Number of Instances = FY 2022-2023 Target:	
4.	FY 2021-2022 Baseline: Number of Instances = FY 2023-2024 Target:	
Program Goals and Objective Numbers:		

F. Community Education (AoA Report, Part III.D.10) LTC Ombudsman Program participation in public events planned to provide information or instruction to community members about the LTC Ombudsman Program or LTC issues. The number of sessions refers to the number of events, not the number of participants.

1.	FY 2018-2019 Baseline: Number of Sessions = 43 FY 2020-2021 Target: 6	
2.	FY 2019-2020 Baseline: Number of Sessions = 22 FY 2021-2022 Target: 6	
3.	FY 2020-2021 Baseline: Number of Sessions = FY 2022-2023 Target:	
4.	FY 2021-2022 Baseline: Number of Sessions = FY 2023-2024 Target:	
Program Goals and Objective Numbers:		

G. Systems Advocacy

In the box below, in narrative format, provide at least one new priority systemic advocacy effort the local LTC Ombudsman Program will engage in during the fiscal year. If the systemic advocacy effort is a multi-year initiative, provide a systemic advocacy objective that explains progress made in the initiative during the prior fiscal year and identifies specific steps to be taken during the upcoming fiscal year. A new effort or a statement of progress made and goals for the upcoming year must be entered each year of the four-year cycle. Systems Advocacy can include efforts to improve conditions in one LTC facility or can be county-wide, State-wide, or even national in scope. (Examples: Work with LTC facilities to promote person-centered care and reduce the use of anti-psychotics, work with law enforcement entities to improve LTC residents' quality of care and quality of life, participation in disaster preparedness planning, participation in legislative advocacy efforts related to LTC issues, etc. Enter information in the box below.

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

October 2020 is Resident Rights month. New COVID-19 visitation guidelines provide for staff Ombudsmen to visit SNF and RCFE facilities. In recognition of Resident Rights Month, staff will deliver posters, collateral materials, tent cards and Resident Rights information to SNF and RCFE residents. This is very timely as it has often been necessary to override many Resident Rights in response the COVID-19 Pandemic. Our Ombudsmen will re-educate the residents on their rights and how the Ombudsman Program can assist them with any future violations.

FY 2021-2022

FY 2021-2022 Systems Advocacy Effort(s): Given how the COVID-19 Pandemic and related restrictions made it necessary for many Resident Rights to be overridden, staff will emphasize education on Resident Rights throughout the year so that residents will know their rights as the COVID-19 pandemic eases. Staff will also carry over Systems Advocacy efforts from FY 2020-2021, and continue to deliver posters, collateral materials, tent cards to SNF and RCFE residents so that residents are aware of their rights and how the Ombudsman Program can assist them.

FY 2022-2023

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

FY 2023-2024

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

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

Measures and Targets:

A. Routine Access: Nursing Facilities (NORS Element S-58)

Percentage of nursing facilities within the PSA that were visited by an Ombudsman representative at least once each quarter not in response to a complaint. The percentage is determined by dividing the number of nursing facilities in the PSA that were visited at least once each quarter not in response to a complaint by the total number of nursing facilities in the PSA. NOTE: This is not a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no nursing facility can be counted more than once.

 FY 2018-2019 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint (36) divided by the total number of Nursing Facilities (36) = Baseline 100%

FY 2020-2021 Target: 50%

- 2. FY 2019-2020 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint (0) divided by the total number of Nursing Facilities (36) = Baseline 0%
 FY 2021-2022 Target: 75%
- 3. FY 2020-2021 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint_____divided by the total number of Nursing Facilities = Baseline____%
 FY 2022-2023 Target: %
- 4. FY 2021-2022 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint divided by the total number of Nursing Facilities = Baseline %
 FY 2023-2024 Target: %

Program Goals and Objective Numbers: 3.B

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

Percentage of RCFEs within the PSA that were visited by an ombudsman representative at least once each quarter during the fiscal year **not** in response to a complaint. The percentage is determined by dividing the number of RCFEs in the PSA that were visited at least once each quarter not in response to a complaint by the total number of RCFEs in the PSA.

NOTE: This is not a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no RCFE can be counted more than once.

- FY 2018-2019 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint (178) divided by the total number of RCFEs (207) = Baseline (85%) FY 2020-2021 Target: 50%
- FY 2019-2020 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint (0) divided by the total number of RCFEs (218) = Baseline (0 %) FY 2021-2022 Target: 75%
- FY 2020-2021 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint () divided by the total number of RCFEs () = Baseline (%) FY 2022-2023 Target: __%

 FY 2021-2022 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint () divided by the total number of RCFEs () = Baseline (%) FY 2023-2024 Target: __%

Program Goals and Objective Numbers: _____

C. Number of Full-Time Equivalent (FTE) Staff (AoA Report Part III. B.2. - Staff and Volunteers) This number may only include staff time legitimately charged to the LTC Ombudsman Program. Time spent working for or in other programs may not be included in this number. For example, in a local LTC Ombudsman Program that considers full-time employment to be 40 hour per week, the FTE for a staff member who works in the Ombudsman Program 20 hours a week should be 0.5, even if the staff member works an additional 20 hours in another program.

1.	FY 2018-2019 Baseline: 6.3FTEs FY 2020-2021 Target: 6.875 FTEs			
2.	FY 2019-2020 Baseline: 6.5FTEs FY 2021-2022 Target: 6.5 FTEs			
3.	FY 2020-2021 Baseline:	FTEs FY 2022-2023 Target:FTEs		
4.	FY 2021-2022 Baseline:	FTEs FY 2023-2024 Target:FTEs		
Program Goals and Objective Numbers:				

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

- FY 2018-2019 Baseline: Number of certified LTC Ombudsman volunteers: 49 FY 2020-2021 Projected Number of certified LTC Ombudsman volunteers: 30
- 2. FY 2019-2020 Baseline: Number of certified LTC Ombudsman volunteers 37 FY 2021-2022 Projected Number of certified LTC Ombudsman volunteers 40
- 3. FY 2020-2021 Baseline: Number of certified LTC Ombudsman volunteers ______ FY 2022-2023 Projected Number of certified LTC Ombudsman volunteers ______
- 4. FY 2021-2022 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2023-2024 Projected Number of certified LTC Ombudsman volunteers _____

Program Goals and Objective Numbers: 3.C

Outcome 3. Ombudsman representatives accurately and consistently report data about their complaints and other program activities in a timely manner. [OAA Section 712(c)]

Measures and Targets:

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

Some examples could include:

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

Fiscal Year 2020-2021 NORS Efforts:

Additional staff will be hired to assist with Ombudsman Data Integration Network (ODIN 2020) data entry, case creation, document uploading, monitoring of open cases and the case review and closure process.

Fiscal Year 2021-2022 NORS Efforts:

Staff will be cross-trained so that all can assist with Ombudsman Data Integration Network (ODIN) data entry, case creation, document uploading, and more. A case review process will also be improved to assist with monitoring of open cases and case closure in the wake of the COVID-19 pandemic and its related restrictions.

Fiscal Year 2022-2023 NORS Efforts:

Fiscal Year 2023-2024 NORS Efforts:

TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

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

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

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

AAAs must provide one or more of the service categories below. NOTE: The number of sessions refers to the number of presentations and not the number of attendees

- **Public Education Sessions** –Indicate the total number of projected education sessions for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Training Sessions for Professionals** –Indicate the total number of projected training sessions for professionals (service providers, nurses, social workers) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- Training Sessions for Caregivers Served by Title IIIE –Indicate the total number of projected training sessions for unpaid family caregivers who are receiving services under Title IIIE of the Older Americans Act (OAA) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation. Older Americans Act Reauthorization Act of 2016, Section 302(3) 'Family caregiver' means an adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.
- Hours Spent Developing a Coordinated System to Respond to Elder Abuse Indicate the number of hours to be spent developing a coordinated system to respond to elder abuse. This category includes time spent coordinating services provided by the AAA or its contracted service provider with services provided by

Adult Protective Services, local law enforcement agencies, legal services providers, and other agencies involved in the protection of elder and dependent adults from abuse, neglect, and exploitation.

- Educational Materials Distributed –Indicate the type and number of educational materials to be distributed to the general public, professionals, and caregivers (this may include materials that have been developed by others) to help in the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Number of Individuals Served** –Indicate the total number of individuals expected to be reached by any of the above activities of this program.

TITLE VIIA ELDER ABUSE PREVENTION SERVICE UNIT PLAN OBJECTIVES

Service Provider: Fiscal Years 2017-2018/2019-2020: Valley Caregiver Resource Center Fiscal Year 2016-2017: Central California Legal Services, Inc.

Fiscal Year	Total # of Public Education Sessions
2020-2021	4
2021-2022	8
2022-2023	
2023-2024	

Fiscal Year	Total # of Training Sessions for Professionals
2020-2021	10
2021-2022	20
2022-2023	
2023-2024	

Fiscal Year	Total # of Training Sessions for Caregivers served by Title IIIE	Fiscal Year	*Total # of Hours Spent Developing a Coordinated System
2020-2021	4	2020-2021	60
2021-2022	20	2021-2022	100
2022-2023		2022-2023	
2023-2024		2023-2024	

*Development of a coordinated system is addressed by the Long-Term Care Ombudsman Program.

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2020-2021	500	Elder Abuse Awareness & Prevention, Financial Abuse, How to Report Elder Abuse, Mandated Reporting, Sexual Abuse in Skilled Nursing Facilities, Available Community Resources, Bureau of Medi-Cal Fraud & Elder Abuse Information, U.S. Attorney's Office Information, Victim Assistance Resources
2021-2022	500	Elder Abuse Awareness & Prevention, Financial Abuse, How to Report Elder Abuse, Mandated Reporting, Sexual Abuse in Skilled Nursing Facilities, Available Community Resources, Bureau of Medi-Cal Fraud & Elder Abuse Information, U.S. Attorney's Office Information, Victim Assistance Resources
2022-2023		
2023-2024		

PSA 14

TITLE IIIE SERVICE UNIT PLAN OBJECTIVES

CCR Article 3, Section 7300(d)

2020–2024 Four-Year Planning Period

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

CATEGORIES	1	2	3
Family Caregiver Services Caring for Elderly	Proposed Units of Service	Required Goal #(s)	Optional Objective #(s)
Information Services	# of activities and Total estimated audience for above		
2020-2021	# of activities: 43 Total estimated audience for above: 3,220	2	-
2021-2022	# of activities: 43 Total estimated audience for above: 3,220	2	-
2022-2023	# of activities: Total estimated audience for above:		-
2023-2024	# of activities: Total estimated audience for above:		-
Access Assistance	Total Contacts		
2020-2021	1,371	2	-
2021-2022	1,238	2	-
2022-2023			-
2023-2024			-
Support Services	Total Hours		
2020-2021	2,148	2	-
2021-2022	2,514	2	-
2022-2023			-
2023-2024			-

Direct and/or Contracted IIIE Services

CATEGORIES	1	2	3
Family Caregiver Services Caring for Elderly	Proposed Units of Service	Required Goal #(s)	Optional Objective #(s)
Respite Care	Total Hours		
2020-2021	6,444	2	-
2021-2022	6,444	2	
2022-2023			
2023-2024			
Supplemental Services	Total Occurrences		
2020-2021	45	2	-
2021-2022	45	2	
2022-2023			
2023-2024			

Direct and/or Contracted IIIE Services

CATEGORIES	1	2	3
Grandparent Services Caring for Children	Proposed Units of Service	Required Goal #(s)	Optional Objective #(s)
Information Services	# of activities and Total estimated audience for above		
2020-2021	# of activities:0 Total estimated audience for above:0	-	-
2021-2022	# of activities:0 Total estimated audience for above:0	-	-
2022-2023	# of activities:0 Total estimated audience for above:0	-	-
2023-2024	# of activities:0 Total estimated audience for above:0	-	-
Access Assistance	Total Contacts		
2020-2021	0	-	-
2021-2022	0	-	-
2022-2023	0	-	-
2023-2024	0	-	-
Support Services	Total Hours		
2020-2021	0	-	-
2021-2022	0	-	-
2022-2023	0	-	-
2023-2024	0	-	-
Respite Care	Total Hours		
2020-2021	0	-	-
2021-2022	0	-	-
2022-2023	0	-	-
2023-2024	0	-	-
Supplemental Services	Total Occurrences		
2020-2021	0	-	-
2021-2022	0	-	-
2022-2023	0	-	-
2023-2024	0	-	-

Direct and/or Contracted IIIE Services

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

MULTIPLE PSA HICAPs: If you are a part of a multiple-PSA HICAP where two or more AAAs enter into an agreement with one "Managing AAA," to deliver HICAP services on their behalf to eligible persons in their AAA, then each AAA is responsible for providing HICAP services in the covered PSAs in a way that is agreed upon and equitable among the participating parties.

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

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

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

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

- PM 1.1 Clients Counseled ~ Number of finalized Intakes for clients/ beneficiaries that received HICAP services
- PM 1.2 Public and Media Events (PAM) ~ Number of completed PAM forms categorized as "interactive" events
- PM 2.1 Client Contacts ~ Percentage of one-on-one interactions with any Medicare beneficiaries
- PM 2.2 PAM Outreach Contacts ~ Percentage of persons reached through events categorized as "interactive"
- PM 2.3 Medicare Beneficiaries Under 65 ~ Percentage of one-on-one interactions with Medicare beneficiaries under the age of 65
- PM 2.4 Hard-to-Reach Contacts ~ Percentage of one-on-one interactions with "hard-toreach" Medicare beneficiaries designated as:
 - PM 2.4a Low-income (LIS)

- PM 2.4b Rural
- PM 2.4c English Second Language (ESL)
- PM 2.5 Enrollment Contacts ~ Percentage of contacts with one or more qualifying enrollment topics discussed AAA's should demonstrate progress toward meeting or improving on the Performance requirements established by CDA and ACL as is displayed annually on the HICAP State and Federal Performance Measures tool located online at: <u>https://www.aging.ca.gov/Providers_and_Partners/Area_Agencies_on_Aging/#ppplanning</u>. (Reference CDA PM 17-11 for further discussion, including current HICAP Performance Measures and Definitions).

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

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

HICAP Legal Services Units of Service (if applicable): Not applicable

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

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

SECTION 12 - DISASTER PREPAREDNESS PSA 14

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

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

The Fresno-Madera Area Agency on Aging includes its Service Provider Emergency Resource Information form as an exhibit in each service provider contract. Service providers are required to designate a primary and secondary emergency contact, indicate all emergency services that could be provided from each location where contracted services are offered, and indicate shelter, transportation, emergency water supply, and number of days facility could function using a back-up power source. The Agency on Aging maintains copies of each provider's emergency resource exhibit in a binder for ease of reference in the event of an emergency. The Agency on Aging also maintains a list of all emergency contacts in Microsoft Excel, updates the list following execution of annual provider contracts, and places the list at the front of the binder.

The File of Life[®] has historically provided a synopsis of the client's health information for access by emergency personnel. The file has been enhanced by the Agency on Aging to include a section for physician authorization of prescriptions to assist individuals with obtaining their medications following a disaster. The File of Life[®], housed in a plastic protective pouch and typically attached to the client's refrigerator for accessibility by first responders, can be easily removed and transported with the client should an evacuation be necessary. The Agency on Aging and its contracted service providers continue to distribute File of Life[®] packets through Health Promotion, Information and Assistance, and Outreach activities.

The Agency on Aging recognizes that just as a caregiver cannot attend to the needs of a client unless the caregiver is functional, each individual Agency on Aging staff member must be prepared for a disaster in order to provide critical Agency on Aging services following a disaster event. Each staff member has been provided with a backpack containing a "grab and go" emergency kit. The Agency on Aging incorporates basic response emergency training, such as fire drills and first aid, in staff safety meetings, and offers fire extinguisher training for staff. Emergency contact triage lists are updated and distributed to Agency on Aging personnel on an ongoing basis.

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

	Title	Telephone	Email
Ken Austin	Emergency Manager, Fresno County Office of Emergency Services	Office: 559-600-4065	kaustin@fresnocountyca.gov
Sergeant Joseph Wilder	OES Coordinator, Madera County Sheriff's Department	Office: 559-675-7770	jwilder@maderacounty.com

3. Identify the Disaster Response Coordinator within the AAA:

Name	Title	Telephone	Email
Primary: Jean Robinson	Executive Director	Office: 559-214-0299	jrobinson@fmaaa.org
Secondary: Tim Savage	Administrative Manager	Office: 559-214-0299 ext. 102	tsavage@fmaaa.org

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

Critical Services		How Delivered?		
а	Case Management	а	Via telephone	
b	Home-Delivered Meals	b	Contracted meal vendor	
С	Information and Assistance	С	Telephone, Agency Web site	

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

The Agency on Aging has not established formal agreements for emergency preparedness or response.

- 6. Describe how the AAA will:
 - Identify vulnerable populations.

Agency on Aging staff complete Client Emergency forms during assessments of Care Management and Home-Delivered Meals clients. This one-page form profiles the client's needs in the event of an emergency, including the client's high-risk score; oxygen and insulin requirements; local and out of area emergency contact and household access information; household member and pet information; and location of the client's File of Life[®] packet.

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

Agency on Aging staff will use the contact information on the Client Emergency forms to conduct telephone calls to assess the needs of clients identifed as vulnerable.

2020-2024 Four-Year Planning Cycle

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

The CCR, Article 3, Section 7312, requires the AAA to allocate an "adequate proportion" of federal funds to provide Access, In-Home Services, and Legal Assistance in the PSA. The annual minimum allocation is determined by the AAA through the planning process. The minimum percentages of applicable Title III B funds¹ listed below have been identified for annual expenditure throughout the four-year planning period. These percentages are based on needs assessment findings, resources available within the PSA, and discussions at public hearings on the Area Plan.

Category of Service and the Percentage of Title III B Funds expended in/or to be expended in FY 2020-21 through FY 2023-24

Access:

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

2020-2021: 40% 2021-2022: 40% 2022-2023: 40% 2023-2024: 40%

In-Home Services:

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

2020-2021: 8%	2021-2022: 8%	2022-2023: 8%	2023-2024: 8%
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Legal Assistance Required Activities:²

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

2020-2021: 2%	2021-2022: 2%	2022-2023: 2%	2023-2024: 2%
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Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA:

The ongoing needs assessments and funding constraints are the determinate factors for the allocation of funding for all services. Funding for priority services is reserved at the levels indicated above to ensure an adequate amount is available for federally-designated priorities for Title III B services that have also been identified as priority services at the local level.

SECTION 16 - GOVERNING BOARD

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

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

Total Number of Board Members: 15

Name and Title of Officers

John Sears, Madera County, Chair	January 3, 2022
Edward Saliba, Fresno City, First Vice-Chair	January 3, 2022
Ronald Adolph, Fresno County, Second Vice-Chair	January 3, 2022

Names and Titles of Non-Officer Members

Steve Brandau, Board Member, Fresno County	January 6, 2025
Luis Chavez, Board Member, Fresno City	May 1, 2021
Leticia Gonzalez, Board Member, Madera County	January 3, 2022
Keith Rigby, Board Member, Madera County	January 3, 2022
James Poptanich, Board Member, Fresno City	January 3, 2023

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

Vacancies awaiting appointment by the Agency on Agency's Joint Power Authorities:

- 2 City of Fresno
- 3 County of Fresno
- 2 County of Madera

Office Term Expires

Board Term Expires

SECTION 17 - ADVISORY COUNCIL

ADVISORY COUNCIL MEMBERSHIP 2020-2024 Four-Year Planning Cycle

OAA 2006 306(a)(6)(D) 45 CFR, Section 1321.57; CCR Article 3, Section 7302(a)(12)			
Total Council Membership (include vacancies): Number of Council Members over age 60:	21 7		
Ethnic Composition	*% of PSA's <u>60+ Population</u>	% on <u>Advisory Council</u>	
Hispanic or Latino of Any Race	32.7%	33.3%	
White Alone, Not Hispanic or Latino	52.3%	33.3%	
Race Composition			
White	73.3%	33.3%	
Black or African American	4.4%	8.3%	
Native American/Alaskan Native	.2%	-	
Asian/Pacific Islander	8.9%	16.7%	
Some Other Race/Two or More Races	12.3%	8.3%	
*Source: U.S. Census Bureau, 2013-2017 Ame (Table S0102, Population 60 Years and Over in		y 5-Year Estimates	
Name and Title of Officers	<u>O</u> 1	ffice Term Expires	
Ren Ramshaw, Fresno City, Chair		June 30, 2021	
Sharon Diaz, Madera County, First Vice-Chair		June 30, 2022	
Raymond Lopez, Fresno County, Second Vice-	Chair	June 30, 2022	
Name and Title of Other Members	<u>O1</u>	ffice Term Expires	
Myrna Bowman, Fresno County		June 30, 2022	
Paula Faulkner, Fresno County		June 30, 2021	
Minerva Garcia, Fresno County		June 30, 2022	
Michael Mendez, Jr., Fresno County		June 30, 2021	
Corinne Long, Madera County		June 30, 2022	
Verlaine Elinburg, Madera County		June 30, 2023	
Kin Tan, Fresno City		June 30, 2022	
Virginia Wheeler, Fresno City		June 30, 2022	
Jerry Zuniga, Fresno City		June 30, 2021	

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

	Yes	Νο
Low Income Representative		\boxtimes
Disabled Representative M. Mendez	\square	
Supportive Services Provider Representative M. Bowman, S. Diaz, P. Faulkner, C. Long, M.	⊠ M. Mende	 z, R. Ramshaw, J. Zuniga
Health Care Provider Representative R. Ramshaw	\square	
Family Caregiver Representative R. Ramshaw	\square	
Local Elected Officials M. Garcia, Senior Assembly Member, Califor	⊠ rnia Senio	Legislature, Fresno County
Individuals with Leadership Experience in Private and Voluntary Sectors M. Bowman, V. Elinburg, M. Garcia, R. Lope J. Zuniga	⊠ sz, R. Ram	□ shaw, K. Tan, V. Wheeler,

Explain any "No" answer(s):

The Agency on Aging actively recruits for Advisory Council members who represent the diversity of older adults in Fresno and Madera counties, including those with income at or below the federal poverty level.

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

The Agency on Aging was established in 1980 as a Joint Powers Authority (JPA), with Fresno County, Madera County, and the city of Fresno designated as the joint power entities. The Agency on Aging's Advisory Council consists of 21 individuals, seven from each JPA area. The Agency on Aging's Governing Board's ad hoc selection committee interviews individuals who indicate interest in Advisory Council membership, and recommends appointments to the Governing Board.

SECTION 18 - LEGAL ASSISTANCE

2020-2024 Four-Year Area Planning Cycle

This section <u>must</u> be completed and submitted annually. The Older Americans Act Reauthorization Act of 2016 designates legal assistance as a priority service under Title III B [42 USC §3026(a)(2)] ¹² CDA developed *California Statewide Guidelines for Legal Assistance* (Guidelines), which are to be used as best practices by CDA, AAAs and LSPs in the contracting and monitoring processes for legal services, and located at: <u>https://aging.ca.gov/Providers_and_Partners/Legal_Services/#pp-gg</u>

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

The Fresno-Madera Area Agency on Aging (FMAAA) seeks to protect older adults and adults with disabilities, particularly those with the greatest social and economic need, from direct challenges to independence, choice, and financial security through provision of Title III B legal services. These legal services help older individuals and adults with disabilities understand their rights, exercise options through informed decision making, and achieve optimal benefit from the support and opportunities promised by law.

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

The minimum percentage of Title IIIB funding allocated for Legal Services is 2%.

- 3. Specific to Legal Services, has there been a change in your local needs in the past four years? No. If so, please identify the change (include whether the change affected the level of funding and the difference in funding levels in the past four years).
- 4. Specific to Legal Services, does the AAA's contract/agreement with the Legal Services Provider(s) (LSPs) specify that the LSPs are expected to use the California Statewide Guidelines in the provision of OAA legal services?

Yes. Contents of the California Statewide Guidelines, as provided in California Department of Aging Program Memo 05-19, have been incorporated in Exhibit A, the Program Exhibit, of the Agency on Agency's contract with its legal services provider.

5. Does the AAA collaborate with the Legal Services Provider(s) to jointly establish specific priorities issues for legal services? Yes.

If so what are the top four (4) priority legal issues in your PSA?

Landlord/tenant issues; consumer/finance issues; elder abuse; and late life issues, including wills, advance health care directives, and power of attorney.

6. Specific to Legal Services, does the AAA collaborate with the Legal Services Provider(s) to jointly identify the target population? Yes.

If so, what is the targeted senior population in your PSA <u>AND</u> what mechanism is used for reaching the target population? Discussion:

The targeted population is older adults who have low income and older adults with limited English proficiency. Please see Item 7 below for mechanisms used to reach these individuals.

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

Older adults with low income and limited English proficiency are targeted for legal services. In addition to the outreach methods described in item 10 below, the Agency on Aging's staff, the City of Madera's Older Adult Services staff, and staff and volunteers of senior and community centers inform older adults of available services, including legal services.

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

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

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

Central California Legal Services has implemented a Senior Legal Advice Line.

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

CCLS promotes its services and events on its Web site and Facebook page; through its newsletter and emails to its extended community network; and through public service announcements in local media. Much of CCLS' communication is presented in the Spanish language. 11. What geographic regions are covered by each provider? Complete table below.

Fiscal Year	Name of Provider	Geographic Region Covered
2020-2021	Central California Legal Services	Fresno & Madera Counties
2021-2022	Central California Legal Services	Fresno & Madera Counties
2022-2023		
2023-2024		

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

Older adults can access legal services by calling Central California Legal Services' (CCLS) Senior Legal Advice Line or completing CCLS' online application for services. Referrals to CCLS are generated from inquiries to the Fresno-Madera Area Agency on Aging's Information and Assistance and Case Management staff, as well as through the Agency on Aging's contracted service providers.

CCLS rose to the challenges of the COVID-19 pandemic by offering online clinics on elder abuse, bankruptcy, workers compensation and COVD-19, and housing law updates in Spring and Summer 2020. Prior to the onset of COVID-19, CCLS provided in-person community workshops, such as those offered in October and November 2019 on evictions and renter's rights at three libraries in central and west Fresno as well as the rural Kingsburg and Fowler libraries, and provided attendees with self-help packets. CCLS has also historically partnered with the San Joaquin Valley College of Law in Clovis to offer Senior Citizens Law Day each June, featuring a day of workshops on estate planning, Medicare, identity theft, and elder abuse, as well as individual appointments to assist older adults with preparation of a simple, power of attorney, and advance health care directive. CCLS also offers Veterans free assistance with estate planning at the Veterans Service Office in Fresno. In partnership with the Superior Court of California, CCLS offers free guardianship clinics for grandparents and other adults seeking legal responsibility for the care of a minor.

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

Housing, late life planning, consumer/finance, and elder abuse are the major types of legal issues handled by CCLS.

14. In the past four years, has there been a change in the types of legal issues handled by the Title IIIB legal provider(s) in your PSA? No.

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

Transportation, both rural and urban, illness or disability, and low income are barriers for older adults accessing legal assistance. CCLS' introduced its Senior Legal Advice Line to overcome these barriers, and now handles all intakes via telephone or from applications submitted via its Web site.

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

CCLS coordinates services with other service provides for older adults, including FBI Victim Assistance, Disability Rights of California, Fresno County Sheriff's Department, Fresno County District Attorney's Office, Adult Protective Services, Fresno County Department of Social Services-In Home Supportive Services, Valley Caregiver Resource Center-Long Term Care Ombudsman Program, the Alzheimer's Association, Rape Counseling Services, and hospice services.

Section 21 Organization Chart

