

# Contra Costa County



## Area Agency on Aging 2019-2020 Area Plan Update

PSA #07

Submitted by

*Laura Cepoi*

Program Manager, Area Agency on Aging  
Employment and Human Services Department  
Contra Costa County

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## Overview

The mission of the Contra Costa County Area Agency on Aging is specified in the Older Americans Act of 1965, renewed in 2016, as well as the Older Californians Act. These Acts were established with the intent to insure the delivery of adequate levels of support social, health, and nutrition services to older adults with particular attention to targeting those who are most vulnerable and in danger of losing their independence.

This Annual Plan Update reflects the third and final update to the master strategic plan 2016-2020. As we work through the plan, we also review the responsiveness of the Area Plan to emerging community need. This year we have evaluated models that would allow us to serve homeless seniors and to provide assistance with housing access.

Not only do we seek to inform our legislators and communities but we seek to inform ourselves to stay up-to-date on those issues which have the most impact on our community. It is a privilege to work with volunteers and community based organizations who are truly committed to making a difference in how we can plan socially just and age inclusive services in Contra Costa County and the State.

All planned programs and services are contingent upon the availability of funds from all sources.

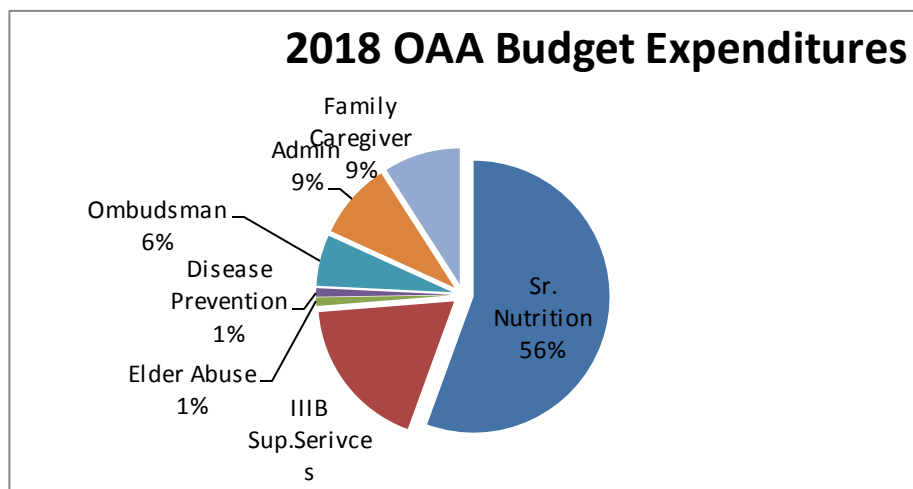
. Contracted Services

## Mission Statement

• • •

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

## IIIB Support Services



Legal Services  
Adult Day Health Care  
Friendly Visiting  
Home Chore Registry  
**Disease Prevention**  
Fall Prevention  
SNAP

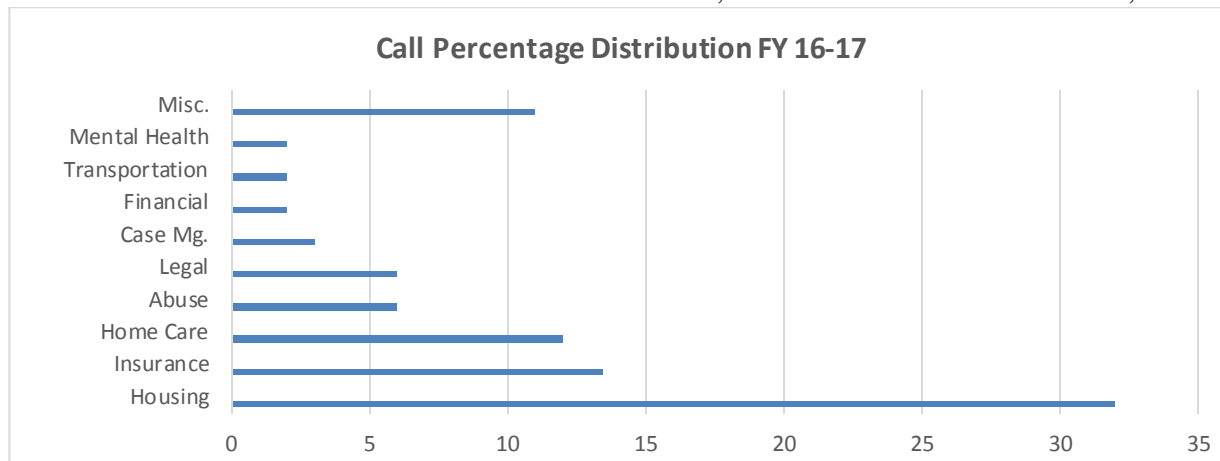
## Direct Services

### Information and Assistance Program (I&A):

Social workers provide information, referrals to resources, follow-up calls, and support in problem solving to seniors age 60 and older, for adults with disabilities, caregivers and concerned family members. This year the program expanded into an integrated call center and is now able to take IHSS

applications and provide initial screening for APS calls. A Senior Resource Directory was published and distributed, demand exhausted the 10,000 copies within a few weeks. At times comprehensive assessments are conducted when multiple services may be required. Staff also participate in community events to disseminate information and help seniors, disabled adults, and caregivers access a wide range of community based services (with an emphasis on housing).

The chart below reflects the calls received in FY 16-17, number of clients served was 8,164.



#### Health Insurance Counseling and Advocacy Program (HICAP)

Counseling and advocacy are provided to Medicare beneficiaries regarding Medicare problems through the efforts of highly skilled volunteers and professional staff. Services include assistance in choosing appropriate health insurance and prescription drug coverage, including Medicare Supplemental Insurance (also known as Medigap policies), Medicare Advantage plans (in Contra Costa County these are HMO networks), long-term care insurance, and help with medical billings, claims and Medicare appeals. This program faced a 25% budget reduction in December 2017.

#### Senior Community Service Employment Program (SCSEP)

A Title V funded program administered by the Department of Labor, federally funded through a grant from the National Asian Pacific Center on Aging, the county received the grant from new contractor in 2017. The program has 50 training slots in various non-profit and governmental host agencies in clerical, administrative, landscaping, food service and custodial job sectors. Program serves individuals 55+ who are veterans, homeless, disabled or facing extreme poverty. Currently there is a waitlist of over 100 people for this program.

## AREA PLAN UPDATE (APU) CHECKLIST

PSA 7 **Check one:** ☐ FY 17-18 ☐ FY 18-19 ☒ FY 19-20

*Use for APUs only*

AP Guidance Section	APU Components (To be attached to the APU)	Check if Included
	➤ <b>Update/Submit A) through I) ANNUALLY:</b>	
n/a	<b>A) Transmittal Letter-</b> <i>(requires hard copy with original ink signatures or official signature stamp-no photocopies)will be mailed separately upon receipt of Board approval.</i>	<input type="checkbox"/>
n/a	<b>B) APU-</b> <i>(submit entire APU electronically only)</i>	<input checked="" type="checkbox"/>
<u>2, 3, or 4</u>	<b>C) Estimate-</b> of the number of lower income minority older individuals in the PSA for the coming year	<input checked="" type="checkbox"/>
<u>7</u>	<b>D) Public Hearings-</b> that will be conducted	<input checked="" type="checkbox"/>
n/a	<b>E) Annual Budget</b>	<input type="checkbox"/>
<u>9</u>	<b>F) Title IIIB/VIIA Long-Term Care Ombudsman Objectives</b>	<input checked="" type="checkbox"/>
<u>9</u>	<b>G) Title VIIA Elder Abuse Prevention Objectives</b>	<input checked="" type="checkbox"/>
<u>10</u>	<b>H) Service Unit Plan (SUP) Objectives and LTC Ombudsman Program Outcomes</b>	<input checked="" type="checkbox"/>
<u>18</u>	<b>I) Legal Assistance</b>	<input checked="" type="checkbox"/>
	➤ <b>Update/Submit the following only if there has been a CHANGE or the section was not included in the 2016-2020 Area Plan:</b>	<div> <div>Mark Changed/Not Changed (C or N/C)</div> <div>C N/C</div> </div>
<u>5</u>	<u>Minimum Percentage/Adequate Proportion</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>5</u>	<u>Needs Assessment</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>9</u>	<u>AP Narrative Objectives:</u>	
<u>9</u>	• <u>System-Building and Administration</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>9</u>	• <u>Title IIIB-Funded Programs</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>9</u>	• <u>Title IIIB-Transportation</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>9</u>	• <u>Title IIIB-Funded Program Development/Coordination (PD or C)</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>9</u>	• <u>Title IIIC-1</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>9</u>	• <u>Title IIIC-2</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>9</u>	• <u>Title IIID</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>20</u>	• <u>Title IIIE-Family Caregiver Support Program</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>9</u>	• <u>Title V-SCSEP Program</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>9</u>	• <u>HICAP Program</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>12</u>	<u>Disaster Preparedness</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>14</u>	<u>Notice of Intent-to Provide Direct Services</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>15</u>	<u>Request for Approval-to Provide Direct Services</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>
<u>16</u>	<u>Governing Board</u>	<input checked="" type="checkbox"/> <input type="checkbox"/>
<u>17</u>	<u>Advisory Council</u>	<input checked="" type="checkbox"/> <input type="checkbox"/>
<u>21</u>	<u>Organizational Chart(s)</u>	<input type="checkbox"/> <input checked="" type="checkbox"/>

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

Planning and Service Area (PSA) 7 is comprised of Contra Costa County (CCC) in its entirety. Contra Costa County is considered to be one of the nine San Francisco Bay Area counties, and ranks as the third most populous in the region, behind Santa Clara and Alameda Counties.

### **Physical setting**

Contra Costa County has 19 incorporated cities. It is spread over 750 square miles, bordered by San Francisco Bay to the West, San Pablo Bay and the Sacramento River Delta to the North, San Joaquin County to the East and Alameda County to the South. Hills effectively divide the county into three distinct regions, which mirror how social, health, and other services are predominantly structured: East, West, and Central County. Central County is sometimes further delineated by “South County” to cover the communities of Danville, San Ramon and Alamo. Central County is the most affluent region of the county.

The portions of the county bordering water are where the heaviest industries are located, including several oil refineries and chemical plants along the Bay and Delta areas. The most inland areas are where the most rural portions of the county remain, although these areas have been greatly reduced. Areas along major freeways, particularly in Central County, make up the areas where major business parks and commercial centers are located.

Eastern Contra Costa County has been the part of the county with the most growth in housing. Open farmland and orchards have been replaced with new housing tracts. Cities have grown tremendously over the last decade in East Contra Costa County. East County cities include: Pittsburg, Antioch, Oakley, Brentwood and the unincorporated areas of Bethel Island in the Delta, Knightsen, Byron, and Discovery Bay. Only Knightsen continues to be classified as a rural community. Oakley, a city with 35,000 residents, was incorporated only 17 years ago on July 1, 1999.

Central Contra Costa County is a predominantly suburban area with a mixture of housing, commercial and financial centers.

Central County cities include: Lafayette, Orinda, Moraga, Walnut Creek, Concord, Clayton, Pleasant Hill, Martinez, Danville, San Ramon, Alamo and the unincorporated areas of Canyon, Clyde, and Rheem. Central County rests in a valley between hills and service organizations sometimes refer to Central County or as the Diablo Valley area. This is because Mt. Diablo is the major feature of the natural environment in Central County.

Located in Central County, Concord is the most populous city in the county with 127,522 residents (2014). It was recently named one of the 10 best places in the world to retire by Conde Nast Traveler magazine. The magazine touted Concord’s excellent health care facilities, free community activities throughout the year, access to the Bay Area Rapid Transit (BART) system, and proximity to San Francisco.

West County is the most urbanized section of the county with the City of Richmond as its largest city. It is not unusual for West County residents to seek services in the Northern Alameda County cities of Berkeley and Oakland. West County cities include: El Cerrito, Richmond, San Pablo, Pinole, Hercules and the unincorporated areas of El Sobrante, Rodeo, Crockett, Port Costa and Kensington.

### **Demographic Characteristics**

#### **Concord Reuse Project Plan**

The Concord Naval Weapons Station closed in 2005, which led to a drawn-out process to convert the 5,000 acres of land to civilian use. In 2012, the Concord Reuse Project Plan was adopted that calls for building 12,272 housing units and 6.1 million square feet of commercial space on the former military base. About 25% of the new homes will be affordable housing for low-income families, seniors, veterans, people with disabilities, and homeless. About 3,500 acres of land will be preserved as open space or parkland. This plan promises to create a new vibrant and pedestrian-friendly community clustered around the North Concord BART station with a mix of townhomes, apartments, shops, schools, and other amenities. At time of this writing, the City of Concord has plans underway to select “master developers” for the first phase of development.

According to recent estimates, Contra Costa County's population was 1,135,127 residents. There were 215,999 residents aged 60 or older, which was 19% of the total population of the County. (US Census Bureau ;, 2011-2015)

### Race/Ethnicity

Overall only 45% of Contra Costa County is White (non-Hispanic/Latino). African Americans represent 9.6%, Asian represents 16.8% and Hispanic/Latino 25.3% of the population. However, residents aged 65 and older are more likely to be White; 65% of the senior population. Contra Costa County has 433,433 residents of color, and 50,857 seniors of color.

In the overall population, the county is 45% White, 25% Hispanic/Latino, 15% Asian American, 3% "other," 2% two or more races, and less than 1% are Native American/Hawaiian. In the aged 65 and older population, the county is 65% White, 11% Hispanic/Latino, 15% Asian American, 7% Black, 3% "other", 2% two or more races, and less than 1% are Native American/Hawaiian.

### Gender

Women outnumbered men in the senior population. Women comprised 57% of the senior population, as opposed to 51% in the County as a whole.

### Marital Status

For Contra Costa County residents aged 65 and older, 58% are married, 21% are widowed, 15% are divorced, 5% are never married, and 1% are separated.

### Disability

11% of Contra Costa County residents have at least one disability, or 121,675 residents. 51,596 residents aged 65 and older are disabled, representing 33% of all seniors.

### Veterans

25,857 Contra Costa County residents aged 65 and older are military veterans, 18% of all seniors in the county.

### Education

Contra Costa residents aged 65 and older are well educated. 39% have a bachelor's degree or higher, 30% have some college or an associate's degree, 21% have a high school degree/GED, and 11% have no high school degree.

### Immigration and Language

74% (839,494) of Contra Costa residents aged 65 and older were born in the US, while 26% (41,558) were born outside of the US. 8,852 seniors are not US citizens, representing 6% of all Contra Costa seniors.

74% of Contra Costa seniors speak English only, while 26% speak a language other than English. 23,375 seniors speak English less than "very well," which is 15% of all seniors.

### Living with Grandkids

13,267 Contra Costa residents aged 65 and older live with grandchildren, representing 8% of all seniors. 2,211 seniors are responsible for at least 1 grandchild, representing almost 2% of all seniors.

### Employment

27,482 seniors are employed and another 1,737 were unemployed but looking for work. This represents 18% of all seniors. Seniors represented 6% of civilian labor force in the county. 82% of seniors were not in the labor force.

### **Rising Cost of Housing**

Despite attention focused on a real estate boom and bust cycle in Contra Costa, the county has one of the lowest residential vacancy rates in Bay Area.

The average monthly rent in Contra Costa County has risen from just over \$1,100 per month in 2005 up to almost \$1,400 in 2013.

Some of the biggest increases in housing costs in the Bay Area are in Contra Costa. From 2010 to 2014, home prices in the City of Richmond saw a 96% increase (from \$151,500 to \$308,500), unincorporated Contra Costa (from \$182,000 to \$547,000) and Pittsburg (from \$120,000 to \$305,000).

*Data Source: Association of Bay Area Government (ABAG) San Francisco Bay Area State of the Region: Economy, Population, Housing 2015*

### Income

41% of senior households reported earnings, with a mean of \$78,059 earned per year. 86% of senior households received Social Security income, averaging \$20,869 per year. 6% of senior households received Supplemental Security Income, averaging \$8,624 per year. 1% of seniors received cash public assistance income, averaging \$4,276 per year. 51% of seniors had retirement income, averaging \$38,580 per year. 4% received CalFresh benefits.

### Poverty

9,325 Contra Costa County residents aged 65 and older were in poverty, representing 6% of all seniors, defined by being below 100% of the Federal Poverty Level (FPL). An additional 13,054 seniors were between 100% and 150% of the Federal Poverty Level, which is 8% of all seniors. In total, 14% of Contra Costa seniors were below 150% of the Federal Poverty Level.

### Housing

Contra Costa seniors have relatively stable housing. 94% live in the same house/domicile as they did 1 year previous.

80% of Contra Costa seniors were in owner occupied housing, while 20% were in rental housing. The average household size was about 2 residents.

Housing costs were high for Contra Costa seniors. In owner-occupied households, 30% of households had housing costs totaling 30% or more of their monthly income. Rental costs were even higher relative to income. 64% of seniors who lived in rentals spent more than 30% of their income on housing.

The median housing costs for owners with no mortgage was \$528 per month, for owners with a mortgage was \$1,910 per month, and for renters was \$1,140 per month.

### Homelessness

Nearly 6,000 individuals experienced at least one episode of homelessness in 2014-2015 Fiscal Year (Contra Costa Council on Homelessness 2014-2015 Fiscal Year Annual Report). While the Point in Time (PIT) Count conducted by Contra Costa Council on Homelessness identified 3,715 individuals were homeless on January 28, 2016. Of these individuals, 20% are aged 55 or older and 7% are 62 and older.

### Medicare and MediCal

Latest data showed that 181,880 Contra Costa residents are enrolled in Medicare and Medicare Advantage and other health plans (Centers for Medicare & Medicaid Services, Feb. 2016).

31,038 Contra Costa residents aged 60 and older are Medi-Cal eligible (California Department on Aging Demographic Projections, 2016).

### **Economic Security**

Public assistance programs such as Supplemental Security Income (SSI) and those that provide low-cost or free housing, health care, and food are commonly “means tested,” meaning that only residents who are below certain income and wealth thresholds are eligible. However, these programs use the same threshold – 100% of the Federal Poverty Level – around the entire United States despite widely varying costs of living. In areas with a high cost of



living, like Contra Costa County, this can leave many seniors economically insecure, with not enough resources to meet basic needs, but ineligible for additional aid.

The UCLA Center for Health Policy Research and the Insight Center for Community Economic Development established the Elder Index to provide an evidence-based indicator of the actual basic costs faced by older adults. The Elder Index takes into account the local costs of basic expenses, including housing, food, medical care, and

transportation at the county level. The Elder Index is not a single number, but created for singles and couples, and for homeowners with a mortgage, without a mortgage, and renters.

### **Regional Population Forecast**

San Francisco Bay Area's population is expected to grow from 7.1 million in 2010 to 7.6 million residents in 2015 to a projected 9.5 million residents in 2040.

The senior population in the Bay Area is expected to grow from 885,000 residents in 2010 to 2.1 million residents in 2040. Seniors represented 12% of the Bay Area's population in 2010, but are expected to reach 22% of the population in 2040.

More than half of the growth of the Bay Area's population is due to increases in the number of residents aged 65 years and older. The population of residents aged 65 years and older is expected to more than double, increasing 140 percent.

The Bay Area will become even more ethnically diverse in 2040. The senior population will also be more diverse by 2040. However, in 2040, residents aged 65 years and older will be the only age group in which non-Hispanic Whites make up over 50% of the age group population.

*Data Source: Association of Bay Area Government (ABAG) Regional Forecast for Plan Bay Area 2040*

In 2011, for a single renter living alone in Contra Costa County, the Federal Poverty Guideline is only \$10,890 per year. However, the Elder Index for meeting basic needs is more than twice that level, \$26,249 per year.

Using the Elder Index, it was determined that 48,000 seniors in Contra Costa do not have enough income to meet their basic needs, representing 42% of all seniors in the county. However, only 5% were below the Federal Poverty Level, leaving 36% of seniors who are struggling to meet basic needs but ineligible for many assistance programs.

Women living alone are the most likely to be economically insecure. More than half of women living alone in Contra Costa County are economically insecure according to the Elder Index. More than twice as many women living alone are economically insecure than the other seniors: men living alone, men in 2 person households, or even women in 2 person households.

Economic insecurity in Contra Costa County is also related to race. While almost 40% of White households are economically insecure, 75% of African American and 99% of Hispanic/Latino households are economically insecure. According to the data collected in the Get Care report, of those who used registered services and reported on their race, 799 users were white/non-Hispanic and low income; Minority low income users numbered 1,714. It should be noted that participants have the choice to decline to state race on application for services and we are finding that up to 50% of respondents exercise their right to "refuse to respond" on questions of income and race.

### **Senior Population Growth**

The senior population in Contra Costa County will grow significantly over the next two decades and become more racially and ethnically diverse. The California Department of Finance projects that the population will grow from 1,051,553 residents in 2010 to 1,400,999 residents in 2040, an increase of 33%. By 2060, Contra Costa County is projected to have 1,620,604 residents, an increase of 54% from 2010.

In 2010, seniors aged 65 and older represented 13% of the County population. That will rise to 23% of the county's population in 2040. The number of seniors aged 65 and older will grow from 131,689 in 2010 to 317,592 in 2040. More than half of the growth in population of Contra Costa County in the coming decades will be due to the growth in the senior population. (53% of growth from 2010 to 2040, also 53% of growth from 2015 to 2040)

The sub-population aged 75 and older will grow from 6% in 2010 to 13% of the County population in 2040. This is a rise from 60,104 residents in 2010 to 173,178 in 2040.

## **Resources and Constraints**

In previous sections, we've established that Contra Costa County's senior population is growing rapidly due to the aging of Baby Boomers, 42% of the county's seniors do not have enough income to meet their basic needs (Elder Index, 2011), and 64% of seniors who lived in rentals spent more than 30% of their income on housing costs (American Community Survey, 2014). Taken all together, the needs of seniors are great in Contra Costa County and the demand for services to help them age with dignity and in their homes will continue to grow.

Despite the growing need, funding levels for aging services such as nutrition, support services, and caregiver supports have not kept pace with demand or with inflation.

Currently, the primary funding the AAA has to address the needs of seniors comes from the federal government through the Older Americans Act, with State and local County match. The latest reauthorization of the Older Americans Act keeps core programs such as home delivered and congregate meals, family caregiver supports, health promotion, and support services intact. It will also aim to address elder abuse--calling for improved training on elder abuse prevention and screening for those working in the aging field.

While funding is expected to increase slightly with the latest reauthorization of the Older Americans Act, the resources available to serve Contra Costa seniors remain limited. In the meantime, the Older Californians Act continues to exist largely as an unfunded statute. Recent efforts to restore state funding to the support programs such as nutrition, Alzheimer's day care centers, and caregiver supports have been unsuccessful.

To develop additional revenue and enhance services, the AAA is currently assessing plans to leverage funding from the Older Americans Act with existing funding sources within our umbrella organization, Employment and Human Services Department (EHSD). In particular, we will be working more closely with the Adult Protective Services (APS) and In-Home Supportive Services (IHSS) programs to coordinate and streamline services to better prevent and protect seniors from abuse, and ensure that low-income and disabled seniors have reliable care to live safely and independently in their homes. Together, we also aim to strengthen our Information and Assistance (I&A) service, a telephonic program that serves as Contra Costa County's main point of entry for access to information on aging and disability services.

In addition, the AAA was awarded a grant to continue administration of the Senior Community Service Employment Program (SCSEP). Authorized by Title V of the Older Americans Act, SCSEP provides subsidized, service-based training for low-income persons 55 or older who are unemployed. The program is supported by a grant from National Asian Pacific Center on Aging with funding originating from the Department of Labor. The AAA is partnering with America's Job Centers of California (AJCC) to ensure that SCSEP is an integral part of their "one-stop" employment and training services system. With in-kind support from the AJCCs, SCSEP have offices in three AJCC sites throughout the county. Maintaining SCSEP gives the AAA another resource to help seniors obtain employment and improve their economic outcomes.

Contra Costa County is fortunate to have a large citizenry willing to donate their time and skills to help serve seniors in the community. With limited funding, many AAA programs rely heavily on volunteers to deliver services. Last year, over 2,100 volunteers contributed their time in support of aging services under the Older Americans Act. Among many things, volunteers provide rides, deliver meals, run errands, visit long-term facilities to investigate complaints, provide companionship, serve meals at congregate nutrition sites, and provide counseling services. Volunteers are a vital resource and the AAA will continue to work with our community partners to support and recruit volunteers to help seniors meet essential needs.

## **SECTION 7. PUBLIC HEARINGS**

**PSA 7**

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? <sup>1</sup> Yes or No	Was hearing held at a Long-Term Care Facility? <sup>2</sup> Yes or No
2016-17	March 16, 2016	500 Ellinwood Way, Pleasant Hill, CA 94523		no	no
2017-18	March 15, 2017	500 Ellinwood Way, Pleasant Hill, CA 94523	47	no	no
2018-19	March 21, 2018	500 Ellinwood Way, Pleasant Hill, CA 94523	41	no	no
2019-20	March 20, 2019	500 Ellinwood Way, Pleasant Hill, CA 94523	43	no	no

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

1. Summarize the outreach efforts used in seeking input into the Area Plan from institutionalized, homebound, and/or disabled older individuals.  
***Meeting was publicly noticed in the newspapers in East, West and Central county distribution. Hearing was also noticed on the website, e-mailed notices were distributed.***
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

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

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

3. Summarize the comments received concerning proposed expenditures for PD and/or C  
***None.***
4. Attendees were provided the opportunity to testify regarding setting minimum percentages of Title III B program funds to meet the adequate proportion of funding for Priority Services  
  
☒ Yes. Go to question #5  
  
☐ No, Explain:
5. Summarize the comments received concerning minimum percentages of Title IIIB funds to meet the adequate proportion of funding for priority services. ***No Comments were received concerning minimum percentages of Title III B funds to meet adequate proportion.***
6. List any other issues discussed or raised at the public hearing.  
None raised.
7. Note any changes to the Area Plan which were a result of input by attendees. ***None noted.***

## **SECTION 9: AREA PLAN NARRATIVE GOALS AND OBJECTIVES**

### **GOAL # 1**

The AAA is committed to assisting older individuals (who may be in danger of losing their independence) so they can lead meaningful, dignified, and independent lives in their own homes and communities as long as possible. AAA will accomplish this through an accessible range of options including but not limited to, collaborative efforts, decision making among public, private, voluntary, fraternal organizations, and coalitions, for continuing the development and enhancement of a comprehensive and coordinated community and home based system of care.

### **RATIONALE**

The AAA conducted needs assessments and analysis of the results of completed surveys which directed the AAA to provide program development, coordination, and technical assistance.

<b>OBJECTIVES</b>	<b>Projected Start &amp; End Dates</b>	<b>Title III B Funded PD or C</b>	<b>Status</b>
<p>1. Aging and Adult Services Staff Assistant, and Senior Staff Assistants will actively participate in the Senior Coalitions to identify and prioritize senior needs by providing technical assistance in working with Coalition members on needs identified, including fraud prevention, health and intergenerational issues.</p> <p>Events include: Senior Rally Day, Living Well after 50, Social Security Town Halls (Reimbursement up to \$1,000 for outreach and education expenses available for coalition projects depending on funding availability and preapproval.)</p>	<p><del>7/1/16-6/30/17</del></p> <p><del>7/1/17-6/30/18</del></p> <p><del>7/1/18-6/20/19</del></p> <p>7/1/19-6/30/20</p>	C	Continued
<p>2. The AAA Program Manager, Aging and Adult Services Senior Staff Assistants, and the Advisory Council Planning Committee Members will work collaboratively with AAA contractors to develop and plan special programs/events/services with the use of One-Time Only funds in order to help address the needs of older adults with specific emphasis on Family Caregiver needs.</p> <ul style="list-style-type: none"> <li>Distribution of One Time Only funding for caregiver retreats, advocacy and outreach, and Senior Resource Directory.</li> </ul>	<p><del>7/1/16-6/30/17</del></p> <p><del>7/1/18-6/30/19</del></p> <p><del>7/1/18-6/30/19</del></p> <p>7/1/19-6/30/20</p>	PD	Continued

3. The AAA Program Manager, Aging and Adult Services Senior Staff Assistants, and the Advisory Council Planning Committee Members will work collaboratively with CBO's to develop and plan special programs/events/services to help address the needs of older adults with particular attention to LGBT seniors.	<del>7/1/16-6/30/17</del> <del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del> 7/1/19-6/30/20	C	Continued
4. The AAA Program Manager, Aging and Adult Services Senior Staff Assistants, and the Advisory Council Planning Committee Members will work collaboratively with CBOs to develop and plan special programs/events/services to help address the needs of older adults with particular attention to seniors with limited-English speaking capability.	<del>7/1/16-6/30/17</del> <del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del> 7/1/19-6/30/20	C	Continued
5. The AAA Program Manager, Aging and Adult Services Senior Staff Assistants, and the Advisory Council Health Work Group Members will work collaboratively with County Health Department and AAA contractors to develop and plan special programs/events/services to help address the needs of older adults with particular attention to disease prevention and health promotion of seniors. <ul style="list-style-type: none"> <li>ACOA Health Work Group has developed a Pilot Project to alleviate nutritional barriers to healing and to assist in the management of chronic conditions of Older Adults. We will seek support to provide 30 days of meals to select Medicare patients upon physician's order at discharge. "Meals on Discharge" would provide nutrition to those older adults who live alone and are isolated.</li> </ul>	<del>7/1/16-6/30/17</del> <del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del> 7/1/19-6/30/20	PD	Continued
6. The AAA Program Manager, Aging and Adult Services Senior Staff Assistants, and the Advisory Council Planning Committee Members will work collaboratively with CBO's to develop and plan special programs/events/services to help address pressing or emergent needs identified by AAA staff or its contracted providers. <ul style="list-style-type: none"> <li>Expanding services to those seniors who are homeless and offering supports to seniors living in homeless shelters using specific programs/modules which will accommodate the limitations of a shelter environment. (ie. Bingocize)</li> </ul>	<del>7/1/16-6/30/17</del> <del>7/1/17-6/30/18</del> 7/1/18-6/30/19	C	Revised

7. Aging and Adult Services Senior Staff Assistants and AAA Program Manager will organize and hold an annual “Partners in Planning” event that brings together volunteers, community based organizations, and organizations in the county’s aging network to meet each other, exchange ideas, learn from each other’s successes and challenges, foster partnerships, and develop strategies to develop, expand, and enhance services for the elderly in CCC.	<del>7/1/16-6/30/20</del> <del>7/1/17-6/30/18</del> 7/1/18-6/30/19	C	Continued
8. AAA Staff and AAA direct services will partner with AAA Advisory Council and its committees as appropriate, contractors and CBOs to address service delivery issues County wide.	<del>7/1/16-6/30/20</del> <del>7/1/17-6/30/18</del> 7/1/18-6/30/19	C	Continued
9. Senior Staff Assistant/ I&A Supervisor will plan quarterly “Professional Exchange Roundtable” meetings. The purpose of the meetings is to bring County personnel together to meet and exchange ideas, and to learn about community resources to better serve clients.	<del>7/1/16-6/30/20</del> <del>7/1/17-6/30/18</del> 7/1/18-6/30/19	C	Continued
10. The AAA Program Manager, Aging and Adult Services Senior Staff Assistant, and Advisory Council on Aging members will participate in a countywide collaborative planning process to develop a Contra Costa Senior Policy Platform. Seniors, caregivers, service providers, and other stakeholders will be engaged in the planning process. Through collaboration and partnership, the goal is to develop and endorse a strategic plan that outlines strategies and steps to improve service access, service quality, and the overall quality of life for seniors in Contra Costa County.	7/1/16-6/30/17	€	Completed

**GOAL # 2**

AAA will provide services to older individuals with the greatest economic and social needs, including low income diverse population groups through continued service expansion, development, and collaboration with community groups, service providers, and elected officials, in order to provide health, social, nutrition and legal services for older individuals who may be at risk of abuse or neglect.

**RATIONALE**

Mandated by the Older Americans Act and this AAA is committed to providing services to the population groups specified above.

<b>OBJECTIVES</b>	<b>Projected Start &amp; End Dates</b>	<b>Title III B Funded PD or C</b>	<b>Status</b>
1. The Aging & Adult Services Director, AAA Program Manager, Aging and Adult Services Senior Staff Assistants, and Planning Committee to the Advisory Council will actively work through membership on the Mental Health Department's Consolidated Planning Advisory Workgroup and CPAW's Aging and Older Adult Committee, to plan outreach strategies to reach underserved seniors, particularly with respect to: isolation; low-income; mental illness; language barriers; and LGBT.	<del>7/1/16-6/30/17</del> <del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del> 7/1/19-6/30/20	C	Continued



<p>2. Aging and Adult Services Senior Staff Assistants, Program Manager, Aging &amp; Adult Services Director, and Advisory Council on Aging (ACOA) members will focus on education and promotion of “age friendly” initiatives to ensure that access to housing, transportation and civic life are planned in local municipalities policy decisions to address the needs of seniors.</p> <ul style="list-style-type: none"> <li>• ACOA city representatives and members at large will educate and promote “age friendly” platforms to their respective city council ensuring that the needs of Older Adults are considered in all aspects of city planning, including intergenerational programs. ACOA members will be encouraged to participate in Older Adult month proclamations and education campaigns.</li> <li>• AAS Director and AAA Program Manager will seek out WHO “Age Friendly-all generations” designation status for Contra Costa County.</li> <li>• AAS Director and AAA Program Manager will collaborate with other County departments and bureaus to ensure that Older Adults are represented in all policy and program considerations.</li> </ul>	<p><del>7/1/16-6/30/20</del></p> <p><del>7/1/17-6/30/18</del></p> <p>7/1/18-6/30/19</p>	<p>C</p>	<p>Continued</p>
<p>3. AAA Program Manager, Senior Staff Assistants and the Advisory Council will work with various legal services providers and other interested stakeholders to coordinate elder abuse prevention activities for seniors vulnerable to or at risk of exploitation.</p> <ul style="list-style-type: none"> <li>• An Elder Abuse Prevention Workgroup of the Advisory Council was established to increase awareness of prevention of elder abuse, neglect &amp; exploitation. Trainings and dissemination of elder abuse prevention materials and other related presentations to the public. Seven trainings per year will be scheduled.</li> <li>• AAA/APS staff members in coordination with Ombudsman will assist with hosting seminars, fairs, or other educational events related to elder abuse and Elder Abuse Month.</li> </ul>	<p><del>7/1/16-6/30/20</del></p> <p><del>7/1/17-6/30/18</del></p> <p><del>7/1/18-6/30/19</del></p> <p>7/1/19-6/30/20</p>	<p>C</p>	<p>Continued</p>

4. AAA Senior Staff Assistant will partner with Todos Unidos, local hospitals, and community organizations to coordinate an annual “Senior Appreciation Day – Health and Resource Fair” in recognition of Older Americans Month in May. At the event seniors will receive free health screenings for diabetes, high blood pressure, osteoporosis, dental problems, and other health issues. The event will also feature exercise demonstrations, nutrition information, and information about community resources presented in both Spanish and English.	7/1/16-6/30/17	€	Completed
5. AAA Senior Staff Assistant will work with the Food Bank of Contra Costa and Solano County to coordinate the distribution of free USDA Farmers Market Coupons to qualified low-income seniors. The coupons will be available to seniors at 16 food distribution sites throughout Contra Costa County.	7/1/16-6/30/17 7/1/17-6/30/18 7/1/18-6/30/19 7/1/19-6/30/20	C	Continued
6. The AAA Senior Staff Assistant will continue to serve on the Fall Prevention Program Steering Committee and the Fall Prevention Coalition to help develop, coordinate, and sustain programs and activities that prevent falls such as fall risk assessments, fall prevention education, physical activity and exercise, home safety modifications, and medication management.	7/1/16-6/30/17 7/1/17-6/30/18	€	Completed
7. The AAA Program Manager and Senior Staff Assistants will partner with appropriate local CBOs to plan and coordinate a forum that will provide educational resource information to seniors and their families, as well as promote visibility for older adult mental health issues in the community.  <ul style="list-style-type: none"> <li>CA MH older Adult System of Care Project- UCLA Center for Health Policy Research - planning stages</li> </ul>	7/1/16-6/30/17 7/1/17-6/30/18 7/1/18-6/30/19	C	Continued
8. Through the Advisory Council on Aging (ACOA) Housing Workgroup, the AAA Senior Staff Assistant is working in concert with ACOA members, housing service providers, County Housing Authority, affordable housing developers, homeless programs, and other stakeholders to identify and develop advocacy strategies and solutions to help seniors struggling to find affordable housing. [The Workgroup will be assessing plans to develop a shared housing program in Contra Costa County. (completed)]	7/1/16-6/30/17 7/1/17-6/30/18 7/1/18-6/30/19 7/1/19-6/30/20	PD	Continued

<p>9. AAA Program Manager and Senior Staff Assistants will be creating an integrated call center with Adult Protective Services (APS) and In-Home Supportive Services (IHSS) programs to coordinate and streamline services to better prevent and protect seniors from abuse, and ensure that low-income and disabled seniors have reliable care to live safely and independently in their homes.</p>	<p><del>7/1/16-6/30/17</del>  <del>7/1/17-6/30/18</del></p>	<p>€</p>	<p>Completed</p>
<p>10. Ombudsman Services will provide a Long Term Care Ombudsman Program for adults, utilizing Title IIIB and VIIA funding of the Older Americans Act. Services will include the following:</p> <ul style="list-style-type: none"> <li>• Conduct activities relating to receiving, analyzing, researching, observing, interviewing or verifying complaints and activities related to intervention in complaints on behalf of a client with a target resolution rate of 91%.</li> <li>• Provide mediation and conciliation services in the resolution of inquiries and complaints from older long term care residents and patients. Target of 1,494 Consultations provided to individuals.</li> <li>• Investigate reports of physical abuse of all dependent adult and elder residents of long term facilities in accordance with the mandates established.</li> <li>• Conduct activities related to the education of groups of older adults, their families, community organizations, and facility staff about senior's rights, benefits, and entitlements. Target of 376 consultations to facilities.</li> <li>• Recruit, train, and certify Ombudsman volunteers. Assign volunteers and staff to the 31 nursing homes and staff caseworkers to intermediate care facilities for the developmentally disabled adults in Contra Costa County. Target of maintaining at least 45 trained and certified volunteers.</li> <li>• Establish family councils to include family members of older patients in skilled nursing facilities to advocate for and respond to the needs of the patients within the facilities. Target of having 22 resident council meetings.</li> <li>• Plan an emergency evacuation education forum for skilled nursing facility leadership to ensure safety and swift evacuation procedures.</li> </ul>	<p><del>7/1/16-6/30/17</del>  <del>7/1/17-6/30/18</del>  7/1/18-6/30/19</p>		<p>Continued</p>

11. In order to expand and make information and referral services more accessible to the community, the AAA Senior Staff Assistant will work collaboratively with senior and community centers to recruit and train volunteers to provide information and referral services in the community.	<del>7/1/16-6/30/17</del> <del>7/1/17-6/30/18</del>		Completed
12. In order to provide better customer service, the AAA Senior Staff Assistant will recruit and train volunteers to support the work of Social Workers in the Information & Assistance (I&A) program. I&A volunteers will help do follow-ups on routine calls to see if clients' needs are addressed or if further assistance is required. This will help to free up time for the Social Workers to assist vulnerable seniors, adults with disabilities, and caregivers with complex needs.	<del>7/1/16-6/30/17</del>	PD	Completed

### GOAL # 3

AAA will provide public information to agencies and community persons aged 60+ and their families regarding resource availability, educational opportunities, demographics, health care insurance counseling, and funding opportunities.

### RATIONALE

Various survey responses, Advisory Council, Board of Supervisors, Coalitions, stakeholders and other groups have identified the need for the AAA to communicate with and provide information to the general public at all levels.

OBJECTIVES	Projected Start & End Dates	Title III B Funded PD or C	Status
1. AAA Program Manager and Aging and Adult Services Senior Staff Assistants will work with senior coalitions, community based organizations, the County's aging network, offices of County Supervisors, and other groups to identify and address senior needs by providing technical assistance including, assistance with needs assessments, focus groups, quality assurance surveys, program development, and fundraising.	<del>7/1/16-6/30/17</del> <del>7/1/17-6/30/18</del> 7/1/18-6/30/19	C	Continued
2.. An Aging and Adult Senior Staff Assistant will make the results of the Senior Survey available to interested community organizations and members of the public. The purpose of the survey is to ascertain the needs of our senior population, directly, by surveying them county wide and to use the results as a tool in the planning for the PSA's Area Plan as well as possible program development given budget limitations	<del>7/1/16-6/30/20</del> <del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del> 7/1/19-6/30/20	C	Continued

**GOAL # 4: AAA will actively promote the health and well-being of the older population of Contra Costa County through various community outreach and evidence-based activities.**

**RATIONALE**

As specified by the Older Americans Act, including Title III D.

OBJECTIVES	Projected Start & End Dates	Title III B Funded PD or C	Status
1. AAA Program Manager/ Senior Staff Assistant will work with Dept. of Public Health and CBO's to expand services in Far East Contra Costa to provide additional social supports to at-risk seniors through meal delivery and other services. Wraparound services will be identified for those seniors who are homebound and isolated from services.	7/1/18-6/30/19	PD	Completed
2. The Fall Prevention Program (FPP) will offer an in-home "Otago Exercise Program". It is recognized by the Centers for Disease Control and Prevention as an evidence-based program. Nursing students will provide in-home exercises to homebound seniors. Pre and post evaluations will be conducted to determine if the exercise program helped reduce fall risks.  The Otago program is a recognized evidence-based program listed on the NCOA Title IIID Highest Tier Evidence-Based Health Promotion/Disease Prevention Program. An Otago-trained Physical Therapist will conduct the evaluations for this approved evidence-based Title IIID program. Additionally, the PT will train and supervise university nursing students to conduct the exercise program in seniors' homes to achieve 1,800 hours of service.	7/1/16-6/30/20  7/1/17-6/30/18	PD	Completed
3. Utilizing SNAP-Ed funds, a Senior Nutrition Assistance Program has been implemented that will serve seniors at the lowest income congregate meal sites in Contra Costa County. Tai Chi for Better Balance classes will be complemented by nutrition education sessions that will demonstrate how to cook nutritious foods. The SNAP-Ed program is operated in conjunction with collaborative partners	7/1/16-6/30/20  7/1/17-6/30/18		Completed

from the Health Department's Prevention and Wellness Program.			
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### **GOAL # 5**

The AAA is committed to planning for and implementing community services for the Baby Boomer population; recognizing and addressing their unique needs related to housing, transportation, financial security, health and well-being, employment and community involvement. While there is no current funding for this effort, the AAA will seek to accomplish this through advocacy, and creative collaboration with current and new community partners.

### **RATIONALE**

To address the needs of the influx of Baby Boomers expected to retire in the near future.

<b>OBJECTIVES</b>	<b>Projected Start &amp; End Dates</b>	<b>Title III B Funded PD or C</b>	<b>Status</b>
1. AAA Program Manager, Senior Staff Assistants, and members of the Advisory Council on Aging will provide outreach and education to encourage participation of older adults in policy making positions on local boards, city councils and planning commissions.	<del>7/1/16-6/30/20</del> <del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del> 7/1/19-6/30/20	C	Continued
2. Senior Community Service Employment Program (SCSEP) provides subsidized, service-based training for low-income persons 55 or older who are unemployed. The program is supported by a grant from National Asian Pacific Council on Aging (NAPCA), with funding originating from the Department of Labor. SCSEP is partnering with America's Job Centers of California (AJCC) to ensure that Baby Boomers and their cohorts have access to employment and training resources to help them secure gainful employment.	<del>7/1/16-6/30/20</del> <del>7/1/17-6/30/18</del>		Completed
3. AAA Program Manager and Sr. Staff Assistant will support Volunteer recruitment activities among 55+ retirees that fit with their talent, interest and skills to serve the community and improve lives in the elder population in Contra Costa County. <ul style="list-style-type: none"> <li>To seek grant funding to establish Senior Volunteer Center for Contra Costa County.</li> </ul>	<del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del> 7/1/19-6/30/20	C	Continued

**GOAL # 6**

The AAA will work to prevent isolation, poverty, homelessness, and premature institutionalization of Lesbian, Gay, Bisexual, and Transgender (LGBT) seniors. This is due to recent studies showing LGBT seniors to be at a higher risk as a result of life-long experiences causing marginalization.

**RATIONALE**

Mandated by the California Department of Aging.

<b>OBJECTIVES</b>	<b>Projected Start &amp; End Dates</b>	<b>Title III B Funded PD or C</b>	<b>Status</b>
1. AAA Program Manager and Aging and Adult Services Senior Staff Assistants will collaborate with local agencies which serve seniors in order to maintain the most current demographic information on LGBT Seniors, particularly regarding those of low-income and minority status in order to adequately plan for services. <ul style="list-style-type: none"><li>All local agencies serving Older Adults will be trained via Webinar hosted by SageCare on the topics of: Supporting LGBT Older Adults; Asking Inclusive Intake Questions.</li><li>AAA Staff to provide support to local agencies to assist with integration of new intake procedures which reflect diversity in sexual orientation and gender identity.</li></ul>	<del>7/1/16-6/30/20</del> <del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del>	€	Completed
2. AAA Program Manager and Aging and Adult Services Senior Staff Assistants will collaborate with local agencies which serve LGBT seniors in order to maintain the most current resource information on culturally competent services for LGBT Seniors in order for the Aging Network to provide appropriate referrals and identify resource needs.	<del>7/1/16-6/30/20</del> <del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del> 7/1/19-6/30/20	C	Continued

**GOAL # 7**

The AAA will work in partnership with transportation service providers, local agencies and grass root groups to combat isolation, to increase access and transportation options for older adults, and promote a collaborative effort to advocate for more countywide transportation resources.

**RATIONALE**

Mandated by the California Department of Aging.

<b>OBJECTIVES</b>	<b>Projected Start &amp; End Dates</b>	<b>Title III B Funded PD or C</b>	<b>Status</b>
1. ACOA Senior Mobility Action Council (SMAC), AAA Program Manager and Aging and Adult Services Senior Staff Assistants will collaborate with local agencies which serve seniors as well as transit providers to plan and coordinate educational forums throughout the county on both public safety issues for older drivers as well as options for transportation. <ul style="list-style-type: none"><li>Emergency Preparedness Event to be scheduled to highlight emergency evacuation and the distribution of Emergency Preparedness Kits.</li></ul>	<del>7/1/16-6/30/17</del>  <del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del>	€	Completed
2. AAA Program Manager and Area Agency on Aging Senior Staff Assistants will promote public information on safety issues for older drivers as well as options for transportation. <ul style="list-style-type: none"><li>Published "Way to Go Contra Costa" Transportation Resource Guide in Spanish, Chinese and English</li><li>ACOA Presentation on Safe Driving for older drivers community forum</li></ul>	<del>7/1/16-6/30/20</del>  <del>7/1/17-6/30/18</del>	C	Completed
3. The AAA Program Manager and Aging and Adult Services Senior Staff Assistants will work with community based organizations, interested citizens, and the Advisory Council on Aging's Transportation and Housing Workgroups to facilitate new strategies and recommendations for land use planning/transit villages to meet the needs of seniors. <ul style="list-style-type: none"><li>Housing Work Group will be working with the Concord Naval Station Reuse plan and advocate for affordable senior housing within the transit village model they are trying to achieve.</li></ul>	<del>7/1/16-6/30/20</del> <del>7/1/17-6/30/18</del> <del>7/1/18-6/30/19</del>	€	Completed





**SECTION 10 - SERVICE UNIT PLAN (SUP) OBJECTIVES****PSA 7****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 [NAPIS State Program Report \(SPR\)](#)

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

Report the units of service to be provided with **ALL funding sources**. Related funding is reported in the annual Area Plan Budget (CDA 122) for Titles IIIB, IIIC-1, IIIC-2, IIID, and VIIA.

**1. Personal Care (In-Home)** **Service Not Provided**

**2. Homemaker (In-Home)** **Service Not Provided**

**3. Chore (In-Home)** **Service Not Provided**

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

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	365,000	2	
2017-2018	410,000	2	
2018-2019	415,000	2	
2019-2020	420,000	2	

**5. Adult Day/ Health Care (In-Home)** **Unit of Service = 1 hour**

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	7,208	4	
2017-2018	6,700	4	
2018-2019	6,200	4	
2019-2020	5,800	4	

**6. Case Management (Access)** **Service not Provided**

**7. Assisted Transportation (Access)****Unit of Service = 1 one-way trip**

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	1,100	7	
2017-2018	1,100	7	
2018-2019	2,000	7	
2019-2020	5,000	7	

**8. Congregate Meals****Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	165,000	2	
2017-2018	155,000	2	
2018-2019	157,000	2	
2019-2020	150,000	2	

**9. Nutrition Counseling****Service Not Provided****10. Transportation (Access)****Unit of Service = 1 one-way trip**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	36,500	2, 5	
2017-2018	36,500	2, 5	
2018-2019	35,000	2,5	
2019-2020	35,000	2,5	

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	5,671	2	
2017-2018	5,200	2	
2018-2019	5,700	2	
2019-2020	6,000	2	

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

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	5,000	2	
2017-2018	5,500	2	
2018-2019	5,000	2	
2019-2020	6,000	2	

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

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	12,000	1, 2, 4	
2017-2018	9,000	1,2, 4	
2018-2019	9,000	1,2,4	
2019-2020	13,000	1,2,4	

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

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	9	4	
2017-2018	9	4	
2018-2019	9	4	
2019-2020	9	4	

## 15. NAPIS Service Category – “Other” Title III Services

### Other Supportive Service Category

#### 15. Community Education

Unit of Service = 1 activity

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2016-2017	9	4	
2017-2018	9	4	
2018-2019	9	4, 7	
2019-2020	3	4,7	

#### 14. Visiting

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	26,500	1	
2017-2018	26,500	1	
2018-2019	35,000	1	
2019-2020	40,000	1	

#### Telephone Reassurance

Unit of Service: Contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2018-2019	2,000	4	4.1
2019-2020	4,000	4	4.1

#### Disaster Preparedness Materials

Unit of Service: Product

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2016-2017			
2017-2018			
2018-2019	200	7	1
2019-2020	0		

**18. Registry** **No longer funding this service** – Visiting identified as a priority area of service, funds have transferred to that service. **Unit of Service = 1 hour**

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	11,700	1	
2017-2018	11,700	1	

**16. 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.

**Unit of Service = 1 contact**

**Service Activities: Provides evidence based, in-home “Otago Exercise Program” to home bound seniors.**

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

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (Required)
2016-2017	60	4	
2017-2018	1,800	4	
2018-2019	1,800	4	OBJ. 2; goal #4
2019-2020	1,000	4	OBJ. 2; goal #4

The Fall Prevention Program (FPP) will offer an in-home “Otago Exercise Program”. It is recognized by the Centers for Disease Control and Prevention as an evidence-based program. Nursing students will provide in-home exercises to homebound seniors. Pre and post evaluations will be conducted to determine if the exercise program helped reduce fall risks.

The Otago program is a recognized evidence-based program listed on the NCOA Title IIID Highest Tier Evidence-Based Health Promotion/Disease Prevention Program. An Otago-trained Physical Therapist will conduct the evaluations for this approved evidence-based Title IIID program. Additionally, the PT will train and supervise university nursing students to conduct the exercise program in seniors’ homes

**TITLE IIIB and Title VIIA:****LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES****2016–2020 Four-Year Planning Cycle**

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

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

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

Complete all Measures and Targets for Outcomes 1-3.

**Outcome 1. The problems and concerns of long-term care residents are solved through complaint resolution and other services of the Ombudsman Program. [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 2013-2014 was 73%.

1. FY 2014-2015 Baseline Resolution Rate: Number of complaints resolved <u>333</u> + Number of partially resolved complaints <u>219</u> divided by the Total Number of Complaints Received <u>720</u> = Baseline Resolution Rate <u>77%</u> FY 2016-17 Target Resolution Rate <u>80%</u>
2. FY 2015-2016 Baseline Resolution Rate: Number of complaints resolved <u>778</u> + Number of partially resolved complaints <u>309</u> divided by the Total Number of Complaints Received <u>1,177</u> = Baseline Resolution Rate <u>92%</u> FY 2017-18 Target Resolution Rate <u>92%</u>
3. FY 2016-2017 Baseline Resolution Rate: Number of complaints resolved <u>1,271</u> + Number of partially resolved complaints <u>710</u> divided by the Total Number of Complaints Received <u>2,184</u> = Baseline Resolution Rate <u>91%</u> FY 2018-19 Target Resolution Rate <u>92%</u>



4. FY 2017-2018 Baseline Resolution Rate: Number of complaints resolved <u>1,786</u> + Number of partially resolved complaints <u>563</u> divided by the Total Number of Complaints Received <u>2,594</u> = Baseline Resolution Rate <u>91%</u> FY 2019-20 Target Resolution Rate <u>93%</u>
Program Goals and Objective Numbers: <u>2</u>

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

1. FY 2014-2015 Baseline: number of Resident Council meetings attended <u>17</u> FY 2016-2017 Target: <u>40</u>
2. FY 2015-2016 Baseline: number of Resident Council meetings attended <u>46</u> FY 2017-2018 Target: <u>46</u>
3. FY 2016-2017 Baseline: number of Resident Council meetings attended <u>80</u> FY 2018-2019 Target: <u>80</u>
4. FY 2017-2018 Baseline: number of Resident Council meetings attended <u>62</u> FY 2019-2020 Target: <u>65</u>
Program Goals and Objective Numbers: <u>2</u>

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

1. FY 2014-2015 Baseline number of Family Council meetings attended <u>0</u> FY 2016-2017 Target: <u>5</u>
2. FY 2015-2016 Baseline number of Family Council meetings attended <u>6</u> FY 2017-2018 Target: <u>6</u>
3. FY 2016-2017 Baseline number of Family Council meetings attended <u>20</u> FY 2018-2019 Target: <u>20</u>
4. FY 2017-2018 Baseline number of Family Council meetings attended <u>8</u> FY 2019-2020 Target: <u>8</u>
Program Goals and Objective Numbers: <u>2</u>

**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 2014-2015 Baseline: number of consultations <u>357</u> FY 2016-2017 Target: <u>300</u>
2. FY 2015-2016 Baseline: number of consultations <u>347</u> FY 2017-2018 Target: <u>340</u>
3. FY 2016-2017 Baseline: number of consultations <u>995</u> FY 2018-2019 Target: <u>995</u>
4. FY 2017-2018 Baseline: number of consultations <u>1,110</u> FY 2019-2020 Target: <u>1,100</u>
Program Goals and Objective Numbers: <u>2</u>

**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 2014-2015 Baseline: number of consultations <u>833</u> FY 2016-2017 Target: <u>1,000</u>
2. FY 2015-2016 Baseline: number of consultations <u>715</u> FY 2017-2018 Target: <u>700</u>
3. FY 2016-2017 Baseline: number of consultations 1,494 FY 2018-2019 Target: <u>1,500</u>
4. FY 2017-2018 Baseline: number of consultations <u>2,238</u> FY 2019-2020 Target: <u>2,000</u>
Program Goals and Objective Numbers: <u>2</u>

**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 2014-2015 Baseline: number of sessions <u>13</u> FY 2016-2017 Target: <u>20</u>
2. FY 2015-2016 Baseline: number of sessions <u>22</u> FY 2017-2018 Target: <u>20</u>
3. FY 2016-2017 Baseline: number of sessions <u>18</u> FY 2018-2019 Target: <u>18</u>
1. FY 2017-2018 Baseline: number of sessions <u>19</u> FY 2019-2020 Target: <u>19</u>
Program Goals and Objective Numbers: <u>2</u>

## 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 response and investigation of abuse complaints, collaboration with other agencies to improve LTC residents' quality of care and quality of life, participation in disaster preparedness planning, participation in legislative advocacy efforts related to LTC issues, etc.

Enter information in the box below.

**Systemic Advocacy Effort(s) for the current fiscal year 2019-2020.**

Ombudsman Services will continue its leadership of the Healthcare Career Pathway(HCP) Program developing innovative and supportive pipelines into the allied healthcare field with a particular emphasis career opportunities in the long-term care industry serving marginalized and low-income individuals.

**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)**

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

1. FY 2014-2015 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 28 divided by the total number of Nursing Facilities 32 = Baseline 88%

FY 2016-2017 Target: 100%

2. FY 2015-2016 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 31 divided by the total number of Nursing Facilities 32 = Baseline 97%

FY 2017-2018 Target: 97%

3. FY 2016-2017 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 30 divided by the total number of Nursing Facilities 31 = Baseline 97%

FY 2018-2019 Target: 97%

4. FY 2017-2018 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint 30 divided by the total number of Nursing Facilities 31 = Baseline 97%

FY 2019-2020 Target: 97%

Program Goals and Objective Numbers: 2

**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.

1. FY 2014-2015 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>51</u> divided by the total number of RCFEs <u>415</u> = Baseline <u>12</u> % FY 2016-2017 Target: <u>90</u> %
2. FY 2015-2016 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>160</u> divided by the total number of RCFEs <u>401</u> = Baseline <u>40</u> % FY 2017-2018 Target: <u>40</u> %
3. FY 2016-2017 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>196</u> divided by the total number of RCFEs <u>398</u> = Baseline <u>49</u> % FY 2018-2019 Target: <u>49</u> %
4. FY 2017-2018 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>303</u> divided by the total number of RCFEs <u>381</u> = Baseline <u>80</u> % FY 2019-2020 Target: <u>80</u> %
Program Goals and Objective Numbers: <u>2</u>

### 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 2014-2015 Baseline: <u>4.75</u> FTEs FY 2016-2017 Target: <u>5</u> FTEs
2. FY 2015-2016 Baseline: <u>3.63</u> FTEs FY 2017-2018 Target: <u>4</u> FTEs
3. FY 2016-2017 Baseline: <u>6.38</u> FTEs FY 2018-2019 Target: <u>6</u> FTEs
4. FY 2017-2018 Baseline: <u>5.13</u> FTEs FY 2019-2020 Target: <u>5</u> FTEs
Program Goals and Objective Numbers: <u>2</u>

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

1. FY 2014-2015 Baseline: Number of certified LTC Ombudsman volunteers <u>34</u> FY 2016-2017 Projected Number of certified LTC Ombudsman volunteers <u>40</u>
2. FY 2015-2016 Baseline: Number of certified LTC Ombudsman volunteers <u>34</u> FY 2017-2018 Projected Number of certified LTC Ombudsman volunteers <u>35</u>
3. FY 2016-2017 Baseline: Number of certified LTC Ombudsman volunteers <u>34</u> FY 2018-2019 Projected Number of certified LTC Ombudsman volunteers <u>34</u>
4. FY 2017-2018 Baseline: Number of certified LTC Ombudsman volunteers <u>25</u> FY 2019-2020 Projected Number of certified LTC Ombudsman volunteers <u>25</u>
Program Goals and Objective Numbers: <u>2</u>

**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:

- Having Ombudsman Program staff and volunteers regularly attend NORS Consistency Training provided by the OSLTCO
- 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

OSCC will continue the work it began in FY 18-19 leveraging new tools to track complaint investigations from entry to closure and ensuring prompt response to new cases and that documentation is added continually and closed at reasonable intervals.

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

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

The agency receiving Title VIIA Elder Abuse Prevention funding is: **Contra Costa County Senior Legal Services**

<b>Fiscal Year</b>	<b>Total # of Public Education Sessions</b>
2016-2017	10
2017-2018	8
2018-2019	8
2019-2020	9

<b>Fiscal Year</b>	<b>Total # of Training Sessions for Professionals</b>
2016-2017	10
2017-2018	2
2018-2019	3
2019-2020	5

<b>Fiscal Year</b>	<b>Total # of Training Sessions for Caregivers served by Title III E</b>
2016-2017	N/A
2017-2018	N/A
2018-2019	N/A
2019-2020	N/A

<b>Fiscal Year</b>	<b>Total # of Hours Spent Developing a Coordinated System</b>
2016-2017	N/A
2017-2018	N/A
2018-2019	N/A
2019-2020	N/A

<b>Fiscal Year</b>	<b>Total # of Copies of Educational Materials to be Distributed</b>	<b>Description of Educational Materials</b>
2016-2017	1,400	Identity theft and account fraud; Elder Court/Senior Self-Help Clinic; What Should I Know About Elder Abuse; Consumer Fraud
2017-2018	500	Identity theft and account fraud; Elder Court/Senior Self-Help Clinic; What Should I Know About Elder Abuse; Consumer Fraud
<b>Fiscal Year</b>	<b>Total # of Copies of</b>	<b>Description of Educational Materials</b>

	<b>Educational Materials to be Distributed</b>	
2019-2020	500	Identity theft and account fraud; Elder Court/Senior Self-Help Clinic; What Should I Know About Elder Abuse; Consumer Fraud

<b>Fiscal Year</b>	<b>Total Number of Individuals Served</b>
2016-2017	900
2017-2018	900
2018-2019	1,000
2019-2020	950

**TITLE IIIIE SERVICE UNIT PLAN OBJECTIVES****CCR Article 3, Section 7300(d)****2012–2016 Four-Year Planning Period**

This Service Unit Plan (SUP) uses the five broad federally-mandated service categories defined in PM 11-11. Refer to the CDA Service Categories and Data Dictionary Revisions Effective July 1, 2011 for eligible activities and service unit measures. Specify proposed audience size or units of service for ALL budgeted funds.

**Direct and/or Contracted IIIIE Services**

<b>CATEGORIES</b>	<b>1</b>	<b>2</b>	<b>3</b>
<b>Family Caregiver Services Caring for Elderly</b>	<b><i>Proposed Units of Service</i></b>	<b><i>Required Goal #(s)</i></b>	<b><i>Optional Objective #(s)</i></b>
<b>Information Services</b>	<b># of activities and Total est. audience for above</b>		
2016-2017	# of activities: 22 Total est. audience for above: 624	1	
2017-2018	# of activities: 65 Total est. audience for above: 5,000	1	
2018-2019	# of activities: 65 Total est. audience for above: 5,500	1	
2019-2020	# of activities: 75 Total est. audience for above: 6,500	1	
<b>Access Assistance</b>	<b>Total contacts</b>		
2016-2017	1,529	1,2	
2017-2018	2,000	1,2	
2018-2019	2,000	1,2	
2019-2020	2,100	1,2	





<b>Access Assistance</b>		<b>Total contacts</b>	
<b>Support Services</b>	<b>Total hours</b>		
2016-2017	2173	1,2	
2017-2018	2,200	1,2	
2018-2019	2,200	1,2	
2019-2020	1,500	1,2	
<b>Respite Care</b>	<b>Total hours</b>		
2016-2017	3,238	1,2	
2017-2018	3,400	1,2	
2018-2019	3,500	1,2	
2019-2020	3,500	1,2	
<b>Supplemental Services</b>	<b>Total occurrences</b>		
2016-2017	610	1,2	
2017-2018	150	1,2	
2018-2019	150	1,2	
2019-2020	150	1,2	

#### Direct and/or Contracted IIIIE Services

<b>Grandparent Services Caring for Children</b>	<b><i>Proposed</i> Units of Service</b>	<b><i>Required</i> Goal #(s)</b>	<b><i>Optional</i> Objective #(s)</b>
<b>Information Services</b>	<b># of activities and Total est. audience for above</b>		
2016-2017	# of activities: 30 Total est. audience for above: 140	1	
2017-2018	# of activities: 6 Total est. audience for above: 30	1	
2018-2019	# of activities: 6 Total est. audience for above: 30	1	
2019-2020	# of activities: 6 Total est. audience for above: 30	1	

<b>Grandparent Services Caring for Children</b>	<b><i>Proposed</i> Units of Service</b>	<b><i>Required</i> Goal #(s)</b>	<b><i>Optional</i> Objective #(s)</b>
<b>Access Assistance</b>	<b>Total contacts</b>		
2016-2017	105	1	
2017-2018	120	1	
2018-2019	120	1	
2019-2020	105	1	
<b>Support Services</b>	<b>Total hours</b>		
2016-2017	1,300	1	
2017-2018	2,000	1	
2018-2019	1,500	1	
2019-2020	1,000	1	
<b>Respite Care</b>	<b>Total hours</b>		
2016-2017	750	1	
2017-2018	3,000	1	
2018-2019	5,000	1	
2019-2020	3,000	1	
<b>Supplemental Services</b>	<b>Total occurrences</b>		
2016-2017	475	1	
2017-2018	120	1	
2018-2019	275	1	
2019-2020	400	1	

**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 must enter State and federal performance target numbers in each AAA’s respective SUP. Please do this in cooperation with the Managing AAA. The Managing 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 Section 3 if your Master Contract contains a provision for using HICAP funds to provide HICAP Legal Services.

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

The new five federal PMs generally reflect the former seven PMs (PM 2.1 through PM 2.7), except for PM 2.7, (Total Counseling Hours), which was removed because it is already being captured under the *SHIP Annual Resource Report*. As a part of these changes, ACL eliminated the performance-based funding scoring methodology and replaced it with a Likert scale comparison model for setting National Performance Measure Targets that define the proportional penetration rates needed for improvements. Using ACL’s approach, CDA HICAP provides State and Federal Performance Measures with goal-oriented targets for each AAA’s Planning and Service Area (PSA). One change to all PMs is the shift to county-level data. In general, the State and Federal Performance Measures include the following:

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

AAA's should demonstrate progress toward meeting or improving on the Performance requirements established by CDA and ACL as is displayed annually on the *HICAP State and Federal Performance Measures* tool located online at: <https://www.aging.ca.gov/ProgramsProviders/AAA/Planning/>. For current and future planning, CDA requires each AAA ensure that HICAP service units and related federal *Annual Resource Report* data are documented and verified complete/ finalized in CDA's Statewide HICAP Automated Reporting Program (SHARP) system per the existing contractual reporting requirements. HICAP Service Units do not need to be input in the Area Plan (with the exception of HICAP Paid Legal Services, where applicable).

#### **HICAP Legal Services Units of Service (if applicable)**

<b>Fiscal Year (FY)</b>	<b>3.1 Estimated Number of Clients Represented Per FY (Unit of Service)</b>	<b>Goal Numbers</b>
2016-2017	20	2,3
2017-2018	20	2,3
2018-2019	6	2,3
2019-2020	6	2,3

<b>Fiscal Year (FY)</b>	<b>3.2 Estimated Number of Legal Representation Hours Per FY (Unit of Service)</b>	<b>Goal Numbers</b>
2016-2017	620	2.3
2017-2018	620	2,3
2018-2019	550	2,3
2019-2020	550	2,3

<b>Fiscal Year (FY)</b>	<b>3.3 Estimated Number of Program Consultation Hours Per FY (Unit of Service)</b>	<b>Goal Numbers</b>
2016-2017	6	2
2017-2018	6	2
2018-2019	9	2
2019-2020	9	2

**SECTION 16 - GOVERNING BOARD****PSA #7****GOVERNING BOARD MEMBERSHIP  
2016-2020 Four-Year Area Plan Cycle**

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

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**Total Number of Board Members: 5****Name and Title of Officers:****Office Term Expires:**

John Gioia, District 1, Chair	December 2019
Candace Andersen, District II, Vice-Chair	December 2019
<i>Term for elected officials of the Contra Costa County Board of Supervisors is 4 years. Elections are held in June; Supervisors are sworn in the first meeting of the new year and terms end at last meeting of the year in December.</i>	

**Names and Titles of All Members:****Board Term Expires:**

Karen Mitchoff, District IV	December 2020
Federal Glover, District V	December 2020
Diane Burgis, District III	December 2020
<i>Term for elected officials of the Contra Costa County Board of Supervisors is 4 years. Elections are held in June; Supervisors are sworn in the first meeting of the new year and terms end at last meeting of the year in December.</i>	

**SECTION 17 - ADVISORY COUNCIL****PSA 7****ADVISORY COUNCIL MEMBERSHIP  
2016-2020 Four-Year Planning Cycle**

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

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Total Council Membership (include vacancies) 40Number of Council Members over age 60 35 /97%

<b>Race/Ethnic Composition</b>	% of PSA's	
	<u>60+Population</u>	<u>% on Advisory Council</u>
White	<u>45%</u>	<u>71%</u>
Hispanic	<u>25.3%</u>	<u>16%</u>
Black	<u>9.6%</u>	<u>3%</u>
Asian/Pacific Islander	<u>11.8%</u>	<u>10%</u>
Native American/Alaskan Native	<u>1%</u>	<u>0%</u>
Other	<u>7%</u>	<u>0%</u>

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

<b>Susan Frederick, President/Chair</b> Health Work Group Chair	December 19, 2021
James Donnelly, Vice President	December 19, 2021
Gail Garret, 2 <sup>nd</sup> Vice President	December 19, 2021
Jajit Bambra , Treasurer	December 19, 2021
Fred Adams, Secretary	December 19, 2021

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

Fred Adams, At Large #1	September 30, 2019
Mary Bruns, At Large #15	September 30, 2019
Kathryn Adams, At Large #17	September 30, 2020
Deborah Card, At Large #5	September 30, 2019
Nina Clark, Representing City of Orinda	September 30, 2020
Joseph Doherty, Representing City of Walnut Creek	September 30, 2019
James Donnelly, Representing City of Danville / Alamo	September 30, 2019
Jennifer Doran, Representing City of Hercules	September 30, 2020
Mary Rose, At Large #13	September 30, 2020
Rudy Fernandez, Representing City of Antioch	September 30, 2020
Susan Frederick, At Large #20	September 30, 2019
Dorothy Gantt, Representing City of San Pablo	September 30, 2020
Gail Garrett, Nutrition Project Council	September 30, 2020
Jagjit Bhambra	September 30, 2020
Arthur Kee, Representing City of Brentwood	September 30, 2019
Joanna Kim-Selby, Representing City of El Cerrito	September 30, 2020
Shirley Krohn, At Large #2	September 30, 2020
Dennis Yee	September 30, 2020
Richard Nahm, At Large #18	September 30, 2020
Nuru Neemuchwalla, At Large #12	September 30, 2020
Jill Kleiner	September 30, 2020
Summer Selleck, At Large #7	September 30, 2019
Steve Lipson, Representing City of San Pablo	September 30, 2020
Ron Tervelt, Representing City of Clayton	September 30, 2019
Lorna Van Ackeren, Representing City of Pleasant Hill	September 30, 2019
Patricia Welty, At Large #4	September 30, 2020
Brian O-Toole	September 30, 2020
Rita Xavier, At Large #9	September 30, 2019

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

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



Explain any **"No"** answer(s):

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

Each new vacancy occurring on the Council is declared by Board Order. The Clerk of the Board's Office is then instructed to advertise each vacancy for a period of 20 days prior to the filling of each seat to encourage and permit interested members of the public to apply. Vacancies are identified on the County's website. Member at Large applicants are interviewed by the Council's Membership Committee; Local Committee Seats are selected by the cities (usually the City Councils). All new appointments to the Council are made by Board Order. New members are given an orientation and advised of their duty to file FORM 700 and to complete ethics training for public officials as required by the Fair Political Practices Commission. Members are also provided video training on the Brown Act and the County's own Better Governance Ordinance. Expired terms are renewed by mutual agreement.

**2016-2020 Four-Year Area Planning Cycle**

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This section must be completed and submitted annually. The Older Americans Act of 1965, as amended (OAA), designates legal assistance as a priority service under Title III B [42 USC §3026(a)(2)]<sup>3</sup> CDA developed *California Statewide Guidelines for Legal Assistance* (Guidelines), which are to be used as best practices by CDA, AAAs and LSPs in the contracting and monitoring processes for legal services (PM 05-19)

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

For the provision of Legal Services, the AAA contracts with Contra Costa Senior Legal Services (CCSLs). The mission is to provide free legal advice, representation and education to elderly residents of Contra Costa County, with an emphasis on seniors who are in the greatest social and economic need. The most urgent objective is to resolve legal problems that are adversely affecting basic needs of the elderly such as food, shelter, health care, and freedom from physical, psychological or economic abuse.

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

11% of adequate proportion of unallocated Title III B funding is directed to Legal Services.

3. Specific to Legal Services, has there been a change in your local needs in the past four years? If so, please identify the change (include whether the change affected the level of funding and the difference in funding levels in the past four years).

Due to the rising cost of housing in Contra Costa County, the need for legal services involving housing issues has increased. Approximately 27% of cases are housing related, primarily landlord/tenant disputes and eviction defense. In the past four years, when available, the AAA has allocated One-Time-Only funding to support Legal Services. However the baseline budget allocation has, for the most part, remained the same.

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, the agreement does include expectations to use the California Statewide Guidelines in the provision of OAA legal services.

5. Does the AAA collaborate with the Legal Services Provider(s) to jointly establish specific priorities issues for legal services? If so what are the top four (4) priority legal issues in your PSA? Yes, the AAA collaborates with CCSLS to establish priority issues for legal services. The top four priority legal issues in Contra Costa County are housing preservation (e.g. eviction defense), consumer debt, incapacity planning (Advance Health Care Directives/Powers of Attorney) and elder abuse.

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

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

Yes, the AAA collaborates with our legal service provider, CCSLS, to identify our target population. The target population is seniors with the greatest social and economic need. The mechanism for reaching them is through outreach and education at senior centers, nutrition sites, senior housing complexes, community events, and gathering places with diverse racial/ethnic populations, such as San Pablo and Bay Point. CCSLS distributes brochures about its services in English, Spanish, and several Asian languages. CCSLS also works with other organizations that serve the target population to promote awareness of its services.

7. Specific to Legal Services, what is the targeted senior population and mechanism for reaching targeted groups in your PSA? **Discuss:** As noted above, the target population is seniors with the greatest social and economic need. The mechanism for reaching them is through outreach and education at senior centers, nutrition sites, senior housing complexes, community events, and gathering places with diverse racial/ethnic populations. The legal service provider, CCSLS, distributes brochures about its services in English, Spanish and Asian languages. CCSLS also works with other organizations that serve the same target population to promote awareness of its services.

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

Fiscal Year	# of Legal Assistance Services Providers
2016-2017	3
2017-2018	3
2018-2019	3
2019-2020	3

9. Does your PSA have a hotline for legal services? **No, Discuss:** Contra Costa County does not have a dedicated hotline for legal services. The Information and Assistance (I&A) and 211 helplines serve as referral sources. Adult Protective Services, Ombudsman program, legal service providers, and other community service providers also help link clients with CCSLS. Additionally, the Family Justice Centers serve as “one-stops” for victims of abuse and exploitation. Seniors who are victims of abuse can also access legal services through the Family Justice Centers.

– 10. What methods of outreach are Legal Services providers using? **Discuss:** CCSLS presents educational workshops on substantive areas of the law, makes presentations regarding its services and how to access those services, and participates at senior and health fairs throughout the county. It distributes brochures, fliers and other materials regarding the law in several different languages. The agency also has a website at [www.ccsls.org](http://www.ccsls.org) that can be accessed by clients or their families.

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

<b>Fiscal Year</b>	<b>Name of Provider</b>	<b>Geographic Region covered</b>
2016-2017	a. CCC Senior Legal Services b. Bay Area Legal Aid c. Rubicon	countywide for all
2017-2018	a. CCC Senior Legal Services b. Bay Area Legal Aid c. Rubicon	countywide for all
2018-2019	a. CCC Senior Legal Services b. Bay Area Legal Aid c. Rubicon	countywide for all
2019-2020	a. CCC Senior Legal Services b. Bay Area Legal Aid c. Rubicon	countywide for all

12. Discuss how older adults access Legal Services in your PSA: Most frequently seniors access legal services by phone or by visiting CCSLS' office. They are given the option of phone or in-person appointments. Seniors can also make appointments at one of the several senior centers that participate in the Consult-an-Attorney program.

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

Major legal issues handled by CCSLS are housing preservation (27% of cases), consumer debt (18% of cases), incapacity planning (13% of cases), and elder abuse (5% of cases).

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? CCSLS is focusing more resources on elder abuse, which is under-reported and wide-spread. Another focus is on incapacity planning to help seniors who need to have the tools in place to take care of themselves in the case of cognitive decline or illness. Tenant evictions and housing services represent about 25% of the cases now.

15. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. **Discuss:** CCSLS moved its' main office to the city of Concord, a more centralized location that provides better access to services. The office is across the street from a Bay Area Rapid Transit (BART) station, making it easily accessible via public transportation. CCSLS has also developed a Consult-an-Attorney program at senior centers throughout the county so that clients do not have to travel outside their region to have a face-to-face consultation with an attorney. The program also offers legal advice and representation at the Elder Court, which was created in 2008 by the Superior Court of Contra Costa County in concert with community organizations to provide legal remedies and social services to seniors, particularly in cases that involve elder abuse.

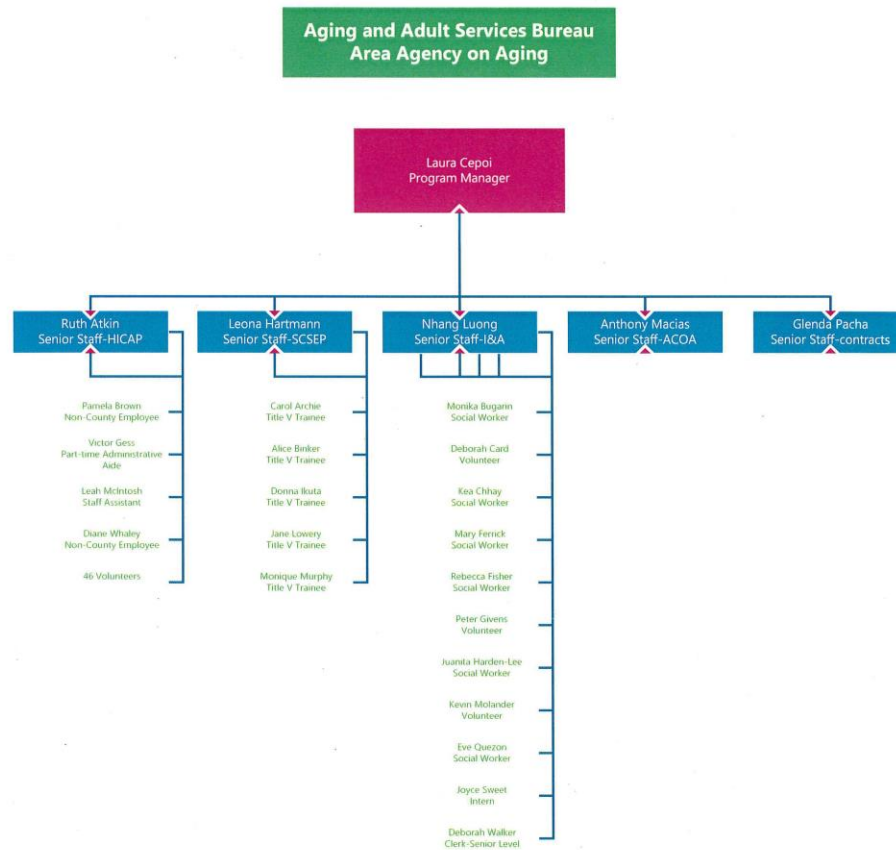
The lack of resources is another barrier to accessing legal services. To address this issue, CCSLS has a panel of private and retired attorneys who provide pro-bono services for the Consult-an-Attorney Program and at Wills Clinics throughout the county.

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16. What other organizations or groups does your legal service provider coordinate services with? **Discuss:** CCSLS coordinates its services with Contra Costa County Ombudsman, Bay Area Legal Aid, Meals on Wheels and Senior Outreach Services, the Superior Court, and many senior centers. In addition, they work very closely with many county programs such as Adult Protective Services (APS), Information and Assistance (I&A), and Health Insurance Counseling and Advocacy Program (HICAP). In the past they have co-sponsored educational events with some of the above-mentioned agencies and have co-counseled with other agencies on cases. They have also provided in-service education to the staff and volunteers of some of these providers.

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## SECTION 21 - ORGANIZATION CHART





## AAS Headcount

AAS Directors & Managers -  
 Area Agency on Aging -  
 Adult Protective Services -  
 General Assistance & Advocacy -  
 IHSS -  
 IHSS PA -  
 Whole Person Care -

Total Aging & Adult Services -

