

# The 60+ Year Old Population .... the Other Gold in El Dorado County



Area Agency on Aging

Area Plan for 2020-2024

An Action Plan for Addressing the  
Opportunities and Challenges for  
Aging in El Dorado County

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**El Dorado County Area Agency on Aging**  
Planning and Service Area 29

Richard Todd, Director



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## AREA PLAN CHECKLIST

PSA \_\_\_\_\_ 29

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

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

Section	Four-Year Area Plan Components	4-Year Plan
	Transmittal Letter – <i>must have original, ink signatures or official signature stamps- no photocopies</i>	<input checked="" type="checkbox"/>
1	Mission Statement	<input checked="" type="checkbox"/>
2	Description of the Planning and Service Area (PSA)	<input checked="" type="checkbox"/>
3	Description of the Area Agency on Aging (AAA)	<input checked="" type="checkbox"/>
4	Planning Process / Establishing Priorities	<input checked="" type="checkbox"/>
5	Needs Assessment	<input checked="" type="checkbox"/>
6	Targeting	<input checked="" type="checkbox"/>
7	Public Hearings	<input checked="" type="checkbox"/>
8	Identification of Priorities	<input checked="" type="checkbox"/>
9	Area Plan Narrative Goals and Objectives:	<input checked="" type="checkbox"/>
9	Title IIIB Funded Program Development (PD) Objectives	<input type="checkbox"/>
9	Title IIIB Funded Coordination (C) Objectives	<input type="checkbox"/>
9	System-Building and Administrative Goals & Objectives	<input type="checkbox"/>
10	Service Unit Plan (SUP) Objectives and Long-Term Care Ombudsman Outcomes	<input checked="" type="checkbox"/>
11	Focal Points	<input checked="" type="checkbox"/>
12	Disaster Preparedness	<input checked="" type="checkbox"/>
13	Priority Services	<input checked="" type="checkbox"/>
14	Notice of Intent to Provide Direct Services	<input checked="" type="checkbox"/>
15	Request for Approval to Provide Direct Services	<input checked="" type="checkbox"/>
16	Governing Board	<input checked="" type="checkbox"/>
17	Advisory Council	<input checked="" type="checkbox"/>
18	Legal Assistance	<input checked="" type="checkbox"/>
19	Multipurpose Senior Center Acquisition or Construction Compliance Review	<input type="checkbox"/>
20	Title III E Family Caregiver Support Program	<input checked="" type="checkbox"/>
21	Organization Chart	<input checked="" type="checkbox"/>
22	Assurances	<input checked="" type="checkbox"/>

# TRANSMITTAL LETTER

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## Four-Year Area Plan 2020-2024

AAA Name: El Dorado County

PSA Number: 29

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

1. Brian Veerkamp

  
\_\_\_\_\_  
Chair, Governing Board

8-4-2020  
\_\_\_\_\_  
Date

2. Steven Shervey

  
\_\_\_\_\_  
Chair, Advisory Council

7-7-2020  
\_\_\_\_\_  
Date

3. Richard Todd

  
\_\_\_\_\_  
Director, Area Agency on Aging

7-7-2020  
\_\_\_\_\_  
Date

## **SPECIAL ACKNOWLEDGEMENT**

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In March 2020, Governor Gavin Newsom issued a Shelter-in-Place order to prevent the spread of the COVID-19 virus. Individuals 65 years and older were identified as particularly vulnerable to the virus and are encouraged to limit their contact with the general public. Many, especially those with chronic medical conditions, are afraid to leave their own home for fear of catching the virus.

All congregate meal sites were immediately closed, the Adult Day Centers, senior and community centers and all of their activities were closed. However, the need for services remains.

As a direct service provider, AAA staff continued to come to work and quickly mobilized to “think outside the box”. Existing congregate meal site facilities were evaluated to determine which would be appropriate for a “Take-Out” meal service location. A new “Take-Out” lunch service was created and implemented at 6 of the congregate sites (Placerville, South Lake Tahoe, Cameron Park, Pioneer Park, Greenwood and Pollock Pines). Every day, Monday – Friday, from 11:00am to 12:15pm, seniors drive up or walk-up and receive a hot lunch and, if needed, several frozen meals for a one-week supply.

Home delivered meals are provided to pre-COVID-19 clients and the newly eligible clients. Many of our volunteer drivers are seniors themselves. Some have decided to shelter-in-place and some continue to deliver meals to other seniors. Staff from other programs and departments have stepped up to deliver meals and El Dorado Transit has provided drivers for this service. This has been very rewarding new experience for many people.

In addition to the Take-Out Meals and Home Delivered Meals, Nutrition staff has created a weekly grocery bag program that contains fresh fruits, vegetables, and non-perishable items. These grocery bags are distributed to home delivered meal clients and also available on a first-come, first-serve basis to our Take-Out meal clients.

The Nutrition staff involved in both the kitchen and with meal route and volunteer coordination have gone above and beyond to make sure that all seniors who need food receive a meal.

It is very important that the caregivers and clients of our Adult Day Services Programs remained in touch and engaged. Due to sheltering in place 24 hours per day, the stress level on the caregivers can be very high and the clients with Dementia and Alzheimer’s can have set backs without their familiar routines. Staff from The Club locations have made U-Tube videos that caregivers can access and play for their family member. Zoom meetings are instrumental in keeping eyes and ears on this vulnerable population.

## LETTER FROM THE DIRECTOR

April 2020

Dear Community Member,

The El Dorado County Area Agency on Aging (AAA) is pleased to present the 2020-2024 Area Plan, *The 60+ Year Old Population ...the Other Gold in El Dorado County*, as mandated by the federal Older Americans Act and the Older Californians Act. This important document will guide our efforts to improve programs and services for our older adults over the next several years. This Plan updates the 2016-2020 Area Plan, which identified trends and issues relevant to today's older adults and aging boomers. Most importantly, the 2020-2024 Plan is the AAA's response to the opportunities and challenges of the growing older adult population in a diverse and multi-faceted way. By developing local strategies to support an aging community, this Plan is instrumental in building community capacity to serve our older residents. The Plan provides a flexible and dynamic framework that builds awareness, encourages action, fosters collaborative efforts, and improves access to information.

We are proud of El Dorado County's accomplishments benefiting older adults and their families. During the four-year period since the previous Area Plan, the AAA and the aging network have, through coordination and advocacy, been providing needed services and implementing programs aimed at maintaining and improving quality of life, safety, and dignity for older residents and their families.

We developed the 2020-2024 Area Plan with a particular focus on improving the efficiency and effectiveness of the planning and delivery of a continuum of aging services. The goals and objectives set forth in this plan have been developed to serve the greatest number of older adults and their families in the most comprehensive manner. The 31 objectives for the coming four years are presented within the context of five goals for the agency: Outreach, Availability and Increasing Access of Services, Emergency Preparedness, Volunteering, Civic Engagement, Community Collaboration, and Education and Training.

While the authorizing State and federal legislation require the AAA to develop this Area Plan, we sought wide input from local experts and key community partners and invited participation from consumers, service providers, and interested parties. I extend my gratitude to the many individuals and groups who contributed valuable information and ideas for action. The AAA acknowledges and supports the efforts of individuals, families, and the communities in our County to prepare and provide for our most needy and vulnerable older adults.

We are confident that our coordination across service systems will continue to make the El Dorado County region a great place to live for people of all ages.

Sincerely,

Richard Todd  
Director, Area Agency on Aging



- Providing a continuum of care for frail and vulnerable older individuals to prevent unnecessary or premature institutionalization.

The 1996 revision of the Older Californians Act (OCA) moved the primary focus for the delivery of services from the State to the local level. It identified Area Agencies on Aging as the local units in California to administer programs in compliance with the OAA, OCA, and other applicable regulations.

This Area Plan is a document submitted by the AAA to the California Department of Aging (CDA) in compliance with the OAA. Its format was developed to facilitate a quality, long-range, needs-driven planning process that meets goals set forth in the OAA. The AAA is mandated by CDA to develop a local Area Plan every four years and to submit annual updates. This latest Four-Year Plan is for the period July 1, 2020 through June 30, 2024.

The Area Plan for 2020-2024 will direct the focus of the AAA with regards to policy decisions, program development, and advocacy for those years. The specific objectives of the Area Plan for the AAA services include:

- Serve as an informational tool for educating and informing the public including providers, public officials, advocates, caregivers, and older adults;
- Serve as a management tool to guide local initiatives, decision making, and budget development;
- Coordinate local services with those provided by other organizations to assist them in their planning efforts;
- Communicate the needs of older adults in El Dorado County with CDA; and
- Serve as a tool for self-evaluating and monitoring AAA efforts to address the ever-burgeoning needs of older adults in El Dorado County.

The Area Plan, as a planning document, includes a compilation of identified needs from various assessment tools and description of agency goals and subsequent activities that the AAA will undertake relative to programs for older persons in El Dorado County. It represents a formal commitment to CDA, in that it describes the manner in which the AAA plans to utilize the OAA funds, including how it will carry out its administrative responsibilities. The Area Plan also confirms the AAA's responsibility to fulfill its role as the planner, catalyst, and advocate on behalf of older persons in El Dorado County.

based organizations and other HHS programs. The majority of the senior programs are co-located at the Placerville Senior Center. Staff can frequently communicate with each other to resolve unique challenges for clients. Seniors can access a wide range of services from exercise, nutrition, legal services, Senior Day Care, support groups, information and assistance, and needed social activities in one location.

## Content of the Area Plan

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This Plan, which provides the format and the structure to identify and address older adult needs, consists of 22 Sections as required by the California Department of Aging. A few sections are highlighted below.

- **Section 2: Description of the Planning and Service Area (PSA)** provides a description of El Dorado County which encompasses the PSA, its physical and demographic characteristics, unique resources and service delivery systems.
- **Section 3: Description of the Area Agency on Agency** describes how the AAA, on behalf of all older individuals, adults with disabilities, and their caregivers in the PSA carries out its role as a leader on aging issues within the PSA.
- **Section 9: Area Plan Narrative Goals and Objectives** details the Goals and Objectives that were developed for this four year planning cycle. This section sets out our specific goals under five priority areas. In each area, there is the introduction of the principal objectives with a brief rationale, a list of responsible parties and potential collaborators, and plans for action over the next four years.

## Highlights of the Goals and Objectives of the Area Plan

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The Area Plan contains five major goals with specific objectives. These goals and objectives were developed based on the recent Needs Assessment. A committee consisting of staff from AAA programs and COA members created the objectives within the parameters of achievability and measurability, assignment of responsible parties, program staff availability and no additional or minimal cost to the County. Several objectives are also focused on seniors within the South Lake Tahoe area. The COA will be an integral part of the completion of a majority of the objectives.

**Goal 5: Education and Training.** The Older Adults Needs Assessment identified education as an area of interest to many seniors. The survey also identified that many seniors are caring for their spouses who have physical limitations and memory or cognitive deficiencies. Training will provide these seniors with support and education to become effective caregivers.

**Objectives include:** Outreach activities to promote attendance at evidence based classes, facilitate support groups, work with local high schools, facilitate and sponsor caregiver education classes and collaborate with local hospitals, long care facilities, etc.

There are a total of 31 objectives within these five goals. The details of these objectives, measurement of the objectives and the programs responsible for the completion of the goal are found in Section 9 of the Area Plan.

## Section 1: Mission Statement

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The mission statement of all Area Agencies on Aging (AAA) is: “To provide leadership in addressing issues that relate to older Californians; to develop community-based systems of care that provide services which support independence within California’s interdependent society, and which protect the quality of life of older persons and persons with functional impairments; and to promote citizen involvement in the planning and delivery of services.”

In El Dorado County, the AAA is an integral part of the Health and Human Services Agency (HHSA). The mission of HHSA is: “With integrity and respect, we provide effective, efficient, collaborative services that strengthen, empower and protect individuals, families and communities, thereby enhancing their quality of life.

neighborhoods, this area also contains low-income apartments, a mobile home park, and an industrial business center.

● The Placerville Region

Placerville is one of the two incorporated cities within the County and is the county seat. It serves as the “hub” of services and activities for the west slope. Most County offices are located within the Placerville region. There is also a County-maintained Senior Center located within the City limits. This region, while on a much smaller scale, offers many of the services that are found in bigger cities such as set public bus routes and taxi services. Several senior apartment complexes and low-income housing are located within this region, as well as the major hospital for the County.

● The West Slope Mountain Region

The higher elevations of the west slope, from Placerville eastward, lie in the 3,000 to 7,000 foot elevation range and sometimes experience severe winter storms but enjoy milder summers than the Placerville and West Slope County regions. This region is also mountainous but is populated by several small towns that are geographically isolated. Public transportation and medical facilities are limited or non-existent.

● The South Lake Tahoe Region

The east slope has mild summers but often has severe winter weather that limits travel, at the same time providing an excellent winter recreational season. The City of South Lake Tahoe is the largest incorporated city in the County, attracting a large number of visitors throughout the year. Located within the City of South Lake Tahoe is a dedicated Senior Center that is a collaboration between the County and the City. There are also satellite offices of the County Services located in the Placerville Region.

The geography of the County includes many natural boundaries. While enhancing the beauty of the region, these boundaries present one of the biggest constraints to service delivery in our rural community, especially for older adults with limited access to transportation or for whom little informal support is available.

## B. The Demographic Characteristics of El Dorado County

### Demographics

The older population in El Dorado County is growing at a tremendous pace. Since 2010, the older population in El Dorado County has grown by 53.8%. It is projected that by 2060, more than 71,000 older adults will call the El Dorado County region home.

**Table 1**  
**Older Adult Needs Assessment**  
**Response to Question #4 “I have lived in this community:”**

<b>Respondents Length of Time in the Community</b>	<b>2016 Survey Results</b>	<b>2020 Survey Results</b>
Less than 1 year	3.70%	2.74%
1 to 5 years	12.65%	15.14%
6 to 10 years	9.53%	12.39%
11 to 20 years	27.63%	21.00%
21 to 30 years	19.46%	15.52%
More than 30 years	27.04%	33.21%

Consistent with national surveys, the majority of older adults in El Dorado County continue to express a strong desire to remain in their homes. With so many individuals deciding to age in place, the region’s median age has risen steadily over the last several decades. According to the website [www.welldorado.org](http://www.welldorado.org), the median age for El Dorado County is 46.4 years old which is significantly older than the median for California of 37.3 years old. This trend is expected to continue over the coming decades. Currently the 60 years and older age group makes up 32% of the county’s population.

This trend presents important opportunities for aging services, as older adults make an important contribution to our community. But the aging of the population also has a range of impacts, which will present real challenges for all service providers. To identify the makeup and needs of the older population in El Dorado County, AAA staff conducted a detailed review of census data and other related demographic data. The following is a thumbnail review of the great shift in the age structure of our County that will influence all we do for the next 20 to 30 years. All data has been extracted from 2010 Census data unless otherwise noted.

As Figure 2 illustrates, there was a significant increase in the percentage of Americans aged 65 who were expected to survive age 90 over the last few generations. From 1940 to 2050 there is a projected six-fold increase in older adults expected to survive age 90.

**Silent Generation:** This middle group of “older” older adults may be starting to experience disabling conditions. The Silent Generation is defined as individuals born between 1928 and 1945 (75 to 92 years old in 2020). This generation is much smaller than the Boomers and many of this generation lived during the Great Depression, World War II and the Korean War. This generation is characterized by a strong work ethic, reliability, and thriftiness. As a result, this generation is considered to have accumulated the greatest amount of wealth.

**Greatest Generation:** This generation is the “oldest” of the older adult-group and were born between 1901 and 1927 (92 years and older). They are the most likely to be living with physical and/or mental disabilities. This generation experienced many technological innovations in everyday life, such as the radio and telephone, that other generations take for granted. However, this generation is not always comfortable using new electronic technology such as the computer. The Greatest Generation lived during the of Stock Market Crash of 1929 leading into the Great Depression, and World War II. This generation is known for perseverance, strong work ethic, humility, commitment and a strong sense of personal responsibility.

**Racial and Ethnic Composition**

Compared to California’s older adult population, the population of El Dorado County is predominately white (see Table 2). In 2010, about 93.6% of older adults were white (non-minority). In 2019, the California Department of Aging is estimating that the non-minority population will be about 88.2%.

Table 2  
El Dorado County Age 60+ Population by Race

Year	60+ Population	White		Minority	
2010	39,494	36,953	93.6%	2,541	6.4%
2019	55,970	49,375	88.2%	6,595	11.8%

The aging minority population in our County has increased 159.5% over the last decade, more than two and a half times the number of older adults in 2000. For the 2010 Census, race and Hispanic origin (ethnicity) were defined as separate and distinct concepts. Federal standards mandate the use of a minimum of two ethnicities: Hispanic or Latino and Not Hispanic or Latino. Individuals who identify their origin as Hispanic or Latino may be of any race. Federal standards mandate the use of a minimum of five race categories: White, Black/African American, American Indian/Alaska Native, Asian, and Native Hawaiian/Other Pacific Islander. Other race categories include Some Other Race and Two or More Races. Table 3 specifies the current comparison of El Dorado County’s population by race and Hispanic origin.

## Older Adults Living Alone

The number of older adults living alone has increased significantly, a 51% increase from 2010 to 2019 (see Table 5). The majority of older adults living alone are women and those who live alone are often at a greater risk of isolation and subsequent institutionalization. The availability and the provision of services to this population will continue to be a priority of this agency.

Table 5  
Older Adults Living Alone  
El Dorado County

Year	One-Person 60+ Households	% Increase
2010	5,802	-
2019	8,760	51%

## Disability/Difficulties

The US Census, 2010 American Community Survey estimates one in three adults 65 years and older in El Dorado County are living with some type of long-lasting condition or disability. The County's 65+ disability distribution is close to the national distribution. The likelihood of having a disability varied with age in the County: from 5% of people 5 to 17 years old, to 12% of people 18 to 64 years old, and to 49% of those 75 and older. Of older adults that reported some type of disabling condition, 61% indicated that they were living with two or more types of disabilities or difficulties.

*49% of seniors, age 75 years or older are living with a disability.*

Older adults are often struggling with various conditions that make living in their homes safely and without assistance challenging. Difficulty with living independently was reported as the most common problem experienced by men and women 65 year and over followed by difficulty ambulating. One in five older adults is living with a sensory disability involving sight or hearing. Cognitive difficulties (the ability to learn, remember, or concentrate) affects 9% of older adults, followed by 8% reporting that some condition causes difficulty in managing their self-care needs. Women were more than twice as likely to have experienced difficulties with independent living as their counterparts. Men are most likely to be living with hearing difficulties.



substantial changes in consumer spending patterns and standard of living. Further, the guidelines do not take into account the cost of living. As we live in a high-cost state, this is a significant disadvantage.

Consequently, thousands of older adults are struggling with severe economic insecurity, unable to qualify for public assistance as their incomes are too high according to the FPL guidelines, but not nearly enough to realistically make ends meet on their own. In response, a more accurate measure of poverty, The Elder Economic Security Standard™ Index or "Elder Index," was developed by Wider Opportunities for Women (WOW) and the Gerontology Institute at the University of Massachusetts, Boston. This index is an estimation tool based on the actual cost in each county of the basic expenses (housing, food, health care, transportation, and other costs) needed by older adults to age independently with dignity in their own homes.

**Table 7**  
**Elder Economic Security Index**  
**EI Dorado County 2019**

	Single Elder Person				Elder Couple		
	Owner w/out Mortgage	Renter w/one bedroom	Owner with Mortgage		Owner w/out Mortgage	Renter w/one bedroom	Owner with Mortgage
2019 Federal Poverty Level	\$12,490	\$12,490	\$12,490		\$16,910	\$16,910	\$16,910
150% of Federal Poverty Level	\$18,735	\$18,735	\$18,735		\$25,356	\$25,356	\$25,356
200% of Federal Poverty Level	\$24,980	\$24,980	\$24,980		\$33,820	\$33,820	\$33,820
Yearly Income Needed to Meet Basic Needs (Housing Food, Transportation, Health Care, etc.)	\$21,420	\$25,212	\$37,116		\$31,332	\$35,124	\$47,028

The Elder Index has been used to produce an analysis of the economic challenges facing older adults living in California demonstrating that the FPL guidelines underestimate costs of living for older adults, as they realistically need twice the FPL to make ends meet. The table above demonstrates that the minimum yearly amount required for basic needs far exceeds the federal poverty guidelines.

Table 8  
 El Dorado County 60+ Demographic Comparison 2016 -2019

<b>Demographics</b>	<b>2016</b>	<b>2017</b>	<b>2018</b>	<b>2019</b>	<b>Change from 2016 to 2019</b>
Population 60+	51,761	53,891	55,406	55,970	8.13%
Non-Minority 60+	45,749	47,519	48,876	49,375	7.93%
Minority 60+	6,012	6,372	6,530	6,595	9.70%
Low Income 60+	2,935	3,425	4,260	4,580	56.05%
Medi-Cal Eligible 60+	3,890	4,164	4,364	4,555	17.10%
Geographic Isolation 60+	16,600	16,600	16,600	16,600	0.00%
SSI/SSP* 65+	674	728	769	801	18.84%
Population 75+	13,877	14,480	16,003	16,164	16.48%
Lives Alone 60+	7,305	7,895	8,525	8,760	19.92%
Non-English Speaking	220	285	415	530	140.91%

\*Supplemental Security Income/State Supplementary Payment

training for all staff. Promoting effective, efficient, and responsive delivery of aging services by enhancing the quality and capacity of OAA-funded home and community-based services is an ongoing activity of the agency. Providing opportunities for quality assurance activities and for professional development maximizes the service delivery system for compliance and change.

#### Identification, Prioritization, and Resolution of Community Needs

The AAA has developed a progressive four-year needs assessment list of activities to provide continual evaluation of the needs and issues facing older adults and their caregivers in our community in preparation for the 2020-2024 contracting cycle. The AAA remains flexible with its resources and staff time in order to address critical areas of unmet need and to anticipate the impending demographic trends and future service needs of the boomers and other underserved target populations. Collection of both quantitative and qualitative data enables synthesis of information to better prepare service delivery and to respond more efficiently to service accessibility issues.

#### System Coordination

The AAA actively participates in various multidisciplinary committees, sustains representation in numerous community collaboratives, and maintains an open dialogue and engagement with our community partners of the aging network. These system coordination activities are described in further detail in the section, *Coordination and Advocacy*. Our alliances with a broad spectrum of community leaders, community-based service organizations, and other public entities provide the opportunity to network and respond to the needs of the community.

#### Advocacy

The AAA participates in a range of advocacy activities on behalf of older adults to support their ability to maintain independence and dignity in the least restrictive environment, which are described in further detail in the section, *Coordination and Advocacy*.

## B. Challenges

#### Limited OAA Funding

While many excellent services are currently in place locally to meet the needs of our older population, we need to do much more to prepare for the profound demographic shift represented by aging Boomers. Funding levels are not keeping pace with the rapidly growing older adult population in the United States. Inadequate Federal and State funding inhibits the AAA's endeavors to advocate, plan, coordinate, and deliver a comprehensive range of home and community-based services for older adults and their caregivers who may be struggling in the pursuit to remain living independently at home. The fact that there are more needs than can be met with available funds will inevitably result in limited financial and human resources allocated to meet those needs. With increased demand, adequate service delivery will be challenged.

#### Challenges in Delivery of Services

The geography of the County presents unique challenges for service delivery. The ability to provide services to targeted populations in outlying areas is problematic. The need to provide services to older adults in their own communities is critical, especially for those vulnerable populations who have limited access to transportation for needed services or those dependent on in-home provision of services and supports in the more isolated, rural areas of the County, of which there are many.

- Information and Assistance (I&A)  
Trained staff provide information, assistance, and follow up to link older persons and their families to appropriate community services. This program also provides outreach in group settings and at organized community events. I&A also distributes the Farmers' Market Coupons, and provides outreach and application assistance for the CalFresh program.
- Long-Term Care Ombudsman Program (LTCOP)  
Professional staff and certified volunteers investigate and resolve complaints made by, or on behalf of, residents of long-term care facilities.
- Senior Activities  
Socialization and remaining active in the community are important goals for seniors. A wide range of recreational activities and clubs are offered to anyone 60 years and older. Activities and fitness groups are designed for seniors such as hiking, day and overnight trips, painting, yoga, fitness, art classes, bridge, Zumba, Book Club, etc.
- The Clubs -- Senior Day Care Services  
Although this is not an OAA program, it is a coordinated program of services for adults in a community-based group setting, located in Placerville and El Dorado Hills. Services include social activities, transportation, meals and snacks, personal care, therapeutic activities, and some health services. This program provides needed respite care for FCSP clients and support groups for caregivers.
- Senior Health Education Program (SHEP)  
Encourages active participation in evidence-based health education, and exercise opportunities to preserve quality of life and improve health. Tai Chi for Better Balance and Bingocize classes are offered.
- Senior Legal Services  
Legal assistance for adults 60 years or older. Senior Legal Services provides legal education and legal assistance with Social Security (Medicare/Medi-Cal questions), SSI, wills, trust and real property. Appointments are required and the service is only available for El Dorado County residents.
- Senior Nutrition Services, Congregate & Home-Delivered Meals  
Hot, nutritious, and balanced meals are provided to seniors through congregate meal sites and home-delivered meals to the homebound. During the recent COVID-19 Governor's Stay at Home order, the congregate sites were closed and a Drive Thru Take-Out Meal Service was implemented. Seniors can drive up and pick up a fresh hot lunch each day or one hot lunch and up to six frozen meals. A Grocery Bag program was also implemented for home delivered meal clients and was available at the Drive Thru Take-Out sites.
- Senior Shuttle  
Weekly grocery shopping trips are available to seniors. Special trips are scheduled through the year to museums, fairs, parks, etc. the Senior Shuttle is not wheelchair accessible.

#### D. Coordination and Advocacy

The AAA strives to be a leader in the community addressing needed services for older adults. This leadership is accomplished in a variety of ways including collaboration with community partners and in day-to-day contact with the older adult population as a result of being a direct service provider for the majority of aging services within the PSA. The Board of Supervisors, as the governing body, sets the policy in collaboration with aging services and community partners.

**Commission on Aging (COA).** COA is an active voice that advises and represents local needs to County government officials and service providers. The Commission continues to envision and work towards a commitment by all sectors of county government, non-government organizations, caring professionals, and private organizations and individuals for the promotion of health and the protection, advocacy, and representation of older and disabled adults.

COA works closely with the AAA to provide input relative to development of policy and funding recommendations to the Board on behalf of the County's growing older adult population. The COA provides updates and advocacy to the Board of Supervisors detailing the Commission's achievements, advocacy efforts, reports, and trainings. The COA is also an integral participant in the development and the completions of the Area Plan Goals and Objectives and the recognition of the El Dorado County Senior-of-the-Year.

**Multidisciplinary Adult Services Team (MAST):** MAST is coordinated by Adult Protective Services (APS) to review elder and dependent adult abuse cases and to improve communication and coordination among agencies serving older and dependent adults. MAST provides a monthly forum where concerns are expressed about specific cases and ideas are exchanged to address the prevention of older and dependent adult abuse. Representatives of AAA, Health & Humans Services Agency, Code Enforcement, Animal Control, Marshall Hospital, Public Guardian, the District Attorney's office, and Senior Day Care Services are among those attending.

**Disaster Preparedness:** The AAA, including the COA, is an integral part of the disaster preparedness planning for the PSA. The El Dorado County Office of Emergency Services (OES) has lead responsibility if a disaster occurs locally. The El Dorado County Operational Area Emergency Operations Plan is the principal guide for the agencies of El Dorado County and other local government entities to prevent, prepare for, respond to, and recover from emergencies and disasters affecting the County. The roles of the AAA and the Health and Human Services Agency are clearly defined in this plan. Responsibilities of the AAA include: identifying and locating at-risk individuals who would need assistance in the event of an emergency, providing information on residential and skilled nursing facilities, providing trained volunteers, and providing information on vendors for food, medical supplies, etc. AAA staff have been instrumental in the development of the plan and participates on the Preparedness Workgroup (sponsored by the Health and Human Services Agency (HHSA), Emergency Preparedness & Response Program) and OES Disaster Council to ensure ongoing communication and planning between the AAA and the County's OES.

**Senior Nutrition Services.** There is strong commitment and support from all sectors of the community for AAA programs and services. The Board of Supervisors continues to support the use of general fund dollars to ensure continued Senior Nutrition Services. Senior Nutrition Services, both congregate and home-delivered meals, are provided at the following eight locations: Placerville, Diamond Springs, Greenwood, Pollock Pines, South Lake Tahoe, Pioneer Park, El Dorado Hills and Cameron Park. This approval publicly demonstrates recognition of a well-managed and vital program, not only insuring continued access to services, but also insuring an opportunity for recipients to access information and assistance about other community services from program staff. The County also operates a Senior Nutrition Site on the East Slope within the South Lake Tahoe Senior Center in a cooperative venture with the City of South Lake Tahoe. Congregate meal service is now provided three days per week at the Cameron Park Community Center. This is the result of a collaboration between AAA, Cameron Park Community Services District.

**El Dorado Hills Senior Center.** An example of a public/private partnership is that which is between the County and the El Dorado Hills Community Services District to provide enhanced services to the older adults residing in the El Dorado Hills area. The County owns the El Dorado Hills Senior Center and operates the Senior Nutrition Program and the Senior Day Care Program located within the Senior Center. The El Dorado Hills Community Services District funds the Senior Center staff and develops and manages the programs and activities. The Senior Center offers numerous opportunities for older adults to learn, engage in recreation, socialize, and enjoy a hot, nutritionally-balanced lunch.

**Community Focal Points.** The Placerville Senior Center, El Dorado Hills Senior Center, and South Lake Tahoe Senior Center serve as focal points for older adults and their families to turn to for information or to receive services. The statewide toll-free 800 number is advertised in every monthly issue of the Senior Times newsletter, a publication of the AAA with a distribution of 1,400 and 100 viewed online annually. The 800 number is also included in all press releases to the media and on all program brochures. The Information and Assistance program serves as the visible point of contact into the continuum of care for older and disabled adults in El Dorado County. All eight of the Senior Nutrition Congregate Dining Centers also serve as points of contact for the public inquiring about services.

**Family Caregiver Support Program (FCSP) Collaboratives.** The El Dorado County community is equipped with many effective programs and resources. As often as possible, AAA programs incorporate the use of these resources, whether in the South Lake Tahoe service area, Placerville, or other more remote regions. Resources are utilized to the best advantage possible for the benefit of the clients being served. FCSP strives to reach the more rural and outlying areas of our County. The program provides two on-going support groups and caregiver educational classes throughout the county. In many areas, FCSP provides the only continuing support services available to caregivers. FCSP has also developed partnerships with numerous agencies such as the Alzheimer's Association of Northern California and Northern Nevada, the IHSS/Public Authority to provide trainings for their caregivers, and grandparents caring for their grandchildren who contact FCSP are referred to appropriate programs to meet their needs within the community. The Gold Country Chapter of the American Sewing Guild provide numerous specific items requested by caregivers to enhance their caregiving ability.

## Section 4: Planning Process/Establishing Priorities

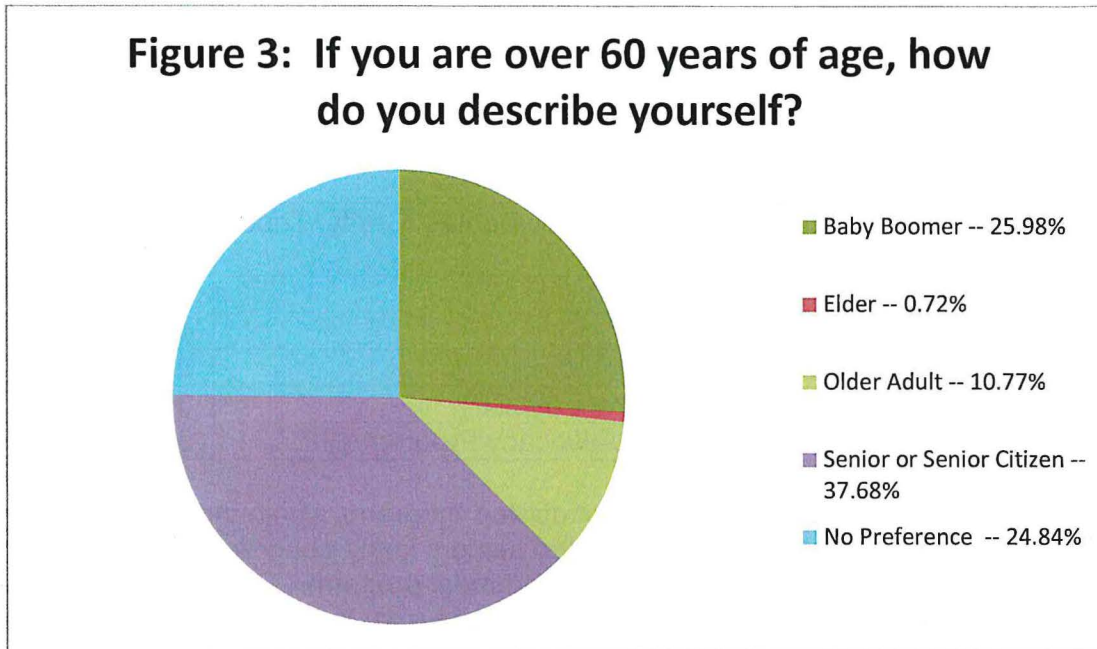
The AAA's relationship with county government and its working relationship in the community provide the opportunity for the broadest possible input from the entire planning and service area (PSA). The numerous local community groups and interagency committees on which AAA staff and Commission on Aging (COA) members participate have been described earlier in this document. A high priority of the El Dorado County AAA is to work collaboratively with providers and advocates identifying and addressing the needs of El Dorado County older adults and disabled persons. The committees are an essential vehicle used to collaborate on ideas and reach mutual goals. In addition to this, as a direct service provider, the AAA is acutely aware of older adult needs and gaps in services as we are met daily with the challenges of addressing the basic needs of our most vulnerable community members as they strive to remain in their own homes for as long and as safely as possible.

COA has representation from five Supervisorial districts, one Board of Supervisors member at large, two city appointments (Placerville and South Lake Tahoe), and six Commission-appointed community representatives. COA members may adopt specific issues of concern and advocate for the needs of older adults within their communities. Updates of activities are provided at the monthly Commission meetings. This input provides great influence in the AAA planning process. COA members are also charged with keeping their communities informed about services available to older adults, and to serve as a liaison to the AAA and governing board regarding issues of concern. Based on their knowledge, experience and interactions within the community, the COA is actively involved in creating and meeting objectives for the Area Plan.

Public entities are informed of the service needs in the PSA through the AAA's association with the Board of Supervisors, the Cities of Placerville and South Lake Tahoe, and other service providers. Outreach efforts and information are further disseminated through press releases, flyers, brochures, a monthly newsletter, and presentations to service groups, faith-based organizations, health care providers, and other interested parties.

### B. Do Not Call Us “Old”

There has been much discussion among the many groups, classes, and the general population about the new term “Older Adult”. The question was asked on the survey, “If you are over 60 years of age, how do you describe yourself?” The overwhelming response (37.68%) was “Senior or Senior Citizen”. The results are in Figure 3 below.



Many individuals feel that the term “senior” is one of status, knowledge, and respect. Examples include: senior in high school and college, senior partners in a law firm, senior officers in the military, etc. Many individuals feel they have reached an important part of their life, are active members of the community, and have a lot of knowledge and life experiences to share with others. In their opinion, they are, a “senior.”

The term “old” was not preferred. Comments have included: “Old as what?” “Old as dirt?” “Older than the next person?” No one wanted to be identified as old or elderly.

### C. Needs Assessment

The analysis process provides an opportunity to probe older adults and knowledgeable individuals in the community for their evaluation of the effectiveness of service providers and the service delivery system. The survey results showed unmet needs in the following areas: Outreach, Availability and Increasing Access of Services, Emergency Preparedness, Volunteering, Civic Engagement, Community Collaboration and Education and Training.



The program ranked fifth is the Senior Shuttle program. Currently, transportation is provided through a county-owned van and driven by a volunteer. The program takes seniors to local grocery stores and other shopping areas. It is currently under-utilized and will be re-structured to increase ridership.

The question about which programs are most important had a follow-up question as to which programs individuals were currently accessing and which programs they planned to access in the future. The top responses are listed in Table 10 Currently Accessing and Table 11 Plan to Access below.

**Table 10**  
Which of the programs have you or your family accessed?

Top Programs Currently Accessing	Currently Accessing	Plan to Access
Senior Nutrition Congregate Meals	70.26%	29.74%
Senior Legal Services Program	65.28%	34.72%
Senior Nutrition Home Delivered Meals	57.95%	42.05%
Information & Assistance	56.98%	43.02%
Senior Center Activities (i.e. Exercise, Games, Crafts, Trips, Social Activities)	51.11%	48.89%
Adult Day Care Services	48.12%	51.88%

**Table 11**  
Which of the programs do you or your family plan to access in the future?

Top Programs Planning to Be Accessed	Plan to Access	Currently Accessing
You Are Not Alone (YANA) Telephone Reassurance Program	85.96%	14.04%
Senior Shuttle	81.58%	18.42%
Long Term Care Ombudsman	72.00%	28.00%
Senior Peer Counseling	65.52%	34.48%
Senior Health Education Program (Tai Chi, Evidence Based Programs)	64.41%	35.59%
Weatherization	61.49%	38.51%

Many of the programs that were noted as most important in Table 9 also appear in Table 10 as programs currently being utilized by seniors.

Looking ahead, the top programs that seniors are planning to access are those that will assist them as they age in place allowing them to remain longer in their homes. The YANA program provides daily check-in calls to frail home-bound seniors. Also included is the Ombudsman program which advocates for residents living in skilled nursing facilities, assisted living facilities and board and care homes.

Respondents are interested in the following activities:

**Table 13**  
**Top Interests of Survey Respondents**

Activity	2016-2020 Survey Responses	2020-2024 Survey Responses
Physical Exercise	64.63%	58.81%
Entertainment	61.45%	52.75%
Recreation	55.10%	55.84%
Libraries	45.12%	41.85%
Community Involvement	44.22%	34.36%
Volunteering	43.76%	39.54%
Lifelong Learning Opportunities	N/A	37.00%

The top interests of respondents have not changed during the last four years. Lifelong learning opportunities is a new activity added to the 2020 survey.

The majority of caregiver respondents take care for their spouse (51.61%) and/or their parents (20.97%). The caregiving is provided to a person with memory or cognitive deficiencies (46.04%), someone who has physical limitations (67.33%), and/or the caregivers provide transportation for someone unable to drive (49.5%).

The majority of respondents stated they did not need assistance. Those that responded that “some physical assistance” was needed, identified the tasks in Table 14 below.

**Table 14**  
**Tasks Needing Some Physical Assistance**

Task Needing Some Physical Assistance	Percent
Household Chores	15.19%
Keeping my Balance	13.49%
Walking	12.40%

The top four tasks for respondents who were dependent and needed assistance were: Transportation (11.95%), Shopping (9.94%), Preparing Meals (9.40%), Household Chores (7.85%), Managing Medications (6.89%) and Managing Money (6.87%).

## Section 6: Targeting

“Targeting” refers to ensuring the provision of services to certain groups of eligible consumers because either these individuals are in greater need of the services or their usage is low in proportion to their representation in the larger population. The Area Agency on Aging (AAA) is charged with addressing and planning for a broad spectrum of matters related to involvement of older adults residing in El Dorado County. The goals and objectives outlined in this four-year Area Plan are designed to address the needs of vulnerable populations.

Resources are allocated and priority assigned to targeted populations as mandated in the Older Americans Act (OAA). These individuals live in a variety of settings within our community, including long-term care facilities. They include older individuals, particularly low-income minority older adults, with the greatest economic need resulting from an income level at or below the federal poverty line and those with greatest social need caused by physical and mental disabilities, language barriers, and cultural, social, or geographical isolation. Other older adult populations of special interest include individuals with the following characteristics: individuals residing in rural areas; individuals who are frail; individuals with severe disabilities; isolated, abused, neglected, and/or exploited individuals; individuals who are of limited English-speaking ability; individuals with Alzheimer’s disease or related disorders and their caregivers; Native Americans; unemployed, low-income individuals; and caregivers as defined in Title III E.

The Older Americans Act designates certain services as priority services and requires that an adequate proportion of OAA (Title IIIB) funds be allocated to these services. These designated priority services are Access, In-Home Services, and Legal Assistance. Historical percentages were used to determine funding for priority services, as well as input from the older adult needs assessment, Commission on Aging (COA), and input from the public hearings.

The community needs assessment process was designed to identify the core issues and needs of the targeted populations used to develop the consequent goals and objectives for the agency. Although it is nearly impossible to obtain an accurate listing of the targeted populations, identification involved focusing on individuals with the greatest economic and social needs. Methods for identifying these populations include periodic need assessments, qualitative and quantitative field research, planning process, and establishment of program area priorities, which focus on at-risk populations. Through our public hearings, every attempt is made to reach and elicit feedback from these vulnerable populations. The required legal notification was published in the two major newspapers within the PSA, The Mountain Democrat and the Tahoe Daily Tribune. However, due to COVID-19 and the closure of the congregate meal sites, senior centers, and community centers, Public Hearing notices were not posted at these locations. The notice was posted online on the COA page of the El Dorado County website.

## Section 7: Public Hearings

Due to COVID-19 and the State of California’s Shelter-in-Place Order, the Public Hearing for the 2020 – 2024 Area Plan was held as a Zoom meeting in conjunction with the Commission on Aging meeting. An overview of the goals and objectives developed as a result of the community needs assessment were presented at the public hearing to solicit public input and insure opportunities for older adults to provide oral and written testimony to the development of the Plan.

In June 2020, the public notice for the 2020 - 2024 Area Plan was posted in the Mountain Democrat Newspaper and the on-line newspaper in the South Lake Tahoe area.

July 7, 2020  
 Via Zoom Virtual Meeting  
 El Dorado County  
 Commission on Aging Meeting

### **SECTION 7 PUBLIC HEARINGS**

### **PSA 29**

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
2020-2021	7-7-20	Zoom Virtual Meeting	23	No	No
2021-2022					
2022-2023					
2023-2024					

#### **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.  
 The Long-Term Care Ombudsman was a key participant in the development of goals and objectives in the Area Plan. The Commission on Aging distributed copies of the Needs Assessment Survey to various agencies throughout the county. The Needs Assessment was also distributed to all home delivered meal participants. Unfortunately, due to COVID-19 additional outreach efforts were not conducted.

<sup>2</sup> A translator is not required unless the AAA determines a significant number of attendees require translation services.

<sup>3</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.

## Section 8: Identification of Priorities

This Area Plan will help guide this agency through the four years of providing services to older adults and disabled persons in the County. Changes in population, as outlined in the demographic section of this Plan, are dramatic. The increased growth rate in the older adult population for this planning and service area (PSA) places a greater emphasis on the need for services and a greater geographic distribution of those services.

Historically, Federal and State funds have not kept pace with the demand for services, and the County has provided significant funding to this PSA. While County support for older adult programs continues to be excellent, financial realities inevitably may affect the County's ability to continue to meet the needs, especially in light of the increase in the older adult population. Many services are needed to effectively and efficiently provide for the needs of our aging community members. The fact that the Area Agencies on Aging and Older American Act programs are most appropriately poised to meet these needs must be balanced with the reality of current Federal and State funding mechanisms. The demand for supportive services is continuing to grow at a rate where adequate service delivery will be challenged.

Without exception, targeting of services to specific older adult populations is a priority of this Plan. Not only will low-income minority older adults be targeted for services, but also older adults who have minimum and inadequate financial resources, are frail and at-risk of institutionalization, reside in rural areas in the county, and are otherwise isolated. Of particular interest to this AAA is the provision of services to the most frail, socially isolated older adults and those with Alzheimer's disease or related disorders. The AAA is dedicated to committing resources to ensure the availability and accessibility of vital safety net services necessary to help our most vulnerable older adults and functionally impaired adults maintain independence, dignity, and control over where and how they live.

In preparation of an aging landscape, the AAA will continue collaborative and advocacy efforts with other service providers to meet the needs of older adults and disabled persons in the County. This process will require a commitment of public, private, and voluntary resources. The AAA and Commission on Aging will persist in ardently advocating for maintaining existing funding for senior services, as well as pursuing other avenues of funding.

### A. Adequate Proportion

The Older Americans Act designates certain services as priority services and requires that an adequate proportion of Older Americans Act (Title IIIB) funds be allocated to these services. If changes are made to these proportions, a specific public hearing process is required. These designated priority services are:

- Access (outreach, transportation, information and assistance, and care management)
- In-Home Services
- Legal Assistance

Issues of discussion in preparation for goal determination included the primary concerns of older adults in our community, the AAA response to consumer need, and priorities for Older Americans Act funding. Examination focused on the following list of targeted older adult populations: low-income minority, isolated (socially and/or geographically), disabled (physically and/or cognitively), boomers, abused, neglected and/or exploited, and lesbian, gay, bisexual, transgender persons.

### C. Preparing for the Increased Senior Population in 2020 and Beyond

Our mandate is to meet the ever-changing needs of the older population and to listen with full attention as older adults and their caregivers inform us about these needs and suggestions for service delivery so they can live meaningful lives with quality of life and dignity. The AAA's priority is to target the most frail and at-risk populations of the County. However, the AAA also recognizes that the 50+ population in the County is rapidly growing. The future long-range planning for older adults and persons with disabilities in El Dorado County must take into account the upcoming age wave due to the boomer population.

Without a doubt, there are many opportunities and challenges presented by the growth in the older adult population in El Dorado County. The most effective way to ensure that the local aging network makes the decisions that will have the greatest impact is by staying informed of the concerns and needs of our older residents. The results of this needs assessment process provide a community-based perspective to the larger, national demographic shift and a place to begin the local conversation and planning process. By taking small but intentional steps today, communities throughout the region will be able to enhance the quality of life for residents of all ages, and in the process make El Dorado County a place to live well for all ages.

The AAA is in an excellent position to provide leadership in guiding the community to meet the needs of this growing and very diverse population. Planning will require collaboration between the AAA, Commission on Aging, Board of Supervisors, community leaders, service organizations, and older adults themselves. Knowing that funding will not keep pace with the increasing need for services, several goals and objectives address empowering individuals to remain independent by increasing awareness of the availability of services with outreach, education and training, addressing the changing needs of seniors by promoting active aging, improving health and wellness and giving back to the community and promote elder abuse prevention activities.

Goal #   1  

<b>Goal:</b> Outreach			
<b>Rationale:</b> The Area Agency on Aging (AAA) offers many services within the Planning Service Area (PSA) that can be of benefit to many seniors. In order to maximize the awareness and usage of programs, effective outreach is necessary. This will enhance the ability of older adults to make decisions regarding appropriate and available services.			
List Objective Number(s) ___ and Objective(s) [Refer to CCR Article 3, Section 7300 (c)]	Projected Start and End Dates	Title IIIB Funded PD or C <sup>3</sup>	Update Status <sup>4</sup>
1.1. Create a marketing campaign and schedule to increase identity in the community and promote AAA and other services of benefit to seniors. The marketing schedule would include monthly press releases, articles/features in local magazines, media lists, Facebook, twitter, etc. Explore the feasibility of a Senior Services Facebook account  Measurement: Number of press releases and/or articles/features in magazines	7/1/20-6/30/22		New
1.2. Contact mobile home park managers, apartment managers, local churches, etc. to distribute complimentary lunch coupons and menus to seniors.  Measurement: Increase in number of congregate senior nutrition meals	7/1/20-6/30/24		New

<sup>3</sup> Indicate if Program Development (PD) or Coordination (C) is the objective (cannot be both). If a PD objective is not completed in the timeline required and is continuing in the following year, any objective revision must state additional tasks.

<sup>4</sup> Use for the Area Plan Updates only to indicate if the objective is New, Continued, Revised, Completed, or Deleted.

**Goal: 2**

<p><b>Goal: Engaging the Changing Senior ---Availability and Increasing Access of Aging Services</b></p>			
<p><b>Rationale:</b> The majority of senior services are provided at the dedicated senior centers located in Placerville, El Dorado Hills, and South Lake Tahoe. The senior population is continuing to increase at a rapid rate and expanded services are needed in all areas, especially South Lake Tahoe and outlying areas of the county. The Area Agency on Aging (AAA) strives to provide opportunities and services for seniors in all communities, as appropriate.</p>			
<p><b>List Objective Number(s) ___ and Objective(s)</b> <b>[Refer to CCR Article 3, Section 7300 (c)]</b></p>	<p><b>Projected Start and End Dates</b></p>	<p><b>Title IIIB Funded PD or C<sup>5</sup></b></p>	<p><b>Update Status<sup>6</sup></b></p>
<p>2.1 Explore new and innovative ideas to increase interest and attendance at congregate meal sites. Possibilities include: new or alternative entrees, increasing frequency of favorites, types of frozen meals, entertainment or informational events, etc.</p> <p>Measurement: Increased number congregate of meals served</p>	<p>7/1/20-6/30/24</p>		<p>New</p>
<p>2.2 Re-vamp the Senior Shuttle program to align with the needs of the seniors and with the goal of increasing ridership. Explore the feasibility of expanding door-to-door services for seniors and disabled in rural and under-served communities Survey seniors to gather ideas, attend focus groups, and create a pilot program</p> <p>Measurement: Increased Ridership</p>	<p>7/1/23-6/30/24</p>		<p>New</p>
<p>2.3 Multiple activities and classes occur at the Placerville Senior Center on a daily basis. Explore the use of the current AAA data base or the purchase of a compatible data base to track the attendance at various classes and activities held at the Placerville Senior Center.</p> <p>Measurement: Implementation of Attendance System</p>	<p>7/1/23-6/30/24</p>		<p>New</p>

<sup>5</sup> Indicate if Program Development (PD) or Coordination (C) is the objective (cannot be both). If a PD objective is not completed in the timeline required and is continuing in the following year, any objective revision must state additional tasks.

<sup>6</sup> Use for the Area Plan Updates only to indicate if the objective is New, Continued, Revised, Completed, or Deleted.



Goal # 3

<b>Goal: Emergency Preparedness</b>			
<b>Rationale:</b> El Dorado County is a rural county in Northern California and is subject to extreme cold in the winter and extreme heat in the summer. In addition, because of its rural nature, the county is predisposed to wild fires, mudslides and floods. The PG&E Planned Power Outages have affected the seniors within the communities, especially in the more remote areas.			
<b>List Objective Number(s) ___ and Objective(s)</b> <b>[Refer to CCR Article 3, Section 7300 (c)]</b>	<b>Projected Start and End Dates</b>	<b>Title IIIB Funded PD or C<sup>7</sup></b>	<b>Update Status<sup>8</sup></b>
3.1 Distribute Public Safety Power Outage preparedness information and CodeRED Information during the spring, summer, and fall months. Assist older adults in signing up for CodeRED notifications in the event of an emergency (earthquakes, evacuations, etc.) in El Dorado County.  Measurement: Number of Assistance with Sign-Ups	7/1/20-6/30/24		New
3.2 Provide CDA approved Emergency Non-Perishable Meals to all home delivered meal participants when conditions warrant and/or when there is an advance notice of a power shut-off  Measurement: Number of emergency meals distributed	7/1/20-6/30/24		New
3.3 To increase awareness and educate consumers on Public Safety Power Shutoff (PSPS) events and Wildfire Safety, staff will host semiannual presentations/workshops throughout El Dorado County.  Measurement: Number of participants attending the presentations/workshop	7/1/20-6/30/24		New

<sup>7</sup> Indicate if Program Development (PD) or Coordination (C) is the objective (cannot be both). If a PD objective is not completed in the timeline required and is continuing in the following year, any objective revision must state additional tasks.

<sup>8</sup> Use for the Area Plan Updates only to indicate if the objective is New, Continued, Revised, Completed, or Deleted.

Goal # 4

<b>Goal: Volunteering, Civic Engagement, Community Collaboration</b>			
<b>Rationale:</b> The Older Adults Needs Assessment identified Volunteering as an area of interest for many seniors. The majority of our senior programs would not be as robust without the assistance of volunteers. It is important that seniors are engaged in their communities and feel that they are needed and relevant.			
List Objective Number(s) ___ and Objective(s) [Refer to CCR Article 3, Section 7300 (c)]	Projected Start and End Dates	Title IIIB Funded PD or C <sup>9</sup>	Update Status <sup>10</sup>
4.1 Explore the feasibility of creating a Volunteer Coordinator position within HHSA.  Measurement: New Position	7/1/23-6/30/24		New
4.2 Recruit and maintain volunteers to assist in various programs. Develop a volunteer pool. If appropriate, volunteers would be assigned to specific programs and work directly with the program supervisor.  Measurement: Number of volunteers	7/1/20-6/30/24		New
4.3 LTCOP will conduct recruitment activities and schedule training to increase the number of State-Certified Ombudsman volunteers from 7 to 10 by 6/30/2020. LTCOP will add five (5) new training topics to its local curriculum for certified Ombudsman volunteers by 6/30/2021.  Measurement: Number of LTC Volunteers and the number of certification training topics	7/1/20-6/30/21		New

<sup>9</sup> Indicate if Program Development (PD) or Coordination (C) is the objective (cannot be both). If a PD objective is not completed in the timeline required and is continuing in the following year, any objective revision must state additional tasks.

<sup>10</sup> Use for the Area Plan Updates only to indicate if the objective is New, Continued, Revised, Completed, or Deleted.

Goal # 5

<b>Goal: Education &amp; Training</b>			
<p><b>Rationale:</b> The Older Adults Needs Assessment identified Education as an area of interest to many seniors. The survey also identified many seniors are caring for their spouses who have physical limitations and memory or cognitive deficiencies. Training will provide these seniors with support and education to become effective caregivers.</p>			
<b>List Objective Number(s) ___ and Objective(s)</b> <b>[Refer to CCR Article 3, Section 7300 (c)]</b>	<b>Projected Start and End Dates</b>	<b>Title IIIB Funded PD or C<sup>11</sup></b>	<b>Update Status<sup>12</sup></b>
<p>5.1 The Area Agency on Aging and COA will collaborate with Barton Medical Center in South Lake Tahoe and Marshall Medical Center in Placerville to promote an increase in attendance in the evidence based class, Power Tools for Caregivers which will be held twice per year.</p> <p>Measurement: The number of unduplicated attendees in each class.</p>	<p>7/1/20-6/30/24</p>		<p>New</p>
<p>5.2 FCSP will continue to provide/facilitate support groups in South Lake Tahoe and El Dorado Hills. A new support group will be piloted in another area of the county.</p> <p>Measurement: Number of support groups held</p>	<p>7/1/20-6/30/24</p>		<p>New</p>
<p>5.3 Educate general public from high school students to seniors. Curriculum for understanding the aging process and the various programs available for seniors and their family.</p> <p>Measurement: Courses held, number of attendees</p>	<p>7/1/23-6/30/24</p>		<p>New</p>
<p>5.4 Collaborating with facility staff and discharge planners, LTCOP will be alerted to at-risk residents, new residents, un-befriended residents and those lacking regular visitors. By 12/30/20, LTCOP will have established protocol to ensure vulnerable residents are identified.</p> <p>Measurement: Established policy and procedure</p>	<p>7/1/20-6/30/24</p>		<p>New</p>

<sup>11</sup> Indicate if Program Development (PD) or Coordination (C) is the objective (cannot be both). If a PD objective is not completed in the timeline required and is continuing in the following year, any objective revision must state additional tasks.

<sup>12</sup> Use for the Area Plan Updates only to indicate if the objective is New, Continued, Revised, Completed, or Deleted.

## Section 10: Service Unit Plan (SUP) Objectives Guidelines

### SECTION 10 - SERVICE UNIT PLAN (SUP) OBJECTIVES

PSA 29

#### TITLE III/VIA 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](#).

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

#### Home-Delivered Meal

Unit of Service = 1 meal

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	120,000	1, 2,3	3.2, 3.7
2021-2022			
2022-2023			
2023-2024			

#### Assisted Transportation (Access)

Unit of Service = 1 one-way trip

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	6	1, 2	
2021-2022			
2022-2023			
2023-2024			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	6,000	5	
2021-2022			
2022-2023			
2023-2024			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	9,000	1, 2, 3	1.3, 2.4
2021-2022			
2022-2023			
2023-2024			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2020-2021	300	1, 2, 3	1.2
2021-2022			
2022-2023			
2023-2024			

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

- Each **Title III B** “Other” service must be an approved NAPIS Program 15 service listed on the “Schedule of Supportive Services (III B)” page of the Area Plan Budget (CDA 122) and the CDA Service Categories and Data Dictionary.
- Identify **Title III B** services to be funded that were not reported in NAPIS categories 1–14 and 16. (Identify the specific activity under the Other Supportive Service Category on the “Units of Service” line when applicable.)

**Title III B, Other Priority and Non-Priority Supportive Services**

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

**Service Activities: Health Promotions - Bingocize**

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (Required)
2020-2021	36	2	2.5
2021-2022			
2022-2023			
2023-2024			

<p>4. FY 2021-2022 Baseline Resolution Rate:  Number of complaints resolved _____ + Number of partially resolved complaints _____  divided by the Total Number of Complaints Received _____ = Baseline Resolution Rate  _____ %  FY 2023-2024 Target Resolution Rate _____ %</p>
<p>Program Goals and Objective Numbers: <b>4.3, 4.4, 4.5</b></p>

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

1. FY 2018-2019 Baseline: Number of Resident Council meetings attended <u>55</u> FY 2020-2021 Target: _____
2. FY 2019-2020 Baseline: Number of Resident Council meetings attended _____ FY 2021-2022 Target: _____
3. FY 2020-2021 Baseline: Number of Resident Council meetings attended _____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Resident Council meetings attended _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: _____

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

1. FY 2018-2019 Baseline: Number of Family Council meetings attended <u>1</u> FY 2020-2021 Target: _____
2. FY 2019-2020 Baseline: Number of Family Council meetings attended _____ FY 2021-2022 Target: _____
3. FY 2020-2021 Baseline: Number of Family Council meetings attended _____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Family Council meetings attended _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: _____

**D. Information and Assistance to Facility Staff (NORS Elements S-53 and S-54) Count of instances of Ombudsman representatives' interactions with facility staff for the purpose of providing general information and assistance unrelated to a complaint. Information and Assistance may be accomplished by telephone, letter, email, fax, or in-person.**

1. FY 2018-2019 Baseline: Number of Instances <u>154</u> FY 2020-2021 Target: _____
2. FY 2019-2020 Baseline: Number of Instances _____ FY 2021-2022 Target: _____
3. FY 2020-2021 Baseline: Number of Instances _____ FY 2022-2023 Target: _____
4. FY 2021-2022 Baseline: Number of Instances _____ FY 2023-2024 Target: _____
Program Goals and Objective Numbers: _____

etc.) Be specific about the actions planned by the local LTC Ombudsman Program. Enter information in the relevant box below.

<p><b>FY 2020-2021</b></p> <p><b>FY 2020-2021 Systems Advocacy Effort(s):</b> (Provide one or more new systems advocacy efforts)</p> <p>Effective March 16, 2020, the State Ombudsman directed Ombudsman representatives to refrain from conducting facility visits. LTCO representatives will continue to resolve complaints, protect rights, and promote access to services for residents before, during, and after emergencies, including the COVID-19 crisis. Ombudsman representatives provide remote advocacy services by regularly contacting facilities, residents, resident representatives, families, and resident councils by phone, Skype, and window visits.</p>
<p><b>FY 2021-2022</b></p> <p><b>Outcome of FY 2020-2021 Efforts:</b></p> <p><b>FY 2021-2022 Systems Advocacy Effort(s):</b> (Provide one or more new systems advocacy efforts)</p>
<p><b>FY 2022-2023</b></p> <p><b>Outcome of FY 2021-2022 Efforts:</b></p> <p><b>FY 2022-2023 Systems Advocacy Effort(s):</b> (Provide one or more new systems advocacy efforts)</p>
<p><b>FY 2023-2024</b></p> <p><b>Outcome of 2022-2023 Efforts:</b></p> <p><b>FY 2023-2024 Systems Advocacy Effort(s):</b> (Provide one or more new systems advocacy efforts)</p>

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

**Measures and Targets:**

**A. Routine Access: Nursing Facilities (NORS Element S-58)** Percentage of nursing facilities within the PSA that were visited by an Ombudsman representative at least once each quarter **not** in response to a complaint. The percentage is determined by dividing the number of nursing facilities in the PSA



<p>4. FY 2021-2022 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint _____ divided by the total number of RCFEs _____ = Baseline _____ %</p> <p>FY 2023-2024 Target: _____ %</p>
<p>Program Goals and Objective Numbers: _____</p>

**C. Number of Full-Time Equivalent (FTE) Staff (NORS Element S-23)** This number may only include staff time legitimately charged to the LTC Ombudsman Program. Time spent working for or in other programs may not be included in this number. For example, in a local LTC Ombudsman Program that considers full-time employment to be 40 hour per week, the FTE for a staff member who works in the Ombudsman Program 20 hours a week should be 0.5, even if the staff member works an additional 20 hours in another program.

<p>1. FY 2018-2019 Baseline: <u>8</u> FTEs FY 2020-2021 Target: <u>1.2</u> FTEs</p>
<p>2. FY 2019-2020 Baseline: _____ FTEs FY 2021-2022 Target: _____ FTEs</p>
<p>3. FY 2020-2021 Baseline: _____ FTEs FY 2022-2023 Target: _____ FTEs</p>
<p>4. FY 2021-2022 Baseline: _____ FTEs FY 2023-2024 Target: _____ FTEs</p>
<p>Program Goals and Objective Numbers: _____</p>

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

<p>1. FY 2018-2019 Baseline: Number of certified LTC Ombudsman volunteers <u>7</u> FY 2020-2021 Projected Number of certified LTC Ombudsman volunteers _____</p>
<p>2. FY 2019-2020 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2021-2022 Projected Number of certified LTC Ombudsman volunteers _____</p>
<p>3. FY 2020-2021 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2022-2023 Projected Number of certified LTC Ombudsman volunteers _____</p>
<p>4. FY 2021-2022 Baseline: Number of certified LTC Ombudsman volunteers _____ FY 2023-2024 Projected Number of certified LTC Ombudsman volunteers _____</p>
<p>Program Goals and Objective Numbers: _____</p>

**Outcome 3. Ombudsman representatives accurately and consistently report data about their complaints and other program activities in a timely manner. [Older Americans Act Reauthorization Act of 2016, Section 712(c)]**

**Measures and Targets:**

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

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

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

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

AAAs must provide one or more of the service categories below.

**NOTE: The number of sessions refers to the number of presentations and not the number of attendees**

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

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

The agency receiving Title VIIA Elder Abuse Prevention funding is: AAA

<b>Fiscal Year</b>	<b>Total # of Public Education Sessions</b>
2020-2021	10
2021-2022	
2022-2023	
2023-2024	

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

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

<b>Fiscal Year</b>	<b>Total # of Hours Spent Developing a Coordinated System</b>
2020-2021	20
2021-2022	
2022-2023	
2023-2024	

<b>Fiscal Year</b>	<b>Total # of Copies of Educational Materials to be Distributed</b>	<b>Description of Educational Materials</b>
<b>2020-2021</b>		
<b>2021-2022</b>		
<b>2022-2023</b>		

**TITLE IIIE 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. Refer to the CDA Service Categories and Data Dictionary Revisions Effective July 2018 for eligible activities and service unit measures. Specify proposed audience size or units of service for ALL budgeted funds

**Direct and/or Contracted IIIE Services**

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

<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>		
2020-2021			
2021-2022			
2022-2023			
2023-2024			
<b>Support Services</b>	<b>Total hours</b>		
2020-2021			
2021-2022			
2022-2023			
2023-2024			
<b>Respite Care</b>	<b>Total hours</b>		
2020-2021			
2021-2022			
2022-2023			
2023-2024			
<b>Supplemental Services</b>	<b>Total occurrences</b>		
2020-2021			
2021-2022			
2022-2023			
2023-2024			

- PM 2.5 Enrollment Contacts ~ Percentage of contacts with one or more qualifying enrollment topics discussed

AAA's should demonstrate progress toward meeting or improving on the Performance requirements established by CDA and ACL as is displayed annually on the *HICAP State and Federal Performance Measures* tool located online at:

<https://www.aging.ca.gov/Providers and Partners/Area Agencies on Aging/#pp-planning>.

(Reference CDA PM 17-11 for further discussion, including current HICAP Performance Measures and Definitions).

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

**HICAP Legal Services Units of Service (if applicable) <sup>6</sup>**

Fiscal Year (FY)	3.1 Estimated Number of Clients Represented Per FY (Unit of Service)	Goal Numbers
2020-2021	6	
2021-2022		
2022-2023		
2023-2024		

Fiscal Year (FY)	3.2 Estimated Number of Legal Representation Hours Per FY (Unit of Service)	Goal Numbers
2020-2021	10	
2021-2022		
2022-2023		
2023-2024		

Fiscal Year (FY)	3.3 Estimated Number of Program Consultation Hours Per FY (Unit of Service)	Goal Numbers
2020-2021	12	
2021-2022		
2022-2023		
2023-2024		

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

**Disaster Preparation Planning** Conducted for the 2020-2024 Planning Cycle Older Americans Act Reauthorization Act of 2016, Section 306(a)(17); 310, CCR Title 22, Sections 7529 (a)(4) and 7547, W&I Code Division 8.5, Sections 9625 and 9716, CDA Standard Agreement, Exhibit E, Article 1, 22-25, Program Memo 10-29(P)

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

*The El Dorado County Office of Emergency Services (OES) has lead responsibility when disasters occur locally. The El Dorado County Operational Area Emergency Operations Plan (EOP) provides guidance for El Dorado County government and other local agencies on prevention, preparation, response and recovery from emergency and disaster situations. The Area Agency on Aging (AAA) role is clearly defined in the EOP and responsibilities include: identifying and locating at-risk individuals with the potential need for assistance in the event of an emergency, providing information on residential and skilled nursing facilities, providing trained volunteers and providing vendor information for food, medical supplies, equipment and pharmaceuticals. The AAA also plays an essential role in preparing for local heat/cold emergencies. The AAA provides staff and outreach and assistance in identifying vulnerable County residents during extreme heat and cold weather conditions.*

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

Name	Title	Telephone	email
Moke Auwae	Sergeant	Office: 530-621-5170	<a href="mailto:auwaem@edso.org">auwaem@edso.org</a>
Todd Crawford	Deputy Sheriff	Office: 530-621-5131	<a href="mailto:crawfordt@eso.org">crawfordt@eso.org</a>
Jared Melton	Deputy Sheriff	On-Call through Central Dispatch 530-621-6600	<a href="mailto:meltonj@edso.org">meltonj@edso.org</a>

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

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

The CCR, Article 3, Section 7312, requires the AAA to allocate an “adequate proportion” of federal funds to provide Access, In-Home Services, and Legal Assistance in the PSA. The annual minimum allocation is determined by the AAA through the planning process. The minimum percentages of applicable Title III B funds<sup>13</sup> listed below have been identified for annual expenditure throughout the four-year planning period. These percentages are based on needs assessment findings, resources available within the PSA, and discussions at public hearings on the Area Plan.

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

**Access:**

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

2020-21 18 %                      21-22 18%                      22-23 18%                      23-24 18%

**In-Home Services:**

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

2020-21 1.3 %                      21-22 1.3%                      22-23 1.3%                      23-24 1.3%

**Legal Assistance Required Activities:<sup>14</sup>**

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

2020-21 30 %                      21-22 30%                      22-23 30%                      23-24 30%

Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA. 29

The on-going needs assessment and funding constraints are the determinate factors for allocation of funding for all services. However, the El Dorado County AAA remains resolute in maintaining funding levels for priority services. The minimum funding spent on access (18%), in-home services (1.3%) and legal services (30%) is not anticipated to change during the next four years.

<sup>13</sup> Minimum percentages of applicable funds are calculated on the annual Title IIIB baseline allocation, minus Title IIIB administration and minus Ombudsman. At least one percent of the final Title IIIB calculation must be allocated for each “Priority Service” category or a waiver must be requested for the Priority Service category(s) that the AAA does not intend to fund.

<sup>14</sup> Legal Assistance must include all of the following activities: Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar.



*The community needs assessment process was designed to identify the core issues and needs of the targeted populations used to develop the consequent goals and objectives for the agency. Although it is nearly impossible to obtain an accurate listing of the targeted populations, identification involved focusing on individuals with the greatest economic and social needs. Methods for identifying these populations include periodic need assessments, qualitative and quantitative field research, planning process, and establishment of program area priorities, which focus on at-risk populations. Through our public hearings, every attempt is made to reach and elicit feedback from these vulnerable populations. Along with the required legal notification within the two major newspapers, the Mountain Democrat, and the Tahoe Daily Tribune, public hearing notices were distributed to the eight congregate nutrition sites, local senior centers, and online on the COA website.*

*The goals and objectives outlined in the Plan provide for targeting the above populations. The goals of outreach, education and training, and availability of aging services, and elder abuse prevention target the most socially isolated older and dependent adults in the community. The AAA coordinates services, planning and advocacy activities, as well as outreach efforts with various community groups that serve the socially isolated older adult. The goal of education and training also addresses the needs of older adults who wish to age in place and targets those at greatest economic and social need. The plan also provides objectives that address education and training for caregivers and Boomers. It also addresses the changing needs and interests of individuals who are becoming seniors. The last goal addresses elder abuse prevention and several objectives as specific to the Long Term Care Ombudsman Program and individuals residing in long term care facilities. Due to the rural nature of the planning and service area (PSA), several objectives target the need for improved accessibility to needed services so older adults can gain every advantage of home-and community-based support to avoid premature or inappropriate institutionalization. The AAA recognizes that if this population is to maintain its self-sufficiency, information and accessibility are priority needs.*

*The current services provided by Home-Delivered Meals Program, MSSP Care Management Program, Adult Protective Services, Information and Assistance, Senior Day Care Services, In-Home Supportive Services, Family Caregiver Support Program, and Long-Term Care Ombudsman Program are evidence of how the AAA addresses the targeted populations. We are fortunate as a single-county AAA, that we are able to provide services to the entire county. We serve our community as a focal point for older adults at our three senior centers and eight congregate nutrition sites.*

- b) *This Area Agency on Aging is currently successfully operating as a Division of the Health and Human Services Agency of El Dorado County providing Title III and Title VII services to the older adult population of this PSA. As a direct service provider, this Area Agency can seek new funding and provide new services that could benefit the older adult population of this PSA when an appropriate entity does not exist or chooses not to apply.*
- 2) *This Area Agency on Aging directly provides Title III services, including congregate nutrition, efficiently as part of a department of County government. The county and administrative infrastructure is already in place and doesn't have to be duplicated. There is increased efficiency in its record keeping and reporting requirements, both with fiscal and compliance reporting. With all aging services housed in one department, the system is well integrated, duplication of services is decreased, and services are more responsive to senior needs in the community.*

*provide new services that could benefit the older adult population of this PSA when an appropriate entity does not exist or chooses not to apply.*

- 2) *This Area Agency on Aging directly provides Title III services, including legal services, efficiently as part of a department of County government. The county and administrative infrastructure is already in place and doesn't have to be duplicated. There is increased efficiency in its record keeping and reporting requirements, both with fiscal and compliance reporting. With all aging services housed in one department, the system is well integrated, duplication of services is decreased, and services are more responsive to senior needs in the community.*

*Services Agency of El Dorado County providing Title III and Title VII services to the older adult population of this PSA. As a direct service provider, this Area Agency can seek new funding and provide new services that could benefit the older adult population of this PSA when an appropriate entity does not exist or chooses not to apply.*

- 2) *This Area Agency on Aging directly provides Title III services, including nutrition education, efficiently as part of a department of County government. The county and administrative infrastructure is already in place and doesn't have to be duplicated. There is increased efficiency in its record keeping and reporting requirements, both with fiscal and compliance reporting. With all aging services housed in one department, the system is well integrated, duplication of services is decreased, and services are more responsive to senior needs in the community.*

- 2) *This Area Agency on Aging directly provides Title III services, including senior center staffing, efficiently as part of a department of County government. The county and administrative infrastructure is already in place and doesn't have to be duplicated. There is increased efficiency in its record keeping and reporting requirements, both with fiscal and compliance reporting. With all aging services housed in one department, the system is well integrated, duplication of services is decreased, and services are more responsive to senior needs in the community.*

- 2) *This Area Agency on Aging directly provides Title III services, including telephone reassurance, efficiently as part of a department of County government. The county and administrative infrastructure is already in place and doesn't have to be duplicated. There is increased efficiency in its record keeping and reporting requirements, both with fiscal and compliance reporting. With all aging services housed in one department, the system is well integrated, duplication of services is decreased, and services are more responsive to senior needs in the community.*

- b) This Area Agency on Aging is currently successfully operating as a Division of the Health and Human Services Agency of El Dorado County providing Title III and Title VII services to the older adult population of this PSA. As a direct service provider, this Area Agency can seek new funding and provide new services that could benefit the older adult population of this PSA when an appropriate entity does not exist or chooses not to apply.*
  
- 2) This Area Agency on Aging directly provides Title III services, including home delivered nutrition services, efficiently as part of a department of County government. The county and administrative infrastructure is already in place and doesn't have to be duplicated. There is increased efficiency in its record keeping and reporting requirements, both with fiscal and compliance reporting. With all aging services housed in one department, the system is well integrated, duplication of services is decreased, and services are more responsive to senior needs in the community.*

- b) *This Area Agency on Aging is currently successfully operating as a Division of the Health and Human Services Agency of El Dorado County providing Title III and Title VII services to the older adult population of this PSA. As a direct service provider, this Area Agency can seek new funding and provide new services that could benefit the older adult population of this PSA when an appropriate entity does not exist or chooses not to apply.*
- 2) *This Area Agency on Aging directly provides title III services, including Public Information, efficiently as part of a department of County government. The county and administrative infrastructure is already in place and does not have to be duplicated. There is increased efficiency in its record keeping and reporting requirements, both with fiscal and compliance reporting. With all aging services housed in one department, the system is well integrated, duplication of services is decreased, and services are more responsive to senior needs in the community.*



- b) *This Area Agency on Aging is currently successfully operating as a Division of the Health and Human Services Agency of El Dorado County providing Title III and Title VII services to the older adult population of this PSA. As a direct service provider, this Area Agency can seek new funding and provide new services that could benefit the older adult population of this PSA when an appropriate entity does not exist or chooses not to apply.*
- 2) *This Area Agency on Aging directly provides title III services, including Assisted Transportation, efficiently as part of a department of County government. The county and administrative infrastructure is already in place and does not have to be duplicated. There is increased efficiency in its record keeping and reporting requirements, both with fiscal and compliance reporting. With all aging services housed in one department, the system is well integrated, duplication of services is decreased, and services are more responsive to senior needs in the community.*

- b) *This Area Agency on Aging is currently successfully operating as a Division of the Health and Human Services Agency of El Dorado County providing Title III and Title VII services to the older adult population of this PSA. As a direct service provider, this Area Agency can seek new funding and provide new services that could benefit the older adult population of this PSA when an appropriate entity does not exist or chooses not to apply.*
- 2) *This Area Agency on Aging directly provides title III services, including Assisted Transportation, efficiently as part of a department of County government. The county and administrative infrastructure is already in place and does not have to be duplicated. There is increased efficiency in its record keeping and reporting requirements, both with fiscal and compliance reporting. With all aging services housed in one department, the system is well integrated, duplication of services is decreased, and services are more responsive to senior needs in the community.*

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**ADVISORY COUNCIL MEMBERSHIP  
2020-2024 Four-Year Planning Cycle**

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

Total Council Membership (include vacancies) 14

Number of Council Members over age 60 10

<b>Race/Ethnic Composition</b>	<b>% of PSA's 60+Population*</b>	<b>% on Advisory Council</b>
White	<u>88.6%</u>	<u>91.7%</u>
Hispanic	<u>13.2%</u>	<u>0%</u>
Black	<u>1.0%</u>	<u>0%</u>
Asian/Pacific Islander	<u>5.0%</u>	<u>8.3%</u>
Native American/Alaskan Native	<u>1.3%</u>	<u>0%</u>
Other	<u>3.9%</u>	<u>0%</u>

\*Note: Based on the 2014 American Community Survey

<b>Name and Title of Officers:</b>	<b>Office Term Expires:</b>
Steven Shervey, Chair – City of Placerville Appointee	N/A
Lisbeth Powell, Vice Chair – Supervisor Appointee – District IV	3/2019

<b>Name and Title of other members:</b>	<b>Office Term Expires:</b>
Raelene Nunn, Supervisor Appointee – District 1	3/2021
Eileen Strangfeld, Supervisor Appointee – District II	1/2021
Roger Berger, Supervisor Appointee – District III	1/2021
Penny Huber, Supervisor Appointee—District V	1/2023
Vacant, Supervisors Appointee – Member-at-Large	1/2018
Jim Wassner, Community Representative	4/2022
Beth Southorn, Community Representative	5/2020
Tita Bladen, Community Representative	8/2021
Barbara Raines, Community Representative	3/2022
Barbara Kaufmann, City of South Lake Tahoe Appointee	3/2021
Vacant, Community Representative	

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

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

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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:

*To ensure the rights and entitlements of residents of El Dorado County, 60 years of age and older, by providing and securing legal assistance, regardless of income.*

2. Based on your local needs assessment, what percentage of Title IIIB funding is allocated to Legal Services?  
30%

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).

*As a result in the growing senior population within our PSA, we have seen an increase in the number of clients in low income categories and increase in the number of clients with issues related to reverse mortgages and consumer debt.*

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?

*Not Applicable—AAA and LSP are both part of the El Dorado County Health & Human Services Agency (HHSA). An agreement is not necessary. LSP is a program that is operated directly by the AAA.*

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?

*The LSP is a program operated and housed within the AAA. The LSP was involved in the creation of the Area Plan Goals and Objectives and several questions on the Needs Assessment were directly related to the LSP. The LSP meets monthly and collaborates with the other supervisors of the AAA programs. Outreach presentations are often held at the local senior centers.*

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? Discussion:

*The AAA includes the LSP in the development of various surveys and provides information regarding available LSP services to clients of other AAA programs. The LSP is a part of the AAA and brochures contain information on all programs. Referrals, as appropriate, are made within the many AAA programs including the LSP.*

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):

*Financial fraud and abuse, restraining orders, landlord and tenant issues, consumer law, debt, foreclosures, planning for incapacity, Medi-Cal, Medicare, Social Security and SSI, real property and wills and trusts.*

14. In the past four years, has there been a change in the types of legal issues handled by the Title IIIB legal provider(s) in your PSA? Discuss:

*See #3 Above*

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

*Major barriers include:*

a. transportation - *El Dorado is a very large and rural county that extends from the Sierra foothills to South Lake Tahoe. Weather and transportation is a problem. Public transportation is limited. Attorneys currently travel to South Lake Tahoe and El Dorado Hills, homes, hospitals, and care facilities.*

*Strategies to overcome this barrier include expanding and promoting our phone appointments, and increasing the locations where attorneys travel to provide services—areas such as Pollock Pines, Georgetown, and Fairplay.*

b. language - *El Dorado County has a limited but growing ESL population that infrequently access legal services for a variety of reasons.*

*Strategies - We have interpreters available, and are currently working with LAAC (Legal Aid Association of California) to expand our written materials to offer information in a variety of languages. We are also planning on printing our brochure in Spanish and distributing it throughout the county.*

c. underserved communities -

1. LGBT community.

*Strategies - We have already increased outreach by preparing and posting legal information of particular interest to the LGBT population. We are training our staff to increase their sensitivity regarding gender-neutral language and are discussing ways to make the office environment more welcoming to cultural diversity.*

2. Residents of skilled nursing facilities, residential care facilities, mobile home parks—they all have special rights and protections under the law.

*Strategies - Create information brochures summarizing rights and referring to Senior Legal Services and Ombudsman programs for assistance and advocacy.*

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

*Being a county program, we have access to and work closely with many other county agencies: Adult Protective Services, Public Guardian, Long Term Care Ombudsmen, Family Caregiver Support Program, Information and Assistance, housing, law enforcement, county supervisors, mental health, MSSP, HICAP, IHSS, Senior Health Education program, Senior Nutrition program.*

**Notice of Intent for Non-Provision of FCSP Multifaceted Systems of Support Services Older Americans Act Reauthorization Act of 2016,**

**Section 373(a) and (b)**

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

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

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

**Family Caregiver Services**

<b>Category</b>	<b>2020-2021</b>	<b>2021-2022</b>	<b>2022-2023</b>	<b>2023-2024</b>
Family Caregiver Information Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract
Family Caregiver Access Assistance	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract
Family Caregiver Support Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract
Family Caregiver Respite Care	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract
Family Caregiver Supplemental Services	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Direct <input type="checkbox"/> Contract

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

- How the AAA ensures the service continues to be provided in the PSA without the use of Title III E funds  
*The FCSP staff are also part of HHSA and, as such, are in constant communication with the other programs within HHSA. FCSP staff can contact and discuss grandparent referrals in an immediate timeframe and determine the best program to meet the needs of the caregiving grandparents. This also prevents duplication of services within the PSA.*

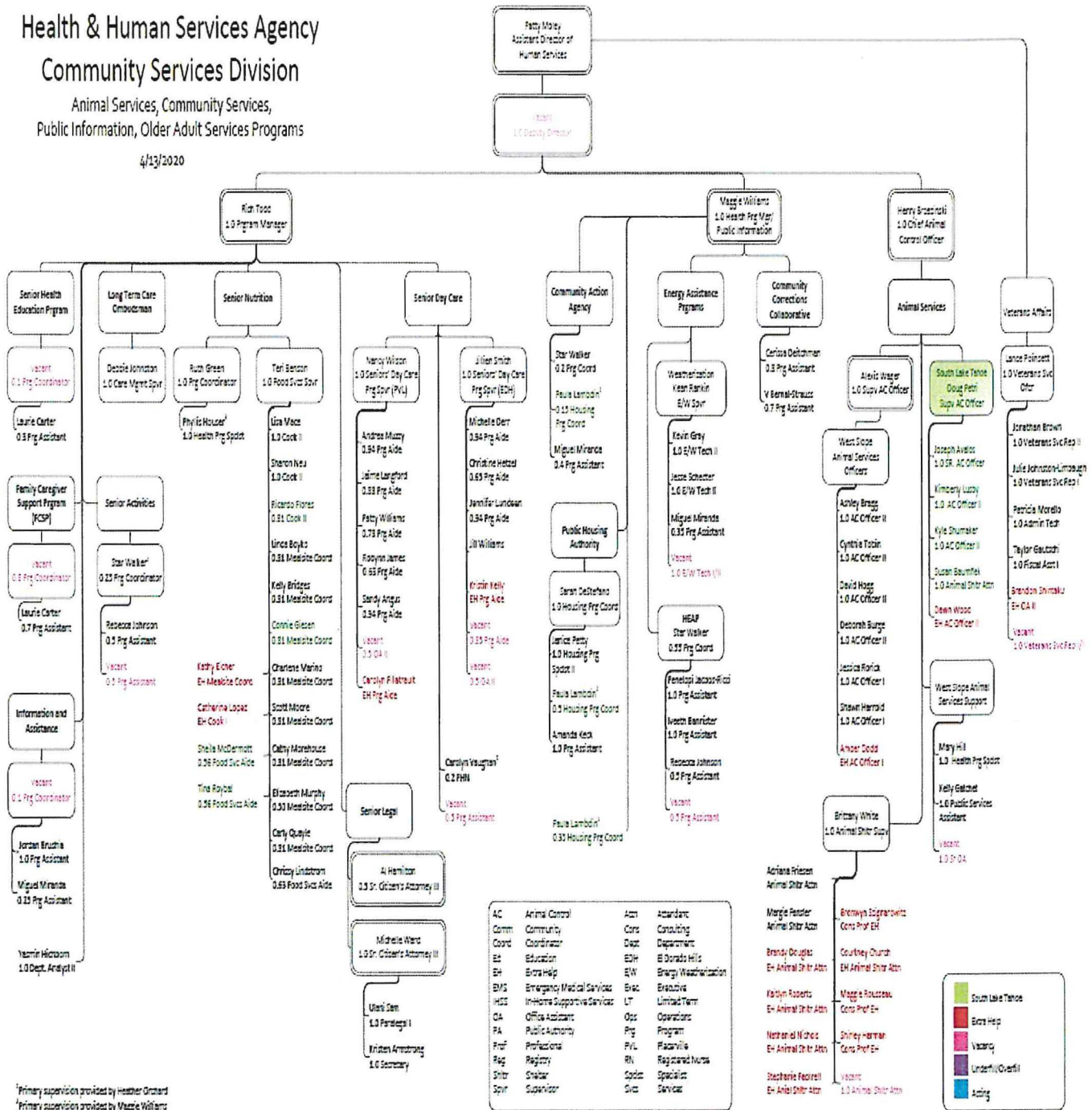


# El Dorado County Health & Human Services Agency Organization Chart

## Health & Human Services Agency Community Services Division

Animal Services, Community Services,  
Public Information, Older Adult Services Programs

4/13/2020



- (II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
  - (III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
  - (IV) older individuals with severe disabilities;
  - (V) older individuals with limited English proficiency;
  - (VI) older individuals with Alzheimer's disease and related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
  - (VII) older individuals at risk for institutional placement; and
- (ii) inform the older individuals referred to in sub-clauses (I) through (VII) of clause (i), and the caretakers of such individuals, of the availability of such assistance;

6. OAA 306(a)(4)(C)  
Ensure that each activity undertaken by the agency, including planning, advocacy, and systems development, will include a focus on the needs of low-income minority older individuals and older individuals residing in rural areas;
7. OAA 306(a)(5)  
Coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, and individuals at risk for institutional placement with agencies that develop or provide services for individuals with disabilities;
8. OAA 306(a)(9)  
Carry out the State Long-Term Care Ombudsman program under OAA 2006 307(a)(9), will expend not less than the total amount of funds appropriated under this Act and expended by the agency in fiscal year 2000 in carrying out such a program under this title;
9. OAA 306(a)(11)  
Provide information and assurances concerning services to older individuals who are Native Americans (referred to in this paragraph as "older Native Americans"), including—
  - (A) information concerning whether there is a significant population of older Native Americans in the planning and service area and if so, the area agency on aging will pursue activities, including outreach, to increase access of those older Native Americans to programs and benefits provided under this title;
  - (B) to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and
  - (C) make services under the area plan available, to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans.
10. OAA 306(a)(13)(A-E)
  - (A) maintain the integrity and public purpose of services provided, and service providers, under this title in all contractual and commercial relationships;
  - (B) disclose to the Assistant Secretary and the State agency—
    - (i) the identity of each nongovernmental entity with which such agency has a contract or commercial relationship relating to providing any service to older individuals; and
    - (ii) the nature of such contract or such relationship;
  - (C) demonstrate that a loss or diminution in the quantity or quality of the services provided, or to be provided, under this title by such agency has not resulted and will not result from such contract or such relationship;
  - (D) demonstrate that the quantity or quality of the services to be provided under this title by such agency will be enhanced as a result of such contract or such relationship; and
  - (E) on the request of the Assistant Secretary or the State, for the purpose of monitoring compliance with this Act (including conducting an audit), disclose all sources and expenditures of funds such agency receives or expends to provide services to older individuals;

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

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

Requirement: OAA 307(a)(15)

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

(A) To utilize in the delivery of outreach services under Section 306(a)(2)(A), the services of workers who are fluent in the language spoken by a predominant number of such older individuals who are of limited English-speaking ability.

(B) To designate an individual employed by the area agency on aging, or available to such area agency on aging on a full-time basis, whose responsibilities will include:

- (i) taking such action as may be appropriate to assure that counseling assistance is made available to such older individuals who are of limited English-speaking ability in order to assist such older individuals in participating in programs and receiving assistance under this Act; and
- (ii) providing guidance to individuals engaged in the delivery of supportive services under the area plan involved to enable such individuals to be aware of cultural sensitivities and to take into account effective linguistic and cultural differences.

Requirement: OAA 307(a)(18)

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

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

Requirement: OAA 307(a)(26)

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

Requirement: OAA 307(a)(27)

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

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

CFR [1321.53(a)(b)]

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

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

- (1) Have a visible focal point of contact where anyone can go or call for help, information or referral on any aging issue;
- (2) Provide a range of options: