AREA AGENCY ON AGING FOUR-YEAR PLAN: Fiscal Years 2012-2015

FIRST YEAR OF THE PLAN: Fiscal Year 2012 July 1, 2011 - June 30, 2012

Tooele County, UT
Area Agency on Aging

For The Older Americans Act

Utah Department of Human Services Division of Aging and Adult Services

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I. APPROVAL PROCESS

The Older Americans Act of 1965, as amended through 2006, requires that each Area Agency on Aging (AAA) develop an area plan. This is stated specifically in Section 306(a) of the Act as follows:

Each area agency on aging designated under Section 305(a)(2)(A) shall, in order to be approved by the State agency, prepare and develop an area plan for a planning and service area for a two-, three-, or four-year period determined by the State agency, with such annual adjustments as may be necessary. Each such plan shall be based upon a uniform format for area plans within the State prepared in accordance with Section 307(a)(1).

In accordance with the Act, each AAA is asked to furnish the information requested on the following pages. Responses will form the report of progress in achieving goals set for the planned activities for the fourth year of the four-year Area Plan FY 2008 - 2011 (July 1, 2011 - June 30, 2011). Once completed, this document will be submitted to the Division of Aging and Adult Services for review and comment. The State Board of Aging and Adult Services will subsequently examine all responses and consider the document for final approval by June of 2011.

II. SIGNATURES

Appropriate signatures are requested to verify approval of the Area Plan.

AREA PLAN UPDATE

July 1, 2011 to June 30, 2012

1. The Area Plan update for Fiscal Year 2012 has been prepared in accordance with rules and regulations of the Older Americans Act and is hereby submitted to the Utah Department of Human Services, Division of Aging and Adult Services, for approval. The Area Agency on Aging assures that it has the ability to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area (Ref. Section 305[c]). The Area Agency on Aging will comply with state and federal laws, regulations, and rules, including the assurances contained within this Area Plan.

Director, Area Agency on Aging: Joshua Maher	_ Date: April 25 2011
Agency Name: Tooele County Area Agency on Aging	·

Agency Address: 59 East Vine, Tooele, UT 84074	<u> Area an leathana an t-air</u> Person
2. The Area Agency Advisory Council has had the opportunity comment on the Area Plan Update for Fiscal Year 2011 (Re	
1321.57[c]). Its comments are attached.	
Chairman	Date
Area Agency Advisory Council 3. The local governing body of the Area Agency on Aging has represented the second s	reviewed and
approved the Area Plan Update for Fiscal Year 2011.	L L IVE
Chairman, County Commission or Association of County Governments	Date
4. Plan Approval	*
n de la composition de la composition . Director	Date
Division of Aging and Adult Services	
Chairman	Date
State Poord of Aging and Adult Sonyicos	

 $(w_{i}, y_{i}) = 2 + (-1) \cdot (w_{i} - y_{i}) + (-1) \cdot (w_{i} - y_{i})$

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III. GOALS AND OBJECTIVES

Please indicate specific goals and objectives planned for the four-year plan in the following areas:

1. Focusing on most vulnerable target populations – With current funding issues, the realities of limited resources may reduce the number of individuals served. Given that, when triaging clients and services, additional emphasis on reaching and serving frail, low income, minority and others should be prioritized. Efficiencies and initiatives for best practices in service delivery – Given current financial constraints, the need for improved efficiency and effectiveness in delivering services is more critical than normal.

We have already taken steps in this direction. We have lost approximately 10% of our staff through attrition without a significant drop in numbers served; this has relieved much of our budgetary pressure. We have been able to achieve this through innovation and out of the box thinking. We have made changes in services such as: congregate meals on Friday evenings, once available every week and abundantly attended by those who are not frail, low income or minorities have been pared down to once a month replaced by brunches that are attended with numbers consistent with the rest of our meals serving our targeted population, transportation, home delivered meals, and alternatives have been revamped and we have maintained the service units with the a reduced staff. As an example of this 'revamping' we have centralized the scheduling and allocation of resources for our transportation program. We now have the ability to utilize all the staff and vehicles for needs in the county. This has resulting in needing fewer vehicles and staff to provide transportation for the same number of seniors. We are looking into ways to be more innovative with our problem solving by encouraging staff to become better educated in new technologies and process improvement. We have also been able to do more for less by purchasing and utilizing a software program which collects and reports our data to the state and reduces data entry labor hours. It is our goal to maintain the numbers of people served, by becoming more innovative and efficient as an agency through these and future cost saving ideas.

2. Empowering seniors in maintaining health, safety and independence – Using community resources and supports, in home services and other

resources including evidence based preventive health models and abuse prevention resources, develop goals to allow seniors to remain in their homes and communities while creating healthy and safe environments.

This will be accomplished in two ways. First by directly working with seniors currently home bound or being near home bound status. The programs for these seniors are our top priority. We currently have no waiting list for our home delivered meals and a very short waiting list for our alternatives clients. Our goal is to maintain a no or very short waiting list by being more innovative as previously describes and cutting budgets in areas with less priority if needed. Second we need to plan for the future by enriching our prevention efforts. By teaching seniors to become and remain healthy and by increasing our outreach to those who are beginning to need help we can reduce the future demand on in home programs. We have trained staff members in diabetes prevention, dealing with chronic conditions and senior oriented aerobics. This education is being implemented into new preventive programs and clinics to add to the suite of preventive programs and clinics we have traditionally operated.

3. Develop and strengthen community partnerships – set goals for using and developing community networks and partners to more effectively meet client needs and to build collaborative relationships that allow access to resources and assistance found outside of the traditional aging network.

We currently belong to several groups and organizations both inside and outside of the aging network. In addition we have been working with other organizations from outside of our county to find ways in which we can partner in our endeavors. We currently have a contract with UTA to provide a deviated route service with a wheelchair lift. The service is great for disabled seniors and the public; UTA picks up the entire cost. We hope to be able to keep this UTA service in our area. There may be other opportunities in which we can build a relationship with another entity which can provide services to our seniors at no additional cost to our agency. We have been approached with a plan to contract our meals at a lower cost. And we hope to continue the relationship we have with the different non-profit senior organizations in our county. We have recently expanded our monthly four page newsletter to a twelve page newspaper. This paper is sent to over 1000 senior households and is showing promise in its ability to communicate the programs and services available. In addition we will continue to investigate opportunities for government and corporate grants.

ACCOMPLISHMENTS FOR THE PAST YEAR

This section should be the "state of the agency" report. Discuss the agency's major accomplishments, what is working as planned, what effort did not work as planned, any disappointments experienced by the agency, barriers encountered, etc.

We are very fortunate to have qualified, professional, and motivated staff and volunteers contributing toward our goals. In the past year we have lost several key staff members without replacement. Yet our level of service and commitment has remained high.

We have been able to purchase touch screen equipment and software to help us better record and report our activities. This purchase has proven to be more efficient and cost effective than our previous method of reporting. We have audited our programs and made improvements as needed. One improvement yet to be mentioned is in our food inventory. We were able to eliminate our reliance on paper and develop a spreadsheet that has helped us to manage this resource more effectively.

We have had staffing changes in the last year in several management positions. These changes have affected the organization as adjustments had to be made. Unfortunately, some of the adaptations we have made to fit changing budgets and personnel have not been popular with all the seniors. We have faced this challenge head on by communicating and being compassionate with our seniors.

We intend on using our innovative thinking to find additional financial resources in the future. Many more improvements and positive adaptations will be made, when the necessary financial resources are available. Altogether, we feel well suited to be able to maintain our level of service to the community with what we are allocated by local state and federal funds, but worry about how prepared we may be for the baby boomer generation and wish we could do more for the current generation. Because we fully anticipate continuing and improving our level of service to the aging population we consider the state of the agency to be strong.

TITLE III AREA PLAN: PROGRAM DESCRIPTION AND ASSURANCES

Each area agency on aging (AAA) must maintain documentation to confirm the following assurance items. Such documentation will be subject to federal and state review to ensure accuracy and completeness. By signing this four-year plan document, the area agency on aging agrees to comply with each of the following assurances unless otherwise noted in the document.

Section 305(c): Administrative Capacity

An area agency on aging shall provide assurance, determined adequate by the State agency, that the Area Agency on Aging will have the ability to develop an area plan and to carry out, directly or through contractual or other arrangements, a program in accordance with the plan within the planning and service area.

Section 306(a)(1): Provision of Services:

Provide, through a comprehensive and coordinated system for supportive services, nutrition services, and where appropriate, for the establishment, maintenance, or construction of multipurpose senior centers, within the planning and service area, covered by the plan, including determining the extent of need for supportive services, nutrition services, and multipurpose senior centers in such area (taking into consideration, among other things, the number of older individuals with low incomes residing in such area, the number of older individuals who have the greatest economic need (with particular attention to low income minority individuals and older individuals residing in rural areas) residing in such area, the number of older individuals who have the greatest social need (with particular attention to low income minority individuals) residing in such area and the number of older individuals who are Indians residing in such area, and the efforts of voluntary organizations in the community, evaluating the effectiveness of the use of resources in meeting such need, and entering into agreements with providers of supportive services, nutrition services, or multipurpose senior center in such area, for the provision of such services or centers to meet such need:

Section 306(a)(2): Adequate Proportions

An adequate proportion, as required under Section 307(a)(2), of the amount allotted for part B to the planning and service area will be expended for the delivery of each of the following services:

- (A) services associated with access to services (transportation, outreach, information and assistance and case management services;
- (B) in-home services, including supportive services for families of older individuals who are victims of Alzheimer's disease and related disorders with neurological and organic brain dysfunction; and
- (C) legal assistance

and assure that the area agency will report annually to the State agency in detail the amount of funds expended for each such category during the fiscal year most recently concluded.

Section 306(a)(4)(A): Low Economic, Minority and Rural Services

- (i) The area agency on aging will set specific objectives for providing services to older individuals with greatest economic need and older individuals with greatest social need, include specific objectives for providing services to low income minority individuals and older individuals residing in rural areas, and include proposed methods of carrying out the preference in the area plan,
- (ii) Provide assurances that the area agency on aging will include in each agreement made with a provider of any service under this title, a requirement that such provider will:
 - (I) specify how the provider intends to satisfy the service needs of low income minority individuals and older individuals residing in rural areas served by the provider;
 - (II) to the maximum extent feasible, provide services to low income minority individuals and older individuals residing in rural areas in accordance with their need for such services; and
 - (III) meet specific objectives established by the area agency on aging, for providing services to low income minority individuals and older individuals residing in rural areas; and
- (iii) with respect to the fiscal year preceding the fiscal year for which such plan is prepared:
 - (I) Identify the number of low income minority older individuals in the planning and service area;
 - (II) Describe the methods used to satisfy the service needs of such minority older individuals; and
 - (III) Provide information on the extent to which the area agency met the objectives described in clause (i).

Section 306(a)(4)(B): Low Economic, Minority and Rural Services Outreach

Provide assurances that the area agency on aging will use outreach efforts that will:

- (i) identify individuals eligible for assistance under this Act, with special emphasis on:
 - (I) older individuals residing in rural areas;
 - (II) older individuals with greatest economic need (with particular attention to low-income minority individuals and older individuals residing in rural areas);
 - (III) older individuals with greatest social need (with particular attention to low-income minority individuals and older individuals residing in rural areas):
 - (IV) older individuals with severe disabilities;
 - (V) older individuals with limited English-speaking ability; and
 - (VI) older individuals with Alzheimer's disease or related disorders with neurological and organic brain dysfunction (and the caretakers of such individuals); and
- (ii) inform the older individuals referred to in subclasses (I) through (VI) of clause (i), and the caretakers of such individuals, of the availability of such assistance.

Section 306(a)(4)(C): Focus on Minority Older and Rural Older Individuals

Contain an assurance that the area agency on aging will 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;

Section 306(a)(5): Assurance for the Disabled

Provide assurances that the area agency on aging will: coordinate planning, identification, assessment of needs, and provision of services for older individuals with disabilities, with particular attention to individuals with severe disabilities, with agencies that develop or provide services for individuals with disabilities.

Section 306(a)(6)(A): Accounting for the Recipients' Views

Take into account in connection with matters of general policy arising in the development and administration of the area plan, the views of recipients of services under such plan:

Section 306(a)(6)(B): Advocacy

Serve as the advocate and focal point for older individuals within the community by (in cooperation with agencies, organizations, and individuals participating in activities under the plan) monitoring, evaluating, and commenting upon all policies, programs, hearings, levies, and community actions which will effect older individuals;

Section 306(a)(6)(C): Volunteering and Community Action

- (i) where possible, enter into arrangements with organizations providing day care services for children, assistance to older individuals caring for relatives who are children, and respite for families, so as to provide opportunities for older individuals to aid or assist on a voluntary basis in the delivery of such services to children, adults, and families; and
- (ii) if possible regarding the provision of services under this title, enter into arrangements and coordinate with organizations that have a proven record of providing services to older individuals, that:
 - I) were officially designated as community action agencies or community action programs under section 210 of the Economic Opportunity Act of 1964 (42 U.S.C. 2790) for fiscal year 1981, and did not lose the designation as a result of failure to comply with such Act; or
 - came into existence during fiscal year 1982 as direct successors in interest to such community action agencies or community action programs;

and that meet the requirements under section 676B of the Community Services Block Grant Act.

Section 306(a)(6)(D): Advisory Council

Establish an advisory council consisting of older individuals (including minority individuals and older individuals residing in rural areas) who are participants or

who are eligible to participate in programs assisted under this Act, representatives of older individuals, local elected officials, providers of veterans health care (if appropriate), and the general public, to advise continuously the area agency on aging on all matters relating to the development of the area plan, the administration of the plan and operations conducted under the plan;

Section 306(a)(6)(E): Program Coordination

Establish effective and efficient procedures for coordination of:

- (i) entities conducting programs that receive assistance under this Act within the planning and service area served by the agency; and,
- (ii) entities conducting other Federal programs for older individuals at the local level, with particular emphasis on entities conducting programs described in section 203(b), within the area;

Section 306(a)(6)(F): Mental Health Coordination

Coordinate any mental health services provided with funds expended by the area agency on aging for part B with the mental health services provided by community health centers and by other public agencies and nonprofit private organizations; and

Section 306(a)(6)(G): Native American Outreach

If there is a significant population of older individuals who are Native Americans, in the planning and service area of area agency on aging, the area agency on aging shall conduct outreach activities to identify such individuals in such area and shall inform such individuals of the availability of assistance under this Act;

Section 306(a)(7): Coordination of Long-Term Care

Provide that the area agency on aging will facilitate the coordination of community based long term care services designed to enable older individuals to remain in their homes, by means including:

- (i) development of case management services as a component of the long term care services; consistent with the requirements of paragraph (8);
- (ii) involvement of long term care providers in the coordination of such services; and,
- (iii) increasing community awareness of and involvement in addressing the needs of residents of long term care facilities;

Section 306(a)(8): Case Management Services

Provide that case management services provided under this title through the area agency on aging will:

- (i) not duplicate case management services provided through other Federal and State programs;
- (ii) be coordinated with services described in subparagraph (A); and,
- (iii) be provided by a public agency or a nonprofit private agency that:
 - (1) gives each older individual seeking services under this title a list of agencies that proved similar services within the jurisdiction of the area agency on aging;
 - (2) gives each individual described in clause (i) a statement specifying that the individual has a right to make an independent choice of service providers and documents receipt by such individual of such statement;
 - (3) has case managers acting as agents for the individuals receiving the services and not as promoters for the agency providing the services; or,
 - (4) is located in a rural area and obtains a waiver of the requirements described in clauses (i) through (iii)

Section 306(a)(9): Assurance for State Long-Term Care Ombudsman Program

Provide assurance that area agency on aging, in carrying out the State Long-Term Care Ombudsman program under section 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;

Section 306(a)(10): Grievance Procedure

Provide a grievance procedure for older individuals who are dissatisfied with or denied services under this title:

Section 306(a)(11): Services to Native Americans

Provide information and assurances concerning services to older individuals who are Native Americans (referred to in the 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, an assurance that 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) an assurance that the area agency on aging will; to the maximum extent practicable, coordinate the services the agency provides under this title with services provided under title VI; and
- (C) an assurance that the area agency on aging will make services under the plan available to the same extent as such services are available to older individuals within the planning and service area, to older Native Americans

Section 306(a)(12): Federal Program Coordination

Provide that the area agency on aging will establish procedures for coordination of services with entities conducting other Federal or federally assisted programs for older individuals at the local level, with particular emphasis on entities conducting programs described inn section 203(b) within the planning and service area.

Section 306(a)(13)(A-E): Maintenance of Integrity, Public Purpose, Quantity and Quality of Services, Audit ability

Provide assurances that the area agency on aging will:

- (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 and 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.

Section 306(a)(14): Appropriate use of Funds

Provide assurance that funds received under this title will not be used to pay any part of a cost (including administrative cost) incurred by the area agency on

aging to carry out a contract or commercial relationship that is not carried out to implement this title

Section 306(a)(15): No Preference

Provide assurance that preference in receiving services under this title will not be given by the area agency on aging to particular older individuals as a result of a contract or commercial relationship that is not carried out to implement this title.

TITLE VII: ELDER RIGHTS PROTECTION

Chapter 1: General Provisions

Section 705(a)(6)(A): General Provisions

An assurance that, with respect to programs for the prevention of elder abuse, neglect, and exploitation under chapter 3:

- (A) in carrying out such programs the State agency will conduct a program of services consistent with relevant State law and coordinated with existing State adult protective service activities for:
 - (i) public education to identify and prevent elder abuse;
 - (ii) receipt of reports of elder abuse;
 - (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 if appropriate and if the individuals to be referred consent, and
 - (iv) referral of complaints to law enforcement or public protective service agencies if appropriate;

Chapter 2: Ombudsman Program

Section 704(a): Organization and Area Plan Description of Ombudsman Program

Section 712(a)(5)(D)(iii): Confidentiality and Disclosure

The State agency shall develop the policies and procedures in accordance with all provisions of this subtitle regarding confidentiality and conflict of interest. [This is R510-200-8(B)(9) for confidentiality and R510-200-7(A)(e) for conflicts of interest using the definitions outlined in state and federal law]

Section 712(a)(5)(C): Eligibility for Designation

Entities eligible to be designated as local Ombudsman entities, and individuals eligible to be designated as representatives of such entities, shall:

- (i) have demonstrated capability to carry out the responsibilities of the Office;
- (ii) be free of conflicts of interest;
- (iii) in the case of the entities, be public or nonprofit private entities; and
- (iv) meet such additional requirements as the Ombudsman may specify.

Section 712(a)(5)(D): Monitoring Procedures

(i) In General: The State agency shall establish, in accordance with the Office, policies and procedures for monitoring local Ombudsman entities designated to carry out the duties of the Office.

Section 712(a)(3)(D): Regular and Timely Access

The Ombudsman shall ensure that the residents have regular and timely access to the services provided through the Office and that the residents and complainants receive timely responses from representatives of the Office to complaints;

Section 712(c): Reporting System

The State agency shall establish a statewide uniform reporting system to:

- (1) collect and analyze data relating to complaints and conditions in long-term care facilities and to residents for the purpose of identifying and resolving significant problems, and
- (2) submit the data, on a regular basis.

Section 712(h): Administration

The State agency shall require the Office to:

- (1) prepare an annual report:
 - (A) describing the activities carries out by the Office in the year for which the report is prepared:
 - (B) containing and analyzing the data collected under subsection (c);
 - (C) evaluating the problems experienced by, and the complaints made by or on behalf of, residents;
 - (D) containing recommendations for:
 - (i) improving quality of the care and life of the residents; and
 - (ii) protecting the health, safety, welfare, and rights of the residents;
 - (E) (i) analyzing the success of the program including success in providing services to residents of board and care facilities and other similar adult care facilities; and
 - (ii) identifying barriers that prevent the optimal operation of the program; and
 - (F)providing policy, regulatory, and legislative recommendations to solve identified problems, to resolve the complaints, to improve the quality of care and life of residents, to protect the health, safety, welfare, and rights of residents, and to remove the barriers;
- (2) analyze, comment on, and monitor the development and implementation of Federal, State, and local laws, regulations, and other government policies and actions that pertain to long-term care facilities and services, and to the health, safety, welfare, and rights of residents, in the State, and recommend any changes in such laws, regulations, and policies as the Office determines to be appropriate;

- (3) (A) provide such information as the Office determines to be necessary to public and private agencies, legislators, and other persons, regarding:
 - (i) the problems and concerns of older individuals residing in long-term care facilities; and
 - (ii) recommendations related to the problems and concerns.

(These three assurances were added to the ombudsman section in May, 2003)

Section 712(f): Conflict of Interest

The State agency shall:

- (1) ensure that no individual, or member of the immediate family of an individual, involved in the designation of the Ombudsman (whether by appointment or otherwise) or the designation of an entity designated under subsection (a)(5), is subject to a conflict of interest;
- (2) ensure that no officer or employee of the Office, representative of a local Ombudsman entity, or member of the immediate family of the officer, employee, or representative, is subject to a conflict of interest:
- (3) ensure that the Ombudsman:
 - (A) does not have a direct involvement in the licensing or certification of a long-term care facility or of a provider of a long-term care service;
 - (B) does not have an ownership or investment interest (represented by equity, debt, or other financial relationship) in a long-term care facility or a long-term care service;
 - (C) is not employed by, or participating in the management of, a long-term care facility; and
 - (D) does not receive, or have the right to receive, directly or indirectly, remuneration (in cash or in kind) under a compensation arrangement with an owner or operator of a long-term care facility; and
- (4) establish, and specify in writing, mechanisms to identify and remove conflicts of interest referred to in paragraphs (1) and (2), and to identify and eliminate the relationships described in subparagraphs (A) through (D) of paragraph (3), including such mechanisms as:
 - (A) the methods by which the State agency will examine individuals, and immediate family members, to identify the conflicts; and
 - (B) the actions that the State agency will require the individuals and such family members to take to remove such conflicts.

Section 712(a)(3)(E): Representation Before Governmental Agencies

The Ombudsman shall represent the interests of the residents before governmental agencies and seek administrative, legal, and other remedies to protect the health, safety, welfare, and rights of the residents;

Section 712(j): Noninterference

The State must:

- (1) Ensure that willful interference with representatives of the Office in the performance of the official duties of the representatives (as defined by the Assistant Secretary) shall be unlawful.
- (2) Prohibit retaliation and reprisals by a long-term care facility or other entity with respect to any resident, employee, or other person for filing a complaint with, providing information to, or otherwise cooperating with any representative of, the Office.

Will you assure that your agency will not interfere with the official functions of ombudsman representatives as defined in The Older Americans Act section 712 (a)

(5) (B) and that representatives will be able to report any interference to the State?

Chapter 3: Programs for the Prevention of Elder Abuse, Neglect and Exploitation

Section 721(a): Establishment

In order to be eligible to receive an allotment under section 703 from funds appropriated with this section, and in consultation with area agencies on aging, develop and enhance programs for the prevention of elder abuse, neglect, and exploitation.

Section 721(b)(1-2)

- (1) providing for public education and outreach to identify and prevent elder abuse, neglect, and exploitation;
- (2) ensuring the coordination of services provided by area agencies on aging with services instituted under the State adult protection service program, State and local law enforcement systems, and courts of competent jurisdiction;

V. AREA PLAN PROGRAM OBJECTIVES

Supportive Services

Title III B Program Objective Case Management (1 case): Assistance either in the form of access or care coordination in the circumstance where the older person and/or their caregivers are experiencing diminished functioning capacities, personal conditions or other characteristics which require the provision of services by formal service providers. Activities of case management includes assessing needs, developing care plans, authorizing services, arranging services, coordinating the provision of services among providers, follow-up and reassessment, as required. Personal Care (1 hour): Provide personal assistance, supervision or cues for persons having difficulties with one or more of the following activities of daily living: eating, dressing, bathing, toileting, and transferring in and out of bed. Homemaker (1 hour): Provide assistance to persons having difficulty with one or more of the following		Persons Served -	Persons Waiting	Estimated	l l
Case Management (1 case): Assistance either in the form of access or care coordination in the circumstance where the older person and/or their caregivers are experiencing diminished functioning capacities, personal conditions or other characteristics which require the provision of services by formal service providers. Activities of case management includes assessing needs, developing care plans, authorizing services, arranging services, coordinating the provision of services among providers, follow-up and reassessment, as required. Personal Care (1 hour): Provide personal assistance, stand-by assistance, supervision or cues for persons having difficulties with one or more of the following activities of daily living: eating, dressing, bathing, toileting, and transferring in and out of bed. Homemaker (1 hour): Provide assistance to persons having difficulty		•			
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Homemaker (1 hour): Provide 1686 assistance to persons having difficulty					
assistance to persons having difficulty					
	1			1686	
with one or more of the following	•				
	with one or more of the following				
instrumental activities of daily living:	•				
preparing meals, shopping for personal	,				
items, managing money, using the					
telephone or doing light housework.					
Chore (1 hour): Provide assistance to	1				
persons having difficulty with one or more	ı, , , , , , , , , , , , , , , , , , ,				
of the following instrumental activities of daily living: heavy housework, yard work	1				
or sidewalk maintenance.	1 '				
Adult Day Care/Adult Day Health	1				
(1 hour): Provision of personal care for	1				

Title III B	Persons Served - Unduplicated Count	Persons Waiting for Services*	Estimated Service Units	Estimated Number of Persons Not Served
Program Objective dependent adults in a supervised,	Count	Services	Ullits	Not Served
protective, congregate setting during				
some portion of a 24-hour day. Services				
offered in conjunction with adult day				
care/adult health typically include social				
and recreational activities, training,				
counseling, meals for adult day care and				
services such as rehabilitation,		,		
medication management and home				
health aide services for adult day health.				
Assisted Transportation (1 one-way				
trip): Provision of assistance, including				
escort, to a person who has difficulties				
(physical or cognitive) using regular vehicular transportation.				
Transportation (1 one-way trip):			9638	189
Provision of a means of transportation for				
a person who requires help in going from				
one location to another, using a vehicle.				
Does not include any other activity.				
Legal Assistance (1 hour): Provision of			60	
legal advise, counseling and represent-				
ation by an attorney or other person				
acting under the supervision of an				remaining the second of the second
attorney.				
Nutrition Education (1 session): A			289	
program to promote better health by				
providing accurate and culturally sensitive				
nutrition, physical fitness, or health (as it				
relates to nutrition) information and instruction to participants or participants				
and caregivers in a group or individual				
setting overseen by a dietitian or				
individual of comparable expertise.				
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Persons assessed and determined eligible for services

	Persons	Persons		Estimated
	Served -	Waiting	Estimated	
Title III B	Unduplicated		Service	Persons
Program Objective	Count	Services*	Units	Not Served
hafamatian and Assistance (4			1	
Information and Assistance (1				
contact): A service for older individuals				
that (A) provides the individuals with				
current information on opportunities and				
services available to the individuals within		-75.		
their communities, including information				
relating to assistive technology; (B)				
assesses the problems and capacities of				
the individuals; (C) links the individuals to				
the opportunities and services that are				
available; (D) to the maximum extent		and the second		
practicable, ensures that the individuals		100		
receive the services needed by the		uğu a		
individuals, and are aware of the		3000		
opportunities available to the individuals,				
by establishing adequate follow-up				
procedures.				
Outreach (1 contact): Interventions			120	
initiated by an agency or organization for				
the purpose of identifying potential clients	A CONSTRUCTOR OF STA			
and encouraging their use of existing			ļ	
services and benefits.				

^{*} Persons assessed and determined eligible for services

TITLE III C-1

Congregate Meals (1 meal): Provision to an eligible client or other eligible participant at a nutrition site, senior cente		for Services*	Units	Persons Not Served
an eligible client or other eligible			04005	
or some other congregate setting, a meal which: a) complies with the Dietary Guidelines for Americans (published by the Secretaries of the Department of Health and Human Services and the United States Department of Agriculture; b) provides, if one meal is served, a minimum of 33 and 1/3 percent of the current daily Dietary Reference Intakes (DRI) as established by the Food and Nutrition Board of the National Research Council of the National Academy of Sciences; c) provides, if two meals are served, together, a minimum of 66 and 2/3 percent of the current daily DRI; although there is no requirement regarding the percentage of the current daily DRI which an individual meal must provide, a second meal shall be balanced and proportional in calories and nutrients; and, d) provides, if three meals are served, together, 100 percent of the current daily DRI; although there is no requirement regarding the percentage of the current daily DRI which an individual meal must provide, a second and third meal shall be balanced and proportional in calories and nutrients.			31325	
Nutrition Counseling (1 hour): Provision of individualized advice and guidance to individuals, who are at nutritional risk because of their health or nutritional	١			

Title III C-1 Program Objective	Persons Served - Unduplicated Count	Persons Waiting for Services*	Estimated Service Units	Estimated Number of Persons Not Served
history, dietary intake, medications use or chronic illnesses, about options and				
methods for improving their nutritional				
status, performed by a health professional				
in accordance with state law and policy.				
Nutrition Education (1 session): A				
program to promote better health by	A Commence of the Commence of			
providing accurate and culturally sensitive				
nutrition, physical fitness, or health (as it	de California			
relates to nutrition) information and				
instruction to participants or participants				
and caregivers in a group or individual				
setting overseen by a dietitian or				Usas - Pro-
individual of comparable expertise.				

^{*} Persons assessed and determined eligible for services

TITLE III C-2 Home-Delivered Meals

Assessment/Screening (1 Hour): Administering standard examinations, procedures or tests for the purpose of gathering information about a client to determine need and/or eligibility for services. Routine health screening (blood pressure, hearing, vision, diabetes) activities are included. Home-Delivered Meals (1 meal): Provision, to an eligible client or other eligible participant at the client's place of residence, a meal which: a) complies with the Dietary Guidelines for Armericans (published by the Secretaries of the Department of Health and Human Services and the United States Department of Agriculture); b) provides, if one meal is served, a minimum of 33 and 1/3 percent of the current daily Dietary Reference Intakes (DRI) as established by the Food and Nutrition Board of the National Research Council of the National Research Council of the National Academy of Sciences; c) provides, if two meals are served, together, a minimum of 66 and 2/3 percent of the current daily DRI; although there is no requirement regarding the percentage of the current daily RDA which an individual meal must provide, a second meal shall be balanced and proportional in calories and nutrients; and d) provides, if three meals are served, together, 100 percent of	Title III C-2 Program Objective	Persons Served - Unduplicated Count	Persons Waiting for Services*	Estimated Service Units	Estimated Number of Persons Not Served
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there is no requirement regarding	1				

	Persons Served -	Persons Waiting	Estimated	Estimated Number of
Title III C-2	Unduplicated	for	Service	Persons
Program Objective	Count	Services*	Units	Not Served
Home-Delivered Meals (cont'd):				
the percentage of the current daily				
RDA which an individual meal				
must provide, a second and third				
meal shall be balanced and				
proportional in calories and			,	
nutrients.				
Nutrition Counseling (1 hour):				
Provision of individualized advice and			• •	
guidance to individuals, who are at				
nutritional risk because of their health or				
nutritional history, dietary intake,				
medications use or chronic illnesses,				
about options and methods for improving				
their nutritional status, performed by a				
health professional in accordance with				
state law and policy.				

^{*} Persons assessed and determined eligible for services

TITLE III D Preventive Health

Title III D Program Objective	Persons Served - Unduplicated Count	Persons Waiting for Services*	Estimated Service Units	Estimated Number of Persons Not Served
Physical activities, dancing, and aerobics			4578	
Foot clinics, blood pressure, flu shots			843	

^{*} Persons assessed and determined eligible for services

TITLE III E
National Family Caregiver Support Program (NFCSP)

Title III E Program Objective	Persons Served	Persons Waiting for Services*	Estimated Service Units
Information: Estimate the number of individuals who will receive information, education and outreach activities in order to recruit caregivers into your program.	1000		1000
Assistance: Estimate the number of clients who will receive assistance in accessing resources and information which will result in developed care plans and coordination of the appropriate caregiver services.	72		240
Counseling/Support Groups/ Training: Estimate the number of individuals who will receive counseling/support groups/training.	48		144
Respite: Estimate the number of clients who will receive respite services using NFCS funds.	29	6	1156
Supplemental Services: Estimate the number of clients receiving supplemental caregiver services using NFCS funds.	7	3	144

^{*} Persons assessed and determined eligible for services

OTHER OLDER AMERICANS ACT

Other Services Profile (Optional): List other services and the funding source.

Other Services Profile (Optional): List other services and the funding source.			I —
i			Estimated
Served –	Waiting	Estimated	Number of
Unduplicated	for	Service	Persons
Count	Services*	Units	Not Served
ja jalan etor.			
	Persons Served – Unduplicated	Persons Persons Served – Waiting Unduplicated for	Persons Persons Served – Waiting Estimated Unduplicated for Service

^{*} Persons assessed and determined eligible for services

Note: There are no restrictions on the number of other@ services which may be reported.

Mission/Purpose Codes:

A= Services which address functional limitations

B= Services which maintain health

C= Services which protect elder rights

D= Services which promote socialization/participation

E= Services which assure access and coordination

F= Services which support other goals/outcomes

STATE-FUNDED PROGRAMS

Service Code	Program Objective	Persons Served – Unduplicated Count	Persons Waiting for Services*	Estimated Number of Persons Not Served
	Home and Community-based Alternatives Program:** Service designed to prevent premature or inappropriate admission to nursing homes, including program administration, client assessment, client case management, and home- and community-based services provided to clients.	96	3	198
RVP	Volunteer: Trained individuals who volunteer in the Retired Senior Volunteer Program, Foster Grandparent Program, and Senior Companion Program.	.90	0	n/a

^{*} Persons assessed and determined eligible for services

MEDICAID AGING WAIVER PROGRAM

Program Objective	Persons	Persons	Estimated
	Served –	Waiting	Number of
	Unduplicated	for	Persons
	Count	Services*	Not Served
Purpose: A home and community-based services waiver offers the State Medicaid Agency broad discretion not generally afforded under the State plan to address the needs of individuals who would otherwise receive costly institutional care provided under the State Medicaid plan.	12	3	120

^{*} Persons assessed and determined eligible for services

^{**} Quarterly and annual reporting requirements by service area will still be required. (Example: case management, home health aide, personal care, respite, etc.)

VI. REAFFIRMATION OR AMENDMENTS TO THE FOUR-YEAR PLAN

This section allows the AAA to annually reaffirm, with <u>documentation</u>, the information found in its four-year plan. It is important to include documentation with the request for any waivers, including descriptions and justifications for the request. This section provides an opportunity to discuss any modifications the agency is requesting to amend in the four-year plan. The following areas should be included, and any others that the AAA would like to add:

1. PRIORITY OF SERVICES

- **A.** Alternatives/ In Home Services: This program has the most flexibility for meeting the specific needs of seniors. Alternatives is the most comprehensive and productive way we have to make an impact on seniors lives.
- **B. Nutrition:** Many of our seniors are at risk of poor nutrition due to budget or physical constraints. Our homebound seniors particularly are at risk and need Home Delivered Meals. We have many seniors who have a hard time with traditional foods and ensure (liquid meals) has been a vital alternative to help meet their needs.
- **C. Transportation:** This program helps seniors to remain independent regardless of poverty or physical impediments that keep them from driving.
- **D. Prevention:** Our preventative programs help seniors improve their life styles so that the need for alternatives, nutrition, and transportation programs will not be as great in the future.
- **E. Senior Centers:** The senior centers are great locations to facilitate social interaction for many seniors who are otherwise isolated.
- **F. Outreach Services:** Many seniors and their relations are unaware of the scope of services available. It is only through outreach that information can be disseminated.

2. SERVICE PROVIDERS

List all providers from whom the agency will purchase goods or services with Title III funds to fulfill area plan objectives. Specify the goods or services being purchased and the type of agreement made with the provider, i.e., subcontract, vendor, memorandum of agreement, etc.:

AGREEMENT	A CONTRACTOR OF THE CONTRACTOR	
PROVIDER NAME	GOODS/SERVICE(S)	TYPE
Cory Hansen	Nutritionist/ Dietitian	Written
Utah Legal Services	Legal Services for the elderly	Written
Salt Lake County	Ombudsman	Written

3. DIRECT SERVICE WAIVERS

The State Plan shall provide that no supportive services, nutrition services, or in-home services (as defined in section 342[I]) will be directly provided by the State Agency or an area agency on aging, except where, in the judgment of the State Agency, provision of such services by the State or an area agency on aging is necessary to assure an adequate supply of such services, or where such services are directly related to such state or area agency on aging administrative functions, or where such services of comparable quality can be provided more economically by such state or area agency on aging.

Is your agency applying for any Direct Service Waivers? Yes [x] No []

If yes, list the services for which waivers are being requested and describe the necessity for the direct service provision.

Nutrition: We currently cook all of our meals (congregate and home delivered) in the Tooele senior center kitchen. We have not yet found a local provider capable of our meal requirements. However, we have recently been approached by a company offering to cater our meals from a kitchen in a new county jail to be constructed. This company currently provides meals for Davis County Aging and we are considering their abilities and offer.

Case Management: We provide our own case management service for IIIB and Alternatives. Our agency has operated this way for many years. We currently find that this is a less expensive option for seniors. We have become a leader to the local home health agencies as we have been able to facilitate cooperation with all the other entities. We do not compete, but rather work in tandem to help the senior and disabled community.

4. PRIORITY SERVICE WAIVER

Reference(s): OAA Section 306(a)(2), 306(b)(1)(2)(A)(B)(C)(D), 307(a)(22) State Rule R110-106-1

Indicate which, if any, of the following categories of service the agency is not planning to fund with the minimum percentage of Title III B funds specified in the State Plan, with the justification for not providing services. **Attach appropriate documentation** to support the waiver request as follows:

- 1) Notification of public hearing to waive Title III B funding of a service category,
- 2) A list of the parties notified of the hearing,
- 3) A record of the public hearing, and
- 4) A detailed justification to support that services are provided in sufficient volume to meet the need throughout the planning and service area. (See State Rule R805-106 for specific requirements.)

SERVICE CATEGORY

DESCRIPTION OF REASON FOR THE WAIVER

Access: Transportation: Currently we have limited transportation options other than Dial-a-Ride and certain routes from UTA. We have negotiated a contract with UTA to provide two flex routes with wheelchair lifts and ability to deviate ¾ of a mile off route. These routes follow a regular schedule through Tooele, Stansbury Park, Erda, and Grantsville Monday –Friday from 5am-7pm. We belong to two additional community transportation groups in which we hope to bring more transportation options to the community.

In-Home: Our agency operates its own In-Home service. We respect all the other groups and entities that work with the aging population in our county. We also realize the importance of coordinating our efforts and working together, given the amount of resources we have available. We work well together, refer to each other, and plan on maintaining good relationships for the foreseeable future.

Legal Assistance: We contract with Utah Legal Services

5. ADVISORY COUNCIL

References: OAA Sections 306(a)(6)(F) FED 45 CFR Part 1321.57

Council Composition	Number of Members
60+ Individuals	9
60+ Minority Individuals	2
60+ Residing in Rural Areas	3
Representatives of Older Individuals	2
Local Elected Officials	1
Representatives of Providers of Health Care (including Veterans Health Care if applicable)	0
Representatives of Supportive Services Provider Organizations	1
Persons With Leadership Experience in the Voluntary and Private Sectors	5
General Public	1
Total Number of Members (May not equal sum of numbers for each category)	9
Name and address of chairperson: Joe Ortega PO Box 201 Tooele UT, 84074	
Does the Area Agency Advisory Council have written books operates? [x] Yes [] No	by-laws by which it
Area Agency Advisory Council meetings schedule: 4 th	^h Wed. each month 0.1:30 pm

VII. POPULATION ESTIMATES

Population Group	Number*	Number Served in Planning and Service Area	Estimate of People Needing Services
Age 60+	6528	1788	1306
Age 65+	4368		874
Minority Age 65+	327		65

^{*}Population data from the Governor's Office of Planning and Budget are provided for each county on the attached sheet.

VIII. SPECIFIC QUESTIONS ON PROGRAM ACTIVITIES