

# Orange County Office on Aging PSA 22

## 2019-2020 Area Plan Update



**AREA PLAN UPDATE (APU) CHECKLIST**

**PSA 22**

**Check one:**  FY 17-18  FY 18-19  FY 19-20

*Use for APUs only*

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

**TRANSMITTAL LETTER**  
**2016-2020 Four Year Area Plan/ Annual Update**  
**Check one:**  FY 16-20  FY 17-18  FY 18-19  FY 19-20

**AAA Name:** Orange County Office on Aging

**PSA 22**

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

1. (see below)  
(Type Name)

\_\_\_\_\_  
Signature: Governing Board Chair <sup>1</sup>

\_\_\_\_\_  
Date

2. Elaine Gennawey

\_\_\_\_\_  
Signature: Advisory Council Chair

\_\_\_\_\_  
Date

3. Renee Ramirez  
(Type Name)

\_\_\_\_\_  
Signature: Area Agency Director

\_\_\_\_\_  
Date

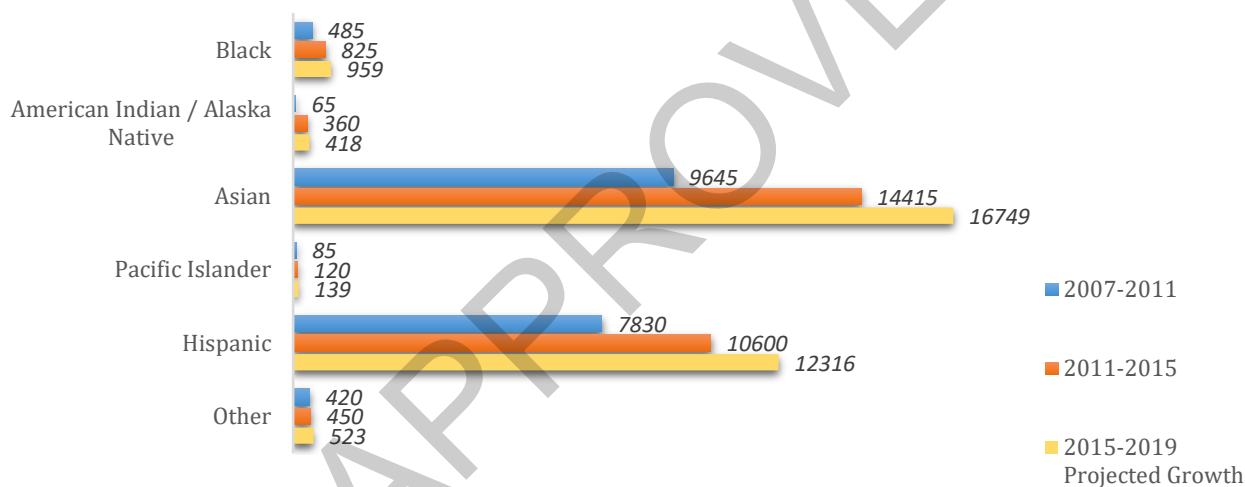
\*\* In a Minute Order dated April 12, 2016, the Orange County Board of Supervisors, as the governing body of the PSA 22 Area Agency on Aging, approved the 2016-20 Area Plan and authorized the Director of the Office on Aging to execute and submit plan updates and amendments for the 2016-20 planning period.

\_\_\_\_\_  
<sup>1</sup> Original signatures or official signature stamps are required.

**Estimate of the number of lower income minority older individuals (60+) in the PSA for the coming year.**

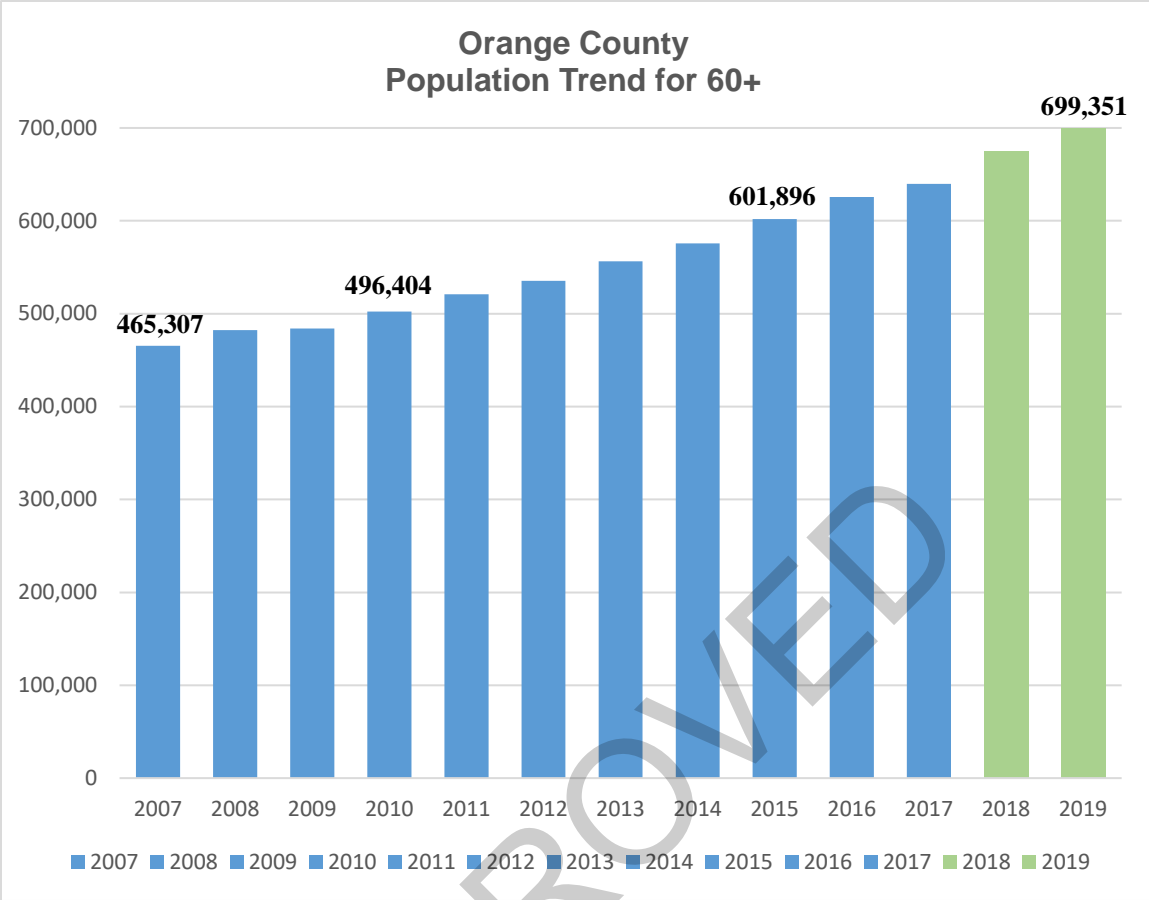
The older adult population (60+) in Orange County has steadily increased from 496,404 in 2010 to an estimated 699,351 older adults in 2019, according to the U.S. Census Bureau, along with that the lower income minority 60+ population. The graphs below show an increase in both the general 60+ population and the number of lower income minorities over the age of 60 years. An estimate number of lower income (below 100% of the Federal Poverty Guideline) minorities aged 60 and above in Orange County has been estimated for the coming year.



**Estimate of Lower Income Minorities (60+) in Orange County**



	<b>2007-2011</b>	<b>2011-2015</b>	<b>2019</b>
	<i>Number of Older Adults</i>	<i>Number of Older Adults</i>	<i>Estimated Number of Older Adults</i>
<b>Black</b>	485	825	959
<b>American Indian / Alaska Native</b>	65	360	418
<b>Asian</b>	9645	14415	16749
<b>Pacific Islander</b>	85	120	139
<b>Hispanic</b>	7830	10600	12316
<b>Other</b>	420	450	523

Source: American Community Survey Tabulation from the Administration for Community Living Aging Integrated Database



-  Older Adult (60+) Total Population
-  Older Adult (60+) Projected Population

**SECTION 7. PUBLIC HEARINGS**

**PSA 22**

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>2</sup> Yes or No	Was hearing held at a Long-Term Care Facility? <sup>3</sup> Yes or No
2016-17	3/11/2016	Garden Grove Courtyard Center	37	No	No
2017-18	4/14/2017	Buena Park Senior Center	28	No	No
	7/14/2017	Downtown Anaheim Senior Center	11	No	No
2018-19	4/13/2018	Buena Park Senior Center	21	No	No
2019-20	4/12/2019	Office on Aging, Santa Ana	15	No	No

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

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

The needs of institutionalized, homebound and/or disabled older individuals were identified and addressed by key informant service providers as part of the needs assessment and planning process. Representatives from organizations providing services to this population were in attendance at the public hearing.

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

Yes. Go to question #3

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

<sup>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.

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

N/A

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

Yes. Go to question #5

No, Explain:

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

No comments received.

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

Comments submitted were questions regarding the area plan report itself.

7. Note any changes to the Area Plan which were a result of input by attendees.

None.

APPROVED

## **SECTION 8 - IDENTIFICATION OF PRIORITIES**

### Priorities

The CCR, Article 3, Section 7312 requires that the AAA allocate an “adequate proportion” of federal funds to provide Access, In-Home Services, and Legal Assistance in the PSA. The annual minimum allocation for these priority services is to be determined by the AAA through the planning process.

In this 2016-20 planning cycle, the Office on Aging will maintain the same minimum percentages as those employed in the previous cycle:

- 42% for Access (Information & Assistance, Transportation, Case Management, and Outreach)
- 11% for In-Home Services
- 10% for Legal Assistance

In consideration of identifying priorities for service objectives, it is clear that performance objectives for this Area Plan period must be tailored to resources, which are limited. The needs are unquestionable; however the effects of resource limitations are being keenly felt by the providers of services in the Orange County aging network.

The Office on Aging intends to work as much as possible in collaborative efforts with other agencies and initiatives to maximize limited resources.

APPROVED



**SECTION 9 - AREA PLAN NARRATIVE GOALS AND OBJECTIVES****Goal #1: Informed Communities****Rationale:**

The vision of the Office on Aging is for Orange County to be the best place in America to age with dignity. The most commonly cited reason for non-use of available services is lack of knowledge and awareness that the services exist. It is critical that strategies be employed to increase the number of households and senior care professionals in Orange County that are aware of services available to older adults and persons with disabilities, their caregivers and families.

<b>Objectives:</b>	<b>Projected Start and End Dates</b>	<b>Title IIIB Funded PD or C</b>	<b>Update Status</b>
<p>1.1 The Office on Aging staff will expand the scope of traditional community outreach efforts to include increased education and awareness of resources and services available to older adults, caregivers, and persons with disabilities.</p> <ul style="list-style-type: none"> <li>• Outreaching to new groups such as case managers, churches, mobile home parks, and cultural community centers.</li> <li>• Partnering with Orange County Board of Supervisors to co-host Senior Summits in the respective districts.</li> <li>• Collaborating with community partners to incorporate an Office on Aging component into new staff trainings, such as HICAP new counselor training, other County programs, and volunteer trainings.</li> <li>• Increasing the utilization of interns and volunteers for outreach events.</li> <li>• Expand outreach efforts in the Vietnamese and Spanish communities by investigating and utilizing various modes of communication,</li> </ul>	<p>July 1, 2019- June 30, 2020</p>		<p>Continued</p> <p>Continued</p> <p>Continued</p> <p>Continued</p> <p>Continued</p>

<b>Objectives:</b>	<b>Projected Start and End Dates</b>	<b>Title IIIB Funded PD or C</b>	<b>Update Status</b>
<p>such as radio, newspaper, social media, and increased one-on-one engagement.</p> <ul style="list-style-type: none"> <li>Review data related to predominant language spoken by older adults in Orange County and translate Office on Aging materials into new languages, as needed.</li> </ul>			Continued
<p>1.2 The Office on Aging will coordinate disaster preparedness plans and activities with local agencies to expand community education and awareness of emergency preparedness for older adults and persons with disabilities using the following methods:</p> <ul style="list-style-type: none"> <li>The Office on Aging will distribute emergency/disaster preparedness packets.</li> <li>The Office on Aging will distribute “File of Life” magnets with important life-saving information inserts upon the request of call center clients and during outreach events.</li> <li>Distribution will occur through health fairs and senior expos as well as requests for printed materials to be mailed to clients’ homes.</li> <li>Expanded collaboration and discussion with county agencies on the department’s role in disaster response.</li> </ul>	July 1, 2019- June 30, 2020		Revised
<p>1.3 The Office on Aging will plan, arrange and/or provide presentations to groups of older adults, caregivers, and service providers, on such subjects as: senior services overview, nutrition, exercise, fall prevention, medications, health promotion, advance healthcare directives, available health-related services and additional topics as requested. A minimum of forty such presentations will be delivered over the course of the year.</p>	July 1, 2019- June 30, 2020		Revised
<p>1.4 The Office on Aging will write quarterly newsletters, post on the Office on Aging website, promote through social media campaigns, and distribute senior-related articles to senior/community centers, residential facilities, healthcare providers, community colleges, senior service provides, and the community at large. A minimum of four of these</p>	July 1, 2019- June 30, 2020		Revised

<b>Objectives:</b>	<b>Projected Start and End Dates</b>	<b>Title IIIB Funded PD or C</b>	<b>Update Status</b>
newsletters will be delivered over the course of the year.			
<p>1.5 The Long-Term Care Ombudsman Program, through the contracted service provider, Council on Aging – Southern California, will increase community awareness of the Program through the following efforts:</p> <ul style="list-style-type: none"> <li>• Continued use of newspaper advertisements that serve the dual purposes of volunteer recruitment and community education;</li> <li>• Use of radio ads that would also serve the purposes of recruitment and community education;</li> <li>• Speaking engagements for community groups;</li> <li>• Distribution of the Answers guide, which includes information regarding the Ombudsman Program;</li> <li>• Continued collaboration with other community partners such as Adult Protective Services, the Financial Abuse Specialist Team, the Elder Abuse Forensic Center and the Orange County Regional Center in order to tap into resources that may be available for residents of long-term care facilities.</li> </ul>	July 1, 2019- June 30, 2020		<p>Revised</p> <p>Revised</p> <p>New</p> <p>New</p> <p>Revised</p> <p>Continued</p>

## Goal #2: Coordinated service delivery and collaborative partnerships

### Rationale:

The Office on Aging is charged with the responsibility of serving as lead advocate, systems planner and facilitator of services and programs for older adults and caregivers in Orange County. Consistent with the missions of OC Community Services and the Office on Aging, the Office on Aging will foster strategic partnerships addressing issues that relate to the health, well-being, independence, and dignity of older adults in Orange County. Limited resources demand cooperative approaches to service delivery and systems planning. In addition, population projections prove the urgent need for strategic planning for coordination of service delivery as the baby boomers reach retirement.

<b>Objectives:</b>	<b>Projected Start and End Dates</b>	<b>Title III B Funded PD or C</b>	<b>Update Status</b>
2.1 The Office on Aging will continue as an advisory member of the Orange County Aging Services Collaborative. Participation on this committee requires ongoing contributions from the members and Office on Aging serves on the Communications, Family Caregiver, and Healthy Aging Initiative subcommittees. Office on Aging staff will support the ongoing activities of this collaborative by serving as a facilitator and planner on countywide initiatives.	July 1, 2019- June 30, 2020		Continued
2.2 The Office on Aging will continue to serve as a member on the Leadership Council of the OC Strategic Plan on Aging. Activities include participation by Office on Aging staff on various subcommittees. Office on Aging will support the ongoing activities of this initiative by serving as a contributor to the development of the strategic plan and other projects.	July 1, 2019- June 30, 2020		Continued
2.3 The Office on Aging will continue the partnership with the Dayle McIntosh Center by maintaining the designated status for the ADRC (Aging and Disability Resource Connection) in Orange County, hosting and maintaining the ADRC website and reconvening the Advisory Committee.	July 1, 2019- June 30, 2020		Revised

<b>Objectives:</b>	<b>Projected Start and End Dates</b>	<b>Title IIIB Funded PD or C</b>	<b>Update Status</b>
2.4 The Office on Aging will continue to participate with other senior-based organizations, on community collaborative groups that address emergent issues, such as mental health, elder abuse, and substance abuse.	July 1, 2019- June 30, 2020		Continued
2.5 As the contracted service provider of Title VIIA Elder Abuse Prevention services, the Council on Aging – Southern California will operate the Senior Protection Program (SPP) and Financial Abuse Specialist Team (FAST), to combat elder abuse and financial crimes against older adults in Orange County. FAST includes participation by Adult Protective Services and a team of volunteer consultants including the Public Guardian, city attorneys, law enforcement representatives, banking industry professionals, legal services providers, the Ombudsman program, and private professionals from relevant industries.	July 1, 2019- June 30, 2020		Revised
2.6 Establish and maintain partnerships with other county agencies such as the Health Care Agency and Social Services to share knowledge, information, address common challenges and create open lines of communication to better serve the target population.	July 1, 2019- June 30, 2020		New

**Title IIID/Disease Prevention and Health Promotion Written Objectives:**

Office on Aging offers five (5) evidence-based programs that meet criteria #2 outlined in the Area Plan Guidance:

1. Chronic Disease Self-Management Program (CDSMP)
2. Tomando Control de su Salud
3. Diabetes Self-Management Program (DSMP)
4. Programa de Manejo Personal de la Diabetes
5. A Matter of Balance (AMOB)

Each of these programs has been deemed evidence-based by the Administration on Aging.

<b>Objectives:</b>	<b>Projected Start and End Dates</b>	<b>Update Status</b>
2.7 The Office on Aging will provide evidence-based Chronic Disease Self-Management Education (Chronic Disease Self-Management Program, Diabetes Self-Management Program, Tomando Control de su Salud, and Programa de Manejo Personal de la Diabetes) and A Matter of Balance using lay leaders and community partner staff. The leaders will facilitate 25 workshops and reach 1,520 participants.	July 1, 2019- June 30, 2020	Continued
2.8 The Office on Aging will expand and enhance a lay leader development program to increase program fidelity and leader retention by hosting quarterly leader meetings.	July 1, 2019- June 30, 2020	Continued
2.9 The Office on Aging will further expand the Ambassador Program, trained volunteers, to promote the CDSME and AMOB programs to increase workshop participation rates.	July 1, 2019- June 30, 2020	Revised
2.10 Through a Memorandum of Understanding with the Health Care Agency (HCA), the Health Promotion staff will partner with the Office on Aging to jointly plan, monitor, and improve activities toward countywide expansion and sustainability for the CDSME programs through the following activities: <ul style="list-style-type: none"> <li>• Co-facilitate a minimum of 2 lay leader trainings for Chronic Disease Self-management Programs and Diabetes Self-Management Program.</li> <li>• Building capacity through leader development strategies, exploring different marketing techniques, and coordinating scheduled leader meetings.</li> </ul>	July 1, 2019- June 30, 2020	Continued

### Goal #3: Satisfied Customers

#### Rationale:

Excellent customer service is measured through quality assurance protocols and customer satisfaction follow-up of Area Plan program clients who access the Information & Assistance call center and those who utilize the Senior Non-Emergency Medical Transportation Program (SNEMT).

Objectives:	Projected Start and End Dates	Title IIIB Funded PD or C	Update Status
<p>3.1 The Office on Aging will ensure that staff are providing excellent customer service and clients are satisfied by adhering to quality assurance protocols measured as follows:</p> <ul style="list-style-type: none"> <li>• An Information &amp; Assistance call center follow-up survey will be conducted via telephone call or automated survey to a sample population of callers who contact the call center requesting community related referrals. The surveys will measure the callers overall experience and interaction with the Office on Aging staff member. The target goal will be to achieve a score of 90% or higher.</li> <li>• Customer Satisfaction Surveys will be collected from clients who are actively enrolled in the Senior Non-Emergency Medical Transportation (SNEMT) program. Survey questions will be rated on a 5-point scale with a baseline rating of "3" (95%) or higher.</li> </ul>	July 1, 2019- June 30, 2020		Revised
<p>3.2 Collect and review evaluation forms from community education presentations conducted by Office on Aging staff or community partners, and follow-up on issues/recommendations as identified on the evaluation forms, when necessary.</p>	July 1, 2019- June 30, 2020		Continued
<p>3.3 Office on Aging will explore additional options to enhance the collection of customer satisfaction data within different departments.</p>	July 1, 2019- June 30, 2020		Continued

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

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

The Service Unit Plan (SUP) uses the National Aging Program Information System (NAPIS) Categories and units of service. They are defined in the [NAPIS State Program Report \(SPR\)](#)

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

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

**1. Personal Care (In-Home) Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	2,500	2	
2017-2018	2,600	2	
2018-2019	2,700	2	
2019-2020	2,800	2	

**2. Homemaker (In-Home) Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	8,000	2	
2017-2018	8,000	2	
2018-2019	6,000	2	
2019-2020	6,000	2	

**3. Chore (In-Home) Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	340	2	
2017-2018	350	2	
2018-2019	400	2	
2019-2020	440		



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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	990,000	2	
2017-2018	990,000	2	
2018-2019	990,000	2	
2019-2020	990,000	2	

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	42,000	2	
2017-2018	42,000	2	
2018-2019	50,000	2	
2019-2020	50,000	2	

**6. Case Management (Access)****Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	12,500	2	
2017-2018	12,500	2	
2018-2019	11,250	2	
2019-2020	11,250	2	

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	N/A		
2017-2018	N/A		
2018-2019	N/A		
2019-2020	N/A		

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	350,000	2	
2017-2018	350,000	2	
2018-2019	350,000	2	
2019-2020	350,000	2	

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	N/A		
2017-2018	N/A		
2018-2019	N/A		
2019-2020	N/A		

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	32,000	2	
2017-2018	38,000	2	
2018-2019	30,000	2	
2019-2020	32,000	2	

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	7,000	2	
2017-2018	6,000	2	
2018-2019	7,500	2	
2019-2020	8,000	2	

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	14,000	1,2	
2017-2018	15,000	1,2	
2018-2019	12,500	1,2	
2019-2020	12,000	1,2	

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	30,000	1,2	
2017-2018	35,000	1,2	
2018-2019	25,000	1,2	
2019-2020	23,000	1,2	

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	13,000	1	
2017-2018	16,000	1	
2018-2019	16,000	1	
2019-2020	15,000	1	

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

- Each **Title IIIB** “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 IIIB** 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 IIIB, Other Priority and Non-Priority Supportive Services**

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

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

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

**Other Supportive Service Category Senior Center Activities Unit of Service = 1 Hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2016-2017	20,500	2	
2017-2018	20,000	2	
2018-2019	18,000	2	
2019-2020	20,000	2	

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2016-2017	54,000	2	
2017-2018	50,000	2	
2018-2019	25,000	2	
2019-2020	25,000	2	

**Other Supportive Service Category** Interpretation/Translation**Unit of Service = 1 Contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2016-2017	17,500	2	
2017-2018	17,500	2	
2018-2019	5,400	2	
2019-2020	5,800	2	

**Other Supportive Service Category** Community Education**Unit of Service = 1 Activity**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2016-2017	20	1	1.3
2017-2018	36	1	1.3
2018-2019	40	1	1.3
2019-2020	40	1	1.3

**Other Supportive Service Category** Disaster Preparedness Materials **Unit of Service = 1 Product**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers
2016-2017	750	1	1.2
2017-2018	750	1	1.2
2018-2019	1,000	1	1.2
2019-2020	1,000	1	1.2

**16. Title IIID/ Disease Prevention and Health Promotion****Unit of Service = 1 contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (Required)
2016-2017	1,340	2	2.5, 2.6, 2.7, 2.8
2017-2018	1,520	2	2.5, 2.6, 2.8
2018-2019	1,520	2	2.5, 2.6, 2.7, 2.8
2019-2020	1,680	2	2.7, 2.8, 2.9, 2.10

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

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

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

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

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

Complete all Measures and Targets for Outcomes 1-3.

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

**Measures and Targets:**

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

The average California complaint resolution rate for FY 2013-2014 was 73%.

1. FY 2014-2015 Baseline Resolution Rate:

Number of complaints resolved **601** + Number of partially resolved complaints **132** divided by the Total Number of Complaints Received **1204** = Baseline Resolution Rate **61%**  
FY 2016-17 Target Resolution Rate **65%**

2. FY 2015-2016 Baseline Resolution Rate:

Number of complaints resolved **691** + Number of partially resolved complaints **150** divided by the Total Number of Complaints Received **1,292** = Baseline Resolution Rate **65%**  
FY 2017-18 Target Resolution Rate **65%**

3. FY 2016-2017 Baseline Resolution Rate:

Number of complaints resolved **651** + Number of partially resolved complaints **119** divided by the Total Number of Complaints Received **1,224** = Baseline Resolution Rate **63%**  
FY 2018-19 Target Resolution Rate **65%**

4. FY 2017-2018 Baseline Resolution Rate:  
 Number of complaints resolved 568 + Number of partially resolved complaints 118 divided by the Total Number of Complaints Received 966 = Baseline Resolution Rate 71%  
 FY 2019-20 Target Resolution Rate 65%

Program Goals and Objective Numbers: 2

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

1. FY 2014-2015 Baseline: number of Resident Council meetings attended 986  
 FY 2016-2017 Target: 992

2. FY 2015-2016 Baseline: number of Resident Council meetings attended 917  
 FY 2017-2018 Target: 925

3. FY 2016-2017 Baseline: number of Resident Council meetings attended 959  
 FY 2018-2019 Target: 950

4. FY 2017-2018 Baseline: number of Resident Council meetings attended 908  
 FY 2019-2020 Target: 950

Program Goals and Objective Numbers: 2

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

1. FY 2014-2015 Baseline number of Family Council meetings attended 55  
 FY 2016-2017 Target: 54

2. FY 2015-2016 Baseline number of Family Council meetings attended 48  
 FY 2017-2018 Target: 50

3. FY 2016-2017 Baseline number of Family Council meetings attended 43  
 FY 2018-2019 Target: 45

4. FY 2017-2018 Baseline number of Family Council meetings attended 22  
 FY 2019-2020 Target: 20

Program Goals and Objective Numbers: 2

**D. Consultation to Facilities** (AoA Report, Part III.D.4) Count of instances of ombudsman representatives' interactions with facility staff for the purpose of providing general information and assistance unrelated to a complaint. Consultation may be accomplished by telephone, letter, email, fax, or in person.

1. FY 2014-2015 Baseline: number of consultations 1311  
 FY 2016-2017 Target: 1220

2. FY 2015-2016 Baseline: number of consultations 1,677  
 FY 2017-2018 Target: 1700

3. FY 2016-2017 Baseline: number of consultations 1800  
 FY 2018-2019 Target: 1800

4. FY 2017-2018 Baseline: number of consultations 1700  
 FY 2019-2020 Target: 1800

Program Goals and Objective Numbers: 2

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

1. FY 2014-2015 Baseline: number of consultations <b><u>3624</u></b> FY 2016-2017 Target: <b><u>3400</u></b>
2. FY 2015-2016 Baseline: number of consultations <b><u>3,008</u></b> FY 2017-2018 Target: <b><u>3025</u></b>
3. FY 2016-2017 Baseline: number of consultations <b><u>3732</u></b> FY 2018-2019 Target: <b><u>3700</u></b>
4. FY 2017-2018 Baseline: number of consultations <b><u>4270</u></b> FY 2019-2020 Target: <b><u>3700</u></b>
Program Goals and Objective Numbers: <b><u>2</u></b>

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

1. FY 2014-2015 Baseline: number of sessions <b><u>22</u></b> FY 2016-2017 Target: <b><u>25</u></b>
2. FY 2015-2016 Baseline: number of sessions <b><u>17</u></b> FY 2017-2018 Target: <b><u>20</u></b>
3. FY 2016-2017 Baseline: number of sessions <b><u>23</u></b> FY 2018-2019 Target: <b><u>20</u></b>
1. FY 2017-2018 Baseline: number of sessions <b><u>13</u></b> FY 2019-2020 Target: <b><u>20</u></b>
Program Goals and Objective Numbers: <b><u>2</u></b>

**G. Systems Advocacy**

In the box below, in narrative format, provide at least one new priority systemic advocacy effort the local LTC Ombudsman Program will engage in during the fiscal year. If the systemic advocacy effort is a multi-year initiative, provide a systemic advocacy objective that explains progress made in the initiative during the prior fiscal year and identifies specific steps to be taken during the upcoming fiscal year. A new effort or a statement of progress made and goals for the upcoming year must be entered each year of the four-year cycle.

Systems Advocacy can include efforts to improve conditions in one LTC facility or can be county-wide, State-wide, or even national in scope. (Examples: Work with LTC facilities to promote person-centered care and reduce the use of anti-psychotics, work with law enforcement entities to improve response and investigation of abuse complaints, collaboration with other agencies to improve LTC residents' quality of care and quality of life, participation in disaster preparedness planning, participation in legislative advocacy efforts related to LTC issues, etc.



Enter information in the box below.

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

Through Council on Aging – Southern California, the Ombudsman Program has been very involved with the California Long Term Care Ombudsman Association, particularly in FY 2018-2019. During those two fiscal years, they participated in letter-writing campaigns, visits to legislators and testifying in front of legislative committee hearings to educate the California Assembly and Senate about the work of the Ombudsman Program and the need for increased funding. Given the success in advocating for increased funding, the Ombudsman program anticipates a shift in focus to issues affecting those in long-term care. This will include expansion of the Medi-Cal Waiver program and a concentration on residents' rights. The State Ombudsman's annual Spring Conference incorporates a Legislative Advocacy Day, which allows Council on Aging staff an opportunity to visit local legislators at the Capitol in Sacramento and to educate them with respect to the Ombudsman program services and gain recognition for the Program.

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

**Measures and Targets:**

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

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

1. FY 2014-2015 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint **70** divided by the total number of Nursing Facilities **74** = Baseline **95%**

FY 2016-2017 Target: **95%**

2. FY 2015-2016 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint **67** divided by the total number of Nursing Facilities **77** = Baseline **87%**

FY 2017-2018 Target: **95%**

3. FY 2016-2017 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint **68** divided by the total number of Nursing Facilities **75** = Baseline **91%**

FY 2018-2019 Target: **95%**

4. FY 2017-2018 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint **68** divided by the total number of Nursing Facilities **75** = Baseline **91%**

FY 2019-2020 Target: **95%**

Program Goals and Objective Numbers: 2

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

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

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

1. FY 2014-2015 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint **610** divided by the total number of RCFEs **919** = Baseline **66%**  
FY 2016-2017 Target: **75%**

2. FY 2015-2016 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint **635** divided by the total number of RCFEs **917** = Baseline **69%**  
FY 2017-2018 Target: **70%**

3. FY 2016-2017 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint **665** divided by the total number of RCFEs **928** = Baseline **72%**  
FY 2018-2019 Target: **70%**

4. FY 2017-2018 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint **623** divided by the total number of RCFEs **940** = Baseline **66%**  
FY 2019-2020 Target: **70%**

Program Goals and Objective Numbers: 2

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

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

1. FY 2014-2015 Baseline: **13.14** FTEs  
FY 2016-2017 Target: **15.19** FTEs

2. FY 2015-2016 Baseline: **13.89** FTEs  
FY 2017-2018 Target: **14.00** FTEs

3. FY 2016-2017 Baseline: **11.9** FTEs  
FY 2018-2019 Target: **12.0** FTEs

4. FY 2017-2018 Baseline: **9.22** FTEs  
FY 2019-2020 Target: **11.9** FTEs

Program Goals and Objective Numbers: 2

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

1. FY 2014-2015 Baseline: Number of certified LTC Ombudsman volunteers <u>76</u> FY 2016-2017 Projected Number of certified LTC Ombudsman volunteers <u>80</u>
2. FY 2015-2016 Baseline: Number of certified LTC Ombudsman volunteers <u>60</u> FY 2017-2018 Projected Number of certified LTC Ombudsman volunteers <u>70</u>
3. FY 2016-2017 Baseline: Number of certified LTC Ombudsman volunteers <u>53</u> FY 2018-2019 Projected Number of certified LTC Ombudsman volunteers <u>65</u>
4. FY 2017-2018 Baseline: Number of certified LTC Ombudsman volunteers <u>55</u> FY 2019-2020 Projected Number of certified LTC Ombudsman volunteers <u>65</u>
Program Goals and Objective Numbers: <u>2</u>

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

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

Some examples could include:

- Having Ombudsman Program staff and volunteers regularly attend NORS Consistency Training provided by the OSLTCO
- Hiring additional staff to enter data
- Updating computer equipment to make data entry easier
- Initiating a case review process to ensure case entry is completed in a timely manner

In order to increase the accuracy and consistency of the program's NORS data reporting, all Program staff and volunteers will regularly participate in the NORS Consistency Training provided by the OSLTCO.

Reports referred to Ombudsman staff and volunteers will be tracked to determine whether a corresponding NORS has been filed or whether no NORS was needed.

## **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. OAA 302(3) 'Family caregiver' means an adult family member, or another individual, who is an informal provider of in-home and community care to an older individual or to an individual with Alzheimer's disease or a related disorder with neurological and organic brain dysfunction.
- **Hours Spent Developing a Coordinated System to Respond to Elder Abuse** –Indicate the number of hours to be spent developing a coordinated system to respond to elder abuse. This category includes time spent coordinating services provided by the AAA or its contracted service provider with services provided by Adult Protective Services, local law enforcement agencies, legal services providers, and other agencies involved in the protection of elder and dependent adults from abuse, neglect, and exploitation.
- **Educational Materials Distributed** –Indicate the type and number of educational materials to be distributed to the general public, professionals, and caregivers (this may include materials that have been developed by others) to help in the identification, prevention, and treatment of elder abuse, neglect, and exploitation.

- **Number of Individuals Served** –Indicate the total number of individuals expected to be reached by any of the above activities of this program.

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

The agency receiving Title VIIA Elder Abuse Prevention funding is: Council on Aging – Southern California

<b>Fiscal Year</b>	<b>Total # of Public Education Sessions</b>
2016-2017	20
2017-2018	20
2018-2019	20
2019-2020	22

<b>Fiscal Year</b>	<b>Total # of Training Sessions for Professionals</b>
2016-2017	12
2017-2018	12
2018-2019	12
2019-2020	13

<b>Fiscal Year</b>	<b>Total # of Training Sessions for Caregivers served by Title III E</b>
2016-2017	N/A
2017-2018	N/A
2018-2019	N/A
2019-2020	6

<b>Fiscal Year</b>	<b>Total # of Hours Spent Developing a Coordinated System</b>
2016-2017	276
2017-2018	276
2018-2019	276
2019-2020	300

<b>Fiscal Year</b>	<b>Total # of Copies of Educational Materials to be Distributed</b>	<b>Description of Educational Materials</b>
2016-2017	2,400	FAST brochure and bookmarks; Answer's Guides Healthcare Fraud brochure from SMP; All COA-SC Program brochures; other materials relevant to specific subject matter
2017-2018	2,400	FAST brochure and bookmarks; Answer's Guides Healthcare Fraud brochure from SMP; COA-SC Program brochures; other materials relevant to specific subject matter.
2018-2019	2,400	FAST brochure and bookmarks; Answer's Guides Healthcare Fraud brochure from SMP; COA-SC Program brochures; other materials relevant to specific subject matter.
<b>Fiscal Year</b>	<b>Total # of Copies of</b>	<b>Description of Educational Materials</b>

	<b>Educational Materials to be Distributed</b>	
2019-2020	2,600	FAST brochure and bookmarks; Answer's Guides Healthcare Fraud brochure from SMP; COA-SC Program brochures; other materials relevant to specific subject matter.

<b>Fiscal Year</b>	<b>Total Number of Individuals Served</b>
2016-2017	1,500
2017-2018	3,000
2018-2019	3,000
2019-2020	3,100

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## TITLE IIIE SERVICE UNIT PLAN OBJECTIVES

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

### Direct and/or Contracted IIIE Services

CATEGORIES	1	2	3
<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>		
2016-2017	# of activities: 250 Total est. audience for above: 170,000	1,2	
2017-2018	# of activities: 275 Total est. audience for above: 200,000	1,2	
2018-2019	# of activities: 275 Total est. audience for above: 175,000	1,2	
2019-2020	# of activities: 275 Total est. audience for above: 175,000	1,2	
<b>Access Assistance</b>	<b>Total contacts</b>		
2016-2017	17,750	1,2	
2017-2018	17,750	1,2	
2018-2019	18,000	1,2	
2019-2020	19,000	1,2	



<b>Support Services</b>	<b>Total hours</b>		
2016-2017	1,075	1,2	
2017-2018	1,200	1,2	
2018-2019	1,500	1,2	
2019-2020	1,600	1,2	
<b>Respite Care</b>	<b>Total hours</b>		
2016-2017	4,675	1,2	
2017-2018	5,000	1,2	
2018-2019	5,000	1,2	
2019-2020	5,500	1,2	
<b>Supplemental Services</b>	<b>Total occurrences</b>		
2016-2017	30	1,2	
2017-2018	30	1,2	
2018-2019	30	1,2	
2019-2020	33	1,2	

**Direct and/or Contracted III E Services**

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

<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>	N/A	
2016-2017			
2017-2018			
2018-2019			
2019-2020			
<b>Support Services</b>	<b>Total hours</b>	N/A	
2016-2017			
2017-2018			
2018-2019			
2019-2020			
<b>Respite Care</b>	<b>Total hours</b>	N/A	
2016-2017			
2017-2018			
2018-2019			
2019-2020			
<b>Supplemental Services</b>	<b>Total occurrences</b>	N/A	
2016-2017			
2017-2018			
2018-2019			
2019-2020			

**SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP)**

List all SCSEP monitor sites (contract or direct) where the AAA provides SCSEP enrollment services within the PSA (Do not list host agencies)

Enrollment Location/Name (AAA office, One Stop, Agency, etc.): Working Wardrobes - Irvine
Street Address: 1851 Kettering St., Irvine, CA 92614
Name and title of all SCSEP paid project staff members (Do not list participant or participant staff names):  Albert Stone: Program Coordinator Norma Arebalo; Program Assistant (2 days per week)
Number of paid staff: <b>2</b> Number of participant staff: <b>2</b> (assigned at Working Wardrobes)
How many participants are served at this site? 13

Enrollment Location/Name (AAA office, One Stop, Agency, etc.): Orange County One-Stop Center – Garden Grove
Street Address: 7077 Orangewood Ave, Suite 200, Garden Grove, CA 92841
Name and title of all SCSEP paid project staff members (Do not list participant or participant staff names):  Norma Arebalo; Program Assistant (2 days per week)
Number of paid staff: <b>1</b> Number of participant staff: <b>1</b> (assigned at EDD)
How many participants are served at this site? 40

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

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

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

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

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

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

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

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

AAA's should demonstrate progress toward meeting or improving on the Performance requirements established by CDA and ACL as is displayed annually on the HICAP State and Federal Performance Measures tool located online at:  
<https://www.aging.ca.gov/ProgramsProviders/AAA/Planning/>.

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

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**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>4</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 2016-17 through FY 2019-20

**Access:**

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

2016-17 42%      17-18 42%      18-19 42%      19-20 42%

**In-Home Services:**

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

2016-17 11%      17-18 11%      18-19 11%      19-20 11%

**Legal Assistance Required Activities:<sup>5</sup>**

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

2016-17 10%      17-18 10%      18-19 10%      19-20 10%

Explain how allocations are justified and how they are determined to be sufficient to meet the need for the service within the PSA. Available resources reflect the adequate proportion percentages. Funds expenditure exceeds the minimum percentages on a consistent basis.

<sup>4</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>5</sup> Legal Assistance must include all of the following activities: Legal Advice, Representation, Assistance to the Ombudsman Program and Involvement in the Private Bar.

**SECTION 16 - GOVERNING BOARD**

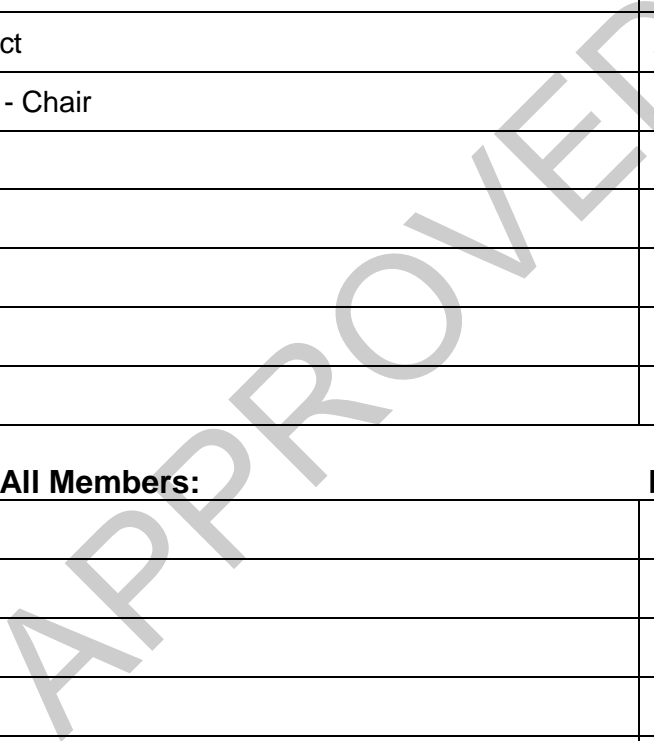
**GOVERNING BOARD MEMBERSHIP  
2016-2020 Four-Year Area Plan Cycle**

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

**Total Number of Board Members:     5**

<b>Name and Title of Officers:</b>	<b>Office Term Expires:</b>
Andrew Do 1 <sup>st</sup> District	2021
Michelle Steel 2 <sup>nd</sup> District – Vice Chair	2023
Don Wagner 3 <sup>rd</sup> District	2021
Doug Chaffee 4 <sup>th</sup> District	2023
Lisa Bartlett 5 <sup>th</sup> District - Chair	2023

<b>Names and Titles of All Members:</b>	<b>Board Term Expires:</b>



**SECTION 17 - ADVISORY COUNCIL**

**ADVISORY COUNCIL MEMBERSHIP  
2016-2020 Four-Year Planning Cycle**

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

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Total Council Membership (include vacancies) 40

Number of Council Members over age 60 23

	<u>% of PSA's 60+Population</u>	<u>% on Advisory Council</u>
<b>Race/Ethnic Composition</b>		
White	<u>60.2</u>	<u>62.1</u>
Hispanic	<u>16.1</u>	<u>27.6</u>
Black	<u>1.6</u>	<u>0.0</u>
Asian/Pacific Islander	<u>20.3</u>	<u>10.3</u>
Native American/Alaskan Native	<u>0.5</u>	<u>0.0</u>
Other	<u>4.0</u>	<u>0.0</u>

**Name and Title of Officers:**

**Office Term Expires:**

Elaine Gennawey – Chair	12/31/19
Anthony Allevato Vice Chair	12/31/19
Guadalupe Leon - Treasurer	12/31/19
Elizabeth Busick - Secretary	12/31/18
John Pointer – Past Chair	12/31/19
Eugene Hernandez – Member-At-Large	12/31/19
Dave Tetzlaff – Member-At-Large	12/31/20

**Name of other members:**

**Office Term Expires:**

Linda J. Barcelona	12/31/17
Denise Barnes	12/31/20
Anna T. Boyce	12/31/20
Nancy Cheng	12/31/20
Charlie Choi	12/31/20
Carol Downey	12/31/20



Dee Erman	12/31/20
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**Name of other members:**

**Office Term Expires:**

Sherry Geyer	12/31/19
Rebecca R. Gomez	12/31/19
Denise Habjan	12/31/20
Shari L. Horne	12/31/20
Carolyn Inmon	12/31/20
Larry Kramer	12/31/19
Jim Levy	12/31/20
Mary Ellen Lohnes	12/31/18
Guy Navarro	12/31/19
Anthony Rodella	12/31/19
Christina Selter	12/31/20
Dave Sullivan	12/31/19
Frank Sun	12/31/19
Jeffrey Rodriguez – SSA Representative	Indefinite

Indicate which member(s) represent each of the “Other Representation” categories listed below. To protect the privacy of the members of the Advisory Council, this personal information will not be included in this public document, but will be provided to CDA upon request.

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

Explain any "No" answer(s): \_\_\_\_\_

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

The Board of Supervisors appoints twelve members, the City Selection Committee appoints ten members, and the council itself appoints the remaining eighteen members. All members appointed by the Board of Supervisors and by the City Selection Committee shall serve at the pleasure of the appointing body except that the Board of Supervisors, by majority vote, may reject appointment by any authority. Service beyond a two-year term shall be considered by the appointing authority at the end of each two-year term. A member who has not been reappointed or replaced at the termination date of appointment shall serve as a member until reappointed or replaced unless the appointing authority rules otherwise.

APPROVED

**SECTION 18 - LEGAL ASSISTANCE**

PSA 22

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


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This section must be completed and submitted with the Four-Year Area Plan. Any changes to this Section must be documented on this form and remitted with Area Plan Updates.<sup>6</sup>

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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:

The mission of PSA 22 as it relates to Legal Services is to support the Legal Aid Society of Orange County (LASOC) Senior Citizen Legal Advocacy Program (SCLAP) by providing Title IIIB funds to augment the funding level of the program so that Orange County older adults in the greatest social and economic need will be provided access to legal services.

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

A minimum of 10 percent.

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).

During the last year, there continues to be a high demand for legal services and in the complexity of the problems for which seniors seek legal assistance. There has been an increase in elder abuse (including financial elder abuse) referrals and requests of conservatorships. LASOC collaborates with the various legal units within the agency to provide holistic services to seniors. The legal units include family law, consumer, tax, and health care advocacy. The Office on Aging's Information & Assistance department also continues to see a high demand for legal referral requests.

4. Specific to Legal Services, does the AAA's contract/agreement with the Legal Services Provider(s) (LSPs) specify that the LSPs are expected to use the California Statewide Guidelines in the provision of OAA legal services?

Yes. The requirement to use the California Statewide Guidelines in the provision of OAA legal services was added to the scope of services for the FY 19-20 legal services contract.

5. Does the AAA collaborate with the Legal Services Provider(s) to jointly establish specific priorities issues for legal services? If so what are the top four (4) priority legal issues in your PSA?

Yes. The AAA and LSP collaborated to establish the following legal service priority issues:

- Housing (landlord and tenant issues and subsidized housing)
  - Income Maintenance (including government benefits)
-

- Elder Abuse (including financial elder abuse and scams)
- Consumer Issues (probate and bankruptcy)

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:

Yes. The AAA and LSP continue to collaborate on identifying a target population through the sharing of information about Orange County seniors, as well as through the establishment of priority legal needs. In keeping with the Older Americans requirements, the AAA and LSP seek to target services to seniors with particular attention to low-income, minority and or individuals with Limited English Proficiency. These targeted individuals are reached through the LASOC hotline and in person consultation for walk in clients seeking assistance at the main office. LASOC also attends 14 senior centers throughout Orange County for one on one consultations with clients as well as visits with Vietnamese Speaking clients at the County Community Service Center in Westminster. Twice a month, LASOC visits the homeless shelters and offers presentations and clinics to other sites throughout Orange County.

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

LASOC provides free legal services to low-income and older adult Orange County residents. Services to older adults are provided primarily through the Senior Citizens Legal Advocacy Program (SCLAP), a program within LASOC designated to serve Orange County residents age 60 and above. Older adults generally request direct assistance by calling LASOC's Legal Hotline, by attending one of the 14 senior centers that schedule appointments with seniors to discuss their case with one of our representatives, or by attending local community fairs. Offsite visits are sometimes offered for those who are home-bound or in the hospital. SCLAP targets services to older adults who are low-income and minority and older adults who are frail, disabled or at risk of significant loss or harm. The case priorities established by the SCLAP help reach this targeted audience. SCLAP provides a higher level of assistance in cases primarily affecting older adults with limited resources. This could involve attending one of the legal clinics, providing limited assistance, or representing a client in court or at an administrative hearing. While the majority of time is spent on direct-service cases, SCLAP also delivers community presentations to educate seniors on specific legal topics and the services available to them.

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

Fiscal Year	# of Legal Assistance Services Providers
2016-2017	1
2017-2018	1
2018-2019	1
2019-2020	1

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

Yes. The LASOC hotline is open from 9 am to 6 pm on Mondays through Thursday and 9 am to 5 pm on Fridays. Walk ins are welcome Monday through Fridays from 9 am to 5 pm.

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

LASOC attends 14 senior centers monthly throughout Orange County, the County Community Service Center in Westminster, and homeless shelters twice a month for one on one consultations with clients. LASOC also offers presentations and clinics at various locations (Senior Apartments, Senior Centers, Alzheimer's Associations) on subjects such as the Advanced Health Care Directive and Power of Attorney. LASOC averages 3 clinics per month with approximately 15-20 persons in attendance.

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

<b>Fiscal Year</b>	<b>Name of Provider</b>	<b>Geographic Region covered</b>
2016-2017	Legal Aid Society of Orange County	Countywide
2017-2018	Legal Aid Society of Orange County	Countywide
2018-2019	Legal Aid Society of Orange County	Countywide
2019-2020	Legal Aid Society of Orange County	Countywide

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

Seniors typically request direct assistance by calling LASOC's Legal Hotline or visiting one of the senior centers that SCLAP attends monthly. To address the growing legal needs of older adults in Orange County, LASOC has also included additional legal information, including facts sheets and forms such as a will or Advanced Health Care Directive, on its website. The Office on Aging Information & Assistance program refers older adults to SCLAP, as does APS. LASOC offers legal clinics conducted by attorneys in areas such as Supplemental Security Income (SSI), divorce, family, bankruptcy, education, landlord-tenant, limited conservatorships and small-claims matters, worker's rights, consumer's rights, and probate accounting.

## 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):

The primary legal issues handled by SCLAP include government benefits, landlord-tenant issues, elder abuse, probate, and health and consumer problems. Areas in which LASOC is seeing more requests include conservatorships for family members, consumer scams, and issues with student loan repayments.

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:

In the past four years, SCLAP has seen demand for legal services increase. Legal assistance on housing, income maintenance and government benefits issues continue to be in demand, but conservatorships and elder abuse cases have increased.

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

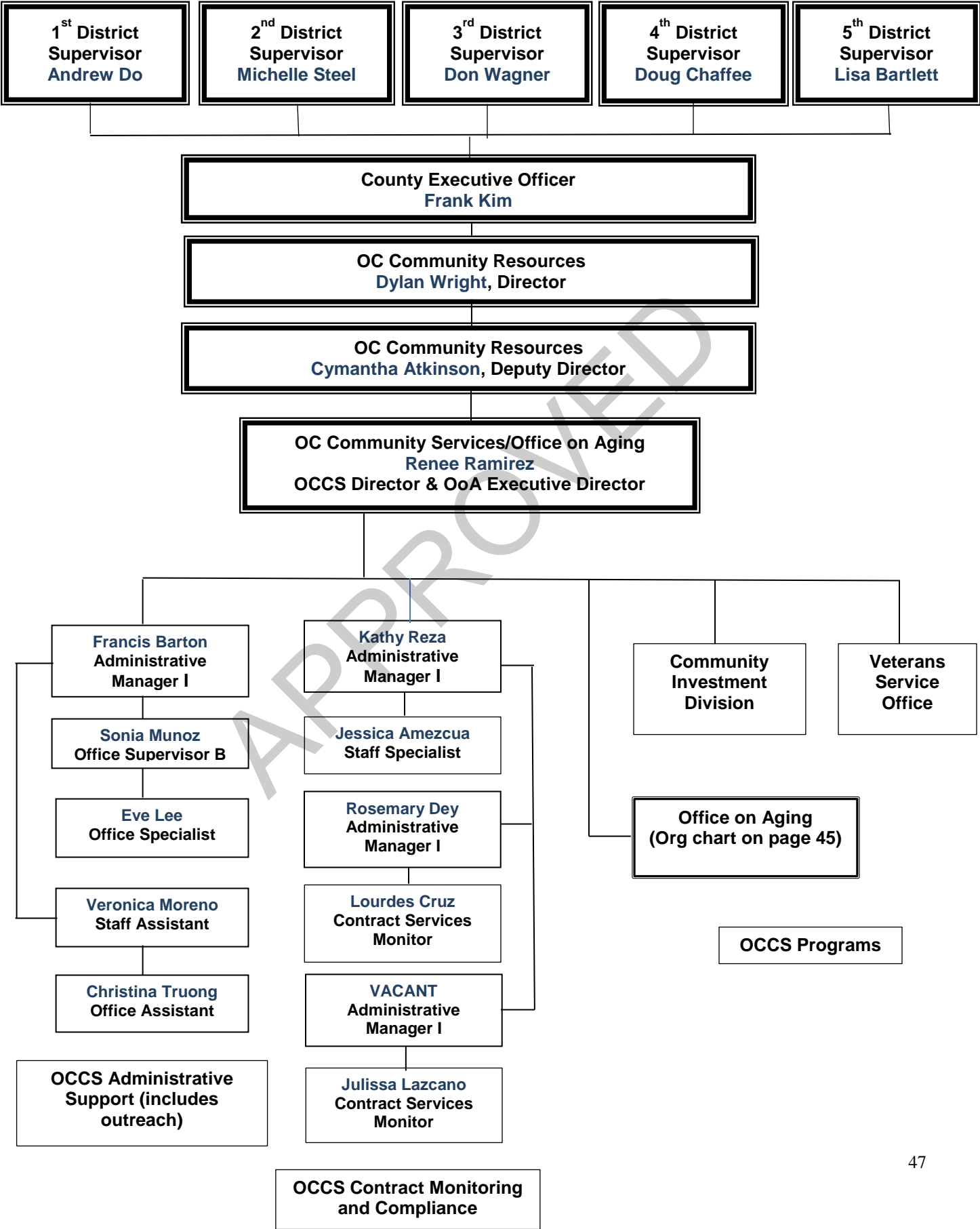
Transportation is the prominent barrier to accessing legal assistance. Some clients request travel to their residences to provide services. While LASOC does not normally travel to individual clients, some exceptions are made depending on issues involved and whether there are enough staff to do this since it requires two staff members to go to the client.

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

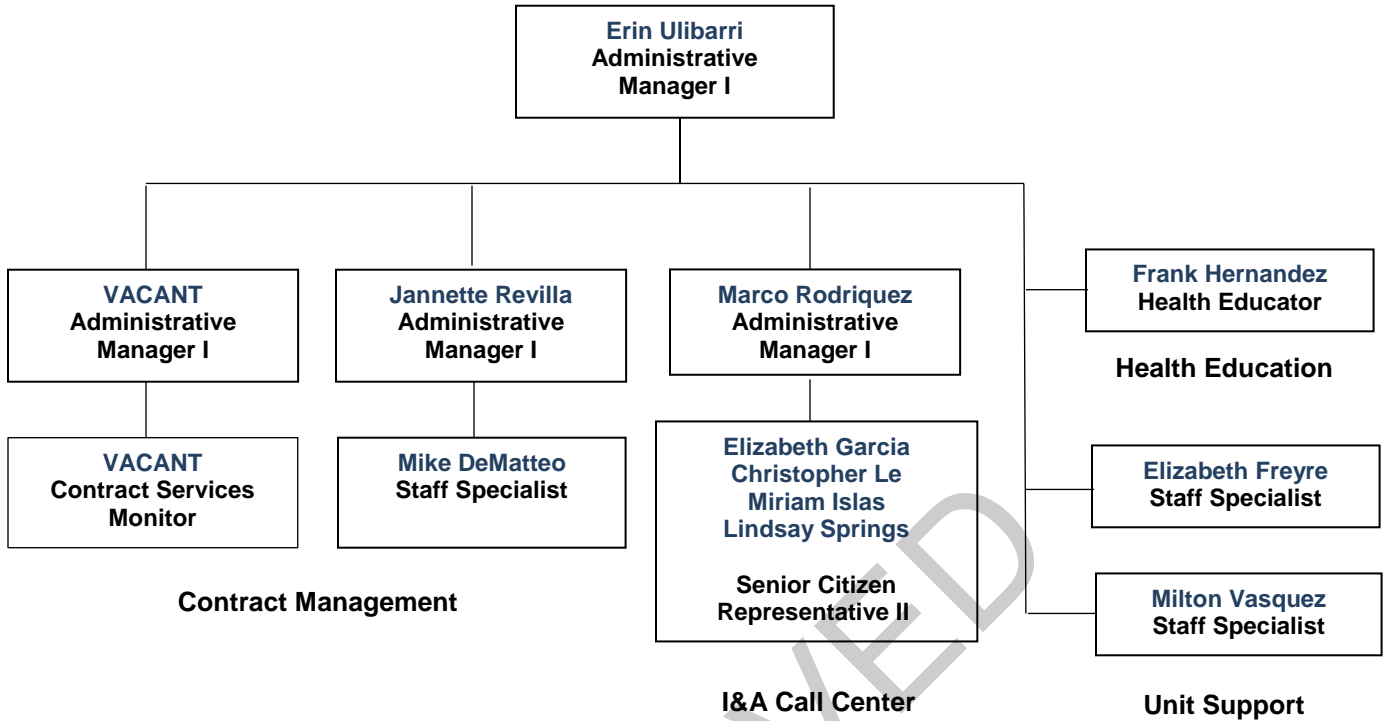
LASOC is involved with a number of local organizations serving older adults. LASOC, through the SCLAP, works with a number of senior centers around the County to schedule appointments and deliver presentations. SCLAP participates as a member of the Financial Abuse Specialist Team (FAST) and the Elder Abuse Forensics Center Team, which also involves Adult Protective Services (APS) and the Long-Term Ombudsman Program. LASOC works with local law schools to help with providing legal services. LASOC also worked with the Women's Transitional Living Center, Orange County Superior Court, and CalOptima.

APPROVED

SECTION 21 - ORGANIZATION CHART: OC COMMUNITY SERVICES



**SECTION 21 - ORGANIZATION CHART: OFFICE ON AGING**



Name	Title III/VII Admin	Title III Direct	HICAP/FA/MIPPA Admin	TV Admin	Other
Executive Director: R. Ramirez	25%		2%	3%	70%
Admin Manager I: E. Ulibarri	65%	IIIB 10%, IIID 5%, IIIE 5%	5%	1%	9%
Admin Manager I: M. Rodriguez	20%	IIIB 30%, IIIE 20%			30%
Admin Manager I: Vacant	70%			5%	25%
Admin Manager I: J. Revilla	90%		10%		
Admin Manager I: K. Reza	30%		5%	5	60%
Admin Manager I: R. Dey	40%				60%
Admin Manager I: Vacant	50%		5%	5%	40%
Admin Manager I: F. Barton	30%				70%
Staff Specialist: M. Vasquez	70%		3%	3%	24%
Staff Assistant: V. Moreno	60%	IIID 10%			30%
Staff Specialist: M. De Matteo	90%		10%		
Staff Specialist: E. Freyre	80%	IIID 5%	5%		10%
Staff Specialist: J. Amezcua	35%		3%	2%	60%
Senior Citizen Rep.: L. Springs	5%	IIIB 40%, IIIE 30%			25%
Senior Citizen Rep.: E. Garcia	5%	IIIB 40%, IIIE 30%			25%
Senior Citizen Rep.: C. Le	5%	IIIB 35%, IIIE 40%			20%
Senior Citizen Rep.: M. Islas	3%	IIIB 30%, IIID 2%, IIIE 30%			35%
Health Educator: F. Hernandez	5%	IIIB 5%, IIID 88%, IIIE 2%			
Office Supervisor: S. Munoz	30%				70%
Office Specialist: Eve Lee	35%				65%
Office Assistant : Christina Truong	25%	IIID 20%			55%
Contract Services Monitor: L. Cruz	35%		3%	2%	60%
Contract Services Monitor: J. Lazcano	35%		3%	2%	60%
Contract Services Monitor: Vacant	70%			5%	25%