## Orange County Office on Aging PSA 22

## 2018-2019 Area Plan Update





#### AREA PLAN UPDATE (APU) CHECKLIST PSA 22

#### Check <u>one</u>: □ FY 17-18 ⊠ FY 18-19 □ FY 19-20

Use for APUs only

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

#### 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 <u>22</u>

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. <u>(see below)</u> (Type Name)

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

2. John Pointer

Signature: Advisory Council Chair

3. <u>Renee Ramirez</u> (Type Name)

Signature: Area Agency Director

\*\* 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.

Date

Date

Date

<sup>&</sup>lt;sup>1</sup> Original signatures or official signature stamps are required.

#### **PSA 22**

#### 2018-19 Area Plan Update

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

The following chart shows the estimated number of low-income (below 100% of the federal poverty guideline) minority Orange County residents age 60 and above, according to the 2011-15 American Community Survey Special Tabulation provided in the Administration for Community Living Aging Integrated Database.

Black	825	
American Indian/ Alaska Native	360	
Asian	14,415	
Pacific Islander	120	
Hispanic	10,600	
Other	450	
Total:	26,770	

#### SECTION 7. PUBLIC HEARINGS

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

Fiscal Year	Date	Location	Number of Attendees	Presented in languages other than English? <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	Νο
2017-18	4/14/2017	Buena Park Senior Center	28	No	Νο
	7/14/2017	Downtown Anaheim Senior Center	11	No	Νο
2018-19	4/13/2018	Buena Park Senior Center	21	No	No
2019-20					

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

<sup>&</sup>lt;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

 $\boxtimes$ Yes. Go to question #5

No, Explain:

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

No comments received.

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

Comments submitted were questions regarding specific service unit levels or the area plan report itself.

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

None.

#### **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.

Objectives:	Projected Start and End Dates	Title IIIB Funded PD or C	Update Status
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.	July 1, 2018- June 30, 2019		Continued
<ul> <li>Outreaching to new groups such as case managers, churches, mobile home parks, and cultural community centers.</li> </ul>			Revised
<ul> <li>Partnering with Orange County Board of Supervisors to co-host Senior Summits in the respective districts.</li> </ul>			Continued
• 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.			Revised
<ul> <li>Increasing the utilization of interns and volunteers for outreach events.</li> </ul>			Continued
• Expand outreach efforts in the Vietnamese and Spanish communities by investigating and utilizing various modes of communication,			Continued

Objectives:	Projected Start and End Dates	Title IIIB Funded PD or C	Update Status
such as radio, newspaper, social media, and increased one-on-one engagement.			
<ul> <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>			New
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:	July 1, 2018- June 30, 2019		Revised
<ul> <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> </ul>			
<ul> <li>Distribution will occur through health fairs and senior expos as well as requests for printed materials to be mailed to clients' homes.</li> </ul>			
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.	July 1, 2018- June 30, 2019		Revised
1.4 The Office on Aging will write, post on the Office on Aging website, 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 eight such articles will be delivered over the course of the year.	July 1, 2018- June 30, 2019		Continued
1.5 The Long-Term Care Ombudsman Program, through the contracted service provider, Council on Aging – Southern California, will increase community	July 1, 2018- June 30, 2019		Revised

Objectives:	Projected Start and End Dates	Title IIIB Funded PD or C	Update Status
awareness of the Program through the following efforts:			Continued
<ul> <li>Verifying that the Ombudsman Program poster is posted prominently in each facility, including posters printed in alternative languages for those residents and their families who do not speak English.</li> </ul>			
<ul> <li>Conduct trainings within hospitals, to hospice agencies and to other health care groups to explain the Program, the services it provides and the role of ombudsmen representatives in preventing abuse and advocating for the rights and dignity of elderly and dependent adults living in long-term care facilities.</li> </ul>			Continued
<ul> <li>Making available the Council on Aging - Southern California "Answers" resource guide to residents in facilities, their family members and to people in the community.</li> </ul>			Continued
<ul> <li>Providing at least one article for the "Answers" resource guide that describes the Program and the services provided.</li> </ul>			Continued
<ul> <li>Assisting those researching long-term care facilities by providing resources listed in the "Answers" publication and other resources available through licensing agencies.</li> </ul>			Continued
<ul> <li>Actively recruiting volunteer ombudsman representatives through advertising, media and personal outreach and conducting two volunteer trainings per year.</li> </ul>			Continued
<ul> <li>Conducting tours every other month through the "General Volunteer Orientation" to recruit potential volunteers and to provide greater awareness of the advocacy the LTC Ombudsman Program brings to those vulnerable adults living in long-term care facilities.</li> </ul>			Revised
facilities.			New

Objectives:	Projected Start and End Dates	Title IIIB Funded PD or C	Update Status
<ul> <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>			

## 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.

Objectives:	Projected Start and End Dates	Title IIIB Funded PD or C	Update Status
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, 2018- June 30, 2019		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, 2018- June 30, 2019		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 and hosting and maintaining the ADRC website.	July 1, 2018- June 30, 2019		Revised

Objectives:	Projected Start and End Dates	Title IIIB Funded PD or C	Update Status
2.5 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, 2018- June 30, 2019		New
2.4 As the contracted service provider of Title VIIA Elder Abuse Prevention services, the Council on Aging – Southern California will operate the Elder Abuse Prevention Program and Financial Abuse Specialist Team (FAST), to combat 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, the Legal Aid Society, the Ombudsman program, and private professionals from relevant industries. Both arms of the program will provide prevention and education activities, including 20 community and 12 professional education sessions to approximately 3,000 individuals	July 1, 2018- June 30, 2019		Continued

#### 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.

Objectives:	Projected Start and End Dates	Update Status
2.5 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, 2018- June 30, 2019	Revised
2.6 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, 2018- June 30, 2019	New
2.7 The Office on Aging will create an Ambassador Program in which at least 5 lay leader volunteers will be trained to promote the CDSME and AMOB programs to increase workshop participation rates.	July 1, 2018- June 30, 2019	New
<ul> <li>2.8 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> <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> </li> </ul>	July 1, 2018- June 30, 2019	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
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:	July 1, 2018- June 30, 2019		
<ul> <li>An Information &amp; Assistance call center follow-up survey will be conducted via telephone call 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. Customer service calls will be performed monthly.</li> </ul>			Revised
<ul> <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>			Revised
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.	July 1, 2018- June 30, 2019		New

3.3 Office on Aging will explore additional options to enhance the collection of customer satisfaction data within different departments.	July 1, 2018- June 30, 2019	Continued
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#### 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	<b>Proposed</b> 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. Homemaker (In-Home)

Unit of Service = 1 hour Proposed **Fiscal Year** Units of **Goal Numbers** Objective Numbers (if applicable) Service 2016-2017 8.000 2 2017-2018 2 8,000 2018-2019 2 6.000 2019-2020

#### 3. Chore (In-Home)

#### Unit of Service = 1 hour

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

#### Unit of Service = 1 meal

#### 4. Home-Delivered 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			

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

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	42,000	2	
2017-2018	42,000	2	
2018-2019	50,000	2	
2019-2020			
Case Manao	ement (Access		Unit of Service = 1 hour

#### 6. Case Management (Access)

6 <mark>. Case Manag</mark>	ement (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			

#### 7. Assisted Transportation (Access)

Unit of Service = 1	one-way trip
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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			

#### 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			

#### 9. Nutrition Counseling

#### Unit of Service = 1 session per participant

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

#### 10 Transportation (Access)

10. Transporta	tion (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			

### 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			

#### 12. Nutrition Education

#### Unit of Service = 1 session per participant

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

#### 13. Information and Assistance (Access)

#### Unit of Service = 1 contact

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

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. NAPIS Service Category – "Other" Title III Services

- Each <u>Title IIIB</u> "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 <u>Title IIIB</u> services to be funded that were <u>not</u> 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	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers
2016-2017	20,500	2	
2017-2018	20,000	2	
2018-2019	18,000	2	
2019-2020			

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			

#### 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			

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			

#### 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			

#### 16. Title IIID/ Disease Prevention and Health Promotion

Fiscal Year	<b>Proposed</b> 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			

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

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

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

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

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

Complete all Measures and Targets for Outcomes 1-3.

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

#### Measures and Targets:

**A. Complaint Resolution Rate** (AoA Report, Part I.E, Actions on Complaints) The average California complaint resolution rate for FY 2013-2014 was 73%.

1. FY 2014-2015 Baseline Resolution Rate:

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

2. FY 2015-2016 Baseline Resolution Rate:

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

3. FY 2016-2017 Baseline Resolution Rate:

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

4. FY 2017-2018 Baseline Resolution Rate:

Number of complaints resolved \_\_\_\_\_ + Number of partially resolved complaints \_\_\_\_\_ divided by the Total Number of Complaints Received \_\_\_\_\_ = Baseline Resolution Rate \_\_\_\_% FY 2019-20 Target Resolution Rate \_\_\_\_%

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 <u>986</u> FY 2016-2017 Target: <u>992</u>
- FY 2015-2016 Baseline: number of Resident Council meetings attended <u>917</u> FY 2017-2018 Target: <u>925</u>
- 3. FY 2016-2017 Baseline: number of Resident Council meetings attended <u>959</u> FY 2018-2019 Target: <u>950</u>
- FY 2017-2018 Baseline: number of Resident Council meetings attended \_\_\_\_\_ FY 2019-2020 Target: \_\_\_\_\_

Program Goals and Objective Numbers: 2

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

- FY 2014-2015 Baseline number of Family Council meetings attended <u>55</u> FY 2016-2017 Target: <u>54</u>
- FY 2015-2016 Baseline number of Family Council meetings attended <u>48</u> FY 2017-2018 Target: <u>50</u>
- 3. FY 2016-2017 Baseline number of Family Council meetings attended <u>43</u> FY 2018-2019 Target: <u>45</u>
- 4. FY 2017-2018 Baseline number of Family Council meetings attended \_\_\_\_\_\_ FY 2019-2020 Target: \_\_\_\_\_\_

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: <u>1220</u>				
2.	FY 2015-2016 Baseline: number of consultations 1,677				
	FY 2017-2018 Target: <u>1700</u>				
3.	FY 2016-2017 Baseline: number of consultations 1800				
	FY 2018-2019 Target: <u>1800</u>				
4.	FY 2017-2018 Baseline: number of consultations				
	FY 2019-2020 Target:				
Dre	arram Casla and Objective Numberes 2				
Pro	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 <u>3624</u> FY 2016-2017 Target: <u>3400</u>
2.	FY 2015-2016 Baseline: number of consultations <u>3,008</u> FY 2017-2018 Target: <u>3025</u>
3.	FY 2016-2017 Baseline: number of consultations <u>3732</u> FY 2018-2019 Target: <u>3700</u>
4.	FY 2017-2018 Baseline: number of consultations FY 2019-2020 Target:
Pro	ogram Goals and Objective Numbers: <u>2</u>

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

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

#### G. Systems Advocacy

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

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

Enter information in the box below.

#### Systemic Advocacy Effort(s) for the current fiscal year 2018-2019

During the fiscal year, the Orange County LTC Ombudsman Program will increase participation in legislative advocacy effort regarding long-term care and related issues. The Orange County LTC Ombudsman Program will collaborate and consult with other agencies to assist residents in eviction/discharge/transfer situations as well as collaborate with other agencies and organizations to work toward reducing elder (including financial) abuse. The program will initiate a pilot project with one long-term care facility utilizing a program evaluation tool, with a view to expanding the tool countywide.

## 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  $\underline{70}$  divided by the total number of Nursing Facilities  $\underline{74}$  = Baseline  $\underline{95}\%$ 

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  $\underline{67}$  divided by the total number of Nursing Facilities  $\underline{77}$  = Baseline  $\underline{87}$ %

FY 2017-2018 Target: <u>95</u>%

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

FY 2018-2019 Target: <u>95</u>%

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

FY 2019-2020 Target: \_\_\_\_%

Program Goals and Objective Numbers:

**B.** Facility Coverage (other than in response to a complaint) (AoA Report, Part III.D.6) Percentage of RCFEs within the PSA that were visited by an ombudsman representative at least once each quarter during the fiscal year **not** in response to a complaint. The percentage is determined by dividing the number of RCFEs in the PSA that were visited at least once each quarter not in response to a complaint by the total number of RCFEs in the PSA. NOTE: This is not a count of *visits* but a count of *facilities*. In determining the number of facilities visited for this measure, no RCFE can be counted more than once.

- FY 2014-2015 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>610</u> divided by the total number of RCFEs <u>919</u> = Baseline <u>66</u>% FY 2016-2017 Target: <u>75</u>%
- FY 2015-2016 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>635</u> divided by the total number of RCFEs <u>917</u> = Baseline <u>69</u>% FY 2017-2018 Target: <u>70</u>%
- FY 2016-2017 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>665</u> divided by the total number of RCFEs <u>928</u> = Baseline <u>72</u>% FY 2018-2019 Target: <u>70</u>%
- 4. FY 2017-2018 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint \_\_\_\_\_ divided by the total number of RCFEs \_\_\_\_\_ = Baseline \_\_\_\_%
   FY 2019-2020 Target: \_\_\_\_\_ %

Program Goals and Objective Numbers:

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

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

1.	FY 2014-2015 Baseline: <u>13.14</u> FTEs FY 2016-2017 Target: <u>15.19</u> FTEs
2.	FY 2015-2016 Baseline: <u>13.89</u> FTEs FY 2017-2018 Target: <u>14.00</u> FTEs
3.	FY 2016-2017 Baseline: <u>11.9</u> FTEs FY 2018-2019 Target: <u>12.0</u> FTEs
4.	FY 2017-2018 Baseline: FTEs FY 2019-2020 Target: FTEs
Pro	ogram Goals and Objective Numbers: <u>2</u>

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

1.	FY 2014-2015 Baseline: Number of certified LTC Ombudsman volunteers <u>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 FY 2019-2020 Projected Number of certified LTC Ombudsman volunteers
Pr	rogram Goals and Objective Numbers: 2

## 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

The Orange County LTC Ombudsman Program will continue having back-up personnel available to enter data into the Ombudsman Data Integration Network (ODIN), which allows for the timely input of Ombudsman activities. Volunteers and Program staff will regularly participate in the NORS Consistency Training provided by OSLTCO. Ombudsman Program management will review reports on an ongoing basis that summarize when an Ombudsman receives a complaint, report or issue and also indicates when the Ombudsman resolved the matter.

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

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

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

When developing targets for each fiscal year, refer to data reported on the Elder Abuse Prevention Quarterly Activity Reports. Set realistic goals based upon the prior year's numbers and the resources available. Activates 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. <u>NOTE: The number of sessions refers to the number of presentations and not the number of attendees</u>

- **Public Education Sessions** –Indicate the total number of projected education sessions for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Training Sessions for Professionals** –Indicate the total number of projected training sessions for professionals (service providers, nurses, social workers) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- Training Sessions for Caregivers Served by Title IIIE –Indicate the total number of projected training sessions for unpaid family caregivers who are receiving services under Title 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.

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

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

Fiscal Year	Total # of Public Education Sessions
2016-2017	20
2017-2018	20
2018-2019	20
2019-2020	

Fiscal Year	Total # of Training Sessions for Caregivers served by Title IIIE
2016-2017	N/A
2017-2018	N/A
2018-2019	N/A
2019-2020	

Fiscal Year	Total # of Training Sessions for Professionals
2016-2017	12
2017-2018	12
2018-2019	12
2019-2020	

Fiscal Year	Total # of Hours Spent Developing a Coordinated System	
2016-2017	276	
2017-2018	276	
2018-2019	276	
2019-2020		

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
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.

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2019-2020		

Fiscal Year	Total Number of Individuals Served
2016-2017	1,500
2017-2018	3,000
2018-2019	3,000
2019-2020	

#### 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 <u>ALL</u> budgeted funds.

#### **Direct and/or Contracted IIIE Services**

CATEGORIES	1	2	3		
Family Caregiver Services Caring for Elderly	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)		
Information Services	# of activities and Total est. audience for above				
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: Total est. audience for above:				
Access Assistance	Total contacts				
2016-2017	17,750	1,2			
2017-2018	17,750	1,2			
2018-2019	18,000	1,2			
2019-2020					

1,075 1,200	1,2	
1,200		
	1,2	
1,500	1,2	
Total hours		
4,675	1,2	
5,000	1,2	
5,000	1,2	
Total occurrences		
30	1,2	
30	1,2	
30	1,2	
	Total hours         4,675         5,000         5,000         5,000         5,000         30         30         30	Total hours         4,675       1,2         5,000       1,2         5,000       1,2         5,000       1,2         5,000       1,2         5,000       1,2         30       1,2         30       1,2         30       1,2

#### Direct and/or Contracted IIIE Services

Grandparent Services Caring for Children	Proposed Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Information Services	# of activities and Total est. audience for above	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:		

Grandparent Services Caring for Children	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Access Assistance	Total contacts	N/A	
2016-2017			
2017-2018			
2018-2019			
2019-2020			
Support Services	Total hours	N/A	
2016-2017			
2017-2018			
2018-2019			
2019-2020			
Respite Care	Total hours	N/A	
2016-2017			
2017-2018			
2018-2019			
2019-2020			
Supplemental Services	Total occurrences	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.): Orange County One-Stop Center - Irvine

Street Address: 17891 Cartwright Road, Suite 100, Irvine, CA 92614

Name and title of all SCSEP paid project staff members (Do not list participant or participant staff names):

Albert Stone, SCSEP Career Consultant

Number of paid staff: 1 Number of participant staff: 1 (assigned at EDD)

How many participants are served at this site? 5

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):

Albert Stone, SCSEP Career Consultant Norma Arebalo, Program Assistant

Number of paid staff: 1.5 Number of participant staff: 1 (assigned at EDD)

How many participants are served at this site? 46

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

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

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

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

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

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

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

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).

#### **SECTION 17 - ADVISORY COUNCIL**

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

45 CFR, Se	5 306(a)(6)(D) ection 1321.57 Section 7302(a)(12)		
Total Council Membership (include vacanc	ies) <u>40</u>		
Number of Council Members over age 60	<u>25</u>		
Race/Ethnic Composition White Hispanic Black Asian/Pacific Islander Native American/Alaskan Native Other	% of PSA's <u>60+Population</u> $\frac{60.2}{16.1}$ <u>1.6</u> <u>20.3</u> <u>0.5</u> <u>4.0</u>	% on <u>Advisory Council</u> <u>67.7</u> <u>16.1</u> <u>3.2</u> <u>12.9</u> <u>0.0</u> <u>0.0</u> <u>0.0</u>	
Name and Title of Officers:		Office Term Expires:	
John Pointer – Chair		12/31/19	
Carol Downey – Vice Chair		12/31/18	
Anna T. Boyce - Treasurer		12/31/18	
Dave Sullivan - Secretary		12/31/18	
Sherry Geyer – Past Chair		12/31/19	
Eileen Kawas – Member-At-Large		12/31/19	
Don MacAllister – Member-At-Large		12/31/19	
Name and Title of other members:		Office Term Expires:	
Vince Agor		12/31/19	
Anthony Allevato		12/31/19	
Linda J. Barcelona		12/31/17	
Elizabeth Busick		12/31/18	
Nancy Cheng		12/31/18	
Charlie Choi		12/31/18	
Dee Erman		12/31/18	

Name and Title of other members:	Office Term Expires:
Don Gay	12/31/19
Elaine Gennaway	12/31/18
Rebecca R. Gomez	12/31/19
Denise Habjan	12/31/18
Shelley Hasselbrink	12/31/19
Eugene Hernandez	12/31/19
Shari L. Horne	12/31/18
Larry Kramer	12/31/19
Guadalupe Leon	12/31/19
Jim Levy	12/31/18
Mary Ellen Lohnes	12/31/18
Yvonne Mitchell	12/31/15
Tony Rodella	12/31/19
Rhonda Shader	12/31/19
Faye Stamper	12/31/18
Frank Sun	12/31/19
Dave Tetzlaff	12/31/18
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	$\boxtimes$	
Disabled Representative	$\boxtimes$	
Supportive Services Provider Representative	$\boxtimes$	
Health Care Provider Representative	$\boxtimes$	
Family Caregiver Representative	$\square$	
Local Elected Officials	$\boxtimes$	
Individuals with Leadership Experience in		
Private and Voluntary Sectors	$\bowtie$	

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.

#### **SECTION 18 - LEGAL ASSISTANCE**

#### PSA <u>22</u>

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

This section <u>must</u> 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>4</sup>

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 related to Legal Services is to support the 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. Additionally, there has been an increase in the number of older adults seeking legal assistance for consumer debt, student loan issues, conservatorship, and Social Security/SSI problems. There has been a continued demand with seniors seeking legal assistance with housing problems, primarily landlord-tenant issues and issues specific to homelessness. To help with the growing need for elder abuse restraining orders, LASOC continues to work with the Orange County Superior Court on the Elder & Dependent Adult Restraining Order Clinic as well as having established a Conservator Clinic. LASOC collaborates with the various legal units within legal aid 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 has also seen a rise in 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?

No. However, the LSP for Orange County was involved in the process of drafting the California Statewide Guidelines for the provision of OAA legal Services. The LSP is knowledgeable regarding the Guidelines and follows them in the delivery of legal services to Orange County residents.

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

The AAA and LSP collaborate through the sharing of information about legal needs of seniors to facilitate the establishment by the LSP of priority legal issues. Priority areas focus on issues in which a senior is unable to obtain legal assistance elsewhere, often because they are unable to afford legal services from the private bar. The current top four priority legal issues in PSA 22 are: 1) housing (in particular, Section 8 and homelessness), 2) debt collection issues, 3) elder abuse issues, and 4) Social Security and Supplemental Security Income (SSI) issues. Periodic cross-training is conducted with AAA and LSP staff to share and discuss emerging issues.

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 <u>AND</u> what mechanism is used for reaching the target population? Discussion:

Yes, the AAA and LSP collaborate on identifying a target population through the sharing of information about Orange County seniors, and through the establishment of priority legal needs. Consistent with the Older Americans Act requirements, the AAA and LSP seek to target services to seniors who are low-income or apart of a minority group. In areas where resources allow, services are targeted to low-income or minority seniors facing serious and immediate need for legal assistance.

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 elderly eligible 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. Saturday clinics were recently established to accommodate working individuals. Additionally, SCLAP goes out once a week to the Santa Ana Civic Center and other encampment areas to meet with homeless seniors who cannot access the hotline or travel to local senior centers. Offsite visits are sometimes offered for those who are home-bound or in the hospital. SCLAP targets services to older adults who are lowincome 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. All eligible clients that contact SCLAP will receive free legal advice. 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	

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

Yes, the LASOC does have a hotline that clients can call to request legal assistance. The hotline is open 5 days per week, from 9:00 a.m. - 6:00 p.m. Mondays through Thursdays, and on Fridays from 9:00 a.m. to 12:00 p.m. When a senior calls the Hotline they will be screened and directed to speak with a paralegal who will gather information from the client about their case. While the senior is on the phone, the Hotline Duty Attorney will review the facts, give legal advice, and determine whether the client can be scheduled to attend one or our legal clinics or given an appointment.

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

LASOC conducts extensive community outreach. Activities include attending a variety of outreach events and delivering community education on various legal topics, including accessing available services. SCLAP works with 14 senior centers in Orange County and meets with clients individually at these centers. Additionally, SCLAP goes out once a week to the Santa Ana Civic Center and other encampments to meet with homeless seniors to assist with their legal problems. SCLAP also works with a variety of other organizations that serve seniors to efficiently extend the reach of our services. SCLAP operates several clinics in cooperation with the Orange County Superior Court and other community providers, and also works with local law schools and the Orange County Bar Association. SCLAP participates in the Financial Abuse Specialist Team (FAST) and the Elder Abuse Forensic Center Team. Both teams also include representatives from Adult Protective Service (APS) and the Long-Term Care Ombudsman program.

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

Fiscal Year	Name of Provider	Geographic Region covered
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

	a.	a.
2019-2020	b.	b.
	С.	С.

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. Additionally, LASOC has worked with the court, local law schools and other community providers to establish an Elder Abuse Temporary restraining Order Clinic, which is held each Tuesday and Friday at the Central Justice Center Courthouse. LASOC has also implemented an I-CAN! project allowing clients to complete various court forms on-line by answering simple questions that the program will use to complete the pleadings.

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, and health and consumer problems. Two areas in which LASOC is seeing increasing demand involves Elder Abuse and landlord-tenant issues. LASOC has worked with the court and other community providers to establish an Elder Abuse Restraining Order Clinic which is held twice per week at the Center Justice Center Court. LASOC continues to provide a weekly unlawful detainer clinic at its office and an unlawful detainer clinic at the North Justice Center in Fullerton. One trend that has been seen among housing related issues involves hoarding problems. For tenants, this can lead to possible eviction. For homeowners, they may be cited by local code enforcement. To address the growing legal needs of older adults involving consumer debt, LASOC has created a variety of fact sheets that are available on its website and continues to provide a Bankruptcy Clinic to assist clients in filing chapter 7 bankruptcy cases and a Consumer's Rights clinic to assist clients with responding to consumer lawsuits or levies.

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. To address this growing need, SCLAP added a Supplemental Security Income (SSI) Clinic, a Limited Conservatorship Workshop and Clinic, a Probate Accounting Workshop and Clinic and an Elder Abuse Temporary Restraining Order Clinic. LASOC has also developed a program, LEAP, working with local law schools to assist new attorneys in developing solo practices in an effort to develop more legal resources for the community.

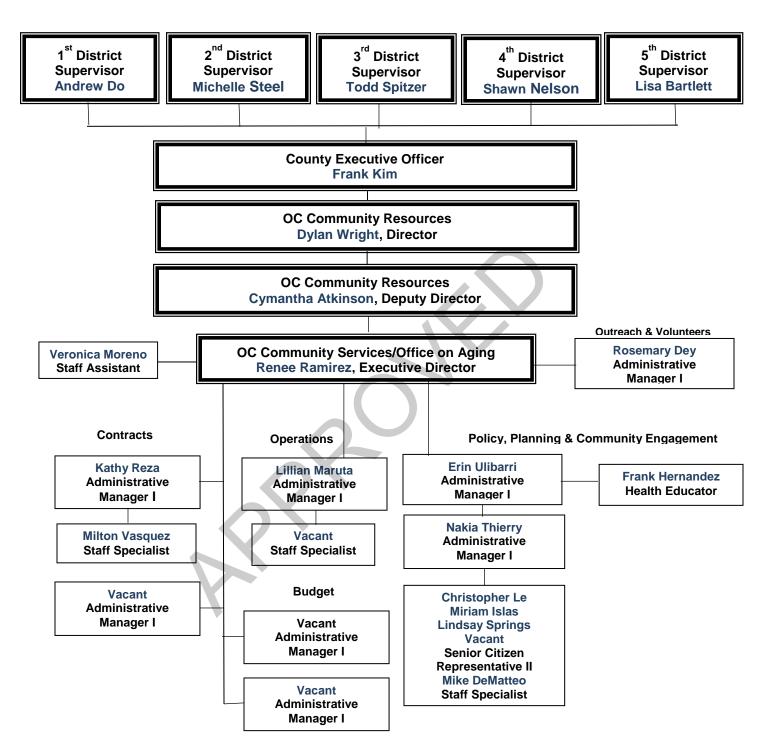
15. What are the barriers to accessing legal assistance in your PSA? Include proposed strategies for overcoming such barriers. Discuss:

The greatest barriers to accessing legal services for older adults include recognizing a problem as a legal issue, knowing that free services are available, knowing how to obtain services, and meeting a demand which exceeds available resources. To help overcome these barriers, SCLAP engages in outreach efforts and works with senior centers and other older adult providers. The program also delivers presentations around the County on various legal issues and targets services to low-income, minority and vulnerable older adults for whom legal services are not otherwise available

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

LASOC is very 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 is actively involved with various sections of the Orange County Bar Association, including the Elder Law Section, the Social Security section and the newly formed Conservatorship Section. SCLAP currently has 3 retired attorneys who volunteer under the Pro Bono Practice Program of the State Bar of California. SCLAP is active in the Senior Legal Services Providers (SLSP) Committee, which works to share information and best practices with organizations providing legal services to older adults in California. LASOC also works with the Public Law Center which works with private attorneys and law firms in Orange County to place cases with attorneys on a pro bono basis.

#### **SECTION 21 - ORGANIZATION CHART**



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: N. Thierry	20%	IIIB 30%, IIIE 20%			30%
Admin Manager I: Vacant	80%		3%	2%	15%
Admin Manager I: E. Ulibarri	55%	IIIB 20%, IIID 5%, IIIE 5%	5%		10%
Admin Manager I: K. Reza	80%		1%	1%	18%
Admin Manager I: Vacant	65%		12%	3%	20%
Admin Manager I: L. Maruta	40%				60%
Admin Manager I: R. Dey	30%	IIIB 10%			60%
Admin Manager I: Vacant	85%				15%
Staff Specialist: M. Vasquez	70%		3%	3%	24%
Staff Assistant: V. Moreno	30%				70%
Staff Specialist: M. De Matteo	15%	IIIB 30%, IIIE 30%			25%
Staff Specialist: Vacant	70%		5%	5%	20%
Senior Citizen Rep.: L. Springs	5%	IIIB 40%, IIIE 30%			25%
Senior Citizen Rep.: Vacant	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%			