

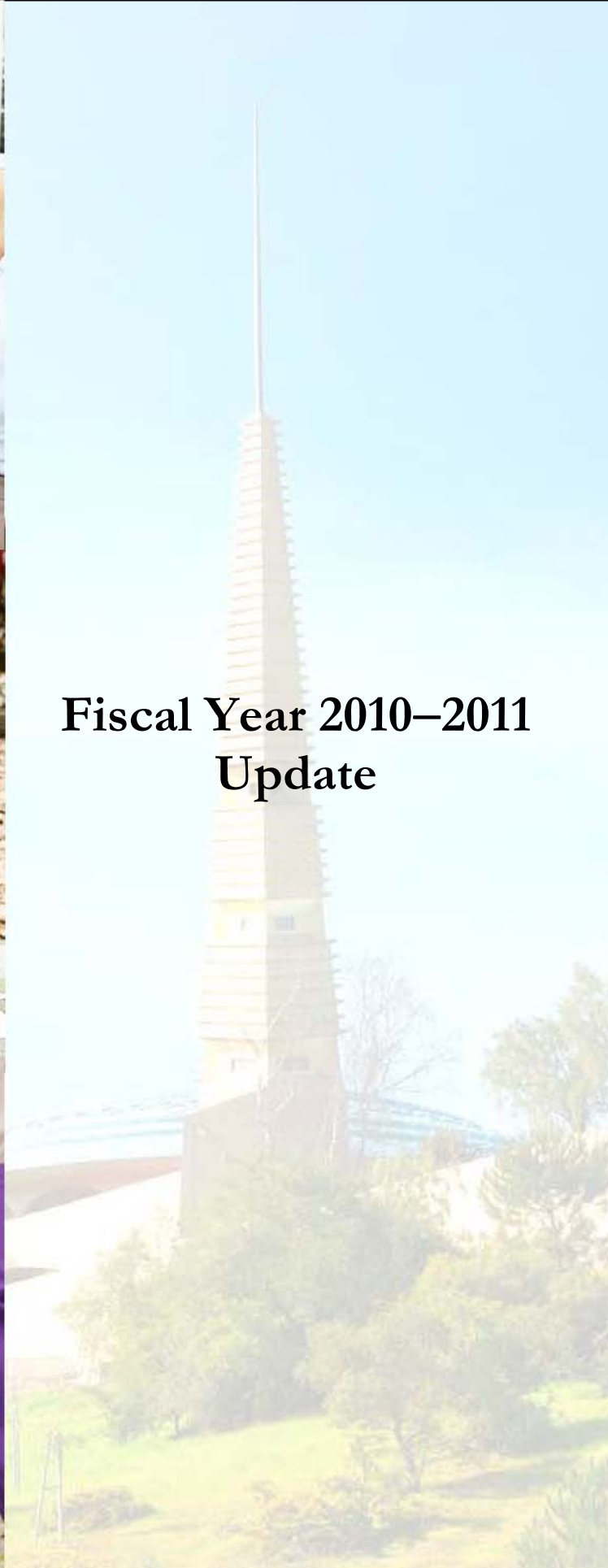
*Live Long, Live Well*

**Marin County Area Plan for Aging**

**2009–2012**



**Fiscal Year 2010–2011  
Update**



**Submitted by**



Division of Aging & Adult Services  
10 North San Pedro Road, Suite 1012  
San Rafael, CA 94903  
Phone: 415-499-7118; Fax: 415-499-5055  
Website: [www.co.marin.ca.us/aging](http://www.co.marin.ca.us/aging)

**Prepared by**

Ana P. Bagtas, MHA

For more information, please call Ana P. Bagtas at 415-499-6947 or  
e-mail [abagtas@co.marin.ca.us](mailto:abagtas@co.marin.ca.us)

# TABLE OF CONTENTS

<b>Executive Summary .....</b>	<b>1</b>
<b>Introduction.....</b>	<b>2</b>
<b>Major Changes in the PSA .....</b>	<b>2</b>
Elimination of CBSP.....	2
Stimulation of Programs.....	3
<b>New Demographic Data.....</b>	<b>4</b>
<b>Fiscal Year 2010–11 Plans.....</b>	<b>5</b>
<b>Public Hearing.....</b>	<b>7</b>
<b>Service Unit Plans and Other Documents.....</b>	<b>8</b>
<b>Appendices .....</b>	<b>9</b>
Appendix A: Division of Aging & Adult Services Organization Chart .....	10
Appendix B: Area Agency on Aging-Supported Programs and Services FY 2010–11 .....	11
Appendix C: Area Agency on Aging Budget & Funding Sources 2010–11 .....	12
Appendix D: Area Plan Goals & Objectives, Fiscal Year 2010–11 Update.....	13
Appendix E: Public Hearing .....	20
Appendix F: Service Unit Plan Objectives Fiscal Year 2010–11 .....	23
Appendix G: Other Documents Area Plan Fiscal Year 2010–11 Update.....	46

# **LIVE LONG, LIVE WELL: MARIN COUNTY AREA PLAN FOR AGING 2009–2012, FISCAL YEAR 2010–2011 UPDATE**




## **EXECUTIVE SUMMARY**

---

The Older Americans Act requires Area Agencies on Aging (AAA) around the country to develop an Area Plan every few years. The plan delineates the strategies that the AAA has developed to address the needs of older persons, family caregivers, and adults with disabilities in the Planning and Service Area (PSA). In 2009, the Division of Aging and Adult Services, the AAA for the County of Marin covering PSA 5, developed a new Area Plan.

The *Live Long, Live Well: Area Plan for Aging in Marin County 2009–2012* is the current plan for PSA 5. The process undertaken to develop the plan determined critical priority areas for the AAA and its advisory council, the Marin County Commission on Aging (COA), to come up with strategies that effectively address and respond to the needs of the populations they are mandated to serve. Fostering aging in place, increasing awareness about available resources and services, ensuring cultural competence and inclusion in service delivery, and validating the uniqueness of each community were identified by various stakeholders as important considerations. These factors provided the backdrop for the establishment of Marin County’s Area Plan goals that will guide the work and activities of the AAA and the COA in the next three years.

State and federal laws mandate that the Area Agency on Aging provide annual updates outlining the use of funds for the fiscal year and establish objectives to advance the goals of the Area Plan. The *Live Long, Live Well: Marin County Area Plan for Aging 2009–2012, Fiscal Year 2010–11 Update* is the first renewal under the current planning cycle and presents service strategies that will be carried out by the AAA and the COA to address the needs of older adults, family caregivers, and people with disabilities in Marin County. Changes in the PSA that impact planning, current data about Marin’s older adult population, and plans to improve the service system in the county are presented in the *Fiscal Year 2010–11 Update*. Activities proposed in the update for the coming year include the following:

-  Collaborate with community partners to develop innovative projects to strengthen the service system for older adults.
-  Develop strategies to promote health, prevent chronic conditions, and provide tools to effectively manage diseases among older adults.
-  Conduct forums to educate the public about critical topics and issues that impact older persons, family caregivers, and adults with disabilities.

## INTRODUCTION

---

The Division of Aging and Adult Services (DAAS) is the Area Agency on Aging for Marin County, designated as Planning and Service Area 5 (PSA 5). The *Live Long, Live Well: Area Plan for Aging in Marin County 2009–2012* is the current plan for PSA 5 that delineates ways the AAA and its advisory council, the Marin County Commission on Aging (COA), will address the needs and solutions identified by their constituents and community partners.

In crafting the current plan, critical priority areas for the next three years were established through the planning process. Using these priorities as guiding principles, the AAA and the COA established the following Area Plan goals that will help guide their work and strategies for the next three fiscal years (FY) 2009–2012:

- ✚ Promote a community-based system of care that sustains the independence of older adults.
- ✚ Increase opportunities for people to access information about community resources.
- ✚ Improve the well-being of adults, particularly those with special needs.

Subsequently, the AAA is required to submit annual updates for each of the fiscal years covered in the planning cycle. The annual update outlines the activities that will be undertaken by the AAA and its advisory council during the fiscal year to advance the goals of the Area Plan and address the needs of the populations they are mandated to serve. Changes in the PSA, new demographic data, and planned activities for the fiscal year are presented in the *Live Long, Live Well: Area Plan for Aging in Marin County 2009–2012, Fiscal Year 2010–2011 Update*, the first of the yearly renewal report of the current planning cycle.

## MAJOR CHANGES IN THE PSA

---

### Elimination of CBSP

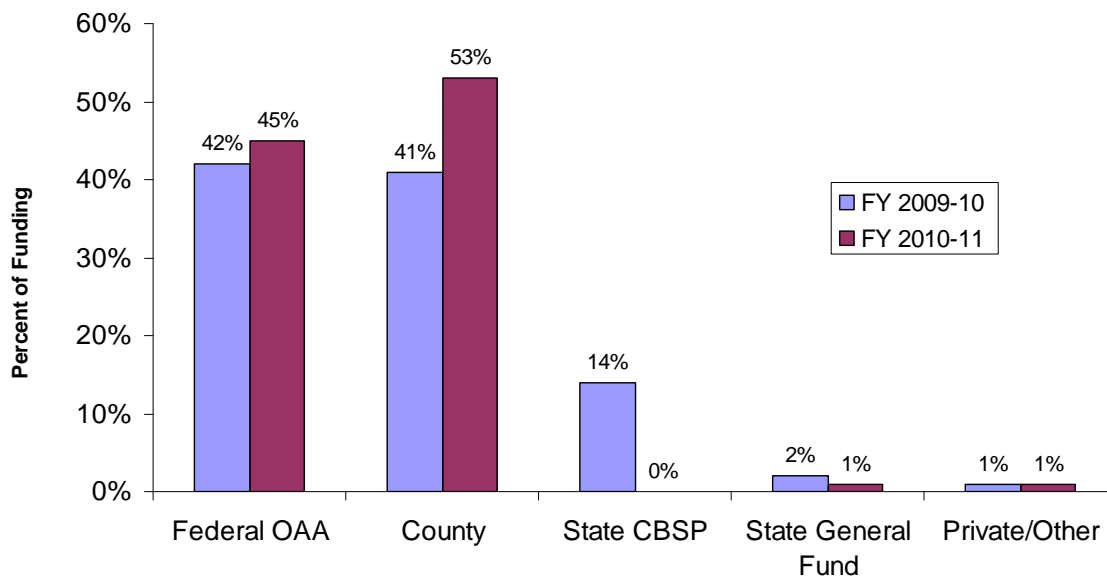
The termination of all funding for community-based services programs (CBSP) through the Older Californians Act is foremost among the changes in the PSA that has implications going into the new fiscal year. Services categorized under CBSP were eliminated early in fiscal year 2009–2010 during the governor's first wave of budget cuts. This resulted in the termination of the Alzheimer's Day Care Resource Center, Brown Bag, Linkages Case Management, Respite Purchase of Service, and Senior Companion programs in Marin, totaling a loss of over \$342,000 in CBSP funds for the county. More than \$313,400 of these funds was granted to the Jewish Family and Children's Services, Marin Community Food Bank, Northern California Presbyterian Homes and Services, and Senior Access to deliver the services.

With the exception of the Brown Bag Program, CBSP services have been discontinued in Marin, as organizations are not able to sustain operations without funding. Community-based

organizations that were receiving CBSP funds worked determinedly to create transition plans for their clients, many of whom are at risk for institutionalization and will bear a significantly higher cost to the healthcare system should they end up in long-term care facilities.

Funds available to PSA 5 for FY 2010–11 compared to the preceding year experienced a significant decline as a result of elimination of state funding for CBSP services. As presented in Figure 1, the county’s contribution makes up a bigger percentage of the Area Agency on Aging’s total budget for FY 2010–11, 53% compared to 41% from the preceding year. This comes at a time when Marin County, like other local governments across California, is experiencing financial challenges. Figure 1 also shows an increase in federal Older Americans Act (OAA) share of the total Area Agency on Aging budget for FY 2010–11. The total AAA budget declined by 10% from \$2,737,478 in FY 2009–10 to \$2,462,572 in FY 2010–11.

Figure 1. **Comparative Funding Sources by Fiscal Year, Marin County Area Agency on Aging**



## Stimulation of Programs

The Marin County Division of Aging and Adult Services (DAAS) was a recipient of close to \$99,000 in American Recovery and Reinvestment Act (ARRA) dollars, also known as stimulus funds, for nutrition (\$74,083) and older adult employment (\$24,867).

Stimulus funds for older adult employment allowed DAAS to reinstate three worker slots to its Senior Community Service Employment Program (SCSEP), which experienced a reduction in the number of positions when funding was reduced in the previous year. SCSEP is a training and employment placement program for low-income older adults.

In addition, 8,000 more meals are projected to be served in Marin County by the end of FY 2009–2010 due to the availability of stimulus funds. This represents an approximately 35%

increase in the number of hot lunches served and a 6% rise in the number of meals delivered to frail and home-bound elderly in Marin County.

Unfortunately, stimulus grants provide temporary relief and funds cease at the end of the fiscal year on June 30, 2010. While the number of employment slots in the SCSEP program will be maintained at 11 workers, it is still lower than the previous year. The challenge for the AAA going into the next fiscal year is the continuation of stimulus congregate nutrition sites.

In FY 2009–2010, ARRA funds enabled the initiation of six new congregate meal sites located in affordable senior housing complexes throughout Marin. These sites serve a larger number of low-income older adults, adding approximately 230 new clients in the congregate nutrition program in the county. Apartment managers at these sites have expressed that the lunch program has truly promoted community life for their residents and the neighborhood. Plans for the congregate meal program in FY 2010–11 are discussed in a later section.

## NEW DEMOGRAPHIC DATA

In the preceding year, the Division of Aging and Adult Services has been engaged in developing a *Marin Senior Mobility Action and Implementation Plan*. The project identified measures that may be taken by the county and various transportation agencies in Marin to support the mobility needs of older adults who are beyond their driving years. Strategies to implement recommendations are outlined in the plan. This includes identified potential lead or partner agencies, funding sources, and next steps. The report will be released in early June 2010.

New demographic data on Marin older adults were found in preparing the mobility report and will be shared in this *Area Plan Update* in advance of the release of the plan. Based on new projections published by the Association of Bay Area Governments (ABAG) in September 2009, the growth of Marin’s older adult population are as follows:

### Marin County Older Adult Population Growth, 2000-2025

Age	2000	2005	2010	2015	2020	2025	2030	2035
60-69	20,052	26,400	36,700	45,000	46,900	46,100	40,200	34,000
70-79	15,058	14,500	22,800	26,600	37,200	44,100	44,800	47,700
80+	9,537	11,400	16,400	18,700	22,800	30,000	36,800	49,700
<b>Total</b>	<b>44,647</b>	<b>52,300</b>	<b>75,900</b>	<b>90,300</b>	<b>106,900</b>	<b>120,200</b>	<b>121,800</b>	<b>131,400</b>

Source: Senior Mobility Action & Implementation Plan, Existing Conditions Report, Draft

As these new data show, the number of persons age 60 and older in Marin County has increased by 45% from 2005 to the current year, 2010. The 70-79 age grouping will see the biggest jump in population, a cohort that typically starts experiencing declining health and mobility limitations. Using ABAG projections, the report also indicates that residents over the age of 60 will make up 48% of Marin County’s population by 2035.

## FISCAL YEAR 2010–11 PLANS

---

Despite the challenges confronted by the Area Agency on Aging (AAA) going into the next fiscal year, the Division of Aging and Adult Services (DAAS) will continue to find ways to create a robust service infrastructure to meet the needs of older persons, adults with disabilities, and family caregivers in Marin. The AAA is committed to effectively carry out its responsibilities as administrator of federally-funded programs and coordinator of services for the elderly and disabled adults in the county. Presented in Appendix A is the organizational chart of the Division of Aging and Adult Services, which shows the staff who will carry out the planned activities and objectives of the Area Agency on Aging in FY 2010–11.

While home-delivered services will be back at the level prior to the stimulus program, planning for congregate nutrition presents a bigger challenge for the AAA in the coming year. By the nature of their lower-income status, clients served at affordable housing sites made possible by the availability of ARRA funds, are more at risk of losing their independence due to their presumably lower health status. This elderly population is prioritized in the Older Americans Act (OAA) and would clearly benefit from a program that promotes nutritional health and socialization.

The AAA's goal for the congregate meal program in PSA 5 next year is to create a plan that continues to focus on reaching targeted populations, as intended by the Act, by prioritizing services to low-income, minority, limited-English-speaking, and rural older adults. Each current site will be evaluated, including those that were initiated through the stimulus program, to carry out the responsibilities of hosting a meal program regulated by state and federal laws. A joint agreement between the contractor, the administrator of the meal program, and the host agency that will serve as a meal site is currently being developed. In FY 2010–11, only those host agencies that have signed agreements with the contractor and have the capacity and willingness to fulfill the responsibilities of a meal site will continue operations.

Through the Older Americans Act Title IIIC program for senior nutrition services, the AAA is planning to serve approximately 12,000 congregate and 68,000 home-delivered meals in FY 2010–11. This represents a 20% increase in congregate and no change in home-delivered services from the previous year's levels. The planned expansion in the group lunch program considers the continuation of services to low-income older adults served at some of the stimulus dining locations in affordable senior housing facilities. Expansion in services is made possible by a slight increase in federal funding for nutrition services for FY 2010–11. A provisional congregate meal distribution plan in the following regions of Marin County has been developed:

<u>Area/Region</u>	<u>Percent of Meal Allocation</u>
Central Marin: San Rafael	30%
Northern Marin: Novato	23%
Rural: West Marin, Valley	22%
Southern Marin: Marin City	15%
Canal	10%

This congregate meal allocation plan is flexible and is subject to redistribution to accommodate for changes in the program and actual service level performance at each site. Planned services prioritize the reach of the nutrition program to low-income, African American, Asian, Latino, and rural elderly.

In fiscal year 2010–11, the AAA will also focus on the following areas of activity to advance the goals of its Area Plan:

*Collaborate with community partners to deliver essential services, develop innovative projects, and strengthen the service system for older adults.*

In FY 2010–11, the AAA will provide direct services as well as continue to work with home and community-based agencies to deliver a variety of programs funded through the federal Older Americans Act. Appendix B shows organizational partners of the AAA and home and community-based services that will be funded by the federal Older Americans Act in FY 2010–11 to meet the needs of the targeted populations in the PSA. A summary of the Area Agency on Aging’s FY 2010–11 budget and allocations is displayed in Appendix C. The distribution of the AAA’s funding sources is also presented in Appendix C.

In addition, new Program Development (PD) objectives supported by the federal Older Americans Act Title IIIB funds are proposed for the fiscal year. These projects aspire to create innovative approaches to improve the service system for older adults through increased collaboration among major funders in the county and development of new programs that will improve the pipeline of future health care workers in geriatric care.

The PD objective (see Appendix D, objective 1m) of working with the Marin Community Foundation (MCF) is aimed at increasing collaboration between a major funder of programs in the county and the AAA to design a well-coordinated service infrastructure in Marin. A first meeting of the contractors of the AAA and the grantees of MCF was held in February 2010. Supporting the continuation of inter-agency meetings to share information, network, and problem-solve is planned. The AAA is also working with MCF on developing strategies for organizations that serve the aging population in Marin to evaluate program impact and effectiveness. This will provide a well-informed program planning process for both the AAA and MCF.

The collaboration with Dominican University on an Intergenerational Social Interaction Project piloted as a PD objective (see Appendix D, objective 2v). Working with Dominican’s pre-med students, the project’s purpose is to bridge communication between generations, prevent social isolation of the elderly, and inspire future professionals to pursue careers in aging services. Students will meet with older adults for up to five hours a week. This provides opportunities for young adults and older persons to interact with each other. The project will culminate in a mini-conference where project participants share their experiences with others. It is hoped that the lessons learned in the project may be incorporated in the healthy aging initiative of Dominican University, which the AAA hopes to support.

*Develop strategies to promote health, prevent chronic conditions, and provide tools to effectively manage diseases among older adults.*

Efforts of the Division of Aging and Adult Services in the areas of health promotion, disease prevention, and chronic care management will be re-engineered this fiscal year. Through its public health nursing staff and a cadre of volunteers, DAAS currently offers medication management, health education workshops, and the evidence-based Chronic Disease Self-Management Program. DAAS' Differential Response Team, Healthy Housing, Project Independence, and Transition to Wellness also contribute to this effort.

The AAA is exploring evidence-based programs and innovative service models tested in other communities that may be replicated in Marin. Programs that promote the health and sustain the independence of the aging population will be selected. Programs that will complement and enhance current efforts are ideal. Funds will also be actively sought for program replication. Partner organizations will be identified to implement project activities.

*Conduct forums to educate the public about critical topics and issues that impact older persons, family caregivers, and adults with disabilities.*

The Area Agency on Aging as well and the Commission on Aging have been instrumental in providing information about resources in the community and educating the public about critical topics that concern older adults, caregivers, and people with disabilities. In Fiscal Year 2010–11, standing committees of the Commission have proposed organizing public forums at Commission meetings that focus on sustaining healthy lifestyles for caregivers, providing information about the dangers of alcohol and multiple medication use, and presenting the results and recommendations of the Senior Mobility Action and Implementation Plan project. Also proposed are articles submitted in the *Great Age* newsletter that increase awareness about disaster preparedness, food and nutrition resources in the county, and services for individuals with disabilities. A full list of objectives established by the various standing committees of the Commission as well as other project activities that will be undertaken by the AAA to advance the three-year Area Plan goals are presented in Appendix D.

## **PUBLIC HEARING**

---

A public hearing on the *Fiscal Year 2010–11 Area Plan Update* was held at the Marin County Health and Wellness Campus in San Rafael, California on April 8, 2010. More than 40 people attended, including representatives from various nonprofit agencies serving older adults, a staff from a local foundation, members of the Marin County Commission on Aging, and community stakeholders. Details of the full proceedings of the public hearing may be found in Appendix E of this plan. Presented below is a summary of the feedback from the public regarding the *Area Plan Fiscal Year 2010–11 Update*:

- ✚ Despite the current budgetary challenges, the Marin County Commission on Aging, the advisory council to the AAA, has 23 members and will continue to function.

- ✚ The Request for Proposal that will be released soon is for the congregate nutrition program. Services will start July 1, 2010.
- ✚ Concerns about the future of the Project Independence program due to funding limitations were raised. A comment was made that the program has paid public health nurses and a large contingency of volunteers.
- ✚ Inquiry was made about the availability of housing for older adults in Marin. The AAA Director indicated that in the coming year, the Ombudsman will identify available housing in skilled and assisted living facilities in the county. The Division of Aging and Adult Services' Healthy Housing Program also has presence at affordable housing sites throughout Marin.
- ✚ The information on the Elder Economic Index was helpful in gaining a better understanding of poverty in Marin. Some people may be above the federal poverty level but are below Marin's Elder Index, which makes it difficult for them to afford the cost of living in the county. It was hoped that the Elder Index will continue to be included in the plan.
- ✚ The loss of funds for Linkages was significant. Care management through Linkages was vital in diverting people from ending up in nursing homes. The program was serving about 80 clients, and the agency continues to raise funds in order to provide some support to clients. The public was urged to raise the issue at the state level about the need to re-establish the program.
- ✚ A staff of the Marin Community Foundation (MCF) commented that the foundation also feels the crunch of the economic times. Collaborating with the AAA is more important than ever, as both organizations share mutual goals in supporting local organizations to deliver services for older adults. Aligning the work of the AAA and MCF is critical. The next step for the foundation is to assess impact of various funded programs on the clients served. Identifying ways "aging in place" is promoted is also important. Measuring program outcomes is critical.

## **SERVICE UNIT PLANS AND OTHER DOCUMENTS**

---

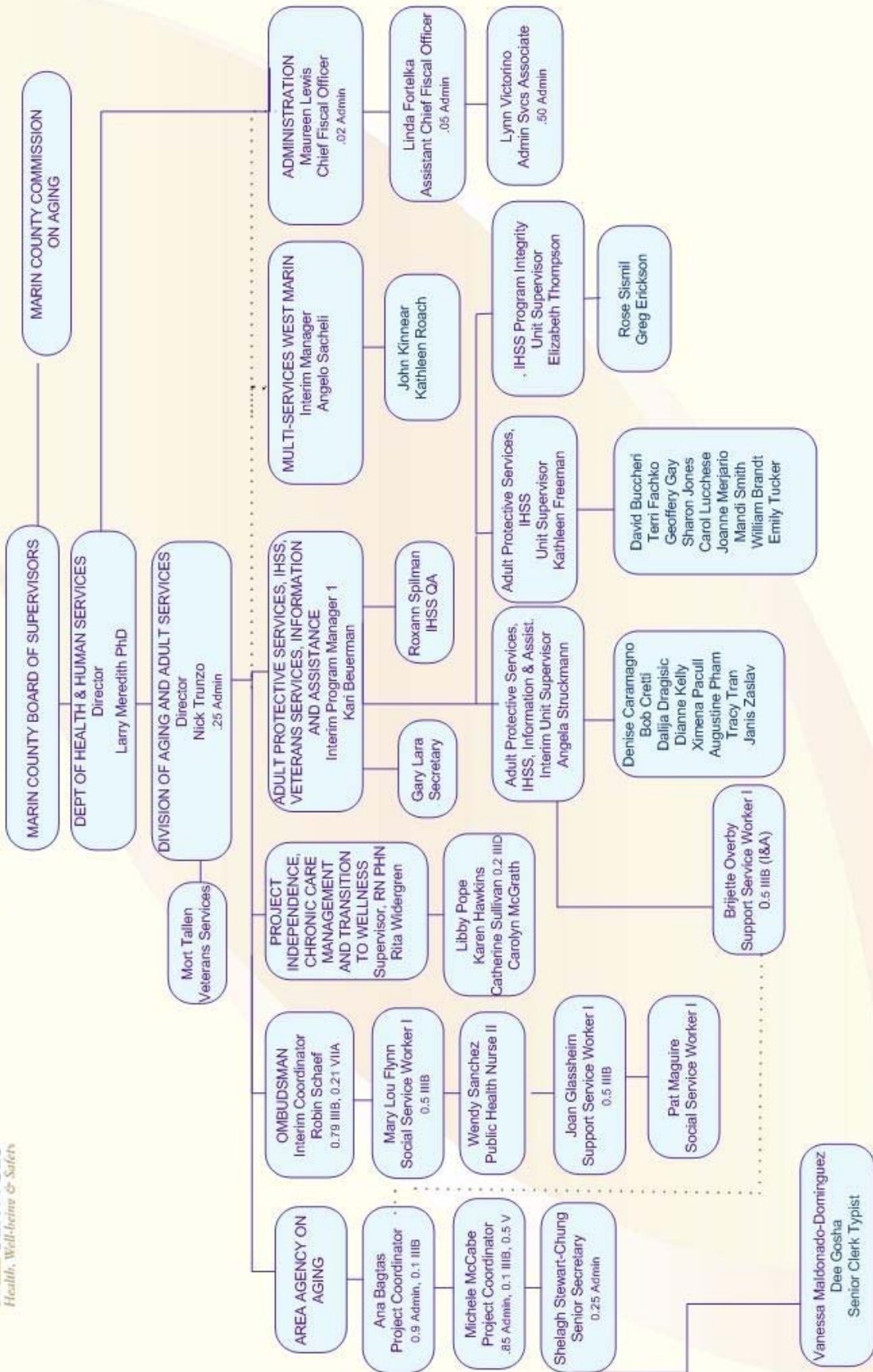
The levels of service, expressed in units (e.g., number of hours, persons served, activities planned), the Marin County Area Agency on Aging plans to provide in fiscal year 2010–11 are documented in Appendix F. Updates of other documents presented in the original three-year plan are included in Appendix G.

# Appendices

# Appendix A: Division of Aging & Adult Services Organization Chart



## MARIN COUNTY DEPARTMENT OF HEALTH & HUMAN SERVICES DIVISION OF AGING AND ADULT SERVICES



April 2010

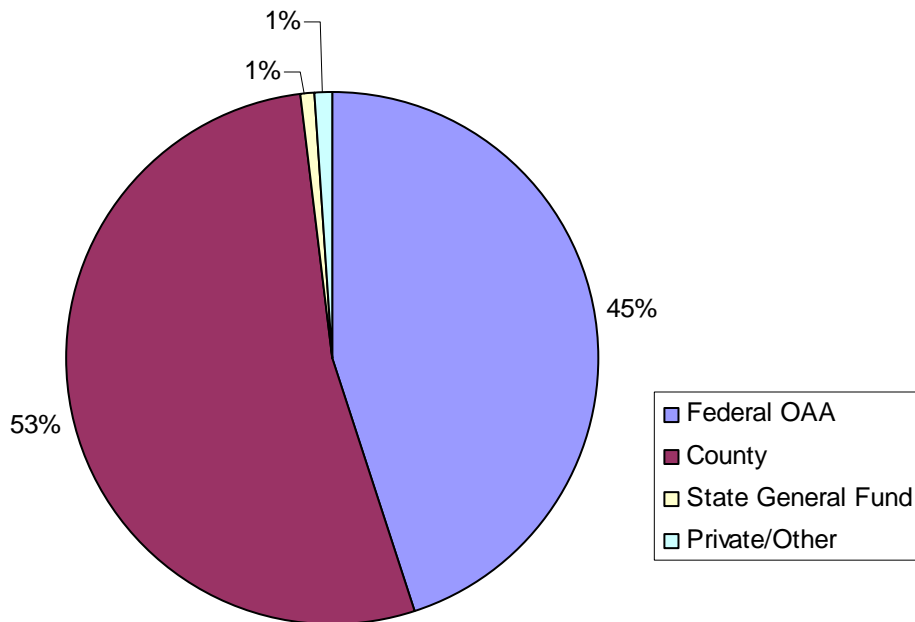
## Appendix B: Area Agency on Aging-Supported Programs & Services FY 2010–11

Agency/Organization	Program	FY 2010-11	Total Program Budget
<b>OLDER AMERICANS ACT PROGRAMS</b>			
Alzheimer's Association	Outreach	\$ 20,000	\$ 26,836
City of San Rafael-Goldenaires	Community Services & Senior Center Support	\$ 20,000	\$ 470,005
Division of Aging & Adult Services	Information & Assistance	\$ 23,729	\$ 109,000
Jewish Family & Children's Services	Assisted Transportation	\$ 20,000	\$ 64,711
Legal Aid of Marin	Legal Assistance	\$ 18,000	\$ 188,968
Marin Center for Independent Living	Home Care Registry	\$ 20,000	\$ 67,283
Novato Human Needs Center	Senior Transportation	\$ 25,000	\$ 68,978
Marin Adult Day Health Care	Adult Day Health Care	\$ 15,000	\$ 968,995
West Marin Senior Services	Case Management	\$ 23,500	\$ 282,526
<b>Support Services Subtotal</b>		<b>\$ 185,229</b>	<b>\$ 2,247,302</b>
Dance Palace Community Center	Congregate Meals Program	\$ 4,845	\$ 16,998
Marin Meals on Wheels	Congregate Meals Program	\$ 51,645	\$ 76,431
Marin Meals on Wheels	Home Delivered Meals Program	\$ 410,130	\$ 563,688
San Geronimo Valley Community Center	Congregate Meals Program	\$ 10,901	\$ 38,700
<b>Nutrition Services Subtotal</b>		<b>\$ 477,521</b>	<b>\$ 695,817</b>
Alzheimer's Association	Family Caregiver Support Program	\$ 45,040	\$ 64,907
Family Caregiver Alliance	Family Caregiver Support Program	\$ 53,961	\$ 77,377
<b>Family Caregiver Support Program Subtotal</b>		<b>\$ 99,001</b>	<b>\$ 142,284</b>
Division of Aging & Adult Services	Ombudsman	\$ 60,259	\$ 252,148
	Elder Abuse Task Force	\$ 3,753	\$ 25,000
	Disease Prevention & Medication Management	\$ 14,351	\$ 70,000
National Council on Aging	Older Worker's Program	\$ 117,820	\$ 132,222
<b>Other Older Americans Act Programs Subtotal</b>		<b>\$ 196,183</b>	<b>\$ 479,370</b>
<b>TOTAL OLDER AMERICANS ACT-FUNDED PROGRAMS</b>		<b>\$ 957,934</b>	<b>\$ 3,564,773</b>

**Appendix C: Area Agency on Aging Budget & Funding Sources FY 2010–11**

<b>SUMMARY BUDGET DISPLAY FY 2010-2011</b>		
Designated Funds for Administration	National Family Caregiver Support Program	\$ 19,283
	Nutrition Program	\$ 78,166
	Nutrition Compliance Consultant (R.D.)	\$ 14,000
	Program Development & Coordination	\$ 42,111
	Supportive Services	\$ 45,291
<b>Administration; Program Development &amp; Coordination Subtotal</b>		<b>\$ 198,851</b>
Older Americans Act Support Services		<b>\$ 185,229</b>
Senior Nutrition Program	Congregate Meals	\$ 67,391
	Home-Delivered Meals	\$ 410,130
<b>Nutrition Program Subtotal</b>		<b>\$ 477,521</b>
Ombudsman Program		<b>\$ 60,259</b>
Elder Abuse Prevention Program		<b>\$ 3,753</b>
Family Caregiver Support Program		<b>\$ 99,001</b>
Disease Prevention and Medication Management Programs		<b>\$ 14,351</b>
Older Workers Employment Program		<b>\$ 117,820</b>
<b>TOTAL FEDERAL &amp; GENERAL FUNDS (STATE) APPROPRIATIONS</b>		<b>\$ 1,156,785</b>
<b>COUNTY CONTRIBUTION AND OTHER SOURCES</b>		<b>\$ 1,305,787</b>
<b>TOTAL AREA AGENCY ON AGING BUDGET</b>		<b>\$ 2,462,572</b>

**Area Agency on Aging Funding Sources, Fiscal Year 2010-2011**



## Appendix D: Area Plan Goals & Objectives, Fiscal Year 2010–11 Update

<b>GOAL #1: Promote a community-based system of care that sustains the independence of older adults.</b>			
<p><b>Rationale:</b> Needs assessment findings overwhelmingly show that older adults want to “age in place” at home and in their community for as long as possible. Providers also identified a significant gap in services in Marin, noting that resources are skewed towards intervention measures for those who are already at-risk. Preventing and minimizing health risks in order to sustain older persons’ capacity to remain living independently are favored by community-based aging service providers. This is also in keeping with the Marin County Department of Health and Human Services’ vision of building a healthy Marin by developing “upstream” preventive approaches. Thus, pursuing a goal that promotes a community-based system of care that sustains the independence of older adults will make “aging in place” possible.</p>			
<b>OBJECTIVES</b>	<b>Projected Start and End Dates</b>	<b>Title III B Funded PD or C</b>	<b>Status</b>
1a. The <b>Housing &amp; Transportation Committee</b> members will monitor the updating of General Plans in cities and towns where they live and advocate that plans include affordable housing for older adults in locations that are complementary to older persons’ lifestyles. This objective will be measured by whether targeted towns designated property locations suitable for housing for older adults.	7/1/09 – 12/31/09		Completed by June 2010
1b. The <b>Housing &amp; Transportation Committee</b> will participate in the development of a “Senior Mobility Action and Implementation Plan” for Marin County by contributing to focus group discussions, working groups and project activities. The project aims to increase the types of transportation options for older adults that fit their physical needs and lifestyle, at the same time decreasing dependency on autos and improving public transit.	7/1/09 – 6/30/10	PD	Completed by June 2010
1c. The <b>Nutrition Committee</b> will visit each operating congregate meal site at least one time during the fiscal year to review service utilization and identify potential growth areas of sites by interviewing at least two participants, one volunteer, and one staff member.	7/1/10 – 6/30/11		Completed by June 2010; Modified for FY 2010-11 (objective 1j)
1d. The <b>Public Information Committee</b> will publish an article in the <i>Great Age</i> newsletter providing expert advice on “aging in place,” as well as relocating options to sustain older adults’ independence.	7/1/09 – 6/30/10		Completed
1e. The <b>Division of Aging &amp; Adult Services</b> will facilitate the recovery of Project Independence older adult patients discharged from hospitals through a volunteer transportation program aimed at preventing social isolation, helping clients successfully fulfill their discharge plans, and sustaining clients’ ability to remain independent.	7/1/09 – 6/30/10	PD	Completed by June 2010

1f. The <b>Legislative Committee</b> will track and advocate for both State and Federal legislation which supports, enhances, or improves services that protect the health and safety of older adults and allows them to live independently. Members will attend a minimum of two State legislative hearings and meet with each local representative to discuss the needs of older adults at least six times during the fiscal year.	7/1/10 – 6/30/11		Completed by June 2010; Continued FY 2010-11
1g. The <b>Public Health Nursing Program</b> will train at least 32 older individuals to effectively manage their chronic condition through the Chronic Disease Self Management Program. Follow-up with training participants will show that at least 50% of them continue to use the strategies learned from the workshop.	7/1/10 – 6/30/11		Completed by June 2010; Continued FY 2010-11 with modification
1h. Using an online tool or software, the <b>Public Health Nursing Program</b> will provide one-on-one medication management consultation to at least 50 older adults throughout the county to increase their knowledge about medications and assess the drugs they are taking for possible cross-interactions.	7/1/10 – 6/30/11		Completed with modification by June 2010; Continued FY 2010-11 with modification
1i. The <b>Housing &amp; Transportation Committee</b> will continue to monitor progress on final adoption of state-approved General Plan Housing Elements by monitoring plans for new housing opportunities suitable for older adults, including those who are low-income, and using the Commission on Aging’s white paper <i>Recommendation for Affordable Housing in the County of Marin and the Cities and Towns</i> to guide this work.	7/1/10 – 6/30/11		New
1j. The <b>Housing &amp; Transportation Committee</b> will continue to monitor the Marin Village plan with its opportunities for aging in place. Outcomes will be measured by the feasibility of developing the selected sites in 5 years.	7/1/10 – 6/30/11		New
1k. The <b>Housing &amp; Transportation Committee</b> will promote the recommendations in the <i>Senior Mobility Action and Implementation Plan</i> and examine the strengths and weaknesses of the recommendations. Outcomes will be measured by assessing progress towards meeting the transportation needs Marin older and disabled adults.	7/1/10 – 6/30/11		New
1l. <b>Nutrition Committee</b> members will visit at least seven congregate meal sites to review service utilization and identify potential growth areas of sites by interviewing at least two participants, one volunteer, and one staff member.	7/1/10 – 6/30/11		New
1m. The <b>Division of Aging &amp; Adult Services</b> will collaborate with the <b>Marin Community Foundation</b> on developing strategies to improve the aging service system infrastructure in Marin County. The collaboration will result in at least one project during the fiscal year.	7/1/10 – 6/30/11	PD	New

***GOAL #2: Increase opportunities for people to access information about community resources.***

**Rationale:** Access to information, services, and resources is one of the top unmet needs consistently identified by Marin older adults in the various needs assessment efforts conducted in the county. Discussion with services providers concurs with this assessment. Thus, increasing awareness, affordability, availability, and appropriateness of services are factors that must be addressed in order to improve older adults' access to services. Various approaches that expand opportunities for older adults and caregivers to find out and get connected to services must be explored.

Objectives	Projected Start and End Dates	Title III B Funded PD or C	Status
2a. The <b>Health Committee</b> will organize a public education program on “brain fitness as a movement,” which will take place at a Commission on Aging meeting. As a result of this presentation, Commissioners and the public will learn more about various products and determine methods to improve mental capacity.	7/1/09 – 5/31/10		Completed
2b. The <b>Health Committee</b> will identify an authority on advanced healthcare directives to write an article for the <i>Great Age</i> newsletter. This will result in readers becoming more educated about laws in the state of California regarding advanced directives and hospital patients. Nuances about when advance directives do and do not apply and the problems this causes will be addressed.	7/1/09 – 1/31/10		Discontinued
2c. The <b>Nutrition Committee</b> will increase the public’s awareness about food and nutrition resources in the county by updating the <i>Food and Nutrition Fact Sheet</i> and distributing it at the Marin County Senior Information Fair, which attracts 3,000-4,000 older adults annually.	7/1/09 – 6/30/10		Completed
2d. The <b>Nutrition Committee</b> will increase access to food sources in Marin by publishing the <i>Food and Nutrition Fact Sheet’s</i> food source list, which includes pantries, congregate meal sites, and other food sources, in the <i>Great Age</i> newsletter, reaching more than 2,500 households.	7/1/09 – 6/30/10		Modified: disseminated at community sites where <i>Great Age</i> is distributed
2e. The <b>Ombudsman Program</b> will update program brochures and conduct a minimum of four community presentations about choices for long-term care placement and how to find information on skilled nursing facilities and assisted living facilities.	7/1/09 – 6/30/10		Completed

2f. The <b>Public Information Committee</b> will improve older adults, caregivers and disabled individuals' access to services by evaluating current methods of disseminating information; developing new strategies to increase awareness about available services; and conducting a survey to assess improvements in obtaining information and resources. The <i>Great Age</i> newsletter, 457-INFO line and community presentations will be evaluated for this purpose.	7/1/09 – 6/30/10		Completed by June 2010
2g. The <b>Public Information Committee</b> will inform the community about issues and programs that affect older adults by assisting in the development, publication, and distribution of the <i>Great Age</i> newsletter to more than 2,500 households in Marin County.	7/1/10 – 6/30/11		Completed by June 2010; Continued FY 2010-11
2h. Using the newly launched MaxCess database especially designed for the Division of Aging and Adult Services, the impact of integration will be assessed by monitoring referrals and collaboration between the AAA's <b>Information and Assistance</b> and adult social services' IHSS, APS, and Veterans Services programs.	7/1/10 – 6/30/11		Completed by June 2010; Continued FY 2010-11
2i. The <b>Division of Aging &amp; Adult Services</b> will improve Marin's <i>Network of Care</i> website by adding features that will identify organizations for their language capabilities, inclusivity, and reach to rural and low-income individuals. This will greatly increase the ability of LGBT, LEP, rural, and low-income older adults to identify organizations that will be able to appropriately serve their needs.	7/1/09 – 6/30/10		Completed by June 2010
2j. The <b>Division of Aging &amp; Adult Services</b> , in conjunction with the Ombudsman Program, will sponsor two community presentations to present information about elder abuse prevention in skilled nursing and residential care facilities.	7/1/10 – 6/30/11		Completed by June 2010; Continued FY 2010-11
2k. In partnership with local hospitals, staff of the <b>Division of Aging &amp; Adults Services</b> and members of the <b>Marin County Commission on Aging</b> will plan, coordinate and co-sponsor the <i>Healthy Aging Symposium</i> , a health education event for Marin County older residents.	10/1/10 – 5/30/11	C	Completed by May 2010; Continued FY 2010-11
2l. The staff of the <b>Division of Aging &amp; Adult Services</b> and members of the <b>Marin County Commission on Aging</b> will participate in the annual Marin County Senior Information Fair steering committee, to assist in the coordination of an event that provides information and health screenings to approximately 4,000 older adults.	7/1/10 – 10/31/11		Completed as C objective FY 2009-10; Continued FY 2010-11
2m. The <b>Nutrition Committee</b> will update, as needed, the <i>Food and Nutrition Fact Sheet</i> and distribute it at one or more of the following: Senior Information Fair, Commission on Aging meetings, congregate meal sites, and senior residences.	7/1/10 – 6/30/11		New

2n. The <b>Planning Committee</b> will submit an article in the <i>Great Age</i> newsletter to discuss the outcomes of the Get Ready Seniors trainings conducted in FY 2009-10 and educate the public about the importance of disaster planning.	7/1/10 – 6/30/11		New
2o. The <b>Planning Committee</b> will continue to identify resources and community partners to help older adults and caregivers prepare for disaster. Efforts will focus on reaching home-bound and frail elderly who cannot attend disaster preparedness trainings in the community. Outcomes will be measured by the number of individuals informed about disaster preparedness.	7/1/10 – 6/30/11		New
2p. The <b>Planning Committee</b> will organize at least one presentation at the Commission on Aging meeting on a topic that focuses on sustaining a healthy lifestyle for caregivers.	7/1/10 – 6/30/11		New
2q. The <b>Public Information Committee</b> will inform the community about issues that impact older adults by coordinating at least six presentations at Commission on Aging meetings during the fiscal year.	7/1/10 – 6/30/11		New
2r. The <b>Health Committee</b> will organize a public education program at the Commission on Aging meeting on the danger of alcohol consumption and multiple medication use, especially by older adults. As a result of this presentation, Commissioners and the public will learn how to protect their health in a culture that makes alcohol so easily accessible.	7/1/10 – 6/30/11		New
2s. The <b>Health Committee</b> will submit an article in the <i>Great Age</i> newsletter about the danger of alcohol and multiple medication use to inform the public of this serious potential problem for older adults.	7/1/10 – 6/30/11		New
2t. The <b>Commission on Aging</b> , in conjunction with the <b>Division of Aging &amp; Adult Services</b> staff, will sponsor four community presentations on elder and dependent adult abuse topics through regular meetings of the Elder Abuse Task Force.	7/1/10 – 6/30/11		New
2u. The <b>Division of Aging &amp; Adult Services</b> will have representation on the <b>Marin Wellness Collaborative Leadership Council</b> to work on policy, system, organizational, and environmental levels to increase the ability of Marin residents to eat healthy foods and be physically active.	7/1/10 – 6/30/11	C	New
2v. The <b>Division of Aging &amp; Adult Services</b> will partner with <b>Dominican University</b> on an intergenerational social interaction pilot project where young adult students interact with older persons up to five hours a week to bridge communication between generations, prevent social isolation of the elderly, and inspire future health care professionals to pursue careers in aging.	7/1/10 – 6/30/11	PD	New

**GOAL #3: Improve the well-being of adults, particularly those with special needs.**

**Rationale:** Assessment of needs of LGBT, limited English-proficient, low-income, rural, and other ethnic/racial minorities indicate that disproportionate barriers to accessing services are experienced by certain subpopulations of older adults in Marin. Barriers to accessing services can fundamentally impact older adults' ability to stay healthy, independent, and connected to their community. Efforts to reach, serve, and connect those with special needs to services and community life is therefore critical in sustaining their health and well-being.

Objectives	Projected Start and End Dates	Title III B Funded PD or C	Status
3a. The <b>Ombudsman Program</b> will sponsor a minimum of six in-service training sessions for staff and volunteers with other community programs who serve Marin County's elderly and disabled populations. The program will establish formal working relationships with each relevant agency in order to expand and enhance services to long-term care clients, both in facilities and living independently.	7/1/10– 6/30/11		Completed by June 2010; Continued FY 2010-11
3b. The <b>Planning Committee</b> will support community-based disaster preparedness efforts by working with the <i>Get Ready Marin!</i> and other programs to help older adults, especially those who are vulnerable, prepare for disaster and be informed about community resources.	7/1/10 – 6/30/11		Completed by June 2010; Continued FY 2010-11
3c. To help older adults and vulnerable populations prepare and shelter in place during a disaster, the <b>Planning Committee</b> will develop and disseminate preparedness resource list, educational brochures, and fact sheets (translated in Spanish and Vietnamese) at a minimum of four community events and publish in partner organizations' newsletters.	7/1/09 – 6/30/10		Modified: Get Ready Seniors trainings organized. Resources and emergency kits provided.
3d. The <b>Planning Committee</b> will raise awareness and promote cultural competence and inclusion in the community by organizing a topic at the Commission on Aging meeting addressing racial, ethnic, sexual orientation and/or religious aging issues.	7/1/09 – 6/30/10		Completed
3e. The <b>Division of Aging &amp; Adult Services</b> will ensure that the needs of LGBT older adults and caregivers are addressed by including LGBT in the contract language already in existence requiring providers to ensure that services are targeted to specific minority subpopulations.	7/1/09 – 6/30/10		Completed

3f. The <b>Division of Aging &amp; Adult Services</b> staff will sponsor one in-service training session for all staff which will include Adult Protective Services information on how to recognize elder abuse within the community, how to make reports, and ways to aid in the prevention of abuse.	7/1/09 – 6/30/10		Completed
3g. The <b>Nutrition Committee</b> will provide opportunities for socialization and access to nutritious meals in targeted communities by offering advisory support to Marin County’s Senior Nutrition Program.	7/1/10 – 6/30/11		New
3h. The <b>Public Information Committee</b> will publish an article in the <i>Great Age</i> newsletter informing older individuals with disabilities about resources in the community.	7/1/10 – 6/30/11		New
3i. The <b>Division of Aging &amp; Adult Services</b> staff will recruit and train community volunteers to participate in a Financial Abuse Specialist Team to assist with challenging cases from Adult Protective Services and the Long-Term Care Ombudsman Program.	7/1/10 – 6/30/11	C	New

**Appendix E: Public Hearing**

(Referenced as SECTION 9: PUBLIC HEARINGS in the original *Marin County Area Plan for Aging 2009-2012*)

**PSA # 5**

**PUBLIC HEARINGS**  
**Conducted for the 2009-2012 Planning Period**  
 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? Yes or No	Was hearing held at a Long-Term Care Facility? Yes or No
2009-10	4/9/09	Margaret Todd Senior Center/ Hill Community Room, Novato, CA	48	No	No
2010-11	4/8/10	Marin Health & Wellness Campus, San Rafael, CA		No	No
2011-12					

**Below items must be discussed at each planning cycle’s Public Hearings**

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

Press Release was sent to all local media outlets announcing the public hearing. Flyers announcing the hearing were also sent to all partner organizations including aging service organizations, home health agencies, and long-term care facility directors encouraging them and their clients to participate. The announcement was also posted on the Division of Aging and Adult Services website and Information and Assistance bulletin.

2. Proposed expenditures for Program Development (PD) and Coordination (C) must be discussed at a public hearing. Did the AAA discuss PD and C activities at a public hearing?

Yes                       Not Applicable if PD and C funds are not used

No, Explain:

3. Summarize the comments received concerning proposed expenditures for PD and C, if applicable.

Marin Community Foundation (MCF) program officer commented on her agency’s commitment to working with the AAA on strengthening the aging service system in Marin. Collaboration with MCF on at least one project in FY 2010-11 is a Program Development objective.

4. Were all interested parties in the PSA notified of the public hearing and provided the opportunity to testify regarding setting of minimum percentages of Title III B program funds to meet the adequate proportion funding for Priority Services?

Yes

No, Explain:

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

None

6. Summarize other major issues discussed or raised at the public hearings (see Section 9 for more detailed account of public hearing proceedings)

The public provided the following comments and input on the Area Plan Update, Fiscal Year 2010-11:

- ✚ Despite the budgetary challenges facing the county, the Marin County Commission on Aging, the advisory council to the AAA, has 23 members and will continue to function.
- ✚ The Request for Proposal that will be released soon is for the congregate nutrition program. Services will start July 1, 2010.
- ✚ Concerns about the future of the Project Independence program due to funding limitations were raised. Comment was made that the program has paid public health nurses and a large contingency of volunteers.
- ✚ Inquiry was made about the availability of housing for older adults in Marin. Response was made that in the coming year, the Ombudsman will identify available housing in skilled and assisted living facilities in the county. The Division of Aging and Adult Services' Healthy Housing Program also has presence at affordable housing sites throughout Marin.
- ✚ The information on the Elder Economic Index was helpful in gaining a better understanding of poverty in Marin. Some people may be above the federal poverty level but are having a hard time getting by because they are below Marin's Elder Index to afford the cost of living in the county. It was hoped that the Elder Index continues to be included in the plan.
- ✚ The loss of funds for Linkages was significant. Care management through Linkages was vital in diverting people from ending up in nursing homes. The program was serving about 80 clients, and the agency continues to raise funds to continue providing support so some clients. The public was urged to raise the issue at the state level about the need to re-establish the program.
- ✚ Comment was made by a staff of the Marin Community Foundation (MCF) that the organization is also feeling the crunch of the economic times. Collaborating with the AAA is more important than ever, as both organizations share mutual goals in supporting local organizations to deliver services for older adults. Aligning the work of the AAA and

MCF is critical. The next step for the foundation is to assess impact of various funded programs on the clients served. Identifying ways “aging in place” is promoted is also important. Measuring program outcomes is critical.

The chair of the Planning Committee made a motion to approve the Area Plan Update as written. Comments from the members of the Commission on Aging were welcomed. Suggestion was made to change Area Plan goal number three to explicitly mention people with disabilities in addition to those with special needs. Response was made that the goal has been approved in the original submission of the plan and that the term “persons with special needs” includes the disabled. The goal will not be changed at this time.

7. List major changes in the Area Plan resulting from input by attendees at the hearings.

None.

## Appendix F: Service Unit Plan Objectives, Fiscal Year 2010–11

---

Presented below is a summary of specific Older Americans Act programs that have changes in Service Unit Plan (SUP) objectives for fiscal year 2010-11. No change in SUP is proposed for programs that are not included on this list. Details of SUP objectives for all programs are included in the following section.

- ✚ Title III C Congregate Meals Program
- ✚ Title III B Assisted Transportation
- ✚ Title III B Transportation
- ✚ Title III B/VII A Long-Term Care Ombudsman Program
- ✚ Title VII B Elder Abuse Prevention
- ✚ Title III E Family Caregiver Support Program
- ✚ Title V Senior Community Service Employment Program: change in the number of slots
- ✚ HICAP

**TITLE III/VII SERVICE UNIT PLAN OBJECTIVES**  
**PSA #: 5**  
**2009–2012 Three-Year Planning Period**  
**CCR Article 3, Section 7300(d)**

The Service Unit Plan (SUP) uses the National Aging Program Information System (NAPIS) Categories and units of service, as defined in PM 97-02. For services not defined in NAPIS, refer to Division 4000 of the Management Information Systems (MIS) Manual. Report units of service to be provided with **ALL funding sources**.

Related funding is reported in the annual Area Plan Budget (CDA 122) for Titles III B, III C-1, III C-2, III D, VII (a) and VII (b). This SUP does **not** include Title III E services.

**1. Personal Care (In-Home)**

**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	N/A		
2010-2011	N/A		
2011-2012			

**2. Homemaker**

**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2009-2010	N/A		
2010-2011	N/A		
2011-2012			

**3. Chore**

**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	N/A		

2010-2011	N/A		
2011-2012			

**4. Adult Day Care/Adult Day Health**

**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	300	1	
2010-2011	300	1	
2011-2012			

**5. Case Management**

**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	416	1	
2010-2011	416	1	
2011-2012			

**6. Congregate Meal**

**Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	10,610	1	
2010-2011	12,000	1	
2011-2012			

**7. Home-Delivered Meal**

**Unit of Service = 1 meal**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	68,513	1	

2010-2011	68,513	1	
2011-2012			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	1,050	1	
2010-2011	1,050	1	
2011-2012			

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

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	N/A		
2010-2011	N/A		
2011-2012			

**10. Assisted Transportation** **Unit of Service = 1 one-way trip**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2009-2010	N/A		
2010-2011	480	1	
2011-2012			

**11. Transportation** **Unit of Service = 1 one-way trip**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	3,020	1	

2010-2011	1,300	1	
2011-2012			

**12. Legal Assistance**

**Unit of Service = 1 hour**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	2,900	1	
2010-2011	2,900	1	
2011-2012			

**13. Information and Assistance**

**Unit of Service = 1 contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2009-2010	1,000	2	
2010-2011	1,000	2	
2011-2012			

**14. Outreach**

**Unit of Service = 1 contact**

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2009-2010	400	2	
2010-2011	400	2	
2011-2012			

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

- In this section, identify **Title III D** services (required); and also identify all **Title III B** services (discretionary) to be funded that were not reported in NAPIS categories 1–14 above. (Identify the specific activity under the Service Category on the “Units of Service” line when applicable)

- Specify what activity constitutes a unit of service (1 hour, 1 session, 1 contact, etc.). (Reference Division 4000 of the MIS Operations Manual, January 1994)
- Each **Title III B** “Other” service must be an approved NAPIS Program 15 service listed on the “Schedule of Supportive Services (III B)” page of the Area Plan Budget (CDA 122).  
[**Title III B Example:** Service Category: Community Services/Senior Center Support.  
Units of Service: 1 hour – Activity Scheduling]

**Title III D, Disease Prevention/Health Promotion**

- **Service Activity:** Identify the Title III D specific allowable service activity provided. (i.e.: Physical Fitness, Counseling Advocacy, Community Education, Health Screening, Outreach, Therapy, Information, Comprehensive Assessment, Home Security, Equipment, Family Support, Nutrition Education, Nutrition Counseling, Nutrition Screening).
- **Units of Service:** Specify what constitutes a unit of service (i.e.: one participant, one client served, one hour, one presentation, one piece of equipment, one session, one client counseled). (Reference Division 4000 of the MIS Operations Manual, January 1994)
- Insert the number of proposed units of service in the Disease Prevention/Health Promotion and Medication Management tables in the Title III D Service Unit Plan Objectives.
- **Title III D and Medication Management requires a narrative program goal and objective.** The objective should clearly explain the activity that is being provided to fulfill the service unit requirement.
- **Title III D and Medication Management:** Insert the program goal and objective numbers in all Title III D Service Plan Objective Tables

**Title III D, Disease Prevention/Health Promotion**

**Service Activity:** Community Education

**Units of Service = One contact**

Fiscal Year	Proposed Units of Service	Program Goal Number	Objective Numbers (required)
2009-2010	32	1	g
2010-2011	32	1	g
2011-2012			

**Title III D, Medication Management**

**Service Activity:** Information

**Units of Service = One contact**

Fiscal Year	Proposed Units of Service	Program Goal Number	Objective Numbers (required)
2009-2010	50	1	h
2010-2011	50	1	h
2011-2012			

**Title III B, Other Supportive Services**

**Service Category:** In-Home Services Registry      **Units of Service and Activity = One hour**

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	1,728	1	
2010-2011	1,728	1	
2011-2012			

**Service Category:** Community Services and Senior Center Support

**Units of Service and Activity = One hour (Activity Scheduling)**

Fiscal Year	<b>Proposed</b> Units of Service	Goal Numbers	Objective Numbers (if applicable)
2009-2010	2,970	1	
2010-2011	2,970	1	
2011-2012			

**TITLE IIIB and Title VIIA:**  
**LONG-TERM CARE (LTC) OMBUDSMAN PROGRAM OUTCOMES**  
**PSA #5**  
**2009–2012 Three-Year Planning Period**

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.

Baseline numbers are obtained from the local LTC Ombudsman Program’s FY 2006-2007 National Ombudsman Reporting System (NORS) data as reported in the State Annual Report to the Administration on Aging (AoA).

Targets are established jointly by the AAA and the local LTC Ombudsman Program Coordinator. Use the baseline as the benchmark for determining FY 2009-2010 targets. For each subsequent FY target, use the previous FY target as the benchmark to determine realistic targets and percentage of change given current resources available. Refer to your local LTC Ombudsman Program’s last three years of NORS data for historical trends and take into account current resources available to the program. Targets should be reasonable and attainable.

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 2006-2007 was 73%.

1. FY 2006-2007 Baseline Resolution Rate: 86% Number of complaints resolved 530 + Number of partially resolved complaints 75 divided by the Total Number of Complaints Received 704 = Baseline Resolution Rate 86%
2. FY 2009-2010 Target: Resolution Rate 86%
3. FY 2010-2011 Target: Resolution Rate 80%
4. FY 2011-2012 Target: Resolution Rate
Program Goals and Objective Numbers:

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

1. FY 2006-2007 Baseline: 65 number of meetings attended
2. FY 2009-2010 Target: number <u>30</u> and % increase ___ or % decrease <u>54%</u>
3. FY 2010-2011 Target: number <u>25</u> and % increase ___ or % decrease <u>17%</u>
4. FY 2011-2012 Target: number ___ and ___% increase or % decrease ___
Program Goals and Objective Numbers: Baseline figure was inaccurately overstated in original documents.

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

1. FY 2006-2007 Baseline: number of meetings attended 16
2. FY 2009-2010 Target: number <u>16</u> and % increase ___ or % decrease
3. FY 2010-2011 Target: number <u>10</u> and % increase ___ or % decrease <u>38%</u>
4. FY 2011-2012 Target: number ___ and % increase ___ or % decrease ___
Program Goals and Objective Numbers:

**D. Consultation to Facilities (AoA Report, Part III-D, #4)**

1. FY 2006-2007 Baseline: number of consultations 482
2. FY 2009-2010 Target: number <u>400</u> and % increase ___ or % decrease <u>17%</u>
3. FY 2010-2011 Target: number <u>400</u> and % increase ___ or % decrease ___
4. FY 2011-2012 Target: number ___ and % increase ___ or % decrease ___
Program Goals and Objective Numbers:

**E. Information and Consultation to Individuals (AoA Report, Part III-D, #5)**

1. FY 2006-2007 Baseline: number of consultations 1930
2. FY 2009-2010 Target: number 1930 and % increase ___ or % decrease
3. FY 2010-2011 Target: number <u>1222</u> and % increase ___ or % decrease <u>37%</u>
4. FY 2011-2012 Target: number ___ and % increase ___ or % decrease ___
Program Goals and Objective Numbers:

**F. Community Education (AoA Report, Part III-D, #10)**

1. FY 2006-2007 Baseline: number of sessions 1
2. FY 2009-2010 Target: number <u>4</u> of sessions and % increase <u>300%</u> or % decrease ___
3. FY 2010-2011 Target: number <u>4</u> of sessions and % increase or % decrease ___
4. FY 2011-2012 Target: number ___ of sessions and % increase or % decrease ___
Program Goals and Objective Numbers:

**G. Systems Advocacy**

<b>Systemic Advocacy Effort(s)</b>  Establish an effective working relationship with the Marin County Public Guardian's Office in order to better serve residents who lack capacity and are in need of representation due to potential abuse situations. Sponsor quarterly case conference meetings between Ombudsman staff and Public Guardian staff. Also mediate between facilities and conservators with regard to resident issues or problems.
---

**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)

Number of Nursing Facilities visited (unduplicated) at least once a quarter not in response to a complaint (based on current resources available to the program).

1. FY 2006-2007 Baseline:100%

Number of Nursing Facilities visited at least once a quarter not in response to a complaint 13 divided by the number of Nursing Facilities 13.

2. FY 2009-2010 Target: 100% and % increase \_\_\_ or % decrease \_\_\_

3. FY 2010-2011 Target: 100% and % increase \_\_\_ or % decrease \_\_\_

4. FY 2011-2012 Target: \_\_\_ and % increase \_\_\_ or % decrease \_\_\_

Program Goals and Objective Numbers:

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

Number Board and Care Facilities (RCFEs) visited (unduplicated) at least once a quarter not in response to a complaint (based on current resources available to the program).

1. FY 2006-2007 Baseline: 100%

Number of RCFEs visited at least once a quarter not in response to a complaint 54 divided by the number of RCFEs 54.

2. FY 2009-2010 Target: 100% and % increase \_\_\_ or % decrease \_\_\_

3. FY 2010-2011 Target: 100% and % increase \_\_\_ or % decrease \_\_\_

4. FY 2011-2012 Target: \_\_\_ and %increase \_\_\_ or % decrease \_\_\_

Program Goals and Objective Numbers:

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

(One FTE generally equates to 40 hours per week or 1,760 hours per year)

Verify number of staff FTEs with Ombudsman Program Coordinator.

1. FY 2006-2007 Baseline: FTEs 2.5
2. FY 2009-2010 Target: number of FTEs <u>2.5</u> and % increase ___ or % decrease ___
3. FY 2010-2011 Target: number of FTEs <u>2.5</u> and % increase ___ or % decrease ___
4. FY 2011-2012 Target: number of FTEs ___ and % increase ___ or % decrease ___
Program Goals and Objective Numbers:

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

Verify numbers of volunteers with Ombudsman Program Coordinator.

1. FY 2006-2007 Baseline: Number of certified LTC Ombudsman volunteers as of June 30, 2007 4
2. FY 2009-2010 Projected Number of certified LTC Ombudsman volunteers as of June 30, 2010 <u>7</u> and % increase <u>75%</u> or % decrease ___
3. FY 2010-2011 Projected Number of certified LTC Ombudsman volunteers as of June 30, 2011 <u>9</u> and % increase <u>28 %</u> or % decrease ___
4. FY 2011-2012 Projected Number of certified LTC Ombudsman volunteers as of June 30, 2012 ___ and % increase ___ or % decrease ___
Program Goals and Objective Numbers:

**Outcome 3. Ombudsman representatives report their complaint processing and other activities accurately and consistently. [OAA Section 712(c)]**

**Measures and Targets:**

**A. Each Ombudsman Program provides regular training on the National Ombudsman Reporting System (NORS).**

1. FY 2006-2007 Baseline number of NORS Part I, II, III or IV training sessions completed 0  Please obtain this information from the local LTC Ombudsman Program Coordinator.
---

2. FY 2009-2010 Target: number of NORS Part I, II, III or IV training sessions planned 1

3. FY 2010-2011 Target: number of NORS Part I, II, III or IV training sessions planned 1

4. FY 2011-2012 Target: number of NORS Part I, II, III or IV training sessions planned

Program Goals and Objective Numbers:

**TITLE VII B ELDER ABUSE PREVENTION**  
**SERVICE UNIT PLAN OBJECTIVES**  
**PSA #5**  
**2009–2012 Three-Year Planning Period**

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

A Unit of Service may include public education sessions, training sessions for professionals, training sessions for caregivers served by Title III E Program, educational materials distributed or other hours of activity spent developing a coordinated system which addresses elder abuse prevention, investigation, and prosecution.

AAAs must provide one or more of the service categories listed below:

- **Public Education Sessions** – Please identify the total number of education sessions for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Training Sessions for Professionals** – Please identify the total number of training sessions for professionals (e.g., 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** – Please identify the total number of Title VII/B training sessions for caregivers who are receiving services under Title III E of the Older Americans Act on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- **Hours Spent Developing a Coordinated System to Respond to Elder Abuse** - Please identify the number of hours to be spent developing a coordinated system to respond to elder abuse.
- **Educational Materials Distributed** – Please identify the type and number of educational materials 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.

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

**PSA #5**

**2009–2012 Three-Year Planning Period**

Fiscal Year	Total # of Public Education Sessions
2009-10	
2010-11	
2011-12	

Fiscal Year	Total # of Training Sessions for Professionals
2009-10	1
2010-11	
2011-12	

Fiscal Year	Total # of Training Sessions for Caregivers served by Title III E
2009-10	
2010-11	
2011-12	

Fiscal Year	Total # of Hours Spent Developing a Coordinated System
2009-10	
2010-11	150
2011-12	

Fiscal Year	Total # of Copies of Educational Materials or Products to be Distributed	Description of Educational Materials or Products
2009-2010		
2010-2011		
2011-2012		

**TITLE III E SERVICE UNIT PLAN OBJECTIVES**

**PSA #5**

**2009–2012 Three-Year Planning Period**

**CCR Article 3, Section 7300(d)**

This Service Unit Plan (SUP) utilizes the five broad federal service categories defined in PM 08-03. Refer to the FCSP Service Matrix in this PM for eligible activities and service unit examples covered within each category. Specify proposed audience size or units of service for ALL budgeted funds.

**For Direct Services**

<b>CATEGORIES</b>	<b>1</b>	<b>2</b>	<b>3</b>
Direct III E Family Caregiver Services	<b>Proposed</b> Units of Service	<b>Required</b> Goal #(s)	<b>Optional</b> Objective #(s)
Information Services	<b># of activities and Total est. audience for above</b>		
2009-2010	# of activities: Total est. audience for above:		
2010-2011	# of activities: Total est. audience for above:		
2011-2012	# of activities: Total est. audience for above:		
Access Assistance	<b>Total contacts</b>		
2009-2010			
2010-2011			
2011-2012			
Support Services	<b>Total hours</b>		
2009-2010			
2010-2011			
2011-2012			
Respite Care	<b>Total hours</b>		
2009-2010			
2010-2011			
2011-2012			
Supplemental Services	<b>Total occurrences</b>		
2009-2010			
2010-2011			
2011-2012			

Direct III E Grandparent Services	<b>Proposed</b> Units of Service	<b>Required</b> Goal #(s)	<b>Optional</b> Objective #(s)
Information Services	<b># of activities and Total est. audience for above</b>		
2009-2010	# of activities: Total est. audience for above:		
2010-2011	# of activities: Total est. audience for above:		
2011-2012	# of activities: Total est. audience for above:		
Access Assistance	<b>Total contacts</b>		

2009-2010			
2010-2011			
2011-2012			
Support Services	<b>Total hours</b>		
2009-2010			
2010-2011			
2011-2012			
Respite Care	<b>Total hours</b>		
2009-2010			
2010-2011			
2011-2012			
Supplemental Services	<b>Total occurrences</b>		
2009-2010			
2010-2011			
2011-2012			

**For Contracted Services**

Contracted III E Family Caregiver Services	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Information Services	<b># of activities and total est. audience for above:</b>		
2009-2010	# of activities: 20 Total est. audience for above: 150	2	
2010-2011	# of activities: 20 Total est. audience for above: 150	2	
2011-2012	# of activities: Total est. audience for above:		
Access Assistance	<b>Total contacts</b>		
2009-2010	75	2	
2010-2011	75	2	
2011-2012			
Support Services	<b>Total hours</b>		
2009-2010	650	1	
2010-2011	650	1	
2011-2012			
Respite Care	<b>Total hours</b>		
2009-2010	2,000	1	
2010-2011	1,800	1	
2011-2012			
Supplemental Services	<b>Total occurrences</b>		
2009-2010	12	1	
2010-2011	12	1	
2011-2012			

Contracted III E Grandparent Services	<i>Proposed</i> Units of Service	<i>Required</i> Goal #(s)	<i>Optional</i> Objective #(s)
Information Services	<b># of activities and Total est. audience for above</b>		

2009-2010	# of activities: Total est. audience for above:		
2010-2011	# of activities: Total est. audience for above:		
2011-2012	# of activities: Total est. audience for above:		

<b>Access Assistance</b>	<b>Total contacts</b>		
2009-2010			
2010-2011			
2011-2012			
<b>Support Services</b>			
2009-2010			
2010-2011			
2011-2012			
<b>Respite Care</b>	<b>Total hours</b>		
2009-2010			
2010-2011			
2011-2012			
<b>Supplemental Services</b>	<b>Total occurrences</b>		
2009-2010			
2010-2011			
2011-2012			

**TITLE V/SCSEP SERVICE UNIT PLAN OBJECTIVES**  
**2009–2012 Three-Year Planning Period**  
**CCR Article 3, Section 7300(d)**

The Service Unit Plan (SUP) utilizes the new Data Collection System developed by the U.S. Department of Labor (DOL), which captures the new performance measures per the Older Americans Act of 1965 as amended in 2000, and the Federal Register 20 CFR Part 641. The related funding is reported in the annual Title V/SCSEP Budget.

**Note:** Before the beginning of each federal Program Year, DOL negotiates with the California Department of Aging to set the baseline levels of performance for California. Once determined, those baseline levels will be transmitted to the AAA.

Fiscal Year (FY)	CDA Authorized Slots	National Grantee Authorized Slots (If applicable)	Objective Numbers (If applicable)
2009-2010	13		
2010-2011	11		
2011-2012			

**HEALTH INSURANCE COUNSELING AND ADVOCACY PROGRAM  
SERVICE UNIT PLAN  
PSA # 5  
2009-2012 Three-Year Planning Period  
CCR Article 3, Section 7300(d)**

---

The Service Unit Plan (SUP) uses definitions found at:

[www.aging.ca.gov/aaa/reporting\\_instructions/hicap/Current\\_Forms.asp](http://www.aging.ca.gov/aaa/reporting_instructions/hicap/Current_Forms.asp). This link takes you to the page titled “**Health Insurance Counseling and Advocacy Program (HICAP) Reporting Instructions and Forms**”. On this page you will find the current HICAP report forms, instructions, definitions, and acronyms critical to answering this SUP. If you have related goals in the Area Plan to Service Unit Plan, please list them in the 3<sup>rd</sup> column.

**IMPORTANT NOTE FOR MULTIPLE PSA HICAPs:** If you are a part of a multiple PSA HICAP where two or more AAAs enter into agreement with one “Managing AAA,” then each AAA must enter its equitable share of the estimated performance numbers in each AAA’s respective SUP. Please do this in cooperation with the Managing AAA. The Managing AAA is responsible for providing HICAP services in the covered PSAs in a way that is agreed upon and equitable among the participating parties.

**IMPORTANT NOTE FOR HICAPs WITH HICAP PAID LEGAL SERVICES:** If your Master Contract contains a provision for using HICAP funds to provide HICAP Legal Services, you must complete Section 2.

**IMPORTANT NOTE REGARDING FEDERAL PERFORMANCE TARGETS:** The Centers for Medicare and Medicaid Services (CMS) requires all State Health Insurance and Assistance Programs (SHIP) to meet certain targeted performance measures. To help AAA’s complete Section 2, CDA will annually provide AAAs with individual PSA federal performance measure targets.

**Section 1: Primary HICAP Units of Service**

<b>Fiscal Year (FY)</b>	<b>1.1 Estimated Number of Unduplicated Clients Counseled</b>	<b>Goal Numbers</b>
2009-2010		
2010-2011	221	1.40
2011-2012		

**Note: Clients Counseled equals the number of Intakes closed and finalized by the Program Manager.**

<b>Fiscal Year (FY)</b>	<b>1.2 Estimated Number of Public and Media Events</b>	<b>Goal Numbers</b>
2009-2010		
2010-2011	17	1.40
2011-2012		

**Note: Public and Media events include education/outreach presentations, booths/exhibits at health/senior fairs, and enrollment events, excluding public service announcements and printed outreach.**

**Section 2: Federal Performance Benchmark Measures**

<b>Fiscal Year (FY)</b>	<b>* 2.1 Estimated Number of Contacts for all Clients Counseled</b>	<b>Goal Numbers</b>
2009-2010		
2010-2011	887	1.40
2011-2012		

**Note: This includes all counseling contacts via telephone, in-person at home, in-person at site, and electronic contacts (e-mail, fax, etc.) for duplicated client counts.**

<b>Fiscal Year (FY)</b>	<b>* 2.2 Estimated Number of Persons Reached at Public and Media Events</b>	<b>Goal Numbers</b>
2009-2010		
2010-2011	323	1.40
2011-2012		

**Note: This includes the estimated number of attendees (e.g., people actually attending the event, not just receiving a flyer) reached through presentations, and those reached through booths/exhibits at health/senior fairs, and those enrolled at enrollment events, excluding public service announcements (PSAs) and printed outreach materials.**

<b>Fiscal Year (FY)</b>	<b>2.3 Estimated Number of Beneficiaries with Medicare Status Due to a Disability Contacts</b>	<b>Goal Numbers</b>
2009-2010		
2010-2011	93	1.40
2011-2012		

**Note: This includes all counseling contacts via telephone, in-person at home, in-person at site, and electronic contacts (e-mail, fax, etc.) duplicated client counts with Medicare beneficiaries due to disability and not yet age 65.**

<b>Fiscal Year (FY)</b>	<b>2.4 Estimated Number of Low Income Beneficiaries Unduplicated</b>	<b>Goal Numbers</b>

2009-2010		
2010-2011	24	1.40
2011-2012		

**Note:** This is the number of unduplicated low-income Medicare beneficiary contacts and/or contacts that discussed low-income subsidy (LIS). Low income means 150 percent of the Federal Poverty Level (FPL).

Fiscal Year (FY)	2.5 Estimated Number of Enrollment and Enrollment Assistance Contacts	Goal Numbers
2009-2010		
2010-2011	446	1.40
2011-2012		

**Note:** This is the number of unduplicated enrollment contacts during which one or more qualifying enrollment topics were discussed. This includes all enrollment assistance, not just Part D.

Fiscal Year (FY)	2.6 Estimated Part D Enrollment and Enrollment Assistance Contacts	Goal Numbers
2009-2010		
2010-2011	58	1.40
2011-2012		

**Note:** This is a subset of all enrollment assistance in 2.5. It includes the number of unduplicated Part D enrollment contacts during which one or more qualifying Part D enrollment topics were discussed.

Fiscal Year (FY)	2.7 Estimated Number of Counselor FTEs in PSA	Goal Numbers
2009-2010		
2010-2011	.44 FTE	1.40
2011-2012		

**Note:** This is the total number of counselor FTEs (i.e. the total number of active counselors; paid, in-kind paid and volunteer working 2000 hours per year).

**Section 3: HICAP Legal Services Units of Service (if applicable)<sup>1</sup>**

<b>State Fiscal Year (SFY)</b>	<b>3.1 Estimated Number of Clients Represented Per SFY (Unit of Service)</b>	<b>Goal Numbers</b>
2009-2010		
2010-2011		
2011-2012		
<b>State Fiscal Year (SFY)</b>	<b>3.1 Estimated Number of Legal Representation Hours Per SFY (Unit of Service)</b>	<b>Goal Numbers</b>
2009-2010		
2010-2011		
2011-2012		
<b>State Fiscal Year (SFY)</b>	<b>3.3 Estimated Number of Program Consultation Hours per SFY (Unit of Service)</b>	<b>Goal Numbers</b>
2009-2010		
2010-2011		
2011-2012		

<sup>1</sup> Requires a contract for using HICAP funds to pay for HICAP Legal Services

\* Indicates Changes from previous year.

## Appendix G: Other Documents Area Plan Fiscal Year 2010–11 Update

---

The following documents were included in the original submission of the *Live Long, Live Well: Marin County Area Plan for Aging 2009–2012* as approved by the California Department of Aging in 2009. With the exception of the Governing Board roster, no changes in these sections are proposed for fiscal year 2010–11. As such, these documents will not be included in this first update of the three-year plan. Refer to the following sections in the original *Live Long, Live Well: Marin County Area Plan for Aging 2009–2012* for details about these documents.

- ✚ Focal Points (Section 13)
- ✚ Priority Services (Section 14)
- ✚ Notice of Intent to Provide Direct Services (Section 15)
- ✚ Request for Approval to Provide Direct Services (Section 16)
- ✚ Governing Board Marin County Board of Supervisor (Section 17)
- ✚ Advisory Council (Section 18)
- ✚ Legal Assistance (Section 19)
- ✚ Multipurpose Senior Center Acquisition/Construction Compliance (Section 20)
- ✚ Family Caregiver Support Program Notice of Intent for Non-Provision (Section 21)

An updated roster of the Area Agency on Aging’s Governing Board, the Marin County Board of Supervisors, is presented below.

**(Reference: SECTION 17. GOVERNING BOARD of the original three-year plan)**

**PSA # 5**

**2009-2012 Three-Year Area Plan Cycle**

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

**Number of Members on the Board:        5**

**Names/Titles of Officers:**

**Term in Office  
Expires:**

Judy Arnold, President	12/31/10
Susan Adams, Vice-President	12/31/10
Steve Kinsey, 2 <sup>nd</sup> Vice-President	12/31/10

**Names/Titles of All Members:  
Expires:**

**Term on Board**

Susan Adams, District 1	
Judy Arnold, District 5	
Hal Brown, District 2	
Steve Kinsey, District 4	
Charles McGlashan, District 3	