

COUNTY OF LOS ANGELES WORKFORCE DEVELOPMENT, AGING AND COMMUNITY SERVICES

AGING COMMUNITY SHA

lacounty.gov

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Otto Solórzano Acting Director

"Connecting communities and improving the lives of all generations"

April 2, 2019

The Honorable Board of Supervisors County of Los Angeles 383 Kenneth Hahn Hall of Administration 500 West Temple Street Los Angeles, CA 90012

Dear Supervisors:

ADOPTED

BOARD OF SUPERVISORS COUNTY OF LOS ANGELES

23 April 2, 2019

CELIA ZAVALA
EXECUTIVE OFFICER

LOS ANGELES COUNTY PLANNING AND SERVICE AREA (PSA) 19
AREA AGENCY ON AGING
2019-2020 AREA PLAN UPDATE
(ALL SUPERVISORIAL DISTRICTS) (3 VOTES)

SUBJECT

Workforce Development, Aging and Community Services (WDACS) seeks your Board's approval of the Los Angeles County Area Agency on Aging (AAA) Fiscal Year (FY) 2019-2020 Area Plan Update (Attachment I). The FY 2019-2020 Area Plan Update is required by the California Department of Aging (CDA), and provides an opportunity to revise the FY 2016-2020 Area Plan approved by your Board on April 6, 2016. There are several updates to the FY 2016-2020 Area Plan incorporated in the FY 2019-2020 Area Plan Update, including the targeted number of low-income and minority clients to be served, the number of Service Units projected for FY 2019-2020, and the composition of the Los Angeles County Commission for Older Adults.

IT IS RECOMMENDED THAT YOUR BOARD:

- 1. Approve the FY 2019-2020 Area Plan Update (Attachment I).
- Authorize the Acting Director of WDACS, or designee, to sign the Letter of Transmittal
 on behalf of the Chair of the Board and submit the FY 2019-2020 Area Plan Update
 to the California Department of Aging (CDA).

PURPOSE/JUSTIFICATION OF RECOMMENDED ACTION

There are two (2) AAAs in the Los Angeles Region, the City of Los Angeles Department of Aging and WDACS. CDA has designated WDACS to operate as the AAA for all areas

The Honorable Board of Supervisors April 2, 2019 Page 2

of Los Angeles County, except the City of Los Angeles. AAAs promote the development and implementation of a comprehensive, coordinated system of care that enables older individuals and their caregivers to live in a community-based setting; advocate for the needs of those 60 years of age and older in Los Angeles County; and encourage citizen involvement in the planning process, as well as in the delivery of services. As the AAA for Los Angeles County, WDACS is responsible for identifying unmet needs of older individuals and functionally-impaired adults by promoting independent lifestyles through the following programs: Congregate and Home-Delivered Meals, Supportive Services, Legal Assistance, Health Insurance Counseling and Advocacy, Nutrition Education, Family Caregiver Support Program and Disease Prevention and Health Promotion Services.

The Older Americans Act (OAA) of 1965 mandates all AAAs to have an Area Plan that identifies the needs of the community. The annual Area Plan Update enables the Los Angeles County AAA to reexamine its direction and progress, based on changing circumstances. The goals of the FY 2016-2020 Area Plan and FY 2019-2020 Area Plan Update are: 1) promote an environment sensitive to the needs of older adults, informal caregivers and adults with disabilities in order to enhance their quality of life; 2) coordinate and expand on the development of an integrated, multi-disciplinary network of investigative/protective services for vulnerable older adults and adults with disabilities to prevent all forms of fraud and abuse; and 3) collaborate with the City of Los Angeles Department of Aging, other Los Angeles County Departments, and community-based organizations to increase service awareness and provide seamless and coordinated services. Specific objectives and strategies are outlined for each of these goals.

The Los Angeles County Commission for Older Adults and the public participated in the planning process and reviewed and commented on the goals and objectives of the plan. Public hearings to discuss the FY 2019-2020 Area Plan Update took place in all five Supervisorial Districts. Based on new information gathered, there are several updates to the FY 2016-2020 Area Plan incorporated in the FY 2019-2020 Area Plan Update, such as the targeted number of low-income and minority clients to be served, the number of Service Units projected for FY 2019-2020, and the composition of the Los Angeles County Commission for Older Adults to reflect incoming and termed-out commissioners.

Implementation of Strategic Plan Goals

The activities identified in the Area Plan support Countywide Strategic Plan Goal I: Make Investments That Transform Lives, specifically, Strategy I.1 Increasing Our Focus on Prevention Initiatives and Strategy I.2. Enhancing Our Delivery of Comprehensive Interventions; and Goal II Foster Vibrant and Resilient Communities, specifically, Strategy II.2 Supporting the Wellness of Our Communities.

Performance Measures

The FY 2019-2020 Area Plan Update includes state and federal performance targets, which include proposed Units of Service for Congregate and Home-Delivered Meals, as well as other AAA services.

The Honorable Board of Supervisors April 2, 2019 Page 3

FISCAL IMPACT/FINANCING

The activities described in the FY 2019-2020 Area Plan Update are financed by federal OAA, state, and local funds and are included in the Department's FY 2019-2020 Budget. No additional County funds are requested as part of the recommended actions.

FACTS AND PROVISIONS/LEGAL REQUIREMENTS

The FY 2016-2020 Area Plan reflects a comprehensive and coordinated system with specific goals and objectives for providing services to older and functionally-impaired adults with the greatest economic and social need, and to individuals at risk for institutional placement. The FY 2019-2020 Area Plan Update provides a status report on progress made by the Los Angeles County AAA in meeting the specified goals and objectives.

The recommended actions are necessary to allow WDACS to submit the FY 2019-2020 Area Plan Update to CDA for approval. CDA approval of the Area Plan Update is a required condition of the State's agreement with the Los Angeles County AAA PSA 19. County Counsel has reviewed and approved the form of the FY 2019-2020 Area Plan Update.

IMPACT ON CURRENT SERVICES

Approval of the FY 2019-2020 Area Plan Update will enable the AAA to continue to provide its home- and community-based long-term care initiatives and programs. These programs provide opportunities for functionally-impaired adults and older adults to live their lives with maximum independence and dignity in their own homes and communities.

CONCLUSION

Should you have any questions, you may contact me directly, or your staff my contact Mr. Kevin Anderson, Special Assistant, at kanderson@wdacs.lacounty.gov.

Respectfully submitted

Otto Solorzano Acting Director

OS:LCS:aa

Attachment (1)

c: Chief Executive Officer County Counsel

Executive Officer, Board of Supervisors



LOS ANGELES COUNTY PSA 19



Planning for the future...



AREA AGENCY ON AGING 2019-2020 AREA PLAN UPDATE





Los Angeles County Area Agency on Aging Fiscal Year (FY) 2019-2020 Planning and Service Area Plan Update



Executive Summary

The California Department of Aging (CDA) and the statewide network of 33 Area Agencies on Aging (AAAs) share responsibility for planning California's present and future aging and long-term care needs. The Older Americans Act (OAA) of 1965 mandates all AAAs to have an Area Plan that identifies the needs of the community while still providing comprehensive services that are mandated by the CDA. The AAA Area Plans and California State Plan on Aging together establish a framework for how the AAAs and the CDA will deliver services to California's diverse population.

The Los Angeles County (County) AAA is charged with the responsibility to promote the development and implementation of a comprehensive, coordinated system of care that enables older individuals and their caregivers to live in a community-based setting and to advocate for the needs of those 60 years of age and older in the County, providing leadership and promoting citizen involvement in the planning process as well as in the delivery of services. The Area Plan enables communities and the AAA to plan for the future. The annual Area Plan Update process provides an opportunity to reexamine the direction and progress of the AAA in meeting the goals and objectives outlined in the Area Plan.

The planning process for developing the FY 2019-20 Area Plan Update included seven Public Hearings, of which six were conducted in conjunction with the Los Angeles City Department of Aging. The purpose of the Public Hearings was to solicit input from the public and the Los Angeles County Commission for Older Adults. Information from these hearings was very useful in ensuring that the Area Plan continues to best address the needs of older and functionally impaired adults.

Updates in the FY 2019-20 Area Plan Update include:

- Estimated number of low-income and minority older individuals that the County AAA will serve in FY 2019-20:
 - Minority clients 22,340 (59%);
 - Rural clients 1,184 (3%);
 - Low income clients (below poverty level) 13,144 (35%).
- Summary of Public Hearings.
- Projected Service Units for FY 2019-20.
- Governing Board (Board of Supervisors) membership update.
- Advisory Council (Los Angeles County Commission for Older Adults) membership update.

Following approval by the Board of Supervisors, Workforce Development, Aging and Community Services (WDACS) will submit the FY 2019-20 Area Plan Update to CDA in advance of the May 1, 2019 deadline. CDA approval of the Area Plan Update is a required condition of the State's agreement with the County AAA.

TABLE OF CONTENTS

	Page
Area Plan Update Checklist	4
Transmittal Letter	5
Estimated Number of Lower Income Minority Older Individuals	6
Public Hearings	7
Goals and Objectives	10
Service Unit Plan (SUP) Objectives	18
Notice of Intent to Provide Direct Services	41
Request for Approval to Provide Direct Services	43
Governing Board	45
Advisory Council	47
Legal Assistance	51

AREA PLAN UPDATE (APU) CHECKLIST

PSA <u>19</u>

Check one: □ FY 17-18 □ FY 18-19 ⋈ FY 19-20

Use for APUs only

AP Guidance Section	APU Components (To be attached to the APU)	Chec Inclu	
	Update/Submit A) through I) ANNUALLY:		
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)]
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	\boxtimes]
n/a	E) Annual Budget]
9	F) Title IIIB/VIIA Long-Term Care Ombudsman Objectives	\boxtimes]
9	G) Title VIIA Elder Abuse Prevention Objectives	\triangleright]
10	H) Service Unit Plan (SUP) Objectives and LTC Ombudsman Program Outcomes	×	
18	I) Legal Assistance	\boxtimes]
	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 (C or N/0	b
5	Minimum Percentage/Adequate Proportion		\boxtimes
5	Needs Assessment		\boxtimes
9	AP Narrative Objectives:		
9	 System-Building and Administration 		\boxtimes
9	Title IIIB-Funded Programs		\boxtimes
9	Title IIIB-Transportation		\boxtimes
9	Title IIIB-Funded Program Development/Coordination (PD or C)		\boxtimes
9	Title IIIC-1		\boxtimes
9	Title IIIC-2		\boxtimes
9	Title IIID	\boxtimes	
20	Title IIIE-Family Caregiver Support Program	\boxtimes	
9	Title V-SCSEP Program	\boxtimes	
9	HICAP Program		\boxtimes
12	Disaster Preparedness		\boxtimes
14	Notice of Intent-to Provide Direct Services	\boxtimes	
15	Request for Approval to Provide Direct Services	\boxtimes	
16	Governing Board	\boxtimes	
17	Advisory Council	\boxtimes	
21	Organizational Chart(s)	\boxtimes	

TRANSMITTAL LETTER

Area Plan Update

2019-2020

AAA Name: Los Angeles County Area Agency on Aging **PSA Number** 19

This Area Plan Update is hereby submitted to the California Department of Aging for approval. The Governing Board and the Los Angeles County Commission for Older Adults (LACCOA) have each had the opportunity to participate in the planning process and to review and comment on the Area Plan Update. The Governing Board, LACCOA, 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 the 2019-2020 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. Signature:		
3 3 3 3	Janice Hahn Chair of the Board of Supervisors ¹	Date
2. Signature:	Diana Love, President	Date
	Los Angeles County Commission for Older Adults	
3. Signature:		
J	Otto Solórzano, Acting Director Workforce Development, Aging and Community Services Area Agency on Aging	Date

¹ Original signatures or official signature stamps are required.

Estimated Number of Lower Income Minority Older Individuals (Target Population)

The Older Americans Act (OAA) defines a number of "target populations" which Area Agencies on Aging (AAA) should make special efforts to include in the planning and delivery of community-based services. These targeted groups consist of older individuals with any of the following characteristics:

- Native American
- Isolated, Neglected, and/or Exploited
- Frailty
- Reside in Rural Areas
- Have Limited English-Speaking Ability
- Have Alzheimer's Disease and Related Disorders
- Have Disabilities, especially Severe Disabilities
- Unemployed Low-income Seniors
- Caregivers (as defined in Title III-E)
- At risk of institutionalization

In addition, the OAA defines two (2) special categories of targeted individuals. Those with the "greatest economic need" are older adults, particularly minority older adults, with need resulting from an income level at or below the Federal Poverty Level. Second, older adults with the "greatest social need" that have a need caused by non-economic factors that restrict an individual's ability to perform normal daily tasks or that threaten his or her capacity to live independently. These factors include physical or mental disability, language barriers, and cultural or social isolation caused by, among other things, racial and ethnic status, sexual orientation, gender identity, or gender expression.

It is the main focus of the AAA to serve those with the greatest economic and social needs and efforts are made to also help all targeted populations. One of the categories included in this population is frail older adults who are at risk of institutionalization. In addition, it is critical that all AAA-funded providers make this a priority. The protection from abuse, neglect and exploitation is also a critical issue for the County and AAA. Addressing these issues is done primarily through a network of partners, including collaboration with administrators of the Ombudsman program. Elder abuse prevention services are also provided by Workforce Development, Aging and Community Services' Adult Protective Services, who partner with agencies such as the Los Angeles County Sheriff's Department, Consumer and Business Affairs, and others.

The Los Angeles County AAA is estimating to serve the following number of lower income minority older individuals for the FY 2019-20:

- Minority clients 22,340 (59%)
- Rural clients 1,184 (3%)
- Low income clients (below poverty level) 13,144 (35%)

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? ² Yes or No	Was hearing held at a Long-Term Care Facility? ³ Yes or No
2019-20	See Below	See Below	See Below	See Below	See Below
Date	Location		Number of Attendees	Area Plan Presented with Translator	Hearing Held at Long-Term Care Facility
October 22, 2018	St. Barnabas Multipurpose Senior Center 675 South Carondelet Street Los Angeles, CA 90057		43	Yes	No
October 23, 2018	Wilmington Multipurpose Senior Center 1371 Eubank Avenue Wilmington, CA 90744		73	Yes	No
October 25, 2018	Bernardi Multipurpose Senior Center 6514 Sylmar Avenue Van Nuys, CA 91401		26	Yes	No
October 29, 2018	Sunland Senior Center 8640 Fenwick Street Sunland, CA 91040		18	Yes	No
November 1, 2018	Asian Service Center 14112 South Kingsley Drive Gardena, CA 90249		13	Yes	No
November 2, 2018	Antelope Valley Senior Center 777 W Jackman Street Lancaster, CA 93534		64	Yes	No
November 5, 2018	Los Angeles LGBT The Village at Ed G 1125 N. McCadden Los Angeles, CA 9	Gould Plaza Place	37	Yes	No

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

³AAAs are encouraged to include individuals in LTC facilities in the planning process, but hearings are not required to be held in LTC facilities

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.

A notice of the Public Hearings was advertised through the newspaper in the County and City of Los Angeles. Furthermore, flyers were sent to the Board offices, County departments, and cities within the County of Los Angeles, County Commissioners, Senior Centers, WDACS partners, and AAA Service Providers. Individuals who were unable to make it to any of the scheduled Public Hearings were also informed that written statements can be submitted to the AAA.

	W-0-1
2.	Were proposed expenditures for Program Development (PD) and Coordination (C) discussed?
	☐ Not applicable, PD and C funds are not used. Go to question #4
3.	Summarize the comments received concerning proposed expenditures for PD and C.
	There were no comments received concerning proposed expenditures for PD and C.
4.	Attendees were 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.
	□No, Explain:
5.	Summarize the comments received concerning minimum percentages of Title III B funds to meet the adequate proportion funding for priority services.
	There were no comments received pertaining to adequate proportion funding for priority services.
6.	List any other issues discussed or raised at the Public Hearing.
	Housing Homeless services Transportation Senior center/congregate meal site maintenance Group field trips at senior centers LGBT community needs
7.	Note any changes to the Area Plan which were a result of input by attendees.

There were no changes to the Area Plan Update as a result of the issues discussed at the Public Hearings. The issues raised have already been incorporated into the Fiscal Years 2016-2020 Area

Plan.

SECTION 9 GOALS AND OBJECTIVES

GOAL #1

Goal: Promote an environment that is sensitive to the needs of older adults, informal caregivers, and adults with disabilities in order to enhance their quality of life, which will help maintain their independence and improve their overall health and well-being.

Rationale: The need for home and community-based services is substantially increasing as the older adult population continues to exponentially grow. Improved and expanded services on health related issues, nutrition, exercise, outreach, senior-friendly transportation options, and employment training is necessary to help older adults and adults with disabilities maintain their independence, remain active, and strive toward a healthier lifestyle. The Area Agency on Aging and its partners strive toward providing proven ways to promote health and prevent disease among older adults.

[Refer to CCR Article 3, Section 7300 (c)] 1.1 Disease Prevention and Health Promotion	Projected Start and End Dates	Title III B Funded PD or C ⁴
 a) Provide the following evidence-based Disease Prevention and Health Promotion (DPHP) Programs in order to assist older adults in the prevention of illness, the management of chronic physical conditions, the support of healthy lifestyles, and the promotion of healthy behaviors: Chronic Disease Self-Management Program and/or Tomando Control de Su Salud Chronic Pain Self-Management Program Diabetes Self-Management Program and/or Programa de Manejo de la Diabetes Program Service Arthritis Foundation Exercise Program Arthritis Foundation Walk with Ease Program A Matter of Balance 	7/01/2016 to 6/30/2020	

b) Ensure DPHP	Programs meet the following
criteria:	

- Demonstrated through evaluation to be effective for improving the health and wellbeing or reducing disease, disability and/or injury among older adults;
- Proven effective with the older adult population, using experimental or quasiexperimental design;
- Research results published in a peerreviewed journal;
- Have been implemented previously at the community level (with fidelity to the published research) and shown to be effective outside a research setting; and
- Includes developed dissemination products (program manuals, guides, and/or handouts) that are available to the public; or
- Considered evidence-based by any operating division of the U.S. Department of Health and Human Services (HHS).

Accountable Party/Lead: Anna Avdalyan, Program Manager (PM)

- 1.2 Transportation and Mobility Management
- a) Implement the Taxicab Voucher Program, the Volunteer Driver Mileage Reimbursement Program, and the Door Assistance Escort Transportation Program in order to enhance quality of life, maintain independence, and improve the overall health and well-being of vulnerable populations.
- b) Collaborate with partner agencies and Los Angeles County Metropolitan Transportation Authority (LACMTA) to seek funding for enhancements or expansions of successful pilot programs.

7/01/2016 to 6/30/2020

7/01/2016 to 6/30/2020

7/01/2016 to 6/30/2020

c) Develop and provide mobility management services, which will include travel training and travel options counseling, for older adults throughout Los Angeles County.	7/01/2016 to 6/30/2020	
Accountable Party/Lead: Veronica Sigala, PM		

GOAL #2

Continue to coordinate and expand on the development of an integrated multi-disciplinary network of investigative/protective services for vulnerable older adults and adults with disabilities to prevent all forms of abuse and fraud.

Rationale: Elder and financial abuse, including fraud and scams, are on the rise in Los Angeles. These crimes are often not reported because the older adult and adults with disability populations are afraid or embarrassed, especially since these crimes are often committed by family members. This vulnerable population believes that if they report the incident, they will lose their independence by being placed in an institution. The need for improved and expanded education, outreach, and support is imperative for this particular population and the victims of any fraud, scams, and abuse.

[Refer to CCR Article 3, Section 7300 (c)]	Projected Start and	Title III B Funded
2.1 Elder Abuse Prevention	End Dates	PD or C
a) Collaborate with statewide and Long Term Care (LTC) Ombudsman Offices to create and foster enhanced communication and collaborative services, while fulfilling the roles and responsibilities defined in the Memorandum of Understanding between Los Angeles County Adult Protective Services (APS) and LTC Ombudsman.	7/01/2016 to 6/30/2020	
b) Improve and coordinate elder abuse prevention efforts with other County departments and community-based organizations.	7/01/2016 to 6/30/2020 7/01/2016 to	
c) Strengthen and carry out education sessions and outreach for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.	6/30/2020	
Accountable Party/Lead: Anna Avdalyan, PM		
2.2 Ombudsman		
a) Improve collaborative efforts with the AAA Ombudsman service provider to ensure comprehensive and coordinated service	7/01/2016 to 6/30/2020	

delivery for older individuals who reside in LTC Facilities.		
b) Publicize the mission of the LTC Ombudsman Program and the role of ombudsman representatives by conducting targeted community outreach.	7/01/2016 to 6/30/2020	
Accountable Party/Lead: Anna Avdalyan, PM		

GOAL #3

Goal: Collaborate with the City of Los Angeles Department of Aging, other County departments, and community-based organizations to increase service awareness and provide a seamless and coordinated approach to service delivery for older adults, adults with disabilities, and informal caregivers.

Rationale: Consensus has emerged among government and community leaders that making substantial improvements in integrating the County's health and human services system is necessary to significantly move toward progress in an environment with static or decreasing revenue streams. Collaboration with other public entities will increase awareness of resources available to improve the quality of life for older adults and adults with disabilities.

[Refer to CCR Article 3, Section 7300 (c)]	Projected Start and End Dates	Title III B Funded PD or C
3.1 Inclusive Stakeholder Engagement and Collaboration		
a) Increase awareness of AAA programs and services to older adults, adults with disabilities, and caregivers throughout Los Angeles County in collaboration with the Los	7/01/2016 to 6/30/2020	
Angeles County Commission on Older Adults.	7/01/2016 to	
b) Collaborate with the Los Angeles City Department of Aging, the Department of Public Social Services' In-Home Supportive Services and Medi-Cal Program Sections, the Department of Public Health, and other County departments who have a stake in protecting the quality of life for older adults, their caregivers, and adults with disabilities in order to maximize resources and offer comprehensive supportive services.	6/30/2020	
Accountable Party/Lead: Anna Avdalyan, PM	7/01/2016 to	
3.2 Information and Referral	6/30/2020	
a) Provide outreach to targeted populations, which includes the Lesbian, Gay, Bisexual, and Transgender (LGBT) community.	7/01/2016 to 6/30/2020	

 Strengthen the awareness of AAA programs and services by distributing comprehensive outreach materials at senior centers, health fairs, and various community events. 	
Accountable Party/Lead: Veronica Sigala, PM/Anna Avdalyan, PM	

Attachment I

SECTION 10 SERVICE UNIT PLAN (SUP) OBJECTIVES

TITLE III/VII 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.

For services not defined in NAPIS, refer to the Service Categories and Data Dictionary.

Report the units of service to be provided with <u>ALL funding sources</u>. 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).

1. Personal Care (In-Home)

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	9,500	3	3.1, 3.2
2017-2018	9,500	3	3.1, 3.2
2018-2019	9,500	3	3.1, 3.2
2019-2020	9,500	3	3.1, 3.2

2. Homemaker

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2016-2017	24,500	3	3.1, 3.2
2017-2018	24,500	3	3.1, 3.2
2018-2019	24,500	3	3.1, 3.2
2019-2020	23,000	3	3.1, 3.2

3. Chore

Unit of Service = 1 hour

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

4. Home-Delivered Meals

Unit of Service = 1 meal

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	810,000	3	3.1, 3.2
2017-2018	810,000	3	3.1, 3.2
2018-2019	810,000	3	3.1, 3.2
2019-2020	950,000	3	3.1, 3.2

5. Adult Day Care/Adult Day Health

Unit of Service = 1 hour

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

6. Case Management

Unit of Service = 1 hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	35,000	3	3.1, 3.2
2017-2018	35,000	3	3.1, 3.2
2018-2019	35,000	3	3.1, 3.2
2019-2020	36,500	3	3.1, 3.2

7. Assisted Transportation

Unit of Service = 1 one-way trip

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

8. Congregate Meals

Unit of Service = 1 meal

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	1,170,000	3	3.1, 3.2
2017-2018	1,170,000	3	3.1, 3.2
2018-2019	1,170,000	3	3.1, 3.2
2019-2020	1,200,000	3	3.1, 3.2

9. Nutrition Counseling

Unit of Service = 1 session per participant

	- 	• • • • • • • • • • • • • • • • • • • •	tor correct i coccion per participant
Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	2,000	3	3.1, 3.2
2017-2018	2,000	3	3.1, 3.2
2018-2019	2,000	3	3.1, 3.2
2019-2020	2,000	3	3.1, 3.2

10. Transportation

Unit of Service = 1 one-way trip

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017			
2017-2018			
2018-2019			
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	3	3.1, 3.2
2017-2018	6,500	3	3.1, 3.2
2018-2019	6,000	3	3.1, 3.2
2019-2020	6,000	3	3.1, 3.2

12. Nutrition Education

Unit of Service = 1 session per participant

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	27,000	3	3.1, 3.2
2017-2018	27,000	3	3.1, 3.2
2018-2019	30,000	3	3.1, 3.2
2019-2020	55,000	3	3.1, 3.2

13. Information and Assistance

Unit of Service = 1 contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2016-2017	7,000	3	3.1, 3.2
2017-2018	7,000	3	3.1, 3.2
2018-2019	7,000	3	3.1, 3.2
2019-2020	6,700	3	3.1, 3.2

14. Outreach

Unit of Service = 1 contact

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2016-2017	10,000	3	3.1, 3.2
2017-2018	10,500	3	3.1, 3.2
2018-2019	11,000	3	3.1, 3.2
2019-2020	11,000	3	3.1, 3.2

15. NAPIS Service Category - "Other" Title III Services

- Each <u>Title III B</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 III D</u>/Medication Management services (required) and all <u>Title III B</u> services to be funded that were <u>not</u> reported in NAPIS categories 1–14 and 16. (Identify the specific activity under the Service Category on the "Units of Service" line when applicable.)
- Title III D/Health Promotion and Medication Management requires a narrative goal and objective. The objective should clearly explain the service activity being provided to fulfill the service unit requirement.

Title III B, Other Supportive Services 6

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

Alzheimer's Day Care

Unit of Service = 1 Day of Attendance

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	6,000	3	3.1, 3.2
2017-2018	6,500	3	3.1, 3.2
2018-2019	6,500	3	3.1, 3.2
2019-2020	7,000	3	3.1, 3.2

In-Home Respite

Unit of Service = 1 Hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	1,900	3	3.1, 3.2
2017-2018	2,000	3	3.1, 3.2
2018-2019	2,100	3	3.1, 3.2
2019-2020	2,100	3	3.1, 3.2

Registry

Unit of Service = 1 Hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	11,000	3	3.1, 3.2
2017-2018	11,000	3	3.1, 3.2
2018-2019	10,500	3	3.1, 3.2

⁶ Other Supportive Services: Visiting (In-Home) now includes telephoning (See Area Plan budget).

2019-2020	9,500	3	3.1, 3.2
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Telephone Reassurance

Unit of Service 1 Contact

	70 0 100		
Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	63,000	3	3.1, 3.2
2017-2018	63,000	3	3.1, 3.2
2018-2019	63,000	3	3.1, 3.2
2019-2020	63,000	3	3.1, 3.2

Senior Center Activities

Unit of Service = 1 Hour

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers (if applicable)
2016-2017	110,000	3	3.1, 3.2
2017-2018	100,000	3	3.1, 3.2
2018-2019	95,000	3	3.1, 3.2
2019-2020	85,500	3	3.1, 3.2

Instructions for Title III D /Health Promotion and Medication Management: List number of contacts for unit of service being performed to fulfill the service unit requirement. If Title III D Health Promotion funds are designated to support Title III C Nutrition Education and/or Nutrition Counseling services, report the service units under Title III C NAPIS 9. Nutrition Counseling and/or NAPIS 12. Nutrition Education. Add an objective under Title III D Nutrition Education to identify if Title III D funds are used to pay for Title III C Nutrition Education service units.

• Service Activity: List all the specific allowable service activities provided in the definition of Title III D/Health Promotion in the CDA Service Categories and Data Dictionary, i.e., health risk assessments; routine health screening; nutrition counseling/education services; evidence-based health promotion; physical fitness, group exercise, music, art therapy, dance movement and programs for multigenerational participation; home injury control services; screening for the prevention of depression and coordination of other mental health services; gerontological and social service counseling; and education on preventive health services. Primary activities are normally on a one-to-one basis; if done as a group activity, each participant shall be counted as one contact unit.

16. Title III D Health Promotion

Unit of Service = 1 contact

Service Activities: Physical Fitness/Nutrition Education/Medication Management

• Title III D/Health Promotion: Enter program goal and objective numbers in the Title III D Service Plan Objective Table below.

Fiscal Year	Proposed Units of Service	Goal Numbers	Objective Numbers(if applicable)
2016-2017	4,100	1	1.1
2017-2018	5,466	1	1.1
2018-2019	5,466	1	1.1
2019-2020	9,000	1	1.1

TITLE III B and Title VII A:

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 State-wide 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: 67%

Number of complaints resolved <u>4,305</u> + Number of partially resolved complaints <u>658</u> divided by the Total Number of Complaints Received <u>7,463</u> = Baseline Resolution Rate <u>67</u>%

FY 2016-17 Target Resolution Rate 65%

2. FY 2015-2016 Baseline Resolution Rate: $\underline{57\%}$ Number of complaints resolved $\underline{3,955}$ + Number of partially resolved complaints $\underline{679}$ divided by the Total Number of Complaints Received $\underline{8,202}$ = Baseline Resolution Rate $\underline{57}\%$

FY 2017-18 Target Resolution Rate 57%

3. FY 2016-2017 Baseline Resolution Rate: 52

Number of complaints resolved <u>3957</u> + Number of partially resolved complaints <u>884</u> divided by the Total Number of Complaints Received <u>9376</u> = Baseline Resolution Rate <u>52</u>%

FY 2018-19 Target Resolution Rate 52%%

4. FY 2017-2018 Baseline Resolution Rate: 46%

Number of complaints resolved <u>3120</u> + Number of partially resolved complaints <u>816</u> divided by the Total Number of Complaints Received <u>8564</u> = Baseline Resolution Rate <u>46</u>%

FY 2019-20 Target Resolution Rate 46%

Program Goals and Objective Numbers: Goal 2. Objective 2.2

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

1. FY 2014-2015 Baseline: number of Resident Council meetings attended 143 FY 2016-2017

Target: <u>150</u>

2. FY 2015-2016 Baseline: number of Resident Council meetings attended **143** FY 2017-2018 Target: **143**

3. FY 2016-2017 Baseline: number of Resident Council meetings attended <u>172</u> FY 2018-2019 Target: **120**

4. FY 2017-2018 Baseline: number of Resident Council meetings attended **86** FY 2019-2020 Target: **80**

Program Goals and Objective Numbers: Goal 2. Objective 2.2

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

- 1. FY 2014-2015 Baseline number of Family Council meetings attended 5 FY 2016-2017 Target: 5
- 2. FY 2015-2016 Baseline number of Family Council meetings attended 3 FY 2017-2018 Target: 3
- 3. FY 2016-2017 Baseline number of Family Council meetings attended 6 FY 2018-2019 Target: 4
- 4. FY 2017-2018 Baseline number of Family Council meetings attended 4 FY 2019-2020 Target: 4

Program Goals and Objective Numbers: Goal 2. Objective 2.2

- **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 358 FY 2016-2017 Target: 350
 - 2. FY 2015-2016 Baseline: number of consultations 422 FY 2017-2018 Target: 358
 - 3. FY 2016-2017 Baseline: number of consultations 524 FY 2018-2019 Target: 400
 - 4. FY 2017-2018 Baseline: number of consultations 483 FY 2019-2020 Target: 400

Program Goals and Objective Numbers: Goal 2. Objective 2.2

- **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 1,599 FY 2016-2017 Target: 1,500
 - 2. FY 2015-2016 Baseline: number of consultations 1,739 FY 2017-2018 Target: 1,599

- 3. FY 2016-2017 Baseline: number of consultations **2,179** FY 2018-2019 Target: **1,800**
- 4. FY 2017-2018 Baseline: number of consultations **2,535** FY 2019-2020 Target: **2,000**

Program Goals and Objective Numbers: Goal 2. Objective 2.2

- **F. Community Education** (AoA Report, Part III.D.10) LTC Ombudsman Program participation in **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 16 FY 2016-2017 Target: 7
 - 2. FY 2015-2016 Baseline: number of sessions 4 FY 2017-2018 Target: 5
 - 3. FY 2016-2017 Baseline: number of sessions **23** FY 2018-2019 Target: **5**
 - 1. FY 2017-2018 Baseline: number of sessions 4 FY 2019-2020 Target: 4

Program Goals and Objective Numbers: Goal 2. Objective 2.2

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 improve pain relief or increase access to oral health care, 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): Provide consultation, training, and or resource materials to hospital discharge planners and social workers on a resident's rights to return to the nursing home or assisted living after acute hospitalization. To combat illegal eviction via patient/resident dumping at the acute hospitals and reduce transfer trauma.

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 $\underline{124}$ divided by the total number of Nursing Facilities $\underline{254}$ = Baseline $\underline{49}\%$ FY 2016-2017 Target: $\underline{49}\%$
- 2. FY 2015-2016 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint <u>174</u> divided by the total number of Nursing Facilities <u>251</u> = Baseline <u>69</u>% FY 2017-2018 Target: <u>59</u>%
- 3. FY 2016-2017 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint $\underline{184}$ divided by the total number of Nursing Facilities $\underline{250}$ = Baseline $\underline{74}$ % FY 2018-2019 Target: $\underline{60}$ %
- 4. FY 2017-2018 Baseline: Number of Nursing Facilities visited at least once a quarter not in response to a complaint $\underline{134}$ divided by the total number of Nursing Facilities $\underline{250}$ = Baseline $\underline{54}$ % FY 2019-2020 Target: $\underline{50}$ %

Program Goals and Objective Numbers: Goal 2. Objective 2.2

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

- FY 2014-2015 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>48</u> divided by the total number of RCFEs <u>814</u> = Baseline <u>6</u>% FY 2016-2017 Target: <u>6</u>%
- 2. FY 2015-2016 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>75</u> divided by the total number of RCFEs <u>782</u> = Baseline <u>9.6</u>% FY 2017-2018 Target: <u>7</u>%
- FY 2016-2017 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>74</u> divided by the total number of RCFEs <u>795</u> = Baseline <u>9.3</u>% FY 2018-2019 Target: <u>7</u>%

4. FY 2017-2018 Baseline: Number of RCFEs visited at least once a quarter not in response to a complaint <u>53</u> divided by the total number of RCFEs <u>780</u> = Baseline <u>7</u>% FY 2019-2020 Target: <u>5</u> %

Program Goals and Objective Numbers: Goal 2. Objective 2.2

C. Number of Full-Time Equivalent (FTE) Staff (AoA Report Part III. B.2. - Staff and Volunteers) This number may only include staff time legitimately charged to the LTC Ombudsman Program. Time spent working for or in other programs may not be included in this number. For example, in a local LTC Ombudsman Program that considers full-time employment to be 40 hour per week, the FTE for a staff member who works in the Ombudsman Program 20 hours a week should be 0.5, even if the staff member works an additional 20 hours in another program.

- 1. FY 2014-2015 Baseline: 11.42 FTEs FY 2016-2017 Target: 16 FTEs
- 2. FY 2015-2016 Baseline: <u>13.5</u> FTEs FY 2017-2018 Target: <u>11</u> FTEs
- 3. FY 2016-2017 Baseline: <u>11.19</u> FTEs FY 2017-2018 Target: <u>11</u> FTEs
- 4. FY 2017-2018 Baseline: 11.42 FTEs FY 2019-2020 Target: 9.5 FTEs

Program Goals and Objective Numbers: Goal 2. Objective 2.2

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

1. FY 2014-2015 Baseline: Number of certified LTC Ombudsman volunteers 58

FY 2016-2017 Projected Number of certified LTC Ombudsman volunteers 60

2. 2015-2016 Baseline: Number of certified LTC Ombudsman volunteers 59

FY 2017-2018 Projected Number of certified LTC Ombudsman volunteers 60

- 3. 2016-2017 Baseline: Number of certified LTC Ombudsman volunteers <u>56</u> FY 2018-2019 Projected Number of certified LTC Ombudsman volunteers <u>55</u>
- 2017-2018 Baseline: Number of certified LTC Ombudsman volunteers <u>52</u>

FY 2019-2020 Projected Number of certified LTC Ombudsman volunteers 52

Program Goals and Objective Numbers: Goal 2. Objective 2.2

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;
 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 program will incorporate NORS consistency trainings in the certification training.

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.

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

- **Public Education Sessions** –Indicate the total number of projected education sessions for the general public on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- Training Sessions for Professionals –Indicate the total number of projected training sessions for professionals (service providers, nurses, social workers) on the identification, prevention, and treatment of elder abuse, neglect, and exploitation.
- Training Sessions for Caregivers Served by Title 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: WISE & Healthy Aging

Fiscal Year	Total # of Public Education Sessions
2016-2017	25
2017-2018	25
2018-2019	15
2019-2020	15

Fiscal Year	Total # of Training Sessions for Professionals
2016-2017	10
2017-2018	10
2018-2019	20
2019-2020	20

Fiscal Year	Total # of Training Sessions for Caregivers served by Title IIIE
2016-2017	0
2017-2018	0
2018-2019	0
2019-2020	0

Fiscal Year	Total # of Hours Spent Developing a Coordinated System	
2016-2017	500	
2017-2018	500	
2018-2019	500	
2019-2020	500	

Fiscal Year	Total # of Copies of Educational Materials to be Distributed	Description of Educational Materials
2016-2017	2,000	
2017-2018	2,000	
2018-2019	2,000	
		Eldon Instina Daggurga Cuidas Mandatam, Dagguring
2019-2020	2,000	Elder Justice Resource Guides, Mandatory Reporting Flow Charts

Fiscal Year	Total Number of Individuals Served
2016-2017	2,000
2017-2018	2,000
2018-2019	2,000
2019-2020	2,000

TITLE III E SERVICE UNIT PLAN OBJECTIVES CCR Article 3, Section 7300(d)

2012–2016 Four-Year Planning Period

This Service Unit Plan (SUP) utilizes the five broad federally-mandated service categories defined in PM 11-11. Refer to the CDA Service Categories and Data Dictionary Revisions Effective July I, 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 III E Services

CATEGORIES	1	2	3
Family Caregiver Services Caring for Elderly	Proposed Units of Service	Required Goal #(s)	Optional Objective #(s)
Information Services	# of activities and Total est. audience for above		
2016-2017	# of activities: 1,400 Total est. audience for above: 100,000	3	3.1, 3.2
2017-2018	# of activities: 1,400 Total est. audience for above: 100,000	3	3.1, 3.2
2018-2019	# of activities: 2,000 Total est. audience for above: 100,000	3	3.1, 3.2
2019-2020	# of activities: 4500 Total est. audience for above: 100,000	3	3.1, 3.2
Access Assistance	Total contacts		
2016-2017	9,420	3	3.1, 3.2
2017-2018	9,500	3	3.1, 3.2
2018-2019	10,000	3	3.1, 3.2
2019-2020	18,000	3	3.1, 3.2
Support Services	Total hours		
2016-2017	18,000	3	3.1, 3.2
2017-2018	18,500	3	3.1, 3.2
2018-2019	19,000	3	3.1, 3.2

[Type here]	[Type here]		[Type here]
2019-2020	19,000	3	3.1, 3.2
Respite Care	Total hours		
2016-2017	26,500	3	3.1,3.2
2017-2018	27,000	3	3.1,3.2
2018-2019	27,500	3	3.1,3.2
2019-2020	25,000	3	3.1,3.2
Supplemental Services	Total occurrences		
2016-2017	1,500	3	3.1,3.2
2017-2018	1,350	3	3.1,3.2
2018-2019	1,350	3	3.1,3.2
2019-2020	1,200	3	3.1,3.2

Grandparent Services Caring for Children	Proposed Units of Service	Required Goal #(s)	Optional Objective #(s)
Information Services	# of activities and Total est. audience for above		
2016-2017	# of activities: 50 Total est. audience for above: 500	3	3.1, 3.2
2017-2018	# of activities: 50 Total est. audience for above: 500	3	3.1, 3.2
2018-2019	# of activities: 60 Total est. audience for above: 500	3	3.1, 3.2
2019-2020	# of activities: 60 Total est. audience for above: 500	3	3.1, 3.2
Access Assistance	Total contacts		
2016-2017	1,000	3	3.1,3.2
2017-2018	1,000	3	3.1,3.2
2018-2019	1,100	3	3.1,3.2
2019-2020	2,700	3	3.1,3.2
Support Services	Total hours		
2016-2017	5,000	3	3.1,3.2
2017-2018	5,000	3	3.1,3.2
2018-2019	5,200	3	3.1,3.2
2019-2020	5,200	3	3.1,3.2
Respite Care	Total hours		
2016-2017	400	3	3.1,3.2
2017-2018	500	3	3.1,3.2
2018-2019	500	3	3.1,3.2
2019-2020	400	3	3.1,3.2
Supplemental Services	Total occurrences		
2016-2017	20	3	3.1,3.2
2017-2018	18	3	3.1,3.2
2018-2019	10	3	3.1,3.2
2019-2020	15	3	3.1,3.2

SENIOR COMMUNITY SERVICE EMPLOYMENT PROGRAM (SCSEP) 6

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 #1

Enrollment Location/Name (AAA office, One Stop, Agency, etc.):

Antelope Valley America's Job Center of California

Street Address: 1420 West Avenue I, Lancaster, CA 93534

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

staff names): Paid Staff

Mayra Martinez, Case Manager

Greg Kendrick, Payroll

Number of paid staff: 2 Number of participant staff: 0

How many participants are served at this site? 25

Enrollment Location #2

Enrollment Location/Name (AAA office, One Stop, Agency, etc.):

Pomona Valley America's Job Center of California

Street Address: 264 East Monterey Avenue, Pomona, CA 91767

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

Paid Staff

Kimberly Escoto, Case Manager

Martha Amador, Payroll

Number of paid staff: 2 Number of participant staff: 0

How many participants are served at this site? 26

Enrollment Location #3

Enrollment Location/Name (AAA office, One Stop, Agency, etc.):

Southeast LA AJCC

Street Address: 2677 Zoe Avenue, 2nd Floor, Huntington Park, CA 90255

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

Paid Staff

Carmen Arce, Case Manager

Adrian Lucatero, Payroll

Number of paid staff: 2 Number of participant staff: 0

How many participants are served at this site? 32

⁶ If not providing Title V, enter PSA number followed by "Not providing"

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 goaloriented targets for each AAA's Planning and Service Area (PSA). One change to all PMs is the shift to county-level data. In general, the State and Federal Performance Measures include the following:

- PM 1.1 Clients Counseled ~ Number of finalized Intakes for clients/ beneficiaries that received HICAP services
- PM 1.2 Public and Media Events (PAM) ~ Number of completed PAM forms categorized as "interactive" events
- > PM 2.1 Client Contacts ~ Percentage of one-on-one interactions with any Medicare beneficiaries
- PM 2.2 PAM Outreach Contacts ~ Percentage of persons reached through events categorized as "interactive"
- ➤ PM 2.3 Medicare Beneficiaries Under 65 ~ Percentage of one-on-one interactions with Medicare beneficiaries under the age of 65
- PM 2.4 Hard-to-Reach Contacts ~ Percentage of one-on-one interactions with "hard-to-reach" Medicare beneficiaries designated as:
 - o PM 2.4a Low-income (LIS)
 - o PM 2.4b Rural
 - PM 2.4c English Second Language (ESL)
- PM 2.5 Enrollment Contacts ~ Percentage of contacts with one or more qualifying enrollment topics discussed

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).

HICAP Legal Services Units of Service (if applicable)⁷

Fiscal Year (FY)	3.1 Estimated Number of Clients Represented Per FY (Unit of Service)	Goal Numbers
2016-2017	300	3
2017-2018	300	3
2018-2019	300	3
2019-2020	300	3

Fiscal Year (FY)	3.2 Estimated Number of Legal Representation Hours Per FY (Unit of Service)	Goal Numbers
2016-2017	350	3
2017-2018	350	3
2018-2019	300	3
2019-2020	300	3

Fiscal Year (FY)	3.3 Estimated Number of Program Consultation Hours Per FY (Unit of Service)	Goal Numbers
2016-2017	200	3
2017-2018	200	3
2018-2019	150	3
2019-2020	150	3

 7^2

⁷ Requires a contract for using HICAP funds to pay for HICAP Legal Services.

SECTION 14 NOTICE OF INTENT TO PROVIDE DIRECT SERVICES

SECTION 14 - NOTICE OF INTENT TO PROVIDE DIRECT SERVICES

PSA 19

CCR Article 3, Section 7320 (a)(b) and 42 USC Section 3027(a)(8)(C)

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If an AAA plans to directly provide any of the following services, it is required to provide a description of the methods that will be used to assure that target populations throughout the PSA will be served.				
☐ Check if not providing any of the below I	isted direc	t services.		
Check applicable direct services	Check applicable direct services Check each applicable Fiscal Year			
Title III B ☑ Information and Assistance	16-17 ⊠	17-18 ⊠	18-19 ⊠	19-20 ⊠
Case Management				
Outreach Outreach	\boxtimes	\boxtimes	\boxtimes	
☐ Program Development				
☐ Coordination				
☐ Long-Term Care Ombudsman				
Title III D ☐ Disease Prevention and Health Promo.	16-17	17-18	18-19	19-20
Title III E¹⁰ ☑ Information Services ☑ Access Assistance ☑ Support Services	16-17 ⊠ ⊠ □	17-18 ⊠ ⊠ □	18-19 ⊠ ⊠	19-20 ⊠ ⊠ ⊠
Title VII A ☐ Long-Term Care Ombudsman	16-17	17-18	18-19	19-20
Title VII ☐ Prevention of Elder Abuse, Neglect and Exploitation	16-17	17-18	18-19	19-20
Describe mesther de to be consulte announce tour		بسمم مطالكين مميمك		4h - DCA

Describe methods to be used to ensure target populations will be served throughout the PSA.

The Los Angeles (LA) County AAA conducts ongoing outreach activities in communities throughout the County to ensure that under-served, low-income, Limited English Proficient, and minority populations are aware of the services available to them. The LA County InfoVans and the Information and Referral Specialists play an integral part in our continuous efforts to inform the public about our services. Staff attends cultural celebrations, health fairs, community forums as well as other activities to reach targeted populations and distribute information on available services.

In addition, as part of the LA Found Initiative, staff will be issuing, consulting and educating caregivers on the tracking bracelets to assist caregivers with locating their loved ones if they go missing. It will help caregivers reduce the daily ongoing stress and burnout that occurs when taking care of an individual with a cognitive impairment who wanders.

Also, continued collaboration with the LA City Department of Aging and other county departments play a role in outreaching to the population we serve and helping them to have access to quality care.

10 Refer to PM 11-11 for definitions of Title III E categories.

SECTION 15 - REQUEST FOR APPROVAL TO PROVIDE DIRECT SERVICE

PSA 19

Older Americans Act, Section 307(a)(8) CCR Article 3, Section 7320(c), W&I Code Section 9533(f)
Complete and submit for CDA approval a separate Section 15 for each direct service not specified in Section 14. The request for approval may include multiple funding sources for a specific service.
☐ Check box if not requesting approval to provide any direct services.
Identify Service Category: Family Caregiver Support Program (FCSP) – Supplemental Services
Check applicable funding source: ¹¹
□ III B
□ III C-1
☐ III C-2
☐ Nutrition Education
⊠ III E
□ VII A
HICAP
Request for Approval Justification:
☐ Necessary to Assure an Adequate Supply of Service <u>OR</u>
Check all fiscal year(s) the AAA intends to provide service during this Area Plan cycle.
☐ 2016-17 ☐ 2017-18 ☐ 2018-19 ☐ 2019-20
Justification: Provide a cost-benefit analysis below that substantiates this request for direct delivery of the above stated service ¹² .

On September 5, 2018, Los Angeles County Supervisor Hahn, in collaboration with WDACS, Los Angeles County Sherriff's Department and the Department of Mental Health and other county departments, launched the newly rebranded *LA Found Initiative* and the Project Lifesaver Pilot. The pilot provides a tracking bracelet to 130 low income individuals and equipment for the Los Angeles Sherriff's Department Mental Evaluation Team (MET) to track individuals and quickly locate individuals when they become lost. The Project Lifesaver Pilot provides caregivers and families some peace of mind by providing an additional method of safely locating their loved one

Issuance of additional tracking bracelets for older adults as part of FCSP supplemental services allows AAA the opportunity to provide a service to caregivers that currently is not provided countywide by any other agency. It will help caregivers reduce the daily ongoing stress and burnout that occurs when taking care of an individual with a cognitive impairment who wanders. Individuals wearing a device have a higher likelihood of being found quicker, therefore, reducing the potential for injury or death for the older adult and reducing costs in healthcare for the recipient and caregiver undergoing that situation.

if they go missing.

¹¹ Section 15 does not apply to Title V (SCSEP).

¹² For a HICAP direct services waiver, the managing AAA of HICAP services must document that all affected AAAs are in agreement.

SECTION 16 GOVERNING BOARD

SECTION 16 - GOVERNING BOARD

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

CCR Article 3, Section 7302(a)(1	1)
Total Number of Board Members: 5	
Name and Title of Officers:	Office Term Expires:
Janice Hahn – Chair of the Board of Supervisors	December 2020
Names and Titles of All Members:	Board Term Expires:
Hilda L. Solis - 1st District Supervisor	December 2022
Mark Ridley-Thomas - 2nd District Supervisor	December 2020
Sheila Kuehl - 3rd District Supervisor	December 2022
Janice Hahn - 4th District Supervisor	December 2020
Kathryn Barger - 5th District Supervisor	December 2020

SECTION 17 ADVISORY COUNCIL

ADVISORY COUNCIL MEMBERSHIP 2016-2020 Four-Year Planning Cycle Updated June 28, 2018

45 CFR, Section 1321.57 CCR Article 3, Section 7302(a)(12)

Total Council Membership (include vacancies) 50

Number of Council Members over age 60 32

% of PSA's

		% on
	60+Population	Advisory Council
Race/Ethnic Composition		<u> </u>
White	<u>59.3%</u>	<u>40.0%</u>
Hispanic (of any race)	29.9%	17.5%
Black	9.2%	30.0%
Asian/Pacific Islander	<u>18.4%</u>	10.0%
Native American/Alaskan Native	.5%	2.5%
Other/Two or more races	12.5%	0.0%

Name and Title of Officers: Office Term Expires:

Diana Love, President	06.30.19
Helen Romero Shaw, 1st Vice President	06.30.19
Paul Jhin, 2 nd Vice President	06.30.19
Tanya Witt, Secretary	06.30.19
Arlene Okamoto, Fiscal Officer	06.30.19

Name and Title of other members: Office Term Expires:

Estelle Beaver-Thomas	06.30.19
Margaret Belton	06.30.19
Robert Boller	06.30.21
Kim M Bowman	06.30.20
Marva Cooper Bell	06.30.21
Alice Craft	06.30.21
Gene Dorio	06.30.21
Jerry Gaines	06.30.21

[Type here]	[Type here]	[Type here	
Ruth Gonzales		06.30.21	
Yolanda J. Gorman		06.30.21	
Raymond Hall		06.30.19	
Oleeta Igar		06.30.21	
Paul Kyo Jhin		06.30.20	
Diana Love		06.30.21	
Cathy McClure		06.30.19	
Gayle McKinney		06.30.21	
Barbara Meltzer		06.30.20	
Irene Mendoza		06.30.19	
Peter Mezza		06.30.21	
Sheila Moore		06.30.19	
Michael Neely		06.30.19	
Arlene Okamoto		06.30.21	
Elizabeth Payne		06.30.21	
Kiera Pollock		06.30.21	
Carmen Reyes		06.30.19	
Mary Alice Sedillo		06.30.19	
Helen Romero Shaw		06.30.21	
Joshua Sneed		06.30.21	
Arvis Spriggs		06.30.21	
Patricia Stanyo		06.30.21	
Dancingwater Taylor		06.30.21	
Lavada Theus		06.30.19	
Elvia Torres		06.30.20	
Charles Treviño		06.30.20	
Sandra Tung		06.30.20	
Maria Wiest		06.30.20	
Tanya Witt		06.30.21	
Richard Wolfe		06.30.20	

[Type here]	[Type here]	[Type here]
Candace Yee		06.30.21
Sylvia Youngblood		06.30.19

Yes

No

Indicate which member(s) represent each of the "Other Representation" categories listed below.

Low Income Representative	\boxtimes	
Disabled Representative	\boxtimes	
Supportive Services Provider Representative	\boxtimes	
Health Care Provider Representative	\boxtimes	
Family Caregiver Representative	\boxtimes	
Local Elected Officials	\boxtimes	
Individuals with Leadership Experience in		
Private and Voluntary Sectors	\boxtimes	

Explain any "No" answer(s):

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

25 Commissioners are appointed by the Board of Supervisors and 25 Commissioners are elected by the Advisory Council at large.

SECTION 18 LEGAL ASSISTANCE

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.¹³

1. Specific to Legal Services, what is your AAA's Mission Statement or Purpose Statement? Statement must include Title III B requirements:

Our purpose is to provide support services that will enable our older adults, informal caregivers, and adults with disabilities to maintain their independence, improve their quality of life, and prevent abuse and neglect through collaborative intervention, which includes contracted legal services. Our purpose is also to improve and protect the lives of Los Angeles County's diverse older adults, informal caregivers, and adults with disabilities through advocacy, coordination, and education.

- 2. Based on your local needs assessment, what percentage of Title III B funding is allocated to Legal Services? 5%
- 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).

The local level of need for legal services has grown in the past four years as appointment schedules for legal services at senior centers are frequently booked weeks in advance. Our legal services provider, Bet Tzedek, has reported receiving more cases involving elder abuse, including financial elder abuse and real estate title fraud through forgery, undue influence, and diminished capacity experienced by older adults.

The foreclosure crisis has significantly abated since its peak in 2010-2012, but the devastating effects are still being experienced by a number of communities throughout the County of Los Angeles. Bet Tzedek continues its foreclosure efforts such as evaluating eligibility for loan modifications, and advocating with banks and government programs to obtain loan modifications, postpone sales, rescind wrongful foreclosures, or to obtain other forms of assistance. Eviction from affordable housing units due to expiring regulatory agreements between buildings' owners and government financing is another development in recent years. Bet Tzedek has also reported seeing an increase in landlords terminating Section 8 tenancies, including elderly tenants. In addition, there has been an increase in the number of older adults with income tax disputes. To alleviate the issue, Bet Tzedek provides tax controversy and tax debt-reduction representation to AAA clients.

An increase in intergenerational family households has also contributed to the consistent increase in legal issues involving kinship care and informal caregiving arrangements. Bet Tzedek has represented undocumented immigrant youth in order to have their grandparents or other older adult relative caregiver appointed as their legal guardians in probate court.

The AAA anticipates that as the older adult population continues to increase, the need for legal services will increase as well. The level of funding as remained relatively stable in the past four years.

¹³ For Information related to Legal Services, contact Chisorom Okwuosa at 916 419-7500 or cokwuosa@aging.ca.gov

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?

The AAA Legal Services Statement of Work (SOW) specifies that the LSP is expected to follow all applicable Older Americans Act requirements, standards established by the California Department of Aging, and County of Los Angeles Workforce Development, Aging and Community Services (WDACS) Program Memoranda/Directives, which includes the California Statewide Guidelines.

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

Priorities are identified based on the most common legal issues facing AAA clients. The top four (4) priority legal issues in the County of Los Angeles are as follows:

- Government Benefits: This includes assistance with Social Security, SSI, In-Home Supportive Services, and healthcare.
- Housing/Utilities: This includes tenants' rights, real property (including home equity fraud and foreclosures), and utilities.
- Protective Services/Elder Abuse/Defense against Conservatorship: This includes assistance with conservatorship issues, restraining orders, exploitation, and advance planning/autonomy/advance directives.
- Consumer: Older adults consult with Bet Tzedek on debtors' rights issues and harassment by creditors, consumer scams, and identity theft issues.
- 6. Specific to Legal Services, does the AAA collaborate with the Legal Services Providers(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:

The AAA has identified the target population to be older adults with the greatest economic or social needs. Subsequently, Bet Tzedek targets services to those with the greatest economic or social needs. Specific to legal services, greatest economic needs result from an income level at or below the current official Federal Poverty Guideline amounts. Greatest social needs are caused by non-economic factors, which include: physical and mental disabilities, language barriers, and cultural, social or geographical isolation, including isolation caused by race or ethnicity, sexual orientation or gender identify, or housing status or mobility issues that restricts the ability of an individual to perform normal daily tasks or threatens the capacity of an individual to live independently.

Several mechanisms are used for reaching the target population. This includes scheduling appointments in advance, providing on site services at locations where older adults congregate, conducting follow up sessions at locations convenient to the older adult, and preparing advance planning clinics.

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

The targeted senior population is age 60 or older with the greatest economic or social need, as identified above. AAA legal services are provided through Bet Tzedek's offices on Wilshire Boulevard and various community and senior centers located throughout the County of Los Angeles. In addition to regular appointments, advance planning clinics and other services are provided on an as needed basis in some of the centers. Extensive outreach efforts to reach the target population are conducted, which is further described in #10 below.

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

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

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

Bet Tzedek has a Call Center which can be reached at (323) 939-0506. Callers are pre-screened for eligibility and type of legal need and subsequently either provided with an appointment or, where appropriate, given referrals to other community agencies.

In addition, Los Angeles County WDACS operate an Information and Referral hotline to conduct referrals and follow-up with callers who wish to be connected with supportive services, including legal assistance.

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

Several outreach strategies are used. In addition to one-on-one legal consultations, Bet Tzedek hosts several workshops, trainings, and participates in clinics, senior fairs, information sessions, and communication events sponsored by a variety of social service agencies and departments. Advance Planning Clinics are conducted at various senior centers and outreach sites to assist older adults in preparing advance health care directives and statutory wills. In addition to assisting AAA clients with SSI overpayment cases, Bet Tzedek also operates Self-Help Conservatorship Clinics in several courthouses throughout the County of Los Angeles for older adults and their caregivers. Additional outreach is also provided at the Department of Children and Family Services North facility, where a Bet Tzedek attorney assists grandparents with kinship care legal issues that involve their grandchildren.

Bet Tzedek also produces flyers and brochures on a variety of legal topics, including a distribution of several user-friendly guidebooks that are invaluable for older adults, caregivers, service providers, attorneys, social workers, and health care professionals. These resources are available in English and Spanish.

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

Fiscal Year	Name of Provider	Geographic Region covered
2016-2017	a. Bet Tzedek Legal Services	a. Los Angeles County
	b.	b.
	C.	C.
	a. Bet Tzedek Legal Services	a. Los Angeles County
2017-2018	b.	b.
	c.	C.
	a. Bet Tzedek Legal Services	a. Los Angeles County
2018-2019	b.	b.
	c.	C.

[Typ	e here]	[Type here]		[Type here]
	2019-2020	a. Bet Tzedek Legal Services b.	a. Los Angeles County b.	
		C.	C.	

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

Older adults and caregivers access legal services in a variety of ways. This includes calling Bet Tzedek's Call Center, accessing Bet Tzedek's website, scheduling an appointment at a multipurpose senior center, or through one of the sites where Bet Tzedek provides outreach. Other access points include the medical-legal clinic that Bet Tzedek operates at St. Francis Medical Center, other clinics conducted by Bet Tzedek staff in the community (e.g., Self-Help Conservatorship Clinics at several courthouses, the Employment Rights Project Clinic, Advance Planning Clinics), DCFS North, and through Bet Tzedek's large referral network throughout the community (e.g., ombudsmen, social workers, case managers, non-profits, social service agencies, government agencies, and local law enforcement officials).

In addition, older adults and caregivers can access legal service through WDACS Information and Referral hot line, 211, and through our community partners and providers who contract with the AAA to provide a wealth of services.

13. Identify the major types of legal issues that are handled by the TIII-B legal provider(s) in your PSA. Discuss (please include new trends of legal problems in your area):

The major types of legal issues handled by Bet Tzedek include government benefits (e.g., Social Security, SSI, Medi-Cal, IHSS, CAPI, KinGAP), California Statutory Wills, advance health care directives, consumer debt, debtors' rights, financial elder abuse, housing issues, real estate fraud against seniors, foreclosure prevention, family caregiver rights, conservatorships, guardianships, elder abuse restraining orders, legal issues regarding care for adults with intellectual/developmental disabilities and their aging family caregivers, employment rights, income tax disputes, and small claims issues.

Additionally, through its Holocaust Survivor Services Project, Bet Tzedek see hundreds of local seniors who are Holocaust survivors. Bet Tzedek remains one of a handful of agencies in the world that offers free legal advice and assistance for survivors who are applying for reparations, pensions, and other benefits from Germany and other European countries. Bet Tzedek also integrates its Caregiver/Elder Law services into the Holocaust Survivor Services Project, providing the same wraparound services for Holocaust survivors that other seniors receive from Bet Tzedek.

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

The major legal issues handled by Bet Tzedek for Los Angeles County has not changed. However, please see #3 above for more detail.

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

The barriers to accessing legal assistance in the County of Los Angeles are the challenges associated with serving the homebound and those living alone with no support; the hurdles faced in serving the abused; overcoming cultural differences and fears of the older adult immigrant population; the difficulty of grandparents caring for grandchildren in accessing useful information;

reaching and communicating to long term care facility residents; language barriers; and lack of access to transportation.

Overcoming these barriers is a challenge, but efforts are continuously made. Bet Tzedek makes home visits to older adults who cannot travel to service sites. Furthermore, Bet Tzedek's Caregiver and Real Estate Fraud units address many elder abuse issues common to seniors, and its Employment Rights Project assists immigrants and others, including seniors, with employment issues in the work place. In addition to having a full time staff attorney dedicated to providing assistance on kinship care issues, Bet Tzedek publishes easily accessible companion guides on its website, in English and Spanish, on a variety of subjects relevant to seniors. Staff members speak a number of languages, and Bet Tzedek draws upon its large corps of volunteers to provide additional assistance in interpreting when clients speak languages not known to staff members.

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

Bet Tzedek coordinates services and works in close collaboration with a wide variety of social service providers, legal services support centers, non-profits, senior multipurpose centers, medical providers, government agencies, and law enforcement agencies. Bet Tzedek is an active participant in the Los Angeles County Elder Abuse Forensic Center, regularly attending meetings and accepting referrals form the task force. Other partners include several dozen community agencies as well as secondary partners such as the Los Angeles Police Department, Los Angeles Sheriff's Department, Los Angeles Department of Consumer Affairs, Legal Aid Foundation of Los Angeles, Public Counsel, Adult Protective Services of Los Angeles County, the Los Angeles City Attorney's Office, the District Attorney's Office of Los Angeles County, and the Los Angeles County Superior Court. Bet Tzedek also has a massive pro bono program in partnership with major law firms which significantly leverages staff resources to serve more seniors in need. Pro bono assistance to Bet Tzedek, including private attorneys and volunteer paralegals, law students, and other community members, typically averages over 50,000 hours per year.